

Ending Black Market for Organs

By ACSH Staff — August 6, 2007

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Perhaps the disturbing allegation last week that a surgeon in California killed a patient to harvest an organ shouldn't be such a surprise, given the absurdly long waits for donated organs.

The statistics are overwhelming. Some 96,825 patients are waiting for an organ donation in the United States, according to the United Network for Organ Sharing. In 2002, more than 6,000 people died during their wait.

Unless you're lucky enough to have a relative or some other highly motivated and altruistic donor, there is no legal way to improve your chances in the painfully slow race against death.

The shortage of organs available for donation from unrelated donors has led to the macabre black market that exists today. National Geographic reports that a poor neighborhood in India is known as "kidney village," since residents illegally sell their kidneys for about \$800, far less than the \$100,000 that some recipients have been willing to pay. A whole new industry, transplant tourism, has emerged to meet the needs of the wealthy patients creating demand.

Current patients face a choice between two extremes: Wait for a fundamentally broken system and risk death, or venture into the unregulated Wild West of the black market for organs. But there is a better and more ethical alternative.

We don't need to delve too deeply into the black market to see that donated (or purchased) organs have a high value to potential recipients. Yet, because of the ban on incentives for donations, a familiar economic principle comes into play: Whenever a product's price is held below market demand, a shortage ensues. Despite campaigns to increase altruistic donations, organ donations are basically stagnant.

As George Mason University economics professor Alex Tabarrok has argued, the status quo is no more ethical than exploring new approaches, even if we can't foresee all the downsides of those new approaches. There are many innovative plans that could help shorten the line for an organ -- and they do a better job than the current system of taking incentives into account.

As Tabarrok's colleague, Tyler Cowen, argues in his new book, *Discover Your Inner Economist*, incentives work -- and they can take forms other than cash. For instance, Tabarrok describes the "no give, no take" idea floated in Israel, which (with some exceptions) would allow only those who sign their donor card (or their relative and friends) to receive a donated organ.

A regulated system that creates incentives for donors, whatever those incentives may be, would save lives, reduce the shortages that promote the black market, and level the playing field, by helping all potential recipients, not just those who can afford a trip to Kidney Village.

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