



DAILY EDITORIAL ANALYSIS

TOPIC

**ADDRESSING GENDER
DISPARITY IN ORGAN
TRANSPLANTATION IN INDIA**

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ADDRESSING GENDER DISPARITY IN ORGAN TRANSPLANTATION IN INDIA

Context

- Recently, the **National Organ and Tissue Transplant Organization (NOTTO)** has issued an advisory that **prioritizes women patients** and relatives of deceased donors in organ transplant allocations.

About Organ Transplant in India

- India performed over 18,900 organ transplants in 2024, **ranking third globally** in total organ transplants, **behind only the United States and China**.
 - Earlier in 2013, fewer than 5,000 transplants were performed in India.

Legal and Institutional Framework

- India's transplantation system is governed by the **Transplantation of Human Organs and Tissues Act (THOTA), 1994** (amended in 2011), which:
 - Legalizes brain-stem death for deceased donation;
 - Prohibits commercial organ trade;
 - Regulates living and deceased donations;
 - Requires authorization for unrelated donors;
- National Organ and Tissue Transplant Organisation (NOTTO)**: It coordinates organ allocation, maintains a national registry, and promotes awareness.
 - MoH&FW has issued Standard Operating Procedures (SOPs) for organ transport via air, road, rail, and water.
 - '**Green Corridors**' are created to expedite organ movement;
 - All transplants are tracked using a **unique NOTTO-ID**.
- National Organ Transplant Programme (NOTP)**: It establishes the State and Regional Organ Transplant Organisations (SOTTOs and ROTTOs).
 - Financial support is provided for infrastructure, training, and immunosuppressant drugs for BPL patients.
- Transplantation of Human Organs Rules, 1995**: It defines procedures for donor consent, hospital registration, and composition of **Authorization Committees**.

Challenges

- Gender Gap in Transplantation**: A British Medical Journal analysis found that between 2018–2023, women accounted for **36,038** of **56,509** living organ donations but were recipients in only **17,041** cases.
 - Decadal data from **NOTTO (2013–2023)** revealed that the **living Donor Transplants (2023)**: Women made up **63%** of all living donors. However, women comprised only about:
 - 24% of heart transplant recipients;
 - 47% of lung recipients;
 - 37% of kidney recipients;
 - 30% of liver recipients;
 - 26% of pancreas recipients.
- Implementation Challenges**: Current organ allocation protocols prioritize recipients solely based on medical urgency, with no provision for gender-based priority.
 - Unclear definition of 'near relatives' and whether families of cadaveric donors since 1995 are eligible.
 - Concerns over possible out-of-turn allotments amid ongoing organ trafficking cases.
- Demand-Supply Gap**: Over 100,000 patients need kidney transplants annually, but only around 13,000 are performed.

- ◆ Deceased donor rates remain low due to cultural hesitations and lack of awareness.
- **Other Concerns:**
 - ◆ **Infrastructure Deficiencies:** Many government hospitals lack transplant ICUs, operation theatres, and HLA labs. ICU bed shortages hinder brain-dead donor maintenance.
 - ◆ **Human Resource Shortage:** Scarcity of trained transplant surgeons, nephrologists, and coordinators. Frequent transfers disrupt continuity in transplant programs.
 - ◆ **Financial Barriers:** High cost of lifelong immunosuppressants. Limited post-transplant support beyond the first year.
 - ◆ **Data and Monitoring Gaps:** Inconsistent reporting from hospitals. Lack of centralized tracking for donor-recipient outcomes.
 - ◆ **Ethical and Legal Concerns:** Instances of organ trafficking and commercial transplants still surface; Inconsistent interpretation of laws across states; Weak enforcement of penalties for violations.

Tamil Nadu: A Model State

- **Tamil Nadu's Cadaver Transplant Programme (CTP)**, now evolved into **TRANSTAN**, is a national benchmark. It was the **first state to:**
 - ◆ Issue detailed brain death certification guidelines;
 - ◆ Build equity into organ allocation;
 - ◆ Establish a swap transplant registry and promote machine perfusion for organ preservation.

Way Forward: Balancing Inclusion and Fairness

- The core challenge lies in ensuring inclusivity without undermining medical fairness. Implementation needs to:
 - ◆ Be participatory, involving all agencies under the **Transplantation of Human Organs Act**.
 - ◆ Maintain **medical need as the primary criterion** for allocation.
 - ◆ Safeguard against exploitation while widening access for women and donor families.

Source: TH

Mains Practice Question

Q. Critically examine the gender disparity in organ transplantation in India. Discuss the steps to address issues of justice and equality, and related challenges .

