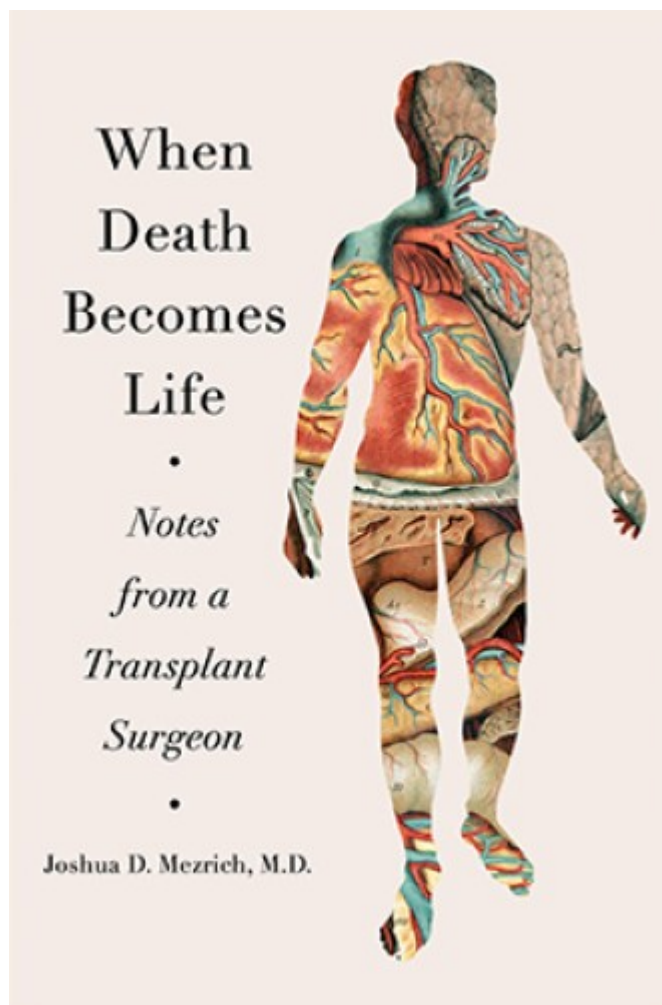


Notes from an organ transplant surgeon

## **Joshua Mezrich weaves professional insight with personal stories.**

by [Kristel Clayville](#) in the [April 8, 2020](#) issue

### **In Review**



### **When Death Becomes Life**

Notes from a Transplant Surgeon

By Joshua D. Mezrich

Harper

It seems like organ transplant is everywhere these days. There are requests on Twitter and Facebook for living donors with specific blood types; there are news stories about grieving family members meeting the recipients of their loved one's organs. Organ transplant has been the frame story for recent movies like *Vice* and *Get Out* and the big reveal in TV shows. I've seen more than one handmade sign in a car window requesting a kidney, complete with details and hospital contact information. And in the last congregation I served, a member donated a kidney to a stranger in need, which made organ transplant a topic of conversation in our community. In the midst of increased awareness of the need for donated organs, the US government has put forward a plan to increase organ donation from deceased and living donors.

With organ transplant on every channel, how are we supposed to take in this information and think about it? Enter Joshua D. Mezrich, a transplant surgeon whose timely book weaves together a history of organ transplantation with parts of his personal story.

Mezrich begins with the introduction he received through working on organ and tissue procurement as a medical student. He describes in dramatic detail the turbulent helicopter flights between medical centers and the intensely physical work of removing organs and tissue from a donor. He moves deftly from these visceral and emotional passages to a history of organ transplant, which he presents organ by organ: kidney, heart, pancreas, and liver.

This narrative structure repeats itself throughout the book. Mezrich puts his training as a transplant surgeon into conversation with anecdotes about patients and stories of medical research and innovation. The effect is that readers benefit from his perspective as an experienced transplant surgeon, while also getting to learn about transplants alongside him as he recounts his early years in the field as a medical student, surgical resident, and transplant fellow.

Mezrich's prose is accessible and vivid. Early in the book he describes Cindy, a potential liver recipient whom he hasn't yet met in person:

If I saw her on the street, I wouldn't recognize her, but if I looked into her open abdomen, I would know her immediately, from her shrunken liver to her large spleen to her massive varices (big, swollen veins), which are carrying blood in the wrong direction (because of so much resistance to flow caused by the shrunken liver) and led to her GI bleeding, confusion, kidney failure, and now her imminent death.

As the book proceeds, Mezrich covers a number of fascinating personalities and procedures. He discusses Alexis Carrel, whose work in early kidney transplantation was revolutionary (though he also advocated for eugenics policies in Vichy France and came to be regarded by many as a Nazi collaborator). Mezrich recounts the international race to perform the first human heart transplant—a contest won by Christiaan Barnard in South Africa, although several Americans followed closely behind.

Mezrich's book is a good source of basic information about advances in medicine that we take for granted today but were groundbreaking in the development of successful transplant procedures. For example, many surgeries rely on the use of a bypass machine, which reroutes the blood away from the heart so the heart can be stopped for surgery. By allowing for the continuous circulation of blood throughout the body while the heart is stopped, this machine prevents the typical catastrophic effects of a heart stopping. The bypass machine has allowed for numerous innovations in surgery, but it emerged from a single question on the part of surgeons: how to stop and start the heart at will.

Mezrich gives a compelling narrative of the history of transplant research, but he doesn't mention the parallel narratives of social and religious adaptations to these technologies. Two of the most notable aspects of transplant—it creates life out of death, and it creates the context for altruistic gift giving—are deeply resonant with the Christian storytelling tradition. In transplant, for example, living organ donors who give to strangers are often called Good Samaritan donors.

What's more, many ethical conversations in transplant history have drawn on religion explicitly. The distinction between the end of cardiovascular function and brain death is a clear example. In his discussion of the definition of brain death proposed at Harvard in 1968, Mezrich misses an opportunity to mention the role religion played in the debate. The shift toward adopting brain death as the legal

definition of death is still controversial in many religious communities. Mezrich portrays it as a simple change of clinical practice.

As a history of transplantation and a narrative of one doctor's work in this area, *When Death Becomes Life* excels. But readers will have to bring their own understanding of religion's place in medicine into the story.