



A Pro-Life Religious Outreach Newspaper

News Note

Lawsuit Reinstated Against Obama's Funding of Embryo-Destructive Research

The U.S. Federal Court of Appeals has reinstated the lawsuit which pro-life groups filed against the Obama administration for forcing taxpayers to finance research that destroys embryonic human life.

Since 1995, federal law, known as the Dickey-Wicker Amendment, prohibits tax-funding of "the creation of a human embryo or embryos for research purposes; or research in which a human embryo or embryos are destroyed discarded or knowingly subjected to risk of injury or death."

The court found that doctors doing adult stem cell research have "competitive standing" to sue. The plaintiffs assert the NIH guidelines were made without the proper procedures required by law and without considering the more effective and ethical research with adult and pluripotent stem cells. NIH admitted ignoring 30,000 public comments opposing the funding and shortening the usual 60 days of public comment to only 34.

Lawsuit Against Pro-Abortion Health Care Filed in Virginia

The Commonwealth of Virginia is challenging the constitutionality of the federal health care law in the U.S. District Court in Richmond, VA.

An amicus brief supporting the lawsuit was filed by the American Center for Law & Justice (ACLJ) with support from 28 Congressmen and 70,000 citizens. The brief contends that the mandate forcing Americans to purchase health insurance is unprecedented and violates the Commerce Clause of the U.S. Constitution.

"Every federal law must derive from one of the grants of authority found in the Constitution. This the individual insurance mandate does not do," the brief states.

Attorneys General in 13 states have filed lawsuits against the pro-abortion health care bill Obama signed into law.

Obama Appoints Rationing Advocate to Head Medicare/Medicaid Service

"The Obama recess appointment of rationing advocate Donald Berwick to head the key government agency that will apply the new health care law is disastrous news for the vulnerable, especially the elderly and the sickest of American patients," said Burke Balch, J.D., director of National Right to Life's Powell Center for Medical Ethics.

In a June 2009 interview with the journal *Biotechnology Health care*, Berwick said, "The decision is not whether or not we will ration care – the decision is whether we will ration with our eyes open." In an article in the May/June 2008 issue of *Health Affairs*, he called for "rational collective action overriding some individual self-interest" so as to "reduce per capita costs." Lamenting that "today's individual health care processes are designed to respond to the acute needs of individual patients," Berwick wrote that instead government should "approach new technologies and capital investments with skepticism and require that a strong burden of proof of value lie with the proponent."

Moreover, Berwick wrote in a 1994 *Journal of the American Medical Association*, "Most metropolitan areas in the United States should reduce the number of centers engaging in cardiac surgery, high-risk obstetrics, neonatal intensive care, organ transplantation, tertiary cancer care, high-level trauma care, and high-technology imaging."

"Donald Berwick is a one-man death panel," said David N. O'Steen, Ph.D., National Right to Life executive director. "While Americans may not remember the agency he heads, he will quickly become known as Obama's rationing czar. President Obama's appointment of this open advocate of rationing to implement his health care law underlines the need for repeal before untold numbers of vulnerable Americans suffer death from denial of life-saving treatment. **The Obama health care rationing law must be repealed and voters need to remember its deadly provisions in November,**" O'Steen added.

Berwick is also an enthusiastic supporter of Britain's National Institute for Clinical Excellence (NICE), the agency charged with determining which medical advances will – and which will not – be made available to the British public. Berwick claims NICE has "developed very good and very disciplined . . . models for the evaluation of medical treatment from which we ought to learn."

England's five-year cancer survival rate for men is only 45%, compared with 66% in the U.S. That for women is 53%, compared to 63% in the U.S. The difference can in large measure be attributed to the refusal of NICE to authorize British use of pioneering cancer drugs routinely available in the United States--that is to say, currently routinely available in the United States, an availability Berwick will soon be using the power of government to curtail.

Senator Mitch McConnell, Republican Minority leader in the Senate, remarked: "As is well known, Congress has a constitutional duty to examine presidential nominees like Dr. Berwick. But apparently, the prospect of giving the American people an opportunity to hear this nominee defend his past praise for government-run systems that ration health care was worrisome enough for the administration that it sought to ignore congressional oversight altogether.

"As it turned out, the administration's plan backfired — because even Democrats are outraged at this blatant attempt to prevent the American people from hearing this man talk about what he plans to do with Medicare and Medicaid. As usual, the administration wants to blame Republicans for its own failures. But in this case, the administration's failure to respect the right of the American people to study Dr. Berwick's record is being criticized by just about everyone, including the Democrat chairman of the committee in charge of reviewing his nomination. "Here's what Chairman Baucus said shortly after the appointment was made: 'Senate confirmation of presidential appointees is an essential process prescribed by the Constitution that serves as a check on executive power and protects Montanans and all Americans by ensuring that crucial questions are asked of the nominee, and answered.'"



LifeNews.com Photo

Adult Stem Cells Cure Blindness and Myeloma

Italian researchers using adult stem cell treatments have succeeded in restoring sight to dozens of people blinded or with vision damage from dangerous chemicals splashed in their eyes.

The New England Journal of Medicine reported June 23rd that the researchers took stem cells from a healthy or partially healthy eye, grew them in the lab, and then implanted them in the affected eye. The burned cornea of the eye was replaced with a graft of the healthy stem cells. This treatment was completely successful for 82 of 107 damaged eyes, and partially successful for 14 others. The treatment was only applicable to eyes damaged from chemicals, not to deterioration such as occurs in macular degeneration. The patients must have some sight since some healthy tissue is needed for the treatment.

According to a story by the *Associated Press*, Dr. Ivan Schwab, a University of California ophthalmologist not involved in the research, said this treatment was "a roaring success." Graziella Pellegrini of the University of Modena's Center for Regenerative Medicine in Italy told *AP*, "They were incredibly happy."

It is good news also that the Italian government helped fund the study involving only the use of adult stem cells. Unfortunately, in the U.S. research with adult stem cells has lost funding to embryo-destructive research which has had little to no success while adult stem cells have been successful in treating at least 70 different diseases.

Another recent report reveals adult stem cell treatment success in healing a case of multiple myeloma, a cancer of the bone marrow's plasma cells.

The Patriot News carried the story of Alex Szeles of Pennsylvania who was told in 2007 that he would have a minimum of two years left in life. Alex and his wife traveled to the Myeloma Institute for Research and Therapy at the University of Arkansas. There adult stem cell transplants

relieved his condition and three years later he is doing well.

"The transplants allowed me to receive high doses of chemotherapy that destroyed the myeloma cells and the healthy blood cells in the bone marrow," Alex told *The Patriot News*. "Later, at the appropriate time, I received my own healthy stem cells that were stored, then given back to me through a flexible tube placed in a large vein. New healthy cells developed from the transplanted stem cells and generated new healthy white cells, red cells and platelets.

"During the course of my illness, I have learned that more than 70 diseases have been successfully treated through adult stem cell research. Adult stem cells have alleviated ailments such as diabetes and Parkinson's disease, and they carry with them none of the controversy that marks embryonic stem cell research, which has cured not a single mouse and involves the killing of human embryos.

"I am not willing to have another life--tiny though it may be--cut short so that I might have a longer life. I stand as a living example of the success of stem cell research, entirely ethical research, which gives hope and life and harms no one."

The Coalition of Americans for Research Ethics stated, "If the goal is to put patients, not patents, first, and provide near term benefits...then adult stem cells are, from a therapeutic perspective, clearly preferable."

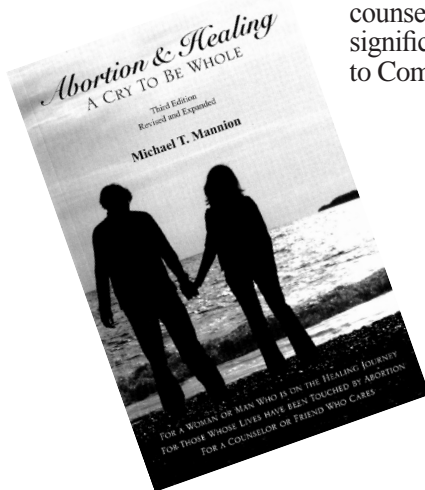
A promising development was reported by Canadian researchers who found that mesenchymal stem cells, a type of adult stem cell found in bone marrow and some other tissues, were helpful in treating septic infection in mice. These stem cells influence the immune system and help repair tissue damage. In the study, only 15% of the control animals that did not have the treatment survived while 50% of those receiving the adult stem cells stayed alive.

Dr. Duncan Stewart, the senior author of this study which was published by the *American Journal of Respiratory and Critical Care Medicine*, concluded, "Our results suggest that mesenchymal stem cells may provide a promising new approach for treating organ damage caused by severe infection and we are looking to test this in patients in the near future."

According to a report by Dr. David Prentice, Senior Fellow for Life Sciences at Family Research Council, sepsis is the second leading cause of mortality in Canadian and U.S. intensive care units, resulting in more than 200,000 deaths each year and more than \$16 billion in health care costs.



MedlinePlus Photo



A new expanded edition of Michael Mannion's best-selling handbook for post-abortion counseling is now available. New chapters include: Abortion and Men, which confirms the significance of men's influence on women's decisions to seek or not to seek abortions; "It's Safe to Come Home," where he writes of the Church that seeks to be an agent of healing for all.

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Bulletin Inserts

September 5 – Another school year begins. How many desks are empty due to the deaths of children when they were unborn babies? Who can comprehend the talents and gifts lost due to more than 52 million abortions since 1973?

September 12 – As we struggle to “fix” Social Security, how few public officials consider the millions of potential workers who have been lost to abortion? Unborn babies grow up to be economic contributors, helping support through their work the generation of workers now retired.

September 19 – St. Paul tells us, “There are different kinds of spiritual gifts but the same Spirit; there are different forms of service but the same Lord... who produces all of them in everyone. To each individual the manifestation of the Spirit is given for some benefit.” In other words, the Lord has a plan in which each of us plays an essential part; each abortion rips an unfixable hole in the Lord’s plan. (1 Cor: 23:3b-7)

September 26 – Legalized euthanasia in the Netherlands continues to claim an increasing number of victims--2,500 in 2009. Dutch statistics do not include other categories of euthanasia-induced deaths, such as the number of people with disabilities who are coerced into death by euthanasia based on the false premise that living with a disability inevitably produces a life of suffering. (*NRL News*, 1/2010, “Euthanasia Deaths Increase in the Netherlands,” p. 26)

October 3 – As we mark another Respect Life Sunday, we are perhaps tempted to ask with Habakkuk, “How long, O Lord, I cry for help but you do not listen? I cry out to you, ‘Violence!’ but you do not intervene.” The Lord’s response, “Write down the vision clearly upon the tablets... For the vision still has its time, presses on to fulfillment, and will not disappoint.” Respect for all human life is that vision which “will surely come.”

October 10 – Rep. Chris Smith, in a speech opposing the proposed Senate health care bill (subsequently passed) stated: “Abortion is a serious, lethal violation of human rights—and now we are [on the verge of] being compelled to subsidize it. Slaughtering innocent children must never be construed as health care. True health care reform respects, protects, and enhances human life.” (*NRL News*, 1/10, p.7)

October 17 – “Honk If You Were Once a Baby,” proclaimed the thought-provoking sign carried by a young person in this year’s March For Life. Other poignant signs included, “Every Time A Baby is Aborted, Love is Denied” and “Right to Choose/That’s a Lie/Unborn Babies Don’t Choose to Die.”

October 24 – Late last year the U.S. approved “ethically acceptable human cell lines,” so called because they were obtained from “extra fertility clinic embryos with parental consent.” Fr. Tad Pacholczyk, a leading bio-ethicist, countered: “Classifying embryos as ‘surplus’—is a flawed argument. “There is no such thing as a surplus child who doesn’t matter. Every child matters. It is never ethical for parents to give consent to destroy their own children. Calling it ethical doesn’t make it so.” (*The Southern Cross*, 1/10)

October 31 – One of Dr. Seuss’ most charming books, *Horton Hears a Who*, conveys a powerful pro-life message—from Horton’s repeated proclamation that “A person’s a person no matter how small,” to the ridicule and hardship he endures for defending tiny beings that others can’t see. Scripture tells us we must all become as little children.

Suggested Prayers

September 5 – May the realization that God’s plans are not our plans guide our decisions in life and death matters like abortion and euthanasia, we pray

September 12 – For women who have had abortions, may they accept God’s grace and reach out for God’s healing love, we pray

September 19 – That we may come to a deeper awareness that we are stewards of God’s gift of life and act to protect all human life, we pray

September 26 – That we may listen to God’s voice in those who proclaim the sanctity of human life, we pray

October 3 – For patience and perseverance in the struggle to restore legal protection to the unborn, we pray

October 10 – For a greater awareness of the gifts that those challenged by disabilities bring to the world, we pray

October 17 – For all those who defend the sanctity of human life, that they may turn to prayer for patience and strength, we pray

October 24 – For those in our justice and legal system, that they may use their office to promote the protection of all human life

October 31 – That we may remember that God loves the tiniest of unborn babies and the frailest of the elderly and the weakest of the disabled, we pray

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Action Alert: Tell Senators No on Elena Kagan and No on *DISCLOSE Act*

A vote in the full Senate on the nomination of Elena Kagan to the Supreme Court is expected during the last week of July. Documents reveal that Ms. Kagan played a key role in keeping the brutal partial-birth abortion method legal for an additional decade and that she takes objectionable positions on such issues as assisted suicide, human cloning, and political free speech. Please urge your two senators to **Vote No** on her confirmation. You may send an e-mail by using the form available at the website listed below.

The *DISCLOSE Act* (H.R. 5175) is legislation that would place extensive new legal restrictions on the ability of corporations, including incorporated nonprofit citizen groups such as NRLC, to communicate with the public about the actions of federal lawmakers.

"There is very little in this bill, despite the pretenses..., that is actually intended to provide useful or necessary information to the public," an NRLC letter to the U.S. House (5/27) explained. "The overriding purpose is precisely the opposite: To discourage, as much as possible, disfavored groups (such as NRLC) from communicating about officeholders, by exposing citizens who support such efforts to harassment and intimidation, and by smothering organizations in layer on layer of record keeping and reporting requirements, all backed by the threat of civil and criminal sanctions..." **Please urge your two senators to vote against cloture on the DISCLOSE Act.**

To e-mail your senators on these two issues, go to <http://www.capwiz.com/nrlc/home/>

The Scientific Evidence for the Pain of Unborn Children

Dr. Zielinski Presents the Facts

At the National Right to Life Convention in Pittsburgh in June, Dr. Steven Zielinski, MD, JD., a teaching fellow at the Loyola University of Chicago Institute for Health and Law, explained the extensive evidence for the experience of pain in unborn children.

Using the accepted definition of the presence of pain as "an adverse response to noxious stimulus," Dr. Zielinski described the functional structures needed for this response and demonstrated their existence in the child in the womb. These structures are: receptors in the skin to sense pain, nerve pathways, and brain structures that perceive pain signals and orchestrate a response. The receptors exist around the lips of the mouth of the fetus as early as the 6th or 7th week gestation, are spreading around the body by the 8th week, and are in every single organ of the body by the 19th-20th week, Dr. Zielinski explained. There are neurotransmitters sending chemical signals by 6 weeks gestation and electrical activity as early as 40 days. The brain structure needed for pain detection is the thalamus which is present by at least 8 weeks. (The cortex is not needed to experience pain.) At 19-20 weeks, an EKG is feasible and is as recognizable as in a newborn baby. The changes in brain circulation patterns in response to pain from a needle can be observed at 16 weeks. There is a full body response in the cardiovascular system affecting heart rate or rhythm, blood

pressure, and cardiac output. Hormonal stress levels can rise rapidly. These reactions are observable in amniocentesis procedures or other invasive procedures done to help a child in utero.

In 1984, a report headed by anesthesiologist Dr. Vincent Collins concluded that full body reaction to pain was observable in an ultrasound at 13 weeks gestation. Yet when President Reagan said in a speech, "Abortion is painful [for the child]," public opinion was harshly critical. Today, 3-D and 4-D ultrasound have made the reality of the unborn child's reaction to pain even clearer--one can see the grimace on the baby's face.

The fact that pain response can be stopped with anesthesia is further proof that this pain is real. The developing child in the womb actually feels pain three to five times more than newborns and adults do. Moreover, memory of pain and stress is stored in the hippo campus of the brain even early in the unborn child's development according to a recent study entitled, "Stressed out or in utero," Dr. Zielinski reported. And it is presently known that the gene c-fos, a molecular marker for pain, has been found in the tissues of babies who had died as early as the 16th week of gestation.

Legislation to protect unborn children from pain, such as Nebraska's *Pain Capable Unborn Child Protection Act*, may hopefully begin to raise the public's awareness of what is really happening in the tragedy of abortion.