

Report Stirs Debate on Market in Human Organs

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Contributing Writer

WASHINGTON — A recent report from the National Academy of Sciences' Institute of Medicine has helped fuel debate on what can be done to resolve the nation's worsening shortage of donated organs.

The report, written by a panel of respected experts, suggested intensified efforts to boost Americans' flagging altruistic instincts and called for more research into how to improve the existing organ donation system.

Institute of Medicine (IOM) advisers also called for revised resuscitation standards to increase the chances that organs of brain-dead trauma victims could be preserved for transplant.

Furthermore, they encouraged authorities to experiment with a new cardiac standard of death, in the hopes that it could roughly double the number of available grafts culled from patients who donate after being declared brain-dead.

Such a standard could allow up to 22,000 donations per year from patients in permanent vegetative states or comas, said Dr. James F. Childress, a professor of medical ethics at the University of Virginia and chair of the IOM panel.

But for some ethicists, the report was more noteworthy for what it did not recommend. The IOM panel avoided a host of more controversial policies that some ethicists say are needed in light of the thousands of Americans who die each year while languishing on transplant waiting lists.

"This report could be said in many ways [to be] a conservative report," Dr. Childress told members of the President's Council on Bioethics at a recent council meeting.

The IOM panel recommended against

what some members of the President's Council support: Allowing the buying and selling of human organs from live donors, in the hopes that market forces move supply nearer to demand.

Some ethicists acknowledge that allowing an organ market is a radical solution, fraught with the ethical pitfalls inherent in commodifying body parts.

But they see the benefit as outweighing the risk of death for the 92,400 Americans currently on the United Network for Organ Sharing (UNOS) waiting list. Meanwhile, the number of Americans with end-stage renal disease is expected to double to nearly 650,000 by 2015.

A vocal group of free-market advocates sees it differently. Dr. Benjamin Hippen, a nephrologist at Carolinas Medical Center in Charlotte, N.C., argues that a regulat-

ed market in human organs would boost the supply of viable kidneys, while doing away with a dangerous international black market.

Dr. Hippen, an at-large member of the UNOS board, rejects the idea that a legal organ market is a necessary evil.

"Mine is not an argument that the ends justify the means; mine is an argument that the means themselves do not warrant legal prohibition," he told the bioethics council.

Meanwhile, others continue to caution that financial incentives would exploit low-income individuals desperate to sell organs out of economic need.

"We simply can't ignore the fact that the sellers are going to be the poor, predominantly. Most well-off people are not going to sell their organs as a way to buy a third car," said Eric Cohen of the Ethics and Public Policy Center, a conservative think tank in Washington.

The President's Council on Bioethics is not expected to issue its recommendations for organ donation until the fall. ■

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