The Killing of Prisoners of Conscience for Organs in China

July 20, 2017
Executive Summary

A Decade-Long Investigation

It first came to light in 2006 that prisoners of conscience were being killed on demand for organ transplants in detention facilities and hospitals throughout China.\(^1\)

Since then, international researchers have continued to investigate these alleged practices. Among them, two Canadians—former Secretary of State for Asia-Pacific David Kilgour and human rights lawyer David Matas—came to “the regrettable conclusion that the allegations are true.”\(^2\) Meanwhile, London-based investigative journalist Ethan Gutmann independently researched the topic over the course of seven years and reached similar conclusions.\(^3\)

Unfortunately, organ harvesting has not ended. Rather, the industry has continued to grow at a rapid pace over the past decade.

Investigators joined forces and researched hundreds of transplant hospitals around China. Based on this research, Kilgour, Matas, and Gutmann published *Bloody Harvest/The Slaughter: An Update*\(^4\) in June 2016. Spanning 680 pages and nearly 2,400 references, the report uncovers the true nature and scale of these abuses.

Our study unearths and analyzes hospital data and policy directives concerning the growth of organ transplantation in China. We found that China came to perform the most transplants in the world in just a few years despite the lack of an effective organ donation system. Furthermore, the industry continued to grow after live organ harvesting gained international attention in 2006. Through examining statements and policies regarding China’s officially recognized organ sources, and summarizing the industry’s history and relevant government regulations, we have pieced together evidence showing that state, military, and civilian institutions that have been mobilized to carry out this medical genocide.

On-Demand Transplants

Investigators discovered the existence of an industry in which organ transplants were conducted as needed, on-demand.

The China Liver Transplant Registry reported a large proportion of emergency liver transplants for which organ sources were found within days or even hours. In elective cases, waiting times for kidney and liver transplants were commonly listed in weeks.\(^5\)

One hospital advertised “donors seeking matched recipients” and promised, “in case of failure, [to] continue to perform transplants until one is successful.”\(^6\)
Doctors could procure multiple organs for the same patient in quick succession, in case of rejection or to have as spares. It is not uncommon in China for a patient to receive multiple transplants of the same organ. Furthermore, the vast array of transplantable organ types and their prices openly listed on hospital websites give the impression that any body part can be replaced as needed.

Researchers continue to see numerous individual and institutional feats reflected in hospital profiles, media interviews, and other sources:

- Surgical teams performing transplants around the clock
- Hospitals carrying out multiple transplants concurrently
- Over ten, twenty, or even more kidney transplants being conducted in a single day
- Bed utilization rates exceeding capacity
- Expansion of transplant wards and construction of new buildings

**Official Numbers Debunked**

The number of transplants in China is falsified level by level due to unexplainable organ procurement sources and financial incentives for hospitals and doctors. As a result, the true, absolute number may forever remain unknown.

In recent years, Chinese officials have often claimed a total of 10,000 transplants per year. However, we analyzed data concerning individual hospitals and doctors and found that this official figure is surpassed by just a few hospitals; China in fact performs the most transplants of any country in the world. As a point of reference, all transplant centers in the United States have performed an average of 6,000 liver transplants annually since 2000; this figure can be matched by just a few hospitals in China.

Based on government-imposed minimum capacity requirements for transplant centers, the 169 transplant hospitals approved by the Ministry of Health could have conducted between 60,000 and 100,000 transplants per year. This is equivalent to a capacity of more than one million total transplants since 2000.

However, even this is far from the full picture. The investigators found that the vast majority of these hospitals well exceed the minimum requirements. In addition, more than 1,000 hospitals applied for permits in 2007 to continue performing transplants, which suggests that they also met the Ministry’s minimum capacity requirements. Many of them continued to perform transplants despite not having received approval.
Organ Sources

Since 2005, Chinese government spokesmen have claimed that the vast majority of organs have come from death-row prisoners, and later, from voluntary donations. However, these two sources combined can only account for a small fraction of all transplants performed in China.

International organizations estimate the number of death-row prisoner executions in China in the thousands each year since 2000 and decreasing since then.\(^{22-24}\)

Chinese tradition requires that bodies remain whole after death. China did not start piloting organ donation systems until 2010, and a national system was not established until 2013.\(^{25}\) Nevertheless, by 2015, it still had not produced donations on any meaningful scale.\(^{26}\)

The 2016 independent report by Kilgour, Matas, and Gutmann states,

“The ultimate conclusion is that the Chinese Communist Party has engaged the State in the mass killings of innocents, primarily practitioners of the spiritually-based set of exercises, Falun Gong, but also Uyghurs, Tibetans, and select House Christians, in order to obtain organs for transplants.”\(^{27}\)

A State Crime

The Chinese government prioritized organ transplantation in its national strategy starting in 2000 by investing heavily in research, development, industrialization, and transplant personnel training. Within a few years China was performing the most transplants of any country in the world.\(^{28}\)

This exponential rise in transplants coincided with the Chinese Communist Party's campaign to wipe out Falun Gong with directives to “ruin their reputations, bankrupt them financially, and destroy them physically.”

The investigators found that both military and civilian institutions implemented the large-scale organ harvesting from Falun Gong practitioners. The central Party leadership established a unified chain of operations through various levels of the extralegal “610 Office” and the Political and Legal Affairs Committee to enable the procurement of organs on demand. The People's Liberation Army General Logistics Department has served as the core operations unit with cooperation from other military units, armed police, the medical system, and organ brokers.

The 2016 report explains,

“The Communist Party’s demonization and brutalization of Falun Gong and the health system’s insatiable demand for organs have formed a symbiosis. Each feeding on the other, the combination became an unprecedented, and barely imaginable, human catastrophe.”\(^{29}\)
Bodies Exported Worldwide

Researchers also found evidence that the same victim groups were used not only as organ sources for transplant surgeries but also as sources for plastination specimens. Millions in the West have seen plastinated bodies from China on display. Furthermore, plastinated body parts from China have been sold to medical schools and universities throughout the Western world.

Plastination exhibits give an immediate, widespread, publicly visible reality to these abuses that the killing of innocents for their organs cannot.

Sources and Methodology

To gauge the development and scale of China’s organ transplantation industry, we analyzed 169 individual hospitals approved by the government to conduct transplants. Specifically, we collected data regarding transplant types performed, qualifications, revenue, potential patient demographics, bed counts, surgical and support personnel, transplant capacity and volume, research projects, relationships with other hospitals and related entities, funding, patents, and awards.

To estimate the true volume of transplants performed independent of official government figures, we referred to policies and regulations published by the Ministry of Health and its successor, the National Health and Family Planning Commission, which sets minimum bed count requirements transplant centers must meet to maintain their qualifications. We then incorporated bed utilization rates and lengths of hospitalization from primary hospital sources and other published materials to provide the minimum system-wide capacity among the 169 approved transplant centers since 2000.

To determine the sources of organs used, we tracked the evolving policies surrounding China’s officially acknowledged sources of death-row prisoners and recently introduced voluntary donation programs, including from relatives, cadavers, and donations after cardiac death. We are unable to calculate precise transplant volumes due to state censorship and widespread falsification of public data. Therefore, we qualitatively compared the number of transplants possible from officially claimed sources against the total transplant volume estimated above to determine the gap representing unaccountable organs.

We then examined Party and state policies that have resulted in the extralegal killing of prisoners of conscience and how state, military, and civilian institutions have been mobilized to conduct organ harvesting from these unwilling “donors.”

All of our data has been sourced from Chinese medical journals, media reports, official statements, web archives, government policies, national strategic programs and fund allocations, and other public sources. Researchers also made phone calls to hospitals to verify the status of their organ transplant programs and other key information.

The following is a summary of our findings. The transplant hospital database is available separately.
China’s On-Demand Organ Transplant Industry

China, the most populated nation on earth, has become home to a booming organ transplantation industry. According to conservative estimates by experts both inside and outside China, there are at least one million patients waiting for liver transplants, at least one million waiting for kidney transplants, more than four million leukemia patients waiting for bone marrow transplants, and four million needing cornal transplants.

China began to conduct research and clinical experiments in human organ transplantation in the 1960s. It was not until 2000 that the industry in China entered a period of tremendous growth. The government has incorporated organ transplantation into its national strategy and invested heavily in research, development, and personnel training in transplantation technology. New techniques for transplantation and postoperative care have emerged and proliferated. Liver and kidney transplants have become routine surgery in clinical practice.

Before 1999, there were 150 transplant institutions in Mainland China. In 2007, more than 1,000 hospitals applied for permits from the Ministry of Health to continue performing transplants. The surge in transplants, while mostly absorbed by the domestic population was accompanied by a corresponding boom in transplant tourism from other countries, making China a global center for those in need of new vital organs.

I. Fast Growth of China’s Transplant Industry Since 2000

According to He Xiaoshun, a member of the Expert Committee of the Human Organ Donation Commission and Vice President of the First Affiliated Hospital of Zhongshan University, 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. By 2005, the number had tripled further.

Explosive development in China’s organ transplant industry after 1999

Wu Mengchao, President of the Affiliated Eastern Hepatobiliary Surgery Hospital of the Second Military Medical University and the ‘father of hepatobiliary surgery in China,” said in an interview in May 2011, “in terms of liver transplants, our quantity has been the largest in the world. The quality and result are also good. We have caught up with international standards.”
Since 2000, the entire United States, with more than 130 million registered organ donors—half of all U.S. adults—has performed an average of 6,000 liver transplants a year.\(^4\) In China, despite the paucity of donors, this number could be matched by just a few hospitals.

In January 2015, China’s transplant chief Huang Jiefu told CCTV, "I would like to quote the words of the World Health Organization that China has undertaken such a path in six to seven years whereas other developed countries building up their organ donation and transplant frameworks took dozens of years."\(^4\)

II. On-Demand Transplants

In November 2013, an article published in the Chinese state-affiliated Phoenix Weekly highlighted the growth of organ tourism to China within the past decade, and how organs are supplied on-demand and matched quickly with no waiting time. The article also stated that the number of transplants performed in China exceeded that in the U.S.\(^2\)

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"In the past decade, with the trend of ‘organ transplant tourism,’ many instances of unbelievably efficient transplant surgeries have appeared in the press. One doctor performed 246 liver transplants in one year. A patient received two kidney transplants within 48 hours…International medical experts have doubts about China’s huge organ sources: as a routine surgery, organ transplantation itself is not difficult; the difficult part is mainly matching and searching for organs. When the international community requires years of waiting to find a matching liver or kidney, why does the ‘searching miracle’ only happen frequently in China?"

"International medical experts have analyzed the phenomena in China’s organ transplant market. They think China must have an enormous underground human organ bank, or even a living donor organ bank, in which donors have their blood types tested and other related documents prepared ahead of time. When there is ‘demand’, these living organ donors are sent to hospitals (slaughterhouses)…"

"…a special characteristic in mainland China is that there is no wait time, and matching organs are found practically on demand …"
Donors Seeking Recipients

Yunnan Kunming Kidney Disease Hospital is one of the top 100 private hospitals in southwestern China and specializes in kidney and liver transplantation. It has approximately 100 beds and has attracted patients from over ten countries and regions.

When answering a patient’s question online, this hospital referred to itself as “an organ transplant hospital that has donors seeking matched recipients.”

Short Waiting Times

In countries with advanced healthcare capabilities and well-organized organ donation systems, patients usually wait many months or years for a donor organ to become available. Yet, in China, where organ donation is culturally taboo and there is not yet an effective organ donation system, patients can find matching organs whenever needed, suggesting that there is a large number of readily available organ sources waiting to be matched to patients.
The organ transplantation department of the First Affiliated Hospital of China Medical University, China International Transplantation Network Assistance Center (CITNAC), claimed on its website:

“As for kidney transplantation, it may take one week to find an HLA-matched donor, the maximum time being one month … If an abnormal situation with the donor's organ is discovered, the center will be responsible for choosing a donor for the patient and commence the operation again within one week.”

Shanghai Changzheng Hospital’s organ transplant department stated on its application form for liver transplants in 2006 that the average waiting time for liver transplantation was one week\(^{48}\) and that the shortest waiting time was 4 hours.\(^{49}\) Between 2003 and 2006, the hospital performed 120 emergency liver transplants for patients requiring a transplant operation within 72 hours. Outside of China, finding donor organs for such emergency transplants is nearly impossible.

According to the China Liver Transplant Registry’s 2006 Annual Report, among 8,486 liver transplants were performed in 29 facilities in China with 4,331 classified as either emergent or elective. Emergency transplants comprised 1,150 (26.6%) of classified cases.\(^{50}\) Wait times for non-emergency liver transplants were usually quoted in weeks.
**Multiple Transplants for the Same Patient**

In Mainland China, it is not unusual for doctors to procure multiple organs for use as spares or to perform multiple transplant operations due to rejection, both in quick succession, on the same patient\(^5\). These cases have even included third and fourth transplants. On one occasion, eight pairs of kidneys were procured for the same patient.

For example, Tan Jianming, Vice President of the Fuzhou General Hospital of Nanjing Military Command, is reported to have completed more than 4,200 kidney transplants as of 2014.\(^5\) Among his patients was a 35-year old male at Shanghai General Hospital in September 2003. In two weeks, Tan was able to acquire 4 sets of kidneys and blood samples, but none of them matched. Later, in March 2004, Tan managed to obtain 4 more sets of kidneys in rapid succession for the same patient, the last of which matched successfully. Thus, 8 pairs of “donor” kidneys were explanted for just one patient.\(^5\)

In 2006, a chief surgeon named Wang Guanrge published a study analyzing 50 kidney re-transplant cases at the First Affiliated Hospital of Henan University of Traditional Chinese Medicine. Among the 50 cases, 46 were second transplants, 3 were third transplants, and one was a fourth transplant for the same patient. The duration between transplants and re-transplants ranged between 2 hours and 8 years. Five of the cases were orthotopic re-transplants where a second kidney was found and transplanted within 10 days of the original transplant, which indicates that, in 5 such cases, a second kidney was found and transplanted within 10 days. In at least one case, another kidney was found within 2 hours.\(^5\)

Shen Zhongyang at the Tianjin Oriental Transplant Center performed two separate liver transplants for the movie star Fu Biao. Shen stated that, among this center’s patients, secondary transplants due to improper handling accounted for 10% to 20% of all cases.\(^5\)

In another example, surgeon Zhu Tongyu at Zhongshan Hospital Affiliated to Fudan University performed a fourth kidney transplant for the same patient.\(^5\)

**Replacing Any Body Part as Needed**

The hospitals surveyed performed a wide variety of transplants: kidney, liver, heart, lung, spleen, adrenal glands, pancreas, combined liver-kidney, combined pancreas-kidney, heart-lung, heart-kidney, small intestine, liver-pancreas-duodenum, pancreas-duodenum-kidney, liver-pancreas, liver-small
intestine, pancreas-kidney, parathyroid, thyroid-parathyroid-thymus, abdominal organ cluster, all 7 abdominal organs, and eight large full abdominal organs. The list includes 23 kinds of single-organ and multi-organ transplants, including cornea, bone marrow, testicle, bone, skin (including facial), hair, larynx, and many other types of tissue transplants.

Currently, permits from the Ministry of Health are required to conduct six types of solid organ transplants (kidney, liver, heart, lung, pancreas, and small intestine); cell and tissue transplants do not require permits. Yet, the vast majority of institutions have expanded into multiple types of transplants beyond the ones for which they have received permits from the Ministry of Health.

For example, Peking University Third Hospital carries out transplants of heart, lung, cornea, stem cell, bone marrow, vascular grafts, and hair, in addition to the types for which they have approval: liver, kidney, pancreas, and small intestine. This hospital performs eleven types in total.

Sun Yat-sen Hospital of Xiamen University has approval to perform only heart transplants, but also performs nine others including: kidney, liver, pancreas, spleen, lung, heart-lung, small intestine, islet cell, corneal, and bone marrow.

Wuxi People’s Hospital is approved only for lung transplants but also carries out eight other types: kidney, liver, heart, pancreas, cornea, stem cell, bone marrow, and vascular grafts.

Figure: Number of hospitals carrying out multiple transplant types
III. Volume Indicators

*Expanding Capacity*

To meet the ever-increasing demand for transplants, most hospitals have expanded their transplant wards and even constructed new buildings that often include VIP-style amenities to cater to transplant recipients from other countries.

![Shanghai Dongfang Hepatobiliary Hospital Anting New Campus](image1) ![Shanghai Changzheng Hospital Pudong campus](image2)

*Rendering: Birds-eye view of the central health care base at the People’s Liberation Army General Hospital in Sanya, Hainan*

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**CASE STUDY**

Asia’s largest-scale surgery building at Wuhan Union Hospital

The new surgery building at **Wuhan Union Hospital** opened in September 2006. It has 32 stories above ground and 2 underground. The integrated surgery ward building has 1,050 beds and 42 operating rooms. It can accommodate 200 surgeries per day, a volume equivalent to that of five medium and large-scale hospitals.61
Its Urologic Surgery Department enjoys high academic status in China and has now become one of the largest kidney transplant centers in the region. The Liver Transplant Center is a main component of its General Surgery Department. Its heart transplantation and combined heart-lung transplantation are ‘state of the art’. The Cardiovascular Surgery Department once completed 4 heart transplants concurrently on the same day and claimed to have completed the most heart transplants in the country during 2014.
Surgery Building Busy 24 Hours a Day

The Urology Department of Shanghai Renji Hospital established a new wing and renal transplant ward in the Pudong district in November 1999. It has expanded from its original 29 beds to 70 beds. Its new medical team and distribution system allowed its number of surgeries to increase by 300% and performs over 5,000 surgeries per year, with over 60% being large and extra-large operations. The average hospitalization time is five days.

“There are too many, too many patients! We have surgeries here overnight, nonstop for 24 hours a day,” Dr. Cheng Zheying told a Wenhui Daily reporter in March 2016. As many as 120 surgeries are performed here in a day. The most difficult and advanced surgeries, including robotic surgeries, are all performed here. This does not include liver transplants, as liver sources coming from other areas are often brought back to the hospital late at night, so it is quite common to conduct surgeries until early morning.

“The operating room is like a secret garden in the hospital. We have no time to be in contact with the outside world. The lights are on 24 hours a day here. Seven or eight o’clock at night is the same as in the morning. One can’t tell day from night,” Chen Zheying said.

In 2005, Renji Hospital’s east surgical building was put into use. It has 1,000 beds. The number of operating rooms has increased from 24 to 38. The Liver Transplant Center is located on the 14th and 15th floors of this new building. Before this, the Liver Transplant Center had increased its bed count from the original 13 at the end of September 2004 to 23 beds less than 10 days later. And later in June 2007, it increased to 90 beds and 110 beds in 2014. Its utilization rate and transplant volume also continued to hit new highs.

Continued Growth Despite Exposure

After 2006, when international attention was brought to bear on allegations of abusive organ harvesting in China, hospitals deflated and removed public disclosure of their transplant numbers. The Party/government used its spokespeople, media, and agents to create a false impression for the international community that the number of transplants in China was gradually decreasing.
In fact, the Party simply adjusted its strategy to be less public. Furthermore, the Ministry of Health’s new approval system implemented in 2007 contributed to the illusion that most hospitals had stopped performing transplants.

To the contrary, there was a spike in transplant volume between March 2006 and May 2007 in a rush to clear the donor bank inventory, after which the industry continued to grow steadily. We observed that some smaller institutions that did not receive approval either reduced or stopped performing transplants, while others that could still obtain organs continued to operate. However, large, approved institutions achieved even greater development with decreased competition and full government support.

Since 2000, organ transplantation has assumed a high priority in the government’s national strategy and as an emerging strategic industry to drive China’s future global development. It has continuously been incorporated in the National Five-Year Plan for multiple industries. National, military, and civilian agencies have invested heavily in research, development, and promotion of organ transplantation.

**New Ministry Approval System Brought Stable Growth**

After allegations were made in March 2006 that Falun Gong practitioners were being killed for organs in a death camp in Suijatun, the Chinese regime remained silent for three weeks before its foreign ministry spokesman denied the existence of the camp. Then, the Ministry of Health attributed the illicit transplants to a chaotic market and announced that it would enact a new qualification system in July 2007 that would limit transplant operations to only the largest hospitals after approval.

In the interim year, hospitals around the country rushed to clear their donor bank inventory, resulting in a spike in transplants. For example, Hunan People's Hospital advertised on April 28, 2006 that it would offer 10 liver and 10 kidney transplants free of charge. The Jilin Heart Disease Hospital offered promotions for heart transplant operations with reduced fees for a "quick sale"—the first five heart recipients were charged only 50,000 RMB.

That year, more than 1,000 transplant hospitals in China applied for permits under this new system. Among them, 164 eventually received permits. Under this system, large transplant centers faced less competition and achieved even greater development than before.

For example, the Liver Transplant Center of the **First Affiliated Hospital of Zhejiang University** stated on February 28, 2011, “Our country’s liver transplantation business has entered a period of stable development. Under the leadership of academician Zheng Shusen, the liver transplant business at First Affiliated Hospital of Zhejiang University is flourishing. It moved into a new building in 2007. Liver transplantation has become more systematic, professional, and large-scale.”
Some transplant centers operated with bed utilization rates between 100% and 200%. This growth could be seen even at relatively small-scale hospitals that did not meet the Ministry’s requirements at the time for obtaining transplant approval, as listed below.

**Zhengzhou No.7 People’s Hospital** specializes in heart and kidney transplants. It had 200 beds upon its establishment. It was the first in Henan Province to perform an allogeneic kidney transplant. Its urology department is designated as the Zhengzhou City Kidney Transplantation and Blood Purification Center.

Despite being a Class 2 hospital (with Class 3 being the highest), Zhengzhou No.7 was a “big player” in kidney transplantation in the province. When learning that only Class 3 Grade A hospitals would qualify for Ministry approval to perform transplants, the hospital’s Vice President, Wei Yan, said that kidney transplantation accounted for “a majority” of its business: “If we’re not allowed to do these [transplant] surgeries, that means half of the hospital’s business can’t be done anymore. It would cause enormous impact to the hospital’s development.”

According to an August 2016 report, its kidney transplant department had multiple techniques reach international standards over the past twenty-plus years. The hospital’s kidney transplant quantity and quality consistently led the province, performing the first combined liver-kidney transplant and the first pancreas-kidney transplant in Zhengzhou City. Its 60+ medical personnel have “long been used to being on-call 24 hours a day. In 30 years of work, Director Wang Changan has not taken any public holidays off, traveled, or even entered a movie theater.”

Rendering: Bird’s-eye view of the First Affiliated Hospital of Zhejiang University, Yuhang Branch
The hospital built two new wards, the first of which entered construction in 2006 with 600 open beds. On December 29, 2010, the entire hospital moved to its new site with 800 open beds. After becoming a Class 3 Grade A hospital in 2014, it started to construct another new riverside ward with 1,000 beds, increasing its total capacity to 1,800 beds.

In March 2015, an internal communication indicated a 130% bed utilization rate in its kidney transplant department. However, it reportedly had only 46 beds and 50 kidney transplants, a figure that is most likely deflated by an order of magnitude given the growth trends outlined above.

Update of the Kidney Transplant Department on March 31, 2015

In 2014, our department completed over 50 kidney transplants, leading the entire province. Size of the department: there are 46 approved beds, but the number of patients is now usually maintained at 70 or more. The bed utilization rate exceeds 130%.”

Web page of the kidney transplant department at Zhengzhou No. 7 People’s Hospital, dated March 31, 2015
Despite having approval for only kidney transplants, the Affiliated Hospital of Zunyi Medical College has also performed liver, bone marrow, cornea, stem cell, and other types of transplants. In 2012, its urologic surgery department reportedly had 51 beds and maintained a level of 100 patients, resulting in a utilization rate of around 200%. The department has since been expanded to 100 beds.

The Tianjin Medical University General Hospital’s website showed in 2016 that its general surgery department had a subordinate organ transplant research institute, which conducts liver, small intestine, and other abdominal organ transplants. The department has 208 beds and averages a 115% utilization rate. Its lung cancer surgery department contains the Tianjin Lung Transplant Center, which has 110 beds for its professional clinical team and admits an average of over 160 inpatients per month. Its urologic surgery department conducts kidney transplants, has 96 beds, and admits up to 150 inpatients per month. Its ophthalmology center carries out corneal transplants, has 42 beds, and admits more than 100 inpatients each month on average.

Furthermore, many unapproved hospitals did not, in fact, stop performing organ transplants. We list 75 hospitals that did not receive permits in 2007 yet continued to perform transplants and were later admitted into a pilot program for donations after cardiac death (DCD) starting in 2011. By January 2014, the approval list had been expanded to 169 hospitals.

Many hospitals have increased their number of transplant beds and opened new wards and buildings since 2006. The transplant business in China has developed with not only an abundance of available organs since around the year 2000, but also, evidently, with a confidence that this abundance will continue into the foreseeable future.

**Demand Outstripping Capacity**

The increased capacity of transplant centers still could not meet the demand driving high bed utilization and transplant volume. For example, the Third Xiangya Hospital of Central South University had over 1,000 people waiting for an organ. The First Affiliated Hospital of Xi’an Jiaotong University also had over 1,000 patients waiting for transplants. As of 2013, the No. 309 Hospital’s PLA Organ Transplant Research Institute has had 5,000 to 6,000 patients waiting for transplants each year.

A People’s Daily Online report on January 20, 2011 stated, “In a ward in the First Affiliated Hospital of Zhejiang University, where Zheng Shusen is located, currently lay more than 50 patients who urgently need liver transplants … At the Tianjin First Center Hospital Oriental Organ Transplant Center, there are no fewer than a thousand late-stage liver disease patients registered on the waiting list for liver transplants…”
Limiting Factors for Transplant Volume

The high bed and staff utilization mentioned above and the continued expansion of existing transplant centers and plans to qualify so many new ones suggest that the number of transplant operations are constrained by medical facilities and personnel rather than organ sources.

This can also be seen in the following examples of the regime’s push to export organ sources and promote China’s transplantation to markets outside of China.

In December 2014, Huang Jiefu went to Taiwan to propose the establishment of a "cross-strait organ exchange platform" to export human organs from the mainland to Taiwan, such that "patients would no longer need to travel from Taiwan to mainland China to undergo transplants.”¹⁰⁹

During a conference held in Guangzhou on August 22-23, 2015 by China’s Organ Procurement Organization Alliance, Huang Jiefu promoted China’s organ transplantation to the world during an interview by *Peng Pai News*, stating, “… The future transplant costs in China will still be the cheapest and most accessible in the world, and [the transplants will be] of high quality.”¹¹⁰

Huang Jiefu addressed the limiting factors of organ transplantation in China during a televised interview on January 12, 2015:¹¹¹

“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].”

Above, Huang indicated that the availability of organs was not the main limitation.

Ambitious Plans for Growth

In October 2015, Huang Jiefu told *Beijing Youth Daily* that China had only 169 hospitals with permits to perform one or more types of transplant operations. He expressed a desire to increase the number of qualified transplant hospitals from 169 to 300 and train 400 to 500 young doctors.¹¹²

*China Daily* later reported on May 15, 2016 that, according to Huang, “China will increase the number of hospitals conducting organ transplants to 300 in the next five years.”¹¹³

In his latest statement on January 2, 2017, Huang told *People’s Daily*, “We’re currently short of doctors, short of hospitals, short of coordinators … We’re calling to grow [from 169] to 300 to 500 hospitals.”¹¹⁴
Overworked Doctors and Nurses

We observed that a number of medical teams and individual doctors routinely struggled to carry out the volume of transplants demanded of them, including in recent years. Surgeons work overtime to procure organs and conduct transplants with surgical departments frequently carrying out multiple transplants simultaneously. One hospital even resorted to training almost all its general surgeons to conduct organ transplants.

It was common to see accounts of surgeons performing transplants for 20 hours without rest and getting little sleep each day.115 Doctors were so busy procuring kidneys that they are “often unable to go home for one or two weeks at a time.”116

Case Study: Working Around the Clock

At the Second Xiangya Hospital of Central South University, the director of the Urological Transplant Department, Peng Longkai, has completed more than 2,000 kidney transplants.117

One can infer the volume of transplants at this hospital from how busy its doctors have been:

“Transplant surgeons often have to work for over 20 consecutive hours performing surgeries. They will start another round of operations after they rest for three or four hours. The surgeons are still at the operating table, while the scrub nurses have changed several shifts. They often conduct a dozen operations over a period of 2 to 3 days. They once performed 9 kidney transplants in one day.”118

Case Study: Kidney Supply Chain Overwhelmed

“If I’m not at the hospital, I’m at the kidney procurement location. If I’m not at the kidney procurement location, I’m on the way between the hospital and the kidney procurement location.” This was the portrayal of the busy lifestyle of the transplant team at Qilu Hospital of Shandong University. Members of the team were often unable to go home for one or two weeks at a time. On December 26, 2010, a report on its official website stated.119

“Due to the current international criticism of organ sourcing in China, the number of usable cadaveric donor kidneys has decreased significantly, causing an increase in uncertain factors and intense competition. However, due to the tireless efforts of Director Dong Laidong of the Organ Transplant Supply Department and Director Tian Jun, of the Blood Purification Department, the number of cadaveric kidney transplants well surpassed that of last year, and the wait time for kidney transplants has not increased noticeably.”
Case Study: All Hands On Deck

This fervor in pushing transplant volume is not limited to national-level hospitals. We have found that transplantation has become a major business activity for municipal hospitals and subsidiary hospitals of state-owned enterprises, as exemplified by the case below.

The Dongfeng Company Hospital is operated by an automaker in Shiyan, a small industrial city in central China. In less than ten years, the explosive growth in this hospital’s transplantation activities “caused the local economy to prosper,” “elevated the city’s reputation,” and gradually replaced the Dongfeng vehicle as the new “business card of Shiyan.”

As early as in August 2000, it had conducted 10 kidney transplants, one thyroid transplant, and 3 corneal transplants in the same day. The hospital also performs liver, corneal, in situ parathyroid, bone marrow, and other types of organ and tissue transplants.

The hospital’s vice president Yuan Fangjun stated in 2009, “Kidney transplantation is now a routine surgery. Almost all surgeons at our hospital can independently complete kidney transplants.”

According to the hospital’s website, it has 10 surgical departments and more than 100 surgeons. How many transplants is the hospital performing to necessitate training almost all its surgeons in this procedure?

In addition, the hospital has a breast transplant department with more than 40 beds, 3 chief physicians, 2 associate chief physicians, 4 attending physicians, and 3 residents. These doctors’ web pages are no longer accessible.

Case Study: "A Decade of Memories"

Xi’an High-Tech District Hospital is a joint venture with a British hospital management company. Its organ transplant center was established in 2003. The Ministry of Health has not approved this Class 3 Grade B hospital for transplants.
In September 2012, during the tenth anniversary of its Urological Surgery Department, the hospital published an article describing the department’s efforts in achieving annual revenues of 10 million RMB. This “glorious achievement” came just five years after its establishment.\textsuperscript{125}

“Thinking about those days, we would leave before dawn for the train station, airport, or another hospital to pick up one patient after another. Regardless of the summer heat or the winter chill, 4 or 5 people were crammed into an old, dilapidated van, excising [source] organs. Thinking of the 7 or 8 transplant surgeries done in one day and one night, thinking about watching over critically ill patients and not leaving the hospital for one or two weeks…”

Case Study: “Addicted” Transplant Surgeon

According to an online posting, “Renji Hospital Liver Transplant Center was officially established on September 20, 2004. The hospital recruited Xia Qiang as its lead surgeon. Although he had already completed several hundred liver transplants successfully, Xia was still relatively inexperienced within the Chinese transplant community at the time.”\textsuperscript{126}

In a report by \textit{Jiefang Daily} on January 26, 2005, Xia said, “I’m obsessed with liver transplants. It’s like I’m addicted to it. I would feel uncomfortable if I don’t go to the ward to see patients for one day. I do at least two to five liver transplants a week. I’m not afraid of failures. I would carefully analyze and summarize and continue to do it the next day.” Exactly how many liver transplants had he done? Xia had lost count. He remembers only his record of six liver transplants in one day.\textsuperscript{127} Even now, a classical liver transplant takes four to six hours to complete; in 2005, the operation time was even longer.

Xia said, “The management of my team is militarized. Every medical staff member must keep their cell phone turned on 24 hours a day because liver transplants may require going out for graft procurement or preparing for surgery at any time. We doctors must be on standby at all times.”\textsuperscript{128} In 2013, a \textit{Wenhui Daily} article stated, “Renji Hospital conducts liver transplants surgeries continuously and doctors could not get out of the hospital all night long.”\textsuperscript{129}

\textbf{Hospitals Perform Multiple Transplants Simultaneously}

Another common pattern we observed were hospitals routinely performing multiple transplants a day. No longer a special achievement, one department conducted more than 10 or even 20 kidney transplants within 24 hours.
Wuhan Union Hospital Reinstalls 4 Hearts in One Afternoon

According to a 2013 report by the *Wuhan Evening News*, on the morning of June 20, Union Hospital’s Cardiac Surgery Department received notice that 4 donor hearts were available for transplant.

The same afternoon, the hospital’s vice president Hu Yu gave the order to perform 4 heart transplants simultaneously. More than 200 medical personnel, including 13 professors and 17 associate professors from the Cardiac Surgery Department, split into 4 teams, each of which independently completed donor selection, procurement, matching, and transplantation.

On June 21 at 10:43, four hearts were simultaneously transported to operating rooms at Union Hospital. At 11:50, led by Professor Dong Nianguo, Director of the Cardiac Surgery Department, four specialist teams began performing four heart transplants at the same time. In the 22 minutes between 13:47 and 14:09, four hearts were beating again in four end-stage heart disease patients.

At the First Affiliated Hospital of Sun Yat-Sen University in March 2006, a *Guangzhou Daily* reporter witnessed 5 liver and 6 kidney transplants being conducted simultaneously. The center's record for kidney transplants was 19 in one day. It has also performed 6 liver transplants and one multi-organ transplant in one day.

The hospital stated on its news website that it has had “tens of thousands” of liver or kidney recipients. Professor Zheng Keli, who directed the organ transplant department, has led more than 3,000 kidney transplants. The department’s current director, He Xiaoshun, has reportedly completed 1,300 liver transplants.
Xinqiao Hospital, affiliated with the Third Military Medical University in Chongqing, once carried out 24 kidney transplants in one day and had conducted 2,590 kidney transplants by 2002.135

On December 1, 2008, Qilu Evening News reported that the General Hospital of Jinan Military Command was capable of performing 6 kidney transplants simultaneously. It set a record of 16 kidney transplants within 24 hours. Its annual transplant volume has ranked among the nation’s top 10 for ten consecutive years.136

The Liver Transplant Center at West China Hospital has five full sets of imported liver transplant equipment, allowing five liver transplant operations to be performed simultaneously.137 The Center once performed seven liver transplants in one day, setting a national record.138

On February 18, 2014, sixteen doctors of the Hepatology Center at Fuzhou General Hospital of the Nanjing Military Command simultaneously carried out five liver transplants within seventeen hours.139

At Wuxi People’s Hospital, Chen Jingyu, “the No.1 Lung Transplant Surgeon in China,” often completed four or five lung transplants a day.140 The Xiangya Hospital of Central South University completed one liver, 6 kidney, and 8 corneal transplants on May 26, 2005.141 On September 3, 2005, it performed 7 heart, liver, and kidney transplants.142 On April 28, 2006, the organ transplant center conducted 17 transplants in one day, including 7 advanced-stage uremic patients simultaneously. On the same day, it also completed two liver transplants and 8 corneal transplants.143

Beijing Chaoyang Hospital reportedly conducted 21 transplant surgeries in one day around 2000.144 The founder of the transplant center at the Second People’s Hospital of Shanxi, Wu Xiaotong, often spent 12 hours a day performing transplant surgeries, one after another. In August 2006, the center recorded over 100 patients waiting for transplants at any given time. It conducted 11 kidney transplants on August 15th alone.145

**Most Prolific Institutions and Individuals**

Over the past decade, the Chinese authorities have not released the annual volume of individual hospitals and only claimed that a total of about 10,000 organ transplants are performed each year.146 However, even from the data scattered on hospital websites, it is clear that just a few hospitals and individual surgeons would easily surpass this number.

Much transplant data previously published have been actively removed and deflated in China, especially after illicit organ harvesting first gained international attention in 2006. For example, some transplant departments’ official annual figures account for less than 10% of their bed and personnel capacity. Nevertheless, in some cases, we have been able to compare numbers between different types of data from a variety of sources to get a sense of an institution’s true scale and its surgeons’ transplantation activities, some of whom have individually led thousands of transplant surgeries.
One of the most prolific institutions is **Tianjin First Central Hospital’s Oriental Organ Transplant Center**, which expanded to 500 beds in 2006. It reached 90% bed utilization rates by 2009\textsuperscript{147} and 131% in 2013.\textsuperscript{148} The Center can simultaneously carry out nine liver transplants and eight kidney transplants. Based on its bed count, a 100% utilization rate and an average hospitalization time of 3 to 4 weeks for liver transplants, the Center would be able to perform 6,000 to 8,000 transplants per year. It claims to have completed just 10,000 transplants in total,\textsuperscript{149} but this number would have easily been surpassed by just a few of its surgeons such as Shen Zhongyang whose biography says he had performed nearly 10,000 liver transplants by 2014.\textsuperscript{150} It was reported that, under his guidance, each of his former student doctors has independently completed nearly 1,000 liver transplant surgeries.\textsuperscript{151}

A media report stated, “As a leader, Shen Zhongyang has virtually no time for himself. In the past ten-plus years, he has basically gone from one thing to the next, day and night, he hasn’t had a single meal at regular times, and he’s often at the operating table until midnight or the following morning.”\textsuperscript{152}

Other transplant doctors also have not rested: “The hospital’s transplant surgery division’s doctors hurriedly shuttle between wards and operating rooms, with no time to greet one another. They kept saying, ‘These few days are crazy busy, with more than a dozen surgeries a day.’ Some doctors were even "rushing surgeries all night long [and] did not sleep at all." Doctors complain that the off-season is only a month after the New Year; they are busy until the end of the year and normally don’t go home.”\textsuperscript{153}

**The People’s Liberation Army Organ Transplant Center at No. 309 Hospital** has 231 medical and research personnel. It had 316 beds in 2010 and 393 beds in 2012,\textsuperscript{154} though its website now says it has 330 beds. Its bed utilization rates reportedly lead that of similar military organizations. It once completed 12 kidney transplants overnight.\textsuperscript{155}
As of 2014, Tan Jianming, vice president of Fuzhou General Hospital of Nanjing Military Command, has led more than 4,200 kidney transplants. Tan was previously also part-time Director of the Urology and Transplantation Department at Shanghai Jiaotong University’s First People’s Hospital and its Shanghai Organ Transplant Center.¹⁵⁶

Shanghai Changzheng Hospital affiliated with the Second Military Medical University, hosts two prolific doctors. Zhu Youhua, who is considered a leader in the People’s Liberation Army on kidney transplantation, completed 3,680 kidney transplants by 2010.¹⁵⁷

Fu Yaowen, founder of the First Hospital of Jilin University’s kidney transplantation program and blood purification center, completed 3,000 kidney transplants as of April 2009.¹⁵⁸

In a paper published in 2004, Yu Lixin, director of the transplant department at Nanfang Hospital of Southern Medical University, stated that the hospital had conducted 2,123 kidney transplants as of November 2001.¹⁵⁹

One particularly prolific institution is Xinqiao Hospital, affiliated with the Third Military Medical University. Its Renal Diseases Research Center claimed that it had “conducted 2,590 kidney transplants by 2002 ... and once performed 24 kidney transplants in one day.”¹⁶⁰

According to an introduction published by sohu.com in 2005, Guan Delin at Beijing Huaxin Hospital (First Affiliated Hospital of Tsinghua University) had experience in “over 2,700 kidney transplants, over 40 kidney transplants from relative donors, and close to 20 combined kidney-pancreas transplants.”¹⁶¹

The Guangdong No.2 Provincial People’s Hospital’s organ transplant department was established in 1999. Its director, Liu Dong, personally participated in more than 2,000 kidney and liver transplant surgeries by 2015.¹⁶² Deputy director Wu Jiaqing revealed that, prior to August 3, 2006, the department performed “more than 10 organ transplant surgeries every day,” and that “beginning in August 2006, patients from 8-9 countries came to the hospital for organ transplants, including from Singapore, Cambodia, and France.”¹⁶³

The Navy General Hospital in Beijing “has helped thousands of end-stage liver cancer patients gain a second life through liver transplantation.”¹⁶⁴
Volume Drivers

I. National Strategy and Funding

Since 2000, organ transplantation, one of the “comprehensive, leading future emerging industries” meant to drive China’s future global development, has assumed a high priority as a national strategy and has been considered a strategic industry by the government. The government has invested heavily in research, development, and personnel training in transplantation technology to meet the needs of this rapidly growing industry.

A large number of organ transplantation projects have received funding from major national programs as well as other sources from within the central government. The vast majority of medical universities and their affiliated transplant centers, military and civilian, have received significant funding from all levels of government.

The Five-Year Plan of China is a series of social and economic development initiatives that are part of China's national plan for economic development shaped by the Chinese Communist Party (CCP) through plenary sessions of the Central Committee and national congresses.

Since 2000, the government has continuously incorporated organ transplantation into its "Five-Year Plans" for multiple ministries. In 2004, organ transplantation technology was added as a major research area and key technology in the Tenth Five-Year Plan for National Health, Science and Technology Development of the People’s Republic of China. In 2008, organ transplantation was included again as a key project in the Eleventh Five-Year National Key Technology Research and Development Program. In 2011, organ transplantation was once again included in a number of special plans within in the Twelfth Five-Year National Key Technology Research and Development Program.

China’s National Program on Key Basic Research Projects, the 973 Program, is a foundational research and major development project guided by national strategic demands. It is meant to be “progressive, advanced, comprehensive” and assume a leading role in China's development of important scientific technology.

The High Technology Research and Development Program, the 863 Program, aims to address high-tech issues of national long-term development and national security; it is meant to be “strategic, cutting-edge and forward-looking.” This project intends to develop high technology with independent intellectual property rights, to coordinate the integration and application of high technology, and lead the development of future emerging industries.

A large number of military and civilian research centers were established to overcome technological difficulties in transplantation, such as immunosuppressants and organ preservation solutions. For example, the website of Shanghai Changzheng Hospital affiliated with the Second Military Medical University claims that its organ preservation solution is being used in 98% of Chinese hospitals.\textsuperscript{165}
The military, as well as central and local governments have also invested heavily in domestic medical institutions to carry out basic research and development in organ transplantation and promote its industrialization. These strategies are illustrated by the following examples:

The largest transplant center in Asia is located in Tianjin. The director of the Oriental Organ Transplant Center of Tianjin First Hospital, Shen Zhongyang, also director of the Institute of Organ Transplantation of the Chinese People’s Armed Police General Hospital, was named the "father of liver transplantation in China." He was appointed as the chief expert of the organ transplant program under the national “863 Program” and named a subject expert in biological and medical technology under the same program.\(^{166}\)

The First Affiliated Hospital of Zhejiang University has the largest transplant center in eastern China. In recent years, the Liver Transplant Center has completed over 40 national projects. Some of the projects have been provided with over ten million RMB in funding. It was the chief leader for two of the 973 Program scientific research projects: foundational research in the application of immunological mechanisms of chronic graft dysfunction (2003–2008) and basic research on the application of organ transplantation immunology (2009–2013).\(^{167}\) In addition, it took the lead in three 863 Program projects under the national Eleventh Five-Year National Key Technology Research and Development Program and two projects supported by National Natural Science Foundation. Furthermore, the center had a project funded by Changjiang Scholars and Innovative Development Team Program, and another supported by the Ministry of Health’s Professional Specialization Fund.\(^{168}\)

The Organ Transplant Center of the First Affiliated Hospital of Guangzhou Sun Yat-sen University has engaged in more than 50 research projects, including the national 863 Program, Twelfth Five-Year National Key Technology Research and Development Program, and a National Natural Science Foundation project during three recent years.\(^{169}\)

The academic leader of the center, He Xiaoshun, has presided over 17 research projects with total funding of more than thirteen million RMB. From 1996 to 1998, he received only 80,000 RMB from the National Natural Science Foundation despite having had worked in this field for over 10 years. In the seven years from 2001 to 2008, he received research funding of 850,000 RMB, a 10-fold increase. Since 2008, his team has obtained research project grants amounting to 12 million RMB, a 14-fold increase in 7 years, including a national 863 Program on key transplantation technology consisting of 2.88 million RMB between 2012 and 2015.\(^{170}\)

Jiefang Daily, the official newspaper of the People’s Liberation Army, reported in 2004 that the Shanghai Municipal Science and Technology Commission established a major multiple organ transplantation research project in 2002. It invested 8 million RMB in five hospitals to conduct clinical research in heart, liver, and lung transplants. These five hospitals include Zhongshan Hospital of Fudan University, Ruijin Hospital and Eastern Hepatobiliary Surgery Hospital of the Second Military Medical University, Shanghai First People’s Hospital, and Shanghai Lung Hospital. In 2003, the total number of organ transplants performed in Shanghai was more than 10 times that of 2001 and the hospitals achieved a few "national and even international firsts" in organ transplantation.\(^{171}\)
We list here vast projects that other organ transplant centers have embarked on in recent years:

Dou Kefeng, the director of the PLA Institute of Organ Transplantation of Xijing Hospital, Affiliated to the Fourth Military Medical University, has taken the lead in the following projects: two sub-projects of national "863 Program", one project in "Eleventh Five-Year National Key Technology Research and Development Program", one major project and three other projects in the National Natural Science Foundation, one military clinical high-tech major project, the military "Eleventh five-Year scientific and technological research disciplines, three military "2110" projects, and a special military discipline. The total ongoing research project funds reached over 20 million RMB.\(^{172}\)

The Institute of Organ Transplantation Research of Xi'an Jiaotong University has recently taken the lead in 46 national and key departmental projects, including those under the “973 Program,” the “Eleventh Five-Year National Key Technology Research and Development Program,” National Natural Science Foundation, and a provincial Key Discipline.\(^{173}\)

The Organ Transplantation Research Institute of Wuhan Tongji Hospital affiliated with Huazhong University of Science and Technology has undertaken over 30 science and technology research projects in the past decade, including the National 863 Program, 973 Program, major projects funded by the National Natural Science Foundation, clinical key projects supported by the Ministry of Health, major projects under the Hubei Province Natural Science Foundation, and other research projects commissioned by the Ministry of Health. In the past five years, this institute has published 410 papers, including 78 papers listed in the Science Citation Index (SCI) and 11 books.\(^{174}\)

In addition, other prestigious universities and affiliated hospitals, as well as almost all military and civilian medical universities and their affiliated hospitals, are rapidly developing their organ transplant research and receiving a large amount of national funding.

II. **Lucrative Industry**

China’s economic reform resulted in hospitals having to rely on the sale of services to cover their expenses. According to cardiovascular doctor Hu Weimin, the state funding for the hospital where he worked was not enough to cover even staff salaries for one month. He stated, "Under the current system, hospitals have to chase profit to survive."\(^{175}\)

The government, in addition to withdrawing funding, imposed price controls on basic health services. These price controls were not comprehensive, leaving new technologies and drugs untouched. In addition, hospital doctor salaries were changed to include a bonus component based on hospital revenue. Blumenthal and Hsiao wrote, "The result was an explosion in sales of expensive pharmaceuticals and high-tech services."\(^{176}\)

All these changes drove hospitals to perform transplant surgeries; a new technology not covered by price controls that provided private revenue not only from the operations but also from the required post-surgical anti-rejection drugs. Transplant surgery and postoperative care have become a leading source of income for many hospitals in China.
For instance, the Organ Transplant Center of the People’s Liberation Army Hospital No. 309 in Beijing stated, “Our Organ Transplant Center is our main department for making money. Its gross income in 2003 was 16,070,000 RMB. From January to June of 2004, income was 13,570,000 RMB. This year [2004] there is a chance to break through 30,000,000 RMB.”

A report by *World Journal* in March 2015 quoted Huang Jiefu as saying that a liver transplant costs at least 600,000 RMB (about $96,000 USD) and that a kidney transplant costs more than 300,000 RMB (about $48,000 USD). At the end of 2006, Huang Jiefu stated to *Caijing Magazine*, “Organ transplantation is developing as a tool for hospitals to make money.”

**Selling Organs**

Because there were no guidelines for transplant fees in China, the prices for transplants ranged from tens of thousands to hundreds of thousands RMB. These included pharmaceuticals, surgery fees and organ acquisition, including preservation and transportation costs.

As of 2007, the website of the China International Transplant Network Assistance Center (CITNAC), which was established under the organ transplant department of the First Affiliated Hospital of China Medical University, listed transplant prices for foreigners. Kidney transplants cost more than $65,000 USD, liver transplants were $130,000, and lung and heart transplants each cost around $150,000.

List of transplant prices on the CITNAC website as of August 29, 2007
On February 26, 2013, Huang Jiefu expressed in a *Xinhua News* article, "A certain stimulus mechanism is to be introduced into China's organ donation system by giving out certain humanitarian aid and receiving economic compensation." This implied that no compensation was given to donors or their relatives for organs obtained before 2013. The *Guangzhou Southern Weekend* reported in March 2010 that since 2000, the sale of organs for transplants has become "a mine of high-grade ore that can’t be exhausted." 

On March 31, 2006, a senior military doctor of the General Logistics Department of the Shenyang Military Command wrote to the *Epoch Times*, "China is the center of international live organ trading, and has accounted for more than 85% of the total number of live organ transplants in the world since 2000. According to the data reported to the Central Military Commission, a few people have been promoted and became Generals due to their ‘achievements’ in this field."

He also said, "The military acts as the organ transplantation management system … There is a huge source of living organs. Many military hospitals report their transplants to their supervising authorities. At the same time, they also carry out organ transplants on a large scale in private. This leads to the fact that actual numbers are much higher than the official statistics."

The People’s Liberation Army General Logistics Department is in charge of allocating organs sourced from prisoners in detention facilities. The department receives cash (or foreign currency) when selling organs to hospitals, which pay for the organs. The bulk of the transplants are conducted in military hospitals, while the organs sold to civilian hospitals were just for extra profits. The purpose was to use these hospitals as shop windows and advertisements to overseas customers.

### Kidney Transplant Cost

Below are the average costs of kidney transplants in different regions between 2000 and 2004, as reported in academic papers.

<table>
<thead>
<tr>
<th>Region</th>
<th>Transplant Centers</th>
<th>Average Hospitalization Days</th>
<th>Average Cost RMB</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beijing</td>
<td>19</td>
<td>29.9</td>
<td>109,300</td>
</tr>
<tr>
<td>Shanghai</td>
<td>9</td>
<td>24.2</td>
<td>74,800</td>
</tr>
<tr>
<td>Tianjin</td>
<td>9</td>
<td>23.7</td>
<td>74,300</td>
</tr>
<tr>
<td>Jiangsu Province</td>
<td>36</td>
<td>25.3</td>
<td>74,600</td>
</tr>
<tr>
<td>Henan Province</td>
<td>41</td>
<td>25.5</td>
<td>125,600</td>
</tr>
<tr>
<td>Hubei Province</td>
<td>14</td>
<td>18.3</td>
<td>104,500</td>
</tr>
<tr>
<td>Hunan Province</td>
<td>12</td>
<td>20.0</td>
<td>81,800</td>
</tr>
<tr>
<td>Guangdong Province</td>
<td>40</td>
<td>22.0</td>
<td>122,900</td>
</tr>
</tbody>
</table>

*Table 4.1  Summary of kidney transplantation from 2000 to 2004*
We found lower prices in various media reports:

The *Qilu Evening News* reported on July 28, 2003 that the General Hospital of Jinan Military Command charged 30,000 to 40,000 RMB for a kidney transplant and 20,000 to 40,000 RMB per year for immunosuppressive drugs thereafter.\(^\text{188}\)

It was reported in April 2006, patients paid only 50,000 RMB for kidney transplants at the Second Hospital of Dalian Medical University.\(^\text{189}\)

According to an archived webpage from 2008, Changhai Hospital of the Second Military Medical University advertised an average hospitalization fee of 50,000 RMB for kidney transplants.\(^\text{190}\)

According to a webpage dated in 2010, at the First People's Hospital of Changde, the average cost for a kidney transplant between relatives was about 60,000 RMB with no complications, or about 80,000 RMB from a cadaveric donor.\(^\text{191}\)

It was reported that in early September 2014, a patient paid 600,000 RMB in cash to the First Affiliated Hospital of Zhengzhou University, which was able to find a matching kidney for him in one day. The transplant surgery was done the following day.\(^\text{192}\)

A *people.cn* report from November 16, 2015 indicated that The First Affiliated Hospital of Xi'an Jiao Tong University Medical College requires “hundreds of thousands of RMB” for a kidney transplant.\(^\text{193}\)

### Liver Transplant Cost

Between 1995 and 1999, liver transplant surgeries at Wuhan Tongji Hospital required 10 hours, and the cost averaged between 300,000 and 400,000 RMB and peaked at 800,000 RMB. By 2000, the cost had decreased to 190,000 RMB and surgery time to 7-8 hours.\(^\text{194}\) By 2001, the institute could usually keep the liver transplant cost below 150,000 RMB; the surgery took 4 hours, which represented the best in the country. In August 2011, the institute performed a liver transplant for 110,000 RMB, the lowest nationwide.\(^\text{195}\)

In 2009, the cost of a liver transplant at Peking University First Hospital was between 160,000 and 200,000 RMB, and included surgical fees, in-hospital monitoring, pharmaceuticals, and examination fees for around three weeks after the operation.\(^\text{196}\)

Lu Shichun, director of the Beijing You’an Hospital transplant center, revealed in a media interview in 2011 that the fee for liver transplants differs among transplant centers and averages around 400,000 to 500,000 RMB.\(^\text{197}\)

In 2016, Wuhan Union Hospital, a sister institution of Tongji, advertised its liver transplant cost at around 150,000 RMB.\(^\text{198}\)
Heart and Lung Transplant Cost

As of 2016, a heart transplant averaged around 250,000 RMB with 3,000 to 5,000 RMB per month for postoperative immunosuppressant medication at the Fuwai Cardiovascular Disease Hospital, an affiliate of the Chinese Academy of Medical Sciences.  

Shanghai Chest Hospital of Shanghai Jiaotong University charged between 200,000 and 300,000 RMB for a lung transplant in 2016.

Fees Paid by International Patients

Huang Jiefu publicly stated in May 2007, “China is one of the cheapest countries in the world for organ transplants. Liver transplants [cost] about 1/10 of those in the U.S., and kidney transplants are about the same.”

Interviews conducted by David Matas and David Kilgour with a group of international transplant recipients before 2006 reflected remarkably consistent prices. Below are some examples:

In 2001, a group of 7 patients who went to China together for organ transplants were each asked to bring $200,000 HKD (about $26,000 USD);

In 2004, an Asian patient paid $27,000 USD for a kidney transplant at the Economic and Technical Development Hospital of Guangzhou;

In 2005, a patient from Taiwan paid $29,000 USD (including “red envelope” money, airline ticket, etc.) for a kidney transplant at Guangdong Province Border Patrol Armed Police Central Hospital in Shenzhen;

In 2006, another patient from Asia paid $26,000 USD in cash for a kidney transplant at the Land Force General Hospital of Wuhan.

Other sources show the cost of a kidney transplant in China runs to $66,500 USD and a liver up to $157,000 USD.

As reported by Yeson Healthcare Service Network, a Taiwanese broker, a heart transplant at the Zhongshan Hospital in Shanghai can be had for as little as $119,000 USD—a fraction of the $860,000 USD such an operation would cost in North America.

However, transplant fees are not always low and depend on the recipient’s urgency and ability to pay. For example, in 2014 and 2015, Yang Guang, an expert in Chinese domestic affairs who resides in Denmark, revealed the inside stories of two hospitals affiliated with a medical university in northeastern China: organ transplant prices for foreigners are not fixed. Usually, they would charge $500,000 to $1 million USD. In some cases, those with money who are desperate for an organ have been charged up to $2 million USD for a transplant and hospital stay. A Japanese woman received a young girl’s liver and was charged $5 million USD.
Trends and Factors in Transplant Costs

The main factors driving transplant costs are the treatment itself, including surgery and hospitalization costs, pharmaceuticals, including the ongoing regimen of anti-rejection drugs, and the cost of the donor organ.

Different hospitals charge different fees for transplants but generally follow a common trend. From a few of China’s main organ transplant centers, we see a decline in medical and pharmaceutical costs coinciding with an overall increase in transplant fees.

Between 1995 and 1999, Wuhan Tongji Hospital charged an average of 300,000 to 400,000 RMB and a maximum of 800,000 RMB for organ transplants. In August 2001, surgery fees decreased significantly to around 150,000 RMB on average (the range was 110,000 to 190,000 RMB). The director of the hospital’s organ transplant research institute stated that the decrease in costs was due to the maturation of technology, decrease in operation times from 7-10 hours to 4-5 hours, reduced bleeding, lower cost of blood transfusions, shorter anesthesia times, fewer postoperative complications, and shorter hospitalization times. By 2002, Tongji Hospital had reduced its liver transplant operation time to 4 hours and the cost to below 150,000 RMB, the “lowest in the country.”

The decrease in medical costs due to improvements in technology and techniques is also reflected at Shanghai General Hospital, which in 2002 eliminated the need for blood transfusions in one-third of its liver transplant surgeries. The entire operation time was reduced to four and a half hours, and the lowest cost was 142,000 RMB.

A 2003 investigation of liver transplant costs showed that early-stage recipients had an average pharmaceutical cost of 198,000 RMB every six months after surgery. The same cost for late-stage patients was more than 230,000 RMB. Transplant recipients also need long-term anti-rejection drugs, which cost more than 30,000 RMB per year.

As of 2003, the surgery fee at Jiangsu Provincial People’s Hospital was one-tenth to one-eighth that of the same surgery in other countries.

In 2004, Nanjing Drum Tower Hospital’s hepatobiliary department director Ding Yitao told a reporter that the hospital’s liver transplant fee averaged 150,000 RMB, the lowest in the country. Postoperative anti-rejection drugs cost around 3,000 RMB per month for domestically produced products and 5,000 RMB for imported drugs.

In the same year, the People’s Liberation Army Hospital No. 309 charged 200,000 RMB for liver transplants and 300 RMB per day for anti-rejection drugs. Early in the same year, the Oriental Organ Transplant Center charged approximately 250,000 RMB for liver transplants. By 2006, the fee had increased to 400,000 RMB for international patients but remained approximately 200,000 RMB for domestic patients.

We observed that transplant costs steadily declined in the years between 2000 and 2006, when organ harvesting was brought to light, due to technological development and abundant organ sources. The dramatic decline of surgery costs and treatments made it affordable for a wider range of patients. The ready
availability of organs, maturation of technology, and increase in both domestic and international patients led to an exceptional growth in China’s organ transplant industry.

After the organ harvesting crimes were revealed in 2006, according to a report by Jingchu Network in August 2015, liver transplants in China cost approximately 600,000 RMB, and kidney transplants cost approximately 300,000 RMB. From these descriptions of costs for liver and kidney transplants from different sources, we see that fees in recent years are significantly higher than those before 2006. However, medical and pharmaceutical costs have trended downward. Therefore, it is most likely that payments for donor organs represent an increasingly large portion of increased transplant fees.

One may naturally wonder if the increase in fees is due to a shortage in organ supplies. This does not appear to be the case though, as Huang Jiefu stated in 2015 that the limiting factors for organ transplantation in China lie primarily in medical costs and availability of transplant hospitals and doctors: “Only the third [reason] 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].”

Nevertheless, compared to the number of patients waiting for transplants, hospital transplant capacity and organ available remain scarce resources. Despite an endless line of domestic patients in need of transplants, the profit-maximizing strategy for hospitals is to provide transplants to those most willing and able to pay. This can be seen in the Chinese regime’s push to establish a platform for exporting organs to Taiwan and solicit transplant tourism from abroad.

Furthermore, international patients are being charged up to hundreds of thousands of U.S. dollars more than domestic patients, with fees that are many times the cost of treatment and pharmaceuticals. This takes advantage of the extremely inelastic nature of the market, given that these patients from other countries would otherwise have to wait years for a transplant.

**Selling Pharmaceuticals**

The tissue type or HLA compatibility of the source and recipient impacts the rate of rejection after a transplant operation. According to the US-based National Marrow Donor Program (www.marrow.org), the compatibility ratio of recipient and donor from a non-immediate family member is quite low, being somewhere between 1% and 5%. That is to say, it takes between 20 and 100 donors to find tissue type compatibility with a single recipient; meanwhile, media reports in China indicate kidney tissue type matching percentage of between 20% and 30%.

Immunosuppressant drugs can lessen rejection responses due to tissue type incompatibility. Globally, donor sources and patients with six out of ten matching points are considered tissue-type compatible for kidney transplants. The number of matching points has a direct impact on rejection rates and the amount of immunosuppressants required. In China, however, four matching points, or sometimes even fewer, are acceptable. As a result, patients need to rely on large doses of immunosuppressants after receiving transplants. Patients who develop severe rejection responses require a second or even
multiple additional transplants. Sale of these pharmaceuticals also provides doctors with a source of kickbacks, contributing to some doctors’ aggressive pursuit of even marginal recipient prospects.

Dong Jiahong, director of the hepatobiliary surgery department at Beijing Tsinghua Chang Gung Hospital, revealed to *Xinhua Net*, "For a liver cancer patient, an average liver resection may cost 20,000 to 30,000 RMB. Liver transplantation may cost over 200,000 RMB, and there are follow-up costs. Most transplant patients will suffer from rejection issues and need to take immunosuppressants for life. Add in antiviral drugs preventing the recurrence of hepatitis B, and the cost is between 50,000 to 100,000 RMB a year."218

Because immunosuppressant regimens are individualized, they vary among hospitals and patients. Our hospital survey shows that the annual cost for post-transplant immunosuppressants range from 10,000 to 60,000 RMB. The cost decreased over time as domestic immunosuppressants gained a market share. We discuss immunosuppressants in more detail later in this chapter.

**Growth in Revenues**

The experience and practice of the People’s Liberation Army (Chengdu Air Force) Hospital No. 452 jumped from "township-scale" to that of a “large-scale hospital” in just a few years. Other military hospitals followed suit.

An article “Relying on the Market to Protect the Battlefield” by *Xinhua Net* and other domestic media in 2009 reported that, when Zhang Cong became the hospital’s president in 2000, the troubled hospital had more than 6 million RMB of debt. Its kidney transplant division used to be the hospital’s best-known department. However, due to the lack of funds to update its equipment, its number of patients decreased day by day.219

In 2002, Zhang decided to “borrow a hen to lay eggs” and found an entrepreneur who invested 8 million RMB in the hospital. The investor and the hospital together managed the renal transplant division. After the capital and equipment were in place, its kidney transplantation operation soon "came back to life."

Five years later, the hospital bought back the facilities, equipment, and management rights from the investor and embarked on a new entrepreneurial path. Very soon, the number of kidney transplants performed by the People’s Liberation Army Hospital No. 452 ranked first among all hospitals in Sichuan Province. After the hospital grew from its original 210 beds to more than 1,000 beds, Zhang became the president of the People’s Liberation Army Hospital No. 309 in 2013.

At Hospital No. 309, the People’s Liberation Army Organ Transplantation Center's revenue rose from 30 million RMB in 2006 to 230 million RMB in 2010, an increase of nearly 8-fold in 4 years.220

The annual income of Daping Hospital, affiliated with the Third Military Medical University, also increased from 36 million RMB at the end of the 1990s, when it began organ transplantation, to over 900 million RMB in 2009221, an increase of nearly 25-fold.
Civilian hospitals have also profited from performing transplants. For example, the Second People's Hospital of the Shanxi Occupational Disease Prevention and Control Center (in reality a kidney transplant center) charges approximately 100,000 RMB for a kidney transplant. Its revenue for 2005 was about 250 million RMB with at least 100 patients on its transplant waiting list.222

III. Technology Research and Development

In the past decade, these hospitals and individuals have achieved many innovations that enabled the growth of the transplant industry and made it possible to achieve its present-day scale. These achievements include prolonged organ preservation, lower rejection rates, and shortened operation times.

**Immunosuppressants**

As transplant patients rely on post-transplant immunosuppressants to avoid organ rejection, the rapid development of China’s immunosuppressant technology has greatly contributed to the unprecedented growth of China’s organ transplant industry.

The Chinese government incorporated organ transplantation into its national strategy and listed the research and development of immunosuppressants as national key scientific research projects. For example, the High Technology Research and Development Program (863 Program), National Program on Key Basic Research Projects (973 Program), "985 Project" of the State Key Universities, and China National Natural Science Fund all invested heavily in promoting immunosuppressant research and development. Many domestic transplant related institutions engaged in R&D early on.

Such ample government funding produced fruitful results:

- Ciclosporin, the first domestic immunosuppressant was, was made by the North China Pharmaceutical Group223
- “A novel immunosuppressant Fingolimod: research advances” 224 and “Research advances in the application of immunosuppressant in organ transplantation” published by the Institute of Basic Medical Sciences, Academy of Military Medical Sciences225
- A project on research and development of organ transplant immunosuppressant series products conducted by the Lunan Pharmaceutical Group
- Research in immunosuppressant withdrawal after liver transplantation by the Guangdong Provincial Organ Transplant Center, Sun Yat-sen University Institute of Organ Transplantation226
- Studies in basic immunology for organ transplantation conducted by the Fudan University Organ Transplant Center227
By 2004, domestic drug development began to catch up, taking almost half of the market share from imported and joint-stock drugs. This greatly lowered the cost of immunosuppressant medications and lifted an economic barrier for many patients who otherwise could not afford to receive organ transplants. It thereby contributed to a rapid growth in transplant volume in China before 2004.\textsuperscript{228}

In 2004, Professor Zhang Yuhai, director of the Urology Department of the Beijing Friendship Hospital, said that over half of kidney transplant patients chose to use domestic immunosuppressants, including not only self-funded patients but also many with free medical service or insurance.\textsuperscript{229}

In 2006, *Health Times* (owned by *People’s Daily*) interviewed Yan Lvnan, the director of the liver transplantation center at West China Hospital of Sichuan University. Dr. Yan said that West China Hospital was able to keep the cost of post-transplant maintenance at 30,000 yuan in the first year and an average of 10,000 yuan per year thereafter by using immunosuppressants reasonably, which greatly reduced the cost.\textsuperscript{230}

In March 2006, just before the exposure of forced organ harvesting, the Southern Medicine Economic Institute under the China Food and Drug Administration published a report in its own publication, Medicine Economic Reporter, which said the domestic immunosuppressant market at the time was nearly 10 billion yuan with more than 100 manufacturers of nearly 30 drugs.\textsuperscript{231}

If each patient pays an average of 30,000 RMB per year for immunosuppressants, a 10 billion RMB market in 2006 would have supported approximately 333,000 post-transplant patients. Since organ transplantation grew significantly only after 2000, the size of the immunosuppressant drug market in 2006 implies an average of 50,000 to 60,000 transplants were performed each year since 2000.
According to the 2011 "China Science and Technology Development Report," China has established a series of new demonstration bases for piloting the production of raw materials and preparations of immunosuppressants. China has also improved its research capacity and development and manufacturing of domestic immunosuppressants, achieved the localization of new immunosuppressive products, reduced medical costs for transplant patients, realized earnings from exports, and strengthened the international competitiveness of the Chinese organ transplant immunosuppressant industry.232

As the patents of several major imported drugs expired, China began to produce a large volume of imitation products in addition to domestically developed drugs. These producers have achieved the same efficacy as imported immunosuppressants but at much lower prices. This increased the market share of domestic drugs. Major producers include Huadong Medicine Co., Ltd, North China Pharmaceutical Group Corporation, and Zhejiang Hisun Pharmaceutical Co., Ltd.233

As transplant hospitals and pharmaceutical companies have widely deflated public transplant data for tax evasion and inability to explain organ sources, it is difficult to determine accurate statistics for domestic immunosuppressant usage. Nevertheless, our research finds that along with the momentous development of China's organ transplant industry, the immunosuppressant market grew by an average of 13% every year between 2008 and 2014.234

International drug sales data, such as those from IMS Health indicating a 2.3 billion RMB market in 2009,235 reflect only part of the actual size of the Chinese immunosuppressant market. China's actual immunosuppressant market should be far more than the 10 billion figure in 2006 with its scale reflected by current IMS Health data.

**Improved Organ Matching**

Professor Tan Jianmin at **Fuzhou General Hospital of Nanjing Military Command** pioneered HLA and amino acid residue matching technology in China, enabling donors and recipients to be genetically matched before transplantation and significantly improving transplant outcome quality. He was the second-place recipient of the 2001 National Science and Technology Advancement Award.236

Tan also established an anti-HLA antibody screening method that significantly reduced acute rejection events. This technique has since been applied all over the country with Fuzhou General Hospital establishing collaborative relationships with more than 100 hospitals in 19 provinces and cities and organ sharing relationships with 15 transplant centers.237

**Prolonged Organ Preservation**

Among the hundreds of transplant-related patents in China, about half are related to anti-rejection drugs and organ preservation solutions.
Shanghai Changzheng Hospital of the Second Military Medical University was one of the first in China to perform kidney transplants. Zhu and his team completed research on kidney and multi-organ preservation solutions. After 20 years of clinical application, this product is propelling China to the forefront of this field internationally. An archived webpage of Changzheng Hospital stated, “95% of hospitals in China use the organ preservation solution we developed.”

**Shortened Operation and Hospitalization Times**

At No. 107 Hospital of Jinan Military Command, deputy director Du Yingdong of the liver transplant center claimed, “Over 10 years ago, it took us over 10 hours to complete a liver transplant surgery. Now our technology has matured, and a liver transplant only takes 4 to 5 hours. Sometimes, 3 to 4 surgeries can be completed in one day. The speed of development has caught up to that of high-speed rail.” In April 2012, the hospital opened a new ward building, increasing its bed count from 600 to over 1,000.

Shen Zhongyang, the director of Tianjin Oriental Organ Transplant Center, set a world record for the fastest liver transplant surgery in 2003, taking 2 hours and 4 minutes between making the incision and closing the abdomen. No blood transfusions were used during the operation. The previous record was 3 hours.

Zhongshan Hospital of Shanghai Fudan University performed its first liver transplant in 1978. Since 2001, liver transplantation at this hospital has seen rapid development, with increased variety, more innovations, shorter operating times (4 to 6 hours on average), less bleeding, and fewer complications. Some patients are discharged 9 days after their operation. Transplant recipients include patients with liver cancer as well as other end-stage liver diseases. Its quantity and success rate of liver transplantation lead both the Shanghai region and the country.

Zhongshan Hospital’s Liver Surgery Department recently started accelerating the transplant process time by performing surgery on patients immediately after their initial outpatient examination and hospital admission. This has attracted patients from more than 10 countries and regions, including the United States, the United Kingdom, Japan, Canada, South Korea, Hong Kong, Macau, and Taiwan. Even with a conservative two-week hospitalization stay, this hospital’s annual liver transplant volume can reach 5,000.

IV. **Industrialization and Proliferation**

Organ transplantation in China began in 1960. Kidney transplantation experiments were expanded nationwide in the 1970s. By the late 1990s, around 80 kidney transplant facilities had been opened nationwide, each averaging less than 20 annual operations.
Since 2000, a large number of national and military transplantation medical technology research centers and key research laboratories have been established, incubating new transplant technologies and leading the rapid development of the transplant industry.

Shen Zhongyang, the director of both Tianjin Oriental Organ Transplant Center and the Liver Transplant Institute of the Armed Police General Hospital, overcame a major obstacle in liver transplantation in China by developing an integrated prevention system that reduced the recurrence rate of the hepatitis B virus (HBV) after liver transplants from over 80% to under 5%.246

Shen has helped 66 medical facilities in 22 regions carry out clinical liver transplants, trained 200 transplant professionals, and spread the "pinnacle of transplantation technology." In July 2006, Shen’s center was sponsored by the China Medical Board (CMB, a private foundation based in the US) and became a “National Liver Transplant Training Center.” It has trained 385 doctors who have since led organ transplant departments in other hospitals in performing huge number of transplants. 247

Additionally, the Transplant Medicine Engineering and Technology Research Center, affiliated with the Ministry of Health, was officially established at the Third Xiangya Hospital of Central South University. Its mission was to build an important national base specializing in clinical transplantation medical research and related industry development. The center also collaborated with the World Health Organization and the International Xenotransplantation Association to develop international xenograft norms (the Changsha Standard).248 The center received funding from the National Natural Science Foundation and other key projects in clinical disciplines from the Ministry of Health. The hospital also concentrated manpower, material, and financial resources to industrialize related research results.

Spread of Organ Transplantation

The Ministry of Health guides some military and civilian medical institutions with strong technical capabilities as well as large organ transplant centers to conduct clinical teaching and practice, establish technical transplant training sites, and promote new transplantation technologies. A large number of transplant doctors have been trained in a short time to meet the needs of the rapid growth of China’s transplant industry.

Case Study: Mobile Heart Transplant Hospital

Liao Chongxian founded the heart center at Zhongshan Hospital of Xiamen University. Based on his experience in the United States, Liao created a “mobile heart transplant hospital” model and travelled around the country to instruct and personally participate in heart transplants.249 The center’s website says that the department performs heart transplants on a large scale and has helped more than twenty Class 3 Grade A hospitals to perform heart transplants in the past 10 years.
As of 2004, more than 75 heart transplant recipients had received their transplants from his hospital.\textsuperscript{250}

**Case Study: A “New Era” of Lung Transplants**

The lung transplant center at **Wuxi People’s Hospital** claims to have completed more than half of all lung transplant surgeries in the country.\textsuperscript{251} It was reported in July 2014 that the team under its founder, Chen Jingyu, often completed four or five lung transplants a day.\textsuperscript{252}

Chen led his team to spread its advanced techniques to more than thirty 3A hospitals in more than ten cities and provinces, including Beijing, Guangzhou, Nanjing, Hangzhou, Wuhan, and Jilin.\textsuperscript{253} Chen’s profile stated, “A new era of lung transplantation in China has begun, and Chen’s team has filled in many gaps in this area.”\textsuperscript{254}

**Case Study: Spreading Advances in Liver Transplantation**

Zheng Shusen served as the academic lead of the transplant center at the **First Affiliated Hospital of Zhejiang University**. He was among the first in China to use a non-venous bypass technique to reduce bleeding, transfusions, surgery time, ICU time, and cost. His award-winning innovations in liver and multi-organ transplants have been put into use all over the country.\textsuperscript{255}

The hospital has helped develop transplantation at Peking Union Medical College Hospital, Huashan Hospital of Fudan University, Xinhua Hospital Affiliated to Shanghai Jiao Tong University School of Medicine, the First Affiliated Hospital of Xinjiang Medical University, Zhongshan Hospital of Xiamen University, and other institutions.\textsuperscript{256}

First Affiliated Hospital of Zhejiang University has also established remote diagnostic systems with the First Hospital of Zhejiang Province and other hospitals in Zhejiang, Fujian, Guizhou, Xinjiang, and other areas. Its transplant capabilities radiate to more than 20 provinces and cities in China and have propelled the development of the country’s organ transplant industry.\textsuperscript{257}

**Case Study: Building a Remote Medical Network through Military Satellites**

**No. 181 Hospital of Guangzhou Military Command** spent 250,000 RMB in early 2005 to build a remote medical network through military satellites, connecting over 200 military hospitals and more than 1,000 experts. This remote treatment model provides patients with a platform for accessing high-end medical resources.\textsuperscript{258}

No. 181 Hospital’s PLA Kidney Transplant Center performed 8 transplant surgeries on December 30, 2012 alone, including heart, lung, kidney, liver, corneal, and islet cell transplants. Although this hospital is not qualified to conduct heart transplants, it conducted experiments and clinical research in
heart transplantation using a "partially continuous beating technique". The technique has reached an advanced level internationally and has been applied extensively in other hospitals.259

**Training Transplant Specialists to Keep Up with Demand**

We found that many leading institutions have been selected by the Ministry of Health to train a large number of transplant specialists for hospitals nationwide.

In June 2006, Huang Jiefu cooperated with the China Medical Board (CMB) in New York to provide one million USD to assist in the establishment of transplant standard and registration systems, domestic laws and regulations regarding transplantation in China, strengthening professional training, and expanding liver transplant-related research achievements. The project established three liver transplant training centers in China, the Peking Union Medical College Hospital, the First Affiliated Hospital of Sun Yat-sen University, and Tianjin First Center Hospital.260

In 2003, Xi'an Jiaotong University and the Terasaki Laboratory in the United States jointly established the Organ Transplants Tissue Typing Technology Training Center in northwestern China. By December 2012, this center had guided more than 10,000 kidney transplants for 23 hospitals in 13 provinces. It guided other hospitals in liver, kidney, heart, lung, and small intestine transplants in western China. It trained more than 500 medical professionals from other domestic institutions, with some of them becoming academic leaders.261 Since 2000, this center has held annual programs for continuing education in kidney transplantation for students from large general hospitals in 14 provinces and autonomous regions.262
Total Kidney and Liver Transplant Capacity Well Over One Million

I. A State Secret

In 2015, Huang Jiefu, China’s former Deputy Minister of Health, admitted in a television interview that the number of transplant surgeries performed is a state secret.  

Huang Jiefu: The death penalty is a state secret, right?  
Xu Gehui (reporter): But patients are not a secret. I’m sorry, I really don’t understand.  
Huang: Your organs come from executed prisoners.  
Xu: Okay, so the sources of the organs can be a secret, but is the waiting list [for transplants] also a secret?  
Huang: You can deduce from the number of [executed prisoners] the number of [transplants] performed. Then don’t you know the state secret?  
Xu: Then it should be smaller than this number [of executed prisoners]. Another reason is.  
Huang: What you’re saying is too sensitive, so I can’t be too explicit with you. It will be clear to you as long as you think about it. Because your country doesn’t have a transparent system, you don’t know where the [organs] come from. How many [transplants] are done is also a secret, so in fact, many things are actually a mess, and the number isn’t clear to you.

(End of transcript)

Due to the sensitive nature of organ sources and financial incentives, the number of transplants is falsified level-by-level, all the way down to individual hospitals and doctors. As a result, the true number of transplants performed in China may forever remain unknown.

II. Basic Methodology

The organ harvesting crimes are ongoing. Under the current conditions of secrecy and deception, we cannot offer a single absolute number for the annual volume of transplants or offer even a close approximation.

As a Chinese saying goes, “paper cannot wrap fire.” Such a long-lasting, nationwide massacre cannot be concealed forever. While we cannot directly observe the number of transplants these hospitals have performed, we can still make extrapolations based on capacity, growth, transplant types performed, hospital bed count and utilization rates, professional personnel, and so on. Moreover, regulations published by the government provide useful information in determining the scale of transplant centers nationwide.
III. Numbers & Classifications of Organ Transplant Centers

According to statistics from the Administration of Hospitals under the National Health and Family Planning Commission (NHFPC) in July 2015, there were 20,918 hospitals in Mainland China. Among them were 1,151 Class 3 hospitals and 4,321 Class 2 hospitals.

Class 3 hospitals are normally located in major cities. They are typically large-scale general or specialized hospitals with over 500 beds. Among them, 705 are Class 3 Grade A (“3A”) hospitals.

Huang Jiefu, former Deputy Minister of Health, said in March 2006, “For a hospital to pass the evaluation to become a Class 3A hospital, it must have completed a fixed target of more than five organ transplants. Organ transplantation has become a resource for competition among hospitals to reach the standard and for their branding.”

In April 2015, Wuhan University Professor Ye Qifa, Executive Chairman of the China Organ Transplant Alliance and a specialist in major organ transplantation, stated to People’s Daily Online that before the introduction of the “Human Organ Transplant Ordinance” in 2007 there were over 1,000 medical institutions in China performing organ transplants.

The World Organization to Investigate the Persecution of Falun Gong completed a comprehensive investigation in December 2014 of both organ transplant hospitals and doctors and determined that 865 hospitals were involved in organ transplantation. The hospitals are found in 22 provinces, five autonomous regions, four centrally administered municipalities, and 217 prefecture-level cities.

Below are the qualifications and composition of the 712 hospitals that carry out liver and kidney transplants:

<table>
<thead>
<tr>
<th>Hospital Classification</th>
<th>Number of Hospitals Investigated</th>
<th>Percentage of 712 Hospitals Conducting Liver and Kidney Transplants Investigated</th>
<th>Total Hospitals In Classification</th>
<th>Percentage of Total Hospitals In Classification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class 3 Grade A</td>
<td>551</td>
<td>77.4%</td>
<td>705</td>
<td>78.2%</td>
</tr>
<tr>
<td>Class 3 Grade B</td>
<td>54</td>
<td>7.6%</td>
<td>198</td>
<td>27.3%</td>
</tr>
<tr>
<td>Class 3 Grade C</td>
<td>1</td>
<td>0.1%</td>
<td>186</td>
<td>0.5%</td>
</tr>
<tr>
<td>Class 3 Other</td>
<td></td>
<td></td>
<td>62</td>
<td>0.0%</td>
</tr>
<tr>
<td>Class 3 Total</td>
<td>606</td>
<td>85.1%</td>
<td>1,151</td>
<td>52.6%</td>
</tr>
<tr>
<td>Class 2 Grade A</td>
<td>96</td>
<td>13.5%</td>
<td>2,073</td>
<td>4.6%</td>
</tr>
<tr>
<td>Class 2 Grade B</td>
<td>4</td>
<td>0.6%</td>
<td>754</td>
<td>0.5%</td>
</tr>
<tr>
<td>Class 2 Grade C</td>
<td></td>
<td></td>
<td>49</td>
<td>0.0%</td>
</tr>
<tr>
<td>Class 2 Other</td>
<td></td>
<td></td>
<td>1,445</td>
<td>0.0%</td>
</tr>
</tbody>
</table>
On May 23, 2007, the Ministry of Health announced a list of 87 transplant hospitals\textsuperscript{271} approved by the Review Expert Team of the Human Organ Transplantation Skills Clinical Application Committee and authorized by the Ministry of Health. We refer to these as “national level” hospitals. Essentially, these were the most qualified and capable national level organ transplant centers at that time. Concurrently, the Ministry released a list of second-tier hospitals designated to perform organ transplants, issuing 18-month temporary permits to 77 transplant centers with weaker qualifications. We refer to these as “regional level” hospitals. In total, 164 hospitals were given permits in 2007 to conduct organ transplants.\textsuperscript{272}

On August 8, 2013, the National Health and Family Planning Commission (successor to the Ministry of Health) published a list of 165 hospitals approved to conduct organ transplants,\textsuperscript{273} including Wuhan University Zhongnan Hospital Human Organ Transplant Center, which performs transplants from bodies with no cardiac activity. Four more hospitals were added to the list by the beginning of 2014, bringing the number of qualified hospitals to 169.\textsuperscript{274}

This report focuses on the 164 hospitals that received approval from the Ministry of Health in 2007, so we can categorize their qualifications as either national or regional level. If we exclude the 18 heart and lung transplant centers, 146 transplant centers remain. Among the first approved group in 2007 were 26 national-level military and armed police hospitals, 52 national-level civilian hospitals and 68 designated hospitals.

Among the 566 transplant centers that did not receive approval from the Ministry of Health, 405 were based in large-scale 3A hospitals. These included 56 military and armed police organ transplant centers, 349 mostly-3A civilian hospitals, and 161 medium-sized hospitals (including 55 Class 3 Grade B and C hospitals and 106 mostly Class 2 hospitals).

Table: Classification of 712 hospitals conducting liver and/or kidney transplants

<table>
<thead>
<tr>
<th>Type of Transplant Center</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>National-level military and civilian liver and kidney transplant centers approved by the Ministry of Health in 2007</td>
<td>78</td>
</tr>
<tr>
<td>Liver and kidney transplant centers designated by the Ministry of Health in 2007</td>
<td>68</td>
</tr>
<tr>
<td>Subtotal</td>
<td>146</td>
</tr>
<tr>
<td>Unapproved large-scale (mainly 3A) transplant centers</td>
<td>405</td>
</tr>
<tr>
<td>Unapproved medium-size (mainly Class 3C and Class 2) transplant centers</td>
<td>161</td>
</tr>
<tr>
<td>Subtotal</td>
<td>566</td>
</tr>
<tr>
<td>Total liver and kidney transplant centers investigated</td>
<td>712</td>
</tr>
</tbody>
</table>
IV. Volume Estimation Based on Minimum Requirements

We looked at the total possible transplant volumes that could be performed by these 712 liver and kidney transplant hospitals using the minimum capacity requirements issued by the Ministry of Health for permitted transplant centers.

146 Ministry Approved Liver and Kidney Hospitals

For hospitals approved to perform liver and/or kidney transplants, we calculated the minimum transplant capacity using the Ministry’s minimum bed requirements for maintenance of certification.

On June 27, 2006, the Ministry of Health published a “Notice Regarding the Management and Regulation of Liver, Kidney, Heart, and Lung Transplantation Capabilities,” which imposed the following requirements for medical institutions carrying out organ transplants:

- Liver: 15 beds dedicated to liver transplants and no fewer than 10 ICU beds
- Kidney: 20 beds dedicated to kidney transplants and no fewer than 10 ICU beds

Based on an average one-month hospital stay, each bed could accommodate up to 12 transplant patients per year. In practice, kidney transplants generally require one to two weeks whereas liver transplants require three to four weeks of hospitalization. Since we are mixing kidney and liver transplants in our volume analysis, we use the maximum hospitalization duration of four weeks as the average length of stay for each transplant patient.

Our survey of 165 hospitals found widespread facility constraints, including transplant centers with bed utilization rates exceeding 100% and a long list of patients waiting for transplants. It is important to note that Huang Jiefu has publicly announced plans to expand the number of approved transplant hospitals from 169 to between 300 and 500 and to train 400 or 500 more young doctors. This suggests that the current system-wide capacity cannot keep up with demand. Thus, we are confident in assuming that the vast majority of the existing hospital capacity is being fully utilized to perform transplantation surgeries.

Given 100% bed utilization rates, our calculations indicate that all 146 hospitals combined could theoretically conduct 69,300 transplants per year.

After 2000, liver transplants gradually became a routine clinical procedure in China. Soon thereafter, kidney transplants also began to be carried out on a large scale with a few kidney transplant centers already exceeding 1,000 kidney transplants. Since many liver transplant centers also conduct kidney transplants, the rapid increase in the number of kidney transplants compensate for the relative delay in scaling up liver transplants.

We then multiplied annual figures for the approved hospitals by fifteen (years), excluding the year of 2000 as ramp-up time. Following this method, we estimate that the total transplant capacity in approved centers over the 15-year period between 2001 and 2015 is 1,039,500.
Table:  A volume scenario of 146 hospitals permitted to conduct transplants, based on transplant bed count requirements by the Ministry of Health.

<table>
<thead>
<tr>
<th>Permit Type</th>
<th>Hospitals</th>
<th>Minimum Beds</th>
<th>Annual Transplants Per Hospital</th>
<th>Annual Transplants in Category</th>
<th>Years</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liver</td>
<td>21</td>
<td>25</td>
<td>300</td>
<td>6,300</td>
<td>15</td>
<td>94,500</td>
</tr>
<tr>
<td>Kidney</td>
<td>65</td>
<td>30</td>
<td>360</td>
<td>23,400</td>
<td>15</td>
<td>351,000</td>
</tr>
<tr>
<td>Liver &amp; Kidney</td>
<td>60</td>
<td>55</td>
<td>660</td>
<td>39,600</td>
<td>15</td>
<td>594,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>146</strong></td>
<td></td>
<td></td>
<td><strong>1,039,500</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

566 Non-Approved Hospitals

Because only 164 of the more than 1,000 hospitals that applied under the Ministry of Health’s 2007 approval system received permits, in reality, there have been more than 566 non-approved hospitals performing transplants. Despite not being approved by the Ministry of Health, many of these facilities have not halted transplant activities with some of these non-approved institutions reporting significant transplant volumes.

405 Large-Scale Non-Approved Military and Civilian Hospitals

All of the 3A institutions located in large cities are required to have over 500 inpatient beds. There are cases of centers in medium-sized cities performing 100 transplants within three months, which would equate to 400 surgeries per year, assuming a constant rate. All 405 hospitals in this category are 3A hospitals with larger capacities and greater demand. As there could be great variations in transplant volume from hospital to hospital, we set the baseline for each large-scale hospital at 100 transplants per year.

161 Medium-Size and “Alternative” Non-Approved Transplant Hospitals

This group includes 161 medium-size transplant institutions, 55 Class 3 Grade B hospitals, 106 Class 2 hospitals, and a few smaller ones that also conduct organ transplants. These hospitals usually perform more kidney transplants, which have lower technical requirements than liver transplants. Many of these hospitals have performed far more transplants than the minimum volume, with some performing hundreds per year.

Before the Ministry of Health released its list of 164 approved transplant centers in 2007, transplant centers across China had been qualified for transplantation by various assessment departments. For example, the minimum requirement for a qualified kidney transplant center in Guangdong Province in 2003 was to conduct at least 50 kidney transplants per year. Between September and December 2003, 30 hospitals qualified for kidney transplants and 17 for liver transplants. We assume 50 transplants per year for each medium non-approved transplant center.
Military hospital transplant centers were minimally affected by the introduction of transplant permits in 2007 and have continued to carry out transplantation surgeries. Many non-approved civilian centers also continued to conduct transplants after 2007, but their individual situations varied. We assumed that all non-approved hospitals stopped performing transplants after 2007 and therefore multiplied the annual volumes for non-approved hospitals only by 7 years (2001 to 2007).

Added together, the non-approved transplant centers could perform up to 48,550 transplants per year. Over a period of 7 years, the total could be 339,850 transplants.

Table: Estimated annual transplant volume of non-approved hospitals based on minimum requirements.

<table>
<thead>
<tr>
<th>Hospital Type</th>
<th>Hospitals</th>
<th>Annual Transplants Per Hospital</th>
<th>Annual Transplants of All Hospitals</th>
<th>Years</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Large Non-Permitted</td>
<td>405</td>
<td>100</td>
<td>40,500</td>
<td>7</td>
<td>283,500</td>
</tr>
<tr>
<td>Medium Non-Permitted</td>
<td>161</td>
<td>50</td>
<td>8,050</td>
<td>7</td>
<td>56,350</td>
</tr>
<tr>
<td>Total</td>
<td>566</td>
<td></td>
<td></td>
<td></td>
<td>339,850</td>
</tr>
</tbody>
</table>

Sum of 712 Hospitals Based on Minimum Requirements

Adding the 1,039,500 transplants performed by approved hospitals and the 339,850 transplants performed by non-approved hospitals, we arrive at a figure of approximately 1,379,350 transplants, which translates into about 90,000 transplants performed per year in China.

Table: A transplant volume scenario based on Ministry of Health requirements for permitted hospitals and local regulations for non-permitted hospitals.

<table>
<thead>
<tr>
<th>Hospital Type</th>
<th>Number of Hospitals</th>
<th>Years</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permitted</td>
<td>146</td>
<td>15</td>
<td>1,039,500</td>
</tr>
<tr>
<td>Non-Permitted</td>
<td>566</td>
<td>7</td>
<td>339,850</td>
</tr>
<tr>
<td>Total</td>
<td>712</td>
<td></td>
<td>1,379,350</td>
</tr>
</tbody>
</table>

This analysis is based on the published minimum bed counts under the Ministry of Health’s permit system in 2007. Even though the Ministry approved only 164 centers, most of which carry out far more transplants than minimum bed counts can produce, it is relevant that more than 1,000 hospitals applied for permits to conduct transplants under this system, logically implying that they were either close to or met these minimum requirements.

This discussion is limited to liver and kidney transplants. We do not attempt to estimate a conclusive total at this stage; instead, we present only a minimum range of possibilities, which likely do not reflect the full scale of transplants performed in China. The true scale and magnitude of transplantation surgery in China is left for the reader to conjecture.
The reported transplant figures indicate that the total number of transplants performed before 2007 by the 80% of hospitals that have not received permits are comparable to that of the approved 20%. Thus, the number of transplants performed by approved transplant centers constitute only half of all transplants carried out in China.

V. Cross-Verification with Media Reports

Some doctors and hospitals unintentionally exposed clues of their transplant volumes when talking to the media. These numbers are far higher than the minimum requirements would suggest. Below are a few examples of such reports.

In November 2011, Sina Global News reported that Wuhan, a major city in central China, is said to be China’s largest organ transplant center. Among its hospitals, Tongji Hospital of Huazhong University of Science & Technology is the most well-known. It is also one of China’s first and most authoritative hospitals for living kidney transplants. It conducts thousands of kidney transplants each year and has China’s largest pool of kidney recipients.²⁸⁴

China’s Largest Organ Transplant Center Has Many Patients Waiting for Organ Transplants

Wuhan, a major city in central China, is said to have China’s largest organ transplant center. Among its hospitals, Tongji Hospital of Huazhong University of Science & Technology is the most well known. It is also one of China’s first and most authoritative hospitals for living kidney transplants. It conducts thousands of kidney transplants each year and has China’s largest pool of kidney recipients. There are about 1 to 1.5 million patients in need of organ transplants each year, including, in particular, 120,000 in need of kidney transplants .......

In September 2013, Zhu Jiye, director of the Organ Transplant Institute of Peking University and the Department of Hepatobiliary Surgery of Peking University People’s Hospital told China Economic Weekly that “most of our nation’s organ transplants come from death-row prisoners. Our hospital conducted 4,000 liver and kidney transplant operations within a particular year. These organs all came from death-row prisoners.”²⁸⁵
On celebrating the 100th Anniversary of the First Affiliated Hospital of Sun Yat-Sen University in October of 2010, a report posted on the news website of Xinkuai Paper stated that tens of thousands of patients had accepted liver or kidney transplants at its organ transplant center.  

On April 4, 2006, Asia Times published a report entitled “Japanese flock to China for organ transplants.” The report states that Mr. Suzuki, chairman of the Japan Transplant Recipients Organization, discovered that a hospital in a major city in China conducted 2,000 organ transplants in 2005 alone. Among the recipients, 30 to 40 were Japanese, and 200 were Korean.
In China, everything in the media is subject to either censorship or self-censorship. A media story in China is also a statement that the Party wants published, has allowed to be published, or that the authors and media editors believe the Party would not mind having published.

What is true for the media is also, in a sense, true of hospital websites. Although the media is subject to the closest scrutiny, nothing gets posted or published by hospitals without the approval or implied consent of the Party.

Media stories about organ transplant volumes in China often inadvertently reveal damaging information when examined in the proper context. Seemingly isolated statistics about organ transplants can provide important evidence of higher transplant volumes than those formally acknowledged. Thoughtless admissions or concessions by the Party/State have revealed that the volume of transplants is substantially higher than the minimum number we determined earlier.

Therefore, the total volume of transplants carried out by the 712 liver and kidney transplant centers since 2000 is most likely staggering.
Cover-Up

The Chinese regime has systematically hidden and destroyed evidence and data regarding its harvesting of organs from illicit sources. Our examination of hospitals shows that transplant figures claimed by the government and medical institutions have been manipulated because of the inability to identify organ sources and due to financial interests. This was especially true after organ harvesting was first publicly exposed to the world in 2006, since which time transplant data and relevant online information have been either removed or deflated, often by an order of magnitude.

I. Case Study: China International Transplantation Assistance Center (CITNAC)

On October 16, 2007, the Ministry of Foreign Affairs made a rare, high profile announcement that Hiroyuki Nagase, the CEO of a Japanese-funded company, had been arrested for illegal organ trading. The Ministry indicated that, since 2004, the Shenyang-based IPC Information Service Corporation had published online information about organ trafficking under the name of "China International Transplantation Assistance Center."

The arrest came when the center’s website attracted international attention after China’s organ harvesting program was exposed in 2006. The website contained information about organ transplant prices, the availability of kidney transplants from living sources, and how the Chinese government facilitated its high transplant volume. The website was available in Chinese, Japanese, Korean, Russian, and English. It was subsequently shut down after September 23, 2007.
The China International Transplantation Network Assistance Center (CITNAC), which focused mainly on foreign patients, was founded in 2003 under the organ transplantation department of the First Affiliated Hospital of China Medical University. We refer to it by the name on its English website. While nominally foreign-owned, the center was established within a Chinese hospital. The government apparently used this structure, and the prosecution of a foreign national, to avoid culpability for illicit organ transplants carried out by a Chinese institution.

II. Deletion of Information

A number of hospital and transplant organization webpages and even entire websites were deleted after the first Kilgour/Matas report was released in 2006. In addition, we observed that some hospitals merged their dedicated transplant departments and centers back into their parent departments, such as hepatobiliary surgery, urology, etc. The more generic departmental structure obfuscates any remaining information regarding transplant resources and capacity.

Transplant Organization Websites

The Chinese Medical Association Society of Transplantation website, before it was taken down in April 2006.
The Society of Transplantation website (http://www.cstx.org/) under the Chinese Medical Association (http://www.cma.org.cn/) became inaccessible shortly after the harvesting of organs from Falun Gong practitioners was first publicized on March 9, 2006. Searching for the Society of Transplantation website stored on www.archive.org reveals that the website was taken offline in April 2006.

We also found a listing of active transplant-related websites published in 2004 that are no longer accessible, including China Organ Transplant Online established primarily by Beijing Chaoyang Hospital’s Urology and Kidney Disease Center, Transplant Space by the First Hospital of China Medical University’s Organ Transplant Research Institute, the Chinese Renal Transplant Collaboration website by Zhengzhou Central Hospital’s Kidney Transplant Department, and the Central China Military Renal Transplant Collaboration website operated by the People’s Liberation Army Hospital No. 460’s urologic surgery department, among others.

Hospital Websites

Xiangya Hospital Deletes Report of Record-Breaking 17 Transplant Surgeries in One Day

On May 14, 2006, Xiangya Hospital of Central South University published a report titled “Our Hospital Again Sets a New Record in Organ Transplant Surgeries.” The report stated that the hospital set a new record by performing 2 liver, 7 kidney, and 8 corneal transplants in one day.

The report was deleted shortly after it was mentioned on an overseas website. Records on archive.org indicate that the article had been deleted by June 22, 2006. However, the title of the report was still listed on the “Comprehensive Medical News” page.

Clicking the link to the report results in the message, “The content you are looking for has been deleted, renamed, or is temporarily unavailable.” Other articles in the same list were still accessible.

A link to the deleted report "Our Hospital Again Sets a New Record in Organ Transplant Surgeries" on Xiangya Hospital’s news portal.

Nevertheless, the original article is still available on the news website of Central South University, under the title “Xiangya Hospital Organ Transplantation Sets New Record: 17 Transplant Surgeries Completed in One Day.”

Other hospitals also deleted information regarding their transplantation activities, capacity and personnel from their websites.
III. Restricted Access to Registries

For the book *Bloody Harvest*, David Kilgour and David Matas were able to garner information about transplant volumes from the China Liver Transplant Registry in Hong Kong. After publication of the book, the China Liver Transplant Registry shut down public access to statistical aggregate data on its site. Access is available only to those who have a registry-issued login name and password.

For a while thereafter, the names and locations of transplant hospitals reporting to the registry remained public. The registry listed 35 national hospitals (including 9 military) and 45 provincial hospitals (including 11 military). After David Matas referred to this data publicly it was also removed from public view.

At the Transplantation Congress in Vancouver in August 2010, Haibo Wang, Assistant Director of the China Liver Transplant Registry, presented at the same session as did David Matas. David Matas asked him why public access to the data on the registry website was shut down and if it could be restored. His answer was that public access was shut down because people were misinterpreting the data. If anyone was to get access from then on, the registry first had to know the purpose for which the data was to be used and have some confidence that the data would not be misinterpreted.

The Chinese health system runs four transplant registries, one each for liver, kidney, heart and lung transplants. The liver registry is located in Hong Kong. The other three are in Mainland China with kidney and heart registries in Beijing and lung in Wuxi. The data on these other three sites are also accessible only to those who have registry-issued login names and passwords.

IV. Ministry of Health Notices Show Hospitals Widely Underreport Transplants

The Ministry of Health issued two regulations that indicated widespread, extensive underreporting by transplant centers in Mainland China:

- The Ministry of Health Medical Regulation Notice #55 of 2009 included a zero-tolerance policy of suspending the transplant approval of any hospital found not in compliance with human organ transplant reporting requirements.
- The Ministry of Health Medical Regulation Notice #105 of 2010 required all transplantations be reported within 72 hours of being performed. Hospitals found to be in violation would have their transplant qualifications suspended.

After these notices were issued, has the situation changed?

In April 2011, *The Economic Observer’s* report titled “Who can solve the difficulties in organ donation in China?” demonstrated that wide gaps exist between the reporting and registration system used by transplant centers and the real number of transplant surgeries. The article cited an example in which Tianjin First Central Hospital (Oriental Organ Transplant Center) registered only 7 liver transplants (including those from both living and cadaveric donors) in 2010, yet its publicly reported liver transplant figure was 330. Hospital president Shen Zhongyang and Wang Haibo, who managed the National Liver Transplant Registry at Hong Kong University’s Queen Mary Hospital, both declined to explain this discrepancy.
Per our earlier analysis, this hospital’s transplant volume is at least 6,000 to 8,000 per year and may have reached as high as 7,800 to 10,400 per year. Its registered volume is not even a tiny fraction of the actual number of transplant surgeries. Its transplant center claims to have performed the most transplants in the entire country and was ranked first in the registration system consistently for more than a decade. This suggests that other transplant centers might have registered even fewer than 7 transplants per year.

From this example, we can see that underreporting among China’s transplant centers can be described as “severe.” The transplant statistics reported by government authorities must therefore be far from reality.

V. Causes of Underreporting

“Problems with the Organ Sources"

Wu Mengchao revealed in an interview with iNewsweek.cn on February 23, 2006, “There are problems with the organ sources, so it’s hard to organize cases after performing [transplants], and we can’t publish papers.”

Financial Interests

Tax evasion has become a common practice for enterprises and institutions in Mainland China. In addition to the financial aspect, transplant centers also maintain two sets of books when it comes to transplant volume.

In the industry’s early period of growth after 2000, because transplant volume was limited by technology and the cost of immunosuppressant medications, hospitals and doctors engaged in high-profile publicity to attract patients. Transplant volumes increased with the quick resolution of these obstacles. For self-financed hospitals, protecting themselves from the tax consequences of this surge in profits became a practical concern. Underreporting of transplant volumes became a way to evade taxation.

As mentioned earlier, the Oriental Organ Transplant Center performs thousands of transplants per year but reported only 7 liver transplants to the National Liver Transplant Registry in 2010.

We also examined such practices at Peking University People’s Hospital. As of July 16, 2014, its website stated that the hospital had carried out a total of 600 liver and 510 kidney transplants since 2000. After becoming an approved transplant center in 2007, it claims to have performed “80 to 90 transplants per year.”

In other words, as of 2014, Peking University People’s Hospital has publicly reported that it has performed fewer than 1,200 liver and kidney transplants in over a decade.

However, in an interview with China Economic Weekly, Zhu Jiye inadvertently revealed entirely different numbers: “Before the pilot [donation] program started in 2010, all of our organ sources came from death-row prisoners. Our hospital once did more than 4,000 liver and kidney transplants in one year. These organs all came from death-row prisoners.”
Zhu was describing events before 2010. The hospital’s transplant center moved into its new 470-bed surgery building in December 2005. Its website now claims it performs 120 to 130 liver and kidney transplants per year, a mere \( \frac{1}{33} \)rd of the number stated by Zhu Jiye. It is unlikely that a transplant center with 470 beds would perform only 120 to 130 surgeries per year.

In another example, a senior military doctor who belonged to the General Logistics Department of the Shenyang Military Command wrote to the Epoch Times on March 31, 2006:

“The number of underground transplants performed in China exceed the public figures by several times. For example, if the official number is 30,000 cases, then the actual number would be 110,000. This is also the root cause of plummeting prices of organ transplants in China … Because there is a huge pool of available living organs, many military hospitals report their transplants to their supervising authorities. At the same time, they also carry out organ transplants on a large scale in private. This leads to the fact that the actual numbers are much higher than the official statistics.”

VI. Falsifying Transplant Data

We found that underreporting of transplant volume is a common phenomenon among the 165 approved transplant hospitals. A series of representative case studies are presented below.

**Oriental Organ Transplant Center**

The Tianjin First Central Hospital Transplant Surgery Division was established in 1998. It later became the Oriental Organ Transplant Center in 2003. It is the largest such center in Asia and has ranked first in China for the cumulative number of transplants performed since 1998. Liver and kidney transplants became routine surgeries at the center in 1999.

The center’s archived web pages show that it broke ground on its new building in 2002. The Tianjin municipal government funded construction of the new building with plans for 500 transplant beds. The center aimed to perform 500 liver transplants and 300 kidney transplants per year. This implies that each transplant bed would accommodate fewer than two patients per year. We can thus see that the center began to deflate its transplant volume from an early stage.

On December 28, 2003, Xinhua Net reported that the Oriental Organ Transplant Center was officially approved for 500 beds. While its main focus was to be on the development of liver and kidney transplants, it would also develop pancreas, bone, skin, hair, stem cell, heart, lung, cornea, and larynx transplantation. An archived webpage from Jan 4, 2006 showed this center had the facilities to simultaneously carry out nine liver transplants and eight kidney transplants.

In September 2006, Tianjin Daily News reported that the center’s new building officially entered operation with 500 beds.
According to a special interview with Shen Zhongyang in February 2006 conducted by the *Chinese Journal of Integrated Traditional and Western Medicine in Intensive and Critical Care*, the newly completed Oriental Transplant Center building had actually opened with 700 beds. This was 200 more than the bed count announced in September 2006. Its bed utilization rate reached 90% in October 2009 and 131% in 2013 before it added still more beds.

Even if we conservatively count the center as having 500 beds, when it achieved a 100% bed utilization rate (which would have been around 2010 given its growth trend), with an average liver transplant hospitalization time of 3 to 4 weeks, its transplant volume may have reached 6,000 to 8,000 per year. With its 131% bed utilization rate in 2013, the corresponding annual volume may have been as high as 7,800 to 10,400.

Yet, the center’s current website shows only 271 total beds, with 120 transplant surgery beds and seven liver and kidney transplant teams. This bed count is even fewer than when the center was established in 2003, let alone after its new building was put into use in 2006. In 2010, the hospital publicly claimed 330 liver transplants but reported only 7 to the official liver transplant registry.

The center claims that it has completed 10,000 organ transplants in total. However, this number would have been easily surpassed by just a few of its doctors:

- The center’s director Shen Zhongyang himself had reportedly completed close to 10,000 liver transplants by 2014. His colleagues and the majority of the doctors he trained had each independently completed over 1,000 transplants.
- By 2011, Vice President Zhu Zhijun had completed 1,400 liver transplants with 100 liver transplants from relative donors.
- Deputy Director Cai Jinzhen completed 1,500 liver transplants.
- By July 2006, Associate Chief Surgeon Pan Cheng had independently completed over 1,000 liver transplants and participated in over 1,600 liver graft procurements.
- Chief Surgeon Song Wenli from the Renal Transplant Department completed over 2,000 kidney transplants and over 100 combined transplants.
- Associate Chief Surgeon Mo Chunbo completed over 1,500 kidney transplants.
- Chief Surgeon Gao Wei completed over 800 liver transplants with 100 from relative donors.

In 2006, the center had 310 medical professionals. The total number of transplants performed by this center has been huge.

**First People’s Hospital of Yunnan Province**

The First People’s Hospital of Yunnan Province has deleted the online introduction to its organ transplantation department. Based on a version saved on transplantation.org.cn, on January 9, 2014, the hospital claimed to have conducted 18 liver transplants between April 2005 and February 2014, and 21 liver transplants to date.
However, we found a liver transplant study published by one of its doctors, for which the patient sample size was six times the number of transplants the hospital had claimed. These samples were only a small portion of the large number of transplants that met the study’s criteria. Therefore, the hospital’s actual number of liver transplants is most likely well above six times the official number.

For example, Mo Yiwo, current director of hepatobiliary surgery, published a study that he conducted on eight piggyback orthotopic liver transplants over the 23 months between August 2000 and July 2002.\textsuperscript{337} Another doctor from the hospital published a paper about lung infections in 55 orthotopic liver transplant patients between April 2005 and May 2007.\textsuperscript{338} Zeng Zhong, deputy director of the transplantation center, published a paper about biliary reconstruction of 55 orthotopic liver transplant patients between April 2005 and March 2007.\textsuperscript{339} Another paper randomly selected 12 orthotopic liver transplant patients who underwent the surgery at the hospital between 2007 and 2009.\textsuperscript{340}

The online profile of the hospital’s transplantation department states that it has conducted 41 kidney transplants since 1983, including 17 with living relative donors.\textsuperscript{341}

However, doctors at the hospital published a study in 2008 based on 50 “living relative-donor kidney transplants” between February 2002 and May 2008.\textsuperscript{342} Based on this number, in the six-year period between 2002 and 2008, the number of “living relative-donor kidney transplants” is three times the hospital’s total claim for the 33-year period. Another study was based on a sample of 18 out of 84 kidney transplants.\textsuperscript{343} From these contradictory fragments, one can see that the public transplant volume has been severely deflated.

**PLA No. 458 Hospital**

In 2016, a *Lifeweek* report titled “Medical Stories Behind the Lens” featured a segment regarding liver transplants at the PLA Hospital No. 458.\textsuperscript{344} On September 28, 2006, Dr. Sun Ningdong of the PLA 458 Hospital’s Hepatobiliary Surgery Department hosted his first photography exhibition. Sun was most proud of one photo that had won many photography awards, “It’s Again the Dead of Night” depicting a scene of the hospital’s first liver transplant: “At that time, the surgery had already lasted 6 hours at night. Some people were dozing off, and some were moving. If you magnify it, you can see the eyes of the lead surgeon—they are really bright.” The 458 Hospital has now performed over 140 liver transplants…

*It’s Again the Dead of Night — A scene of the PLA 458 Hospital’s first liver transplant, Author: Dr. Sun Ningdong*
This report shows that in the two years after its first liver transplant in 2004, this hospital carried out more than 140 liver transplants. Nine years later, however, its total number of liver transplants has not grown on paper.  

If this were really the case, the hospital could not have maintained its certification by the Ministry of Health. The hospital also self-reported doing 20 liver transplants each year (the minimum requirement to maintain its Ministry approval). Based on this number, by 2013, it should have performed over 300 liver transplants. Using a conservative figure of 70 cases per year from the media report, it would have accumulated nearly 800 liver transplants to date.

The patient rooms of the PLA Hospital No. 458 liver disease center are well equipped with amenities, including five “presidential suites” with high-speed Internet access. The center has 108 beds and can simultaneously carry out two liver transplants and one regular surgery. If we assume that each operating room is used only once per day (otherwise, only one operating room for liver transplants would suffice), it would have performed 700 per year, or 10,000 to date. We estimate that the hospital’s public numbers represent about 1/70th of its actual liver transplant volume.

West China Hospital of Sichuan University

An introduction to the West China Hospital of Sichuan University’s liver transplant center published on September 2, 2004 mentioned that its five full sets of imported liver transplant equipment allowed five liver transplant operations to be performed simultaneously and that the center had 72 beds. In July 2005, Prof. Yan Lvnan said at a symposium, "My department can do 3-5 liver transplants on the same day. The most we did was seven liver transplants in one day." The webpage claimed that the center had conducted nearly 800 liver transplants, including more than 260 from relative donors. Based on its bed count and an average hospital stay of 30 days, the center would be able to perform more than 800 transplants in a single year.

The liver transplant center no longer appears on the hospital’s website. The most recent search result states that the center "now routinely performs DCD (donation after cardiac death) liver transplantation, adult and pediatric living-donor liver transplantation, split form liver transplantation, constituting approximately 100 cases per year."
West China Hospital has Asia’s largest ultra-clean surgery department. According to a purification engineering plan for the department, the hospital has 67 operating rooms, including at least 9 for the Urologic Surgery Department (3 originals and 6 newly constructed), at least 8 for the General Surgery department, and 6 for the Cardiothoracic Surgery Department.350

The hospital’s web page, with a posting date of February 22, 2005 shows, “Since its first kidney transplant carried out in September 1978, the center has performed more than 4,000 kidney transplants.” 351
By September 2014, the number of transplants listed had shrunk: "the center has performed more than 2,500 kidney transplants. From 2011 onwards, more than 200 kidney transplants have been completed annually." This volume would require no more than one operating room.
Xinqiao Hospital of the Third Military Medical University

Xinqiao Hospital claims to be the largest organ transplant center in southwestern China. It was one of the first hospitals to carry out kidney, cornea, pancreas-kidney, and other types of transplants. Its published report, “Urology Surgery History of PLA Nephrology Center,” states, “As of 2002, 2,590 renal transplants [have been] performed...The center once performed 24 kidney transplants in one day.”

As of 2002, 2,590 renal transplants [have been] performed...The center once performed 24 kidney transplants in one day.

However, its current webpage states, “Since our first kidney transplant performed in January 1978, our department has performed more than 2,100 surgeries to date, becoming the third site to exceed 2,000 surgeries in the country.” Compared to its number from 2002 (2590 cases), the current figure after 13 years is 490 cases short, which suggests that the current figure has been deflated.
Since our first kidney transplant performed in January 1978, our department has performed more than $2,100$ surgeries to date, becoming the third site to exceed 2,000 surgeries in the country.

Xinqiao’s website in 2015 stated that it had only completed 2,100 kidney transplants.

**Navy General Hospital**

As of 2012, its official web page titled “Introduction to hepatobiliary surgery” claimed, "Several thousand patients with end-stage liver cancer have gained a second life through liver transplantation at the Hepatobiliary Surgery Department of Navy General Hospital." 356

Yet, the same webpage in 2015 stated, "Since 1999, 300 liver transplants have been successfully carried out."

\[\ldots\text{several thousand patients with end-stage liver cancer have gained a second life through liver transplantation at the Hepatobiliary Surgery Department of Navy General Hospital.}\]

The hospital’s front page dated October 8, 2015 referred to "thousands of Patients who had received liver transplants at the Navy General Hospital."
Another page dated October 8, 2015 stated that the hospital had performed only 300 liver transplants since 1999.

**General Hospital of Jinan Military Command**

The Jinan Military Command General Hospital’s website states that its Urologic Surgery Department has completed 1,500 kidney transplants since 1978, ranks among the top ten in China and among the top five in the military.\(^{357}\) These two figures imply that the hospital has performed fewer than 200 kidney transplants per year since 2003.

However, according to the *Qilu Evening News* in 2008, the department once performed 16 kidney transplants in 24 hours. In addition, transplantation.org.cn reported in 2012 that the department’s director, Zhang Aimin, claimed that the hospital had performed more than 2,500 kidney transplants between 1978 and 2012.\(^{358}\) The total on the hospital’s website in 2016 is 1,000 fewer than Zhang Aimin’s figure from 2012.

**Third Affiliated Hospital of Sun Yat-sen University**

The News Center of the website of the transplant center at Third Affiliated Hospital of Sun Yat-sen University stated in 2006, "Director Chen Guihua has served as lead surgeon for more than 1,000 liver transplants in recent years."\(^{359}\) After the exposure of organ harvesting crimes, Chen's personal webpage showed that he undertook only over 100 liver transplants.\(^{360}\) On the night of February 10, 2004, Chen oversaw 4 liver transplant operations simultaneously. He conducted 246 liver transplants in 2005, according to the hospital’s news website.\(^{361}\)
I. Organs Extracted from Living Bodies

Living transplants in Mainland China differ from those in the rest of the world. In China, it is common practice to excise whole vital organs from living sources. Extracting a whole vital organ kills the donor.

For example, Chinese Medical University’s China International Transplantation Network Assistance Center (CITNAC) emphasized:

“In China we carry out living donor kidney transplants. It is completely different from cadaver kidney transplants you hear about in Japanese hospitals and dialysis centers... Compared to cadaver kidney transplants in Japan, what is offered here is much safer and more reliable.” 362

Q/A Online

In China we carry out living donor kidney transplants. It is completely different from the cadaver kidney transplants you hear about in Japanese hospitals and dialysis centers...

Compared to cadaver kidney transplant in Japan, the living kidney transplant offered here is much safer and more reliable.

Screenshot of the website of International Transplantation (China) Network Support Center.

Chinese transplant hospitals claimed to have ample supplies of young, healthy organ donors. For example, the Liver Transplant Center at the People’s Liberation Army General Hospital of Beijing Military Command stated that they had established a fast and efficient supply channel from which to obtain excellent quality livers in the vicinity of Beijing as well as from other cities and provinces. 363
In medical papers published by doctors from these hospitals, donors are often described as “free of hepatitis, fatty liver, malignant tumors and chronic disease with no long-term medication history or history of alcohol consumption.” Most of these papers cited warm ischemia times (WIT: the period of time from circulatory arrest to perfusion of the organ) of less than 10 minutes, with some even listed as 0 minutes, and the majority of organ sourced from “brain-dead donors,” “cadavers,” “non-heartbeat cadavers,” and “healthy young cadavers.” We list a few examples.

<table>
<thead>
<tr>
<th>Medical Institution</th>
<th>Time Period</th>
<th>Organ Source</th>
<th>Warm ischemia time (min)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nanjing Medical University Affiliated Hospital</td>
<td>2005~2007</td>
<td>112 cadavers, 15 living donors</td>
<td>0–10, average 3.96</td>
</tr>
<tr>
<td>Second Artillery General Hospital</td>
<td>2004~2007</td>
<td>103 healthy young cadavers</td>
<td>0–5, average 3.9</td>
</tr>
<tr>
<td>Shanghai Changzheng Hospital</td>
<td>2001~2004</td>
<td>240</td>
<td>0–8</td>
</tr>
<tr>
<td>Tianjin No.1 Central Hospital</td>
<td>2003~2005</td>
<td>195 non-heartbeat cadavers</td>
<td>0–8</td>
</tr>
</tbody>
</table>

_Warm ischemia times for liver transplants reported in medical publications_

Zhang Xiaodong, director of the Kidney Transplant Center at Beijing Chaoyang Hospital, said, “After the heart stops beating, the circulation stops, and this will cause organs to fail. The tolerable WIT is 3 to 4 minutes for hearts, 5 to 8 minutes for livers, and 30 minutes for kidneys.”

Organs are transplantable only when the time and location of a donor's death are known in advance and the organ procurement team is well prepared. Thus, vital organs from those who have died outside of a hospital (e.g. in car accidents) are not viable for transplantation. Regardless, organs with warm ischemia times of 0 to 5 minutes from “no-heartbeat cadavers” have become a common source of transplants in China.

For decades, brain-dead donors have been the main source of transplant organs outside of China as such organs have the shortest warm ischemia times possible. Because Chinese tradition requires bodies to be preserved intact after death, China has neither brain death legislation nor significant voluntary organ donation.

_Xinhua News Agency_ reported in August 2005 that among countries capable of transplantation, China is the only country without brain death legislation. As a result, 90% of Chinese doctors, as of August 22, 2014, were not aware of the criteria for verifying brain death.

The number of organs sourced from brain-dead donors in China is negligible. On July 25, 2006, _Yangcheng Evening News_ published a report titled “The first successful lung transplant from a brain-dead donor.” Dr. Chen Zhonghua said, “Ms. Yang, a 39-year-old woman, is the first voluntary brain-dead organ donor in our country. … This is the first case that met international criteria for a brain-dead donor.”
The Organ Donation Management Commission of China was established on August 1, 2006. Dr. Chen Zhonghua served as the first Executive Chairman of the Organ Donation Management Commission of China. In July 2010, an article in the Organ Transplantation Journal stated, “since 2001, when Dr. Chen Zhonghua and his team began promoting organ sourcing for transplants from the brain dead, there have been over 60 successful organ donations after brain death in China.”

Donations after cardiac death (DCD) were another commonly listed organ source in China’s transplant centers. Warm ischemia times of 0 to 5 minutes with "no-heartbeat cadavers" have become a standard practice of Chinese transplant doctors. However, there have been few recorded DCD donors despite pilot programs to expand this type of procurement.

Although the Ministry of Health and the Chinese Red Cross launched the Human Organ Donation Pilot Program (DCD) in March 2010, many regions have not actually received any donations over the years. The Red Cross stated that, in the two years after DCD pilot program was launched, China completed 207 donations after cardiac death. Divided among the more than 147 participating hospitals, this is equivalent to less than one DCD case per year per hospital.

Heilongjiang Province did not complete its first DCD donation until June 2015. Fujian Province, a leader in heart transplantation in China, just completed its first DCD heart transplant in May 2015. The No. 81 Hospital of Nanjing Military Region completed the first DCD donation in the Nanjing Military Region in April 2015. It was also the second DCD donation in Jiangsu Province. One of the biggest transplant centers in Hubei Province, Dongfeng General Hospital, completed the first DCD liver transplant in northwestern Hubei in July 2015.

Chinese transplant doctors have developed their own standard procedures for excising organs in order to achieve the desired short warm ischemia times. Because it is not possible to achieve a warm ischemia time of 5 minutes or less sourcing organs from cadavers, living people are killed with this type of organ extraction and turned into “no-heartbeat cadavers.”

Tianjin Medical Journal published a study in 2009 that analyzed 1,600 liver procurements performed between 2004 and 2008 at the Tianjin Organ Transplant Center. Among these 1,600 cases, most livers were taken from young, healthy males with an average age of 34.5 years. Based on this study, Shen Zhongyang, director of the Center, created a surgical procedure for extracting livers from “no-heartbeat cadavers” that could keep the warm ischemia time to 5 minutes or less. This procedure has been adopted widely in China.

Other well-known transplant centers have also developed organ excision procedures to minimize warm ischemia times. Liu Yongfeng, director of China Medical University’s Institute of Organ Transplantation, created a technique for rapid extraction of an abdominal organ by excising surrounding organs simultaneously, which he claimed could reduce both organ damage and warm ischemic time. Currently, this explantation procedure is widely used in many hospitals throughout China.
Between 2003 and August 2009, only 130 citizens successfully donated their organs after death in Mainland China.\textsuperscript{383} This translates to fewer than 30 donations per year.\textsuperscript{384} The number of livers used by the Tianjin Organ Transplant Center alone has exceeded the number of citizen organ donations in all of China.

II. The Myths Behind Organ Sources

The Chinese government has changed its statements on organ sourcing several times, claiming that the vast majority of organs came from death-row prisoners, and later, voluntary donations.

\textbf{Death-Row Prisoners}

Although the Chinese regime treats the number of executions as a state secret, international organizations have attempted to estimate this number over the years using various sources.

Among them, Amnesty International counted death-row executions published in media reports and official databases. There were 8,401 executions between 1995 and 1999 with an average of 1,680 annually followed by an average of 1,616 annually between 2000 and 2005\textsuperscript{385} and 1,066 between 2006 and 2008.\textsuperscript{386 387 388} Since January 2007, when the law was changed to require that all death penalty cases be reviewed by the Supreme People’s Court of China, the number of executions has decreased further. For example, in 2007, 15\% of death penalty cases were dismissed after review.\textsuperscript{389}

\begin{figure}
\centering
\includegraphics[width=\textwidth]{average_annual_prisoner_executions}
\caption{Average Annual Prisoner Executions}
\end{figure}

These annual figures are averaged from multi-year data on published execution cases collected by Amnesty International, which stopped providing estimates for China in 2009.

Amnesty stopped providing such estimates after 2008. Its 2017 report stated, “hundreds of documented death penalty cases are missing from a national online court database,” which “contains only a tiny fraction of the thousands of death sentences that Amnesty International estimates are handed out every year in China.”\textsuperscript{390}

The international community generally believes that the number of death-row executions in China has decreased the estimate made in 2000 of 10,000 per year.\textsuperscript{391 392 393}

A wide variety of sources indicate that death-row executions in China have decreased over the last two decades. Meanwhile, the number of organ transplants in China grew rapidly starting in 2000. This divergence widened in 2007, when transplants continued to grow while death penalty numbers fell
further due to new judicial review procedures. Given that the number of voluntary donors remained low and flat throughout this period, this trend leaves a large gap of transplants for which organ sources are not accounted for by official reports.

Furthermore, the government promised to stop using organs from death-row prisoners beginning in 2015. 394

At the same time, China’s transplant numbers increased dramatically, He Xiaoshun, a member of the Expert Committee of the Human Organ Donation Commission, stated in March 2010, “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 [since 2000].” 395

The decline in the number of death-row prisoners stands at variance with the increase in organ transplants in China since 2000.

In 2013, the Director of Hepatobiliary Surgery at Peking University People's Hospital said, “Our hospital conducted 4,000 liver and kidney transplant operations within a particular year, and all of the organs are from death-row prisoners.” 396

Considering that many convicted death-row prisoners are not suitable candidates for organ sourcing due to health reasons, it is unlikely that there were sufficient death-row prisoners to serve as this hospital’s true organ source for its 4,000 transplants.

While Chinese officials claim that the country performs about 10,000 transplants a year, based on government-imposed minimum capacity requirements, the 169 approved transplant hospitals could have conducted 60,000 to 100,000 transplants per year. 397

It is clear that death-row prisoners, whatever the exact number may be, could account for only a small fraction of the total number of transplants performed in China.

Continued reliance on prisoner organs, including death-row executions

In July 2005, after years of denial, former Deputy Minister of Health Huang Jiefu acknowledged for the first time that the majority of transplant organs came from death-row prisoners. 398 After live organ harvesting was exposed in March 2006, Chinese officials returned to the initial denial. 399 400 Then, starting in January 2007, Huang has consistently said that organs are sourced from executed prisoners. 401

In August 2013, the National Health and Family Planning Commission issued Notice on Management Regulations for Human Organ Procurement and Distribution (Trial), requiring all approved transplant centers to use the new “Chinese organ distribution and sharing system.” Patients on the waiting list should be entered into this national database, and donated organs should also go through this centralized distribution system. 402
At the China Organ Transplant Conference in November 2013, Huang Jiefu announced the “Hangzhou Resolution,” which promises to discontinue the use of organs from death-row prisoners by June 2014. Among the 169 registered transplant hospitals, 38 signed the resolution.

In March 2014, Huang explained to Beijing Times that transplant reform “is not about not using organs from death-row prisoners, but not allowing hospitals or medical personnel to engage in private transactions with human organs.” We will regulate the issue by including voluntary organ donations by death-row prisoners in the nation's public organ donation system. “Once entered into our unified allocation system, they are counted as voluntary donations of citizens. The so-called death row organ donation doesn't exist any longer.”

In December 2014, one year after the “Chinese organ distribution and sharing system” was announced, Chinese state-owned media declared that China would stop using death-row prisoners’ organs for transplants from January 1, 2015 onwards, and that citizens’ voluntary organ donations after death would be the only source for organ transplants.

The Chinese regime has used this system to classify previously unidentified organ sources as voluntary donations.

According to The New York Times article “China Bends Vow, Using Prisoners’ Organs for Transplants,” organs from prisoners, including those on death row, can still be used for transplants in China, and that this use has the backing of policymakers.

On October 8, 2015, the British Medical Journal published an article titled “China’s semantic trick with prisoner organs” co-authored by five medical experts from the United States, Germany and Canada. It states, “The announcement of December 2014 itself is neither a law nor a governmental regulation.” The article asserts that the Chinese authorities are simply playing word games by “labelling prisoner organs as voluntary donations from citizens.”

**Few voluntary donors as of the end of 2015**

Traditional Chinese custom requires bodies to be preserved whole after death. Organ transplantation in China began in the 1970s, but by 2003, the number of voluntary donations remained at zero. There was no organ donation system in China before 2010 and the national organ donation system started in 2014. As of the end of 2015, China’s trial organ donation and allocation systems still have not produced donations on any meaningful scale.

In March 2010, China piloted an organ donation program in Shanghai, Tianjin, Liaoning, Shandong, Zhejiang, Guangdong, Jiangxi, Fujian, Xiamen, Nanjing, Wuhan, and eventually in 19 provinces and cities. The Ministry of Health and China Red Cross jointly ran this program.

A year after the launch of the Nanjing Organ Donation pilot program in March of 2010, not a single voluntary organ donation had been received. In the 20 years prior to that, only three people in Nanjing had donated their organs.
New Beijing Paper reported in March 2012 that 207 voluntary donors had donated organs after death in two years nationwide.\textsuperscript{416}

When interviewed by Guangzhou Daily in 2013, Huang Jiefu stated that he performed more than 500 liver transplants in 2012, one of which was “the first voluntary citizen donation meeting Chinese standards.”\textsuperscript{417}

On February 25, 2013, the National Organ Donation Working Video Meeting reported that only 659 donations had occurred in total nationwide since March 2010.\textsuperscript{418}

In Shanghai, the first organ donation from a deceased organ donor was completed on August 21, 2013. There are 11 transplant centers in Shanghai approved by the Ministry of Health.\textsuperscript{419}

According to an article titled “Many Challenges in Organ Donation” published by Guangming Daily on September 3, 2013, donor organ coordinators stated that, among 100 potential organ donors, about half were ineligible because they could not meet the requirements for donation. Of the remaining donors, about 30 provided organs that were unusable because of delays in organ acquisition after death. Ten donations were overruled by relatives' objections. In the end, there were fewer than five available donors.\textsuperscript{420}

The National Health and Family Planning Commission established a new “Chinese organ distribution and sharing system” at the end of August 2013. Patients on the waiting list would be entered into this database, and donated organs are required to go through this centralized distribution system.\textsuperscript{421}

Does this mean that all barriers to donation would be removed after the implementation of an “organ distribution and sharing system”?

At the Hangzhou Transplant Congress in November 2013, Dr. Ye Qifa, Executive Chairman of the China Organ Transplant Alliance and professor of organ transplantation at Central South University, expressed frustration that about 70\% of the 165 approved transplant centers showed no interest in developing civilian organ donation programs. Doctors indicated that, no matter how well the computer matching and deployment system worked, it wouldn’t work without an organ supply. Even when a donated organ became available, it was often of poor quality and could not be used. According to Dr. Ye, there existed a large gap between supply and demand.\textsuperscript{422}

A China News Service report on March 11, 2015 stated that Mainland China had a voluntary organ donation rate of 0.6 per million people.\textsuperscript{423} A World Health Organization study put Chinese citizens' organ donation rate at 0.03 per million, only 1/20 of the above figure.\textsuperscript{424}

At the 2015 China Organ Transplant Congress held in Wuhan on August 6-8, 2015, Huang Jiefu declared that China had successfully realized the transformation from reliance on prison sources to voluntary organ donation from citizens. Dr. Ye Qifa reported that 4,626 citizens in China donated their organs after death between 2010 and August 2015, totaling 12,405 major organs. He projected that in 2015 the number of transplant surgeries in China would pass 10,000 and may surpass the historical record set in 2006.\textsuperscript{425}
Yet, as of today, China’s trial organ donation and allocation systems still have not produced donations on any meaningful scale.\(^{426}\) Huang Jiefu indicated in an interview with *Beijing Youth Daily* on November 18, 2015 that the organ donation system in China does not function in practice because the Red Cross and the National Planning Commission, the two most important organizations in organ donation, did not actually coordinate with each other:

"The two departments jointly established a national organ donation and transplantation committee on March 1, 2014, but it exists in name only. So far, no meeting has been held yet."

In 2015, most institutes for voluntary organ donations did not answer calls made by investigators from the World Organization to Investigate the Persecution of Falun Gong. The few offices that did answer the phone indicated that there were tiny numbers of people who had registered to donate, and that the number of successful donations was extremely low.\(^{427}\)

On December 6, 2015, staff at the Red Cross Society of Beijing (phone number 86-10-6355-8766) said that organ donation was still in the preparatory stage. The Beijing Red Cross did not even have a donation office at the time and had not yet begun organ donation.\(^{428}\) Yet, there are 20 approved large transplant centers in Beijing, many of them having a capacity of thousands of transplants per year.

On December 17, 2015, a female staff member at the Shanghai Red Cross organ donation office in Huangpu District (86-21-63365880) said that the office began to carry out donation work at the beginning of the previous year. The entire city of Shanghai had only 5 successful organ donations since the donation system began.\(^{429}\)

On December 12, 2015, a Tianjin Red Cross worker (86-22-2731-1180) said that, since an organ donation database was created in 2003, there had been a total of 170 donated organs.\(^{430}\) Yet, Tianjin’s Oriental Organ Transplant Center has over 500 transplant beds and an annual capacity of at least 5,000 transplants.

Wang Pei’an, a deputy minister at the National Health and Family Planning Commission, told the New York Times in April 2016, “For a long time we lacked an organ donation system … we will use Chinese methods to solve [the problem]. This is a resolute struggle.”\(^{431}\)

Compared to the huge volume of transplants performed in China, the number of voluntary donors is negligible.

**Living Relative-Donor Transplants**

Many hospitals now list living-donor transplants as signature services with relative donors as main organ sources. However, we found that the actual number of donations is extremely low.

According to a report published by *Xinhua Daily* on April 12, 2006, Jia Ruipeng, director of the Kidney Transplant Center at Nanjing Hospital No.1 said, “Between the first living relative kidney transplant in
1972 and the end of last year, there were only 700 living relative kidney transplants in the country, accounting for only about 1.5% of all renal transplants.”  

China’s Ministry of Health has repeatedly proposed restrictions on living organ donations rather than encouraging the practice. According to a report published by China Network, Deputy Minister of Health Huang Jiefu said, in March 2008, that the National Human Organ Transplantation Clinical Application Committee (OTC) would strictly regulate and manage living organ transplantation. He said, “So far, the main source of organs is cadavers.” During the Human Organ Donation Pilot Summary Conference held by Chinese Red Cross and the Ministry of Health in Hangzhou, on March 22, 2012, Huang Jiefu again said the State would gradually restrict living relative transplants.

On March 27, 2012, Xiao Jiaquan, the director of the Urologic Department of the People’s Hospital of Zhejiang Province, told the Today Morning Express that the Ministry of Health was restricting relative donation due to the adverse impact on donors’ health and to curb underground organ trafficking.

On March 26, 2012, JCRB.com (managed by the Supreme People's Procuratorate) published a case report regarding an underground kidney broker, Cai Shaohua (defendant), who said that doctors told them that the matching rate between relatives was very low; even if there is a marginal match, it could result in complications after surgery, which would only cause bigger losses for the patient’s finances and health. Cai said,

“Now [among relative-donor] organ transplant surgeries, nine out of ten are fake relatives. Those in the hospitals are well aware of the things that we [brokers] do.”

**Multiple Organs from One Donor**

The Chinese regime advertised in its state-run media that, in certain cases, one donor’s organs were used in several transplants. China’s health officials sometimes use the possibility of procuring multiple organs from the same donor to explain the gap between the number of organ sources (including voluntary donors and death-row prisoners) and its official number of transplants. However, we find that this efficiency cannot be achieved in most cases. Factors affecting the usable ratio include organ life, geographic distance and limiting technical factors.

**Organ life:** Human organs are a “non-reusable resource with an expiration time limit.” When an organ is removed from the donor, it must be kept in a preservation solution and the transplant operation must take place within a limited time. According to the Notice on Management Regulations for Liver, Kidney, Heart and Other Transplantation Technologies issued by the Ministry of Health, the time should not exceed 24 hours for kidneys, 15 hours for livers, and 6 hours for hearts.

Chen Jingyu, a lung transplant surgeon at the Wuxi People’s Hospital and a member of the National People’s Congress, appealed for more government support to ensure the speedy transport of organs to avoid waste.
Huang Jiefu said on May 6, 2016 that 20% of transported organs are wasted on the way. 439

**Geography:** Until the end of 2013, China did not have a national organ-sharing network. Tissue matching was mostly done within specific hospitals or regions. 440 Unavoidably, given the time limits involved in how quickly organs must be used after being extracted from a body, many organs in China were wasted as a result. In fact, for many bodies, only one organ was utilized. 441

It was not until October 2013 that the National Health and Family Planning Commission announced the “(Trial) Regulations for Obtaining Organs from Voluntary Donors and Organ Assignment,” 442 which required all 165 approved hospitals to use the new National Organ Sharing Network; it also required all donated organs to be allocated by this system. Since then, the National Health and Family Planning Commission has required all transplant centers to register their patients to build a national waiting list.

There is an unwritten rule that transplantable organs can only be allocated locally. Local hospitals have monopoly control over local organ sources. Some hospitals have abundant organ sources but cannot find suitable matching recipients, thus many organs are wasted. Hospitals in regions that are short on organ sources have to try to obtain them from hospitals in localities that control abundant organ sources. 443

**Technical limiting factors:** Strict limitations on ischemia times of transplanted organs place high technical demands on transplant centers when conducting transplants using multiple organs from the same donor. Until recently, very few institutions in China were capable of doing this successfully.

A December 2011 report said that more than 60 doctors carried out 6 transplant surgeries simultaneously at No. 303 Hospital of Guangzhou Military Command on that day. These included liver, lung, pancreas-kidney, and kidney transplants, as well as two corneal transplants. 444 Dr. Sun Xuyong, President of the hospital’s Transplantation Research Institute, revealed that the six organs were procured from the same donor. However, he did not reveal the source of the donor.

Lan Liugen, Deputy Director of the Surgery Division at No. 303 Hospital of Guangzhou Military Command, said that only two hospitals in China had this capability at the time. In addition to his hospital, the other was the Tongji Organ Transplant Research Institute of Huazhong University of Science and Technology. 445

Reports in October 2015 indicated that the 2nd Affiliated Hospital of Harbin Medical University carried out multiple transplants simultaneously using organs from the same donor. The article emphasized that this was the very first case in Heilongjiang Province. 446

An August 2016 report indicated that the People’s Hospital of Jiangsu Province carried out heart and lung transplants for two patients using organs from the same donor. The article emphasized that it was the first such case in the country. 447

On November 23, 2015, Huang Jiefu said to Beijing Youth Daily that there were 2,500 organ donors in 2015 nationwide, which could theoretically allow 2,500 heart transplants and 5,000 lung transplants.
However, he said there were only more than 100 heart and lung transplants completed in the whole country, and almost all the organs were wasted. 448 449

Based on the above, we conclude that the utilization rate of "donor organs" in China’s transplant centers is much lower than those of well-established organizations in other countries. In the past two years, the Chinese regime intentionally advertised in its state-run media that, in certain cases, one donor’s organs were used in several transplants. Our findings indicate that such cases are rare, and we believe that most reports serve to cover up actual organ sources.

**Difficulties of Voluntary Donations**

A report published online in December 2008 stated that almost all Chinese transplant doctors hold that voluntary organ donation would be “unachievable.” Li Leishi, an academician at the Chinese Academy of Engineering and founder of the PLA Institute of Nephrology, wrote in a paper, “In China, organ donation after a citizen’s death exists only theoretically. In actuality, it is not possible. There are no such conditions institutionally and legally … China has no standard for defining brain death, and organ donation has no legal protection.” 450

To date, these issues have not seen substantive changes or improvements. In recent years, official state media have reported a few high-profile cases of individual human organ sales. 451 The number of such reported transactions is miniscule.

An early 2006 report by Sanlian Life Weekly stated, “China currently has a voluntary organ donation rate from living relatives of 1.1%. The control of over 98% of organ sources originates from outside of the Ministry of Health system.” 452

**III. Falun Gong**

China’s medical field began to conduct human organ transplantation in the 1960s. Our hospital survey found that there was tremendous development in China’s human organ transplant industry after 1999. Within just a few years, China was performing more transplants than any other country in the world. 453

Since 2000, the development of organ transplantation technology has been continuously incorporated into the National Five-Year Plans for multiple industries, 454 455 456 457 458 the National Key Basic Research and Development Program (973 Program), 459 and the National High Technology Research and Development Program (863 Program). 460 Most of the 169 approved transplant centers have received funding from national, military, and civilian research and development funds.

The exponential rise of human organ transplant surgery in China coincided with the start of the Chinese Communist Party’s campaign to wipe out Falun Gong. 461

Falun Gong is a meditation practice that revolves around ancient Chinese traditions of health and self-improvement based upon the universal principles of truthfulness, compassion, and tolerance.
By the end of the 1990s, the Chinese government estimated that over 70 million people were practicing Falun Gong. On July 20, 1999, the former Communist Party leader Jiang Zemin saw the group’s popularity and revival of traditional values as a threat to his rule and launched a violent campaign to "bankrupt them financially, ruin their reputations, and destroy them physically." 

**Disappearances**

Since the very beginning of the persecution, Falun Gong practitioners have appealed to government departments in their respective provinces and in Beijing, only to be arrested en masse and tortured. The Public Security Bureau in Beijing determined that, as of April 2001, a total of 830,000 Falun Gong practitioners had been registered or arrested, not including those who refused to give their names to police to avoid implicating their families or people in their workplaces and neighborhoods. The unidentified practitioners were not sent back to their hometowns. More practitioners were rounded up all across China.

According to a report by China’s justice department, China had 670 operating prisons in 2004, holding a total of more than 1.5 million inmates. There were also 300 forced labor camps in operation before the laojiao system of RTL (Re-education Through Labor) camps was abolished at the end of 2013. The Laogai Research Foundation stated in 2010 that as many as 3 to 5 million people were imprisoned in laogai camps.

The US Congressional Executive Committee on China’s annual report for 2008 noted that international observers believed that half of those incarcerated in China’s forced labor camps were Falun Gong practitioners. Ethan Gutmann estimates that Falun Gong constituted about half of the laogai system in 2001 and then leveled off to 15 to 20% over the long term, translating to about 500,000 to 1,000,000 Falun Gong practitioners being detained in the laogai system at any given time.

Many detention centers were built or expanded all over China to contain the large number of Falun Gong practitioners who were arrested and detained. The Chinese Communist Party also made use of military and underground civil defense facilities to establish holding units for Falun Gong practitioners. These practitioners have disappeared, both legally and practically.

**Policy of Destruction**

On August 21, 2000, the Chinese Ministry of Public Security held a nationwide telephone conference to relay new orders that the practice of Falun Gong was to be eradicated in three months. Du Daobin of Hubei Province reported in May 2003 that the local 610 Office, the Communist Party office charged with the repression of Falun Gong, had received instructions that stated, "no law regulates the treatment of Falun Gong practitioners," and "deaths of Falun Gong practitioners from beating are nothing and shall be counted as suicide; the bodies shall be directly cremated without investigating the person's identification."
On October 9, 1984, the Supreme People's Court, Supreme People's Procuratorate, Ministry of Public Security, Ministry of Justice, Ministry of Health, and Ministry of Civil Affairs jointly promulgated the "Provisional Regulations on the Use of Corpses or the Organs of Executed Prisoners." It allowed the bodies and organs of prisoners to be used under certain conditions.

During the persecution of Falun Gong, perpetrators used the “Provisional Regulations” to justify that the families of practitioners killed could not claim the bodies of their loved ones. The Regulations contains a loophole that allows for the sourcing of organs from Falun Gong practitioners without either their consent or the consent of their family members, whether or not they have been sentenced to death.

This regulation paved the way for forced organ harvesting and the unlawful sale of bodies. The China International Transplantation Network Assistance Center (CITNAC) said on its website,

“Being able to complete such a number of organ transplant operations is inseparable from the government’s support. The Chinese government’s Supreme People's Court, Supreme People's Procuratorate, Public Security system, judicial system, Ministry of Health, and Ministry of Civil Affairs jointly promulgated laws on October 9, 1984 and established that organ procurement would be an activity supported by the government. This is a one of a kind in the world.”

Cases of practitioners’ bodies being cremated without the consent of their families continue to be reported on Minghui.org.

**Blood Tests**

In detention centers, Falun Gong practitioners are frequently given blood tests and medical examinations, while other prisoners (with the exception of Uyghurs, Tibetans and certain House
Christian groups who were also targeted) receive no such examinations. Such examinations are a prerequisite for determining an individual’s suitability for organ sourcing.

During the investigation, Ethan Gutmann interviewed over 50 Falun Gong practitioners who had been detained in labor camps and prisons in China, most of whom were forcibly given blood tests and unusual examinations. Many similar cases were recorded in Matas and Kilgour’s book, *Bloody Harvest*. The website [Minghui.org](http://Minghui.org) publishes firsthand accounts of Falun Gong practitioners all over China who have been subjected to such examinations.

In April 2014, in Guizhou, Liaoning, Hunan, Hubei, Beijing and other locations, police entered practitioners’ homes and forcibly took blood samples and cheek swabs. The policemen claimed to be following orders from above. In one month, sixteen practitioners in the Dandong area of Liaoning Province had blood samples forcibly collected by police.

IV. Party and Government Agencies

The regime mobilized the entire state apparatus in its campaign against Falun Gong. Below are the main agencies responsible for carrying out this campaign.

**610 Office and Political and Legal Affairs Committee**

In March 2015, Phoenix Satellite Television, a Hong Kong-based mandarin language station authorized by the Chinese government to broadcast in Mainland China, published an interview with Huang Jiefu, in which he stated, “When we decided to stop the reliance on executed prisoners for organ transplants, [it was] the most helpless period we’ve been in ... Using prisoner organs, this kind of situation naturally would come to have all kinds of murky and difficult problems in it. Do you know the meaning of my words? .... It became filthy, it became murky and intractable, it became an extremely sensitive, extremely complicated area, basically a forbidden area.”

Huang mentioned that it is now possible to touch this forbidden area because of the downfall of a “big tiger” in the anti-corruption campaign, “Zhou Yongkang is the big tiger; he was our General Secretary of the National Political and Legal Affairs Committee, and a formerly member of the Politburo Standing Committee. Everyone knows this ... So as for where executed prisoner organs come from, isn't it very clear?”

The Political and Legal Affairs Committee was established in September 1949 to direct the work of the Ministry of the Interior, Ministry of Public Security, Ministry of Justice, Committee for Social and Legal Affairs, and the Ethnic Affairs Commission.

Before the campaign against Falun Gong was officially launched, the Chinese Communist Party created a "Central Leading Group to handle the Falun Gong issue," under which an "Office of the
Leading Group to handle the Falun Gong issue” was established. It is internally known as the “610 Office,” deriving its name from the date of its founding, June 10th, 1999.

With a structure extending from top to bottom throughout the Party, government, and military, it was given the power to command all police and judicial organs. This organization is akin to the Chinese Communist Party’s Central Cultural Revolution Group, and is dedicated to carrying out the systematic eradication of the practice of Falun Gong. It is an ad hoc agency directly under the Chinese Communist Party Central Committee and is endowed with extraordinary and extralegal power. It later changed its name to the Central Leading Group on Dealing with Heretical Religions or Office of Maintaining Stability. 482
The Political and Legal Affairs Committee and 610 Office have the power to control personnel and resources under more than 20 CCP and government agencies and organizations, such as the Ministry of Public Security (police system), Ministry of State Security, Ministry of Foreign Affairs, propaganda departments, and the fields of finance, culture, education, science and technology, and health throughout the country.\(^{483}\)

A nationwide propaganda campaigns has been a key tool in the suppression of Falun Gong. Since the persecution began in July 1999, the 610 Office has used the country’s newspapers, television stations, radio stations, websites, and loudspeakers in rural areas to broadcast anti-Falun Gong propaganda. It also has used Xinhua News Agency, China News Service, Party-controlled media overseas, and Chinese consulates to spread this propaganda globally.

The demonization of and incitement of hatred towards Falun Gong provided a basis on which crimes against practitioners could be justified.

In 2002, Jiang Zemin promoted Zhou Yongkang to Minister of Public Security, as well as Deputy Secretary of the Central Political and Legal Affairs Committee, in which role he cooperated with Committee Party Secretary Luo Gan to implement the suppression of Falun Gong nationwide.

Zhou made the eradication of Falun Gong a major focus of domestic security work in China. During his tenure, the quantity of transplants taking place in China, with organs sourced from Falun Gong practitioners, continued to grow rapidly.

In October 2007, Zhou Yongkang replaced Luo Gan as the Party Secretary of the Political and Legal Affairs Committee. Zhou became head of the "Central Leading Group to handle the Falun Gong issue" and was placed on the Party’s highest strategic tier—the Politburo Standing Committee. At the end of 2013, the new Chinese Communist Party leadership removed Zhou Yongkang under charges of corruption and plotting to stage a coup. But the machinery set in place to carry out the persecution of Falun Gong has not stopped.

**Ministry of Health, National Population and Family Planning Commission, and Others**

The Ministry of Health (MOH) and its successor, the National Health and Family Planning Commission (NPFPC), are responsible for the planning, policymaking, regulation, and management of China’s human organ transplant industry as well as the organ donation and allocation system.\(^{484}\)

These agencies centrally coordinate and guide procurement and allocation, clinical care and services, post-operative registration, oversight, and donation. They organize and implement training and sharing in regulations, policies, and techniques for transplantation. In particular, they evaluate the qualifications of transplant institutions, as well as the capabilities and management of clinical practices. They also grant and manage permits for qualified transplant centers.

Since organ transplantation has been made a high priority in the national strategy and heavily emphasized as a future emerging industry, a large number of organ transplant projects have been funded under major national programs. The Ministry of Health, the Ministry of Science and Technology, the Ministry of Education, and the military have invested heavily in research, development, and personnel training in transplantation technology to meet the needs of this rapidly growing industry. New capabilities and techniques have emerged and have spread extensively, allowing live organ transplantation in China to grow into a large, industrialized operation in just a few years.
In March 2013, at the Twelfth National People’s Congress, the former Ministry of Health and the National Population and Family Planning Commission were dissolved, and Huang Jiefu was relieved from his position as Deputy Minister of Health. Meanwhile, a new National Health and Family Planning Commission was founded.\textsuperscript{485}

On March 1, 2014, the China Human Organ Donation and Transplantation Commission announced its establishment. It declared that, under the leadership of the National Health and Family Planning Commission and the China Red Cross Society, this Commission would work as a central management unit to guide and oversee the human organ transplant and donation system in China. Huang Jiefu was named the Commission’s director.\textsuperscript{486}

Huang Jiefu announced that China would discontinue the use of organs from death-row prisoners on January 1, 2015. That announcement itself has no legal effect and cannot be traced to any officially promulgated policy statements or laws. The State Council’s Human Organ Transplant Ordinance promulgated on March 21, 2007, did not abolish the Provisional Regulations of 1984\textsuperscript{487} that allow the sourcing of organs from prisoners without consent. The 1984 Provisional Regulations remain valid today.\textsuperscript{488}

\textbf{The Military}

The People’s Liberation Army is controlled by the Chinese Communist Party and is one of the few militaries in the world that belong to a party rather than the State.

From 1999 to May 2006, the Chinese Communist Party Central Military Commission held six special meetings on “handling foreign-related religious issues,” which mainly targeted Falun Gong.\textsuperscript{489} The Communist Party’s former leader Jiang Zemin authorized the General Logistics Department, to be the core unit to lead every level of the military to eradicate the practice of Falun Gong. The military was given the power to manage the secret detention facilities and the entire related process of live organ harvesting.\textsuperscript{490}

According to an investigation by the World Organization to Investigate the Persecution of Falun Gong, over 100 different military hospitals have developed or expanded their organ transplant facilities, with over 2,000 medical personnel involved.\textsuperscript{491} These include the General Hospital of the People’s Liberation Army (No.301) that belongs directly to the Central Military Commission, all military branch general hospitals, general hospitals that belong to the seven regional military commands, hospitals affiliated with military medical universities, military hospitals coded with numbers, and armed police general hospitals. They have resolved many core technical issues in organ transplantation and have supported civilian hospitals with fresh organ supplies and technical assistance.

The 2016 report by Kilgour, Matas, and Gutmann explains, “A third explanation is a synthesis of the previous two. The Communist Party’s demonization and brutalization of Falun Gong and the health system’s insatiable demand for organs have lived in China in symbiosis. Each feeds off the other. The combination is a human rights and humanitarian disaster.”\textsuperscript{492}

China has been the great cradle of over five thousand years of civilization. Today, that ethical spirit may be on the wane, but there are still many people in Chinese who are guided by moral principles. If we are to live in an ethical world, there is no better place to start for both the Chinese and the international community than by stopping the Chinese organ harvesting juggernaut.
Appendix: Admissions

I. Wang Lijun’s Human Body Experiments

The Experiments

Wang Lijun is one of the most high-profile law enforcement officials in China, in part because he was hand-picked and promoted by Bo Xilai, the Governor of Liaoning, a dark-horse contender for the Politburo Standing Committee of the Chinese Communist Party, and potentially a candidate for the very highest level of political leadership in China. Wang worked for 29 universities and research institutions with such titles ranging from part-time professor to chairman, and has been responsible for many medical innovations.

In May 2003, Bo Xilai transferred Wang Lijun to Jinzhou as police commissioner. Wang does not have a medical background, but soon after he took up the position, he established an “On-Site Psychological Research Center” located under the Jinzhou Public Security Bureau.

On September 17, 2006, in his acceptance speech for an award of two million RMB for the “Guanghua Innovation Special Contribution Award,” Wang stated that “our scientific and technological achievements in the field are the crystallization of the thousands of intensive on-site tests and the efforts of many of our people … to those who have served in the police force for many years, when we see a person go to the place of execution and in a matter of minutes this person’s life is transformed and extended into the lives of other people, it is soul-stirring. This is a momentous undertaking.”

Ren Jinyang, Secretary-General of the Guanghua Foundation, further remarked, “Professor Wang Lijun and the research center carried out basic research and clinical experiments to solve the problem of a recipient’s body rejecting the extracted organs for transplant after lethal injections. They researched and developed a brand new protective solution, which is used to provide a perfusion treatment for livers and kidneys both in vivo and in vitro. Through animal experiments, in vitro experiments, and clinical application, they have made step-by-step scientific success in making it possible for an organ to be accepted by the recipient after lethal injections.”

In September 2004, Sanlian Life Weekly contained an article titled “Tianjin Survey: Asia’s Number One’ in Organ Transplantation,” in which the head medical resident at Tianjin Oriental Organ Transplant Center, Zhang Yamin, said that donor organ procurement is costly, that a single organ perfusion preservation solution is not a small expenditure, and that every major organ requires four bags of preservation solution at 5,000 RMB each. At the beginning, there were no domestic manufacturers of perfusion solutions, so they had to use preservation solutions brought back from Japan, bag by bag, by Shen Zhongyang.
Wang Lijun’s drug experimentation with living subjects included improving medication for lethal injections to reduce complications from rejection responses after organ extraction and transplantation, as well as improving organ preservation solutions.499

In June 2005, Liao Shen Evening News reported an example of Wang’s work, “the entire process of lethal injections in death-row prisoners,” which was intended to help more people understand the research.500 At 5:00 am on June 9, 2005, in Cuijiatun in the Jinzhou City Economic and Technological Development Zone, a field experiment and study was carried out with a lethal injection. A researcher gave the following introduction.

“Through the entire process of a convict’s death via lethal injection, the healthy person’s vital signs will be measured before and after the injection, the amount of poison residue in various organs afterwards, the prisoner’s psychological changes when facing death … this data will provide important help to organ transplantation after death by lethal injection and other aspects of human organ transplantation. Whether in China or abroad, this is cutting-edge research.”

The reporter described the experts gathered at the execution site as if they were staff of a research laboratory. The reporter referred to Wang Lijun as the director of the Psychological Research Center. The reporter also listed professor and doctoral advisor Xi Huanjiu, the dean of Jinzhou Medical College, and other experts in medicine, criminal investigation, and psychology. They were described as conducting psychological analyses and clinical research on reportedly violent criminals who received the lethal injections.

According to the Chinese Ministry of Commerce website, “Jinzhou Public Security Bureau’s On-Site Psychological Research Center” works with over ten universities and medical institutions, among which are the China Criminal Police College, Peking University, Beijing Institute of Technology, Northeastern University of Finance and Economics, China Medical University, Jinzhou Medical School and the People’s Liberation Army Military Hospital No. 205. It is dedicated to live psychological research and techniques. It also collaborated with universities in more than ten countries in joint research and academic exchanges, including the United States, Japan, Italy, Norway, and Sweden.501

Wang Lijun also presided over a major project on atraumatic dissection in the Asia-Pacific region.502 As shown in the center’s introduction, above, institutions that took part in this project included the Swiss Virtual Dissection Foundation, the Tribunal Science Institute of University of Bern in Switzerland, Medical University of Graz in Austria, China Medical University, Jinzhou Medical College, and the People’s Liberation Army Hospital No. 205.
Between 2003 and 2008, Wang Lijun carried out thousands of what were effectively live human experiments. This raises questions both as to how Jinzhou, a third-tier city, had thousands of death-row prisoners available for these experiments, and whether the prisoners were actually conventional death row convicts.

Wang Lijun was transferred to Chongqing City in June 2008, where he served as deputy mayor and police commissioner. During this period, he established the On-Site Psychology Research Center at Southwest University and acted as its director, professor, and doctoral advisor. He continuously intensified the study on atraumatic dissection.503
A Killing Apparatus

On August 27, 2014, *Beijing Youth Daily* reported that Wang Lijun had been awarded 254 patents in his office in Chongqing, 211 of which were submitted in 2011, an average of one application every 1.7 days. The report also mentioned a high-tech product called the “Primary Brain Stem Injury Impact Apparatus.”

The patent’s inventors were Wang Lijun and the fourth laboratory of the Field Research Institute of Surgery in Daping Hospital, affiliated with the Third Military Medical University. They published a paper in *Trauma Surgery* in 2008 Issue 2, entitled “Finite Element Simulation and its Clinical Significance of Traumatic Brain Injury Caused by Temporal Impact in the Quasistatic State.”

The paper claimed that the purpose of this study was to “Establish a simulation of a traumatic brain injury caused by a temporal impact … discuss the biomechanics of brain injuries caused by a temporal impact … results: the pressure at the impact point of the temporal bone and intracranial pressure increased with increased impact velocity ... the results of the simulation matched the results of the biological experiment ... this study has important implications for the diagnosis and prevention of brain injuries caused by temporal impacts.”

The paper referred to a software simulation in which this process would be explored, to provide data for real-world scenarios. The paper also set out an experiment, stating that until October 2007, twelve corpse heads were used for the impact tests. All the subjects for the experiments were male, age 26-38, and with an average age of 31.

However, the overall purpose of the study seems contrary to its claim of saving lives. Instead, it studies injuries to the brain at different levels resulting from violent impacts to the primary brain stem. Victims are left with various levels of cognitive and sensory motor dysfunctions, which can lead to life threatening respiratory and circulatory malfunctions. Therefore, this process could be used to determine how best to kill. An impact to the temple that is placed just right can cause brain stem injury, loss of consciousness, and even brain death. The heart is still beating, and various organs and tissues continue to live. This impact is an effective alternative to lethal injection while maintaining organ function and reducing rejection responses.
In the China Patent Search System, we can find the “primary brain stem injury impact apparatus” under patent number 201120542042X as pictured below. The inventors are Wang Lijun and the authors of the paper describing the impact experiments on 12 corpse heads. The instructions also claim that the device has a “simple structure, is easy to produce, and adapted to promote the application.”

The protection of utility model patents is ten years from the filing date in China. It is odd that this patent application was submitted on December 11, 2011 and published in August 2012, but its current legal status shows that the patent was terminated in February 2016.
II. Plastinated Bodies

On November 19, 2005, “Bodies: The Exhibition” opened in Manhattan, New York City, sponsored by Premier Exhibitions. On display were 22 skinless corpses and 260 real human organ specimens that had tissue fluid extracted and silicone pumped into them.\footnote{508}

One piece of the exhibit features a young mother and her unborn baby. According to Chinese law, pregnant women cannot be sentenced to capital punishment. Who would donate the remains of his unfortunate wife and unborn child to a paid exhibition? Where did these human specimens come from? How did they become exhibits?

This exhibition tours the world and has been shown in New York, Las Vegas, Atlanta, Los Angeles, and elsewhere, for a long period of time. In 2006, the \textit{New York Times} reported that the exhibition had attracted more than 20 million visitors. According to the organizers, the human specimens were provided by Dalian Medical University in China and produced using body plastination technology invented by Gunther von Hagens.\footnote{509} Sui Hongjin, the deputy director of the Anatomy Department of Dalian Medical University and general manager of the plastination company of Dalian Medical University, explained “no one can recognize their identities.”\footnote{510}
**Dalian Plastination Body Plant**

Body plastination technology uses silicon, epoxy, and other polymer mixtures to replace fluids in the human body. Other than the plastination technology itself, the barrier to creating specimens is the availability of fresh human corpses. According to forensic medicine, the “fresh period” for a human body is just two days.

In June 2002, Sui Hongjin, Deputy Director of the Anatomy Department at Dalian Medical University, opened a company with another partner named “Dalian Medical University Biology Plastination Ltd.” In 2004, Sui registered another company named “Dalian Hongfeng Biology Ltd.” Its main business is human body specimen manufacturing and exhibition.

Sui Hongjin could receive fresh corpses from a variety of local sources. The drive from Wang Lijun’s transplant operation in Jinzhou City to Dalian is about four hours. Wang Lijun was, as noted, a protégé and right-hand man to Bo Xilai. Bo was the mayor of Dalian from 1993 to 2000 and later Governor of Liaoning Province in 2002. During this time, he invested one billion RMB to carry out prison expansion and reconstruction throughout the province, and to build new large-scale prison facilities. In the vicinity of Sui Hongjin’s corpse factories, there are Liaoning Province Prison No. 3, Dalian Nanguanling Prison, Dalian Labor Camp, and Yaojia Detention Center.

On November 27, 2003, a cover article named “Corpse Factory Investigation” published in the second issue of *Orient Outlook* reported that, in addition to the companies operated by von Hagens and Sui Hongjin in Dalian, there were plastination specimen plants in Guangzhou, Shanghai, Nanjing, Qingdao, Shenzhen, Tai’an and elsewhere, and that China had become the world’s largest exporter of human specimens. On August 23, 2012, *Southern Metropolis Daily* reported that Mainland China has several dozen manufacturers engaged in human plastination.

**Trafficking Human Remains**

Trafficking human cadavers has become a business. Plastinated specimens are publicly priced and traded. The Government of China calls for bids on such trades. Here are some examples:

**Mudanjiang Medical College, teaching specimens and human services bid announcement**

【Mudanjiang city government Web site – government procurement】

**Tender Date:** June 30, 2011

**Bid announcement:** February 15, 2012

**The successful supplier list:** Dalian Hongfeng Biology Technology Co., Ltd.

**The bid price:** 997,000 yuan (approximately $150,000 USD)

**Tenderer Name:** Mudanjiang Municipal Government Procurement Center

**Contact:** Mr. Feng, Mr. Teng
On May 17, 2006, a college student in northeastern China wrote to Minghui.org, “Our tiny, amateurish medical college in Changchun somehow has more bodies and organ specimens than Waseda University in Tokyo. How is it possible that we have accumulated so many corpses and organ specimens in recent years after the Cultural Revolution? I asked the teacher whether these bodies were donated, but the teacher told me not to ask. Later I discovered that in the suburban district of Changchun there is a corpse processing plant. Today in China, do we really have so many cadavers from voluntary donors, so many that we need corpse processing plants? Bodies of infants and young children are also processed there. Are the Chinese parents really so ‘noble’ as to donate the remains of their own deceased infants?”

Sui Hongjin’s Dalian Medical University Biology Plastination Ltd. is active in China’s educational equipment procurement network, to which it sells plastinated specimens of all parts of the human body, such as the digestive system, nervous system, embryonic development, endocrine system, genitourinary (reproductive and urinary organs) system, respiratory system, sensory organs, including “fetuses [of] 10 weeks to 32 weeks.” The company also offers negotiable product prices.

Introduction of products of Dalian Medical University Biology Plastination Ltd on the website of China’s educational equipment procurement network
Dalian Hongfeng Biology Technology Co., Ltd’s body exhibition in Europe was called The Human Body. From February 2 to July 31, 2012, 200 real human body specimens were on display in Dublin, Ireland. Additional exhibits were simultaneously scheduled that year in other European countries. Budapest, Hungary exhibited more than 150 complete corpses from February 24 to May 27. From March 10 to June 10, The Human Body was on display in Prague, Czech Republic and in Ostend, Belgium from June 16 to September 9.

For the nine years between 2004 and 2013, Sui Hongjin’s several exhibits toured more than 60 cities in more than 20 countries. The number of visitors topped 35 million. In 2005, “Bodies—The Exhibition” in the US had become the main source of earnings for Sui’s partner, Premier Exhibitions.

**Claimed Police Sourcing**

When asked about the “corpse source” by a reporter from Southern Metropolis Daily, Sui Hongjin, Chairman of Dalian Hongfeng Biology Technology Co., Ltd and director of the Anatomy Department of Dalian Medical University, declared, “The bodies are from [Dalian] Medical University autopsies. The source of origin is indicated as ‘body without record.’”

According to regulations and autopsy rules issued by China’s Ministry of Health on February 22, 1979, medical colleges can use undocumented corpses remaining unclaimed after a month upon approval of a competent authority or the police department. Undocumented corpses must be embalmed if they are to be stored beyond a month before use. Otherwise, in 10 to 23 days after death, the body will have only hair, skin, cartilage and bone left intact.

The corpses used in the body exhibits had been plastinated while fresh, which is within two days of death. The corpses used by Sui Hongjin could not have been undocumented corpses. In August 2012, Sui Hongjin claimed in the Southern Metropolis Daily, “From the first day when Dalian Hongfeng was established, no plastinated specimen we have offered came from death row, there is no one,” and “At present, none of our plastinated human specimens are from donors.” “They come from people who have died in hospital and no one has claimed the bodies.”

In 2008, at the request of the Attorney General of New York State, Premier Exhibitions posted a disclaimer on the exhibition’s official website and at the New York exhibition site, citing “Dalian Hongfeng” as the source of human body specimens.

“This exhibit displays full body cadavers as well as human body parts, organs, fetuses and embryos that come from cadavers of Chinese citizens or residents. With respect to the human parts, organs, fetuses and embryos you are viewing, Premier relies solely on the representations of its Chinese partners and cannot independently verify that they do not belong to persons executed while incarcerated in Chinese prisons.”
Excerpt of Conversation with Sui Hongjin, Chairman of Dalian Hongfeng

Below is the translation of a transcript of a call made to Sui Hongjin by an investigator from the World Organization to Investigate the Persecution of Falun Gong. The investigator assumed the identity of a Party investigator and asked Sui about his business operations, including the provenance of the corpses. The call was made in late 2012, a period of great political uncertainty in China, not long after the purge of Bo Xilai. Investigations were being launched into many of Bo’s former colleagues, as well as his wife, Gu Kailai. These conditions would have helped to give Sui Hongjin the impression that he was speaking to a Party disciplinary investigator.

**Investigator:** What channels served as your main source of bodies?

**Sui Hongjin:** Dozens of corpses came from Public Security. They were procured by the Public Security Bureau.

**Investigator:** Then they are from the police. How many cadavers have you received thus far?

**Sui Hongjin:** I can’t remember now, perhaps dozens...if you come in person to investigate, I will discuss the matter with you. It’s not convenient to talk on the phone.

**Investigator:** Which Public Security Bureau supplied you?

**Sui Hongjin:** Dalian, the Dalian Public Security Bureau.

**Investigator:** So the source of the dead bodies you used was from the Public Security Bureau. Do you know where they got them?

**Sui Hongjin:** They ... how do I put it, this was in 2004, there was once an internal report, a report to the Ministry of Public Security ... because for some specific subjects, I only ask for a result. I cannot ask for too much detail ... because I know this is a sensitive matter. I’m willing to cooperate with your investigation ... if necessary, I can be interviewed, if you need a signed statement, that is not a problem. I stand by what I say.
Chinese Government Auspices

On July 17, 2006, nine Ministries of the Government of China jointly issued the “exit and entry of corpse and cadaver disposal regulations,” prohibiting cadaver trading and the use of dead bodies for commercial activities. The regulations became effective on August 1, 2006.532

Sui Hongjin’s human specimen business was not affected by the regulations. Instead, it began to grow and thrive. On November 23, 2010, Dalian TV reported, “Dalian Hongfeng Biological Technology Co., Ltd. conducts business with more than 100 world-famous museums, and its annual revenue has reached more than 200 million yuan.”533

Part of the display of Dalian Hongfeng the “Mystery of Life Museum”: The Lovers, Womb Fetus, and Mother and Baby Siamese specimens

On December 15, 2008, Dalian Hongfeng Biological Technology Co., Ltd. was selected by the Dalian Municipal Government as one of the “high-tech enterprises” to receive tax incentives. In May 2009, Dalian Hongfeng opened its “Mystery of Life Museum” to the public, touted as “the only comprehensive museum in the world where the first signs of life can be seen.” According to Sui Hongjin, the “exhibition center was funded and supported by the Ministry of Finance and the China Association for Sciences; it was held in high regard and received support from various ministries and provincial and municipal leaders.” 534
III. Whistleblowers

Whistleblowers are an essential resource for any investigation that takes place under an information blackout and they have played an important role in our investigations. The majority of the accounts we refer to were relayed to us at significant risk to the witnesses and their families. Often, the testimony itself simply cannot be verified, but in the context of new investigative techniques that reveal a landscape of mass transplant activity, the whistleblowers’ testimony has new explanatory power. However, it is important to note that they often provide only one piece of the puzzle.

“Annie”, who first made a public statement about the organ harvesting of Falun Gong practitioners in March 2006, was an employee at Sujiatun Hospital and knew that requests for goods such as toilet paper and rice were increasing dramatically. The supplies were sufficient not just for her hospital but also for a second hospital full of patients. Ultimately, her husband, a surgeon, told her that the hospital was housing practitioners of Falun Gong and murdering them for their organs in large numbers.

Her husband told her that he had personally removed the corneas from approximately 2,000 anaesthetized Falun Gong prisoners in Sujiatun hospital in Shenyang City in northeast China during the two-year period before October 2003. The surgeon made it clear to his wife that none of the cornea “donors” survived the experience because other surgeons removed other vital organs and all of their bodies were then burned. Annie is not a Falun Gong practitioner.

A Military Doctor in Shenyang

On March 31, 2006, a person who identified himself as a senior military doctor, who belonged to the General Logistics Department of the Shenyang Military Command, wrote to the Epoch Times.

“Sujiatun is one of 36 similar secret detention facilities. From the information I can access, Jilin has the largest camp that detains Falun Gong practitioners, with the code of 672-S. There are more than 120,000 people detained there, including Falun Gong people from throughout the country, serious offenders, and political prisoners. Just the Jilin Jiutai region, which has the fifth-largest secret detention facilities holding Falun Gong practitioners, detained more than 14,000 of them."

According to this military doctor, who chose to remain anonymous for his safety, “… the Chinese Communist Party Central Military Commission had documentation since 1962, and has followed through to today, that all death row and serious offenders can be treated according to the needs of national and socialist development and can be dealt with according to the ‘revolutionary protocol.’”

“The seizure of organs from serious offenders was legalized by a supplementary regulation enacted in 1984. Many local public security departments deal with this either by directly transplanting from these people and cremating them afterwards, or by wounding them, forming death rituals, directly transplanting, and then cremating. After 1992, with the rising costs of industrial raw materials as a result of the development of many industries, human bodies became a valuable raw material. Both living bodies and corpses became raw materials.”
“At present, the Chinese Communist Party Central defines Falun Gong members as an enemy class. This means that there is no need to report if they are treated in line with the needs of economic development. In other words, like serious offenders, Falun Gong people are no longer seen as human beings, but raw materials for products, and they became a commodity.”

He wrote again to the Epoch Times in April 2006 to give more details of the process.

“Anyone targeted for organ transplantation would be taken away from prisons, forced labor camps, detention centers, secret camps, etc. At that point, their real name would be replaced with a code corresponding to a forged voluntary organ’s name … the next step would be to undergo the live organ transplant … this person is no longer seen as a human being, but an animal. [Doctors] who have performed one or two cases may still have some lingering fear, but after tens of thousands of live transplants and destroying the bodies while still alive, one becomes numb.”

“All organ sources targeted are said to be voluntary. Falun Gong and other inmates use their real names during custody. However, a forged name is used during organ transplantation. They become a fictitious person, but this person’s information is complete. There was also a signature on the voluntary organ donation form, but of course it was signed by someone else.”

“I have seen more than 60,000 such counterfeit forms. Basically, it says that the person voluntarily donates the organ and bears all the consequences. Many signatures were from same person’s handwriting.”

“These materials will be kept for 18 months and be destroyed afterwards. They are kept at the provincial level of military commands and can be accessed only with approval from the commissioner(s) of the Central Military Commission.”

“In fact, the number of underground, unofficial organ transplants in China is several times higher than the official figures. With an abundant source of living organs, many hospitals with military backgrounds also engage in large-scale organ transplantation in private, in addition to the official reports they submit to their superiors.”

“China is the center of international live organ trading, and has accounted for more than 85% of the total number of live organ transplants in the world since 2000. According to the data reported to the Central Military Commission, a few people have been promoted and became Generals due to their ‘achievements’ in this field.”

“The military acts as the organ transplantation management system. This type of management and organizational core belongs to the military system. This is something that the civilian government cannot match, because once it becomes a military secret, no one can acquire the information. We all understand how the military system works.”

“The Central Military Commission authorizes relevant military personnel and units to manage military affairs. All information pertaining to these activities is regarded as a military secret. Personnel responsible for military control have the authority to arrest, detain or execute any doctors, police, armed police, and researchers who leak information.”
A Healthcare Worker in Jinan

On April 14, 2006, a healthcare worker who worked in Jinan healthcare system for more than 20 years wrote to the overseas newspaper Renminbao.540

"The Shandong Qianfoshan Hospital and the Police General Hospital of Shandong Province colluded with the prisons and forced labor camps in a large-scale operation to conduct live organ harvesting for transplants. The hospital obtained directives from the [Party] Central and was fully involved."

"Both the Shandong Qianfoshan Hospital and the Shandong Police General Hospital (commonly known as Laogai Hospital, since such hospitals belong to the labor camp system) directly participated in organ harvesting from Falun Gong practitioners. These hospitals received and fully cooperated with instructions directly from the central level of the Communist Party. Many transplants using organs from living practitioners were performed by these two hospitals, which partnered with Shandong Provincial Prison, Shandong Province Women's Prison, and other prisons and forced labor camps. These institutions streamlined the supply of organs, including surgeons, extraction of organs, transplantation, distribution of profit, etc. … The bodies of Falun Gong practitioners were used for hospitals’ interns to conduct experiments."

"Qianfoshan Hospital partnered with the Tianjin Oriental Organ Transplant Center to establish the Shandong Liver Transplant Institute. It boasted the largest transplant volume and the most advanced technology in liver transplantation in the province. The center also performed kidney, testicular, lung, and corneal transplants."

The hospital has a capacity of 800 beds. It has over 300 senior technical personnel, 44 doctoral and graduate advisors, and more than 90 part-time professors from Shandong University.

An Armed Police Officer in Jinzhou

On December 10, 2009, an armed police officer in Jinzhou, Liaoning Province reported and testified via phone to the World Organization to Investigate Persecution of Falun Gong that he had guarded one of the organ harvesting sites and personally witnessed the entire scene of two military doctors excising organs from a female Falun Gong practitioner.541

The armed guard was an eyewitness to a surgery on April 9, 2002, in an operating room on the 15th floor of the General Hospital of Shenyang Military Command, People’s Liberation Army. He observed two military doctors extract organs from a female Falun Gong practitioner. The Military Identification No. of one of the doctors is 0106069. The victim was a middle school teacher in her thirties. Before the doctors killed her, she had been subjected to a month of severe torture, molestation and rape.

He stated, “No anesthetic was given. The knife dug straight into the chest. Their hands didn’t even shake. If it were me, my hands would definitely shake…”

In 2002, this witness worked in the Liaoning Province Public Security system and participated in the arrest and torture of Falun Gong practitioners, including this female practitioner. She was covered in wounds from the ordeal. On April 9, 2002, the Liaoning Public Security department sent two military
doctors to the scene, one from the Shenyang Military Command General Hospital and another who had graduated from the Second Military Medical University. This female practitioner was fully conscious when her heart, kidney, and other organs were removed without anesthesia. The witness, armed with gun, guarded the scene throughout the whole process. He also stated that Wang Lijun, head of Jinzhou City Public Security, gave an order that they “must destroy Falun Gong practitioners completely.”

A Vice President of a Medical University and Official of the Ministry of Public Security

In 2014 and 2015, Yang Guang, an expert in the Chinese issues who resides in Denmark, reported to the Epoch Times and New Tang Dynasty Television about two of his friends. One of his friends was a vice president of a medical university in northeastern China, in charge of logistics for its two affiliated hospitals. Before 2009, he was put in charge of the two hospitals, each of which conducted 2,000 to 3,000 organ transplants every year. The real name and former workplaces of Mr. Yang’s first friend were verifiable online. There was no attempt to contact the witness, because of the dangers to which the contact would expose him. The hospitals’ and witness’s names are redacted for safety concerns.

Below are excerpts of the account of the first friend.

“The two affiliated hospitals of our university conducted 2,000 to 3,000 organ transplantation surgeries each year. Due to a pool of living organ sources, tissue matching took less than a month, sometimes as short as 48 hours...The 610 Office (the Communist Party bureaucracy charged with eradication of Falun Gong) transported organ sources to the hospitals in prisoner transport vehicles. Once the tissue matching was verified, the transplants were performed. After the surgeries, the bodies were cremated...We only get serial numbers [of the “organ sources”] and knew only that they were Falun Gong practitioners. Such cases accounted for 90% of transplants in the hospitals. The whole process was monitored by the members of 610 Office...We were required to maintain strict secrecy. All the serial numbers and data of organ transplants were reported to the supervising Chinese Communist Party Committee at the end of each year, and then were removed from our computers under the supervision of 610 Office personnel.”

“Beginning in 2000, the 610 Office started to supply us organs of Falun Gong practitioners. There were no names and addresses, just their gender, age, and a serial number. Whenever our hospitals sent medical teams to collect blood samples from the prisons, labor camps, and brainwashing centers, I had to prepare the tools, drugs, coolers and provide transportation. I have the complete records in hand ... The military and police hospitals usually conduct more transplants than civilian hospitals.”

The vice president added that the actual death row prisoners, criminals who had been sentenced to death, account for only a small number of the organs procured. Even in the ten biggest cities in China, no more than fifty prisoners were executed annually. Senior Chinese Communist Party officials and their relatives refuse to accept organs from death-row prisoners. Those organs were usually reserved for foreigners who come to China for organ transplants. Prices for foreigners are not fixed. In some cases, those with money, desperate for an organ, have been charged up to $2 million for a transplantation and hospital stay.

Yang’s other friend worked in the Ministry of Public Security and was in charge of informant stations in a major city on the coast of mainland China. During the New Year holidays in 2012, he told Yang
that as far as he knew, over the past decade, at least 500,000 Falun Gong practitioners’ organs were harvested for transplants in civilian hospitals in China. This number did not include those from the hospitals affiliated with the armed police, military, and public security. The statistics of these hospitals were top secret and even the personnel in the Ministry of Public Security could not obtain them.\textsuperscript{544}

IV. Phone Calls

Since Annie made her public statement about live organ harvesting in March 2006, the World Organization to Investigate the Persecution of Falun Gong has conducted phone interviews with members of the judiciary, military, armed police, and organ transplant centers in 31 provinces, municipalities directly under the central government, and autonomous regions.

The targets of the investigation included members of the Politburo and the Politburo Standing Committee, the Vice Chairman of the Chinese Communist Party Central Military Commission, a CMC member and former defense minister, a former head of the People’s Liberation Army General Logistics Department’s Health Division, members of central and local Political and Legal Affairs Committees, agents of the 610 Office, and transplant doctors in military and civilian hospitals all over China and an organ broker. Below are some examples.

\textit{Chen Qiang, Organ Liaison at People’s Liberation Army Hospital No. 307}

In Fengtai, Beijing, Chen Qiang, a kidney source liaison at the People’s Liberation Army Hospital No. 307, provided further evidence that many Falun Gong practitioners who went to appeal to the central government were secretly detained. They were given a code in the system and became living organ sources.\textsuperscript{545}

The following is part of the recorded dialogue between Chen Qiang and an investigator under the guise of a relative of a patient looking for organs (April 10, 2007, 3:09-3:28am EDT).

\textbf{Investigator:} …by the way, how could you be so sure he [the source] was a Falun Gong practitioner? Did you find out for sure?

\textbf{Chen:} How to identify a Falun Gong practitioner? Well, when the time comes, then our side, our boss will have people showing you information, you know. He will show you the information and data. You can be sure. We have connections with government officials. There are connections to high-ranking officials. You know, I will show you such material even if you don’t ask me for it.

\textbf{Investigator:} I heard from others that, several years ago, the Falun Gong practitioners did not disclose their names after they were taken away. There are quite many who belong to this type. Some were kept in the basement, and some are detained in neither prison nor forced labor camps.

\textbf{Chen:} What you said was what happened in 2003. I understand what you said. Those who didn’t provide their names were in the 2003 records. You need to find them from the 2003 archival records.

\textbf{Investigator:} Were there many in 2003?

\textbf{Chen:} Oh yes. In 2003 records, there were many Falun Gong people.

\textbf{Investigator:} You know that several years ago, they secretly detained many Falun Gong practitioners who went to appeal but did not provide their names. There were no records, no registrations.
**Chen:** Yes, this is quite normal. If Falun Gong practitioners did not give their names, they would be given a code. If their names couldn’t be identified, there would be their code numbers. Also, one can be tracked by fingerprints. That’s how the source can be tracked. Nowadays in our society, especially for these types of matters…like our boss, like the connections to the detention centers, I cannot tell you. For situations like what you said, I cannot say casually. We have close relationships with them. Since we are engaging in this business, we have our people in each and every department. How can you get things done if we don’t have our connections? This thing is just like a supply line, you know?

**Bai Shuzhong, former head of the People’s Liberation Army General Logistics Department Health Division**

On September 30, 2014, Bai Shuzhong, former head of the People’s Liberation Army General Logistics Department Health Division, stated to an investigator of the World Organization to Investigate Persecution of Falun Gong, who assumed the identity of a Party investigator, and proceeded to ask Bai pointed questions about living organ harvesting: “Back then, it was Chairman Jiang … there was an order, a sort of instruction … to carry out this thing, that is, organ transplantation … after Chairman Jiang issued the order, we all did a lot of work against the Falun Gong practitioners … Thus, I should say, it was not just the military that was doing kidney transplants…”

Bai served in this role from 1998 to 2004. As the top officer leading core institutions of the military health system, he would have been the main person responsible for conveying instructions to implement this extermination policy.

**Investigator:** When you were head of the health division for the People’s Liberation Army General Logistics Department, regarding taking organs from the detained Falun Gong people for organ transplantation, was it an order from Wang Ke, the then-director of the People’s Liberation Army General Logistics Department? Or did it directly come from the Central Military Commission?

**Bai:** Back then, it was Chairman Jiang … There was an instruction … to carry out this thing, that is, organ transplantation …, Chairman Jiang had an instruction that said this... about people selling kidneys for transplant surgeries. This, I should say, was not just the military that was doing kidney transplants.

**Investigator:** We also obtained some intelligence, that is to say, back then, the Joint Logistics Departments [of the Military Regions] had detained a number of Falun Gong people as live "organs", is that true?

**Bai:** This, this is back then, ah, I think, at least this is how I remembered, because back then after Chairman Jiang issued instructions, we all did a lot of work against the Falun Gong practitioners.

**Investigator:** You guys [the People’s Liberation Army General Logistics Department] and the Joint Logistics Department No. 1, Joint Logistics Department No. 2, including the Joint Logistics Department No. 4 subdivision, and the military hospitals they were in charge of, do you have a supervisory relationship with them?

**Bai:** We directly control the military medical universities. They are directly affiliated with the People’s Liberation Army General Logistics Department, and they received repeated orders, because Jiang paid a lot of attention to this matter back then, and put a lot of emphasis on this matter … Jiang, when he was in the position, put a lot of emphasis, he gave instruction on this.
Chinese Communist Party Officials

The World Organization to Investigate Persecution of Falun Gong investigated a number of Politburo Standing Committee members, a vice chairman of the Chinese Communist Party Central Military Commission, and a Central Military Commission member.547

Li Changchun 548

On April 17, 2012, Li Changchun, a Politburo Standing Committee member, was asked by an investigator who assumed the identity of the chief secretary of Luo Dan about “the use of organs from detained Falun Gong practitioners for organ transplants and possible conviction of Bo Xilai for doing that.” Li replied, “Zhou Yongkang is in charge of this specifically. He knows this.”

Liang Guanglie 549

From May 4 to May 10, 2012, Liang Guanglie, former Secretary of Defense, former People’s Liberation Army Chief of Staff, and member of the Central Military Commission, was investigated by the World Organization to Investigate Persecution of Falun Gong during a visit to the US. The investigator had assumed the identity of a member of special group investigating Wang Lijun.

Regarding the Grade 3A military hospitals using Falun Gong practitioners’ organs for transplants, Liang replied, “I’ve heard about it ...I did not take care of that thing. I was in charge of military affairs, instead of the logistics and medically related [affairs].” When asked about this, he stated “it was discussed” during the Central Military Commission meeting.

Wei Jianrong 550

In September 2008, Wei Jianrong, former deputy director of the Central Political and Legal Affairs Committee, Chinese Communist Party stated that organ harvesting from detained Falun Gong practitioners had “happened a long time ago.” The investigator had assumed the identity of an official of the Ministry of State Security.

Tang Junjie 551

In April 2012, when answering the investigator's question on “what kind of directions or commands did Bo give regarding removing organs from Falun Gong practitioners?” Tang Junjie, former Deputy Party Secretary of the Liaoning Political and Legal Affairs Committee, said, “I was asked to take care of this task. The Party’s central [leadership] is actually taking care of this. The impact was quite big...” He added, “At that time we mainly talked about it during the meetings within the [Politburo] Standing Committee.”

During this investigation, the investigator of World Organization to Investigate Persecution of the Falun Gong assumed the identity of a member of the Bo Xilai special investigation group under the Committee for Disciplinary Inspection of the Chinese Communist Party.
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