



Doctor Proposes Sales of Kidneys

Says Regulated Sales Would Address Organ Shortage -- But Foes Fear Exploitation



Obstacles to a plan for organ sales are huge. Not only are organ sales against the law -- in 1984, Congress banned financial incentives for organ donation -- virtually every major medical association opposes the idea. (PhotoDisc)

By **JOHN MCKENZIE**

Nov. 19, 2007

It is not a solution he proposes lightly -- indeed, it is among the most controversial ideas in medicine -- but Dr. Arthur Matas, president of the American Society of Transplant Surgeons, says it's now time to develop a regulated system of kidney sales.

Video



[Video: Meet Dr. Matas and the debate](#)

That's right: Allow people to sell one of their kidneys to ease the growing shortage of donated organs.

Matas encourages critics to do the math: There are now more than 70,000 Americans who've lost the use of their kidneys, most from the epidemic of diabetes. But only about 16,000 kidneys are donated each year. So most patients rely on dialysis several times a week to filter their blood. It can keep them alive, but not for as long as a real kidney.

The average wait time for a donated kidney in the early 1980's was less than a year. Today, it's more than five years -- too long for many. Each year, about 5,000 patients die waiting.

"It sounds like the wrong thing to do to be buying kidneys," Matas says, "until you start realizing unless we can do something dramatic we're going to have a continuation of the situation where patients are dying on dialysis and their quality of life is worse."

Matas argues that people can already buy and sell human sperm, eggs, and blood. Why draw the line at kidneys and other organs?

And because a transplant saves so much money in long-term medical costs, Matas says the government and insurance companies could afford to pay each donor one fixed price.

"When all is said and done, the package could be worth \$60,000 to \$70,000 and still be cost-neutral to the health care system," says Matas, a surgeon at the University of Minnesota.

Obstacles to such a plan are huge. Not only are organ sales against the law -- in 1984, Congress banned financial incentives for organ donation -- virtually every major medical association opposes the idea, including Matas' own transplant society.

Critics argue the system would be abused, and the poor would be exploited. They point to Iran, Pakistan and the Philippines, where kidneys are sold on the black market.

Dr. Francis Delmonico, a transplant surgeon at Massachusetts General Hospital, argues: "There are plenty of data now reported about the poor who have sold their kidney, and I can assure you that what has happened is that they remain destitute, they remain poor and they remain with one less kidney."

Another critic Dr. Gabriel Danovitch of UCLA, says, "If kidney sales were allowed in the U.S., the sellers would be the most vulnerable among us. They would probably be desperate for money...and may not tell the truth about their medical histories in order to donate a kidney."

Matas, who frequently debates Delmonico on the subject at meetings of the Transplant Society, replies: "I think it's critical to differentiate unregulated systems which have failed in other countries ... from the regulated system which I am advocating."

His proposal, published in several medical journals, emphasizes that the kidney sales should be strictly controlled by the government and insurance companies, with no middle men or brokers.

Those willing to sell a kidney would get a full physical and psychological evaluation and receive long-term follow up and medical care.

Matas is calling on Congress, and his colleagues, to allow a pilot project to see the effects of regulated kidney sales. He cites national surveys showing public support for the idea.

With a growing number of Americans dying on the waiting list, he says now is the time to try.