

mean is that they are unalterably opposed to embryonic stem cell research if it means killing an embryo. I am unalterably opposed to embryonic stem cell research if it means taking one life with the hope that we will be able to help another life. But with these recent advances in medicine and research in the laboratory, there is the real hope that we can take cells from an early embryo to benefit the embryo.

And I would like to say again the reasons that the parents are taking cells from this early embryo, the fundamental reason they are taking the cell is to do a preimplantation genetic diagnosis. And the President's Council on Bioethics mentions the possibility of creating a repair kit, which certainly would benefit the baby. So the parent has now done three things which they think is ethical. I think that they are ethical, and there ought to be surplus cells from the repair kit, and it is those surplus cells that would be made available for additional stem cell lines.

But I want to reiterate again that the bill which we have just looks at animal experimentation. Although human research, human developments, human applications have gone beyond some of the exploration that we have done with animals, we still think that it is prudent to work with animals where we can determine with more cases and more intense experimental observation to make sure that there are no untoward effects of doing this.

I hope that this research can bring the two sides together. We had a couple of weeks ago a very heated debate. The emotions on both sides were rather obvious: those who wanted to take some of these more than 400,000 frozen embryos that they said were going to be discarded anyhow to get some good from them, and they were so convinced of this in California that they voted for \$3 billion to proceed with this. The argument on the other side, which position I take, is that morally I have big problems with taking one life, and this little embryo could become under the right circumstances a baby. More than 100 times it has. From these frozen 400,000, there are about 100 or so, we call Snowflake babies, because this is a program to offer these embryos for adoption, and more than 100 times they have been adopted, and the President had some of those babies at the White House a couple of weeks ago when we were having that debate, and they came to the Hill also when we were having that debate here on the floor.

With the ability to take cells from an early embryo not to establish a stem cell line, that is not why the parents took it. They took the cell to do a preimplantation genetic diagnosis. They then would like to establish a repair kit. We know they would like to do that because they are more and more freezing umbilical cord blood, which, as the one doctor I read from said, is a poor second choice to an embryonic stem cell line, but it is better

than nothing. So we know that parents would like to do that. And it is only after that if the animal experimentation supported by our bill shows that this is efficacious and will not harm the baby, only after that would stem cell lines be derived from surplus cells from repair kits that the parents had decided to establish for the benefit of their baby.

I think, Mr. Speaker, that this ought to remove all of the ethical objections. But there is just one more, and I just want to spend a moment talking about that, and this is a good chart to talk about it from. Since these cells at the eight-cell stage are quite undifferentiated, which means they have not really decided what they are going to be, it is possible that they might take that one cell and establish another embryo. The President's Council on Bioethics thinks that is very unlikely. But what I would like to see them pursue is the development of stem cell lines and the preimplantation genetic diagnosis from the inner cell mass stage.

Now, that is the stage at which embryonic stem cells are ordinarily taken from when the embryo is destroyed. That is before the embryo is implanted in the normal process. Here is the inner cell mass, and here is where it is implanted a couple of days later, 2 or 3 days later, in the uterus.

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Ordinarily, and I am not sure why they use the eight cell stage in the clinical laboratories, but I would like to see cells taken from the inner cell mass. There is no ethical question involved there because these cells in the inner cell mass cannot produce a baby because they have already lost their ability to produce decidua. The decidua is the amnion and chorion which is commonly known as the placenta, and they have lost the ability to do that, so they cannot produce a baby, but they can produce all of the tissues of a person, because these are what produce, back to our first chart that shows the inner cell mass differentiating into these three germ layers.

So the last possible ethical objection to deriving stem cells from pre-implantation genetic diagnosis and the development of a repair kit would be gone if we could take the cell from the inner cell mass, because the inner cell mass, those cells could not possibly produce a baby, because they are sufficiently differentiated that they cannot produce the deciduum.

I have used this term "differentiation" a number of times, and what we try to do with adult stem cells, because they are already differentiated, we try to de-differentiate them. We try to confuse them with ques, with chemicals, with exposing them to other cells and the products from other cells so that they can kind of forget their development and they now go back to a prior less-differentiated state where they could produce more variety of cells. But you avoid those problems

with the embryonic stem cell, because it has the capability to produce any and every cell in the body.

Mr. Speaker, I believe that with these recent medical advances, with the knowledge that we have, that it is perfectly feasible to ethically develop embryonic stem cell lines from embryos which should have, in the view of many of the experts, and clearly in the view of most Americans if you poll them, should have more potential than adult stem cells. Only research will tell that, and only time will tell whether or not that is true.

But with the hope that these large numbers of diseases so devastating to our people could be affected or maybe cured with embryonic stem cells, we really must pursue this, and now we have the opportunity to do that without offending those who have a problem with taking one life so that we might help another life.

I think, Mr. Speaker, that we now are on the cusp of advances that will bring these two sides together. We have enough things to be concerned about and to discuss in our country, we do not need to be discussing this, and I think the two sides with these present advances can come together. I hope that we will have an early vote on our bill and it will reach the President's desk so that he has a bill that he can sign that will promote embryonic stem cell research.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Ms. MCCOLLUM of Minnesota (at the request of Ms. PELOSI) for today and before 4:00 p.m. June 8 on account of official business.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. RYAN of Ohio) to revise and extend their remarks and include extraneous material:)

Mr. GUTIERREZ, for 5 minutes, today.
Mr. GEORGE MILLER of California, for 5 minutes, today.

Mrs. MCCARTHY, for 5 minutes, today.
Ms. SCHAKOWSKY, for 5 minutes, today.

Ms. WOOLSEY, for 5 minutes, today.
Mr. BROWN of Ohio, for 5 minutes, today.

Mr. DEFAZIO, for 5 minutes, today.
Ms. KAPTUR, for 5 minutes, today.
Ms. CARSON, for 5 minutes, today.

Ms. MILLENDER-MCDONALD, for 5 minutes, today.

Mr. HOLT, for 5 minutes, today.
(The following Members (at the request of Mr. GUTKNECHT) to revise and extend their remarks and include extraneous material:)

Mr. GUTKNECHT, for 5 minutes, today.
Mr. POE, for 5 minutes, today and June 9.