



“Humanitarian and financial motives intertwine all the time”

...says **Sally Satel, MD**, Resident Scholar, American Enterprise Institute (AEI). Having received a kidney from a friend when diagnosed with end-stage renal disease and author of the book ‘When Altruism Isn’t Enough: The Case for Compensating Kidney Donors’, discusses the global organ donation scenario and what needs to be changed.

 **Parita Dholakia**

Several nations have started forming laws and policies to help donors in many ways. Will this kick out the belief of ‘Organs should not give rise to financial gain’?

Policies that compensate donors will simply expand the various ways in which people can give organs. Those who give a kidney to a stranger may decide to accept enrichment while those who give to a family member will likely follow the conventional ‘altruistic’ mode. I put quotation marks around the word altruistic because many familial donors are actually under extreme emotional pressure to give a kidney to a family member.

Will money in form of ‘Thank you’ and not ‘bribe’ lead to nil ‘altruistic’ donors?

Whether or not fewer people will give altruistically is an empirical matter to be resolved through observing what happens when a legal regime of incentives is implemented. I strongly doubt that donation in the traditional sense will disappear, but, in my view, that is not a proper ground for concern. After all, the entire point of donation is to save lives. Whether or not donors give with expectation of material gain is irrelevant to saving more lives and preventing needless suffering if, and only

if, the organs are offered by informed, protected and willing donors.

If the governments globally are making it legal to push for organ donations, how should the policy/law be framed? What types of incentives shall be offered?

We need to establish safe, legal programmes that protect donors who would be happy to accept enrichment for saving the life of another. Humanitarian and financial motives intertwine all the time. Are we any less grateful to the firefighters who rescue us because they are salaried? Possible incentives include tax rebates, deduction of transplant-related hospital fees, medical insurance, tuition waivers for donors’ family members, or deduction of burial fees for people who donated in death. A contribution to charity could be made in the name of the donor. Some donors, depending upon the country, might welcome start-up money for a small business or safer housing. Lump sum cash payments are potentially problematic and, if pursued, should be distributed in installments over a period of years.

If ‘altruistic’ donation leads to remorse at some stage, is not ‘money for organs’ the best option available?

Remorse comes in all forms: donor remorse and seller remorse. One way to guard against regret is to build in a

several-month waiting period before a compensated donor is permitted to give a kidney. Also essential for the prospective donor is a thorough informed consent procedure wherein realistic expectations of the surgery itself, the recovery period, the psychological aspects of donation and money management (if the reward is offered in the form of cash) are addressed at length. Donors of all kinds need to be properly prepared. Talking with people who have already donated might be part of a pre-donation protocol for the would-be donor.

While several firms, such as the Institute for Justice, in the US, are backing the organ donor revolution, how is the situation globally? Will an approval from universal bodies like the WHO facilitate faster changes?

The World Health Organization (WHO) has been an obstructionist to developing incentive-based models. Instead of operating under stale ideology about organ donation, as it does now, the organisation should become an enlightened leader. It should advocate for implementing well-designed pilot trials to be evaluated by independent researchers. In this way, the WHO would not only be taking a very important step towards ameliorating the organ shortage, it would also help under cut the rapacious black market. **MM**

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