PROLOGUE: THE ROSENBAUM CASE

IN JULY 2009, NEW JERSEY FBI AGENTS ARRESTED A BROOKLYN organs trafficker, an orthodox rabbi, Levy Isaac Rosenbaum, whose unorthodox business activities I had uncovered several years earlier. I learned about Rosenbaum in 1998 when, as Director of the Berkeley Organs Watch project, I began to investigate an international network of outlaw transplant surgeons, their brokers, lawyers, kidney hunters, insurance and travel agents, safe house operators to house and hide trafficked kidney sellers, and “babysitters” to mind sick and anxious international “transplant tourists” (Mozgovaya 2009; Correspondent 2009; Daly 2009). The particular criminal network in which Rosenbaum played a bit part originated in Israel through dozens of loosely organized “companies.” However, none was so extensive as the one run by a well-known crime boss, Ilan Peri, who over the years established shady transplant outlets in some of the world’s best medical centers, public and private, in Turkey, Russia, Georgia, Germany, South Africa, the Philippines, China, Kosovo, Azerbaijan, Columbia, and the United States. The key was to convince kidney patients in Israel and Jewish patients from elsewhere with close ties to Israel that it was safe to
travel to an undisclosed location in another part of the world where they would be transplanted, illicitly, with “fresh” kidneys procured by trafficked living donors (Scheper-Hughes 2000, 2004, 2006a). The organ transfers would take place at the hands of outlaw surgeons who were described as “Robin Hoods” by the organ recipients (Senal 2004) and as Dr. Frankensteins or Dr. Vulture by the trafficked kidney sellers (Jimenez and Scheper-Hughes 2002). In Israel, various religious, patients’ rights, and “humanitarian” organizations targeted new immigrants, temporary migrant workers, Arab Israelis, and other vulnerable communities to provide the kidneys. One powerful religious organization, Kav LaChayim (United Life Line), registered as a charity and raised, transferred, and sometimes laundered the money needed to finance these expensive ($180,000) international surgeries.

In its heyday (1997–2007), the Israeli transplant tourism/organs trafficking network supplied a few thousand Israeli patients and diasporic Jews worldwide with the “fresh” organs and transplants they needed. It was not an easy proposition. The transplant candidates had to be ready to travel to wherever their brokers and their complicit surgeons indicated, and where they would be “introduced” and “matched” to strangers who would provide them, for a cash payment arranged by the broker, with the organ they needed. The haphazardly matched strangers had to pretend that they were sharing organs as a “gift” among kin and close friends. They had to sign documents stating that no money had changed hands. The surgeons had to pretend to believe that the strangers presenting themselves as intimates were altruistically related. It made liars of everyone.

Rosenbaum was the go-to broker for illicit transplants in New York City, New Jersey, Philadelphia, Maryland, and Washington, D.C. Memorably describing himself at his arraignment as a simple, home-spun “matchmaker,” Rosenbaum ran a lucrative organ trafficking businesses with an office in Borough Park, Brooklyn. He employed a secretary/receptionist, an outreach worker, and a rabbinical seminarian who managed medical records, insurance reimbursements, Medicare applications and all the financial accounting. The Brooklyn seminar-
ian contacted Organs Watch for help in extracting himself from the “kidney mess.” We agreed to meet in New York City just before he decided to quit and go into hiding.

Rosenbaum also employed an assistant (also an orthodox man of the cloth) to set up shady transplant and hospital arrangements in the Philadelphia area. Rabbi T (the Philadelphia transplant fixer) was well known and well received at Albert Einstein Hospital, where he set up dozens of illicit transplants with paid and trafficked donors (including Ukrainians and Mondovans and new Israeli immigrants) to take care of Rosenbaum’s overflow. This man, and the medical records clerk in Rosenbaum’s Brooklyn office, provided me with information (and at times with their doubts and moral scruples about the work they’d gotten themselves into) beginning in 2002; the information was corroborated by interviews with Israeli transplant tourists who took advantage of the US option.

Attempts to alert US Congress, the American Transplant Society, the health commissioner of New York City, the legal counsel to the secretary of Health and Human Services, the UNOS (United Network for Organ Sharing) ethics board, and finally, the New York FBI fell on deaf ears. I was told that the information lacked credibility (Scheper-Hughes 2001). How could transplant patients and kidney sellers from different countries, sometimes different races and languages, be smuggled into prestigious public, academic, and private hospitals in the United States for illegal transplants? How could they get through the red tape required for any transplant operation? It sounded like an Internet rumor, a joke, an urban legend, or (more ominously) a blood libel against Jews and Israel.

Organ trafficking was an invisible, perhaps even a protected, crime. The global trafficking scheme was as ingenious as it was mobile (Scheper-Hughes 2008a). When local police cracked down on traffickers (“kidney hunters”) in one area—Moldova and Romania in 2002, Brazil and South Africa in 2003, Turkey in 2007, Kosovo in 2008—the scheme moved its operations elsewhere, to China, the Philippines, Colombia, and Azerbaijan. Caught up in the angle of these police stings were
kidney buyers and sellers, surgeons, insurance and travel agents, hospital administrators, blood technicians, translators, and hoteliers.

Beginning in 2003, the political climate changed and police stings resulted in arrests and prosecutions in Turkey, Moldova, Ukraine, Brazil, South Africa and, most recently, in Kosovo. In 2007, a police sting took place amid an exchange of gunfire in the operating rooms of a private hospital in Istanbul, where two notorious transplant outlaws linked to the Israeli trafficking underworld, Dr. Zaki Shapira of Israel and his Turkish partner, Dr. Yusuf Sonmez, were about to begin a double surgery (a nephrectomy and transplant) (Haaretz News Service 2007). The violent scene, captured by Turkish TV, gave pause to the Israeli Ministry of Health, which, until then, had permitted Israeli sick funds (medical insurance) to reimburse overseas transplants with living donors, the majority of whom were trafficked from former Soviet Union countries in Eastern Europe. However, the kidney sellers captured in the Turkish shoot-out were both Palestinians, Omar Abu Gaber, age 42, and Zaheda Mahammid, age 26. The transplant patients were a 68-year-old Israeli, Zeev Vigdor, and a younger South African, John Richard Halford, both filmed on Turkish nightly news being carried out of the operating room on stretchers and taken to another hospital before being returned home, safe but without the new kidney each had risked everything to obtain.

Almost simultaneously, the South African government demanded the extradition of Ilan Peri, who was wanted for his key role in setting up 102 illegal transplants at a Netcare clinic in Durban (The State v. Netcare Kwa–Zulu (Pty) Limited). (Netcare clinics in Cape Town and Johannesburg were also involved in the larger scheme but were not yet indicted). Peri took flight and was arrested in transit and imprisoned in Germany for several months before being released and returned to Israel, where he was investigated, along with Zaki Shapira, for tax fraud, briefly detained, and released on the grounds that Israeli transplant laws did not include sanctions for “brokering” overseas transplants with paid living organ suppliers (Israeli Tax Office, Pers. comm.). To correct this oversight, in 2008 the Knesset passed two new laws: one that paved the way for applying brain death criteria that would satisfy the ultra-
orthodox, and the other a revised transplant law that prohibits buying, selling, and brokering organs for transplant (Israel Ministry of Health). Today, Israel no longer reimburses overseas transplants unless they are legal in the countries where they take place. Israeli brokers continue to organize transplant tours, using questionably obtained donor organs in China, Colombia, and Azerbaijan. The medical outcomes involve significant risks to the recipients (and their donors) (Rather 2009). For the present, however, New York City, Philadelphia, and Los Angeles are no longer favored sites for transplant tourists.

With Rosenbaum’s arrest, the US media was suddenly interested in the Israeli–based transplant trafficking scheme. The US Department of Justice and the FBI now are developing special units on organs trafficking. The offenses range from violating NOTA, the National Organ Transplant Act, to fraud, deception, bribery, money laundering, organized crime, and human trafficking. The Rosenbaum case, still in preparation, will be the first prosecution in the United States of crimes related to organs trafficking (*America v. Levy Izhak Rosenbaum*). If a plea bargain is offered, the full story of Rosenbaum’s involvements in international organized crime will not come to light.

**THE SWEDISH BLOOD LIBEL STORY**

In August 2009, another organs trafficking story broke—one that linked the Rosenbaum story with much older allegations of organ and tissue theft from the bodies of Palestinian “terrorists” and stone throwers at Israel’s National Forensic Institute in Abu Kabir, a neighborhood of Tel Aviv. These allegations, which dated back to the early 1990s, were recycled by a Swedish journalist, Donald Boström, in a left–leaning Swedish tabloid, *Aftonbladet*, on August 17, 2009. Boström’s story, “Our Sons Plundered for Their Organs,” was a heady and explosive mix of accusations of organ theft from the dead bodies of the enemy, coincidental connections to the Rosenbaum trafficking network in New York, and a heavy dash of political rhetoric. The tissue theft information was based on Boström’s earlier research in Israel and the occupied territories during the first intifada (uprising), which was published in his 2001
book, *Inshallah*, in which he presented allegations by Palestinian families of body tampering and organ and tissue theft of their loved ones brought for autopsy to the Abu Kabir Forensic Institute.

Boström’s article was accompanied by a montage of photos—a doleful and handcuffed Rabbi Rosenbaum next to photos of young Palestinians throwing stones and bottles at Israeli soldiers in the West Bank, and a ghastly image of the mangled corpse of a 19-year-old “terrorist,” Bilel Achmed, who was killed by Israeli soldiers in 1992 close to the end of the first *intifada* (1987–1993). Boström reported that observers last saw Bilel barely alive, being loaded into an army jeep and transferred to a military helicopter. Several days later his body was returned to his family tightly wrapped in hospital sheets and crudely stitched from the neck down.

Bilal’s family and villagers throughout Gaza and the West Bank told Boström what they believed—that their sons were being used surreptitiously as involuntary providers of tissues and organs to the Israeli government. Some believed that their sons were actually being killed for their organs, a fear that occurs often enough to poor and politically disfranchised people whenever mortally injured persons are carried away by officials and later returned dead and their bodies harvested. Similar fears are recounted in Brazilian shantytowns and in South African townships and squatter camps during the anti-apartheid struggle (Scheper-Hughes 2002).

Boström concluded that Palestinian bodies were being harvested as the “spoils of war.” He noted a failed campaign launched by the Israeli minister of health in 1992 to register Israelis as organs donors at death. The acute shortage of transplantable organs and tissues in Israel explained the motive: illicit tissue and organ harvesting at Abu Kabir was the Israeli state’s ghoulish solution to a severe “organs shortage.” Israeli patients needed corneas, kidneys, skin, and these were being secretly harvested from the bodies of terrorist-enemy combatants:

We know that Israel has a great need for organs, that there is a vast and illegal trade of organs which has been running
for many years now, that the authorities are aware of it and that doctors in managing positions at the big hospitals participate, as well as civil servants at various levels. We also know that young Palestinian men disappeared, that they were brought back after five days, at night, under tremendous secrecy, stitched back together after having been cut from abdomen to chin. It is time to bring clarity to this macabre business, to shed light on what is going on and what has taken place in the territories occupied by Israel since the intifada began (Boström 2009).

The Aftonbladet story, instantly translated into Hebrew and English, created a firestorm of protest that included a libel lawsuit by anti-defamation lawyers in New York City and a boycott of Swedish industries (Boudreaux 2009). Boström was labeled an anti-Semite and the story that he “dredged up from the sewer” was called a despicable blood libel against Israel and the world’s Jews. Angry protestors bathed matzos in blood in front of the Swedish embassy in Tel Aviv. Prime Minister Binyamin Netanyahu demanded the Swedish government to condemn the article and the newspaper to retract it. Boström told the Jerusalem Post that he had received death threats. Ten thousand Israelis signed a petition calling for a consumers’ boycott on IKEA, Volvo, and Absolut Vodka, among other Swedish–owned industries. Stephen J. Dubner wrote a rebuttal in 2009 in the New York Times blog, “Why the Israeli Organ Harvesting Story is Probably False.”

I read these reports with mounting dread. Like Boström, I was once greeted on a field research trip in Israel in 2003 with an ugly headline and centerfold story in Makor Rishon, a right-wing tabloid: “New Blood Libel on French TV—Israel Steals Kidneys of Orphan Children in Moldova” (Galilee 2003). The story was a savage critique of an hour-long TV documentary by French filmmaker Catherine Bentellier called “Trafic d’Organes.” On site in rural Moldova in December 2001 we interviewed people in villages ravaged by organs traffickers hunting fresh kidneys to supply the Israeli–Turkish transplant scheme. Young men
and boys were being trafficked to Turkey, the Ukraine, and Georgia as paid, sometimes coerced, kidney providers. We also reported on a rumor—then widespread in Moldova—that rural babies were being adopted by foreigners, mostly Americans and Europeans, some of whom were doctors, and were suspected of being used as kidney donors abroad. The article in Makor Rishon accused me of blood libel, and was decorated with medieval woodcuts and a photo of me petting the hand of a Moldovan orphan in his crib:

Once we were accused of butchering Christian children to use their blood for making matzos. Now we are accused of stealing kidneys from Moldovan orphans in order to implant them in the bodies of Israeli children. This wicked libel was telecast on French television in a program on the trafficking of organs for transplant. The producers were helped by Professor Nancy Scheper-Hughes” (Galilee 2003; translation kindly supplied by author, Zeev Galilee)

The article cited a scene filmed in a Moldovan orphanage where I was asked on camera whether there might be any truth to the accusation that babies were being adopted to serve as kidney donors to foreign children. I said there was no evidence to support this accusation, which had caused a rift in US–Moldovan diplomatic relations. When pressed, however, I cited an article published by an Israeli pediatric nephrologist, whom I had also interviewed, stating that among his patients were children (some Jewish, some Palestinian) who had been taken abroad by their parents for commercial transplants. Where and how they got these transplant organs was a mystery, as the families refused to reveal the information to their doctors when they returned to the pediatric transplant clinics for aftercare (Frishberg 1998). That statement was construed as a blood libel.

As for Boström’s “blood libel” against Abu Kabir, the National Forensic Institute, the two essential questions were not raised in the avalanche of articles, editorials, and news columns published in Israel,
Europe, and the United States: first, was the organ theft story true? And second, were there any grounds for linking tissue confiscation from the dead at the Forensic Institute to the organization by brokers (like Rosenbaum) of illicit transplant tours for Israeli patients using living trafficked kidney sellers?

I knew the answer, but I froze. In July 2000, while studying the growth of organized transplant tours run by underworld brokers in Israel, I conducted a formal, audiotaped interview with the director of Israel’s National Forensic Institute, Dr. Jehuda Hiss, at Abu Kabir. In that freewheeling interview Hiss openly discussed the “informal” and illegal procurement of organs and tissues from the bodies of the dead brought to the institute for examination and autopsy. He described a kind of “presumed” consent, one invented by him and shared with no one except his staff and the medical students, residents, and interns he supervised. Hiss pursued a quiet policy of aggressive tissue, bone, skin, and organ harvesting for the greater good of his country and for the good of his countryman. His sense of entitlement was encouraged by the adulation of many Israelis and by the New York Times, who identified Hiss as a national hero because of his extraordinary service in handling bodies killed by terrorists and suicide bombers (Myre 2004). Hiss deemed his own behavior to be patriotic, believing himself to be not so much above the law as representing a much higher law, his law, supremely rational and “scientifically and technically correct.” The country was at war, blood was being spilled every day, soldiers were being burned, and yet Israelis refused to provide tissues and organs needed. So he decided to take matters into his own hands. When he did so he received tacit government approval.

The taped interview was a smoking gun, transparently damning, but I feared the unintended consequences of making it public. The situation was already being corrected through litigation against him. He showed me statistics pointing to a steep decline in organ and tissue harvesting at the institute. I had no reason to disbelieve what he was telling me. Thus, the tape sat, more or less untouched, in my archives for 10 years. Suddenly, however, it was necessary to set the
record straight. Before I did so, I wanted to alert Professor Hiss and give him a chance to explain or modify what he had admitted to in the 2000 interview. Prior to leaving for a research trip in September–October 2009 for a news report on criminal networks built around organs trafficking among Turkey, Moldova, and Israel, I contacted Jehuda Hiss in Israel through one of my several Israeli research assistants to request a follow-up interview (Rather 2009). A private interview in his home was proposed but Hiss (and his lawyers) wanted to review beforehand any questions I wished to raise. Then the Ministry of Health denied Hiss permission to speak with me at all under any circumstances.

To my surprise, while interviewing medical and transplant colleagues in Tel Aviv and Jerusalem about the changes in transplant laws and practices, they often interjected with disparaging references to the “despicable blood libel by the Swedish media,” even though they knew full well—and knew that I knew—that tucked inside Boström’s tabloid story was a real medical and political scandal of international proportions. I understood their nervousness but not their denial of a known fact that was being manipulated into a global political tool of the government.

The public controversy around Professor Hiss began in 1997 with a three-month investigation by Israeli police following a complaint by the parents of a soldier that his body had been harvested after an official autopsy. The police recommended that criminal charges be filed against Hiss. In 1998, a Scottish family charged that Hiss had removed the heart and other body parts from Alexander Sinclair, a tourist who died in Israel. A paid settlement was reached. In 2001 an investigative report published in Yediot Ahronot, a daily newspaper, alleged criminal behavior at Abu Kabir, and the Health Ministry launched an investigation. In 2002, revelations of illegally stored body parts prompted the chair of the Knesset Science Committee to establish an oversight group, The Movement for Quality Government, to recommend in a petition to the High Court of Justice that Hiss be suspended. In 2003 Knesset member (MK) Eicher proposed legislation to ban all autopsies at Abu Kabir unless
a family member was present. A second police investigation ensued. In December 2003 Attorney General Elyakim Rubenstein (now a member of Israel’s Supreme Court) refused to indict Hiss. Nonetheless, a disciplinary complaint was filed against him. A grassroots organization, The Forum for Forensic Institute Victims, protested the “pathological decision” by the attorney general to ignore the findings of the Health Ministry that under Hiss’s authority the institute had been confiscating and using organs freely. In May 2004 Hiss was fired from his position as director of the institute but retained as chief pathologist. Then in 2005 Hiss was charged with the unauthorized removal of body parts from 125 dead bodies, for which he received a reprimand in exchange for a guilty plea (Bergman and Gavra 2000).

Just before returning to the United States, I met with Meira Weiss, a distinguished anthropologist and former professor at Hebrew University, and Dr. Chen Kugel, an independent forensic pathologist and head of the forensic medicine examination board of the Scientific Council of the Israeli Medical Association. Until he was forced out of his position, Kugel worked side by side with his mentor, Jehuda Hiss, at Abu Kabir. Weiss spent several years studying the Forensic Institute with the goal of writing an ethnography about it. Her project was nipped in the bud when in 2005 Weiss was accused by an anonymous American source of “falsifying data” in her book, The Chosen Body: The Politics of the Body in Israeli Society, published the year before (2004) by Stanford University Press. The accusation was sent to the dean of social sciences at Hebrew University, who decided to launch an investigation of the entire corpus of Weiss’s controversial anthropological writings (Watzman 2005). Rather than hand over her field notes and the names of her key informants in her various ethnographic research projects and face an investigation that felt like a witch hunt, Weiss, who was approaching retirement age, decided to resign. She was offered a less “radical” alternative (pers. com.). If she would agree not to publish the book she had begun to write on the Forensic Institute, the investigation would be stopped. Weiss refused the offer but expressed to me her deep ambivalence and conflict. She wanted to remain in Israel; it was her
home. But to do so she needed, at least for the while, to remain silent. Like Camus, who was torn between defending his mother or defending the Algerian revolution, and choosing his mother, Weiss chose her mother country over her role as an anthropologist and by definition a global citizen. To date, her manuscript, “The Fingerprints of the Collectivity: Power and Knowledge in the Israeli National Institute of Forensic Medicine,” remains unpublished. But in a brilliant article to be discussed below, Weiss described the falsification of an autopsy report at the institute during the visit of a foreign observer sent by a human rights organization (Weiss 2007).

Weiss and Dr. Kugel urged me to write a rebuttal to those in Israel “crying wolf” and using the tainted tool of blood libel accusations to bludgeon their critics into submission. Weiss reminded me of the taped interview with Dr. Hiss, as she herself had arranged the interview and was present during it, and was as stunned as I at the arrogance of Hiss’s revelations. Chen Kugel, a reserve military officer and former forensic pathologist at Abu Kabir, agreed that the truth should be told to the global community, though perhaps not by them. Both had suffered and had been forced out of their jobs. Dr. Kugel confirmed Hiss’s statements concerning the illegal harvesting of the dead bodies following autopsy. However, the retired military officer and now independent forensic pathologist refused to consider our coauthoring an article that would set the record straight. It would, he said, simply ruin his life, professionally and personally. He would be ostracized, a mezorah, a leper, totally excluded from human society. He would be professionally and socially “disappeared.”

THE BODY OF THE TERRORIST
In July 2000, three years into the Organs Watch project, I was given a file and a photo by an Israeli human rights lawyer, Lynda Brayer, at her organization’s headquarters in Bethlehem. The Society of St. Yves was created to provide legal assistance to Palestinian families whose relatives were killed by Israeli soldiers and whose families suffered the demolition of their homes, forced removals, and other abuses. The
organization was then representing the family of Abdel Karim Abdel Musalmeh who was shot in the head on November 8, 1995, by Israeli Defense Forces (IDF) snipers. The single bullet that killed Abdel is clearly indicated in the photo that was part of the autopsy record. A military order for the demolition of Musalmeh’s home in Beit Awa, a village outside of Hebron, preceded his murder by the IDF as a “wanted person on the run.” The lawyers were arguing a case to allow the home to stand so that Abdel’s widow and their six children would not be homeless. If murder and dispossession were not enough, Musalmeh’s body was returned to his wife in tatters. The autopsy report attributed death by rifle shot to brain. Why, then, was the body subjected to a total dissection and the removal of cornea and skin? I agreed to look into it.

When I first shared this information and the graphic photo with Meira Weiss, she reassured me that there was no organ or tissue harvesting at the institute. She had witnessed hundreds of autopsies—of Israelis, Arabs, Arab Israelis, Russian immigrants, Palestinians, and foreigners. While bodies were cracked opened and organs examined, they were returned to the body except for small tissue samples as needed for forensic examination in the laboratories above the morgue. Weiss emphasized the binary opposition between the “clean” labs (above) and the “dirty” forensic morgue (below). There was no contact between them. The morgue was “taboo” to the lab scientists who had no need, and no vocation, to descend there. There were other practices Weiss had observed that were not in compliance with international codes of ethics and internal law, the 1975 Helsinki Accords on the use of human subjects (Organization for Security and Cooperation in Europe)—the bodies of new immigrants brought in for autopsy might be circumcised, postmortem, without the knowledge or consent of relatives—but human organs trafficking was not among them.

There was, according to Weiss, a “hierarchy of bodies” at the National Forensic Institute based on ethnicity, nationality, race, and Jewishness. The bodies of Jews and Muslims were treated differently. Palestinians were subjected to a complete autopsy as required to
produce information for the Palestinian Authority. The autopsies of Israeli soldiers were often discreet and partial.

“They have suffered enough,” Hiss once told Weiss. During her 10 years as resident ethnographer of Abu Kabir, Weiss observed Hiss’s contradictions, his scientific agnosticism and his “veneration” of the body of Israel’s assassinated President, Yitzhak Rabin. Weiss said that Hiss could not bring himself to conduct a full autopsy on Rabin’s body, already torn asunder by an assassin’s bullets. Instead, the body was handled like a precious relic, “like the body of a Catholic saint,” Weiss told me pointedly. If there was any tissue or organs harvesting at the institute, she would have seen it. Nonetheless, she agreed to set up an interview with the director, Jehuda Hiss, and we were both surprised when he agreed. “Don’t worry,” he told Weiss, “I won’t tell her anything” (field notes, July 2000; personal communication by Meira Weiss).

A VISIT TO THE L. GREENBERG FORENSIC INSTITUTE, ABU KABIR, JULY 21, 2000

The National Institute of Forensic Medicine is Israel’s national depository of bodies requiring identification, examination, and autopsy. Weiss described Abu Kabir as a meeting ground for disparate, even oppositional approaches to the body (Weiss 2010). On the one hand it served as a scientific institute, affiliated with the Sackler School of Medicine (Tel Aviv University), through which it managed a state-of-the-art genetics laboratory. On the other hand, the institute was closely supervised by the chevra kadisha, the orthodox religious organization, which has a virtual monopoly on all burials in Israel, except the military. The institute is a civil organization working under the Ministry of Health. It is also an arm of the security police and the military. One could compare it to the Pentagon or to the CIA. The institute responds to the needs of the military concerning national security.

Unbeknown to Weiss, the institute was both a traditional medical-legal mortuary and sub rosa the nation’s primary source of tissues, bone, and skin needed for transplantation, plastic surgery, research, and medical teaching. The clandestine traffic in organs, tissues, bone, and
the stockpiling of assorted body parts at the institute is what anthropologists call a public secret, something that every one inside the society knows about, but which is never discussed, and certainly never admitted to those outside the society. Michael Taussig describes the public secret as “knowing what not to know” (Taussig 2005). The public secret of illicit organ theft at Abu Kabir has been aired and discussed in countless investigative reports and in civil law suits filed by aggrieved relatives of the deceased (Magistrates Court–Civil Suit 65484/07 in Tel Aviv).

Jehuda Hiss has been the focus of public scrutiny and public veneration. He has been sued and he has been decorated, upbraided, and rewarded, fired from his position as director of the institute and given a new title with a higher salary. The first allegations of biopiracy at the Forensic Institute appeared in November 1999, in an investigative report by the Tel Aviv newspaper Ha’ir, which reported that medical residents under Hiss’s direction were allowed to “practice” on bodies sent to Abu Kabir for autopsy, and that tissues were removed and transferred to hospitals for various medical uses without permission from the families concerned. In 2000, the newspaper Yediot Aharonot published a price list for body parts that Hiss provided to university researchers and medical schools. A committee of international forensic experts was appointed by the minister of health to investigate practices at the institute. The investigation took two years, during which time Hiss destroyed much of the evidence. Nonetheless, it was alleged that Hiss kept a huge collection of body parts at Abu Kabir. In 2002, Israel National News reported that “over the past years, the head of the institute appears to have given thousands of organs for research without permission while maintaining a ‘storehouse’ of organs at Abu Kabir” (Cook 2009). Hiss was reprimanded but allowed to continue his activities, which he defended as necessary for medicine, for the defense of the Israeli state, and for the advancement of science. In 2005 new allegations of organs trafficking at Abu Kabir surfaced and Hiss admitted to having removed body parts from 125 bodies without authorization. In exchange for a guilty plea, Hiss was not pressed with criminal charges by the attorney general. He was removed as director but given the title
of chief pathologist at Abu Kabir, and to this day he remains the state of Israel’s highest-ranking state pathologist.

Throughout Hiss’s tenure at Abu Kabir, the nonconsensual harvesting of bodies was simultaneously prohibited and tolerated within an organizational culture and bureaucratic and legal structure rooted, as Weiss has argued, in medicalization, paternalism, and patriotism. Like Isaac Rosenbuam, Hiss was another solution to Israel’s severe and chronic scarcity of tissues and organs. What allowed him to cross a line and do as he pleased with the bodies entrusted to him was his deep distaste for Israelis’ deep-seated cultural reluctance to tamper with the bodies of the dead. The political context and the national state of emergency produced a “nervous system” in which the integrity and security of bodies, dead or alive, was always in question.

**FACE-TO-FACE WITH JEHUDA HISS**

On meeting Professor Jehuda Hiss for the first time, I found him a formidable, frightening, and brilliant man. A Polish immigrant to Israel with striking blue eyes, a short beard, wiry body, and a tense, hypervigilant and belligerent demeanor, Hiss commands attention. He is either a reckless and self-destructive Galileo figure willing to fight social convention and the forces of religious bigotry for the advance of science and medical technology or, according to some of his enemies, he is a “sociopath” who sought gratification in stockpiling skulls, long bones, brains, and prostate glands. He struck me as a cold rationalist, a technician for whom the dead body was simultaneously a puzzle, a prize, and a provocation. He could also be described as a postmodern biological citizen. Although he describes himself as a patriot, he expresses nothing but disdain and contempt for the religious observances and orthodoxies of nonsecular Jews and “Orientals” (Arabs) that get in the way of his body- and nation-building projects via human strip mining to transform the tissue, skin, bone, and soft organs of the deceased into medical material for research, commerce, and collecting. Hiss is the prototype of what Jean-Paul Sartre called the “technician of practical knowledge”—a person so obsessed with
the technicalities of his job that his loyalties go no further; his human empathy is lacking.

The interview took place in Hiss’s office at Abu Kabir in the presence of a staff member and Meira Weiss. We were shocked by his candor and his heedless desire to demonstrate his authority over the state’s bodies. I quickly retreated from the questions I had prepared and never found the courage to confront him with the photos of the slain and mutilated body of the Palestinian stone thrower. While Hiss allowed the interview to be audiotaped, parts of our conversation were conducted off the record and the tape was turned off at those moments. I honestly do not remember what he said when the tape was off. I could barely listen to what he was saying when the recorder was left on.

Hiss readily admitted to the uninformed, nonconsensual, “informal” practice of tissue, skin, bone, and organ harvesting to serve the needs of the country. The institute served many masters: the army, the state, and the justice system, as well as the development of science and medicine. Medical interns and residents in military training, together with a special squad of surgeons on military reserve duty, did most of the harvesting with encouragement from the head of the national skin bank, formerly the chief medical officer of the Israeli Defense Forces. Hiss was proud to provide the army with a steady supply of skin and tissues to treat the injuries sustained by security and defense forces, and for civilian burn victims following explosions and suicide bombings.

Until Hiss’s arrival in 1987 as director of the Forensic Institute, there was no organ or tissue harvesting conducted there. His colleagues at the institute were sensitive to the psychological traumas that autopsy, let alone tissue harvesting, caused to the families of fallen Israeli soldiers. Hiss gradually introduced cornea harvesting, then skin, bone, and other human material and explained to his staff that this practice was common in medical-legal institutes elsewhere in the world, including Case Western Reserve University medical school, where he had studied, and in other forensic institutes he had visited in the United States and Europe. He imposed “presumed consent” without the backing of the population or the law. Although it was in violation of existing
laws, Hiss thought uninformed harvesting was justified given the dire need for tissues in a war-torn nation. Hiss admitted that the harvesting was “informal” and that its legality was uncertain. From his perspective, little harm was done by the careful removal of solid organs, tissue, bone, and skin that would never be missed by the deceased and about which the family would never have to know. Medical interns were brought into the morgue, after Hiss and his team had completed their legally mandated autopsies, to practice and to conduct the removal of organs. Weiss, as the approved ethnographer of the institute, was present at autopsies but she left the room with Professor Hiss before the medical student harvesters arrived. Thus, Weiss was not, at least in 2000, witness to the harvesting and retention of tissues and organs, which—removed for examination—should have been gently replaced in the bodies of the dead. Pathologists, most of them sober men of reason dedicated to medical science, consider the protection of the dead body as a moral obligation, owed to the dead and their survivors.

In response to my questions about cultural sensitivities toward the handling of bodies among certain social groups in Israel, Hiss replied that both Orthodox Jews and Muslims had to be handled with care: since “Orientals [Arabs] sometimes opened the eyes of the dead and threw sand on them . . . we are careful to close the eyes and glue the eye lids, and we would cover up any of the places where we had removed something.” The pathologist gave a startling inventory of illegal harvesting of both Israeli and Palestinian bodies:

We would take skin only from the back of the legs. At the beginning of the 1990s, we began to take some bones from the legs. Then we were asked for cardiac valves, and so we did some of them. Beginning in 1995 we started to do it more formally . . . according to a certain list of priorities established by various medical centers. It was done as a kind of semi-legal thing . . . only between me/the institute and the various departments and medical centers—informally.¹
Eventually, Hiss formalized the transfer of organs and tissues. He explained that he had “made up a list of the various medical services that we provided—list of hundreds or thousands of shekels—there were expenses that we wanted to recoup. But we would collaborate only with public hospitals.” He explained his relationship and that of the Forensic Institute to the army in terms of a moral imperative to procure organs and tissues as a way of serving his country:

There is a special relationship between the institute and the army because of the current political situation in Israel. All Israelis feel we all have an obligation to help out in some way and because we all served in the army we all have a personal stake in the army ever after. We are all linked to the army. And because of this we took harvesting for granted. We never asked. We thought it was part of duty of all Israelis to cooperate. . . ” (Scheper-Hughes 2010).

Everything went smoothly, Hiss said, until a complaint “ended the good system we had . . . and then the whole thing blew up and we went through hell when the father of a boy, an Israeli soldier, who we autopsied, looked to the father as if he had been harvested. . . . A police investigation followed and because of bad press, the Ministry instructed us to stop with everything and to begin asking Israeli families for permission.” This was a reference to the legal case surrounding the autopsy and harvesting of a young soldier, Sergeant Zeev Buzaglo of the Golani Brigade, who was killed in a training accident in April 1997. The soldier’s father, Dr. Haim Buzaglo, a pediatrician, came to see and to claim the body. Buzaglo told an investigative report for Channel 2 Nightly News, in response to my release of the taped interview with Hiss to the Ulpan Shishi (Friday Newsmagazine) news team on December 18, 2009, about the trauma he experienced at the Forensic Institute:

When they opened the casket, I saw that my son was harmed. I saw that they practiced on him. I saw they sliced
his neck and that his corneas were removed. My wife, who is not a physician, looked at him, all broken up as she was, and said to me, “Haim, what happened to his eyes?” I said, “It is because of the refrigeration.” I just answered something because that was not the time to talk, but I realized something was happening there. We did not allow an autopsy. We did not want him touched at all. Furthermore, I wrote them, using my pen, warning them not to touch his eyes. I already had this intuition.

After the audiotape of my interview with Hiss was released, army and government officials admitted that organs and tissues were harvested from the bodies of both Palestinians and Israelis throughout the 1990s, but that the practice ended in 2000 (Lavie 2009). Today, Hiss publicly denies everything, including his words to me, released on tape. Now he says that he denies it all—the stockpiling of body parts, the perjury, and the organ harvesting. He says that everything was done according to the law, and that the families consented to the harvesting. No organs were taken for research or for commerce, Hiss says. None at all.

In May 2010, Chen Kugel and Meira Weiss participated in a closed circuit Organs Watch conference at the University of California at Berkeley with a working group of experts, including anthropologists, transplant surgeons, pathologists, detectives, prosecutors, and human rights activists. One half-day session was devoted exclusively to the Hiss case, against the protest of some panelists, who felt that Israel was being unfairly profiled. Dr. Gabe Danovitch, a transplant nephrologist from UCLA and also a member of the Istanbul Summit on Organs Trafficking, argued that there were many cases of the corruption of “willed body” projects in the United States, including at the University of California, Los Angeles and University of California, Irvine. Why pick on Israel? The response was that corruption by individuals is one thing, and problematic enough. But the corruption of the Forensic Institute was enabled by the Ministry of Health, the IDF and, ultimately, by the government. Hiss spoke as freely as he
did because he knew he was untouchable, that he was immune to prosecution.³

Weiss spoke about dark science in the military, about the conflict between secular and religious modalities concerning the uses of the body, and about the hierarchy of bodies at the institute that put Israeli soldiers at the top and gave them a reprieve from the worst and most savage harvesting; ordinary Israeli citizens beneath them; non-Jewish tourists in the middle sector; Palestinians on the bottom. New immigrants to Israel, the not-quite-Jewish-enough Russians and Ukrainians, were positioned just above the Palestinians. Weiss addressed the heart of the matter: that the official (if implicit) policy of medical abuse of the body of the enemy in Israel, South Africa, or in Kosovo was not a question of ethics. It concerned crimes against humanity.⁴

**THE WHISTLE-BLOWER**

Chen Kugel, the unheralded whistle-blower of the Forensic Institute, said that the situation was even worse than had been described, and much worse than what Hiss admitted in his self-incriminatory interview.⁵ Kugel’s testimony as a reserve military officer, a forensic pathologist, and a former protégé of Hiss was extremely powerful. When Kugel returned to Israel after his postdoctoral studies in the United States to work at the Israeli Forensic Institute in 2000, he realized immediately that something was terribly wrong. He addressed the problems with three medical residents and they held a meeting with Dr. Hiss. Kugel, as spokesperson, confronted Hiss, telling him that it was wrong to harvest organs and tissues without permission and that “giving false evidence in court is also not okay.” When Hiss dismissed their concerns, Kugel and the residents wrote a letter of complaint to the Ministry of Health, describing the illegalities at Abu Kabir. The Ministry of Health reacted with alacrity: the three residents were fired and Kugel was isolated, although he kept his position (as a high-ranking military officer working for the IDF, Kugel could not be fired). They next went to the media and told the entire story about what was going on at the institute. It was a lot more than what Hiss had revealed to me. According to Kugel,
“Organs were sold to anyone. Anyone that wanted organs just had to pay for them.” While some tissues and body parts were removed and used for transplant and for other medical procedures, most of the human material that was retained and stockpiled “were sold for research, for presentations, for drills for medical students and surgeons.”

When the story of Professor Hiss’s 13 years of illegal organ retention and sales was published in *Yediot Aharonot* in 2001 by two Israeli reporters, Ronen Bergman and Gai Gavra, Hiss retaliated with his own media campaign, designed to convince the public that everything he had done was to serve a noble end: to help the war wounded, victims of terrorist attacks, and the sick. Hiss, Kugel said, “tried to present his crimes as something sublime or even heroic, and himself as a modern-day Robin Hood, taking from [dead] people and giving to the innocent victims.” While Hiss knew it was against the law—although he never acknowledged that—he defended himself by saying that he took enormous risks, endangering himself, in order to save lives.

**THE BANALITY OF HISS’S ANATAMO-POLITICS**

But there were other, more banal motives. As in similar institutes elsewhere in the world, a commercial value was placed on each tissue and organ provided by the institute. What was strange in this instance was the minimalism of the price tags: $300 for a femur, $100 for a liver, and, should a client want it, an entire body could be purchased for $2,500. According to Kugel’s testimony, it wasn’t the money itself that mattered. The fees constituted a kind of slush fund, or perhaps a better word would be a “hush” fund. The money collected was paid out to silence staff members, who were given small cash payments as “gratuities” for the “extra work” of harvesting the bodies. “What extra work?” asked Kugel rhetorically:

During the autopsy you are taking out the heart. You’re taking out the liver. What extra work to put it aside rather than returning it to the body? To the contrary, a heart that was taken out, that was in most instances not even exam-
ined because it was removed to transfer it to the client as an undamaged intact organ for research or other medical uses (obviously not for transplant)—all the staff had to do was to remove the organ and deliver it.

According to Kugel, the primary motive that drove Hiss was neither his patriotism nor his fee-for-organ system, but something much more valuable: the retained and confiscated organs and other body parts were circulated among his medical colleagues in exchange for publication citations to advance his career and his salary, making Hiss the highest-paid public employee in Israel today:

On any research paper that was published [based on research] using organs, bone and tissues that came from the Institute, Hiss had to be recognized as one of the first authors. And, that, as we all know, is how academic promotions work. If your name is on hundreds of research articles, you get promoted. If you look carefully, though, most of the articles supposedly written by the director, they are not related to forensic medicine at all, but are about topics such as insulin’s effects on the bones of elderly people suffering from diabetes and other diseases.

Because research production and citations were, according to Kugel, the main goal, the institute created stockpiles of “organs reservoirs.” For example, the institute kept in reserve a few thousand hip bones and temporal bones that were often requested by ENT surgeons for research and for instruction. Hearts and brains were also stockpiled, as they were in great demand for research and teaching.

Beyond these motives was also a more creepy and perversely recreational human stamp-collecting impulse in which Hiss and some of his staff participated. These collections were private, among them penis collections and skin grafts of tattoos. Kugel had observed the surgical removal of tattoos from the dead bodies of “new immigrants”
to Israel, mostly Russians and Ukrainians, who were often suspect of not being Jewish at all or not Jewish enough. Many were uncircumcised, a condition that was readily corrected by the institute’s staff. Tattoos, given their association with the branding of death camp victims during the Shoah, were attacked with vigor: “Every skin tattoo was taken, no matter how large or extensive. And so there was an enormous private collection of tattoos kept in the Institute” (Kugel 2010).

**WHOSE BODIES WERE SUBJECT TO VIOLATION AND MEDICAL HUMAN RIGHTS ABUSES?**

In the end, who were the victims of Hiss’s human parts confiscation project? The answer (according to Kugel) was: everyone. Body parts were taken from Jews and Muslims, from IDF soldiers and from Palestinian stone throwers, from terrorists and from the victims of terrorist suicide bombers, from tourists and from new immigrants. There were only two considerations: the physical condition of the body and its organs, and the ability to conceal what they were doing.

Most victims of Hiss’s illegal program of organ harvesting were not even subject to autopsy at all: they were simply harvested. The damage was hidden by putting pipes and glass or plastic caps in the empty eye sockets. Broomsticks substituted for long bones that were removed, toilet paper and paper towels filled in recesses, plastic skull caps covered the place where the brain was removed. The institute staff was counting on one thing: that most Israelis do not view the body after death except once, to verify that the body they are taking home with them is the right one. The harvested bodies were wrapped in a winding sheet for the family or in plastic sheets for the burial company to come for it. In the latter case the staff would warn the burial employees, who were not well educated, not to open the sheet because the body was contaminated with an infectious disease.

It was more difficult to take organs from IDF soldiers because their bodies were supervised by the military, who were more vigilant and more difficult to fool. Organs were nonetheless taken from Israeli soldiers, Kugel said, but he agreed with Weiss that there was a hierarchy
of bodies at the institute and that some bodies were more vulnerable to theft than others: “It was easier to take tissues and organs from the new immigrants, and needless to say, it was easiest of all to take skin, bone, cornea and solid organs from the Palestinians. They would be sent back across the border, and if there were any complaints, coming from their families, they were the enemy and so, of course, they were lying and no one would ever believe them.”6

Kugel was amused by the grandstanding and brouhaha around the Boström article; everything he revealed there had been widely discussed and debated in the Israeli media, and investigated by special government panels and commissions. When these illegalities were first exposed, it took two years for the judges to decide whether or not Hiss could be sued. Then it took the police another two years to do a thorough investigation of the institute, during which time Hiss, according to Kugel, “concealed evidence, tampered with the evidence, threatened the workers,” himself included. Hiss was reprimanded and, as noted earlier, removed as director of the institute, but he was reinstated as senior pathologist and given a substantial raise.

Kugel, the whistle-blower, was dismissed from his post because during the police investigation he spoke with one of the witnesses who had buried evidence—human body parts—and so was seen as interfering with the trial. He was censored and blacklisted from teaching at all but one of Israel’s universities. What he learned from his experience was that there was no refuge for whistle-blowers. No matter how patriotic they are (and Colonel Kugel is a staunch Zionist to this day), they are easily fired and turned into professional and personal nonentities. He experienced profound ostracism and a form of social death. Meanwhile, the corruption was protected. The police and the IDF had a special relationship with the institute. Academic faculty said nothing because they did not want to appear to be scientific reactionaries, anti-science and anti-technology. Moreover, they did not want to be associated with the orthodox community in Israel that “fetishizes” the dead body. The political left in Israel, such as it exists, was unconcerned, according to Kugel: “They say the bodies are dead? Why should we care about what happens to them?” For Kugel,
the issue had nothing to do with science. Rather, it was about disrespect, about hording body specimens, about “turning the institute into a factory of bodies.”

Hiss did not plunder dead bodies for science, said Kugel: “He did it because he could. His actions were motivated by power, by prestige, and by an authoritarian paternalism that says: ‘We know what’s good for you, we’ll decide what happens to you. . . . We’ll decide.’ And that’s actually the reason this happened.” And it is happening still to this day, Chen Kugel insists.

**THE DANGERS OF A MILITARIZED STATE**

To be sure, Israel is not the only military state in the late twentieth century to recognize the value of the human body—whether the body of the enemy, the body of disposable subcitizens, and whether living or dead—to supply scarce and valuable medical, surgical, and reproductive material. In its worst form, however, the abuses were egregious, such as the alleged medical abuse of Palestinian prisoners at a special detention facility, Nes Ziyona, near Tel Aviv. According to the testimony of ex-Mossad operative Victor Ostrovsy (1994: 240), the Palestinian captives brought to the detention center for interrogation also served as human guinea pigs at Mossad’s secret ABC (atomic, bacterial, and chemical) warfare laboratory. This case is also treated in a comparative analysis of intelligence agencies and the rule of law in the *Federal Law Review* (Walker 1991).

During and following World War II, the United States government sponsored violent research on prisoners and war resisters at their disposal. Ancel Keys, for example, led a study of the biological and psychological effects of “controlled” starvation on a “captive” population of young male conscientious objectors. The experiment was conducted over several months in a laboratory beneath the football stadium at the University of Minnesota. The men’s daily caloric intake was reduced to concentration camp levels while the scientific team measured, weighed, and observed the effects on the bodies and minds of the clinical subjects, reproducing an American version of the
mad science of Nazi doctors (Keyes et al. 1950). Although the subjects gave their consent, Keyes acknowledged, they did so because of their conflicted feelings and guilt in resisting a war seen as heroic. As I have long argued, consent to inhumane treatment is often a red herring. In 1946–1948, the US Public Health Service (approved by the US Surgeon General) sponsored a “syphilis experiment” in Guatemalan prisons and psychiatric institutions for the mentally impaired. They used female sex workers, intentionally infected with syphilis, who were brought to the involuntary, uninformed but willing clinical subjects. When the rates of sexual transmission of the disease were not satisfactory, the US government allowed the scientists to directly inoculate the prisoners with the infectious material, killing some research subjects in the process before they resorted to treating them with penicillin (Friedsen and Collins 2011). When military interests and public health projects are enmeshed, as in the examples presented here, moral reasoning is reduced to a kind of megalomaniacal hubris, which Ostrovsky and Hoy (1990: 335) describe as “the feeling you can do anything you want to whomever you want for as long as you want because you simply have the power to do so.” Transparency and truth telling also become irrelevant because the empowered agents believe they are in direct combat with a larger evil force, be it a lethal disease (on behalf of medical science) or enemies of the state. In the process the victims are stripped of their humanity through a process that Eric Erikson called pseudospeciation and Joao Biehl (2005) refers to as the “ex-humans.”

During the late years of the Brazilian dictatorship (1964–1984), surgeons were given “quotas” of organs and tissues needed for the military. They met these quotas in some cases by chemically inducing symptoms of brain death in severely traumatized and dying patients. During his reign in Nicaragua (1974–1979), the dictator Anastasio Somaza sponsored federally financed programs to extract blood from Managua’s poor that was sold at great profit to European and American companies (Star 1998). The harvesting of executed prisoners in China to stock the transplant tourism trade in that country is another well-documented case.
Today, allegations are under investigation by EULEX (European Union Rule of Law Mission) prosecutors (Marty 2010) that some 400 missing bodies of Bosnian civilians living in Kosovo at the end of the Serbian War in 1999 are a result of those civilians’ having been captured and taken to special detention centers, where they were murdered. Among them were a special contingent (according to protected witnesses who are former Kosovo Liberation Army militants) who were specifically murdered for their organs, which were then sent by air to Turkey (Council of Europe 2010). Late modern detention camps are death camps and human-harvesting camps.

THE BODY OF THE TERRORIST: RETURN OF THE REPRESSED
As for the body of the Palestinian terrorist? In her poignant essay, “Others Within Us: Collective Identity, Positioning, and Displacement,” Meira Weiss recalls her first day as an ethnographer working at the National Forensic Institute at Abu Kabir:

“Today is the first time I saw a dead person, a dead body” I wrote [in my field diary] on June 26, 1996. . . . On that day the physician took me into the morgue and showed me a decaying body, eaten by wild beasts, with pieces missing and falling apart (Weiss 2007: 185).

Nine years after the fact, Weiss was struck by a recovered memory, the return of the repressed. As she reread her original field notes, all the sentient aspects of the dead body—“the sweet, unique smell of human decay”—reminds her that she has been there before at another time, another place: “Actually, ‘Jane Doe’ was not the first dead body I had seen. The first was an Egyptian soldier. I had forgotten about him completely, but now I remember him, feeling the memory in my body.” Weiss recalled to memory a night in June 1967, when, immediately after the Six Days War, she and other officers of the Israeli military base were taken to a “victory tour” in Sinai to celebrate their
victory. Sleeping outside with her comrades in Bir Gafgafa, with echoes of gunshots,

this horrible sweet scent came to me. . . . It was the smell of bodies decaying in the desert . . . full of the dead bodies of Egyptian soldiers, parts of human flesh, teeth, and shoes. The bodies were lying there scattered in the sands. . . . We photographed every body that we saw. They were part of our victory albums. My own album is full of dead body photographs. . . . We felt it was part of the tour of duty and that photographing the dead bodies was photographing our victory. We did not think [then] that we were photographing the horror” (Weiss 2007: 186).

This “recovered memory” forced the seasoned ethnographer to reflect on her multiple identities as the child of European-born refugees to Israel, as an officer in the Israeli military, and as a professor at Hebrew University in Jerusalem. As an officer and an anthropologist, she admits that her collected writings on the state of Israel are shaped by a kind of double vision, as an insider-outsider, and that at times she found it very difficult to write in a “disinterested” scientific fashion. At times she was prone to “self-censorship” (Weiss 2007: 187).

Weiss ends her article with a particularly fraught incident, a day in July 2001, during a particularly hectic period for the Forensic Institute. On this day “seven cadavers, allegedly belonging to Palestinian ‘terrorists’ piled up in the refrigerator awaiting their autopsies” (197). The forensic staff was waiting for the official mandate from a military court to begin the autopsies. The families requested that the autopsies take place in the presence of a foreign medical representative for the bereaved. The following day a convoy of lawyers, neighbors from the town of Jenin (where the killings took place), a photographer, and the external witness, Dr. Paul Lance of the Institute of Forensic Medicine in Ireland, arrived to observe the autopsies. Weiss describes the first cadaver, identified as Machmud Halil, being brought out and
displayed on the dissection table as “in good shape except for the holes left by the bullets. Halil was a young guy, rather dark, and bearded. His face lacked a chunk around the left eye, possibly due to the shooting” (198). The file described the circumstances of the young man’s death: killed by IDF soldiers during a military ambush of suspected terrorists in Jenin. According to the official report the young man was killed in battle with the IDF soldiers. But inside his folder was an AP press release stating that “in July 11 2001 two Palestinians were arrested [later killed] by Israeli soldiers near Jenin.” The report was accompanied by a request for autopsy information. Weiss notes the discrepancy in the two reports and writes:

Once again [the institute] was entangled in a messy situation. It had the authority to decide between the two versions of the story, one validating the military’s claim that armed Palestinians were shot in battle, the other corroborating the claim made by the Associated Press that the Palestinians were captured alive, cuffed, and then killed. This was a forensic decision but it also had military, political, and social implications (198).

The external examination was conducted by Dr. Lance while he spoke into a small tape recorder. After photographing the bullet holes in the front of the neck, he pointed to them and asked the forensic staff officers: “These should be the entry wounds, correct?” The staff replied in the affirmative. The room fell quiet and one of the Israeli pathologists drew off to a corner where he whispered to Weiss in Hebrew: “It’s good for us that he thinks the entry wounds are in the front. Everyone with a little experience in forensic medicine can see that the entry points are in the back.” Later Weiss was shown the bloodied shirt of the Palestinian torn in the back by bullet holes, personal “artifacts” that had not been shared with the outside examiner. She was perplexed. On the one hand she was relieved that the external observer failed to recognize that the Palestinian had been shot in the back. She shared
the sentiment that the error was “good for us.” But then, she reflected, “Who is this ‘us’?” and she castigated herself for her lapse of scientific neutrality. She was brought back to the present when the forensic staff doctor shared with Weiss that the IDF admitted to killing the young Palestinian. The question remained whether or not “We’ve tortured him.” Again, the “we” startled Weiss. When the external examiner pointed to bruises on the thigh, the Israeli pathologist suggests that it was a “passage bruise” caused by a passing bullet. Another staff pathologist was irritated by the question raised by the Irish pathologist and he complained loudly in Hebrew: “Can’t you see that this is a provocation?” The external forensic report concluded that the dead Palestinian had been tortured.

Weiss concludes her critically reflexive essay noting that the primary task of the anthropologist is to question taken-for-granted assumptions (2007: 200). At the Forensic Institute the unquestioned assumption is that all Palestinian bodies caught up in the political conflict and brought to Abu Kabir for autopsy are bodies of “terrorists.” This creates a social and moral imperative to fight “terrorism” by using all the means and resources the citizen-bureaucrat-professional-medical-military officer may have at their disposal.

One of those victims of the Israeli war on terrorism was an American peace activist and Palestinian sympathizer, a college student named Rachel Corrie, who was killed in Gaza in 2003. On March 14, 2010, the Haifa District Court heard testimony in the civil law suit filed by the Corrie family against the state of Israel for her unlawful killing in Rafah, Gaza. Corrie was crushed to death by a Caterpillar D9R bulldozer. Yehuda Hiss, who conducted Rachel Corrie’s autopsy at the request of the Israeli military, testified at the court hearing that he had ignored an Israeli court order requiring that an official from the US embassy be present as a witness. Hiss stated his policy not to allow anyone who was not a physician to observe an autopsy. Hiss also admitted that he had retained samples of tissues and organs from Corrie’s body for examination without informing her family. However, he could not produce those samples and he was uncertain about their whereabouts.
Finally, what can be said about the Swedish blood libel and Boström’s attempt to link the secret harvesting of dead bodies brought to the National Forensic Institute with Isaac (Levy) Rosenbaum and his ties to an international network of organs traffickers in Israel? Both activities are driven by organs panics—not the panics and fears of the dispossessed of being kidnapped and killed for their organs, but the transplant-driven panics about “organs scarcities,” whatever that chilling phrase means. The new “demand” (articulated by surgeons and by patients) for the “right” to free access the organs of the dead, of the living—whether strangers or intimates—and the organs of the enemy are all shaped by a new “moral imperative”: the duty to share one’s body parts as a dead or a living organs provider.

This new moral imperative to save lives by granting access to the body of the other has led to many medical and human rights abuses, including the secret plunder of the dead in hospital morgues, in funeral parlors in New York City (Scheper-Hughes 2006b), and in the National Forensic Institute at Abu Kabir. Organs scarcity panics have also contributed to medical abuses of poor and marginalized communities in order to service international transplant tourists from Israel as well as from Saudi Arabia (in roughly equal numbers) for illicit transplants at US medical centers and hospitals. The hierarchy of bodies to which Weiss alludes produces new social groups and categories—the “bio-assured” or “bio-secured”—as well as expendable populations—the “bio-available” and the “bio-disposable.” In Israel, the so-called new Russian immigrants (including Russians, Moldovans, Romanians, Ukrainians), as well as Arab Israelis and Palestinians are among those deemed bio-available for organs harvesting.

When Dr. Zaki Shapira began searching for kidney sellers in the early 1990s to serve the needs of his transplant patients at Bellinson Hospital in Tel Aviv, he found them close-at-hand: Palestinian workers. Palestinians, Shapira told me in 1996 during meetings of the Bellagio Task Force on Organs Trafficking at the Rockerfeller Foundation’s Conference Center, were “predisposed” to sacrifice their organs. It could even be seen, he said, as a kind of medical global diplomacy. Or perhaps,
to be sacrificed. It works both ways. Arab Israelis and Palestinian refugees from Jordan and ethnic minorities in Iraq were targeted as kidney providers for the notorious outlaw surgeon, Yusef Sonmez, in Turkey.

When ethnic and religious minorities, new immigrants, and migrant workers are profiled, targeted, and sometimes coerced to sell a kidney abroad, the kidney hunters are a subset of human traffickers. When dead bodies of Israeli citizens are turned into involuntary tissue suppliers, a crime has been committed. When the bodies of Orthodox Jews (and devout Muslims) are secretly harvested, knowingly against their religious beliefs, a human rights violation has occurred. When the bodies of the enemy—Palestinian “stone throwers,” “trouble makers,” enemy combatants (all of them classified as “terrorists”)—are subject to tissue and organ theft that includes taking sheets of skin from the back or the back of the legs (even when done “carefully,” as Hiss explained, “not like skinning a rabbit”) in order to supply the national skin bank at Hadassah Hospital, we can speak of crimes against humanity.

ACKNOWLEDGMENTS
An early version of this article was published in CounterPunch Magazine (October 25, 2010). For a brief period it was accompanied by the audio-taped interview with Dr. Jehuda Hiss.

NOTES
1. Mp3 Audiotape file and transcription of interview with Dr. Jehuda Hiss at Isreal’s National Forensic Institute at Abu Kabir, July 21, 2000. (The audiotape file was made available by me to journalists at Channel 2 Nightly News, Friday Newsmagazine, Ulpan Shisi, Tel Aviv. The full interview with Dr. Hiss appeared in Scheper-Hugues (2010).
2. Transcript (translated) of a special news report, Channel 2, Nightly News, Friday Newsmagazine, Ulpan Shisi, Tel Aviv, December 20, 2009.
4 Transcription of comments by Professor Meira Weiss, closed circuit conference, “Combating the Traffic in Human Organs and Tissues,” May 6, 2010, Anthropology Department, University of California, Berkeley.

5. Transcription of invited paper presentation by Dr. Chen Kugel, closed circuit conference, “Combating the Traffic in Human Organs and Tissues,” May 6, 2010, Anthropology Department, University of California, Berkeley. All quotes that follow from Kugel are from this paper and conference.

6. Transcript of Kugel paper; emphasis added.

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