

CALIFORNIA RIGHT TO LIFE EDUCATION FUND

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Pain Capable Unborn Child Act

As I am writing this the U.S. House of Representatives has just passed H.R. 1797 the Pain-Capable Unborn Child Protection Act. This bill recognizes the fact that a 20 week post-conception gestational baby feels pain, and therefore would prohibit abortion except in a few rare cases.

So let us take a moment and review the baby's development week by week and month by month:

- At the moment of conception, from the moment the sperm and the ovum unite, the baby has his own blood type and own unique DNA. He is a person; he will never be anything other than a human being!
- The baby's heart starts beating at around three weeks post-conception, and the foundation of the brain, spinal cord and nervous system are beginning.
- Day 22 - The baby is barely as big as a dot on the page (.03 inches long); his eyes and ears begin to develop.
- Day 26 - The lungs begin to form.
- Day 28-32 - Tiny arms make their appearance, to be followed a few days later by budding legs. The beginning of the mouth begins to take shape, as well as the nose. The tongue is also beginning to form, and the face is making its first appearance.
- Day 36 - The eyes develop their first color in the retina.
- Day 40 - First reflex movements occur; touching the mouth with a fine bristle causes him to flex his neck.
- Day 40 - Fingers are beginning to form, with toes a few days later.
- Day 42 - The brain is now divided into three parts - one for emotion and to understand language, one for hearing, and one for seeing. (At this point the mother has missed her second period and will often suspect pregnancy.)
- Day 44 - Buds of milk teeth, eyelids form, and 99% of muscles are present.
- Day 52 - Spontaneous movement begins. The baby will develop a whole repertoire of movements over the next four weeks, including hiccupping, frowning, squinting, furrowing the brow, moving arms and legs, touching his face, "breathing" stretching, opening his mouth, yawning and sucking.
- By the 8th week the baby is now well proportioned and about the size of a thumb; every organ is present.
- In the 9th week if prodded, the eyelids and hands will close.
- Week 10 begins a seven week long formation of fingerprints. The eyelids fuse together until the seventh month.
- Week 11 - The baby is practicing "breathing," and the smile that will melt everyone's heart and other complex expressions are part of baby's activities.
- Week 12 - fine hair begins to form on upper lip, chin, and eyebrows. The baby swallows and responds to skin stimulation.
- Week 13 - The face is prettier, and facial expressions may resemble those of the parents. The baby, while active, is not yet felt by mommy due to his size.
- Week 15 - The wild production of nerve cells begins and continues for the next month; a second surge will occur at about 25 weeks.
- Four Months - Baby sucks his thumb, kicks and does somersaults, and has a firm grip.
- 18 weeks - Vocal cords are functional; if he had air he could cry.
- Five Months - Mom may feel junior kicking, turn or hiccup and be able to identify a bulge as a head or elbow.
- Six Months - Baby sleeps and wakes, nestles in his favorite positions to sleep, and stretches.
- Seven Months - eyelids open, preparing for that first glimpse of the outside world. Eyelashes are now well developed. Bones are fully developed.
- Eighth month - skin becomes pink and smooth, the pupils of the eye respond to light. The baby is now experiencing cramped quarters.
- 9-1/2 months - The baby triggers labor and birth occurs 264-270 days after conception.

Confused About Stem Cell Research? A Pro-Life Primer

By Brian Clowes, Ph.D

Much of the confusion over stem cell research involves misunderstanding of terms, so let's begin with some definitions.

Stem cells are immature cells that are undifferentiated (i.e., they have not yet “decided” what kind of cell to be). A stem cell divides into two cells: (1) a duplicate of itself and (2) a cell that develops into a more specialized cell type (i.e., an eye, liver, skin or blood cell). Since stem cells replace themselves every time they divide, they are capable of long-term self-renewal.[i]

Because they are immature, stem cells can be used to treat injuries or diseases. Scientists can make stem cells reach their full healing potential by developing procedures that mature them into the correct type of stable tissue that functions normally, then by making them safe for transplantation, and finally by developing surgical procedures that maximize their ability to treat or cure diseases or injuries.

The instruction *Dignitas personae* provides guidance on which types of stem cells may be used for research and treatment: “Methods which do not cause serious harm to the subject from whom the stem cells are taken are to be considered licit. This is generally the case when tissues are taken from: a) an adult organism; b) the blood of the umbilical cord at the time of birth; c) fetuses who have died of natural causes” [32].

It should be noted that the tissues of unborn children who have died due to miscarriage are generally unsuitable for research, since they deteriorate rapidly after death.

Human Embryonic Stem Cells (HESCs)

HESCs are harvested from human embryos that are typically between three and six days old. At this point, the blastocyst consists of about 140 cells. Most of these will form the placenta, and a small interior cluster of cells are “pluripotent” stem cells — able to

produce all of the many different types of cell in the human body. This feature of HESCs makes them very attractive to scientists.

Harvesting HESCs involves removing the inner cell cluster from the blastocyst and culturing it with various growth factors to produce specific types of cells. This procedure always results in the destruction of the early human being. This means that this procedure is morally equivalent to an abortion and can never be allowed [*Dignitas personae*, 32].

There are also extremely serious medical problems with HESCs. Their growth is very difficult to control, and they usually produce fatal tumors or convert themselves into cancer cells.[ii] Theoretically, this might not be the case if the embryonic cells were matured into adult cells, but this has proven to be almost impossible to achieve. Even matured HESCs continue to produce tumors.[iii] Finally, cells transplanted from an embryo are always attacked by the recipient's immune system, and so the patient must be treated with immunosuppressive drugs that have a variety of side effects. Since these difficult problems have not been overcome, all that embryonic stem cell research currently offers is promises of future cures.

Some have suggested that scientists clone a human embryo from a patient's own cells, thereby overcoming the rejection problem, but this procedure is still illicit since it would involve the destruction of the embryo.

Although intensive research has been done on human embryonic stem cells since 1998, not a single workable cure has been found.

Adult Stem Cells

An adult stem cell is defined as any stem cell in a human being older than a seven-day embryo. These cells are found throughout the body and in the umbilical cord. Their purpose is to replace damaged or worn-out cells throughout a person's life. They are more limited in their capabilities than HESCs, because they can only differentiate into a limited number of cell types — for example, a blood stem cell can become a lymphocyte, monocyte or some other type of blood

cell, but it cannot become a non-blood cell such as a bone cell or an eye cell. These cells are “multipotent.”

Unlike HESCs, adult stem cells show a lot more than mere “promise.” They have cured numerous people with serious diseases, and have been doing so for decades. Adult stem cells can currently cure more than seventy medical conditions, and there are more than 4,400 ongoing or recently completed government-funded clinical trials using adult stem cells in the USA.[iv]

The greatest moral advantage that adult stem cells have over embryonic stem cells is that no life is taken in acquiring them. There are also several other great advantages to using adult stem cells in therapeutic applications, which is what the entire field is supposed to be interested in: They are grown from the patient’s own body, so there is no problem with immune reactions; they are much easier to harvest, since they exist all over the body, even in fat cells; and finally, they are much easier to control, and do not form cancerous tumors, as do HESCs.

Reprogrammed Somatic Cells

The third type of stem cell is the induced pluripotent stem cell, or iPSC. These are adult body (“somatic”) cells that are reprogrammed into a state that is very similar to a human embryonic stem cell. They are not identical to HESCs, but have the same function, which means that they can produce any type of adult cell. One of the great advantages of these cells is that they are taken from the patient’s own body, thereby making rejection impossible because they are “immune-matched” to the patient.

Another advantage of iPSCs is that they do not require the destruction of a human embryo. However, iPSCs may potentially grow tumors like HESCs, have low replication rates and suffer from premature aging. Importantly, some pro-life ethicists and leaders have raised serious questions about the nature of iPSCs, asking whether they are actually reprogrammed into becoming tiny embryos. We would do well to continue to be vigilant as this area of research continues to grow.

[i]Congregation for the Doctrine of the Faith. *Dignitas*

personae [“On Certain Bioethical Questions”], June 20, 2008, ¶31.

[ii] Rick Weiss. “Embryonic Stem Cells Found to Acquire Mutations.” *Washington Post*, September 5, 2005.

[iii] Maureen L. Condic. “The Basics about Stem Cells.” *First Things*, January 2002, pages 30 to 34; Maureen L. Condic. “A Comprehensive Primer on Stem Cells.” The National Catholic Bioethics Center, August 2009.

[iv] A May 8, 2013 search of the National Institute for Health’s “Clinical Trials” database at www.clinicaltrials.gov shows 4,410 currently funded clinical trials using adult stem cells.

- See more at:

<http://www.hliworldwatch.org/?p=2513#sthash.gFgLWURR.dpuf>

Do you know someone who might be considering abortion?

Make sure they get the facts first!

A LIFE depends on it...

1-800-712-HELP (4357)

Website: <http://www.optionline.org/>

Around the Office

By the Board of Ca. Right to Life Ed Fund

We have some good news to report.... effective August 1, our “Do it all gal” Cecelia Cody will be coming on board full time. She had been working part time in the corporate realm to support herself, and recently made the decision to “step out in faith” and devote her entire work week to California Right to Life Educational Fund.

However we now have the obligation to pay her a living wage. As the Gospel’s tell us “A laborer is worthy of her hire.” So join us in making sure there are sufficient funds to pay her. She has agreed to try this through the end of 2013. We will re-evaluate in early December whether we can continue to have her full time in 2014.

Cecelia has done a great job with the limited resources and time she was able to devote to Ca Right to Life Ed Fund, and we have high hopes for expanding and enhancing various projects now that she is with us full time. You can vote for these additional projects with your checkbooks. As the minister said when he had to

tell the congregation that the church needed a new roof, "We have the money to pay for this expense. It is in your pockets." We would like to be able to offer Cecelia a living wage and health insurance; however, your donations will determine how many hours she can work. And of course enhanced projects will mean enhanced costs, so please prayerfully consider what you are able to donate to our organization in the coming months.

Calendar of Events

For the latest updates of events see
www.calendarforlife.org

"Nationwide Day of Remembrance for Aborted Children" September 14.

For further information visit

<http://abortionmemorials.com/index.php>

Rachel's Vineyard – Post Abortion Healing

Retreats – for an overview of this important ministry visit

<http://www.rachelsvineyard.org/>

For a schedule of upcoming retreats in your area see:

<http://www.rachelsvineyard.org/weekend/sites.aspx?ct=5&c=3&s=-1>

WHO IS CALIFORNIA RIGHT TO LIFE?

This is the newsletter of **California Right to Life Education Fund**, a 501-c-3 organization established to educate the public about pro-life issues. Donations to the EDUCATION FUND are **tax-deductible** and can be sent to P.O. Box 4343, Walnut Creek, CA 94596-0343.

California Right to Life **Committee, Inc.** is a 501-c-4 organization providing information on legislative issues affecting the right to life, and pro-life political advocacy. **CRLC, Inc. is not permitted**, under IRS regulations, to offer a tax deduction for donations. \$24.99 annually is requested for a subscription to the CRLC legislative email updates list and can be sent to 1920 Monument Blvd #309, Concord, CA 94520.

Both are affiliates of American Life League, headed by Judie Brown, and share the same "no-exceptions, no excuses" beliefs and the same dedication to promoting the Culture of Life, respecting all innocent human life from the single-cell stage to natural death.

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