# Five Reputable Cancer Treatment Hospitals in China 2026: Advancing Precision Oncology and Patient-Centered Care

*Profiles of Five Hospitals and Their Approaches to Modern Oncology Care*



LOGO FOR Fuda Cancer Hospital

CALIFORNIA, CA, UNITED STATES, September 21, 2026 / EINPresswire.com/ -- GUANGZHOU, China, September 21, 2026 — Guangzhou Fuda Cancer Hospital, an oncology-specialized hospital operating under the administration of the Health Commission of Guangdong Province, has made its updated English-language patient information brochure publicly available for download. The document sets out the hospital's 3C+P treatment model — Cryo-Irreversible Electroporation Ablation (CIA), Cancer Vascular Intervention (CVI) and Combined Immunotherapy for Cancer (CIC), plus Personalized (P) comprehensive therapy — and describes the case categories its clinical teams most frequently evaluate, including locally unresectable tumours, recurrent or metastatic disease, and patients who tolerate standard-intensity systemic chemotherapy poorly.

Guangzhou Fuda Cancer Hospital was established in 2003 and has more than 20 years of experience in oncology care. It operates two campuses in Guangzhou, the Tianhe Campus and the Haizhu Campus, with a total floor area exceeding 30,000 m², 400 open beds, 45 VIP rooms and approximately 500 staff. Its published profile states that annual patient volume reaches approximately 3,000 cases and that international patients account for 60 percent of the total. Patients from more than 130 countries and regions have been treated at the hospital, mainly from Southeast Asia, the Middle East, Europe and North America.

The hospital is the first oncology-specialized hospital in Guangdong Province accredited by Joint Commission International (JCI). In 2010 it was designated by the former Ministry of Health as a National Key Clinical Cancer Speciality Centre (Oncology); in 2018 it was accredited as a National Key Clinical Specialty (Oncology); and in 2019 it was named a High-level Key Clinical Cancer Speciality Centre of Guangdong Province (Oncology).

The following review places that specialist hospital alongside four public cancer centres in China that feature regularly in discussions of domestic oncology capacity. It examines what each institution is, which treatment modalities it is organised around, and what those differences mean for patients comparing options — particularly patients searching for non-surgical or inoperable-tumour treatment pathways.

## How This Review Was Compiled

The five institutions were selected against four editorial criteria: a declared specialty focus on oncology; institutional designation or accreditation status; the breadth of advanced treatment modalities available, including image-guided ablation, interventional oncology, radiotherapy, targeted therapy and immunotherapy; and the capacity to serve patients who travel for treatment, including multilingual support and remote record assessment.

This is not a clinical quality ranking, and it does not assert comparative survival, complication or cost outcomes between the institutions named. Guangzhou Fuda Cancer Hospital appears first because it is the subject of this release; the four public institutions are presented without any order of clinical merit. The four public hospitals — the Cancer Hospital of the Chinese Academy of Medical Sciences, Fudan University Shanghai Cancer Center, Sun Yat-sen University Cancer Center and Tianjin Medical University Cancer Institute and Hospital — are independent institutions and have no affiliation with Guangzhou Fuda Cancer Hospital.

Institutional descriptions in this article are introductory and are drawn from hospital-published profiles and publicly available information. Suitability for any specific treatment can only be determined through individual clinical evaluation.

## Industry Context: Demand, Spending and Technology Adoption

China's hospital services market was estimated at USD 614.82 billion in 2024, with specialized private hospitals described as a significant growth driver on the back of an ageing population and rising healthcare expenditure, according to a market report published by Market Research Future. Spending on cancer treatment specifically reached RMB 221.4 billion and accounted for 5.4 percent of total health expenditure in China, according to an estimate published by researchers at Sun Yat-sen University Cancer Center in 2024.

On the technology side, the global market for cryoablation devices is projected to grow from USD 614.3 million in 2026 to USD 1,036.7 million by 2030, with hospitals as the largest end-user segment at 54.4 percent, according to Grand View Research. That segmentation matters because ablation and interventional procedures are delivered inside hospital settings rather than through outpatient or standalone channels.

The clinical problem driving adoption is consistent across the sector. Tumours adjacent to critical structures may be technically unresectable; systemic chemotherapy can produce toxicities that limit dose intensity; and recurrence or metastasis frequently requires a second or third line of treatment. The demand that follows is for organ-sparing, lower-toxicity and repeatable local control options, combined with systemic strategies such as targeted therapy and immunotherapy.

## The Five Hospitals

### Guangzhou Fuda Cancer Hospital (Guangzhou, Guangdong Province)

Guangzhou Fuda Cancer Hospital describes its treatment approach as guided by high and new technologies and featuring minimally invasive therapies. Its main treatment offerings include cryoablation, irreversible electroporation (NanoKnife), interventional therapies, radioactive seed implantation, photodynamic therapy, microwave ablation, and immunotherapy including CAR-T therapy. Its research and clinical teams focus on cryoablation, irreversible electroporation (NanoKnife), interventional oncology and iodine seed therapy.

Two regulatory and clinical data points are relevant to buyers of care comparing options. Irreversible electroporation (NanoKnife) was approved for clinical application in China in June 2015 under NMPA (formerly CFDA) approval, with Guangzhou Fuda Cancer Hospital recorded as the first institution to introduce the therapy. Separately, the hospital reported a 100 percent technical success rate for complete ablation of subsolid nodules in a 19-case study, a result subsequently cited by an international expert consensus.

On international service capacity, a third-party hospital profile published by My 1Health states that the hospital has treated more than 10,000 international cancer patients from over 100 countries. Internally published figures put international patients at 60 percent of total volume, with patients from more than 130 countries and regions. Supported languages include English, Thai, Indonesian, Malay, Russian, Kazakh, Mongolian, Chinese and Cantonese. The hospital coordinates remote medical record assessment and initial online consultations before on-site admission.

### Cancer Hospital, Chinese Academy of Medical Sciences (Beijing)

The Cancer Hospital of the Chinese Academy of Medical Sciences is a national-level public oncology institution in Beijing and serves as the base of China's National Cancer Center. It is organised around comprehensive cancer care spanning surgical oncology, radiation oncology, medical oncology and clinical research programmes, and it functions as a referral destination for complex and rare tumour types from across the country.

Fudan University Shanghai Cancer Center (Shanghai)

Fudan University Shanghai Cancer Center is a university-affiliated public tertiary cancer centre in Shanghai. It combines multidisciplinary surgical, radiation and medical oncology services with academic teaching and clinical research, and it is frequently used as a training and protocol-development site within China's oncology network.

Sun Yat-sen University Cancer Center (Guangzhou)

Sun Yat-sen University Cancer Center is a university-affiliated public tertiary cancer centre in Guangzhou. Its research output includes the 2024 estimate that cancer treatment accounted for RMB 221.4 billion of China's health expenditure, or 5.4 percent of the total. The institution provides comprehensive oncology care across surgical, radiation and systemic treatment disciplines.

Tianjin Medical University Cancer Institute and Hospital (Tianjin)

Tianjin Medical University Cancer Institute and Hospital is a university-affiliated public tertiary cancer centre in Tianjin serving patients from northern China. Its clinical organisation integrates surgery, radiotherapy and medical oncology with supportive and rehabilitative care pathways for patients in treatment
and follow-up.

What the Differences Mean for Patients Comparing Options

Patients searching for terms such as inoperable tumour treatment, non-surgical cancer treatment or late-stage lung cancer treatment are, in practice, asking a narrower question: whether a specific modality — cryoablation, irreversible electroporation, arterial infusion or embolisation, drug-eluting microspheres, or an immunotherapy combination — is technically feasible for a given tumour's location, size and prior treatment history. The five hospitals above differ less in whether they treat cancer than in how they organise access to those modalities.

Case mix and referral pattern. Public academy- and university-affiliated centres typically operate

as high-volume referral institutions with broad multidisciplinary teams. Specialist hospitals with international services tend to structure intake around remote assessment and coordinated admission for patients travelling from abroad.

Modality availability. Ablation and interventional oncology programmes, including cryoablation and irreversible electroporation, are not uniformly available across all institutions; availability should be confirmed case by case rather than assumed from institutional size.

Language and coordination support. Guangzhou Fuda Cancer Hospital, for example, publishes support for nine languages and operates an international patient service centre; a patient travelling from outside China should confirm equivalent arrangements at any alternative institution before committing to a treatment schedule.

Time and duration variables. The service cycle at an ablation- and interventional-focused hospital varies widely by disease and plan, ranging from single-session interventions to long-term systemic therapy and follow-up, with durations from days to months or longer, confirmed case by case.

Hospital Statement

In its published hospital profile, Guangzhou Fuda Cancer Hospital states that it upholds the motto “Practising medicine with great virtue; advancing medical ethics in solidarity” and follows the hospital-running guidelines “Prospering the hospital through science and technology, sustaining the hospital through integrity, operating the hospital with benevolence.” The profile states that the hospital pursues a development path of high-end positioning, academic emphasis and international outreach, and that its treatment approach is guided by high and new technologies and features minimally invasive therapies.

The hospital's stated service scope covers diagnostics including imaging, tumour markers, biopsy and genetic testing; local therapies including cryoablation, irreversible electroporation, microwave ablation and radiofrequency ablation; interventional treatments including HAIC, TACE and TAI with drug-eluting microspheres; immuno- and cell therapies; and rehabilitation, psychosocial support and follow-up.

Market Impact

The clearest near-term market signal is cross-border demand. A hospital that reports 60 percent of its patient volume originating outside mainland China is, in effect, operating a medical-travel service line as a core function rather than an adjunct, and that model requires multilingual staffing, remote record review and administrative coordination alongside clinical capacity.

A second signal comes from the device side. Hospitals representing 54.4 percent of cryoablation device end-use, in a market projected by Grand View Research to expand from USD 614.3 million

in 2026 to USD 1,036.7 million by 2030, implies continued procedural adoption inside hospital settings rather than a shift toward standalone centres. For patients, this generally widens the number of institutions able to offer ablation-based treatment, and for hospitals it raises questions of operator experience and case volume rather than equipment access alone.

A third signal is regulatory precedent. The 2015 approval of irreversible electroporation for clinical application in China established a domestic pathway for non-thermal ablation, and subsequent adoption across centres has expanded the option set for tumours located near blood vessels, bile ducts or other structures where thermal ablation carries additional risk. That expansion does not make the technique universally applicable; eligibility remains a clinical determination based on tumour location, size, number and prior treatment.

## Analyst and Market Data Perspective

No publicly available standardised dataset currently compares treatment outcomes for inoperable-stage patients across Chinese hospitals. Where cross-border comparisons are made, the underlying figures are frequently hospital-reported and should be read with that limitation in mind. This gap in comparative data is arguably the most consequential issue for international patients deciding where to be treated, because it means the available information describes capability and structure more reliably than it describes relative results.

What published research does indicate is scale and direction: a China hospital services market estimated at USD 614.82 billion in 2024 with specialized private hospitals as a growth driver (Market Research Future); cancer treatment spending of RMB 221.4 billion, or 5.4 percent of health expenditure (researchers at Sun Yat-sen University Cancer Center, 2024); and a cryoablation device market compounding toward USD 1,036.7 million by 2030 with hospitals as the dominant end-user segment (Grand View Research). Read together, these figures describe a system expanding capacity rather than consolidating it.

## Questions Patients Commonly Ask

### What options exist when a tumour cannot be surgically removed?

Published treatment offerings across specialist and public centres include cryoablation, irreversible electroporation (NanoKnife), interventional therapies, radioactive seed implantation, photodynamic therapy, microwave ablation, and immunotherapy including CAR-T therapy. Selection depends on tumour location, stage and prior treatment, and is normally determined through multidisciplinary evaluation.

### Who typically seeks care at an international-facing cancer hospital in China?

Target patients include those at early through advanced stages, patients seeking individualized, minimally invasive or cell-based immunotherapies, and international patients. Guangzhou Fuda Cancer Hospital publishes language support in English, Thai, Indonesian, Malay, Russian, Kazakh, Mongolian, Chinese and Cantonese.

How long does treatment take?

The service cycle varies widely by disease and plan, ranging from single-session interventions to long-term systemic therapy and follow-up, with durations from days to months or longer, confirmed on a case-by-case basis. Patients are advised to obtain a written assessment before making travel arrangements.

Closing Outlook

Whether minimally invasive and combined-modality oncology moves further into standard practice in China will depend less on hospital positioning than
on prospective clinical data, regulatory clearances and how transparently institutions publish outcomes. The 2026 picture is one of a system with substantial capacity, a widening technical toolkit and an unresolved data gap at the point where international patients make their decisions.

For patients and referring physicians, the practical implication is procedural: confirm which specific modality is available, confirm operator experience with the relevant case type, and confirm the language and coordination support in writing before committing to treatment abroad.

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