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Forced Organ Procurement in China
Ethan Gutmann

Thank you for the invitation and a special thanks to the Chair of the ISHLT Ethics Committee, Dr. Are Holm.

Slide 2
The following relevant financial relationships exist related to this presentation:
No relationships to disclose.
I will not discuss off-label use and/or investigational use of any drugs or devices.
• A further disclosure: When I testified at the China organ harvesting tribunal in London several years ago, Sir Geoffrey Nice asked me if I had a familial relationship with the main victim groups: Falun Gong or Uyghurs.
• When the prosecutor of Milosevic asks, I answer. I'll repeat it here: I'm not Uyghur or Chinese, nor is any of my family. I'm agnostic and my wife has been called a militant atheist.

Slide 3
I'll briefly explain what attracts me to human rights field research.
• It's in my blood. This is my grandfather on my maternal side: Robert Redfield, Anthropologist.
• Most of his field research was in Chiapas, Mexico

Slide 4
This was my father, David Gutmann, in the early 1960s - a psychologist.
• He did cross-cultural field work in Mexico, among the Druze of Israel, and the Navaho.
• Sometimes he did day-care. My interview techniques often mimic what I heard while I was playing in the corner of a hut.

Slide 5
In 1999, as a business consultant in Beijing, I watched police shove Falun Gong women into unmarked vehicles. That experience, combined with my family background, led to this snapshot of my interviews with Falun Gong refugees in Bangkok, 2007.
• In China, if I tried to speak with a Falun Gong, an "enemy of the Chinese state," multiple arrests, and even deaths could follow.
• Confidential field research with refugees outside of China is one method to get information while doing no harm.
• Yet it's problematic. In China, everyone has an agenda. So do China's victims.
• I have an agenda too. To get things right. To cull bad information.
• I've been known to spend 12 hours with a witness, wearing the subject down, encouraging them to speak about their direct experience, not what they think I need to hear.
• Today I'm going to give you a short timeline of the evolution of Chinese organ harvesting of political and religious prisoners, or in human-rights speak, "prisoners of conscience."
• And I'll come back to this photo.

Slide 6
Slide content:
Death row prisoners: late 1980s to mid-1990s
First Uyghur political prisoners: 1995-1998
Majority Falun Gong:1999-2014
Majority Uyghures:2015-2023
Western response

One way to think about that evolution is to look at organ sources. Beijing admits that Chinese transplant surgeons extracted organs from death-row prisoners – essentially common criminals sentenced to death under Chinese law, until at least 2015. My focus is on what Beijing won't speak about: political and religious prisoners. These prisoners are seldom officially sentenced to death. But they are exploited as organ sources for the Chinese transplant industry. Over the years organs have been sourced from Tibetans, House Christians, and Turkic ethnicity groups such as Kazakh and Kyrgyz. Today I'll concentrate on the central victim groups - Uyghurs and Falun Gong.

For "Death Row" and "First Uyghur," I'll draw on my own field research. The research on Majority Falun Gong harvesting is robust. I'll draw your attention to critical books and reports.

The current period – Majority Uyghur - presents a difficult challenge. I'll give you my preliminary field research.

Finally, I'll shift to policy – particularly ISHLT's new stance, and the Congressional Stop Organ Harvesting Act of 2023. And I'll speculate on a potential challenge for ISHLT.

Slide 7
This is a Chinese Communist Party execution field, the birthplace of Chinese organ harvesting.

• We don't know the provenance of the photo. US intelligence suspects the location is Xinjiang, late 1980's.
• The man gazing defiantly at us has just shot the prisoners that lie at his feet.
• He wears a makeshift glove to avoid back-splatter.
• It's all legal. Each prisoner wears a poster listing their crimes.
• There may be surgeons present, but we don't see them.
• Harvesting was still an opportunistic afterthought to execution of death-row prisoners.

Slide 8
Same period.
• This woman murdered her husband in his sleep.
• It was a famous case, so the Party allowed this photo to be widely distributed.
• The death penalty for such crimes is not a controversial subject in China.

Slide 9
If we look over the gunman's shoulder, we can just make out several white vehicles. These may be hospital vans.

Slide 10 （Face of this policeman）
This former policeman described an execution field in 1992 much like the one in the previous picture.
・ He told me there were medical vans representing different hospitals circled around the periphery.
・ A medical van had finished up with a prisoner, and out of curiosity, the policeman looked inside the body bag. The chest was “empty.”

Slide 11(Blackout)
This transplant surgeon, from Sun Yat-Sen Memorial hospital must remain confidential.
・ It was 1992, same general setting, but the surgeon stayed in the medical van.
・ An executed male was brought in, and while the surgeon extracted the prisoner’s kidney, he noticed a purple line around the man’s neck.
・ The police had wrapped a wire around the man’s throat to keep him in silent in court.
・ The possibility that the man had been a political prisoner haunted the surgeon.

Slide 12
Nijat was the only Uyghur in a special Public Security Bureau unit that routinely performed political prisoner executions in the Urumqi area.
・ Nijat told me that, in 1994, screams “like, from hell” were heard coming from the medical vans.
・ In 1996, the unit’s medical director explained to Nijat that the executions were set up to induce shock, not immediate death.

Slide 13
Dr. Enver Tohti, a Uyghur surgeon now living in London, confessed to me that in 1995, on a political prisoner execution ground near Urumqi, Xinjiang, he was presented with a wounded man.
• Rather than the shaved head of a convict, the man had normal hair.
• While the man had been shot in the chest, Tohti believed that the wound was not necessarily fatal, and for a split second, Tohti thought I can save this man’s life.
• Instead, Tohti was ordered to remove the man’s kidneys and liver, while the man’s heart was still beating.
• Tohti’s supervisor told Enver to never speak about that day.
• But in several Western parliaments, Tohti testified under oath: “I killed that man.”

Slide 14 (1997 Ghulja Incident)
In 1997, The Party banned Ramadan celebrations in a Uyghur city. Uyghurs protested at the Ghulja town hall.

Slide 15
Bahtiyar, a local Ghulja policeman, reported to me that 400 Uyghurs were killed on the first day and about 10 a day after that for two months.
• Hospitals were forbidden to treat Uyghurs.
• Muslim burials, which involve handling the body, were forbidden.

• Bodies were wrapped, buried, and the cemetery was patrolled by armed guards.

Slide 16(Blackout)
A young Uyghur doctor confidentially confessed to me that in the same year, 1997, he was ordered to take blood samples from Uyghur political prisoners in an Urumqi prison.
• When the doctor asked for the reason behind the blood samples, he was explicitly told that it was for transplants.
• Six high-ranking Chinese Communist Party cadres had just flown in from Beijing.
• In 1998, six new cadres arrived, and the doctor did a second round of blood tests.

Slide 17 The rise of Falun Gong
A word about Falun Gong.
• From 1992 onward Falun Gong rose from an exercise in a park to a spiritual practice numbering 70 million people.
• I define it as a Buddhist Revival movement: less about chi-gong and health, more focused on Buddhist virtues: truth, compassion, and forbearance.
• Some of the people in this picture may be illiterate. But Falun Gong was equally attractive to University students and professors.
• One thing that bothered the Party: that boy in the front with the borrowed uniform.

Slide 18
Boys like that were growing up and entering the People's Liberation Army.
• The Party was also infected at the highest levels.
• From a Marxist perspective, this is the template for seizing power – a movement which can jump across class lines and rural/urban divides, a movement without membership lists or initiation fees.
• And Falun Gong values were seen as being in direct conflict with values of a new muscular, nationalist China.

Slide 19 （Birdseye view of practice site）
Dalian Falun Gong morning exercises in Summer, 1999.
• On July 20, Chinese State Security launched its largest action of scale since the Cultural Revolution, the eradication of Falun Gong.

Slide 20 2001 （Birdseye view of the Prison City）
By 2001, many ended up here, in "Shenyang Prison City."
• I estimate that approximately two million Falun Gong were incarcerated in labor camps, prisons, detention centers, and "black jails," in 2001, leveling off to 700,000 until 2010, and then dropping well below 450,000 by 2013.

Slide 21 （Bloody Harvest Cover）
Prominent human rights lawyers David Matas and David Kilgour wrote the first report on Chinese organ harvesting in 2006.
• It remains the Ur-stone of the investigation.
• It includes:
• A discrepancy between the execution rate in China and reported transplants, about 7000 per year by 2006.

Slide 22（Transcript dated 16th March 2006）
Transcripts of recorded phone calls with Chinese doctors – for example, this call establishes a week waiting time, and the presence of Falun Gong organs.

Slide 23（Price List）
Chinese ads with transplant prices.

Slide 24（Graph）
• And an example of a rise in liver transplants coinciding with the incarceration of Falun Gong.

Slide 25 (Graph)
• Another example.

Slide 26 (Cover of “The Slaughter”)
My book was published in 2014.
· It had five new components.
· First, it established that Uyghurs were targeted for harvesting – as well as Tibetans and House Christians.

Slide 27
Second, I interviewed 50 Falun Gong refugees.
• Here’s one.
• In Guangdong Prison, Yu describes specialized medical examinations for Falun Gong prisoners only: large blood tests, abdomen examination, EKG, urine test, and close examination of the corneas without any corresponding vision tests.
• Many of the Falun Gong were severely damaged from torture. Many of the women had been raped. I’m not showing you those photos. But the point is that the physical examinations had no follow-up.
• The prison guards made it clear that the tests weren’t about their overall health, just their organs.

Slide 28
This photo, if you subtract the white guy, is a pretty good numerical representation of Falun Gong refugees.
1. All these women were in labor camp.
2. All were tortured.
3. One was raped.
4. The woman on the left was given repeated “retail-organs-only” examinations.
5. Based on disappearances following medical examinations, my estimate is that from the end of 2001 to the end of 2008, about 65,000 Falun Gong were harvested, approximately 8000 to 9000 per year.

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Third, organ harvesting was state authorized.
• Wang Lijun – with the glasses - was China’s most famous policeman in China and the right-hand man to top Party official, Bo Xilai.
• Wang opened his own organ harvesting center in Jilin City and was given a prestigious award for a new lethal injection method.

Slide 30
Fourth: New witnesses.
• A Taiwanese doctor, Ko Wen-je was negotiating prices for his elderly Taiwanese patients at a Mainland transplant hospital.
• The Chinese transplant doctors said Ko's clinic would get the "family price" and his patients would receive good quality because "all the organs will come from Falun Gong."
• A few years later, running for mayor of Taipei, Ko panicked, saying that I had confused him with another doctor.
• No. This photograph was supplied by Dr. Ko for my book. I'm happy to forward a pdf of the Mandarin edition where Dr. Ko's correspondence – he signed off on the exact story - is reproduced in full.

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One more, not in my book.
• Met "Cat" six weeks ago in Tokyo.
• Cat was a Yakuza attending to his chieftain in the Armed Police Hospital, Beijing.
• While waiting for his Chieftain's liver to stabilize, Cat wandered into a room where a man lay, restrained and sedated. Wrist and ankle tendons severed.
• Cat asked the director of surgery who the man was.
• That's the liver donor.
• Who is he?
• A terrorist.
• What kind of terrorist?
• Falun Gong.
• As a Yakuza, Cat didn't really care. Cat left the Yakuza, and now he has come out with a credible story.

Slide 32
Fifth: It never ended.
In 2013, this Falun Gong practitioner was given organ-examinations with 500 others on a single day.

Slide 33(Chinese Spokesperson: Huang Jiefu)
Beijing's answer to these allegations was to employ a semantic trick: We will reform. We will end the routine organ harvesting of prisoners.
• And there's some evidence that China lowered the rate of prisoner execution. Yet Beijing's definition of "prisoners" never actually included Falun Gong, Tibetans, House Christians, or Uyghurs.
• So, in 2015, when the Chinese leadership announced an end to the exploitation of death-row prisoner organs, some Western physicians accepted an invitation to do a victory lap tour of Chinese transplant hospitals.
• Yet one member of The Transplantation Society ethics committee, Dr. Jacob Lavee of Israel, an Israeli heart transplant surgeon, and a member of the ISHLT Ethics Committee, criticized the decision: "As a son of a Holocaust survivor, I feel obliged to not repeat the dreadful mistake made by the International Red Cross visit to the Theresienstadt Nazi concentration camp in 1944, in which it was reported to be a pleasant recreation camp."

Slide 34（An Update）
One year later, our 2016 report using individual hospital numbers and specifications, made a compelling case that the annual number of transplanted organs in China was not 10,000 per year, but 60,000, at minimum.

Slide 35 (Map of China indicating institutions associated with transplantation)
Although 865 institutions associated with transplantation were identified, we did not make any claims as to number or rate of harvesting needed to produce this result.

Slide 36（A Table from An Update）
The report is 700 pages with over 2000 endnotes, 90% referencing Mainland sources.

Slide 37(Chinese Family)
In response, Beijing claimed that any shortfalls in transplant volume was being filled by China's new voluntary donation program.

Slide 38(Research paper:Analysis of Official Deceased Organ Donation Data casts doubt on the Credibility of China's Organ Transplant Reform)
Two years later there was a powerful discovery by Dr. Jacob Lavee, Victims of Communism Fellow Matthew Robertson, and statistician Raymond Hinde.

Slide 39 (Chinese Official Donor Registry Date fitted to a Quadratic Model)
Beijing's charts showing exponential growth in Chinese citizens offering voluntary organ donations – the new, reformed system of organ procurement - was constructed, not on accurately reported data, but on a relatively simple equation.
・The central pillar of Beijing's reform was a lie.

Slide 40(Research Paper: Execution by Organ Procurement Breaching the Dead Donor Rule in China)
Last year, extensive data analysis of the Chinese transplant world by Dr. Jacob Lavee and Matthew Robertson established - definitively - that in China, death by heart extraction was the normal procedure for the "donor," rather than the exception.

Slide 41(Map from the Research Paper)
This map identifies a national pattern of problematic brain death declarations.

Slide 42(Doctors carrying the boxes)
Live organ harvesting had come of age. These were the new executioners.

Slide 43 (Cover Page of "China Tribunal-Judgement")
One last book.
・The result of several years of research, and both Falun Gong and Uyghur witnesses, the China Tribunal Judgement is the most comprehensive study on Chinese forced organ harvesting at this time.
・Quoting from the Tribunal judgement: "The Tribunal's members are

certain - unanimously, and sure beyond reasonable doubt - that in China forced organ harvesting from prisoners of conscience has been practiced for a substantial period of time involving a very substantial number of victims."

Slide 44 (Residential Houses)
Now I'll move to the Uyghurs.
• To understand what happened, we need to scroll back to 2103.
• In six Chinese provinces, policemen entered Falun Gong homes to administer a blood test and a DNA cheek swab, the brass ring combination for tissue typing - a potential clue that the Falun Gong organ supply was running thin.

Slide 45 (People lining up)
One year later, the Party ordered every Uyghur above the age of 12 – that's approximately ten million people - to get a "health check" with a mandatory blood and DNA test.
• Han Chinese were exempt from the requirement.
• None of the refugees I spoke to was given follow-up medical treatment or received any medical communication.
• These pictures were smuggled out.

Slide 46 (Map of Internment Camps)
By the end of 2016, the incarceration of Uyghurs, Kazakhs, and other Turkic minorities, according to State Department estimates, was 800,000 to three million.
• This is a conservative depiction of the internment camps in 2017 by the National Geospatial-Intelligence Agency.

Slide 47 (Uyghur prisoners)
As the camp system matured, we received glimpses of prisoner movements.
• And we intercepted an order to construct nine major crematoriums in Xinjiang.
• The first crematorium, in Urumqi, placed an ad in a Chinese newspaper for 50 security guards. Salary: $1,200 a month.

Slide 48 ("Aksu Triangle")
Let's look at one crematorium in Aksu.

Slide 49 (Photo showing the three facilities)
• two "re-education" camps, one for 16,000 people and one for 33,000 people,
• a camp for 33,000 people built around a pre-existing hospital (Aksu Infection Hospital).
• and 900 meters from both camps, a large crematorium.

Slide 50 (Camp 33/Aksu Infection Hospital)
A close-up of the original hospital facility, outlined in red, the camp constructed around it.
• A Uyghur veteran of the Aksu prison system told me: "Aksu Infection Hospital was originally used for SARS virus patients."
• In 2013, the hospital evolved into a treatment center for "religious" or "extreme Muslim" dissidents.
• Taped phone calls affirm the hospital performs organ extractions

and transplants.

Slide 51 (Crematorium)
The crematorium was also familiar to the prison witness: “The air smells like scorched bones.”
• Another Uyghur male from the Aksu area, drove by the crematorium every day, and confirmed a strong noxious odor.
• The waste pipes leading to the river suggests that the crematorium uses a burn method:
  - intense heat,
  - filtration,
  - and to keep smoke at a minimum, a “re-burner.”

Slide 52 (Aksu International Airport)
“Aksu International Airport” - less than a 30-minute drive from the hospital.

Slide 53 (Human Organ Transport Channel)
The airport has a “Human Organ Transport Channel”” – essentially a fast-lane for human organ export to transplant hospitals near the Chinese coast.
• All Xinjiang “Green Passages” are one way, export only.

Slide 54 (First Hospital, Zhejiang Province)
One probable end user – First Hospital in the Shanghai region is an official “big brother” to Aksu Infection Hospital.
• Beginning in 2017, first hospital’s liver transplants increased by 90% while kidney transplants increased by over 200%.

Slide 55 (Medical Staff just completed operation)
First Hospital successfully performed the first double lung transplant on a Covid patient -- an advertisement to the world that even during the pandemic, China was open for business.

Slide 56 (Sayragul)
I’ll close my Uyghur findings with refugee testimony.
• Sayragul taught Chinese in a camp. She escaped, was held by the Kazakh authorities, and I finally interviewed her in Sweden.
• Following a camp-wide “health check” – they held them every two months – a list with the blood results would be stapled on the wall in the “faculty lounge”
• Some of the names had a pink check mark. These people would disappear at night – Sayragul believed they were selected for harvesting.

Slide 57 (Gulbahar)
In Turkey I interviewed “Gulbahar.”
• Following the blood tests, she noticed certain prisoners wearing pink wrist bracelets before they went missing.
• Other refugees described pink or orange vests.

Slide 58 (Monitor room with lots of cameras)
The only way to get some sense of scale was to interview recent camp refugees.
• Yet the lion’s share of camp refugees were in Kazakhstan.

• Most of them had family members in the camps.
• The refugees needed to stay anonymous, so I needed to get into Kazakhstan without being followed.

Slide 59 (Ethan in Kazakhstan)
I drove to Kazakhstan with my foster daughter using a 2003 vehicle – that means no traceable electronics – a map, and a compass.

Slide 60(Ethan in Kazakhstan)
Here's what I found:
• There are two kinds of people who leave the camp early: The first are young, about 18 years old on average. The announcement that they are going to work at a factory out east is usually made during lunch. Light applause is encouraged.
• The second group is aged between 25 to 35.
• The average age is usually 28 – the age that the Chinese medical establishment prefers for harvesting.
• These people are taken in the middle of the night.
• No applause. Once gone, any reference to their previous existence was dangerous.

Slide 61(Ethan in Kazakhstan)
•My witnesses – from about twenty different camps - were surprisingly consistent:
• 2.5% to 5% of the camp go missing exactly this way every year.

Slide 62(A family)
•I don't have a plausible alternate explanation.
• Assuming there are one million in the camps, my estimate is that 25,000 to 50,000 Uyghurs are being harvested for their organs every year.
• I'm going to close with policy.

Slide 63 (At the hearing with Delmonico)
Think back to where we were in 2016 – ostensibly on the same side, but in a position of stalemate. At this Foreign Affairs hearing, every congressman in the room knew that the Western transplant community's attempt at a "soft reform" of the Chinese transplant industry had stalled.

The Congressmen didn't know much about transplants, but they knew something about the Chinese Communist Party. So, congress put Dr. Francis Delmonico on the "hot seat" - but Resolution 343, "regarding persistent and credible reports of systematic state-sanctioned organ harvesting," never made it onto the Senate Floor. Capitol Hill understood the Western medical consensus was to avoid conflict with China.

Let's move to the present. Some of you may not have been aware of the Uyghur disappearances. But everyone here is aware that Beijing has been doing something to the Uyghurs. You may not have made up your mind about the origins of Covid. Yet would anyone say that Beijing never lied about Covid?

The Western medical community did not break the "engagement" consensus. Beijing did.

Slide 64 (Part of the Statement of ISHL)
So, when ISHLT banned Chinese transplant publication in 2022, it was a flare in the Capitol Hill night sky.

The House recently voted for the Stop Organ Harvesting Act of 2023, 413 to 2.

In essence, the act prevents Chinese transplant doctors from entering the US as if everything was normal.

It exposes their associates around the world. Finally, the act calls for a major effort to gather information on the Chinese transplant system.

So, while the ISHLT is aware of some efforts to reform the Chinese organ donation system and establish it on legitimate brain-dead consenting donors, I think it's fair to say until the ISHLT or affiliates gets an unrestricted chance to examine the system independently, on the ground, there is no basis to lift the academic boycott started by ISHLT or the legal actions detailed in the House Stop Organ Harvesting act of 2023.

Slide 65 (Concluding Remarks)
In short, ISHLT stood up. And now you have the whip hand.
• Yet I'm going to make a prediction here; in the very near future, you will encounter a solution to the China problem.
• Not unrestricted access on the ground - the Party can't do that – but "smart health care": a world where AI will connect all medical devices globally from transplant robotics to ECMO in full transparency - a "democratization of data."
• No statistician necessary; AI will pick up any suspicious anomalies.
• But can Beijing alter the input data? Can China's AI outsmart our AI? Well, yes, they can.
• And there's that history problem. Perhaps Beijing should investigate? Offer apologies and compensation? Or does medical history really not matter that much?
• And can we trust a repeat offender?
• One last slide.

Slide 66(Mother and daughter)
• Maybe precedent can shed some light. As I said, my father was a psychologist, so even as a boy, I knew the World Psychiatric Association denounced Soviet psychiatric hospitals for torturing political dissidents.
• Soviet psychoanalysts were not welcome at Western conferences. They couldn't publish in our journals. No joint development of psychoactive drugs.
• That never changed. Not even during the Gorbachev years.
• Yet the irony is that through Lavee and Robertson's research, we know far more about what takes place in Chinese transplant hospitals than we ever knew about the Soviet psychiatric hospitals.
• With the whip hand comes responsibility. Not to the good surgeons of China (of which there are many), not to Beijing's engagement with the world, not to the feelings of the Chinese people.
• The first responsibility is to this camp refugee and her daughter.

Slide 67

• I pledge that I'll always be candid about what we know and what we don't know.
• And it would be an honor to work with you going forward.
• That concludes my remarks. Thank you.