



Second Sunday in Ordinary Time January 16, 2011 A

PREBORN LIFE AND STEM-CELL RESEARCH

"Human life is sacred because from its beginning it involves the creative action of God and it remains for ever in a special relationship with the Creator, who is its sole end. God alone is the Lord of life from its beginning until its end: no one can under any circumstance claim for himself the right directly to destroy an innocent human being." (Catechism of the Catholic Church, no. 2258)

On January 22, 1973, in a 7 to 2 vote, the Supreme Court issued a decision in the case known as *Roe v*. *Wade*, which legalized abortion and severely restricted states' rights to regulate it. Not only has the decision split people and political parties into two camps; worse, it has split Catholics.

Ultimately, the moral and theological issue regarding human life comes down to these questions: When does human life begin? And, is God the author of life or is he not?

To be pro-abortion is to say that God is not the author of life, and that the question of when human life begins is vague or unknowable. It does not seem rational that if a mother decides to end the life of her baby at any time during pregnancy, it is legal, whilst if someone injures a mother, killing her baby at the same time, it constitutes murder. This is not consistent.

When do we begin to value human life? Is it at the beginning—at conception? Is it at some arbitrary time during pregnancy? Or is human life only recognized when the baby emerges completely from the womb?

Justice Byron White, in his dissenting opinion, complained that the Supreme Court "values the convenience of the pregnant mother more than the continued existence and development of the life or potential life that she carries." To paraphrase Justice White's opinion: "Our culture values convenience and pleases more than life itself."

Saturday will be the 37th anniversary of *Roe v. Wade*. While many legal arguments both support and oppose a mother's right to end her pregnancy, our concern as disciples of Jesus Christ is to follow the Gospel message. The Scriptures make it very clear that God not any human being—is the author of human life. No life comes to exist if not by the will of God. A case of rape or incest is surely not what God wants though he may allow it to happen—but the consequent potential life is, without question, God's will. Many think that these atrocities justify abortion.

We argue the opposite, based on the Fifth Commandment, "Thou shall not kill." The crime of rape or incest does not render a resulting offspring less valuable to God and to the world. Yet in saying this, we must not be oblivious to the mother's trauma. The community owes her support because her decision to carry the child through to full term is truly sacrificial.

We approach the altar today facing the anniversary of *Roe v. Wade*. In this a context, our first reading today (Isaiah 149:3, 5-6) is a neon sign announcing: "*Now the Lord has spoken who formed me as his servant from the womb*." This reflects the earlier words of Jeremiah: "From my mother's womb you pronounced my name."

AN INTERVIEW ABOUT THE SCIENCE AND ETHICS OF STEM-CELL RESEARCH

The following appeared in this month's edition of *Columbia*, the Knights of Columbus' magazine. *Columbia* interviewed Dr. David Prentice, an internationally recognized expert on stem cells and cloning.

Columbia: What are stem cells and what are the different types?

Prentice: Stem cells have two chief characteristics: They continue to grow and divide so there is always a pool of cells available, and they can change into any of the various tissues of the body.

There are, at present, three types of stem cells. Embryonic stem cells come from young embryos about a week after conception, and you have to destroy that young life to extract them. Besides the obvious ethical problem, they also like to grow and try to make all the tissues at once. The end result is that after 30 years of research with embryonic stem cells—first with mice and then with human embryonic stem cells—researchers still cannot control their growth. The cells tend to make tumors when injected into the lab mice. There are problems with transplant rejections and with forming mature, functional tissues. From a practical level, they are not very good cells for clinical treatments. The second type is adult stem cells. We are born with them and continue to have them in all of our tissues and organs. They are also in umbilical cord blood and in the placenta. There is no ethical problem with adult stem cells—you don't have to harm the donor. For several decades, adult stem cells have already been proven to repair and replace damaged and diseased tissues. They have been used for many treatments over the last five or 10 years, including spinal cord injury, juvenile diabetes, heart damage and dozens of other conditions.

Finally, there is a newer type of stem cell, a somewhat intermediate type. The technical term is induced pluripotent stem iPS cells. They are made by taking a normal cell, such as a skin cell, and adding a few genes that reprogram how that cell behaves. They look and act like embryonic stem cells, but they can be obtained ethically for laboratory studies. There are no embryos, no women's eggs and no cloning techniques involved.

Columbia: How many adult stem-cell treatments are currently being used?

Prentice: There are at least 73 that have been verified by published scientific evidence, and there are probably close to 80 now. There were, at last count, more than 50,000 patients around the globe who receive adult stem-cell transplants every year.

Columbia: How much funding and effort is put into adult stem-cell research as opposed to embryonic stem-cell research?

Prentice: From the federal government there is more adult stem cell money than there is embryonic, although that is changing. Embryonic research, over the last nine years, has received more than half a billion federal taxpayer dollars, and its rate of increase is much steeper in terms of federal support. Most adult stem cell funding is not going toward the newer studies and clinical trials for things like heart disease, stroke and diabetes. Some states have poured billions of dollars into embryonic stem cells. Whereas there is not nearly as much going to adult stem-cell research.

Columbia: Why is there so much focus on embryonic stem cells?

Prentice: I think the obsession with embryonic stem cells is primarily ideological and economic. It is perhaps interesting science for some people, but it is very expensive science. It has been sold to the public, as well as to legislators, with promises of all of the cures and the eventual economic return that will come, but essentially it is like selling snake oil.

Columbia: Why would there be more of an economic motive in embryonic than adult stem cells?

Prentice: You can patent embryonic stem cells lines. Everyone that is interested in embryonic research wants to have their own line of embryonic stem cells that they can patent and then reap the profits. Even if no treatments ever happen, any scientist or company that wants to work with those cells has to pay a licensing fee. It becomes a moneymaker simply to destroy embryos, grow the cells and then market those cells for more basic lab studies.

Columbia: How do laws and treatments in the United States regarding stem-cell research compare to those overseas?

Prentice: In the United States, at the federal level, there is no legal restriction for embryonic research or even for cloning. In some countries, such as Italy, it is against the law to destroy a human embryo, whereas there are very liberal laws in other countries, including the United Kingdom and China.

America is behind in terms of adult stem-cell research and treatments. Germany, which since the early 1900's has prohibited destruction of a human embryo, is one of numerous countries around the world leading in terms of new adult stem-cell treatments. In fact, some U.S. scientists first did their adult stem-cell treatments in other countries because they could not get the funding or the interest in the United States.

Columbia: Are there any other big challenges facing adult stem-cell research?

Prentice: Because the media will often just say "stem cell research" without using an adjective, people automatically assume they are talking about embryonic. Those who support embryonic stem-cell research then claim that the "other side" is against research of any kind. But we support adult stem cells. We support anything that does not harm or destroy human life. We support real science. Embryonic stem-cell research is an obsolete science and an unethical science. The sooner we leave it behind, the better.

Have a blessed week,

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