

By Dr Wong Chiang Yin, SMA President

## Legalising Organ Trading

Someday, I may need a kidney or liver transplant. And someday, I will die. The former is a possibility and the latter a certainty.

I have been in the SMA Council since 1995 and I have been SMA President since May 2006. Organ trade is one of the most difficult issues I have faced in these eventful 13 years in the Council, and certainly the most vexing in these last 27 months I have been President.

Let me clarify at the outset that the views expressed in this column are my own and do not represent the official position of the SMA. Indeed, the 16 persons who make up the current SMA Council do not have unanimity of views on this issue. In this respect, I think organ trade is like abortion in some ways – we can debate until eternity and there will not be universal agreement on the subject. There will always be supporters and conscientious objectors to the issue of abortion in the medical profession.

In the same vein, I can understand and sympathise with patients who can benefit from a kidney or a liver transplant – the pain and suffering they and their families go through. I fully understand their desire to have a transplant, legal or otherwise. I dare not pass judgment on those who attempt to procure an organ for transplant illegally. I will leave that to the judges, for it is their grave estate and bilious portion to judge their fellow men when required to do so.

Which is the easier position for SMA to adopt? Most would think that it is far easier for SMA to take the position of opposing legalising organ trade because that is taking the moral high-ground which is more defensible. Taking the position that it is alright to legalise organ trade would therefore seem a more difficult position for a medical association to adopt. I think it is with this expectation that SMA will “take the easy way out” and oppose organ trade,

which actually makes opposing organ trade a more difficult, courageous and less persuasive position for SMA to adopt.

For now, allow me to just share with you my personal views.

If there is one consensus I can pick up from the proponents of legalising organ trade, it is that organ trade has to be regulated, and regulated well, to prevent exploitation of poor sellers (not donors) of organs. Only the completely cavalier would propose that Singapore legalises organ trade without regulation and supervision.

Questions we need to ask in the process of setting a regulatory framework to address the practicalities of legalising organ trade would include:

- Do we need to protect poor organ sellers to some degree, or not at all?
- If we need to protect them, do we want to address the issue of exploitation of poor organ sellers? For example, do we accept the stand that any price is plausible as long as the seller and buyer agrees? When is a kidney too cheap? Or it is never too cheap? Is \$500 or \$5 too cheap?
- If we need to protect them, how do we define exploitation so that we can decide if exploitation and coercion have occurred or not? How do we set these standards so that exploitation is definable? Are these standards universal or relative to a seller's poverty?
- Do we allow middlemen to derive a commission? If “yes”, why and how much? And if “no”, why not?
- What if the seller suffers complications or even death arising from the surgery? Is he or his family entitled to compensation? Again, why “yes” and if so how much and how is this figure derived? Who pays? If “no”, why?



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- We need to deal with “who” regulates organ trade. Obviously the government in some form or the other has to regulate because professional bodies have no regulatory bite. Does the government want to assume the role of protector of organ sellers?

Of course, as a country, we can also adopt the position that exploitation is not possible if a price has been agreed upon, or exploitation is not important enough to address so that regulation of organ trade is unnecessary or minimal at best. But I think that is too radical a view which most in Singapore or the world will find hard to accept, even amongst supporters of legalising organ trade.

All these questions have to be answered clearly one way or the other if we want to legalise

Pledge professions. For easy reference, the Pledge is reproduced here:

*“I solemnly pledge to dedicate my life to the service of humanity; give respect and gratitude to my teachers; practice my profession with conscience and dignity; make the health of my patient my first consideration; respect the secrets which are confided in me; uphold the honour and noble traditions of the medical profession; respect my colleagues as my professional brothers and sisters; not allow the considerations of race, religion, nationality or social standing to intervene between my duty and my patient; maintain due respect for human life; use my medical knowledge in accordance with the laws of humanity; comply with the provisions of the Ethical Code; and constantly strive to add knowledge and skill. I make these promises solemnly, freely and upon my honour.”*

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organ trade. We may not agree on whether we should legalise organ trade or not, but most of us agree that the worst possible outcome is to have a badly regulated organ trade when the original intention was to regulate it to a significant extent and regulate it well.

Finally, we need to address the issue of values. By legalising organ trade, what are the messages we are sending to the world, to our healthcare workers and to our next generation? This is not an issue of us getting off the moral high-horse but a very real problem. How will the world see us? Or do we not care about how the world perceives Singapore and the values Singapore stands for? Indeed, Singapore has always dared to be different. But this is not something as rational as ERP, trite as banning chewing gum or common as having casinos. Whether we want to communicate or not, as long as we make a choice one way or the other on the issue of organ trade, we are communicating to those around us on what values we stand for. Because we do not live alone, communication is inevitable.

Finally, as a profession and as individual doctors, we have to examine how legalising organ trade will fit into what our SMC Physician’s

We can choose to believe one of the following:

- Organ trade is compatible with the current SMC Physician’s Pledge.
- Organ trade is incompatible with the current SMC Physician’s Pledge and organ trade cannot be pursued.
- The SMC Physician’s Pledge needs to be amended to be compatible with organ trade so that the latter can take place.
- We should just do away with the Pledge so as to avoid any philosophical conundrum or incongruence in logic.

My personal position is that I am against organ trade. I neither claim this to be superior to other positions nor persuade you to support my position. I have certain philosophical, religious and humanitarian beliefs which have led me to this position. I will not elaborate on these beliefs in detail here as many other commentators have touched on them in recent days with far more eloquence than I am capable of. Suffice to say that in addition to these beliefs of mine, this is a personal position I have arrived at because I am unable to answer many of these aforesaid questions

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which I have asked myself over the last few weeks. A key player in all this is the government.

I could have avoided writing about organ trade. But in writing this article, I think I have been honest with myself and truthful with you. It has been a humbling experience for me. As SMA members, you are entitled to know what your President personally feels about this issue. A President having a position on such an important subject that is not agreeable with some members is still better than having a President with no position at all. I sincerely ask for your forgiveness if I have offended anyone in this article.

On Saturday, 12 July 2008, 3 pm, the SMA Council held an extraordinary Council Meeting. We hold our regular meetings on Wednesday or Thursday evenings at 9 pm (because that is when the GPs can make it). We had debated the issue of organ trade for some two weeks via more than a hundred emails circulating among the 16 Council Members. It was now time to take a public stand on this and so the Council met to discuss what would be the definitive position of the 49th SMA Council. It was not a unanimous position but the overwhelming majority (more than three-quarters) voted for the following position statement:

***“The SMA is not supportive of legalising organ trade. Apart from the well-recognised***

***short and long-term medical risks to the organ seller, the potential for abuse and exploitation of socio-economically disadvantaged groups and individuals, and the insurmountable difficulties of enforcing organ trade regulations in a transparent and equitable way make it inappropriate for SMA to support any move towards legalising organ trade.”***

That evening, I attended my class reunion at the China Club in town. It was the first reunion we have ever had since we graduated from NUS in 1994. It was a wonderful evening made more memorable by the fireworks that lit the night sky as part of the National Day Parade Rehearsal. Later in the night, I remembered that our class was the first batch of housemen to take the SMC Physician’s Pledge in 1995. I then realised that I understood and could appreciate the Pledge better in the light of the extraordinary Council Meeting that had just been held a few hours earlier.

Someday, we may need a kidney or liver transplant. And someday, we will die. The former is a possibility and the latter a certainty. The medical profession does not have all the answers or one correct answer between certainty and possibility. Notwithstanding SMA’s position on the issue of organ trade, I hope society and the mass media will respect this diversity of opinions among doctors. ■



View of fireworks from China Club, where the class of MBBS 1994 – the first batch of housemen to take the SMC Physician’s Pledge – held their reunion recently