

Organ transplants and the health care system essay sample

[Health & Medicine](#), [Healthcare](#)



1. Introduction

One of the duties and responsibilities of a health care giver and the health care system is to be updated on the current issues and trends that greatly affect the health profession. Nowadays, healthcare practitioner's especially faces lots of ethical issues and they will still be facing in the future and the more when the technology is getting more developed. One of which is the Organ Transplantations. Organ Transplantation is very rampant especially in countries with rising technologies in health care. If a certain family needs the organ but does not win in the bidding being done, then they would not get the organ. The possibility of replacing diseased organs with those taken from animals or from other human beings was finally realized in the 20th century. The organs most commonly and frequently transplanted are the kidneys, cornea, and the skin. The less frequently transplanted organs are the heart, lungs, pancreas, bone marrow and testicles (Wagman 377).

We can not deny that Organ Donation is a means of showing love and concern to others. It gives a good reputation to the individual, especially when he dies because he has helped someone or has supported someone else's life. But sometimes, the real meaning of giving motivated by love is already out of the context. For people, because of lack of finances gambles to donate a part or an organ.

The term transplant is also used to describe the process of grafting the tissue or organ. Transplants are classified as autografts, isografts, homografts, or heterografts.

1. Discussion

1. Criteria on Donation

There have been a lot of arguments in the past as regards organ donation. Not every one who dies can be a donor. The medical criterion for patients suitable for organ donation has to be rigidly followed once the diagnosis of death is certain. For example, it is absolutely contraindicated to extract organs for donation in cases of sepsis and prolonged shock.

Specific criteria are further indicated for probable donors of kidneys, the most frequently transplanted organs. The requirements state that the donor must be at least 12 months old or at most 60 years old, with no existing nephropathy, malignant process except for brain tumors, diabetes mellitus, systemic angiopathies like arteriosclerosis, transmissible or infectious diseases, serum- positive hepatitis, syphilis, AIDS, collagenous diseases (Wagman 379).

1. Kinds of Transplantation

Autograft. Is the surgical transplantation of an organ from one part of the body to another location in the same individual. Successful autograft's include bone, skin, tendons, muscle, blood vessels, and teeth (Brunner et. al, 565).

Homograft. Is the transplantation of an organ from one individual to another of the same species, for instance, from one human being to another or from one dog to another dog. Kidney transplantations exemplifies this type. The individual from whom the transplant is removed is called a donor; the

individual, who receives the transplant, is the recipient. Successful homografts include such tissues as blood vessels, cartilage, and bone marrow and such organs as kidneys and skin. Other organ homografts, such as heart, liver, lung, and pancreas, have been attempted, but their success has been limited. Organ homografts have a better chance of being successful if the two individuals are related (Brunner et. al, 565)

Heterograft or Xenograft. Is the transplantation of organs between individuals or different species, for instance, from animals to man or from dogs to monkeys. Many types of heterografts are have been attempted, but with few successes (Brunner et. al, 565).

Isograft. Is the transplantation of compatible tissues between two genetically identical persons, example, identical twins. Skin grafts between identical twins are said to be performed without the problem of rejection. Experiments have shown that the closer the donor and the recipient genetically, the longer the transplantation organ will function (Brunner et. al, 565).

1. Problems in Organ Transplantation

A major problem in organ transplants is that of obtaining the organs. There are few organs a person can live without, and many legal and religious problems are involved in obtaining organs from human cadavers. Tissues such as bone, cartilage, blood vessels, corneas, and blood are fairly easily obtained, and many of the tissues can be preserved in saline solution or by refrigeration for up to six weeks. However, organs such as hearts and kidneys must be used immediately after their removal from the donor.

Perhaps the most serious difficulty involving transplants is the reaction—called the immunity or rejection/ reaction—that develops in the body of the person receiving the transplant. In this reaction, the body of the recipient recognizes the graft as foreign tissue and creates antibodies to destroy it. This reaction does not occur with autografts, with isografts, or for reasons not completely understood, with certain homografts, such as bone and cartilage, or heterografts, such as bone.

Early attempts to prevent the body from rejecting transplants consisted of irradiation with massive doses of X rays. This procedure inhibited the immunity reaction against the transplant fairly well, but it also destroyed the ability of the recipient's body to defend against the infections. In the 1980's certain drugs were discovered that help prevent the immunity reaction. These drugs, called immunosuppressives, block the production of lymphocytes, white blood cells that manufacture antibodies.

Immunosuppressives, which include such drugs as cyclosporine and certain corticosteroids, must be taken for the rest of the patient's life (Meltzer 62).

Tissue typing, also called histocompatibility typing, a method of classifying body tissues into groups based on the presence of certain antigens or foreign substances called human leukocyte locus A or HLA antigens pairing persons of similar tissue types as donors and recipients of transplants reduces the risk of rejection.

1. Moral and Ethical Issues

Bioethics is a recently coined word. It comes from “ bio” which means *life* and from “ ethics” which is *morality* . Bioethics is that branch of Ethics which deals directly with the problems of life and dying, of health and of healing. It focuses attention to the need for a healthier world in accordance with the dictates of reason.

As a health care provider, they are face with many ethical issues left and right. These issues sometimes question our integrity as humans with compassion and concern for others. They say that health care providers are sometimes called an accomplice whenever they have done an unlawful thing which is not legal for their chosen profession (Ciabal 150). Respect for persons, justice, and beneficence, autonomy has been a major workhorse in bioethical analysis over the past several decades.

The respect for persons, justice, beneficence and autonomy entails the dignity that we have as human beings. That as human, we have every right to do things and that we should be respected for it. We should respect individuals as well as their lives. As a health care provider, it is our duty to preserve life and not to destroy it. Health care providers often deal with critical situations where human life is at stake, both in the community and in particular health settings. Thus, it is very important that they understand and respect the sanctity of human life. During such situations they may be forced to decide whether or not to perform clinical procedures to preserve health and save the lives of people in a community (Ciabal 59)

Autograft or autotransplant is considered licit for the same reason as surgery. Heterograft involving, animal donors are also considered licit.

Likewise, transplantation of organs obtained from cadavers is licit whenever performed according to civil laws which is the law on which transplants is already force in some countries.

If there is no law on transplantations, then the donor's consent must be obtained prior to his death; otherwise, the relatives must give authorization.

Certitude of death is an important ethical question to be considered in transplants. The success of transplants depends primarily on the prompt disposal of organs for transplants. It must be certain, however, that the donor is dead before the organs are extracted (some organs and tissues can survive vegetatively postmortem) (Ciabab 62).

Homograft or homologous transplant, on the other hand, between two living individuals has become the subject of many arguments among moralists recently. Some reject this as a form of mutilation. However, these transplants are justified today by principles of the society.

Moreover, with advanced medical technology, e. g., mechanical ventilators and other modern equipment, the extraction of organs—kidneys, eyes, heart, bones, etc., from cadavers has been quite successful. Public sentiment is increasingly in favor of postmortem organ donation (Meltzer 59).

Nevertheless, we must consider this with reservation, e. g., personal freedom must be respected and organ donation must not be imposed as an obligation. The donation of organs, manifested or accepted by the family of

the deceased, is a positive gesture because of the nobility and dignity of its motives.

There are certain conditions that regulated transplants between two living individuals.

On the part of the donor, it must be established that the organ is strictly not essential to life; that the donation is voluntary and not demanded, neither obliged nor coerced, even from relatives; that the donor understands clearly the risks involved; and that the donation is done for honorable purposes (Meltzer 50).

On the part of the recipient, it must be certified that the transplant is truly necessary for his/ her death.

As for the operation, it must be known that the operation has a reasonable chance of success and that the benefits for the recipient and the risks for the donor are proportionate.

The informed consent is also one of the moral issues about transplantation.

The health care providers should inform the client regarding the effects, risks, costs of having transplantations and also provide other ways if the client decides the other way around. The donor must decide freely in giving or donate an organ, and that the families of the client should not insist or force the donor to donate and to the extent to blackmail them (Ciabal 66).

Guardians of clients who are not that mentally capable should also be told of the risk and benefits of the procedure. This practice are way beyond the

accepted laws or is immoral in the sense that it deviates or goes over the boundaries of respecting the dignity and liberty of the donor. But the recipients must also be prepared of any complications of the procedure and the health care teams should be prepared to do such interventions for it.

The other ethical problems involving transplants are:

- Determination of the exact moment of death of the donor, before proceeding to the extraction of organs and
- 1. The legal nature of the cadaver, e. g., who has the authority or power over it, who can decide its use for therapeutic scientific purpose (Ciabal 78).

E Cloning

The root word clone means “ twig” in Greek. It denotes the practice of cutting a plant stuck in the soil in which the cut “ twig” portion is able to grow into a new plant of the same genetic composition. As is known in nonsexual reproduction, a clone is an identical duplicate. Cloning is thus understood as a technological process whereby multiple copies of genetically identical organisms or cells or individual genes are produced. Cloning is done by transplanting blasticepts from one embryo into an empty zona pellucida, or nuclei from the cells of one individual into enucleated oocytes (Hughes 767).

Cloning, the act of making an exact replica of another by means of technologically copying the genes or the properties that makes up the organ or a part of a body and even human beings. It has become a controversial

issue for the past decades because of the moral implications it raised. In his article entitled “ *Will We Follow the Sheep* ” the author, Jeffrey Klugger raises several questions surrounding the ethics of cloning.

The first question he asked is, “ Is it wrong to create a clone, presumably a human being, or an organ? Klugger especially pointed out that cloning is especially important for dying persons whose only hope for avoiding death is to find an exact organ donor. However, through this, a scenario is created wherein another person is being raised just to be killed afterwards when he had to donate his organs to the sick person. The next question he raised is, “ Is it wrong to have an offspring who possesses one’s own traits yet is not produced by natural conception? Individuals in the future, who have an egoistic point of view, will be eager to clone themselves to ensure their perpetual existence on earth. There is concern that the concept of individuality will be bypassed in this method. Third, Klugger a raised the question, “ Is it moral to create copies of persons who are considered “ geniuses”, who contributed a lot to human advancement? He points out the argument that it would be good to preserve the “ rare genes” of geniuses for the benefit of future generations. However, he discussed the possibility that given the wrong environment, cloned geniuses might not turn out the way they were expected to become; a “ scientific genius who’s beaten as a child may just become a mad genius”. And lastly, Klugger raised the question “ Is it morally right to clone an organ to help a person to continue his work on earth?” He argued that cloning may just serve the evil intent of dictators to be genetically duplicated to ensure their continued tyrannical rule.

To illustrate his main points Klugger used narrative episodes by pointing differing scenarios where cloning may be applied. Based on these scenarios, he was able to pinpoint to the reader the arguments surrounding those different situations.

Cells maybe cloned by growing them in culture under conditions that promote cell reproduction. Gene maybe cloned by isolating them from the genome of one organism such as a bacterium or yeast. This type of reproductive technology represents the boldest intervention of all. Not only does it remove insemination and fertilization from the relationship, it also removes one of the partners from the whole process (Kozier et. al, 1965).

Advocates of cloning give eugenic justifications, e. g., removal of deleterious genetic material from the genetic pool, and the programming of the genotype in order to maximize certain desirable traits, e. g., intelligence, creativity, or artistic ability, and ingenuity (Higgins 1991).

The process of cloning involves reproducing human beings without any connection with sexuality, cloning could also imply to organs; reproducing organs. It also works against marriage and from marriage; and the dignity of each individual.

Ethics of Cloning

There are certain moral justifications for cloning. According to clinicians and scientists, cloning would help a lot in the improvement of the human race.

- It can prevent genetic disease in a selected posterity

- It can increase scientific knowledge about human body parts
- It can exchange body parts and can enhance social communion

Natural law clinicians pronounced that a strictly therapeutic intervention whose explicit objective is the healing of various maladies such as those stemming from chromosomal defects will, in principle, be considered desirable. Provided, however, that it is directed to the true promotion of the personal well being of the individual without doing harm to his integrity or worsening his conditions in life (Higgins 101). Such an intervention would indeed fall within the logic of the Christian moral tradition.

1. Stem Cells

The stem cells are cells whose functions are still undefined but can fit to any given functions. They only wait for those experts to let them become what they were really intended to be.

III. Conclusion

Healthcare givers in this case, have a lot of moral issues to face with. As a healthcare practitioner they have the duty to take care and preserve human life and dignity. That is, the body we have, is entrusted to us by God and therefore we should not let it be sold. To treat human body parts as commodities violates the Human Dignity. Even if the motive is to help others, the end still just not justifies the means of doing it.

Organ Donation is not that bad at all. If it is being practiced properly, it serves as a symbol of love or concern towards other individuals. People who showed help to those who needed their help will have this dignity inside of

then, have high level of self-worth within themselves, that they have helped someone dying. It is a humane act for an ordinary human being.

Just like the saying in the Bible that tells us that it is better to sacrifice our selves for others sake because our Creator will be greatly proud of this. But currently we can notice that Organ donation or Organ Transplantation is much widespread now than before. Maybe it is because of the sedentary lifestyle that individuals develop that is contributed of the economic status, whether one is poor or rich. And because of this, Transplantation costs much money and many people are attracted to donate because of lack of finances. This is their only resort or opportunity to survive even for a day or a month. They would not mind the sacrifice or pain, but as long as they would gain financially. It would then ruin the real essence of charity, meaning the word “love” is already out of context because it is being replaced of greediness and great need of money because of desperation and poverty. The other problem is that, due to great demands of organ transplantation, Healthcare providers find it hard to choose those who are fitted or those who are healthy for the procedure (Hughes 781).

The issues being raised against this procedure are related towards the patient's rights, in relation to beneficence, autonomy, benevolence, free and informed consent, and common good. Those persons should also be stewards of what God has given to them and should not sell it for money.

Human life is sacred and must be taken care of. As health workers they are face with different changes in the delivery of health care services to the society.

In this situation, the health professionals are in between the Philosophy which God has established in His word and the uprising technology in their fields. They are much affected with it because as nurses, it is their vows and promise to preserve the human life but organ transplantations as understand by some is just totally deviating from God's perspective and in His view in giving.

Some individuals would make it just a business. Yes, their reason might be is to help but underneath it is the idea of making large amounts of money. Health care givers, on the other hand do their part in talking to families who have just lost someone about transplantation.

A health care giver also needs to be educated in a proper way about what organ donation is really all about. It is the health professional's job to talk and approach donors and their families regarding the organ transplantation. They should show the love and support that the family needs.

Whatever reasoning is being done still it violates God's laws. It does not respect the human lives. Nurses are compromising the Sanctity of Human Life. Health care givers are sandwiched in the perspective of the rising technology of this world and Heavenly laws.

Many ethicists find it so immoral to sell an organ because for them, God gave it to you and He entrusted it to you and for you. Therefore, as stewards we should do anything that could break the real purpose of God in us (Drane 218). Health care providers often deal with critical situations where human life is at stake, both in the community and in particular health settings. Thus, it is very important that they understand the sanctity of human life and why it should be preserved. During such situations they may be forced to decide whether or not to perform clinical procedures to preserve health and save the lives of people in a community.

Health care professionals also need to be educated about the meaning of organ and tissue donation. Some have unfounded reservations about approaching individuals or families to consider organ and tissue donation. It is important that some members of the health care team be trained in approaching potential donors and their families in a sensitive way (Drane 221). They need to be able to provide the necessary personal and social support regarding the grieving process. Some health care professionals also need to learn that properly respecting the dead human body is a requirement of our humanness. In order to increase the potential for transplants, some health care professionals have a special responsibility with regard to raising the general level of consciousness of the needs. This should be done in a way that always properly respects patients' rights of confidentiality and that does not detract from communicating other pressing health care issues. The public is entitled to be accurately informed about the medical progress and implications of transplantation (Laqueur 18-19)

Hence, as health care givers they have a great responsibility. So they should do things to educate the individuals in the society about the process. They should explain that organ transplantation is not merely harvesting a person's organs but it has a deeper purpose, a deeper meaning. They should show respect in the patient's body so as not to deviate from the norms and prevent ethicists from arising and in throwing issues that health care providers are much affected of.

Reference:

1. Brunner, K., Suddarith, L. Medical- Surgical Nursing. J. G. Ferguson Publishing Company, 2003.
2. Ciabal, Laura Evelyn. Ethics for Health Care Professionals. Pages 15-153. 2003
3. Drane, James F. Clinical Bioethics. Kansas City: Sheed & Ward, 1994.
4. Higgins, Gregory C. Where do you stand? New Jersey: Paulist Press, 1995.
5. Hughes, Gerald J. Authority in Morals. London: Heythrop Monographs, 1978.
6. Klugger, Jeffrey. " Will We Follow the Sheep?" Time Incorporated. (24 June 2001). Accessed 16 October 2007
7. Kozier et al. Fundamentals of Nursing, Concepts, Process and Practice. Seventh edition. Prentice Hall, 2004.
8. Laqueur, Walter, and Rubin, Barty. The Human Rights Reader. 1999; 2001 . New York: Temple; New American Library. Includes

documents, international agreements, philosophical excerpts;
45-page bibliography.

9. Meltzer, Milton. The Human Rights Book. New York: Farrar, Straus & Giroux, 1999. Brief history, with review of conditions since the International Declaration of Human Rights.
10. Transplantation. New Standard Encyclopedia. Page 363. Volume 17
11. Wagman, R. J. The New Complete Medical & Health Encyclopedia. Little, Brown, 1985.