

Japanese Flock to China for Organ Transplants

David McNeill, Clifford Coonan

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Income disparities and weak government regulations fuel global trade in ‘transplant tourism.’

By David McNeill and Clifford Coonan

When Hokamura Kenichiro’s kidneys failed, he waited over four years for a transplant before going online to check out rumors of organs for sale.

As a native of Japan, where less than 10 kidney transplants are performed a year, the 62-year-old businessman was desperate. “There are 100 people waiting in this prefecture alone and there were just three operations performed here last year. I would have died before getting a donor.”

He was astonished by just how easy it was. Ten days after contacting a Japanese broker in China in February, he was lying on an operating table in a Shanghai hospital receiving a new kidney. A doctor had only examined him that morning. “It was so fast I was scared,” he says.



A transplant operation in Japan

The “donor” was an executed man, the price 6.8 million yen (about US\$80,000). “It was cheap” [in comparison to the cost of my life], says a recovering Hokamura, now back in Kyushu in southern Japan where he runs a construction-related business. “I can always earn more money.”

Hokamura is one of hundreds of well-off Japanese who have recently made the trip to China for kidney, liver or heart transplants, drawn by the availability of cheap, healthy organs and rapidly improving medical facilities along the east coast of the mainland. The so-called ‘transplant tourism’ trade is also attracting a growing number of Koreans, Americans and other nationals.

There is no attempt to conceal from recipients the origins of the organs, the bulk of which come from prison morgues. “My translator told me my donor was a young executed prisoner,” says Hokamura, who claims he is unconcerned at the possibility that prisoners were being

executed to supply organ brokers. “The donor was able to provide a contribution to society, so what's wrong with that?”

After paying a local broker, many patients arrive in Shanghai and other cities to find gleaming, well equipped hospitals with world-class staff. Rumors of problems with follow-up care and patients dying within one to two years of returning home have failed to stem the tide. “I was surprised at how well everything was run,” says Hokamura. “I was expecting a lot worse.”

The Black Market in Organs

Signs spray-painted on the walls outside clinics and hospitals in many parts of China are simple and direct: a mobile telephone number and the character for shen (kidney) written beside them. Advertisements on bulletin boards and other internet sites also offer kidneys for sale. The sale of organs for transplants is illegal in China, as it is in most countries, but a black market is flourishing. And it's not just the small private hospitals and clinics springing up all over the country - bigger hospitals in Beijing and Shanghai also have ads in toilet cubicles and on ward walls.

“We have to wipe off the notices again and again. They [brokers] even visit doctors, make numerous calls or write letters again and again,” Prof Ding Qiang, head of urology at Huashan Hospital in Shanghai's Fudan University, recently told the media. “Such donations are surely organ trading, but ‘organ donation’ for money is strictly banned in China.”

There is little confirmed information about how the organs are harvested but doctors have given accounts of driving to execution grounds with specially equipped ambulances carrying nurses and containers for the organs. The body is picked up and carried by ambulance to a hospital where the organs are stripped.

Although Beijing does not reveal how many people are executed annually, Amnesty International put the figure at 3,400 in a 2004 survey, the world's highest figure. Some analysts reckon it may be as high as 8,000.

Executions in China are generally carried out by a bullet to the back of the head, or in the heart. However, the introduction of the lethal injection in the last decade means that more organs are left intact and advances in immunosuppressant drugs have reduced the need for exact genetic matches.

China only admitted very recently that the organs of executed prisoners were sold to foreigners for transplants. Huang Jiefu, deputy health minister, told *Caijing* magazine that the government was keen to standardize the management of the supply of organs from executed prisoners.

A key issue despite new legislation is how much control prisoners have over whether to donate their organs. Since the 1980s, government regulations have required the consent of prisoners or their families. The Chinese government says that all condemned prisoners who agree to donate their organs after their deaths do so of their own will and in some cases their families are paid, but many are skeptical of such claims. Human rights organizations accuse authorities in China of scheduling executions to coincide with transplant operations and some families have sued the authorities for using the organs of executed relatives without consent.

In March this year, Beijing announced new transplant regulations following highly critical reports in several foreign newspapers and the deaths of at least eight Japanese donor recipients after operations in Chinese hospitals; patients from Malaysia, Canada and the US have also reportedly died following botched transplants. From July, donors will have to provide written permission and transplants must be carried out in government-sanctioned

hospitals.

Foreign Ministry spokesman Qin Gang denied that executed prisoners were the source of most of the organs, or that they were removed without consent. “It is a complete fabrication....to say that China forcibly takes organs from people given the death penalty for the purpose of transplanting them,” he said. “China has rigorous laws and regulations. Donors, recipients and hospitals must all firmly follow laws and regulations in this area.”

Mystery remains about the organ route from prison morgue to operating theatre but little doubt that money helps lubricate the way in a country where foreign patients jump to the head of the queue despite a local transplant waiting list of more than two million people. Tracing this route, and regulating private clinics and small hospitals is especially difficult.

Professor Chen Zhonghua, a transplant specialist at Tongji Hospital in Wuhan, who was a government consultant in the drafting of the new regulations, told the South China Morning Post in March that they failed to properly address the origins of organs in the “messy and disordered” transplant market.

A single broker has helped more than 100 Japanese make the trip to China for transplants since 2004 and the trade is growing. A survey published in March 2006 by the Japanese health ministry said that 453 Japanese had transplants of the heart, liver or kidney abroad, with the US, Australia and China topping the list of destinations. Official figures almost surely underestimate the number of people availing themselves of the service, many of whom fly beneath the government radar.

The experience of Hokamura and other recipients points to a growing underground market in human organs across the world, fuelled by income disparities, relaxed border controls and ineffective central government

control. With medical facilities improving in urban pockets of the Third World, wealthy, ill people have a powerful incentive to board a plane to India, the Philippines, Peru and China, where cash often speaks louder than whatever weak regulations exist.

According to the New England Journal of Medicine, a human kidney can be purchased in Manila for US\$1,000-2,000 and ‘In urban Latin America for more than \$10,000.’ The Voluntary Health Association of India claims that about 2,000 Indians sell a kidney every year. Over 1,000 rich residents of the Arab Gulf States have traveled to India and other countries for transplants; wealthy Israelis go to Egypt, Bulgaria and Turkey and Americans – about 200-300 a year – go to China, the Philippines and South America.

The ethics of paying for human organs are often trumped by the prospect of a few more years of life. Hokamura says his family is so pleased his daughter has put his experience on the internet. In her blog she says she feels sorry for others to have to wait years for transplants and provides a link to a support centre in Shenyang. “Other people should know about this.”

But not everybody is as enthusiastic. “I can understand the self-interested motives but I personally wouldn’t do it,” says Louis Carlet, a long-time resident of Tokyo who has been on kidney dialysis since November. “I highly doubt that executed prisoners give their consent. If it was totally consensual I might think about it, but the fact that there is profit involved turns me off.”

Organ Transplants in Japan

Many patients in Japan are bitter about the underdeveloped state of transplant health in a country that has seen less than 50 cases of donated organs since the revised 1997 Organ Transplant Law. “Doctors in Japan are happy

with their patients being on dialysis because it is profitable," claims Hokamura. "They get 5.1 million yen a year to treat people like me."

According to health ministry statistics, there have been a total of 998 kidney transplants in Japan but the bulk of these -- 800 -- have been from living persons. The rest are from people who died of brain death or whose heart stopped. A single death can on average now save 10 people, but there are still far too few donors and with 12,000 patients waiting for matching donors, according to the Japan Organ Transplant Network, the government is again preparing to revise the law.

Meanwhile, increasing numbers of Japanese are turning to China. Sources say the cost of a kidney transplant in China runs to US\$66,500 and a liver up to US\$157,000. A Taiwanese broker called Yeson Healthcare Service Network recently told the Japan Times that a heart transplant at the Zhongshan Hospital in Shanghai can be had for as little as US\$119,000, a fraction of the US\$860,000 such an operation would cost in North America.

Hokamura negotiated the deal through a Japanese broker in Shenyang that operates under the name of the China International Organ Transplant Center which maintains a professional website with detailed information about their services for donors in English, Japanese, Korean and Russian. The website, <http://en.zoukiishoku.com/list/link.htm> (accessed April 2, 2006) provides the following information on the sources of organs: If you send your personal data to this center by e-mail or fax and accept the necessary body examination in Shenyang, China in order to assure a suitable donor, it may take only one month to receive a liver transplantation, the maximum waiting time being two months. As for the kidney transplantation, it may take one week to find a suitable donor, the maximum time being one month. Although the procedure to select a donor is very strict, the transplant

operation will be terminated if the doctor discovers that there is something wrong with the donor's organ." The source of the organs, however, is not specified.

Calls to the center were answered by a Japanese-speaking Chinese secretary who handed them over to a man identifying himself as Dr. Mitamura. "We cannot talk to the press because media attention last year caused a lot of problems," he said. The centre has attracted a growing number of Japanese media organizations and was recently filmed by a network TV crew.

Dr. Mitamura said his colleagues would discuss money only after a return address and telephone number in Japan was provided.

Several Japanese groups have traveled to China to investigate the trade, including the Japan Transplant Recipients Organization, an NPO that lobbies for legal changes to increase the number of donors. "We do not approve of receiving organs from executed prisoners, but personally I can't simply disapprove of it," says chairman, Suzuki Masanori. "There are just too few donors in Japan."

Last May, Suzuki visited a hospital in a 'major city' (he declines to specify which city) and learned that 95 per cent of its transplant patients had received organs from executed prisoners. The hospital had conducted 2,000 organ transplants last year alone, Suzuki said. Some 30 or 40 were Japanese and 200 were Korean. "For many patients, this is their last chance."

The Japanese health ministry has begun a joint research project with transport authorities in an effort to get a handle on the trade. But the government is likely to find it difficult to stop desperate people who have money from making the short plane hop to China. As Hokamura says: "I was on dialysis for four years. I was tired of waiting."



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