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المركز الفلسطيني
لحقوق الإنسان

KIDNEY FAILURE PATIENTS WITHOUT HEALTHCARE

A REPORT HIGHLIGHTS REPERCUSSIONS OF
ISRAELI MILITARY AGGRESSION ON KIDNEY
FAILURE PATIENTS IN GAZA STRIP

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Introduction

The Israeli Occupation Forces (IOF) continues to commit acts of genocide against civilians in the Gaza Strip for 19 months while its war machine has intentionally and systematically conducted targeted attacks on civilian properties and objects. These attacks have mainly target hospitals and healthcare centers, forcing them out of service after being besieged and raided by IOF's military vehicles. Moreover, patients and medical personnel have been killed and arrested while medical equipment were destroyed amid blocking fuel deliveries essential for operating life-saving medical devices. This has put thousands of patients at grave risk of death. In perpetuation of the crime of genocide, the IOF destroyed 6 out of 7 specialized centers that provide renal dialysis services to approximately 1,200 kidney failure patients: 4 in Gaza City and North Gaza, and 2 in southern Gaza Strip's governorates.

Kidney failure patients have been left without healthcare. Those who remained in Gaza City and North Gaza have not undergone dialysis for prolonged and repeated periods, leading to a severe deterioration in their health as they remained trapped in their homes, groaning in pain, fighting death, and struggling to survive. Meanwhile, those forced to evacuate to southern Gaza in search of life-saving treatment have endured tragic conditions during repeated displacement and within overcrowded shelters. They faced extreme difficulty in accessing dialysis sessions, which were reduced to below the minimum required due to the overwhelming number of kidney patients and the limited availability of dialysis machines. This was despite the dire need for kidney failure patients across the Gaza Strip to receive longer dialysis hours beyond the standard rate, as they suffered from frequent treatment interruptions and severe shortages of food and medicine amid relentless bombardment, killings, and forced displacement orders. This devastating situation posed a serious threat to their lives, resulting in the deaths of approximately 472 out of 1,200 kidney failure patients, representing about 41% of the total number of patients. While preparing this report, the IOF resumed mass killings of civilians in the Gaza Strip after a temporary decline following the ceasefire announcement on 19 January. The IOF's warplanes launched largescale airstrikes on the Gaza Strip, targeting civilians' homes and displaced people's tents in shelters. In the first hours alone, the attack resulted in approximately 400 deaths.

The resumption of attacks was preceded by an announcement from the Israeli Prime Minister, who is under an arrest warrant issued by the International Criminal Court (ICC) accusing him of committing war crimes and crimes against humanity against civilians in Gaza, including killings, persecution, and the use of starvation as a method of warfare. The announcement stated that all humanitarian aid to Gaza, including fuel, food, and medicine, would be halted starting from 02 March 2025. This decision will have devastating and life-threatening consequences on civilians, particularly vulnerable groups such as women, children, the elderly, and patients, especially kidney failure patients.

The report highlights the conditions of kidney failure patients before the aggression and how their conditions significantly worsened during the genocidal war due to Israel's acts of genocide and the life conditions it has deliberately imposed to inflict severe harm on the Gaza Strip's population, including kidney failure patients. These patients whose dialysis sessions were repeatedly interrupted for long periods amid shortages of medicines and medical supplies, lack of healthy food and filtered water, the closure of crossings, and the denial of patients' access to treatment abroad. The report also reveals the repercussions of these act on kidney failure patients through testimonies obtained from the families of patients who died as a result of repeated dialysis interruptions, in addition to testimonies from patients who faced real dangers during their search for healthcare.

The report concludes that war crimes and crimes against humanity were committed by the IOF during their military aggression on the Gaza Strip. Additionally, these crimes are related to what is prohibited under paragraphs (b) and (c) of Article II of the Genocide Convention, embodied in “causing serious bodily or mental harm to members of the group and deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part.” The Palestinian Centre for Human Rights (PCHR) calls for exerting pressure on the Israeli authorities to stop the genocidal war on the Gaza Strip, lift the siege, and allow the entry of medicines, medical supplies, and dialysis machines necessary to save the lives of the remaining kidney failure patients.

I. Kidney Patients' Conditions Prior to the Israeli Military Aggression

Kidney patients in the Gaza Strip are divided into three categories: 1,200 patients with stage 5 of chronic kidney failure who require dialysis for 12 hours a week, with 3 sessions of 4 hours each; patients who have had kidney transplants, either inside or outside the Gaza Strip, totaling around 400 patients, who require lifelong immunosuppressive medication; and patients with chronic kidney disease (kidney failure or autoimmune kidney diseases), who also need immunosuppressive drugs. This is in addition to genetic diseases (polycystic kidney disease, and recurrent urinary tract infections). Dialysis services represent 45% of the kidney care services provided in the Gaza Strip.¹

Before the Israeli aggression, about 1,200 kidney failure patients in the Gaza Strip endured difficult health conditions due to frequent shortages of essential medications, medical supplies, and dialysis machines. Only 140 dialysis machines were available, distributed across seven dialysis centers: Noura Al-Kaabi Center at the Indonesian Hospital in northern Gaza, Al-Shifa Medical Complex, Al-Rantisi Pediatric Hospital, Al-Quds Hospital, Al-Aqsa Martyrs Hospital in Deir al-Balah, Nasser Medical Complex in Khan Yunis, and Abu Yusuf Al-Najjar Hospital in Rafah.² Before the war, there was one dialysis unit for every 8 patients, noting that the standard indicator is one dialysis unit for 4 patients.

In 2022, the deficit in the list of medications for kidney patients included 14 out of 22 items; 7 were at zero stock, while 7 items were sufficient for only 3 months. Additionally, the shortage of medical supplies for kidney patients affected 10 out of 25 items; 3 items were at zero stock, while 7 other items were sufficient for only 3 months.³ One of the most important medications for kidney patients that were unavailable in the Gaza Strip before the aggression is Erythropoietin injections. These injections are essential for patients with anemia caused by renal failure, and their unavailability may deteriorate anemia and affect the heart and general health. Erythropoietin injections have become among the zero stock items for kidney patients because they recurrently run out.



1- Information obtained by PCHR's researcher in an interview conducted with Dr. Ghazi Al-Yaziji, Head of the Nephrology Department at Al-Shifa Medical Complex, on 26 February 2025.

2- Information obtained by PCHR's researcher in an interview conducted with Eng. Zaher Al-Wahidi, Director of the Health Information Systems Unit at the Palestinian Ministry of Health in the Gaza Strip, on 13 March 2025.

3- The Palestinian Centre for Human Rights (PCHR), Report: Medical Equipment and medicines in Gaza Strip, Perpetual Shortage and Serious Repercussions. link: <https://pchrgaza.org/?p=20464>

II. Israel's Acts of Genocide



During their ongoing military aggression on the Gaza Strip, the IOF has committed acts that constitute war crimes and crimes against humanity. These acts also fall under paragraphs "b" and "c" of Article II of the 1949 Genocide Convention, which criminalizes causing serious bodily or mental harm to the population in the Gaza Strip and deliberately imposing life conditions intended to destroy them, in whole or in part. These crimes have had serious repercussions, exacerbating the health condition of patients, particularly those with kidney failure. These acts are as follows:

1. Besieging Hospitals and Destroying Dialysis Departments

The IOF deliberately and systematically launched targeted attacks on Gaza's hospitals after besieging them and halting supplies into them, forcing 155 healthcare facilities, including 32 hospitals and 53 primary care centers, out of service. The IOF also killed approximately 1,155 medical personnel, arrested 360 healthcare workers, and executed three of them inside Israeli prisons.⁴ Additionally, hundreds of health professionals were forced to evacuate abroad, which led to the collapse of healthcare services provided for patients and those wounded in the aggression.

The Israeli targeted attacks on hospitals and healthcare centers led to the destruction of 6 out of 7 specialized dialysis centers in Gaza's hospitals, rendering them non-operational. Among the destroyed dialysis centers was [Noura Al-Kaabi](#) Dialysis Center inside the Indonesian Hospital in northern Gaza, while the Dialysis Department at Al-Rantisi Pediatric Hospital went out of service. Additionally, the Dialysis Department at [Al-Shifa Medical Complex](#) was burned and destroyed, and the Dialysis Department at Al-Quds Hospital ceased operations due to intense Israeli bombing around the hospital. As a result, kidney failure patients in Gaza City and northern Gaza were repeatedly deprived of dialysis treatment.

4- Press Release No. 734 issued by the Government Media Office in Gaza, on 21 January 2025, link: <https://t.me/mediagovps/3431>

Hasan Tawfiq ‘Ayyad (30), a kidney patient, single, and a resident of eastern al-Shuja’iyia neighborhood, shared with PCHR’s researcher his suffering due to the interruption of his treatment and the hardships he faced while attempting to reach Al-Shifa Medical Complex for his dialysis sessions during the IOF’s storming of the complex in November 2023.

"I have been suffering from chronic kidney failure since 2019 and used to go to Al-Shifa Medical Complex three times a week for dialysis, with each session lasting four hours. Since 07 October 2023, as Israeli military attacks intensified, I was only able to receive two dialysis sessions before the IOF besieged the complex and blocked access to it. I remained 10 days without dialysis, which severely deteriorated my health. I made several attempts to reach Al-Shifa Hospital despite the extreme danger, but each time, Israeli snipers stationed on top of buildings near the hospital opened fire at me, and Israeli tanks fired shells at us that fell nearby. I saw many dead bodies and wounded people scattered on the streets. I lost hope of receiving dialysis in Gaza City and became extremely exhausted, as I could no longer walk. Eventually, my parents and I decided to evacuate to the southern Gaza Strip in search of dialysis sessions. However, the suffering continued due to the overcrowding of patients in the south."

Amal Hamed Hasanin (49), a kidney patient, married, mother of 6 children, and resident of al-Shuja’iyia neighborhood in eastern Gaza City, said to PCHR’s researcher:

"At the onset of the Israeli aggression on Gaza Strip, I was overwhelmed with fear, and many questions flooded my mind, most notably was whether I would be able to reach the dialysis department at Al-Shifa Medical Complex for my sessions, or the IOF would prevent me, interrupting my treatment and causing my health to deteriorate to the point of death. My sons set up a tent for us inside Al-Shifa Hospital to stay close to the dialysis department, fearing I might not be able to access treatment. I used to undergo dialysis three times a week, with each session lasting four hours. However, as the electricity supply was cut off and fuel ran out, my dialysis hours were reduced. We remained inside Al-Shifa Hospital until the IOF besieged it in November 2023. During this time, the maternity ward at the complex was violently bombed, causing severe damage to our tent and scattering shrapnel over us, but we miraculously survived. We then fled the hospital and sought refuge in the Al-Sha’biya area in eastern Gaza City. Shortly afterward, the IOF raided Al-Shifa Medical Complex, and my dialysis sessions were suspended for 10 days. During this period, I attempted several times to reach the hospital, but each time I was met with gunfire from Israeli snipers stationed around the hospital. As I tried to approach, I saw blood and body parts scattered on the streets, most of them for children and women. I even saw a corpse with the brain spilled out of the head. I screamed and cried uncontrollably when I saw those horrific scenes. I would return home in a very bad physical and mental state. This occurred near the Al-Rimal Clinic on al-Wehda Street. Eventually, I decided to evacuate to the southern Gaza Strip to receive my dialysis sessions."

The Israeli criminal acts, including the forced displacement of the population, have forcibly displaced most kidney failure patients from Gaza City and northern Gaza to central and southern Gaza Strip in search of dialysis services. Three dialysis centers are available: the dialysis department at Al-Aqsa Martyrs Hospital in Deir al-Balah, the dialysis department at Nasser Medical Complex in Khan Younis, and the dialysis department at Abu Youssef al-Najjar Hospital in Rafah. These departments have received hundreds of kidney failure patients displaced from Gaza City and northern Gaza Strip since the beginning of the aggression, operating beyond their capacity around the clock, to provide kidney failure patients with four hours of dialysis weekly, which is less than the minimum required. Moreover, the Nephrology Departments in southern Gaza Strip hospitals were not spared from Israel’s deliberate destruction. The IOF’s ground invasion of Khan Younis and their raid on Nasser Medical Complex, among other crimes, rendered the hospital’s Nephrology Department out of service, depriving patients of essential healthcare after some were arrested from the complex.

Rami Reziq Sukar (46), a kidney patient, resident of al-Shuja'iyia neighborhood in Gaza City, and married with three children, said to PCHR's researcher:

"I have been suffering from kidney failure since early 2004 and underwent a kidney transplant in Egypt later that year. The transplanted kidney functioned successfully but failed in 2014. Afterward, I began dialysis sessions at Al-Shifa Hospital, receiving 12 hours of dialysis per week. At the onset of the aggression, my 11-year-old daughter and I evacuated to Khan Younis so I could continue my dialysis sessions, leaving my wife and other children behind in Gaza City. We stayed in a tent at Nasser Medical Complex to remain close to my treatment. I was only able to receive six hours of dialysis per week until the Israeli tanks invaded Khan Yunis and raided Nasser Medical Complex. The IOF arrested me along with other patients from the complex despite informing them that we were kidney failure patients undergoing dialysis. They took us to Miraj area in northern Rafah, where they conducted a security check for us using cameras installed in the area. After interrogating us in the field, they released us. Following my release, I sought refuge in Rafah near Abu Youssef Al-Najjar Hospital, but my struggle to access dialysis continued due to the overwhelming number of kidney failure patients. When the IOF invaded Rafah, I was forced to flee once again and headed to Deir al-Balah near Al-Aqsa Martyrs Hospital to be able to undergo my dialysis sessions. My daughter and I endured a journey of torment filled with fear, humiliation, and intimidation. I lived in constant fear for her safety."

After the IOF forced the Nephrology Department at Nasser Hospital to shut down, dialysis services ceased in hospitals except for two centers: the dialysis center at Abu Youssef Al-Najjar Hospital in Rafah and the dialysis center at Al-Aqsa Martyrs Hospital in Deir al-Balah. Before the IOF raided Abu Youssef Al-Najjar Hospital in Rafah and rendered it non-operational, its dialysis department had been receiving thousands of chronic kidney patients, including approximately 250 kidney transplant patients who required immunosuppressive medications. The department provided dialysis services to around 700 kidney failure patients with only 15 dialysis machines available. Due to this severe shortage, the department's administration was forced to reduce dialysis sessions from three times to twice a week, with each session lasting only two hours instead of the four hours patients received before the Israeli aggression. However, due to malnutrition and high toxin levels in the blood, patients are in dire need of 8 to 12 hours of dialysis per week.⁵ After the IOF invaded Rafah and raided Abu Youssef Al-Najjar Hospital in early May 2024, dialysis services were relocated to Al-Aqsa Martyrs Hospital, which became the only operational dialysis department in the southern Gaza Strip. The department provided services to approximately 480 kidney failure patients using only 22 dialysis machines.⁶ The kidney patients received four hours of dialysis per week, divided into two sessions of two hours each, despite their urgent need for longer dialysis hours beyond the standard rate.

The IOF destroyed about 78 out of 140 dialysis machines during their aggression on the Gaza Strip, representing 55% of the total number of dialysis machines.⁷ During the aggression, the standard indicator of dialysis was one dialysis unit for every 12 patients. Additionally, severe material damage caused to the hospitals' desalination plants at the Nephrology departments.



5- Information obtained by PCHR's researcher in an interview conducted with Dr. Shafiq Mustafa Al-Hissi, Head of Nephrology Department at Abu Youssef Al-Najjar Hospital in Rafah, on 03 March 2024.

6- Information obtained by PCHR's researcher in an interview conducted with Eng. Zaher Al-Wahidi, Director of the Health Information Systems Unit at the Palestinian Ministry of Health in the Gaza Strip, on 13 March 2025.

7- Ibid.

2. Acute Shortage of Medicines and Medical Consumables

During the Israeli aggression, the healthcare system faced an acute shortage of essential medicines and medical consumables for kidney patients due to the closure of Gaza's crossings and the prevention of aid and medicine consignments from entering the Strip. The list of drugs and medical consumables for kidney patients in the Ministry of Health (MOH)'s warehouses were at zero stock, including blood pressure medications, calcium, Alpha, iron, and Eprex injections used to boost blood levels. Additionally, critical antibiotics such as Rocephin, Fortum, and Urivin were completely unavailable, leading to severe health complications for patients, including weakened immune systems, anemia, hypoproteinemia (low blood protein levels), and ascites (fluid accumulation around the heart, lungs, and stomach), which can be fatal for kidney failure patients.

The interruption of essential medications used to treat autoimmune diseases, such as Plaquenil for lupus, puts the lives of kidney patients at risk. Additionally, around 250 kidney transplant patients were unable to access their immunosuppressive medications for long periods, leading to severe health deterioration. As a result, their bodies rejected the transplanted kidneys, leaving them in urgent need of dialysis.

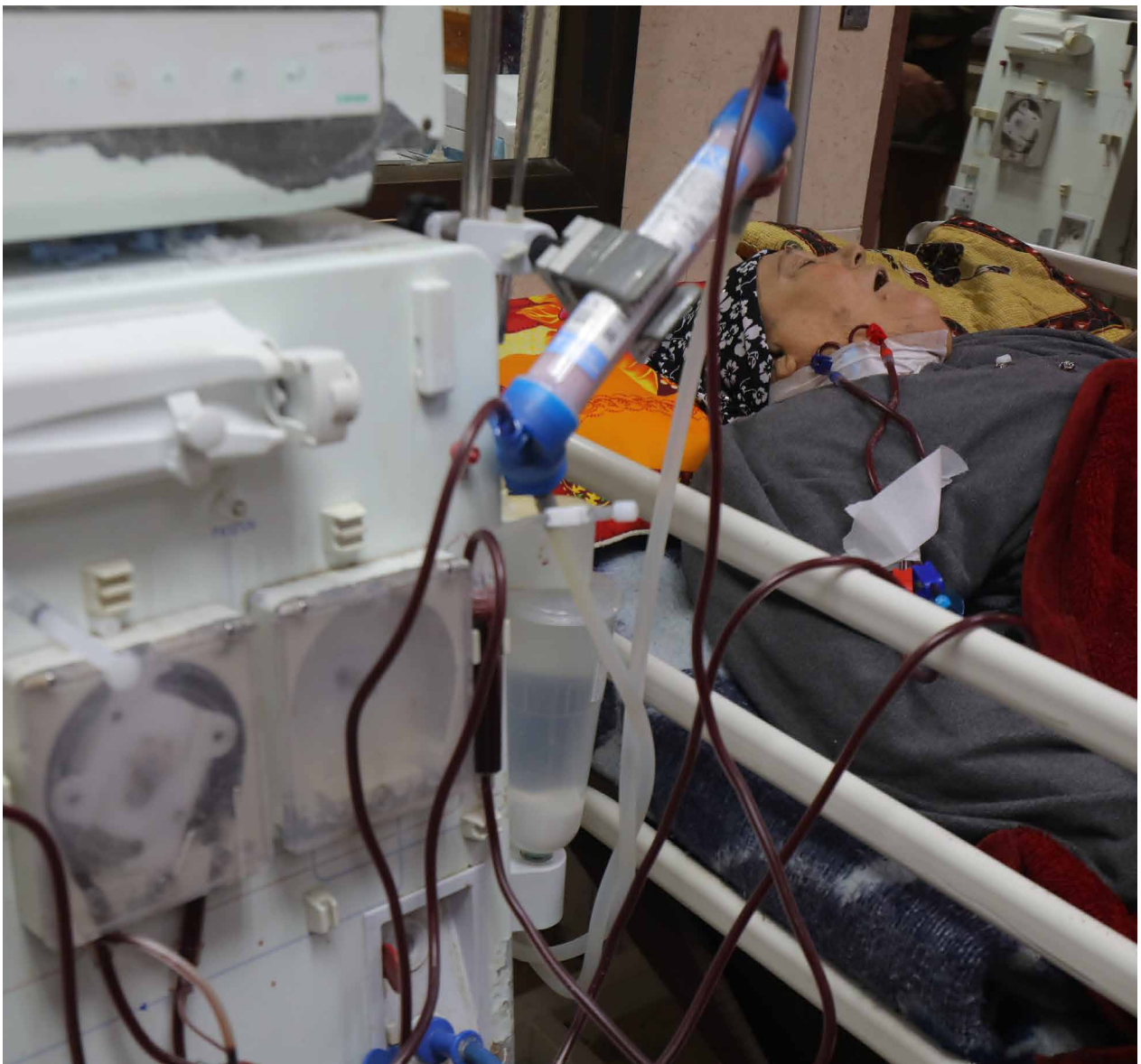
Moreover, there was a shortage of medical consumables, including central venous catheter, permanent and temporary dialysis catheters, medical solutions, and CVVH machine or "filters" for kidney patients. There was also a lack of iron and Erythropoietin injections, blood pressure medications, calcium, Alpha, iron, and Eprex injections to boost blood levels, as well as medications such as Calnex, Diltiazem, Normopress, and Nifedipine. The unavailability of dialysis tubes (a catheter) for children further worsened their suffering.⁸

Hanadi Fares Suliman Abu Ghaddeen (40), a widow, mother of one girl, and resident of al-Nasser neighborhood in western Gaza City, shared her suffering with the PCHR's researcher regarding her husband, a kidney patient, whose treatment was interrupted during the aggression.

"Since the onset of the aggression, my husband, Mohammed Abu Ghaddeen (43), a kidney patient, my baby girl, and I sought refuge in al-Maghazi refugee camp in the central Gaza Strip, where we lived in a tent under inhumane conditions. My husband had been taking kidney medications daily and continuously for the past three years. At the beginning of the aggression, the medications were available, but shortly after, we were shocked when they ran out of the Ministry of Health's warehouses and from the markets due to the IOF's closure of crossings and the prevention of medicine entry into the Gaza Strip. My husband's medications, including diuretics such as Lasix, Co-Diovan 160/25, Lercapress, and Clopidogrel, were no longer available. This caused a rapid deterioration in his health and led to ascites (fluid accumulation around his heart), which resulted in severe complications affecting his heart. Throughout the aggression, he constantly felt fatigued and exhausted. Even when he was taken to the hospital, no medications were available, and doctors could only insert a urinary catheter, which did nothing to relieve his pain. Soon after, his body became swollen, and he spent nights screaming in pain. His condition worsened significantly. On the morning of October 18, 2024, I found him lying on the ground in front of the tent door, dead."

8- Information obtained by PCHR's researcher in an interview conducted with Dr. Ghazi Al-Yaziji, Head of the Nephrology Department at Al-Shifa Medical Complex, on 26 February 2025.

Furthermore, the Israeli authorities' ongoing closure of Gaza's crossings, alongside the prevention of patients' referrals for treatment abroad and reliance on ineffective travel mechanisms, further worsened the health of dozens of kidney patients, who are in dire need of urgent medical interventions that are unavailable in the Gaza Strip. According to PCHR's follow-up, the Israeli authorities obstruct the travel of dozens of patients who have obtained a medical referral for treatment abroad, and only 50 patients and their companions, out of a total of 14,000 patients in the Gaza Strip who are in urgent need of traveling to receive treatment abroad, are allowed to travel daily. This has resulted in the death of 5 to 10 patients daily, according to the MOH.⁹



9- The Palestinian Centre for Human Rights, press release: Trapped without Treatment, link: <https://pchr.org/trapped-without-treatment-silent-death-awaits-thousands-of-patients-and-wounded-amid-weak-emergency-evacuations-for-treatment-abroad/>

3. Starvation as a Weapon of War

Since the onset of their ongoing military aggression on the Gaza Strip, the IOF tightened their siege on the Strip, particularly in Gaza City and northern Gaza, with the aim of depopulating these areas after ordering residents to evacuate southward. To achieve this goal, the IOF committed war crimes against civilians, including the use of starvation as a weapon of war, mass killings, and the destruction of civilian objects. These acts were preceded by statements from Israeli war criminals calling to exterminate Palestinians in the Gaza Strip. Among them was Israeli Defense Minister, Yoav Gallant, who declared: “I have ordered a complete siege on the Gaza Strip. There will be no electricity, no food, no fuel, everything is closed. We are fighting human animals, and we are acting accordingly.”¹⁰

Moreover, the IOF blocked the entry of humanitarian aid, cut off water supplies to the Gaza Strip, and systematically destroyed food production sources, including bakeries, factories, and farms, leaving nothing for residents to eat. As a result, Gazans were forced to eat animal feed and drink seawater. Afterwards, famine began to loom over Gaza, where its residents faced severe levels of food insecurity.

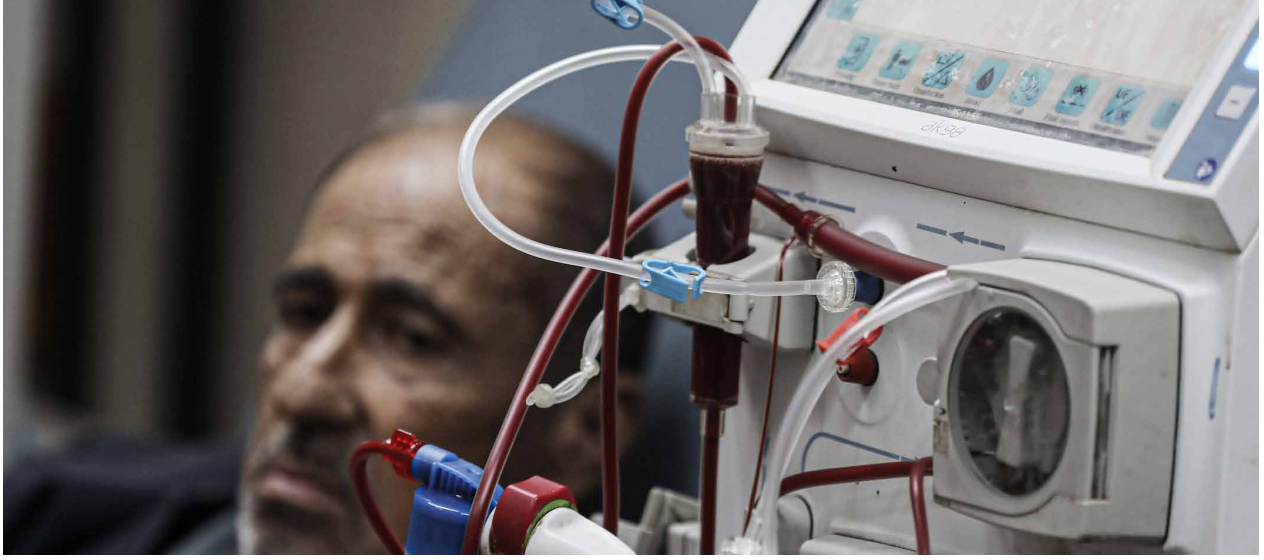
All kidney failure patients interviewed by PCHR’s researchers faced immense difficulties in securing their special food, particularly vegetables, fruits, and other food rich in protein and calcium. With limited options, they were forced to rely on canned foods and legumes, which were scarcely available in markets. This led to dangerously high levels of potassium and toxins in their blood. Some patients had no choice but to drink unfiltered water, including a woman who drank rainwater that tasted like gunpowder due to the widespread bombardment across the Gaza Strip. As a result, patients became in dire need of extended dialysis sessions to remove the accumulated toxins from their already weakened bodies.



10- Former Israeli Defense Minister Yoav Gallant announces a complete siege of Gaza, 09 October 2023.

Link: https://www.timesofisrael.com/liveblog_entry/defense-minister-announces-complete-siege-of-gaza-no-power-food-or-fuel/

III. Repercussions of Genocidal Acts on Physical and Mental Health of Kidney Patients



The physical and mental health of kidney failure patients severely deteriorated during the aggression due to the serious complications resulting from prolonged interruptions in dialysis sessions, coupled with severe shortages of medications and medical consumables. As a result, 41% of those patients lost their lives, while the health of the remaining patients significantly worsened. Additionally, the mental health of patients with kidney failure was greatly affected by fear, anxiety, and terror while facing an unknown fate in their search for treatment. One of the patients described his treatment journey as a "journey of torment."

1. 41% of Kidney Failure Patients Died

The repeated interruptions of dialysis sessions for kidney failure patients during the aggression led to the death of 472 out of 1,200 patients, representing approximately 41% of the total number of kidney failure patients. Many others continue their struggle to survive. The highest number of deaths among kidney failure patients occurred in Gaza City and northern Gaza, where the IOF inflicted severe harm by storming hospitals and destroying dialysis centers. As a result, their dialysis sessions were repeatedly interrupted for long periods, further deteriorating their health conditions and leading to the death of many patients.

From 02 to 13 March 2025, 22 kidney failure patients passed away¹¹ due to the closure of Gaza's crossings and the prevention of all humanitarian supplies, including medicine and food, from entering Gaza as of 02 March 2025. If the Israeli aggressive measures of closing crossings and preventing the entry of aid supplies, medicines, and medical consumables continue, we will face a real disaster that puts in danger the lives of the remaining kidney failure patients.

11- Information obtained by PCHR's researcher in an interview conducted with Eng. Zaher Al-Wahidi, Director of the Health Information Systems Unit at the Palestinian Ministry of Health in the Gaza Strip, on 13 March 2025.

Jamila Ramadan Suliman Abu Tabeikh (67), a resident of Jabalia refugee camp and currently displaced in a tent in a shelter in central Gaza City, shared with PCHR's researcher the story of her husband, 'Ali Danial Isma'il Abu Tabeikh, a kidney failure patient who passed away after his health deteriorated due to the repeated interruption of his dialysis sessions in the northern Gaza Strip.

"My husband Ali (68) suffered from kidney diseases, and his condition worsened during the aggression. He started receiving dialysis sessions in late April 2024 at Kamal Adwan Hospital, with three sessions each week, each lasting three hours. The Palestinian MOH had set up a dialysis department with 6 dialysis machines inside the hospital after the IOF destroyed all dialysis centers in Gaza City and the northern Gaza Strip. We faced difficulties accessing the hospital for dialysis sessions due to the IOF's siege imposed on Kamal Adwan Hospital and their repeated raids on it. My husband's dialysis sessions were repeatedly interrupted, with the most recent interruption lasting over 10 days because of the IOF's raid on the hospital in December 2024, during which they evacuated both patients and medical staff. This caused a significant deterioration in my husband's health as toxins accumulated in his body, causing his body to swell. He could no longer breathe or walk, was constantly coughing, suffered from anemia, and needed regular blood transfusions. During the aggression, we also struggled to find his medications, and his condition worsened due to the lack of healthy food, such as vegetables and fruits. He asked me to prepare vegetable soup for him, but I could not, as a real famine was spreading in northern Gaza Strip. Additionally, we couldn't even get flour, so we mixed wheat with corn to make flour. We were also forced to drink salty water and rainwater, which tasted like gunpowder. My husband's health continued to deteriorate due to the repeated interruptions in his dialysis sessions, and he passed away in late February 2025."

Moreover, kidney failure patients, who were forcibly displaced to southern Gaza Strip, endured tragic conditions that posed a serious risk to their lives. Zakaria As'ad Ahmed al-Dalou (40), a brother of a kidney patient named Yehia As'ad al-Dalou, said to PCHR's researcher: "My brother Yehia was diagnosed with kidney failure at the beginning of 2023 and received three dialysis sessions per week, each lasting four hours, at Al-Shifa Medical Hospital. Since the onset of the aggression, we faced extreme difficulty in reaching Al-Shifa due to the IOF's relentless bombardment across the Gaza Strip and their siege of the hospital. As a result, my brother was unable to undergo dialysis sessions for more than 20 consecutive days. This led to a severe deterioration in his health, as toxins in his body increased and fluid accumulated around his lungs and heart. Additionally, he began continuously vomiting, struggled to breathe or walk, and suffered sleeplessness at night, along with blisters spreading on his back. He also suffered from intense pain, constant fatigue, and exhaustion, rendering him unable to walk. At that time, essential medications were unavailable, particularly Lasix, which is used as a diuretic. He also struggled to obtain healthy food, having no choice but to rely on canned food and drink salty water. The harsh conditions imposed by the IOF in northern Gaza Strip forced him to decide to evacuate to the southern strip in search of treatment. On the first day of the ceasefire in November 2023, my brother and his wife evacuated to the south in search of a hospital or health center to receive dialysis sessions. They walked approximately 10 kilometers from al-Zaytoun neighborhood to al-Nuseirat refugee camp, passing through Nitzarim military checkpoint. Upon reaching southern Gaza Valley, he was exhausted and in immense pain before losing consciousness due to extreme fatigue. He was transported by an ambulance to the Intensive Care Unit (ICU) at Nasser Medical Complex in Khan Younis, where he remained for three days. After his condition stabilized, he began struggling to receive dialysis sessions at Nasser Medical Complex, where dialysis hours were reduced to only four hours per week due to the overwhelming number of patients. When the IOF besieged Nasser Medical Complex, my brother was forced to flee once again. He sought refuge in Abu Yousef Al-Najjar Hospital in eastern Rafah to receive dialysis service. However, he could only undergo dialysis for fewer hours than required, which worsened his health condition. He spent an entire day just to receive two hours of dialysis. He also required frequent blood transfusions. Like other patients, he was forced to leave Rafah after the IOF issued forcible evacuation orders in early May 2024 and threatened to invade the city. However, he was evacuated in an ambulance while in a coma and was taken to the ICU at Al-Aqsa Martyrs Hospital in Deir Al-Balah. Unfortunately, he passed away the following day, on 07 May 2024."

2. Deterioration of the bodily and mental health of kidney failure patients

Kidney failure patients in the Gaza Strip were left to fight for survival, desperately searching for any glimmer of hope that could lead them to a medical facility offering dialysis services, especially those remaining in Gaza City and northern Gaza. On 13 October 2023, the IOF issued orders for the residents of Gaza City and northern Gaza to completely evacuate and move to southern Gaza valley. The IOF then began to besiege hospitals as a prelude to storm them, depriving kidney failure patients of reaching dialysis centers within these hospitals. This resulted in a rise in toxins and potassium levels in their bodies, weakened immune system, anemia, decreased protein levels in the blood, and fluid accumulation around the heart, lungs, and stomach.

To implement its criminal plans aimed at depopulating Gaza City and northern Gaza, the IOF committed the most heinous crimes. In addition to relentless bombardment, killings, and intimidation, Israel destroyed all aspects of life in Gaza City and northern Gaza and used hunger and thirst as weapons of war. It also blocked all essential supplies needed to operate vital facilities that provide services to civilians, including healthcare facilities. These acts constitute a fundamental component of acts prohibited under Article II of the Genocide Convention. They also amount to ethnic cleansing and constitute war crimes and crimes against humanity under international humanitarian law.



The following testimonies show the extent of harm inflicted on kidney failure patients in their desperate search for healthcare, both physically and mentally, leaving deep and difficult-to-heal emotional scars.

‘Atallah Sami al-Essi (35), a kidney patient, married, and lives in al-Tuffah neighborhood in eastern Gaza City, said to PCHR’s researcher: “I have been undergoing dialysis at Al-Shifa Medical Complex for 13 years, receiving 12 hours of dialysis per week, divided into three four-hour sessions. On 07 October 2023, I had a dialysis session in the nephrology department. When I finished my session at 13:00, I couldn’t find transportation to return home, and I was extremely exhausted. I had no choice but to walk. I managed to receive my dialysis sessions only within the first week of the aggression. By late October 2023, the IOF began besieging Al-Shifa Medical Complex as a prelude to storm it. I was able to reach the hospital and underwent my dialysis session. When I left the nephrology department, I got into a car with a driver who had to take the southern road of the complex to avoid Israeli snipers stationed on buildings around the hospital. In the evening, the IOF had completely tightened their siege on Al-Shifa Medical Complex, preventing the entry and exit of patients and people. I was very scared and worried about how I would be able to continue my dialysis sessions. I was unable to undergo dialysis for seven days and had to follow a very strict diet to maintain my health and prevent the accumulation of toxins in my body. I only drank a small cup of water and ate minimal food. Then, I learned that Noora Al-Kaabi Center at the Indonesian Hospital was still providing dialysis services. With great difficulty, I managed to reach the hospital and underwent a dialysis session. However, I was unable to receive another session for five more days due to the IOF’s raid on the hospital. On the first day of the ceasefire in late November 2023, I returned to Noora Al-Kaabi Center, but found it completely destroyed, along with the power generator and water desalination plant. The hospital director informed me that reopening the dialysis department was impossible. I returned home in a state of extreme exhaustion, unable to walk. Meanwhile, my father urged me to evacuate to southern Gaza Strip to continue dialysis and preserve my life. My brother Mo’min (25) and I evacuated to Nasser Medical Complex in Khan Yunis, where I began receiving dialysis for only 4 hours per week. After I finished my first session, I had nowhere to sleep, so my brother and I spent the night out in the hospital yard. Later, kind people moved us to a tent set up to shelter kidney failure patients. We stayed at Nasser Medical Complex until the IOF stormed it, trapping us inside the nephrology department. A quadcopter drone photographed us while we were inside. We could hear tanks’ roaring, shelling, and random bombardment. We endured moments filled with terror and fear until the IOF ordered us to evacuate the complex and walk through a checkpoint set up in the vicinity the complex. We headed to Rafah, near Abu Yousef Al-Najjar Hospital that was overwhelmed with hundreds of patients. I resumed dialysis for only two hours twice a week. After the IOF invaded Rafah, we moved to al-Aqsa Martyrs Hospital in Deir Al-Balah, where I struggled to receive four hours of dialysis per week. This worsened my health condition, especially with the lack of healthy food, as we had no choice but to eat canned goods and legumes. This increased potassium and toxin levels in my body. Everything I did before the war to maintain my health was in vain. Additionally, my father passed away while I was in southern Gaza Strip. I had not seen him for nearly a year and a half. The pain of not being able to bid farewell to him or attend his burial filled me with despair and ache in my heart. After the ceasefire, we returned to Al-Shifa Medical Complex for dialysis, but I now receive only six hours per week, which is not enough. We also struggle to find transportation to reach the dialysis sessions.”

IV. International Law Perspective

International humanitarian law obliges Israel, as the occupying power in the occupied Palestinian territory (oPt), including the Gaza Strip, West Bank, and Occupied East Jerusalem, to provide healthcare to the population under occupation and ensure the provision of essential needs to the civilian population. Under Article 57 of the Fourth Geneva Convention, the Israeli authorities must take suitable and timely arrangements for the care and treatment of patients in hospitals in the case of the latter's requisition. According to Articles 55 and 56 of the same convention, the occupying authorities must ensure the foodstuffs and medical supplies of the population, as well as maintain medical facilities, services, and hospitals.

Article 18 of the Fourth Geneva Convention prohibits the targeting of civilian hospitals organized to give care to the wounded and sick, the infirm and maternity cases, but shall at all times be respected and protected by the Parties to the conflict. This protection extends to patients, the wounded, and medical personnel. Israel's deliberate and directed attacks on hospitals and locations where sick individuals gather, as seen in the raid of hospitals and the destruction of dialysis centers without military necessity, constitutes a war crime under Article 8 of the Rome Statute of the International Criminal Court (ICC).

During the aggression, the IOF imposed inhumane living conditions on all civilians in the Gaza Strip, severely affecting vulnerable groups, including patients, women, children, and the elderly. Kidney failure patients, especially those trapped in Gaza and the northern Gaza Strip, endured catastrophic living conditions. They were left without hospitals or centers offering dialysis services, in addition to being deprived of medication, food, and water suitable for their health condition, which deteriorated significantly due to these intentional circumstances, and amid the continued closure of Gaza's crossings and the prevention of patients from being transferred for treatment abroad.

These criminal acts deliberately imposed by the IOF are linked to paragraphs "b" and "c" of Article II of the 1948 Genocide Convention, embodied in "causing serious bodily or mental harm to members of the group and deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part." The IOF's deliberate acts during the aggression led to the complete collapse of the healthcare system, rendering most medical facilities, including hospitals, dialysis centers, and primary healthcare centers, out of service, amongst them 6 out of 7 dialysis centers. As a result, the health conditions of hundreds of patients deteriorated, causing the deaths of 41% of kidney failure patients and inflicting severe psychological harm on them after the destruction of their healthcare centers, the harsh living conditions they endured, and the constant worries and fears of not being able to receive dialysis sessions.

These acts fall under the ICC jurisdiction, according to paragraph (c) of Article (6) of the Rome Statute and constitute a "crime against humanity" committed as part of a widespread or systematic attack directed against the Palestinian population under Article (7) of the same statute.

Asma Mohammed Lubbad (26), a kidney patient, resident of Jabalia, widow, and mother of 2-year-old child, said to PCHR's researcher: "I have been suffering from kidney failure since 2021, and I was receiving dialysis sessions at Noora Al-Kaabi Center at the Indonesian Hospital in northern Gaza Strip. On 07 October 2023, I was scheduled to undergo a kidney transplant at 8:00, after completing the necessary tests, and my father had donated one of his kidneys to me. However, due to the military aggression, the operation was canceled, and I returned to dialysis. I underwent dialysis for several weeks at Noora Al-Kaabi Center. As the bombing intensified and the military vehicles advanced into the Indonesian Hospital, my mother, brothers, and I evacuated to Khan Yunis, near Nasser Medical Complex. After the IOF invaded Khan Yunis, we moved again to Rafah, near Abu Yousef Al-Najjar Hospital. During that period, I underwent dialysis twice a week at night due to the overcrowding of patients during the day. My dialysis session started at 2:00, and once it was finished, I remained in the department until the morning, then returned to the place we sought refuge in. I felt exhausted as if I hadn't undergone dialysis. The repeated evacuations were a constant source of fear, in addition to the lack of healthy food. We were forced to eat canned food, which raised the phosphorus and potassium levels in my blood. I fell into a deep spiral of sadness when I learned that my husband had been killed in October 2024. He was my only hope in this life, and I longed to return to Gaza just to see him again. I need more dialysis hours. Currently, I undergo dialysis at Al-Shifa Medical Complex, but only for six hours per week. My house and my family's house were completely destroyed during the aggression, and we have no shelter except for a tent."

Currently, there are 728 kidney failure patients in the Gaza Strip, distributed across four dialysis centers: 280 patients at Al-Shifa Medical Complex, 50 patients at al-Zawayda Field Hospital, which was established during the military aggression, 260 patients at Nasser Medical Complex, and 138 patients at Al-Aqsa Martyrs Hospital. The dialysis department at the Al-Rantisi Pediatric Hospital recently resumed operations.¹² Amid a scarce resources, medications, and medical consumables, kidney failure patients are only able to receive half of the dialysis sessions they are supposed to, using only 62 dialysis machines, after the IOF destroyed approximately 78 out of 140 dialysis machines.



12- Ibid.

Israel has also failed to comply with any of the [three](#) provisional measures issued by the International Court of Justice (ICJ), which called on Israel to take all measures within its power to prevent the commission of all acts within the scope of Article II of the Genocide Convention. The Court ordered Israel to ensure with immediate effect that its military does not commit any acts of genocide and to take effective and immediate measures to enable the provision of urgently needed basic services and humanitarian assistance to address the difficult living conditions faced by Palestinians in the Gaza Strip. However, Israel has not complied with these measures and has intensified its military attacks on the Gaza Strip.

Moreover, the deprivation of treatment for kidney failure patients constitutes a violation of the right to health under international human rights law, particularly Article 12 of the International Covenant on Economic, Social, and Cultural Rights. The Israeli authorities are responsible for the realization and implementation of this right in the oPt, according to the ICJ Advisory Opinion on the Legal Consequences of the Construction of a Wall in 2004.

Conclusion and Recommendations

The report concludes that there are criminal acts committed by the IOF during their ongoing aggression in the Gaza Strip. These acts amount to war crimes and crimes against humanity according to the Statute of the ICC and are also linked to what is prohibited under paragraphs (b) and (c) of Article II 1948 Genocide Convention. These acts were accompanied by the Israeli leaders' openly declared intention to exterminate the Gaza Strip population.

The IOF's deliberate targeting of the healthcare system in the Gaza Strip has rendered 6 out of 7 dialysis centers non-operational. Patients were left without healthcare, besieged by Israeli military vehicles, and tanks prevented them from accessing the destroyed hospitals and health centers. They groaned in pain, fighting for their survival, unable to find food, medicine, or a specialized dialysis center.

Many of their dialysis sessions were frequently interrupted, and the duration of the sessions was reduced below the minimum required, which worsened the health conditions of hundreds of patients. This resulted in the deaths of 472 kidney failure patients during the aggression, representing 41% of the total number of kidney failure patients, and led to the further deterioration of the health condition of many others.

In light of the Israel's failure to fulfill its obligations and its persistence in committing acts of genocide in various forms, the latest was blocking the entry of all humanitarian aid, including medicine and food, from 02 March 2025 to this date, as well as the resumption of mass killings of civilians in the Gaza Strip since 18 March 2025, which will have serious repercussions on health conditions and threaten the lives of the remaining kidney failure patients, PCHR calls on the international community to pressure Israel to stop the genocide, allow the entry of medicines, medical consumables, and dialysis machines needed to save the lives of the remaining kidney failure patients. PCHR also calls for providing effective alternatives for kidney failure patients, including allowing them to travel abroad for treatment.



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