

Helen Watt

Scientists in Korea and Newcastle have, they proudly tell us, engineered disabled cloned embryos for stem cell research. The embryonic clones of patients were created by combining a woman's egg with the DNA from the patient's body cell: 'therapeutic' cloning, where the clone is not intended for birth. We are assured that the embryos in question are very small and look different from ourselves, and that the two studies are (in the words of the *Guardian*) 'two progressive steps forward'.

Cloning is a field rich in euphemism, where facts are constantly evaded. What was 'cloned' – that is, created by cloning - was not 'cells', but an embryo. Indeed, this was, if we are honest, 'reproductive' cloning - a term normally reserved for livebirth cloning - since a new human life was, however briefly, reproduced. That human life was grown in the laboratory, then destroyed and mined for its cells. From those cells, in Korea, a 'stem cell line' was developed for research. The cell-harvesting process was therapeutic neither for the embryonic owner of the cells nor, indeed, for any patient at this point in time. No attention was paid to the interests the clone might have in its own human future: the perceived interests of patients in further research was seen as morally conclusive.

How should Christians react to this bioindustrial use of human embryos? Those who have read David Jones' absorbing new book *The Soul of the Embryo* will be aware of the complex history of Christian thought on ensoulment. The earliest strand of Christian tradition made no distinction

between early and late abortion, but forbade both as equivalent to infanticide. Only in the fourth century did the view of delayed ensoulment begin to gain ground in the West – without, however, any change in the view that all abortion was gravely wrong. With the discovery of the mammalian ovum, and subsequent discoveries concerning fertilisation and embryogenesis, the view that human ensoulment (life) was delayed for weeks or months became difficult to sustain. Evidence for the identity of the embryo with the foetus, baby, older child and adult is accumulating daily. Even those who are still unconvinced that the embryo is a human being from fertilisation should give the embryo - as cannot be said too often - the benefit of the doubt.

Admittedly, not all embryos begin at fertilisation: some embryos (twins) are created by the splitting of an earlier embryo - and now others by cloning. Whatever the means by which an embryo is created, that embryo should be cherished and respected; for that very reason, it should not be created in ways which undermine such respect. Already in IVF we see the logic of production carried out, with the new product being readily discarded, or set aside for - sometimes purpose-made for - destructive research. Embryos created by cloning are purpose-made according to a new and strict template, extending to the very disability we hope to reproduce in the clone. Lacking parents in the normal sense, clone embryos are even more vulnerable to exploitation than those conceived by IVF, who have natural protectors. I should add that cloning is

also highly exploitative of women, who are given risky drugs to produce the eggs which cloning requires. Cloning is a dangerous and demeaning use of women's reproductive powers.

We are often invited to see research cloning as the morally respectable kind of human cloning, as compared to cloning for birth, on which almost everyone frowns. While it is certainly unconscionable to create a parentless (or fatherless) child so as to bring it to term, it is difficult to see why this is worse than creating one to kill it in research. Indeed, the law in Britain, by penalizing not the creation of clones, but their transfer to a woman, has come rather close to making it a crime, not to create a clone, but to be one. In considering the touted benefits of cloning for research, we should remember that some patients will be very reluctant to accept treatments based on embryo experiments: an argument in favour of developing treatments everyone can accept. It is offensive to disabled people to assume they will do anything to be cured, and will happily accept the use of embryos and perhaps foetuses as well. (The State of New Jersey has passed a law which seems to permit both the creation of clones for research and their use for this purpose right up to the newborn stage.)

Christians, with their focus on service of the weak, should be especially loth to accept any argument against the human status of the embryo based on size, appearance or dependence. Human rights are not about how big we are, or whether others find us appealing. Nor are human rights affected by the risk of natural death, at any stage of our existence. A child who may die early still needs to be respected: lethal research is not an option. This is so whether or not an

alternative path to treatment has been discovered; the irony is that of all the stem cell treatments developed to date, none use cells from the embryo. Adult stem cells have a track record, while the very versatility of embryonic stem cells makes them difficult to control. The risk of cancer, low with adult stem cells, is much higher with cells from embryos. There has never been less excuse for Christians, and others who respect the human embryo, to compromise on standards. Cloning is not only immoral – the production of fatherless embryos as scientific tools – but may never achieve the end for which this dire means is employed.

This article was first published in the Church of England Newsletter.

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