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The Regulated Sale of Organs for Transplant Is Ethical

Mark Cherry

Bioethicist Mark Cherry argues in the following viewpoint that many of the six thousand people who die in the United States every year while waiting for a donor organ could be saved simply by allowing organs to be bought and sold on the open market. According to Cherry, the ethical benefits—the supply of life-saving organs would increase dramatically from both deceased and living donors, many sellers would be lifted from poverty, and reduced waiting time would cut medical costs—outweigh critics’ reluctance to put a price tag on human organs. Mark Cherry is associate professor of philosophy at St. Edward’s University in Austin, Texas, and the author of Kidney for Sale by Owner: Human Organs, Transplantation, and the Market.

As you read, consider the following questions:

1. How many people were waiting for transplant organs in the United States in 2003, and how many people received an organ that year, according to the author?

2. What legal regulations would minimize unethical practices in the buying and selling of organs, in Cherry's opinion?

3. How does Cherry dispute the argument that only rich people would be served by the open-market sale of organs?

Few ordeals could be more distressing than waiting for a replacement kidney, lung or even heart, knowing that your life depends on receiving one. In the US alone, more than 6,000 people die every year while waiting for an organ transplant, and in the UK [in 2004] the figure was over 400. Many others endure great pain and distress, often in hospital on life support, while queuing for available organs. In 2003 in the US, only around 20,000 out of the 83,000 waiting for transplants received them—a tragedy by anyone's standards.

Remedying the Dire Shortage of Organs

What makes this suffering all the more tragic is that much of it could be prevented, and many more lives saved, by changing the way organs are donated. The change is controversial, but it is simple enough: make it legal to buy and sell organs on the open market. At a stroke this could significantly increase the number and quality of available organs, and so reduce suffering and save lives. This, surely, is the bottom line.

How would it help? For a start, it would allow families to sell the organs of a deceased loved one rather than just donate them. The knowledge that their families would benefit could persuade many more people to become organ donors. But it would also open up more intriguing possibilities. For example, some people might consider a contract in which they agreed to give up their usable organs on their death to a particular buyer and have the money paid to their descendants.

Others might wish to sell a redundant internal organ, such as a kidney, while they were still living. This could be seen as