



PALESTINIAN CENTRE
FOR HUMAN RIGHTS

The Silent Death

**Cancer Patients Left to Die Waiting:
Victims of Genocide in the Gaza Strip**



May - 2025

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Introduction

The situation for cancer patients in the Gaza Strip was already dire before the onset of the genocide currently being committed by the Israeli Occupation Forces [IOF] since October 7, 2023. For over 18 years, the Palestinian Centre for Human Rights [PCHR] has documented hundreds of violations against these patients, including denial of medications, treatment protocols, and travel for care—leading to the deaths of hundreds who were denied their right to treatment outside Gaza.*

Today, amid the brutal and inhumane realities imposed by this genocide on the population of the Gaza Strip, and over 17 months of ongoing military assault by the IOF, cancer patients are living in unprecedented conditions. Key treatment centres—including the Turkish-Palestinian Friendship Hospital for adult oncology and Al-Rantisi Hospital for paediatric cancer—were destroyed after being used as military bases. Patients are now left to suffer in a deadly wait, deprived of even the most basic rights, making them among the most affected victims of this genocide.

This report documents the suffering of cancer patients over a year and a half, deprived of medicine and proper nutrition, repeated forcible displacement from their homes and treatment centres. It outlines a pattern of collective punishment, obstructing hundreds from travelling for life-saving care, and denying return to Gaza after treatment—actions the report frames as components of genocide inseparable from broader crimes against Gaza’s civilian population.

The report’s evidence suggests that the dismantling of cancer care infrastructure and the restrictions on patients’ freedom to travel are part of a deliberate policy by Israel to slowly and mercilessly kill them. The number of deaths among cancer patients now equals all previous deaths during the blockade combined, driven by physical and psychological harm through denied access to life-saving services and critical specialised operations unavailable inside Gaza’s hospitals.



* The PCHR has documented, through its reports, the Israeli violations of the right to health, highlighting the situation of patients in the Gaza Strip throughout 18 years of the unlawful blockade.

The report also highlights a war crime committed by the IOF against patients more broadly. Bureaucratic and arbitrary travel systems are killing patients through prolonged delays, and even when travel is approved, patients and companions are often deported with no guarantee of return—violating international humanitarian law. These practices clearly reflect a policy of forced displacement and the use of treatment as leverage, actions criminalised under the Rome Statute of the International Criminal Court.

PCHR concludes with urgent recommendations, including calls for international intervention to save thousands of lives, end Israeli impunity, and stop the use of medical treatment as a tool of political pressure in the broader context of genocide.



A father bids farewell to his child, who is suffering from cancer, before the child travels abroad to receive medical treatment.

Violation of International Law and Escalation of the Crime of Genocide Against Cancer Patients in the Gaza Strip

At the height of its impunity for decades of crimes committed against the Palestinian people since 1948, Israel, as an occupying power, has cast aside all international laws and conventions, openly defying the international justice system by waging a relentless war against defenceless civilians in the Gaza Strip. For over a year and a half, it has continued its military operations, carrying out a full-fledged crime of genocide against the population of Gaza.

This escalation comes as cancer patients in Gaza grow increasingly anxious for their survival, despite being among the categories of civilians protected under the Fourth Geneva Convention of 1949 and customary international law, including the Hague Convention of 1907, which safeguards civilians' right to healthcare during armed conflict and under occupation. Yet Israel persists in its punitive actions that deliberately harm patients, denying them access to treatment both inside and outside the Strip—actions that blatantly violate Article 16 of the Fourth Geneva Convention, which guarantees special protection and respect for the wounded, sick, elderly, and pregnant women, as well as Article 21, which requires respect and protection for medical transport operations.

Israel also continues to violate Article 55 of the same convention, which obligates the occupying power to provide food and medical supplies to the population to the fullest extent of its capabilities. Through its imposition of a severe blockade, Israel has effectively destroyed the healthcare system in Gaza, abandoning thousands of cancer patients to a cruel fate—a policy in direct violation of Article 33 of the Geneva Convention, which strictly prohibits collective punishment.

This report presents evidence that the actions of the Israeli occupying forces have led to the deaths of 615 cancer patients over the past 18 months and denied nearly 90% of cancer patients the right to travel freely for treatment outside Gaza, where hospitals are no longer able to care for them. These actions clearly fall under the third act listed in the Genocide Convention—deliberately subjecting a group to living conditions intended to bring about their physical destruction in whole or in part.

Israel's persistent denial of access to medical facilities for cancer patients was starkly demonstrated in the destruction of the Turkish-Palestinian Friendship Hospital on 21 March 2025. This hospital had been a specialised centre serving over 12,500 patients. Its destruction caused a major humanitarian crisis, resulting in the deaths of many patients. Israel's broader practices have entrenched what can only be described as a "deadly wait" for approximately 2,700 cancer patients in critical condition due to travel delays and obstacles to accessing treatment abroad. Meanwhile, all patients have been denied consistent access to essential medications and care—further exposing them, along with the rest of Gaza's civilian population, to conditions of severe physical and psychological harm that amount to intentional destruction.

Genocide, as a deliberate and systematic campaign to destroy a group in whole or in part, is increasingly evident in Israel's conduct. Israel's plans have become increasingly clear through the intentional destruction of the healthcare system and the dismantling of all its operations in Gaza—leaving only one pathway to treatment: the conditional exit of patients and their companions, subject to Israeli approval [security clearance].

Many patients are effectively being left to die in crumbling hospitals with no resources, while others are only allowed to leave Gaza under slow and restrictive travel mechanisms that offer no chance of return. This enforced one-way departure not only displaces patients but often extends to their families, contributing to a future humanitarian tragedy of divided families and forced population transfers—core elements aimed at the systematic extermination of Gaza's population, whether in part or in whole.

We are thus witnessing compounded crimes that together constitute genocide—among them, a crime committed openly under the pretext of medical evacuation, all amid dangerous international silence. This silence enables Israel's broader strategy of forced displacement, which falls under Article 7 of the Rome Statute and constitutes a crime against humanity as defined in paragraph (d).



A cancer patient waits for their turn to receive treatment at the field Friendship Hospital in the southeast of Khan Younis city.

1. Inflicting Severe Physical and Psychological Harm on Cancer Patients

Since the first days of the genocide being carried out by Israel since October 2023, the IOF have deliberately targeted the healthcare system. They began with issuing illegal and forced evacuation orders for around 1.2 million Palestinians from Gaza City and its northern areas, which contain 21 hospitals, including the Turkish-Palestinian Friendship Hospital, specialized in treating adult cancer patients, and Al-Rantisi Hospital, which treats children's cancer. It wasn't long before these hospitals were converted into military barracks before being completely destroyed.*

These crimes inflicted severe physical harm on the population of Gaza, escalating the already grave concerns of cancer patients regarding their lives, as they were deprived of even the basic requirements for their health, with living conditions that severely undermined their ability to wait for treatment opportunities outside Gaza.



Scenes of chaos and panic among cancer patients at the Turkish Friendship Hospital before its evacuation in late October 2023.

1.1. Leaving Cancer Patients Die Without Hospitals

These crimes inflicted severe physical harm on the population of Gaza, escalating the already grave concerns of cancer patients regarding their lives, as they were deprived of even the basic requirements for their health, with living conditions that severely undermined their ability to wait for treatment opportunities outside Gaza.¹

According to the Rome Statute that established the International Criminal Court, this action constitutes a war crime and falls under the acts listed in Article 2 of the Genocide Convention, particularly paragraph “c,” which states that deliberately subjecting a group to living conditions intended to destroy them physically, in whole or in part, is an act of genocide. The hospital was a specialized institution that provided care for cancer patients, and this destruction clearly reflects the IOF’s deliberate policy of destroying the healthcare system in Gaza as part of their wide-scale military assault, a conclusion confirmed by the United Nations’ Independent Commission of Inquiry.²

* The IOF continued to use Al-Rantisi Children's Hospital as a military base for four months at the outset of their assault. They also maintained their presence inside the Turkish-Palestinian Friendship Hospital for 15 months and did not restore it to serve cancer patients even after the ceasefire in January 2025. When the assault resumed in March 2025, the IOF advancing along the Netzarim Axis detonated the Turkish-Palestinian Friendship Hospital on 21 March 2025, thereby extinguishing the hopes of thousands of patients for access to treatment within the Gaza Strip.

1- [The Bombing of the Turkish-Palestinian Friendship Hospital Is a War Crime and a Further Act of Genocide](#).

2- [Report of the United Nations Independent International Commission of Inquiry, March 2025](#)

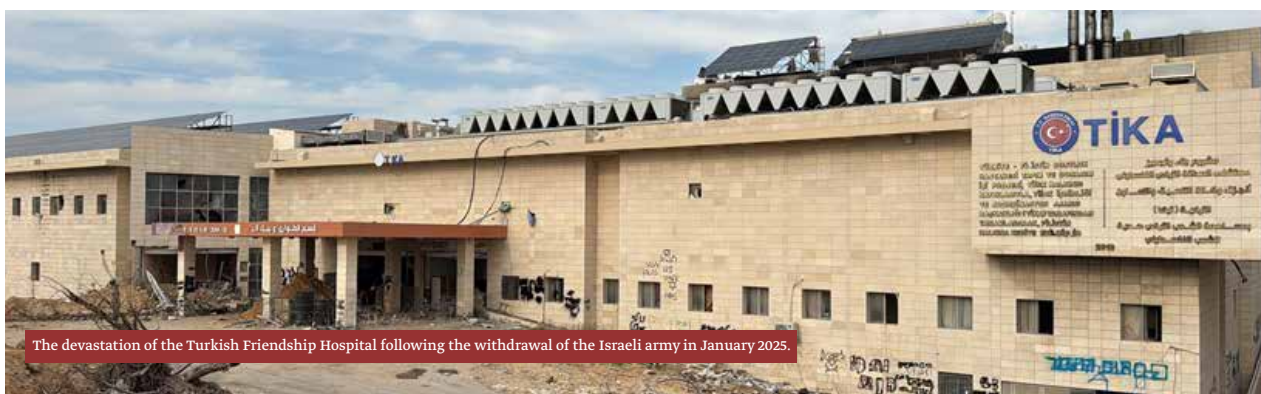
Before October 2023, and the subsequent crimes against humanity, cancer patients were already among the most affected due to the ongoing Israeli blockade for 18 years. The health-care system in Gaza was unable to meet the increasing demands of treating approximately 12,500 cancer patients, who suffered chronic shortages in medicine and medical equipment. As a result, 57% of the cancer treatment services were provided outside Gaza due to the unjust blockade.³

With the start of the Israeli military assault on October 7, 2023, forced evacuation orders targeted 1.2 million Palestinians from Gaza City and the northern regions, vital areas that contained the most important cancer treatment hospitals serving patients from all parts of Gaza.

The IOF didn't stop there; they deliberately stormed these hospitals, turning some of them into military barracks for long periods before completely destroying them, such as the Turkish-Palestinian Friendship Hospital and the cancer department at Al-Rantisi Children's Hospital.⁴

The destruction of these hospitals halted cancer treatment services within Gaza, forcing staff and most patients to flee to the central and southern parts of the Strip, without a specialized place to treat cancer patients for an entire year. During this period, cancer patients endured harsh conditions, including searching for medicine and suitable medical care while trying to survive the continued Israeli airstrikes across Gaza. The repeated forcible displacement made it increasingly difficult for them to reach hospitals or healthcare facilities, especially since these were ill-equipped to treat them, and their medications, including painkillers, ran out by more than 85%.⁵

This created a real disaster, threatening the lives of the patients and deteriorating their health and psychological conditions, fueling feelings of despair and intense anxiety due to the loss of opportunities for treatment within Gaza.



3- Testimony provided by Dr. Sobhi Skaik, Director of the Turkish-Palestinian Friendship Hospital, in a phone interview conducted by a PCHR field researcher on 15 February 2025.

4- Before its destruction on 21 March 2025, satellite imagery analysis from November 2023 to April 2024 showed a significant increase in the number of Israeli military vehicles inside [the Turkish-Palestinian Friendship Hospital, which the IOF had turned into a military base](#).

5- Palestinian Human Rights Organizations, Press Release: "Following the Targeting of the Remaining Medical Facilities in the Southern Gaza Strip, a Complete Collapse of the Health System in Gaza Is Imminent," published on 30 January 2024.

■ **Locations Providing Cancer Treatment Services in Gaza during 2023-2025** ⁶

Governorate	Locations for Treatment Services	Type of Services	Service Period
All Governorates	Turkish-Palestinian Friendship Hospital	Diagnostic and treatment services	Until 04/11/2023
	Al-Rantisi Children's Hospital	Diagnostic and treatment services	Until 04/11/2023
Khan Yunis	Dar Al-Salam Hospital	Available medications - Patient travel procedures	09/11/2023 to 16/12/2024
Rafah	Fatima Zahra Clinic	Available medications - Patient travel procedures	20/12/2023 to 06/05/2024
Khan Yunis	Nasser Medical Hospital	Limited diagnostic and treatment services	10/05/2024 to 01/10/2024
Khan Yunis	Field Friendship Hospital	Specialized diagnostic and treatment services with limited resources	01/10/2024 to 19/03/2025
Gaza City & North Gaza	Sections in Evangelical and Halao International Hospitals	Healthcare services for patients	01/04/2024 - Ongoing

After a year of hundreds of cancer patients being deprived of treatment and medical follow-up, even at the most basic level, a field hospital was established in October 2024 next to the European Gaza Hospital in the southeast of Khan Younis, with support from international medical organizations. This facility became a center for urgent medical follow-up, offering available therapeutic protocols with a clinical capacity of 20 inpatient beds and 20 beds for day care. The first challenge faced by medical staff upon starting their work was the loss of records that matched current treatment plans with previous ones for cancer patients (PHR). This significantly affected the quality of healthcare provided, necessitating new tests despite the significant shortage of medical equipment.⁷



6- Previously cited source; data obtained by a PCHR field researcher from the Health Information Department at the Ministry of Health.

* It was destroyed on 21 March 2025.

7- Previously cited source: Dr. Subhi Skaik, the Director of the Turkish-Palestinian Friendship Hospital

Patient M.L., 31 years old, stated that he fled to Rafah at the beginning of the war, hoping to travel for treatment, as no treatment for his illness was available in the hospitals in Gaza. However, over the span of a year and a half, he was unable to travel, and his health deteriorated due to not receiving treatment. He shared with the PCHR's Field Researcher:

"Months before the start of the war, I was diagnosed with lymphoma, and due to the lack of treatment in Gaza hospitals, I was referred to Egypt for surgery to remove 10 lymph nodes where the cancer had spread. The doctor had to leave some nodes close to the brain nerves due to the high surgical risk. I returned to Gaza with a recommendation from doctors for regular checkups and to complete the process for receiving radioactive iodine therapy of 150ml in Egypt, which was supposed to take place in October 2023. From the first moments of the war, my family and I moved to Rafah, hoping to travel to continue my treatment. In the first few months, I tried to visit cancer follow-up centers, but they only offered administrative services for renewing referral documents and providing whatever medications were available. In my case, only painkillers were provided, and I often had to buy them myself. I visited all the health centers designated by the Ministry of Health for cancer patients, but I was not given any treatment. So, I focused all my efforts on the chance of traveling while my condition worsened, with the right side of my neck swelling, and my voice changing. Due to the intense pain, I could not sleep normally without painkillers and sedatives. Before the Rafah crossing was closed in May 2024, I renewed my medical referral papers twice, first in December 2023 and then in March 2024. Every time I reviewed them, the response was negative, as the IOF prevents patients from younger age groups from traveling. When the crossing was closed, I felt my end was near since there is no treatment available in Gaza hospitals, and it's been a year and a half since my scheduled radioactive iodine sessions. I renewed my referral papers for the third time to obtain an opportunity for medical evacuation for myself and my family of four, and my only option is to wait. The challenges of travel are compounded by the lack of available treatment in the Gaza Strip. This suffering is further deepened by the difficult living conditions that all cancer patients endure. We are forced to rely on unhealthy food that weakens our immune systems. I have even lost my job and now survive on whatever aid is available—beyond that, I cannot provide food for my family, which has been displaced more than five times. I now live in a tent I set up in front of my destroyed home, spending most of my time lying down from sheer exhaustion, clinging to the hope of receiving at least a portion of my right to treatment as soon as possible."

Given the number of patients, the capacity of the Al-Sadaqah Field Hospital is insufficient and falls short of meeting even the minimum requirements for cancer treatment. The hospital is currently operating with only about 10% of its original medical staff—approximately 280 healthcare workers were employed at the Turkish-Palestinian Friendship Hospital before the assault. This shortage follows the departure of four specialist doctors and the killing of two out of the five pathologists—a specialty critical to the diagnosis and examination of cancer patients.

According to the hospital's statistics, between October 2024 and March 2025, doctors diagnosed an average of 90 new cancer cases each month. Yet, only 600 patients are able to visit the hospital monthly to receive limited treatment protocols provided by the World Health Organization, whose supplies began to run out gradually after the siege intensified in early March 2024. Most of the available treatments are limited to certain chemotherapy drugs for breast cancer and colon cancer patients. However, there is a shortage of more than 85% in treatment protocols for other types of cancer.⁸

During the Israeli military operations, patients have faced difficulties reaching the field hospital, especially those who returned to Gaza and northern areas after the January 2025 ceasefire.⁹ A fuel shortage, due to the closure of the crossings in March 2025, exposed over 70 cancer patients to significant risks, with four cancer patient deaths recorded during this period due to lack of medical care and inability to access treatment centers.¹⁰



8- Information obtained by the PCHR's field researcher through a phone interview with Dr. Mohammed Abu Nada, Medical Director of the Turkish-Palestinian Field Hospital, on 26 March 2025

9- Previously Cited Source.

10- Statement from the Palestinian Medical Relief Society (MAP) <https://reliefweb.int/report/occupied-palestinian-territory/map-demands-accountability-after-destruction-gazas-only-specialised-cancer-hospital>

1.2. Deprivation of Medication and Medical Supplies for Cancer Patients

Cancer patients in Gaza have been deprived of their medication for extended periods due to the IOF tightening the siege on Gaza over the past year and a half. The gap in the availability of medication and medical supplies in Gaza's hospitals has widened, particularly with the increased pressure on healthcare facilities caused by the ongoing Israeli military operations. The IOF not only targeted cancer treatment centers but also restricted the entry of medical supplies, thereby denying cancer patients their basic healthcare rights.

According to doctors at the Turkish-Palestinian Friendship Hospital, as reported to PCHR, the lack of available treatment protocols has led to many cancer patients stopping their chemotherapy treatments. Doctors estimate that over 3,000 cancer patients, including at least 600 new cases of breast cancer patients, have not begun treatment due to the dire situation.

The patients' condition has worsened, especially as they struggle to secure immediate travel opportunities to save their lives. Doctors highlight a severe shortage of over 85% of the essential cancer treatment medications, including Herceptin, Glivec, Taxol, and Neupogen.

Patients prescribed biological therapy protocols, such as RCHOP, are facing significant setbacks because of unavailable medications like Cyclophamide and Tuximab. Treatment with the FPLFOX protocol has become ineffective due to the consistent absence of Avastin, making medical service provision nearly impossible within Gaza. Consequently, the only remaining option for these patients is to seek treatment abroad, a prospect that remains elusive.¹¹

Despite the ongoing military actions that have destroyed medical equipment within hospitals, the inability to bring in diagnostic tools continues to restrict doctors' ability to diagnose cancer, particularly without the necessary radiation therapy equipment and various diagnostic tools, including PET scans and thyroid scans [Athyroidscan]. This leaves cancer patients in Gaza with no choice but to urgently travel for treatment.¹²



11- Testimony provided by Dr. Zaki Al-Zaqzoug, Oncology Consultant at the Turkish-Palestinian Friendship Hospital, in an interview conducted by a PCHR's field researcher on 27 February 2025.

12- Previously cited source; interview conducted by a PCHR's field researcher with Dr. Mohammed Abu Nada, Medical Director of the Turkish-Palestinian Friendship Hospital, inside the Turkish-Palestinian Friendship Hospital next to the European Gaza Hospital, on 27 February 2025.

Patient M.A., 34 years old, from Deir al-Balah city, has not received any medication since his diagnosis of seminoma cancer in September 2024. He shared with the PCHR's field research team:¹³ "In September 2024, I experienced unbearable pain in my testicles while working on a water cart in Deir al-Balah. Due to overcrowding in the public hospitals, I sought private medical care. The diagnosis was an enlarged left testicle with water around it. After several tests, I was recommended for a drainage operation on September 18, 2024, at Al-Awda Hospital in Nuseirat Camp. During the surgery, the doctors approached my brother and asked him to sign a consent form for the removal of a cancerous tumour. The request came as a shock to him, so he called in my father and my wife, as the decision was critical and could affect my reproductive health. After they agreed to take responsibility, the surgeons proceeded with the removal of the left testicle. A few hours after the surgery, I experienced severe pain. Since I had thought it was a minor procedure that wouldn't cause such intense discomfort, I was stunned when my family explained the true nature of the operation. I spiralled into a psychological crisis from the shock, overwhelmed by fear that my condition might worsen—especially knowing the struggles cancer patients face in Gaza. I was supposed to remain under observation at the hospital, but due to Israeli shelling in the vicinity, I had to leave prematurely. I later returned for essential tests, and was devastated to receive a diagnosis of seminoma cancer. This required another surgery on 25 October 2024, during which doctors removed the spermatic cord and the scrotum. The doctors recommended urgent chemotherapy sessions, but the treatment has not been available at all since then. I completed all the necessary travel procedures to seek treatment outside Gaza, but I am still waiting. Since my diagnosis, I haven't received a single dose of medication. A new swelling has now appeared on the right testicle, raising serious concerns about the progression of the disease. I continue to visit the Al-Sadaqah Field Hospital in the hope of accessing the chemotherapy I urgently need—but to no avail. Although the global recovery rate for this type of cancer is high, being without treatment for six months and unable to leave Gaza only deepens my fears for my life."



A pharmacist categorizing the limited supply of cancer medications at the field Friendship Hospital, which is experiencing a severe shortage.

13- The PCHR's field researcher obtained the patient's testimony on 26 March 2025..

1.3. Deprivation of Travel for Cancer Patients to Receive Appropriate Treatment

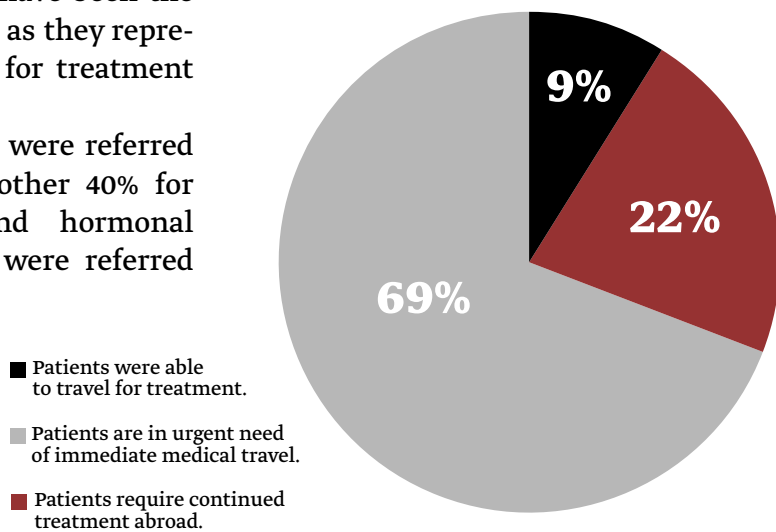
The IOF have created a catastrophic reality and inhumane environment in which they deliberately kill cancer patients and the injured in Gaza without mercy. While they have left most hospitals without specialized staff, medicine, supplies, and medical equipment, they have also intentionally obstructed and prevented the travel and evacuation of thousands of patients seeking treatment outside the Gaza Strip. This constitutes acts that amount to crimes against humanity, carried out over the last 17 months.

From the very beginning of the Israeli military attack, the IOF punished all Palestinian patients, halting the patient referral system through the Beit Hanoun "Erez" crossing to receive treatment in the West Bank and Jerusalem hospitals. They also placed numerous obstacles in the way of patients and injured persons attempting to travel via the Rafah crossing, which remained operational for travel until it was invaded by the Israeli military on May 7, 2024. The IOF intentionally hindered the departure of thousands of patients, while these patients had no access to treatment in Gaza following the repeated Israeli airstrikes that destroyed the Gaza Strip's most vital hospitals.

Cancer patients, in particular, have been the most affected by these policies, as they represented 26.5% of cases referred for treatment abroad in 2022.¹⁴

Forty percent of these patients were referred for radiation therapy, and another 40% for chemotherapy, biological, and hormonal treatments. Additionally, 20% were referred for nuclear scans.¹⁵

■ The Suffering of Cancer Patients Due to Obstructions to Medical Travel Abroad



According to the Ministry of Health, there are about 12,500 cancer patients in Gaza, of whom more than 3,000 cases were diagnosed over the past year and a half, coinciding with the genocide by the IOF. Of these patients, medical referral papers for over 7,000 patients have been processed since October 2023, but only around 1,100 patients managed to travel to a few Arab countries like the UAE, Jordan, Egypt, Turkey, and some European countries, mostly women and children.¹⁶

14- Palestinian Ministry of Health, Health Information Unit, Annual Report for 2022, published in May 2023.

15- Palestinian Centre for Human Rights, [Report on Treatment Requests Under Review](#), 2022

16- Data obtained by a PCHR's field researcher from the Health Information Department at the Ministry of Health during an interview with Mr. Zaher Al-Wahidi, 19 March, 2025..

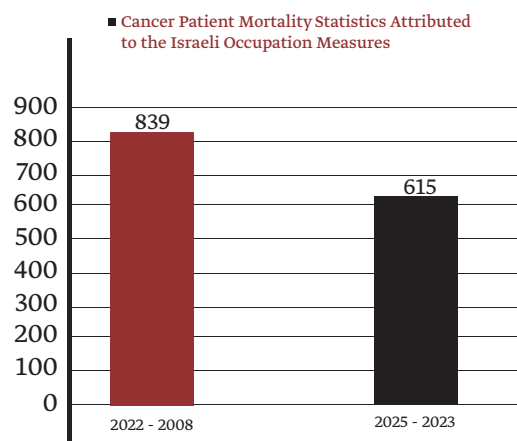
Considering the state of Gaza’s medical system, it is clear that all cancer patients urgently need to travel for treatment. As of now, 91% of the total number of cancer patients in Gaza have not been able to travel due to the tightening of Israeli security approval standards for male patients, and somewhat less restrictive standards that prevent hundreds of female patients under the age of 50 from traveling.

Since the closure of the Rafah crossing in May 2024, the process of referral for treatment outside Gaza requires Israeli bureaucratic procedures that impose waiting times unfit for the urgent medical conditions of many patients, including cancer patients. Israeli authorities require approval from third-party countries or international organizations to process patient travel requests, including written commitments regarding the patient's exit route, whether by land through the crossings with Egypt or Jordan or by air through Ramon Airport in Israel. These steps require complete coordination with Israeli authorities and submission of all requested data two weeks before evacuation.¹⁷ According to the PCHR’s data, patients’ waiting times exceed this duration, and they experience significant anxiety as they await approval. Additionally, they face the difficult decision of traveling without any hope of returning to Gaza to be with their families. During this waiting period, their health continues to deteriorate.

Israeli authorities impose additional obstacles, including requiring approval from a third-party country for patient entry and mandatory security screenings for patients and their companions, further delaying their travel. This inhumane process exacerbates the suffering of patients, particularly when these procedures take place in local hospitals, requiring additional time to acquire the necessary referral forms and complete coordination for travel.

The suspension of treatment procedures within Gaza’s hospitals and the prolonged wait for the opportunity to complete treatment outside the Strip has led to the death of 615 cancer patients, including 179 deaths in the first quarter of 2025. Currently, around 2,700 cancer patients remain in "deadly waiting" conditions, facing imminent death at any moment. Although their medical referral papers are complete, the IOF continue to obstruct their travel to continue treatment.¹⁸

This death toll is significant and alarming when compared to the total number of deceased patients documented by the PCHR due to obstacles imposed by the IOF between 2008-2022, which amounted to 839 patients waiting for permission to travel for treatment outside Gaza.¹⁹



17- [Mechanism for Evacuating Gaza Patients via a Third-Party Country](#).

18- Previously cited source.

19- Palestinian Centre for Human Rights, Report on Treatment Requests Under Review, 2022. <https://pchr.org/?p=19206>.

Samih Mohammad Zino, 58, as reported²⁰ to PCHR, his wife passed away two months after being diagnosed with leukaemia, without ever having the chance to travel to Egypt for treatment. No treatment was provided to her in any of the health centres in the Gaza Strip.

“My wife began experiencing severe bone pain at the beginning of December 2024. We initially thought it was due to the physical strain and exhaustion caused by the harsh living conditions resulting from the war on Gaza. Our family had been forcibly displaced from the Al-Zaytoun neighbourhood in Gaza City to Khan Younis. As her pain worsened, we visited a nearby medical point run by Hope Foundation. The attending physician examined her and referred us to Nasser Medical Complex for blood tests. There, the doctors admitted her to the internal medicine department for several days due to concerning test results. After three nights of observation, they informed us that she was suspected of having a type of leukaemia and should be referred to Al-Sadaqah Field Hospital to begin the medical referral process, since the required biopsy and laboratory tests were unavailable in Gaza. The news came as a heavy blow to my wife and had a serious impact on her mental health. Though we were just beginning the journey, her condition was rapidly deteriorating. While waiting for any form of treatment in Gaza, we completed all the paperwork necessary for her to travel abroad. I personally followed up on the referral process until, in mid-January 2025, we received a call from the World Health Organization confirming that her travel date was approaching, and that her companions had been officially registered.

We decided that two of our unmarried daughters would accompany her to expedite the Israeli security clearance process—an extremely difficult decision, especially as most patients leaving Gaza were not expected to return due to the ongoing war. It was heartbreaking to split our family in such dire circumstances.

On 15 February 2025, after we had returned to Gaza City during a ceasefire, my wife’s condition drastically worsened. I rushed her to Al-Ahli Baptist Hospital in Gaza City, but she passed away shortly thereafter—two months into her wait for the treatment she never received.”

According to health statistics, an average of 2,200 new cancer cases are diagnosed annually in the Gaza Strip, with an annual increase of 7-10%. Among these, approximately 500 new cases of breast cancer are recorded each year. Based on data from the years preceding the ongoing genocide, which has lasted for 17 months, breast cancer was one of the leading causes of death—accounting for 34.5 deaths per 100,000 people. It ranked second only to lung cancer as a cause of cancer-related mortality in Gaza. Therefore, the destruction and closure of hospitals and approximately 80 primary healthcare centres, along with the absence of early cancer screening, pose a serious threat to the health and survival of cancer patients.²¹

In a statement by Dr. Fadi Alawneh, a Jordanian surgical oncologist who performed 20 cancer tumour removal surgeries in Gaza in November 2024 as part of a medical mission affiliated with the International Mercy Foundation, he said:²² “Gaza’s health system lacks radiation therapy, hormone receptor testing related to breast cancer, targeted therapies, biological treatments, and radioactive iodine. I can confidently say that all cancer patients in the Gaza Strip need to travel abroad to receive comprehensive treatment that respects their humanity.”

20- The PCHR’s field researcher obtained the testimony on 26 March 2025.

21- Data obtained by a PCHR researcher from the Health Information Department at the Ministry of Health during an interview with Mr. Zaher Al-Wahidi on 19 March 2025.

22- [Media statements](#) provided by the doctor to Al Jazeera News website, November 2024.

Mrs. S.N., the mother of 12-year-old, Tareq, who was diagnosed with leukaemia a year after the start of the genocide in Gaza, stated that doctors suspected her son's illness may have been caused by exposure to white phosphorus dust and toxic gases from Israeli missiles—especially as the family remained in Gaza City and refused to evacuate south. She told the PCHR's field research team ²³: “My son suffered from severe bone pain, and after several attempts, we managed to reach Al-Ahli Baptist Hospital in Gaza City despite the dire security conditions during the IOF's military operation in northern Gaza. I consulted several doctors in the north before eventually going to the Arab Ahli Hospital. After a number of tests, the doctors suspected leukaemia and said he needed a bone marrow biopsy to confirm the type and stage of the disease. This diagnosis was made without access to proper equipment or treatment protocols due to the siege on northern Gaza. Now, after completing the paperwork for his medical referral, my son has been waiting four months for a chance to travel for treatment. After the ceasefire agreement in January 2025, I expected Tareq would be urgently transferred, but when I checked his case, I was shocked to learn that Israeli security had rejected his application without any justification. This delay puts his life in grave danger. I'm terrified of losing him. Every day I watch his condition deteriorate. Due to his low immunity, he now spends his days isolated in a bed at Al-Helou International Hospital to avoid infections and prevent any bleeding episodes.”



A child with cancer waits for their turn to travel abroad for medical treatment.

23- The PCHR researcher obtained the testimony on 2 February 2025.

2. Deliberate Exposure of Cancer Patients to Harsh Living Conditions

The IOF have systematically pursued a policy of collective punishment by starving and dehydrating the entire population of the Gaza Strip. This impact is even more severe on vulnerable groups, particularly sick women and children. These actions were accompanied by the imposition of harsh living conditions, as residents were forced to flee multiple times—stripped of their basic rights to food, clothing, and shelter—and left exposed to the spread of infectious diseases. These dire conditions have persisted for 17 months of continuous military assaults and warfare, reaching their peak by the end of the first year of the ongoing genocide in Gaza. This was marked by intensified military operations in the northern governorate, where residents were forcibly displaced through starvation and the systematic destruction of hospitals and healthcare facilities.

Food insecurity plummeted, worsening over long periods as all food supplies were depleted, and the occupying forces destroyed most local food production infrastructure. Civilians, including patients, were forced to rely on aid and imported commercial goods—leaving Israel in full control of humanitarian conditions and continuing to use hunger as a weapon for political coercion. Life has become nearly impossible in large parts of Gaza due to the destruction of vital infrastructure.

Throughout this offensive, cancer patients have been subjected to life-threatening conditions that have already claimed hundreds of lives. Thousands were forced to live in tents or overcrowded shelters unfit for their needs. Many gave up on treatment entirely due to deteriorating mental health, especially those requiring follow-up care after surgery.

These physical and psychological pressures were compounded by extreme poverty and skyrocketing prices for food, medicine, and basic necessities. Cancer patients—particularly women who lost their spouses—suffered the most, many without any income as the Israeli assault dragged on for over a year and a half.



A woman suffering from cancer waits for permission to travel abroad to receive medical care.

Mrs. S.A., 40, from Al-Nasr neighbourhood in Gaza City, shared her experience with the PCHR's Field Researcher²⁴. She was forcibly displaced from her home on the first day of the war toward the city of Khan Younis. Despite her urgent need for ongoing medical care, she did not seek treatment at health centres to continue her therapy for breast cancer, due to the absence of her husband and the doubled responsibility of caring for her children. She stated the following: “I was forcibly displaced from my home on the first day of the war to Khan Younis. Despite my urgent need for medical follow-up for breast cancer, I didn't visit any health centres because all the clinics were shut down. I left my medical reports behind in our home in Gaza City. Due to our financial hardship, I prioritised feeding and clothing my children over my own treatment. My husband is in the West Bank and I am alone caring for our kids. I couldn't continue my treatment, and instead, I started making pastries and baked goods to sell so I could provide the bare minimum for my family. I knew how dangerous it was to go to any clinic—Israeli forces were targeting health facilities. In mid-June 2024, I noticed a sticky discharge from my right breast, which worried me. I visited a nearby medical point in our camp. They had no equipment—only manual checks. The doctor urged me to do follow-up imaging to ensure the cancer hadn't returned. A few weeks later, the discharge stopped, and I decided not to follow up. I was too overwhelmed trying to provide for my family. If I stopped working, I wouldn't be able to pay the 200 shekels rent for the tent's ground, or even feed them. I see the suffering of patients waiting for external treatment referrals and medical tests. I've become numb. If I were to get tested and the results were bad, my whole life would stop—I wouldn't be able to care for my children.”

It is estimated that around 7,700 women with cancer have been forcibly displaced to central and southern areas of the Gaza Strip out of a total of 11,000 female cancer patients. This includes those in post-recovery stages who require continued care for full rehabilitation. As a result of the war, the majority of them were cut off from treatment for at least a full year. The limited health services they received consisted only of basic painkillers, occasional medication, or documentation and medical referral forms for treatment outside the Strip.²⁵

At various points, famine in Gaza reached critical levels, depriving cancer patients of any chance of recovery through access to proper nutrition. The blockade on medications and medical equipment constitutes a clear violation of international humanitarian law, which places sole responsibility on the occupying power [Israel] to provide for the essential needs of the population under its control—not merely to allow them in.

These acts fall under the definition of war crimes and are consistent with Article III of the Genocide Convention. The people of Gaza are facing escalating threats to every aspect of their lives and human dignity as a result of the tightened blockade, the complete destruction of healthcare infrastructure, the closure of Gaza's crossings, and continued coercive measures preventing the delivery of life-saving medical aid. These are not isolated incidents—they amount to actions aimed at the partial destruction of a targeted population, constituting an act of genocide.

24- The PCHR's field researcher conducted an interview with the woman at a shelter center in Khan Younis on 5 January 2025.

25- Previously cited source; testimony of Dr. Sobhi Skaik, Director of the Turkish-Palestinian Friendship Hospital.

This policy continued even during the January 2025 ceasefire. When military operations resumed in March 2025, the entire population of Gaza was subjected to intensified siege conditions. Border crossings were shut, humanitarian and commercial goods were blocked, and power supply to desalination plants was cut. As a result, civilians—including cancer patients—face growing anxiety over their survival amid renewed famine, which deprives them of the healthy nutrition vital for maintaining immunity during illness.

The occupying forces' actions have also drastically reduced water supplies to less than one-fifth of pre-war levels. In recent months, less than 60,000 cubic metres of water have been pumped daily out of 300,000 cubic metres—just 20% of Gaza's actual needs. This shortfall impacts the entire population and is especially dangerous for patients whose treatments require access to clean water under specific standards. With current supplies ranging from just 3 to 15 litres per person per day, this falls well below the World Health Organization's minimum recommended amount for daily human use.²⁶

In testimony provided by Ms. N. Sh., a 50-year-old woman from Tel Al-Hawa in Gaza City, the extent of suffering among women cancer patients is made clear. She described the hardship of waiting for a chance to travel for treatment outside Gaza while also supporting her family after the death of her husband: “As a cancer patient, trying to meet all my family’s basic needs under these conditions was extremely difficult. Life in the tents was unbearable—the water was scarce, and the toilets were shared. I couldn’t stay more than two months and eventually risked moving to a relative’s house in Ma’an, Khan Younis—even though the area wasn’t declared safe by the IOF for over a year and a half. I’ve been forcibly displaced seven times due to Israeli evacuation orders. During the war, I stopped receiving medical follow-up because of the state of hospitals. Every time I visited the temporary cancer care centres, my medications were unavailable. I also needed scheduled chemotherapy sessions, but those never resumed. I suffered greatly relying only on canned food distributed through aid, with no access to healthy meals—which were often too expensive anyway. Due to my financial situation, I focused on feeding my children, who have grown weaker during the war. But my health deteriorated significantly.

After losing hope of traveling due to the closure of the Rafah crossing, I heard in July 2024 that some patients had started leaving Gaza through international efforts. I tried to renew my paperwork and register all my children to travel with me. I cannot leave them behind in such dire conditions. I now wait anxiously for my turn to travel with all of them. I’m worried there might be trouble with my son Hassan’s application because he is over 18. Even though he understands my need to leave, I will not go without him. I hope to continue my treatment soon. I know I’m not the only one standing in the line to escape this slow death. There are thousands like me who haven’t even started their treatment yet. We are all gripped by fear over what will happen to us if the war continues without end.”

26- World Health Organization, [Technical Notes on Water in Emergencies](#)

Recommendations

The suffering of cancer patients has become painfully evident after they were denied even the most basic health and human rights over the past 17 months. The IOF has exploited their need for treatment as a political tool in the context of an ongoing crime of genocide, imposing dysfunctional travel mechanisms that leave patients to die while waiting. It has also caused the collapse of Gaza's cancer care system by destroying specialized hospitals—an expression of punitive policies that intensify patient suffering and place their lives at extreme risk.

Given that time is a decisive and critical factor in saving their lives, the severity of the current situation and its impact on the realisation of cancer patients' health rights in Gaza necessitate immediate international action in accordance with the principles of international humanitarian law. In this context, PCHR recommends:

1. Immediate international intervention, particularly by the member states of the UN Security Council, to issue binding resolutions compelling the occupying state [Israel] to comply with international and humanitarian law, halt its military assault on the Gaza Strip, and end its policy of collective punishment that prevents patients from accessing treatment. The international community must also enforce the provisional measures issued by the International Court of Justice, which obligate the occupying power to take necessary actions to prevent acts that fall under Article II of the Genocide Convention.
2. Activation of an emergency medical evacuation mechanism for critical cases, under international supervision, that ensures the opening of safe humanitarian corridors to transport patients and their companions out of Gaza. This mechanism must also guarantee that patients receive appropriate treatment and that they and their companions can freely return to Gaza upon recovery.
3. Increased pressure by the High Contracting Parties to the Fourth Geneva Convention on the occupying state, compelling it to meet its obligations toward the population of the occupied Gaza Strip. This includes allowing the entry of medicine and medical supplies into hospitals and cancer care facilities.
4. The UN Special Rapporteur on the Right to Health should categorically condemn the Israeli practices targeting Gaza's healthcare system—most recently the destruction of the Turkish-Palestinian Friendship Hospital, Gaza's only specialised cancer centre. The Rapporteur is also urged to call for the establishment of an independent international monitoring and documentation mechanism to track grave violations of the right to health in Gaza and ensure evidence is collected for presentation before relevant international judicial bodies to hold perpetrators accountable for war crimes and ongoing violations.
5. The World Health Organization and relevant international institutions must work urgently to support the rehabilitation of Gaza's health system by supplying essential medical equipment, medications, and treatment resources. They should also invest in developing specialised medical personnel to reduce the burden on patients and uphold their rights in line with international treaties and conventions.



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