

LOBBYING YOUR MP ON THE HUMAN FERTILISATION AND EMBRYOLOGY BILL

A Briefing



THE SOCIETY FOR THE PROTECTION OF UNBORN CHILDREN

May 2008

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This briefing looks at some of the recent comments in relation to the Human Fertilisation and Embryology Bill by researchers, politicians, church leaders and others. The controversy over the Human Fertilisation and Embryology Bill in the media flared up with claims by medical research bodies that the creation of cloned “cybrid” embryos is essential to research, and condemnations by church leaders of the Bill as a “monstrous” attack on human lives and human dignity. Here we examine this debate.

Further briefings, news releases and campaign news are available on the internet at <http://www.spuc.org.uk/lobbying/hfe/> or on request from SPUC HQ.

CONTENTS

PAGE

Part I – The public controversy over the HFE Bill

1) Statements by church leaders	2
2) Are these church leaders justified in speaking out?	3
3) The free vote issue	3
4) The force of the bishops’ comments	4
5) Reaction to the bishops from the anti-embryo lobby	4
6) The role of scientists in the debate	5
7) The intervention by research charities	6

Part II – The key issues and the effects of the HFE Bill

8) Round up of key arguments deployed	8
9) Effects of the HFE Bill proposals	8

Part III – Abortion

10) Possible abortion amendments in the HFE Bill	10
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Part I – The public controversy over the HFE Bill

1) Statements by Church leaders

Forceful criticisms of the government's Human Fertilisation and Embryology Bill have been made by a number of prominent church leaders. These include:

- HE Cardinal Keith O'Brien, Archbishop of St Andrews and Edinburgh
- HE Cardinal Cormac Murphy-O'Connor, Archbishop of Westminster
- Rt Rev Dr Tom Wright, Bishop of Durham
- Rt Rev Jonathan Gledhill, Bishop of Lichfield
- Rt Rev Patrick O'Donoghue, Bishop of Lancaster

Cardinal O'Brien used his Easter Sunday sermon to attack the Bill in uncompromising terms. Bishop Wright and Bishop O'Donoghue also spoke out at their major Easter services against the abuses in the Bill.

Cardinal Cormac Murphy O'Connor urged Catholics in his diocese to register their concerns about the Bill with their MPs and press for amendments to limit embryo research.

Cardinal Murphy-O'Connor, in his Lenten pastoral message, said: "Christian witness can never just be personal but involves us too as citizens committed to serving the common good of society and to upholding the human dignity of all."

Calls for Christians to act against the Bill were prominent in a number of statements. Bishop O'Donoghue called on his people to "pray, protest and petition your Member of Parliament" against experiments on human embryos. Cardinal O'Brien framed his comments in a call to "be missionaries" with the message of upholding the right to life of the human embryo.

Key quotes

Cardinal O'Brien:

"... I am forced to condemn our government for not only permitting but encouraging such hideous practices [as the creation of animal-human embryos]. Our Prime Minister, Gordon Brown has given the Government's support to the Human Fertilisation and Embryology Bill. It is difficult to imagine a single piece of legislation which, more comprehensively, attacks the sanctity and dignity of human life than this particular Bill..."

"This Bill represents a monstrous attack on human rights, human dignity and human life. In some other European countries one could be jailed for doing what we intend to make legal. ... One might say that in our country we are about to have a public government endorsement of experiments of Frankenstein proportion – without many people really being aware of what is going on..."

"I know that many of you have already made your views known to your members of Parliament. I ask you to continue to do that."

"Being a Christian and acting as a Christian must be one and the same thing."¹

Rt Rev Jonathan Gledhill:

"We have a duty to protect the innocent and vulnerable, and the unborn are most definitely innocent and vulnerable."²

Bishop Patrick O'Donoghue of Lancaster:

"Supporters of this so called 'medical' experimentation, justify it by offering the hope that at some unknown date in the future the dissection and destruction of unborn human life will lead to cures for truly terrible diseases, such as cancers, Parkinson's disease, Alzheimer's and M.S..."

"Many in government, the media and research are so strident in promoting research on embryonic humans that they forget to mention that the greatest strides in discovering cures derive from adult stem cell research – not the defenceless unborn..."

"It is good to develop British industry and foster economic growth, but not through exploiting and destroying embryonic human persons. A society that seeks medical cures and economic development at the cost of human rights, human dignity and human life is 'monstrous'. It is not the defenceless, human-animal embryo, that is 'monstrous'; it is we ourselves who have become 'monsters' for allowing the exploitation of the unborn for our economic and medical gain."

2) Are these church leaders justified in speaking out?

Some of these statements are very strong, and extremely critical of political authorities.

As an independent organisation, SPUC supports the right of church leaders to speak out on ethical principles. Church leaders cannot uphold truth and justice and remain silent when these principles are abused by those in power.

The strength of the church leaders' statements is justified by the seriousness of the threats to human life and human dignity. Their statements are an appropriate response to a determined government that insists it will "get its business through". The government – like previous governments – disregards its duty to protect unborn subjects, and instead promotes and funds the use of embryos in research. The church leaders' comments reflect the appalling and inhumane approach of the government which is now seeking to extend these abuses even further.

Anglican Bishop David Urquhart of Birmingham said: "I fully back the views expressed by the Catholic Church leaders. The Church's role in this debate is to provide moral insight."³ Some commentators have criticised Church leaders for "interfering" in the political process, but those providing moral insight cannot afford to fall silent when politicians propose evil laws. Tensions of this kind have many historic precedents, but most people recognise and support the right and duty of religious leaders to criticise politicians who promote immoral policies. There is no doubt about the (negative) moral purpose of the HFE Bill or the impact it will have on human embryos.

It has been suggested that the Catholic bishops, in particular, are trying to control the votes of Catholic MPs. But if an action (whether a public or private one) is incompatible with the Christian faith, surely church leaders must be free to point this out. Those who call this "interference" or "controlling" fail to recognise that the moral law cannot be confined only to certain spheres of activity. Morality has a universal jurisdiction.

3) The free vote issue

The influence of church leaders over MPs stands in contrast to the power of political parties. MPs have a duty to serve their constituents, and the wider community – including the unborn. The government is currently saying that it will "whip" the Bill, insisting that Labour MPs should give the Bill overall support (when the Bill as a whole comes up for a vote) regardless of their views on the moral principles at stake. As a concession Gordon Brown has said that MPs may vote against certain particular elements of the Bill. Other parties have said that MPs may vote according to their consciences. The Liberal Democrats whipped in the Lords against retaining the requirement for an IVF child's need for a father to be taken into account.

By imposing a whip, the government is threatening censure and penalties if Labour MPs vote against the Bill. Such MPs may find themselves penalised by loss of preferment or a government post or other penalties.

SPUC asks MPs to vote against the Bill as a whole because it is profoundly wrong in its assumptions, and in its objectives. The Bill starts from the assumption that human embryos are to be valued for their usefulness to others, not their intrinsic dignity. The objectives of the Bill are to facilitate use of embryos in various ways. Even where restrictions are imposed, these are not to safeguard embryos, but, for example, to ensure public confidence in science. It may be possible for MPs to try to achieve 'damage limitation' through legitimate amendments – although all the efforts to introduce substantial restrictions were rejected in the Lords.

We must ask all MPs to oppose the Bill, even if that means that the government demotes them or their party expels them. For MPs to oppose the Bill regardless of the personal consequences demands courage and determination, but the alternatives – of allowing the Bill to go unopposed or even lending it support – amount to intolerable complicity in the abuse of human life.

While MPs may justly protest that they should not be penalised, we must support those MPs who, whatever the cost, are ready to vote against the Bill, and we must challenge those MPs who vote for the Bill, whether out of misplaced conviction or fear of losing political influence or for other reasons. Times columnist David Aaronovitch (one of the most vitriolic supporters of the Bill in the media) is right when he says that the debate over the Bill is in danger of being sidetracked by the issue of the Labour three-line whip. The free-vote issue is not a trivial one, as Aaronovitch suggests, but on its own it is not central to the evils and injustices of the Bill.

Imposing such censures would be a shameful way for the government/party to behave over this issue. It is possible, or perhaps likely, that Gordon Brown will extend the "concession" he has made to allow Labour MPs to vote against the Bill as a whole – in order to make the government appear reasonable and moderate in the face of protests. This may be more likely if he feels confident of some support among Conservative and Liberal Democrat MPs. Such a move must not become a distraction from the evils of the Bill itself.

4) The force of the bishops' comments

The forceful language and stirring calls to action from some of the bishops may have helped gained a wide audience via the media for their comments. Their arguments against the Bill have wide appeal because they are based on common principles that many non-Christians would endorse:

- we share our common human nature with the human embryo;
- embryos are alive, but the experiments endorsed by the Bill mean killing them;
- medical and scientific progress are to be welcomed, but must be pursued in just ways;
- good ends do not justify evil means to achieve them.

The bishops' opposition to embryo experiments was not anti-science. There was no condemnation of science as such: no obscurantism or suggestion that ethical means of medical research should not be pursued. The bishops criticised the approach of putting science beyond ethics, turning human beings into commodities and putting undue faith in the uncertain outcome of particular experiments.

The arguments for upholding the dignity of the human embryo are supported by the knowledge that science provides. This may explain why proponents of embryo research were so bitter in their response to the bishops – these arguments touched a nerve with them in the way that arguments based on religious or spiritual values may not have done.

The church leaders have accepted what the scientists say – that human embryos are human beings from the very start. Dr Stephen Minger, one of the scientists who is currently working to create hybrid embryos by inserting human DNA into enucleated cow's eggs, for example, has insisted that such embryos are human.⁴ SPUC's bioethics advisers suggest that this is correct.

The burden of the arguments that have been used by the bishops are humanitarian arguments based on facts derived from scientific investigation (like conception as the beginning of human development) and universal moral principles – justice and equality before the law, the 'do no harm' principle, and that "ends don't justify means".

5) Reaction to the Bishops from the anti-embryo lobby

Several supporters of the HFE Bill have accused church leaders of making false claims about the Bill, and saying it would lead to Frankenstein monsters.

- The Times published an article attacking both Anglican and Roman Catholic leaders headed "Wicked untruths from the Church." The article defended the Bill saying "no one was remotely suggesting or attempting to create a new form of life, as Baron Frankenstein was".⁵
- Prof Sir Martin Evans (a stem cell research pioneer): "The embryo has no reproductive future. All the ideas about monsters are hype."⁶
- Mr Jim Devine, a Labour MP who supports the Bill, said with reference to Cardinal O'Brien's comments: "This is not about creating Frankenstein monsters".⁷

These attacks are misleading and disingenuous. It is clear from reading what the church leaders actually said that they did not claim that embryos created by these techniques would be "monsters". Nor did they say that the aim of scientists was to bring them to birth.

Neither Cardinal O'Brien nor the other bishops who attacked the Bill accused anyone of attempting to bring human-animal creations to birth. The Cardinal for instance, spoke of experiments "of Frankenstein proportion" – not about creating a monster. The proposed new clause 3ZA(5), however, would allow embryos created in novel ways (involving combinations of genetic material) to be transferred to the womb. Although this is limited to a treating a particular group of conditions (mitochondrial diseases), it will establish a precedent that may later be extended.

Some commentators who regard human embryos as less than human beings have been scathing in their criticism. David Aaronovitch in his Times column accused church leaders of hypocrisy, sanctimoniousness and unscrupulousness. Lord Winston, the IVF pioneer and Labour peer, said in response to the comments in Cardinal O'Brien's sermon: "They are misleading and I'm afraid that when the church, for good motives, tells untruths, it brings discredit upon itself. ... It [the Catholic Church] will be destroying its probity with overblown statements of this kind."⁸

These comments led to press claims that Lord Winston was accusing Cardinal O'Brien of lying. The Scotsman said "Criticism from Catholics during the Easter weekend prompted leading Labour peer Lord Winston to accuse one cardinal of 'lying' yesterday."⁹

6) The role of scientists in the debate

It is far from the case that all scientists support the use of embryos in research, or have any confidence that embryonic stem cells will live up to the promises that some are making for them. Professor Neil Scolding, a neuroscientist at Bristol University, opposes embryo stem cell research. In evidence to the Parliamentary scrutiny committee that reviewed the Bill last year, he pointed out that embryo stem cells no longer have an intrinsic advantage over adult stem cells, since advanced techniques now enable adult stem cells to be converted into the same type of stem cells found in embryos.

Professor James Sherley of the Boston Research Institute, whose research has involved adult stem cells, argues that few scientists actively favour embryo stem cell research.

Several scientists have expressed scepticism about the claims that embryo stem cells have advantages over adult ones. Dr Michael Antoniou is a senior lecturer in the Division of Medical and Molecular Genetics at Guy's, King's & St Thomas' School of Medicine in London. He said: "My feeling is that what's out there in the adult stem cells field is not being fully appreciated. Far more is going on than is being acknowledged. I do not understand why it's being said that embryonic stem cells offer the only hope."¹⁰

Dr David A. Prentice, until recently Professor of Life Sciences, Indiana State University, and Adjunct Professor of Medical and Molecular Genetics, Indiana University School of Medicine, has written: "No one should promote the falsehood that embryonic stem cell cures are imminent, for this cruelly deceives patients and the public."¹¹

The scientists and researchers who do support embryo research have been much less specific than journalists and politicians about what they might achieve: especially about the possibility that embryo research will produce cures in the foreseeable future. They often make the point that they want hybrid embryos for "fundamental" research, not for extracting cells for treatment.

For example:

- Professor Naren Patel (Lord Patel of Dunkeld), the head of the UK National Stem Cell Network, and a leading supporter of the HFE Bill in the House of Lords, said: "But we have to be cautious. It may not deliver therapy for anything. We may find that stem therapy is quite a risky business. We had a lot of hype about gene therapy, and while we still use it in some cases, it did not deliver the great promise we thought it would because of the side-effects. But the promise just now is great and we must continue with the stem cell science."¹²
- "Sir Martin [Evans] agreed with the cardinal that the research is more concerned with fundamental understanding than actual treatments."¹³
- [Professor] John Burn, head of the Institute of Human Genetics at Newcastle University [where human-cow embryos have been produced] said: "Cells grown using animal eggs cannot be used to treat patients on safety grounds..."¹⁴

Despite the caution of their own statements, none of these scientists, as far as we are aware, has been stepped forward to correct the mistakes and inaccuracies by supporters of hybrid embryo research. While some scientists have been quick to criticise church leaders, they seem to remain silent when inaccurate claims are made by research charities, people affected by diseases, and politicians (most notably Gordon Brown).

For instance, the Daily Mail reported on Mrs Susie Hewer from East Sussex whose mother was affected by dementia, and who now raises funds for the Alzheimer's Research Trust. Mrs Hewer said: "I understand that it [embryo research] is really the only way that medicine is going to progress. I think it could have benefits for people like my mother and it would help others suffering in the same way."¹⁵

Another example is Kieran Breen of the Parkinson's Disease Society, who has been quoted saying: "If the bill or sections of the bill don't go through, that could put research and our understanding of conditions like Parkinson's back by a number of years."¹⁶ Mr Breen was said to be lobbying MPs to this effect.

It appears that some scientists may be ready to let vague misstatements like this go uncorrected, rather than pointing out that there are many other routes that researchers could pursue – not least the use of adult-derived stem cells, which do not necessarily involve ethical dilemmas.

The Prime Minister, Gordon Brown, said in a letter to MPs:

With adult stem cells already being used in treatments for conditions including leukaemia, severe combined immunodeficiency, and heart disease, scientists are already close to the breakthroughs that will allow embryonic stem cells to be used to treat a much wider range of conditions.

Mr Brown also said:

Stem cell research is important because it makes it possible for this generation to contemplate new and effective treatments and cures for diseases that have afflicted mankind from time immemorial – from leukaemia and Alzheimer’s to conditions affecting every family such as cancer and heart disease.

However, many treatments are already available that can alleviate or cure such diseases, as many who live with or have recovered from these diseases are aware. These have been developed over many years without relying on stem cell research. Adult stem cell research is very likely to continue to deliver treatments in future, so it is misleading to suggest that the development of new and effective treatments will be impossible without the HFE Bill.

Once again, scientists involved in embryo research have allowed these statements to go uncorrected. Many forms of cancer and heart disease, as well as many degenerative diseases, can be treated or cured using treatments developed without deliberately killing people.

The full text of Mr Brown’s letter, and a commentary on it, is appended below.

7) The intervention by research charities

The Association of Medical Research Charities (AMRC) represents a significant group of research charities, including many of the household names among medical charities. The AMRC and the Genetic Interest Group (GIG), another umbrella body whose member-groups are concerned with genetic disabilities, sent a joint letter to members of parliament on 19th March in support of the Bill.

The letter claimed that there was a “strong consensus” among the member-groups of the two bodies in favour of the Bill, although only 5 of a total of 245 member groups actually signed the letter. These were Cancer Research UK, the British Heart Foundation, Breakthrough Breast Cancer, the Muscular Dystrophy Campaign and the Parkinson’s Disease Society. (A list of the organisations involved is available from SPUC.)

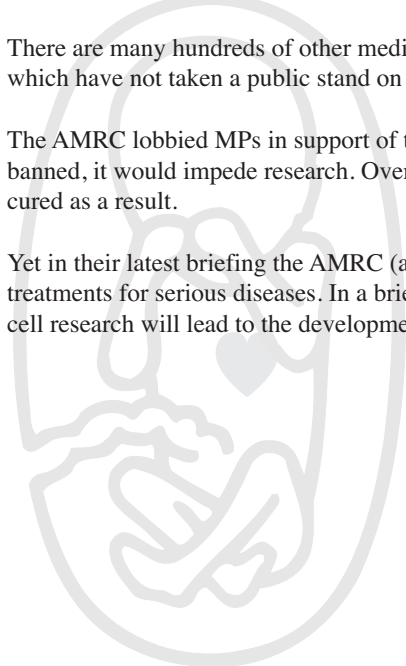
Although the letter suggests solid support for the Bill among charities funding medical research, the detail deserves examination. The average AMRC member organisation spends a little over £1 million per year on research. One, the Wellcome Trust, spends £650 million. Only about 21 AMRC members fund stem cell research of any kind (adult, embryo or cord blood), but the Wellcome Trust has devoted £40m to stem cell research in the past 5 years.

This raises several questions. For example, if all the members of the AMRC believe that embryo research is critical to medical research, why do fewer than 20% of them have no involvement in it? Are they all pursuing research which is in some way dependent on embryo stem cell work? Has the £40m invested in stem cell research by the Wellcome Trust in recent years produced any treatments or cures? Have these charities all been fully informed about the ethical and practical difficulties of using embryo stem cells, and the alternatives? Why are these smaller charities putting their reputations at risk by allowing their names to be attached to speculation about cures from human-animal hybrid embryos and cloned embryos?

There are many hundreds of other medical research charities and organisations concerned for people with inherited conditions which have not taken a public stand on the Bill. No doubt there are differing views among them.

The AMRC lobbied MPs in support of the original embryo legislation in 1990, arguing that if embryo experiments were banned, it would impede research. Over two million embryos have been killed since. No lives have been saved or diseases cured as a result.

Yet in their latest briefing the AMRC (and GIG) claim that the public support embryo research – if it’s aimed at finding treatments for serious diseases. In a briefing with the letter, AMRC and GIG say: “In the longer term it is believed that stem cell research will lead to the development of many new treatments for a wide range of diseases”.



Part II – The key issues and the effects of the HFE Bill

8) Round up of key arguments deployed

The humanity of the early embryo

From fertilisation/conception, the embryo created by human sperm and egg is:

- complete – with all the genetic information needed to define his or her identity;
- unique – distinct from any other person;
- specifically human – cannot be attributed to any other species; and
- alive – with the capacity to develop and mature in his or her natural environment.

As such, embryos are bearers of intrinsic human dignity and human rights – especially the right to life.

Cybrid embryos

Both those involved in the creation of these embryos, and those opposed to such experiments, believe that embryos created by transferring a complete human DNA profile to an animal egg with the nucleus removed, should be regarded as human embryos.

Ethical alternatives to embryo stem cell research are available

Not only are alternatives available, using stem cells derived from adults or from the umbilical cord of newborn babies retrieved after birth, but this work has already produced over 70 kinds of therapy for a wide variety of diseases affecting various organs and tissues.

Embryo stem cells are not “superior” to adult stem cells

It is true that all the different tissues of the body derive from cells in the early embryo. This means they have great capacity to diversify, but it also means they can be difficult to control. They can have a tendency to form tumours and to develop into the “wrong” type of tissue. Adult stem cells have proven safer to use.

Embryo-type stem cells can be derived from adult tissue

It has recently been shown that embryo-type stem cells can be derived by modifying adult cells. There may be ethical and practical obstacles to producing and using embryo-type stem cells from adult tissue. However, the availability of alternative sources of such cells shows that the claims about the “unique” qualities of embryo stem cells are misleading.

Science must act within ethics

The hope of beneficial treatments does not justify disregarding ethics. The Medical Declaration of Helsinki says: “In medical research on human subjects, considerations related to the well-being of the human subject should take precedence over the interests of science and society.”¹⁷ This excludes the use of embryos in destructive experiments, such as extracting their stem cells.

There are no historical precedents

There are no instances of any major medical advance achieved by abandoning basic ethical principles such as safeguarding the right to life.

Confidence in science

Confidence in science will be undermined by false or exaggerated claims about the benefits of embryos research.

False compassion of “help for disabled”

The only “advances” in treating genetic conditions developed by use of human embryos entail identifying embryos with particular attributes and discarding (destroying) those affected.

Exploitation of people with disabilities/illnesses

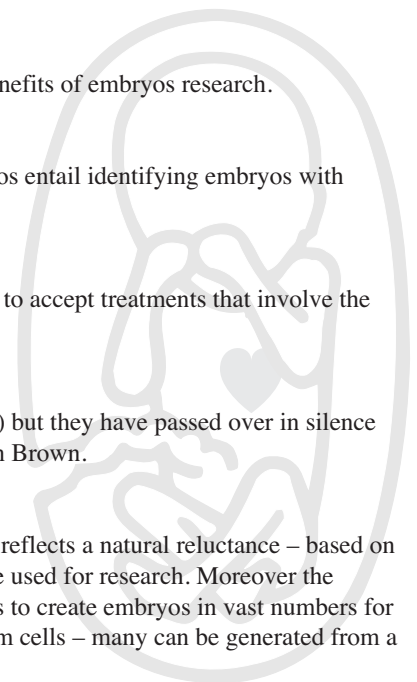
It is wrong to assume that people with disabilities or serious illnesses will be prepared to accept treatments that involve the creation and destruction of embryonic human beings.

Some scientists supporting embryo research have shown partiality

They have distorted and criticised statements by opponents (such as Cardinal O’Brien) but they have passed over in silence the misleading and incorrect statements of embryo research supporters such as Gordon Brown.

Shortage of human eggs

It is said that there is a “shortage” of human eggs to create embryos for research. This reflects a natural reluctance – based on both ethical or personal objections – of women to allow their embryonic children to be used for research. Moreover the “shortage” is entirely relative – it is a shortage relative to the demand from researchers to create embryos in vast numbers for experimentation and destruction. (There is no shortage, incidentally, of embryonic stem cells – many can be generated from a small number of embryos – see commentary on Gordon Brown letter, below.)



9) Effects of the HFE Bill proposals

The Human Fertilisation and Embryology Bill, 2008 completed its House of Lords stages on 4 February. It is now going to the House of Commons, where MPs will debate and vote on it.

The main effect of the Bill is to extend the power of the Human Fertilisation and Embryology Authority (HFEA) to authorise procedures that will harm or kill embryos created in the laboratory. It proposes to sanction new abuses of human embryos. The Bill extends the ways in which embryos can be artificially created and manipulated – including hybrid (animal-human) embryos, genetic manipulation, etc. The Bill is designed to make it easier to change the law in future to extend objectionable procedures like cloning.

Principle proposals in the Bill

The question of how we should treat human embryos has become a major public policy issue since the advent of in-vitro fertilisation (IVF), by which embryos are produced in the laboratory. As the status of all unborn children has been undermined by our abortion laws, embryos created by IVF have been denied respect and abused and destroyed in their millions. Support for the HFE Bill, which further undermines the status of the embryo, breaches international conventions upholding the right to life of all members of the human family.

Extending the IVF procedure

Many people have serious reservations about IVF as a procedure. SPUC has opposed IVF as a technique since the 1970s because it entails abuse of human embryos, reducing them to the status of products or commodities, and exploits infertile couples. Other ways of helping infertile couples to conceive can be more successful and can avoid the serious ethical problems with IVF.

The HFE Bill will extend the general scope of in vitro fertilisation (IVF), regarding it not only as a treatment for infertile couples, but for others who demand their purported 'right' to have a child. (IVF is already allowed, of course, for people who want to fit childbearing around other lifestyle choices – career or relationships: the changes in the Bill mean this could become much more common.)

Extending manipulation of embryos

The Bill also lays much more stress on the manipulation of embryos – testing them for genetic conditions, generating embryos in various ways, making hybrid embryos, etc. All these things are restricted in various ways, but it is the clearly stated intention of the government to promote embryo research. They want to make Britain a world leader in this field, and this is what the Bill is designed to do. It does nothing to safeguard the intrinsic moral status of the human embryo.

Widening the grounds for experimentation on embryos

The grounds for research on human embryos were widened in 2001 and these wider grounds are incorporated in the HFE Bill. The reason for this widening was to allow stem cell research on embryos. Like all other embryos used in research projects, they must be destroyed if they are not killed in the process of extracting these cells. Embryo stem cell research still remains far behind adult stem cell research in terms of providing treatments (no treatments are available using embryonic cells; seventy or more have been developed using adult stem cells, see, for example, www.stemcellresearch.org/facts/CheckTheScore.pdf).

The Bill also introduces a wholly new "research" purpose for which embryos may be created is introduced, namely the training of embryologists. It will be legal to create IVF babies for the technicians to practise on.

Embryos may be used in experiments even if alternative ways of doing the research are possible. In the House of Lords, an amendment was proposed to try to ensure that human embryos were not used in experiments when there were alternative ways of getting the same result. Although ministers had supported this approach in the past, the government opposed this change, and the amendment was rejected.

IVF and lack of respect for life

The way in which IVF human embryos are made and treated is disrespectful to their status as human beings and demeans both the embryos and their parents. It jeopardises the lives of the embryos produced. The vast majority of IVF embryos die either inadvertently or by deliberate destruction before being transferred to the womb or having a chance to implant. IVF 'commodifies' early human life, encouraging such practices as commercial exchange of embryonic human beings and surrogacy, as well as the idea of testing embryos to see if they have any adverse genetic conditions. Those found to be affected are destroyed.

"Saviour siblings"

In the Bill, this notion is further extended by the promotion of the 'saviour sibling' procedure, where a couple who have a disabled child undergo IVF in the hope of producing a baby who can be used as a tissue donor to treat the older sibling. Whatever the motivation of parents, this usually entails discarding many embryos. The 'saviour sibling' embryos may either carry the same genetic problem as their sibling, or they may not be a good tissue match. In either case they are not required. Hence most 'saviour sibling' embryos are discarded or destroyed.

Another concern is that the export of embryos is not prohibited. Because the law regards embryos as a commodity, trade laws mean that the government cannot simply ban international trade in them. Once outside UK jurisdiction, the restrictions that our law imposes cannot be enforced.

Embryos for training scientists

The Bill also allows embryos to be used for training purposes, thereby further demeaning human beings by creating a class of 'practice embryos'. This is yet another negative consequence of making it acceptable to manufacture human beings in the laboratory rather than in the context of the relationship between parents.

Decline in respect for life

Although this relates specifically to human embryos, these practices, because they require setting aside the right to life, threaten to undermine respect for all human life. The HFE Bill can be seen as a graphic example of society moving rapidly down a 'slippery slope', going beyond IVF as an infertility treatment – the original pretext for justifying the process in the 1984 Warnock Report, on which the existing law is based. Instead of seeing IVF as a last resort, it now becomes a norm, and even a 'right'. Embryos lose any special status, and become just things. The HFE Bill focuses on reproductive technology in which human reproduction is put at the service of those who demand it. At the same time the stress on the welfare of children born from IVF is weakened, with the removal of the reference to the child's need for a father.

Discrimination against disabled embryos

IVF also becomes the route for eliminating embryos thought to have a disabling condition, for creating embryos to provide treatment for others, and for generating embryos for research purposes and commercial gain. Thus IVF not only continues to result in huge loss of embryonic human lives, but in this Bill embryos are made more freely available for experimentation and other abuses.

Cloned embryos

The Bill defines human embryo to include those early human beings produced by processes other than fertilisation. The extension of the definition means that the embryology authority is more clearly empowered to license the creation and use of such embryos (without regard to their welfare), and to mandate their destruction when it feels appropriate.

Cloned embryos cannot be transferred to the womb at present, and the Bill does not change this. But it alters the way the law is framed to make this easier in future. Cloning denies the new embryo the unique genetic identity enjoyed by human beings conceived naturally.

In 2001, the transfer of cloned embryos to the womb was banned by statute, although creating such embryos for research has been permitted. The 2001 Act is to be repealed by the HFE Bill, on the grounds that the Bill introduces a new category of embryos, "permitted embryos", and only these may be transferred to the womb. In this way the current restrictions on cloning will be weakened, especially as the categories of "permitted embryos" within the Bill may later be changed by Regulations.

Widening the grounds for testing of human embryos

Although the HFE Bill steers away from allowing sex selection for social reasons, it permits it when a sex-linked hereditary condition is suspected. Embryo testing to eliminate those with disabling conditions is readily countenanced in the Bill, and it will be unlawful to discriminate in favour of embryos with an impairment (as some deaf parents have sought to do in the US). This provision could make IVF doctors reluctant to transfer any embryo with a known impairment to the womb – even if all the embryos produced for a given couple have an inherited condition. A novelty in the Bill is the introduction of testing to resolve mistakes in laboratories – where the wrong sperm and eggs have been mixed, records lost, or frozen embryos mislabelled, for instance. It will be lawful to test embryos to establish who (or what) their parents are.

Creation of interspecies embryos for experiments

One of the most controversial aspects of the HFE Bill is the provision for creation of inter-species embryos (hybrids, 'cybrids', chimeras, genetically altered embryos. These are now referred to in the Bill as "human admixed embryos"). This is not an entirely new suggestion, as the existing law permits fertilising animal eggs with human sperm as a way of testing sperm. It has been argued that as the principle of cross-species fertilisation had been accepted, there was no reason against allowing the creation, storage and use of such embryos for research. This is another example of how each step in these activities can be used later to extend them even further. We must ask MPs to oppose these ideas with force and tenacity.

Status of interspecies embryos

Although we cannot be certain of the nature of such embryos, those produced with a preponderance of human DNA would in all probability, according to experts, be human beings – having human characteristics and capacities. By using animal eggs, such embryos could be generated in much greater numbers than if human eggs were used, leading to much greater loss of life. The HFE Bill requires that all embryos used in research must be killed. Of those embryos with a smaller proportion of human material, greater uncertainty arises as to the nature of the embryo – and therefore uncertainty as to whether such an embryo is a human being with due rights. How can it be right to generate such embryos when there is no clear answer to the question "how should we treat them"?

Blurring the boundaries

Others argue that deliberate blurring of the boundaries between humans and other species is wrong.

If the aim with some such research is to extract cells to treat sick or disabled children or adults, there may be a danger to patients who may receive some animal genes. Some see the mixing of human and animal gametes (or the transfer of cells from an animal embryo to a human or vice versa) as an affront to human dignity. With the permission for creation and storage of inter-species embryos, the parents of a mislabelled embryo might include a sheep or a rabbit.

Using people's cells to create embryos without consent

The requirement of the existing embryology law for consent before gametes are taken from a person is weakened in the Bill. It will become permissible in certain circumstances for the gametes of children and those who are unconscious to be extracted without their consent having been given. Such proposals weaken the principle of consent, which was given strong emphasis in the original embryo legislation in 1990.

The government has also said (during the debate in the House of Lords) that the Bill will permit cells which have been taken from people in the past to be used to create cloned embryos. This will mean that people who were never asked about such procedures could have embryos created using their DNA. This is a serious abuse of the individual's genetic identity. And although the Bill currently requires explicit consent when tissue is collected in future if it is used to create cloned embryos, a precedent is being set to allow people to be cloned without their consent. Under existing rules, those cloned embryos must be destroyed by 14 days, but that may be changed in future of course.

Bioethics Commission

In the House of Lords, an amendment was proposed to the Bill, supported by some peers with pro-life sympathies, to establish a national Bioethics Commission. It was not successful, but it might be reintroduced in the Commons.

Opinions vary as to whether this would make the situation over issues like IVF and genetic manipulation better or worse. However, the priority with the current Bill, with so many serious new threats to the human embryo, must be to urge MPs to fight as hard as possible against the Bill as a whole and the evils it contains. Opposition to the Bill will not be effective if MPs are distracted by debates over the pros and cons of a new bioethics body.

Part III – Abortion

10) Possible abortion amendments in the HFE Bill

A number of MPs want to use the HFE Bill to change the law on abortion. Some parliamentarians want restrictions, such as lowering the upper time limit for some abortions. Others want to extend abortion in various ways, such as enshrining abortion on demand in early pregnancy, or extending the 1967 Abortion Act to Northern Ireland.

Even if a nominal adjustment to the current 24 week threshold (which applies only to one clause in the Abortion Act) were to be agreed by Parliament, this would almost certainly be accompanied by a widening of the grounds for abortion before, and possibly after, that new threshold.

The overall effect will be a widening of the abortion rules which could lead to an increase in the number of abortions. There is also a grave risk that the Act might also be extended to Northern Ireland, where it does not currently apply.

SPUC does not take the view that the only way forward is to repeal the whole Abortion Act in one go. Any change to the abortion law that we promote must be ethically sound (not entailing for example a trade-off of some lives in the hope of saving others) and it must be politically prudent – to minimise the danger of the kind of negative outcome that resulted from the well-intentioned efforts of 1990.

The abortion law can get worse – much worse

There is no statutory 'right' to abortion under British law. Abortion is a criminal offence unless the conditions of the Abortion Act which permit exceptions are met. The 'letter' of the Abortion Act only allows abortion for health reasons, albeit in general terms which are routinely flouted.

Some people wrongly assume that abortion law and practice in Britain could not be any worse, i.e. could not get any more pro-abortion than at present, or provoke more abortions than we have now.

The pro-abortion lobby firmly disagrees with this assessment and recently has launched a campaign to decriminalise abortion in early pregnancy and otherwise extend abortion provision in law and practice by:

- allowing abortion explicitly on demand in the first 3 months of pregnancy;
- abolishing the safeguard of two doctors' signatures for abortions;
- allowing abortion to be performed by non-doctors – specifically targeting of nurses to become abortionists;
- providing for chemical abortion in family planning clinics and to allowing abortion at home rather than in hospital;
- undermining the conscience clause for doctors and nurses, and trying to compel all pregnancy counsellors to provide information about where to get an abortion;
- extending the 1967 Abortion Act to Northern Ireland, where it does not apply at present.

What effect would these amendments have?

Removing restrictions on early abortions will lead to more abortion and more abortion-related damage to women. There are higher abortion rates in France and the United States, where the laws already allow abortion on demand.

Easier access to abortion accentuates psychological pressure on women to have abortions, leaving them even more vulnerable to the isolation and pressure often associated with abortion decisions. Pregnant women are often put under intense pressure and abortion can seem to be the only option. Experienced pregnancy counsellors report that many women and girls are making decisions to have abortions with little or no information about the development of their baby and the physical and psychological risks of abortion to themselves.

Why is Northern Ireland of particular concern?

Nearly all developed countries have legalised abortion, but in Northern Ireland, part of the UK, abortion is still largely prohibited. This makes it a particular target for the pro-abortion lobby.

In May 2007 Northern Ireland's political parties overcame decades of hostility to establish a government which they hoped would earn the respect of all sections of the community. Problems remain but devolution has begun to create a new political environment.

On 22 October 2007 members of the Northern Ireland Assembly from all four major parties gave overwhelming support to a motion rejecting "any attempt to make abortion more widely available in Northern Ireland."

Although Downing Street has said that the Northern Ireland Assembly should decide abortion law, until the administration of justice is devolved Parliament could impose the Abortion Act on the Province. Jeffrey Donaldson MP, a junior minister in the Northern Ireland Executive has, however, warned that imposing the Abortion Act would cause a constitutional crisis and even threaten the future of devolution.

It is vital for the credibility of the devolved institutions that Parliament does not overrule the Assembly on an issue which has united over 90 per cent of its elected members.

Isn't the requirement for a second doctor to authorise abortion routinely abused and thus ineffective?

Although this requirement is abused and abortion doctors sign certificates authorising abortions on women they have never met, the removal of this requirement for two signatures would be a step in the wrong direction.

There are a number of ways in which the two doctors' signatures requirement can help save lives – such as the effect of stressing the duty of the doctor to assess the medical need for an abortion.

What is Gordon Brown's government likely to do?

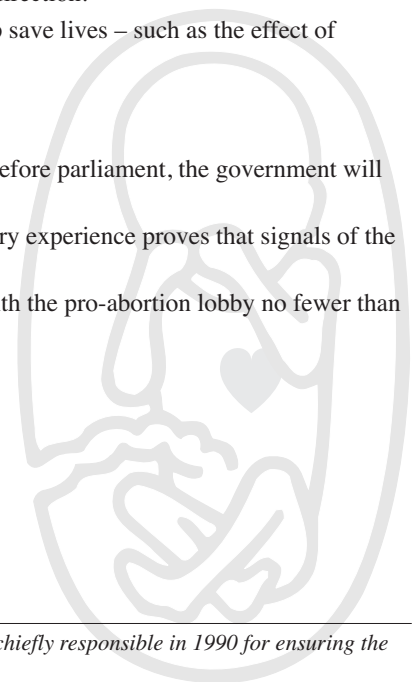
We have no doubt that, if abortion is introduced into the debate when the Bill comes before parliament, the government will give at least tacit support to amendments to extend abortion provision.

Whether or not the government grants a free vote to backbench MPs, past parliamentary experience proves that signals of the government's opinion heavily influences the way backbench MPs vote*.

Mr Brown has voted consistently in favour of abortion. In 1988 and 1990, he voted with the pro-abortion lobby no fewer than 16 times in total:

- three times for abortion up to birth, including for disabled babies;
- twice for abortion on demand in early pregnancy;
- once to extend the Abortion Act to Northern Ireland;
- once for selective foeticide in multiple pregnancies;
- once to facilitate chemical abortion using the drug RU486;
- once to suppress information about abortions on disabled babies; and
- seven times for other pro-abortion positions.

**It was pro-abortion government ministers (Virginia Bottomley and Kenneth Clarke) who were chiefly responsible in 1990 for ensuring the success of pro-abortion amendments and the defeat of anti-abortion amendments.*



Gordon Brown's appointment of ministers to life-related portfolios strongly suggests that any reform of the abortion law is likely to lead to more, rather than fewer, abortions:

- Alan Johnson MP, the new health secretary: soon after becoming a member of parliament in 1997, he signed two parliamentary motions, one defending an alleged "woman's right to choose" abortion and another condemning "restrictive abortion laws".
- Dawn Primarolo (minister of state for health): has voted for abortion on demand and for the Abortion Act to be extended to Northern Ireland. It is Mrs Primarolo who has immediate ministerial responsibility on the issue of abortion.
- Ben Bradshaw (minister of state for health): supports the Abortion Act 1967.
- Ann Keen (parliamentary under-secretary of state for health): believes in a woman's right to choose abortion.

Other ministers in relevant portfolios

- Jim Knight (minister of state for children, families and schools): signed in 2002 a parliamentary motion calling for "universal access to comprehensive reproductive health services", a phrase normally understood to include abortion on demand.
- Beverley Hughes (appointed a minister of state for children, families and schools): signed parliamentary motions in 1997 calling for abortion on demand and for the Abortion Act 1967 to be extended to Northern Ireland.
- Gareth Thomas (parliamentary under-secretary of state for international development): is one of parliament's leading promoters of abortion on demand and population control.
- Harriet Harman (minister for women): is a veteran member of the pro-abortion lobby in parliament.
- Jacqui Smith (home secretary): was backed in her election to parliament by the pro-abortion Emily's List.

What is parliamentary opinion like at this time?

Within the last two years, two bills motivated by pro-life concerns were proposed by backbench opposition MPs (Angela Watkinson and Ann Winterton). Both bills were extremely modest in what they were trying to achieve; neither of them would have banned or restricted abortions performed on particular grounds or at particular times of pregnancy. Yet both bills were defeated by large margins, before they were even allowed to be tabled. A third bill was promoted by another Conservative, Nadine Dorries, who is not against abortion, but wishes to reduce the 24-week limit which applies to some abortions. It was also defeated.

Even if there is a genuine free vote we know already that, sadly, the pro-abortionists in the House of Commons will heavily outnumber pro-life MPs.

What is public opinion like at this time?

Public opinion on abortion shows marked contradictions. In a mid-2006 survey of women, most said that there are too many abortions, and a very large majority would rather see more resources devoted to promoting alternatives for expectant mothers than widening access to abortion. On the other hand, a 65% majority believed that "A woman's right to choose always outweighs the rights of the unborn."

What's opinion like among the medical profession?

In June 2007, the British Medical Association (BMA) called for the law to be changed to allow abortion on demand in early pregnancy. In July 2005, the Royal College of Nursing said that "the discussion on abortion should concentrate on ways to increase access to services in early pregnancy."

Similar evidence was given to the House of Commons Select Committee on Science and Technology which reported on abortion in October 2007. The Committee's recommendations were strongly pro-abortion. These and similar statements from medical witnesses will be used in parliament by pro-abortionists.

But hasn't even David Steel, who authored the 1967 Abortion Act, changed his mind in a pro-life direction?

No. Lord Steel has written: "Incidentally, I was misreported in one Sunday paper as advocating a lower limit for 'social' abortions. There should be no such distinction - proper medical care takes all social considerations into account." (The Guardian 6 July 2004). In March 2007, he endorsed a campaign for the law to be changed to allow abortion on demand in early pregnancy.

Doesn't this Bill give the chance to change the law in a pro-life direction also?

The strong pro-abortion majority in parliament and within the government means that any attempt to change the abortion law in a pro-life direction will fail. Instigating votes 'on the floor of the House' will encourage pro-abortion parliamentarians and even the government to take the opportunity to change the abortion law in a pro-abortion direction.

But won't the pro-life lobby win with a good campaign and the truth on its side?

Both public and parliamentary opinion remains pro-abortion. Even if public opinion was pro-life, public opinion often fails to transfer into parliamentary opinion, still less into votes on the floor of the House.

The parliamentary fight will not be won and lost on the basis of how hard we lobby, and how well parliamentarians argue the case on the floor of the House. It will depend on the arithmetic. Both sides can do the sums.

Wasn't the pro-life lobby successful in 1990, when the upper time limit was reduced from 28 to 24 weeks?

No. People mistakenly claim that the time limit was reduced from 28 weeks to 24 weeks by the Human Fertilisation and Embryology Act 1990.

Because of amendments to the law made by the 1990 Act, the previous limit, which was based on the capability of the baby to be born alive – not a fixed number of weeks (28) – was abolished and a 24 week time limit was introduced but only for certain cases. In other cases (including where the abortion is carried out on grounds of risk of disability) abortions can be and are now carried out right up to the time of birth.

Every child who had reached the stage of development of being “capable of being born alive” was protected by the pre-1990 law. Since 1990 that protection has been removed. So the effect of the 1990 Act was to increase the time limit for abortion in most instances and in many cases right up birth.

It was pro-lifers who pressed for the 1990 Act to contain provisions relating to abortion, in the hope of being able to insert some restrictions, particularly early time limits. Sadly this tactic backfired, resulting in a less, not more, restrictive abortion law.

There has been no reduction in the number of abortions attributable to the 1990 changes. In fact the overall number has risen.

What should be done?

Pro-life parliamentarians should not attempt to open up the abortion law on the floor of Parliament whilst a government-backed pro-abortion majority holds sway, lest there be a repeat of the 1990 debacle. There are many other ways in which abortion can be challenged both within Parliament and in other arenas.

Appendix

Gordon Brown's embryology letter to MPs

We give the text of Mr Brown's letter below, with our notes in square brackets. A commentary on the letter follows.

Text of Gordon Brown's letter of 26th March 2008:

I wanted to write to you to set out my reasons for supporting all the measures in the Human Fertilisation and Embryology Bill, and to clarify how we propose to handle it in Parliament.

The Human Fertilisation and Embryology Bill will update the legal framework which governs assisted reproduction and embryo research, bringing this into line with recent scientific developments and equalities legislation.

It will reform the regulatory framework in which embryo research is conducted, ensure that all human embryos outside the body are subject to the best regulation, create a ban on sex selection of offspring for non-medical reasons, and update the rules around entitlements to IVF.

Whilst many of these measures will not be controversial, the legislation will also provide the legal framework to support the continued development of stem cell research and clearly there are differing views on all sides of the house on this question.

[In SPUC's view, virtually all the measures in the Bill are controversial.]

Stem cell research is important because it makes it possible for this generation to contemplate new and effective treatments and cures for diseases that have afflicted mankind from time immemorial – from leukaemia and Alzheimer's to conditions affecting every family such as cancer and heart disease.

[This suggests that until now we have not been able even to contemplate treatments and cures for cancer, heart disease, leukaemia or Alzheimer's. Many who live with or have recovered from these diseases are aware that this is not so.]

It was only in 1998 that James Thomson, a scientist at the University of Wisconsin, successfully removed stem cells from spare embryos at fertility clinics in Madison. His discovery established the world's first human embryonic stem cell line and launched the science of stem cell research into the scientific mainstream.

[Embryonic stem cells are not the only stem cells. Bone Marrow transplant was developed decades ago – this relies on stem cells. The use of adult stem cells has proved far more successful than embryo stem cells.]

Since then, work, particularly in the US and the UK, has demonstrated that embryonic stem cells have the potential to be used by medical science to generate replacement cells for a broad array of tissues and organs such as the heart, liver, pancreas and the nervous system.

The UK is at the forefront of this research and responsible for much of the worldwide progress. With adult stem cells already being used in treatments for conditions including leukaemia, severe combined immunodeficiency, and heart disease, scientists are already close to the breakthroughs that will allow embryonic stem cells to be used to treat a much wider range of conditions.

[This assumes that such breakthroughs will be possible.]

Medical researchers now believe that stem cell therapy has the potential to change dramatically the treatment of many other human afflictions: including not only Parkinson's disease and Alzheimer's but perhaps also cancer, spinal cord injuries and muscle damage.

Stem cell research has always been controversial and I appreciate that there have always been those who have raised objections on religious or moral grounds as well as those of religious faith who have supported this type of work. I take these concerns seriously and respect the views of all those with religious convictions which they see as precluding this type of research.

I also see the profound opportunity in lives and quality of life which will be saved if we are able to answer objections and pursue the treatments and cures which will be available to us through this strand of medicine.

[Again, Mr Brown refers to hoped-for future developments as if they were certain.]

That is why we have – patiently and with full regard for religious concerns – sought to introduce progressively clear laws which permit the use of stem cells but which do so within a clear, managed legal framework, subject to the strictest supervision.

It is this approach which has ensured that Britain’s support for research into stem cells has helped advance this science. It is not only in our own interest, but also the global interest that Britain should continue to play this role.

One major problem which stem cell researchers around the world now face is that embryonic stem cells are in short supply, and this is now limiting the pace of progress towards future cures and treatments which will save many lives.

That is why it is argued that the safest way to support our science is to make use of animal eggs from which animal genetic material has been extracted, and which can then be made compatible for research on human diseases by the inclusion of a human cell nucleus.

“Human admixed embryos”, as they are known, are made by inserting human genetic material in the nucleus of an animal egg cell. If the embryo survives for a few days, stem cells may be collected and grown in culture.

[This ignores the fact that such embryos are understood to be human embryos.]

These cells contain overwhelmingly human DNA. Permitting the use of these admixed embryos – which, it should again be emphasised, contain only minuscule amounts of animal DNA – will bring to an end the critical limiting factor in stem cell research: the limited availability of human eggs from which to create embryos.

[The “shortage” of human eggs is only one hurdle. There are many others, such as the difficulty of manipulating embryonic stem cells or their tendency to form tumours.]

The 1990 act is silent on the rules surrounding the use of these admixed embryos. Research on genetic conditions such as Alzheimer’s has progressed on the basis of this approach in London and Newcastle with the support of the regulator, the HFEA, but both teams face uncertainty because of the lack of clarity in the rules.

The purpose of this 2008 Bill is to provide this clarity and a clear framework which supports stem cell research but provides boundaries. Admixed embryos will be allowed only where they are used for clear scientific purposes and it will be illegal to keep them beyond 14 days. It will also be illegal to implant them into women or into any animals.

And so, in the next couple of months, legislation to create this framework and thus allow further progress in vital research will come before the House of Commons.

The legislation as a whole will be Government business at the second and third readings. However, respect for the religious beliefs of those who have fundamental concerns means we will have a free vote on the three new ethical issues on which the House has not previously taken a view: on whether admixed embryos are permitted within strict constraints; on the question of permitting ‘saviour siblings’ (who could, for example, donate blood) in the context of rare genetic conditions; and on changing the IVF requirements to require the need for supportive parenting to be taken into account.

I would like to take this opportunity to tell colleagues now that I will be voting in favour of these measures, including that to permit the use of admixed embryos which are, in my view, vital to the progression of stem cell research.

However, I fully respect the views of those who have specific religious objections.

I am also reassured that leading doctors and scientists do not believe they should operate in the absence of clear rules, but they believe that theirs is an inherently moral endeavour, that they can save and improve the lives of thousands and over time millions of people, and that they can combine this work with a deep commitment to the highest ethical standards and a sincere respect for religious beliefs.

Commentary

The letter by the Prime Minister Gordon Brown to fellow MPs about the new Human Fertilisation and Embryology Bill is an attempt to gain support for a Bill that contains highly contentious practices. This is because the Bill raises profound questions about the treatment of human life. MPs, pressured by time and unlikely to trawl the Bill for the details, will gain the impression by reading the letter, that this Bill will really just help science advance in an ethically sound and safely regulated environment, provide some needed amendments to IVF requirements, and ban sex selection for ‘family balancing’ (which in any case, is rare).

Instead of this sugar-coated message, the reality is that this Bill is replete with permission for practices that are deeply ethically troublesome, scientifically questionable and for which there are good alternatives.

The reference to religious sensitivities on no less than five separate occasions misses the point and only serves to promote the flawed notion of a battle between science and religion. There is no such battle. These issues are really about ethics, not religion. The recent criticisms of the Bill voiced by church leaders have focussed almost exclusively on the ethical objections, not the theological ones. How they are discussed is also about transparency.

Commentary – continued

The Bill will permit a range of new practices involving human embryos, and more controversially, hybrid embryos, now euphemistically called “human admixed embryos”. This new term – introduced during the House of Lords stages – replaces the more precise terms “interspecies” or “hybrid” or “chimera” embryos, which were the terms used throughout the public consultation phase. The Prime Minister’s letter refers to only one of five separate forms of human/animal mixed embryos permitted by the Bill. That one, referred to in the letter as containing “miniscule amounts of animal DNA”, is in fact about creating cloned embryos using animal eggs instead of human ones. Besides the scientific hubris in assuming that anyone really knows what has been created here, where are the interspecies experiments not using human DNA that prove this will yield scientifically useful information?

The other four categories of human/animal admixed embryo are equally if not more ethically problematic. They permit the creation of full human/animal hybrids by mixing human sperm with animal eggs or vice versa; human embryos genetically engineered by the introduction of animal genes; mixing of human and animal whole cells in an embryo (creating a chimera); and anything specified by regulations. This last category exemplifies the desires of some scientists for minimal restriction in this field.

What is particularly disturbing about all this is that the Department of Health’s own consultation process concluded, “respondents were generally less convinced of the need to make changes to the scope of permissible embryo research”, and the “overall tenor of responses to the consultation was opposed to the creation of hybrids and chimeras”. Yet the government is pushing on regardless. So much for consultation.

The Prime Minister’s letter also represented an opportunity to clarify the meaning and significance of the different types of stem cell research. Unfortunately it failed to do so, and instead blurred the distinctions in an attempt to gain support for its new proposals. For example, the letter used the numerous successes with adult stem cells to then claim that “scientists are already close to the breakthroughs that will allow embryonic stem cells to be used to treat a much wider range of conditions”. This is misleading. Not only have embryonic stem cells never been used to treat any conditions, but scientists are still arguably a long way from any treatment using these cells.

Moreover, it is simply untrue to claim that embryonic stem cells are in short supply, and any stem cell scientist will testify that new lines of embryonic stem cells are being obtained from IVF embryos all over the world. Indeed, the ample numbers of embryonic stem cells, coupled with legislative permission to conduct research on them means that researchers can research away to their heart’s content. Neither is “the limited availability of human eggs” a “critical limiting factor in stem cell research”. Egg supply is only a limiting factor in the creation of cloned human embryos, not stem cell research. And with the recent discovery that genetically compatible embryonic-like stem cells can be created without cloning embryos, cloning may be on the way to becoming obsolete science.

The Bill not only makes many changes regarding embryos in research, but it also makes significant changes to the treatment of embryos in IVF, as well as to rules governing IVF. For example, the conditions under which embryos can be tested for genetic conditions are expanded to make sure that any disabled embryos are discarded. (Since Gordon Brown sent this letter, the government has indicated that it may make an exception to this in cases such as deaf parents who wish to have a deaf child.) The Bill will also make provision for allowing embryos to be produced using a technique which mixes the genetic material of two women. Even though the contribution from one will far outstrip the other, the child born will have two genetic mothers.

Another key change to the rules governing IVF is warmly described in the letter as “the need for supportive parenting to be taken into account”. What this really means, as clearly described in the Bill, is that recognition of the child’s need for a father is to be abolished. The report of the public consultation noted, “members of the public generally favoured retention of a reference to the child’s need for a father, as part of the consideration of the welfare of the child. Many thought that the legislation should be revised to refer to a need for both a mother and a father.” Regardless of this view, the Bill abolishes this requirement.

The Prime Minister’s letter also raises the issue of “saviour siblings”, who the Bill would permit to be produced by IVF to eventually treat a sick brother or sister. While the letter says the child could “donate blood”, in fact the Bill also permits bone marrow or other tissue to be used. Tissue can mean just about anything, so this could mean that a child would become an unconsenting donor of “tissue”, perhaps on a regular basis, for their brother or sister. This brings a whole new meaning to the phrase “my brother’s keeper”, and opens serious questions about using a child in this way.

In summary, the Prime Minister’s letter will do little to assist fellow MPs or the public deal with the rapid scientific changes in the field of manipulating early human life. The pressure from some quarters to push the legislation through without thorough examination is leading to a muddying of the waters. It is time to step back, take a long hard look at this Bill, and see what it really says.

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