

# CONNECTOR



LIFE ISSUES INSTITUTE, INC.  
SERVING THE EDUCATIONAL NEEDS OF THE PRO-LIFE MOVEMENT

May 2004

## Stem Cells, Cloning and “Emergency Contraception” *By J. C. Willke, MD*

To understand stem cell cloning and birth control pills, we must first review how a normal pregnancy happens.

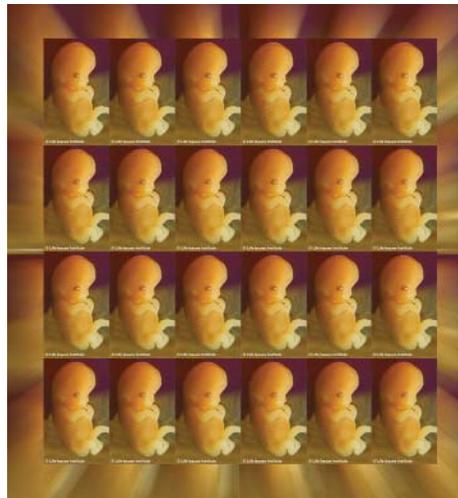
After sperm are deposited inside a woman, they rapidly swim through the uterus, through the tubes, and out to the ovary. This passage can take as little as thirty minutes. If she has ovulated and an egg awaits, fertilization occurs immediately. One sperm enters the ovum and proceeds to unite its 23 chromosomes with the 23 female chromosomes in the nucleus of the ovum. From sperm entrance until the first cell division takes place is about one day. From then on, rapid cell division occurs.

For the first week of life, this new human embryo floats freely down his or her mother’s fallopian tube, journeying to the womb. When one week old, he or she plants in the nutrient lining of the womb.

Within a few days this new passenger sends roots into the wall, taps into the mother’s blood stream and sends a chemical, hormonal message into it that goes to the base of her brain. This notifies her of his/her presence and stops her menstrual period. 18 to 20 days after fertilization the fetal heart begins to beat.

This single-cell fertilized egg is in fact an entire human body. It is alive, not dead, and proceeds in an ongoing, self-controlled process of growth and development. He or she is sexed as determined by XY male and XX female chromosomes. His/her intact body is complete, for nothing will be added from the first cell until the person dies, nothing but nutrition and oxygen.

The above are irrefutable biologic facts and must be taken into account when discussing the following.



### STEM CELLS

These are very primitive cells, as yet undifferentiated, from which all of the organs of the body develop. Two types are being investigated.

- Adult stem cells taken from the donor, cultured and returned to the donor.
- Embryonic stem cells taken from another human (an embryo), cultured and used to treat the already born human.

Adult stem cells are plentiful in bone marrow, cord blood and many other organs. In recent years there have been dozens of research reports of successful use of these in treatment of a variety of pathological conditions, e.g., diabetes. Such use

is ethical and promises to be a great boon to mankind.

Embryonic stem cells are obtained from four-day-old living human embryos. This tiny human is cut open and embryonic stem cells are extracted from him or her. The process directly kills a four-day-old human. Because of this direct killing, the method of “harvesting” these cells has been roundly condemned by traditional ethicists.

### Advantages of Embryonic Stem Cells:

- Some researchers claim that these cells are more primitive and therefore will more easily be grown into various organs.
- They are available from surplus frozen IVF embryos.
- They are so primitive that the host recipient will probably not reject them.

### Disadvantages:

- They are more “plastic” and easily (and as yet uncontrollably) grow wild into multi-organ tissues e.g. skin, bone, etc., in tumors.
- They can carry virus infection from the donor humans, through their original sperm or ovum.

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## Ukraine — Profound Problems & Unlimited Potential

My dear wife Barbara and I have just returned from a two-week speaking tour of Ukraine. This was the 66th nation in which we have lectured, but it certainly turned out to be unique. It is a nation of grinding poverty and yet unlimited economic potential. It is a nation of intelligent, handsome, hardworking people and yet a nation that is rapidly committing demographic suicide. For every ten babies conceived, seven are killed in abortion. This is probably the worst record in the world, at least since Russia and Romania have been improving their numbers.

Our shepherd there was Pastor David Bentley, who has created the successful “Mission to Ukraine” in the city of Zhytomyr. Pastor Bentley has slowly built sponsorship so that today his mission center has thirty employees. He has a full-time dentist, physician, nurses, social workers and others who care for orphans and handicapped children. He also has a large mission to pregnant women and new mothers. He has created five units in other cities. We met a year ago in Budapest and saw that we had a great deal of common ground. Later discussions and meetings resulted in our trip to Ukraine. We were able to send to him pro-life materials in Ukrainian, Russian, Polish and English languages, at a sharply discounted cost of almost \$4,000. These materials awaited us when we landed in Kiev.



Lecture at Vinnitsa Medical College.

He had rented a large van and had engaged the services of a driver and two excellent translators. The six of us began a two-week tour that took us from Kiev to the cities of Zhythomyr, Vinnitsa, Chernizshiy, Kamyanets-Podilsky, Lviv, Ternopil and back to Zhythomyr and Kiev.

Mr. Bentley had arranged a stimu-

lating schedule of speaking. With a few exceptions, every one was at a college or university. Cooperation with their faculties and administrators was uniformly excellent to enthusiastic. Our subjects were students, undergraduate and graduate, including two medical colleges, ranging from 200 up to 1,000 students at an appearance. We were able to give every attendee a piece of pro-life literature. In every institution there were enthusiastic, authoritative people who wanted to continue to repeat what we had shown them and to spread the word widely. To eighteen of these we were able to give a complete “Love Them Both” slide set, two videos and *Abortion Questions and Answers* books.



From left: Nick and Kerry Laper, Dr. and Mrs. Willke and David Bentley

Mr. Bentley’s centers are Evangelical but are open to and treat people of all beliefs. In Lviv, heavily populated with Polish Roman Catholics and Greek Catholic people, we had close cooperation. This included a lecture in the Catholic seminary with the warm encouragement of Bishop Buczek and Cardinal Husar. Joining us in Lviv, and then we in turn visiting them, was the staff of a very effective WELS Lutheran operation in Ternopil.

At Kiev we met six pretty young ladies who had come by train overnight from Odessa, way down on the Black Sea. A similar group came from Karkiv on the east Russian border.

The institution of the family had largely been destroyed by the Soviet occupation. The average wage for a full-time employee is approximately \$30.00 a month. Wages were kept so low that both husband and wife had to work full-time

while their children were reared in Soviet daycare centers. Vodka was plentiful. As a result of this, marriage, as we know it, is frequently a real struggle in Ukraine. Too often, a man moves in with a woman, for they must pair both salaries in order to keep a roof over their heads and buy food. Typically, this may last only a few years and he moves on. She must then find another partner in order to exist. Healthcare, except in the very large cities, is very inadequate, and particularly rural clinics have almost nothing to work with. As a result of this, people have not been having children. The population five years ago was 52 million. Last year it was 48. Villages are emptying out, with houses abandoned as people move to the cities.

The one bright spot was the impressive educational effort. This is turning out thousands of well-educated young people, but many have little prospect of employment. Therefore, the goal of many is to emigrate to the United States.

These are impressive people, almost Nordic in appearance, handsome young men and beautiful young ladies. They are intelligent and hardworking. Talk about “The harvest indeed is great, but the laborers are few”, we have never seen it more truly demonstrated. Imagine giving one lecture to a hospital staff that does abortions. Then the next day that staff tells you that they have voted to stop abortions. Yes, it did happen and yes, it could happen more often. One pleasant, attractive young lady at one of the colleges mentioned that she was the only child of her mother, who had aborted her first seven pregnancies. This is not unusual.

Hopefully, our lecturing and the materials we left will have a definite impact. Finally, thanks to you who have financially supported Life Issues Institute. Without your help with our expenses and educational materials, this would not have been possible. Our profound thanks to our shepherd, Pastor David Bentley. The work he is doing is of immense importance. 🌸

# “Emergency Contraception” *continued from page 1*

- They are another human’s tissue and can be rejected like other transplanted organs.
- So far, unlike adult stem cells, there are almost no reports of their use for successful treatments.

## Conclusion

The use of adult stem cells is ethical and beneficial. Obtaining and using embryonic stem cells is unethical, as it requires the direct killing of an innocent human in the so-far not realized hope of benefiting another.

## CLONING

So you want to clone your son and give him an identical twin brother? Here’s how to do it in theory. You take an unfertilized ripe ovum from a woman, and remove and discard its nucleus. Take a skin cell from your son and remove its nucleus. Now, insert this nucleus into the empty shell of the ovum. Give it a few tiny jolts of electricity and with luck, he will grow and develop just like a naturally fertilized egg. If he is planted in a womb and all goes well, in nine months she will deliver your son’s identical twin.

A number of large animals have been cloned, starting with Dolly the sheep. Typically, in each case there have been hundreds of failures before each success. These have included miscarriages, multiple deformities, sudden deaths, gigantism and more. Because of these problems, it is so far almost universally agreed that a cloned human should not be brought to term and delivered.

## Human Cloning

Because of the above, two terms have been given to human cloning even though there is really only one type.

- The term “reproductive” cloning has been used to describe when a human clone is implanted and delivered as a full term pregnancy. As noted, there is almost complete condemnation of this.
- Research, experimental or “therapeutic” cloning have been the terms

used for the other “type”. In this, the procedure is identical to the above except that this new cloned human is experimented upon in his or her first few weeks of life and then killed.

This is accurately termed research or experimental cloning. However, many scientists, eager to perform destructive research experiments, have coined the name “therapeutic” cloning for this. This is a classic example of semantic gymnastics using a false name to fool the public. There is nothing therapeutic about such lethal research. Accordingly, the very descriptive term “clone and kill” is commonly used.



## CONTRACEPTIVE PILLS

The first combination (estrogen and progestin) birth control pill was *Enovid 10* in 1960. To reduce fatal blood clots and improve efficacy, the estrogen dose has been reduced from 10.0 to 0.35 and the progestin likewise altered and reduced. Today’s typical pills have three major functions.

- They thicken the mucous plug at the

mouth of the womb, the cervix. This acts as a bit of a barrier to sperm entrance. Another minor effect is to alter tubal mobility.

- About 80% of the time these pills block ovulation. In the remaining 20% there can be break-through ovulation with the possibility of fertilization.
- They thin and “harden” the endometrial lining of the womb so that, even if fertilization occurs, the one-week-old embryo cannot plant in the womb and dies. This is a very early abortion.

## “Emergency Contraception” Pills

We are constantly told that if a woman has sex on Saturday night and takes these pills on Sunday morning, she will then “prevent pregnancy.” In fact, there are three possibilities.

- She was not fertile that night, did not conceive and didn’t need the pills.
- She had sex Saturday night, an egg awaited, sperm deposited in her body quickly swam out to the end of her tube and she was fertilized. As is commonly stated, “She was pregnant before she got out of bed.” She took the pills Sunday morning, much too late to prevent fertilization. One week later, when the new human embryo tried to implant, he/she could not and died. Since there was no implantation, the mother’s body was not affected by this and proceeded to menstruate on

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# Abortion Industry Exposed in Courts

By Bradley Mattes

November 4, 2003, President Bush signed the Partial-Birth Abortion Ban into law. Dr. Willke and I were privileged to be with the President during this historic occasion. This protective legislation culminated more than ten years of efforts by the pro-life movement.

Before the ink was dry on the president's signature, the abortion industry had found three federal courts in New York, Lincoln, NE and San Francisco willing to issue restraining orders, preventing the law from taking effect. This action was in response to lawsuits filed by Planned Parenthood Federation of America, the American Civil Liberties Union, the National Abortion Federation and the Center for Reproductive Rights. Partial-birth abortion is an act of killing a baby during delivery. Their determined effort to allow this gruesome procedure to continue demonstrates the radical nature of these pro-abortion organizations.

It's not easy to defend a method of abortion that drags a baby, feet first, from her mother's womb, stabs her in the back of the head and sucks out her brains. But defend it they did. The abortion industry called on members of their bloody profession to testify to the "necessity" of this grisly practice. A cadre of abortionists, under oath, responded in graphic detail to questions posed by the courts. I caution you that some of the following is not for the faint-of-heart reader.

Abortionist Amos Gruenbaum of New York testified that partial-birth abortion is necessary to insure an intact baby. He said women grieve less if they are able to see and hold the child they aborted. His abortion mill even takes pictures of the dead babies for the mothers as part of the grieving process. Gruenbaum said, "It is the same as any baby dying. People want to hold the fetus."

The court strategy of the abortion industry was to blur the line between partial-birth abortion and a D&E abortion, where the baby is dismembered in the womb and brought out piece by piece. They said the partial-birth abortion law is

too vague and would also prohibit other methods of late-term abortion. Therefore, considerable attention was given to the details of the D&E procedure.

The issue of pain, felt by the aborted baby, was clearly something abortionists didn't want to address. The Court asked Timothy Johnson if the baby's pain ever crossed his mind while he was dismembering the child. Johnson answered "No." The Court: "Never crossed your mind." Johnson: "No." Maureen Paul was asked, "...was there ever a time when you saw any indication that the fetus was experiencing pain?" She responded, "I have no idea what that means."

Abortionists prefer to have the baby exit intact for convenience sake. William Fitzhugh was asked if he simply detached the head of the baby when it got caught inside the woman's cervix. His response, "I guess you could, but then you would have to find it." When this happens, several abortionists provided testimony with chilling, matter-of-fact detail. They insert forceps with a built-in grip, then firmly secure the baby's now-floating head, crush it and remove it.

William Knorr estimates he did between five and six thousand abortions last year, and said the majority of unborn babies are alive when he begins to dismember them during a D&E abortion. The court asked why he didn't first kill the babies before dismembering them. His reply defies reason. "I just don't believe in it. I think that it's an extra procedure and, you know, we first have to remember, don't do any harm." His conscience won't allow him to first kill the baby before he dismembers her!

The Court also asked Knorr this question: "When you bring out a fetus in pieces, you make sure that you have got all the parts that you want; right? You try and lay them out and put them back together as best you can to see if you have everything?" Knorr said, "Not necessarily. Some of us keep track on the way out."

Some abortionists testified that partial-birth abortion was safer than

Digoxin abortions. Done at 22 weeks or later, a long needle, aimed for the baby's heart, is inserted through the mother's abdomen. The Digoxin is injected, killing the child. However, Katharine Sheehan, who testified she's done approximately 30,000 abortions during her career, said their aim is successful only about 50% of the time. Abortionist Eleanor Drey indicated they used to inject the Digoxin two days prior to the abortion, but said, "An unfortunate number of women were spontaneously going into labor and delivering at hospitals sort of all over the bay area, and it was distressing to everyone."

A revealing exchange between the Court and abortionist Carolyn Westhoff demonstrates what little information women are given regarding their abortions.

The Court: "I want to know whether that woman knows you are going to take a pair of scissors and insert them into the base of the skull of her baby. Do you tell her that you are going to then suck the brain out of the skull?"

Westhoff: "Those details would be distressing to my patients and. . . not directly relevant to their safety."

The Court: "I didn't ask you that. I said don't you think they ought to know?"

Westhoff: "No, sir, I don't."

The Court continued its questioning: "But did you tell them you would be sucking the brain out of the same baby that they desired to hold for the grieving process?"

Westhoff: "I don't think that helps the grieving process."

The abortion industry didn't want the Court to think they were totally void of sensitivity. They said they will arrange for burial of the baby if the mother desires. Small coffins are also on hand, as well as little hats to hide the incision in the back of the head where the brains were sucked out.

Leroy Carhart is well known for successfully challenging Nebraska's partial-birth abortion ban all the way to the Supreme Court. During his testimony, he said he rarely dismembers an unborn baby after 20 weeks. However, there are excep-

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## Abortion Industry Exposed *continued from page 4*

tions. "If I bring an arm down and bring it outside of the uterus and possibly even outside of the vagina, I'm not going to put that arm back inside of the woman's body to take bacteria back inside, so I'll remove that arm..." The goal is to bring the baby out feet first.

Prior to 20 weeks, Carhart's graphic testimony established they use time to ease the task of dismembering older babies. "...we are talking about a fetus that has been dead for 48 hours in essentially a warming oven or crock pot. It has been kept at a hundred degrees...that's enough temperature to cook meat...in my practice, we are dealing with a fetus that's both dead and soft, so it's much more pliable."

Carhart was asked if he recommends the use of ultrasound during a late-term abortion. He responded yes, for safety reasons, saying, "I sleep better at night

when I know what I've done."

The abortion industry is challenging the Partial-Birth Abortion Ban on the grounds that there is no exception for the health of the mother. But when the Court asked Carhart how common abortions were for a "maternal physical health reason," he replied, "In...Omaha or in Nebraska, my practice, it's fairly rare."

Finally, these court proceedings demonstrated that some abortionists may intentionally break the law and perform partial-birth abortions, even if the ban is upheld. William Fitzhugh testified that he would probably continue performing this ghastly procedure saying, "I'd have to take my chances."

The debate over partial-birth abortion has gone a long way in educating America to the gruesome and deadly reality of abortion. It has directed society's

attention toward the most vulnerable victim of abortion, the unborn child. The partial-birth abortion debate has also erased some of the misconception that abortion is only legal during the first three months of pregnancy.

The silver lining of these court proceedings may be that America can see, in bloody detail, behind the closely guarded doors of the abortion chamber. This is an opportunity for pro-lifers everywhere to expose the true reality of abortion. Abortion doesn't liberate women. It physically and emotionally enslaves them, and brutally kills their children. 

There's a lot of false information out there on abortion.  
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"**Truth Unmasked**" is an interactive CD-ROM designed by Life Issues Institute with graphics and music exclusively for youth. Teens introduce the CD and its individual sections in video clips.

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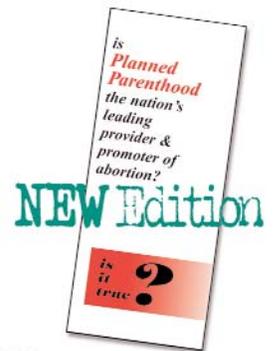
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## **“Emergency Contraception”** *continued from page 3*

schedule. Clearly this was an early abortion.

- Perhaps in a small percent of cases these pills actually can “prevent” pregnancy. Here’s how. She has sex Saturday night and takes the pills Sunday morning, but her body was programmed to ovulate on Tuesday. Since the pills were taken long enough before this, they possibly could suppress Tuesday’s ovulation. Then, even though she still had viable sperm in her body, she would not conceive.

### **More Semantic Gymnastics**

In the early 1960s it was determined that this newly available birth control pill would block ovulation and was a “contraceptive.”

It was correctly judged that the public would accept this. But there was this anti-implantation effect also, which clearly

was an abortion. They worried that if the general public found this out, the pill would be rejected. What to do?

There was a meeting of officials of the American College of Obstetrics and Gynecology, the US Food and Drug Administration, some drug companies and a prominent doctor, Alan Guttmacher. They solved this “dilemma” by officially, but very quietly, ruling that henceforth the word “conception” would no longer mean union of sperm and egg. Its new meaning was to be implantation one week later.

The word “pregnancy” was also a problem so they changed its definition from beginning at fertilization to beginning at implantation. Their stated reason was that her body was not pregnant until implantation.

Almost nobody was told about this then, nor do even most doctors know about it now, but this enabled the drug companies to call the “pill” and the IUD contracep-

tives. Today, using their new definitions, they say that the “emergency contraceptive” pill prevents conception and prevents pregnancy.

The obvious problem is that “the elite” say these things with a straight face, using their own definitions, while 99% of everyone else, including most clergy and doctors, believe “conception” and “pregnancy” still carry their traditional meanings of union of sperm and egg.

Pretty clever? You bet!

To counter these misleading terms, pro-lifers should use “fertilization” not “conception” and always speak of “human life” not “pregnancy.”

Note: RU 486 does not work until two weeks after implantation and kills a developing baby whose heart has already begun to beat. It is an abortifacient, not a contraceptive. 🌀



## From the Executive Director

Bradley Mattes

### **Chemical Coat Hanger Hurts and Kills More Women**

RU 486 was approved September 28, 2000 by a political, fast track process with the help of then President Bill Clinton. Since that time, we know of three American women, one Canadian and one Swede, who have died as a result of this chemical abortion process. At least 22 women have required hospitalization or “intervention to prevent permanent impairment.” Five women had “life threatening” or “other” medical outcomes.

Two of the American deaths were due to undiagnosed ectopic or tubal pregnancies. One of those was 38-year-old Tennessee resident, Brenda Vise, who died September 12, 2001.

You are likely aware of RU 486’s most recent victim, Holly Patterson. She died September 17, 2003. It was determined that the Planned Parenthood abortion mill, where Holly received the chemical abortion, didn’t follow their own safety guidelines.

The latest revelation of a woman to die from RU 486 is Rebecca Tell Berg. She is a 16-year-old from Uddevalla, Sweden. What’s even more alarming about Rebecca’s death is that the abortion mill staff followed all the safety guidelines, and she still died. This further demonstrates that RU 486 is dangerous to women and

should be pulled from the US market pending a Congressional investigation.

Rebecca died on June 3, 2003. Her mother, who wasn’t aware of the abortion until afterward, is broken-hearted and angry. The teenager was given three 200 milligram pills of RU 486. Two days later she was given two Cytotec pills. The American drug company that makes Cytotec warns it is dangerous when used on pregnant women. A few hours after taking the second drug, Rebecca was in considerable pain and experiencing heavy bleeding. The staff kept her at the hospital for eight hours for observation to make sure the bleeding wasn’t excessive.

The night before she died, Rebecca stayed at the apartment of her 19-year-old boyfriend, Niklas Mattsson. That morning Niklas made her breakfast and left the apartment. Upon his return, he found the breakfast uneaten and the girl dead in the shower. The coroner confirmed she died from blood loss as a result of the RU 486 chemical abortion. The Swedish Medical Products Agency determined that “all the rules were followed and the girl was given the correct dosage.” Even so, Rebecca is still dead and her mother is grieving.

Now there’s been another devas-

tating development, here at home. Dana Powell, a 30-year-old woman from Akron, Ohio, has filed a lawsuit against the Akron Women’s Center for Choice, as well as the abortionist, Raymond Robinson. When Dana developed problems, she called the abortion mill. She was told to take a second Cytotec pill and call them back the following day. Her medical condition deteriorated to the point that she had to go to an area hospital. Once there, she was diagnosed with a ruptured ectopic pregnancy. The ordeal left Dana sterile and unable to have children.

Since RU 486 will not abort an ectopic pregnancy, the Food and Drug Administration has stressed the need of abortionists to be able to identify this often-lethal situation. While Dana is devastated she will not be able to conceive children, she is fortunate to have survived this legal abortion. Others have not.

If the abortion industry truly cared about the wellbeing of women, they would stop using this chemical coat hanger on them. How many more women must be killed or maimed before they get the message? More testimony is available at: [www.lifeissues.org/pba.html](http://www.lifeissues.org/pba.html)



### **Life Issues Institute Welcomes New Staff Member**

Life Issues Institute is pleased to welcome Mike Vollette who has joined the staff as our Director of Development. Mike brings his considerable talents, as well as a passion for protecting the lives of unborn babies. Mike would welcome talking with you about the many ways you can financially assist our efforts to end abortion and protect innocent human life. We are mak-



*Regan and Mike Vollette with their three children: Nathan, Brandon and Geoffrey*

ing significant progress in our collective battle against the abortion industry, and are optimistic about reaching our ultimate goal— protecting life from womb to tomb. Please call Mike at 513.729.3600 to find out why we are optimistic, and learn how you can make a difference in saving the lives of millions of babies!





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## STATES EXCHANGE

### *New Pro-Life Billboards*

We're pleased to announce that Cincinnati Right to Life has just produced two new pro-life billboards. They have been designed by an expert team in design artistry and advertising effectiveness. Cincinnati has been one of the prime sources of pro-life billboards for the United States for many years.

When choosing a billboard for your highway, it is important to keep several factors in mind. The passing motorists get one quick look at the billboard. During that time, he or she is able to read only a few words and/or take in only large, clear pictures. If your billboard contains too many words, or drawings that are relatively small and perhaps detailed, the passing motorist will not get your message. As a rule of thumb, an effective billboard normally will have no more than perhaps six words, and these in very large, easy to read letters.



*Two new professionally designed, pro-life billboards now available from Cincinnati Right to Life*

Following these guidelines, Cincinnati Right to Life has just created two new additions. The original national theme was "Abortion Kills Babies." This was succeeded a decade ago by "Love Them Both." Now we have a new national theme, "Abortion Hurts Women," recommended by a summit conference of dozens of pro-life groups. Due to the fact that they print these posters in batches of 100, and mark up only their expense involved, they're able to sell these to other pro-life groups for \$60.00 to \$99.00 each.

For further information and a glossy colored catalogue detailing these posters and their prices, please call Cincinnati Right to Life, 513-728-7870 [www.affirminglife.org/products.asp](http://www.affirminglife.org/products.asp) 