SUMMARY

The thesis presents current understanding of the concept of death and criteria for diagnosis of death in the context of organ donation. We will argue that 1) the dead donor rule should not be the necessary condition for retrieving organs for transplantation and 2) it should be permissible to retrieve organs from patients that are imminently dying (not dead yet), with respect to the principle of autonomy and non-maleficence. We will first present the impossibility and current inconsistencies in determining the exact "moment of death" and we will then demonstrate that current organ donors do not fulfill biological criteria for death and that the dead donor rule is not respected in clinical practice. We suggest that in the context of recent major technological advances in the field of critical care medicine the dead donor rule becomes irrelevant and does not contribute to the transplantation ethics. The legal concept of death and the biological phenomenon of death become more and more distant. We argue that declaring death is not necessary for ethically justified policy in transplantation. Both the societal trust and the protection of vulnerable individuals can be ensured by different ethical principles (i.e. the principle of autonomy and the principle of non- maleficence). The sound ethical arguments for allowing pre-mortem retrieval of organs for transplantation include careful consideration of the patient's best interest and prognosis and respect for his/her wishes and preferences.