Organ sourcing in China: past and current ethical concerns

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Declaration of interests

I am Chair of the International Advisory Committee of the NGO
International Coalition to End Transplant Abuse in China (ETAC)
(https://endtransplantabuse.org/)

I receive no monetary or in-kind benefits from my voluntary work with ETAC.

I undertake and publish research on transplant abuse in China as part of my academic role.
Outline

1. Overview of China’s transplant system
   a) Pre-2000
   b) 2000-2015
   c) Post-2015
2. Volume indicators
3. Organ sourcing
4. What can we do?

China’s transplant system pre-2000

1960: First organ transplant in China, details scanty
1972: First successful kidney transplant at First Affiliated Hospital of Sun Yat-sen University
1970s: First reports of live organ harvesting from lethally wounded but not yet dead prisoners, taking place on execution grounds
1980s – 1990s: Growth in number of transplants following advances in immunotherapy, organs sourced solely from prisoners during judicial executions
China’s transplant system 2000-2015

From 2000 there was a rapid expansion in number of transplants:

“The year 2000 was a watershed for the organ transplant industry in China… the number of liver transplants in 2000 reached 10 times that of 1999; in 2005, the number tripled further.” He Xiaoshun

(http://news.163.com/10/0326/10/62MP5K0G00011SM9.html)

2006: formal admission by Huang Jeifu that organs were sourced almost exclusively from executed prisoners

2010-14: introduction of pilot volunteer donation scheme

China’s transplant system post-2015

From 1 Jan 2015, all organs allegedly sourced from “volunteers”

<table>
<thead>
<tr>
<th>Year</th>
<th>No of donors</th>
<th>No of Tx</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010-12</td>
<td>599</td>
<td>~10,000 pa</td>
</tr>
<tr>
<td>2013</td>
<td>849</td>
<td>~10,000</td>
</tr>
<tr>
<td>2014</td>
<td>1702</td>
<td>~10,000</td>
</tr>
<tr>
<td>2015</td>
<td>2766</td>
<td>~10,000</td>
</tr>
<tr>
<td>2016</td>
<td>4080</td>
<td>13,000</td>
</tr>
<tr>
<td>2017</td>
<td>5148</td>
<td>16,000</td>
</tr>
<tr>
<td>2018 to end May</td>
<td>2549</td>
<td>&gt;7,500</td>
</tr>
</tbody>
</table>

Sources: http://www.xinhuanet.com/english/2017-11/21/c_1367769442.htm
http://www.xinhuanet.com/english/2017-04/20/c_1376223841.htm
http://www.globaltimes.cn/content/1118040.htm
Volume indicators

Post-2000
- Up to 1000 hospitals offering transplants
- 164 Ministry-approved
- Many staff trained
- Involvement of military-medical complex in transplant activity and research
- State subsidies of nascent immunosuppressant industry
- Dramatic fall in waiting times
Case Studies

Oriental Organ Transplant Center (Tianjin)
- Transplant bed count: 500-700 since 2006
- Bed utilization rate: 90% -131%
- Capacity is 6-8,000 transplants per year
  - 500 beds x 100% utilization rate allowing average hospitalization of 3 to 4 weeks

“Our hospital conducted 4,000 liver and kidney transplant within a particular year.”
  - Zhu Jiye, Director of the Organ Transplant Institute of Peking University

“Tens of thousands of patients have received liver or kidney transplants here”
  - First Affiliated Hospital of Sun Yat-Sen University (in 2010)
PLA Organ Transplant Center and Research Institute PLA No.309 Hospital in Beijing

- 393 transplant beds (in 2012)
- 231 medical and research personnel
- Capable of 5,000+ kidney transplants/year

Organs on demand

During the 2000s:
- Pre-scheduled operations, including cardiac transplants
- Short wait times

Median Kidney Wait Time in Days

<table>
<thead>
<tr>
<th>Country</th>
<th>Median Wait Time</th>
</tr>
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<tbody>
<tr>
<td>China</td>
<td></td>
</tr>
<tr>
<td>UK</td>
<td></td>
</tr>
<tr>
<td>USA</td>
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</tbody>
</table>

Sources: * The Guardian  ** United States Renal Data System
**Abundant supply of organs**

**Calmette International Hospital in Kunming**

**19 October 2016**: Sixteen organ transplants (10 heart, liver, and kidney and 6 corneal), involving around 140 medical personnel (report now deleted from hospital website).

**March 2017**: 15 transplant surgeries in 24 hours.

Source: COHRC 2018

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**On-site investigations by Korean TV station October 2017**

**Tianjin Central Hospital**

- The transplant center’s staff quoted to patients *wait times for organs ranging from days to weeks* and solicited monetary “donations” from patients in exchange for scheduling transplants even more quickly.

- Although China claims to have stopped performing transplants for foreign patients, the international department alone performed eight transplants the day before the visit.

https://endtransplantabuse.org/films/
Limiting factors for transplant activity

“The first is an economic reason. A transplant surgery is very expensive, and not many citizens can afford the medical costs. The second is that, even though we have such well-qualified hospitals, there aren’t that many experienced and skilled doctors. Only the third is that there are not that many donor bodies; even though donor bodies are abundant right now, there aren’t that many hospitals and that many doctors that can [perform transplants].”

Huang Jiefu, televised interview in January 2015

Organ sourcing: evidence of organ harvesting

1) Coincidence of persecution campaigns with expansion of the organ transplantation sector
2) Medical testing of target populations in custody
3) Whistleblowers
4) Mass incarceration and permanent disappearances
5) Telephone evidence of organ sourcing from Falun Gong
6) Dual careers in persecution of target population and organ transplantation
1. Campaign against Falun Gong

1999
- Formal order by Jiang Zemin to eradicate Falun Gong
- Extra-judicial 610 Office with power and authority over all other State bodies and Party entities
- Initial 3 month campaign to convert all FG practitioners by any means including torture
- “Strike hard” campaign intensifies eradication of FG

2000-2008
- 450,000-1 million detained at any one time in black prisons (forced labour camps, “Re-education centres”)

Jan-July 2017
- 10,869 reported cases of arrest, harassment and detention against Falun Gong practitioners in China, real number believed to be much higher

Source: Cheung et al 2018

Current campaign against the Uighur

- Human Rights Watch reports that over 10 million Uighurs aged 12-65 years of have undergone extensive forced medical examinations together with blood and DNA testing.
- Hundreds of thousands of Uighurs currently detained in “re-education” camps in China.
- State-directed propaganda campaigns aim to attack, humiliate and degrade Uighurs.

2. Medical testing of incarcerated prisoners

Falun Gong detainees are singled out and subjected to unusual blood tests:

“It was an interview with an elderly woman fresh out of forced labour camp … At one point she mentioned a “funny” physical exam … Had she been hunger striking? No. Was anyone else examined? Yes, some other Falun Gong. What were the tests?

What she described was terrifying and inexplicable – rather than the doctor administering a normal physical examination, it was more like he was already picking over a fresh corpse… Some of the younger women had disappeared following the examination.”

Gutmann 2014, 29

3. Whistleblower testimony

Annie: “My ex-husband, a surgeon, told me that most of the Falun Gong practitioners were strong and healthy and many were still breathing when their organs were removed. After the removal, many of them were thrown into the (hospital’s) crematory oven, so that no trace was left. For others, after their organs were removed, the openings on their bodies were stitched.”


This account corroborated by a senior military doctor of the General Logistics Department of the Shenyang Military Command.

China Organ Harvest Research Centre
Enver Tohti, surgeon

Enver Tohti, general surgeon at Urumqi Central Railway Hospital, extracted the liver and kidneys from a living human being on a Xinjiang execution ground in June 1995.

Gutmann 2014, 17

“Anybody, if they label themselves other than communism, Communist Party or member, then they will be treated as an enemy of the state. Therefore, they are subject to whatever punishment is available .... I became a robot and [did] what I had been programmed to do. Our ideology was that being able to participate in doing away with the country’s enemies was a glorious thing, even genuinely believing what we were doing is for a good cause.”

Tohti, cited in China Organ Harvest Research Centre

4. Mass incarceration

Inmates of the “Lop County number 4 education and training center” (洛浦县第四教育培训中心 luòpǔ xiàn dì sì jiào yù péixùn zhōngxīn) listening to a “de-extremification” (去极端化 qù jídüān huà) speech on April 7, 2018. Photo identified by Concerned Scholars of Xinjiang

5. Telephone admissions

In 2006, 2 volunteer Mandarin-speaking investigators called Chinese hospitals posing as potential transplant recipients.

Called ~80 hospitals

- 10 admitted using Falun Gong practitioners as organ sources
- 5 offered Falun Gong practitioners as organ suppliers
- 14 stated they use live organs from prisoners
- 10 stated they could not divulge the source of organs

Matas and Kilgour 2009, 82

6. Dual roles: persecution and transplant

Zheng Shusen: 2000+ liver transplants,

- Chief editor of the leading Chinese scientific journal on transplantation
- Past president of the Chinese Society of Transplantation
- Vice-president of the Chinese Medical Association
- President of Zhejiang Medical University’s First Affiliated Hospital.

Allegedly presented paper based on data using organs from executed prisoners at TTS 2016, threatened with lifetime ban.

Senior author of paper in Liver International retracted in 2017 due to demonstrably false claim that organs were sourced from volunteers rather than prisoners.
Zheng Shusen

Director of the China Anti-Cult Association (CACA) in the province of Zhejiang, aimed at defaming and destroying Falun Gong.

“Falun Gong and similar evil religions are like viruses corroding the organism of humanity, warping the souls of believers, destroying social order, disrupting economic development, and have become a public nuisance to mankind and a cancer on society.”

Invited plenary speaker at 2018 TTS conference in Madrid

What can we do?

1. Seek and share information
2. Perform due diligence regarding potential interactions with Chinese institutions and practitioners
3. Inform and educate patients who may consider travelling to China
4. Exercise critical scrutiny of Chinese research
5. Develop international standards for reporting transplant research including donor information:
   a) Living/deceased
   b) Criteria for declaring death (DBD, DCD, CDCD)
   c) Standardised protocols for reporting warm ischaemic times
References


https://freedomhouse.org/sites/default/files/FH_2017_BattleForChinasSpirit_Falun_Gong_0.pdf


Robertson M. 2018. Private communication


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- My colleagues at ETAC
- Matthew Robertson
- Tom Druitt