



## EUROTRANSPLANT

### Current ethical considerations in organ transplantation

Ethical issues in organ transplantation are commonly related to well known problems in health care. Among others, they have to deal with:

1. managing scarcely available treatment due to the shortage of donor organs;
2. determining accurately the onset of death (brain death and heart death) as starting point for organ donation;
3. getting informed consent from donor, relatives of a deceased donor and from the patients – paediatric as well as adults;
4. the question whether or not donors should be rewarded for the altruistic deed of offering a donor organ;
5. in the case of research and experimental medicine, determining the acceptable balance between risk for the patient and benefit for society.

#### Current ethical issues

Currently, as transplant legislation is in place, brain death determination and informed consent are no longer major issues within Eurotransplant. The same can be stated for research and experimental medicine, as the pioneer era of organ transplantation has passed, and transplantation medicine has developed to a high tech routine. Within Eurotransplant, organ donation is seen as an act of altruism. There is no remuneration system.

However, the continuous shortage of donor organs makes the management of scarce treatment an important issue. It is in fact the reason for existence of Eurotransplant. Related to this topic there are two ethical issues we would like to discuss.

- The ethics of allocating organs for transplant poses a classical problem: any criteria defined to allocate organs efficiently, maximizing utility, can easily lead to situations perceived as grossly unjust or unfair.

Advocates of efficiency (utilitarianism) have an eye towards doing as much good as possible with a limited resource. Advocates of justice have their eye on a fixed pattern of distribution of the limited resource that they consider fair such as giving benefit to the worst off, giving organs to the sickest patients, systematically implies decreased survival rates. On the other hand, defining benefit is also controversial: social utilitarianism would focus on all the good a transplant might do including the social usefulness of the transplant recipient. Medical utilitarianism attempts to determine how much medical benefit could come from an available organ for each candidate on the waiting list, taking into account the probability of the benefit occurring. Medical benefit might include preserving life, reduction in morbidity, relief of pain and relief of suffering caused by illness.

Eurotransplant approaches this dilemma by taking into account justice (waiting time, urgency, etc.) as well as medical benefit (tissue typing, etc.) in the computerized allocation rules and by also including medical expert opinion (audit process) in prioritizing individual patients on the waiting list.

- First and second generation immigrants from a different ethnic background on the waiting list have different tissue characteristics and therefore generally have to wait longer than native patients. As in many cases the awareness on the benefits of organ donation in populations of immigrants is low, relatively few donor organs are available for patients from these populations. Attempts to increase the awareness on organ donation and to increase the willingness in these populations to donate organs can help to reduce waiting time for these patients.