

Luiza Magardician, a twenty year old Rumanian citizen arrived in New York in June 1985 in the hope of obtaining a kidney transplant. Before her arrival all available methods of treatment were tried unsuccessfully in Rumania. The director of the National Kidney Foundation of New York-New Jersey says Ms. Margardician's chances of finding a kidney donor are bleak since there is a bad shortage of donors in the United States, and U. S. citizens would usually come first. In addition Ms. Margardician has exhausted her funds and could not afford hospital costs even if a donor were found. In 1984 more than 8,500 Americans were waiting for kidney transplants; only half were expected to receive one that year.

Should the decision to offer Ms. Margardician a transplant be made strictly on the grounds of her medical needs or should her country of origin influence the decision?

ANSWER: The American community (all those who live in the United States) has committed the resources to make organ transplant possible. Under this circumstance, members of this community have a right not to be denied an organ transplant because that organ is being sent overseas or offered to a person who has traveled to the United States to obtain it. Residents of the United States have a reasonable expectation that their contributions to their social environment will be reflected in services – particularly of a life saving kind. An open door policy would undermine this expectation. The alternative to an open door policy, however, need not be one that is absolutely closed. The United States could have a quota system under which, for example, 90 per cent of donated organs would be reserved for use by United States residents, and 10 per cent made available to foreign patients.

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