

This response was submitted to the consultation held by the Nuffield Council on Bioethics on Give and take? Human bodies in medicine and research between April 2010 and July 2010. The views expressed are solely those of the respondent(s) and not those of the Council.

Question 15

Regarding organ donation after death - to maintain the altruistic nature of the gift compensation should be limited to meeting the costs being borne by the family - for example funeral expenses. Support in kind should also be made available. There is a shortage of bereavement counselling services and, due to the unique nature of the case, it would be appropriate to offer specific counselling to families involved in organ donation. Such support would assist families in many ways, while also recognising the donation. Recognition could also be made, for instance through a virtual - or real - book of remembrance recording the name of all those who have donated organs. The Donor Family Network Charity is planning their own memorial, (<http://www.giftoflife.org.uk>) which demonstrates the demand for such recognition. Knowing that a gift is permanently recognised would provide comfort for the bereaved families but also an incentive to join the register.

Question 16:

Organ donation - any financial incentive beyond necessary expenses (including covering funeral expenses borne by families) would be unethical in encouraging a commercial value to the organs being offered for donation.

Question 17

Trivial incentives such as the "T-shirt, mugs or vouchers" as suggested would belittle the scheme and patronise the families of organ donors. An appropriate way to celebrate the donation is necessary - not a cheap souvenir. An award which has a symbolic rather than a cash value would be more appropriate, whether as a certificate, medal or other symbol.

Question 25

To be asked to make a decision so soon after the death of a family member is an onerous task. For people deeply in shock to be faced with such important questions may be beyond their mental capabilities - perhaps research needs to be done in this area to establish whether family members are capable of such decisions. However, having been through the process, my view is that, once a person is on the donor register, the family should not have the right of veto. They should instead be counselled to help them understand that they are carrying out the final wishes of their loved one. If a the potential donor has not joined the register, then the families role is crucial. In my experience, the donor coordinator sought a consensus view with the family members present - which was reached. The present hierarchy of relationships set out in the Human Tissue Act is sufficient to deal with dissent in the family but does not follow the same hierarchy of other areas of family law - which may cause difficulties at the time.

Question 27

No

Question 29

Donating organs after death - once agreement to donate specific organs for transplant is agreed, the donor and/or family should have no control over where they are used. They should not, for instance, be able to stipulate who should receive the organs. That decision should be made on medical need.