

FLASH SURVEY REPORT

MANDATORY REPORTING BY CLINICIANS AND OTHER ALLIED HEALTH SERVICES

Reporting obligations when there is a reasonable
suspicion of organ trafficking and transplants
when persons travel for the purpose of donating
or receiving an illicit transplantation

Committee of the Parties
of the Santiago de Compostela Convention

COUNCIL OF EUROPE



CONSEIL DE L'EUROPE

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June 2026

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EXECUTIVE SUMMARY

The flash survey conducted within the Santiago de Compostela Committee focuses on mandatory reporting obligation of clinicians and other allied healthcare services in cases where there exists a reasonable suspicion of organ trafficking or illegal transplants involving persons who travel for the purpose of donating or receiving an illicit transplantation. The report covers this theme in 11 of the 15 States¹ which were Parties to the Convention at the time of the flash survey as well as in 4 of the 12 signatory countries to the Santiago de Compostela Convention.

The report provides the general framework for mandatory reporting in cases where there is a reasonable suspicion of organ trafficking or illicit transplantation involving persons who travel to donate or receive an organ. It addresses four key issues: i) whether a legal requirement exists to report a suspicion that an illicit transplantation has taken place when persons travel for the purpose of donating or receiving an illicit transplantation; ii) the nature of that legal requirement to report (whether based on a reasonable suspicion or actual knowledge of an illicit transplantation when persons travel; iii) healthcare professionals subject to this mandatory legal reporting requirement; and iv) existence of other mandatory requirements in countries that have no legal requirement to report an illicit transplantation involving travel.

While legislation on internal reporting of a reasonable suspicion of organ trafficking when persons travel for the purpose of donating or receiving an illicit transplantation varies considerably among responding countries, the majority of States have established a legal requirement to report a suspected illicit transplantation when persons travel for this purpose.

Regarding the nature of the legal requirement to report a reasonable suspicion or actual knowledge of an illicit transplantation when persons travel, the situation is highly heterogeneous among responding States. Such reporting is mandatory in 47% of the States, while 53% of States have no such legal requirement.

With regard to healthcare professionals subject to the mandatory legal requirement to report suspicions or actual knowledge of an illicit transplantation when persons travel, internal frameworks vary widely among responding States.

¹ Azerbaijan ratified the Convention on 26th May 2026 following the drafting of this report.

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I. INTRODUCTION

1. BACKGROUND

Trafficking in human organs is a serious and growing transnational crime, exploiting vulnerable individuals and undermining medical ethics and the altruistic approach to organ donation. Driven by a global shortage of legally donated organs, criminal networks profit by trafficking in organs and organ tourism, often at great risk to donors and recipients alike.

The Committee of the Parties (hereinafter, the Committee) to the Convention against Trafficking in Human Organs (hereinafter, the Santiago de Compostela Convention) decided at the 7th plenary meeting of the Committee to draft and circulate a flash survey on mandatory reporting by clinicians where there is a reasonable suspicion of organ trafficking and transplants when persons travel for the purpose of donating or receiving an illicit transplantation².

During the meeting, the Committee discussed the requirement for mandatory reporting by clinicians. This followed presentations on the topic that highlighted the benefits of a mandatory duty to report in these circumstances.

2. PURPOSE AND SCOPE

The purpose of the flash survey is to ascertain the position among the State Parties and signatory countries to the Santiago de Compostela Convention on mandatory reporting by clinicians and other allied healthcare services where there is a reasonable suspicion of organ trafficking and transplants when persons travel for the purpose of donating or receiving an illicit transplantation, that is, where the internal law does not authorise these activities.

This flash survey is intended to take the place of a potential thematic monitoring round on *mandatory reporting* in order to reduce the timeframe of responding by Parties on this specific topic. This is intended to support the Committee in making recommendations at the earliest time to Parties for the purpose of considering creating a mandatory duty on clinicians, and, potentially, other allied professionals, to report in their internal systems where they have a reasonable suspicion of organ trafficking and transplants when persons travel for the purpose of donating or receiving an illicit transplantation.

3. METHODOLOGY

The reporting on the mandatory requirement based in law or other recognised and enforceable requirements when persons travel for the purpose of donating or receiving an illicit transplantation or organs was conducted by an online survey. The survey was

² Committee of the Parties to the Convention against Trafficking in Human Organs, *List of Decisions*, 7th Plenary meeting, T-THO (2025) LD3 – LoD, Strasbourg, 21 November 2025.

conducted between December 2025 and February 2026. The survey contained eight questions on this single topic.

Table 1: Summary information

Total number of questions	8	Total responses	15
Total number of full responses	15 ³	Number of country multiple responses	0
Number of responses requested	27	Number of responses included in report	15
Number of State Parties responding	11	Number of Signatory countries responding	4
Number of State Parties not Responding	4	Number of Signatory countries not responding	8

4. PARTIES INVOLVED IN THE FLASH SURVEY

The Santiago de Compostela Committee requested 15 State Parties and 12 Signatory countries to complete an online survey⁴.

- ▶ Replies were received from 11 States Parties (**Albania, Belgium, Costa Rica, Croatia, Czechia, France, Latvia, Portugal, the Republic of Moldova, Spain and Switzerland**). No responses were received from four Parties (**Malta, Montenegro, Norway and Slovenia**).
- ▶ Replies were received from four signatory countries (**Italy, Luxembourg, Poland, and the United Kingdom**). No responses were received from eight signatory countries (**Armenia, Austria, Azerbaijan, Chile, Greece, Ireland, Türkiye and Ukraine**).

Rule 26§1 of the Santiago de Compostela Convention's Rules of Procedure provides that "the monitoring of the implementation of the Convention by the Parties shall be based on a procedure divided into rounds, each round concerning a theme chosen by the Santiago de Compostela Committee or any other approach deemed appropriate by the Santiago de Compostela Committee within the scope of the Convention". Accordingly, Rule 26§3 and Rule 27§2 provide that:

"Rule 26§3 The monitoring round shall be initiated by addressing a questionnaire on the implementation of the relevant provisions of the Convention with respect to the selected theme. The Parties shall respond to the questionnaire within the time-limit set by the Santiago de Compostela Committee.

³ One State Party responded to six questions out of eight. However, as the remaining two questions were not applicable due to responses to other questions, the overall response was considered to be complete.

⁴ Annex A – State of Play – Replies to Flash Survey-1, see: [Other surveys - Countering the trafficking in human organs](#)

“Rule 27§2 The secretariat shall address such questionnaires to the Parties through the member in the Santiago de Compostela Committee representing the Party to be monitored and who will act as “contact point”.

5. STRUCTURE OF THE REPORT

- ▶ This report is structured around six issues relating to mandatory reporting by clinicians and other allied healthcare services where there is a reasonable suspicion of organ trafficking and transplants when persons travel for the purpose of donating or receiving an illicit transplantation. This methodological choice of the six issues in no way intends to prioritise the various provisions of the Convention: equal importance is attached to all rights and principles therein.
- ▶ This report does not seek to collect information on the general legislative and institutional framework established by Parties to implement the Convention. It focuses on specific legislative and other measures taken or envisaged relating to mandatory reporting of issues raised in relation to the flash survey.
- ▶ Each of the six issues drawn from the flash survey is reported according to the State Parties and signatory countries responding.
- ▶ The six issues can be summarised as follows:
 - ▶ **Normally resident in the country, and returning to the country following transplantation** (Question 1 in the flash survey, which corresponds to paragraph 1.1 in the Report)
 - ▶ **Normally resident in the country and having gone abroad for transplantation** (Question 2, which corresponds to paragraph 1.2 in the Report)
 - ▶ **Normally resident outside the country, and currently in the country for the purpose of a suspected illicit transplantation** (Question 3, which corresponds to paragraph 1.3 in the Report).
- ▶ Nature of the legal requirement to report when having a reasonable suspicion or actual knowledge of an illicit transplantation when persons travel (**Question 4**, which corresponds to paragraph 1.4 in the Report)
- ▶ Healthcare professionals subject to the mandatory requirement to report suspicions or actual knowledge of an illicit transplantation involving the travel of persons (**Question 5**, which corresponds to paragraph 1.5 in the Report)

- Existence of other mandatory requirements in countries with no legal requirement to report an illicit transplantation involving the travel of persons (**Question 6**, which corresponds to paragraph 1.6 in the Report)

Article 4, paragraph 1, and where appropriate paragraph 4 – Illicit removal of human organs

1. Each Party shall take the necessary legislative and other measures to establish as a criminal offence under its domestic law, when committed intentionally, the removal of human organs from living or deceased donors:

- a. a. where the removal is performed without the free, informed and specific consent of the living or deceased donor, or, in the case of the deceased donor, without the removal being authorised under its domestic law;
- b. b. where in exchange for the removal of organs, the living donor, or a third party, has been offered or has received a financial gain or comparable advantage;
- c. c. where in exchange for the removal of organs from a deceased donor, a third party has been offered or has received a financial gain or comparable advantage.

4. Each Party shall consider taking the necessary legislative or other measures to establish as a criminal offence under its domestic law the removal of human organs from living or *deceased donors where the removal is performed outside of the framework of its domestic transplantation system, or where the removal is performed in breach of essential principles of national transplantation laws or rules. If a Party establishes criminal offences in accordance with this provision, it shall endeavour to apply also Articles 9 to 22 to such offences.*

Article 6 – Implantation of organs outside of the domestic transplantation system or in breach of essential principles of national transplantation law

Each Party shall consider taking the necessary legislative or other measures to establish as a criminal offence under its domestic law, when committed intentionally, the implantation of human organs from living or deceased donors where the implantation is performed outside of the framework of its domestic transplantation system, or where the implantation is performed in breach of essential principles of national transplantation laws or rules. If a Party establishes criminal offences in accordance with this provision, it shall endeavour to apply also Articles 9 to 22 to such offences.

Article 8 – Preparation, preservation, storage, transportation, transfer, receipt, import and export of illicitly removed human organs

Each Party shall take the necessary legislative and other measures to establish as a criminal offence under its domestic law, when committed intentionally:

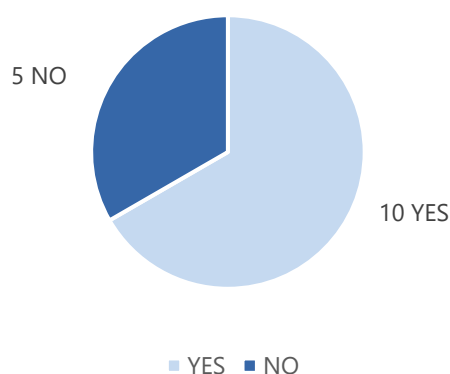
- a. a. the preparation, preservation, and storage of illicitly removed human organs as described in Article 4, paragraph 1, and where appropriate Article 4, paragraph 4.
- b. b. the transportation, transfer, receipt, import and export of illicitly removed human organs as described in Article 4, paragraph 1, and where appropriate Article 4, paragraph 4.

II. GENERAL REPORT

1. EXISTENCE OF A LEGAL REQUIREMENT (I.E. SUPPORTED BY LAW) TO REPORT A SUSPICION THAT AN ILICIT TRANSPLANTATION, INVOLVING EITHER DONOR OR RECIPIENT, HAS TAKEN PLACE CONCERNING A PERSON NORMALLY RESIDENT IN THE COUNTRY, AND RETURNING TO THE COUNTRY FOLLOWING TRANSPLANTATION

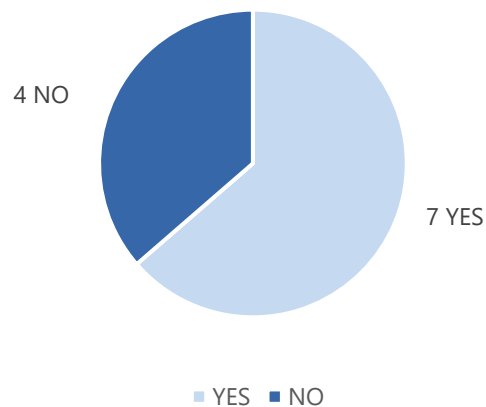
- 67% of responding States have a legal requirement (i.e. supported by law) to report a suspicion that an illicit transplantation, involving either donor or recipient, has taken place concerning a person normally resident in the country, and returning to the country following the transplantation. 33% do not have such a requirement.

Persons normally resident in your country, and returning to your country following transplantation (General overview)



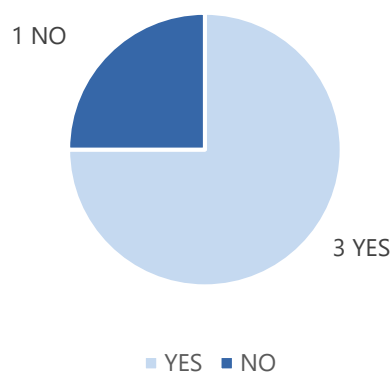
- 67% of responding States report the existence of legal requirements in these circumstances. This is slightly lower for State Parties with the same requirements (64%) (**Albania, Costa Rica, Croatia, Czechia, Latvia, Portugal** and the **Republic of Moldova**). The remaining State Parties (36%) (**Belgium, France, Spain** and **Switzerland**) do not have such legal reporting requirements in these circumstances.

Persons normally resident in your country, and returning
to your country following transplantation (State parties)



- 67% of responding States report the existence of legal requirements in these circumstances. This is slightly higher for Signatory countries with the same requirements (75%) (**Italy, Poland** and **the United Kingdom of Great Britain and Northern Ireland**). The remaining Signatory country responding to the flash survey (25%) (**Luxembourg**) does not have such legal reporting requirements in these circumstances.

Persons normally resident in your country, and returning
to your country following transplantation (Signatory
countries)

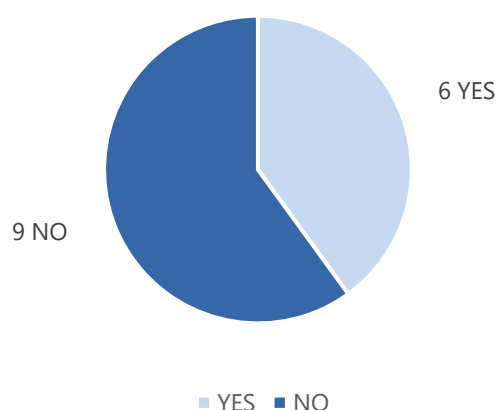


- It can be concluded that while there is a greater majority of Signatory countries with a legal requirement in these circumstances than within the State Parties, overall, one-third of all responders do not have any such reporting obligations.

2. EXISTENCE OF A LEGAL REQUIREMENT (I.E. SUPPORTED BY LAW) TO REPORT A SUSPICION THAT AN ILLICIT TRANSPLANTATION, INVOLVING EITHER DONOR OR RECIPIENT, HAS TAKEN PLACE CONCERNING A PERSON NORMALLY RESIDENT IN THE COUNTRY, AND HAVING GONE ABROAD FOR TRANSPLANTATION

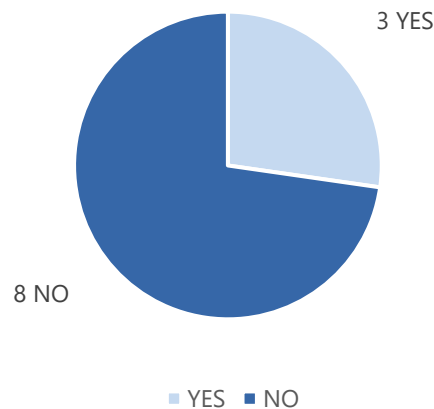
- 40% of responding States have a legal requirement, i.e. supported by law, to report a suspicion that an illicit transplantation, involving either donor or recipient, has taken place concerning a person normally resident in the country, and having gone abroad for transplantation. 60% do not have such a legal requirement.

Persons normally resident in your country, and having gone abroad for transplantation (General overview)



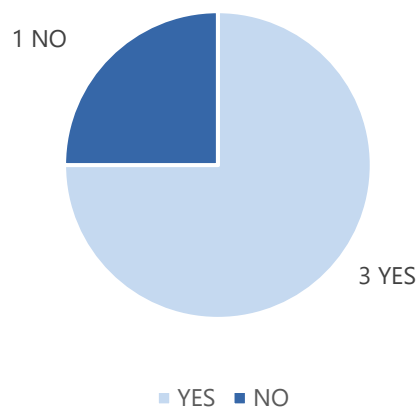
- 40% of responding States report the existence of legal requirements in these circumstances. This is lower for State Parties with the same requirements (27%) (**Czechia, Latvia and Portugal**). The remaining State Parties (73%) (**Albania, Belgium, Costa Rica, Croatia, France, the Republic of Moldova, Spain and Switzerland**) do not have such legal reporting requirements in these circumstances.

Persons normally resident in your country, and having gone abroad for transplantation (State parties)



- 40% of responding States report the existence of legal requirements in these circumstances. This is greater for Signatory countries with the same requirements (75%) (**Italy, Poland** and **the United Kingdom of Great Britain and Northern Ireland**). The remaining Signatory country responding to the flash survey (25%) (**Luxembourg**) does not have such legal reporting requirements in these circumstances.

Persons normally resident in your country, and having gone abroad for transplantation (Signatory countries)

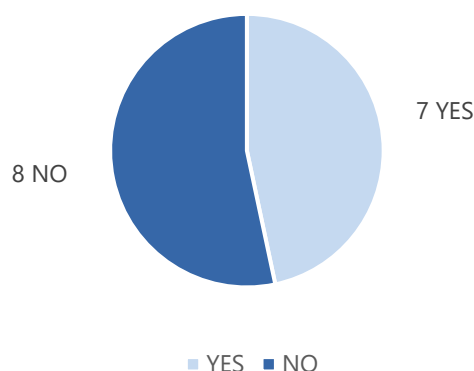


- It can be concluded that while there is a greater majority of Signatory countries with a legal requirement in these circumstances than within the State Parties, overall, three-fifths of all responders do not have any such reporting obligations.

3. EXISTENCE OF A LEGAL REQUIREMENT (I.E. SUPPORTED BY LAW) TO REPORT A SUSPICION THAT AN ILLICIT TRANSPLANTATION, INVOLVING EITHER DONOR OR RECIPIENT, HAS TAKEN PLACE CONCERNING A PERSON NORMALLY RESIDENT OUTSIDE THE COUNTRY, AND CURRENTLY IN THE COUNTRY FOR THE PURPOSE OF A SUSPECTED ILLICIT TRANSPLANTATION

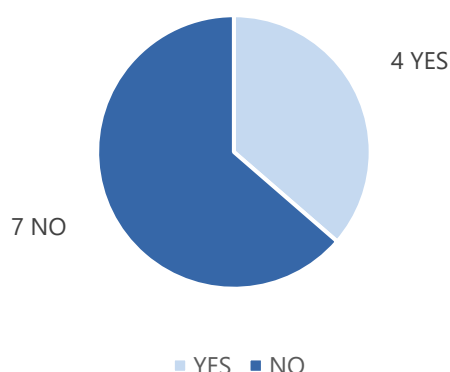
- 47% of responding States have a legal requirement, i.e. supported by law, to report a suspicion that an illicit transplantation, involving either donor or recipient, has taken place concerning a person normally resident outside the country, and currently in the country for transplantation. 53% do not have such a legal requirement.

Persons normally resident outside your country, and currently in your country for the purpose of a suspected illicit transplantation (General overview)



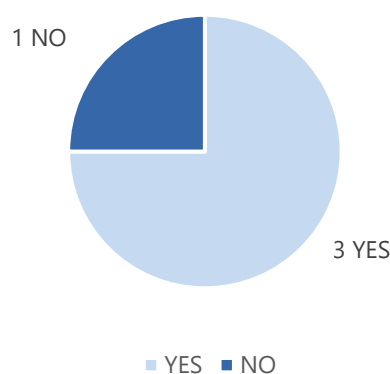
- 47% of responding States report the existence of legal requirements in these circumstances. This is lower for State Parties with the same requirements (36%) (**Costa Rica, Czechia, Latvia** and **Portugal**). The remaining State Parties (64%) (**Albania, Belgium, Croatia, France, the Republic of Moldova, Spain** and **Switzerland**) do not have such legal reporting requirements in these circumstances.

Persons normally resident outside your country, and currently in your country for the purpose of a suspected illicit transplantation (State parties)



- 47% of responding States report the existence of legal requirements in these circumstances. This is greater for Signatory countries with the same requirements (75%) (**Italy, Poland** and **United Kingdom of Great Britain and Northern Ireland**). The remaining Signatory country responding to the flash survey (25%) (**Luxembourg**) does not have such legal reporting requirements in these circumstances.

Persons normally resident outside your country, and currently in your country for the purpose of a suspected illicit transplantation (Signatory countries)

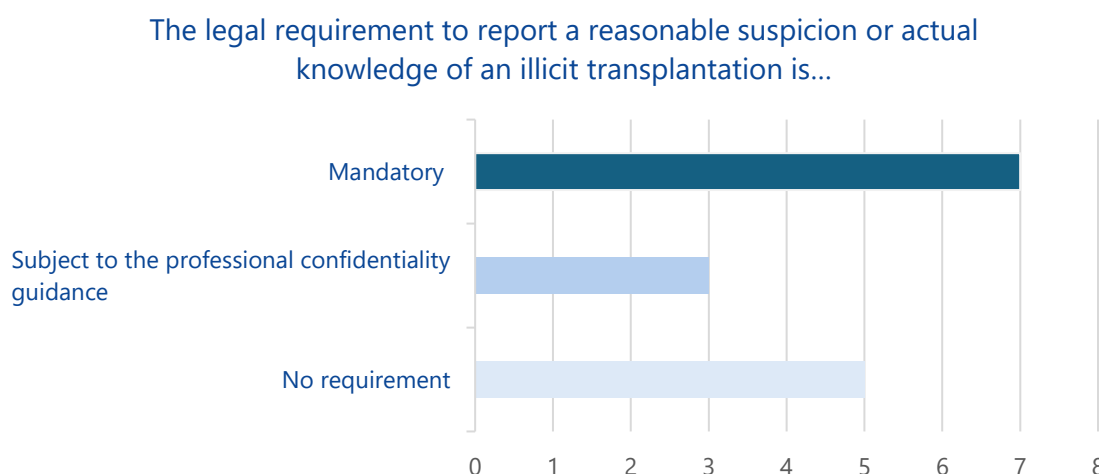


- It can be concluded that while there is a greater majority of Signatory countries with a legal requirement in these circumstances than within the State Parties, overall, just over half of all responders do not have such legal reporting obligations.

4. NATURE OF LEGAL REQUIREMENTS TO REPORT WHEN HAVING A REASONABLE SUSPICION OR ACTUAL KNOWLEDGE OF AN ILLICIT TRANSPLANTATION WHEN PERSONS TRAVEL

- In 47% of responding States, the legal requirement to report concerning an illicit transplantation is mandatory. In 20% of responding States, this legal requirement is

subject to professional confidentiality guidance. There is no equivalent legal requirement in 33% of responding States.



- ▶ 47% of responding States report the existence of a mandatory legal requirement to make a notification in cases of an illicit transplantation when persons travel, which is about the same as the number of State Parties with a legal requirement in these circumstances (46%) (**Costa Rica, Czechia, Latvia, Portugal and the Republic of Moldova**). One-fifth of responding countries (20%) report that the legal requirement is subject to the professional confidentiality guidance, a number greater than that of State Parties with the same legal requirement (8%) (**Switzerland**). One-third of responding States (33%) report that there is no legal requirement to make a notification in cases of having a suspicion or knowledge of an illicit transplantation when persons travel. This number is higher for States Parties with the same requirements (46%) (**Albania, Belgium, Croatia, France and Spain**).
- ▶ 47% of responding States report the existence of a mandatory legal requirement to make a notification in cases of an illicit transplantation when persons travel, a number slightly higher for Signatory countries with the same requirements (50%) (**Italy and the United Kingdom of Great Britain and Northern Ireland**). In the remaining Signatory countries responding to the flash survey (50%) (**Luxembourg and Poland**) the legal requirement to report in cases of illicit transplantation is subject to the professional confidentiality guidance.
- ▶ It can be concluded that while almost half of all responders have a mandatory legal requirement to report in cases of illicit transplantation in these circumstances, overall, one-third of all responders do not have any legal requirement. The rest of the responding countries base the legal requirement to report an illicit transplantation in these circumstances on the professional confidentiality guidance.

5. HEALTHCARE PROFESSIONALS SUBJECT TO THE MANDATORY LEGAL REQUIREMENTS TO REPORT SUSPICIONS OR ACTUAL KNOWLEDGE OF AN ILLICIT TRANSPLANTATION WHEN PERSONS TRAVEL

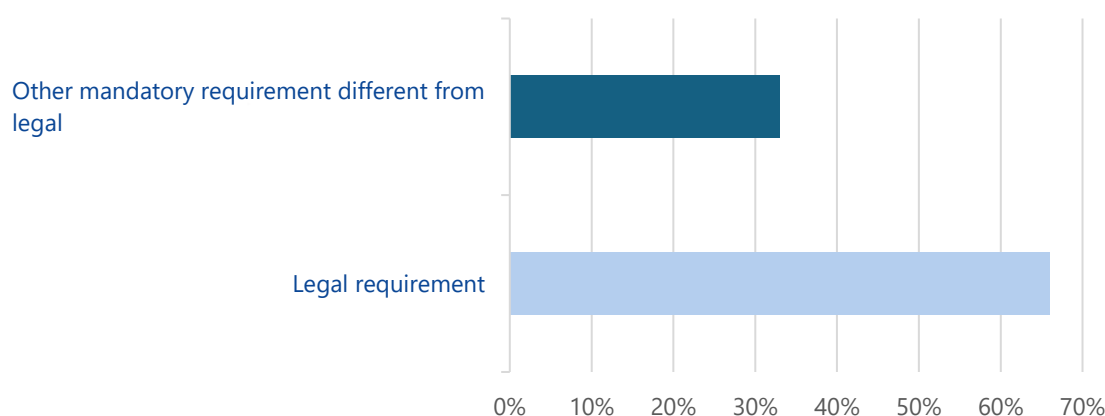
- ▶ In 47% of responding States, there are healthcare professionals subject to the mandatory legal requirement of reporting an illicit transplantation when persons travel. In 53% of responding States, healthcare professionals do not have such mandatory legal requirement.
- ▶ Among State Parties, 46% reported the existence of a mandatory legal requirement (**Costa Rica, Czechia, Latvia, Portugal** and **the Republic of Moldova**), while 54% do not have such a mandatory legal requirement (**Albania, Belgium, Croatia, France, Spain** and **Switzerland**).
- ▶ Related to Signatory countries, half of them (50%) (**Italy** and the **United Kingdom of Great Britain and Northern Ireland**) reported the existence of a mandatory legal requirement, while 50% do not have such a mandatory legal requirement (**Luxembourg** and **Poland**).

In **Portugal**, doctors who are involved in transplant procedures at public hospitals, as well as doctors who treat transplant patients, are subject to a mandatory legal requirement to report suspicion or actual knowledge of an illicit transplantation when persons travel. In **Costa Rica** and **Czechia**, all healthcare professionals are included in mandatory legal reporting requirements. In **Italy** this obligation applies to public officials, persons in charge of public duty (doctors or nurses working in public healthcare facilities, doctors affiliated with local healthcare units, doctors or nurses working in private facilities affiliated with the national healthcare system), while in the **Republic of Moldova** the mandatory legal requirement to report affects healthcare professionals from the Transplant Agency, transplant coordinators from authorised medical institutions and surgical transplant teams. In the **United Kingdom of Great Britain and Northern Ireland** the obligation to report suspicions or actual knowledge of an illicit transplantation when persons travel extends to relevant clinicians; under this category the following professionals are included: (a) a specialist nurse involved in living donor care; (b) a specialist nurse involved in recipient care; (c) a transplant surgeon; (d) a physician involved in living donor care; (e) a physician involved in recipient care. Finally, in **Latvia**, healthcare professionals subject to mandatory legal reporting in these cases are nephrologists, gastroenterologists, cardiologists, pneumonologists, transplant surgeons, and cardiac surgeons. Excluded from this obligation are specialities that normally are not involved in the care of transplanted patients.

6. EXISTENCE OF OTHER MANDATORY REQUIREMENTS IN COUNTRIES WITH NO LEGAL REQUIREMENTS TO REPORT AN ILLICIT TRANSPLANTATION WHEN PERSONS TRAVEL

- ▶ In 33% of responding States, there are other mandatory requirements different from the legal requirement to report an illicit transplantation when persons travel. 67% have a legal requirement, i.e. supported by law, to report that an illicit transplantation in such circumstances has taken place.

The legal requirement to report a reasonable suspicion or actual knowledge of an illicit transplantation is...



- ▶ 33% of responding States report the existence of other mandatory requirements in these circumstances. This is slightly higher than the number of State Parties with the same requirements (36%) (**Belgium, France, Spain and Switzerland**). In the remaining State Parties (64%) (**Albania, Costa Rica, Croatia, Czechia, Latvia, Portugal and the Republic of Moldova**), there is a legal requirement⁵, i.e. supported by law, to report an illicit transplantation when persons travel.
- ▶ 33% of responding States report the existence of other mandatory requirements in these circumstances. This is slightly lower for Signatory countries with the same requirements (25%) (**Luxembourg**). In the remaining Signatory countries responding to the flash survey (75%) (**Italy, Poland and the United Kingdom of Great Britain and Northern Ireland**) there is a legal requirement⁶ to report an illicit transplantation.
- ▶ It can be concluded that while there is a greater majority of State Parties with other mandatory requirement in these circumstances than within the Signatory countries, overall, one-third of all respondents have other mandatory requirements different from a legal requirement to report an illicit transplantation.

In the case of States that do not have a legal obligation to notify, this has been explained in greater detail by the following States:

In **Belgium**, although there is no specific legal obligation, there is a general obligation for civil servants to report incidents, a right to speak out provided for in Article 458bis of the current Criminal Code, and the jurisprudential theory of state of necessity.

⁵ These State Parties (**Albania, Costa Rica, Croatia, Czechia, Latvia, Portugal and Republic of Moldova**) have responded that there exists a legal requirement in Question 1, a) or b) of the flash survey. In particular, Question 1 of the flash survey corresponds to paragraph 1.1 (**Albania, Costa Rica, Croatia, Czechia, Latvia, Portugal and the Republic of Moldova**), 1.2 (**Czechia, Latvia and Portugal**) or 1.3 (**Czechia, Latvia, Portugal and Costa Rica**) of this report.

⁶ These Signatory countries (**Italy, Poland and United Kingdom of Great Britain and Northern Ireland**) have responded that there exists a legal requirement in Question 1, a) and b) of the flash survey. In particular, Question 1 of the flash survey corresponds to paragraphs 1.1, 1.2 and 1.3 of this report.

The legal framework applicable in **France** with regard to organ removal from living or deceased persons is strictly regulated by Bioethics Law. The Biomedicine Agency is responsible for ensuring its application, both legally and organisationally. The law also entrusts the Biomedicine Agency with the task of detecting the extent of any trafficking in organs or gametes and the measures taken to combat such trafficking (Article L. 1418-1-1 of the Public Health Code). For this purpose, the Biomedicine Agency conducts an anonymous survey every two years among dialysis centres and transplant services to detect the use by patients residing in France of kidney transplants performed abroad from paid living donors. The methodology was updated in 2008 to increase the participation of dialysis centres and complete the data for the years 2000 to 2008. Of the 95 centres surveyed in 2024 (83 dialysis centres and 12 transplant centres), all responded to the survey. With regard to organ removals and transplants carried out in France, the legal framework in force prevents any clandestine organ removal or transplant operations.

In **Luxembourg**, transplants are no longer performed in the country since the retirement in 2009 of Dr. Stanislas Lamy, who performed the first kidney transplant at the CHL (Centre Hospitalier de Luxembourg, Luxembourg Hospital Center) in 1980. Most patients, therefore, undergo transplants in Belgium (and, sometimes, in France or Germany). With regard to crimes committed against minors (e.g. organ trafficking), anyone who has knowledge of a crime that can still be prevented or whose effects can still be limited, or whose perpetrators are likely to commit further crimes that could be prevented, and who fails to inform the judicial or administrative authorities, is punishable by imprisonment for one to three years and a fine from €251 to €45,000 (Article 140 of the Criminal Code). Medical confidentiality does not preclude this provision.

In **Spain**, article 31.1 of the Code of Medical Ethics (2022) establishes that physicians may disclose confidential information, within reasonable limits, "in cases of suspected human trafficking and organ trafficking". On top of that, work is currently underway (with the participation of the Ministries of Justice, of the Interior, of Health and of the State Security Forces and Corps) on the "National Protocol for the fight against transplant tourism, organ trafficking and human trafficking for the purpose of extracting organs for transplantation".

In **Switzerland**, anonymised data on all patients who have travelled abroad for an organ transplantation have to be reported (mandatory, supported by law) by the treating physician to the Federal Office of Public Health.

III. CONCLUSIONS AND RECOMMENDATIONS

1. CONCLUSIONS

- ▶ Legislation regarding the internal reporting of a reasonable suspicion of organ trafficking when persons travel for the purpose of donating or receiving an illicit transplantation varies considerably among responding countries.

- ▶ The majority of responding States have established a legal requirement to report suspicion of illicit transplantations carried out abroad when the donor or recipient is a resident of the country. Under this premise, such a legal requirement to report exists
 - ▶ In 67% of responding states, when the donor or recipient resident in the country returns to the country following the illicit transplantation, and, concurrently with the above,
 - ▶ In only 40% of responding States, there is evidence that the donor or recipient resident in the country has travelled abroad for the purpose of receiving a suspected illicit transplantation.
- ▶ Approximately half of the responding States have established a legal requirement to report a suspicion when the donor or recipient does not reside in the country but is present in the country for the purpose of undergoing illicit transplantation.
- ▶ The legal requirement to report reasonable suspicion or actual knowledge of an illicit transplantation when persons travel
 - ▶ is mandatory in approximately half of the responding countries; and,
 - ▶ is subject to professional confidentiality guidance in one-fifth of the responding States.
- ▶ There is no such legal requirement in one-third of the responding States, but in most cases, other requirements (ethical, healthcare professional rules) to report a reasonable suspicion or actual knowledge of an illicit transplantation when persons travel exist.
- ▶ The legislation of responding States regarding the requirement to report suspected illicit transplantations when persons travel is highly heterogeneous, both in the determination of the reporting requirements themselves and in terms of the nature of such reporting requirements.

2. RECOMMENDATIONS

- ▶ All States need to recognise that the magnitude of the problem becomes greater when people travel, even if the majority of illicit transplantations take place by exploiting regulatory and enforcement weaknesses in certain States.
- ▶ The variety of existing national approaches provides different options for future national adaptations concerning the requirement to report illicit transplantations when persons travel.
- ▶ States should assess the effectiveness of each of the existing sources of the requirement to report cases of illicit transplantations when persons travel.

APPENDICES – STATES OF PLAY

1. STATES PARTIES

COUNTRY / PAYS	QUESTIONNAIRE SENT QUESTIONNAIRE ENVOYÉ	ANSWER RECEIVED REPOSE REÇUE
Albania / Albanie	22/12/2025	28/01/2026
Belgium / Belgique	22/12/2025	23/01/2026
Costa Rica / Costa Rica	22/12/2025	21/01/2026
Croatia / Croatie	22/12/2025	16/01/2026
Czechia / Tchéquie	22/12/2025	05/01/2026
France / France	22/12/2025	03/02/2026
Latvia / Lettonie	22/12/2025	30/01/2026
Malta / Malte	22/12/2025	
Montenegro / Monténégro	22/12/2025	
Norway / Norvège	22/12/2025	
Portugal / Portugal	22/12/2025	23/12/2025
Republic of Moldova / République de Moldova	22/12/2025	27/01/2026
Slovenia / Slovénie	22/12/2025	
Spain / Espagne	22/12/2025	14/01/2026
Switzerland / Suisse	22/12/2025	07/01/2026

2. SIGNATORY STATES

COUNTRY PAYS	QUESTIONNAIRE SENT QUESTIONNAIRE ENVOYE	STATUS STATUT	ANSWER RECEIVED RÉPONSE REÇUE
Armenia / Arménie	22/12/2025	No reply	
Austria / Autriche	22/12/2025	No reply	
Azerbaijan / Azerbaïdjan	22/12/2025	No reply	
Chile/ Chili	22/12/2025	No reply	
Greece / Grèce	22/12/2025	No reply	
Ireland / Irlande	22/12/2025	No reply	
Italy / Italie	22/12/2025	Replied	27/01/2026
Luxembourg / Luxembourg	22/12/2025	Replied	19/01/2026
Poland / Pologne	22/12/2025	Replied	16/01/2026
Türkiye / Türkiye	22/12/2025	No reply	
Ukraine / Ukraine	22/12/2025	No reply	
United Kingdom / Royaume-Uni	22/12/2025	Replied	29/01/2026