23.04.2023 **Position Statement on:**

The Use of Products, Procedures, or Data Obtained in an Unethical Manner

The Scottish Council on Human Bioethics believes that the inherent dignity of all human life should be protected and that respect for the integrity and fundamental freedoms of living human beings should be guaranteed.[1]

1. The conscience of the individual should be respected in the use of products, procedures, or data obtained in an unethical manner

The conscience of the individual should be respected and no restrictions should be placed on the freedom of a person other than those prescribed by law and are necessary in a democratic society in the interest of public safety and for the protection of public health.[2]

2. The use of products, procedures, or data obtained in an unethical manner should be proportional

The interests and welfare of human beings should prevail over the sole interest of society or science.[3]

The use of products, procedures or data obtained in an unethical manner may be considered if it is sufficiently proportionate. This means that a passive unintentional cooperation (in its mildest and remotest sense) in an immoral act may be considered morally justifiable if an extreme situation exists. For example, if no alternatives exist, a product, procedure, or data obtained in a manner which is considered unethical may be used to save the lives of persons and/or to avoid serious risks for the health of the population as a whole, on a temporary basis and until more ethical alternatives become available.

3. Intentional proximate cooperation

The intentional proximate (in terms of temporal or material connection) cooperation in an act that is believed to be immoral is always unethical. For example, intentionally helping a person murder another individual is always unethical.

4. Necessity to distance oneself from actions which may be considered unethical

When unethical actions take place, those persons who may conscientiously object to the motives of the actions may believe that it is necessary to distance themselves from them. In addition, they may consider that any appearance of acceptance would contribute to the growing indifference to, if not the condoning or even approval of, such unethical actions.

5. Intentional remote cooperation with an action that is now seen by all as unethical

The intentional remote (in terms of temporal or material connection) cooperation in an act that is believed to be immoral may not always be unacceptable. For example, walking on a Roman road may be acceptable even though it was built by slaves which is now universally condemned. The same would be true with the use of buildings in the UK, which were built with slave trade money.

Another example is the use of the Firth of Forth rail bridge in Scotland on which over 70 persons died because of unethical health and safety regulations in its construction at the end of the 19th century. Indeed,

[1] Reflects Article 1 of the European Convention on Human Rights and Biomedicine

[2] Reflects Article 26 of the European Convention on Human Rights and Biomedicine

[3] Reflects Article 2 of the European Convention on Human Rights and Biomedicine

thousands of train passengers cross this bridge every day without any significant ethical qualms as to the unethical procedures which resulted in the bridge being built. But such past health and safety regulations have now been universally condemned as being insufficient and unethical.

However, the use of data obtained from tortured prisoners 50 years' ago may still be seen as unethical because, amongst other reasons, it is proximate in time.

6. Intentional remote cooperation with an action that remains ethically controversial for some

The intentional remote (in terms of temporal connection) cooperation in an act that is believed to be immoral by some may create ethical concerns even if this act is not considered by others, to be immoral. An example of a controversial action is the use of cells from an aborted foetus in the 1970s to create a vaccine. Indeed, this is ethically problematic since abortions are considered by some to be appropriate and by others to be unacceptable. In contrast, it may be acceptable for a person to receive organs from a man who was murdered (which is universally condemned) but who had indicated that he wanted his organs to be used after death.

7. Unintentional cooperation in the action

The unintentional cooperation in the action of another person that is believed to be immoral may be acceptable. This can be further divided into:

- Direct unintentional cooperation which takes place in the execution of an action as such. For example, when an individual helps another person in an immoral act without knowing the real intentions of the other or when an individual is obliged by law to cooperate. This may happen when a taxpayer may have to pay taxes to fund procedures which he or she may believe are unethical. However, such a remote unintentional assistance does not mean that the taxpayer is thereby supporting the procedure.

- Indirect unintentional cooperation which takes place by fulfilling the conditions (either by providing instruments or products) which make it possible for another person to commit an action that is believed to be immoral. For example, this would be the case in the making of a knife which is used, 10 years later, to murder someone.

8. The state has a responsibility to provide alternatives

If products, procedures, or data are developed or obtained in a manner which is considered unethical but more ethical alternatives exist, these should always be offered. Indeed, it is unethical to burden the conscience of persons by failing to provide appropriate alternatives.

Governments should seek to develop products, procedures, or data in an ethical manner so that they can be accepted by as many persons as possible without ethical conflict.[4] If these are not available, citizens should lobby for them to become available in order to promote patient integrity. For example, it is not acceptable for patients to be told to 'take or leave' a treatment, especially if the patients are not told in advance what product or procedure will be offered.

When products, procedures, or data obtained in an unethical manner are being offered to the general public, those who make the decision to offer them are more responsible in their actions than those members of the public who have little, or no, voice in such a decision.

9. The origins of products, procedures, or data should be clearly labelled and easily accessible

Individuals, such as patients, should be given clear information regarding the origins of products, procedures, or data which may give rise to ethical conflict. These should be clearly labelled or explained if there is a risk that they may cause ethical concerns so that individuals can use them in an informed manner. Individuals, such as patients, should not have to undertake their own research about the manner in which new products or procedures were developed. They should also be told about what may happen to them if they do, or do not, use the products or procedures, such as a certain treatment.

[4] The Anscombe Bioethics Centre, COVID-19 Briefing Paper 2, 27 April 2020.

The origins of products, procedures, or data which may cause ethical concerns should always be fully transparent to the general public in order to avoid such concerns. Recommending deception to solve a moral problem is ethically unacceptable.

10. Speaking out against procedures, products, or data obtained in an unethical manner may be appropriate

It may be appropriate for individuals to express their disagreement, alert, and/or protest when using products, procedures, or data, obtained in an unethical manner.

11. Procedures, products, or data obtained in an unethical manner which could have been developed differently

In some cases, especially with procedures or data obtained in a manner which are considered unethical, it is possible that these same procedures or data could eventually have become available in an ethical way. This means that these procedures or data may now be used without ethical concerns. For example, even though the vaccination procedure was historically developed using poor children for research, it is very likely that it would eventually have been developed in a more ethical manner had these children not been used. This means that the vaccination procedure, as such, may now be used without significant ethical concerns.

Scottish Council on Human Bioethics

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1. Definitions and general information

Proximate and remote cooperation: distinguishes the 'distance' (in terms of *temporal* or *material* connection) in cooperating in the action of another person.

Intentional (formal) cooperation: represents the intentional cooperation in the action of another person. Intentional cooperation in an immoral action is always considered to be unethical because it represents a form of direct and intentional participation in the immoral action of another person.

Unintentional (material) cooperation: represents the unintentional cooperation in the action of another person. Unintentional cooperation in an immoral action can sometimes be justified, due to its 'remoteness' and/or the if the result may save lives. It can be further divided into:

- Direct (immediate) unintentional cooperation: represents unintentional cooperation in the execution of an action *per se.* When such cooperation (which is always proximate) concerns grave attacks on human life, it is always immoral.

- Indirect (mediate) unintentional cooperation: represents unintentional cooperation - either by providing instruments or products - which make it possible to commit an act. Indirect unintentional cooperation can be either proximate or remote.

Active (or positive) cooperation: represents cooperation in an act that is carried out by another person.

Passive (or negative) cooperation: represents the omission of an act of denunciation or impediment of an action carried out by another person. Passive cooperation can be (1) intended or unintended, (2) direct or indirect, (3) proximate or remote. Passive unintentional cooperation in an immoral action should generally be avoided, although no obligation exits when this may be difficult.

Moral complicity: actions which may be dependent on timing, proximity, certitude, knowledge, and intent.[5] It should be noted that most products, procedures, or data, are obtained in ways that could be considered to be somewhat complicit in an immoral action of some kind.

Stem cell-line: a group of stem cells (which may divide continuously) that is cultured for various purposes in a laboratory. Stem cells used to make a vaccine or in the testing procedures may continue to divide for at least 50 years. This means that, after a few years, cell-lines only contain very distant copies of the original cells.

2. Principles and purpose

Certain products, procedures, or data obtained in an unethical manner give rise to various ethical challenges with regard to the cooperation in such an action. It is useful, therefore, to formulate general principles which can be used to evaluate and resolve any conflicts of conscience.

[5] Zimmerman, R. K. (2021). Helping patients with ethical concerns about COVID-19 vaccines in light of fetal cell lines used in some COVID-19 vaccines. Vaccine, 39(31), 4242–4244.

In this regard, a causal chain often exists in the use of products, procedures, or data obtained in an unethical manner. The question can then be asked whether moral complicity may be involved at every stage, and if so, to what extent? The links in the causal chain must be considered separately since objections to links earlier in the chain may not be present further down the chain. Moreover, different actors in the development and use of products, procedures, or data obtained in an unethical manner may be seen as having different degrees of responsibility in any cooperation.

Examples of unintentional cooperation

The following examples are cases where ethical challenges exist in the cooperation with an immoral action:

- Persons buying goods directly from a thief or in a market when it is clear that they were originally stolen, though they cannot now be returned to the original owners.

- The use of human organs or tissue of doubtful origin for transplantation and research which may be considered as an unintentional proximate cooperation.

- The purchase of goods that come from countries with unjust labour practices. This may represent a form of ill-gotten gain, or complicity with the violation of human rights. This again may be considered as an unintentional proximate cooperation.

In conclusion, complete moral purism is an impossibility, and no person can avoid the consequences of immoral actions. For example, all human beings now alive on earth are the result of rape amongst some of their distant (or not so distant) ancestors. It is also very difficult for individuals to distance themselves from a number of medical and scientific advances which resulted from past warfare or appalling human rights abuse.

Nazi Germany Experiments

Scientists, policy makers, and ethicists have debated for decades whether it is appropriate to use data gathered by Nazi scientists through unethical research. At Dachau Concentration Camp, for instance, Nazi doctors were known for their brutal hypothermia experiments on prisoners of war.[6] But now, it is possible to question whether the information obtained from these infamous studies should be used either to help better understand, or even treat, hypothermia. Alternatively, the research may be so ethically tainted, even long after the end of World War II, that it should not be used at all, even to help individuals.

One of the founders of contemporary clinical ethics, Henry Beecher, a professor at Harvard Medical School in the 1960s, held that the loss of the data "*would be less important than the far-reaching moral loss to medicine if the data were to be published*."[7] In addition, California lawyer and Holocaust researcher, Baruch Cohen, explicitly claimed: "*By conferring a scientific martyrdom on the victims, it would tend to make them our retrospective guinea pigs, and we, their retrospective torturers*."[8] Use of data generated by the Nazis from the deadly phosgene gas experiments has also been considered for use, and rejected, by the US Environmental Protection Agency, even though it could help save lives of those accidentally exposed.

An argument also exists that the use of such results may encourage further unethical behaviour. In addition, since the Nazi scientists taking part in the research were prepared to be morally corrupt, then the research results may also be corrupt, in some way, and unreliable.

On the other hand, it may be suggested that the use of the data for good purposes is a kind of redemption, making something positive come from immoral actions. If society's obligations to victims of Nazi medical experiments have broadly been met through the Nuremberg trials and the ongoing global abhorrence of the terrible things done to people in World War II, then it might be ethically appropriate to use the data if it could lead to some good.[9] In the late 1980s, US researcher Robert Pozos argued that the Nazi

[6] Robert L. Berger, Nazi Science — The Dachau Hypothermia Experiments, N Engl J Med 1990; 322:1435-1440.

[7] Bogod D. The Nazi hypothermia experiments: forbidden data? Anaesthesia. 2004 Dec;59(12):1155-6.

[8] Baruch Cohen , Nazi Medical Experimentation: The Ethics Of Using Medical Data From Nazi Experiments, https://www.jewishvirtuallibrary.org/the-ethics-of-using-medical-data-from-nazi-experiments

[9] https://mercatornet.com/is-it-ethical-to-use-data-from-nazi-medical-experiments/66074/

hypothermia data was critical to improving methods of reviving people rescued from freezing water, but the *New England Journal of Medicine* rejected his proposal to publish the data openly.

Japanese Experiments

At the end of the Second World War, the victorious allies took advantage of the data obtained by Japanese experiments on their prisoners. These took place during the Second Sino-Japanese War (1937–1945) and World War II in Unit 731 which was a covert biological and chemical warfare research and development unit of the Imperial Japanese Army that engaged in lethal human experimentation. It was responsible for some of the most notorious war crimes committed by the Japanese armed forces. The number of deaths resulting from the unit is estimated to be between 200,000 and 300,000. The victims came from different nationalities, with the majority being Chinese and a significant minority being Russian. Prisoners were repeatedly reused for experiments as long as they were healthy enough. The average life expectancy of a prisoner, once they had entered the Unit, was two months.[10]

However, the researchers in Unit 731 were given immunity from prosecution for war crimes by the Americans in return for the data they had gathered.[11] Indeed, General Douglas MacArthur, who was the Supreme Commander of the Allied Powers and responsible for rebuilding Japan during the Allied occupations struck a deal with Japanese informants.[12] He secretly granted immunity to those who were in charge of Unit 731, including their leader, in exchange for providing America (but not the other wartime allies) with their research on biological warfare and data from human experimentation.[13]

In 2018, Japan disclosed the names of 3,607 members of Unit 731 which were found in the country's national archives.[14] The Japanese government hesitantly acknowledged the unit's existence in the late 1990s but has refused to discuss its activities.

Vaccines

The first vaccines, which were developed by the British physician Edward Jenner in 1796, would currently be considered as having been obtained in a very unethical way since he tested them on vulnerable and poor children. However, millions have now benefited from the resulting information. It should also be emphasised that vaccination may protect not only the individual, but the individual's community.

It is interesting that the term 'conscientious objector' first entered into English discussions through the nineteenth century vaccination opposition movement, and not in the context of opposition to military service.[15]

Vaccines currently produced using human cell lines originating from aborted foetuses

Vaccines are normally, though not always, produced in living cells. These include cells derived from ethically uncontentious sources such as insects,[16] tobacco plants,[17] hamster ovaries[18] and other nonhuman

[10] https://en.wikipedia.org/wiki/Unit_731

[11] Jonathan Watts, Japan guilty of germ warfare against thousands of Chinese, The Guardian, 28 August 2002, https://www.theguardian.com/world/2002/aug/28/artsandhumanities.japan

[12] Hal Gold. *Unit 731 Testimony* (2011) (1st ed.). New York: Tuttle Pub. p. 97.

[13] Hal Gold, *Unit 731 Testimony*, Tuttle Publishing, 2003, p. 109.

[14] Justin McCurry, Unit 731: Japan discloses details of notorious chemical warfare division". TheGuardian, 17 April 2018. https://www.theguardian.com/world/2018/apr/17/japan-unit-731-imperial-army-second-world-war

[15] Wolfe, R.M., and Sharp, L.K., 2002. Anti-vaccinationists past and present. *BMJ: British medical journal*, 325 (7361), 430.

[16] Sanofi and GSK to join forces in unprecedented vaccine collaboration to fight COVID-19, https://www.sanofi.com/en/media-room/press-releases/2020/2020-04-14-13-00-00

[17] Oliver Gill, 'Cigarette maker BAT claims coronavirus vaccine breakthrough', Telegraph, 1 April 2020, https://www.telegraph.co.uk/business/2020/04/01/cigarette-maker-claims-coronavirus-vaccine-breakthrough/

[18] 'Coronavirus outbreak: how the COVID 19 vaccine is being made', Sydney Morning Herald, https://www.smh.com.au/national/coronavirus-outbreak-how-the-covid-19-vaccine-is-being-made-20200220-p542rh.html

animals. For example, several vaccines currently available in the United States were developed using cell-lines from African green monkeys, such as vaccines against Japanese encephalitis, rotavirus, polio and smallpox. But of these, only rotavirus and polio vaccines are routinely given.[19]

Generally, however, vaccines have been produced in human cell-lines including from tissue derived from a small number of aborted foetuses. For example, vaccines for Rubella, Rabies, Hepatitis A and Chickenpox were all obtained using a stem cell-line derived from abortions which took place in the 1960s.[20] One of the first to be developed was the WI-38 line (Winstar Institute 38), with human lung fibroblast cells coming from a female foetus that was aborted because the family believed they had too many children. It was prepared and developed by Leonard Hayflick in 1964.[21]

Another human cell-line is MRC-5 (UK Medical Research Council 5) which originated from human lung fibroblasts coming from a 14-week male foetus aborted for 'psychiatric reasons' from a 27-year-old woman in the UK. MRC-5 was prepared and developed by J.P. Jacobs in 1966.[22]

In this regard, the vaccines which use human cell-lines from aborted foetuses, WI-38 and MRC-5, are the following:[23]

A) *Vaccines against Rubella:*[8]

- The monovalent vaccines against Rubella Meruvax®!! (Merck) (U.S.), Rudivax® (Sanofi Pasteur, Fr.), and Ervevax® (RA 27/3) (GlaxoSmithKline, Belgium);[24]
- The combined vaccine MR against Rubella and Measles, commercialized with the name of M-R-VAX® (Merck, US) and Rudi-Rouvax® (AVP, France);
- The combined vaccine against Rubella and Mumps marketed under the name of Biavax® (Merck, U.S.);
- The combined vaccine MMR) against measles, mumps, rubella marketed under the name of M-M-R® II (Merck, US), R.O.R.®, Trimovax® (Sanofi Pasteur, Fr.), and Priorix® (GlaxoSmithKline UK). The MMR vaccine will have been received by many children over the years. The recent hesitancy over MMR was linked to the discredited claims by Dr Andrew Wakefield that the vaccine led to autism in children, but there has been very little focus on the use of foetal cell-lines in its production. Over 90% of UK children received MMR vaccines in 2019.

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[19] Jones, D.G. Religious Concerns About COVID-19 Vaccines: From Abortion to Religious Freedom. J Relig Health 61, 2233–2252 (2022). https://doi.org/10.1007/s10943-022-01557-x

[20] Vaccine ingredients - Fetal tissues. Children's Hospital of Philadelphia. bit.ly/3hR>q9gi

[21] L. Hayflick, *The Limited* In Vitro *Lifetime of Human Diploid Cell Strains*, Experimental Cell Research, March 1965, vol.37, no. 3, pp. 614-636.
G. Sven, S. Plotkin, K. McCarthy, *Gamma Globulin Prophylaxis; Inactivated Rubella Virus; Production and Biological Control of Live Attenuated Rubella Virus Vaccines*, American journal of Diseases of Children, August 1969, vol. 118, no. 2, pp.372-381.

[22] J.P. Jacobs, C.M. Jones, J.P. Bailie, Characteristics of a Human Diploid Cell Designated MRC-5, Nature, 11th July 1970, vol.277, pp.168-170.

[23] Against these various infectious diseases, there are some alternative vaccines that are prepared using animal cells or tissues, and are therefore ethically acceptable to all. Their availability depends on the country in question.

Concerning the particular case of the United States, there are, presently, no options for the vaccination against Rubella, Chickenpox and Hepatitis A, other than the vaccines proposed by Merck, prepared using the human cell lines WI-38 and MRC-5. There is a vaccine against Smallpox prepared with the Vero cell line (derived from the kidney of an African green monkey), ACAM2000 (Acambis-Baxter) (a second-generation Smallpox vaccine, stockpiled, not approved in the US), which offers, therefore, an alternative.

There are alternative vaccines against Mumps (Mumpsvax, Merck, measles (Attenuvax, Merck), rabies (RabAvert, Chiron therapeutics), prepared from chicken embryos. (However serious allergies have occurred with such vaccines), poliomyelitis (IPOL, Aventis-Pasteur, prepared with monkey kidney cells) and Smallpox (a third-generation smallpox vaccine MVA, Modified Vaccinia Ankara, Acambis-Baxter).

In Europe and in Japan, there are other vaccines available against Rubella and Hepatitis A, produced using non-human cell lines. The Kitasato Institute produce four vaccines against Rubella, called Takahashi, TO-336 and Matuba, prepared with cells from rabbit kidney, and one (Matuura) prepared with cells from a quail embryo. The Chemo-sero-therapeutic Research Institute Kaketsuken produce one other vaccine against Hepatitis A, called Ainmugen, prepared with cells from monkey kidney. However, no alternative exists for the vaccine Varivax® against Chickenpox.

[24] S. A. Plotkin, D. Cornfeld, Th.H. Ingalls, *Studies of Immunization With Living Rubella Virus, Trials in Children With a Strain coming from an Aborted Fetus*, American Journal of Diseases in children, October 1965, vol. 110, no. 4, pp.381-389.

B) *Vaccines against other diseases also prepared using human cell-lines from aborted foetuses*:

- Two vaccines against Hepatitis A produced by Merck (VAQTA) and GlaxoSmithKline (HAVRIX) using MRC-5;
- One vaccine against Chickenpox, Varivax®, produced by Merck using WI-38 and MRC-5;
- One vaccine against poliomyelitis, the inactivated polio virus vaccine Poliovax® (Aventis-Pasteur, Fr.) using MRC-5;
- One vaccine against Rabies, Imovax®, produced by Aventis Pasteur, harvested from infected human diploid cells, MRC-5 strain;
- One vaccine against Smallpox, AC AM 1000, prepared by Acambis using MRC-5, still on trial.

One cell-line used in COVID-19 vaccine research (including a project of the University of Oxford[25]) is the Human Embryonic Kidney HEK-293 cell-line which is a specific immortalised cell-line derived from the kidney tissue of a female foetus who was aborted for unknown reasons in The Netherlands in 1972-1973.[26,27]

In 2015, China decided to produce its own cell-line from an aborted foetus called Walvax2 to replace the use of MRC-5.[28] Other human cell-lines have been developed for pharmaceutical research but are not involved in available vaccines.

A newer cell-line developed by Johnson & Johnson/Janssen, which is not currently used in any vaccines, is the PER-C6 cell-line which was first introduced to the US in 2001. The cells originated in the retinal tissue of an 18-week foetus aborted in 1985.

Some of these cell-lines are still being used to develop certain vaccines against:

- Ebola virus (Crucell, NV and the Vaccine Research Center of the National Institutes of Health's Allergy and Infectious Diseases, NIAID), HIV (Merck),
- Influenza (Medlmmune, Sanofi Pasteur),
- Japanese encephalitis (Crucell N.V. and Rhein Biotech N.V.)

For a full list of the original cells of the different vaccines, see: https://lozierinstitute.org/wp-content/uploads/2020/12/COVID-19-Vaccine-Candidates-and-Abortion-Derived-Cell-Lines.pdf

The use of vaccines against Rubella (German Measles)

Rubella is a viral illness caused by a Togavirus and is characterised by a rash made of both flat and raised skin lesions. It consists of an infection which is common in infancy and has no clinical manifestations in about half the cases, is self-limiting, and usually benign. However, the most important danger posed by the spread of Rubella is to embryos/foetuses when their mothers become infected while pregnant. Congenital Rubella can cause miscarriages and a wide range of severe birth defects.

When a woman catches a Rubella infection during pregnancy, especially during the first trimester, the risk of embryo/foetal infection is very high (approximately 95%). The virus replicates itself in the placenta and infects the embryo/foetus, causing a number of abnormalities denoted by the name of Congenital Rubella Syndrome. For example, the severe epidemic of Rubella, which affected a huge part of the United States in 1964, caused 20,000 cases of congenital Rubella[29] resulting in:

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[25] 'Oxford COVID 19 vaccine programme opens for clinical trial recruitment', 27 March 2020, http://www.ox.ac.uk/news/2020-03-27-oxford-covid-19-vaccine-programme-opens-clinical-trial-recruitment

[26] COVID-19 Oxford Vaccine Trial. University of Oxford: bit.ly/3iRM08W

[27] Wadman M. Abortion opponents protest COVID-19 vaccines' use of fetal cells. Science. 5 June 2020: bit.ly/3mFWiv9

[28] Read the info on this new abortion and new cell line here: https://cogforlife.org/2015/09/09/new-aborted-fetal-cell-line-emerges-for-vaccine-production/

[29] Rubella, Morbidity and Mortality Weekly Report, 1964, vol. 13, p.93.

- 11,250 abortions (spontaneous or surgical),
- 2,100 neonatal deaths,
- 11,600 cases of deafness,
- 3,580 cases of blindness,
- 1,800 cases of mental disability.

It was this epidemic that stimulated the development and introduction on the market of an effective vaccine against Rubella and justified systematic vaccination. Parents then vaccinated their children against Rubella, not only to avoid the effects of sickness on their children, but secondarily and just as importantly, to prevent their children from becoming carriers of Rubella, as the spread of the disease can lead to the infection of vulnerable pregnant women, thereby endangering their lives and the lives of their unborn children.

Universal vaccination has resulted in a considerable fall in the incidence of congenital Rubella, with a general incidence reduced to less than 5 cases per 100,000 livebirths. Nevertheless, this progress remains fragile. In the United States, for example, after an overwhelming reduction in the number of cases of congenital Rubella to only a few cases annually, (less than 0.1 per 100,000 live births), a new epidemic wave came in 1991, with an incidence that rose to 0.8/100,000. Such waves of resurgence of Rubella were also seen in 1997 and in 2000. These periodic episodes of resurgence indicate that there is a persistent circulation of the virus among young adults, which is the consequence of insufficient vaccination coverage. The latter situation allows a significant proportion of vulnerable subjects to persist, who are a source of periodic epidemics which put women in the fertile age group who have not been immunised at risk. Therefore, the reduction to the point of eliminating congenital Rubella is considered a priority in public health care.

COVID-19 Vaccines

Neither the Pfizer nor Moderna vaccines used cell-lines from aborted foetuses in their design, development, or production. However, a confirmatory test employing the commonly used, but morally compromised, HEK-293 cell line, was performed for both vaccines. Thus, while neither vaccine is completely free from any connection to morally compromised cell-lines, the connection may be seen as remote from the initial abortion action.

However, with the AstraZeneca vaccine, the HEK-293 cell line was used in its design, development, and production stages, as well as for confirmatory testing.

6. Legislation, Case Law and Regulations - International

HEK-293 and Christian leaders in Australia and the USA

In 2020, Australian leaders from the Catholic, Orthodox, and Anglican Churches raised concerns about a deal struck between the Australian government and AstraZenaca which, in conjunction with Oxford University, developed a COVID-19 vaccine that was produced using the HEK-293 cell-line obtained from an aborted foetus in 1972-1973.[30]

The Roman Catholic Archbishop, Anthony Fisher, one of the aforementioned Church leaders in Australia and who is also a bioethicist, explained that offering an alternative to a morally problematic product would be the right way forward. It was also suggested that if secular and liberal governments could cater to this religious view, they should do so to support compliance with vaccination, in addition to supporting religious freedom amongst a variety of worldviews.[31]

The use of cell-lines derived from human embryonic or foetal tissues and products derived from such cell-lines has been debated among Catholic scholars for a number of years, with an official statement made by

S.A. Plotkin, Virologic Assistance in the Management of German Measles in Pregnancy, JAMA, 26th October 1964, vol.190, pp.265-268

[30] Borys S. Religious leaders question ethics of Oxford University developing coronavirus vaccine using cell lines from aborted foetus. ABC News Australia. 24 August 2020: ab.co/35T78lf

[31] For further discussion relating to Christian religious views relating to the COVID-19 vaccines, see: Jones, D.G. Religious Concerns About COVID-19 Vaccines: From Abortion to Religious Freedom. *J Relig Health* 61, 2233–2252 (2022).

the Pontifical Academy for Life in 2005[32] and reaffirmed in 2008 in *Dignitas Personae* from the Congregation for the Doctrine of the Faith.[33] In this regard, the Catholic Church authorities deemed the provision and use of vaccines developed with cells originating from an abortion at the beginning of the 1970s to be a very remote indirect unintentional cooperation with an immoral act.[34] This means that the healthcare staff and patients using such vaccines would be significantly removed in time from the immoral act and would not share the intention of the associated immoral action (the original abortion).[35]

In essence, the Church document indicated that individuals can be vaccinated with such a product if a proportionately serious reason exited and no alternatives were available. Importantly, it does not force anyone to obtain such a vaccination, but only permits it. Moreover, it states that '*everyone has the duty to make known their disagreement and to ask that their healthcare system make other types of vaccines available*'.[36] However, Roman Catholics could not use these cell-lines in research.

Finally, some US bishops indicated that taking a vaccine may be used to protect others from infections and could be viewed as an act of charity towards those in close proximity in society.[37]

The Vegan Society

The Vegan Society has stated that taking a vaccine that has been tested on animals is not in agreement with their moral commitments (even if the final product does not contain animal-derived products). But the Society indicated that it encourages vegans to look after their health and that of others, in order to continue to be effective advocates for veganism. Moreover, it indicated that in the case of COVID-19, vaccination is playing a fundamental role in tackling the pandemic and saving lives. It is also noted that, as there is currently a legal requirement that all vaccines are tested on animals, at this point in time it is impossible to have a vaccine that has been created without animal use.[38]

The Vegan Society concluded that it is the responsibility of each individual to make an informed decision about vaccines, bearing in mind the definition of veganism, with support from their local healthcare team.[39]

[32] Moral Reflections on Vaccines Prepared from Cells Derived from Aborted Foetuses, Pontifical Academy for Life, 2005, https://www.immunize.org/talking-about-vaccines/vaticandocument.htm

[33] Congregation for the Doctrine of the Faith 2008, https://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_20081208_dignitas-personae_en.html

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