letters

Foodbanks and poverty

s usual your articles (Triple Helix, Winter 2013) are stimulating and helpful, but I was disturbed by the article on Feeding the Poor as it raises many issues, which have continued to exercise me greatly over the past decades. 'The poor' and its definition. We read 'Today, about 13 million people in the UK live below the poverty line. That is one in every five people.' I do not know how poverty in the UK is defined. Where I live [Switzerland], it is a certain percentage point (I think somewhere between 10-20%) below the medium income, so in a relatively rich country the poor may be relatively rich too. I have seen poverty, real poverty for instance, in the slums of Chittagong and elsewhere. I think it can be misleading to talk about poverty when we are told that'the single biggest reason' for referral to foodbanks was 'benefit delay'. It seems a society that depends on such benefits does not quite match up to a country that put on the Olympics in 2012 which cost millions of pounds.

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Organ donation

here are plenty of complex ethical issues around organ transplantation. The recent BMA review¹ and the discussion and referendum in Wales about changing the law are bringing the issues to the fore again. Philippa Taylor (*Triple Helix*, Autumn 2012)² suggests adopting a system of presumed consent is ethically tricky and unnecessary and I disagree.

All the reports she quotes acknowledge the multifactorial nature of improving transplant rates, but the conclusion that therefore, one of those factors is unnecessary, is flawed. And something being ethically tricky is not a reason to take (or not take) a certain course of action. I don't think God is a pedant.³⁴ I think he is sovereign in the 'ethically tricky' areas and that he approves of medical science that relieves suffering. Organ transplantation does that, and a soft presumed consent system may well increase the organ transplant rate.

We all know that people don't like talking about death, and we know that, when asked, 90% of people would be happy to donate organs, but only 27% have registered as donors. Soft presumed consent, which is proposed in Wales, means that relatives can prevent the transplant occurring if they feel strongly about it.

Currently thousands of organs are wasted because conversations about using the organs cannot take place. In practice, the proposed change in Wales means that, in a tragic situation, a transplant coordinator can say to a family (who may have never thought about or discussed it) – 'some good can come out of this, because your loved one's organs could help save someone else's life, even though they are now no use to them. Is that OK? If you don't think it would be, just say so.'

I also worry about use (and arguments around change in use) of the words'donation' and 'consent'. These are not core issues. Organ transplantation is not good because it is a donation, it is good because it is a sound treatment for organ failure. And no doctor can argue that consent is a concrete concept. Time, external influence, patient interest and abilities all influence consent. Consent is not different in nature for organ transplantation than it is different to any other medical procedures. Just think about how often we presume consent in standard medical practice. It is not unusual, or unreasonable.

I worry that it is easy for small-state conservatism to be the driving force of our ethical proclamations and campaigns, rather than compassion. The argument'we don't trust the state with our bodies, dead, alive or somewhere in between' is not a religious or even ethical argument, but a political position.

I recognise that neither Philippa Taylor nor myself can do full justice here to the many ethical, theological, scientific, professional and political issues that we must address when discussing this subject. But I am unconvinced that Christian doctors should oppose introduction of an opt-out or presumed consent system, and I strongly support it.

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http://bit.ly/12ou3Es
http://bit.ly/Yvp3XM

Barth K, Church Dogmatics, London: Continuum, 2004, Volume 3:3
Isaiah 55:9

wholeheartedly support measures to increase organ donation, and agree with Helen that it can be both a means of relieving suffering as well as altruism on the part of the donor. I also welcome the increase in registered donors. However there are many factors beside legislation that affect numbers of registered donors. Research and the experience of other countries does not offer a clear correlation between presumed consent legislation and increased rates of organ donation.

The main issue, however, is around consent. Consent is the golden thread running through most medical procedures, including the Human Tissue Act 2004 which covers organ donation. Helen says that we already presume consent for many standard medical procedures. However donation for transplantation is one of the scheduled purposes where specific consent is required. Likewise for most operations and medical procedures written consent is required. So why should consent for transplantation now be treated as less necessary than for other procedures?

If the situation in Wales were to be as Helen describes under 'soft' presumed consent, namely a gentle discussion that encourages a family to consider allowing their loved ones organs to be removed and used, then I would have fewer objections to it (although I would still be concerned that a lack of specific consent by the deceased actually indicates a lack of understanding rather than informed consent to the policy). However the Welsh draft Bill is clear that organs will be removed and a family has no legal right to veto or overrule 'deemed' consent. The accompanying memorandum (not the Bill itself) says that donation may be 'unlikely' to go ahead if there are 'very strong' objections or distress from the family, but it reiterates that the deemed consent of the deceased has precedence. This is neither credible soft opt-out wording nor even in the Bill.

I appreciate that presumed consent is an issue on which Christians will differ, because while we all agree that the ends are good, we will not all agree about the right means of getting there.

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