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E-ISSN : 2456-1045

- International Journal
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RESEARCH JOURNAL

VOLUME - 54 | ISSUE - 1

ADVANCE RESEARCH  
JOURNAL OF  
MULTIDISCIPLINARY DISCOVERIES

**OCTOBER**  
**2020**



INTERNATIONAL JOURNAL FOUNDATION

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## Emerging Ethical Issues in Organ Transplantation

### ORIGINAL RESEARCH ARTICLE

### NAME OF THE AUTHOR

ISSN : 2456-1045 (Online)  
 ICV Impact Value: 72.30  
 GIF- Impact Factor: 5.188  
 IPI Impact Factor: 3.54  
 Publishing Copyright @ International Journal Foundation  
 Article Code: PHL-V54-II-C1-OCT-2020  
 Category : PHILOSOPHY  
 Volume : 54.0 ( OCTOBER-2020 EDITION )  
 Issue: 1(One)  
 Chapter : 1 (One)  
 Page : 01-06  
 Journal URL: [www.journalresearchijf.com](http://www.journalresearchijf.com)  
 Paper Received: 07.09.2020  
 Paper Accepted: 16.01.2021  
 Date of Publication: 05-02-2021  
 Doi No.: [10.5281/zenodo.4501514](https://doi.org/10.5281/zenodo.4501514)

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### ABSTRACT

Over the times, our civilization has been growing up from all the aspects; culturally, educationally, and technologically as well. With the advancement in technology humans are used to fall in ethical dilemmas in many cases in their daily life in choosing what right action is and what is wrong. With the growth of technology the chances of getting misled has been increased which needs an ethical intervention to solve them. Now, it is very relevant to focus on the ethical dilemmas that humans face due to such technological advancement which is concerned about the misuse of technology.

In last few decades, technological innovations have taken the medical science to an esteemed height. Here, in this paper, I am going to analyze and discuss about the possibility of ethical dilemmas in the field of medical science. In other words, specifically to say, the aim of this paper is to discuss about the emerging ethical issues and ethical dilemmas in organ transplantation in medical practice. Concerning about the ethical issues aiming at providing a certain method or principle in any field which must have to be unbiased, fair and transparent. Ethics always try to justify the moral, social and any other values of a particular action. Biomedical ethics, as a branch of bio-ethics which covers moral issues regarding the entire universe such as animals, humans and our environment, deals in biology and ethical issues related to medical practice.

Most importantly, some ethical concepts such as justice, autonomy, utility need to be considered as the guiding principles in the context of organ transplantation. Thus this paper will conclude with an appropriate ethical approach emphasizing on the concept of human dignity. This approach will suggest to treat human body and its organ as an end in itself and this approach may help the physicians to keep away of any ethical conflict in their medical practice regarding organ transplantation and organ allocation as far as possible.

**KEYWORDS:** Technological advancement, ethical dilemmas, human dignity, organ transplantation, organ allocation

### CITATION OF THE ARTICLE



Tarafdar A. (2020) Emerging Ethical Issues In Organ Transplantation; *Advance Research Journal of Multidisciplinary Discoveries*; 54(1) pp. 01-06

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Open access, Peer-reviewed and Indexed journal ([www.journalresearchijf.com](http://www.journalresearchijf.com))

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## I. INTRODUCTION

The first successful organ transplant took place in 1954 with a kidney transplantation between identical twin brothers by Dr. Joseph Murray and his team in Boston.

With keeping space of time, we may have to set our focus on the recent advances in medical technology because if we make ourselves limited to Hippocratic tradition then such cases of ethical dilemma in medical advancement may be overlooked.

Rapid advances made in the field of science and medicine has created increasingly complex ethical problems.

Staying up with the improvements is sufficiently troublesome; however the originality of any new innovation requires new moral reasoning which is not quite easy. The Organ transplantation, as the most significant mechanical advancement in the field of clinical innovation, needs a reasonable utilization of moral and sensible approach for donation and transplantation of most important scared clinical assets.

There is a high risk of exploitation of the poor but needy people by compelling them to sale organ or deceive them from having new organ for the deceased one to benefit the affluent one and this would raise ethical questions regarding the organ allocation.

Then again, the innovation of organ transplantation actually weaves the wish for living some years more in the mind of many people. In this unique circumstance, the paper will bargain in the ethical issues identified with the distribution of the accessible organs and to show a potential answer for the patients and doctors to get them free of the moral controversy which will result out by making secured the patient's need of new organ.

To discuss about the ethical issues in organ transplantation it is important to look at every aspects of this life saving technology in detail as it involves many social, religious and moral values as well. There are many multi-cultural nations such as India where social and religious issues are also needed to be considered carefully besides the ethical issues involved in organ transplantation. The current problems are not only in organ allocation but also in the method of organ donation, compensation for the donors, proper use of the organs, physician's responsibility towards the patients and donors are also needed to be analyzed. In this context, biomedical ethics, as a branch of bio-ethics which covers moral issues regarding the entire universe such as animals, humans and our environment, deals in biology and ethical issues related to medical practice.

I would also like to focus on the issue that the innovation of the technology with the help of which organ transplantation, organ theft are happening which shows the lack of responsibility and lack of holding the ethical values of the medical authority and doctors and develops an unhealthy and untrusting relationship between a researcher and subject or doctor and patient. Physicians have the utmost responsibility to carefully consider the moral values in the method of organ donation and allocation irrespective of any class to create an ethical and fair atmosphere where the patient and donor's respect, autonomy, and interest can be saved.

The procedure of organ transplantation incorporates the procedure of organ donation, organ allocation as well. In the context of organ transplantation the availability of organs and from whom organs should be taken is very much significant since all the issues involves significant moral questions. There should be a certain criterion regarding living and deceased organ donation on the basis of which a person can donate his organ or the family members of a death person can donate that person's organ to others. This in turn asks us to re-examine concept of death in the context of organ donation. In this way organ transplantation brings up some crucial moral issues, for example, when an individual can be proclaimed as brain death? Morality regarding removing organs from the cadavers or how and when an organ or part of an organ should be taken from a living body for the well-being of someone else? And in particular, in the predominant circumstance of lack of organs, by what method would organs be able to be designated morally? What are the criteria of placing a patient in the organ transplantation waiting list? At the same time, how can a donor be compensated for his organ donation? To answer such questions it definitely needs an appropriate ethical approach. At the same time, obtaining patient's consent and observing the principle of patient autonomy are also important. The physicians should look carefully that whether a donor is donating his organ on his own will or not? Because the maintenance of patient autonomy is very much important to increase the public trust and to set up a good therapeutic relationship between physician and patient. Physicians should examine the donor that whether he has come to donate his organ without own consent or because of emotional pressure or not; donation should be based on altruistic principle. And physicians have the duty not to deceive a patient or recipient on the basis of any social class, religious status or any other discrimination and the transplantation queue of recipients also need to be maintained fairly and efficiently.

Some important areas in the context of organ transplantation where ethical issues may arise.

## Cadavers and the concept of death

Organs for transplantation are used to be taken in two ways; one is from the dead persons and there are living donors as well. Ethicists are concerned about the concept of death before permitting organ removal from dead persons. There are two ways of declaring death; neurological death and circulatory death. In the former days, many religions were not ready to accept the organs removal from a dead person as they believed that it was not fair to desecrate human body after death and they were in favor of giving the respect to a dead body.

Neurological death brings about when blood quits streaming in the cerebrum and the brain quits working.

One can say that irreversible coma is considered as brain death when the person has no indiscernible central nervous system activity<sup>2</sup>.

Presently the idea of cerebrum or neurological death is getting an enormous acknowledgment all over world. Neurological death is also considered as brain death which appeared in the last part of the 1950s. In the case of neurological death the person's other parts of body can be continued working with the assistance of ventilation which makes the ethicists worried to ponder the meaning of death.

To ensure neurologic or brain death the physicians need to perform some clinical tests but such clinical tests which are not fully reliable. But before removing organs from a person who is pronounced as brain dead a certain policy should be followed by the physicians and hospitals.

On the other hand, circulatory death happens when blood quits flowing all over the body and heart quits beating. With the increasing gap between organ availability and organ demand the custom of talking organs from dead persons are also getting acceptance. Besides it, many countries are in favor of a guiding principle that is 'presumed consent' according to which no consent is required from the family of a dead individual to remove his organ after his death. Here, ethicists may state that it isn't reasonable for expel organ from a dead individual since he had not communicated his desire while he was alive not to give his organ<sup>3</sup>.

## Living Donors

Living donors are those who want donate a particular organ or part of an organ to his relative or loved one or any other fellow humans<sup>4</sup>. Removing organ from a living person involves a high risk of death and even if the donor survives then his physical condition may worse off in future. Expelling organs from a living individual is just for the prosperity of the other and along these lines it is contrary to one standard of clinical morals for example first do no

damage which expresses that doctors ought not do any harm to the patients and their duty is to act for the well-being of the patients. Here, one might have a question that whether harming a person through removing organ is ethically accepted or not? In that case we can follow the concept of altruism which means by donating an organ the donor feels a psychological pleasure from having helped others. Before accepting a living person as donor physicians should examine him carefully that whether he is doing so because of the family pressure or any other serious reason or voluntarily and he should be informed about risk of his health condition before the operation.

## Offering financial incentive for organ donation

One may question that offering money or incentives for organ donation is ethical or not. In spite of the fact that a few people contend that economical assistance to the organ contributor may attract a large number of people for organ donation in this prevailing circumstance where the gap between organ accessibility and organ demand is getting increased everyday still it doesn't imply that paying for organ donation is morally adequate. Paying for organ donation actually harms the human dignity by treating them as a mean or as a commodity not as end and thus it violates the principle of altruism. There is no certainty that it helps in increasing the number of donors rather giving money for organ isn't moral as it drives us to the commoditization of human body and it damages his body; which further leads us to the high danger of misuse and annihilates the human nobility. Organ sale and paying for particular organ may higher the risk of exploitation poor and it enhances the organ trafficking while violating the dignity of humans through making them commercial commodity. Selling or buying organ in the underdeveloped or developing countries is a major issue in light of the fact that people in such countries are used to look for organ donors in spite having many young and healthy relatives or family members who are capable enough to help their near ones by donating organ hence it unquestionably abuses the philanthropic inspiration of organ donation for related individual or random outsiders<sup>5</sup>.

## Organ allocation

With growing demand for new organ in place of diseased one the chances of deception in the transplantation waiting list is becoming the area of concern for the ethicists. Physicians should carefully set a criterion on the basis of which allocation of organs can be made such as blood and tissue type, outcome of the transplantation, geographic location i.e. there is a tendency to give the organ to a nearest recipient, how long a patient is awaiting for an organ in waiting queue etc. Ethicists are concern for an appropriate and fair guiding principle on the basis of which organ distribution to the needy people can be

done and in this context we need to look at the principle of justice. To make organ allocation just and ethical we need to consider some ethical theories such as utilitarianism and so on. Before allocating human organs we need to think on how justifiably physicians can allocate such scarce organs to the needy patients.

In the allocation, some fundamental ethical questions generally arise such as whom should be given the priority? Should priority be given on the basis of age, social class, and geographic location? So 'priority' is the main concern for the ethicists and to set priority we need to depend on the theory of justice as well. Justice concerns what is due or owed to individuals. Here, in this context, we can consider the theory of distributive justice which concerns about the equal access to the social wealth like health care resources. Distributive justice incorporates utilitarian, libertarian, communitarian and egalitarian approach. According to utilitarian theory of justice, an action is considered as just on the basis of its consequence or how much pleasure it produces. Libertarian approach concerns for fair procedure to maintain social and economical liberty while communitarian approach depends on the communal tradition. Conversely, egalitarian approach to justice talks about giving equal access to the social goods and to look into the demands of all people with equal weight. So here we can follow the all such theories of justice to distribute scarce medical resource like organs to the patients to make the allocation process fair and ethical as it tells us to weigh patients need equally. At the same time, one may say that urgency of treatment or urgency of organ need may play a significant role in the allocation of organ<sup>6</sup>.

## II. CONCLUSION

So throughout this paper we have seen that non-availability of organs from deceased human body causes the increasing distance between availability of organs and organ demand and it is resulting out as death of many patients in the transplantation waiting queue. For ethicists the gap between available organs and demand for new organ may be resolved through making people aware of the necessity of organ donation keeping aside their religious or cultural beliefs. Such education among the people can motivate them to be an organ donor on the basis of altruistic principle. Thus it can prevent organ sale and can save the human dignity. If a person desires to donate a particular organ or part of an organ to save a life of his or her loved ones then there is nothing unethical in it since he is donating his organ on his own consent and just to save another person's life. The motivation behind organ donation is quite important here to prevent the commoditization of organ or human body. And physicians have the most important duty not to involve in any unfair deed in the context of organ allocation to meet the need of patients ethically and

efficiently. Though one can say that it nothing unethical to compensate for the organ donation to the donor or his family but still it is unethical to sale organ as compensation is one thing whereas selling is quite another which ethicists cannot allow. But at the same time, we need to keep in mind that humans have the faculty of judgment and humans have rationality which makes them distinguished from other living creatures. Thus humans possess dignity that should be saved in every situation. Immanuel Kant has also said to treat humans as an end; not as a mean because they possess dignity. That's why it is unethical to treat a human being as mean rather we should treat humans as an end. But in the context of organ transplantation, though the removal of organs from living or deceased human body can maximize pleasure or happiness of many people still it somehow violates human dignity by considering human organs as commodity. At the same time, the physicians need to sort out the religious, cultural or social barriers in organ donation with their reasonable and objective or impartial ethical justification to increase the availability of organs. The religious superstition or faith in the context of organ donation and transplantation is a serious issue. Suppose, if a dead person's family members does not agree to donate his organ to a patient who belongs to another religion then the physicians may allow them to donate the organ to a person belonging to their same community, thus the physicians can save life patients as many as possible by following the utilitarian approach. But to make organ donation popular the only way is to spread education among the people about the necessity and benefit of organ transplantation and making people aware of their superstition. When a person dies a natural death or brain death then the family members of that person cannot be in a position to think rationally of donating organ; at that moment on the one end there is dead person and his unfortunate family members and on the other end it weaves a new hope of life; so in such circumstances the physicians have the task to drive them rationally along with handling their emotion with respect. People fears that in the time of organ removal the body gets tampered and the physicians are used to treat the body wrongly but that should not be the case; the physicians should make the organ removal procedure smooth and fair. The physicians should take only that organ or organs for which the person or his family member has given consent. And the physicians should try to keep the patient alive as far as possible, and it is very unfair to expect a person's death who is badly injured or has prolonged disease. The process of organ procurement can only bring about after the declaration of a person's death and after taking consent from his family members. In case of a seriously ill person who has already given consent for organ donation, the physicians should try their best to save his life. On the other hand, the question of priority is very much significant. In many

cases the whole transplantation process demands a large amount of money which makes the poor people scared and keeps them away from organ transplantation. Money or financial incentive may be given to the stranger who is donating just to help his fellow human being in altruistic manner but that does not imply that only affluent people can have access to the organ transplantation because they can afford that incentive; the government should think on it and make the transplantation easy for the poor and middle class people as well. The priority may be given on the basis of need i.e. the patient who would die without a new organ very soon can be given priority or whose blood and tissue type matches with the donor can be given priority but social or financial status of a person cannot be a considered in case of giving priority. So both the society and doctors ought to in this way inspire people for organ donation emphatically and passionately and treat moral, social, cultural issues with reasonable justification as it can give a new life to millions of people.

### III. ACKNOWLEDGEMENT

I would like to state that my PhD supervisor Dr. Barada Laxmi Panda, assistant professor of the department of philosophy at Presidency University, Kolkata has helped me a lot with her valuable suggestions and comments to write this research article.

### IV. BIBLIOGRAPHY

- [1] **Glannon, Walter.** Biomedical Ethics. Oxford: Oxford University Press, 2005 Kuhse, Helga and Peter Singer. Bioethics: An Anthology. Oxford: Blackwell Publishing, 2006
- [2] **Sia, Santiago.** "Ethical Thinking and Philosophy," *New Blackfriars* 91, no.1033 (2010): 242-252  
<https://www.jstor.org/stable/43251395>
- [3] **Arora, Kavita S. and Valarie Blake.** "Uterus transplantation: ethical and regulatory challenges," *Journal Of Medical Ethics* 40, no.6 (2014): 396-400  
<https://www.jstor.org/stable/43283023>
- [4] **Andrews, Peter A.** "Recent Developments: Renal Transplantation," *British Medical Journal* 324, no.7336 (2002): 530-534  
<https://www.jstor.org/stable/25227605>
- [5] **Ikels, Charlotte.** "Ethical Issues In Organ Procurement In Chinese Societies," *The China Journal*, no.38 (1997): 95-119  
<https://www.jstor.org/stable/2950336>
- [6] **Davies, Gail.** "Patterning the Geographies of Organ Transplantation: Corporeality, Generosity and Justice," *Transactions of the Institute of British Geographers* 31, no.3 (2006): 257-271  
<https://www.jstor.org/stable/4639974>
- [7] **McNally, S. J., E. M. Harrison, and S. J. Wigmore.** "Ethical Considerations in the Application of Preconditioning to Solid Organ Transplantation." *Journal of Medical Ethics* 31, no. 11 (2005): 631-34.  
<http://www.jstor.org/stable/27719506>.
- [8] **Robson, Noor Zurani Md Haris, Azad Hassan Razack, and Norman Dublin.** "Organ Transplants: Ethical, Social, and Religious Issues in a Multicultural Society." *Asia Pacific Journal of Public Health* 22, no. 3 (2010): 271-78.  
<http://www.jstor.org/stable/26723771>.
- [9] **Ikels, Charlotte.** "The Anthropology of Organ Transplantation." *Annual Review of Anthropology* 42 (2013): 89-102. 2020.  
<http://www.jstor.org/stable/43049292>.
- [10] **Dhooper, Surjit Singh.** "Organ Transplantation: Who Decides?" *Social Work* 35, no. 4 (1990): 322-27. <http://www.jstor.org/stable/23715901>.
- [11] **Joralemon, Donald.** "Shifting Ethics: Debating the Incentive Question in Organ Transplantation." *Journal of Medical Ethics* 27, no. 1 (2001): 30-35. 2020.  
<http://www.jstor.org/stable/27718629>.
- [12] **Yousaf, Farhan Navid, and Bandana Purkayastha.** "Social World of Organ Transplantation, Trafficking, and Policies." *Journal of Public Health Policy* 37, no. 2 (2016): 190-99. <http://www.jstor.org/stable/43948849>.
- [13] **Robin K. Avery.** "Recipient Screening Prior to Solid-Organ Transplantation." *Clinical Infectious Diseases* 35, no. 12 (2002): 1513-519.  
<http://www.jstor.org/stable/4483361>.
- [14] **Hurley, Thomas.** "The Meaning of Gift in Organ Transplantation." In *The Ethics of Organ Transplantation*, edited by Jensen Steven J., 217-31. Washington, D.C.: Catholic University of America Press, 2011. doi:10.2307/j.ctt3fgpsr.15.

- [15] **Swindell, J. S.** "Facial Allograft Transplantation, Personal Identity and Subjectivity." *Journal of Medical Ethics* 33, no. 8 (2007): 449-53. <http://www.jstor.org/stable/27719910>.
- [16] **Abouna, George M.** "Ethical Issues in Organ Transplantation." *Medical Principles and Practice* 12, no. 1 (2003): 54-69. <https://doi.org/10.1159/000068158>.
- [17] **Beard, T. Randolph, David L. Kaserman, Rigmar Osterkamp, and Friedrich Breyer.** "The Evolution of Organ Transplantation and Procurement Policy." In *The Global Organ Shortage: Economic Causes, Human Consequences, Policy Responses*, 8-29. Stanford, California: Stanford University Press, 2013. doi:10.2307/j.ctvqr1ctr.8.
- [18] **Howard, Richard J., and Danielle L. Cornell.** "Ethical Issues in Organ Procurement and Transplantation." *Bioethics - Medical, Ethical and Legal Perspectives*, 2016. <https://doi.org/10.5772/64922>.

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