

ETIČKI ASPEKTI TRANSPLANTACIJE ORGANA I TRANSPLANTACIJSKI TURIZAM

Damir Peličić^{1,2}

¹ Centar za nauku, Klinički centar Crne Gore, Podgorica, Crna Gora

² Medicinski fakultet Univerziteta Crne Gore, Podgorica, Crna Gora

* Korespondencija: dr sc. med. Damir Peličić, Centar nauke, Klinički centar Crne Gore, Podgorica, Crna Gora; Medicinski fakultet, Univerzitet Crne Gore, Ljubljanska bb, 18000 Podgorica, Crna Gora; e-mail: damir.pelicic@t-com.me

SAŽETAK

Savremena medicina i tehnologija su od sredine dvadesetog veka znatno napredovale, ali transplantacijska medicina je još uvek tema o kojoj se raspravlja, kako na medicinskom, tako i na religijskom, pravnom i etičkom polju. Da bi se izvršila transplantacija organa, bilo da je reč o srodnoj, nesrodnoj ili kadaveričnoj transplantaciji potrebno je da se ispuni niz uslova kako bi se uradila adekvatna priprema bolesnika i potencijalnog donora. Za ovaj pregledni rad služili smo se relevantnim literaturalnim podacima koristeći baze, kao što su: PubMed, SCOPUS, Srpski citatni indeks i dr. Sve publikacije odnosile su se na etičke principe i pravne aspekte transplantacije i donacije organa, kako u svetu tako i u Crnoj Gori. Osvrnuli smo se na Istanbulsku deklaraciju koju je potpisala i Crna Gora.

Cljučne reči: Donacija organa, Istanbulska deklaracija, transplantacija, religija, etika

Uvod

Transplantacija i donacija organa je započela da se primenjuje u drugoj polovini dvadesetog veka i ovaj modalitet zamene funkcije solitarnih organa je znatno produžio život bolesnika i poboljšao njihov kvalitet života, ali transplantacijska medicina i pored biomedicinskih i tehnoloških dostignuća, još uvek predstavlja složenu etičku dilemu (1). Savremena medicina i tehnologija su znatno napredovale, ali transplantacijska medicina je još uvek tema o kojoj se raspravlja, kako na medicinskom, tako i na religijskom, pravnom i etičkom nivou (1). Transplantacija je prihvaćena kao tretman izbora za bolesnike sa terminalnim stadijumom bolesti solidnih organa (2), ali bez obzira na etičke i pravne dileme, transplantacija organa je jasno definisana i medicinski opravdana intervencija (3). Određivanje prioriteta u odluci o transplantaciji organa može biti i etička dilema uzrokovana nedostatkom organa, kao i religijskim i filozofskim poimanjem smisla života i smrti (4,5).

Etički aspekti transplantacije organa i transplantacijski turizam

Kroz istoriju medicine razvijale su se nove terapijske metode lečenja koje su omogućavale transplantaciju tkiva i organa uspešnom, ali takođe ovo polje medicine je stalno pod pritiskom brojnih etičkih i moralnih dilema (6). Trgovina organima strogo je zabranjena od strane nekoliko nefroloških društava u mnogim zemljama sveta, kao i u Crnoj Gori. Istraživanja nam sugeriše da je ova praksa široko rasprostranjena i toleriše se u mnogim zemljama, pa su u nedostatku univerzalnog zakona moguće i određene zloupotrebe (7). Uprkos Istanbulskoj deklaraciji koja je strogo definisala stav protiv trgovine organima, kontroverza oko plaćenog doniranja organa u nekim državama ostaje otvorena (8). Što se tiče religijskih aspekata, Islam je religija koja podrazumeva da svaki pojedinac poseduje dušu i telo. Etička pitanja vezana za transplantaciju i doniranje organa u Islamu proizilaze iz islamskih principa, a Časni Kur'an kaže „A

ETHICAL ASPECTS OF ORGAN TRANSPLANTATION AND TRANSPLANTATION TOURISM

Damir Peličić^{1,2}

¹ Center for Science, Clinical Center of Montenegro, Podgorica, Montenegro

² Faculty of Medicine, University of Montenegro, Podgorica, Montenegro

* Correspondence: Damir Peličić, RN, PhD, Center of science, Clinical centre of Montenegro, Podgorica, Montenegro; Faculty of Medicine, University of Montenegro, Ljubljanska bb, 18000 Podgorica, Montenegro; e-mail: damir.pelicic@t-com.me

SUMMARY

Modern medicine and technology have advanced significantly since the mid-twentieth century, but transplant medicine is still a hotly debated topic, both medically and religiously, legally and ethically. In order to carry out an organ transplant, whether it is related, unrelated or cadaveric transplantation, a number of conditions must be met in order to adequately prepare the patient and the potential donor. For this review, we used relevant literary data using databases such as: PubMed, SCOPUS, Serbian Citation Index, etc. All publications related to ethical principles and legal aspects of transplantation and organ donation, both in the world and in Montenegro. We referred to the Istanbul Declaration, which was also signed by Montenegro.

Key words: Organ donation, Istanbul Declaration, transplantation, religion, ethics

Introduction

Transplantation and organ donation began in the second half of the twentieth century and this modality of replacing the function of solitary organs extends significantly the lives of patients and improves their quality of life, however, transplantation medicine, despite its biomedical and technological achievements, still presents a complex ethical dilemma (1). Modern medicine and technology have improved considerably, but transplantation medicine is still a topic of debate at the medical, religious, legal and ethical level (1). Transplantation has been accepted as the treatment of choice for patients with terminal disease of solid organs (2), but regardless of ethical and legal dilemmas, organ transplantation is a clearly defined and medically justified intervention (3). Determining priorities while making decision about organ transplantation can be an ethical dilemma caused by the lack of organs, as well as by religious and philosophical understanding of the meaning of life and death (4,5).

Ethical aspects of organ transplantation and transplant tourism

Throughout the history of medicine, new therapeutic methods of treatment were developed, which enabled successful tissue and organ transplantation, however, this field of medicine is also constantly under the pressure of numerous ethical and moral dilemmas (6). Trade in organs has been strictly prohibited by several societies of nephrology in many countries of the world, as well as in Montenegro. Research suggests that this practice is widespread and that it is tolerated in many countries, and therefore, in the absence of universal law, certain abuses are possible (7). Despite the Istanbul Declaration, which strictly defined the position against organ trafficking, the controversy related to the paid organ donation in some countries remains open (8). As far as religious aspects are concerned, Islam is a religion that assumes that each individual has a body and a soul. Ethical issues related to transplantation and organ donation in Islam arise from Islamic principles, and

ko bude takav, ako ikada oživi dušu, biće kao da je dao život celom čovečanstvu” (9). Katolička crkva se ne protivi transplantaciji i doniranju organa, već se naprotiv poziva na poruku pape Ivana Pavla II, koja glasi „Ko je rekao da jeste greh zakopati sve što čoveku može poslužiti” (10). U literaturi nismo pronašli da se pravoslavna crkva protivi donaciji organa ili da o tome navodi svoj stav (11).

Svedoci smo da trgovina organima i transplantacioni turizam, postoji u svetu, a posebno u nerazvijenim zemljama (12). Istanbulska deklaracija sugeriše da su siromašni ljudi prinuđeni da prodaju svoje organe i da su time eksploatisani od strane ljudi koji dolaze iz bogatih zemalja da bi im se uradila transplantacija. Učesnici samita u Istanbulu su zaključili da transplantacijski komercijalizam, koji cilja na ranjive grupe ljudi iz siromašnih zemalja, treba sistem da zaštiti od eksploatacije i potrebno je razvijati Nacionalne programe za transplantaciju i doniranje organa, kako bi se ovaj trend smanjio ili eliminisao (13). Studije rađene u Sjedinjenim Američkim Državama (SAD) ukazuju da zbog stalnog nedostatka donora organa, transplantacijski turizam se sve više razvija i do danas nije bilo dovoljno objavljenih radova koji bi pomogli u adekvatnom vođenju programa američkih transplantacijskih centara u vezi s transplantacijskim turizmom (14,15). Prema procenama svetske zdravstvene organizacije (SZO), u nekim azijskim zemljama, poput Indije, Indonezije, Izraela, Kine, Pakistana i latinoameričkim zemljama, poput Ekvadora i Bolivije, svake godine se uradi oko 10.000 protivzakonitih transplantacija i godišnja zarada od ovih kriminalnih radnji dostiže oko milijardu američkih dolara (16).

Najveća smrtnost od posledica infekcije i rano odbacivanje transplantiranog organa, pojava dijabetesa kao posledice neadekvatnog doziranja kortiko i imunosupresivne terapije dešava se kod pacijenata kojima je nelegalno urađena transplantacija organa (17).

Vlada Narodne Republike Kine je osudila organizacije za transplantaciju i proglasila je nezakonitim davanje organa za transplantaciju stranim turistima od zatvorenika nad kojima je izvršena egzekucija (18). U Indiji trenutno postoji preko 120 centara za transplantaciju organa gde se obavi od 3.500 do 4.000 transplantacija bubrega godišnje. Uprkos zakonu o transplantaciji koji je donet u Indiji 1994. godine, indijski mediji redovno izveštavaju o trgovini organima, a posebno trgovini

bubrega (19). Kako bi se zaustavio transplantacijski turizam i obezbedio optimalan tretman za građane sa terminalnom bubrežnom insuficijencijom, Crna Gora je u septembru 2012. godine izvršila prvu kaudaveričnu transplantaciju bubrega.

Uprkos činjenici da je transplantacija organa produžila i poboljšala živote mnogih bolesnika širom sveta, rasprostranjeni nedostatak donora i dalje je glavni faktor koji je doveo do trgovine organima. Procenjuje se da 10% transplantacija organa u svetu uključuje ovu praksu, što čini čak dve trećine transplantacija u Pakistanu za primaoce organa iz inostranstva (20-23). Skupština Svetske zdravstvene organizacije je 2004. godine pozvala države članice da zaštite siromašno i ugroženo stanovništvo od eksploatacije kroz praksu ilegalne trgovine organima, koja je postala raširena širom sveta. U 2008. godini, Međunarodna zajednica za transplantaciju organa sazvala je samit stručnjaka za transplantaciju iz oblasti, pravnih stručnjaka i etičara za borbu protiv trgovine organima, transplantacijskog turizma i komercijalizma iste, što je rezultiralo Istanbulsom deklaracijom (22).

Milijić i sardanici navode da je uzrok malog broja donora organa u Srbiji povezan sa neobaveštenošću, zatim sa strahom od doniranja organa i dilemama oko etičkih i pravnih pitanja vezanih za transplantaciju organa (24). Studija preseka sprovedena u Crnoj Gori, autora Peličića i saradnika, na populaciji od 400 ispitanika, zdravstvenih radnika i opšte populacije koja se odnosi na socio-demografske i verske aspekte transplantacije organa, ukazuje da zdravstveni radnici i opšta populacija u Crnoj Gori smatraju da religija nema uticaja na negativne stavove prema transplantaciji i doniranju organa, ali da su zabrinuti da se organi neće koristiti u prave svrhe (25). Studija o etičkim aspektima transplantacije u Crnoj Gori ukazuje da je u predlogu mera potrebno osmisliti strategiju kako bi se povećalo poverenje da će se doniranje organa vršiti samo u prave svrhe, kako bi se izbegle zloupotrebe i gubitak poverenja od strane građana (26). Od septembra 2012. godine, kada je uz podršku Kliničko bolničkog centra u Zagrebu i medicinskog tima Kliničkog centra Crne Gore u Podgorici, obavljena prva transplantacija organa, smanjen je broj pacijenata koji su plaćali organe, a posebno bubrege, u odnosu na period pre uvođenja ovog programa transplantacije. Međutim, ako kontinuirano ne razvijamo program transplantacije organa od preminulog donora, u budućnosti se

the holy Quran says: “and whoever is like that, if he ever revives soul, it will be as if he gave life to all mankind” (9). The Catholic Church is not opposed to transplantation and organ donation, but on the contrary, it refers to the message of Pope John Paul II, which reads: “who said that it is a sin to bury everything that can be useful to a man” (10). We have not found in the literature that the Orthodox Church is opposed to organ donation or that it stated its attitude towards that (11).

We are witnesses that organ trade and transplant tourism exist in the world, especially in underdeveloped countries (12). The Istanbul Declaration suggests that poor people are forced to sell their organs and that they are exploited by people who come from rich countries to get a transplant. The participants of the summit in Istanbul concluded that transplant commercialism targets vulnerable groups of people from poor counties, who need to be protected from exploitation by the system, and that it is necessary to develop National Programs for transplantation and organ donation in order to reduce or eliminate this trend (13). Studies, which have been conducted in the United States of America (USA), indicate that, due to the constant lack of organ donors, transplant tourism is increasingly developing and there have not been enough published studies that would help to adequately manage the programs of American transplantation centers related to transplant tourism (14,15). According to the estimates of the World Health Organization (WHO) in some Asian countries, such as India, Indonesia, Israel, China, Pakistan and Latin American countries, such as Ecuador and Bolivia, about 10,000 illegal transplants are carried out every year, while the annual income from these criminal activities reaches about billion US dollars (16).

The highest mortality as a result of infection and early rejection of the transplanted organ, the occurrence of diabetes as a result of inadequate dosing of corticosteroids and immunosuppressive therapy appears in patients who illegally underwent organ transplantation (17).

The government of the People’s Republic of China condemned transplant organizations and declared that it is illegal to give organs from executed prisoners to foreign tourists (18). There are currently more than 120 centers for organ transplantation in India, where 3,500 to 4,500 renal transplantations are done annually. Despite the

transplant law, which was passed in India in 1994, the media in India regularly report on organ trafficking, especially kidney trafficking (19). In order to stop transplant tourism and ensure the optimal treatment for citizens with terminal kidney failure, the first cadaveric kidney transplant was done in Montenegro in 2012.

Despite the fact that organ transplantation has prolonged and improved the lives of many patients around the world, the widespread lack of donors is still a major factor that has led to organ trafficking. It has been estimated that 10% of organ transplants worldwide include this practice, which makes as many as two-thirds of transplants in Pakistan for foreign organ recipients (20-23). In 2004, the Assembly of the World Health Organization called member states to protect the poor and endangered population from the exploitation through the practice of illegal organ trade, which has become widespread around the world. In 2008, the International Organ Transplantation Community convened a summit of transplantation experts from that field, legal experts and ethicists to combat organ trafficking, transplant tourism and commercialism, which resulted in the Istanbul Declaration (22).

Milijić and associates claim that the cause of the small number of donors in Serbia is related to lack of information, followed by fear of organ donation and dilemmas regarding ethical and legal issues related to organ transplantation (24). A cross-sectional study by Peličić and associates, which was conducted in Montenegro on the population of 400 respondents, including healthcare workers and general population, and which referred to the socio-demographic and religious aspects of organ transplantation, showed that health workers and general population in Montenegro believe that religion has no influence on negative attitudes towards transplantation and organ donation, but that they are worried that the organs will not be used for the right purposes (25). A study on the ethical aspects of transplantation in Montenegro indicates that a strategy needs to be developed within the proposed measures in order to increase trust that organ donation will be done only for the right purposes, so that the abuses would be avoided, as well as loss of trust of citizens (26). Since 2012, when the first organ transplant was performed with the support of the Clinical Hospital Center in Zagreb and the medical

može očekivati transplantacijski turizam, a naša država treba da uloži više napora ukoliko želimo da unapredimo program transplantacije u Crnoj Gori (26). Iz svega navedenog, nameće se pitanje, šta to nauka može da uradi za dobrobit bolesnika i šta zdravstveni radnik sme da uradi za njega, kako bi mu olakšao i produžio životni vek i poboljšao njegov kvalitet života, a da time ne ugrozi život potencijonalnih donora i primaoca organa (27).

Zaključak

Ovo je složena tema koja zahteva informacije, ne samo iz oblasti medicinskih istraživanja, već i na pravnom, religijskom i etičkom polju. Prilikom pripreme donora i recipijenta za transplantaciju organa, pored medicinskih indikacija, potrebno je poštovati Istanbulsku deklaraciju, posebno etičke i pravne norme kako bi se izbegle zloupotrebe u vezi sa transplantacijom organa. Ova tema je predmet kontinuiranog razmatranja mnogih naučnika i istraživača, jer ni jedno polje u biomedicini nije toliko osetljivo po pitanju etičkih, pravnih i religijskih dilema, kao što je to transplantacijska medicina. Naučnici u svetu navode da je transplantacijski turizam u stalnom porastu i pacijenti mogu biti izloženi riziku od većeg broja posttransplantacijskih komplikacija (najčešće infekcija koje su rezistentne na antibiotike, neadekvatne primene imunosupresivne terapije, neadekvatne nege i rizika od krvlju prenosivih infekcija).

Konflikt interesa

Autor je izjavio da nema konflikta interesa.

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team from the Clinical Center of Montenegro in Podgorica, the number of patients who paid for organs, especially kidneys, has decreased in the period before the introduction of this transplant program. However, if we do not continuously develop the program of organ transplantation from a deceased donor, transplant tourism can be expected in the future, and our country should make more efforts if we want to improve the transplantation program in Montenegro (26). Based on the above mentioned, the question arises, what can science do for the benefit of patients, and what the healthcare worker is allowed to do to make his life easier, to extend his life and improve his quality of life, not endangering the lives of potential donors and organ recipients (27).

Conclusion

This is a complex topic that requires information, not only from the fields of medical research, but also from legal, religious and ethical fields. During the preparation of donors and recipients for organ transplantation, in addition to medical indications, it is necessary to respect the Istanbul Declaration, especially ethical and legal norms in order to avoid abuses related to organ transplantation. This issue is the topic of continuous considerations of numerous scientists and researchers, because no field in biomedicine is as sensitive to ethical, legal and religious dilemmas as transplantation medicine. Scientists in the world state that transplant tourism is constantly increasing and patients may be exposed to the risk of a greater number of post-transplantation complications (most frequently infections that are resistant to antibiotics, inadequate implementation of immunosuppressive therapy, inadequate care and the risk of blood-borne infections).

Competing interests

The author declared no competing interests.

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