Dear Sir,

I must confess that I was deeply touched and shocked by your analysis of hemodialysis facilities in Britain [1]. I have to admit, however, that the effect of Dr. Wardle’s statement that ‘Patients over 50 are dialyzed, if they merit it’ [2] is even much more devastating.

It would be misleading to deny that all nephrologists involved in maintenance hemodialysis programs are fighting chronic uremia as well as financial restrictions. No one entitled us, physicians, to decide whether a human being’s life ‘merits’ to be prolonged or not. Such a decision cannot be taken by another human being. In a world sinking into a general economical recession, the dreadful approach of solving financial problems by letting sick people die may well be an extremely dangerous precedent with unpredictable projections. I quite agree that we have to look after budget cuts, but I would suggest not to do it paying by means of human lives.

References