# Why can't we purchase kidneys? An ethical review of presumed consent organ donation compared against a regulated organ marketplace

Dr Jennifer Lewis, ST5 ICM Trainee, GSTT
Philosophy, Politics and Economics in Health MA Dissertation project
University College London

#### Introduction

The demand for organs, notably kidneys is growing internationally and far outstrips the supply available through either deceased or living donors. NHS Blood and Transplant estimate 400 people died waiting for organs in 2018-2019 (2). The presumed consent model recently adopted by the English government is nuanced and unlikely to provide the number of organs truly required. Although uncomfortable at first glance is a regulated transparent marketplace for the sale of organs an economically viable way to save more lives?

#### **Presumed Consent**

20<sup>th</sup> May 2020 - Organ donation law moves from deemed consent to presumed consent.

A policy already in place in Wales and Spain, the world leaders in solid organ transplant rates, Estimated increase of 700 extra organ transplants per year (2)

An opt in register still remains, and a new opt out register has been created following this change, any individuals who are not on either list are referred to as 'deemed consent'.

#### Efficacy

• There is no evidence that presumed consent results in more organs for donation. Spain are very clear the introduction of specialist nurses and national discourse on the topic of organ donation since the 1990s are the main drivers for increased donation rates (4).

#### **Autonomy**

• Can be violated as families have the right to overturn a decision or say no to deemed consent – but is NOT taking organs from someone who wished to donate more morally acceptable than taking them from someone who objects??

#### **Altruism**

- If altruism is a truly selfless act then the contemplation of any other factor family expectation, hope for reciprocity or sense of personal satisfaction gained negate the selflessness required for altruism is it possible to say these other factors don't play a part?
- The philanthropy of individuals is to be celebrated but should it be relied upon for such an important medical issue?

### **Organ Marketplace**

## Efficacy

- Iran has eliminated the waiting list for kidney transplants approx. £600 per kidney (5)
- Does extrinsic benefit of payment crowd the intrinsic nature of 'doing the right thing' is there any reason why financial reward cannot sit alongside other drivers for individuals decisions to donate?

## Autonomy

- We allow capacious individuals to make risky or unwise decisions about their bodies.
- Commericialisation is not synonymous with exploitation and can be seen in reproductive medicine but appropriate market value must be paid.

### **Economic benefits**

- 2010 data suggests cost benefit of kidney transplantation versus dialysis in excess of £240,000 per patient (6)
- This does not include potential cost savings from preventing sequelae of disease (6)
- Increasing the number of transplants performed results in cost saving for the NHS (6)

# Conclusions

There is no easy way to encourage more organ donors, it is an emotive issues encompassing a broad array of social, religious, ethical, medical and legal milieu.

The sale of organ is a challenging concept but is is already happening across the world. There is evidence of suggest a transparent regulated marketplace for organs could increase the number of organs available and ultimate reduce waiting lists. A payment of £20,000 for 10 years following donation would provide a net financial gain to the NHS and give opportunity for significant social mobility to sellers.

This is purely hypothetical suggestion and not for right for society at the moment, ultimately the best approach is to encourage discussion across society on the topic of organ donation and transplantation to ensure wishes are known.

# References

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