

**STATEMENT OF FRANCIS L. DELMONICO, M.D, PROFESSOR OF  
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Dr. DELMONICO. Thank, Mr. Chairman, for the opportunity to make these comments.

I would like you both to know that I agree with the other individuals that are making testimony today. The use of organs from the executed prisoners is condemnable. It is a reprehensible practice.

It is a disgraceful practice because of the corruption. It is a corruption intended to acquire money and not provide care.

I want to share with you an anecdote that is illustrative and I would like to say to both of you that I have been to 70 countries around this world in the last decade to combat organ trafficking.

In a visit to Riyadh, Saudi Arabia, the physician who is sitting next to me at dinner tells me of this incident—the mother of a 14-year-old—14-year-old—who undergoes a kidney transplant in Tianjin, China and returns home to Saudi Arabia and ill within days of the transplant.

This patient undergoes a biopsy of the kidney because the kidney is not working, to discover that the kidney is scarred. It is obsolescent. It is not going to function. It never can function, and it has been at that time removed from an individual that is an executed prisoner.

This patient, Mr. Chairman, then develops a viral infection, this 14-year-old, and that infection should have been prevented by medicines that should have been administered at the time of the transplant. And the end of the story is that she dies. It cost the mother \$200,000 in cash for her child to die.

That is why I am in the midst of this issue of organ trafficking as a professional not to enable that to happen not only in China but anyplace else in this world.

So it becomes a very corrupt practice by the chain from the prison to the patient ward. But I think you both have to know that it is not just from within China.

Patients from the United States and Israel and Canada and yes, I know Mr. Gutmann is talking about J. Levee, who is a good friend of mine, and I know what the Israelis have done to prevent Israelis from going to other locations in this world. But it has been there and it has been from Saudi Arabia and Canada and Japan that patients go into China.

That practice is now stopping. Over the course of this last decade I have gotten to know someone within China that you know in the media—Jiefu Huang—and I want to say to you that from my perspective he's a courageous leader because change is occurring in China.

And I know of this by Mr. Gutmann's comment. I have been to many cities now within China and been with the younger people who are doing the transplants and their future is not to use organs from the executed because the transplantation community of the world will not let them make presentations about those data and they, in their interest to propel their careers, are coming away from that practice.

They are no longer using that organ source, and the alternative of having deceased donors within the intensive care units is becoming the source of organ donors.

I know of this as well because of the risk that has been personal risk to Jiefu Huang to stay within China and make for that change to occur. I know of that personal risk as well for his mentee, his young leader that he has mentored who was under house arrest for months, that we weren't able to reach him.

He's a member of the same committee that Mr. Gutmann is talking about. Jay Levee is in that committee of the Transplantation Society. Jiefu Huang is a member of that committee. We couldn't have at him for months.

But the practice is now changing and he was released. It was also through an effort that we wrote to President Xi Jinping an open letter that was published in the medical literature to call upon China to stop the corrupt practice.

So I am with the presenters to say to you we agree completely on this being a condemnable practice. But it is my responsibility and the leadership of the international transplant community to go there and try and make change, and we are trying to do that.

And so in my visits and having patient contact, being in the wards to see what's going on, I can say to you that that experience is not with the use of executed prisoners any longer and I have some then hope and optimism that the practice will come about to stop and change.

Can I assure you that it is completely eradicated? No, I can't. But that is not my job here to make that assurance to you. My job is to say to you that the international community does not accept that practice.

The international community must work with its Chinese colleagues to change that practice and that is what has been our objective.

And to make this system of organ donation and transplantation in China consistent with the guiding principles of the World Health Organization that yours truly helped to write and develop, and with the Declaration of Istanbul.

Again, as you've mentioned, Mr. Chairman, the practice of organ trafficking is not isolated to China. You can read last week of the revelation in India and I can tell you about it in Egypt and in the Philippines and in other locations of the world.

So I would agree with Dr. Matas about his request for China to consider extraterritorial jurisdiction about the crime of organ trafficking that has now been made plain, clear as a money transaction by the Council of Europe.

We need to help the State Department to organize its TIP report—its annual report on the trafficking of human persons. We need to make certain that the organ trafficking component is made in that edition as well.

And lastly, I wish to say that if Congress wants to stop—combat organ trafficking, it can sustain a resolve not to permit organ sales in the United States.

So thank you for the opportunity to make these comments. I look forward to your questions and to elaborate further upon what has been a decade of experience in this issue.

[The prepared statement of Dr. Delmonico follows:]

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Thank you for the opportunity to provide this testimony to the Subcommittee on Global Human Rights, particularly focusing upon the allegation "that China is engaged in the theft of organs on a large scale".

Please know that I agree with the other individuals who have been asked to testify that the use of organs from the executed prisoner is a condemnable and reprehensible practice, whether in China or has been proposed in Utah.

It became a disgraceful practice in China because of the corruption--- a corruption intended to acquire money but certainly not to provide care. Permit me to share an anecdote that is illustrative. I have visited more than 70 countries in this world with a goal of combating organ trafficking. In one such visit to Riyadh, Saudi Arabia, the physician sitting next to me at dinner told me of this incident: the mother of a 14-year-old girl who underwent a kidney transplant in Tianjin, China, and return home to Saudi Arabia ill. This patient underwent a biopsy of a kidney transplant to discover the kidney was obsolescent, scarred, certainly not suitable for transplantation. It had been obtained from an executed prisoner. This patient subsequently developed a viral infection that should've been prophylactically treated at the time of the transplant in China. This 14-year-old girl died within weeks of her transplant because of that derelict care, it cost the mother \$200,000 for her daughter to die.

It became corrupt with everyone in the chain of the activity from the prison to the patient ward--- it became corrupt by soliciting patients from the United States from Israel from Saudi Arabia, from Egypt, from Canada from anywhere to entice desperate individuals with money.

Meanwhile, over the course of the past decade, a courageous leader in China Jiefu Huang has been the principal ally to change this outrageous practice.

Whether --as contended by others making testimony at this hearing--he may have sanctioned the practice of recovering organs from executed prisoners-- rationalizing that such prisoners should have the option of remedying at the time of death, the offense that rendered capital punishment-- there should be no setting aside the leadership of Jiefu Huang in changing China.

I know this change ---by the personal risk that he and his mentee Haibo Wang have suffered. Haibo was placed under house arrest for months because of his alliance with the international community to change this practice.

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In 2006, more than 11,000 transplants were performed in China on foreign patients. This year, in 2016, we are anticipating more than 4000 deceased donors with organs recovered from such donors hospitalized in the intensive care units in China with none designated for foreign patients.

I know this from a correspondence to President Xi Jinping of China enabled by Jiefu Huang and published in the medical literature that focused upon "China's Fight against Corruption in Organ Transplantation".

Following that correspondence, the State Council of China ruled that as of January 2015 use of organs from executed prisoners would be prohibited.

I know this from multiple visits to China developing an infrastructure that will enable change.

We are underway with a different China. Is it completely resolved ? No, I cannot make that assurance. But China is implementing in virtually all major cities that authorize organ transplantation-- approximately 170 transplant centers a new protocol. I can assure the members of the Subcommittee that we will continue to work diligently to achieve this goal: that the practice of organ donation and transplantation in China is consistent with Guiding Principles of the World Health Organization and the Declaration of Istanbul.

The unethical practice of organ trafficking and transplant tourism has not been isolated to China. One can readily read in the media of the recent exposure of organ sales in India—by vendors, who are destitute, with nothing but a kidney as a commodity for them to sell.

If this Congress wants to combat organ trafficking in China and in Mexico and in the Philippines and in Egypt and in Pakistan and Vietnam--- we need the help of the State Department to collect data on organ trafficking in its annual report on trafficking in human persons (TIPS).

If this Congress wants to combat organ trafficking it can sustain a resolve not to permit organs for sale in the United States.

I look forward to questions from the committee and again I wish to convey my appreciation for the opportunity to make these comments.

Sincerely yours,

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