

Joanna MacKay

Professor Jones

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Organ Sales Will Save Lives

There are thousands of people dying to buy a kidney and thousands of people dying to sell a kidney. It seems a match made in heaven. So why are we standing in the way? Governments should not ban the sale of human organs; they should regulate it. Lives should not be wasted; they should be saved.

About 350,000 Americans suffer from end-stage renal disease, a state of kidney disorder so advanced that the organ stops functioning altogether. There are no miracle drugs that can revive a failed kidney, leaving dialysis and kidney transplantation as the only possible treatments (McDonnell and Mallon, pars. 2 and 3).

Dialysis is harsh, expensive, and, worst of all, only temporary. Acting as an artificial kidney, dialysis mechanically filters the blood of a patient. It works, but not well. With treatment sessions lasting three hours, several times a week, those dependent on dialysis are, in a sense, shackled to a machine for the rest of their lives. Adding excessive stress to the body, dialysis causes patients to feel increasingly faint and tired, usually keeping them from work and other normal activities.

Kidney transplantation, on the other hand, is the closest thing to a cure that anyone could hope for. Today the procedure is both safe and reliable, causing few complications. With better

technology for confirming tissue matches and new anti-rejection drugs, the surgery is relatively simple.

But those hoping for a new kidney have high hopes indeed. In the year 2000 alone, 2,583 Americans died while waiting for a kidney transplant; worldwide the number of deaths is around 50,000 (Finkel 27). With the sale of organs outlawed in almost every country, the number of living donors willing to part with a kidney for free is small. When no family member is a suitable candidate for donation, the patient is placed on a deceased donors list, relying on the organs from people dying of old age or accidents. The list is long. With over 60,000 people in line in the United States alone, the average wait for a cadaverous kidney is ten long years.

Daunted by the low odds, some have turned to an alternative solution: purchasing kidneys on the black market. For about \$150,000, they can buy a fresh kidney from a healthy, living donor. There are no lines, no waits. Arranged through a broker, the entire procedure is carefully planned out. The buyer, seller, surgeons, and nurses are flown to a predetermined hospital in a foreign country. The operations are performed, and then all are flown back to their respective homes. There is no follow-up, no paperwork to sign (Finkel 27).

The illegal kidney trade is attractive not only because of the promptness but also because of the chance at a living donor. An organ from a cadaver will most likely be old or damaged, estimated to function for about ten years at most. A kidney from a living donor can last over twice as long. Once a person's transplanted cadaverous kidney stops functioning, he or she must get back on

the donors list, this time probably at the end of the line. A transplanted living kidney, however, could last a person a lifetime.

While there may seem to be a shortage of kidneys, in reality there is a surplus. In third world countries, there are people willing to do anything for money. In such extreme poverty these people barely have enough to eat, living in shacks and sleeping on dirt floors. Eager to pay off debts, they line up at hospitals, willing to sell a kidney for about \$1,000. The money will go towards food and clothing, or perhaps to pay for a family member's medical operation (Goyal et al. 1590—1). Whatever the case, these people need the money.

There is certainly a risk in donating a kidney, but this risk is not great enough to be outlawed. Millions of people take risks to their health every day for money, or simply for enjoyment. As explained in *The Lancet*,

If the rich are free to engage in dangerous sports for pleasure, or dangerous jobs for high pay, it is difficult to see why the poor who take the lesser risk of kidney selling for greater rewards . . . should be thought so misguided as to need saving from themselves. (Radcliffe-Richards et al. 1951)

Studies have shown that a person can live a healthy life with only one kidney. While these studies might not apply to the poor living under strenuous conditions in unsanitary environments, the risk is still theirs to take. These people have decided that their best hope for money is to sell a kidney. How can we deny them the best opportunity they have?

Some agree with Pope John Paul II that the selling of organs is morally wrong and violates “the dignity of the human person” (qtd. in Finkel 26), but this is a belief professed by healthy and affluent individuals. Are we sure that the peasants of third world countries agree? The morals we hold are not absolute truths. We have the responsibility to protect and help those less fortunate, but we cannot let our own ideals cloud the issues at hand.

In a legal kidney transplant, everybody gains except the donor. The doctors and nurses are paid for the operation, the patient receives a new kidney, but the donor receives nothing. Sure, the donor will have the warm, uplifting feeling associated with helping a fellow human being, but this is not enough reward for most people to part with a piece of themselves. In an ideal world, the average person would be altruistic enough to donate a kidney with nothing expected in return. The real world, however, is run by money. We pay men for donating sperm, and we pay women for donating ova, yet we expect others to give away an entire organ for no compensation. If the sale of organs were allowed, people would have a greater incentive to help save the life of a stranger.

While many argue that legalizing the sale of organs will exploit the poorer people of third world countries, the truth of the matter is that this is already the case. Even with the threat of a \$50,000 fine and five years in prison (Finkel 26), the current ban has not been successful in preventing illegal kidney transplants. The kidneys of the poor are still benefiting only the rich. While the sellers do receive most of the money promised, the sum is too

small to have any real impact on their financial situation. A study in India discovered that in the long run, organ sellers suffer. In the illegal kidney trade, nobody has the interests of the seller at heart. After selling a kidney, their state of living actually worsens. While the \$1,000 pays off one debt, it is not enough to relieve the donor of the extreme poverty that placed him in debt in the first place (Goyal et al. 1591).

These impoverished people do not need stricter and harsher penalties against organ selling to protect them, but quite the opposite. If the sale of organs were made legal, it could be regulated and closely monitored by the government and other responsible organizations. Under a regulated system, education would be incorporated into the application process. Before deciding to donate a kidney, the seller should know the details of the operation and any hazards involved. Only with an understanding of the long-term physical health risks can a person make an informed decision (Radcliffe-Richards et al. 1951).

Regulation would ensure that the seller is fairly compensated. In the illegal kidney trade, surgeons collect most of the buyer's money in return for putting their careers on the line. The brokers arranging the procedure also receive a modest cut, typically around ten percent. If the entire practice were legalized, more of the money could be directed towards the person who needs it most, the seller. By eliminating the middleman and allowing the doctors to settle for lower prices, a regulated system would benefit all those in need of a kidney, both rich and poor. According to Finkel, the money that would otherwise be spent on

dialysis treatment could not only cover the charge of a kidney transplant at no cost to the recipient, but also reward the donor with as much as \$25,000 (32). This money could go a long way for people living in the poverty of third world countries.

Critics fear that controlling the lawful sale of organs would be too difficult, but could it be any more difficult than controlling the unlawful sale of organs? Governments have tried to eradicate the kidney market for decades to no avail. Maybe it is time to try something else. When “desperately wanted goods” are made illegal, history has shown that there is more opportunity for corruption and exploitation than if those goods were allowed (Radcliffe-Richards et al. 1951). (Just look at the effects of the prohibition of alcohol, for example.) Legalization of organ sales would give governments the authority and the opportunity to closely monitor these live kidney operations.

Regulation would also protect the buyers. Because of the need for secrecy, the current illegal method of obtaining a kidney has no contracts and, therefore, no guarantees. Since what they are doing is illegal, the buyers have nobody to turn to if something goes wrong. There is nobody to point the finger at, nobody to sue. While those participating in the kidney market are breaking the law, they have no other choice. Without a new kidney, end-stage renal disease will soon kill them. Desperate to survive, they are forced to take the only offer available. It seems immoral to first deny them the opportunity of a new kidney and then to leave them stranded at the mercy of the black market. Without laws regulating live kidney transplants, these people

are subject to possibly hazardous procedures. Instead of turning our backs, we have the power to ensure that these operations are done safely and efficiently for both the recipient and the donor.

Those suffering from end-stage renal disease would do anything for the chance at a new kidney, take any risk or pay any price. There are other people so poor that the sale of a kidney is worth the profit. Try to tell someone that he has to die from kidney failure because selling a kidney is morally wrong. Then turn around and try to tell another person that he has to remain in poverty for that same reason. In matters of life and death, our stances on moral issues must be reevaluated. If legalized and regulated, the sale of human organs would save lives. Is it moral to sentence thousands to unnecessary deaths?

Works Cited

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