Congress of the United States
House of Representatives
SELECT COMMITTEE ON CHINA

June 29, 2026

Chris Boerner, Ph.D
Chairman of the Board and Chief Executive Officer
Bristol Myers Squibb
Route 206 & Province Line Road
Princeton, New Jersey 08543

Dear Dr. Boerner,

The United States is engaged in a fierce biotechnology competition with the People's Republic of China (PRC). This competition has implications for our national and economic security as well as for the future of healthcare and the security of American medical data. In its 15th Five-Year Plan issued in March 2026, the Chinese Communist Party (CCP) refined its plan to target biotechnology breakthroughs as a national priority.[1] This plan also calls for tighter biological data regulations, and for Chinese firms to maximize the use of artificial intelligence (AI) across the biotechnology sector, recognizing data as a strategic asset.[2] This is significant because the U.S. Congress, through its passage of the BIOSECURE Act, has also identified biotechnology as a key sector in economic and national security competition with China. We now have two systems racing to gain an edge in this critical technology.

At the heart of this biotechnology competition is China's clinical trial system. Through a combination of regulatory reforms, state subsidies, and (at best) questionable ethics, China has transformed itself into the cheapest and fastest place in the world to run early-stage human drug trials. First-in-human data remains the currency of the biotechnology sector—whoever gets it fastest de-risks their investment and can move to larger clinical trials.

Patient enrollment at Chinese clinical trial sites is two to five times faster than in the United States.[3] This is due to several factors, including large potential patient populations concentrated around large hospitals in China. The speed of China's patient enrollment may also be accelerated by its lack of ethical safeguards surrounding informed consent and voluntary participation, according to U.S. biotechnology company executives.[4] Research studies of informed consent in

[1] Melanie Hart, Caroline Costello, and Samantha Wong, "Five Takeaways for US Policymakers about China's New Five-Year Development Plan," *Atlantic Council*, March 31, 2026, https://www.atlanticcouncil.org/dispatches/five-takeaways-for-us-policymakers-about-chinas-new-five-year-development-plan/; "China's 15th Five-Year Plan: Full English Translation," *Mandarin Peel* (Substack), March 26, 2026, https://mandarinpeel.substack.com/p/chinas-15th-five-year-plan-full-english.

[2] Hart, Costello, and Wong, "Five Takeaways for US Policymakers."

[3] Anirudh Roy Popli, Fangning Zhang & Jay Park, *The Emerging Epicenter: Asia's Role in Biopharma's Future*, McKinsey & Co. (Jan. 7, 2026), https://www.mckinsey.com/industries/life-sciences/our-insights/the-emerging-epicenter-asias-role-in-biopharmas-future.

[4] Documentation on file with the Select Committee.

Chinese trials have corroborated these concerns.[5] These factors have enabled China to surpass the United States in the number of registered clinical trials conducted in the country.[6]

In that light, I write to you regarding Bristol Myers Squibb's (BMS) conduct of clinical trials in China, where it appears to have sponsored or collaborated on about 180 clinical studies since 2004, including at sites in Xinjiang, China, and at medical centers and hospitals affiliated with the PRC military, according to publicly available information at https://clinicaltrials.gov and https://ChinaDrugTrials.org.cn.[7] Xinjiang is the epicenter of the CCP's genocide targeting Uyghurs and other ethnic and religious minorities. Specifically, between 2015 and 2024, the Select Committee identified BMS as having participated in:

- At least 8 trials that included hospitals in Xinjiang, China, with several that are still ongoing today—the most recent of which began in May 2024; and

- At least 17 trials that included PRC military medical centers and hospitals, with several that are still ongoing—the most recent of which began in June 2023.[8]

Additional details on these trials, which are not to be considered exhaustive, are included in the attachment at the end of this letter. These data also do not include any early-stage clinical trials conducted by Chinese biotechnology companies for drug prospects that were later licensed by BMS, such as through its recent strategic partnership with Chinese drugmaker Hengrui Pharmaceuticals, worth up to $15.2 billion.[9]

U.S. regulations require that clinical investigators in the United States obtain legally effective informed consent of human clinical trial subjects; seek consent only under circumstances that minimize the possibility of coercion or undue influence; and that information provided to the subjects be in a language that is understandable to the subject, among other requirements.[10] While China has laws requiring informed consent in clinical trials, Chinese researchers have documented significant issues with obtaining informed consent in practice. For instance, a 2023 survey of findings from research of informed consent in Chinese cancer clinical trials found that:

- 91.2% of surveyed participants mistook clinical trials as the standard-of-care treatment;

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[5] For example, Xing Liu et al., *Informed Consent in Cancer Clinical Drug Trials in China: A Narrative Literature Review of the Past 20 Years*, 24 Trials 445 (2023), https://doi.org/10.1186/s13063-023-07482-y; Ping Wen et al., *Research on Issues in the Protection of Clinical Trial Human Subjects in China: A Delphi Study*, 26 BMC Med. Ethics 161 (2025), https://doi.org/10.1186/s12910-025-01302-5; Jing-Bao Nie, *The Harms of Family-Oriented Informed Consent in Clinical Practice in Two Megacities in Northern China: A Sociological and Ethical Study*, Asian Bioethics Rev. (Nov. 15, 2025), https://doi.org/10.1007/s41649-025-00373-1.

[6] One study examining clinical trial data across multiple trial registries showed that the number of trials run in China in 2014 was only 1,826—far lower that the U.S. leading 7,268 trials. In 2023, the number of trials in China had grown to 11,268, far surpassing the U.S. number of 7,569. Till Bruckner, "New Study Shows That China Is Now a Global Powerhouse of Clinical Research," *TranspariMED*, May 26, 2025, https://www.transparimed.org/single-post/new-study-shows-that-china-is-now-a-global-powerhouse-of-clinical-research.

[7] Some of these clinical trials were initiated by Celgene prior to its acquisition by BMS but completed by BMS.

[8] Select Committee analysis of data from *ClinicalTrials.gov*, U.S. National Library of Medicine, https://clinicaltrials.gov/ (last visited June 3, 2026) and ; Nat'l Medical Prods. Admin., *Drug Clinical Trial Registration and Information Disclosure Platform*, https://www.chinadrugtrials.org.cn/index.html (last visited June 3, 2026).

[9] According to public reporting, BMS is paying $600 million upfront to advance 13 early-stage programs from across the two companies' pipelines. The deal includes $175 million payments on the first and second anniversaries of the deal, as well as option fees for joint discovery programs and achieving key milestones, contributing to the potential total deal value of $15.2 billion. Nick Paul Taylor, *BMS Inks $15B Deal to Bag Hengrui Assets, Tap China's R&D Speed*, FierceBiotech (May 12, 2026), https://www.fiercebiotech.com/biotech/bms-inks-15b-biobuck-deal-bag-hengrui-assets-tap-chinas-rd-speed.

[10] 21 C.F.R. pt. 50 (2024)

- 55.9% of surveyed participants said their doctors did not offer any alternatives besides treatment in a clinical trial while 41.2% were unsure whether they had been offered alternative treatments;
- More than 70% of surveyed participants in cancer drug trials believed that treatment regimens studied in the trial were proven to be the best;
- 80% of surveyed participants mistakenly believed that drugs in clinical trials would not cause severe side effects; and
- Undue influence was observed in clinical trials and investigators were prone to tendentious explanations of trials, including understating potential toxic effects and overstating efficacy of trial protocols.[11]

These, and other, findings indicate the need for heightened due diligence by American companies conducting clinical trials in China to ensure that their trials are complying with Good Clinical Practice and are not profiting from a system that is failing to protect the rights of participants.[12]

Regarding BMS' clinical trials conducted in Xinjiang, more specifically, the Uyghur Forced Labor Prevention Act (UFLPA) was passed by Congress and enacted in December 2021 to prevent goods made with forced labor in the Xinjiang Uyghur Autonomous Region (XUAR) of China from entering the United States.[13] Congress passed this law because it found credible evidence that the government of the PRC has been pursuing a deliberate and systematic program of state-imposed forced labor in region, specifically targeting the Uyghur people and other minorities in the region. It creates the rebuttable assumption that goods mined, produced, or manufactured wholly or in part in the XUAR are made with forced labor and are therefore prohibited from importation into the United States. This rebuttable assumption exists because of the extreme difficulty involved in conducting credible independent audits or investigations at sites in Xinjiang.

While the UFLPA does not specifically address the conduct of clinical trials in the region, it reflects best practices given the ethical risks of operating there and the necessity for U.S. companies to conduct due diligence regarding their supply chains to ensure they are free of forced labor. While not part of a supply chain for physical goods, clinical trials are a critical part of the drug discovery pipeline—an intellectual supply chain, where human clinical trial subjects are a foundational input. In addition to evidence of widespread forced labor and oppression in Xinjiang, there have been numerous credible investigations that have documented forced medical testing, procedures, medications, and biodata collections on Uyghurs and other oppressed minorities in Xinjiang.[14] Given what we know about the human rights abuses and oppression in

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[11] Xing Liu et al., *Informed Consent in Cancer Clinical Drug Trials in China: A Narrative Literature Review of the Past 20 Years*, 24 Trials 445 (2023), https://doi.org/10.1186/s13063-023-07482-y

[12] Good Clinical Practice is an international ethical and scientific standard that ensures the safety, rights, and well-being of clinical trial participants while guaranteeing the credibility and reliability of trial data.

[13] Uyghur Forced Labor Prevention Act, Public Law 117-78, 135 Stat. 1525 (2021), https://www.congress.gov/bill/117th-congress/senate-bill/65/text.

[14] Human Rights Watch, "China: Minority Region Collects DNA from Millions," December 13, 2017, https://www.hrw.org/news/2017/12/13/china-minority-region-collects-dna-millions; Emile Dirks and James Leibold, *Genomic Surveillance: Inside China's DNA Dragnet*, Australian Strategic Policy Institute, Policy Brief Report No. 34/2020, June 2020, https://www.aspi.org.au/report/genomic-surveillance/; Dake Kang et al., "China Cuts Uighur Births with IUDs, Abortion, Sterilization," Associated Press, June 29, 2020, republished by *PBS NewsHour*, https://www.pbs.org/newshour/world/ap-report-china-stifling-uighur-births-with-iuds-abortion-sterilization; Office of the United Nations High Commissioner for Human Rights, *OHCHR Assessment of Human Rights Concerns in the Xinjiang Uyghur Autonomous Region, People's Republic of China*, August 31, 2022,

Xinjiang, it is reasonable to question whether clinical trial subjects there are participating voluntarily and with informed consent—indispensable principles of good clinical practice.

BMS' clinical trials held at PRC military hospitals raise significant questions related to how data developed through clinical trials at those hospitals could fuel the CCP's military biotechnology research, experimentation, and capability development. Clinical trials involve collaborative research activities with doctors, nurses, and other officials at the trial sites and produce sensitive and proprietary data. Conducting this research at PRC military hospitals puts the cutting-edge, biotechnology Intellectual Property (IP) of American companies at potential risk of being transferred to the Chinese military. Make no mistake, acquiring this knowledge is a high priority for the CCP, as its latest Five-Year Plan makes clear. As evidence of the vulnerability of medical data, the U.S. Department of Commerce has listed the People's Liberation Army (PLA) Academy of Military Medical Sciences on its entity list, due to recognition that biotechnology research can be used to support Chinese military end uses, including development of potential dual-use technologies.[15]

While there is no evidence that BMS has engaged in illegal activity or wrongdoing, conducting clinical trials in China, and in Xinjiang and PRC military hospitals more specifically, exposes American companies to ethical and security risks—some of which even the most robust due diligence may not be sufficient to mitigate.

I request that BMS provides the following information by July 17, 2026.

1. A detailed briefing and information on BMS' due diligence processes to ensure Good Clinical Practice standards at its clinical trial sites in China broadly, and in Xinjiang and at PRC military hospitals more specifically.

2. Company policies, regulations, strategies, guidance documents, and other communications that outline or govern BMS' Good Clinical Practice standards for the conduct of clinical trials generally, and more specifically, in China, at PRC military hospitals, and in Xinjiang.

3. Data and/or information sufficient to show the number and frequency of BMS' inspections of its clinical trial sites in China, and efforts to ensure the validity of such inspections (e.g., use of company translators).

4. Any internal analyses, risk assessments, or other similar research products that BMS has conducted or sponsored regarding clinical trials in China, in Xinjiang, or at PRC military hospitals.

5. Data sufficient to show the number of clinical trials that BMS has conducted in China since January 1, 2015, by trial and site, and any Contract Research Organization (CRO)

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https://www.ohchr.org/sites/default/files/documents/countries/2022-08-31/22-08-31-final-assesment.pdf; U.S. Department of State, *2023 Country Reports on Human Rights Practices: China*, https://www.state.gov/report/custom/cffccc34d2/.

[15] "Supplement No. 4 to Part 744: Entity List," *Electronic Code of Federal Regulations*, Title 15, Subtitle B, Chapter VII, Subchapter C, Part 744, U.S. Department of Commerce, Bureau of Industry and Security, accessed May 7, 2026, https://www.ecfr.gov/current/title-15/subtitle-B/chapter-VII/subchapter-C/part-744/appendix-Supplement%20No.%204%20to%20Part%20744.

or Contract Development Manufacturing Organization (CDMO) that BMS engaged to set up, manage, facilitate, or produce materials for any such trial.

6. Data sufficient to show the number of clinical trials that BMS has conducted at PRC military hospitals since January 1, 2015, by trial and site, and including any CRO and CDMO that BMS engaged to set up, manage, facilitate, or produce materials for any such trial.

7. Data sufficient to show the number of clinical trials that BMS has conducted at hospitals in Xinjiang since January 1, 2015, by trial and site, and including any CRO and CDMO that BMS engaged to set up, manage, facilitate, or produce materials for any such trial.

8. Information about BMS' due diligence processes to ensure the protection of its intellectual property and other sensitive data at clinical trial and manufacturing sites in China broadly, and in Xinjiang and at PRC military hospitals more specifically, including how data is stored and how the company navigates China's data transfer laws.

9. All agreements since January 1, 2020 between Chinese companies and BMS related to licensing, equity, or joint ventures. Data sufficient to show the locations of clinical trials conducted prior to BMS' acquisition; and BMS' due diligence processes regarding the conduct of such clinical trials.

I look forward to constructive engagement with BMS on this important topic affecting U.S. national security and the health of American citizens.

Sincerely,

John Moolenaar
Chairman, House Select Committee on the CCP

Enclosure: BMS Clinical Trials at Military and Xinjiang Facilities

Bristol Myers Squibb — Clinical Trials at PLA/Military and Xinjiang Facilities

Trial Title	Facility	Start Date	Drugs
A Study to Assess the Effectiveness and Safety of Ozanimod in Chinese Adults With Relapsing Multiple Sclerosis (CTR20240208)	First Affiliated Hospital of Xinjiang Medical University, Urumqi	May. 2024	Ozanimod hydrochloride
A Study to Evaluate the Efficacy and Safety of Deucravacitinib in Adults With Active Sjögren's Syndrome (POETYK SjS-1) (CTR20233047)	People's Hospital of Xinjiang Uygur Autonomous Region, Urumqi	Sep. 2023	Deucravacitinib
A Study to Compare Iberdomide Maintenance Versus Lenalidomide Maintenance Therapy Following Autologous Stem Cell Transplant in Participants With Newly Diagnosed Multiple Myeloma (CTR20232917)	First Affiliated Hospital, Air Force Medical University (PLA), Xi'an PLA General Hospital Fifth Medical Center, Beijing	Jun. 2023	Lenalidomide, iberdomide hydrochloride
A Study to Assess Effectiveness and Safety of Deucravacitinib Compared with Placebo in Participants With Active Systemic Lupus Erythematosus (SLE) (POETYK SLE-1) (CTR20230595)	People's Hospital of Xinjiang Uygur Autonomous Region, Urumqi	Jan. 2023	Deucravacitinib
A Study to Determine the Efficacy and Safety of Luspatercept in Adult Participants and to Evaluate the Safety and Pharmacokinetics in Adolescent Participants with Alpha (α)-Thalassemia (CTR20222846)	PLA Joint Logistics Support Force 923 Hospital, Nanning	Dec. 2022	Luspatercept
A Study to Evaluate Luspatercept (ACE-536) in Chinese Participants Who Require Regular Red Blood Cell Transfusions Due to Beta (β)-Thalassemia (CTR20222419)	PLA Joint Logistics Support Force 923 Hospital, Nanning	Oct. 2022	Luspatercept
An Efficacy and Safety Study of Oral Azacitidine (CC-486) as Maintenance Therapy in Chinese Participants with Acute Myeloid Leukemia in Complete Remission (CTR20221210)	First Affiliated Hospital of Xinjiang Medical University, Urumqi Second Affiliated Hospital, Army Medical University (Xinqiao Hospital), Chongqing	Aug. 2022	Onureg (CC-486)
Open-label Study Comparing Iberdomide, Daratumumab and Dexamethasone (IberDd) Versus Daratumumab, Bortezomib, and Dexamethasone (DVd) in Participants with Relapsed or Refractory Multiple Myeloma (EXCALIBER-RRMM) (CTR20222913)	First Affiliated Hospital, Air Force Medical University (PLA), Xi'an	Jun. 2022	Daratumumab, bortezomib, iberdomide hydrochloride, dexamethasone sodium phosphate
A Study of Nivolumab-relatlimab Fixed-dose Combination Versus Regorafenib or TAS-102 in Participants with Later-	Second Affiliated Hospital, Air Force Medical University (PLA), Xi'an	Apr. 2022	(Nivolumab + relatlimab), regorafenib, (tipiracil hydrochloride + trifluridine)

Trial Title	Facility	Start Date	Drugs
lines of Metastatic Colorectal Cancer (RELATIVITY-123) (CTR20222092)			
A Study to Assess Adjuvant Immunotherapy With Nivolumab Plus Relatlimab Versus Nivolumab Alone After Complete Resection of Stage III-IV Melanoma (RELATIVITY-098) (CTR20220635)	Cancer Hospital of Xinjiang Medical University, Urumqi	Oct. 2021	(Nivolumab + relatlimab), nivolumab
A Study to Determine the Efficacy and Safety of Deucravacitinib Compared with Placebo in Participants with Active Psoriatic Arthritis (PsA) Who Are Naïve to Biologic Disease Modifying Anti-rheumatic Drugs or Had Previously Received TNFα Inhibitor Treatment (CTR20212417)	People's Hospital of Xinjiang Uygur Autonomous Region, Urumqi	Jul. 2021	Deucravacitinib, apremilast
A Study of Nivolumab or Placebo in Combination with Docetaxel in Men with Advanced Castration-resistant Prostate Cancer (CheckMate 7DX) (CTR20201264)	PLA General Hospital Fifth Medical Center, Beijing Cancer Hospital of Xinjiang Medical University, Urumqi	Feb. 2020	Nivolumab, prednisone, docetaxel
Study of Nivolumab Versus Placebo in Combination With Neoadjuvant Chemotherapy and Adjuvant Endocrine Therapy in Participants With High-risk, Estrogen Receptor-Positive (ER+), Human Epidermal Growth Factor Receptor 2-Negative (HER2-) Primary Breast Cancer (CheckMate 7FL) (CTR20210054)	Cancer Hospital of Xinjiang Medical University, Urumqi	Nov. 2019	Tamoxifen citrate, paclitaxel, undisclosed anthracycline, letrozole, anastrozole, epirubicin hydrochloride, nivolumab, cyclophosphamide, exemestane, doxorubicin
A Study of Nivolumab in Combination With Ipilimumab in Participants With Advanced Hepatocellular Carcinoma (CheckMate 9DW) (CTR20192560)	Army Medical University First Affiliated Hospital, Chongqing 900th Hospital of the Joint Logistics Support Force, Fuzhou Second Affiliated Hospital, Air Force Medical University (PLA), Xi'an PLA General Hospital (301 Hospital), Beijing PLA Hospital 81 (Eastern Theater Command General Hospital), Nanjing	Sep. 2019	Lenvatinib mesylate, nivolumab, ipilimumab, sorafenib tosylate
Pan Tumor Rollover Study (CTR20210444)	Second Affiliated Hospital, Air Force Medical University (PLA), Xi'an	Aug. 2019	Bevacizumab, leucovorin, daratumumab, nivolumab, fluorouracil, regorafenib, cabozantinib, pemetrexed disodium, ipilimumab, pembrolizumab, temozolomide,

Trial Title	Facility	Start Date	Drugs
			trametinib dimethyl sulfoxide, capecitabine, leucovorin calcium, rucaparib camsylate, relatlimab, enzalutamide, oxaliplatin, (nivolumab + relatlimab), sunitinib
An Extension Study of Oral Ozanimod for Moderately to Severely Active Crohn's Disease (CTR20211116)	PLA General Hospital Seventh Medical Center, Beijing Tangdu Hospital, Fourth Military Medical University (PLA), Xi'an	Aug. 2018	Ozanimod hydrochloride
A Placebo-controlled Study of Oral Ozanimod as Maintenance Therapy for Moderately to Severely Active Crohn's Disease (CTR20211113)	PLA General Hospital Seventh Medical Center, Beijing Tangdu Hospital, Fourth Military Medical University (PLA), Xi'an	Jun. 2018	Ozanimod hydrochloride
Induction Study 2 of Oral Ozanimod as Induction Therapy for Moderately to Severely Active Crohn's Disease (CTR20211103)	PLA General Hospital Seventh Medical Center, Beijing	Mar. 2018	Ozanimod hydrochloride
A Study Comparing Nivolumab, Nivolumab in Combination with Ipilimumab and Placebo in Participants with Localized Kidney Cancer Who Underwent Surgery to Remove Part of a Kidney (CheckMate 914) (CTR20180072)	PLA Central Theater Command General Hospital, Wuhan PLA General Hospital (301 Hospital), Beijing	Jul. 2017	Nivolumab, ipilimumab
A Study to Evaluate Efficacy in Subjects with Esophageal Cancer Treated with Nivolumab and Ipilimumab or Nivolumab Combined with Fluorouracil Plus Cisplatin Versus Fluorouracil Plus Cisplatin (CheckMate 648) (CTR20171227)	Tangdu Hospital, Fourth Military Medical University (PLA), Xi'an PLA General Hospital (301 Hospital), Beijing PLA Nanjing Military Region Fuzhou General Hospital, Fuzhou Affiliated Hospital, Chinese Academy of Military Medical Sciences, Beijing	Jun. 2017	NeoCorp, fluorouracil, ipilimumab, nivolumab, cisplatin
Study of Nivolumab in Combination With Ipilimumab or Standard of Care Chemotherapy Compared to the Standard of Care Chemotherapy Alone in Treatment of Participants With Untreated Inoperable or Metastatic Urothelial Cancer (CheckMate 901) (CTR20180252)	PLA General Hospital (301 Hospital), Beijing	Mar. 2017	Ipilimumab, carboplatin, cisplatin, nivolumab, gemcitabine
A Neoadjuvant Study of Nivolumab Plus Ipilimumab or Nivolumab Plus Chemotherapy Versus Chemotherapy Alone in Early Stage Non-Small Cell Lung Cancer (CheckMate 816) (CTR20180929)	PLA General Hospital (301 Hospital), Beijing	Mar. 2017	Ipilimumab, pemetrexed, gemcitabine hydrochloride, nivolumab, docetaxel, cisplatin, carboplatin, paclitaxel, vinorelbine

Trial Title	Facility	Start Date	Drugs
An Investigational Immuno-therapy Study of Nivolumab Compared to Sorafenib as a First Treatment in Patients with Advanced Hepatocellular Carcinoma (CTR20200050)	Tangdu Hospital, Fourth Military Medical University (PLA), Xi'an PLA Nanjing Military Region Fuzhou General Hospital, Fuzhou PLA Hospital 81 (Eastern Theater Command General Hospital), Nanjing PLA No. 307 Hospital, Beijing	Dec. 2015	Nivolumab, sorafenib tosylate