

Should people be
compensated for
genetic materials?



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Whether people should get financial compensation for their genetic material has come to light after Rebecca Skloot released the book “ the Immortal Life of Henrietta Lacks.” The book is about an African American woman whose cell line called HeLa was used and helped medical research advancement in many ways. Her cells have been sold for billions yet no one knew about her and her family is poor. Many after reading the book believe that her family should be compensated, as they should. People whose genetic material is used by researchers and helps create a profitable drug or product should be financially compensated, because it can lead to more genetic material donations also if researchers can make money then the person who genetic material created the product should get paid.

If people were to get compensated for genetic materials it can lead to more people wanting to donate genetic material. If more people donate then there is more material for researchers to use. In the article “ Paying for Tissue: Net Benefits” written by Scott D Kominers and Gary S. Becker is about the opinion of R. D. Truog who opposes sharing biomedical research revenues with the patients whose tissues enable that research, but somehow believes that compensation would increase tissue donations. Truog believes the possibility of compensation “ might crowd out some individual donations, but other altruism-motivated donations would increase because of compensation, and non-altruistic donations would also increase.” Offering value based compensation to tissue donors would increase the supply of tissues. The majority of patients would likely be willing to donate medical waste in exchange for compensation to share in the rewards of successful

research. Meaning if people were to get compensation then more people will donate which would led to successful research.

If genetic material from someone can be used to create a profitable drug or product, researchers can make money off the product, and if researchers can make money off the product then the person who genetic material created the product should be compensated. An example is John Moore who was talked about in the chapter “ Who Told You You Could Sell My Spleen? ” in the novel “ The Immortal Life of Henrietta Lacks. ” written by Rebecca Skloot is about how Moore was told to sign a form what would have given the doctor full rights to his genetic material, but he did not sign. Later, he found out his cell line created anti- cancer drug , Moore then asks Golde (UCLA researcher who examined Moore’s spleen) if his tissue has commercial value Golde denied. But it wasn’t the truth. Moore’s cell line “ Mo” were worth 3 billion and Dr. Golde made lots of money off Moore’s genetic material, therefore Moore himself should have received compensation, because without his cells a huge contribution to curing this form of cancer would be lost.

Although many believe that people should get financial compensation others don't believe that they should. The article “ Should You Be Compensated for Your Medical Waste? ” written by Ronald Bailey is about why people shouldn't get compensated for blood samples given and also any tissue left behind after procedures. Bailey believes that compensating people is useless and would slow down the medical progress. And believes unlike HeLa, in which one patient's biospecimens led to a big advancements, most developments come from studying materials from many patients together each biospecimen hardly contributes to the result. Therefore, they shouldn't be compensated. Also, in the article “ Donation and compensation in research: Should patients be paid ” written by Tom Ulrich is about whether people who donate tissues should get a reward for their tissues. The author Tom Ulrich gets an opinion on the situation from Cc specialist and medical ethicist at Boston Children's Hospital Robert Truog. Truog came up with two main points for why people shouldn't be compensated. One being “ lottery ticket”, which means some tissues will become big for research and other tissues can be a waste therefore if they agree to compensate the tissues that help they will have to compensate everyone that donates. The second one is that when the tissue is first removed it can be useless, but the work put in to see if tissues are worth it. Which means they believe that they should starting paying people for the byproduct. This is not fair because there wouldn't be a byproduct if there wasn't genetic material to help create it.

Overall, people whose genetic material is used by researchers and helps create a profitable drug or product should be financially compensated,

because it can lead to more genetic material donations also if researchers can make money then the person who genetic material created the product should get paid.

Works Cited

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- Skloot, Rebecca. "Who Told You You Could Sell My Spleen?" *The Immortal Life of Henrietta Lacks*, Vayu Education of India, 2019, pp. 199-205.
- Kominers, Scott D., and Gary S. Becker. "Paying for Tissue: Net Benefits." *Science*, American Association for the Advancement of Science, 14 Sept. 2012, science.sciencemag.org/content/337/6100/1292. 2. full.
- Ulrich, Tom. "Donation and Compensation in Research: Should Patients Be Paid?" *Vector*, 22 Mar. 2017, vector.childrenshospital.org/2012/07/donation-and-compensation-in-research-should-patients-be-paid/.

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Bailey, Ronald. "Should You Be Compensated for Your Medical Waste?" *Reason. com*, Reason, 21 Apr. 2017, reason.com/2017/04/21/should-you-be-compensated-if-your-medica/.

The article "Should You Be Compensated for Your Medical Waste?" written by Ronald Bailey is about why people shouldn't get compensated for medical

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waste. Who believes that it's such requirements are largely useless and would substantially slow down medical progress. And believes unlike HeLa, in which one patient's biospecimens led to dramatic advancements, most developments come from studying materials from many patients — each biospecimen contributes only marginally to the result.

Skloot, Rebecca. "Who Told You You Could Sell My Spleen?" *The Immortal Life of Henrietta Lacks*, Vayu Education of India, 2019, pp. 199–205.

In the chapter *Who Told You You Could Sell My Spleen?* Written by Rebecca Skloot is about how John Moore is asked to fill out form that lets him choose if UCLA can have the right over his cell line, Moore then asks Golde if his tissue has commercial value Golde denies but it wasn't the truth. Moore's cells were worth 3 billion

Kominers, Scott D., and Gary S. Becker. "Paying for Tissue: Net Benefits." *Science*, American Association for the Advancement of Science, 14 Sept. 2012, science.sciencemag.org/content/337/6100/1292. 2. full.

In the article "Paying for Tissue: Net Benefits" written by Scott D. Kominers and Gary S. Becker is about the opinion of R. D. Truog opposes sharing biomedical research revenues with the patients whose tissues enable that research, but also believes. They argue that might reduce tissue donation by "crowding out" altruistic motivations. The possibility of compensation might crowd out some individual donations, but other altruism-motivated donations would increase because of compensation, and non-altruistic donations would also increase. Offering value-based compensation to tissue donors would likely boost tissue supply. The great majority of patients would likely be <https://assignbuster.com/should-people-be-compensated-for-genetic-materials/>

willing to donate waste tissue in exchange for either a fixed fee or a chance to share in the rewards of financially successful research.

Ulrich, Tom. “ Donation and Compensation in Research: Should Patients Be Paid?” *Vector* , 22 Mar. 2017, vector. childrenshospital.org/2012/07/donation-and-compensation-in-research-should-patients-be-paid/.

In the article “ Donation and compensation in research: Should patients be paid” written by Tom Ulrich is about whether or not people who donate tissues should get a reward for their tissues. The author Tom Ulrich also gets an opinion on situation from cc specialist and medical ethicist at Boston Children’s Hospital Robert Truog, who at first believed that Henrietta’s family should’ve received compensation had a change in mind once reviewing the question with colleagues after being approached from clinicians from Dana-Farber Cancer Institute. two main points one being “ lottery ticket” which means some tissues will become big for research and other tissues can be a waste therefore if they agree to compensate the tissues that help they will have to compensate everyone that donates. The second one is that when the tissue is first removed it can be useless, but the work put in to see if tissues is worth it. Which means they believe that they should starting paying people for the byproduct.