Human cloning is the creation of a human being whose genetic make-up is nearly identical to that of a currently or previously existing individual. Recent developments in animal cloning coupled with advances in human embryonic stem cell research have heightened the need for legislation on this issue. Despite their nearly identical titles, the two bills currently being considered by Congress call for markedly different policies on this critical issue. Though both seek a ban on what is being called "reproductive" cloning--in which a clonal human embryo is implanted in a woman with the intent that a cloned human being will be born--they differ dramatically with respect to what is being termed "therapeutic" cloning. This latter type of cloning involves the creation and subsequent destruction of a clonal human embryo for the purposes of scientific or medical research. Such embryonic destruction is usually carried out as a means of obtaining the embryo's "stem cells"--cells which some believe have the potential to revolutionize medicine by restoring the health of persons suffering from a variety of debilitating conditions. Because the prospect of human cloning carries great potential to impact humanity in ways previously only imagined, it is exceedingly important that Congress adopt legislation that will protect society and the citizens who live in it--both now and for generations to come. To achieve this end, we believe that a comprehensive ban prohibiting both "reproductive" and "therapeutic" cloning is needed. In support of this assertion, we offer the following:

I. The overwhelming consensus in this country that human reproductive cloning should not be permitted necessitates a ban on both reproductive and "therapeutic" cloning.

An overwhelming majority of scientists, lawyers, health care professionals, ethicists and the general public has spoken out strongly against creating a human baby via what is being termed "reproductive cloning." While most U.S. citizens support a ban on the reproductive cloning of human beings, they may or may not support a ban on "therapeutic" cloning. Yet, to enact a ban on the former while simultaneously permitting the latter would almost certainly result in instances of both reproductive and "therapeutic" cloning. Support for this premise is as follows:

First, if a ban only on reproductive cloning were adopted, enforcement would require the legally mandated destruction of human embryos created via cloning. That is, if it were legal to create clonal embryos for
"therapeutic"--but not for reproductive--purposes, the demise of these embryos would be required in order to prevent the illegal practice of reproductive cloning from occurring. A non-comprehensive ban would thereby establish "for the first time in American history a class of embryos that it is a crime not to destroy, a felony not to treat as anything except disposable tissue."

Although abortion is currently legal in this country, the majority of U.S. citizens would surely react strongly against and refuse to adhere to a governmental policy that mandated the destruction of human life (or the punishment/incarceration of women known to have defied the law by giving birth to human clones).

Indeed, if clonal human embryos were created in the laboratory for "therapeutic" purposes, the mandate that they not be implanted or otherwise allowed to progress toward birth would prove very difficult to defend. Therefore, the birth of clonal human beings--the very thing such a ban would intend to prohibit--would likely result.

Consider the following scenarios:

1. A clonal embryo is produced with the "therapeutic" intent of producing tissue needed to save the life of a seriously ill child. Before the tissue can be obtained, the child dies. Her grieving parents, distraught over their tragic loss, request that the embryo be implanted so that they may have another child.
2. A man agrees to be cloned with the intent of donating the resultant embryo to research. Subsequent to creation of the clonal embryo, he learns that both he and his wife are infertile. Realizing that their prospect for having a genetically related child suddenly appears to be compromised, the man changes his mind and requests that his clone be implanted in his wife instead.

In cases like these, authorities would be hard pressed to deny the wishes of those desiring to implant a clonal embryo. As Leon Kass, Addie Clark Harding Professor in The College and the Committee on Social Thought at the University of Chicago, has aptly remarked, "Once the genies put the cloned embryos into the bottles, who can strictly control where they go?"

Currently, the parents of embryos created via in vitro fertilization (IVF) are given absolute decision-making power as to whether their embryos are implanted, cryopreserved, donated to another couple or to research, or destroyed. Fertility clinics often go to great lengths to determine parents' wishes regarding embryos who have been stored for a long period of time and honor decisions both for and against implantation. Certainly, the fertility industry would have a difficult time denying people the same choice simply because their embryos resulted from cloning. The implantation of human life--regardless of how that life originated--should not be regarded as a prohibitable act.

Second, if the laboratory creation of clonal embryos was permitted but the implantation of such embryos was banned, logistical problems regarding enforcement of such a system would undoubtedly arise. To prevent a cloned embryo from being implanted within the private context of a doctor/patient relationship would prove to be impossible. Policies that would require genetic testing of every baby upon birth to ensure that he or she is not a clone would likely be regarded as a violation of privacy. Furthermore, such testing would itself fail to ensure that human cloning had not occurred, as the baby could be a clone of an unknown or unrevealed person, rather than being a near genetic duplicate of one of the parents. As a result, the threat to levy fines on or otherwise punish those who clone often would not serve as a deterrent. Also, those who could be proven to have cloned (e.g., parents who cloned an ill son with the hope that his clone could provide healthy tissue for transplant) would likely not be stopped from engaging in such action if they believed it could save the life of their child. Therefore, policies that would prohibit the implantation of clonal human embryos would often be unenforceable and would fail to deter human reproductive cloning.
II. To mandate the destruction of clonal human embryos created for research purposes would constitute a break with our nation's longstanding legal tradition and the majority of public sentiment.

While some proponents of "therapeutic" cloning have characterized the cloning controversy as primarily a dispute between those who are "pro-life" and those who are "pro-choice," extracorporeal human embryos historically have been accorded the right to certain protections by those on both sides of the abortion debate. The following excerpt from Richard Doerflinger's June 20, 2001 testimony before the U.S. House Subcommittee on Health illustrates this point in convincing fashion:

...the one practice in human embryo research that is widely condemned even by supporters of abortion rights is the special creation of human embryos solely for the purpose of research that will kill them. In 1994 the National Institutes of Health did propose funding such [a practice], as part of a larger proposal for funding human embryo research generally. The moral outcry against this aspect of the proposal, however, was almost universal. Opinion polls showed massive opposition and the NIH panel making the recommendation was inundated with over 50,000 letters of protest. The Washington Post, while reaffirming its support for legalized abortion, attacked the Panel's recommendation as follows:

The creation of human embryos specifically for research that will destroy them is unconscionable... [I]t is not necessary to be against abortion rights, or to believe human life literally begins at conception, to be deeply alarmed by the notion of scientists purposely causing conceptions in a context entirely divorced from even the potential of reproduction.10

The Chicago Sun-Times likewise editorialized:

We can debate all day whether an embryo is or isn't a person. But it is unquestionably human life, complete with its own unique set of human genes that inform and drive its own development. The idea of the manufacture of such a magnificent thing as a human life purely for the purpose of conducting research is grotesque, at best.11

In the end, President Clinton set aside the recommendation for creation of research embryos. Every year since then, Congress has prohibited funding for all harmful embryo research at the National Institutes of Health, through the Dickey amendment to the annual Labor/HHS appropriations bills.12 However, even members of Congress who have led the opposition to the Dickey amendment agree with its rejection of special creation of human embryos for research. On the only occasion when an amendment was offered on the House floor to weaken the Dickey amendment, the sponsors emphasized that it would leave intact the clause rejecting the creation of embryos for research.13 Similarly, the recent NIH guidelines for embryonic stem cell research, as well as Senator Specter's Stem Cell Research Act of 2001, explicitly reject the idea of using embryos specially created for research purposes."14
Also among those who have rejected the creation of human embryos for use in destructive research is the National Bioethics Advisory Commission (NBAC) appointed by President Clinton. Much of the public also opposes the creation and subsequent destruction of clonal embryos for research purposes.

III. The United States should promote ethical scientific and medical research, and not merely the progress of research, as "good ends" do not justify any and all means to achieve those ends.

Some have suggested recently that "America is likely to be [the] most important battleground" in the debate over human cloning. This is largely due to the fact that the U.S. has the most highly developed biotechnology industry in the world. Indeed, pressure from scientists seeking to close in on medical breakthroughs is immense, and they are consistently among the most vocal advocates of "therapeutic" cloning. In his June 20, 2001 testimony before the U.S. House Subcommittee on Health, Thomas Okarma, President of Geron Corporation, issued the following statement:

Our nation is on the cusp of reaping the long dreamed-of rewards from our significant investment in biomedical research. The U.S. biotech industry is the envy of much of the world, especially our ability to turn basic research at NIH and universities into applied research at biotech companies and, in turn, into new therapies and cures for individual patients. Using somatic cell nuclear transfer and other cloning technologies, biotech researchers will continue to learn about cell differentiation, re-programming and other areas of cell and molecular biology. Armed with this information, they can eventually crack the codes of diseases and conditions that have plagued us for hundreds of years, indeed, for millennia.

Also offering testimony before the Subcommittee on Health, George Mason University Professor of Public Policy Francis Fukuyama noted that many have fallen prey to the fear that the U.S. "will risk falling behind technologically if we hobble ourselves by restricting either research into or the actual procedure of cloning." Similar reasoning was endorsed over a decade ago when James Watson urged Congress to fund the Human Genome Project on the premise that "what is good for U.S. business is good for the nation." Today, those employed in science and public policy may indeed stand to gain both professionally and economically from engaging in cloning research; however, even if such vocational and material benefits are not the primary motives behind the research--but merely accompany the central goal of improving human health--this praiseworthy pursuit should not be achieved by whatever means are available.

In illustrating this point, Kevin FitzGerald, a molecular geneticist and bioethicist who is himself engaged in cancer research at Georgetown University, has eloquently argued that the potential for obtaining benefits from scientific and medical research--regardless of how significant such benefits may be or who may stand to be helped by them--does not in itself translate into a license to engage in that particular research. For example, scientists would likely learn some very valuable information about the environmental contributions to cancer by administering known carcinogens to a group of people and then varying factors such as diet and sun exposure. To do so, however, would certainly be unethical and almost no one would advocate going forward with such experimentation.

With regard to the cloning debate, it may indeed be helpful to keep in mind that a hallmark of scientific research
is to do no harm until it has been absolutely determined that no alternative means for obtaining a desired good exist. The recent succession of advances in non-embryonic stem cell research indicate that we have not yet reached that point of determination.24 A corollary to this principle is that even when no other means exist, there are still restrictions against inflicting harm.25 The importance of adhering to this principle should be enshrined in every scientist and citizen alike, as horrific examples of failure to ascribe to this cardinal rule abound in all too recent history.

Tragically, the last century and a half has been marred by numerous atrocities against vulnerable human beings in the name of progress and medical benefit. In the 19th century, vulnerable human beings were bought and sold in the town square as slaves and bred as though they were animals.26 In this century, the vulnerable were executed mercilessly and subjected to demeaning experimentation at Dachau and Auschwitz.27 At mid-century, the vulnerable were subjects of our own government's radiation experiments without their knowledge or consent.28 Likewise, vulnerable African-Americans in Tuskegee, Alabama were victimized as subjects of a government-sponsored research project to study the effects of syphilis.29 Currently, we are witness to the gross abuse of mental patients used as subjects in purely experimental research.30 These experiments were and are driven by a crass utilitarian ethos which results in the creation of a "sub-class" of human beings, allowing the rights of the few to be sacrificed for the sake of potential benefit to the many. These unspeakably cruel and inherently wrong acts against human beings have resulted in the enactment of laws and policies which require the protection of human rights and liberties, including the right to be protected from the tyranny of the quest for scientific progress.

We are aware that "therapeutic" cloning research has been endorsed by many on the basis of its alleged potential to relieve the suffering of those afflicted by debilitating disease or disability. While we acknowledge that the desire to heal people is certainly a laudable goal and understand that many have invested their lives in realizing this goal, we also recognize that we simply are not free to pursue good ends via unethical means. As Fukuyama perceptively noted in his testimony:

The United States, as an economically, politically and culturally dominant force in the world, will have an enormous impact on other societies. The Council of Europe has already passed a ban on cloning; to date, 24 countries (including Germany, France, Italy and Japan) have already enacted national bans on cloning, while 16 have banned creation of embryos for research purposes. The United States can do a great deal to either reinforce (or else undermine) [what constitutes acceptable scientific and medical research].31

Precisely because our nation is a global power, it possesses a momentous opportunity to set a standard on both reproductive and "therapeutic" human cloning. Failure to set standards which are ethical will cause this country--and perhaps others--to reap once again the tragic consequences of unethical scientific and medical research.

IV. The pursuit of therapies for human disease and disability via "therapeutic" cloning would likely leave many Americans without acceptable means to relieve their suffering.

Some proponents of "therapeutic" cloning have alleged that if a comprehensive ban is enacted, those who advocated such legislation should be held responsible for the continued suffering of patients who might have benefitted from therapies derived from embryonic stem cells. However, given that many Americans have indicated they would resist treatments derived from embryonic stem cells due to their personal moral convictions,32 serious consideration to the manner in which therapies are derived would seem warranted. That is
to say, concern for the suffering should extend equally to all who suffer, and therapies should be developed which will not discriminate on the basis of moral convictions. Given that many Americans afflicted with debilitating disease and/or disability would likely refuse treatments derived from destructive embryo research, would the fervent commitment to helping the suffering that is often voiced by proponents of "therapeutic" cloning really best be served by research on embryonic, as opposed to non-embryonic, stem cells? Indeed, if a treatment or cure for a particular disease was developed from embryonic stem cells, researchers most likely would not seek to develop an alternative therapy from non-embryonic stem cells but would instead move on to pursue the development of therapies for other human afflictions. Thus, if "therapeutic" cloning were to be legally accepted, the suffering of many patients might actually be extended--rather than ended or lessened--as they might be forced to continue in their suffering unless they are willing to abandon their moral commitments.

V. Human beings have a right not to be created for purposes of experimentation.

A bill permitting "therapeutic" cloning while prohibiting reproductive cloning would constitute the legalization of a wholly unethical practice in that it would legally condone and even legally require the demise of human embryos created for research purposes. The destruction of human embryos is profoundly disturbing, and research which necessitates such an act should be proscribed--regardless of the potential for scientific and medical gain. That some individuals would be destroyed in the name of medical science constitutes a threat to us all.

Regardless of one's views on abortion or personhood of the human embryo, human embryos are unequivocally human beings and therefore should not be subjected to destructive research. An international scientific consensus now recognizes that human embryos are biologically human beings beginning at fertilization and acknowledges the physical continuity of human growth and development from the one-cell stage forward. In the 1970s and 1980s, some frog and mouse embryologists referred to human embryos in the first week or two of development as "pre-embryos," claiming that they deserved less respect than embryos in later stages of development. Today, however, some embryology textbooks openly refer to the term "pre-embryo" as a scientifically invalid and "inaccurate" term that has been "discarded," and others who once used the term have quietly dropped it from new editions. Both the Human Embryo Research Panel and the National Bioethics Advisory Commission have also rejected the term, describing the human embryo from his or her earliest stages of development as a living organism and a "developing form of human life." The claim that an early human embryo becomes a human being only after he or she has reached certain stages of development (e.g., after 14 days or following implantation in the womb) is therefore a scientific myth. Finally, the historic and well-respected 1995 Ramsey Colloquium statement on embryo research acknowledges that:

The [embryo] is human; it will not articulate itself into some other kind of animal. Any being that is human is a human being. If it is objected that, at five days or fifteen days, the embryo does not look like a human being, it must be pointed out that this is precisely what a human being looks like--and what each of us looked like--at five or fifteen days of development.

The term "pre-embryo," and all that it implies, is therefore scientifically invalid. Human embryos are not mere biological tissues or clusters of cells; they are the tiniest of human beings. Thus, we have a moral responsibility not to deliberately harm them. To ignore this responsibility would be to engage in morally unacceptable age discrimination, resulting in the disregard for and destruction of human life based solely on its developmental stage.
In addition to the fact that "therapeutic" cloning runs counter to our nation's longstanding legal tradition and much of public sentiment, the creation of embryos for research via "therapeutic" cloning is for some even more insidious than embryo research in general. As George Annas points out:

To create human embryos solely for research--or to sell them, or to use them in toxicity testing--seems morally wrong because it seems to cheapen the act of procreation and turn embryos into commodities . . . . The moral problem with making embryos for research is that as a society we do not want to see embryos treated as products or mere objects for fear that we will cheapen the value of parenting, risk commercializing procreation and trivialize the act of procreation.

While embryonic stem cell research necessitates the destruction of already existing human embryos, "therapeutic" cloning "goes one step further and entails the deliberate creation--as well as the sacrifice--of human embryos for the alleged good of others." Never before has the creation of embryos with the intent of destroying them for research purposes been legally accepted, and many of the most prominent advocates of human embryonic stem cell research have been adamant about holding the line here. Leon Kass notes that:

The prospect of creating new human life solely to be exploited in this way has been condemned on moral grounds by many people [sic]--including The Washington Post, President Clinton and many other supporters of a woman's right to abortion--as displaying a profound disrespect for life. Even those who are willing to scavenge so-called "spare embryos"--those products of in vitro fertilization made in excess of people's reproductive needs, and otherwise likely to be discarded--draw back from creating human embryos explicitly and solely for research purposes. They reject outright what they regard as the exploitation and the instrumentalization of nascent human life. In addition, others who are agnostic about the moral status of the embryo see the wisdom of not . . . offending the sensibilities of their fellow citizens who are opposed to such practices.

Indeed, it would seem that the manufacture of embryos for research purposes would cause embryos increasingly to be regarded as expendable commodities who have their value rooted solely in what they are able to offer others. Such a mentality might especially prevail with regard to clonal embryos, whose genetic blueprint would be easily reproducible. If we begin creating and subsequently destroying human embryos in the name of research, we will inevitably move into ever more bleak territory, which, had we been wise, we would have shuddered to enter in the first place.

Finally, it is important to recognize that although research on human embryos is widely accepted in the event that it may afford therapeutic benefit to the embryo, so-called "therapeutic" cloning is in no way beneficial to the embryo. In his May 2, 2001 testimony before the Senate Commerce Subcommittee on Science, Technology and Space, Richard Doerflinger offered the following:

...the experiments contemplated [in therapeutic cloning] are universally called "nontherapeutic" experimentation in law and medical ethics--that is, the experiments harm or kill the research subject (in this case the cloned embryo) without any prospect of benefitting that subject. This standard meaning of "nontherapeutic" research is found, for example, in state laws forbidding such research on human embryos as a crime. Experiments performed on one subject solely for possible benefit to others are never called "therapeutic research" in any other context, and there is no reason to
Thus, the term "therapeutic cloning" is actually a misnomer. Such cloning holds no therapeutic value whatsoever for the clonal embryo as, far from benefiting from the research, the embryo is destroyed in it. The painful lessons of the past should have taught us that human beings must not be conscripted for research without their permission--no matter what the alleged justification--especially when that research means the forfeiture of their health or lives. Even if an individual's death is believed to be otherwise imminent, we still do not have a license to engage in lethal experimentation--just as we may not experiment on death row prisoners or harvest their organs without their consent. Of all human beings, embryos are the most defenseless against abuse. A policy advocating the use of clonal human embryos in destructive research would violate the rights of human beings not to be experimented upon.

VI. Conclusion.

Because the prospect of human cloning carries great potential to impact humanity in ways previously only imagined, it is exceedingly important that Congress adopt legislation that will protect society and the citizens who live in it--both now and for generations to come. We believe that the following points are of primary significance to the current legislative debate on this issue:

I. The overwhelming consensus in this country that human reproductive cloning should not be permitted necessitates a ban on both reproductive and "therapeutic" cloning.

II. To mandate the destruction of clonal human embryos created for research purposes would constitute a break with our nation's longstanding legal tradition and much of public sentiment.

III. The United States should promote ethical scientific and medical research, and not merely the progress of research, as "good ends" do not justify any and all means to achieve those ends.

IV. The pursuit of therapies for human disease and disability via "therapeutic" cloning would likely leave many Americans without acceptable means to relieve their suffering.

V. Human beings have a right not to be created for purposes of experimentation.

It is our contention that careful consideration of these points leads to support for a comprehensive ban prohibiting both the reproductive and "therapeutic" cloning of human beings. Failure to adopt such a ban will result in scientific, ethical, and legal failures--the scope and consequences of which will be of great magnitude.

1 In the cloning process, DNA from an existing individual is transferred into an egg cell devoid of genetic material. Components of the egg cell called mitochondria contain their own DNA; thus, provided that the egg cell donor and the donor of DNA are different individuals, a human clone would not be wholly identical in the genetic sense to his or her progenitor. Cloning Human Beings: Report and Recommendations of the National Bioethics Advisory Commission (Rockville, MD), June 1997, pp. 17-18.

2 The term "therapeutic cloning" is actually a misnomer. See Section V (paragraph #5) of this document for discussion of this point.

3 Davor Solter and John Gearhart, "Enhanced: Putting Stem Cells to Work," Science 283 (March 5, 1999):1468-
4 Rudolf Jaenisch and Ian Wilmut, "Don't Clone Humans!" Science 291 (March 30, 2001):2552; "Americans Overwhelmingly Oppose Human Cloning," United States Conference of Catholic Bishops ICR poll, June 7, 2001 (In this survey of 1013 adults, the question "Should scientists be allowed to use human cloning to try to create children for infertile couples?" was posed. 84.6% of respondents answered No, 12.4% of respondents answered Yes, 2.6% of respondents answered that they didn't know, and 0.4% of respondents refused to answer the question); ABC News Nightline poll, February 24, 1997.


6 In his article "Preventing a Brave New World" (The New Republic, May 21, 2001), Leon Kass refers to the demand that clonal embryos be destroyed as "a bitter pill to swallow even for pro-choice advocates" (p. 36).

7 Lori Andrews, professor at Chicago-Kent College of Law and national/international advisor on genetic and reproductive technologies, has pointed out that even though the United Kingdom has passed a law banning reproductive cloning but permitting "therapeutic" cloning, it is important to note that the UK fertility industry is much more centrally regulated than is that of the United States B which has almost no formal guidelines regarding the use of reproductive technologies. Andrews has remarked that, "In the United States, there is no way a law based on the British model requiring termination of embryos would pass. Quite to the contrary, laws forbidding embryo termination . . . are much more likely" (emphasis added). The Clone Age: Adventures in the New World of Reproductive Technology (New York: Henry Holt and Company, 1999), p. 74.


12 The current version is Section 510 of the Labor/HHS appropriations bill for Fiscal Year 2001, H.R. 5656 (enacted through Section 1(a)(1) of H.R. 4577, the FY >01 Consolidated Appropriations Act, Public Law 106-554). It bans funding any creation of human embryos (by cloning or other means) for research purposes and any research in which human embryos are harmed or destroyed.

13 "Let me say that I agree with our colleagues who say that we should not be involved in the creation of embryos for research. I completely agree with my colleagues on that score," said Rep. Nancy Pelosi, arguing in favor of research on "spare" embryos originally created for fertility treatment. The sponsor of the weakening amendment, Rep. Nita Lowey, said: "I want to make it very clear: We are not talking about creating embryos . . . . President Clinton again has made it very clear that early-stage embryo research may be permitted but that the use of federal funds to create embryos solely for research purposes would be prohibited. We can all be assured that the research at the National Institutes of Health will be conducted with the highest level of integrity. No embryos will be created for research purposes...." 142 Cong. Record at H7343 (July 11, 1996). The weakening amendment failed nonetheless, 167 to 256. Id. at H7364. While this debate concerned federal funding, supporters of the Lowey amendment said it was "very hard to understand" why standards for ethical research...
should be different for publicly funded and privately funded research. See remarks of Rep. Fazio at H7341-2.

The NIH guidelines deny funding for "research utilizing pluripotent stem cells that were derived from human embryos created for research purposes," and "research in which human pluripotent stem cells are derived using somatic cell nuclear transfer, i.e., the transfer of a human somatic cell nucleus into a human or animal egg." National Institutes of Health Guidelines for Research Using Human Pluripotent Stem Cells, 65 Fed. Reg. 51976-81 (August 25, 2000) at 51981. Senator Specter's bill supports embryonic stem cell research but insists that "the research involved shall not result in the creation of human embryos." 107th Congress, S. 723, Sec. 2.

In 1997 NBAC considered the prospect of cloning human embryos to create "customized stem cell lines" but described this as "a rather expensive and far-fetched scenario" which was also fraught with moral concerns. The NBAC declared that, "Because of ethical and moral concerns raised by the use of embryos for research purposes it would be far more desirable to explore the direct use of human cells of adult origin to produce specialized cells or tissues for transplantation into patients." Cloning Human Beings: Report and Recommendations of the National Bioethics Advisory Commission (Rockville, MD: June 1997), pp. 30-31. The Commission outlined three alternative avenues of stem cell research, two of which seemed not to involve creating human embryos at all.


June 20, 2001 testimony before the U.S. House Subcommittee on Health.

Testimony before the Subcommittee on Science, Research, and Technology of the House Committee on Science, Space and Technology, Coordination of Genome Projects in Committee Report on H.R. 4502 and S. 1966, the Biotechnology Competitiveness Act (Comm. Print 138, 1988).


Recent advances in non-embryonic stem cell research suggest that it may not even be necessary to obtain stem cells by destroying human embryos in order to treat disease. A growing number of researchers believe that non-embryonic stem cells may soon be used to develop treatments for afflictions such as Parkinson's disease, Alzheimer's disease, immune disorders, congestive heart failure, degenerative diseases, and other debilitating conditions. Such researchers are working to further research on "adult," rather than embryonic, stem cells. In light of these promising new scientific advances, we promote the development of methods to repair and
regenerate human tissue which do not require the destruction of embryonic human life. However, even if such methods do not prove to be as valuable in treating disease as are human embryonic stem cells, use of the latter in the name of medical progress is still not justifiable for the reasons stated in this document. (For an ongoing update of advances in non-embryonic stem cell research, please access www.stemcellresearch.org.)


30 The Center for Mental Health Services: Protection and Advocacy Program for Individuals with Mental Illness (Rockville, MD); web site: www.mentalhealth.org.

31 June 20, 2001 testimony before the U.S. House Subcommittee on Health.


33 Please see endnote #24 for a discussion of promising alternatives to embryonic stem cell research.


39 Ibid.

40 The Ramsey Colloquium, which is sponsored by the Institute on Religion and Public Life, is a group of
Jewish and Christian theologians, philosophers and scholars that meets periodically to consider questions of ethics, religion and public life. It is named after Paul Ramsey (1913-1988), the distinguished ethicist.

41 See, for example, Bruce M. Carlson, "Introduction to the Developing Human" in Human Embryology and Developmental Biology (St. Louis: Mosby), 1994.

42 Personal conversation with John Kilner, PhD, Director of The Center for Bioethics and Human Dignity, July 10, 2001.

43 Please see Section II of this document for discussion of this point.


45 Dónal O'Mathúna, "Cloning and Stem Cell Research: Wrong Motives on Both Sides of the Atlantic," Dignity newsletter (The Center for Bioethics and Human Dignity, Fall 2000).

46 In the National Institutes of Health Guidelines for Research Using Human Pluripotent Stem Cells (accessible at www.nih.gov/news/stemcell/stemcellguidelines.htm), the following statement appears: "Investigators seeking NIH funds for research using hPSCs [human pluripotent (embryonic) stem cells] are required to provide documentation, prior to the award of any NIH funds, that embryos were created for the purposes of fertility treatment. President Clinton, many members of Congress, the NIH Human Embryo Research Panel and the NBAC have all embraced the distinction between embryos created for research purposes and those created for reproductive purposes." The NBAC report Ethical Issues in Human Stem Cell Research Executive Summary (September 1999) may be accessed at www.bioethics.gov/stemcell_exec_intro.htm.


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