

Reforming the organ donation system must be done carefully

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The Aug. 2 editorial “No one should be left waiting to die” implied the country’s organ donation process can easily and quickly be restructured with only positive results. The U.S. organ donation system is intricate and complex. In addition to Organ Procurement Organizations (OPOs), it includes transplant hospitals, donor hospitals, medical examiners, grieving donor families and medically fragile recipients. As many as 200 people can be involved in one organ donation.

OPOs agree we should find ways to improve the system. There have been year-over-year increases in organ donation for nine consecutive years. The U.S. today has the highest transplant rate of any country, and our donation rate is nearly double that of Europe. But the administration’s proposed solution is one-dimensional and rooted in an outdated, questionable report funded by a special interest group. Advocating the quick implementation of poorly conceived changes is dangerous. Instead, we must assess our system honestly through a comprehensive review of the delicate balancing act that OPOs and our donation and transplant partners have mastered over nearly 40 years in service to some of the sickest among us. We have and will continue to provide the data and front-line experience necessary to advance effective change.

We urge a more thoughtful and comprehensive approach to improving the organ donation system rather than reckless change. Charging that OPOs hold a “monopoly” on organ donation is terribly misleading. Our OPOs were intentionally created by the federal government as community nonprofits to save lives without competitive overlap and to ensure maximum efficiency and avoid commercialization of organ donation. There is nothing more important to the professionals who work at OPOs than to be trusted stewards of donors’ gifts, given to benefit the thousands awaiting a second chance at life.

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