Points to consider: The new NIH guidelines for embryonic stem cell research

On March 9, 2009, President Obama rescinded President Bush's limits on federally funded embryonic stem cell research, and authorized the National Institutes of Health (NIH) to publish new guidelines for funding stem cell research that requires destroying live human embryos. The NIH's draft guidelines were published on April 23, and are available for public comment through May 26 (see www.nchla.org or www.nchla.org or www.usccb.org/stemcellcampaign). Points to consider in submitting comments:

- The federal government, for the first time, will spend taxpayers' money to encourage the destruction of living human beings to obtain research material. The offer of federal grants for embryonic stem cell research will give researchers an incentive to destroy embryonic human beings for new stem cell lines embryos alive now in fertility clinics, and those not yet conceived. This is an unprecedented misuse of tax dollars; the Clinton administration issued similar guidelines in 2000 but these were never implemented.
- The first ethical principle for human experimentation is never to use our fellow human beings, at any stage of development, merely as a means. Innocent human beings, especially those who cannot give consent to be used in research, must never be subjected to serious risk of harm or death solely to provide possible benefits to others. These guidelines violate that principle.
- In key respects the guidelines are broader than any proposed before by a branch of the federal government:
- (1) The Bush guidelines of 2001, now rescinded by President Obama, did not allow use of federal funds to encourage the destruction of human embryos for their stem cells in the future; only previously existing stem cell lines (from embryos destroyed before he issued his policy) were eligible.
- (2) The Clinton guidelines of 2000 were limited to embryos that had previously been frozen, so parents in fertility clinics would have time to consider whether to donate their embryonic son or daughter for destructive research.
- (3) Legislation passed by Congress in 2006 and 2007, vetoed by President Bush, was limited to embryos whose parents had already decided to "discard" them before being asked to consider donating them for research.

Under the new guidelines, parents will be offered the option of destructive research alongside all other options, including those allowing their children to survive and grow up; and this option may be offered without a significant waiting period, making a biased or hasty decision more likely.

- In his March 9 executive order, President Obama gave the NIH a potentially broad authority to support what it considers "responsible, scientifically worthy human stem cell research, including human embryonic stem cell research." Under this authority, future NIH guidelines can go beyond use of so-called "spare" embryos from fertility clinics, funding stem cell research that requires the use of *in vitro* fertilization or cloning techniques to create new human embryos solely for research purposes. Such a "create-to-destroy" policy, rejected by past Presidents of both major parties, would mark the ultimate step toward treating human life as a mere product or commodity. The NIH should refuse to travel down this road.
- It is increasingly clear that forcing taxpayers to subsidize such unethical research lacks practical justification. For clinical trials to treat disease, embryonic stem cells lag far behind the adult and cord blood stem cells that have benefited patients with dozens of conditions; for basic research and disease studies, embryonic stem cells are rapidly being replaced by "induced pluripotent stem cells" (iPS cells) produced by reprogramming ordinary adult cells (see ww.stemcellresearch.org). Even researchers and companies that have been in the forefront of embryonic stem cell research are increasingly using these cells instead, leading many to say that this debate is all but over. In short, science has moved on, and the NIH is lagging behind by continuing to insist on a scientific or medical need to fund morally objectionable research.

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