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Review Article

Organ transplantation in Central Asia countries: A review and challenges in the development of organ donation



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ABSTRACT

This article aims to examine the challenges in the development of deceased organ donation and assess the current state of transplantation practices in Central Asian countries.

A comprehensive literature review was carried out, expert opinions were gathered, and the websites of the Ministries of Health in Central Asian countries were analyzed.

The current state of deceased organ donation and transplantation activities, in general, showed a heterogeneous appearance in the Central Asian countries. Our findings showed that organ transplantation, especially deceased organ donation, is still in the early stages of development. Several key factors contributing to the weak or, in some countries, complete absence of deceased organ donation were identified. The ambiguous role of religion, especially the concept of Tengrism, on the successful development of deceased donation was revealed. Additionally, significant improvements are needed in the legislative framework, public awareness, societal attitudes towards donation, infrastructure, and the provision of necessary education and equipment to support the development of transplantation in these countries.

The development of deceased organ donation in Central Asian countries is heavily influenced by the country's economic development, government support, and the understanding and awareness of both the public and healthcare professionals regarding deceased organ donation and its benefits for individuals in need of transplants.

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Central Asia is a region in Asia comprising the former Soviet

Union republics of Kazakhstan, Uzbekistan, Tajikistan, Kyrgyzstan, and Turkmenistan. The region covers an area of 1,545,741 square miles (4,003,451 square kilometers) and has a population of over 80.8 million people (see [Table 1](#)).¹

The initiation of transplantation activities in different Central Asian countries is viewed in various ways. In the 1970s, the USSR saw a growing need for organ transplants, especially kidneys. During that time, 95 % of kidney transplants came from deceased donors, not from living donors. The first kidney transplant took place in Uzbekistan followed by Kazakhstan, Tajikistan,

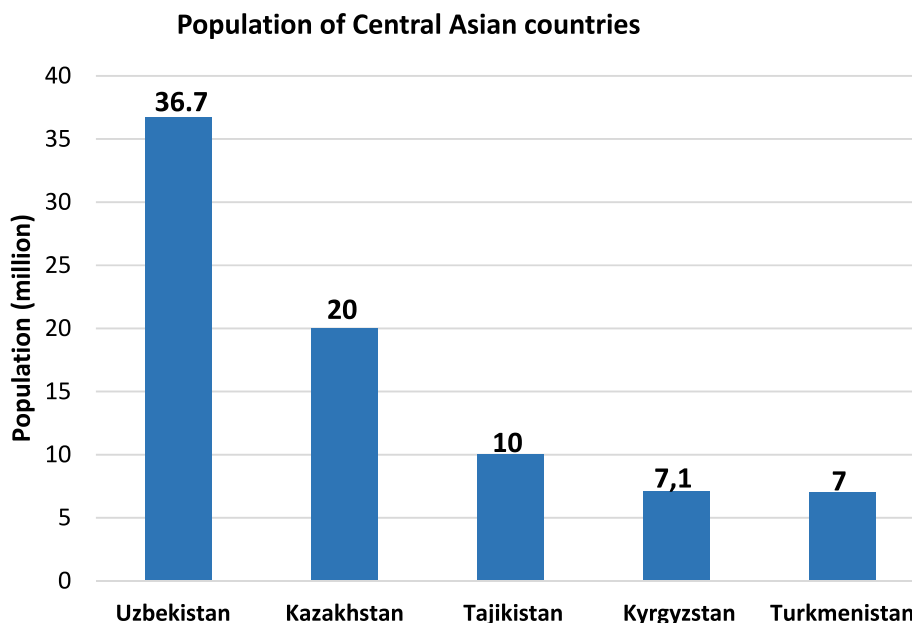
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Table 1
Population of Central Asian countries (as of 2024).



Kyrgyzstan, and finally Turkmenistan. Under Soviet rule, the body of a deceased individual was considered state property, and permission from relatives to remove organs for transplantation or pathological examination was not required.²

Currently, all Central Asian countries perform organ transplants primarily from living related donors. In addition, all of these countries legally transplant organs from deceased donors with confirmed brain death. However, the population's willingness to donate organs after death remains low, and relatives of the deceased often strongly oppose organ donation from the deceased. There have been no cases of organ procurement from deceased people for transplantation in Kyrgyzstan, Turkmenistan, and Tajikistan. In Uzbekistan, kidney transplants from deceased donors were performed for several years, but after the collapse of the USSR and the country's independence, such operations ceased completely. In Kazakhstan, organ transplants from deceased donors currently account for about 9 %.³

In Uzbekistan kidney transplantation from deceased donors was performed for several years, but after the collapse of the USSR and the country's independence, such operations ceased completely.

According to experts, one of the reasons for the refusals is the religious beliefs of citizens.³

The main religion in the Central Asian countries is officially considered to be Sunni Islam, with 87 % of the population adhering to it (Kazakhstan - 76 %, Kyrgyzstan - 83 %, Uzbekistan - 86 %, Turkmenistan - 92 %, Tajikistan - about 96 %).⁴

Numerous studies have been conducted on organ transplantation from deceased donors in Islamic countries. These are nations where more than 50 % of the population follows Islam. Muslim countries represent the second-largest religious group globally, with an estimated 1.6 billion adherents—over 22 % of the world's population. The Quran emphasizes the value of saving a life, stating that saving the life of one person is as significant as saving the life of all humankind. Islamic countries such as Iran,

Turkey, and Saudi Arabia are pioneers in the development of transplantation, and organ donation, and are considered leaders in this field among Islamic countries. For example, in Iran, where 98 % of the population practices Islam, approximately 90 % of citizens are willing to donate their organs after death. However, religion still plays a significant role in shaping people's views on brain death, deceased organ donation, and transplantation as a whole.^{5,6}

According to the literature, organ transplantation in many Islamic countries remains in the early stages of development, with several fundamental issues yet to be addressed.⁷

Our study aimed to assess the current state of deceased organ donation and transplantation in Central Asian countries, with a particular focus on the role of religion.

We conducted an extensive search of both medical and non-medical online resources using keywords such as "Islam and organ donation", "brain death", "Tengrism", "deceased donation", and "organ transplantation". We analyzed written and oral opinions from experts, adherents of Tengrism and Islam, as well as healthcare professionals in Central Asia related to transplantation. Additionally, we reviewed information on transplantation activities available on the websites of the Ministries of Health in the Central Asian countries.

The results of the data collected highlighted the urgent need for significant improvements and changes in legislation, a proper understanding of civil society, comprehensive support from government agencies, and enhanced education for healthcare professionals in the field of organ donation and transplantation. In all Central Asian countries, there is a critical shortage of donor organs, resulting in a high mortality rate among patients on the waiting list. The proportion of deceased donations remains extremely low or is absent.

According to a survey of the population, religious belief is one of the main reasons for refusing deceased organ donations. Although none of the world religions are against organ donation after a person's death.^{8,9}

1. What hinders the development of deceased donation, Islam or Tengrism?

Muslims may have concerns or hesitations due to misconceptions about organ donation in the context of Islam. To support individuals in making informed decisions that align with their religious beliefs and values, it is crucial to address and clarify these misconceptions. A common misconception is that organ donation is strictly forbidden in Islam. However, it is important to understand that Islam promotes kindness, altruism, and the preservation of life. Organ donation aligns with Islamic principles as it emphasizes generosity and the protection of human life, and is therefore permitted in Islam. Some individuals may also be concerned that organ donation interferes with the natural process of death. However, it is crucial to emphasize that organ donation takes place only after brain death has been confirmed and all medical efforts have been exhausted. This ensures that the procedure respects the dignity of life while providing hope to people in need of organ transplantation.¹⁰

The Third International Conference of Islamic Jurists, held in Amman in October 1986, adopted Resolution No. 5, which considered brain death to be the same as cardiac or biological death.¹¹

The primary factors discouraging organ donation were concerns about organs being taken before brain death was conclusively verified (52 %), a reluctance to alter the body's integrity (51 %), and the belief that organs should remain with the body for burial (50 %).¹²

The 2000 "Organ Transplantation and Brain Death Law" in Iran officially permitted organ donation following the confirmation of brain death.¹³

In March 1987, the Council of Arab Ministers of Health met in Khartoum, Sudan. They created the Unified Arab Draft Law on Human Organ Transplantation. This law allows doctors to do organ transplants from both living and deceased donors to save lives, as long as they follow the rules. Also, back in 1982, a fatwa from Saudi Arabia said that organ transplants from deceased donors are allowed in Islam. This helped kidney transplants from deceased donors become more common in the country.¹⁴

Islam is the predominant religion in Central Asia; however, the customs and traditions of Tengrism, a pre-Islamic belief system, continue to influence Muslim communities in the region. Tengrism, an ancient spiritual practice and worldview, has traditionally been observed by the Turkic peoples of Central Asia.¹⁵ The term "Tengrism" is derived from the word "Tengri," which means "Sky" in Turkic languages and refers to the supreme deity. The term was first introduced by Kazakh scholar Chokan Valikhanov and later adopted by the French orientalist Jean-Paul Roux.^{16,17} Although Tengrism has faded as a distinct religion, it left a lasting legacy in the religious traditions of many Eurasian peoples, particularly in Central Asia. It is widely believed that Islam significantly diminished the influence of Tengrism among the Turkic peoples of the region. This is especially true for the Uzbeks and Tajiks. However, among the Kazakhs and, particularly, the Kyrgyz, elements of Tengrism - its beliefs, traditions, and customs - have persisted for centuries and continue to be maintained even after the official embrace of Islam.^{18–21} For example, in Kyrgyzstan, Tengrism was proposed as a pan-Turkic national ideology following the presidential elections of 2005.²²

It is necessary to note the complete submission of man to the will of Tengri, even in matters of life and death. A core tenet of Tengrism is the profound respect for the deceased, reflecting a deep reverence for the afterlife and ancestral spirits. In Tengrism, death is viewed differently compared to Abrahamic religions; it is seen as a form of liberation from the physical body, leading to a

continuation of life in another realm through reincarnation. According to the principle of reincarnation, a person does not truly die but is instead reborn. Therefore, there is no death, and life is eternal.²³

In Tengrism, death is often denied or seen as a mere transition, drawing a parallel to Japanese Shintoism. A key belief is that how well someone is buried matters a lot for what happens after they die. Family and friends need to do the right rituals and sacrifices. This is thought to help the person have a good journey to the afterlife. Following all the customs is seen as very important. If done right, it can bring peace and freedom to the spirit, and ongoing good vibes for the family. If they mess it up, the deceased could become a negative force, causing trouble for everyone. Preservation of the traditions and customs of Tengrism, namely a respectful attitude towards the deceased, according to experts, is the main reason for the refusal of deceased donation. When talking with relatives of the deceased about organ donation, in more than 95 % of cases the refusal to donate is motivated precisely to observe the rites of honoring the deceased, so that he is buried intact, without any bodily harm. According to relatives, after death, a person will be reborn and will supposedly live in another world.^{24–26}

2. Organ transplantation in Kazakhstan

The first organ transplant in Kazakhstan took place on April 17, 1979, at a clinic in Almaty, where a kidney was transplanted from a deceased donor. Notably, all organ transplants in the country until 2000 were conducted using organs from deceased donors. Since then, the center has expanded its practices to include kidney transplants from living donors. Before the order issued by the Minister of Health of the Republic of Kazakhstan on August 11, 2010, which defined the criteria for biological death and irreversible brain death, all kidney transplants were performed using organs from deceased donors confirmed to have undergone biological death, specifically due to cardiac death. The legal recognition of brain death marked a significant turning point in the country's transplant practices, sparking a new era for deceased donation. This development led to an increase in the number of transplants, improved transplant survival rates, and enhanced life expectancy for patients. The first organ retrieval (kidneys and heart) from a donor with confirmed brain death took place in 2012 in Astana.

Since 2010, organ transplants have been carried out in multiple cities across Kazakhstan. By 2015, the country had established nine clinics where a wide range of organ transplants, including heart, lung, liver, kidney, pancreas, and cornea, were performed using both living and deceased donors. Kazakhstan has seven transplant centers, where up to 90 % of liver and kidney transplantations are done with organs from living-related donors.

Founded in 2012, the Republican Coordination Center for Organ Transplantation has focused on promoting organ donation from deceased individuals. To achieve this objective, coordinators have been assigned throughout the country. Currently, there are 4113 patients registered on the National Waiting List, including 3748 waiting for a donor kidney (76 of whom are children), 196 in need of a liver (12 children), 143 requiring a heart (5 children), 20 needing lungs, and 6 needing a heart-lung transplant (2 children). All surgeries, medications, and patient rehabilitation are fully funded by the state budget.²⁷

Kazakhstani law prohibits the purchase and sale of organs, as well as the removal of organs from deceased individuals under the age of 18. Consequently, children in need of heart and lung transplants from deceased donors are required to seek treatment at foreign clinics, with the state covering the full cost of these

procedures. In Kazakhstan, the transplantation law operates on the principle of presumed consent, allowing each citizen to either consent to or decline organ donation after death during their lifetime. This decision is securely recorded on the Ministry of Health's web portal and kept confidential. If no registration is made, consent must be obtained from a relative or legal representative of the deceased. According to statistics, among 35,000 citizens, 86 % have officially opted out of organ donation, while only 16 % have agreed to donate their organs after death.

In a survey conducted by journalists, 9875 citizens from three major cities in Kazakhstan were asked about organ donation. The results showed that 22 % of respondents were willing to donate their organs, 46 % were strongly opposed to donation, 22 % were not opposed but believed their organs would be unsuitable due to bad habits, and 10 % were unsure and could not answer "yes" or "no".²⁸

In 2022, only 4 out of 44 potential donors with confirmed brain death (9 %) became actual organ donors. In 2023, 7 out of 56 potential donors (12.5 %) had their organs removed, and in 2024, 10 out of 82 potential donors (12.2 %) became actual donors. Many people harbor fears regarding deceased organ donation. According to the Republican Coordination Center for Transplantation, the main reasons for refusing deceased organ donation are:

Religious beliefs (59 %)

Cannot decide for a deceased relative (18 %)

A lack of awareness about the concept of brain death is a significant barrier, as 12 % of relatives, observing artificial support for heartbeat and breathing despite confirmed brain death, continue to hope for the deceased's recovery. Additional concerns include the potential commercialization of organs (7 %) and a lack of trust in medical personnel (4 %). Despite having adequate transplant centers, skilled specialists, advanced clinical equipment, and state funding, the number of organ transplants from deceased donors in the country remains critically low.

A lack of understanding about brain death contributes significantly to the issue, with 12 % of relatives believing that artificial support for heartbeat and breathing might lead to the recovery of the deceased, even after brain death has been confirmed. Additional factors include concerns about the potential commercialization of organs (7 %) and a general distrust of medical professionals (4 %). Despite the availability of well-equipped transplant centers, skilled specialists, and government funding, the number of organ transplants from deceased donors in the country remains alarmingly low.^{29,30}

3. Organ transplantation in the Republic of Tajikistan

The practice of organ and tissue transplantation in Tajikistan began 17 years ago. In 2007, a law was enacted permitting organ transplants exclusively from living donors who are biologically related to the recipient. This legislation explicitly prohibited transplants from deceased donors and commercial organ transplantation.

The first recovered kidney transplant in the country took place in 2009 at the Republican Urological Center in Dushanbe, performed in collaboration with Russian specialists. At that time, the cost of the procedure, covering both the donor and recipient, was approximately \$10,000. Organ and tissue transplantation in Tajikistan began in 2009. Today, a similar procedure, including rehabilitation, costs patients one and a half to two times that amount.

In 2011, the National Scientific Center for Transplantation of Human Organs and Tissues was established in the country's capital. Currently, Tajikistan has three centers that conduct organ transplantations. Two of these centers, opened several years ago in

the Dangara district and Sughd region, specialize solely in kidney transplantation. The third transplant center in Dushanbe does kidney and liver transplants. It was the first place in Tajikistan where doctors did a kidney and pancreas transplant at the same time from a living donor. For the last 12 years, doctors in Tajikistan have learned a lot about transplantation by training at the biggest organ transplant center in Shiraz, Iran. Tajik doctors have also done about 10 liver transplants from living donors in Uzbekistan as part of a special class. They keep working with Uzbek doctors to share their knowledge and skills. According to the Ministry of Health, 185 kidney transplants and 67 liver transplants from living donors were performed in 2023. Since the beginning of 2024, the country's transplantologists have already performed 99 liver and about 180 kidney transplants. According to experts, in most cases these operations were successful. Currently, all organ and tissue transplant operations and the purchase of immunosuppressive drugs in Tajikistan are carried out on a paid basis at the expense of patients, in some cases up to 20–30 % of the total amount is paid by the state.³¹

In 2019, the legislation in this area was revised. The legislation was updated to integrate all regulations related to human organ and tissue transplantation into the Republic's Health Code. Previously, the law restricted donations to relatives of recipients, but the revised provisions now allow transplants from deceased donors. According to the updated regulations, transplantable organs and tissues include the heart, kidneys, liver, lungs, bone marrow, and others. The Code specifies that organs and tissues may only be retrieved from a deceased individual once death has been confirmed by a council of medical professionals. According to the Republican Center for Transplantation, this council also includes representatives from the Ministry of Health and the State Committee for National Security.

Organ procurement is conducted only with the written consent of the deceased's close relatives or legal representatives, as well as the approval of the head physician, by legal requirements. However, according to medical professionals, no relative has ever granted permission for organ procurement from a deceased donor. Doctors attribute this refusal largely to societal attitudes, particularly religious perspectives, where organ donation is often viewed as unacceptable. In Tajik society, there is also significant resistance to practices such as autopsies, further complicating the acceptance of organ donation.

The transplantation service in Tajikistan is progressing, but the public's mindset and concerns about the potential creation of a black market for donor organs hinder the resolution of the issue of deceased donation. As a result, this issue remains unresolved in the country.³²

According to the Ministry of Health, the population of Tajikistan previously had little trust in local doctors, often opting to travel to India, Turkey, and European countries for surgery, despite paying several times more for organ transplant procedures. Furthermore, despite the steady progress of transplantology in Tajikistan, local specialists are still unable to serve even half of the country's citizens in need of surgery. Gaining patients' trust and increasing the number of transplant surgeons in Tajikistan may take years.³²

4. Organ transplantation in the Republic of Uzbekistan

On September 14, 1972, Uzbekistan made history by performing the first kidney transplant in Central Asia at the Kidney Transplantation Center, which was established that year at the Clinical Hospital of the Ministry of Health of the Uzbek Soviet Socialist Republic. The center was equipped with a hemodialysis laboratory and treated patients with terminal-stage chronic renal failure. In its first year, the center carried out two kidney

transplants and 300 hemodialysis sessions. By 1981, the center had done 227 kidney transplants. That's about 20–25 surgeries each year. They also held 25,500 hemodialysis sessions. The survival rate for patients after six months was around 65 %. But things changed in 1994. The new Criminal Code in Uzbekistan made it tough for organ transplants. The law needed either consent from the deceased while they were alive or permission from their families. This stopped all transplant work in the country. Then in 2002, the Ministry of Health made a new rule. They allowed organ transplants from living donors who were related to the patient. This kicked off new living donation programs.

During the period of operation of the Kidney Transplant Center, a total of 358 kidney transplants were performed. In 311 cases, transplantations were performed from a deceased donor and 47 patients underwent a kidney transplant from a living-related donor. After four years, the 2002 order permitting living donations was rescinded, leading to a cessation of such surgical interventions once again. Without regulatory support, patients were compelled to seek transplantation services abroad. The development of organ and tissue transplantation in Uzbekistan faced numerous challenges. The logistical and political instability in post-Soviet countries. Closely related transplantation remained the only available option for patients in Uzbekistan. Since 2010, the Republican Specialized Scientific and Practical Medical Center of Surgery named after Academician V. Valikhanov has been doing kidney transplants again. In February 2018, they made a big step by doing the first liver transplant in Uzbekistan from a living donor, thanks to a new law. By the end of 2021, the Center had completed 540 kidney transplants. Doctors from Uzbekistan often go to other top transplant centers around the world to learn new techniques. In 2015, they even did their first transplant using laparoscopic donor organ collection.³³ The logistical and political instability in post-Soviet countries during the late 1980s and early 1990s resulted in the complete collapse of the foundational infrastructure and the loss of accumulated expertise in transplantation. Efforts to revive the transplant service were hindered by the absence of well-defined legislative frameworks and a complex moral and ethical landscape, which excluded organ transplantation from brain-dead donors.

Currently, Uzbekistan has five clinics specializing in organ transplantation, three of which are located in the capital, Tashkent. These clinics perform organ transplants exclusively from living donors, who are typically close relatives of the recipients, and provide their consent voluntarily.

The new 2022 law in Uzbekistan about human organ and tissue donation has some clear rules. It allows doctors to take organs from someone who has passed away only if they gave written consent while they were alive. The law also sets up a system to keep track of donors, recipients, and the organs involved. This aims to make sure transplants are done properly and that patients get the care they need on time. Looking ahead, organ donation in Uzbekistan faces some big challenges. These include dealing with moral and ethical questions, improving laws, training medical staff better, and setting up support centers for those who have had transplants. There's still a lot to work on to make the process smoother.^{34,35}

5. Organ transplantation in the Republic of Kyrgyzstan

Currently, two clinics in Kyrgyzstan perform organ transplants, including kidney and liver transplants. The first kidney transplant was conducted in 2012 with the support of foreign specialists. Experts estimate that approximately 2700 patients are registered in the national database awaiting a kidney transplant, with an average age of 30–45 years. The Ministry of Health reports that

over 1000 transplant recipients currently live in the country. Among them, 674 have received kidney transplants, 354 have undergone liver transplants, and one individual has successfully received both a kidney and a liver transplant. However, 95 % of these procedures were carried out abroad, costing citizens significantly more than if the surgeries had been performed within Kyrgyzstan. Until 2024, patients were responsible for covering the expenses of such medical services themselves. Starting in 2024, following a directive from the President, funds have been allocated to cover the cost of 50 kidney transplants through the state budget (the cost of a kidney transplant from a living donor in Kyrgyzstan is approximately 7500 US dollars). From 2012 to 2024, Kyrgyzstan did about 65 kidney transplants. This included two for kids. They also did two liver transplants. All the organs used came from living family members.

In 2024, the country inaugurated its first laboratory for HLA typing and crossmatch testing. Prior to this, Kyrgyz patients had their tissue compatibility tests conducted in neighboring republics, most commonly in Kazakhstan.

Since January 30, 2024, Kyrgyzstan has implemented a new law, "On the Transplantation of Human Organs and Tissues," which includes provisions allowing organ transplantation from both living and deceased donors with confirmed brain death. However, the country faces the same challenges with deceased donation as other Central Asian nations.^{36,37}

6. Organ transplantation in Turkmenistan

According to internet sources, kidney transplantation began in Turkmenistan in 2015, with all procedures conducted by Turkish doctors at a private clinic in Ashgabat. However, the clinic closed in 2016, leaving patients in need of transplants to travel with their related donors to clinics in India, Turkey, and Iran.

The Ministry of Health in Turkmenistan announced that in 2021, doctors successfully did the first kidney transplant from a living donor at the S.A. Niyazov Medical Center. Now, this clinic in the capital conducts around 10 kidney transplants from living donors each year.

However, due to a shortage of qualified specialists, the lack of a tissue compatibility laboratory, and an insufficient number of dialysis machines, most patients opt to seek treatment at foreign clinics.

Turkmenistan's 2013 legislation on organ and tissue transplantation allows the removal of organs from deceased donors for transplant purposes, but only with the written consent of a close family member or legal representative.

If a person explicitly declines organ donation during their lifetime, the procedure is strictly prohibited. However, despite the existence of this law, no organ transplants from deceased donors have been conducted in the country.³⁸

Despite the implementation of this legislation, the practice of organ transplantation from deceased donors remains significantly limited and has not been performed in the country. Consequently, the development of transplantation activities is significantly lagging behind that of other Central Asian nations.

7. Turkic countries plan to create a unified information system

On October 8, 2024, in Shusha, Azerbaijan, the Ministers of Health from Azerbaijan, Kazakhstan, Uzbekistan, Kyrgyzstan, and Turkey signed a protocol of intent to establish a unified information system, TÜRKTRANSPLANT. This agreement was made during the 4th Meeting of the Ministers of Health from the participating countries.

The protocol aims to establish a unified information system to oversee and streamline organ donation and transplantation activities across the member states of the Organization of Turkic-Speaking States (OTG). The TÜRKTRANSPLANT system seeks to enable seamless information exchange regarding donors and recipients, optimize the organization of transplant procedures, and foster collaboration among member countries to tackle issues related to organ donation and transplantation.

The protocol outlines measures to standardize diagnostic techniques, develop transplant centers and surgical procedures, and implement collaborative training initiatives to advance the skills and expertise of medical personnel.

The main goal is to create consistent rules for organ donation among UTC states. We want to set up a shared supply of donor organs that all participating countries can access. The TÜRKTRANSPLANT system will help us work together better in transplant surgery. This should lead to more donor organs available for patients who need them.^{39,40}

The advancement of deceased organ donation in Central Asian countries is largely influenced by the country's economic development, government support, societal attitudes, and the public's understanding of donation and transplantation. The extent to which healthcare workers and the public recognize transplantation as a vital and ongoing form of charity also plays a crucial role in its progress. The justification for deceased organ donation is broadly accepted across the Muslim world, both in the East and the West.⁴¹ However, the general public in Central Asia remains hesitant to engage in the deceased donation program. To improve this situation, it is essential to shift from merely legalizing organ donation to fostering a sense of moral obligation as part of social responsibility.

Since Islam, like other major religions, does not prohibit organ donation, spiritual leaders in Central Asia hold diverse opinions on the matter. Some fully support it, while others view it as incompatible with both religious and cultural traditions. Followers of Tengriism, on the other hand, generally lack awareness about organ donation and often regard the practice as foreign to their customs and beliefs. They have long held, and continue to believe, in a deep connection between the living and the spirits of their ancestors. As a result, practices like dissection for medical education are considered taboo, let alone the removal of organs for transplantation. It is essential to understand that religion should not be a barrier to organ donation; instead, it can serve as a valuable ally in promoting this life-saving practice. Religious leaders are often sought for guidance on matters like organ donation, making it crucial to build partnerships with local imams. Providing them with the necessary education and resources will help inform them about transplantation and organ donation, enabling them to offer informed support to their communities. Imams, in turn, can play a key role in fostering greater understanding and acceptance of organ donation and transplantation within Muslim communities. It is crucial to provide them with comprehensive information about the organ allocation process and the determination of death, including brain death, to help dispel misconceptions and build trust in the healthcare system. Providing accurate information from trusted sources is essential. Healthcare providers should collaborate with local religious authorities and refer patients seeking guidance to knowledgeable imams or religious leaders for advice. In conclusion, the Turkic people have a deep-rooted tradition of honoring and respecting the deceased, reflected in the saying, "The dead are not satisfied, the living are not rich". Our ancestors did not simply bury the corpse, they said goodbye and carried it out with their belongings. They built grand mausoleums for their leaders, where ceremonies were held. While the Islamic faith has undoubtedly influenced the

funeral practices of the Turkic people, these customs have adapted to Islam, preserving much of their original cultural significance.

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