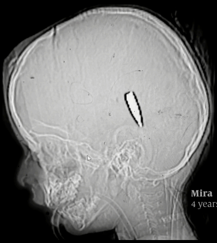
deVolkskrant

WHAT THE WOUNDS ARE TELLING US



Beeld: Mimi Syed

Doctors in Gaza observed a disturbing pattern: children with a single gunshot wound to the head or chest, a sign that they had been deliberately targeted. This emerges from research by *de Volkskrant*, which spoke with the doctors who are among the last international eyewitnesses.

Door **Maud Effting** en **Willem Feenstra**
13 september 2025, 05:00

Read this article in Dutch

● This story contains **disturbing images**

Key findings

- Fifteen international doctors told *de Volkskrant* that during their work in hospitals in Gaza, they saw children aged 15 years and younger with gunshot wounds to the head or chest. According to the most conservative count, they collectively saw 114 children with such wounds, the majority of whom have died.
- Eyewitnesses told the doctors that the bullets mostly came from Israeli army (IDF) snipers or drones.
- According to former commander of the Dutch land forces Mart de Kruif, the chance that these were accidental hits is negligible, since the doctors describe more than a hundred cases.
- Nine doctors told *de Volkskrant* that they had seen wounds possibly caused by controversial fragmentation weapons.
- The Israeli army refuses to answer questions about shooting at children and says it neither possesses nor uses fragmentation weapons.
- At the bottom, you can read more about how this article was produced.

✕

It is swelteringly hot as American doctor Feroze Sidhwa walks into the intensive care unit of the European Hospital in Gaza. On the hospital grounds, the air smells of sewage and spent explosives. Inside it smells like rot. And dead bodies.

Sidhwa is a 43-year-old trauma surgeon and critical care physician from California, based at a hospital in Stockton. Among colleagues, he's held in high regard — not just for his clinical expertise, but also for his international work. He never takes more than a week off, unless it's for a humanitarian mission. He has worked in crisis zones like Zimbabwe and Haiti, and trained surgeons in Ukraine and Burkina Faso. He wants to go where he's needed most.

Dr. Feroze Sidhwa, trauma surgeon and critical care physician.

It is March 2024, and this is his first day. A Palestinian nurse is guiding him through the hospital. Then, suddenly, his gaze lands on two young boys lying utterly still in their beds. They look no older than eight or ten, he estimates. Their heads are swathed in bandages. They are on ventilators. The rest of their bodies are intact.

"What happened?," he asks.

The nurse barely speaks English. But she points to their heads. "Shot, shot," she says.

At first, Sidhwa assumes she's mistaken. *Are they shooting at children?* Minutes later, looking at the scans, he sees she was right.

When they step into a second room, they find two more boys, in the same condition.

"I thought: what the hell?" he says over the phone to *de Volkskrant*, his deep voice steady. "How is it possible that, in this small hospital, four children are lying here with gunshot wounds to the head — all admitted within the past 48 hours?"

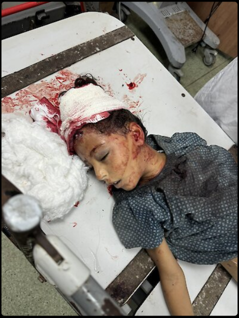
The four boys are all slowly dying. That evening, Sidhwa makes a note in the diary on his phone. But there's no time to reflect. Not yet.

In the thirteen days that follow, he sees nine more children with single gunshot wounds to the head or chest — children who were likely shot deliberately. "I started to wonder if my hospital was near some crazy sniper," Sidhwa says. "Or a drone team killing children just for fun."

Back home, at a medical conference, Sidhwa meets an American colleague who had worked in another hospital in Gaza just before him. When Sidhwa brings up the children, the man nods. "To my surprise, he said: 'Yeah, I saw that too — almost every day.'"

The doctor in question, Thaer Ahmad, confirmed this account to *de Volkskrant*.

"That was the moment," Sidhwa says, "when I decided: I have to find out what's really happening here."

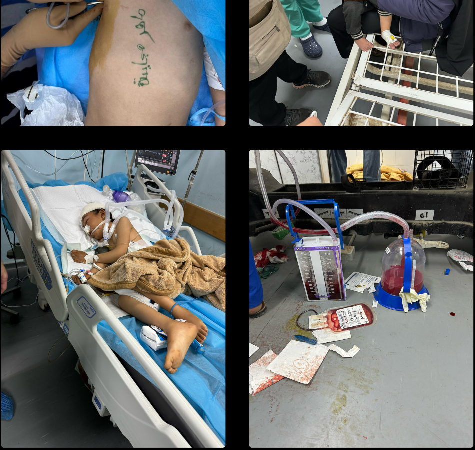


A 6- or 7-year-old girl with a gunshot wound to her head. Photo: Mimi Syed

THE
LAST
WITNESSES

Feroze Sidhwa is not the only doctor who, after returning from Gaza, feels compelled to speak out.

For nearly two years, physicians like him have borne witness, from their operating rooms, to the brutality of Israel's assault on Gaza. They have learned how to hold dying toddlers as they choke on their own blood — because there is no ventilator. They have found the strength to drive a scalpel into a teenager's chest without anesthesia — because there is no time, and another patient is already waiting. They have adapted to keep moving as the floor beneath them fills with the bodies of children.



Photos: Feroze Sidhwa and Mark Perlmutter

Some doctors have been left numb. But others have chosen to speak out.

These physicians are among the last international eyewitnesses, as Israel does not allow foreign journalists into Gaza.

They can speak from firsthand experience about the consequences of the genocidal violence, which, with the leveling of Gaza City, has entered its next pitch-black phase.

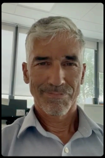
That role comes with a heavy dilemma. Nearly all of them want to return to Gaza. But going public with what they've seen increases the risk that Israel will deny them reentry. According to the United Nations, more than one hundred foreign medical workers have been turned away since March 2025 — often without any official explanation.

Many doctors have come to accept this threat. Being silent is not an option.

Over the past few months, *de Volkskrant* spoke with seventeen doctors and one nurse from the United States, the United Kingdom, Australia, Canada, and the Netherlands. Since October 2023, they have worked in six hospitals and four clinics across Gaza, often returning once or even twice. Most of them have extensive experience working in crisis zones such as Sudan, Afghanistan, Syria, Bosnia and Herzegovina, Rwanda, and Ukraine.

MARK PERLMUTTER

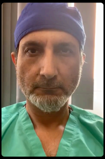
MIMI SYED



NIZAM MAMODE

VICTORIA ROSE

FEROZE SIDHWA



SARMAD TAMIMI

At the paper’s request, they handed over hundreds of photos and videos of patients, X-rays, medical notes, and diary entries. They talked for hours. They laid bare what they saw in their operating rooms. And they all faced the same question: what are the wounds telling us about the war?

AN ABSOLUTE HELL

British transplant surgeon and professor Nizam Mamode, 63, was already semi-retired when, in the summer of 2024, he received a call from the aid organization Medical Aid for Palestinians. They asked if he could go to Gaza in August. "I had the time, and I knew I had the skills," Mamode says. "I’d worked in Rwanda, Sudan, Lebanon — so I said yes. Some people say it was a brave decision, but it wasn’t. To be honest, I had no idea what I was getting myself into."

Just before the border with Gaza. Photo: Feroze Sidhwa

It wasn’t until he was riding through Gaza in armored vehicles with more than thirty others from the UN convoy that reality kicked in. "The doors were locked," he says. "We were instructed: when you set off, do not unlock them — if the Israeli army shoots at you and orders you out, do not get out of the vehicle."

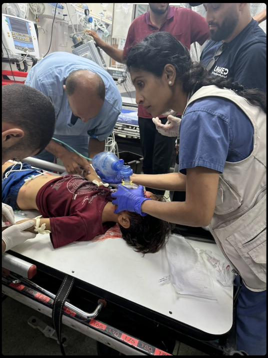
"Try not to get killed," the convoy leader told them.

“Two weeks later, the same vehicles were fired upon by Israel,” says Mamode.

Just before that, at a checkpoint, their luggage was searched by men in black uniforms. In Gaza, there is a shortage of nearly all medical supplies. That’s why doctors bring basic items with them. But often, everything is taken away — even baby formula. It has happened on multiple missions, the doctors told *de Volkskrant*.

The British plastic surgeon Sarmad Tamimi, who crossed into Gaza on June 24 this year, had already been warned by colleagues about confiscations. But he was also aware of the starvation in Gaza and the devastating consequences for babies. "I took baby nutritional supplements out of their boxes and packed only the foil in my luggage," he says. "To the soldiers, I said I was taking them for myself."

American emergency physician Mimi Syed managed to smuggle two laryngoscopes under her clothes—indispensable tools for intubating patients. “I was scared,” she admits. “But as a doctor, I need them to save lives. Normally, you throw a laryngoscope away after one use. In Gaza, I used it on at least fifty patients. I had to wipe it and use it again in different patients.”



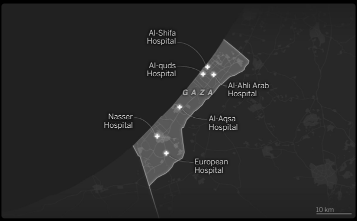
> *This boy was shot in the head. I tried to save him. But he died shortly after I intubated him. He died right in front of me.*
>
> **Dr. Mimi Syed, emergency medicine physician.**

“I don’t understand why baby food is confiscated from doctors crossing the border,” says British plastic surgeon Victoria Rose. “I don’t understand why doctors’ medicines are taken away. I don’t understand why half of the doctors are denied entry. There are so many things I don’t understand.”

In a response, the IDF stated the claims about baby formula being confiscated are “entirely incorrect.” The military stated that it was, in fact, working to facilitate the entry of humanitarian aid. According to the IDF, since May 19, 2025, “approximately 5,000 tons of infant formula alone have been transferred into the Gaza Strip, in addition to extensive quantities of other humanitarian aid."

The doctors interviewed by *de Volkskrant* worked throughout the war in various hospitals and field clinics, including Nasser, Al-Aqsa, the European Hospital, and Al-Shifa. Some worked with Médecins Sans Frontières and with organizations that asked not to be named, fearing that identification might prevent them from continuing their work. They include general surgeons, orthopedic surgeons, intensivists, plastic surgeons, trauma surgeons, and emergency physicians. A few were still in Gaza at the time of the interviews. The newspaper also spoke with a trauma nurse with war experience.

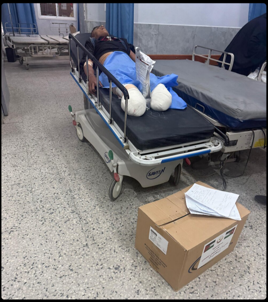
THE HOSPITALS WHERE THE DOCTORS WORKED



Source: OpenStreetMap contributors

The situation in Gaza's hospitals, many of which have been largely destroyed, is far worse than the doctors had anticipated. "I had to cut off a woman's leg with scissors," says emergency physician Syed. "Without pain medication. I had no other choice."

The wards are heavy with the smell of burnt limbs. "We constantly heard people screaming," recalls Rotterdam doctor Salih el Saddy. "In our hospital, we had anesthetics, but no painkillers. Patients woke up after amputations with extreme pain. There was nothing we could do for them."



> *This boy had to undergo a double amputation. His lower legs were kept in the box next to his bed.*
>
> **Dr. Salih el Saddy.**

In the operating rooms, staff are busy keeping flies away from patients who have been cut open. Nizam Mamode watches as a fellow doctor in the intensive care unit tends to a child whose ventilator is not working properly. When he removes the tube from the child's throat, he sees it's clogged. "Full of maggots," says Mamode, "coming from the child's throat."

The MRI and dialysis machines, doctors say, are beyond use—riddled with bullet holes. Some operating rooms have been set ablaze. The cables of ultrasound machines have been cut.

Photos: Feroze Sidhwa

There's little time for reflection. Yet at times, without warning, a sense of disbelief creeps in. Mamode experienced this while operating on an 8-year-old girl. "She was bleeding out, so I asked for an abdominal gauze swab to soak up the excess blood and locate the wound," he recalls.

He was told there was no gauze.

"Suddenly, I thought about the irony of it," he says. "The word 'gauze' supposedly comes from Gaza, because Gazans were famous for their linen. So there we were, in the home of gauze — and I couldn't get any. I had to scoop the blood out of her body with my hands."

Emergency physician Adil Husain recorded a video message for his young daughter before his departure, in case they would never see him again. Others arranged their wills. All the doctors interviewed by *de Volkskrant* felt a strong intrinsic urge to go.

"I'm a surgeon. I want to go where the need is greatest," says a doctor who will soon return to Gaza and prefers to remain anonymous out of fear of repercussions from Israel. "My work there matters. It's a signal to the people in Gaza: we have not forgotten you."

International doctors usually stay in Gaza for two to six weeks—then they are rotated out. Many of them sleep in the hospital and barely leave it for weeks on end. At Nasser Hospital, around fifteen surgeons share a room on the fourth floor, close to the operating theatres. At night, the heat can climb to a 100 degrees.

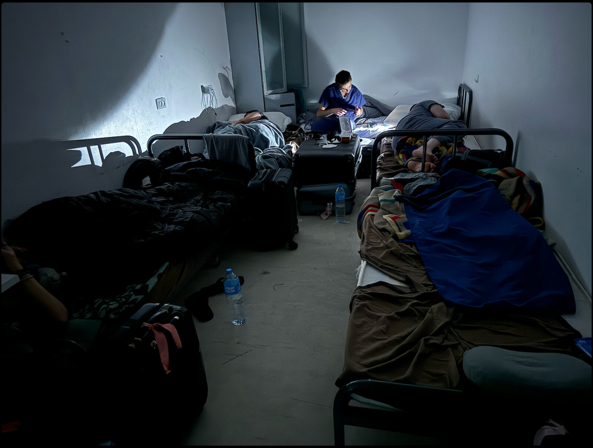


Photo: Feroze Sidhwa

Surgeon Nizam Mamode sought relief on the stone staircase next to the ward. “I slept on those stairs every night, hoping it would be safe from the drones,” he says. Last month, he witnessed the upper part of that same staircase being destroyed by an Israeli strike — an attack that drew international attention because there was video footage capturing the moment when aid workers and journalists were killed.

The vast majority of injuries come from bomb and shell explosions: people are hit by the blast waves, the heat, flying shrapnel, and collapsing buildings. Shards tear straight through tents. And through the bodies of countless children—who make up more than forty percent of Gaza’s population.

“I’ve seen numerous children with brain matter hanging out,” says MSF-nurse Jack Latour. “I’m sorry—I know no one wants to hear that. But that is what’s happening here.”

The first time surgeon Goher Rahbour found himself in a mass casualty event, he saw a five-year-old girl without a foot. “It was on the floor. The child next to her was also just a kid. Her leg was gone from the knee. Then came another. I froze. I thought: this is absolute hell.”

According to Gaza’s health authorities, more than 64,000 Gazans have died so far, including nearly 20,000 children. Israel questions the reliability of these figures, arguing that the ministry is controlled by Hamas. A group of international researchers concluded in the medical journal The Lancet that the figures from that ministry actually represent an underestimation

CHILDREN
WITH
GUNSHOT WOUNDS

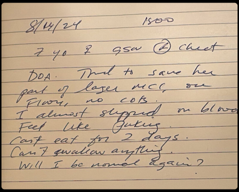
Of all the patients, there is one group that shocks doctors most: children with gunshot wounds to the head or chest — and bodies otherwise untouched.

A single bullet to these areas is a strong indication that the child was deliberately targeted. That constitutes a war crime. In other conflict zones, the doctors rarely encountered such cases.

On August 14, 2024, doctor Mimi Syed writes in her journal. The sentences are short. Staccato.

14 AUGUSTUS 2024

> *Girl, 7 years old. Gunshot wound to the chest. Dead on arrival. Tried to save her. Part of a larger mass casualty incident. On the floor, no cots. Nearly slipped in blood. Can’t eat for two days. Can’t swallow anything. Will I be normal again?*
>
> **Dr. Mimi Syed**



8/14/24 1800

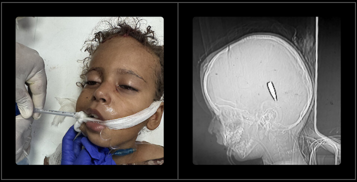
7 yo ♀ GSW Ⓛ chest

DOA. Tried to save her
part of larger MCC, on
Floor, no COB.
I almost slipped on blood
Feel like puking.
Can't eat for 2 days.
Can't swallow anything.
Will I be normal again?

Syed is an American emergency physician who spent two four-week rotations in Gaza, working at Nasser Hospital in Khan Younis and Al Aqsa in Deir al-Balah. “Like most people, I was following the war through livestreams on my phone,” she says. “But I couldn’t do it anymore. I’m a mother. I couldn’t just watch and do nothing.”

She describes Mira, a 4-year-old girl she saw at Nasser. Her parents bring her in. “They said she’d been shot by a quadcopter [armed drone, ed.] while walking around in the humanitarian zone declared by Israel. I was told to just let her die by my colleagues. The assessment was, unfortunately, that there wasn’t much we could do. But she was still moving a little bit. She was very young. A little girl. I just couldn’t look away. There was something in her face that struck me. So I took a chance.”

Syed intubates the girl using the laryngoscope she had smuggled in herself. Moments later, she stared in disbelief at the scan of Mira’s head: there’s a bullet lodged inside.

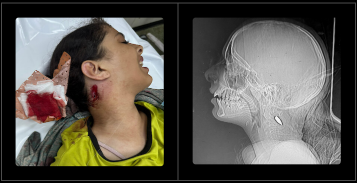


Mira (4) was shot in the head. Photos: Mimi Syed

With the help of her colleagues, Syed manages to keep Mira alive. Later, the little girl will wake up and begin to speak again—a small miracle. Much later, another doctor will remove the bullet from her head.

But Mira is not the only child with a bullet in the head that Syed encounters. She decides to take pictures of them. “I thought: I have to document this. I realized—these are war crimes.” Under extremely stressful conditions, she photographs eighteen children who had been shot in the head or chest. All of them were single shots, she says.

De Volkskrant asked doctors how many children aged 15 and under they had seen with a single gunshot wound to the head and/or chest. The question was deliberately limited to this age group, as children of that age are, in most cases, visibly and unmistakably children.



A 14-year-old girl was shot in the head and partially paralyzed. Photos: Mimi Syed

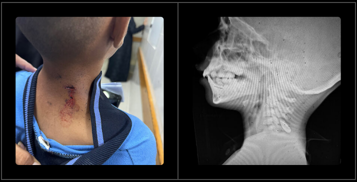
Fifteen out of seventeen doctors said they had encountered children aged 15 or younger with such gunshot wounds. Taken together, they reported 114 children—many of whom did not survive.

Some doctors took photos or made notes; others relied on memory. At the newspaper's request, they gave the most conservative possible estimates: any cases they were unsure about were excluded. Children who had also been shot in other parts of the body were not included in the count either, as such injuries offer less certainty of deliberate targeting.

The doctors suspect that the total number of children shot in the head or chest is many times higher than the number they personally witnessed. Children who died instantly, they say, often never made it to their departments. Moreover, the doctors were not working in all of Gaza's hospitals – and only for a limited period of time.

At the newspaper's request, doctors provided self-taken photos and videos as evidence. In total, de Volkskrant reviewed images of dozens of children with gunshot wounds to the head or chest. The majority of these images will not be published, as they are too graphic.

De Volkskrant presented dozens of images of children with gunshot wounds and various X-rays to two forensic pathologists. They confirmed that the injuries were caused by bullets, not by flying shrapnel.



A boy (7 or 8) was reportedly shot while playing outside. Photos: Mimi Syed

"It is highly likely that these are long-distance shots aimed at the head and/or neck using military-grade ammunition," says forensic pathologist Wim Van de Voorde, emeritus professor at the University of Leuven. According to Van de Voorde, the photos are not of sufficient quality to draw legal conclusions – "which is understandable, given the extremely difficult local circumstances."

Forensic pathologist Frank van de Goot says: "On the X-ray images, I see children's heads with bullets lodged inside. The bullets must have lost a lot of energy along the way, because children have thinner skulls than adults — otherwise, the bullets would have gone straight through. So these children were shot from a considerable distance."

That finding is consistent with eyewitness accounts, in which civilians told doctors that the bullets were usually fired by armed drones or snipers of the Israeli military (IDF). Snipers are capable of targeting specific individuals from long distances — sometimes over a thousand meters away. The IDF declined to answer questions about snipers shooting at children.

According to former commander of the Dutch Army, Mart de Kruif, the likelihood that these are accidental hits is virtually zero, given that the doctors describe more than a hundred such cases. "Just think about how small the head is compared to the rest of the body," he says. "If you're seeing a high number of gunshot wounds to the chest area and the head, that's not collateral damage — that's deliberate targeting."

Israeli Prime Minister Netanyahu and the military leadership have consistently denied that soldiers deliberately shoot at Palestinian civilians. However, anonymous soldiers have repeatedly admitted in the Israeli newspaper Haaretz that this does happen. Breaking the Silence, an Israeli organization of military veterans, also revealed—based on hundreds of interviews with soldiers—that they were ordered to shoot anyone entering a certain area. "Adult, male — kill," says a captain in the investigative report The Perimeter.

Israeli Prime Minister Netanyahu and the military leadership have consistently denied that soldiers are deliberately targeting Palestinian civilians. But anonymous soldiers have repeatedly admitted otherwise in the Israeli newspaper Haaretz.

In August, the BBC published the findings of an investigation into more than 160 children who were shot in Gaza. In 95 of those cases, the bullet struck the head or chest. The BBC spoke with eyewitnesses in 59 instances. In 57 of them, the shot was attributed to the Israeli military. In just two cases, the bullet was said to have come from Palestinian fire.

Most of the doctors interviewed by de Volkskrant said they wished they had gathered more evidence afterward, but in the chaos of Gaza this simply wasn't possible. Or they didn't dare to try. Orthopedic surgeon Mark Perlmutter (69), who has carried out forty humanitarian missions, said: "I wish I had had the presence of mind to document more."

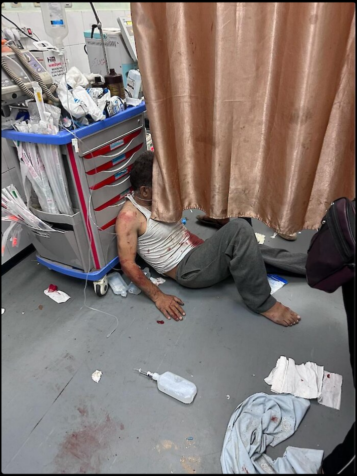
"This is my biggest regret," adds American anesthesiologist and intensivist Ahlia Kattan. "But I was treating patients. At that moment, it simply wasn't at the top of my mind. I wish someone had told me beforehand that I should not only act as a doctor, but also as a journalist."

"Beforehand, the ngo's told us: don't document anything, don't take notes, don't take photos," says Feroze Sidhwa. "They're terrified that Israel will then bar them from entering Gaza."

But their memories of the children are sometimes remarkably detailed.

"During a mass casualty incident, I was walking through the emergency department," Perlmutter recalls. "Children were everywhere. I was turning them over, trying to see who I could still help. And then I saw those two little boys. They were dead. They had both been shot—through the chest *and* the head. Six or seven years old. I examined them. I asked the medical assistant to take photos." The photos are in possession of this newspaper.

Perlmutter remembers hearing the man who brought in one of the boys screaming. “He couldn’t understand why a shooter had hit *this child*—and not him, the adult.” Moments later, he sees the man, probably the father of the child, sobbing. The man sits in shock on the floor, while the child is taken to the morgue. Perlmutter takes out his iPhone and snaps a photo.



A man mourns after a child (6 or 7) was shot in the chest and head and died. Photo: Mark Perlmutter

Anesthesiologist and intensivist Ahlia Kattan tells the story of a small girl brought in by her mother:

“She was not even two years old,” she says. “She was very pale, and she looked perfect, so I assumed she had an internal bleeding.

“She was dead. But her mother was screaming—heartbreaking cries. She had spent years and years trying to have a child. So we started CPR, and I intubated her. I wanted to show the mother that I had done everything I could. We often do that with very young children. While I was working on her, someone handed me the scan. And then I saw it: a bullet in her head. I saw the blood. A perfect shot to the temple.”

“I took a photo from the foot of the bed,” Kattan says. “It’s one of the very few photos I took in Gaza. But I was so surprised. I thought: no one is going to believe me otherwise.”

MEDICAL RECORD
CONFIDENTIAL

Photo: Ahlia Kattan

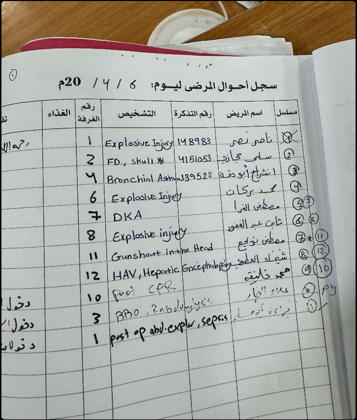
The longer the doctors stay in Gaza, the more they realize: these are not isolated incidents — this is systemic. These bullets were fired deliberately.

RESEARCH BY THE NYT

Feroze Sidhwa reached the same conclusion in the fall of 2024. After attending a conference in the U.S., where he learned that another doctor had observed the same things he had, he began an investigation in collaboration with The New York Times. They asked 64 American healthcare workers who had worked in Gaza to complete a questionnaire.

The findings, published on October 9, 2024, are deeply concerning. In the article titled "*65 Doctors, Nurses, and Paramedics: What We Saw in Gaza*", 44 respondents reported having seen multiple children aged 12 or younger who had been shot in the head or chest. 25 said they had seen healthy newborns return to the hospital—only to die from dehydration, starvation, or infection. 52 reported seeing young children who were suicidal, or who said they wished they had died.

At the time, Joe Biden was still President of the United States. Doctors had already expressed their concerns in an open letter to him, alarmed by the high number of young children dying. But Biden—caught between opposing views within his own Democratic Party—did not respond.



سجل أحوال المرضى ليوم: 6 / ٤ / 20م

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②	سلمى حجازي	4151053	FD, skull *	2		
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④	محمد بركات		Explosive Injury	6		
⑤ ⑦	مصطفى الغرا		DKA	7		
⑥ ⑧	ثابت عبد الغفور		Explosive injury	8		
⑦ * ⑪	مصطفى نوفج		Gunshout in the Head	11		
⑧ ⑫	شيماء المطوق		HAV, Hepatic Encephalopathy	12		
⑨ ⑩	محمد خليفة		post CPR	10		دخول
⑩ P13	علاء النجار		BBO, Rabdomylysis	3		دخول ا
⑪	براءة أبو صلح		post op abd. explor, sepsis	1		د نوال

Patient list. Foto: Feroze Sidhwa

Sidhwa expected the *New York Times* article to change that. “It’s extremely rare for 65 American healthcare professionals to speak out so publicly,” he said. “Their job is to focus on saving lives.” The article was read millions of times, he says.

But the publication did not trigger the storm of outrage Sidhwa had anticipated. Nor did it lead to a shift in political direction. “It was, in effect, simply ignored by the Biden administration.”

GAMIFICATION OF WARFARE

For a brief moment, there is a flicker of hope in Gaza, when a ceasefire takes hold for two months at the start of 2025. But in the early hours of March 18, around 2:30 a.m., that hope is shattered. With large-scale airstrikes, Israel launches an intensified phase of its campaign of destruction — a phase that continues to this day, marked most notably by the full-scale assault on Gaza City.

Doctors watch the situation in the hospitals deteriorate by the day. Mass casualty events are becoming increasingly frequent — sometimes several in a single day. Many of the patients arriving already bear scars from previous bombings. Starvation is leaving both patients and medical staff severely weakened.

Wounded children who no longer have a single surviving family member become an official medical classification: WCNSF — Wounded Child, No Surviving Family.

وزارة الصحة الفلسطينية
MILK

Photo: Feroze Sidhwa

Feroze Sidhwa, in the middle of his second mission, wakes up that night as the door to the sleeping quarters is blown open. Israel has broken the ceasefire with a wave of large-scale airstrikes. In the dark, the doctors sit groggy and silent, staring into nothing for nearly a minute. They listen to the bombs falling.

“We need to go downstairs,” one of them says.

Within hours, hundreds of patients arrive. Sidhwa begins his shift that night in the emergency department.

“We were just pronouncing small kids dead for the first ten minutes,” he says.

“And the worst thing about this is: they weren’t. Most of them weren’t actually dead yet. Their hearts were still beating. But we picked them up and handed them to a family member. I don’t speak Arabic, but there was one word I came to know: *khalas*—it means ‘enough’. We had to make choices, so we could treat others. It meant they had to be taken to another part of the hospital—to die there.”

Photo: Feroze Sidhwa

Mark Perlmutter is at Al-Aqsa Hospital that same night and he sees a young boy, lying on the ground. Covered head to toe in grey dust.

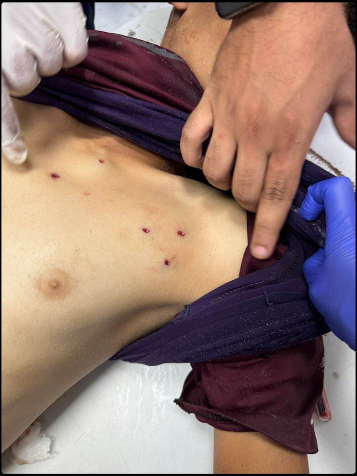
‘He was lying in a pool of his blood. He didn’t have a leg. I tried to walk past him. Suddenly he reached up and grabbed my leg pant. He couldn't talk, but he looked right at me. I watched the pool around him getting bigger and bigger. I had to pull my leg away from him – so I could help another child.”

On the phone, he begins to cry. “I had to step over him,” he says. He hasn’t been able to get the boy out of his mind.

During mass casualty events, doctors are overwhelmed by severely injured patients, making it difficult to maintain an overview. Yet amid the chaos, two patterns continue to stand out to the doctors—patterns that potentially point to war crimes committed by Israel. They find evidence suggesting the use of highly controversial weapons and signs of the gamification of warfare.

Among the many people with mutilations and burns, doctors notice patients arriving with small wounds who are nevertheless in very poor condition.

It turns out they've been struck by tiny fragments of metal, shaped like cubes or cylinders. These pieces are so small — just a few millimeters — that doctors sometimes can't even find an entry or exit wound. But inside the body, they cause what doctors describe as "horrific damage": organs are pierced, nerves and blood vessels are hit. As a result: patients suffer fatal internal bleeding or are forced to undergo major amputations.



Deceased boy with small wounds. According to the doctor, he was hit by metal fragments. Photo: Mimi Syed

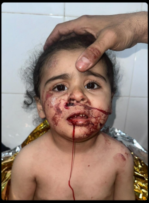
According to Thaer Ahmad, an emergency physician from Chicago, the entry wounds are so subtle that some patients were initially sent home. "Some came back with abdomens full of blood. One of them died while waiting for surgery."

Nine doctors told de Volkskrant they had encountered these cube- or cylinder-shaped fragments in patients. Some shared photos and videos of these patients hit by fragments with the newspaper.

Earlier, weapons experts cited in the British newspaper The Guardian stated that the injuries are consistent with Israeli-made fragmentation weapons — explosives packed with large quantities of small, cubelike metal particles.

Mark Perlmutter, vice president of the International College of Surgeons, says he regularly found these fragments. "I operated on at least ten people who had them." He states that he smuggled two metal fragments out of Gaza in his luggage. "I handed them over to the International Criminal Court."

According to Perlmutter, the fragments are made of tungsten.



> *This girl was hit by metal fragments, possibly caused by fragmentation weapons. The metal entered under her nose and passed through her head. She did not survive.*
>
> **Mark Perlmutter**

Tungsten is an extremely hard metal, nearly twice as heavy as steel. Because of this, it can cause significant damage when scattered after an explosion. Its use in densely populated areas like Gaza is highly controversial, as it is designed to inflict maximum casualties and does not distinguish between civilians and combatants. Amnesty International has long accused Israel of using such weapons in Gaza.

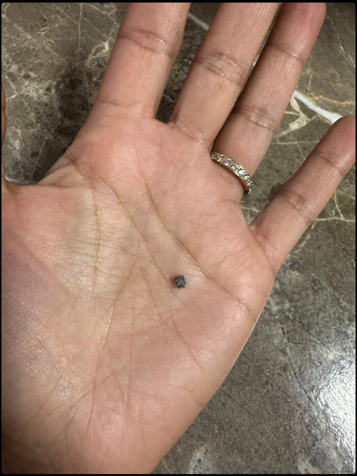


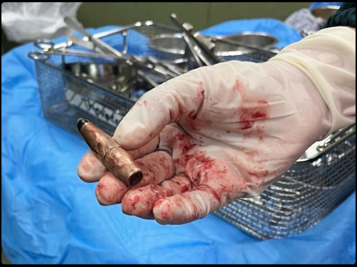
Photo: Mimi Syed

According to the IDF, the claim that Israel uses weapons causing fragmentation injuries is “a blatant falsehood.” “The IDF does not possess or deploy any such weapons. This claim has no basis in fact and represents a deliberate distortion of reality.”

Since early March, Israel has completely blocked aid to Gaza. Two months later, nearly all supplies in the area have been exhausted, and more and more people are dying from systematic starvation. International criticism of Israel is mounting.

In response, starting at the end of May, Israel opened four controversial food distribution points in Gaza, where Palestinians must travel to receive aid. From the very beginning, these proved to be deadly locations. Civilians waiting in line were randomly shot.

Soldiers even admitted this in the Israeli newspaper *Haaretz*: under orders from their commanders, they fired on groups of civilians who posed no threat. “It’s a killing field,” one soldier said. “Our form of communication is gunfire”. According to him, civilians “know” they can approach the food distribution point once the shooting stops. Another soldier said that among themselves, they refer to this as a well-known children’s game called Salted Fish [Red Light, Green Light, ed.], where children try to approach the “it” player without being caught moving.



A bullet passed through a child’s leg. The leg had to be amputated. Photo: Mark Perlmutter

Each time a food distribution point opens, doctors in the hospitals see dozens of civilians arriving with gunshot wounds. Most are boys—teenagers and young adults. They are brought in large groups at once on donkey carts. Some still carry empty food bags.

Several doctors notice a pattern in the injuries. The targeted body part differs each day, as if it’s coordinated work, they suggest.

British surgeon Goher Rahbour says he saw five or six patients in one day who had been shot in both arms and both legs, reportedly by the IDF according to eyewitnesses. “Was this for fun?” Rahbour wonders. “Are the soldiers playing a game?”

Renowned British esophageal and stomach surgeon Nick Maynard from the University of Oxford experienced this as well, when he had to operate on four people in quick succession who had been shot in the abdomen.

Maynard began asking other doctors if they had seen the same. “Every doctor I discussed this with at Nasser Hospital recognized this,” he says. “One day, they saw mostly gunshot wounds to the head and neck. The next day, it was the chest. The other day it was the limbs. Then the abdomen. Or even the testicles. A urology resident told me he had four boys in a single day who had been shot in the groin.” Due to the chaotic conditions in Gaza, Maynard says it was impossible to keep a daily record of which body parts were hit—and how often.

In the past, there have been indications that Israeli snipers experienced game-like elements when shooting at certain body parts. In 2020, Israeli snipers anonymously told the newspaper Haaretz how they tried to break ‘records’ by hitting as many knees as possible in a single day. One of them scored 42.

The IDF does not respond substantively to questions about the pattern observed by doctors. According to the military, it is Hamas that is ‘creating dangerous conditions for civilians’.

Yet doctors keep coming forward with different accounts.

Early-August, American emergency physician Adil Husain has just returned from Nasser Hospital, when he speaks to a crowd in Texas. He points to the absence of foreign journalists in Gaza. “So it falls on us, the health care workers who have been there” he says, “to bear witness.” He says that he feels as his “our duty to speak” for the people in Gaza. In two weeks, he says, he witnessed hundreds of deaths in his ER.

Photo: Feroze Sidhwa

He tells about Ahmed, a 10-year-old boy who returned from a food distribution point with empty bags. “He was brought to my ER, with gunshot wounds to the head, the neck and his abdomen,” Husain says. He tells de Volkskrant that he gave the boy ketamine in his final moments to ease his passing. “I held him closely. And I whispered in his ear: I’m sorry.”

Doctors leaving the region are almost universally consumed by guilt — because they get to leave, while everyone else is left behind.

“After my first mission, I kept in touch with my Gazan colleagues and asked how they were doing,” says Sarmad Tamimi, who returned at the end of July from his second deployment. “But I can’t do that anymore. Because I’m afraid of what they’ll say.”

THEIR MORAL DUTY

It is May 28, 2025, and at the United Nations headquarters in New York, Sidhwa addresses the Security Council. The invitation came at the last minute, forcing him to cancel all his patients at the hospital in Stockton.

“I’m not here as a policymaker or a politician,” says Feroze Sidhwa, tracing the text on the paper before him with his index finger. “I am a physician bearing witness to the deliberate destruction of a healthcare system, the targeting of my own colleagues, and the erasure of a people.”

> *My patients were six-year-olds with shrapnels in their heart…*
>
> **Feroze Sidhwa**
> Trauma surgeon and critical care physician

Video: YouTube/VN

A month and a half earlier, Sidhwa had returned from his second mission to Gaza. Now, dressed in a gray suit with a green tie, he sits here, giving voice to things that defy description. He looks composed, focused.

‘My patients were 6 year-olds-with shrapnels in their heart and bullets in their brains. And pregnant women whose pelvises had been obliterated and their foetuses cut in two, while still in the womb.’

In fact, he would later tell *de Volkskrant*, his original speech had been “much harsher.” But on the advice of a trusted confidant, he had toned down his words — not to stray too far from diplomatic convention.

Nearly all of the doctors who spoke to *de Volkskrant* described feeling the same pull as Sidhwa. They go to Gaza to help — to treat the wounded, to save lives. But when they witness the scale of devastation, the number of innocent civilians killed, and how few lives they are truly able to save, they come to realize their task does not end when they return home.

From neutral caregivers, they have become — sometimes reluctantly — public witnesses. So they can tell as many people as possible what their eyes have seen.

It happens to Nizam Mamode, when in the autumn of 2024, he testifies before a British parliamentary committee. During the session, which is broadcast live, the 63-year-old surgeon breaks down.

...in that green zone...

Nizam Mamode
Professor and transplant surgeon

Video: UK Parlement

In the middle of recounting how children, after a bombing, were left lying on the ground — only to be shot at by armed drones, “this happened day after day after day” — Mamode falls silent. He closes his eyes. His lip begins to tremble.

His silence is gently filled by the chair of the committee. “I feel…,” she says, “because you cannot unsee what you have seen.”

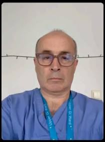
For nearly thirty years, Mamode was a member of the Labour Party. He even campaigned for them during the last election. “But now I’ve cut up my card and stopped being a member,” he tells de Volkskrant, “because I’m ashamed of our Labour government. I think they have a moral obligation to act—and they show no signs of doing that. I believe that one day, they are going to be judged very harshly on that.”

It’s a burden nearly all the doctors carry: they come from countries that are traditional allies of Israel. Countries that—even after hearing their eyewitness accounts—have failed to act decisively enough to make Israel stop. And, in the case of the United States, continue to supply the very weapons that make the bloodshed possible.

In Gaza’s hospitals, the doctors try not to think about it. But sometimes, they can’t help it.

ADAM HAMAWY

MOHAMMED MUSTAFA



NICK MAYNARD

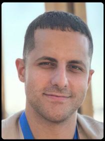
ADIL HUSAIN

JACK LATOUR

GOHER RAHBOUR

AHLIA KATTAN

SALIH EL SADDY



THAER AHMAD

When Israel broke the ceasefire on March 18 with a wave of bombings, the corridors of Nasser Hospital quickly filled with bodies and the wounded. “I remember a five-year-old girl,” says Feroze Sidhwa. “Her name was Sham. She was the first kid I could actually save that day. I was sitting beside her on the floor, trying to help her breathe. A piece of shrapnel had gone through her brain and I was just looking at this little trickle of blood coming out of it.’

Amid the chaos, with the screams of children echoing around them, Sidhwa could only think of one thing: “Did I pay for that piece of shrapnel? Was it my neighbor? Or hís neighbor? Which American can I email to let them know their grenade has been found?”

ABOUT THIS STORY

Over the past months, *de Volkskrant* spoke extensively with 17 international doctors and a nurse about what they witnessed in Gaza. Where possible, they supported their testimonies with photos, X-rays, medical notes, and excerpts from diaries. The newspaper saw images of dozens of children with gunshot wounds to the head or chest.

De Volkskrant compiled this photo selection after careful consideration, because the images form an essential part of this investigation. They vividly illustrate the doctors’ testimonies about the patterns of injuries they observed. Where possible, the doctors who took the images consulted with relatives. In some cases, this was not possible, but the doctors shared the images anyway, believing the public interest to be significant: they suspect war crimes. *de Volkskrant* possesses many more images, but most are considered too graphic for publication.

The newspaper approached doctors who had previously worked in international crisis zones, allowing them to compare the situation in Gaza with past experiences. They are also the last international eyewitnesses.

de Volkskrant asked the doctors to count how many children aged 15 and under they saw with a single gunshot wound to the head or chest—an important indication that they were deliberately targeted. Some doctors had notes or photos; others relied on memory. The newspaper used the most conservative count, excluding children about whom the doctors were uncertain. Children who also had gunshot wounds in other body parts were not included, as deliberate targeting is less certain in those cases. This also applies to the two young boys described by orthopedic surgeon Mark Perlmutter, who were shot in both head and chest.

Some doctors worked at the same hospital simultaneously, so duplicates cannot be entirely ruled out. However, the doctors consider this very unlikely, as they generally did not see the same patients. The number of children with gunshot wounds that a doctor encountered depended heavily on location and timing. For example, American trauma surgeon Feroze Sidhwa saw thirteen children on his first mission, and none on his second, which partly took place during a ceasefire.

de Volkskrant asked the Israeli army (IDF) about the doctors’ findings. The IDF responded, but questions about deliberately shooting at children were not answered.

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MADE BY

Text: Maud Effting, Willem Feenstra
Images: Judith Baas, Rowin Ubink
Design: Titus Knegtel, Adriaan van der Ploeg
Graphics: Eleanor Mohren
Data: Erik Verwiel, Laurie Treffers
Final editing: Joyce Brekelmans
Coordination: Corto Blommaert, Anne van Driel, Xander van Uffelen, Monique Wijnans