

The Iranian Kidney Market: An Ethical Nightmare

Lena Mardini

Ramapo College of New Jersey, Mahwah, NJ, 07430

Abstract

In the aftermath of the 1979 Iranian revolution, the need for kidney donors skyrocketed. The Iranian government established a regulated system in the late 1980s to support those who could not afford to buy their own kidney (Griffin 2007). Iran is the only country in the world which has a regulated legal system that allows for the sale of kidneys from live individuals. This solution has almost entirely eliminated the Iranian kidney shortage, but poses significant ethical concerns for vendors. Most Iranian vendors are impoverished individuals with few other options to supplement their lack of income. I argue that increased choices for impoverished individuals can actually hurt them more than help them. I favor philosopher Julian Koplin's claim that societal "pressure with the option to vend," allows for the coercion of individuals living in poverty. Additionally, preliminary empirical evidence from Iran shows that vendors actually suffer psychological and physical effects from vending (Zargooshi 2001). The overwhelming argument in favor of the Iranian market is that its prohibition would be rooted in misplaced paternalism. I will examine Bioethicist Erik Malmqvist's argument that a ban on kidney sales is merely widely accepted "soft paternalism," as it is not possible to establish that vendors act fully autonomously (Malmqvist 2014). In this paper I will argue that the legal sale of kidneys from live donors in Iran is unethical and the policy should be abandoned because it encourages the exploitation of impoverished individuals.

Bibliography

- Crowley-Matoka, Megan. 2014. "Bioethical Approaches to Commodification" In Bioethics edited by Bruce Jennings, 451-457. Farmington Hills, MI: Macmillan Reference USA, https://link.gale.com/apps/doc/CX3727400110/GVRL?u=ramapo_main&sid=bookmark-GVRL&xid=957d4457.
- Ghods, Ahad., Shekoufeh, Savaj. 2006. "Iranian Model of Paid and Regulated Living-Unrelated Kidney Donation." Clinical Journal of the American Society of Nephrology 1, no. 6: 1136-1145. <https://doi.org/10.2215/CJN.00700206>.
- Griffin, Anne. 2007. "Kidneys on demand." BMJ 334, no. 502. 10.1136/bmj.39141.493148.94
- Kamali Dehghan, Saeed. 2012. "Kidneys for Sale: Poor Iranians Compete to Sell Their Organs." The Guardian May 27, 2012. <https://www.theguardian.com/world/2012/may/27/iran-legal-trade-kidney>.
- Koplin, Julien. 2014. "Assessing the Likely Harms to Kidney Vendors in Regulated Organ Markets." American Journal of Bioethics 14, no. 10: 7-18. <https://doi.org/10.1080/15265161.2014.947041>
- Koplin, Julien. 2018. "Choice, Pressure and Markets in Kidneys." Journal of Medical Ethics 44, no. 5: 310-313. <https://www.jstor.org/stable/26879727>.
- Malmqvist, Erik. 2014. "Are Bans on Kidney Sales Unjustly Paternalistic?." Bioethics 28 no. 3: 110-118. <https://doi.org/10.1111/j.1467-8519.2012.01984.x>
- Moeindarbari, Tannaz., Feizi, Mehdi. 2022. "Kidneys for Sale: Empirical Evidence From Iran." Transplant international: Official Journal of the European Society for Organ Transplantation 35. 10.3389/iti.2022.10178.
- Zargooshi, J. 2001. "Quality of life of Iranian kidney 'donors'". The Journal of Urology 166, no. 5: 1790-1799. [https://doi.org/10.1016/S0022-5347\(05\)65677-7](https://doi.org/10.1016/S0022-5347(05)65677-7)
- C.W. Briggs Company. 1890. Duel between Hamilton and Burr, 1804., Collodion on Glass, 3 1/4 X 4 in., George Eastman House, https://library-artstor-org.library2.ramapo.edu:2443/#/asset/AEASTMANIG_10313028682. (accessed March 24, 2022).

The Harm in Increased Choices

- Increased choices for impoverished individuals can do more harm than good
- Bioethicist Julian Koplin articulates this idea in his example of the legality of dueling
 - Alexander Hamilton famously killed in a duel with US Vice President Aaron Burr after being challenged by Burr
 - Having the very choice of dueling a lose-lose situation regardless of whether or not a person chooses to participate due to social pressure
 - Impoverished Iranians suffer from similar increased options



Hamilton and Burr's Famous Duel

- Before the duel, Hamilton recounted "five moral, religious, and practical objections to dueling" but opted to participate anyway (Koplin 2018, 310)
- Had Hamilton declined, he would have been publicly scrutinized

C.W. Briggs Company. *Duel between Hamilton and Burr, 1804.*, 1890. George Eastman House, Artstor Database, JPG, https://library-artstor-org.library2.ramapo.edu:2443/#/asset/AEASTMANIG_10313028682. (accessed March 24, 2022).

Pressure With The Option to Vend

- Koplin distinguishes between two forms of coercion: "pressure to vend" and "pressure with the option to vend" (Koplin 2018, 310)
 - Pressure to vend:** Direct coercion to vend
 - Pressure with the option to vend:** When one opts to vend after weighing the economic and social consequences as a result of not doing so
- Violation one of the most foundational tenets of ethical organ donation: that the choice to be a living donor "must be made freely and autonomously" (Koplin 2018, 310)

Insufficient Supplement of Income

- Koplin argues that the market wrongfully encourages "the idea that 'spare' organs are rightfully regarded as a fungible possession" (Koplin 2018, 311)
- The idea that kidney vending is equivalent to other hazardous jobs is a false equivalency (Koplin 2014, 9)
 - Preliminary evidence shows vendors suffer mentally and physically
 - 85% of vendors would not donate again if they could go back, 70% felt they were "isolated from society," 71% experienced "severe de novo postoperative depression," and 60% claimed to have "anxiety" directly after undergoing the procedure (Zargooshi 2001)

The Anti-Paternalist Rebuke

- Proponents of a regulated market argue that attempts to protect impoverished populations through bans are unjustly paternalistic
- Swedish medical ethicist Erik Malmqvist distinguishes between two types of paternalism
 - Soft paternalism** - Widely accepted and common interference with "substantially non-autonomous conduct" (Malmqvist 2014, 7)
 - Hard paternalism** - Less widely accepted interference with "substantially autonomous conduct" (Malmqvist 2014, 7)
- Malmqvist uses the definition and example of Franklin Miller and Alan Wertheimer's "group soft determinism" in his argument (Malmqvist 2014, 114).
 - They argue that some patients who are not doctors have the "requisite knowledge" to safely decide how to administer their medication, though most patients do not have this knowledge.
 - As it is impossible to distinguish between which patients do or do not, we do not allow patients to obtain certain medications without prescriptions (Malmqvist 2014, 114).
- A ban of the kidney market would be based on analogous soft paternalistic logic, as it is impossible to determine which Iranian vendors act autonomously or not