The Convenient Death

By The Editors

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Wait for patients to die before taking their organs, and the organs won’t be as fresh. Let doctors take the organs from living patients — even if it means causing them to die a little faster than they otherwise would — and the supply of usable organs will go up. Some other patient will get a second chance at life, and the dead guy won’t miss anything: What could possibly go wrong with this idea?

The editors of Nature are well aware that this proposal might seem a little ghoulish, and they have two suggestions for making it seem less so. The first is that “death” be redefined. The law currently treats someone as dead if he has experienced an “irreversible cessation” either of all the functions of the brain or of both the circulatory and respiratory systems. These tests indicate that the person can no longer function as an integrated organism. Since people can pass those tests without, in the editors’ view, “being alive in any meaningful sense,” and since those people can be sources of working organs, the editorial proposes changing the definition. It does not specify what the new definition should be, but it is clear that the direction of the change should be toward relaxation. Problem solved: Fresh organs can now be removed from a patient deemed to be dead, and the procedure can’t, by (new) definition, kill anyone.

Nature’s second suggestion is to proceed by stealth: “Physicians and others involved in the issue would be wise to investigate just how incendiary the theme might be, perhaps in contained focus groups, and design their strategy accordingly.”

The proposal to increase the supply of organs for transplant by redefining death is, sadly, not considered outrageous in the field of bioethics. But it has never received an endorsement this respectable. It is heartening that at least Nature can devise no strong argument for it.

The editorial asserts that current law misunderstands death as an event rather than a process — which hardly justifies refusing to wait until the process is over. This argument merely puts a “scientific” gloss on a value judgment. Nature argues further that current law supposedly pushes doctors to lie about when death has occurred to get organs. But it is the utilitarian, parts-is-parts attitude toward human life that pushes some doctors this way, and that this proposal exemplifies.

Even on its own utilitarian terms, it is counterproductive: Nothing would be more likely to reduce people’s willingness to list themselves as organ donors than the fear that doing so would lead doctors to hasten their deaths to get their organs.

The deeper flaw with the proposal is that it is grossly immoral, an attempt to legitimize the killing of vulnerable people while pretending something else is being done. Further evils would come in its train. The editorial concludes that “concerns about the legal details of declaring death in someone who will never again be the person he or she was should be weighed against the value of giving a full and healthy life to someone who will die without a transplant.” Whether someone is actually dead is not a “legal detail.” And note the expansiveness of the language. There will always be people whose lives do not seem “full and healthy,” in comparison either with who they once were or with others deemed more deserving of life.

Efforts to help the sick are praiseworthy only when they observe moral limits. Nature’s proposal to redefine death to facilitate transplants should not even be entertained.