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SCIENCE AND MORALS

Abortion-derived vaccines, the forgotten truths

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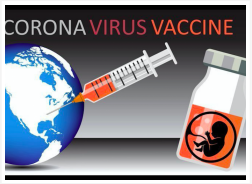
There are twelve cell lines which have been taken from aborted foetuses, and we must not forget the excruciating way these babies are killed in order to use their tissues. The Church says that morally problematic vaccines can only be accepted in situations of grave necessity and only on a temporary basis, while protesting against the production of such vaccines and the use of aborted foetuses in medical research. There are no circumstances where the use of these vaccines can be recommended as a moral duty, instead there is a duty to lobby for ethical vaccines.



I am a medical doctor, a moral theologian and a priest. The views I put forward here are my own, and not of any institution to which I belong, or of any place to which I am currently assigned. I write this simply as a scientist, a moral theologian,

and a faithful Catholic. There is a lot of information (true and false) available on COVID vaccines. In this article I hope to add clarity regarding the science, morality, and the Church's teaching on these matters.

1. Foetal Cell Lines

The problem for the consciences of many people is that the manufacture of many modern vaccines involves the use of cells derived from aborted babies (known as "foetal cell lines"). It is argued that the babies themselves were not killed for these tissues samples; but this ignores the *close cooperation* that must exist between the harvester and the abortionist for living samples to be extracted. It is also argued that the foetal cells are far removed from the original foetus, through the passage of time and genetic manipulation; but this ignores the fact that the cells in our own bodies are far removed (through time and some genetic mutation) from the original cells we had as foetuses, but they are still discernibly *our* cells. Foetal cell lines, whatever the passage of time or genetic modification, are still objectively cells *from a foetus,* and often from a specific organ or tissue. In this context of collaboration between abortionist and harvester, it is a misleading half-truth to say these children were not killed for their tissues. Finally, it is said that no further abortions are required for such cell lines; the truth is, no abortions were *ever* required nor ever will be—but the hunt for new foetal cell lines continues. The lack of any sustained objection from us allows this "industry" to continue unchecked and unchallenged.

2. The Unnamed Aborted Children

The cell lines taken from aborted babies are given numbers and designations, and not names. It is easier this way to forget these were children, boys or girls, of a certain age, of a certain parentage, city, country. Before we look at vaccines, let's look some of these children and see what (or rather, who) is being used in these vaccines and medicines. The extraction of living tissue means the harvesting of these children is undertaken close to or prior to death:

They would puncture the sac of a pregnant woman at 14 to 16 weeks, put a clamp on the head of the baby, pull the head down into the neck of the womb, drill a hole into the baby's head and attach a suction machine to remove the brain cells… At

16 to 21 weeks, they would do prostaglandin abortions where a chemical is injected into the womb causing the woman to go into mini-labour and pass the baby. Fifty percent of the time, the baby would be born alive, but that didn't stop them. They would simply open up the abdomen of the baby with no anaesthesia, and take out the liver and kidneys, etc. (Dr Peter McCullagh, *The Foetus As Transplant Donor: Scientific, Social and Ethical Perspectives.* John Wiley and Sons, 1987).

A) WI-38 (Girl) – Wistar Institute, cell strain 38
Developed from the lung tissue of a Swedish baby girl, 3 months gestation, "therapeutically" aborted in July 1962 by her parents who felt they already had too many children. She was delivered in Stockholm, about 20cm long, wrapped in a sterile green cloth, and handed over to the dissector. The baby's tiny organs were extracted without the mother's knowledge or permission, packed on ice and flown to the Wistar Institute in Philadelphia, where they were further dissected. This child was chosen because her parents had no family history of illnesses or cancer.

B) WI-26 (Boy) – Wistar Institute, cell strain 26
Developed from the lung tissue of an aborted Caucasian baby boy, 3 months gestation, around 1963.

C) WI-44 (Girl) – Wistar Institute, cell strain 44
Developed from the lung tissue of an aborted Swedish baby girl, 3 months gestation, around 1964.

D) MRC-5 (Boy) – Medical Research Council, cell culture 5
Developed by the Medical Research Council from the lung tissue of a Caucasian baby boy, 14 weeks gestation, aborted in the UK in or before September 1966. His mother was a physically healthy, genetically normal 27 year old woman. She had him aborted for "psychiatric reasons"; it was explained that she, his mother, did not want him. At abortion, the boy himself had no signs of congenital abnormalities or cancer.

E) MRC-9 (Girl) – Medical Research Council, cell culture 9
These cells were taken from the lungs of a baby girl in 1974, about 15 weeks gestation. She was of normal development and was delivered from a 14 year old

mother; the abortion happened because the mother was unmarried. The mother and her family had no abnormal medical history. The baby girl was dissected immediately following her delivery.

F) IMR-90 (Girl) – Institute for Medical Research, cell strain 90
Developed by the Institute for Medical Research from the lung tissue of a baby girl, 4 months gestation, from a “therapeutic” abortion performed on July 7, 1975, on a 38 year old Caucasian mother of six other children. Her cells were intended to replace WI-38.

G) IMR-91 (Boy) – Institute for Medical Research, cell strain 91
Developed by the Institute for Medical Research from the lung and skin tissue of an aborted Caucasian baby boy, 3 months gestation, in 1983. His cells were intended to replace MRC-5.

H) Lambda.hE1 (Boy) – Liver, human Embryonic, culture 1
From the liver cells of a baby boy, second trimester (13-28 weeks gestation). He was aborted in 1980 for “psychosocial indications”, that is, an unwanted pregnancy. His cells are used in the manufacture of a number of medical drugs.

I) HEK-293 (Girl) – Human Embryonic Kidney cells, attempt 293
Developed from kidney cells (deliberately sought because they are better in transformation studies) from a Dutch baby girl of unknown gestational age aborted in 1972. One of the cell line developers later said he could not remember whether the tissue came from an abortion or miscarriage. But the baby girl was described as “completely normal” by someone present to receive her post-extraction, which strongly suggests she was in fact aborted.

J) PER.C6 (Boy) – Primary human Embryonic Retinal cells, Clone 6
Developed from an isolated retina (because recent studies showed they could more readily be transformed) of a baby boy about 18 weeks gestation, aborted in 1985 in the Netherlands. The boy’s father was listed as “unknown” and this is why his mother wanted to get rid of him. He was described as a “healthy foetus”.

K) RA 27/3 (unrecorded sex) – Rubella, Abortus, 27th fetus, 3rd tissue culture explant

An 8-9 week gestation baby whose sex was never noted. This child was one of over 80 unborn babies killed in a study on isolating the rubella virus. The child's 25 year old mother had been exposed to the rubella virus, and 17 days later the child was surgically aborted and dissected immediately. Samples were taken from organs and several were successfully grown (lung, skin, kidney). This particular child was 27th in the series of abortions during the 1964 rubella epidemic, and it was the 3rd tissue culture which was chosen arbitrarily for further study. These virus-laden cells were then used to infect the foetal cells of WI-38.

L) WALVAX 2 (Girl) – Walvax Biotech Inc. (Chinese company)

Developed from the lung tissue of a baby girl in China, 3 months gestation, who was ultimately selected from among 9 aborted babies in 2009. The reason given for the abortion was a uterine scar from a previous caesarean birth by the girl's 27 year old healthy mother. The harvesters specifically used a method called a "water bag" abortion (illegal in the USA) to shorten the delivery time and to ensure the baby was born alive, so that her organs could be harvested while she was still alive, without any anaesthetic, since that would have compromised the tissue samples. Her cells were sought deliberately to replace depleting stocks of WI-38 and MRC-5.

3. Types of COVID Vaccines

The AstraZeneca, Johnson & Johnson, and Sputnik V vaccines are made using foetal cell lines. These cells are used in the development, design, production, and subsequent testing of the vaccines. The vaccines themselves *almost certainly* contain foetal cellular debris. I say "almost certainly" because the pharmaceutical industry has not yet revealed what is in these COVID vaccines. Judging by previous vaccines, the package inserts reveal that foetal cell lines are listed among possible ingredients. This is not a conspiracy theory. It's information the drug companies admit. The CDC (Centres for Disease Control and Prevention), the national public health agency for the USA, publishes online a list of vaccine "excipients" (i.e. what they contain), and foetal cellular debris is openly listed for a number of vaccines. Note the inclusion of MRC-5 and WI-38 as excipients of some vaccines here:

https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf.

The Pfizer and Moderna vaccines use foetal cell lines for the design and development of the vaccine, and for subsequent batch testing. They do not use the aborted cell lines for the cellular production of the vaccine, so these vaccines should not contain any foetal cellular debris.

Many Catholics consider the Pfizer and Moderna vaccines to be less objectionable simply by not being the direct by-products of foetal cells. Production however includes the redesigning of the spike protein, the subsequent recoding of the mRNA fragments, the expression of pseudoviruses and neutralization. All these steps used the aborted foetal cells. The eventual production of the vaccine itself involves replicating the mRNA sequence and encapsulating it in certain lipids. This final stage, it is true, does not use foetal cell lines. But every step up to this point has! Afterwards, the testing of vaccines is standard procedure. This process typically uses foetal cell lines as well. Vaccines such as Pfizer and Moderna therefore *rely heavily* on foetal cell lines.

Note that the objection to these vaccines is not that they are physical by-products of foetal cells. Using human tissue directly is not *in itself* objectionable (e.g. organ donation). **The objection is to the use (at all) of the bodies and tissue of killed innocents**. Morally, there is no difference between all these vaccines named above: *they are equally morally bad*. The inclusion of foetal cells in some vaccines make them more “yucky” to people, but these are just as bad as the vaccines which use foetal cells without containing any of their debris in the final product.

4. The Church’s Judgement

The media invariably reports the views of different Church bodies as “the Vatican”. The Congregation for the Doctrine of the Faith (CDF) issued judgements in 2008 and 2020. The Pontifical Academy for Life (PAV) released pronouncements in 2005 and 2017. These documents do not share the same weight or authority.

"The CDF **shares in the papal magisterium**: both its 2008 *Dignitas Personae* and its 2020 note on anti-COVID-19 vaccines were examined by the respective reigning pontiff who himself ordered their publication. Of the two, *Dignitas Personae* is **more authoritative**, inasmuch as it is an instruction and as such "trumps" a note. The PAV, in contrast, is an advisory body. Its pronouncements **are not part of the magisterium**, nor is its task strictly speaking that of teaching. Nonetheless, the fact is that the ordinary Catholic is usually unaware of this difference, and the media typically do not discriminate: the PAV is presented as "the Vatican" no more and no less than the CDF." (See here)

The Church's **most authoritative** teaching so far has been *Dignitas Personae* (2008), which said that in cases where (1) there are no other choices, (2) where the danger is real, and (3) the safety of children is threatened, then (4) on a temporary basis, such vaccines may be used (5) but pressure must be put on governments, pharmaceutical companies, researchers etc to find an ethically acceptable alternative! Furthermore (6) no one can be compelled to receive vaccination; they have the right to refuse, although they should take precautions to reduce their role in the transmission of the disease during an epidemic.

This second last point (5) is important to avoid *scandal*. The sin of scandal is not about being shocked or scandalised. It means one person's actions misleading another person into thinking something sinful is not actually sinful, and thus making them more liable to commit that sin. For example, giving Holy Communion to notoriously pro-abortion politicians who have publicly made known their views and actions to promote abortion. Failure by the clergy to warn such people, either to repent and amend their ways or to stop receiving Communion, is a failure to authentically love these people, and to be willing to jeopardise their eternal salvation. The sin of scandal occurs when ordinary Catholics are thus misled into believing that being pro-abortion is compatible with being a faithful Catholic.

With abortion-dependent vaccines, to avoid or minimise the sin of scandal, all Christians and people of conscience need to protest to their governments, and health and pharmaceutical industries—to cease making, distributing and using vaccines and other medicines which are abortion-compromised, and instead to

produce ethically-acceptable alternatives. When anyone says abortion-derived vaccines are “morally acceptable” without the need to protest the use of aborted foetal tissue, this is the *sin of scandal*. The pro-life witness of the Church is considerably weakened. **To the secular world, it seems we Catholics claim to be pro-life but are hypocritically happy to benefit from the fruits of abortion!** And worse, other Catholics are misled into thinking this is an acceptable compromise.

That is why some Catholics may not be able to receive an abortion-derived vaccine under any circumstances. In conscience, their pro-life witness would not permit this compromise, even if they did protest against the unethical sourcing of the vaccine. In the Bible, King David, fleeing from his son Absalom, longs to drink water from Bethlehem. Three young bravos risk their lives to cross enemy lines to bring back this water for the king. *“But he would not drink of it; he poured it out to the Lord, and said, Far be it from me, O Lord, that I should do this. Shall I drink the blood of the men who went at the risk of their lives?”* (2 Sam 23:15-17; 1 Chr 11:17-19). Although the young soldiers were not killed, they risked their lives for this water. For David this water was **the *lifeblood* of his men, and he would not dishonour them by looking to his own needs**. He poured out the water upon the ground, returning it to God—because the life of every human being belongs to God alone. All persons of conscience must be respected, those who likewise wish the foetal cell lines and their products to be committed to God, interred in the ground, since respect for human dignity demands it.

The sin of scandal is a good place to mention “love of neighbour”. Often, well-meaning Christians may say that abortion-derived vaccines should be received out of love for neighbour—to protect their health by building herd immunity, etc. There is also **a higher love of neighbour** to which we are called. Remember that although these vaccines could be received under certain circumstances, the producers of such vaccines themselves, including the researchers and abortionists are *endangering their souls*. Dr Stanley Plotkin played a key role in the discovery of the rubella vaccine, and is a leading vaccinologist. A continued tolerance of abortion-tainted medicines endangers souls like his. Plotkin admits,

“The Catholic Church has actually issued a document on that [issue of abortion-derived vaccines] which says that individuals who need the vaccines should receive the vaccines, regardless of that fact [that they were derived from abortions]; it implies that I am the individual who will go to hell because of the use of aborted tissue—*which I am glad to do*.” (Testimony of Dr Stanley Alan Plotkin, M.D. at a vaccine court case at Oakland County, Michigan (Jan 11, 2018). See time-stamp 17:30:44-17:31:13 at https://www.youtube.com/watch?v=Y9gWzTlpiDI)

5. Summary

1) The use of the morally-tainted vaccines is acceptable **for grave reasons**, especially for the **protection of the vulnerable**, and on a **temporary basis**;

2) Moral necessity to receive such vaccines may include **grave pressure or the need** to take vaccines to keep one’s job, e.g., medical staff in hospitals;

3) In all cases, the Church and all people **need to protest the production** of these vaccines, **and abortions**, including abortions for medical research;

4) The following are imposed as **duties** on doctors and heads of families (PAV 2005):

- to use alternative vaccines (if they exist),
- to put pressure on the political authorities and health systems so that ethical vaccines are made available,
- to have recourse, if necessary, to the use of conscientious objection to abortion-derived vaccines (i.e. to refuse these vaccinations),
- to oppose by all legitimate means (in writing, through various associations, mass media, etc.) the abortion-derived vaccines,
- to create pressure so that alternative vaccines which are ethical are prepared,
- to request rigorous legal control of the pharmaceutical industry producers,
- to fight and to employ every lawful means in order to make life difficult for the pharmaceutical industries which act unscrupulously and unethically.

5) In no case should use of such vaccines be called a moral duty, or be praised; at best, like cannibalism in case of dire necessity, **their use is regrettable**;

6) A separate issue is the **medical necessity** of these vaccines (does the pandemic genuinely warrant the use of vaccines?), and their safety (the COVID vaccines are experimental, and some are novel in their mode of action); these issues are still disputed by those with the relevant scientific competence; therefore, reluctance by the general public to submit to vaccination is all the more understandable;

7) **Morally acceptable vaccines do exist**, or will be made available shortly—they may be difficult to access depending on where you live;

8) No one may be compelled to be vaccinated **against their conscience**.

9) While the virtue of justice, strictly speaking, does not forbid reception of these vaccines, the virtue of charity may lead Christians to forgo them, both **for their own souls and in witness to the dignity of life**.

6. Table of Vaccines

Below is a table of vaccines, listing their moral acceptability (green) or unacceptability (red). The green ticks/checks on the left indicate those that are morally acceptable. This table is adapted from information on the Charlotte Lozier Institute (a pro-life organisation) website. The Institute's table does not show that some vaccines actually use foetal cells in "Design and Development", but it includes a hyperlink to scientific journals which do include that information.

Moral Accept-ability	Vaccine Type and Name	Sponsor	Country	Design and Development	Production	Testing
✓	Inactivated virus **"BBIBP-CorV"**	Beijing Institute of Biological Products/ Sinopharm	China	Vero Monkey	Vero Monkey	Cytopathic Tests

✓	Inactivated virus **“COVAXIN”** **“BBV152”**	Bharat Biotech/ Indian Council of Medical Research	India	Vero Monkey	Vero Monkey	Vero Monkey
✘	Inactivated virus **“CoronaVac”**	Sinovac Biotech Co., Ltd.	China	Vero Monkey	Vero Monkey	HEK-293
✘	Adenovirus vector **“AZD1222”** **“ChAdOX1 nCoV-19”**	AstraZeneca University of Oxford	USA UK	HEK-293	HEK-293	HEK-293 MRC-5
✘	Adenovirus vector **“Ad5-nCoV”** **“Convidecia”**	CanSino Biologics, Inc./ Beijing Institute of Biotechnology	China	HEK-293	HEK-293	
✘	Adenovirus vectors **“Gam-COVID-Vac”** **“Sputnik V”**	Gamaleya Research Institute	Russia	HEK-293	HEK-293	
✓	Recombinant vesicular virus **“IIBR-100”**	Israel Institute for Biological Research (IIBR)	Israel	BHK Hamster Vero Monkey	Vero Monkey	Vero Monkey

✘	Adenovirus vector **“Ad26.COV2-S”**	Janssen Research & Development, Inc./ Johnson & Johnson	USA	PER.C6	PER.C6	
✘	Adenovirus vector **“VXA-CoV2-1”**	Vaxart	USA	HEK-293	HEK-293	
✘	Protein vaccine **“ZF2001”** **“ZF-UZ-VAC 2001”**	Anhui Zhifei Longcom Biopharmaceutical/ Institute of Microbiology	China	HEK-293T	CHO Hamster	HEK-293T
✘	Protein vaccine **“SCB-2019”**	Clover Biopharmaceuticals, Inc.	China	CHO Hamster	CHO Hamster	HEK-293
✘	Protein vaccine **“UB-612”**	COVAXX/ United Biomedical	USA Taiwan	CHO Hamster	CHO Hamster	HEK-293
✘	Protein on Virus-Like Particle **“CoVLP”**	Medicago	Canada	Agrobacterium	Plant expression	HEK-293
✘	Protein	Novavax	USA		Sf9 Insect	HEK-293

	vaccine **“NVX-CoV2373”**					
?	Protein vaccine **“VAT00002”**	Sanofi Pasteur/ GlaxoSmithKline	USA France		Sf9 Insect	?
✓	mRNA vaccine **“CVnCoV”**	CureVac	Germany	Computer designed sequence	No cells used	HeLa
✘	mRNA vaccine **“mRNA-1273”**	Moderna, Inc./ National Institutes of Health	USA	HEK-293	No cells used	HEK-293
✘	mRNA vaccine **“BNT- 162a1, b1,b2,b3,c2”**	Pfizer/ BioNTech	USA Germany	HEK-293	No cells used	HEK-293
✘	DNA vaccine **“INO-4800”**	Inovio Pharmaceuticals	USA	HEK-293	No cells used	HEK-293
✓	DNA vaccine **“AG0301-COVID19” “AG0302-COVID19”**	Osaka University,/ AnGes,/ Takara Bio	Japan	Computer designed sequence	E. coli	Vero Monkey
✓	DNA vaccine **“ZyCov-D”**	Zydus Cadila	India	Computer designed	E. coli	Vero Monkey

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