

## UK suggests ethically controversial strategies to increase organ donations

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LONDON, August 1, 2012 (LifeSiteNews.com) - The UK's National Health Service (NHS) has launched a survey asking health professionals and the public to weigh in on several ethically controversial strategies to increase organ donations.

Among the most contentious is the suggestion of "elective ventilation," whereby patients considered to be close to "brain death" would be started on ventilation and kept alive by artificial means with the specific intention of facilitating organ harvesting.

The survey asks if the NHS should "review the ethical, legal and professional acceptability of so-called elective ventilation, i.e. intubation and ventilation of a gravely ill patient whose death is inevitable in order to promote donation after brainstem death."

The criterion of "brain death" itself is controversial. Dr. David Albert Jones, director of the UK-based Anscombe Bioethics Centre, a British Catholic institute that tackles moral questions arising in clinical practice and biomedical research, has pointed out that the dubious criterion of "brain death" was "invented" in 1968 to accommodate the need to acquire vital organs in their "freshest" state from a donor who some would argue is still very much alive.

Dr. Jones has said there are many ethical questions that must be answered before we can know if someone is really dead.

"Most donation after death in the whole of the western world happens when the heart is still beating, the so-called beating heart cadavers," Dr. Jones explained, "so it is very important for people, that this body that doesn't look like a typical dead body, to be sure it really is dead. Because if it isn't dead, and you take the organs out, then you might be killing someone."

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Other proposals in the NHS survey include registered organ donors receiving preferential treatment if they themselves need an organ transplant, a presumption of consent for organ harvesting unless people have specifically opted out, and higher financial payments to hospitals for every organ they harvest.

According to the Guardian UK hospitals currently receive about £2,000 for every organ they provide, which the NHS compares with the €7,000 (£5,500) paid in Croatia.

The survey asks if the NHS should look again at presumed consent, in which people must opt out of being donors rather than opting in, or if the idea of "mandated choice" should be considered, where people are required to make a choice one way or the other.

In 2008, then prime minister Gordon Brown told the Guardian in an interview that despite experts rejecting the idea of "presumed consent," he believed the law on organ donation could be changed to allow this.

With regard to registered organ donors being given preferential treatment the NHS survey asks, "Do you agree that a person who has signed up to the Organ Donation Register should be a priority recipient for an organ if they subsequently require a transplant?"

The survey offers the example of Israel where in 2009 registered organ donors, and their partners and close relatives, were given the legal right to priority treatment if they should require an organ transplant.

At that time Dr Vivienne Nathanson of the British Medical Association criticized the move, saying, in Britain, "We would have serious concerns about a system that would move away from treating patients on the basis of clinical need."

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However, in considering the current survey, the NHS's director of organ donation and transplantation, Sally Johnson, told the Guardian, "It always seemed to me that fairness is quite a fundamental British value but we have never put that in the context of organ donation."

The NHS Blood and Transplant "Post-2013 Organ Donation Strategy" survey is available here, with an accompanying "Portfolio of Evidence" available here. (http://www.organdonation.nhs.uk/ukt/newsroom/statements\_and\_stances/statements\_and\_stances.asp)

The deadline for responding to the survey is September 24, 2012.

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