By the end of today, 18 people will have died due to organ failure. Of the approximate 127,000 recipients in need of a transplant, only around 14,000 will be donated this year. The shortage of voluntary organs donations has resulted in an emerging black market for organ trade and transplant tourism. Monetary compensation for organs could help boost the supply of organs in the United States however there are concerns about the ethical dangers that could follow. (TransplantLiving)

Persons in need are traveling abroad to obtain organs from countries where the organ trade may not be legal, but is tolerated. Presently, Iran is the only country with regulated organ trade market. Prices on organs can be inflated to hundreds of thousands of dollars not including the broker fee which can reach 2-5 times the organ price according to the World Health Organization (Bos). Domestically, in 2004, President Bush signed the Organ Donation and Recovery Act which provides reimbursement of travel and expenses for living organ donors, and grants to states and public entities (U.S. Dept. of Health and Human Services), but there has been little increase in voluntary donors. The need for more organs is still substantial. Legalization of organ trade could close the gap from donors to recipients and alleviate costs to patients, insurance companies and hospitals. However, it may also infringe on our important ethical standards.

The most apparent stakeholders in this issue are the organ recipients and donors. The recipient gains access to a greater supply of organs free of disease and without inflated black market prices, while donors, or their next of kin, are able to be compensated legally. The family of “non-heart beating donors” could gain more compensation than living donors as one deceased donor can potentially offer up to 8 transplants (World Health Organization).

Legislation creates a mutually beneficial relationship for both parties whereas current laws increase incentives to satisfy demand illegally and allow brokers to get huge premiums for breaking the law (Postrel). Harvard Economist Jeffrey Miron argues that a regulated, legal market would actually lower
the cost per organ because the donation pool would be expanded. A viable legal system with many of
the same processes and precautions as the current voluntary system could easily be put into place (Bell).

The cost benefit of a sanctioned organ trade extends to insurance companies and brokers as well. For
example, it is far more cost efficient to pay for a kidney transplant than to keep a patient alive on
dialysis. These types of transplants currently pay for themselves within two years as opposed to the
costs of keeping patients alive through expensive treatments. Also, as deaths from transplant
operations continue to fall, transplants become more desirable (Dubner). Legalization would allow
authorized brokers to turn profits while reducing the number of their illegal counterparts. If the goal is
to improve the quality and quantity of the supply of much needed tissues without creating more harm
to the public, legalizing the sale of human organs may be worth pursuing.

On the other hand, Medical professionals acknowledge the kidney and organ shortage but they worry
legalization will cause exploitation of the poor. Those of low economic status are the most often
targeted, while the rich are more likely to be the recipient. This raises many other ethical implications
regarding fairness. In such a market, many stakeholders who need organs may not get them.

Essentially, sanctioning organ trading wouldn’t solve exploitation; it would just be relocated from poorer
nations to our own country. Others argue that the free-market system of selling kidneys and organs
would never be contained within the United States; it would extend throughout the world to feed the
new demand for sellable organs. The sellers, therefore, would be exploited and would primarily come
from the poorest countries, selling their organs to the highest bidder out of desperation. (Delmonico)
this would negatively impact new stakeholders created by legalization.

Because payment for tissues and organs is likely to take unfair advantage of the poorest and most
vulnerable groups, it undermines altruistic donation, and leads to profiteering. The legal sale of human
organs can create an idea that some people lack dignity, and are objects to be used for the benefit of
others (World Health Organization). This includes the sale of organs by next of kin who would stand to
benefit from the death of relatives. Buying and selling human body parts can be equated to slavery
(Klitzman). The chance of harm to fundamental human rights is a risk that may not be worth taking.

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Conclusion

There is a significant need for a greater organ supply in the United States. The amount of people in need of a new organ is far greater than the amount available. Legalizing organ trade in the U.S. could be a viable option to satisfy stakeholders through compensation, greater organ supply, and reduced loss of life. However, legalizing the sale of organs presents many ethical dilemmas through exploitation and possible violations of human rights.

There are two sides to every issue:

1. Should the controlled sale of human organs be legalized in the United States?
2. Should the controlled sale of human organs remain illegal in the United States?

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Estimated U.S. Average 2011 total treatment Charges Per Transplant

<table>
<thead>
<tr>
<th>Transplant</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Only</td>
<td>$997,700</td>
</tr>
<tr>
<td>Single Lung</td>
<td>$561,200</td>
</tr>
<tr>
<td>Double Lung</td>
<td>$797,300</td>
</tr>
<tr>
<td>Heart-Lung</td>
<td>$1,148,400</td>
</tr>
<tr>
<td>Liver</td>
<td>$577,100</td>
</tr>
<tr>
<td>Kidney</td>
<td>$262,900</td>
</tr>
<tr>
<td>Pancreas</td>
<td>$289,400</td>
</tr>
<tr>
<td>Intestine</td>
<td>$1,206,800</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Black Market Parts</th>
<th>cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart</td>
<td>$119,000</td>
</tr>
<tr>
<td>Coronary Artery</td>
<td>$1,525</td>
</tr>
<tr>
<td>Gallbladder</td>
<td>$1,219</td>
</tr>
<tr>
<td>Heart</td>
<td>$119,000</td>
</tr>
<tr>
<td>Liver</td>
<td>$157,000</td>
</tr>
<tr>
<td>Kidney (China)</td>
<td>$62,000</td>
</tr>
<tr>
<td>Stomach</td>
<td>$509</td>
</tr>
<tr>
<td>Small Intestine</td>
<td>$2,591</td>
</tr>
<tr>
<td>Pint Of Blood (Low end)</td>
<td>$25</td>
</tr>
<tr>
<td>Shoulder</td>
<td>$2,594</td>
</tr>
<tr>
<td>Hand and Arm</td>
<td>$385</td>
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<tr>
<td>Skin (per Sq. Inch)</td>
<td>$10</td>
</tr>
<tr>
<td>Eyeballs</td>
<td>$1,525</td>
</tr>
<tr>
<td>Skull with Teeth</td>
<td>$1,200</td>
</tr>
</tbody>
</table>

Waiting List

| All Organs | 127,508 |

Donated Organs 2012

<table>
<thead>
<tr>
<th>All Donor Types</th>
<th>14,011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deceased Donor</td>
<td>8,143</td>
</tr>
<tr>
<td>Living Donor</td>
<td>5,868</td>
</tr>
</tbody>
</table>

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