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# JAPANESE ATROCITIES IN THE PACIFIC WAR: ONE ARMY SURGEON'S ACCOUNT OF VIVISECTION ON HUMAN SUBJECTS IN CHINA

*Noda Masaaki*

Translator's Preface: The Redress Movement generally asks that the Japanese government admit its responsibility for war crimes and provide just compensation to survivors. The unfortunate result is that many Japanese have the sense that their government is being unreasonably attacked by outside forces over issues they thought were resolved long ago. The major contribution of Noda Masaaki's book, *Sensō to Zaiseki (War and Guilt)* (Iwanami, 1998) is to redirect the focus of the issue of war responsibility to the Japanese people themselves, not their government. By shifting the focus to individuals, Noda succeeds in making the idea of "war responsibility" a concrete, personal issue, instead of a political abstraction. The book is structured around interviews with men in the imperial forces, ranging from common foot soldiers to elite army surgeons, who participated in atrocities during the Pacific War. Men of conscience among them have continued to suffer from the emotional consequences of their crimes. Noda emphasizes the importance of soldiers and surgeons accepting individual responsibility for their misdeeds as a prerequisite for their emotional healing. Noda thereby shows the extent to which perpetrators of war crimes are secondary victims of their own monstrous acts. Noda's thesis is that before a society-wide discussion of war

responsibility can occur in Japan, the individuals who participated in atrocities must be willing to tell their stories and express their remorse. Noda has provided a valuable record of individual Japanese voices of conscience that will continue to be heard long after the individuals themselves have passed on. Noda also clarifies how the continued failure of the guilty to face their misdeeds has caused lasting harm to Japan's social health. Ultimately, Noda argues, it is in Japan's self-interest to respond to the calls for justice coming out of the Pan-Asian Redress Movement. What follows is a complete translation into English of the Introduction and first chapter of Noda Masaaki's *War and Guilt*.

Paul Gordon Schalow

### Introduction

When human beings live within small groups and spend their days close to the rhythms of nature, their change of mood follows a predictable pattern. When illness strikes or when someone they love dies, their instinctive response is to grieve. When they sit before a warm fire with friends, they instinctively experience feelings of pleasure. Grief and pleasure arise spontaneously in response to the momentary events of their lives, but their underlying sense of well-being is stable and ongoing.

When people live as part of a nation state, however, the historical time in which they live exerts its own influence on them. People are easily swept up in the mood of the times and lose sight of the gentle rhythms of life.

The first time I became cognizant of the existence of a historical mood was in the 1980s.

In the 1980s, Japanese society became materially affluent and began to move beyond the anxieties of defeat and post-war reconstruction even as it continued on its path of complete denial of the past. One night in the spring of 1985, I emerged from a Tokyo subway station into the street and became swept up in a large crowd of people waving "Rising Sun" flags and holding flashlights. The flags and flashlights of the crowd of several thousand, no, tens of thousands of people, completely filled the brightly lit Ginza street as it pushed its way from the direction of Kyobashi toward

Nihonbashi. It was a parade commemorating the 60th year of the Showa era. There were old people from all over Japan, along with a few young and middle-aged people. This was the gist of their repeated cry as they swept forward: "We fought a war in the name of the Showa Emperor, and defeat was followed by chaos and poverty; even so, the Showa reign has been a good one."

My memories of that night are muddled because of the confusion I felt. What period of history had I stumbled into? Was I watching a parade from my youth, celebrating National Physical Fitness Day perhaps, or Arbor Day? Or was I in a darkened movie theater watching a pre-war newsreel, narrated by a solemn-voiced announcer? The color of the bright red "Rising Sun" and the glare of the flashlights shimmered in my mind like the cool flame of a devil's flare. Though the image itself was enigmatic, at that moment I clearly sensed that I had been swept up in the mood of a historical time.

The mood of those times was characterized by a faint and superficial sense of "happiness," or, perhaps more accurately, I should call it "euphoria." It was an empty feeling of pleasure that lacked solid basis and involved a willingness to believe that everything was "going fine" despite all the evidence to the contrary. Behind the happy mood was a reduced ability to make independent decisions and an increase in impulsive behavior.

Japanese people worked at a frenetic pace buoyed by false confidence in the bubble economy, always striving for an illusory happiness but never stopping to question what they had done in the Emperor's name during the Pacific War. The increasing irrelevance of politics, the failure of financial markets, the bloated bureaucracy, the complicity with dictatorial economic development throughout Asia, the explosion in pointless information, the sense of alienation among young people—these and other problems were dealt with ineffectively, and if a few people shed tears in an occasional spasm of conscience, none ever showed deep remorse or sadness.

People became compulsive readers of books that can only be called euphoric, containing the message that "If we just try to live cheerfully and positively, our natural morphines will kick in and

make all our dreams possible." Was modernization nothing more than a path to morphine addiction?

Prior to the "period of euphoria" in which we live today, there was a "period of anxiety." A society that was rushing to modernize as it built a rich country and strong military with the greatest possible aggressive potential was basically unhealthy. The mood of the people was volatile, authoritarian, and hypersensitive as it continually sought a target for its aggression. People responded to others from a simultaneous sense of superiority and inferiority depending on the other person's rank, function, role, or sex; they were always prepared to humble themselves toward certain people, to be domineering toward others, and magnanimous toward still others. The peculiar blend of superiority and inferiority, humility and arrogance, began with relations among family members, friends, and neighbors and extended to relations with the peoples of other Asian countries. People who could not treat others as equals mistook their own anxious feelings for virtue. Every action was taken from an intense feeling of anxiety, and anxiety was the main characteristic of pre-war society.

Why did the mood of the times change from anxiety to euphoria? Did Japanese society have no other choice?

Why have the Japanese people's emotional lives become so monotonous, and why is there such pressure to appear happy? The full range of emotions cannot be abandoned in favor of emphasizing one emotion over others. Only someone who can grieve fully and completely is able to rejoice fully and completely. Someone who learns to laugh before he has felt joyful will never be capable of honest feeling.

What is it that the Japanese have failed to grieve?

In the mid-1970s, I had the chance to read *Die Unfähigkeit zu trauern* (*The inability to grieve*) by the West German psychologist Alexander Mitscherlich and his wife Margarete Mitscherlich,<sup>1</sup> subtitled *Grundlagen kollektiven Verhaltens* (*The basis of group behavior*). The authors ask, "What in the world is a group of people to do once

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1. Published 1967; Japanese translation *Ushinawareta hiai* by Hayashi Shun'ichiro and Baba Ken'ichi, Kawade Shobo Shinsha, 1972; reprinted 1984.

they confront the fact that they have killed six million human beings for no better reason than that they wanted to satisfy their own aggressive desires, and have lost the moral foundation that once was theirs? Their only choices are increasingly complete denial of their motives or, barring that, retreat into clinical depression," and since, of course, Germany did not choose the latter course of melancholy, its "political and social barrenness is a product of its denial of the past. The communal desire to protect itself from bearing responsibility for what happened—whether for sins of omission or sins of commission—could not help but leave its traces on the German character," they argued, also pointing out that, nonetheless, "Germany has now set out to establish a commercial Democratic Republic from exactly the same basic position it occupied when it joined the National Socialist (Nazi) movement."

In other words, failing to grieve sufficiently, Germany chose to bury the past and plunge headlong into economic reconstruction. But what exactly did Germany fail to grieve? Was it the failure of the Nazi philosophy? The deaths of six million Jews? On this point the Mitscherlichs' analysis is vague.

When I read *Die Unfähigkeit zu trauern*, I could agree completely with the authors' statement that denial of the past leaves its traces in a society.

Ten years passed, and the spirit of the times became even more euphoric and superficial, and I began to wonder again what it was that the Japanese had failed to grieve.

I was born in the final years of the Pacific War and was raised in the world of post-war democracy. My youth coincided with a time when post-war ideals were gradually being replaced by materialistic values. I became a doctor of psychiatry in the years of high economic growth and thereafter entered the ranks of the intelligentsia. In my present middle age I have tried to maintain a critical perspective on the times but, not infrequently, I sense in myself a strange inability to experience deep emotion, and this troubles me. Why is it that I cannot have a richer emotional imagination and a greater ability to empathize with others? Why do I always treat events and knowledge as important but fail to

show interest in the flow of emotions and the motives that inspire them? Why do I always act as if paying attention to the feelings of myself and others is of secondary importance to knowing about outcomes and results of various matters? And this is the case even though I know perfectly well that what is fulfilling in life is not the attainment of knowledge or success but in the experience of emotions.

The problem is more than a personal issue, however. It is also a communal issue. Why? Because it is culture that surrounds the individual and unconsciously directs him or her to respond emotionally in certain ways to events. In Japan, the vast majority of older and middle-aged people have lost the ability to feel deep emotion and are unable to maintain open relations with others. The heads of major firms, government bureaucrats, scholars, journalists, in fact the entire Japanese elite, is not a group endowed with deep emotional insight. Far too many of them lack empathetic or imaginative skills. The same is true of the average individual who has dealt his whole life with Japanese society. Their children who comprise the next generation are even more superficial in their emotional range and can only experience personal relations in terms of the exchange of information or physical contact.

We make no effort to know the facts about what happened during the Pacific War, but ignorantly make sophisticated-sounding excuses for ourselves. "We were the victims of war. It wasn't a war of aggression but a war of self-preservation. We cannot justify a self-critical view of history." What have we lost, I wonder, by denying the past in this way? When we deny our life experiences, we invite psychological self-destruction. When wounds to the spirit are repressed they eventually explode in the form of emotional dysfunction and mental illness. Are the Japanese living in a spiritual state any different than the one we lived in during the war of aggression? Through our denial of the past, what sort of future have we destined for ourselves?

Clearly, the Pacific War is now an event from a half-century ago. As a result of it, we now have a peace movement whose goal is to eradicate nuclear weapons from the earth. But the former

culture that had no respect for the individual, encouraged competitiveness at the same time it demanded a high level of personal sacrifice for the sake of the group, and stressed hierarchical relations, remains just as it was. We still have a pedigree-based society, we have elite universities, we have uneven systems of justice, we have an infatuation with rank and title in business, and we have ways of applying pressure to anyone who harbors doubts about these values. Throughout the country there is bullying in schools and in the workplace, and the emphasis on loyalty to the company deprives Japanese people of the pleasures of family life. The pressure to work after-hours and to socialize with colleagues makes it impossible to be fully human. In short, the culture that drives people onward towards achievement and promotion remains as it was during the Pacific War.

The present situation does not differ significantly from the spirit of the Japanese people during the war of aggression (15 years beginning with the Manchurian Incident in 1931 until the end of the war in 1945), when new recruits were bullied in the Domestic Affairs Corps and soldiers vied to kill Chinese people with bayonets, oblivious to the suffering of those under attack, as a way of impressing senior officers and moving up in the ranks. It is the same mechanism that nowadays encourages competitiveness from an early age and, by means of rites of passage involving envy and humiliation, increases feelings of aggression and turns those feelings into an organized force that targets others.

After the defeat of August 15, 1945, the Japanese people who survived the war could no longer believe in their grand slogans: "Eight Great Lands, One Universe," "Five Peoples Living in Harmony," and "The Rule of Right in a Paradise on Earth." It was also no longer possible to believe that "Manchuria was crucial to Japan's survival," as Matsuoka Yōsuke (1880-1946) argued in parliament in 1931. Once the post-war shock of defeat, emotional numbness, and ensuing chaos had subsided, there were two basic ways the Japanese people responded to losing the war.

The first response to defeat was to blame no one. From this viewpoint, the Pacific War's perpetrators and its victims were equally

blameless, since war is miserable whether you win or lose; what was important, they said, was the call for peace. This response found expression in the peace movement. The peace movement itself was divided into two schools of thought, one group which emphasized absolute peace based on a psychology of universal forgiveness that rendered themselves guiltless, and another group which having absolved itself of guilt insisted from an ideological viewpoint that a distinction should be made between antiwar forces (the Socialist bloc) and pro-war forces (America). In any case, there was no attempt by either group to confront what Japan had done during the war or address what had been lost in the defeat.

The second major response to the defeat was materialism resulting from a process of psychological displacement. The emotional wounds of war were hidden by materialistic values based on the logic that since America won the war because of material superiority, Japan could recover by reconstructing the economy, rebuilding industry, and working to catch up and surpass America economically. That approach was based on a traditional refusal to admit Japan's complete eclipse historically by Chinese civilization. Reactionary forms of materialism and obsessive faith in the economy were simply displaced forms of the extreme emphasis on Japanese spiritual superiority during the war. It was not a practical, functional economic principle but simply another manifestation of the extreme belief that the Japanese are spiritually superior. It was no more than a transformation of the ideology of the "rich and powerful military state" into a capitalist ideology focused on economic growth at all costs, convinced that the only thing that mattered was achieving material wealth.

The materialistic response to the war was further strengthened by post-war developments such as the economic boom during the Korean War, high economic growth, the economy of financial assistance to rural agricultural and lumber enterprises essential to the building industry, centralization in Tokyo, and restructuring of manufacturing industries; and it has now become the dominant mindset of the Japanese people. This determination to overcome the defeat of war through materialistic means is exactly what I be-

lieve has created the culture of Japan today, a culture that still refuses to recognize its emotional wounds.

But are the Japanese people entirely without conscience? Did no one experience a sense of guilt? Whether or not they feared the shame of others finding out what they had done, did no one agonize because they knew that they themselves had personally done something terribly wrong?

I would like to believe that is not the case.

For example, eight years ago I met a beautiful old man on a farm in Ōmi. Kawasaki Tajirō and his wife had been growing almost all of their own food on the farm for most of their lives. "There is no better livelihood than farming," he insisted at age 79 when I saw him as he jotted down a memo to himself on a faded old blackboard in his chicken coop: rice husks, 10 kilos; fish meal, 2.5 kilos; oyster shells, 10 kilos. Next to it he had written a poem.

Hello, little blossom of cock's comb.  
 I recall a child picking herbs in a Shanghai field.  
 "What are you doing?" I asked.  
 She smiled up at me and said, "Food, food."  
 There was a red bandage on her shoulder.  
 "What is this?" I asked, and she answered only  
 "I am a girl."  
 If she is still alive she would be fifty years old,  
 Holding a grandchild in her arms,  
 telling tales of war  
 without end.  
 It was not a red camellia that you wore  
 for your underrobe.

Under the blackboard was a single stem of camellia blossoms in a vase filled with water. I think of the poem as an expression of the old man's sense of guilt, kept quietly in a corner of his mind all these years due to his participation in the war. I later found out that he had been in China during the Shanghai Incident between 1931-1934, was next sent to the South Pacific from 1940-45 during the Pacific War, and was in the Philippines when the war ended.

There may not be many of them, but at least some Japanese people have found a way of their own to live with their sense of guilt. But their feelings have existed for half a century now without being adequately acknowledged or understood by society at large. The anti-war peace movement in post-war Japan was built upon a sense of Japan as a victim of war. Even the anti-nuclear peace movement in Hiroshima and Nagasaki and the work of journalists in collecting and passing on stories of wartime experience treat war as something that makes victims of both friend and foe, thereby circumventing the issue of blame.

Even so, there are those who have spoken of the Nanking massacre, reported the massacres in Manchuria (Northeast China) and the South Pacific, confessed to crimes committed as members of the Kempei security police and Tokumu special forces, or recorded that in the flight following defeat they were guilty of leaving family members and comrades behind to their fates. However, their voices were silenced by the overwhelming power of the post-war refusal to place blame.

In addition, those who survived student mobilizations at the end of the war suffer from the sense that the truly good and beautiful among them did not come back alive (this is called survivor's guilt). Their stories, too, have never been properly heard or analyzed.

I have always wanted to study the way in which, through denial and amnesia, Japan's refusal to face the war of aggression and its unwillingness to ascertain the multiple forms of war crimes committed by the Japanese people has impoverished the Japanese culture. I decided to approach the problem by telling the story of individuals who lived their life since the war unafraid to acknowledge their guilt, and by their example show how the majority has failed to confront its own guilt.

I began the process of searching for precious evidence of a sense of guilt in Japanese individuals like someone panning for gold.

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2. Published 1989; Japanese trans. *Chinmoku to iu na no isan* by Himeoka Toshiko, Jiji Tsushinsha, 1993.

Just about that time, I read a book called *Legacy of Silence: Encounters with Children of the Third Reich*, which contained interviews with the children of Nazi perpetrators of crimes in Germany, on the other end of the Eurasian continent from Japan.<sup>2</sup> The author is Dan Bar-On, who was taken by his father from Heidelberg in Germany to safety in Israel before the war and is now a psychologist. In the book, he explores how the children of Nazi leaders had accepted or denied their parents' guilt 40 years after the end of the Second World War.

West Germany in the 1980s was teaching children about the crimes of the Nazis and was making it clear that an understanding of the past was the basis on which to build the present. As a result of Germany's deep sense of regret for having brought the Third Reich into the world, the countries of Europe were able to accept the rapid reunification of East and West Germany after the breakup of the socialist bloc. Had Germany not gone through its aggressive period of education in the 1980s, the rest of Europe would surely have had far greater misgivings about German reunification.

Nevertheless, even in West Germany until the middle of the 1970s there was little attempt to educate its people fully about the Nazi past. The only role most schools fulfilled was to preserve complete silence about the past of the parents' generation, and history lessons ended with Bismarck in the 19th century.

Most of the middle-aged men and women whose fathers had been close to Hitler declined to be interviewed by the Israeli psychologist who traveled tirelessly throughout Germany in search of a "legacy of silence," but a few came forward and began to tell the story of their emotional histories for the first time, albeit with some trepidation. Their fathers had been instrumental in ordering and carrying out mass murder from various positions of power in the central government such as extermination camps and forced labor camps, special military units, euthanasia programs, the Gestapo, and the network of deport and transport systems. Among those interviewed were the nephew of security chief Reinhard Heydrich, the son of Nazi party chief Martin Bormann, and the daughter of army chief Hermann Göring.

Though these men were the primary movers in a program of genocide, they were men who at home showed a love for their families and for music. Many of those interviewed wondered if their fathers really knew what was going on. One remembered his father as a gentle man who, just before committing suicide after the defeat, took his child for a walk as he hummed a favorite tune. Others lived in fear of the possibility that they carried genocidal DNA in their own blood.

For example, one man whose father had assisted in the death selections as a doctor at Auschwitz refused to follow the path towards membership in the intellectual elite that his family had followed for generations, and instead became a cook. He says, "It is unfortunate that nothing was taught about it in our schools after the war. The word Hitler did not even exist. Our generation had to dig up information by itself. As a result, we ended up with a situation in which some people believed there was an Auschwitz, others did not." Thus, the stories unfold of 11 people who lived in the silent generation of the postwar period.

Then, finally, the author is relieved to hear the story of a man who was once a member of the Hitler-Jugend (Hitler Youth) and whose father was a member of Hitler's inner circle, but who tried and failed to save the Jews in the ghetto and subsequently became mentally deranged as a result. In the midst of his suffering, he kept crying "Christ was himself a Jew. We must have respect for the Jews." The longer Bar-On stayed in Germany, the more he found himself searching together with the children of the Third Reich for a sense of hope for humanity in the second generation after the Nazis. The book ends with a suggestion that the children of Nazis who are attending a conference at which the author's research is being addressed should form a discussion group to explore the structure of their self-identities. Afterwards, Bar-On invites all of them to Israel to spend four days with the children of people who were killed in the extermination camps.

Bar-On's research shows that it is possible even half a century after the war to conduct a scientific study of people who lived through the war. Unfortunately, for those of us living in Asia, the

conditions do not exist for the children of the perpetrators to enter into a meaningful discussion with the victims or their children. The citizens of China and several other Asian countries are limited politically in what they can say. Nevertheless, the Japanese people could convey the meaning of the 20th century to the rest of Asia if we were able to convey the sense of guilt of those involved in the war and undertake a detailed analysis of it. The awareness of guilt that still lingers in Japan is a valuable part of our human culture, and by understanding how Japanese culture has suppressed a sense of guilt about the war, we can come to an understanding of who the Japanese really are.

### Chapter One: War and the Japanese Medical Profession (The Story of Dr. Yuasa Ken, an 80-year-old Doctor)

Post-war medical schools in Japan have preserved the exact same instructional program used in the pre-war period and have followed a philosophy of antagonistic competition, rigid hierarchy, and urban centralization of hospital services. As part of the health care insurance system, the two main concerns of doctors who attend academic medical conferences have been how to improve methods of treatment and how to increase their profits. This sort of medical practice and treatment has been successful in establishing enormous medical centers and operating high-tech medical equipment, but it has failed to respond to the emotional needs of patients. Why is this the case?

Post-war medical care in Japan is directly linked to wartime Japan. There was no evidence of careful soul-searching by the medical profession after the war. For example, the very same doctors who developed germ warfare in China and carried out medical experiments on humans as members of the Army Disinfection and Water Provision Corps (Unit 731) later, in the post-war period, became professors at medical schools (Kyoto National University, Kyoto Prefectural University of Medicine, etc.) and chief officers of public hospitals, or found work in government as policy makers in the Ministry of Welfare and set up businesses such as the "Green

Cross" specializing in the manufacture and distribution of blood products. The wartime legacy of the medical profession's failure to respect human life is apparent in the current corporate culture that led to the "Green Cross" AIDS scandal involving contaminated blood and in the special relationship between the Ministry of Welfare and the medical profession.

However, germ warfare was the least of the crimes committed by the medical profession. On the Chinese mainland, military doctors performed vivisection and medics used Chinese people for surgery practice. The vivisection of captured American soldiers at Kyushu University Medical School in the final days of the war are well known, but they were just the tip of the iceberg. There has been almost complete silence about the "work" done by numerous military doctors during surgical demonstrations or for purposes of education. One man who has spoken out unflinchingly about the crimes he committed as a medical doctor is Yuasa.

Yuasa Ken was born in October, 1916 (Taisho 5), the son of a medical practitioner, and grew up in the neighborhood of Echizenbori in the Kyobashi section of Tokyo. His father received his medical training and became a doctor after great hardship, and perhaps for that reason he took the greatest pleasure in caring night and day for his patients as the local neighborhood doctor. Yuasa was the third of nine children, with an elder sister and an elder brother. When he was in the first grade of elementary school, he came close to dying when his home was destroyed by fire in the Tokyo Earthquake of 1923. For a while his father treated patients in a temporary facility outdoors, and during that time Yuasa was evacuated to his grandmother's in Chiba for two and a half years. There, the little boy from Tokyo was often bullied by local children who refused to play with him. It was the same kind of mistreatment that would be directed at children who would later end up in the countryside as a result of wartime evacuation of the cities.

After his return to Tokyo, Yuasa's homeroom teacher during fifth and sixth grades at Meishō Elementary School was a hardworking man originally from Okinawa. This man had become a teacher after experiencing discrimination and great hardship, yet

Yuasa remembers well being told by him that "The Japanese people are a superior race. They must conquer China and become the masters of all of Asia."

In 1929 (Showa 4), Yuasa entered Tokyo First Public Middle School (currently Kudan High School). On the way to and from school each day, he stopped to pray at Yasukuni Shrine, which was next door to his middle school. The previous year (1928) saw the "event of March 15th" (the mass arrest of Japan Communist Party members), and in the month Yuasa entered middle school, the "event of April 16th" occurred (likewise, a roundup of Communist Party members). It was a period when Japanese society began to lean heavily towards militarism under new laws promulgated to preserve internal security. Then, in 1931, came the Manchurian Incident, and in the following year, 1932, came first the Shanghai Incident and finally the "event of May 15th." Receiving a certain amount of military instruction at school, Yuasa was just an average middle school student of the time, trusting the story of three brave heroes who acted as human bullets that came out of the Shanghai Incident (and which proved to be a lie), thrilling to the lyrics of the song of the Mounted Bandits that announced "I am going; you come, too; crowded Japan is no place for us," and believing that Chinese and Koreans were inferior races capable of little more than peddling noodles.

In 1934 (Showa 9) Yuasa, who excelled in his studies, was admitted as a young man to the preparatory school of the medical program at Tokyo Jikei Hospital. He recalls that "I naively believed that if I studied hard and became a doctor, I could make a good living anyone would be proud of. I was completely unaware that the nation and the times might have a profound influence on me."<sup>3</sup> A friend of his, Hayashi Toshikazu (now at Ōji Seikyō Hospital), was arrested for anti-war activities and expelled from First High School before he entered medical school. This friend once told him that after the war large land ownership would be abolished, but no one took what he said very seriously.

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3. From *Kesenai kioku—Yuasa gun'i seitai kaibō no kiroku* [*Indelible Memories: Army surgeon Yuasa's record of vivisection*], as told to Yoshikai Natsuko, Nitchu Publ., 1981.

In 1937 the Marco Polo Bridge Incident occurred, and that winter Nanking was attacked. Of course he heard nothing about the massacre, nor did he have any interest in finding out about it.

In 1941, he graduated from medical school and became a doctor of internal medicine at Komagome Hospital in Tokyo, specializing in contagious diseases. This was because he felt that knowledge of contagious diseases would be beneficial if he were ever sent to war. In October of that year, he applied for short-term deployment as an army surgeon and was assigned to Asahikawa Infantry Squadron 28. At the time of the June enlistment examination, he was encouraged by the officer in charge to apply for full status as an army surgeon.

After two months of training in the general infantry, he was promoted to the rank of First Lieutenant Army Surgeon along with two or three of his classmates from medical school. This is the way that army surgeons were made. To Yuasa, who believed in a superior class of beings made up of the imperial family and the descendants of samurai, it made perfect sense that medical doctors should be commissioned officers. Even so, the satisfaction of enjoying success in his career was tempered by the realization that he would likely die on a battlefield somewhere. Yuasa was a man who faced reality and did his best to adjust to it. He was not one to flee from the facts, but neither was he one to let himself be brainwashed. He was a fine young man who had grown up in the environment of a medical school education in which the only important things were memorization and practice, and who had been completely deprived of his ability to voice criticism.

On December 8th of 1941, the year Yuasa joined the army, the Japanese military attacked Pearl Harbor, signaling the beginning of the wider Pacific War. At the end of January the following year, 1942, Yuasa was assigned to the Luan Army Hospital near the city of Taiyuan in China's Shanxi Province. During his period of service there, he remembers being impressed by how hard the Chinese coolies worked. "Even Chinese people are capable of hard work," he thought in amazement, but he felt no particular pity for them. He also remembers seeing a Chinese person riding in the

first class section on a train and thinking, as a Japanese commissioned officer, "Who does that person think he is?", but he was sophisticated enough not to put the thought into words.

In Taiyuan, the Shanxi version of the Monroe Doctrine held sway and was the home of the only regional warlord who managed to survive into old age, Yan Xishan [Yen Hsi-shan] (1883-1960). In October of 1937, Taiyuan fell as a result of the Nikka (Japan-China) Incident. Yan Xishan's soldiers avoided confrontation with the Japanese army, thereby retaining their power. Instead, the Japanese army fought a bitter battle against the 8th Army (the liberation army organized by the Chinese Communist Party), which entered from the west.

The staff of the Luan Hospital consisted of the director of the hospital, who was a Lieutenant Colonel, and eight army surgeons. Yuasa was assigned to the Contagious Diseases Ward, Pathology Testing Unit at the hospital. There were approximately 30 patients being treated in the Contagious Diseases Ward suffering from infectious tuberculosis, intestinal cholera, para-diphtheria, dysentery, diphtheria, and recurring fevers.

In the middle of March, about 40 days into Yuasa's assignment at the hospital, the director of the hospital, Lieutenant Colonel Nishimura Keiji (surgeon and graduate of Okayama Medical School), announced one day after lunch that he would be conducting a practice surgery session from 1:00 p. m. and wanted everyone to assemble in the autopsy room.

Yuasa received the news with a sense of resignation. He had heard already as a student at Jikei Hospital Medical School that army surgeons performed vivisections, and he knew that it was unavoidable. At that time his only reaction was a feeling of fear, coupled with a sense of curiosity to see what it would be like.

Now that it was imminent, he felt strong resistance to the idea. Yuasa usually approached his work eagerly, but that day he arrived late at the autopsy room. It was a room he knew well from several autopsies he had conducted on patients who died from tuberculosis, dysentery, and intestinal cholera, but today his footsteps were heavy.

He saw no one in the courtyard of the hospital. Usually coolies who worked in the hospital were lazying about, but today he did not see a soul. There was something unusual about the place that day. At the entrance to the autopsy room armed soldiers stood guard with fixed bayonets.

In the cavernous autopsy room, about 30 feet square, were assembled not only surgeons from Luan Army Hospital but also surgeons from the army division. The chief of the divisional medical corps, Colonel Ōtake, was engaged in friendly conversation with Hospital Director Nishimura.

Yuasa bowed to both of them and took his place next to his immediate superior, Lieutenant Hirano Kōji, head of the Contagious Diseases Unit, and slowly surveyed the room.

In a corner to his left were two farmers with their hands tied behind their backs. The strong, well-built one stood there in silence. The other was a smaller, dark-skinned older man, and he was crying out in terror "Aiya, aiya."

On a cart next to the operating table, nurses lined up instruments such as scalpels, amputation knives, and bone-cutting saws. Along with the clatter of the instruments, the surgeons and nurses exchanged jokes and indulged in loud laughter. Theirs was a professional act, designed to convey normalcy and the sense that there was nothing to be nervous about.

Yuasa took his cue from the commissioned officers around him and maintained his composure. Even so, he could not help asking Lieutenant Hirano beside him whether the two men had committed some crime deserving death.

"The 8th Army would kill them anyway," was his reply.

"Oh, yes. I had forgotten," Dr. Yuasa nodded lightly in agreement.

"Shall we get started?" came the signal from Hospital Director Nishimura. Prodded by guards, the larger man walked calmly to the operating table and laid himself down on it. "A brave man, even if he is Chinese," Yuasa remembers thinking admiringly. But when he considered that the man was submitting to the power of the Japanese army, the man's behavior struck him as the only sensible way.

The scrawny-looking man, however, was wailing loudly and refused to come forward. The more the armed guards prodded him with their bayonets, the more desperately the man tried to avoid approaching the operating table. Finally, the filthy man backed right into Yuasa.

### Surgery Practice

Yuasa Ken, army surgeon, was no longer capable of imagining what human beings who were about to be vivisected might be feeling. The two men who were to be operated on were nothing more than medical objects to him. To some extent he understood the feelings of the man who climbed onto the operating table by himself, that he was a brave man, and that he was submitting to the power of the Japanese army. But this was simply a reflection of Yuasa's impoverished value system. In his mind a man either lived manfully or he was a coward—those were the only choices. He could imagine neither the bitter humiliation of the Chinese men, their land invaded, who were going to be killed, nor the horror they felt at facing the most miserable death any human being could suffer—to be butchered alive. If he had believed in an afterworld, surely it was the sort of death that would turn a man's soul into a restless ghost seeking vengeance.

To First Lieutenant Yuasa, the only human relations that existed in that room were those involving his fellow army surgeons. He had no relationship as a human being with the Chinese men who were to be killed.

The man with the dirty face continued to moan "Aiya, aiya" as he backed away from the operating table towards Yuasa.

When the now 80-year-old doctor reached this point in his story, he gritted his teeth and his eyes filled with tears.

"I feel so ashamed of myself."

It was perhaps the first time I had ever heard words spoken from such deep remorse.

The young surgeon, Yuasa, was also thinking at that moment that he had to be careful not to do anything he would later regret.

*I must not do anything shameful. Why did I have to choose this place to stand? How brave is the novice army surgeon?—that's what they are all thinking. If I have to wrestle with this dirty fellow, I'm going to soil my hospital whites.*

These thoughts raced through his mind as he shouted in a majestic voice "Move forward!" and pushed the man towards the operating table.

The old farmer who had backed into Yuasa must have lost his balance when pushed from behind, for he fell forward and was forced onto the operating table, still moaning "Aiya, aiya." Army surgeon Yuasa was proud of himself for avoiding having to wrestle with the man.

For the act of pushing the man, and for thinking that he must be careful not to do anything he would later regret, Yuasa now shuts his eyes in sorrow. Fifty years ago, when he thought, "I have to be careful not to do anything I'll regret later," it was based on a morality aimed only at his army surgeon colleagues. Now, when Yuasa takes a deep breath and says he is ashamed of himself, it is in relation to all human beings, to himself as a human being. That is morality in its true form. But for the Japanese people of that day morals were something that changed depending on person, place, and circumstance.

We must return repeatedly to Yuasa's first vivisection, so let us continue with the story.

The man held onto the operating table and stretched his body in resistance.

A nurse approached the man and comforted him. "*Sui jo*" (lie down). "*Ma yao gei, bu tong*" (I'll give you some anesthetic; it won't hurt).

Perhaps hearing his mother tongue dissipated his fear, for the man allowed the nurse to place him flat on his back. The nurse glanced back at Army Surgeon Yuasa with what he took to be a smug look of professionalism on her face. He was appalled that she could speak such lies.

After the intravenous anesthetic was administered, the man would never get up again. The 20 army surgeons present in the autopsy room divided into two groups and placed themselves

around the two operating tables. They cut off the crude hempen clothes the men were wearing, leaving them naked.

Army surgeon Yuasa noted that the farmer's body bore no bruises or evidence of torture. This struck him as strange. It meant that the man had not undergone interrogation of any kind. He had simply been arrested and brought in.

Later, when he himself was put in charge of carrying out these things, he learned that vivisection for educational purposes did not take place spontaneously. Even though Hospital Director Nishimura had only announced it at lunch that day, preparations had naturally been made in advance. Initial orders were issued by the First Army (one of the regional armies in North China that occupied Shanxi Province) and sent to the various army division medical corps, mobile medical units, and army hospitals to be carried out, and it was the chief of general affairs at the hospital who took care of making the actual arrangements for the vivisection.

Notification by higher authorities was not the only way vivisections were arranged, however. All the Army Hospital had to do was tell the Security Police [Kempeitai] how many subjects were needed, and it could rely on getting exactly that number of Chinese captives on the day specified; the Security forces always obliged with the number requested. For example, if someone informed on a Chinese man, the man could immediately be arrested. Since the arrest was not based on proven facts, false accusations inevitably occurred and innocent men were almost certainly among them. In any case, it is not true that the choice of subjects for vivisection was based on the rationale that they were prisoners already condemned to death, as is generally believed.

"It was never the case that we used prisoners for vivisection just because there were extra prisoners available. It was always 'We need them, so get them for us.' They were necessary for surgery practice in order to save the lives of Japanese soldiers, you see. Chinese people were arrested for that purpose alone."

Army Surgeon Yuasa learned all this because he later became chief of general affairs at the hospital and was himself in charge of making arrangements for practice surgeries, but at the time of the first vivisection what most impressed him was the fact that there was not a mark on the farmer's body.<sup>4</sup>

In order for one of the surgeons to practice piercing the lumbar vertebra for spinal anesthesia, the first man was placed on his side and the surgeon began inserting a needle.

"Is it disinfected?" Yuasa asked.

"What's the point? We're going to kill him anyway," Lieutenant Hirano answered with an annoyed expression.

After spinal anesthesia was administered, they placed the man on his back and bound his arms and legs. Next, they practiced administering total anesthesia using chloroether.

They covered his nose with a mask and began administering the anesthetic. They held down the struggling man until he fell asleep and began to snore.

The first practice surgery involved an appendectomy (removal of the appendix) performed by two surgeons from the divisional army. Since antibiotics were not yet widely used in those days, it was important that the incision be as small as possible. They made an incision in the abdomen just big enough to insert two fingers, but a healthy appendix is smaller than an infected one and therefore they had difficulty locating it. They made a second incision and still could not locate it. With the third incision they pulled out the entire caecum, removed the appendix, and sutured the wound.

The practice surgery continued with an upper-arm amputation performed by First Lieutenant O. Amputation is the only option when limbs are severely damaged by bullet fragments. He inserted the amputating knife deep between the upper arm and torso, then twisted forcefully to cut through the skin and muscle in one circular motion. This was First Lieutenant O's first attempt

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4. In the description of the dissection which follows, in sections where my interview with Yuasa was vague I rely on the description he gave to Yoshikai Natsuko, in *Kesenai kioku [Indelible Memories]*.

at an amputation, and he cut through the muscle only with great difficulty.

Once the blade of the amputation knife had reached the bone, the arteries were clamped shut with forceps. Then the flesh around the amputation site was pushed up as far as possible and the bone was cut. This was done so that the cut bone surface would be deep inside at the end of the operation. The large bone heated up from the sawing motion and bone dust rose like smoke. The First Lieutenant sprinkled salt water on the bone to cool it as he cut, and then smoothed the cut surface with a file. Next he pulled the nerves out as far as possible from the amputation site and severed them to prevent future problems with nerve pain. He sutured the arteries and then gradually eased the clamps on them to make certain there was no bleeding. The final step was suturing of the muscle and skin. The farmer's arm was now gone.

The next pair of surgeons continued with practice surgery to repair damage to the intestine. When a bullet enters the abdomen, infection to the abdominal lining results from the intestinal perforation, unless the damaged section of the intestine is removed and the two healthy ends are reconnected. The two army surgeons made an incision in the center of the abdomen, removed the intestine, and cut out a section of it at random. They then reconnected the two ends of the intestine, reinserted it into the abdomen, and closed the incision. This ended the exercise. The farmer who had lost his arm earlier and now had a section of his intestine removed was breathing shallowly.

Next came a tracheotomy. If a bullet strikes the chest, blood fills the trachea and causes suffocation. Using a hook-shaped surgical tool called a "field combat tracheotome," one of the army surgeons made a quick incision from the top of the neck to the larynx. Red blood mixed with saliva came gushing out with the sound of each breath. This was carefully cleared away with a feather. Gradually the blood subsided and all that remained was a quiet wheezing sound, like someone blowing gently on a flute.

Three hours had passed. Surgery practice ended at 4:00 p. m. The surgeons from the army division left, and the only ones in the autopsy room were the doctors belonging to the hospital and some of the officers from the medical corps, about seven or eight men altogether. The nurses had also left.

"The two Chinese men on the operating tables were still breathing, although weakly. It would be humiliating for us to toss them that way into the hole that had been dug behind the autopsy room. Hospital Director Nishimura therefore took a 2cc syringe and injected air directly into their hearts five or six times, but there was not the slightest change in their breathing. I strangled one of them with my hands and applied pressure to the carotid artery, but I still could not get him to stop breathing. Finally, First Lieutenant O and I tied the man's belt around his neck and strangled him by pulling hard on both ends, but still his breathing did not stop.

"Just then, Sergeant-Major Ōtani Misao, a doctor who had entered the autopsy room after the operations, told us 'If you inject anesthetic directly into a vein, that will do the trick.' Following his directions, I took up 5cc of the remaining chloroether in a syringe and began injecting it into a vein in the man's left arm. I had injected about 2-3cc when he coughed quietly five or six times and then stopped breathing. I dealt with the other man the same way. I assume, of course, that the medics then took care of disposing of the bodies, for we army surgeons left the room after that."

That night, Yuasa felt restless and went out with his colleagues for a drink.

The above practice surgery took place in March of 1942 on behalf of the army surgeons of the 36th Division field hospital. Yuasa remembered it well because it was his first such experience.

As I listened to his story, I was dumbfounded. I thought of the total anesthesia, tracheotomies, and intestinal reconnections I had practiced on dogs; of spinal anesthesia and appendectomies I had performed after becoming a doctor and I had gained experience as an assistant at various surgeries; and the emergency amputation of a leg I had assisted in. All of these things that a doctor experiences over the course of an extended period of time were

carried out on a human subject in the space of three hours. Moreover, Yuasa's account was completely different from the human experiments I had read about—things such as removing liver cells through an incision, measuring how low the body temperature must fall before death occurs, or inducing death by injecting air into an artery, etc. The army was using human subjects merely to produce army surgeons as quickly as possible. Saddest of all, it had no affect whatsoever on these young doctors as human beings.

### **The Medical Profession, a Product of Its Times**

In the three years from that point until the defeat, Army Surgeon Yuasa participated in a total of seven vivisections, including the first. Five of them were practice surgeries for divisional army surgeons, one was for the education of freshman medics, and one he participated in for the education of army surgeons of the Taiyuan Army Surgeons Corps. Fourteen Chinese people were butchered in these vivisections.

In accordance with secret orders issued from the North China Regional Army, practice surgery was to be carried out in each and every division twice annually for the education of army surgeons. The second one took place in autumn of that year. Assembling the army surgeons of the 36th Division, Hospital Director Nishimura served as the person in charge and, as usual, two Chinese men were made available for surgery practice. This time, Army Surgeon Yuasa was among those who operated, performing his first tracheotomy. Nearby, Doctor of Dentistry First Lieutenant N performed lower jaw surgery on a simulated jaw fracture, and a young urologist Second Lieutenant Andō performed a testicular extraction, exclaiming excitedly "Hey, I got it out!"

Not all army surgeons were necessarily educated as specialists in surgery like Yuasa, and being a specialist in surgery was no guarantee that a doctor was equipped to handle the entire range of specialties that were required when dealing with injuries that occurred in battle. Practice surgery was the quickest and easiest way to educate them.

The third vivisection took place in December of 1942. This time, in response to orders from the First Army, all 50 army surgeons from each division in Shanxi Province received instruction in military medicine at Taiyuan. In the afternoon of the second day, led by Second Lieutenant Shūkichi, director of the surgery office of the First Army, they fired bullets into the abdomens of four Chinese men and then practiced removing them without the use of anesthesia, in addition to the usual tracheotomies and amputation of limbs.

First Lieutenant Yuasa became the officer in charge of general affairs at the hospital in April, 1943. This placed him second-in-command. From then on it was his responsibility to make arrangements for vivisections. The war was at a standstill when orders arrived from the North China Regional Army in Beijing: "The quality of army surgeons has deteriorated. They are no longer able to perform adequately in battle conditions. Implement frequent surgery practice." In response, First Lieutenant Yuasa drew up plans to increase the frequency of practice surgery from two to six times annually, or every other month. In actual fact, however, due to circumstances involving troop movements that several times prevented the divisional surgeons from assembling, only three practice surgeries were performed.

At one of them, a practice surgery that took place on a cold day in November, attendance was so poor that only one Chinese man was needed for vivisection, so Hospital Director Nishimura's successor, Hospital Director S, took the opportunity to behead the other Chinese man with a Japanese sword.

At another practice surgery, after the divisional army surgeons were finished and had left, he had a medic help him open the skull, extract the brain, and then took it to Hospital Director S, who had requested it. He learned that Hospital Director S had been asked to provide it by a former army surgeon, Regimental Commander Sugino of the 9th Regiment Telegraph Corps, and that the healthy brain would be sent to a Pharmaceutical Company in Japan.

A few months later, he was again asked by Hospital Director S to surgically remove a brain. In response, Army Surgeon Yuasa decided to conduct the next anatomy class, scheduled for a new group of reserve medics from Yamanashi Prefecture, on a living body. He thought, "Instead of relying on anatomical charts, I think I will surprise them with something new. It will toughen them up." So he contacted the Security Police [Kempeitai] and had them bring him one Chinese man. Army Surgeon Yuasa performed the vivisection himself, removing the internal organs and showing them to the reservists. Afterwards, he opened the skull and cut out the fresh brain.

Since the very first vivisection, Dr. Yuasa felt very little psychological resistance. He was a bit nervous the first time because it was a new experience, but he went out drinking with his colleagues afterwards and felt better. After that, he never questioned what he was doing nor did he suffer mentally from it. He never once had a nightmare involving vivisection. He is able to describe his first vivisection in detail only because he was forced to recall it later when he was accused as a war criminal. Vivisections were a part of his business, and he performed them with the same inborn seriousness of purpose with which he approached the care of sick and injured soldiers. In the beginning, it could be argued that he performed them under orders from the North China Army or the First Army, but the later ones were done on his own initiative. The removal of brains and the use of a living body to teach reservists their anatomy lesson was entirely unrelated to surgery practice, but by then he was incapable of making such distinctions.

Doctors encounter death every day. As soon as we enter medical school we start our study of anatomy with the dissection of cadavers, and through the study of pathology, daily clinical evaluation, and research we grow accustomed to looking at human beings as physical bodies. For that very reason, if we are to avoid degenerating into practicing a "medicine of death" or a "medicine of the physical body," it behooves us to learn first a "medicine of life" which recognizes people as living beings. How are a mother

and her child linked? How do infants develop and grow? What does it mean to suffer emotional problems? How does aging affect one's relationship to society? To the extent that medicine fails to base itself upon a "medicine of life" that pays close attention to mental and emotional development and personal lifestyle, its focus will be limited to the mere mechanics of internal organs and illness.

If we trace the process whereby Yuasa adapted so easily to being an army surgeon who performed vivisections, what we discover is that Japanese medicine never succeeded in creating an independent philosophy opposed to militarism. A strong society is a society that is structured with each of its components having a distinct philosophy not easily compromised by the whole, but mutually antagonistic to each other. As far as Yuasa's medical education went, he learned only to be interested in the human body, and to adapt himself to the medical profession in order to have a successful career.

Moreover, in addition to vivisections, Yuasa was involved in sending diphtheria and dysentery germs collected from his patients to the Disinfection and Water Provision Corps of the army. He was unaware how these were to be used, but the Water Provision Corps asked for cut only the freshest and most potent germs in order to use them in germ warfare. The germs were cultured and delivered to the army. The army then scattered them as part of their attack strategy.

Furthermore, in the autumn of 1943 he received a request from the First Army Commander of the Medical Corps, Major General Ishii Shirō (1892-1959), founder of the infamous Unit 731 to participate in a mock exercise to exterminate air-dropped fleas infected with the bubonic plague. He also attended a class taught by Commander Ishii in which Chinese subjects were used to demonstrate the effects of frostbite on the human body. Another time, he took part in a study of venereal disease among Korean comfort women in March, 1945, when he was assigned to the Southern Shanxi Province Battalion as battlefield surgeon.

### Self-Justification and Rationalization

Yuasa began his assignment at the Shanxi Province Luan Army Hospital in February, 1942, and three and a half years later in Taiyuan, Shanxi Province, on August 15th, 1945, he received word of Japan's defeat. In Taiyuan, there was much debate among the Japanese expressing opinions such as "There's no point in returning to Japan when it is in chaos," and "Let's remain here and work on behalf of China." This turned into a full-fledged movement to remain in China. The movement was fueled by self-serving considerations of the continental Japanese, such as "I do not want to lose all of my investments in China," and "I am not sure what awaits me if I return to Japan." The head of the People's Society to Remain in China, Kōmoto Daisaku (1883-1955)—staff officer of the Guandong Army who planned the assassination of Zhang Zuolin (Chang Tso-lin), and who afterwards became president of Shanxi Industries, Ltd. in Shanxi Province—and others like him are prime examples. In the end, 2,700 armed soldiers and 3,000 technical personnel responded to conscription into the army of the Nationalist Party and remained in China with their families.

Yuasa decided that "If Japanese people are remaining behind, I will stay, too, and take care of them as their doctor. For a while, at least, they will be needing me." Tokyo was completely burned out, and he had no idea what he would do if he went back there. In the back of his mind, he also may have felt that by seeing Chinese patients he would be able to atone for his misdeeds. Yuasa established a medical facility called the Nikkyō Clinic and began examining and treating Japanese and Chinese patients. The officers and soldiers who remained behind continued to battle the Communist 8th Army, and Yuasa was sent out on occasion to assist them as army surgeon.

However, as they continued to suffer defeat at the hands of the 8th Army, from the fall of 1947 to the spring of 1948, most of the Japanese people returned to Japan. Yuasa thought, "Even if we are defeated, with my skills as a doctor I should be able to survive somehow. As long as there are even a few Japanese people left, I cannot leave them," and he continued to examine and treat pa-

tients at the clinic. During this time, he married at the end of 1947 and eventually had two children.

In April of 1949, Taiyuan finally fell to the Communists. He was ordered to the provincial hospital where he continued his treatment of patients. Each day he spent his mornings making house calls, and in the afternoons he made the rounds of the hospital wards and gave instruction to young Chinese doctors.

In January of 1951, however, he was sent without warning to a prison camp in Yunnan, Hebei Province. His family was also taken into custody.

At the time, Yuasa had absolutely no sense of having done anything wrong. All he thought was that "Crimes were committed by the Security Police [Kempei] and by people like Ishii Shirō with his frostbite experiments, but even in wartime conditions we regular doctors did nothing particularly wrong." Neither did he feel that surgery practice on living human beings was evil. For a while, he thought of prison camp as little more than a place where he would receive instruction in Communist ideology. It was when he was asked to make a confession of guilt that he began to feel uneasy about vivisection for the first time. He was assailed by doubts and fears: "How many people in the prison camp know about it?" or "I wonder if they are keeping their mouths shut?" The Korean War was growing more intense, however, so he did not take his plight that seriously. "There is no way they could be victorious against the powerful United States," he thought. "Conditions will change soon, and anything I may have done will no longer be an issue."

Over the years I have met many officers and soldiers who were imprisoned in Chinese camps for war crimes, and the one thing they had in common was a complete lack of fear of retaliation. No one is worried that, "I murdered Chinese people. Therefore, no matter what the situation, I, too, might be killed by the Chinese." Along with the lack of a morally-based sense of guilt, they have a strong expectation that the Chinese will forgive them. Since they do not recognize that they have done anything wrong, it never occurs to them that they should take responsibility for it.

However, even if they do not feel they have done anything wrong, one would expect that since they murdered large numbers of Chinese people, they would fear being killed in retaliation whether they deserved it or not. Nevertheless, none of them ever expressed such fears.

Yuasa also might be expected to fear that, having conducted vivisections (apart from the issue of whether it was right or wrong to do so), he would also suffer vivisection. But the thought never even occurred to him.

"Inside, I was making all sorts of rationalizations to justify what I had done. 'I was just following orders. There was nothing I could do about it. There was a war going on. It was not the first time something like this had been done. Everybody was doing it.' Things like that. Plus, the war was already over."

Here, we see clearly an example of how mentally "strong" people are who live their lives conforming to the group and who possess only the weakest sense of themselves as individuals. People with no sense of self are comfortable only as long as they belong to a group. When the group panics, they panic, but the feeling soon passes. Groups always make it unclear how much responsibility individuals bear for their actions, and they function on the premise that all actions are agreed to by everyone in the group.

Another reason he was not overly uneasy about his fate even though he was confined to a prison camp had to do with the attitude of the Chinese government. Over and over again, the prisoners were told, "The people of China are a generous people. If you truly repent of your misdeeds and reform your way of thinking, you will be forgiven and you can return home. If you stubbornly resist and make a false confession of guilt, you will inevitably be exposed and punished." Inside the prison camps, this was called the "Policy of Generosity." It was essentially the same policy as "Ideological Reform," applied in this case to Japanese war criminals.

Nevertheless, it is important to understand that there were several types of ideological reform practiced by the Chinese Communist Party at this time. Towards wealthy Chinese farmers, urban

commercial capitalists, members of the Nationalist Party, and collaborators with the Japanese Army, China was anything but generous. This fact is apparent from a series of government documents produced during the period after the People's Republic of China was established on October 1, 1949, when China turned inward after finishing the fight against outside forces such as Japan and the Nationalist Party.

The "PRC Land Reform Law" dated June 30, 1950, states the following:

In order to guarantee the implementation of land reform, people's courts shall be established in each province during the period of land reform and, employing circuit courts, those corrupt bosses who have committed heinous crimes and are despised by the people, as well as criminals who oppose the land reform law or try to destroy it, shall be tried in accordance with the law and punished. Indiscriminate arrest, assault, murder, and any other physical punishment or surreptitious physical punishment is strictly forbidden.

Nevertheless, four months later in the "Instructions Regarding the Suppression of Anti-Revolutionary Activities from PRC Central" dated October 1, 1950, the government had turned to vicious oppression.

Anti-revolutionary elements which refuse to repent but continue in their evil ways in the post-liberation period, particularly after receiving generous dispensation, shall be suppressed in conformation with regulations governing the punishment of anti-revolutionary activities as promulgated by the Committee of State of the Central People's Government. Those deserving of execution shall be sentenced at once to death. Those deserving imprisonment and reform shall be arrested and imprisoned at once and made to reform. In enforcing these matters, the court's decision shall be made public by announcement in the printed media (placed prominently where it will be noticed) or disseminated widely among the masses by other means for the purpose of political education.

Not a few Communist party leaders and committee members have become puffed up with pride due to the victory and have grown complacent about the enemy threat, or in the new political environment have come under the influence of corrupt ideas about personal freedom. As a result, they have confused the issue of opposition to isolationism in the context of the battle for national unification with the issue of resolute suppression

of anti-revolutionary activities in the context of the battle with the enemy, and have confused the correct, severe suppression of anti-revolutionary activities with indiscriminate murder, thereby misapprehending the policy of 'Combining Suppression and Generosity' as only a policy of 'Generosity'.

In this way, it is said that anti-revolutionary elements totaling 700, 000 people were sentenced to death.<sup>5</sup>

In addition, the ideological reform of Christian missionaries was severe and included torture. The American medical psychologist Robert J. Lifton has conducted a detailed analysis of missionaries and intellectuals expelled to Hong Kong in *Thought Reform and the Psychology of Totalism*.<sup>6</sup>

All of these policies belonged to a single Chinese Communist Party and were carried out during one period of time, but Japanese prisoners in their isolated environment were unaware of this.

### Confessing Guilt in a Protected Environment

In any case, China embraced a policy of generosity toward Japanese prisoners. They were provided with meals surpassing in quantity and quality those offered Chinese (Nationalist) soldiers in custody. Doctor Yuasa even received compensation for the diagnosis and treatment of Japanese prisoners he performed under orders.

It was a period of work, education, and confession of guilt within a collective. He heard the story of the "Long March" encompassing 250, 000 miles, and of the sad lives of China's farmers. Or, from a Japanese prisoner, he heard the story of how, after the liberation, a soldier of the liberation army whom he had been fighting as the enemy carried him on his back through the mud. The collective stories had a powerful emotional effect and induced each individual to reflect on his misdeeds. Weeping, they admitted remorsefully that, "The Chinese people bore such suffering and lived

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5. *Genten Chūgoku Gendaishi [Primary Sources in Chinese Modern History]*, vol. 1 "Seiji" ["Government"], eds. Mori Kazuko and Kokubun Ryōsei, Iwanami Shoten.

6. Published 1961; Japanese translation by Ono Yasuhiro, *Shiō kaijō no shinri—chūgoku ni okeru sennō no kenkyū*, Seishin Shobo, 1979.

so virtuously, yet we killed them mercilessly." Their regret for misdeeds and their trust of the Chinese side led them to make confessions of guilt. To use the metaphor of the sun and the north wind from Aesop's *Fables*, the confessions came in response to the warmth of the sun. There was also the threat that, if they did not confess their guilt, the north wind could be made to blow.

Yuasa confessed to his involvement in vivisections. He could not bring himself, however, to write that he had extracted brains from living bodies or that a urologist had removed a living man's testicles. He felt that those acts were too dirty, too shameful, and too despicable for him to claim that he had been able to rationalize them to himself because they were his orders. His written confession was immediately returned to him as inadequate, filled with excuses and showing a lack of genuine remorse.

At the end of 1952, as the Korean War reached a stalemate, Yuasa and several hundred other war criminals were transferred to a prison in Taiyuan, Shanxi Province. They were blindfolded and transported by train, and because they arrived at night he had no idea where it was, but he later learned that he was in the Taiyuan Prison. Taiyuan Prison: was that not the place where Yuasa and the other surgeons had performed vivisections on four Chinese men?

For the first three months in prison they were housed 10 men to a room, which was about 15 feet square, and apart from interrogations by prosecutors they were not allowed outside their cell. In March their treatment changed and they began to get cooked rice with fish or meat with their meals. In June, Yuasa collapsed from tuberculosis of the lungs. He was infected because he slept side by side in his cell with fellow inmates who were infected with tuberculosis. He had a high fever and coughed blood. The Chinese doctors conscientiously treated him with antibiotics acquired from the Soviet bloc. Yuasa battled his serious illness inspired by one thought: that he wanted to return to Japan and be with his children. Eventually the progress of the disease was halted and he recovered.

At this point, Yuasa had already confessed guilt for all of his misdeeds, including the ones he had omitted earlier. By the time

he received a letter from the mother of the man who had been vivisected for the education of the medical reservists, he was finally able to picture the man he had killed as not merely one man sacrificed to medical vivisection but as an individual human being with a family, and the realization had caused him unspeakable suffering and grief. This is what the mother wrote.

Yuasa, I am the mother whose son you killed. The day before his death, my son was picked up and taken away by the Security Police. I went to the gate of the Security Police Headquarters and waited and watched. The next day the gate opened suddenly. My poor son was placed on a truck and taken away somewhere. I followed on my bicycle, but because I have bound-feet there was no way I could keep up and soon I lost sight of him. I looked everywhere, but I had no idea where they had taken him. The next day, someone I knew came and told me what had happened to him. "Old lady, your son was taken to the army hospital and dissected alive," the person said. I was sad, so sad I thought my eyes would burst from weeping. I could not tend the rice paddies I had been cultivating. I could not eat. Yuasa, I hear that you are now under arrest. I asked the government to please punish you severely. (The contents of the letter written in Chinese as rendered by Yuasa.)

Doctors show little interest in the social relations and personal histories of their patients. They ask for an absolute minimum of information pertaining directly to the illness. In fact, they tend to think that if they know too much about a patient's personal history it may cloud their judgment regarding treatment. They have been trained in this way to see patients as living objects. How much more so the man he dissected alive. All of his mechanisms of repression were at work to forget what the man's face and hands looked like. Even when the image of the butchered man's internal organs floated in front of his eyes, he still could not recall the look of helpless horror etched on the man's face. But as soon as he read the mother's letter, he could see the man as an individual human being, surrounded by the family he loved. Moreover, the letter informed him that the man was taken into custody without just cause and turned over to Army Surgeon Yuasa the next day without investigation. The man was arrested solely because Yuasa had asked the Security Police to supply him with material for live dissection.

In his dimly lit prison cell, lost in solitary thought, Yuasa began to recall all sorts of forgotten details. Originally, in confessing his guilt, he had simply been thinking of how much he wanted to go home to Japan, and he wrote his confession out of his desire to pass the investigation of the prosecutors. Now those selfish considerations faded away and he began to realize what a twisted path he had followed as a medical doctor. Intending always to become a doctor who, like his father, lived alongside his patients as their equal, he had somehow ended up becoming the complete opposite. This happened not from his own will but because he had been swept along by forces in Japan that sent him in a mistaken direction, away from his true self. In the process, he had become a man without a self. Yuasa felt this from the bottom of his heart.

### **The Inability to Recognize One's Own Guilt**

Afterward there was great improvement in the treatment of inmates at Taiyuan Prison. The jailers continued to eat rice with chestnuts, but the war criminals were served cooked rice with side dishes of fish or meat. It was explained to him that this was because prisoners were required to be treated as closely as possible to the lifestyle of their mother country. They were also able to play volleyball in the athletic field. In the spring of 1956 they were even divided into several groups to make a tour of the new China.

In June of 1956, Yuasa received a stay of prosecution and was released. The Chinese side had decided to distinguish the deeds he had committed from the orders he had received, and on that basis they considered him responsible for the deeds. Even so, they gave him a stay of prosecution.

In July, he arrived in Maizuru, Japan, and returned by train to his home in Shinagawa, Tokyo. He had been away for 14 years. Though many people were on hand to welcome him home, he was shocked not just by the extent to which Japan had recovered from the war but also by something else.

Among those gathered to welcome him were army surgeons and nurses with whom he once worked. One of the army surgeons who had returned to Japan immediately after the defeat said this to him.

"Yuasa, why were you labeled a war criminal? I bet you insisted that the war was correct, didn't you? All you had to do was hide your feelings and go along with things, you know."

"No, that's not it at all. Remember what we did?"

"Huh? What do you mean?"

It was a full 11 years since the war had ended, and only now, for the first time, was the former army surgeon forced to recall performing vivisections. There was a wide gulf separating Dr. Yuasa, who had faced the past, and the doctors who had come to welcome him.

Yuasa discovered that all the army surgeons who had returned to Japan from North China took exactly the same stance. The North China Regional Army numbered 300,000 men, and there were at least 20 hospitals there to serve them. The hospital surgeons and combat surgeons combined must have numbered in the thousands. There were also thousands of medics and nurses. But not one of them said a word about guilt. Had even a single voice admitted, "We did terrible things here, so the best move is to get out of China," all the army surgeons would have left Taiyuan immediately in those days after the defeat. Given that no one thought of what they did as evil, there was no necessity even to deny it. Under the catch-all excuse that "war is a terrible thing," the events had been utterly forgotten without a trace even in the deepest recesses of their minds.

Immediately upon his return to Japan, Yuasa entered the Red Cross Hospital in Tokyo. He received treatment for the holes in his lungs left by his bout with tuberculosis. The following year, in March of 1957, he returned to his alma mater Jikei Medical School and restudied internal medicine. From 1958 he started working at the Nishi Ogikubo Clinic in Suginami, Tokyo, and he remains there today. In addition to his diagnosis and treatment of patients, he has participated in the Japanese peace movement.

For six years after returning to Japan, however, he said nothing about the crimes he committed in China. For a while, he was

concerned mostly with his survival. If what he had done became known, patients would stop coming for treatment, he worried. Eventually he won the trust of patients in the area and felt able to speak about them at rallies in support of the peace movement. Even so, his wife is still opposed to his speaking about war crimes. "My wife suffered in the containment camps in China. She doesn't want to remember any of it, I suppose. But, her resistance makes me feel very lonely," Yuasa says.

Yuasa published an account of the war crimes he committed in China in *Kesenai Kioku (Indelible Memories)*, as told to Yoshikai Natsuko. This book continues to be widely read.

Let me introduce here three responses to the publication.

One of them was from Dr. O, the doctor who had amputated the arm of the Chinese man at Yuasa's first vivisection. Perhaps he had recalled the past after being admonished by Yuasa, for he sent the following letter.

Regarding the publication of the reminiscences you told me about, to be honest I feel extremely threatened by it. A coward such as myself, through pure circumstance, was assigned an evil role, and I have suffered a tortured conscience each time I think of it ever since.

Unlike myself, you lived inside the Shanxi and Communist armies, you experienced a situation where you could suitably reflect on your misdeeds, and now your conscience is clear. I, on the other hand, live every day filled with deep anxiety. Please, I beg you on my hands and knees, lead me by your generous spirit away from these stormy seas (October, 1980).

Dr. O's forgetfulness was shaken because Yuasa persistently spoke to him over a long period from the 1960s to 1970s. But what sort of "tortured conscience" does the man really suffer? He possesses an abstract knowledge of the idea that the vivisection he performed is condemned by society today. However, he has not held imaginary conversations with the spirits of the dead as Yuasa did while in prison. It was on the basis of repeated lonely conversations with the spirits of the dead that, reading the letter from the mother of one of the dead men, Yuasa was able to bring them back from the realm of medical objects into the realm of humanity as

people who had lived in a certain time, were connected to the people they loved, and whose faces showed all the human emotions. It was a process that also involved self-discovery, turning Yuasa himself from a medical object into a human being. It was not that he had a clear conscience, but that he had chosen to live each day bearing his burden of guilt.

As to be expected, Yuasa also received anonymous threats. One postcard read:

I saw your report regarding vivisection and cannot contain my anger. It is impossible to understand what motivated you to speak out about something like that at this late date—publicity? You are the epitome of stupidity. With international relations as delicate as they now are, are you enough of an idiot not to realize what damage speaking about such things will inflict on relations between the two countries? Figure out the difference between things that can be said and things that must not be said . . . You are a disgrace.

The letter, written in old-fashioned script, was from a man of the wartime generation. Its concern with “damage to relations between the two countries” is worlds removed from the spirit of humanity that Yuasa seeks. It clearly reveals the emotional limitations of the old man who wrote it, educated as he was always to consider people’s actions in terms of his own interests.

Let me introduce one more letter that came from Yuasa’s own brother, Minoru, a doctor of internal medicine. After the war, Minoru established himself in Hokkaido as a medical practitioner.

The book arrived 3-4 days after your postcard. For some reason I felt a moment of uneasiness. Maybe it is a feeling common to all of us who went to war. I opened the pages and began to read. Earth-shaking! I felt I had to brace myself. This was what everyone had been afraid would come, and here it was. As your brother, I am prepared to suffer the consequences with you. It was brave of you to express yourself so honestly. It must have felt like spitting up blood to say those words. I do not have one ounce of your courage. Like you, I was forced to experience the bitterness of war, though not of the extreme sort you write about. They are the dark, dirty scars of my youth that I will never be able to wipe away completely. Even now, there are times when I cannot control feelings that make the blood rush to my head.

You were just a youth trained in samurai values in a household under the care of our middle-class parents in downtown Tokyo, and out of a sense of duty you obediently followed the orders of your superiors because they came from the army—no, from the emperor himself—and for the sake of your family and colleagues you blindly and without complaint submitted to ridiculous orders that you could never justify rationally. Some people would go to church and make a Christian-style confession of sins in order to express everything in their hearts, but you are one who puts things down in writing. It is something that requires great courage. For Japanese people immersed in the teachings of Buddhism, such courage is doubly difficult.

I realize that I completely misunderstood the word 'brainwashing' that returnees from China brought back with them. I thought it meant only to be converted to communist ideology. [Author's note: Returnees did not bring the word back with them from China. Others used it to label them.] Years ago, when we were boys, I read a story titled "The King's Ears Are Donkey Ears" in a book of Aesop's fables, about a timid barber who spoke the words of the title to a tree, and when the tree was made into a violin it sounded those words when played. I am just like that barber, and have been speaking all these years to nature for relief, and maybe I can only continue to speak to nature for the rest of my life.

I remember buying a camera in China and, fearful lest I dirty the lens, taking pictures of nothing but natural scenery. The fact that this year I made my third trip to post-war China is because I wanted to look at it with friendly eyes, praying for the recovery of the China we laid waste and searching for atonement. Maybe the reason I came to Hokkaido was because I thought its wide, open spaces and cold northern climate made it the right sort of place for me to rid myself of the awful experiences of my youth.

[portion omitted]

I telephoned right away to order your book for my daughter and her husband, and for my eldest son. It will be our bible. I have it with me now in Sapporo and am asking them to read it.

This letter was extraordinarily precious to Yuasa Ken. His brother, separated by less than a year in age, shows that he understands—as someone who lived through those times—the work his younger brother is trying to do in manfully bearing the weight of his guilt. The elder brother speaks to his younger brother in his own words, infused with his own sense of sorrow.

### Individual Human Beings Have But One Chance at Life

Yuasa has always thought of his past actions as a personal issue. If he insisted on making excuses such as "I was forced to do it," or "Everyone took part in it, so there was no way for me to stop it," in the end he would have had no life of his own. In that case, he would have been unable to live a life of his own making as an individual, and would have had no choice but to spend his life as a mere member of a collective, confined within that collective. By taking personal responsibility for his actions, both the good and the bad, and questioning the meaning of what he had done, he reclaimed his life for himself. This is the way Yuasa chose to live his life after the war.

Yuasa's story was the first time I had ever heard about practice surgery conducted in North China by army surgeons. My own father was an army surgeon, but he never spoke of it. He lived his life to the end believing that war was folly while rigidly maintaining his status as a male authority figure. When I went to medical school, the older doctors who returned from China never spoke about it either. The only thing I remember hearing from one of the professors was something he said in an unguarded moment: "We did terrible things in China, but we also did some good."

Medical schools are still run on an authoritarian model just as they were before the war; professors, who are far from expert in every field of medicine, present themselves as omnipotent; and graduates spend their careers working within a medical office system. Medical schools, public hospitals, and medical entrepreneurs join forces to create powerful factions, pursue research without questioning its meaning, and learn to skillfully manipulate the health care system. These factors have led to the development of a twisted form of medical care in Japan that is unconcerned with the plight of the socially disadvantaged, the mentally ill, or those suffering from Hansen's disease (leprosy) and other such diseases and that remains oblivious to the spiritual needs of patients, believing without question that the cutting edge of medicine is to be found in organ transplantation and reproductive medicine.

The extent to which Japanese medicine is built upon the legacy of silence about wartime crimes was made painfully clear in the case of AIDS transmission through medical blood products (*yakugai eizu*), which came to light in 1996. It showed that the Ministry of Welfare, medical researchers including Abe Hide (vice-president of Teikyō University), and the Green Cross were a three-faced monster with one body created by the evil deeds of the Japanese army medical corps.

The predecessor of the Green Cross, the "Japan Blood Bank," was founded in 1951 immediately after the onset of the Korean War. At the time when Yuasa and others were being questioned about their guilt in conducting vivisections on the Chinese mainland, the company was being set up by three major proponents of vivisection and human experimentation, Kitano Masatsugu and Niki Hideo, formerly key men in Unit 731 (Guandong Army Disinfection and Water Provision Corps), and Naitō Ryōichi, formerly professor in the Disinfection Unit at the Army Medical School. Those men used the methods of freezing and drying blood learned from wartime experiments on human subjects to turn blood they bought cheaply in slum areas such as San'ya, Kamagasaki, and Kotobukichō into dried-blood products that they sold to the United States Army at an enormous profit. The emergency demand for medical products generated by the Korean War turned war criminals in the medical profession into rich men. By 1964, the company had grown into the "Green Cross" and was busy importing large quantities of purchased blood from the United States and, with the full cooperation of the Ministry of Welfare, made Japan into one of the major consumer nations of blood products (albumin, globulin, and congealing agents).

Meanwhile, it turns out that the vast majority of former directors of the central research institute of the Ministry of Welfare, the National Institute of Preventive Hygiene, and heads of smaller specialized research centers were formerly doctors in the Army Hygiene and Water Provision Corps or in the Army Medical School. Moreover, the leader of the "Research Group Concerning the Status of AIDS in Japan," Professor Abe Hide, had in 1958 as a mem-

ber of the Office of Internal Medicine at Tokyo University come in contact with Naitō Ryōichi of the Green Cross and afterwards was named a member of the Board of Trustees of the "Naitō Foundation for the Promotion of Medical Research." For them, the lives of individual patients were of minor concern. Knowing full well the danger of using unheated blood products, the collusion of those three entities led to large numbers of people becoming infected with the AIDS virus.

Moreover, none of those involved within the medical establishment has shown remorse for the tragedy. For example, Teikyō University has not questioned the nature of their organization that could name a man like Professor Abe Hide to a position of responsibility as vice president. Medical students likewise raise no questions. On the contrary, the medical school professors I know are bold enough to argue that "The medical profession is based on trust. If patients found out our medical care could not be trusted, the next thing you know they would stop coming for treatment."

The Japanese medical profession has pressed forward with its gilded medicine and medical care by forgetting the misdeeds of wartime doctors. Doctors have failed to accept Yuasa Ken as a prophet of Japanese medicine and go on practicing medicine with the same impoverished spirit they possessed since wartime. And the people of Japan continue to believe that the medical care provided by such men is among the most advanced in the world.