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BELARUS AS A MODEL FOR ORGAN TRANSPLANTATION

The objectives of this thesis are as follows – 1. Examine the system of organ transplantation in Belarus and the reasons for its success. 2. Compare it to the system of organ transplantation in Sri Lanka. 3. Draw conclusions and make suggestions to reform the system of transplantation in Sri Lanka.

Belarus ranks 26th in the ranking of countries based on the number of organ transplantations per 1 million capita (WHO, 2016). It ranks the highest among the CIS countries. There are many reasons for its success such as the highly adept medical and surgical expertise, modern technology and facilities etc. However this thesis focuses on one important reason for its success – the higher availability of donor organs. Belarus follows a system of presumed consent to organ-harvesting from dead patients, which assumes the consent of a deceased donor unless he/she explicitly denies consent during their lifetime. This system assumes that most people are willing to donate their organs after death, but only a few openly give their consent by registering. This system of consent can be justified on the basis that it saves more lives.

Sri Lanka, another country of comparable economic status to Belarus, still struggles to meet its own organ needs. This thesis proposes that a major reason for this shortage is the lack of organ donors. Sri Lanka follows a system of explicit consent, where a person needs to have given his/her consent for harvesting their organs at some point before their death. Even though there are provisions for the next of kin to grant consent after the person in question is deceased, more often than not when this consent is received it may prove too late to harvest organs. On a positive note however, Sri Lanka has seen great success in eye donations in the recent years, which was the result of active measures taken to increase the registry of eye donors. This support for eye donations justifies the assumption that people in general are not averse to the idea of donating organs. Therefore, this thesis proposes that Sri Lanka should replace its system of explicit consent with a system of presumed consent, such as is practiced in Belarus.

In summary, this thesis provides a cursory look at the system of organ transplantation in Belarus which incorporates presumed consent, and then prescribes a similar system to replace the system transplantation based on explicit consent that is prevalent in Sri Lanka. It also provides moral and practical justifications for such a system.