

Condemned man's wish raises ethical questions

November 15 2013, by Amanda Lee Myers

(AP)—An eleventh-hour request by a death row inmate to donate his organs is raising troubling moral and medical questions among transplant experts and ethicists.

Less than a day before child killer Ronald Phillips was set to die by lethal injection, Republican Gov. John Kasich on Wednesday postponed the execution to look into Phillips' request.

Phillips, 40, wants to give relatives a kidney before he is put to death and his heart afterward.

The governor said he is open to the possibility of Phillips donating a kidney or other non-vital organs before he is executed. But Kasich appeared to rule out a post-execution donation.

"I realize this is a bit of uncharted territory for Ohio," Kasich said in a statement, "but if another life can be saved by his willingness to donate his organs and tissues, then we should allow for that to happen."

Some medical experts and others warn that execution chemicals could render organs unusable. They are also deeply disturbed by the prospect of death row inmates donating organs, even if can ease shortages so severe that patients die while on the waiting list.

They question whether the condemned can freely give consent, or are desperately hoping to win clemency. They worry that such practices

would make judges and juries more likely to hand out death sentences. And they are troubled by the notion of using inmates for spare parts.

Medical ethicist Arthur Caplan of New York University said organ donation is incompatible with the goals of punishment.

"It's unethical because this guy who's being executed raped and killed a 3-year-old. When you donate your organs, there's a kind of redemption," Caplan said. "Punishment and organ donation don't go well together. I don't think the kinds of people we're executing we want to make in any way heroic."

Yet it's not unheard of for a death row inmate to become an organ donor.

Condemned Delaware inmate Steven Shelton was allowed to donate a kidney to his mother in 1995, though his execution wasn't imminent.

In 1996, the Alabama Supreme Court halted David Larry Nelson's execution so he could donate a kidney to his sick brother. His brother was too ill for surgery and later died.

Requests in other states, including Texas, have been rejected. All involved so-called live donations, never donation of a vital organ like a heart.

Richard Dieter, executive director of the Washington-based Death Penalty Information Center, which opposes capital punishment, said the practice raises troubling concerns.

"Once you put the person into the death row or execution category, then their life becomes less in the equation of things," he said. "That's a slippery slope of one life being used to save another."

Anne Paschke, a spokeswoman for the United Network for Organ Sharing, said in a statement that her organization's ethics committee in 2007 deemed the practice "morally reprehensible."

She said the committee sees extreme difficulty "in ensuring that a condemned prisoner could give proper informed consent for donation, free from any coercion or consideration of personal gain."

Caplan said keeping vital organs viable during executions would require avoiding [lethal injection](#), electrocution and other methods that would harm them.

Utah murderer Gary Gilmore, executed by firing squad in 1977, agreed to donate his eyes, kidneys, liver and pituitary gland for medical use. His kidneys proved unusable because of bullet wounds.

"The only way I can think of to get organs out of prisoners is to shoot them in the head or guillotine them," Caplan said. "Are we really going to have witnessed executions of that type? I don't think so."

Dr. Brooks Edwards, the director of the Mayo Clinic Transplant Center and a transplant cardiologist, said it would be possible to use some organs after an execution, including the liver and kidney, but not the heart.

Even so, he said he is opposed to the idea, saying it could lead a judge or jury to believe that handing down a death sentence could help save another's life.

"One would worry that the enticement of organ donation could somehow be perceived, even subconsciously, as some kind of perverse incentive. I think that's wrong," Edwards said. "There are certainly accusations of prisoners being executed in other countries for organ donation, and we

have to be well above that."

States such as California, Utah, Arizona, Oklahoma and Texas have nonetheless considered policies promoting [organ donation](#) among inmates. Some proposals would shorten sentences in exchange for organ or bone marrow donations.

Some transplant recipients think such donations could be a good thing.

"I don't know who my donor is and I really don't care," said John Afek, a 57-year-old accountant and financial adviser who underwent a heart transplant nearly two years ago. "It gave me my life back, and I'm a single dad with a couple kids who suddenly got their father back."

He said an inmate's crime shouldn't even be a part of the conversation.

"How many people die waiting on a list?" Afek said. "If they want to do it, God bless them. We need the organs."

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