

Transplant Tourism: Ethical Issues

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B.C. Kidney Days. 19th October 2012

Outline

- Definitions
- Why do Ethics Matter?
- Ethical Issues in Transplant Tourism
- Addressing the situation

Ethics

- The systematic exploration of questions about what is morally right & wrong
- Biomedical ethics explore ethical questions and moral issues in health care.

An Ethical Dilemma

- The most ethical course of action is unclear
- Strong moral reasons to support several positions
- Decision must be made based on the most right or least wrong course of action.



Ethical Dilemma



Why do Ethics Matter?

- Society has some identified shared values
- Expectations of some level of fairness
- Need for processes to achieve this
- People need rules to govern how they live together
- Rights may conflict



Health care

- Highly valued
- Issues of Life & Death
- Sharing scarce resources
e.g. kidneys, ICU beds
- Need to manage healthcare resources
according to some agreed upon standards



Kidneys for Transplant

- Successful treatment
- Insufficient supply
- Wait times unacceptable across Canada
- Frustration of waiting



Kidneys for Transplant



Please, sir, I want some more.

Oliver Twist (Charles Dickens)

Why is this Happening?

- *People are desperate for organs*
- 4529 Canadians listed for transplant 2010
- Health care tourism
- Donor pool has expanded
 - Strangers as donors
 - Exchange programmes
 - Relationship of donors/recipients not always close

Transplant Tourist: Definition

- An American / Canadian who travels abroad to buy an organ from a living or deceased donor for transplantation in that country.
- “...[T]he purchase of a transplant organ abroad that includes access to an organ while bypassing laws, rules, or processes of any or all countries involved”.

United Network of Organ Sharing – UNOS News Bureau. UNOS Board Further Addresses Transplant Tourism (<http://www.unos.org/news/newsDetail.asp?id=891> - accessed June 28, 2007).

- Organ sales are illegal in most countries

Trafficking

- Definition: UN Trafficking Protocol 2000
- “Trafficking=exploitation of human beings for sexual exploitation, forced labor, slavery, servitude or for the removal of organs”
- “The recruitment of people through criminal means or by threat or use of force, coercion, abduction, fraud, deception, or by the abuse of power in a situation of vulnerability”
- “It includes the recruitment, transportation, transfer, harboring or receipt and handling of persons”



Transplant Tourism: WHO Estimate

- **50.000 kidney transplants x year world wide**
- **20.000 from live donors**
- **Number of sold and trafficked organs:
5000 –8000 x year**
- **< \$30,000 x organ**

M.Bos Transplant Tourism & Organ Trafficking. ESOT. 2007

- **5-10% of kidney transplants worldwide**

Budiani-Sabieri & Delmonico AJT 2008

Buyers and Sellers

- Rich, often Westerners
- Long waiting lists
- May not have a LD
- May not meet criteria for listing locally
- Low socio-economic classes
- Few options re \$ advancement
- Debtors
- May be poorly informed

Organ Vendors

P.V. SIVAKUMAR



P.V. SIVAKUMAR



Brokers

- **Local**
 - Small mafia (smuggling, prostitution)
 - Former kidney sellers
 - Corrupt officials (police, immigration, customs)
- **International**
 - Independent transplant coordinators
 - MDs, hospital administrators
 - Crime syndicates

M.Bos Transplant Tourism & Organ Trafficking. ESOT. 2007



**Inside evil organ trade –
manhunt for “Dr. Horror”
exposes global network of human suffering.**



By Don Peat, The Toronto Sun
February 5th, 2008

Organ Sales

MED-TECH : HEALTH [RSS](#)

Black-Market Scandal Shakes India's Ban on Organ Sales

Scott Carney [✉](#) 05.08.07 | 2:00 AM



Once a fishing village, the Ernavoor slum is now a refugee hutment -- and an easy hunting ground for kidney brokers.

[View Slideshow](#)

CHENNAI, India -- For two years, Maria Selvam was the most respected man in Tsunami Nagar, a desperately poor refugee camp for tsunami survivors in India's Tamil Nadu province.

As the village's only elected official, he was the closest thing they had to a celebrity. His photograph

Ethical Issues in Organ Sales

- Intuitive unease
- Commodification of body
- Equity issues
- Coercion/threat of harm
- Reduction of altruistic donation



Intuitive Unease

- **Argument**
 - “It feels wrong”
 - *But* simply stating that it “feels” wrong is not sufficient justification for refusing organ sales
 - Cost of “feeling” is human lives



Commodification of the Body

- Selling organs will
 - Lead to degradation of morals
 - Lead to commodification of the human body
- *But* this is conjecture.

Equity: Exploitation of the Poor

- Only the poor will sell organs
 - *But* organ sales give poor new option to reduce financial strain
 - People should have as many choices as possible
 - Encourage people to better their lives



Equity: Informed Consent

- It is not possible for Vendors to be adequately informed of risks
 - *But* no evidence that altruistic donors understand the risks
 - Applies to any surgery



Equity: Other Means

- Society should try to alleviate poverty instead of allowing organ sales as a solution
 - *But* there is reason to believe that society will *never* help the poor
 - Thus, the least society can do is give the poor the option of selling their organs

Coercion

- Monetary offer too good to refuse.
- It is irresistibly attractive



– *But* sales are an option to alleviate poverty

– Sales enable people to help themselves



Coercion: Exploitation

- **Exploitation**
 - **Existence of unwilling vendors**
 - **Black market**
- *But* legislation and centralized governance will probably eliminate element of danger

Organ Vendors



AP/WIDE WORLD

Men from Manila in the Philippines show scars from selling their kidneys.

Reduction of Altruistic Donation

- Organ donation must be altruistic
 - *But* not all organ donations are altruistic
 - e.g. mother gives to husband, because father is sole source of income

Reduction of Altruistic Donation

- **Argument in favour of organ sales:**
- **Unfair:**
 - **Health Care Professionals are paid for their services, recipients get kidneys, why should the organ donors not receive something?**

Practice Today

- US insurance companies promote health tourism: could include transplant
 - Also seen in Australia, Egypt
 - Cheaper services than in home country
 - Accessibility
-
- Bramstedt K. & Xu J. Checklist: Passport, Plane Ticket, Organ Transplant

Evidence in Canada

- SMH study 1998-2005
- 20 pts transplanted abroad; 22 allografts
- Pts verified commercial transaction
- Pt & graft survival @ 3 yrs worse than from LD tx in Canada
- Surgery & infectious complications -> frequent & lengthy hospitalizations

Prasad R, Shukla A et al. Outcomes of Commercial Renal Transplantation: a Canadian Experience. Transplantation 2006; 82: 1130-1135



Last Updated: Tuesday, 28 March 2006, 12:46 GMT 13:46 UK

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China bans transplant organ sales

China has said it will ban the sale of human organs from July in an attempt to clean up its transplant industry.

New regulations published by the health ministry require donors to give written permission and say transplants should be done only in specialist hospitals.



China says it will revoke hospital licences if transplant patients die

The move follows the deaths of several foreigners who travelled to China for transplants.

Correspondents say the measures fail to address a severe organ shortage which has spawned a lucrative black market.

It is estimated at least two million people in China need transplants each year but only up to 20,000 can be conducted because of the lack of organs, according to Chinese state news agency Xinhua.

Voluntary donations fall far below the level of demand because of cultural biases against organ removal before burial.

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Ethical Issues for Discussion

- 1. Do transplant teams have a duty of care to transplant tourists on their return to Canada?
- 2. how do we proceed when a member of the team is *morally* against transplant tourism?
- 3. Is it morally acceptable for the transplant team to direct the recipient to known 'good places' abroad for transplantation?

Duties to Transplant Tourists

1. Do transplant teams have a duty of care to transplant tourists on return to Canada?

- If patients are treated on return, is the team facilitating an illicit act?
- The recipient has not committed an illegal act in Canada.
- A legal resident of Canada is entitled to health care.



Transplant Teams and Moral Agency

2. What if a member of the transplant team is *morally* against transplant tourism?

- Is he obliged to provide care to this patient
- Is he entitled to live out his own values?
- Do the needs of the patient prevail?

Transplant Teams and Moral Agency

2. What if a member of the transplant team is *morally* against transplant tourism?

- Duty of care
- The patient cannot be abandoned
- After the fact, this is consistent with other patient behaviours that we may not like



Referring to “Good Places”

- 3. Is it morally acceptable for the transplant team to direct the recipient to known ‘good places’ abroad for transplantation?
 - The intention in referring is to protect the patient’s safety (consistent with general duty of beneficence)
 - Referring is facilitating a morally illicit act
 - Issue of a lesser evil?
 - Best practice is to caution recipient against going abroad for transplant at all due to inherent risks

Suggestions to Address this Issue

- Treat on return
- *Proactively*: Warn patients of the dangers of transplant tourism (buyer beware)
- Inform patients of the possibility that organ buying may involve unacceptable practices to disadvantaged people (donors)

Fortin M-C, Roigt D, Doucet H. What should we do with Patients who buy a Kidney Overseas? J Clin ethics 2007; 18: 23-34

CST & CSN Policy Statement

- Outlines MDs' obligations towards their pts
- Recommends:
 - Pre transplant counselling of ESRD pts
 - Pts be informed of potential harms to them & to vendors
- Suggests MDs tell their pts:
 - they object to TT
 - their willingness to care for pts from TT

Suggestions to Address this Issue

- Address the root cause i.e. organ shortage
- Focus on attempts to increase organ donation from:
 - the deceased
 - consenting living donors within our own societies

Healthcare as a Good

- Marketable commodity or a Social good