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Ethics body suggests NHS pays for funerals of organ donors

Press Release

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The NHS should test the idea of paying for the funerals of organ donors to help tackle the current shortage of organs, says a new report by the Nuffield Council on Bioethics. The Council suggests that this would be an ethical way of encouraging more people to sign the Organ Donor Register. Under such a scheme, funeral expenses would be offered if someone who has signed the Organ Donor Register dies in circumstances where their organs can be donated to others.

Professor Dame Marilyn Strathern, who chaired the 18-month inquiry which led up to this report, said: "Government initiatives to improve the health of the population are crucial to reducing the number of people in need of organs in the UK, but we must also take reasonable steps towards increasing the number of potential donors. The possibility of sparing relatives the financial burden of a funeral might encourage more people to register as donors".

"Paying for the funerals of organ donors would be ethically justified - no harm can come to the donor, and it would be a form of recognition from society. We think a pilot scheme to test the public response to the idea is worth trying, alongside other schemes," said Professor Strathern.

In the UK, there are 8,000 people on the waiting list for an organ transplant and they will wait an average of three years for a suitable donor to become available. Three people die every day whilst waiting for an organ. Currently, 18 million people – around 30% per cent of the UK population - are signed up to the Organ Donor Register, but the NHS are aiming to increase this to 25 million by 2013.

The Council's report, 'Human bodies: donation for medicine and research', considers how far society should go in trying to encourage people to donate their bodily material, including organs, eggs, sperm, blood, tissue and whole bodies. It concludes that altruism should continue to be central to our approach to all types of donation as it underpins important community values, but this does not exclude the possibility of allowing some form of payment in some circumstances. The report therefore proposes an 'Intervention Ladder' to help policy makers consider the ethical acceptability of various ways of encouraging people to donate.

Living organ donors

In the UK it is against the law to offer or accept payment to donate organs for the treatment of others. "We endorse this and agree that living donors, such as kidney, blood and bone marrow

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donors, should not receive payment other than direct and complete reimbursement of the costs brought about by their donation," said Professor Strathern. "Rewarding living organ donors by paying more than this does not change the risks of donation, but there is a possibility that it might undermine the motive of helping others in need - we believe this motive should be preserved as far as possible."

"Opt-out"

Spain and Belgium have 'opt-out' systems for deceased organ donation, where it is assumed that people consent to donation unless they objected to this before they died, or their family objects. A similar system may soon be introduced in Wales and, if it is, the Council recommends robust research into the effect it has. "There is uncertainty about whether or not an opt-out system would lead to more organs being donated. A clear evidence base should be established before changes are considered elsewhere in the UK," said Keith Rigg, a transplant surgeon at Nottingham University Hospital and one of the authors of the report.

However, the Council supports 'mandated' or 'prompted' choice systems, where people are required or urged to make a choice about organ donation during their lifetime – providing people have the opportunity to make any objections clear too. From August this year, people applying for a driving licence in England, Wales and Scotland have to indicate their wishes about organ donation when completing the DVLA application form online. However, they are not given an explicit option to say no. "We think it is very important for people's wishes to be known in advance, but a compulsory choice system is only ethical if it includes an option to say 'no, I don't want my organs to be donated'," said Professor Strathern.

Egg and sperm donation

The report also considers the donation of eggs and sperm for use in fertility treatment and research. Shortages in supply of donor eggs and sperm have left many people who want treatment facing long waiting lists as fertility clinics struggle to meet demand.

"We would like to see the £250 cap on egg and sperm donor expenses removed to ensure that lost earnings are reimbursed in full. People who are willing to donate for other people's treatment should not be left out of pocket," said Professor Strathern.

Furthermore, the report suggests that payment over and above expenses should be offered to those who are prepared to donate eggs for research, in return for the discomfort and inconvenience they experience. "Donating eggs for research purposes is different from donating to help someone else's treatment. You're not usually trying to help a particular individual — you are more a participant in a research exercise. A good comparison is that we already pay healthy volunteers to test medicines. We think it would be ethically justified to offer payment to women who are willing to give their time and undergo uncomfortable procedures in order to donate eggs for research," said Professor Strathern.

NHS restructure

Increasing the potential number of donors is only one half of the story, says the Council. Efficient procedures and sound organisational structures must be in place to make the maximum benefit of donated material.

The Council recommends that the Department of Health should closely monitor the impact of any

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proposed changes to organ donation services, for example, and be prepared to act to protect systems that have been shown to work well.

"In light of proposed organisational changes to the NHS in England and pressure on health budgets, there is clearly a risk that improvements seen in recent years in the number of organs available to transplant might be lost," said Professor Strathern.

The report also calls for a national or regional donor service to be set-up to improve co-ordination of egg and sperm donation for fertility treatment, along the lines of the current system for organ and blood donation.

The report includes further recommendations in the areas of the use of tissue in research and volunteering for clinical trials.

Find out more about the report [2]

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