Gene Transplantation
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and embryos. At that point, human experimentation begins. What kind of criteria would be required to protect the human embryo which in our nation, at present, seems to be devoid of protection in the face of its mother’s needs? Who would give proxy consent? Some might suggest that if the research were initially done with some reasonable hope of benefit on spontaneously aborted embryos—often due to severe chromosomal defects—the trail would truly be directed to the benefit of this or that embryo. Yet there would be mistakes; what would be done with them? One would need to be certain that the defect in question was due to a single gene. If it were a multiple gene defect, the chances of failure would rise exponentially. Or, even with a one gene defect, the correction might be only partial if not all the cells had successfully received the gene replacement. These and many other incertitudes and questions indicate that for the present there is no simple response to the question and further investigation is needed. Nonetheless, the potential of this procedure warrants that the question be studied in depth by an interdisciplinary team. Such a task force is in the future plans of the Pope John Center.

Medical-Moral Dilemma
Experimentation on Prisons
(Continued from Page One)
on prisoners. The Department of Health, Education, and Welfare has recently issued rules which would permit federal funding for prison research in only a few cases:

- Studies of the effects and processes of incarceration, provided that the studies involve minimal risk and inconvenience to the subjects.
- Studies, with “strict safeguards, on conditions that affect prisoners as a class. These include drug addiction, alcoholism, and sexual assaults.

Research that has the intent and “reasonable probability” of improving the health or well-being of individual prisoners. But such research may be approved only on a case-by-case basis by the secretary of HEW. (St. Louis Post-Dispatch, 11/11/78, p. 90)
Such rules would permit experimentation designed to benefit the individual prisoners involved or prisoners as a class, but such studies would require careful control to assure that any risk is minimal.

CenterNews
At its December meeting, the Pope John Center’s Board of Directors reviewed the following recommendations of some fifty consultants who attended the center’s planning conference held at Notre Dame University in late November.
A. Several issues were stressed as fundamental; accordingly programs in these areas were to be initiated immediately:
1. The development and statement of the first principles of Catholic bioethics.
2. Investigation and articulation of a Catholic perspective regarding the nature of the human being in a manner which would be intelligible and persuasive to especially those in health care.
3. An analysis of Catholic teaching on human sexuality, with emphasis on the family, counterparts in other fields in light of new information regarding human sexuality, especially as it relates to health care.

B. Among the specific issues cited, three emerged as the most important:
1. The right to health care and the respective obligations of the individual and of society.
2. Death: meaning, definition, and criteria; and the differential obligation to sustain life.
3. Issues in procreational biology including genetic aspects.

The center’s board of directors referred these issues to its Committee on Issues and Projects which will determine a priority and timetable.