

Supplying Kidneys: Argumentative Essay

“A market that allows payment for human kidneys should be established on a trial basis to help extend the lives of patients with kidney disease.”

Globally, the demand for kidneys dramatically exceeds the supply of donations, creating a debate on establishing a regulated market where individuals can sell their kidneys under government supervision. Those who oppose the idea have two main arguments: the commodification of body parts and the potential deterrent effect on altruistic donors. However, these arguments can be countered by considering various perspectives and adopting the right approach to the subject. The focus should be on the benefits of this solution, which outweigh the associated risks. Through a legalized kidney market, a substantial number of people on waiting lists who might die while waiting for a transplant, the donors who will benefit from the payment and countries who will have economic benefits as well as an increase in the average of living conditions would be better off.

Countries are starting to introduce laws which makes organ donation upon death the presumed choice. In wealthy countries, close to 66% of kidney transplants are from deceased donors despite only 2% of people dying in ways that make their organs suitable for donation. The limited availability of deceased organs in suitable conditions for transplantation diminishes the effectiveness of these new laws as a viable solution. This highlights the need for living donors. In the U.S. alone, over 100,000 people are on the waiting list for a kidney transplant, with 3,000 new patients added to the queue each month; only a quarter of them receive a kidney in a year. A solution to this dramatic difference between supply and demand can be found by legalizing a market for kidneys. A survey in Canada found that nearly half of the people who previously stated they wouldn't be likely to donate an organ would change their mind if they received payments for it. Iran, the only example of a country with a legalized kidney market, shows that this solution would work. In 1988, the government organized a system which regulated and funded kidney transplantation due to a shortage of dialysis machinery in Iran. By 1999, the waiting list was nearly eliminated. While most people who donate are in the bottom 25% of earners, average wealth of those buying kidneys is almost exactly the same as the average wealth of Iranians, demonstrating an equal distribution rather than the feared outcome of a kidney market.

People in need of a kidney transplant rely on dialysis to survive. The quality of life for patients on dialysis machines is significantly lower compared to recipients of kidney transplants, especially considering the short recovery process for both the donor and recipient. A kidney donor typically needs two days in the hospital and about a month to recover, whereas recipients need six days in the hospital and a month to recover. On top of the cost for the people, the government loses valuable tax money on dialysis. In the U.S., dialysis costs Medicare approximately \$120,000 per person annually, constituting about 6% of all Medicare expenditures. In contrast, a kidney transplant saves \$60,000 per year compared to remaining on dialysis. In Britain, the National Health Service starts saving money in the third year of kidney transplants, which lasts 10 to 13 years on average, compared to the cost of ongoing dialysis.

While some oppose the idea of a market for kidneys, an illegal market for kidneys already exists. As of 2010, one in every five kidneys transplanted each year originated from the black market. Transactions in the black market pose serious risks to both donors and recipients, neither donors nor the recipients receive proper medical care. Other than the medical risks, it is economically highly inefficient. When people sell their kidney on the black market, they will get \$5,000 by the estimations of the World Health Organization, however the brokers who buy them can then sell them for as much as \$150,000. Through a well-regulated market, donors, recipients and the government can have gains in a new equilibrium. This system would have regulations in place to ensure the rationality of the donors as well as the health of the kidneys donated. Only the government or a chosen nonprofit would be allowed to purchase the kidneys, and they would allocate them on the basis of need, similar to how donated organs are currently distributed. The kidneys would be paid for by whoever covers the recipient, whether that is their insurance company or Medicare which would later save money as the spendings on dialysis decrease. Donors would have all their medical expenses covered as well as a paid medical leave. The payment could be a direct monetary prize which could be branded as a “gift” similar to Iran's approach, or it could be provided as incentives such as health insurance or tax relief. Contrary to worries about deterring altruistic donors, a 2010 study by Scott Halpern found that a payment doesn't change an altruistic donor's willingness to donate their kidney.

Lastly, legalized markets for certain human body parts already exist, such as receiving payments for sperm, egg, bone marrow and blood donations and a rising industry of surrogate mothers. None of these are

considered immoral as opposed to a kidney market. This stems from a prejudice which can be corrected. People only need one working kidney, the surgery doesn't pose great risks, and kidney donations aren't something people wouldn't do without receiving payments. Governments should make efforts to create the correct perspective that these payments only serve as incentives to increase the number of donations, which doesn't create a risk for the donors. The system should be introduced as an incentive to solve the kidney

shortage rather than creating a kidney market. After the stigma attached to the subject is eliminated, there won't be speculations of immorality as evidenced by the existence of other markets requiring human body parts.

In conclusion, a legalized kidney market solves numerous problems such as the shortage of kidneys and the resulting lengthy waiting lists as well as the presence of a black market for kidneys. This new system would generate revenue for both the government and the donors, eliminating unnecessary expenditures on dialysis machines and reducing patient suffering. Donors wouldn't lose anything valuable to them or compromise their life qualities, but they would have earnings on this deal as well as the satisfaction of knowing that they saved a life. While most concerns such as deterrence of altruistic donors and a compromised system have been proven wrong by studies and the example of Iran, moral worries could be resolved with the proper framing and regulations for the system. Overall, this market would be highly beneficial for all who parties involved.

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