

New Jersey Catholic Hospitals Support Stem Cell Research, Promote Cord Blood Donation

The Catholic HealthCare Partnership of New Jersey (CHCP) and the New Jersey Catholic Conference have publicly announced their support for adult stem cell research and a statewide initiative to promote umbilical cord and placenta blood donation at all 15 state Catholic hospitals where over 20,000 births take place annually. The use of adult stem cells derived from placenta and umbilical cord blood is proven to help treat patients with multiple sclerosis, lupus, juvenile diabetes and arthritis, spinal cord injuries, and many other autoimmune diseases.

The program includes educating pregnant women about umbilical cord and placenta blood donation and providing information about New Jersey's public collection facilities. Staff will also be educated about umbilical cord and placenta blood donation so they can speak with patients about donating opportunities. The New Jersey Catholic Conference is publicizing its support of adult stem cell research and umbilical and placenta blood donation by providing to every Catholic parish in the state an insert for the weekly parish bulletin. Umbilical cord and placenta blood donation to New Jersey's two public cord blood banks will provide more options for people with ailments curable through a stem cell transplant and will increase the research material available to New Jersey's top medical researchers. Other state Catholic conferences have begun looking at how they might initiate something similar to what is happening in New Jersey.

Brain Death Revisited

For many years now, there have been challenges voiced about the generally accepted belief among those in the scientific community that brain death constitutes the death of the person. Several months prior to his death in March 2004, John Paul II asked the Pontifical Academy of Sciences to restudy the matter and to ascertain, scientifically, that the criteria for establishing brain death were still valid. The pope initiated this study in spite of the fact that in a speech he gave in 2000 to an international congress on transplantation, he agreed with the consensus of the scientific community that "the complete and irreversible cessation of all brain activity (in the cerebrum, cerebellum, and brain stem) if rigorously applied, does not seem to conflict with the essential elements of anthropology."

Pope Benedict XVI picked up on John Paul II's request and asked the academy to gather top neurologists and other experts to re-examine brain death. In particular, the pope wanted to know if organ transplantation had influenced the use of brain death as a definition of death and he also wanted to see how the criteria for determining brain death are applied.

A group of 20 experts met at the Vatican in September 2006 to review the latest data. As a result, the academy reaffirmed Pope John Paul II's position on brain death; that it is, in fact, equivalent to the death of the person. The academy concluded that "there are no reasons to again go over" the criteria accepted by the overwhelming majority of the scientific community. It is not known what Benedict XVI will do with the results of the academy's working group on "The Signs of Death."

(Information for this piece was gathered from CNS, September 15, 2006.)

HPV Vaccine (Gardasil)

The U.S. Food and Drug Administration (FDA) recently approved Gardasil, a vaccine that protects against two strains of Human Papilloma Virus (HPV) responsible for 70 percent of cervical cancer. Because the virus is contracted through sexual encounters, and because its administration could be construed as implicitly approving of or even indirectly encouraging premarital sexual activity, some are claiming that the vaccine should not be routinely administered or even administered at all.

The availability of the vaccine poses a question for Catholic health care: Is it morally permissible for Catholic health care facilities to administer the vaccine? Catholic health care's commitment to human life, human dignity, and the common good would seem to require that it provide the vaccine. Such provision is an instance of carrying on the healing mission of Jesus.

How should Catholic health care deal with the fact that HPV is contracted through sexual encounters, most often, but not exclusively, outside of a marital context? First, this reality is not in itself a reason not to provide the vaccine. The overwhelming good being sought is the prevention of a life-threatening illness and all the consequences that accompany such an illness. Second, the Catholic provider of the vaccine is not endorsing sex outside of a marital context, but merely dealing with the fact that sex outside of marriage occurs and that it can have devastating consequences for a woman's health. Third, prevention of a

life-threatening disease and sexual promiscuity are different issues. One is the responsibility of the health care provider, while the other is primarily the responsibility of parents or of young women and men. Fourth, there is no evidence that providing the vaccine to young girls will encourage or facilitate increased sexual activity. Finally, not

providing the vaccine could be viewed as judgmental, harsh, and punitive. This hardly seems consistent with carrying on the healing mission of Jesus or the church's long theological and sacramental tradition of forgiveness.

The fundamental commitments of Catholic health care—respect for life and human dignity, acting on behalf of

the common good, prudent stewardship of resources, and justice—all seem to point in the direction of providing the HPV vaccine. Application of the principle of double effect, as well as the principle of cooperation, would seem to lead to the same conclusion. However, the issue also merits ongoing ethical review and analysis.

OF NOTE

Great Britain's senior family court judge last fall ordered that a woman who had been in a vegetative state for three years be given a sleeping pill before a decision was made to withdraw life-sustaining treatment. The pill, zolpidem, has been administered to other PVS patients in the U.S. and South Africa with the result that they have "woken up." The family wants the woman to be allowed to die and claim that she would not want to live with severe disabilities. This was the first such case in Great Britain, but others are expected to follow. (*Times Online*, November 20, 2006)

An editorial in the Phoenix diocesan newspaper, *The Catholic Sun*, urged Catholics to pressure the Susan G. Komen Breast Cancer Foundation to stop funding cancer screenings at Planned Parenthood clinics. After the October 2006 Race for the Cure, Komen granted \$25,000 to Planned Parenthood of Central and Northern Arizona to be used only for cancer screenings. The editorial, published with the approval of Bishop Thomas Olmstead, claims that the grant frees up Planned Parenthood money for other

purposes that are contrary to the Catholic faith. (*The Arizona Republic*, November 3, 2006)

The New York Court of Appeals ruled, on October 19, 2006, by a vote of 6-0 that the Women's Health and Wellness Act of 2002 does not violate the constitutional rights of religious organizations. The Act requires that employers pay for contraceptive drug coverage as part of prescription drug coverage in employee health plans. While the Act contains an exemption for religious organizations, it limits those organizations to those that have as their purpose to spread religious values and so long as they primarily employ and serve people of the same faith. The exemption does not cover educational, health, and social service ministries. The New York State Catholic Conference is considering petitioning the U.S. Supreme Court and/or possibly self-insuring. (*Catholic News Service*, October 20, 2006)

The Federal government is moving aggressively to create the first national banking system for umbilical cord blood. The Health Resources and Services Administration has awarded

contracts totaling nearly \$10 million to coordinate cord blood donations and to monitor the outcome of transplants. An additional \$14 million is being awarded to public cord blood banks around the country partly in order to increase the supply of cord blood donations. Most of the nearly two dozen public banks nationwide currently rely on donations to operate. The number of cord blood transplants is expected to increase significantly in coming years as scientists make progress in developing therapies from stem cells found in cord blood. (*The Associated Press*, October 16, 2006)

President Bush recently asked Congress to pass legislation that would safeguard individuals' genetic privacy. Experts say such a law would encourage Americans to undergo testing that could lead to prevention and treatment of many diseases. Scientists and patient advocates have previously pushed for legislation barring employers and insurance companies from discriminating based on the results of genetic tests. A so-called genetic discrimination bill passed the Senate unanimously in 2003, but died in the House. (*The New York Times*, January 18, 2007)