Simply put, we do not belong in Iraq, and we are still headed in the wrong direction. We all support our troops, but we must not support the administration's policy of more of the same poor judgment. We must begin to withdraw our forces and allow the Iraqis to take control of their own future.

AMERICAN PEOPLE HAVE SPOKEN ON IRAQ

(Mr. CUMMINGS asked and was given permission to address the House for 1 minute.)

Mr. CUMMINGS. Mr. Speaker, I rise today to say to our President that the people have spoken and they have spoken quite loudly. Just the other night I ran into the family of Sergeant Kendall Waters-Bey, who was one of the first military folks who died in the war. He is from my district.

His family just said one thing. ''Ask the President what his plan is, his true plan for getting us out of there. Ask why is he being so stubborn. Ask how many have to die, like our relative died, and we still don't fully understand why.''

The President presented us with some statements last night, but we have heard them before. The American people have been patient, and they have simply run out of patience. So we must continue to loudly speak into the President's ear that the people do not want this war. They want to get our folks out of Iraq. Three thousand have already been killed, and others are being harmed every day.

FINDING CURES FOR DEBILITATING AND DEVASTATING DISEASES

(Mr. COSTA asked and was given permission to address the House for 1 minute.)

Mr. COSTA. Mr. Speaker, I rise today in support of H.R. 3, a bill that I consider a pivotal step toward the fight against devastating and debilitating diseases.

The narrow view of stem cell research espoused by the administration places unrealistic limitations on the medical research capabilities of this Nation. The administration's position on this critical issue leaves patients across the country without the hope that they can be cured of the effects of medical conditions, including but not limited to Parkinson's and Alzheimer's diseases, as well as spinal cord injuries.

Every person who has had to watch a mother, a brother, a friend, a family member, knows of this terrible, terrible, difficult problem. I know. I have had that experience.

These conditions may be curable through stem cell research, but it will only be possible if Congress asks for full-fledged research to take place. We owe it to the afflicted and their families to put forth the best efforts to find cures for these debilitating medical conditions.

I urge the House to put political posturing aside and give hope to patients and families by passing this important measure today.

IN SUPPORT OF EMBRYONIC STEM CELL RESEARCH

(Mr. GENE GREEN of Texas asked and was given permission to address the House for 1 minute.)

Mr. GENE GREEN of Texas. Mr. Speaker, today, we will vote on a bill to provide changes to a merciless Federal stem cell policy, changes that are still relevant and still necessary despite the recent discovery of stem cells derived from amniotic fluid cells.

To be sure, this is an important discovery, but the same scientists championing this research have stressed the amniotic cells are not a substitute for embryonic stem cells. While they hold the great promise of turning into some cell types, only embryonic stem cells can divide indefinitely and evolve into any cell type in the body.

If anything, the recent amniotic stem cell study proves that it is critical to explore all kinds of stem cell research, since advancements in one area of stem cell research could lead to lifesaving discoveries in others. By prohibiting Federal funds of more embryonic stem cell research, the current policy shuts the door on this collaborative research and slams it in the face of millions of Americans suffering from incurable diseases.

We have the opportunity today to advance this promising research that could offer cures for the scourges of our times. To purposefully keep the doors to a cure closed is a patent failure of our responsibility to ease human suffering from scores of incurable diseases.

HELPING KEEP CHILDREN FREE FROM DISEASE

(Ms. SHEA-PORTER asked and was given permission to address the House for 1 minute.)

Ms. SHEA-PORTER. Mr. Speaker, I am the parent of two children with asthma, and my husband has asthma also. When my children were young, I spent many hours beside their bed helping them to breathe with machines, giving them medicine that had side effects that were very unpleasant and kept both my children and myself up. We had a great deal of worry in those early years.

It is my great hope that science will find a cure. I ask all of my colleagues to reach out and help my children and the children of America to be free of these diseases.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mr. FRANK of Massachusetts). The Chair announces that the Speaker has delivered to the Clerk a letter dated January 11, 2007, listing Members in the order in which each shall act as Speaker pro tempore under clause 8(b)(3) of rule I.

STEM CELL RESEARCH ENHANCEMENT ACT OF 2007

Mr. DINGELL. Mr. Speaker, pursuant to section 509 of House Resolution 6 and as the designee of the majority leader, I call up the bill (H.R. 3) to amend the Public Health Service Act to provide for human embryonic stem cell research, and ask for its immediate consideration.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the ''Stem Cell Research Enhancement Act of 2007''.

SEC. 2. HUMAN EMBRYONIC STEM CELL RESEARCH.

Part H of title IV of the Public Health Service Act (42 U.S.C. 289 et seq.) is amended by inserting after section 498C the following:

''SEC. 498D. HUMAN EMBRYONIC STEM CELL RESEARCH.

''(a) IN GENERAL.—Notwithstanding any other provision of law (including any regulation or guidance), the Secretary shall conduct and support research that utilizes human embryonic stem cells in accordance with this section (regardless of the date on which the stem cells were derived from a human embryo) .

''(b) ETHICAL REQUIREMENTS.—Human embryonic stem cells shall be eligible for use in any research conducted or supported by the Secretary if the cells meet each of the following:

''(1) The stem cells were derived from human embryos that have been donated from in vitro fertilization clinics, were created for the purposes of fertility treatment, and were in excess of the clinical need of the individuals seeking such treatment.

''(2) Prior to the consideration of embryo donation and through consultation with the individuals seeking fertility treatment, it was determined that the embryos would never be implanted in a woman and would otherwise be discarded.

''(3) The individuals seeking fertility treatment donated the embryos with written informed consent and without receiving any financial or other inducements to make the donation.

''(c) GUIDELINES.—Not later than 60 days after the date of the enactment of this section, the Secretary, in consultation with the Director of NIH, shall issue final guidelines to carry out this section.

''(d) REPORTING REQUIREMENTS.—The Secretary shall annually prepare and submit to the appropriate committees of the Congress a report describing the activities carried out under this section during the preceding fiscal year, and including a description of whether and to what extent research under subsection (a) has been conducted in accordance with this section.''.

The SPEAKER pro tempore. Pursuant to section 509 of House Resolution 6, the gentleman from Michigan (Mr. DINGELL) and the gentleman from Ohio (Mr. BOEHNER) each will control 90 minutes.

The Chair recognizes the gentleman from Michigan.

GENERAL LEAVE

Mr. DINGELL. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and to insert extraneous material into the RECORD on the pending bill.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Michigan?

There was no objection.

Mr. DINGELL. Mr. Speaker, I yield myself 3 minutes.

Mr. Speaker, the House passed last year, on May 24, 2005, the Stem Cell Research Enhancement Act of 2005 by a vote of 238–194. On July 18, 2006, the Senate followed suit and passed the bill by a vote of 63–37. The President then vetoed this legislation on July 19, the first and only veto of his 6 years in office.

President Bush's veto came in the face of bipartisan and bicameral Congressional backing for the legislation, as well as strong public support for embryonic stem cell research. The language before us today is identical to the language we passed on May 24. It is identical to the language that passed the Senate on July 18. It is identical, regrettably, to the language vetoed by the President.

By considering the Stem Cell Research Enhancement Act of 2007 today, we are reasserting our commitment and dedication and devotion to the passing of this lifesaving legislation. The time has come for it to be in law and for President Bush to join us in signing this legislation into law.

Stem cells are the foundation cells for every organ, tissue and cell in the body. Embryonic stem cells, unlike adult stem cells, possess a unique ability to develop into any type of cell, and their capacity to do this exceeds any other self which we are aware now.

Embryonic stem cell research holds the potential for developing treatments for many dreaded diseases, including Lou Gehrig's disease, cancer, cystic fibrosis, heart disease, lupus, multiple sclerosis, osteoporosis and pulmonary fibrosis.

The unique properties of embryonic stem cells were not lost on everyone, and I will now quote from an individual who has thought rather considerably on this matter. On August 1, this statement was made:

''Scientists believe further research using stem cells offers great promise that could help improve the lives of those who suffer from many terrible diseases, from juvenile diabetes to Alzheimer's, from Parkinson's to spinal cord injuries. And while scientists admit they are not yet certain, they believe stem cells derived from embryos have unique potential. Most scientists, at least today, believe that research on embryonic stem cells offer the most promise because those cells have the potential to develop in all of the tissues of the body.''

The man who said this was our beloved President, Mr. Bush, and I think it is time that the House should listen to his words and disregard his veto.

I urge my colleagues to pass a piece of legislation that the public wants, that the scientific community needs, that will benefit our people and that will move forward scientific research of vast help and importance to our people.

Mr. Speaker, I ask unanimous consent that I be permitted to yield the remainder of my time to the distinguished gentlewoman from Colorado (Ms. DEGETTE), and that she be permitted to control the time.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Michigan?

There was no objection.

Mr. BOEHNER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, today I rise in opposition to H.R. 3, a bill to expand taxpayer funding of human embryonic stem cell research. I support stem cell research with only one exception, research that requires the killing of human life. Taxpayer-funded stem cell research must be carried out in a way that is ethical and in a way that respects the sanctity of human life.

Fortunately, ethical stem cell alternatives continue to flourish in the scientific community. Earlier this week we learned that amniotic non-embryonic stem cells may offer the same research possibility as stem cells obtained through the destruction of human embryos. We have also seen stem cells from noncontroversial sources, like umbilical cord blood, be used to treat humans afflicted with more than 70 afflictions. I think we need to be funding the research that shows the most promise.

I am deeply disappointed today that Democrat leaders have pressed ahead with this vote, rather than having hearings and markups where breakthroughs like amniotic fluid cell research could have been fully examined. This research offers the potential for a new consensus approach to the difficult issue of stem cell research, and I am disappointed that the Democrat majority was not willing to allow time for this new development to be thoroughly examined.

We all know what is going to happen with this bill. This bill is going to move through the House. It will move through the Senate and go to the White House, where it was vetoed last year, and it will be vetoed again.

We have a bill that has been introduced by Mr. BARTLETT from Maryland and Mr. GINGREY from Georgia that says, let's put more funding into amniotic stem cell research. This is a bill that I think the Congress can support, the House, the Senate and the White House, that really will provide new breakthroughs in medical science.

□ 1045

But that isn't going to be allowed today, and it is not going to be on the floor today. Instead, we are going to go through a political exercise that will get us nowhere. And for that, I am deeply disappointed.

Mr. Speaker, I reserve the balance of my time.

Ms. DEGETTE. Mr. Speaker, I yield myself 5 minutes.

Mr. Speaker, it has been nearly 2 years since the House of Representatives passed the Stem Cell Research Enhancement Act in an attempt to lift the crippling ban on lifesaving research. During those 2 years, a lot has happened. The Senate overwhelmingly passed the bill, President Bush issued the first veto of his 6-year Presidency to kill it, new elections were held, and a rash of new pro-research Members won, in many cases defeating incumbents who oppose this research.

Public support has surged for stem cells. Over 71 percent of the public now supports this research, a stunning 20 percent increase since the vote in 2005.

There are other developments that have happened in the last 2 years. Great progress in research is being conducted overseas, out of the hands and out of the oversight of our distinguished scientists here at home. Stem cell research is proceeding unfettered and, in some cases, without ethical standards in other countries. And even when these countries have ethical standards, our failures are allowing them to gain the scientific edge over the U.S.

In Japan, scientists have used embryonic stem cell therapies to reduce hepatic failure in mice. In the U.K., the government has now committed to spending $1.3 billion on stem cell research in the next 10 years. Singapore is spending $7.5 billion on biomedical research over the next 5 years and is actively courting American stem cell researchers.

The first embryonic stem cell line may have been created in the United States, but the majority of new lines are being created overseas. We were once on the cutting edge of this groundbreaking research, but we have now effectively handed over the reins to those outside our borders while our own researchers remain tethered by a restrictive 6-year-old policy and we still have no Federal ethical standards over this research.

But there is one thing that has not changed since we last considered this bill. Millions of people in this country and around the world are still stricken by disease, accidents are still leaving people paralyzed, too many people are becoming victims of Alzheimer's, Parkinson's, heart disease, sickle cell anemia, diabetes, and many other debilitating diseases. Cancer hasn't been cured.

Some suggest that it is Congress' role to tell researchers what kinds of cells to use, adult stem cells, cord blood, so-called ANT, amniotic, and others. I suggest we are not the arbiters of research. Instead, we should foster all of these methods, and we should

adequately fund and have ethical oversight over all ethical stem cell research. Embryonic stem cell research has shown the most promise of almost any current research today for potentially curing these and hundreds of other diseases and injuries.

The distinguished minority leader is wrong when he says amniotic stem cells are a substitute for embryonic stem cells. The researcher at Wake Forest University in fact says specifically that these cells are not a substitute, and we need to have both types of research, as well as all of the other kinds to have the maximum potential to cure disease.

The minority leader said we need to foster the kind of research that has the most promise. And there is the one place we will agree today, because the most promise, all researchers agree, is held by embryonic stem cell research.

Well, here we are again, and here we are going to come time after time until this bill passes. This bill will become law, and we will not tire in our efforts until it does for the millions of Americans who suffer from diseases.

Mr. President, today, we want to give you another chance to do the right thing. Today, the House will vote to give hope to millions of Americans. I urge my colleagues to vote for life, to vote for hope, to vote ''yes'' on H.R. 3.

Mr. Speaker, I reserve the balance of my time.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair would remind Members that remarks are to be addressed to the Chair and not to the President.

Mr. BOEHNER. Mr. Speaker, I yield 15 minutes to the gentleman from Texas (Mr. BARTON) and the remainder of my time to the gentleman from Texas (Mr. BURGESS) and I ask unanimous consent that they be allowed to control that time.

The SPEAKER pro tempore. Is the gentleman from Texas (Mr. BARTON) on the floor?

Mr. BOEHNER. Not as yet.

The SPEAKER pro tempore. Does the gentleman wish to yield first to the gentleman from Texas (Mr. BURGESS)?

Mr. BOEHNER. I will.

The SPEAKER pro tempore. The gentleman has yielded the remainder of his time to Mr. BURGESS, and then 15 minutes of Mr. BURGESS' time to Mr. BARTON; is that correct?

Mr. BOEHNER. That is correct.

The SPEAKER pro tempore. Without objection, the gentleman from Texas is recognized as the controller of the time.

There was no objection.

Mr. BURGESS. I thank the distinguished Republican leader for yielding.

Mr. Speaker, here we are back again, not quite two years from when we had this debate the last time, and a good deal has changed in the world of science over that 2-year time interval. Unfortunately, the bill that we have before us has not significantly changed.

We have already heard mention of the amniotic fluid stem cells that are now available to open a broad new area of research. Have we had one hearing in our committee, the Committee on Energy and Commerce, of which the distinguished chairman spoke to us this morning? I think the American people would welcome us having a hearing to understand more about this promising new area of science. As it stands today, we will simply have to debate the bill on the merits of information that is well over 2 years old, and I think that is unfortunate.

Mr. Speaker, regenerative medicine, the words themselves, speaks to great hope among the healer and patient alike that some of the most tragic of human afflictions may one day find relief. This concept is powerful. It is a powerful lure to participants on both sides of this debate. And I would stress, Mr. Speaker, that on both sides of this debate are people of good character and good will. We simply disagree about a single point. As we proceed with today's debate on H.R. 3, I would like to ask my colleagues whether there is any common ground by which the two sides may seek resolution of this conflict.

The recent findings of the pleuripotent epithelial cells, an undifferentiated mesenchymal cell that is present in all amniotic fluid at all stages of fetal development, demonstrates how quickly the world has changed since we last held this debate less than a year ago. Mr. Speaker, we don't know, we don't know what the mesenchymal cell will do if it is extracted at 11 weeks versus 40 weeks. Wouldn't it be nice to have the researcher before our committee and be able to ask those questions so we may make the best possible judgment for the American people?

Well, those individuals, the researchers at the Institute for Regenerative Medicine at Wake Forest, have determined these cells they have extracted from amniotic fluid can adapt and form other types of tissue, such as brain, muscle, and skeletal cells, and remain stable for years and not form tumors into those in whom they are implanted.

That is a pretty powerful piece of information, Mr. Speaker. If I were given the choice of a stem cell that might cure an affliction but one might cause a tumor and the other wouldn't, I think that is information I would like to have before I made that decision.

Clearly, this new technology, as it is further developed, may well prove a way toward that path of regenerative medicine without sacrificing nascent human life and in fact sacrificing human dignity.

For almost a decade, clinicians have used what is called preimplantation genetics, where a single cell is taken from an early gestation, the 8-cell blastocyst, a single cell is taken through micromanipulative techniques without causing harm to the donor embryo. This single cell is then used for genetic studies.

I have had patients in my practice who have undergone preimplantation genetics. But this same procedure could be used to create new embryonic stem cell lines without sacrificing human life and without endangering fundamental human dignity. This technique was proposed by Mr. BARTLETT in the last Congress. It was brought up under suspension, and, unfortunately, did not pass. But I believe this Congress should be considering this again as a means towards achieving that elusive common ground between the two sides.

As we have witnessed, science moves faster than we do here in the United States Congress. At the very least we should strive to defend life and attempt to establish the ethical boundaries of this potentially lifesaving research.

Consider the words spoken by President Kennedy at his inaugural almost half a century ago: ''Let both sides seek to invoke the wonders of science instead of its terrors.'' H.R. 3 does not strike this balance and does not allow us to invoke the wonders of science. Instead, it offers a very vague outline posing as ethical guidelines but is in no such way an ethical guideline; and, unfortunately, as a consequence, human dignity is discarded by the wayside.

We can do better, and we should do better. Instead, we offer false promises to those that suffer from some of the most debilitating chronic conditions and we fail to protect what is human life and erode the concept of humanity.

Mr. Speaker, again, let me express my regret that we are not holding hearings in arguably what is the most powerful committee in this United States Congress, and that is the Committee on Energy and Commerce, so that we may fully evaluate this area of science.

Mr. Speaker, I reserve the balance of my time.

The SPEAKER pro tempore. The gentleman, for his information, has consumed 5½ minutes. If there is any uncertainty, the Chair wants to clarify it.

Pursuant to the unanimous consent request of the gentleman from Ohio, the gentleman from Texas (Mr. BARTON) will control 15 minutes of the remaining time, and the gentleman from Texas (Mr. BURGESS) will control the rest of that time. So those two gentlemen, pursuant to the request of the gentleman from Ohio, were recognized to control the time on that side; 15 minutes for Mr. BARTON, the remainder of the time is left to Mr. BURGESS.

The Chair recognizes the gentlewoman from Colorado.

Ms. DEGETTE. Mr. Speaker, I am honored now to yield to the distinguished gentleman from Rhode Island (Mr. LANGEVIN) 3 minutes.

(Mr. LANGEVIN asked and was given permission to revise and extend his remarks.)

Mr. LANGEVIN. Mr. Speaker, I want to thank the gentlewoman for yielding and also in particular thank and recognize the gentlewoman from Colorado

(Ms. DEGETTE) and the gentleman from Delaware (Mr. CASTLE) for their exceptional leadership, and that of many others on the stem cell research bill who have fought so hard to bring us to where we are today. I am proud to be a partner with them in this effort.

Mr. Speaker, America has waited a long time for the Stem Cell Research Enhancement Act, and I am proud to rise in support of H.R. 3 and be a part of a Congress that has made this a top priority. This legislation has strong bipartisan support in both Chambers of Congress and enjoys the support of up to 70 percent of the American people. Most importantly, it offers hope and the promise of a cure to millions of people who are living with the constant challenges and burdens of chronic disease and disability.

Mr. Speaker, when I was injured in an accidental shooting almost 26 years ago, I was told that I would never walk again. Now, I always held out hope that someday that would change, that through the miracles of science and prayer, someday there would be a cure for spinal cord injuries.

□ 1100

It is only until now that that possibility of a cure has become truly real.

I am the first to admit that my understanding of stem cell research has involved ongoing education, thought and prayer. As a pro-life Member of Congress, I have not taken my decision to support this legislation lightly. But I have come to the conclusion that being pro-life also has to be about caring about those people who are living among us with some of life's most challenging conditions and diseases and caring about the possibility of both extending and improving the quality of life itself. That is what the promise of stem cell research offers.

Over the years, I have had the good fortune to learn about stem cell research from some of America's most renowned scientists as well as pro-life leaders like Senator ORRIN HATCH and a dear friend of mine who is certainly on my mind today, Christopher Reeve.

My education on this issue has filled me with tremendous hope not only that stem cell research might lead one day to a cure for spinal cord injuries, but that one day a child with diabetes will no longer have to endure a lifetime of painful shots and tests. I truly believe that families will no longer one day have to watch in agony as loved ones with Parkinson's or Alzheimer's disease gradually decline. I am thrilled to be able to share this hope with millions of others.

We live in exciting times, truly at the threshold of a new generation in medicine. Today, newly spinal-cord-injured patients, many of them teenagers as I was, are told about developing treatments and scientific progress. They face a world, very much the same challenges that I faced in 1980. But they also face a time with real hope and the real promise of a cure.

I urge my colleagues to support H.R. 3. It is the right thing to do.

Mr. BURGESS. Mr. Speaker, I don't disagree with a word that was just said.

The SPEAKER pro tempore (Mr. FRANK of Massachusetts). How much time does the gentleman yield himself?

Mr. BURGESS. Mr. Speaker, may I ask a question? May I yield 2 minutes to the gentleman from Texas (Mr. BARTON) before he begins the 15 minutes?

The SPEAKER pro tempore. You may. Let me explain once again. Pursuant to the request of the gentleman from Ohio, the gentleman from Texas controls, as a matter of right, 15 minutes of the debate time. The gentleman from Texas (Mr. BURGESS) controls the remainder. Either may yield to anyone, including each other. So if the gentleman wishes, at this point, to yield to the gentleman from Texas, he may do that, or the gentleman from Texas (Mr. BARTON) may proceed under his own time. It is the gentleman's choice.

Mr. BURGESS. Mr. Speaker, I ask unanimous consent that we withdraw the unanimous consent request of the gentleman from Ohio.

The SPEAKER pro tempore. Does the gentleman have a new unanimous consent request?

Let me clarify where we stand. Both gentlemen from Texas have a right under the previous request to control time. The gentleman from Texas (Mr. BARTON) has 15 minutes. The gentleman from Texas (Mr. BURGESS) has the remainder of the time. They may be recognized at either time. Whichever one seeks recognition will be granted that recognition.

Mr. BURGESS. Mr. Speaker, I appreciate that patient clarification. In that case, I will reserve my time. And I am going to yield to Mr. BARTON the 15 minutes.

The SPEAKER pro tempore. Well, you needn't do that. He already has 15 minutes. So the gentleman from Texas (Mr. BARTON) is now recognized. And Mr. BURGESS's time will be reserved.

Mr. BARTON of Texas. Mr. Speaker, it is good to see you in the Chair. To have one of our distinguished parliamentarians is a positive on the body.

Mr. Speaker, I yield 3 minutes to the Republican sponsor of the bill, Mr. CASTLE, at this time.

Mr. CASTLE. Mr. Speaker, I rise today in support of H.R. 3, the Stem Cell Research Enhancement Act, legislation I have authored with the distinguished lady from Colorado, Ms. DEGETTE, to ethically expand the current Federal embryonic stem cell research policy.

We have a real opportunity to make history, to pass legislation that will jump start research and may lead to treatments and cures for countless diseases, including diabetes, HIV/AIDS, Parkinson's Disease, Alzheimer's, ALS, multiple sclerosis and cancer. There is overwhelming support for this research, with 70 percent of the American people backing it.

There are also 500 universities, medical societies and advocacy groups backing this research, ranging from the American Medical Association and the Academy of Physicians to universities like the University of California and Harvard University and advocacy groups like the Juvenile Diabetes Research Foundation and the Michael J. Fox Foundation.

This research may also provide a better understanding of the biological origins of certain diseases, as well as an opportunity for pharmaceutical testing.

However, this Nation and, more importantly, our scientists are being held back by a policy that is out of date, short-sighted, arbitrary and, most of all, based on politics and not science.

When the decision was made by President Bush in 2001 to allow Federal funding for stem cell research on lines that had already been created, it seemed that a compromise may have been struck. However, the number of lines has shrunk from 78 to 22, and all of the lines have been compromised.

Since that time, over 150 new and improved stem cell lines have been created in the United States and throughout the world. Despite the fact that these lines are much easier for scientists to use and, in some cases, are disease specific, they are off limits to Federal researchers.

Throughout this debate, you will hear many mistruths, and I think it is important to set the stage early about what this bill does and doesn't do. First, you will hear that this bill expands Federal funding. To the contrary, this bill has nothing to do with funding. It has to do with the source of the embryos and the quality of stem cell lines.

Second, you will hear this bill discourages destruction of human life, or that it uses taxpayer dollars to destroy human life. To the contrary, this bill has nothing to do with destroying lives and everything to do with saving lives.

It is important to understand we are only talking about embryos that are going to be thrown away otherwise as medical waste. We support all options for couples, including embryo adoption, but if the couple decides to discard their embryos as medical waste, we would like them to be available to research.

You will hear this legislation will encourage the creation of embryos for the sake of research. Again, not true. Our bill specifically states that the embryos must have been created for the purpose of fertility treatment, and no money may have exchanged hands.

Even worse, you will hear mistruths spread by a physician hired by the pro-life movement. Specifically, he says cures and treatments have been found using adult stem cells for 65 to 72 diseases. However, if you look at the science and not the hype, you will see a scientific research study published by three leading researchers in the Science Magazine this past summer who found that, in truth, the number is 9, far less than 65.

Mr. Speaker, I would like to enter this study into the RECORD.

ADULT STEM CELL TREATMENTS FOR DISEASES?

(By Shane Smith, William Neaves, Steven Teitelbaum)

Opponents of research with embryonic stem (ES) cells often claim that adult stem cells provide treatments for 65 human illnesses. The apparent origin of those claims is a list created by David A. Prentice, an employee of the Family Research Council who advises U.S. Senator Sam Brownback (R–KS) and other opponents of ES cell research (1).

Prentice has said, ''Adult stem cells have now helped patients with at least 65 different human diseases. It's real help for real patients'' (2). On 4 May, Senator Brownback stated, ''I ask unanimous consent to have printed in the Record the listing of 69 different human illnesses being treated by adult and cord blood stem cells'' (3).

In fact, adult stem cell treatments fully tested in all required phases of clinical trials and approved by the U.S. Food and Drug Administration are available to treat only nine of the conditions on the Prentice list, not 65 [or 72 (4)]. In particular, allogeneic stem cell therapy has proven useful in treating hematological malignancies and in ameliorating the side effects of chemotherapy and radiation. Contrary to what Prentice implies, however, most of his cited treatments remain unproven and await clinical validation. Other claims, such as those for Parkinson's or spinal cord injury, are simply untenable.

The references Prentice cites as the basis for his list include various case reports, a meeting abstract, a newspaper article, and anecdotal testimony before a Congressional committee. A review of those references reveals that Prentice not only misrepresents existing adult stem cell treatments but also frequently distorts the nature and content of the references he cites (5).

For example, to support the inclusion of Parkinson's disease on his list, Prentice cites Congressional testimony by a patient (6) and a physician (7), a meeting abstract by the same physician (8), and two publications that have nothing to do with stem cell therapy for Parkinson's (9, 10). In fact, there is currently no FDA-approved adult stem cell treatment-and no cure of any kind-for Parkinson's disease.

For spinal cord injury, Prentice cites personal opinions expressed in Congressional testimony by one physician and two patients (11). There is currently no FDA-approved adult stem cell treatment or cure for spinal cord injury.

The reference Prentice cites for testicular cancer on his list does not report patient response to adult stem cell therapy (12); it simply evaluates different methods of adult stem cell isolation.

The reference Prentice cites on non-Hodgkin's lymphoma does not assess the treatment value of adult stem cell transplantation (13); rather, it describes culture conditions for the laboratory growth of stem cells from lymphoma patients.

Prentice's listing of Sandhoff disease, a rare disease that affects the central nervous system, is based on a layperson's statement in a newspaper article (14). There is currently no cure of any kind for Sandhoff disease.

By promoting the falsehood that adult stem cell treatments are already in general use for 65 diseases and injuries, Prentice and those who repeat his claims mislead laypeople and cruelly deceive patients.

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3. S. Brownback, ''Stem cells,'' Congressional Record, 4 May 2006 (Senate) (Page S4005–S4006) (accessed 8 May 2006 at http://frwebgate6.access.gpo.gov/cgi-bin/waisgate.cgi?WAISdocID=122359256098+2+2+0&WAI Saction=retrieve).
4. According the latest version of the list, accessed 12 July 2006.
5. See chart compiling and analyzing Prentice's list of 65 diseases allegedly treated by adult stem cells at the supplemental data repository available as Supporting Online Material on Science Online at www.sciencemag.org/cgi/content/full/1129987/DC1.
6. D. Turner, Testimony before Senator Sam Brownback's Science, Technology and Space Subcommittee on 14 July 2004 (accessed 8 May 2006 at http://commerce.senate.gov/hearings/testimony.cfm?id=1268&wit_id=3676).
7. M. Lévesque, Testimony before Senator Sam Brownback's Science, Technology and Space Subcommittee on 14 July 2004 (accessed 8 May 2006 at http://commerce.senate.gov/hearings/testimony.cfm?id=1268&wit_id=3670).
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The SPEAKER pro tempore. There was a general permission granted under the request of the gentleman from Michigan so that any extraneous material may be entered under a unanimous consent request already granted.

Mr. CASTLE. Mr. Speaker, I would also like to point out that adult stem cells were discovered in 1960, and embryonic stem cells were only isolated in 1998. And since 1998, there have been great advances in animal models in the areas of diabetes, spinal cord injury and macular degeneration.

Finally, you will hear about the research concerning amniotic fluid stem cells conducted by Dr. Atala at Wake Forest University. While exciting, this is nothing new, nor do these stem cells have the same capacity to divide into all cell types in the body, as embryonic stem cells do. Yet you will hear opponents say they do.

Mr. Speaker, I would like to enter the letter in the RECORD on that as well.

WAKE FOREST INSTITUTE FOR REGENERATIVE MEDICINE,
Winston-Salem, NC, January 8, 2007.

Hon. DIANA DEGETTE,
Hon. MICHAEL CASTLE,
House of Representatives, Washington, DC.

DEAR REPRESENTATIVES DEGETTE AND CASTLE: I am writing in regard to my research that was published in Nature Biotechnology that found that stem celts obtained from amniotic fluid have been able to differendate into several cell types. This research has the potential to open up an important field of inquiry that could be critically important to the development of treatments within the field of regenerative medicine.

I understand that some may be interpreting my research as a substitute for the need to pursue other forms of regenerative medicine therapies, such asthose involving embryonic stem cells. I disagree with that assertion. It is very possible that research involving embryonic stem cells will have critical implications for advancing research into amniotic fluid stem cells. It is essential that National Institute of Health-funded researchers are able to fully pursue embryonic stem cell research as a complement to research into other forms of stem cells.

Your legislation, the Stem Cell Research Enhancement Act of 2007, H.R. 3, would update the current federal embryonic stem cell policy and allow federally funded researchers to conduct research on an expanded set of embryonic stem cells within an ethical framework. I believe this legislation would speed science in the regenerative medicine field, and I support its passage.

Sincerely,

ANTHONY ATALA, MD.

The SPEAKER pro tempore. The Chair just would repeat that under a unanimous consent request from the gentleman from Michigan, Members already have permission to insert extraneous material into the RECORD.

Mr. BURGESS. Mr. Speaker, if it is appropriate, I would like to yield 2 minutes to the gentleman from Illinois (Mr. MANZULLO).

The SPEAKER pro tempore. To clarify, the gentleman has 67 minutes, these two would then come out of that, and may at any time rise to be recognized and yield to whomever he wishes.

Mr. MANZULLO. Mr. Speaker, today I rise in opposition to H.R. 3, a bill that compels taxpayers to support the destruction of early human life.

This legislation, which calls for taxpayer funding of embryonic stem cell research, is unnecessary.

First, it is already legal to conduct research on human embryos with private or State funds. It is also legal to conduct research on embryonic stem cell lines that come from human embryos already destroyed prior to August 9 of 2001. Thus, the debate today is not aimed at stopping embryonic stem cell research; it is aimed at prohibiting the Federal funding of it because it is so controversial.

Second, plenty of more successful alternatives of non-embryonic stem cell research already exist and are treating

patients every day. Despite a quarter-century's research in mouse embryonic stem cells and 7 years in human variety, embryonic stem cells have yet to yield any successful clinical trials in humans. Adult stem cells, however, have treated patients suffering from 72 different diseases in published clinical applications. Researchers have also achieved similar results with stem cells derived from umbilical cord blood, treating more than 70 different types of diseases.

And just last week, Wake Forest and Harvard University announced breakthrough technology in amniotic fluids.

In May of 2006, a poll conducted by the International Communications Research showed 48 percent of Americans oppose Federal funding of stem cell research that requires the destruction of human embryos, and only 39 percent support such funding.

I believe the most effective way to counter disease in the long run is to support research that will prevent the occurrence of the disease. That is why I strongly supported efforts in 1998 to double the funding for the National Institutes of Health, which we accomplished over a 5-year period of time. We should continue to prioritize that research and continue to work on the stem cell research that does not involve the taking of the human life.

Ms. DEGETTE. Mr. Speaker, I am delighted to yield now 2 minutes to the distinguished new Member from Tennessee (Mr. COHEN).

Mr. COHEN. Mr. Speaker, I thank the gentlelady from Colorado for her efforts on this issue which are so important to America.

Mr. Speaker, when I think of stem cell research, I think of Ronald Reagan slumbering through the twilight of his life with Alzheimer's, and I think of Christopher Reeve, Superman, laid low by paralysis and the host of physical ailments that accompany paralysis. Those are images we all share in our national consciousness.

When I think of my father's struggles with Alzheimer's, I think how science might one day through stem cell research find a way to prevent others from suffering as he did and as my mother did as his caretaker.

Many people like to frame the stem cell debate as pro-life and pro-choice. For Ronald Reagan and Christopher Reeve, the question was a matter that they had no choice in. And for each public face of a political leader or a movie star, there are thousands of ordinary citizens like my father who suffer daily from diseases for which there are no cures.

My hometown, Memphis, Tennessee, is the proud home of St. Jude Children's Research Hospital. St. Jude is the patron saint of forgotten and impossible causes. Saint Jude's Hospital has given hope where no hope existed. It has made possible the impossible. This is because St. Jude is a research hospital focused on medical advancement.

Let us each remember that science is our friend, not our foe, and we must embrace science. The issue of stem cell research should not be a political football tossed about with callous disregard for the very real suffering of people with Parkinson's, Alzheimer's, spinal cord injuries, cancer, stroke, burns, heart disease, diabetes, osteoarthritis and rheumatoid arthritis. We must not tie the hands of scientists and physicians with the bureaucracy and red tape. We must commit ourselves to the health of our citizenry. Like St. Jude, we must remember the forgotten, and we must have the vision to see possibilities in what appears impossible.

I ask all of my Members to join in voting for this bill.

Mr. BARTON of Texas. Mr. Speaker, I yield 2 minutes to the gentlelady from Florida, the distinguished Congresswoman GINNY BROWN-WAITE.

Ms. GINNY BROWN-WAITE of Florida. Mr. Speaker, I rise today in very strong support of H.R. 3, the Stem Cell Research Enhancement Act.

I stand with 500 of America's most respected research groups in support of this bill. The bottom line is that this bill is about saving and improving lives.

As a mother and grandmother, I fear that the untapped potential of stem cell research may be falling by the wayside. Let us remember, only when the embryo is implanted in a uterus to grow can life be sustained.

Unless a couple has an option of donating remaining embryos, a failure to pay storage fees means the embryos will be disposed of as medical waste.

Listen up, America. H.R. 3 gives us a choice. We can use the promise of embryonic stem cell research to save lives, or we can let that promise be thrown away.

Millions of people around the country support this life-affirming and life-enhancing research. People with cancer, Parkinson's and Alzheimer's want this bill to pass. Your friends and neighbors and your constituents back home want this bill to pass because it gives hope where hope doesn't exist now.

It will let the research on stem cells continue under ethical guidelines and will provide millions of Americans suffering from debilitating and terminal diseases the hope that they need and want.

I urge my colleagues to support this bill. And I certainly commend Ms. DEGETTE, as well as Mr. CASTLE, for their leadership on this bill.

□ 1115

Mr. BURGESS. Mr. Speaker, at this point I would like to recognize and yield 3 minutes to a new Member, the gentleman from Michigan (Mr. WALBERG).

Mr. WALBERG. Thank you for yielding.

Mr. Speaker, I am honored to come before you today and join my distinguished colleagues to address an issue close to my heart. My initial entry into politics came as a member of a right-to-life organization, my home county of Lenawee, Michigan. I am proud to say that during my 16 years in the Michigan House of Representatives, I established a 100 percent pro-life voting record.

As I begin my first term in the U.S. House with the same ardent commitment to the sanctity of life, I want to preface my remarks by saying I wholeheartedly support stem cell research in all cases except one, any form of research that requires the eradication of human life.

The legislation this Congress is considering not only destroys human life and could ultimately lead to human cloning, but also is antiquated. Embryonic stem cell research has seen consistently disappointing and with fruitless results, while nearly every month more studies come out showing that ethical, adult stem cell research continues to flourish.

Just this week my wife and I were heartened to learn about stem cells derived from amniotic fluid and placentas. It is time for Congress to catch up with the remarkable and ethical developments taking place in the scientific community.

In truth, this debate isn't really even about the science of stem cell research, but rather how such research will be financed. Taxpayers should not be expected to fund this research, especially when it continues to be illegal in the private sector, though unsuccessful to date.

On behalf of the men and women in my district and across the pro-life districts of the country, I urge my colleagues to cast a vote for both the sanctity of life and fiscal responsibility.

This vote was made even more personal and poignant to me this past Sunday when I read an article talking about a couple who will be giving birth to a child this next week as a result of having an embryo saved 2 weeks after Katrina hit, where literally National Guard troops, the Governor of Louisiana, troops from Illinois as well, moved literally hell and high water to save not only this couple's embryo, but 1,400 other embryos.

The question comes, if we are going to talk about discarded embryos, or those not wanted, which ones of those 1,400 that were saved as a result of moving hell and high water by our government would be the ones that we would discard?

Mr. Speaker, I would ask my colleagues to support life and to support good science and vote against this proposal.

Ms. DEGETTE. Mr. Speaker, I am delighted to yield 2 minutes to the distinguished new Member from Pennsylvania (Mr. ALTMIRE) for his maiden floor speech.

Mr. ALTMIRE. Mr. Speaker, I rise in support of this bill. Having worked for a large academic medical center, I have

seen the promise that embryonic stem cell research holds for Americans suffering from chronic disabilities such as Parkinson's, Alzheimer's, diabetes, and spinal cord injuries.

We all know people with these disabilities and a vote for this bill is a vote for them. This bill says specifically that it only applies to embryos that would otherwise be discarded by the fertility clinics. So a vote for this bill is a pro-life vote. We must pass this bill for the millions of Americans that suffer from debilitating medical conditions today and the millions more that will tomorrow.

This is something that is deeply personal to me. I am a pro-life Democrat. The reason I am supporting this bill is because this is a pro-life vote. There is nothing more important that we can do in this Congress than to support life. This is a pro-life vote. I urge my colleagues to pass this bill.

Mr. BURGESS. Mr. Speaker, I yield 2½ minutes to the distinguished gentleman from Texas (Mr. NEUGEBAUER).

Mr. NEUGEBAUER. I thank the gentleman from Texas.

Mr. Speaker, I rise today in support of ethical, moral, and effective stem cell research. This debate is not whether embryonic stem cell research is permitted. It already is. This debate is not about whether the Federal Government should fund embryonic stem cell research. It already does. What I do believe is that embryonic stem cell research crosses ethical boundaries, and that is the bigger question today. But given the track record of stem cell research, where should we focus taxpayers' dollars today?

Now, this is bowl season in America, championship season. So we go to the scoreboard to see where we are with stem cell research in this country today, and the score is very clear. Adult stem cell research, there are 72 clinical applications currently available today and more being developed. Where are we with embryonic stem cell research today? We are at zero. So the score today is 72–0.

So you can talk about the ethical and the moral issues, and certainly I stand on the side of life. But when we start talking about one of the other stewardships that this body has, it is what is our responsibility to the taxpayers with the limited amount of dollars that we have for research in this country today. Certainly one of the things that we should be looking at is results, a novel thing for Congress sometimes to look at.

I come from the private sector recently to Congress. We didn't invest our money in things that were losers. One of the things we know today is that currently embryonic stem cell research is not yielding any clinical applications that we can use in an effective way.

So doesn't it make sense that as we sit down and allocate our resources, look at our research patterns as we move forward, we ought to be investing our money where we are getting results? Certainly there are a lot of people who will get up and talk and make emotional appeals. I am not insensitive to that.

There are a lot of people that have huge issues going on today in their lives. One of the things we want to do is make sure that we are applying Federal resources in a way that we can actually benefit from them and not talk about the politics.

So if you want to vote for effective stem cell research in this country today, you are going to want to vote against H.R. 3, the Stem Cell Research Enhancement Act of 2007.

Ms. DEGETTE. Mr. Speaker, I yield myself 2 minutes.

Mr. Speaker, we have heard from several speakers on the other side that allegedly adult stem cells have cured a myriad of diseases. Apparently, the scorecard is now up to 72. In fact, as the researchers have shown, Dr. Shane Smith, William Neaves and Steven Teitelbaum, the opponents say that a myriad of diseases have been cured by adult stem cells, but, in fact, adult stem cell treatments fully tested, fully tested in all required phases of clinical trials, have cured nine conditions, not 65 or 72; and all of those conditions were blood-related conditions.

They were not the kinds of conditions that embryonic stem cells have shown promise for and have shown hope for. Embryonic stem cells have only been around for about 8 years, and the President's restrictions have greatly hampered research; but, nonetheless, these cells show great promise.

The researchers conclude: ''By promoting the falsehood that adult stem cell treatments are already in general use for 65 or more diseases and injuries, Prentice and those who repeat his claims mislead lay people and cruelly deceive patients.''

Mr. Speaker, I yield 2 minutes to the distinguished gentleman from Colorado (Mr. PERLMUTTER).

Mr. PERLMUTTER. I want to thank Congresswoman DEGETTE and Congressman CASTLE for bringing this bill before the House. It is something for me that is personal. I have a child with epilepsy.

Mr. Speaker, quite frankly, this bill holds out promise for millions and millions of people across the country, whether they have Alzheimer's or diabetes or Parkinson's or Huntington's or someone who has epilepsy. It is something that we need to allow science to move forward on. It is this kind of promise, this kind of opportunity, and it is my job, I believe, as a Congressman, and it is this House's job, to improve people's lives. This has been done in so many laboratories, but now is being hampered.

I want to thank Congresswoman DEGETTE and Congressman CASTLE for the way they have managed this particular bill. I want to thank the House for the way it has been civil and respectful of both sides of the aisle on both sides of the issue.

This is one where there are firm convictions on either side. But for someone like me, who has a child with epilepsy, where there is hope, there is promise for her, that she can get better from this disease, this is something we need to pass, we must pass.

This is a pro-life bill, as one of my colleagues said earlier, and I urge the passage of this bill. I ask all of our colleagues to support this bill, and I hope that the President, Mr. Speaker, will take a second look at this and will certify and support this bill and not veto it as he has in the past.

Mr. BARTON of Texas. Mr. Speaker, I yield 3 minutes to the distinguished gentlewoman from Missouri (Mrs. EMERSON).

Ms. DEGETTE. Mr. Speaker, I yield 1 minute to the distinguished gentlewoman from Missouri (Mrs. EMERSON).

Mrs. EMERSON. Mr. Speaker, 2 years ago I talked about the process and the people that convinced me to vote for H.R. 810. I discussed what the idea of pro-life means to me. I remembered my late husband, Bill Emerson, to this body and talked about the victims of cancer and paralysis and muscular dystrophy and dementia in my district and throughout the Nation. We talked about something upon which we can all agree: human life is precious.

It is a sad reality, though, that human embryos are discarded in this country every day. They are certified as waste and disposed of in the earliest stages of their prenatal lives.

Defeating this legislation will not change that fact. Embryos that can't live outside the mother's womb will be discarded regardless of what we do today.

Where we have the opportunity to make a difference is to take the pleuripotent stem cells which hold great promise for medical research and the afflictions I mentioned earlier and use them to help other precious lives survive, to defeat diseases for which we know no cures and to give a fulfilling, meaningful existence to millions. Like all medical breakthroughs, it will take a lot of hard work and a little luck.

But I can't stand in this House today and say to a little boy I know with muscular dystrophy named James, to a young man suffering from paralysis in Campbell, Missouri named Cody, to my daughter's friend, Will, I will not say to them, never. I will not stand in the way of their progress. I will not help them extinguish their dreams for themselves and others with their same afflictions. I will not let any of our short lives be shortened unnecessarily so.

This bill is not about hope. This bill is about the pursuit of cures for diseases that afflict us, diseases that take our loved ones and destroy families and freeze us in single moments of time in which we become helpless. This bill is about fighting back and not letting any part of human life, no matter how small, be wasted.

No one I have met who has urged the support of this issue to me would mind

going to the grave untreated by the benefits of embryonic stem cell research as long as we are trying, as long as we never say never to them. No one I have ever met who has urged the support of this issue to me, Mr. Speaker, would mind going to the grave untreated by the benefits of embryonic stem cell research as long as we are trying, as long as we never say never to them.

Mr. BURGESS. Mr. Speaker, I yield myself 30 seconds.

I would point out in response to one of the previous speakers that embryonic stem cell research has actually been present on the animal model for over 25 years.

Mr. Speaker, it is now my great pleasure to yield 3 minutes to the gentleman from Utah (Mr. BISHOP).

Mr. BISHOP of Utah. Mr. Speaker, in one of my favorite plays of all time, ''Inherit the Wind,'' the attorney Henry Drummond is talking to his client and his client's fiancee about a lesson of life based upon an experience that Drummond had when he was 7 years old, and by his own admission, a self-described expert on rocking horses.

He saw in the store window, Golden Dancer, a rocking horse with a red mane, blue eyes, beautiful gold with purple spots on it, and there would always be a plate glass window between him and Golden Dancer because it would have cost a week of his father's salary. But on his next birthday as he woke, he saw at the foot of his bed, Golden Dancer. His mother had scrimped on groceries, his father had worked nights for a month and they had purchased the very high-priced Golden Dancer.

He jumped out of the bed and jumped on to the rocking horse. As he began to rock, it broke. It busted in half. Golden Dancer was made of rotten wood. Despite all the glitz and glamour around it, it was held together by spit and sealing wax. They had purchased Golden Dancer, but at too high a price.

□ 1130

Often for us as individuals as well as society, we go after Golden Dancers, and they are purchased at too high a price. Embryonic stem cell research in my opinion is a Golden Dancer, and it would be purchased at too high a price. It is a glitzy golden dream that is out there.

Last year we were discussing this bill, a lot of doctors and genetic researchers on this floor, the overwhelming majority of whom were opposed to this process, because we can do the research without having to go through objectionable processes and procedures to do it, without having to deal with the issue of innocent life.

If embryos are being destroyed, it is not right that taxpayer money should be used to expand that process in what I find to be a morally objectionable way and objectionable process regardless of what that Golden Dancer may or may not be. To me, this is still an issue of ethics: Does the manner in which we spend our tax dollars promote a policy that one form of innocent life at a stage is more important than another innocent life at a different stage? Will we, by our tax policies, condone tax spending, condone a policy that says innocent life can be destroyed for utilitarian purposes? Because if we do that, whatever the reason may be, in my contention that cheapens society and it cheapens us, and it gives us a cavalier attitude of life at the beginning of the process which leads to a cavalier attitude of life at the end of the process and who knows in between.

This is a Golden Dancer that for me is too high a price for what it does to us as a people and as a society.

Ms. DEGETTE. Mr. Speaker, I am now pleased to yield 2 minutes to the distinguished new Member from Ohio (Mr. SPACE).

Mr. SPACE. Mr. Speaker, I rise today to ask you to support Federal funding of embryonic stem cell research. My remarks today are made, Mr. Speaker, both as a legislator and as a father.

My wife, Mary, and I are the proud parents of two beautiful children. My youngest child, my son, Nicholas is 16 years old. He is a great kid, typical in so many ways. He loves football, argues with his sister and struggles with the awkward challenges of adolescence. But Nicholas also suffers from juvenile diabetes.

For the last 10 years, he has waged a battle against this devastating disease, undergoing thousands of injections and blood tests. He has done so without complaint and without self pity as his parents, my wife and I, are extraordinarily proud.

As Nicholas approaches adulthood, Mr. Speaker, our family fears for what the future brings. For as difficult as this disease is to live with on a daily basis, most troubling of all is what potentially awaits someone who suffers from this disease: amputations, blindness, kidney failure, even premature death.

Mr. Speaker, we have before us not simply an opportunity to help my son and the millions of other Americans who depend upon the promise of this science; we have an obligation. This research represents the only meaningful hope for a cure in my son's lifetime.

While this measure is likely to pass, our President is likely to veto it. I am addressing my remarks not to the cameras, not to those who are inclined to vote for this legislation, but to those of you who do not have the will to stand up to a Presidential veto. We as a Congress must be resolute in making life better for our citizens. We are compelled to promote a society where the value of life rules supreme, where compassion prevails and where light overcomes darkness.

The measure before you does not destroy life; it potentially gives life to those who need it, and it affords purpose to embryos that are otherwise destined for destruction. There is no time to wait. For every hour we debate, lives are being lost. This is no Golden Dancer. This is indeed a golden opportunity.

Mr. BURGESS. Mr. Speaker, at this time, I yield 3½ minutes to the gentlewoman from North Carolina.

Ms. FOXX. Mr. Speaker, some of my colleagues who have spoken before me on the side of life have been extremely eloquent, and I am very glad that they have spoken this morning.

I have listened to the debate this morning, and I want to say that many people are very cynical about our government and about Congress in general, and I can understand why this debate would make even more people cynical. To say to the American people that by approving more Federal dollars to do embryonic stem cell research would cure all of these diseases that are brought out and that those of us who oppose spending more Federal dollars on embryonic stem cell research are stopping the advance of science is one of the most cynical things I have ever heard said on this floor and, I think, will tend to make more people think that Members of Congress who are pro-life are cruel and unkind.

As my colleagues have said, the score board is 72–0. Nothing efficacious has come out of embryonic stem cell research in 25 years of research. In fact, a lot of negative things have happened. And to mislead the American public is cruel. It is just absolutely cruel to make people think again that they could be cured.

Thirty years ago, I lost a side of my right eye completely from a detached retina. You can't implant retinas. You can't transplant retinas. The only thing that could possibly help me would be a new retina to be grown.

So I support stem cell research. I support Dr. Atala's work in North Carolina at Wake Forest because they are actually growing organs from people's own stem cells. That research has enormous potential. Adult stem cell research has done good things. Embryonic stem cell research creates tumors and rejection. Dr. Atala would tell you that himself. It is not the way to go.

What we need to be doing is promoting stem cell research and to do all that we can. My husband is diabetic. I am very empathetic to the fact that research could do a lot to help us with diseases, but this is not the route to go. Killing human life does not have to be accomplished to create efficacious treatments for people and diseases.

Again, I am so disappointed in the way this has been presented to the American people. We are doing embryonic stem cell research. Embryonic stem cell research and stem cell research are two different things. My colleagues never use the word embryonic. They always say stem cell research. Pro-lifers support stem cell research; we just don't support the destruction of life to get there.

Ms. DEGETTE. Mr. Speaker, I yield myself 1 minute.

Mr. Speaker, the previous speaker alleged that Dr. Atala, who is doing the embryonic stem cell research, said that it is not the way to go, that embryonic stem cell research is not the way to go.

In fact, in the letter that my distinguished colleague Mr. CASTLE has already submit for the record, Dr. Atala specifically says that amniotic stem cell research is not a substitute for embryonic research. And he further says: It is essential that National Institutes of Health funded researchers are able to fully pursue embryonic stem cell research as a complement to research into other forms of stem cells.

Mr. Speaker, I am very pleased to yield 2 minutes to the distinguished new member from Connecticut (Mr. MURPHY).

Mr. MURPHY of Connecticut. I thank the gentlewoman from Colorado.

Mr. Speaker, if I could just tell one story about a small State in the northeast, Connecticut, a place where we made 2 years ago a historic $100 million investment in stem cell research. And there will be others that will speak much more ably about the moral and ethical and scientific rationales for the bill before us; let me talk about the practical rationales from our standpoint in Connecticut.

Our success investing $10 million a year in stem cell research was a bittersweet one, because it was only made necessary by the failure of the Federal Government to act on this question. We responded to the cries of thousands of families throughout Connecticut that wanted us to give them not only hope but tangible support when it came to researching cures and treatments for the diseases that afflicted their family members.

The problem being that, because of the Federal prohibition on the use of Federal funds for scientific research, Connecticut is now having to do back flips to find ways to invest our money. We are having to invest in bricks and mortar, invest in stealing sciences from other of the few remaining States that allow for State funding of stem cell research.

This is a highly inefficient means to spend the State of Connecticut's money, and one of the reasons that I was sent down to this august body was to make stem cell research, to make investment in scientific research, not a 50-State strategy, but to make it a national priority.

We hear from people on the other side of the aisle, I think, a very wise caution that we shouldn't make promises today or throughout the debate that embryonic stem cell research will definitely lead to a cure of this disease or a treatment for that disease. But the point being here is that there are no promises, there are no guarantees, but that what our families wants is a removal of the ceiling that we have placed on scientific research in our States and our Federal institutions so that that hope may become a reality.

From the citizens of Connecticut who have made great strides on this, as the author of that bill in the State of Connecticut, I am very proud, ten times prouder than I was to vote for it in the State of Connecticut, to vote for it today.

Mr. BURGESS. Mr. Speaker, I am now pleased to yield 2 minutes to the gentlewoman from Ohio (Mrs. SCHMIDT).

(Mrs. SCHMIDT asked and was given permission to revise and extend her remarks.)

Mrs. SCHMIDT. I thank the gentleman for yielding to me.

Mr. Speaker, I rise in opposition to H.R. 3, and urge a ''no'' vote on this question before the House. I strongly oppose H.R. 3, the Stem Cell Research Enhancement Act. A human embryo is human life.

H.R. 3 would use Federal tax dollars, tax dollars of hardworking Americans to fund the destruction of human life. This research is already permitted. The debate is not about stopping it but about who is going to pay for it.

To my colleagues who support this legislation, I share your concern for finding future medical treatments to improve lives, but disagree with your focus on embryonic stem cell research. There are other promising techniques to produce stem cells, techniques that do not involve the destruction of human life. Moreover, these techniques have actually achieved results. Cord blood has saved the lives of people with leukemia and other blood-related diseases.

This week a series of encouraging research reports reveal the promise of stem cells obtained from amniotic fluid. These share the characteristics of embryonic stem cells, but obtaining them does not damage the embryo. We should focus on funding alternative sources of stem cell research, something we can all support.

H.R. 3 advances the proposition that this body must choose between science and ethics. That is not the case. Let's be aggressive in looking at alternative ways to save human lives through stem cell research, ways that do not compromise our moral values and the lives of the unborn.

I ask my colleagues to vote ''no'' on this bill and work towards finding and funding methods that do not involve the destruction of human life.

Ms. DEGETTE. Mr. Speaker, I am now delighted to yield 2 minutes to another new Member, the distinguished gentleman from Pennsylvania (Mr. PATRICK J. MURPHY).

Mr. PATRICK J. MURPHY of Pennsylvania. Mr. Speaker, I rise today as an original cosponsor of this legislation and a strong supporter of the medical miracle of embryonic stem cell research.

Mr. Speaker, there is a woman named Shelbie Oppenheimer who is watching today in my district of New Hope, Pennsylvania, who simply wants to see her 8-year-old daughter Isabella go to her senior prom in 10 years.

Shelbie lives with her husband Jeff and their 8-year-old daughter, and over a decade ago, Shelbie was diagnosed with ALS, Lou Gehrig's disease. She was 28 years old. Shelbie vowed to fight the disease and looked at embryonic stem cell research as her best and perhaps only hope to fill her dream of seeing her daughter grow up.

□ 1145

Now confined to a hospital bed in her own living room, Shelbie continues to fight on. Though forced to speak through a respirator, she told me, ''PATRICK, my voice is too soft to be heard, so please tell my story.''

There are countless stories of heartache and hope across America just like Shelbie's. Mr. Speaker, I know Shelbie is watching us today, and I hope we make her proud.

Mr. BARTON of Texas. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from the Keystone State of Pennsylvania (Mr. DENT).

Ms. DEGETTE. Mr. Speaker, I would be delighted to yield 1 minute to the gentleman from Pennsylvania (Mr. DENT).

(Mr. DENT asked and was given permission to revise and extend his remarks.)

Mr. DENT. Mr. Speaker, I rise today in strong support of H.R. 3, the Stem Cell Research Enhancement Act of 2007.

Although the purpose of this legislation is straightforward, the significance cannot be understated. H.R. 3 would expand the limited number of embryonic stem cell lines currently available for federally funded research. Permitting research on additional embryonic stem cell lines will advance a field that scientists agree holds the greatest potential to provide groundbreaking therapies for some of the most vexing diseases of our time.

I believe stem cell research, all forms of stem cell research, adult, cord blood, amniotic, embryonic, should be pursued. This discussion is not about a competition. The promise of stem cell research, to find treatments for the most devastating diseases like Parkinson's, juvenile diabetes, coronary heart diseases, cancer and spinal cord injuries, is too great not to explore every single possibility.

That said, embryonic stem cell research raises serious ethical questions that have been raised by some of my colleagues today. I strongly believe that H.R. 3 is the most responsible way to ensure that we are observing the highest possible standards of ethical and clinical practice by setting meaningful ethical guidelines for embryonic stem cell research that will serve as the benchmark for scientific study throughout the world. H.R. 3 provides these ethical guidelines.

First, in order to be considered for this research, the donated cells must come from an in vitro fertilization clinic, have been created for the purpose of fertility treatment and be in excess of the clinical need of the individuals seeking treatment.

Second, the in vitro facility has to certify that these cells would be otherwise discarded if not donated and that the cells are not destined for implantation.

Third, the donors of these cells have to sign a written consent form providing for such a donation and confirm that they have not received any inducements, financial or otherwise, to make the donation.

We took one important step last year in Congress in addressing these ethical dilemmas that are raised by this emerging field of science. We enacted a law which prohibits the practice of fetal farming where human fetal tissue would be deliberately created for the purpose of scientific research. H.R. 3 will take another step in ensuring that research is adhered to the highest possible principles of scientific inquiry and respects critical ethical boundaries while advancing some of the most critical research of our time.

Mr. BURGESS. Mr. Speaker, at this time I would like to yield 5½ minutes to the gentleman from New Jersey (Mr. SMITH).

Mr. SMITH of New Jersey. Mr. Speaker, I thank my good friend for yielding.

Mr. Speaker, by now, most of my colleagues know that, on Sunday, a team of scientists from Wake Forest University and Harvard Medical School announced the stunning news that they had discovered a new, readily available source of potentially lifesaving stem cells derived exclusively from amniotic fluid.

For those of us who passionately support extending ethical stem cell research to effectuate cures and mitigate disease, news of this breakthrough was particularly encouraging. News media around the world seemed to appreciate the enormity and the historical significance of the findings. ABC News said, ''Stem cells discovered in amniotic fluid: Researchers say stem cells can be taken from amniotic fluid with no harm to mother or fetus.'' They pointed out that stem cells they drew from the amniotic fluid donated by pregnant women hold much the same promise as embryonic stem cells.

The L.A. Times said, ''Stem cells in amniotic fluid show great promise, a study finds they offer key therapeutic benefits but avoid controversy.''

Mr. Speaker, for those of us who strongly support taxpayer funding for ethical stem cell research, and I would note parenthetically that the Bush administration spent over $600 million on stem cell research at NIH in 2006 alone, the news of this breakthrough suggests that we can and must do more to finance this kind of ethical research.

And for those of us who oppose taxpayer subsidies to facilitate the destruction of human embryos, this latest breakthrough is yet another vindication and underscores the fact that ethical alternatives to embryo-destroying research are available now, and they are likely to expand.

Let me reiterate one more time, especially for the press, that we on the pro-life side strongly support stem cell research as long as it does not require the killing of human embryos. In that vein, let me remind my colleagues that I was the prime sponsor of the bipartisan Stem Cell Therapeutic Research Act of 2005, a law that authorized $265 million for cord blood and bone marrow stem cell programs, including a new nationwide program to collect, research and help disseminate these vital stem cells.

By way of update, last fall, pursuant to the new law, the Bush administration issued contracts to establish a national inventory of umbilical cord blood. Contracts totaling $12 million were awarded and more contracts are expected this year. The establishing of this national cord blood inventory marks the beginning of the effort to increase the total number of available umbilical cord blood units, making lifesaving cord blood stem cells available to Americans in need of a transplant. I believe that is really good news to patients suffering from a myriad of diseases such as sickle cell anemia and leukemia.

Mr. Speaker, it was just 6 months ago, in July, on this floor that opponents of ROSCOE BARTLETT's alternative pluripotent stem cell legislation belittled and scoffed that adult and cord blood stem cells were capable of pluripotency, the ability of stem cells to grow into any cell in the body. Despite the fact that numerous scientists had published findings of pluripotency in cord blood stem cells and adult stem cells, Ms. DEGETTE dismissed alternative sources for pluripotent stem cells as ''fake.''

She called it ''fake research that doesn't really exist'' and that ''alternative methods for creating pluripotent stem cells are not a real scientific prospect at this time.''

Mr. Speaker, that statement was false then, and it is false now. The scientific evidence clearly refutes it. In 2005, researchers from the University of Minnesota Medical School verified that umbilical cord blood stem cells expressed pluripotency genes and can repair neurological damage.

In like manner, researchers at the University of Pittsburgh demonstrated that placental stem cells express pluripotency genes and potentially form any tissue with no signs of tumor formation. As I think my colleagues know by now, tumor formation is a catastrophic problem with embryonic stem cells.

Recently, researchers in France and Switzerland discovered that they could turn pluripotent bone marrow stem cells into insulin-secreting cells, an important step in curing diabetes, and the list goes on.

And now Wake Forest has come to this same conclusion, this time about amniotic-fluid-derived stem cells. And I will quote from the report. This is their report issued this weekend: ''We conclude,'' the authors say, ''that amniotic-fluid-derived stem cells are pluripotent stem cells capable of giving rise to multiple lineages including representatives of all three embryonic germ layers. Newsweek got it, and they also talked about it as well: ''A New Era Begins: Stem Cells derived from amiotic fluid show great promise in the lab and may end the divisive ethical debate once and for all.''

Let me just finally say, where will this all take us if this bill were to be passed and signed into law? We would see the demise, the destruction over time, if it worked, of millions of embryos. Let me just quote Robert Lanza, medical director of Advanced Cell Technology, an advocate of embryonic stem cell research, who said that because of the likelihood of immune rejection, it may require, his words, ''millions'' of embryos to be destroyed. Is that the future you want to promote with the DeGette bill? Millions of embryos killed? Let's adopt them, as we are seeing now.

PARLIAMENTARY INQUIRY

Mr. BARTON of Texas. Mr. Speaker, parliamentary inquiry.

The SPEAKER pro tempore (Mr. FRANK of Massachusetts). The gentleman may state his parliamentary inquiry.

Mr. BARTON of Texas. What would I need to do to yield the time I am controlling to Mr. CASTLE?

The SPEAKER pro tempore. Make a unanimous consent request to do that.

Mr. BARTON of Texas. Mr. Speaker, I yield the balance of my time to the gentleman from Delaware (Mr. CASTLE) and ask unanimous consent that he be allowed to control that time.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

Ms. DEGETTE. Mr. Speaker, I am delighted to yield 2 minutes to the distinguished new Member from Florida (Mr. KLEIN).

Mr. KLEIN of Florida. Mr. Speaker, my name is RON KLEIN, and I represent Florida's 22nd Congressional District, which is in Southeast Florida. I am truly honored to be here today and to be part of this incredibly important effort led by Congresswoman DIANA DEGETTE and Congressman MIKE CASTLE, both of whom have been relentless crusaders toward leading this bipartisan effort in Congress to expand the use of embryonic stem cell research.

As a member of the Florida State Senate for the past 10 years, leading efforts to utilize and fund embryonic stem cell research was not just a priority of mine but a passion. We all have our own family stories about why medical cures need to be discovered today, not 10 years from now.

In my district, which includes Ft. Lauderdale, Boca Raton, Pompano Beach and West Palm Beach, we have so many retirees who moved to Florida to live out their golden years. But as they age, as we know with our own

families, many of them are afflicted with Alzheimer's, Parkinson's and many other serious ailments. To them, the stem cell battle is critically important, and every day that passes without scientists and researchers having all the tools at their disposal is another day of suffering.

From juvenile diabetes to paralysis, the potential of stem cell research in all of its forms presents one of humanity's greatest leaps toward the ultimate goal of preserving, prolonging and improving the quality of our lives.

Funding stem cell research is also a great investment in our future, not only from a personal health standpoint but also from an economical and cost-efficiency perspective. Finding cures and therapies may reduce the cost of hospitalization and other expensive aspects of our health care system. It will also create careers and jobs in the 21st Century that will lead the world.

I am incredibly proud to be part of this effort to increase stem cell funding resources, and I look forward to casting my vote and doing whatever is necessary to support comprehensive stem cell research and funding in the United States.

Thank you for your attention, your vote, and thank you to the millions of Americans who are watching and waiting.

Mr. BURGESS. Mr. Speaker, at this point I would like to yield 5 minutes to the distinguished gentleman from Georgia, Dr. LINDER.

Mr. LINDER. Mr. Speaker, I thank the gentleman for yielding.

In January of 2005 University of Florida scientist Michael Atkinson, a gene therapy advocate, said: ''Two years ago, the embryonic stem cell field was hype, hype, hype. It is still that way in California, but I think that field has hit a bit of a wall.''

Why? Because after 25 years of animal research, embryonic stem cells have produced not one single instance of cure or even a palliative result. Not one.

They have produced some results, though. Their versatility is now believed to be a disadvantage. As explained in a letter to Senator JOHN KERRY, signed by 57 noted scientists in the fields of biology, microbiology, chemistry and medicine, they said: ''Embryonic stem cells are difficult to develop into a stable cell line. They spontaneously accumulate genetic abnormalities in culture and are prone to uncontrollable growth and tumor formation when placed in animals.''

Why is this such an important issue for politicians? Why don't we pay some attention to what does work?

Multipurpose adult progenitor cells have been or are being assessed in human trials for treatment of spinal cord injury, Parkinson's, stroke, cardiac damage, multiple sclerosis and more. These cells can be taken from the patient so they have no risk of rejection and no ethical problems.

□ 1200

They are showing positive results in 72 different diseases, and I will submit that list for the RECORD.

STEM CELL RESEARCH TREATMENTS—ADULT 72 AND EMBRYONIC 0

[Check the Score: Adult Stem Cells vs. Embryonic Stem Cells Benefits in Human Patients (from Peer-Reviewed Studies).]

Adult Stem Cells	Embryonic Stem Cells
Cancers:	
1. Brain Cancer.	0
2. Retinoblastoma.	
3. Ovarian Cancer.	
4. Skin Cancer: Merkel Cell Carcinoma.	
5. Testicular Cancer.	
6. Tumors Abdominal Organs Lymphoma.	
7. Non-Hodgkin's Lymphoma.	
8. Hodgkin's Lymphoma.	
9. Acute Lymphoblastic Leukemia.	
10. Acute Myelogenous Leukemia.	
11. Chronic Myelogenous Leukemia.	
12. Juvenile Myelomonocytic Leukemia.	
13. Chronic Myelomonocytic Leukemia.	
14. Cancer Of The Lymph Nodes: Angioimmunoblastic Lymphadenopathy.	
15. Multiple Myeloma.	
16. Myelodysplasia.	
17. Breast Cancer.	
18. Neuroblastoma.	
19. Renal Cell Carcinoma.	
20. Soft Tissue Sarcoma.	
21. Various Solid Tumors.	
22. Ewing's Sarcoma.	
23. Waldenstrom's Macroglobulinemia.	
24. Hemophagocytic Lymphohistiocytosis.	
25. Poems Syndrome.	
26. Myelofibrosis.	
Auto-Immune Diseases:	
27. Systemic Lupus.	
28. Sjogren's Syndrome.	
29. Myasthenia.	
30. Autoimmune Cytopenia.	
31. Scleromyxedema.	
32. Scleroderma.	
33. Crohn's Disease.	
34. Behcet's Disease.	
35. Rheumatoid Arthritis.	
36. Juvenile Arthritis.	
37. Multiple Sclerosis.	
38. Polychondritis.	
39. Systemic Vasculitis.	
40. Alopecia Universalis.	
41. Buerger's Disease.	
Cardiovascular:	
42. Acute Heart Damage.	
43. Chronic Coronary Artery Disease.	
Ocular:	
44. Corneal Regeneration.	
Immunodeficiencies:	
45. Severe Combined Immunodeficiency Syndrome.	
46. X-Linked Lymphoproliferative Syndrome.	
47. X-Linked Hyper Immunoglobulin M Syndrome.	
Neural Degenerative Diseases And Injuries:	
48. Parkinson's Disease.	
49. Spinal Cord Injury.	
50. Stroke Damage.	
Anemias And Other Blood Conditions:	
51. Sickle Cell Anemia.	
52. Sideroblastic Anemia.	
53. Aplastic Anemia.	
54. Red Cell Aplasia.	
55. Amegakaryocytic Thrombocytopenia.	
56. Thalassemia.	
57. Primary Amyloidosis.	
58. Diamond Blackfan Anemia.	
59. Fanconi's Anemia.	
60. Chronic Epstein-Barr Infection.	
Wounds And Injuries:	
61. Limb Gangrene.	
62. Surface Wound Healing.	
63. Jawbone Replacement.	
64. Skull Bone Repair.	
Other Metabolic Disorders:	
65. Hurler's Syndrome.	
66. Osteogenesis Imperfecta.	
67. Krabbe Leukodystrophy.	
68. Osteopetrosis.	
69. Cerebral X-Linked Adrenoleukodystrophy.	
Liver Disease:	
70. Chronic Liver Failure.	
71. Liver Cirrhosis.	
Bladder Disease:	
72. End-Stage Bladder Disease.	

The record of embryonic stem cells today is zero. In an animal model of Parkinson's, rats injected with embryonic stem cells showed a slight benefit in about 50 percent of the rats, but one-fifth of them died of brain tumors caused by the embryonic stem cells.

Just recently, we have heard the promise of research using the mother's amniotic fluid. We have been told by some that we are doing this to give people hope. How cruel. They are not looking to the Federal Government for hope. They are looking to scientists for cures, and adult cells show by far the most promise.

One of the cruelest examples of political demagoguery I have ever heard was in the last Presidential campaign when John Edwards said, ''If JOHN KERRY were President, Christopher Reeve would walk.'' A spokeswoman for the Howard Hughes Medical Institute said, not in response to that, but she said no one in human embryonic stem cells will tell you that therapies are around the corner. Dr. John Edwards seemed not to agree.

We are not here speaking on behalf of the half-therapies that show promise because private capital is flowing into that research. Private investors look for hope, too. They hope to make money, and they invest their dollars where they can do so.

Do you wonder why private investment is not flowing into embryonic stem cell research? Might there be a hidden agenda here? Might there be a hidden agenda at play in this issue? Could it be that the proponents of this bill want to succeed in getting a bill signed into law in which the government approves the ending of a human life? Are we seeking here a way to get the government's imprimatur on ending life that is not useful so that the product of that death can be put to more useful purposes? That is called the Hegelian Principle, that which is not useful can be destroyed for the benefit of useful purposes.

This has been used by governments before. Hitler believed in it. I want to hastily assure everyone on both sides of this issue that I compare no one to Hitler. But he believed that that which was useful was good, and that which was not useful was not good. The first Germans in the gas ovens were not Jews. They were retarded children in Catholic homes cared for by nuns. They were exterminated. The line was then moved slightly, and the next to go were the crippled soldiers from World War I. The line was then moved to include the Jews, and the German people, being desensitized, accepted it. That is what we are doing here today, we are laying down a line between that life which is useful and that which is not. Moving that line in the future will be less of a lift.

In closing, let me point out that if these researchers were taking this embryonic tissue from the just-laid eggs of loggerhead turtles or bald eagles, they would be fined and jailed. Surely we can do as much for humans.

Ms. DEGETTE. Mr. Speaker, I am very pleased to yield 2 minutes to the distinguished new Member from Pennsylvania (Mr. SESTAK).

Mr. SESTAK. I thank the gentlewoman from Colorado for yielding.

Mr. Speaker, I rise today in support of this bill, H.R. 3. While I am about to

talk to a personal story, the issue of stem cell research is not just personal, it is much more than that.

A year and a half ago, I retired from the U.S. Navy as my then-4-year-old daughter, Alex, was diagnosed with a malignant brain tumor. She is here today thanks to the wonderful medical treatment that she received from our Nation's doctors and nurses including high-dose chemotherapy with stem cell infusion.

The medical coverage I received from our country as a military member allowed my daughter to receive the best care it had to offer, the care every American child should have access to. And that is why I ask to speak to this bill today above all others.

The best of medical care today may not be good enough for tomorrow. Take a case such as my daughter's: there is a chance that brain tissue may be harmed by the very treatments intended to save young lives.

Why would we preclude the medical promise that stem cell research offers for tomorrow's recuperative treatment or cure, not just for my daughter, but for all those Americans whose lives are inflicted by serious disease, or who now pass prematurely from us when they might not?

Embryonic stem cell research may mean that every day 3,000 of our loved ones affected by Alzheimer's, Parkinson's, or diabetes or spinal cord injury might have the quality and the full time of life they would not otherwise have.

I thought about life every day as I lived in the pediatric oncology ward at Children's Hospital, just down the street from here. I always wondered if the children there would have a chance to experience life to its fullest.

I understand debates, and I respect those couched in moral terms; but when the bargain we are offered is the opportunity that a child might live, how can we not strike that bargain?

I would hope that we would not let young or old lives be shortened by the worst of plagues, which is, ''what might have been'' for them. For the promise of life, its quality, is the congressional tasking we are most charged with to promote the general welfare. I urge all my colleagues to support this bill.

Mr. BURGESS. Mr. Speaker, I am pleased to yield 3 minutes to the gentleman from Pennsylvania (Mr. TIM MURPHY).

Mr. TIM MURPHY of Pennsylvania. I thank the gentleman from Texas for yielding.

Mr. Speaker, over 200 years ago, Thomas Jefferson told us: ''I tremble for my country when I reflect that God is just and that His justice cannot sleep forever.'' Although he was talking about the issues of the day, those words ring true for all of us in this Chamber because all of us want to do the right and the just thing. Our words here for or against embryonic stem cell research will not change what is true and just. We seek knowledge, we pray for wisdom, but our thinking does not make it so in one way or the other.

I believe life begins at conception. Others do not. If we are to err on any side, on what side should we err? There are opinions on each side of this issue about when life begins. There are common opinions that we all must work together to help treat disease. There is confused information regarding what works. Research tells us adult stem cell research works. Amniotic stem cell research has been revealed to have much promise. Embryonic stem cells after 20 years of research tells us it does not.

What is important to know is there is nothing in Federal law that limits academic research. We do not stop the States from pursuing research. We do not limit private companies. Research has not been hampered. And nothing is stopping research from treating disease. What we are all commonly pursuing is ways to treat disease, and our concern is how do we do this in a just and ethical way.

When I would be involved in pursuing medical research studies at the University of Pittsburgh, we had to put forth our study in front of the human subjects review panel. They scrutinized research very carefully to make sure it did no harm to anyone. Sometimes what one researcher considered to be a small and innocuous risk, others said, no, you cannot get involved in that portion of research. Whatever it is, sometimes just evaluating the outcome of some treatment on a child that someone thought, as small as it might be, might be invasive. That was because we were guided by the ethical principle of ''first do no harm.''

But here we are faced with recent studies that say amniotic stem cell research has tremendous promise, and for some reason we are rushing this week to say we must pass this bill on embryonic stem cell research when perhaps we should really be pursuing further scientific information so this House can do its job with hearings, with gathering information to give us the knowledge we need and pray for the wisdom we seek.

I hope in all of this that we would continue to be guided by the idea of first doing no harm, and I would hope that we would also look at the fundamental basis of this bill that refers to the idea that these children would otherwise be discarded. I don't think that is a road we want to use.

Ms. DEGETTE. Mr. Speaker, I am pleased to now yield 1 minute to the distinguished majority leader, Mr. HOYER.

Mr. HOYER. I thank the gentlelady from Colorado for her leadership on this issue over the years, and I thank the former Governor of Delaware, our colleague, Congressman CASTLE, for his leadership on this. This bill in my opinion reflects the best in bipartisan cooperation to try to respond to the American public and their concerns and their needs.

Mr. Speaker, today for the third consecutive day in this 110th Congress, the new Democratic majority in the House is considering very important legislation that will pass on a bipartisan basis. On Tuesday, we passed legislation implementing the 9/11 Commission's recommendations to make America safer. That bill passed 299–128 with 68 Republican votes. Yesterday we passed a long overdue increase in the Federal minimum wage by a vote of 315–116 with 82 Republican votes. That is a positive message to the American public that we can and we want to work together. There will not be unanimity, but today we will pass H.R. 3, the Stem Cell Research Enhancement Act of 2007, legislation offered, again, by the gentlewoman from Colorado and the gentleman from Delaware.

Mr. Speaker, it is not a bold prediction to say that this legislation will pass today, because this House approved identical legislation last May by a vote of 238–194 with 50 Republicans joining 187 Democrats and one Independent. There are, as that vote reflects, bipartisan concerns about this legislation. It is my personal belief that they have been addressed in this legislation carefully drafted to do so. The Senate passed the bill by a vote of 63–37 before the President vetoed it last July.

Mr. Speaker, in short, the DeGette-Castle bill would increase the number of embryonic stem cell lines eligible for federally funded research. Current policy limits, as we all know, the use of Federal funds for research only to those stem cell lines that existed when President Bush issued an executive order on August 9, 2001. This policy severely restricts the potential for life-saving breakthroughs because only 22 of those 78 stem cell lines are available for research and a vast majority of those 22 lines are aged, contaminated or have been developed through obsolete methods.

It cannot be stressed enough, Mr. Speaker, that this legislation only authorizes Federal research funds for stem cell lines generated from embryos that would otherwise be discarded by fertility clinics. That seems to me to be a critical consideration for all who will vote on this legislation.

I believe this legislation does not seek to destroy life. Others disagree. I understand that. It seeks to preserve and protect life. In fact, former Senate majority leader Dr. Bill Frist who formerly opposed this legislation but now supports it has stated: ''I strongly believe that embryonic stem cells uniquely hold specific promise for some therapies and potential cures that adult stem cells cannot provide.''

I believe, Mr. Speaker, we have a moral obligation to provide our scientific community with the tools it needs to save lives and this legislation in my view accomplishes exactly that. We understand this is a difficult issue to many Americans and that it raises important questions that humanity

has yet to adequately answer. That is why this legislation also directs HHS and the National Institutes of Health to issue ethical guidelines that will ensure the highest standards of scientific investigation.

Mr. Speaker, this legislation enjoys the overwhelming support of Members of this Congress and the American people, many of whom are affected by diseases such as ALS, Alzheimer's and Parkinson's and injuries of the spinal cord and nervous system. This legislation represents the hope of millions of Americans who are waiting for us to take action. That is why we have urged action early in this session.

I strongly urge my colleagues to support this bill, as they have before; and I urge the President to reconsider his veto when this bipartisan legislation reaches his desk. Again I congratulate Ms. DEGETTE and Mr. CASTLE for working together assiduously and without flagging on behalf of the American people. This is a good bill for our country and for those who face great challenges of health.

□ 1215

Mr. CASTLE. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from Connecticut (Mr. SHAYS).

Mr. SHAYS. Mr. Speaker, the gentlewoman from Colorado and the gentleman from Delaware deserve our thanks for sponsoring the Stem Cell Research Enhancement Act and working with so many families on a bipartisan basis who have been impacted by diseases that may find cures as a result of this vital research. Their work and dedication on this legislation has been tremendous and praiseworthy. I also thank them for giving me the opportunity to cast one of the most important votes I will ever make in Congress.

Almost everyone has lost some family members and friends prematurely. Embryonic stem cell research has the potential to cure disease and save lives, and it is only 8 years old. These are stem cells that come from the inner cells of discarded embryos that were never in a mother's womb, are being destroyed as we speak. Thus, this is not a matter of pro-life versus pro-choice, but rather a matter of humanity and the potential of life versus disease and the certainty of death.

I am grateful the new Democratic leadership is making this legislation a priority in this Congress, just as I was grateful the Republican leadership gave us an opportunity for clean up-or-down vote on legislation in the last Congress.

I pray we pass the Stem Cell Research Enhancement Act of 2007 and that the President reconsiders his position and signs this bill into law. Sometimes ideology can box you in and cause you to make wrong and harmful decisions. I think it is time we recognize the dark ages are over. Galileo and Copernicus have been proven right. The world is in fact round. The Earth does revolve around the sun.

I believe God gave us the intellect to differentiate between imprisoning dogma and sound ethical science, which is what we must do here today. I want history to look back at this Congress and say in the face of the age-old tension between religion and science, the Members here allowed critical scientific research to advance while respecting important ethical questions that surround it.

Mr. BURGESS. Mr. Speaker, I yield 3 minutes to the distinguished gentleman from Indiana (Mr. SOUDER).

Mr. SOUDER. I thank the gentleman.

Mr. Speaker, today I rise in opposition to the taking of human life. The question that is before the House is whether or not the Federal Government should force taxpayers to fund a procedure that requires the destruction of innocent human life.

Congress has always refused to allow this on the issue of abortion, only allowing Federal funding if the pregnancy endangers the life of the mother or is because of rape or incest. There is no reason why this same principle should not apply here. Even President Clinton's bioethics council, the National Bioethics Advisory Commission, wrote in 1999 that most would agree that human embryos deserve respect as a form of human life.

Is it showing respect to kill embryos for research? To allow the seeds of the next generation to be used for the doubtful sake of our own? Furthermore, does it show respect to the consciences of Americans who oppose the research to provide public funding for it?

President Clinton's bioethics council also wrote that the derivation of stem cells from embryos remaining following infertility treatments, the killing of embryos that H.R. 3 would encourage, is justifiable only if no less morally problematic alternatives are available for advancing the research.

Regrettably, the supporters of this bill seem to have forgotten that advice, and their continued support for embryonic stem cell research seems to display ignorance at the recent developments of stem cell science. Far less morally problematic alternatives are exactly what scientists are continuing to find. We have heard this referred to several times.

This was the front page of the Fort Wayne News Sentinel just last weekend: ''Stem cell find gives new hope to compromise.'' In this, in addition to the hearing that we had last year, where we heard multiple scientists receive testify of promising advances in non-embryonic stem cell research, what he points out here is ''the fetus is swallowing fluid and breathing in through the nose. Not only does it travel through the respiratory tract, it gets into the gastrointestinal tract, the bladder and the kidney. The stuff is chock full of fetal cells.''

They are no longer combined but are separated, and that is why the research is working, and that is why so many scientists don't even believe embryonic stem cells will ever work.

There are two fundamental questions here: What is the science, and, in this case, we have proven research that is working and additional research that shows incredible promise of working; versus embryonic stem cell going on for 25 years, not 8 years, that is, in humans, 25 years with nothing. Not a single animal. Nothing has worked in embryonic stem cell research. Yet we are underfunding the research that actually works. Why?

I would argue the second point, and that is it is political. It has to do with the fundamental question of abortion. We have deep differences in America and in here on the taking of innocent human life at conception, deep differences and honest differences.

But why should I, with my view, be forced, and the many Americans who believe this is the taking of innocent life and killing and murder for that matter, why should we be forced to pay for it? I just do not understand the intensity of trying to drive this down our throats.

Mr. Speaker, I rise today in opposition to the taking of human life.

Mr. Speaker, the question that is today before the House is whether or not the Federal Government should force taxpayers to fund a procedure that requires the destruction of innocent human life. Congress has always proudly refused to allow this on the issue of abortion, only allowing federal funding if the pregnancy endangers the life of the mother or is due to rape or incest. There is no reason why the same principle should not apply here.

Even President Clinton's bioethics council, the National Bioethics Advisory Commission) wrote in 1999 that ''[M]ost would agree that human embryos preserve respect as a form of human life.'' Mr. Speaker, is it showing respect to kill such embryos for research—to allow the seeds of the next generation to be used for the sake of our own? Furthermore, does it show respect to the consciences of Americans who oppose this research to provide public funding for it?

President Clinton's bioethics council also wrote that, ''the derivation of stem cells from embryos remaining following infertility treatments''—the killing of embryos that H.R. 3 would encourage—''is justifiable only if no less morally problematic alternatives are available for advancing the research.'' Regrettably, supporters of H.R. 3 seem to have forgotten this advice, and in their continued support for embryonic stem cell research seems to display ignorance at the recent developments of stem cell science, for less morally problematic alternatives are exactly what scientists are continuing to find.

Mr. Speaker, as scientists have worked to find useful therapies using embryonic stem cells, such research has encountered only problems. Such stem cells have shown to be too unstable and likely to form tumors when transplanted into adult tissues. Indeed, despite more than 80 research projects investigating human embryonic stem cells funded by the National Institutes of Health since 2002, to date there have been no verifiable reports of any human clinical trials being conducted using embryonic, not adult, stem cells—in the U.S. or anywhere else.

Despite these facts, the sponsor of H.R. 3 has stated publicly that embryonic stem cell research could help cure diseases that affect 110 million Americans. Unfortunately, scientists have been complicit in this deceit. For example, to justify this hype, stem cell researcher Ron McKay has said bluntly that people need a fairy tale.

Meanwhile, adult stem cell research continues to show increasing promise. There are currently 72 therapies showing human benefits using adult stem cells. In fact, it seems our whole scientific paradigm of cellular development has been wrong. It now appears that stem cells do not lose their pluripotency as they develop from the embryo to differentiated tissue types, and that adult stem cells are much more elastic than previously thought. This means that embryos are no longer the unique source of pluripotent stem cells we once thought they were. Pluripotency is the real goal; and if that can be found in adult stem cells, embryonic stem cells and the destruction of human life are no longer necessary.

In conclusion, Mr. Speaker, I ask my opponents to consider that they do not need to believe a human embryo is the moral equivalent of a child in order to oppose this bill. Rather, they need merely to consider the drastic step it would be to provide public sanction—through federal funding—for life-destructive research that has, at best, ambiguous potential; when more promising and more ethical alternatives are available. Most importantly, Mr. Speaker, this bill and this research are morally wrong, but also, they are simply unnecessary. I urge my colleagues to oppose H.R. 3.

HOUSE OF REPRESENTATIVES,
COMMITTEE ON GOVERNMENT REFORM,
Washington, DC, July 17, 2006.

EFFORTS TO DISCREDIT ADULT STEM CELL ADVANCES OR ''SCIENCE BY FAIRY TALE''

This week's debate on federal funding for embryonic stem cell research is full of disinformation. Among the many pieces of distortion you may come across is a recent letter published in ScienceExpress, written to discredit Dr. David Prentice, a high profile critic of embryonic stem cell research. Dr. Prentice is formerly Professor of Life Sciences at Indiana State University, and Adjunct Professor of Medical and Molecular Genetics for Indiana University School of Medicine. He is now Senior Fellow for Life Sciences, Center for Human Life and Bioethics, at the Family Research Center.

Apparently, in the ''open-minded'' spirit of scientific inquiry, since Dr. Prentice opposes destructive embryonic stem cell research (as do more Americans, when fully informed about the nature of the research), his credibility is being attacked by ''scientists'' who have an agenda of research-at-all-costs-including-creation-of-human-embryos-purely-for-destructive-research.

I am attaching Dr. Prentice's useful guide demonstrating the 72 adult stem cell applications for humans. I also want to emphasize, that after twenty- five years of embryo stem cell research, there are zero human applications for using embryonic stem cells in patients.

I am also attaching a response to the distortions printed in ScienceExpress—distortions which I expect will be abused in this week's debate. As this response points out, illuminating the scientific facts about embryonic vs. adult stem cell research:

''It remains absolutely true that adult stem cells have benefited patients suffering from at least 72 diseases and conditions, where patient improvement is documented by peer-reviewed scientific publications.''

Pointing out that ClinicalTrials.gov shows 565 currently active FDA-approved clinical trials (and a total of 1170 total trials, including those that no longer need to recruit patients), the response also notes this critical fact about embryonic stem cell research:

''There are no human trials of embryonic stem cells, and there never have been. Nor are there any peer-reviewed references for human treatments with embryonic stem cells, because animal trials have yet to show that embryonic stem cells are safe or effective enough to initiate even Phase I human trials for any condition.''

I hope this information is helpful to you.

DO NO HARM, THE COALITION OF AMERICANS FOR RESEARCH ETHICS,
Washington, DC.

MISLEADING, OR AN INCONVENIENT TRUTH?

Do No Harm is disappointed to see a new low in scientific publishing with Science's June 13 online posting of a Letter to the Editor that is a transparent personal attack on Dr. David Prentice, a founding member of Do No Harm.

The Letter purports to analyze Do No Harm's list of adult stem cell treatments, which lists diseases and conditions in which human patients have benefited from stem cell treatments and provides peer-reviewed references on these trials. Do No Harm clearly states that these are simply cases where adult stem cells have shown ''benefits to human patients'', have produced ''therapeutic benefit to human patients''; Dr. Prentice is quoted here as saying that adult stem cells have ''helped patients.''

But the authors of the Letter engage in semantic gymnastics, creating a straw man so they can knock it down and then claim they have discredited Do No Harm. They twist our statements into claims that these treatments all currently provide a ''cure,'' are ''generally available,'' or are ''fully tested in all required phases of clinical trials and approved by the U.S. Food and Drug Administration.'' (Such a claim would have been ridiculous, in part because some dramatic advances have occurred in other countries where FDA approval is not a relevant factor.)

Regarding two diseases, the Letter implies that the list cites only one peer-reviewed reference and does so inaccurately. However, the Letter's supplement acknowledges an additional four references showing ''improved long-term survival'' for patients receiving adult stem cells.

Do No Harm thanks the Letter's authors for pointing out some references that were inadvertently included, as well as some new references to include, so the list could be properly updated. Dr. Prentice is submitting a formal response to Science, and we hope the journal will belatedly give him the courtesy of a published reply. This courtesy is normally accorded by prior notice, and simultaneous publication of the response with an original Letter of this nature.

That the authors of the Letter should bring up the subject of FDA-approved clinical trials is especially odd, because the federal government documents a great number of current trials using adult stem cells at various phases of investigation. A check of ClinicalTrials.gov shows 565 such trials currently active and recruiting patients, and a total of 1170 trials in all (including trials that no longer need to recruit more patients). There are no human trials of embryonic stem cells, and there never have been. Nor are there any peer-reviewed references for human treatments with embryonic stem cells, because animal trials have yet to show that embryonic stem cells are safe or effective enough to initiate even Phase I human trials for any condition.

It remains absolutely true that adult stem cells have benefited patients suffering from at least 72 diseases and conditions, where patient improvement is documented by peer-reviewed scientific publications. There are likely others, undoubtedly more to come, and many more accounts of people who have benefited from such research. That is the real success of adult stem cells: helping human patients. It is a success that no one can claim for embryonic stem cells.

Ms. DEGETTE. Mr. Speaker, I am pleased to yield 2 minutes to the distinguished gentleman from Arizona (Mr. MITCHELL).

Mr. MITCHELL. Mr. Speaker, I thank the gentlewoman.

Mr. Speaker, just a few months ago, the American people sent a clear message to Washington: It is time to expand our investment in embryonic stem cell research. I heard that message loud and clear from my constituents in Arizona who believe as I do that the best way we can honor life is to use science and ethical research to discover treatments for the millions of Americans who suffer from diseases such as Alzheimer's, Parkinson's, Lou Gehrig's and Huntington's disease.

The people of my district understand that we have a moral obligation to invest in embryonic stem cell research because it provides the best hope for a cure for these diseases and many others.

Last year, I met a fellow Arizonan who helped me understand just how important this fight for cures is to so many people and so many families. His name is Phil Hardt, and he suffers from Huntington's disease. Huntington's disease results from the genetically programmed degeneration of brain cells that causes uncontrolled movements, loss of intellectual faculties and emotional disturbances. It is a terrible and agonizing disease that has no cure. But with the promise of embryonic stem cell research, there is hope for a cure.

But, Mr. Speaker, today Phil and people like him all over the country need more than hope. They need action. They need action from this Congress, for us to once again pass this important legislation. And they need action from the President.

Mr. Speaker, I am asking you to urge the President that he has in his hands the opportunity to improve the lives of so many people and help so many families. The American people support ethical embryonic stem cell research, and so does a vast bipartisan majority in Congress. When this legislation reaches the President, I hope he does the right thing, to honor life by signing this legislation into law.

Mr. BURGESS. Mr. Speaker, at this time I yield 3 minutes to the distinguished gentleman from Indiana (Mr. PENCE).

(Mr. PENCE asked and was given permission to revise and extend his remarks.)

Mr. PENCE. Mr. Speaker, I rise today in respectful opposition to H.R. 3, the

Stem Cell Research Enhancement Act of 2007, a bill, Mr. Speaker, that authorizes the use of Federal tax dollars to fund the destruction of human embryos for scientific research.

The late President Ronald Reagan wrote, ''We cannot diminish the value of one category of human life, the unborn, without diminishing the value of all human life.''

The supporters argue that this debate today is between science and ideology or dogma; that destroying human embryos for research is necessary to cure a whole host of maladies, from spinal cord injuries to Parkinson's. But the facts suggest otherwise, and physicians on our side have and will continue to make the case for the ethical alternative of adult stem cell research and new breakthroughs, past and present.

But, Mr. Speaker, the debate over the legitimacy or potential of embryonic stem cells, I believe, is actually not the point of our debate today. We are here simply to decide whether Congress should take the taxpayer dollars of millions of pro-life Americans and use them to fund the destruction of human embryos for research.

This debate is not really about whether embryonic stem cell research should be legal. Sadly, embryonic stem cell research is completely legal in this country and has been going on at universities and research facilities for years. But proponents of this legislation apparently don't want to just be able to do embryonic stem cell research, they want me to pay for it. And like more than 40 percent of Americans, I have a problem with that.

You see, I believe that life begins at conception and that a human embryo is human life. And I believe it is morally wrong to create human life to destroy it for research. But I believe it is also morally wrong to take the taxpayer dollars of millions of Americans who believe that life begins at conception and use it to fund research that they find morally offensive.

This debate then, Mr. Speaker, is not about what an embryo is. This debate is about who we are as a nation. Not will we respect the sanctity of human life, but will we respect the deeply held moral beliefs of nearly half of the people of this Nation who find the destruction of human embryos for research to be morally wrong.

Despite what may be uttered in this debate today, I say again, this debate is not about whether we should allow research that involves the destruction of human embryos. This debate is about who pays for it.

Last year here in Congress, I was surrounded by dozens of snowflake babies, Mr. Speaker, children born from frozen embryos. I couldn't help but think of that ancient verse: I have set before you life and blessings and curses. Now choose life, so that you and your children may live.

It is my fervent hope, Mr. Speaker, and my prayer, as we stand at the crossroads of science and the sanctity of life, that we will choose life.

Ms. DEGETTE. Mr. Speaker, I yield myself 1 minute.

Mr. Speaker, the gentleman from Indiana and several other people have said they don't think taxpayers should fund this research. But, in fact, we have a national consensus in this country in support of taxpayer funding for embryonic stem cell research, 72 percent, to be exact. We fund all other types of this research, so we have this national consensus.

My constituents in the First Congressional District of Colorado, the vast majority, the majority, do not want to fund this war. That doesn't mean, Mr. Speaker, that they don't have to pay their taxpayer dollars.

We should fund this with taxpayer dollars because the NIH and our public institutions are the driving force behind basic research for the private researchers, for the foreign researchers and for all of this wonderful research that is going to, we hope, cure diseases.

Mr. Speaker, I am delighted to yield 2 minutes to the distinguished new Member from Illinois (Mr. HARE).

Mr. HARE. Mr. Speaker, I would like to thank my colleagues, Congresswoman DEGETTE and Congressman CASTLE, for introducing the Stem Cell Research Enhancement Act of 2007 and for their strong leadership on this issue.

Mr. Speaker, last Thursday was a bittersweet day for me. I had the incredible honor of being sworn in as a new Member of the United States Congress in front of my family, friends and constituents. Yet part of me was sad that my friend and mentor, Congressman Lane Evans, wasn't in my place.

Lane served as a distinguished Member of this body for 24 years until Parkinson's disease forced him to retire at the end of the 109th Congress. Lane's battle with Parkinson's is a testament to his incredible spirit that never caused him to ask, Why me, although retiring meant he had to leave Congress when there was still so much he wanted to do, helping veterans, working families and his constituents.

Mr. Speaker, Lane is just one of millions of Americans struggling with chronic illnesses that are curable with the advancement of stem cell research.

Spencer House is the son of my very good friend Doug. He suffers from diabetes and must take four insulin shots each and every day. But Doug is encouraged by the hope that lies in embryonic stem cell research to offer his son a more normal life. And he is not alone. Poll after poll shows that the majority of Americans support ethical embryonic stem cell research as a way towards preventing others from having to live with illnesses like Parkinson's disease, diabetes, cancer, Alzheimer's and spinal cord injuries.

I am an original cosponsor of this commonsense legislation because the science of stem cell research is clear: Embryonic stem cell research has the potential to treat and cure some of our most debilitating injuries and diseases.

Mr. Speaker, today we decide whether to give the American people hope or continue to prolong the suffering of those who struggle with curable chronic diseases. I urge all my colleagues to vote yes on H.R. 3.

Mr. CASTLE. Mr. Speaker, I yield 1 minute to the distinguished gentleman from Illinois (Mr. KIRK).

(Mr. KIRK asked and was given permission to revise and extend his remarks.)

Mr. KIRK. Mr. Speaker, I thank my colleague from Illinois and rise in strong support of Federal funding to accelerate stem cell research.

□ 1230

In the last Congress, I helped craft the bipartisan consensus to back stem cell research here in the House, and our bipartisan coalition is even stronger today.

America is home to more Nobel prizes in medicine than any other nation. Our record of medical achievement led the way to eliminating smallpox and saves half of all people diagnosed with cancer. This legislation will help us save the other half. It offers hope to anyone suffering from diabetes, Alzheimer's, and Parkinson's. It represents the strong will of parents and patients who have banded together with effective voices, like the Juvenile Diabetes Research Foundation, the American Heart Association, and the American Cancer Institute.

This legislation offers a powerful message to both political parties, Republican and Democrat, that one of our American legacies is to lead the world in the freedom of intellectual inquiry, in scientific research, in medical science, and especially in that most quintessential American value, optimism and the expectation of better days for our children.

Mr. Speaker, this legislation directly supports the research of Dr. John Kessler at Northwestern University and his work to treat spinal injuries, Dr. Mary Hindrix at Childrens and her work to prevent metastasis in cancer and Professor Robert Goodman of Northwestern for his research to explore a cure for ALS.

We are going to pass this bipartisan bill with a thunderous bipartisan majority, sending to the Senate as an expression of the American people as pro-research, pro-science pro-American leadership and supporting hope for patients everywhere.

Mr. BURGESS. Mr. Speaker, I reserve my time.

Ms. DEGETTE. Mr. Speaker, I am delighted now to yield 1 minute to the distinguished new Member from New York (Mr. HALL).

(Mr. HALL of New York asked and was given permission to revise and extend his remarks.)

Mr. HALL of New York. I thank the gentlewoman. Today, I rise in support of H.R. 3, the Chamber's effort to improve the lives of millions of Americans by once again advancing the Stem Cell Research Enhancement Act.

For many Americans, including relatives and friends of mine who suffer from the effects of Alzheimer's, Parkinson's, paralysis, and other devastating illnesses, embryonic stem cell research provides the hope of a better life or even perhaps a cure.

Last year, Johns Hopkins University released the results of stem cell therapy tests on frogs in the laboratory using frog embryonic stem cells which showed paralyzed frogs recovering the use of their hind quarters. Now, one can't necessarily extrapolate from laboratory experiments to humans; but until we try, we will not know.

There has been a lot of debate about this bill, what it is and what it is not. I would just suggest that by allowing the Federal Government to support research on embryonic stem cells, regardless of when they were derived, this bill will allow science to move forward unimpeded in the quest to cure some of our most crippling diseases.

Mr. Speaker, today I rise to speak in support this chamber's effort to improve the lives of millions of Americans by once again advancing the Stem Cell Research Enhancement Act.

For many Americans suffering from the effects of Alzheimer's, Parkinson's, paralysis, and other devastating illnesses embryonic stem cell research provides the hope of a better life, or even perhaps a cure.

There has been a lot of debate about what this bill is, and what it isn't.

What this bill is an opportunity to expand the resources the federal government can bring to bear in supporting breakthroughs in medical technology.

Under current policy, only stem cell lines derived before August 2001 can be used for research. But according to the National Institutes of Health, of the 78 stem cell lines that were declared eligible for federal funding by the President, less than one third are still available.

To make matters worse, many of the available lines are contaminated with ''mouse feeder'' cells, making their therapeutic use for humans uncertain.

By allowing the federal government to support research on embryonic stem cells regardless of when they were derived, this bill would allow science to move forward unimpeded in the quest to cure some of our most crippling diseases.

What this bill isn't is an attempt to devalue human life.

Under this bill, stem cells could only be used for research if they would never be used by fertility clinics and be discarded, and only if the donor of the embryo gave full consent.

Instead of being discarded, these embryos could help researchers unlock the cures to Parkinson's, Alzheimer's, MS, cancer, and other conditions. Certainly, advancing these goals is consistent with a reverence for human life.

Last year, Congress overwhelmingly passed this bill on a bipartisan basis, and it's clear that the majority of the American people want this research to go forward.

It is my sincere hope that we will again pass this bill by an overwhelming and bipartisan margin, and send it to the President for his signature.

I would urge the President not to repeat his previous mistake of allowing ideology to trump science by vetoing this bill. Instead of placating his narrow political base, the President should heed the will of the great majority of the American people by signing this bill into law.

Mr. BURGESS. Mr. Speaker, I reserve the balance of my time.

Ms. DEGETTE. Mr. Speaker, I am delighted to yield now to the gentleman and new Member from Kentucky (Mr. YARMUTH) 1 minute.

(Mr. YARMUTH asked and was given permission to revise and extend his remarks.)

Mr. YARMUTH. I thank the gentlewoman.

Mr. Speaker, the progress that has been made of late in the area of adult and amniotic fluid stem cell research is astounding. In my own district, the University of Louisville is curing paralysis in lab animals using adult stem cells. But with each new discovery, the scientists say the same thing: none of these areas of research can replace the vast unique and still unchartered potential of embryonic stem cells.

Politics interfering with scientific advancement is nothing new. In Louisville, public controversy was a major obstacle before our pioneering doctors successfully implanted the first artificial heart and performed the first hand transplant. Had the politics of the day prevailed, additional lives would have been lost and incredible progress halted.

Today, again on the cusp of discoveries that could save lives, we find ourselves at a similar crossroads. Will we aid progress or impede it?

And none—not one of the embryos in question could ever grow into a human life. The researchers are speaking exclusively of embryos that would otherwise be discarded.

We can no longer afford to let politics stand in the way of science and allow America to fall behind the rest of the world's medical advances, especially now as the research being conducted with embryonic stem cells holds the unprecedented potential to revolutionize medicine. I urge my colleagues to pass H.R. 3.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair at this point would remind Members to be careful not to pass between the Chair and Members speaking and also to be careful not to have conversations in direct proximity to Members who are addressing the House.

Mr. BURGESS. Mr. Speaker, at this time I would like to recognize the gentleman from Nebraska (Mr. FORTENBERRY) for 2 minutes.

(Mr. FORTENBERRY asked and was given permission to revise and extend his remarks.)

Mr. FORTENBERRY. Mr. Speaker, I thank the gentleman from Texas.

Mr. Speaker, I would like to begin with a story. Several weeks ago, I was reading some of our national publications, and I came across a very small article that reported how Swiss scientists were taking amniotic fluid from preborn children, children who had been diagnosed in the womb with heart disease, and they were taking adult stem cells from that amniotic fluid and beginning the process of growing heart valves that would inevitably be placed in those children because of that heart disease.

Mr. Speaker, my spirits lifted. I had hope again. You see, my daughter Kathryn is 6 years old and she suffers from complete atrial ventricular septal defect, a severe form of heart disease. She has had three open-heart surgeries thus far. We are probably looking at a fourth in the coming months, and in that surgery it is likely she will need a mechanical valve which further complicates her difficulties. This is why this article was so meaningful to me.

You see, adult stem cells from bone marrow sources and umbilical cord sources and now amniotic fluid are showing real therapeutic value in the treatment of 72 diseases currently, and this avoids the ethically divisive issue of the destruction of unborn human life, the destruction of unborn human embryos.

Embryonic stem cell research has shown no therapeutic value to date, is highly controversial, and many taxpayers do not wish to have their money spent here. So, Mr. Speaker, I say, why not? Why not invest our limited resources in adult stem cell research that is showing great promise and giving real hope? This is good public policy. This is the right thing to do.

Ms. DEGETTE. Mr. Speaker, I am now pleased to yield to the distinguished gentlewoman from the Energy and Commerce Committee, my colleague, Ms. ESHOO, 2 minutes.

Ms. ESHOO. Mr. Speaker, I thank my colleagues Congresswoman DEGETTE and Mr. CASTLE for the outstanding work they have done in bringing this bill before the House. I am proud to support it, and I think that this is a very important moment for the Congress. Why? Because this bill really represents hope for the American people.

I often say to my constituents that I am in the business of hope, to give hope to people with what I do and the vote that I cast. There is a reason why this bill is an overwhelmingly bipartisan bill, because 72 percent of the American people support stem cell research.

There is only one type of stem cell research that is not funded by the Federal Government today and that is embryonic stem cell research. There are tax dollars for all the others: for cord blood, for amniotic, and for adult. That is why we have the bill before us today.

We all have constituents, we all have members of our families that have diseases that have befallen them and injuries that have befallen them and where they come to us and say, please, take action on this. So as someone that considers herself in the business of hope, I am especially proud to not only be a part of this effort but also be part of a new Congress that is giving hope to

people that a Congress will take action on those things that are really relevant to people in their day-to-day lives: that the American people, the working people of our country, be given a raise in the minimum wage; that people across this country will be given substantial hope that we will take action on this bill; and that, hopefully, the President will continue the line of hope by changing his mind and signing the legislation into law.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair would again urge Members not to cluster around the floor manager. The Chair understands it is necessary to have conversations, but please respect the Members speaking and to approach the floor manager, when it is necessary, no more than one at a time.

Ms. DEGETTE. Mr. Speaker, I am now very pleased to recognize my friend and colleague from Michigan (Mr. STUPAK) for 3 minutes.

(Mr. STUPAK asked and was given permission to revise and extend his remarks.)

Mr. STUPAK. Mr. Speaker, I thank the gentlewoman for yielding.

This debate is really one of the most fundamental, important debates this body can undertake. Let me be clear, Mr. Speaker: I support stem cell research using adult stem cells, cord blood, and amniotic stem cells. I do not, however, support destroying life in the name of research.

H.R. 3 fails to address the most basic essential ethical question of when does life begin and when should life, including human embryos, be open to experimentation and scientific research.

As elected representatives, we have been cloaked with America's legislative responsibility. With this responsibility we are entrusted to determine the ethical and moral bounds of scientific research and to determine what value America places on human life. I believe our work today must reflect America's belief that all life has value, from the human embryo to those in the twilight of their life. We must not legislate shortcuts for one life over another.

Embryonic stem cell research requires the killing of human embryos, which if left to grow would become children. Where do we as a Nation draw the ethical and moral line on scientific research as to when life begins, and at which stage of human life are we willing to sacrifice one life to promote the life of another?

The good intentions of the proponents of H.R. 3 do not answer these questions. The proponents do not allow us, as America's elected representatives, to draw the ethical and moral line for human life. Under H.R. 3, when do embryos become human life? After 40 hours? After 2 days or 14 days?

H.R. 3 leaves the research guidelines to an administration official. As elected leaders, we should not entrust an unnamed individual to set America's guidelines on the value of human life. Mr. Speaker, I believe that human embryos, as life, should be treated and valued with the same respect as you and me.

While the promise of embryonic stem cells is still questionable, adult stem cells are being used today to save lives. Recognizing this, the National Institutes of Health spent $568 million in fiscal year 2006 on adult stem cell research.

Adult stem cells are being used today in clinical trials and in clinical practice to treat 72 diseases and injuries. As science learns more about the building blocks of life, researchers announced this week that stem cells found in the placenta and the amniotic fluid hold the key stem cells for research. These stem cells can be obtained while protecting life. This research offers science the ability to provide hope to those who suffer from disabling injuries and diseases while protecting all human life.

Let me be clear: I am committed to funding ethical scientific research that will unlock the origins of diseases and develop cures that can help my constituents. We cannot, however, let science leapfrog our ethics. I urge Members to protect life at all stages and vote ''no'' on H.R. 3.

Mr. Speaker, this debate on H.R. 3, the Stem Cell Research Enhancement Act, is really one of the most fundamental, important debates that this body can undertake.

Let me be clear, Mr. Speaker, I support stem cell research using adults stem cells, cord blood, and amniotic stem cells. I do not, however, support destroying life in the name of research.

H.R. 3 fails to address the most basic, essential, ethical question of when does life begin? And when should life, including human embryos, be open to experimentation and scientific research?

As elected representatives of the people, we have been cloaked with America's legislative responsibility. With this responsibility, we are entrusted to determine the ethical and moral boundaries of scientific research and to determine what value America places on human life?

I believe our work today must reflect America's belief that all life has value from the human embryo to those in the twilight of their life. We must not legislate ''short cuts'' for one life over another, which this legislation does. Embryonic stem cell research which requires the killing of human embryos, which if left to grow would become children.

Where do we, as a nation draw the ethical and moral line on scientific research as to when life begins? And at which stage of human life are we willing to sacrifice one life to promote the life of another?

The good intentions of the proponents of H.R. 3 do not answer these questions. The proponents do not allow us, as America's elected representatives, to draw the ethical and moral line for human life.

Under H.R. 3, when do embryos become human life? After 40 hours? After 2 days? H.R. 3 is silent on when embryos become human life—it doesn't specify how long these embryos are allowed to grow before they are killed—2 days, 5 days, 14 days, or more!

Proponents of H.R. 3 will claim that this legislation will leave the research guidelines to an unelected and unnamed administration official within 60 days. A bureaucrat will set the guidelines, for scientific research and experimentation on human life!

As elected leaders we should not entrust an unnamed individual to set America's guidelines on the value of human life.

Mr. Speaker, I believe that human embryos, as life, should be treated and valued with the same respect, as you and me.

While the promise of embryonic stem cells is still questionable, adult stem cells are being used today to save lives. Recognizing this, the National Institutes of Health spent $568 million in Fiscal Year 2006 on adult stem cell research.

Adult stem cells are being used today in clinical trials and in clinical practice to treat 72 diseases including, Parkinson's disease, spinal cord injury, Juvenile Diabetes, brain cancer, breast cancer, lymphoma, heart damage, rheumatoid arthritis, juvenile arthritis, stroke, and sickle cell anemia.

As science learns more about the building blocks of life, researchers announced this week that stem cells in human amniotic fluid hold the key stem cells for research. These stem cells can be obtained while protecting human life.

These stem cells are found in the placenta and the amniotic fluid of pregnant women. These stem cells hold the same promise as embryonic stem cells, including an ability to grow into brain, bone, muscle and other tissues that could be used to treat a variety of diseases. This research offers science the ability to provide hope for those who suffer from disabling injuries and diseases while protecting all human life.

Let me be clear, I am committed to funding ethical scientific research that will unlock the origins of diseases and develop cures that can help my constituents.

We cannot, however, let science leap-frog our ethics, our morals, and our responsibility to protect human life at every stage of development. I urge Members to protect human life at each stage of development. Vote ''No'' on H.R. 3.

Mr. BURGESS. Mr. Speaker, I yield 3 minutes to the distinguished gentleman from Florida (Mr. WELDON).

Mr. WELDON of Florida. Mr. Speaker, I thank the gentleman for yielding, and I rise in opposition to this bill.

If this bill becomes law, it will establish a new precedent for our government. For the first time, we will be funding researchers who are knowingly destroying human embryos in the course of their research, and that is really what this debate is essentially about.

This Congress enacted legislation over 10 years ago, and President Bill Clinton signed it, specifying that no Federal funds will be used for research that involves the destruction of a human embryo. This piece of legislation takes us down a path that overturns that.

Now, the advocates for this legislation assert that this is necessary because of the great potential of embryonic stem cells, and I rise essentially as a physician and a concerned American to challenge that notion based on

my understanding of embryonic stem cells. And by the way, we have heard it said repeatedly that embryonic stem cells have only been studied for 8 years. They have been studied for 25 years in the mouse. Eight years in the human model, but 25 years in the mouse.

All embryonic stem cells form tumors. All of them. Indeed, if you are in the research lab, that is how you determine you actually have an embryonic stem cell. You put it in an animal, and it forms a tumor called a teratoma.

□ 1245

They have never been shown not only to be really good and therapeutic, but they have never been shown to be safe. Before an embryonic stem cell therapy could ever be approved by the FDA, it would have been to be shown to be both effective, which embryonic stem cells have never been shown to be; and as well, safe, and the very nature of embryonic stem cells renders them unsafe.

So why is this such a critical debate? Why is this such an important debate? It is simply because this is not necessary and it is morally wrong. It is morally wrong because it takes us down a path where we will be saying certain forms of human life are expendable and can be discarded. And it is totally unnecessary, because they have never been shown to be therapeutically useful.

Furthermore, we were just amazed to discover that in the amniotic fluid are cells that behave just like these embryonic stem cells, but they don't form tumors. It is not ethically controversial to use them, and they have all the potential that embryonic stem cells have been shown to have in the lab.

So I would encourage all of my colleagues to vote ''no'' on this legislation. Support the President of the United States, and just remember, just remember, that there are absolutely no restrictions on this research in the private sector. This is all about Federal dollars and how they are going to be used.

Ms. DEGETTE. Mr. Speaker, I yield 3 minutes to the distinguished Member from Missouri (Mr. CLEAVER).

Mr. CLEAVER. Mr. Speaker, let me, first of all, say that, for the most part, this discussion has gone on without name calling, although it has happened once today, and so I want to start out by saying, I am coming to this floor to make a point, and not an accusation.

It is important for me to say because there are words used here, morality and moral and ethical, and in the last election, in my State, the word religion was used with this discussion because stem cell research was on the ballot.

I want to say very clearly, there is no conflict between religion and science. There was a man by the name of Paul who visited Turkey, and while in a city called Ephesus, he learned the people, went back and wrote a letter to them. And he said, ''Now Glory be to God who, by his mighty power at work within us, is able to do far more than we would ever dare to ask or even dream of, infinitely beyond our highest prayers, desires thoughts or hopes.''

Science is but another word for hope. And hope stands on tippy toes looking for healing, looking for cures, searching for the ideal.

I will not be a hopeless pessimist. I realize that whenever we are able to use the scientific advancements, that we are not becoming the enemies of faith, but rather it is another way to praise God and his constantly evolving creation.

Now, there was a great Baptist clergyman by the name of Harry Emerson Fosdick, and in his book, ''The Modern Use of the Bible,'' he says, ''If there are fresh things to learn concerning the physical universe, let us have them, that we may find deeper meaning when we say 'The heavens declare the glory of God.' ''

Now, it is my hope that we will not be as troglodytic as our ancestors who refused to peer through the lens of Galileo's telescope; that we are men and women who will do every single thing we can to bring about whatever we can, within our human powers, to cure the beastly diseases that wreak havoc in the lives of Americans and people all over this country.

Should science succeed in fulfilling the much vaunted optimism expressed by advocates of stem cell therapy, much of the credit should go to the community of faith.

Because I accept the Holy Bible as the inspired and interminable Word of God, I consider myself to be a Christian fundamentalist. I accept, as an inseparable component of my faith, the omnipotence, omnipresence, and omniscience of God. Therefore, I am baffled by my fellow fundamentalists who seem to be utterly opposed to and terror-stricken by the advancement of science, including stem-cell research. The propagation of knowledge and the dismantling of the boundless awe-inspiring mysteries of God's world are viewed by some in our faith as a foreboding foray toward undermining and diminishing the glory of the Creator. However, the opposite is true. When the human intellect makes strides that sets the world agog, it is God, from whom all knowledge stems, who is honored. Let us keep in mind that scientific advancement is not an enemy of faith, but yet another way to praise God and His constantly evolving creation.

Contemporary men and women of faith, as always, stand at the crossroads. In a real sense, religion has always been impelled to wage war in some area or another. The pressing question is shall we march across the battlefields of faith with open arms toward the magnificent revelations of God's great truths, or, do we use our inherent power and influence to signal a retreat from the bright and simmering sunshine of expanding scientific scholarship. The potential life-saving issue of stem cell research is before us. The scepter is in the hands of the enlightened community of believers. Our failure to speak out on the medical need for stem-cell research will allow earnest but erroneous or misguided souls who wish to constrain such study to force us back to a time when the faithful waged its fiery finger of scorn at the irreverence of scientific inquiry. Like the majority of people of faith, I totally reject the notion that today's community of believers are as troglodytic as our ancestors who refused to peer through the lens of Galileo's telescope. Nonetheless, this is a testing time.

Doctor Harry Emerson Fosdick, the legendary Baptist clergyman of the first half of the 20th century, profoundly addresses the issue of flowering faith in his wonderfully inspiring book, The Modern Use of the Bible: ''If there are fresh things to learn concerning the physical universe, let us have them, that we may find deeper meaning when we say, 'The heavens declare the glory of God.' ''

Should science succeed in fulfilling the much vaunted optimism expressed by advocates of stem-cell therapy, much of the credit should go to the community of faith. Every experiment that leads to greater medical breakthroughs is a discernible display of the earthly presence of God and of the presence of particles of His divinity in us.

Mr. BURGESS. Mr. Speaker, might I inquire as to the time that is left.

The SPEAKER pro tempore (Mr. FRANK of Massachusetts). The gentleman from Texas (Mr. BURGESS) has 26½ minutes remaining. The gentleman from Delaware (Mr. CASTLE) has 3½ minutes remaining, and the gentlewoman from Colorado (Ms. DEGETTE) has 46 minutes remaining

Mr. BURGESS. Mr. Speaker, I reserve the balance of my time.

Ms. DEGETTE. Mr. Speaker, I yield 2½ minutes to the gentlewoman from New York (Ms. SLAUGHTER), the chairwoman of the Rules Committee.

Ms. SLAUGHTER. Mr. Speaker, I thank both my colleagues, Mr. CASTLE and Ms. DEGETTE, for their tenacity on this bill. Stem cell research has the potential of reaching every man, woman, child on the planet. And without your tenacity, I am not sure we would still be here today. Thank you for that.

Mr. Speaker, I rise today not just as a Member of Congress, but as a microbiologist and a citizen.

During recent years in Washington, politics has often stood in the way of the consensus and conclusions of the scientific community.

One of the victims of that reality has been funding for stem cell research. I hope that today we can put aside our differences and together, achieve something that not just our scientists believe in, but the American people both want and deserve.

New medical technologies are always met with concern, but today many of the technologies are saving lives. Many of you remember the debate about organ transplants, in vitro fertilization, that we should never do that. The same will soon be said about embryonic stem cells, if we want it to be.

While all forms of stem cells should be researched, none offer as much promise as embryonic stem cells. An overwhelming body of international scientific research has shown them to be the only cells capable of becoming any element of the body. They are the key to so many of the cures that we have long sought.

Let me provide just one example of how powerful this research could be. There is growing evidence linking embryonic cell mutations to cancer, including testicular and breast cancer. As a result, future breakthroughs could one day eradicate many forms of cancer at their source.

Because of its potential, 70 percent of Americans support embryonic stem cell research, and we all know someone who has suffered from a disease that embryonic stem cells could one day cure. Why would we choose to deny hope to millions of Americans and people all over the world?

I should add that nations throughout the world have embraced embryonic stem cell research.

I just want to say that, for all my colleagues who have second thoughts about this bill, let me ask you to step back and think about a loved one who could possibly benefit from this research, a neighbor, a friend. We have all got many of them.

Your vote today should be clear. Vote for scientific research to help people.

Mr. Speaker, I rise today not just as a Member of Congress, but also as a microbiologist and a citizen who stands in awe of the life-saving potential we hold in our hands.

During recent years in Washington, politics has often stood in the way of the consensus and conclusions of the scientific community.

One of the victims of that reality has been funding for stem cell research. The opinions of those on both sides of this issue are both heartfelt and sincere. But I hope that today, we can put aside our differences and unite to achieve something that not just our scientists believe in, but that the American people both want and deserve.

New medical technologies have always been met with skepticism and concern. There was a time in America when organ donations were experimental, and blood transfusions were considered too dangerous to consider. And yet today, these procedures are saving lives every hour.

The same will soon be said of embryonic stem cells—if we want it.

We may hear from some today that adult stem cells, cord blood cells, and amniotic fluid cells are just as promising as embryonic stem cells. But while they all show promise and should be researched, none of them offer as much promise as embryonic stem cells.

An overwhelming body of international scientific research has shown embryonic stem cells to be the only type of stem cells capable of becoming any cell type in the body. They are the key to so many of the cures we have long sought after.

Let me provide just one example of how powerful this research could be.

There is growing evidence linking embryonic cell mutations to cancer. At UC San Francisco, scientists have discovered elevated activity of several embryonic stem cell genes in both testicular and breast cancers.

Based on this new finding, scientists are hypothesizing that misregulated embryonic stem cell genes could cause or at least advance cancer.

In fact, recent research is showing that up to 20 percent of all breast tumors are now suspected to originate in stem cells.

Scientists hope to learn more about the functions of genes in the cells that make up tumors. Their examinations could show why stem cells become cancerous and how doctors can treat them.

These breakthroughs could one day eradicate many forms of cancer at their source.

Because of its potential, fully 70 percent of Americans support embryonic stem cell research. And that's not surprising. Nearly everyone has suffered from a disease, or knows someone who has, that embryonic stem cell research could one day cure. Who wouldn't want to end the suffering of their son, sister, father, or friend? Why would we choose to deny this hope to millions of Americans?

Nations throughout the world have embraced embryonic stem cell research. Their scientists are taking great strides forward. In the end, enforcing restrictive federal research policies will only ensure that the United States will continue to lose many of our best and brightest scientists in this field to other countries.

Mr. Speaker, many of history's greatest medical killers now have cures because of scientific research. Tens of millions of lives have been saved as a result. Today, we have the potential to save millions more, and to leave other deadly diseases behind us.

I believe people in wheelchairs will one day walk again. I believe that we can bring about an entirely new form of health care in America—one defined by shorter hospital stays, fewer invasive procedures, and increasing benefits to both our patients and our bottom line.

The bill before us today presents an ethical solution to research that could potentially benefit almost every American. It gives our country hope—hope that one day we won't have to watch our mothers die of breast cancer, our grandparents suffer from Alzheimer's, and our own children endure Type I diabetes.

If we fail to fund embryonic stem cell research, I do not believe that we will be able to look our children and grandchildren, our mothers or fathers, or our grandparents in the eye and tell them we did everything we could to help them live a better, healthier, longer, happier life.

I urge my colleagues who have second thoughts about this bill to step back and think of a loved one who could possibly benefit from this research. Your vote today should be clear.

Ms. DEGETTE. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from Texas (Mr. GENE GREEN), a member of the Energy and Commerce Committee.

Mr. GENE GREEN of Texas. Mr. Speaker, I gave a 1-minute earlier that compared the hope for embryonic research with the new research that is being done on other stem cells. But, in all honesty, we need to be looking at everything to deal with the illnesses that we have.

Embryonic stem cell research is the hope for millions of Americans. Embryonic stem cell research is now supported by educational and religious affiliated institutions, but they need Federal Government help to find the cures for spinal cord injuries, Alzheimer's and many other illnesses.

Let me talk about two personal examples of the imperative need for this Federal assistance to find these cures. I know of a young lady named Monica who had her spinal cord severed in an auto accident. She is young enough to benefit from aggressive research on a cure. We need all the research dollars we can get into embryonic stem cell, adult stem cells and others to be able to deal with this young lady who has the possibility that her spinal cord could be regenerated. It may be next year. It may be 10 years or 20 years. But let's don't take that hope away.

Another example is my mother-in-law. She was diagnosed in 1996 with Alzheimer's. And my wife and I have lived for the last 10 years watching my mother-in-law die. She died the day after Christmas. She hasn't known either of us for over 2 years. She was in a research facility in Houston, at Baylor College of Medicine, that could just monitor her progress on a yearly basis. For the last 2 years, we couldn't take her to the hospital or to the doctor's office. And we watched Alzheimers make that happen.

It is too late for my mother-in-law's generation. But it is not too late to change it for the next generation, Mr. Speaker, and Members. And to stand up here today and say it is a sin to do this research, it is a sin not to do the research. It is not a sin to try and use embryonic cells. It is a sin not to do this research.

Mr. BURGESS. Mr. Speaker, I yield 2 minutes to the gentleman from Texas (Mr. HENSARLING).

(Mr. HENSARLING asked and was given permission to revise and extend his remarks.)

Mr. HENSARLING. Mr. Speaker, I rise today in favor of the unalienable right to life and in opposition to H.R. 3.

This legislation would require increased Federal support for embryo-destructive research, abrogating, I believe, our responsibility to protect life as declared by our Founders in the Declaration of Independence.

Yet, some in this Chamber, I believe, would inadvertently end life, even in its earliest moments, in order to try to improve the lives of others. And they do so by using research that has shown little promise to develop effective treatments.

Mr. Speaker, there are alternatives. I support ethical stem cell research that does not spend Federal taxpayer dollars to fund studies that so many Americans find morally reprehensible. For example, we know that adult stem cell research has now, to date, led to 72 different treatments and clinical applications in humans. Additionally, we know that umbilical cord blood is already being used successfully against diseases like leukemia, sickle cell anemia and lymphoma.

And just this week, we all know, worldwide we heard the news that a new source of stem cells had been found in amniotic fluid. These cells, which can be retrieved without doing harm to a developing child, and have

been described as having all the positive potential of embryonic stem cells but with much greater stability.

But, Mr. Speaker, for those who are committed only to embryonic stem cell research, it is important for all Americans to know there is no current prohibition on this research. Any individual, any university, any medical center is free to use their resources to conduct this type of research. And, indeed, hundreds of millions have already been spent, unfortunately, with little result.

In this body we debate a number of vitally important issues. But is there any issue more important than preserving the sanctity of life? And shouldn't we ask ourselves, how can we preserve liberty if we cannot preserve life? And should there be doubt, we should err on the side of life.

Ms. DEGETTE. Mr. Speaker, I yield 2 minutes to the distinguished gentlewoman from Illinois (Ms. SCHAKOWSKY).

Ms. SCHAKOWSKY. Mr. Speaker, I want to thank the gentlewoman so much for her relentless and effective leadership, and express my gratitude to Congressman CASTLE.

Mr. Speaker, I rise in strong support of H.R. 3. I have been struck and moved by the number of colleagues who have come here and cited their own family members, including their children, as the driving force behind their support. But none of us should be surprised, since 100 million Americans are afflicted with diseases that potentially could be cured by embryonic stem cell research. And I have heard from so many of them from my own district. Why destroy their hope?

And I rise today in the name of our beloved friend and part of our Congressional family, Lane Evans. Lane is one of the million Americans who suffer from Parkinson's Disease, and that has cut his career short. And during his time in Congress, Lane was dedicated to advancing stem cell research because he understands what it is like to struggle with an incapacitating disease. And he understands the hope that embryonic stem cell research holds. Why would we want to destroy that hope?

And I want to thank all of my friends from the Juvenile Diabetes Foundation from my district and their children, who have served as advocates in such an effective way and met with me on a regular basis and educated me about this. And my dear friend, Bonnie Wilson, whose daughter, Jenna, has juvenile diabetes and has lived with that for her whole life. Why would we want to destroy their hope?

□ 1300

Since I have been in Congress, I have received letters from people like Liz O'Malley, and she describes the daily struggle of her son, Seamus. Seamus has muscular dystrophy. He is only 11 years old. Stem cell treatment may be his only hope. Why would we destroy that hope?

Illinois has already awarded $10 million in grant funding to research institutes and hospitals because Governor Blagojevich recognizes the advances. Now we can do it on a Federal level.

I urge my colleagues to support H.R. 3.

Ms. DEGETTE. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from Maine (Mr. ALLEN).

Mr. ALLEN. Mr. Speaker, I thank the gentlewoman for yielding and thank her for her strong leadership on this issue. The bill that we are considering today addresses shortcomings in current stem cell policy while maintaining strict ethical standards in stem cell research. Embryonic stem cell research offers promise to millions of Americans suffering from spinal cord injuries and chronic illnesses, including cancer, Parkinson's disease, Lou Gehrig's disease, and diabetes.

Neither Congress nor the administration should prohibit the medical community from pursuing a promising avenue of research that can improve the lives of millions of Americans. Embryonic stem cell research is supported by the majority of my constituents in Maine and has overwhelming bipartisan support across this country. I have heard from hundreds of constituents who support this bill, including Virginia, from Gardiner, Maine, whose mother is stricken with Parkinson's disease.

She describes the conditions of limited mobility her mother faces as horrific. Celia, in Madison, Maine, says her twin sister, Maura, was paralyzed from an auto accident and hopes for a better life.

We need to ensure that our scientists can pursue the promising research of embryonic stem cells to help these people and millions like them. We cannot allow the politics of this issue to undermine groundbreaking research, impede science and place at risk the health and well-being of victims and their families.

I urge my colleagues to vote for H.R. 3.

Mr. BURGESS. Mr. Speaker, I yield 4 minutes to the gentleman from Georgia (Mr. GINGREY).

Mr. GINGREY. I thank my colleague for the time.

Mr. Speaker, I rise in strong opposition to H.R. 3, but definitely not in opposition to stem cell research; indeed, not in opposition to embryonic stem cell research. That is the position, my colleagues, of this President and most of the Republicans in this House. It is not an issue of being opposed to research on embryonic stem cells, but it is in opposition to research that results in the destruction of human life.

Certainly if you ask the American public when they look at this picture on television if they would be in favor of embryonic stem cell research, if you could help this man, or, even more compelling, our colleagues in this body, Lane Evans and JAMES LANGEVIN, the answer would be a resounding, yes, 80 percent. I think maybe I would be one of those who would be inclined to so vote.

But on the other hand, Mr. Speaker, if you held up this picture, snowflake babies, and asked them, would you be willing to support embryonic stem cell research if it meant the destruction of these lives, or not giving these lives an opportunity to ever develop, I think the answer, with the statistics, would be completely reversed.

Now, the Members in this body, some are strongly pro-life, some are mostly pro-life, some are slightly pro-life and some are pro-choice, whether we are Republicans or Democrats. But I think most of us would say we are pretty much opposed to abortion, and we wish there would be no need for abortions.

Well, we have an opportunity with H.R. 322, the Bartlett bill, of which I am a very proud original cosponsor, to do it another way, to do research, indeed, to obtain embryonic stem cells without destroying the embryo, either through a biopsy or through using embryos that have no chance to live. We can get viable embryonic stem cells.

The point is, we don't have to divide this body and this Nation. We have lots of things that we can argue about legitimately in a friendly atmosphere, and that is the way it should be in this body.

We have gotten Members, a Republican and a Democrat, Mr. CASTLE and Ms. DEGETTE, who are very popular Members, very persuasive, but are very committed to this issue. We have a better choice. Now with this research from Wake Forest utilizing amniotic cells and the provisions within the Bartlett bill, H.R. 322, let us give that a chance. Let us give life a chance.

Ms. DEGETTE. Mr. Speaker, I yield myself 30 seconds.

Mr. Speaker, my colleague from Georgia holds up a picture of two beautiful little girls and says we would not want to destroy them for research. He absolutely has that right. In fact, Mr. Speaker, I take deep offense at any insinuation that we would kill children for this type of research.

The thing to know, H.R. 3 specifically says the only embryos we will allow for this research is embryos created for IVF clinics which are slated to be thrown away, embryos which are never implanted and will never become babies.

Mr. Speaker, I yield 2 minutes to my distinguished colleague from Massachusetts (Mr. MARKEY).

Mr. MARKEY. Last year, the President vetoed the hope and crushed the dreams of millions of patients and their families. With the stroke of a pen, the President used his very first veto to block this bill, the Stem Cell Research Enhancement Act, and to continue to impose severe restrictions on stem cell research. We are now giving the President a second chance to move beyond his Luddite moment in American scientific history to a new moment of scientific enlightenment

and hope. We must let hope triumph over fear and science, triumph over ideology.

Diseases like diabetes, Alzheimer's, and cancer wreak havoc on the lives of millions of Americans. We can free our loved ones from this pain, but only if we free science to find the keys.

Embryonic stem cell research is the flickering candle of medical promise that gives hope for the treatment and cure of these devastating diseases, researchers' medicines' field of dreams from which we can harvest the findings that can give hope to millions of families.

Please do not condemn the afflicted to another generation of darkness. It is past time to take this critical step towards fulfilling our moral obligation to do all we can to reduce pain and suffering around the world and to support ethical, comprehensive stem cell research.

I thank the gentlelady from Colorado, and I thank all Members for their work on this critically important historic litigation.

Mr. CASTLE. Mr. Speaker, at this time I yield to the gentlewoman from Illinois (Mrs. BIGGERT) for a unanimous-consent request.

(Mrs. BIGGERT asked and was given permission to revise and extend her remarks.)

Mrs. BIGGERT. I thank the gentleman for yielding.

Mr. Speaker, I rise in strong support of H.R. 3.

Everyone has a family member or friend who suffers from diabetes, Alzheimer's, Parkinson's or other diseases. Unfortunately, without Federal Government support, scientists won't have access to the stem cells they need to develop treatments and cures for these and a host of other diseases that touch the lives of every American.

We already are using Federal funds to support embryonic stem cell research. But science has advanced rapidly since the President announced his stem cell research policy. These cells were just identified less than ten years ago, and already, the technology is progressing by leaps and bounds. The 22 lines currently available under the President's policy were developed using outdated techniques and have been contaminated, possibly skewing the outcome of experiments.

There are now 125 good, pure cell lines available for use. Because they are more diverse, not only can scientists use them to research more conditions, but they better reflect the genetic diversity of individuals.

I support lifting the ban on Federal funding for embryonic stem cell research, so long as the donors give their consent and the cells made available would otherwise be discarded and destroyed. It is simply tragic that something so valuable would just be thrown away when it has so much potential to alleviate so much suffering.

Given the promise that these stem cells hold, it is time to drop the restrictions and allow researchers to do what they do best. Let's let researchers go where the science leads them, not where politicians dictate. In order to truly explore all the possibilities, scientists must have access to all kinds of stem cells: adult, embryonic and those from umbilical cord blood and amniotic fluid. That is why I plan to vote for H.R. 3.

I am proud to support H.R. 3, and for the sake of the millions suffering from debilitating diseases, I ask my colleagues to do the same.

Mr. BURGESS. Mr. Speaker, at this time I would like to recognize the gentleman from Louisiana, Dr. BOUSTANY, for a unanimous-consent request.

(Mr. BOUSTANY asked and was given permission to revise and extend his remarks.)

Mr. BOUSTANY. I thank the gentleman for yielding.

Mr. Speaker, I rise to oppose H.R. 3. As a heart and lung surgeon, I've seen the power of hope and the harms caused by those who give misinformation and false hope to patients and families.

Too often, proponents of embryonic stem cell research promise an immediate cure to dying patients and their families.

From a medical standpoint, embryonic stem cells have yet to produce a single human treatment. Embryonic cells also produce tumors and cause transplant rejection.

Such techniques also raise grave ethical problems. The claim that most human embryos in fertility clinics ''will be discarded anyway'' is disingenuous. Research shows that ''the vast majority of stored embryos (88.2 percent) are being held for family building.''

Fortunately, science continues to discover more promising lines of stem cell research.

Adult stem cells have already been used to treat a growing number of human diseases.

Scientists at Harvard and Wake Forest University recently reported their success using stem cells in amniotic fluid and the placenta.

They explained that these stem cells ''remain stable for years without forming tumors.''

All Americans depend on medical breakthroughs. Federal funding for all types of stem cell research rose above $609 million last year.

It's disappointing that the Speaker would not permit a vote today to increase funding for the most productive stem cell research.

Last year, the Bartlett bill passed the Senate unanimously. It would have increased funding for embryonic stem cell research that doesn't destroy an embryo, including embryo biopsy. The current House leadership defeated it to score political points against the President.

It's irresponsible for Congress to spend scarce federal tax dollars on lines of scientific research that have proven least effective.

Evidence proves it's possible to advance stem cell research without paying biomedical firms to destroy human embryos.

Conclusion: For these reasons, I oppose H.R. 3 and urge my colleagues to oppose this bill as well.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair would repeat that the gentleman from Michigan did get general leave for all Members to insert into the RECORD. All Members have general leave to insert statements in the RECORD and to also include therein extraneous material.

Ms. DEGETTE. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from New York (Mr. CROWLEY).

Mr. CROWLEY. I thank my friend from Colorado for yielding this time.

Mr. Speaker, I rise in support of federally funded ethical stem cell research. This important legislation would lift the ban on which stem cell lines can be researched using Federal dollars. It provides sound rules and regulations to govern the research of stem cells, rules such as preventing human cloning for embryos or the deliberate destruction of embryos. This legislation will give doctors and scientists the ability to perform more research, to find new cures for degenerative diseases such as Alzheimer's, spinal cord injuries, and diabetes. We as a country excel in so much. Let us push forward on important research rather than regressing.

With embryonic stem cell research, we could potentially save or extend the lives of an estimated 100 million Americans. While this bill has overwhelming support from our country's leading scientists, biomedical researchers, patient advocacy groups and health organizations, along with many religious leaders, and 72 percent of all Americans.

In the past, President Bush has emphatically stated that he will veto this legislation. I hope that this time around the President listens to the overall majority of Americans and approves this important legislation. I support this legislation and stand with my colleagues here in the House.

To President Bush, I ask you to reconsider your stance on stem cell research. Don't make your second veto of your administration as detrimental as your first. Democrats promised America a new direction, and we are delivering a new direction forward.

I thank the gentlelady from Colorado.

Mr. CASTLE. At this time I yield 1½ minutes to the distinguished gentleman from California (Mr. BILBRAY).

Mr. BILBRAY. Mr. Speaker, I rise in support, but let me say not support in the traditional sense. There are those of us who are parents who have lost young ones and have watched and had to make the decision of what to do with embryos that they have. I think the sanctity of life works both ways.

One of the sanctity of life concepts is to make sure that if you are going to lose a loved one, you respect the life and try to maximize the benefit from that loss. I think this bill is trying to address that. I would ask both sides not to point fingers, but to try to find that sanctity of life is something that is interpreted in many ways.

One of them is to make sure that if a life is going to be lost, we have a moral obligation to maximize the potential benefit from that loss. That is a respect for sanctity of life that is not discussed enough.

Mr. BURGESS. Mr. Speaker, I yield 2 minutes to the gentleman from California (Mr. DANIEL E. LUNGREN).

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair would remind Members to address all remarks to the Chair and not to other individuals not present in the body.

Mr. DANIEL E. LUNGREN of California. Mr. Speaker, a couple of numbers, there has been a suggestion an overwhelming number of the American people support the approach contained in this bill. In fact, the latest poll that was taken just last spring shows that only 39 percent support Federal funding of the approach found in this bill when they are informed that it requires the destruction of embryos.

The CBS poll taken a year ago shows that only 37 percent of the American people support more Federal funds for more stem cell lines. Another number that is important is 70–0. That is the score of the diseases that have been successfully treated by the use of stem cells from adult and blood cord stem cells, zero of the number that have been treated successfully by embryonic stem cells.

But more importantly, it seems to me as we deal with this issue, we should recall the words of Dr. Nigel Cameron, the founder of the journal called ''Ethics and Medicine,'' when he said in his testimony: ''Our membership in the human species is enough to distinguish the human embryo from all other laboratory artifacts.''

It is important for us to understand that human dignity is not reserved for adult human beings. And for us to say here at this time that human dignity is contingent upon arbitrary criteria such as size or location is a profound judgment that we make. It is for that reason that President Clinton's National Bioethics Advisory Commission decided not to permit stem cell research using IVF embryos after finding that ''the derivation of stem cells from embryos remaining following fertility treatments is justifiable, only,'' it said, ''only if no less problematic alternatives are available for advancing the research.''

We have seen the evidence compounding, even since we were here on this floor, just last year, that there are morally appropriate alternatives. Let us not follow in this direction.

Ms. DEGETTE. Mr. Speaker, I yield 1½ minutes to the gentleman from Texas (Mr. DOGGETT).

Mr. DOGGETT. This bill is about hope. Scientists call them stem cells; but they are really cells of hope, the hope of a life with dignity, the hope of increased mobility, the hope of a time without pain, and the hope of a parent to spare a newborn a life of illness and impairment. With this bill, scientists' hands are freed to find cures for Alzheimer's and ALS, for cancer and MS and Parkinson's and much more.

Blocking this bill will not prevent the destruction of embryos, but it will ensure the destruction of hopes like that of the young 19-year-old Daniel from Austin, who wrote, ''Every day that embryonic stem cell research is delayed will be another day of my life confined to a wheelchair.''

□ 1315

How cruel to block hope for those suffering from lingering diseases that slowly drain away life and happiness and energy.

Publicly-funded, responsible stem cell research is coming. It is just a question of how many lives are lost first, of how many families will still be suffering before we here in Congress are able to secure the votes to pry open the politically inspired restraints that this administration has imposed on expediting the cures and the treatments long awaited by so many who are afflicted and those who care for them.

Affirm life today by affirming life-saving science. Vote hope over obstruction.

Ms. DEGETTE. Mr. Speaker, I am pleased to yield 2½ minutes to the distinguished gentlewoman from California, a member of the committee, Mrs. CAPPS.

Mrs. CAPPS. I thank my colleague.

Mr. Speaker, I rise in strong support of the Stem Cell Research Enhancement Act. I have been so proud to be a part of the bipartisan effort to advance federally funded stem cell research and commend the tireless work of the bill's cosponsors DIANA DEGETTE and MIKE CASTLE.

It is evident that we will pass this bill today, but we know that hurdles remain before the measure is signed into law. Along the way, opponents of this legislation have been spreading mistruths about what embryonic stem cell research entails and what its promises are. How many times have we heard here on the floor today the claim that this research involves the creation of life in order to destroy it? So I reiterate again, the bill explicitly states that only embryos created for in vitro fertilization that would otherwise be discarded and are being discarded every day can be used for this type of research and only with the explicit consent, permission given explicitly by the donors; and also that no Federal dollars are used in the extraction process.

It is important above all that we enact this Federal legislation even for a State like mine, California, which does have stem cell research, because we need in this Nation the highest ethical standards which is what the Federal legislation can do.

By allowing research to make use of embryonic stem cells slated to be thrown out, we are in fact giving purpose to this. And of course through this research lives will be saved for millions now suffering from debilitating illnesses.

Today, we have also been hearing the argument that adult or amniotic stem cell research alone will be enough, but this is not the case. The world's leading scientists concur that all stem cell research should be conducted together in order to maximize the benefits.

Our President himself has stated his desire to put the United States at the forefront of science and innovation. Getting him to sign this bill is one way to make that happen. A vote against H.R. 3 would be setting us back even further and would let other countries get much further ahead of us in the effort to cure the world's most chronic and devastating diseases.

So I urge my colleagues to vote enthusiastically in favor of H.R. 3.

Mr. BURGESS. Mr. Speaker, I yield 2¼ minutes to the gentleman from Georgia, JACK KINGSTON.

(Mr. KINGSTON asked and was given permission to revise and extend his remarks.)

Mr. KINGSTON. Mr. Speaker, I want to point out that this is a debate which so many of us feel passionately about on both sides. It is such a shame, though, that it was not allowed to go to committee. I hear over and over again how important this bill is and actually to both sides, proponents and opponents, yet no committee, no hearing, no amendments. It is a pity. I certainly hope that the Democrats do go back to their party's promise of last week and start opening things up.

Now, having said that, I wanted to make two points, and then I am going to extend my remarks. But there is no Federal law against embryonic stem cell research right now. Many people seem to think that this will allow something to happen that it doesn't. The debate is more about what types of lines.

Now, as you know, the President has approved research on 78 lines. Twenty-two of them are being used currently in Federal funding, and I have the list of where those 22 are, their locations, which I will submit to the RECORD.

TABLE 1. NATIONAL INSTITUTES OF HEALTH FUNDING

[$ in millions]

Stem cell research	FY03	FY04	FY05	FY06	FY07
Human Embryonic	20	24	40	38	39
Non-Human Embryonic	113	89	97	97	96
Human Non-Embryonic	191	203	199	200	200

TABLE 1. NATIONAL INSTITUTES OF HEALTH FUNDING—Continued

[$ in millions]

Stem cell research	FY03	FY04	FY05	FY06	FY07
Non-Human Non-Embryonic	192	236	273	274	273
Total, Stem Cell Research	517	553	609	609	608

Source: NIH Budget Office, March 10, 2006.

Table 2. NIH LIST OF HUMAN EMBRYONIC STEM CELL LINES ELIGIBLE FOR USE IN FEDERAL RESEARCH

Name [a]	Number of stem cell lines	
	Eligible	Available
BresaGen, Inc., Athens, GA	4	3
Cell & Gene Therapy Institute (Pochon CHA University), Seoul, Korea	2	
Cellartis AB, Goteborg, Sweden	3	2
CyThera, Inc., San Diego, CA	9	0
ES Cell International, Melbourne, Australia	6	6
Geron Corporation, Menlo Park, CA	7	
Goteborg University, Goteborg, Sweden	16	
Karolinska Institute, Stockholm, Sweden	6	0
Maria Biotech Co. Ltd.—Maria Infertility Hospital Medical Institute, Seoul, Korea	3	
MizMedi Hospital—Seoul National University, Seoul, Korea	1	1
National Center for Biological Sciences/Tata Institute of Fundamental Research, Bangalore, India	3	
Reliance Life Sciences, Mumbai, India	7	
Technion University, Haifa, Israel	4	3
University of California, San Francisco, CA	2	2
Wisconsin Alumni Research Foundation, Madison, WI	5	5
Total	78	22

Source: [http://stemcells.nih.gov/research/registry/eligibilityCriteria.asp].

[a] Six table entries do not have stem cell lines available for shipment to U.S. researchers because of a variety of scientific, regulatory and legal reasons. The zeros entered in the ''Available'' column indicate that ''the cells failed to expand into undifferentiated cell cultures.''

Mr. Speaker, I also want to say that $200 million is being spent by private foundations and institutions on stem cell research, in addition to $39 million over at the National Institutes of Health; in addition to that $39 million, on nonhuman embryonic stem cell research, $96 million; on human nonembryonic stem cell research, $200 million; on nonhuman nonembryonic stem cell research, $273 million. This is very important.

The other thing that we keep hearing over again is that these are leftover embryos. In fact, of the 400,000 embryos which keep getting referred to, the RAND Corporation, which is nonpartisan, says only 11,000 have been designated for research, and of those they will probably yield 275 stem cell lines.

And why is that important? It is important because eventually you run out and then you start deciding to produce something. And I want to point out, England has already crossed this path. They have already voted on an H.R. 3, and today they are debating the hybrid stem cell creation of an animal-human embryonic stem cell. That is a debate going on in England today. So don't think that this bill will stay within the boundaries of the bill if it is passed.

My colleagues today will try to tell you that all of those against this bill are against science. That is just not the case. You can be pro-life and pro-science; the two are not mutually exclusive. To say we are anti-science is just a complete falsehood.

Stem cells are cells with the unique ability to divide and grow colonies of the specialized cells that make up the tissues and organs of the body.

Adult stem cells: unspecialized cells that can reproduce and mature into the specialized cells of the surrounding tissue. For example: Stem cells found in the heart can divide into more heart tissue cells.

Embryonic stem cells: unspecialized cells found in the early stages of an embryo that can reproduce and mature into the specialized cells of any organ or tissue in the body. For example: Stem cells found in the early stages of an embryo can divide into and create more cells of heart tissue, liver tissue, or any other tissue in the body.

Stem cells have been found in many tissues in the developed human body (adult stem cells), and are found in the largest quantities in the early stages of embryonic development in: the umbilical cord (cord cells), embryos (embryonic stem cells), and just this week, it was announced that stem cells have been discovered in the amniotic fluid (amniotic stem cells) that surrounds an unborn child in the womb.

A ''stem cell line'' is created by removing a cluster of cells from an embryo in its early stages of development. The embryo is destroyed and the cells are grown in a culture that under the right conditions will yield colonies of stem cells. Once the initial stem cells are isolated they can be manipulated to reproduce over and over again.

While the Democrats will try to make this a vote for or against embryonic stem cell research that is just a falsehood. There is no federal law against embryonic stem cell research. On August 9, 2001, President Bush announced that his administration would allow federal funding for research using the 78 approved lines. Of the 78 original derivations held to meet the August 9, 2001 criteria, there are now twenty-one embryonic stem cell lines available and in use.

This has been the number available for about a year now, up from 17 in 2004 and just 1 in 2002. The 78 eligible lines break down as follows:

Twenty-one available and used.

One in development (which could yet become available, that remains unclear).

One temporarily on hold due to irregularities in its use (this is a South Korean line, NIH investigation continues).

Thirty-one owned by foreign institutions that have not made them available.

Sixteen of these are frozen in an undeveloped state for use when culturing methods are perfected. These are owned by a Swedish institution, they could very well become available when that institution decides techniques for developing them are sufficiently developed (i.e. high efficiency, no animal cells etc.) but we have no control over that and cannot know how many of them will prove viable when they are thawed.

The remaining 15 have never been made available and NIH suspects (reasonably) they are not viable.

Seventeen have proven unviable and cannot be made usable.

Seven are duplicates of some of the 22 available lines, and are being held in reserve to avoid over-development of those lines. These are not being distributed and not counted among the available lines (a common and logical practice in cell biology.)

Since each line can be replicated almost without limit, these 21 lines have made for more than 700 shipments to individual researchers since 2001.

NIH has the capacity to make more than 3,000 more shipments available upon request. There has been no shortage of lines.

Funding for use of the lines has been growing each year.

In FY 05, NIH spent $39 million on human embryonic stem cell work, an increase of 61 percent over FY 04. In total, more than $130 million have been spent.

Now, to me, it seems the Democrat party, who chose to vote against the Alternative Pluripotent Stem Cell Enhancement Act by a vote of 273–154 under suspension, would be the party against science. This bill, which was supported by the President and was voted for unanimously by the Senate, would have directed HHS to research and develop techniques for ''the isolation, derivation, production, or testing of stem cells that are capable of producing all or almost all of the cell types of the developing body, but are NOT derived from a human embryo''. And on H.R., once again, the Democrats are NOT allowing for an open and transparent process which would allow amendments in the form of the substitute of some of this language.

While any potential treatments from embryonic stem cells are decades away at best (in

fact, there have been no therapeutic applications or even human trials at this point) patients being treated today with adult stem cell treatments have been found to benefit 72 different ailments, ranging from cancers, auto-immune diseases to wounds and injuries. (Note that though none of these are cures, peer journals show adult stem cells benefit Leukemia and Parkinson's patients, who have gone into remission, and those who have MS can walk more, etc.) Embryonic stem cells have the capacity to grow and reproduce rapidly, but that same tendency causes them to form tumors.

When cells derived from embryonic stem cells are transplanted into adult animals, their most common fate is to die. This is in striking contrast to the survival of adult cells when transplanted in adult tissue. This failure of embryonic stem-cell derived tissue to survive when transplanted seems to show that science hasn't determined how to generate normal adult tissue from embryonic stem cells.

Embryonic stem cell science relies on the assumption that embryonic stem cells can grow into any type of cell just because they can within the embryo. But in reality, scientists have found that it is hard to control the direction of the cells, and they often grow faster than surrounding tissue, forming tumors.

Proponents of embryo-destructive research claim that there are 400,000 leftover embryos that could be used for research.

It's deeply troubling to describe any human being as ''leftover''. This is not a matter of religious belief but of biology. A human embryo is a human being, and each of us was once an embryo.

However, according to the non-partisan RAND corporation, the ''vast majority of frozen embryos are held for family building'' and ''only 11,000 have been designated for research, and those 11,000 embryos will likely yield just 275 stem cell lines''. This same study found that of the roughly 400,000 human embryos currently frozen in storage; only 2.8 percent have been designated for research.

In Vitro Fertilization clinics are most commonly used by Caucasian Americans—not the diverse population that the scientists claim to need for research purposes.

As of 2006, 110 children have been born through the Nightlight Christian Adoption agency's Snowflake Baby program.

The NIH spent 38 million federal taxpayer dollars for human embryonic stem cell research in 2005 and through 2006, they spent $122 million on human embryonic stem cell research. The Bush policy does not limit the level of NIH funding and NIH determines how many grant proposals to give. Additionally, the Journal of the American Medical Association published an article in September 2005 that found when public funding for research lapses, private funders almost always step in to take up the slack.

The President will stand firm in his stance that it is possible to advance scientific research ''without violating ethical principles by enacting appropriate policy safeguards and pursuing appropriate scientific techniques'' (statement of Admin. policy).

Proponents of this research will not be satisfied with the 275 stem cell lines they may be able to get from frozen embryos. They will move to the next step, human cloning, and begin to create custom ordered embryos on which to experiment. In fact, DIANA DEGETTE herself has said ''therapeutic cloning is the way to take stem cell research and all of its promise from the lab to the patient'' (July 31, 2001 floor debate).

Harvard scientists already want to grow disease specific lines of stem cells, which of course you would need cloning to do. According to their website, ''To be maximally useful, stem cell science requires using a process in which the nucleus of an egg, which contains its genetic material, is removed and replaced by the genetic material from an adult cell. This egg, with its new nucleus, then grows into a cluster of cells from which investigators can derive stem cells matching the genetic identity of the patient who donated the implanted cells, and which are therefore unlikely to be rejected by the patient's immune system. This technique is called somatic cell nuclear transfer, or therapeutic cloning''.

Proponents claim that adult stem cells are no match for embryonic stem cells. I guarantee you that those who vote in favor of this bill today will then say embryonic stem cells are no substitute for cloned cells. It will never be enough.

Democrats will also argue that our current quote restrictions are causing us to fall behind other countries in research in this arena. This is just not the case. Of the number of scientific publications on the matter, 40 percent of those on embryonic stem cells are by researchers in the U.S. and the others are divided by 20 countries.

A paper in the April issue of Nature Biotechnology showed that 85 percent of all human embryonic stem cell publications in the world have used the approved lines, with the great bulk of them appearing between 02 and 05. This is a much higher number than expected.

The same study also showed that American researchers easily lead the world in human ES cell publications, and the number of American publications has been growing each year of this administration (as has the number of foreign publications).

The Stem Cell Therapeutic and Research Act of 2005—which is now public law—made genetically matched cord blood stem cells available to patients who need them.

Cord blood is the blood leftover from the placenta after the birth of a child and has been used for years. In fact, it has been used to treat more than 70 diseases including sickle cell disease, cancer, and genetic disorders. These cells have the ability to change into many different types of cells in the body.

The Act is beginning to be implemented into the National Cord Blood Inventory. HHS has begun developing contracts which are then authorized by the Stem Cell bill to collect and store 150,000 new units of cord blood. Cord blood stem cell research and treatment is a good way to promote cures while still maintaining ethics.

One example of a patient who has benefited: Nathan Salley, who had leukemia at age 11, did not respond to intense chemotherapy sessions. When this treatment didn't work, doctors performed a cord blood transplant which involved killing off Nathan's bone marrow cells, then regrowing new (healthy) ones by injecting healthy umbilical cord blood stem cells. Nine years after his initial diagnosis, Nathan is preparing for his final year of college.

PrimeCell Therapeutics has created the first non-embryonic, adult-derived stem cell showing the ability to transform into any cell type found in the body (pluripotency). They have taken stem cells from one part of the body and turned them into cells from another part of the body, including into beating heart cells as well as brain, bone and cartilage cells.

They are derived from the germ line, which is the most protected and genetically pure cell line in the body, since they normally would develop into eggs and sperm. This is the one line that remains unaffected by the aging process.

They are autologus, meaning they come from you and are transplanted back into you for treatment. Therefore, there is a reduced chance of infection following transplantation and there is no risk of rejection—meaning there will no longer be the worries involving immunosuppressant drugs.

Other successful treatments: Scientists have grown human heart valves using stem cells from amniotic fluid. The new valves are created in the lab while the pregnancy progresses and are then implanted in a baby with heart defects after it is born (AP/Wash Post).

On January 8, 2007, scientists from Wake Forest University reported that these amniotic cells, which are easily retrieved during routine prenatal testing and can be isolated as early as 10 weeks after conception, were ''easier to maintain in laboratory dishes than embryonic stem cells'' (Wash. Post). They also grow ''as fast as embryonic stem cells, show great pluripotentiality, and remain stable for years without forming tumors'' (Dr. Anthony Atala, Wash. Post). If the goal of using embryonic stem cells (versus adult stem cells) is pluripotency, we may have an even better and more flexible solution with these amniotic cells without the complications of tumor formation.

Researchers at Northwestern have found that adult stem cells derived from bone marrow gives rise to blood cells, which can then be transformed into a wide variety of tissue types. In fact, they have found like a certain type of bone marrow cell has been transformed into white blood cells that are responsible for fighting infections (medicalnewstoday).

Bone marrow cells have also been shown to be stretched into patterns that could potentially transform them into smooth muscle cells similar to blood vessel tissue (DC-Berkeley experiment, medical news today).

In conclusion, science has shown us that there are several alternative ways to explore stem cell research without destroying an embryo. We need to direct the NIH to fund and research these alternatives and make them a priority. Science is flexible, and researchers need the incentive to pursue the already proven research of adult stem cells—not the questionable and unproven helpfulness of embryonic stem cells.

Mr. MCHENRY. Mr. Speaker, would the gentlewoman yield for a question?

Ms. DEGETTE. No. The gentleman can use his own time.

Mr. MCHENRY. I just have a question about——

The SPEAKER pro tempore. The gentlewoman has declined to yield.

Mr. MCHENRY. Parliamentary inquiry, Mr. Speaker.

The SPEAKER pro tempore. The gentleman will state his parliamentary inquiry.

Well, does the gentlewoman yield for the purpose of a parliamentary inquiry?

Ms. DEGETTE. No. He can use his own time.

The SPEAKER pro tempore. The gentlewoman does not yield.

Mr. MCHENRY. Mr. Speaker, a parliamentary inquiry does not count against anyone's time.

The SPEAKER pro tempore. A parliamentary inquiry may be propounded only if the Member holding the floor yields for that purpose and would, in that event, count against her time.

The gentlewoman from Colorado has been recognized, and she may proceed.

Ms. DEGETTE. Mr. Speaker, I am pleased to yield 2 minutes to the distinguished gentleman from Missouri (Mr. CARNAHAN).

Mr. CARNAHAN. Mr. Speaker, special thanks to the leaders on this debate, the gentlewoman from Colorado (Ms. DEGETTE) and the gentleman from Delaware (Mr. CASTLE). They have been great leaders in a strong bipartisan effort that has brought us here to this floor again.

I stand here today for my constituents in Missouri in strong support of H.R. 3 and its strong ethical standards. Stem cell research holds real promise of cures for many, many diseases we have heard about today.

Expanding the President's artificially restrictive policy will support the hopes of millions of Americans who struggle every day to survive under the burden of a life-altering diagnosis or a life-ending disease. Science, not politics, should determine the future of this vital research.

Last Congress, this House passed this legislation with extraordinary bipartisan effort. It is my sincere hope that we will not have to wait much longer before this bill becomes law. Every day we wait is another day that people suffer needlessly. We stand here with the tools in our hands to ease the pain of so many across this country.

Decades ago, Martin Luther King called Americans to act with fierce urgency of now. Today, it is time to act with fierce urgency on life-saving cures. Let's pass H.R. 3 and the Stem Cell Research Enhancement Act again, and we all urge the President to reconsider his veto.

PARLIAMENTARY INQUIRY

Mr. MCHENRY. Parliamentary inquiry.

The SPEAKER pro tempore. The gentleman may state his parliamentary inquiry.

Mr. MCHENRY. Mr. Speaker, inquiry of the contents of this legislation. Would it be appropriate to offer an amendment at this time exempting American Samoa just as it was from the minimum wage bill?

The SPEAKER pro tempore. The gentleman will suspend. Under the rule that was adopted, no amendment is in order at this time.

Mr. MCHENRY. So the gentleman——

The SPEAKER pro tempore. The gentleman has asked the parliamentary inquiry, and he has received the answer.

Mr. MCHENRY. Further parliamentary inquiry. Further parliamentary inquiry.

The SPEAKER pro tempore. Yes. The gentleman may state the inquiry.

Mr. MCHENRY. So the Chair is saying that I may not offer an amendment exempting American Samoa from this legislation.

The SPEAKER pro tempore. The gentleman is making a speech and will suspend.

Mr. MCHENRY. If the Chair will let me finish my question.

The SPEAKER pro tempore. The gentleman will suspend. The Chair has answered the gentleman's question, not by the Chair's own decision but by the rule. The rule does not provide for amendments. That is the answer to the gentleman's question.

Mr. BARTON of Texas. Point of order.

The SPEAKER pro tempore. The gentleman will state his point of order.

Mr. BARTON of Texas. Mr. Speaker, is the rule that we are operating under coming out of the Rules Committee?

The SPEAKER pro tempore. The gentleman from Texas has not stated a point of order, but rather a parliamentary inquiry. The House has adopted procedures which do not allow amendments. Therefore, Members will now proceed, and the Chair will recognize anyone who wishes to yield time.

Mr. BARTON of Texas. Another point of order.

The SPEAKER pro tempore. The gentleman will state the point of order.

Mr. BARTON. How many times——

The SPEAKER pro tempore. No. ''How many times'' could not conceivably be a point of order. It could be a parliamentary inquiry, but it could not conceivably be a point of order.

Mr. MCHENRY. Mr. Speaker, I have one additional parliamentary inquiry.

The SPEAKER pro tempore. The gentleman may state it.

Mr. MCHENRY. Is American Samoa exempted from this bill before us on the House floor?

The SPEAKER pro tempore. The Chair will respond to the gentleman: that is not a parliamentary inquiry; that is an inquiry about the substance of a bill. Questions about substance of legislation are not parliamentary inquiries. Parliamentary inquiries pertain to the procedures.

Mr. MCHENRY. Additional inquiry.

The SPEAKER pro tempore. No. The Chair will not recognize the gentleman.

Mr. MCHENRY. So the gentleman will not recognize me for an additional parliamentary inquiry?

The SPEAKER pro tempore. No. The Chair will say that having heard several parliamentary inquiries which were not parliamentary inquiries——

Mr. MCHENRY. Well, the Chair will not answer my question.

The SPEAKER pro tempore. The gentleman will not interrupt. The gentleman asked several, he said, parliamentary inquiries; the Chair answered them. The gentleman has tried to respond by making speeches which are not in order at this point. If the gentleman wishes to get time from the manager of the time to make his remarks——

Mr. MCHENRY. Parliamentary inquiry.

The SPEAKER pro tempore. The gentleman will state the nature of the parliamentary inquiry.

Mr. MCHENRY. Is there a way by which I can derive whether or not American Samoa, like the minimum wage bill, is exempted from this legislation?

The SPEAKER pro tempore. While the Chair is presiding, the gentleman will not make speeches in the guise of a parliamentary inquiry. He has asked a legitimate one, can he find out, how does he find out that information?

The answer is as follows: he asks the gentleman on his side who controls debate time to yield him time. He may then with that time under the rule make the question.

The other way I could say the gentleman could find out would be by reading the bill. Read the bill and it will tell you. But the gentleman may get debate time and then may propound any question to the other side that he wishes.

Mr. MCHENRY. Thank you, Mr. Speaker.

Mr. BARTON of Texas. Point of order. My point of order is, the distinguished Speaker when he was in the minority numerous times made points of order that were——

The SPEAKER pro tempore. The gentleman will suspend. Comments on the past behavior of the Speaker might be interesting, but they are not points of order.

Mr. BARTON of Texas. Point of order. Then the distinguished Speaker was out of order in the past.

The SPEAKER pro tempore. The gentleman from Texas will suspend. And the gentleman from Texas (Mr. BURGESS) is recognized to yield time for someone who might actually want to debate the bill. The gentleman is recognized for yielding time.

Mr. BURGESS. Mr. Speaker, I am pleased to yield 2 minutes to the gentleman from Ohio (Mr. CHABOT).

Mr. CHABOT. I thank the gentleman for yielding.

Mr. Speaker, I rise in opposition to H.R. 3, the Stem Cell Research and Enhancement Act of 2007. We all support advancing science to fight disease, particularly those diseases that may have already affected our loved ones or might affect them sometime in the future.

Like so many other areas within science and technology, discoveries in stem cell research are occurring every day. Just this week, news reports highlighted a significant breakthrough made by researchers from Wake Forest University in the use of amniotic stem cells to treat diseases and other conditions. This discovery, coupled with the advances made in the therapeutic use

of cord blood, bone marrow, and other stem cells, demonstrates that effective and ethical research are not mutually exclusive.

In fact, Congress came together last May to support ethical stem cell research. By an overwhelming majority, Congress passed the Stem Cell Therapeutic and Research Act of 2005, which made cord blood units collected by cord blood banks available for stem cell transplantation or peer-reviewed research. Since its passage, cord blood banks from around the country have collected and stored approximately 150,000 new units of cord blood which will allow the pleuripotent stem cells within the cord blood to be used to treat one of a number of diseases and conditions such as heart disease, nerve damage, and certain cancers, as well as to be used for research.

These important advances illustrate that science can and should be advanced in an ethically minded manner. On Tuesday, the distinguished gentleman from Maryland (Mr. BARTLETT) reintroduced H.R. 322, the alternative Pleuripotent Stem Cell Therapeutic Enhancement Act.

□ 1330

I urge my colleagues to support and invest taxpayer dollars in stem cell research that is comprehensive, ethical, and effective. The bill before us today falls short of these goals, and therefore I urge opposition.

Ms. DEGETTE. Mr. Speaker, I am pleased to yield now 2 minutes to the gentlewoman from California (Ms. SOLIS).

Ms. SOLIS. Mr. Speaker, I wish to thank the gentlewoman from Colorado and also Congressman CASTLE for their leadership on this issue.

Today I rise in strong support of H.R. 3.

Stem cell research, as you know, is a promising science that provides hope for millions of our families whose loved ones suffer from Parkinson's disease, cancer, Alzheimer's disease and, even more, diabetes.

And as one who chairs the Hispanic task force on health, I know how very important it is that research be done on diabetes treatment because Latinos have a disproportionate large number in our community that suffer from this illness. Puerto Rican Americans and Mexican Americans are nearly twice as likely to have diabetes. The promising potential of stem cell research for those with diabetes provides a real opportunity to eliminate one of the most blatant health disparities for Latinos and African Americans.

Nearly three out of every four Americans support stem cell research. The American public have clearly stated that stem cell research is important to them and their families and their well-being. Let us make sure that we do the right thing today and we support this very important piece of legislation that went out of this House not too long ago. As a country, we have a moral obligation to support life, especially those who are ill and who need this treatment and cures. With stem cell research we would help to provide assistance to over 100 million Americans suffering from these various diseases. We cannot ignore a valuable research tool that might provide real cures for millions of Americans.

In my congressional district, the City of Hope, a grand research facility, is ready, willing and able to conduct promising cancer research using stem cells. For my constituents and for all Americans, I hope that we can remove this cumbersome limitation on federally funded research.

I urge my colleagues to strongly support H.R. 3.

Mr. CASTLE. Mr. Speaker, at this time I yield myself 1 minute.

Mr. Speaker, I would just like to continue the discussion that the gentlewoman from Colorado had on the IVF process in the clinics. There is a methodology that many people, even perhaps here, have taken advantage of in terms of being able to procreate, and that is going to an in vitro fertilization clinic, and that is done commonly in this country.

Right now, by survey, there are about 400,000 embryos frozen in those clinics around the country. About 2 percent a year are disposed of. That is about 8,000. Why are they disposed of? For a variety of reasons. People may divorce. Perhaps they have children. Who knows what the reasons may be, but they are disposed of. How are they disposed of? How are those 8,000 disposed of? A decision is made by the original creators of that particular embryo and by the physician running the in vitro fertilization clinic that they will be disposed of, and then they are put in as hospital waste; so they are not going to be life. It is only those embryos that would be used in this situation to develop the stem cell lines that we are talking about. It is very important to understand that they are going to be disposed of anyhow as hospital waste or are they going to be used for research.

Mr. BURGESS. Mr. Speaker, it is now my great privilege to yield 4 minutes to the gentleman from Mississippi (Mr. WICKER).

Mr. WICKER. Mr. Speaker, I thank the gentleman for yielding the time.

Mr. Speaker, this has been a very difficult issue for me for quite some time and I think for many of my colleagues also. It involves deeply held convictions by conscientious people of good faith, by some of my closest friends, on both sides of this question.

So I would like to begin with some things we can all agree upon. Principles about which there is no real debate today.

First of all, this bill is not about the legality or illegality of embryonic research. Surprisingly, I have had constituents say to me that they weren't asking for Federal funding for embryonic stem cell research, only that it be legal. This represents a misunderstanding of existing law.

So let us be clear at the outset. Embryonic stem cell research is legal today, has always been legal, and few people are suggesting that it be otherwise.

Secondly, there is currently a great deal of embryonic research going on today. Over the past 6 years, under the Bush guidelines, more than $130 million has been devoted to human embryonic stem cell research. Such research is also being conducted by State governments to the tune of $140 million. I happen to believe that this type of research is ethically troubling, but for my colleagues who feel otherwise, let us at least acknowledge that a lot of embryonic research is being done under current law.

Next, I think we can all agree that the Federal Government alone cannot possibly fund all the medical and scientific research we would want. The annual appropriation for the NIH is $28 billion. But even if that figure were to be doubled or even tripled this year, we couldn't afford all the potential research that is out there.

It is our job as Federal legislators to pick and choose. We have to allocate scarce resources, and we can't do it all.

Which brings us to the real philosophical difference in the debate today. For me and many of my fellow Americans, the destruction of a human embryo involves profound ethical and moral questions. This is a matter of conscience for millions of taxpayers who are deeply troubled by the idea of their tax dollars being used to destroy another human life.

We have been told by proponents of this bill that all they want to do is use embryos from fertility clinics which would otherwise be thrown away. I do not believe it will end there. After a period of time with no progress, we will be asked to approve and fund therapeutic human cloning, the creation of a human life for the express purpose of destroying that embryo for research purposes. This is the very real slippery slope upon which we are perched. Indeed, many proponents of this bill have voted against legislation to prohibit human cloning.

So, Mr. Speaker, given the admitted ethical problems involved in destroying human embryos, given the lack of any results so far from embryonic research and the proven cures and accomplishments from adult stem cells, given the great potential of germ cells, cord blood cells and amniotic stem cell research without the ethical drawbacks, and given the limited Federal resources and the fact that we can't fund everything, shouldn't we concentrate Federal dollars on research that does not involve the destruction of human embryos?

Ms. DEGETTE. Mr. Speaker, I am pleased to yield 2 minutes to the distinguished gentlewoman from Ohio, Mrs. TUBBS JONES.

(Mrs. JONES of Ohio asked and was given permission to revise and extend her remarks.)

Mrs. JONES of Ohio. Mr. Speaker, I would like to compliment my colleague DIANA DEGETTE and my colleague Mr. CASTLE for their leadership in this area.

I rise today on behalf of my 86-year-old father, who carried bags for United Airlines for 40 years, who currently is suffering from dementia and Alzheimer's.

I go visit him, and he knows who I am. But this man used to walk and play 18 holes of golf. He used to talk to me about golf. He used to talk to me about being just a great daughter and how proud he was of me. And now I do get, ''I love you,'' but I would have loved to have been able to see him be more of the Andrew Tubbs that I grew up with.

So I rise in support of my father, and I rise to say to the American public and my colleagues, it is time for us to understand the difference between being able to do research ethically and to get caught up and lost in some conversation about what we should or should not be doing.

In my congressional district, the Center for Stem Cell and Regenerative Medicine, composed of investigators from Case Western Reserve University, University Hospitals, Case Medical Center, the Cleveland Clinic, Athersys, and Ohio State University, is doing fantastic research. The mission of the center is to utilize adult human stem cells and tissue engineering technology to treat human disease. It would be wonderful for them to be able to expand the research they are doing.

I met a young woman who is having a problem walking. Based on the research that was done, they took her tissue, did some research, and I don't know all the details, and now she is able to walk. I met a young man who was having problems with cancer. Based on the research they have done at that center, this young man is fostering and doing well.

I just say, ladies and gentlemen, vote for this legislation. We need the research.

Mr. BURGESS. Mr. Speaker, I reserve the balance of my time.

Ms. DEGETTE. Mr. Speaker, I am pleased now to yield 2½ minutes to the gentleman from New York (Mr. ENGEL), a member of the committee.

Mr. ENGEL. Mr. Speaker, I thank the gentlewoman for yielding, and I thank her for her leadership on this very important issue, as well as Mr. CASTLE.

I am proud to stand here today as an original cosponsor of H.R. 3, the Stem Cell Research Enactment Act.

We all remember that dark day last July when President Bush cast the first veto of his Presidency on legislation approved overwhelmingly by the House and Senate, the Stem Cell Research Enhancement Act. To veto a bill that has the support of 72 percent of the American people and will do such good is simply unconscionable and indefensible as far as my concerned.

Despite what the critics may say, H.R. 3 doesn't end life. It honors life. As anyone who suffers from diabetes, Parkinson's disease, ALS, or a host of other debilitating health conditions knows, scientists believe that embryonic stem cells provide a real opportunity for devising unique treatments for these serious diseases.

Now, let me be absolutely clear. This is not about abortion. This is not about cloning. This is about the use of embryonic stem cells which would be discarded anyway, as the gentlewoman has pointed out. It has been estimated that there are currently 400,000 frozen embryos created during fertility treatments which would be destroyed if they are not donated for research. I would never condone the donation of embryos to science without the informed written consent of donors and strict regulations prohibiting financial compensation for potential donors. Our Nation's scientific research must adhere to the highest ethical standards, and H.R. 3 protects this.

The National Institutes of Health have admitted that U.S. science has fallen behind Europe and Asia in stem cell research because of President Bush's policy. While the number of States have committed significant funding towards embryonic stem cell research, NIH Director Zerhouni has noted that a patchwork collection of different stem cell policies in States could inhibit critical collaborations. We need a national commitment and a national directive on stem cell research.

Over 200 patient groups, universities and scientific societies have urged President Bush to expand the Federal policy on embryonic stem cell research. We must not allow those standing in the way of health and science to compromise the future well-being of our families and loved ones. Simply put, that would not be ethical. We must honor life by passing H.R. 3 today.

Ms. DEGETTE. Mr. Speaker, I am pleased now to yield 2 minutes to the distinguished new Member from Wisconsin, Dr. KAGEN.

Mr. KAGEN. Mr. Speaker, as a physician for 30 years, I know something about human diseases and the personal suffering of my patients and their families. I support stem cell progress, which is what H.R. 3 represents, because it will fulfill the promise of finding a cure to the many life-altering and painful disorders such as Alzheimer's, juvenile diabetes, heart disease and spinal injuries and more.

Saying ''no'' to stem cell progress is extremely unkind to patients, patients who will benefit from these potential cures yet to come. If one truly cares about life and believes in improving the quality of life of all of our people that we represent, then one should say ''yes'' to stem cell progress.

To all my colleagues, be not afraid. Be not afraid to take this important step forward. This Congress should be proud to be in favor of progress and should become pro-cure.

Ms. DEGETTE. Mr. Speaker, I am now very pleased to yield 2 minutes to the gentlewoman from Pennsylvania (Ms. SCHWARTZ).

□ 1345

Ms. SCHWARTZ. Mr. Speaker, I thank the gentlelady from Colorado for her leadership on this work and bringing this forward again and, of course, the gentleman from Delaware (Mr. CASTLE) as well.

Today, the Democratic majority will advance life-saving medical research. We will give American families hope, not lost opportunity. We will give them medical cures, not politics.

Mr. Speaker, we will give grandparents and parents, children and loved ones the promise of stem cell research. President Bush's policies have let the ideology of a few dictate and degrade matters important to safeguarding the public's health.

That will change. No longer will the promise of stem cell research and sound and ethical medical science be stifled.

Instead, we will expand stem cell research. H.R. 3 will mandate and maintain the United States' stance as a world leader in medical research and scientific advancement. It will advance scientific discovery in an ethical and responsible manner. It will enhance the ability of our medical professionals to care for their patients.

It will use Americans' ingenuity and intelligence for the greater good. And most importantly, it will benefit millions of people who are battling disease and injury.

My own home State, and in particular southeastern Pennsylvania, is in the forefront of science and medicine. Our hospitals, medical schools, biotechnology and pharmaceutical institutions are home to the best and brightest scientists who are working every day to provide new medicines and diagnostics. These scientists deserve access to the tools they need to find the cures for 100 million Americans suffering from diseases like cancer and Parkinson's disease, Alzheimer's, diabetes, spinal cord injuries, and other debilitating diseases and disorders.

Support ethical scientific research. Support hope. Vote ''yes'' on the Expanding Stem Cell Research Act.

Mr. BURGESS. Mr. Speaker, I yield 2 minutes to the gentlewoman from Tennessee (Mrs. BLACKBURN).

Mrs. BLACKBURN. Mr. Speaker, you know, I do believe that everybody engaged in this debate today does have the best intentions at heart. And the beauty of this House is that important issues like this that face our country can be debated, and passionately debated, right here on the floor of the House for the public to see.

But this is not a debate about passion, and it is not a debate about style. It is, Mr. Speaker, a debate about substance. And the substance of this debate today is life. Clear and simple, it is life. That is why I rise to support ethical stem cell research and to oppose H.R. 3.

We hear from a lot of proponents of stem cell research that they have suggested that embryonic stem cells would provide potential benefits to all mankind, and some of them insinuate that those of us or anybody who opposes their brand of research doesn't care about the suffering of their fellow man, and that is completely untrue.

There are many of us with family and friends who look for breakthroughs for debilitating diseases. But the presumption that only embryonic stem cells have the most potential for success is inaccurate. The growth of these cells can be erratic and uncontrollable. We have had people speak to that today. And we all know that embryonic stem cell research has not given science any successes in treating diseases.

In my opinion, I think we would be giving away a little part of our humanity and our sense of ethics for mere hope that this form of research would some day at some point yield results that would surpass ongoing research.

So let's focus on the efforts that are proven alternatives, adult stem cell, cord blood research that have made great leaps, significant success. This past week, the researchers from Wake Forest and Harvard, using the latest in technology, made reports showing advances in stem cell research that can be achieved faster and safer with amniotic fluids.

I encourage everyone to vote ''no'' on H.R. 3 and to support our motion to recommit.

Ms. DEGETTE. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from New Jersey (Mr. PALLONE).

Mr. PALLONE. Mr. Speaker, I rise in strong support of H.R. 3.

I was listening to the previous speaker, my colleague on the Republican side, and I have to say all we are really saying with this bill is we should have options and that those options should be allowed to proceed.

I believe strongly, regardless of your ethics or your theology, that the way this bill has been crafted by the gentlewoman from Colorado there is no reason why anyone here should not support it, regardless of how they are thinking of this theologically or from an ethical point of view.

Each day we wait to lift the ban that President Bush has placed on advancing embryonic stem cell research is another day that we waste in discovering new cures for the chronic diseases and medical conditions that so many of our friends and families suffer from.

Instead of embracing the potential embryonic stem cell research holds in developing new life-saving and life-enhancing therapies, the President has chosen to cater to the fringe of his party and has continually blocked this important legislation from becoming law.

This misguided policy has significantly impeded scientific progress over the years and needlessly placed American lives at risk. As a result, States like my own, New Jersey, are moving forward with their own initiatives to advance embryonic stem cell research. The State legislature in New Jersey and the Governor recently signed legislation setting up stem cell research institutes in my town, in my district, New Brunswick, and in two other parts of the State.

But the State should not have to go it alone. We need to leverage Federal, State and private dollars in order to unlock the potential of embryonic stem cells in the quickest fashion possible and bring new life-saving therapies to the patients who need them.

An overwhelming majority of Americans support embryonic stem cell research and their representatives in this Congress should do so as well. The time has come to put an end to these absurd restrictions. There shouldn't be restrictions. Today, let's vote for hope for millions of Americans and pass H.R. 3.

Ms. DEGETTE. Mr. Speaker, I am pleased to now yield 2 minutes to the distinguished gentleman from Illinois (Mr. LIPINSKI).

Mr. LIPINSKI. Mr. Speaker, I thank the gentlelady from Colorado for yielding me time, although today I rise in opposition to H.R. 3.

Mr. Speaker, no one likes to see another human suffer or struggle. This bill intends to provide hope. I can personally appreciate hope because I have juvenile diabetes. I take at least four shots a day and draw blood at least five times a day. But the bigger struggle is steering myself through the shoals of high and low blood sugar levels, and the very serious long-term and short-term consequences of both of those.

I want a cure for diabetes and for other diseases that are far more devastating, but I don't believe this bill is the way to get there.

I sit on the Science Committee because I believe a key to our better future is scientific research, especially in medicine. Last year I helped introduce and get signed into law the Stem Cell Therapeutic and Research Act that provides for the collecting and researching of human cord blood stem cells.

This week it was reported that a hospital in my district, Hope Children's Hospital, cured a girl suffering from leukemia using cord blood stem cells.

This year we need to pass the Alternative Pleuripotent Stem Cell Therapies Enhancement Act that recognizes that there are many forms of stem cells that offer great promise. Very recently, we were shown great promise that amniotic stem cells are pleuripotent, and this feature gives them the same advantage as sought in embryonic stem cells. But amniotic cells avoid not only the ethical pitfalls of embryonic cells; they also have been shown to be much better because they do not tend to produce tumors as embryonic stem cells do.

This is all in addition to adult stem cells that are being used today in clinical trials and clinical practice to treat 72 diseases.

Yes, I desperately want to be cured of diabetes, and I want to see the suffering end for so many other people; but science continues to demonstrate we don't have to choose between advancing medical techniques and contentious life issues.

So, today, I urge my colleagues to reconsider this bill and defeat it.

Mr. BURGESS. Mr. Speaker, at this point I am pleased to yield 2½ minutes to the gentleman from Pennsylvania (Mr. PITTS).

Mr. PITTS. Mr. Speaker, I rise in opposition to H.R. 3, which has been steamrolled to the House floor without any committee consideration, without even the chance to amend a bill that puts theoretical research, and I have heard the words ''a promise'' and ''hope'' and ''we hope,'' ''potential,'' over real cures for real patients.

Supporters of H.R. 3 have offered no solutions to two problems that have plagued embryonic stem cells. Even with 25 years of research with embryonic stem cells in mice and almost a decade in humans, researchers still find that the cells tend to form cancerous tumors and can be subject to immune rejection, with not one successful treatment or therapy for human application using embryonic stem cells.

In fact, Ronald McKay, an NIH researcher who is supportive of embryonic stem cell research, says, ''To start with, people need a fairy tale. Maybe that is unfair, but they need a story line that is relatively simple to understand.'' That was in The Washington Post.

In other words, embryonic stem cell research is a false hope in addition to being destructive and unethical. Patients, many think, will be the last to benefit from H.R. 3. But biotech firms and research universities will reap millions of taxpayer dollars for research that may never help a single patient.

However, Wake Forest University and Harvard Medical Center recently released a study that shows that stem cells taken from amniotic fluid are pleuripotent, adding these cells to the growing list of ethical stem cell treatments that are available to researchers.

Embryonic stem cells have not treated a single human patient and have not been proven effective in good animal models. Conversely, ethical and successful adult and cord blood stem cell therapies are lab tested and are treating dozens of human patients today. In fact, there are several FDA protocols using adult stem cells for treating patients.

The score is zero, not one successful treatment for embryonic stem cell research, to 72 and counting, successful

treatments for human patients using adult stem cells. H.R. 3 is an empty promise that uses old science when there are real cures for real people with ethical research today.

I urge a ''no'' vote on H.R. 3 and support the motion to recommit.

Ms. DEGETTE. Mr. Speaker, I am pleased to yield 1 minute to the distinguish gentleman from Oregon (Mr. BLUMENAUER).

Mr. BLUMENAUER. Mr. Speaker, every American has a very personal stake in today's discussion because everyone knows people who would benefit from breakthrough research using stem cells. Indeed, with 100 million Americans at risk from a variety of diseases, ranging from Lou Gehrig's disease to Parkinson's, it is almost impossible not to know somebody impacted. The most profound beneficiaries are our family and friends who have not yet shown any symptoms, but may fall victim to one of these devastating diseases.

The stakes in this debate are both high for potential benefit to the physical condition of all human kind, as well as the establishment of appropriate boundaries between public policy and personal theology. The President failed the latter test when he exercised the only veto in his entire career.

In the last election, the American voter made it clear their families deserve an opportunity for embryonic stem cell research to be conducted in a reasonable, controlled manner, to hasten the day of vital life-saving, life-enriching therapy for all.

Mr. BURGESS. Mr. Speaker, at this time I would like to yield 1 minute to the distinguished Member from Texas, Judge Lou Gohmert.

Mr. GOHMERT. Mr. Speaker, I have a couple of pages here on great stem cell research that has been going on: adult stem cells, amniotic fluid stem cells. But my time is so limited. Let us just clarify. This is not about no research on embryonic stem cells. That is ongoing. That is not illegal.

We have funded tremendous amounts of stem cell research. Frankly, some of us don't need lectures on what it is to watch someone you love suffer and die and diminish and want to help them. Most all of us know that.

This is about prying money from taxpayers' hands who believe it is illegal and immoral and unethical to kill living embryos, and some of us have seen our little embryo mature into a beautiful person. This is about taking taxpayer dollars away from them and funding this research.

We are in a free market society. Pharmaceuticals have been demonized. Gee, they are making a profit. They are out to make a profit. If the money were there, they would be doing this.

Ms. DEGETTE. Mr. Speaker, I would inquire as to the time remaining on each side.

The SPEAKER pro tempore. The gentlewoman from Colorado has 13½ minutes, the gentleman from Texas has 6½, and the gentleman from Delaware has 2.

Ms. DEGETTE. Mr. Speaker, I now recognize the gentleman from New Jersey (Mr. PASCRELL) for 1 minute.

□ 1400

Mr. PASCRELL. Mr. Speaker, I rise in support of H.R. 3.

Mr. Speaker, I strongly support all the efforts to encourage responsible research in this area. Indeed, I think it is a moral imperative for the Congress to pursue all prudent policies for the benefit of our people.

I want to commend both the manager and all of the other managers on both sides of the aisle, because they have not shrunk from addressing the moral issues here, which are very, very important to the whole issue.

I am not afraid of those issues, I want you to know, Mr. Speaker, at all. Even as a Christian, I say this: The principle of double effect is in play here. More good will come out of this, the saving of many lives. I think this is critical. If we are afraid to face the moral issues, then we should not have presented this bill in the first place. That is why I want to commend the sponsors.

This is not inherently wrong. It is not intended to be wrong. The good effort and result may not be a direct casual result. Finally, the good result must be proportionate to the bad result.

Prudence and reflection are critical here, and I want to address this, and the debate should be on a moral plane. There is nothing wrong with that, that we debate this issue. But the moral correctness of this thing isn't all on one side, I want everybody to understand that. Thomas Aquinas laid out the principles of double effect. It is absolutely inherent in this particular issue.

I say support H.R. 3, and, again, I commend the moral fortitude of all the sponsors of this legislation.

Ms. DEGETTE. Mr. Speaker, I yield 1 minute to the gentlelady from Texas (Ms. JACKSON-LEE).

(Ms. JACKSON-LEE of Texas asked and was given permission to revise and extend her remarks.)

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mr. FRANK of Massachusetts). The Chair would caution Members to heed the gavel.

Ms. JACKSON-LEE of Texas. Mr. Speaker, let me thank Mr. CASTLE and Ms. DEGETTE for their outstanding leadership.

Might I just simply call the roll: Parkinson's disease, diabetes, Alzheimer's, ALS, cancer, spinal cord injuries, and the many soldiers that are in the hospitals of America, Walter Reed, Bethesda, who have suffered from spinal cord injuries in the battle of Iraq and Afghanistan. We owe them hope. We owe them hope for the hopeless.

As I listened to my friends talk about the existing research, let it be clear that the NIH approved lines lack the genetic diversity that researchers need in order to develop effective treatment for millions of Americans.

We know that there is amniotic fluid, and there is some suggestion that that is a substitute. But George Daley from Harvard says that these newly discovered cells are not a replacement for embryonic stem cells. On the contrary, research for these is entirely complimentary.

As Michael J. Fox has said, I respect and counsel and thank those who prayerfully disagree with me. I respect their moral standing. But ethicists and others believe this is the right way to go. Let us give hope to the hopeless. Support stem cell research.

Mr. Speaker, I rise today in support of H.R. 3, the ''Stem Cell Research Enhancement Act of 2007.'' Once again we find ourselves in a position to pass a bill that will provide our nation's scientists with the valuable opportunity to save lives. It is our duty as representatives of the people to help Americans who are suffering.

In 1998, the very first stem cells were isolated, leading to the immediate realization of the enormous possibilities this discovery presents. Suddenly treatments, even cures, seemed possible for devastating illnesses like Parkinson's disease, diabetes, Alzheimer's, Amyotrophic Lateral Sclerosis (ALS), cancer, and spinal cord injuries.

Despite restrictions on federal funding imposed by President Bush in 2001, the states of California, New Jersey, Connecticut, Illinois, and Maryland have provided funding for this important research. In 2005 and again last year, we learned that in spite of the President's continued opposition to stem cell research, support for it in Congress transcended party lines.

Unfortunately, the embryonic stem cells currently permitted by law for research are not sufficient for scientists needs. According to the National Institute of Health (NIH), of more than 60 stem cell lines that were declared eligible for federal funding in 2001, only about 22 lines are actually available for study by and distribution to researchers. These NIH-approved lines lack the genetic diversity that researchers need in order to develop effective treatments for millions of Americans. Opponents of this bill repeat statistics on the little progress that has been made with embryonic stem cell research, but I must remind them that the restrictions placed on it have greatly hindered its success.

In spite of recent scientific breakthroughs that suggest alternate means of obtaining stem cells, I must caution my colleagues from thinking that embryonic stem cell research is no longer necessary. I applaud Dr. Anthony Atala and his team at Wake Forest University and Harvard University for their very recent outstanding discoveries. However, I must repeat the caution of Harvard researcher George Daley in saying that these newly discovered cells ''are not a replacement for embryonic stem cells''—on the contrary, research for these is entirely complementary. In addition, while we know very little about these new methods, much progress has already been made in the research of embryonic, or pluripotent, stem cells, the most adaptable and

unique of all the stem cell varieties. They currently provide scientists with the most possibilities for research and for the discovery of life-saving treatments; as such, we must allow these scientist the opportunity to do so.

It is understandable that many Americans may have moral conflicts with this issue, but this bill is ethical in every respect. First, embryonic stem cells are only clusters of cells, and do not have the capability to develop into a fetus or a human being. Also, not a single embryo will be destroyed in order for this research to be implemented, because there is no need to do so. It is estimated that more than 400,000 excess frozen embryos exist in the United States today and that tens of thousands, and perhaps as many as 100,000, are discarded every year.

Further, H.R. 3 ensures that none of the embryos used in stem cell research is intended for implantation in a woman. All of these embryos would otherwise be discarded. Mr. Speaker, denying people in our nation who suffer from debilitating illnesses the possible medical benefits that could result from embryonic research is not only cruel but a waste of these valuable life-sustaining stem cells.

This is indeed a matter of ethics—we cannot morally argue that it is better to deny suffering people hope for a cure. Let us provide all people in this world with possibilities for a better future by supporting stem cell research. Let us create the potential for miracles in the lives of paralyzed individuals, those with cancer, or those in need of organ transplants.

This bill provides a limited—yet significant—change in current policy that would result in making many more lines of stem cells available for research. If we limit the opportunities and resources our researchers have today, we only postpone the inevitable breakthrough. Our vote today may determine whether that breakthrough is made by Americans, or not.

I urge my colleagues to vote in favor of this bill, to vote in favor of scientific innovation, and to vote in favor of a perfect compromise between the needs of science and the boundary of our principles. Finally, the Texas Medical Center is located in Houston, it is a major research site and in desperate need for being giving the hope of Stem Cell Research—I urge support for H.R. 3—Stem Cell Research.

JANUARY 9, 2007.

Hon. SHEILA JACKSON-LEE,
Rayburn HOB,
Washington, DC.

DEAR REPRESENTATIVE: I am writing today to express my strong support for the Stem Cell Research Enhancement Act.

As you may know, I am pro-research, pro-science and support all forms of stem cell research. Every scientist I've spoken to (and a lot more I haven't) believes that embryonic stem cells may hold the key to better treatments and cures—not only for Parkinson's disease but for cancer, diabetes, spinal cord injuries, heart disease, Alzheimer's and countless other illnesses that cut short or diminish millions of lives every year.

My own Foundation has funded this promising research, giving hope to millions of people worldwide. But under current restrictions, our ability to build on early breakthroughs is deeply compromised.

No matter where you are on the issue of stem cell research, one thing is fundamentally clear: disease is a non-partisan issue that requires a bi-partisan solution.

A majority of the House of Representatives, a majority of the United States Senate, and over two-thirds of Americans support expanded funding for stem cell research. We understand that embryonic stem cell research holds the potential to transform microscopic cells already marked for destruction into life-saving treatments.

I have great respect for those who have concluded, after much thought, reflection, and prayer, that they cannot support embryonic stem cell research.

But the debate today is over the use of embryos discarded by in vitro fertilization clinics. Indeed, this is the ultimate rescue operation. These embryos have the potenital to rescue millions or people from terrible diseases and in doing so they will not be created then discarded in vain.

Personally, I can't think of a greater affirmation of the culture of life than to advance the fight against disease by increasing federal funding for biomedical research. Equally crucial is to remove undue restrictions on important paths forward, including embryonic stem cell research.

The Senate and House of Representatives will soon consider the Stem Cell Research Enhancement Act, a vital piece of legislation that could lift current federal funding prohibitions and improve oversight of embryonic stem cell research.

You can make a difference by co-sponsoring and voting yes on the Stem Cell Research Enhancement Act. I urge you with all my heart to support this bill and deliver hope to every person affected by debilitating disease.

America is about optimism, about promise, about always moving forward. The idea of rejecting one of the most promising areas of research is shortsighted. We have no way of knowing where the next breakthrough will emerge.

I very much appreciate your consideration of this matter and look forward to working with you this year to pass this important legislation and allow the science to move forward.

Thank you,

MICHAEL J. FOX.

Mr. BURGESS. Mr. Speaker, I yield 1 minute to a new Member, the gentleman from Ohio (Mr. JORDAN).

Mr. JORDAN of Ohio. Mr. Speaker, I thank the gentleman.

Mr. Speaker, the Founders had it right. We are created with certain inalienable rights, and among these are life, liberty and the pursuits of happiness. It is interesting the order the Founders placed the rights they chose to mention. Can you pursue happiness if you first don't have liberty? Can you ever go after your goals and dreams if you first don't have freedom? And do you ever have true freedom if government doesn't protect your most fundamental right, your right to live?

H.R. 3 devalues human life. It ends human life, and it does so with taxpayer dollars. This is the wrong kind of message to send. It is the wrong thing to do.

On this issue, the science is also clear. The morals are clear, and the ethics are clear. We do not have to end life to protect it. Today, as has been pointed out earlier, American doctors are performing all kinds of positive research without taking human life. Embryonic stem cell research is not producing results, even after 25 years and millions of dollars of taxpayer money.

Like other pro-life Members of this body, I support ethical research that protects life, but embryonic stem cell research does not.

Mr. Speaker, the ethical decision is the smart decision. That is why I oppose this bill, and hope others do as well.

Mr. Speaker, the Founders of our great Nation got it right. We are created with certain inalienable rights, and among those rights are life, liberty and the pursuit of happiness. It is in defense of the first of these rights—the right to life—that I rise today to express my opposition to H.R. 3, the Stem Cell Research Enhancement Act of 2007. Like its cousin, H.R. 810, which failed to pass the legislative process during the last Congress, H.R. 3 would provide new Federal auspices and funding to destroy embryos for use in embryonic stem cell research.

Like the other pro-life members of this House, Mr. Speaker, I enthusiastically support the many forms of ethical stem cell research taking place in our country today—research that has already yielded invaluable treatments for over 70 health conditions. Among these are successful treatments for Brain Cancer, Breast Cancer, various forms of Lymphoma and Leukemia, Multiple Sclerosis, Parkinson's Disease, spinal cord injury, Sickle Cell Anemia and Krabbe Disease.

Research has demonstrated that various forms of adult stem cell materials, umbilical cord blood and, as described in a Washington Times article from January 8th, amniotic fluid are an excellent source of pluripotent stem cells. Such ethical sources have yielded all of these effective treatments and offer hope for Americans suffering the ravages of disease. In many cases, these materials are taken from the patients themselves and so offer a better therapeutic match than materials taken from the embryos of other humans. Furthermore, expansion of the resources designed to gather and store these materials will increase the number and frequency of successful treatments.

Despite these significant facts, many in this House are pressing for Federal funding for embryonic stem cell research, which necessitates destroying human embryos and, thus, human lives. The pre-born are precious human beings from the moment of conception. They deserve our protection and love and no benefit—perceived or otherwise—should persuade us to allow their destruction. All of this added to the fact that embryonic stem cell research has never yielded a successful treatment for any disease, in spite of millions in annual funding (the NIH spent $38 million on human embryonic stem cell research in 2005) and 25 years of animal and human research. In recent years, embryonic stem cell research has also been marred by fraud through the falsified cloning reports of Dr. Hwang Woo Suk.

Some people have argued that pre-existing human embryos now in storage must be used for research because they

are destined for destruction anyway. This is not borne out by the fact that the vast majority of human embryos were created for family-building and that families can adopt and have adopted these embryos and had children.

Mr. Speaker, we must not make a morally repugnant choice in the interest of expedience and we must not play God with human lives. We must defend the lives of the pre-born while facilitating ethical forms of stem cell research that have produced concrete results and hold great promise for the future. This is most consistent with a compassionate regard for all life—young and old.

STEM CELL RESEARCH TREATMENTS—ADULT 72 AND EMBRYONIC 0

[Check the Score: Adult Stem Cells vs. Embryonic Stem Cells Benefits in Human Patients (from Peer-Reviewed Studies).]

Adult Stem Cells	Embryonic Stem Cells
Cancers:	
1. Brain Cancer	0
2. Retinoblastoma.	
3. Ovarian Cancer.	
4. Skin Cancer: Merkell Cell Carcinoma.	
5. Testicular Cancer.	
6. Tumors Abdominal Organs Lymphoma.	
7. Non-Hodgkin's Lymphoma.	
8. Hodgkin's Lymphoma.	
9. Acute Lymphoblastic Leukemia.	
10. Acute Myelogenous Leukemia.	
11. Chronic Myelogenous Leukemia.	
12. Juvenile Myelomonocytic Leukemia.	
13. Chronic Myelomonocytic Leukemia.	
14. Cancer Of The Lymph Nodes: Angioimmunoblastic Lymphadenopathy.	
15. Multiple Myeloma.	
16. Myelodysplasia.	
17. Breast Cancer.	
18. Neuroblastoma.	
19. Renal Cell Carcinoma.	
20. Soft Tissue Sarcoma.	
21. Various Solid Tumors.	
22. Ewing's Sarcoma.	
23. Waldenstrom's Macroglobulinemia.	
24. Hemophagocytic Lymphohistiocytosis.	
25. Poems Syndrome.	
26. Myelofibrosis.	
Auto-Immune Diseases:	
27. Systemic Lupus.	
28. Sjogren's Syndrome.	
29. Myasthenia.	
30. Autoimmune Cytopenia.	
31. Scleromyxedema.	
32. Scleroderma.	
33. Crohn's Disease.	
34. Behcet's Disease.	
35. Rheumatoid Arthritis.	
36. Juvenile Arthritis.	
37. Multiple Sclerosis.	
38. Polychondritis.	
39. Systemic Vasculitis.	
40. Alopecia Universalis.	
41. Buerger's Disease.	
Cardiovascular:	
42. Acute Heart Damage.	
43. Chronic Coronary Artery Disease.	
Ocular:	
44. Corneal Regeneration.	
Immunodeficiencies:	
45. Severe Combined Immunodeficiency Syndrome.	
46. X-Linked Lymphoproliferative Syndrome.	
47. X-Linked Hyper Immunoglobulin M Syndrome.	
Neural Degenerative Diseases And Injuries:	
48. Parkinson's Disease.	
49. Spinal Cord Injury.	
50. Stroke Damage.	
Anemias And Other Blood Conditions:	
51. Sickle Cell Anemia.	
52. Sideroblastic Anemia.	
53. Aplastic Anemia.	
54. Red Cell Aplasia.	
55. Amegakaryocytic Thrombocytopenia.	
56. Thalassemia.	
57. Primary Amyloidosis.	
58. Diamond Blackfan Anemia.	
59. Fanconi's Anemia.	
60. Chronic Epstein-Barr Infection.	
Wounds And Injuries:	
61. Limb Gangrene.	
62. Surface Wound Healing.	
63. Jawbone Replacement.	
64. Skull Bone Repair.	
Other Metabolic Disorders:	
65. Hurler's Syndrome.	
66. Osteogenesis Imperfecta.	
67. Krabbe Leukodystrophy.	
68. Osteopetrosis.	
69. Cerebral X-Linked Adrenoleukodystrophy.	

STEM CELL RESEARCH TREATMENTS—ADULT 72 AND EMBRYONIC 0—Continued

[Check the Score: Adult Stem Cells vs. Embryonic Stem Cells Benefits in Human Patients (from Peer-Reviewed Studies).]

Adult Stem Cells	Embryonic Stem Cells
Liver Disease:	
70. Chronic Liver Failure.	
71. Liver Cirrhosis.	
Bladder Disease:	
72. End-Stage Bladder Disease.	

Ms. DEGETTE. Mr. Speaker, I am pleased to yield 1 minute to the distinguished gentleman from Illinois (Mr. DAVIS).

(Mr. DAVIS of Illinois asked and was given permission to revise and extend his remarks.)

Mr. DAVIS of Illinois. Mr. Speaker, I want to commend first of all Representative DEGETTE and Representative CASTLE for their strong and persistent leadership on this issue, and I rise in strong support of it.

I have five important research institutions in my Congressional district, and it is their position, it is my position, it is the position of a majority of my constituents, that we don't know all of the possibilities or potentialities of stem cell research, but we sure know that we have a responsibility to try and find out. Therefore, on their behalf, I express strong support for passage of this important legislation and look forward to unleashing the potential that it has.

Ms. DEGETTE. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Wisconsin (Mr. KIND).

(Mr. KIND asked and was given permission to revise and extend his remarks.)

Mr. KIND. Mr. Speaker, I want to commend my colleague from Colorado (Ms. DEGETTE) as well as Mr. CASTLE, for the bipartisanship that they have shown in bringing forward this important piece of legislation. I do rise in support, because my State is home to one the premier research institutions in the entire world for stem cell research, the University of Wisconsin at Madison. But the point is this: This research is going to go forward. The question is where and under what ethical guidelines it does so.

If we want to remain the most creative and innovative country in the world, at the forefront of medical and scientific discovery, we need to allow this research to occur here and not abroad. We are currently experiencing a serious brain drain in the medical research community of some of our best and brightest going overseas so they can conduct this research in this promising field of study.

I would rather see us, through our watchful guidance and oversight, see this being done here under very strict ethical guidelines, which are laid out in this legislation, as given to us by the National Institutes of Health, guidelines that prohibit human cloning, that prohibit the creation of embryos for the sole purpose of medical research.

This should be here, and I hope today we receive bipartisan support in passing this important legislation.

Mr. Speaker, I rise today in strong support of H.R. 3, the Stem Cell Research Enhancement Act of 2007. This bill would expand the current Federal policy on embryonic stem cell research by allowing federally funded research on stem cell lines derived after August 9, 2001, while implementing strong ethical guidelines to ensure Federal oversight of the research. I am pleased the 110th Congress has taken immediate steps to address this important issue, and it is my hope that members will once again unite in support of this bill.

Most of the scientific community believes for the full potential of embryonic stem cell research to be reached, the number of cell lines readily available to scientists must increase. A number of NIH Directors have testified before the Senate Appropriations Committee that the current policy is restrictive and hinders scientific progress.

We are already at risk of losing our scientific and technological edge because of increasing competition around the world. As a nation of opportunity and innovation, we have a responsibility to embrace policies that create breakthroughs in both medicine and technology for the benefit of our citizens.

Important advances in the science of embryonic stem cell research have been made since the August 2001 policy was set. Recently, researchers at the University of Wisconsin in Madison developed a method to grow human embryonic stem cells without using mouse feeder cells. This is exciting news since mouse feeder cells are thought to be a source of contamination if the cells are ever to be used therapeutically in humans.

From its earliest days, Wisconsin has been at the forefront of embryonic stem cell research. The University of Wisconsin—Madison is one of the leading facilities for stem cell research, and I believe with continued study, the possible medical benefits of stem cell research are limitless; lives affected by diseases, damaged tissue, and faulty organs would be greatly improved. Additionally, this legislation would ensure the important work of our scientists is not unnecessarily sidetracked by politics.

The significance of this legislation extends beyond the potential for advances in science and technology. More importantly, embryonic stem cell research could lead to new treatments and cures for the over 100 million Americans afflicted with life-threatening and debilitating diseases. Scientists believe these cells could be used to treat many diseases, including Alzheimer's, Parkinson's, diabetes, and spinal cord injuries. However, the promise of this research may not be reached if the Federal policy is not expanded.

Mr. Speaker, it has become increasingly clear that the American public supports expanding the Federal stem cell policy. Thus, I strongly urge my colleagues to respond to the interests and needs of our Nation's citizens. Please join me in supporting this important legislation that will reinvigorate embryonic stem cell research in this country and allow science to move forward unimpeded, revolutionize the practice of medicine, and offer hope to the millions of Americans suffering from debilitating diseases.

Mr. BURGESS. Mr. Speaker, I yield 1 minute to a distinguished Member from South Carolina (Mr. BARRETT).

Mr. BARRETT of South Carolina. Mr. Speaker, my heart goes out to all those struggling with crippling diseases and disabilities, but I do not believe that destroying a human life or the potential for human life is the answer.

Over the weekend, a study done by Wake Forest and Harvard Universities was released, and it suggests that researchers may be able to use amniotic fluid, further proof that embryonic stem cell research is not the only alternative. In fact, research has shown that stem cells derived from adults and umbilical cords are already used in over 70 successful therapies today and hold the most promise for the future. We do not have to choose between the need to encourage the advancement of science with the need to protect life.

I voted against this bill in the 109th Congress, and as long as I am a United States Congressman, my constituents can count on me to protect human life. That is why I urge my colleagues to join me in voting against H.R. 3.

Ms. DEGETTE. Mr. Speaker, I am pleased to yield 2 minutes to the distinguished Democratic Caucus Chair, the gentleman from Illinois (Mr. EMANUEL).

Mr. EMANUEL. Mr. Speaker, I rise in strong support of this legislation. The vote we cast today is a vote that can and will have a direct impact on the life and health of those suffering from the most debilitating and painful diseases.

This is not a Democratic issue. This is not a Republican issue. This is an issue that all Americans overwhelmingly support. We owe it to them to stand up and support this research that is groundbreaking in the area of health.

As I listen to the debate, I hear the moral objections of those who oppose, and I acknowledge them. And at the same time, for those who support this, I hear their moral, which I view, come from this from both a public health position as well as a moral position about the responsibility where you can find cures, to lead that way. And I don't see a way of resolving the divide of two moral positions held firmly in conviction.

Sometimes I think of this, half in jest, that the only way to get around this issue is that those who have moral objections to this, that when we find the cures going forward on stem cells, you waive your right to the cure to Parkinson's disease, Alzheimer's, diabetes. I say that not seriously.

But the only way to get past this is in some way allow the research to go, and those that don't agree with it, whatever cures emanate from it, they would waive their right to it. And I don't say that in any seriousness, but I do not see how you resolve those two morally held beliefs on conviction.

I would hope those who object and do it in good conscience understand why those of us who support this, which is why 10 States around the country have approved it, let alone other countries, all the possibility that emerges here to be unlocked to deal with major diseases that not only affect the individual but those families; the potential on Parkinson's, Alzheimer's, ALS, diabetes, and all the other type of money that goes to deal with those at one level, here we can come up finally with a cure. And we know one of the things that is affecting our research is the fact that we do not deal with cures, but only with managing the ailments.

I am pleased that we have this opportunity to vote on this today.

Mr. BURGESS. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Alabama (Mr. ADERHOLT).

Mr. ADERHOLT. Mr. Speaker, I rise to voice my opposition to the expansion of Federal funding of embryonic stem cell research that is represented by this bill, H.R. 3.

This bill unnecessarily opens the door to research that sacrifices one life for the potential health of another. I will never believe that this is a fair and equitable trade, especially when there are other avenues of research that are available.

On its own, stem cell research is a worthy pursuit to help solve many of today's medical mysteries, but a line must be drawn when this research destroys human life, as in the case of embryonic stem cell research.

There are ethical stem cell alternatives which no one objects to, and they are flourishing. In fact, as of today, and it has already been noted here on the floor, stem cells from noncontroversial sources, like umbilical cord, have been used to treat humans suffering from more than 70 different afflictions.

In debating this issue, we need to be clear on the facts, and I would urge my colleagues to oppose this bill and respect the sanctity of human life.

Mr. BURGESS. Mr. Speaker, I am pleased to yield 1 minute to the gentleman from Florida (Mr. STEARNS).

(Mr. STEARNS asked and was given permission to revise and extend his remarks.)

Mr. STEARNS. Mr. Speaker, it is never, never, justifiable to deliberately end the life, especially when there are alternative sources of stem cells that do no harm.

Proponents of embryonic stem cells state the greatest advantage is the pluripotency of these cells, cells with the amazing ability to grow into any type of cell in the human body. It is this unique adaptability that they claim makes embryonic stem cells more promising, more promising, than adult stem cell treatment of human diseases.

But my colleagues, the truth, however, is that embryonic stem cells have not, have not, produced a single viable human treatment for any disease, whereas adult stem cells have produced numerous therapies that have been successfully administered. Treatments derived from adult stem cells have been successfully treating patients for years, with measurable improvement in their conditions, and that is the real story.

Mr. Speaker, whether you believe that life begins at conception or not, the mere potential for human life needs to be protected—not destroyed. It is never justifiable to deliberately end a life especially when there are alternative sources of stem cells that do no harm.

Proponents of embryonic stem cells state the greatest advantage is the ''pluripotency'' of these cells, cells with the amazing ability to grow into any type of cell in the human body. It is this unique adaptability that they claim makes embryonic stem cells more promising than adult stem cells for treatment of human diseases. The truth however, is that embryonic stem cells have not produced a single viable human treatment for any disease—whereas adult stem cells have produced numerous therapies that have been successfully administered.

Treatments derived from adult stem cells have been successfully treating patients for years with measurable improvement in their conditions. Over 600 Americans were treated last year with umbilical cord blood transplants. After transplant these cord blood cells move deeply into the patients' bones and produce new blood and immune cells for the remainder of their lives. These cord cells literally give patients a new lease on life.

For example, researchers at the Burnham Institute and the Rebecca and John Moores Cancer Centers in San Diego found that pancreatic cells could be altered into insulin producing stem cells, foreshadowing a possible cure for both type 1 and 2 diabetes.

Recently, researchers at Wake Forest University and Harvard University reported that stem cells drawn from amniotic fluid donated by pregnant women hold the same promise as embryonic stem cells without causing harm to the mother or the fetus.

These stem cells are able to differentiate into fully grown cells representing the three major kinds of tissue found in the human body. Researchers also discovered that amniotic stem cells do not form tumors, a problem that commonly plagues embryonic stem cells.

The findings contained in this study point to a promising avenue of research that sidesteps the hurdles facing embryonic stem cell research. Moral objections to the destruction of embryos occurring when cells are harvested are avoided because no embryos are destroyed.

The Washington Post recently stated, ''The new cells are adding credence to an emerging consensus among experts that the popular distinction between embryonic and adult stem cells is artificial.''

With more than 4 million U.S. births a year, it would not take long to collect the estimated 100,000 amniotic donations necessary to provide enough cells of sufficient genetic diversity to provide compatible tissue for virtually everyone in the United States.

I also want to remind my colleagues that the current ban on embryonic research does not prevent private funding for embryonic stem cell research. Microsoft Chairman Bill Gates and Newport Beach bond trader Bill Gross are among several private donors who have provided millions of dollars toward embryonic stem cell research.

In fact the Federal Government has spent over $161 million dollars on existing stem cell lines where the embryo had already been destroyed. The bill before us today advocates the further destruction of new life to expand human embryonic stem cell research. This research on NIH-approved embryonic stem cell lines accounts for 85 percent of all embryonic stem cell publications published.

Adult stem cells have provided human treatments, have a lower rate of immune rejection in patients, and show less likelihood of tumor formation. We should aggressively pursue this avenue of research. In seeking new treatments for the ills of humanity, let us also strive to protect the future of humanity, We too must uphold the first tenet of the Hippocratic oath—''First do no harm.''

It is unnecesary and morally offensive to force all taxpayers to pay to expand embryonic stem cell research. I urge my colleagues to vote against this legislation.

Mr. BURGESS. Mr. Speaker, I yield myself 15 seconds to just mention it is my sincere regret after hearing the remarks of the Representative from Illinois who just spoke that we were not allowed the alternative of fully vetting this in a committee hearing.

Mr. Speaker, I yield the balance of my time to the gentleman from Maryland (Mr. BARTLETT).

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Mr. BARTLETT of Maryland. Mr. Speaker, in a former life, I received a doctorate in human physiology, I taught medical school, and I had a course in advanced embryology. With this background, my heart just bleeds when these diabetic kids come through my office every year, because I know there are options which have not been discussed on this floor; and I have two charts here which point that out.

The assumption is being made by many people that you need to kill embryos to get embryonic stem cells. That just isn't true, and these slides point that out. Let me go quickly to the slide that is really important here.

These are several different ways of getting embryonic-like stem cells, and I want to go to the embryonic biopsy. This was a procedure that I had suggested to the President before he came out with his executive order. The medical community has now run past us with this, Mr. Speaker. What I suggested was you ought to be able to take a cell from an early embryo without harming an embryo, because I knew that God or nature, whoever you think does it, does that every day. When identical twins are produced, half the cells are taken away, and each half produces a perfectly normal baby.

What the medical community is now doing is what is called preimplantation genetic diagnosis. They take a cell from an early embryo and they do a genetic diagnosis on it. If there is no genetic defect, they implant the remaining cells. It may be six or seven cells. Sometimes they get an extra cell. And more than 2,000 times now we have had perfectly normal babies born.

There are hundreds of clinics in this country doing that. The procedure started in England. All that we need is that second cell that they inadvertently get when they do the biopsy for preimplantation genetic diagnosis. Two professionals have now developed stem cell lines, Verlinski and Lanz have developed stem cell lines from single embryonic cells.

Mr. Speaker, we can have embryonic stem cell research without killing embryos. I think that is the real message.

Every professional I know believes there ought to be more potential medical applications from embryonic stem cells and adult stem cells. Many of my colleagues are opposing embryonic stem cell research needlessly because they believe you have to kill embryos to get embryonic stem cells. You don't have to kill embryos. The medical community is doing this every day by the thousands in preimplantation genetic diagnosis with in vitro fertilization.

Mr. CASTLE. Mr. Speaker, I yield the balance of my time, 2 minutes, to the very distinguished gentleman from Texas (Mr. BARTON).

Ms. DEGETTE. Mr. Speaker, I do not know if now would be the time to yield 2 of my last minutes also to Mr. BARTON.

The SPEAKER pro tempore. Yes, that would be appropriate. The gentleman is now recognized for a total of 4 minutes.

(Mr. BARTON of Texas asked and was given permission to revise and extend his remarks.)

Mr. BARTON of Texas. I thank Mr. CASTLE and Ms. DEGETTE. I also want to compliment the Speaker on his management of time. He has done an excellent job. I will say it is better to have him up there so he can't debate us down here. So I appreciate that.

Mr. Speaker, and Members of the House of Representatives, I have been in the Congress for 22 years. Until the last Congress, my pro-life voting record, over 21 years, was 100 percent. One hundred percent. In the last Congress, I did vote for what was then the Castle-DeGette bill. I also voted to override the President's veto. So coming into this Congress, my pro-life voting record is 100 percent, minus two votes. Now, in anybody's book, that has got to be an A-plus.

I am going to support what is now DeGette-Castle because I am pro-life, and I strongly support the pro-life effort in every way. But having said that, when it comes to research and when it comes to stem cell research, I think Members on both sides and of all various persuasions in which your view is the pro-life or pro-choice issues, unless you think we shouldn't do research at all, and there are certainly Americans who do not believe it is proper to do medical research, or unless you don't think we should do medical research at all in embryos or in stem cells, then it is appropriate to have a debate about this bill.

Now, I hope the amniotic research works. I had a baby son, Jack, 16 months ago. My wife, Terry, and I saved his cord blood. It is stored right now in California, and if he ever needs it, it is there.

I hope that the adult stem cell work that is being done is successful. I am disappointed that so far the embryonic stem cell research has not yielded the results that we hope, but it is that one time that works that we are hoping for.

The Chicago Cubs have not been in the World Series, since when, 1916? But every spring they start out that they are going to get to the World Series this year. We don't know which researcher will find the cure to Parkinson's or the cure to Alzheimer's, and it may be through adult stem cell or amniotic stem cell, or it might be through embryonic.

Now, the bill before us would take the approximately 7,000 to 8,000 embryos a year that are disposed of as medical waste and make it possible for the custodian, the parent, the custodian of those embryos to donate them for medical research purposes that is federally funded. Seven to eight thousand.

To me, as a pro-life Congressman for over 22 years, the choice is: Medical research, medical waste; which is the most pro-life? Medical research that might, might find a cure for my mother's Alzheimer's or my brother's liver cancer that he died of, or medical waste that literally goes in the trash bin? That is what is happening now. Why cannot we make it possible to pursue cord blood, amniotic, adult stem cell, and embryonic stem cell?

So I respectfully, for those Members yet to cast their vote on this issue, please vote ''yes.''

Mr. Speaker, stem cell legislation has been debated on this floor before, and I welcome the opportunity to again speak in support of legislation to expand embryonic stem cell research.

In August of 2001, the President issued his policy on federally funded stem cell research. President Bush announced that for the first time Federal research dollars would be available for research using existing stem cell lines. Originally it was believed that there were nearly 60 viable stem cell lines, however, for a variety of reasons, that number was reduced to 22. Furthermore, many of those 22 lines cannot practically be used for research. This legislation will help create enough lines of embryonic stem cells to allow for science and medicine to progress.

In order to ensure that these embryonic stem cell lines are ethically derived, the legislation provides strict ethical constructs. The lines must come from embryos that have been donated, that were specifically created for fertilization treatments and would otherwise be discarded. Those donating the embryos must provide written consent and they may not receive financial incentives.

Understandably, this is not a simple vote for anyone on this floor. This is a vote of conscience for all members. In the 109th Congress, identical legislation was agreed to by a vote of 238 to 194 in the House and later passed the Senate by a vote of 63 to 37.

However, the House was unable to capture enough votes to override the Presidential veto this past summer, and the legislation never became law.

Throughout my tenure in Congress, I have consistently defended human life and opposed all forms of abortion. I also respect the need for progress in medicine that will help protect and improve existing human lives. My decision to support this legislation puts me one vote short of a perfect, 100 percent pro-life voting record, and it was not reached carelessly. It is the product of much personal contemplation and plenty of prayer. I have lost members of my family to illnesses that stem cell research might have cured. I have concluded that I am just not ready to require that sacrifice from other families, to watch lives slip away that could be saved.

Recently, a study was issued by Wake Forest University in which the ability to reclaim embryonic stem cells from amniotic fluid was demonstrated. This is an important step forward in stem cell research, and I applaud it. However, this important step should not preclude the use of other forms of stem cell research that could one day become a cure for many diseases that too many Americans suffer. The researcher of this very study has restated his support for passage of H.R. 3.

This will be one of the most difficult votes that many of us cast in this Congress. It is literally about life and death. It is about the lives and the deaths of real people, people we know and love. Regardless of our differing positions, this is an issue on which it is impossible to be insincere. I ask that we respect one another during this debate, and that we honor each other's views, especially the ones with which we differ.

Ms. DEGETTE. Mr. Speaker, I yield myself the remaining time.

Mr. Speaker, I want to thank Ranking Member BARTON for his thoughtful, thoughtful approach and his support of this issue. I also want to thank my friend and compadre, Mr. CASTLE, who has fought hand in hand for this legislation with me for years now. And I also want to thank the many Members who have helped us through this long process and will be helping us long after today.

This is the first time I can remember a bipartisan whip effort in the 10 years I have been in Congress. Ms. BALDWIN, Mrs. BONO, Mr. Bradley, Mrs. CAPPS, Mr. CARNAHAN, Mr. DENT, Mr. KIRK, Mr. LANGEVIN, Mr. PERLMUTTER, and Mr. UPTON. Thank you, thank you, and our work is not completed.

I want to talk for a minute about what H.R. 3 does, because there are a lot of misstatements that have been made today on this floor. H.R. 3 simply expands the number of stem cell lines that can be used for research that is done in an ethical manner.

In 2001, President Bush restricted stem cell research to lines that existed as of that date. In the ensuing years, we have learned there were not 73 lines, as has been asserted today, but somewhere between 19 and 22 lines. We learned that all of those lines are contaminated with mouse feeder cells and are not appropriate for clinical use. We learned that the research is going offshore and into private hands. Perhaps most disturbingly, we learned that the U.S. Government has no ethical control over current private research or State research into embryonic stem cell lines.

For that reason, we drafted a bill that both expands the research and sets forward a rigid code of ethics. Only cells that are created to give life for in vitro fertilization but then are slated to be thrown away as medical waste, thrown away, can be donated for this research, by informed consent. It is very narrow and it is very ethical. That is why 522 patient advocacy groups, health organizations, research universities, scientific societies, religious groups, and other associations have endorsed this bill. It expands research, and it does it in an ethical way.

Embryonic stem cells were first identified from mouse embryos in 1981 and primate embryos in 1995; but until November 1998, animal embryos were the only source for research. In 1998, for the first time, researchers learned that embryonic stem cells could be used in humans, and that is when we found so much potential, potential for diseases that affect 110 million Americans and their families, Americans suffering from diabetes, Parkinson's, nerve damage, and on and on.

The great promise of this research is why people like Nancy Reagan, Michael J. Fox, ORRIN HATCH, Mary Tyler Moore, pro-life and pro-choice, have come together to say, we cannot deny this research. We must not say let's just throw these cells away and discard them. Let's allow people to donate them in order to give life and to give hope.

Now, the opposition tries to obfuscate this issue time and time again, and we simply cannot let that happen. We are not researchers; we are Congress. It is our job to promote all ethical scientific research, not to pick and choose among methods. I can't think of a time when Congress says, oh, scientists, use that method to research cancer cures but not this method. That is not our job. Our job is to say let's support all ethical research, adult stem cells, cord blood, alternative methods, amniotic stem cells, and embryonic stem cell research.

In conclusion, I will say that this is the next step on a long road; and I implore all of you to think not about yourself, not even about your parents, but your grandchildren and your great grandchildren. When we find these cures, we will say we did the right thing today. Vote ''yes'' on H.R. 3.

Mr. LANTOS. Mr. Speaker, I rise in strong support of H.R. 3, the Stem Cell Research Enhancement Act of 2007. This bill is a result of the tireless efforts of my esteemed colleagues DIANA DEGETTE and MIKE CASTLE. I am proud to count myself among the more than 200 Members of Congress on both sides of the aisle who have cosponsored this legislation. It is a bipartisan, bicameral bill that passed both Houses of Congress last year.

It was one of the very few truly bipartisan bills to leave this building during the previous Congress. Unfortunately, despite all the public support, despite all the bipartisan support, despite all the hope millions of Americans invested in this legislation, the President decided to invoke his first, and only, veto.

This important piece of legislation authorizes the Department of Health and Human Services, HHS, to support research involving embryonic stem cells, regardless of the date on which the stem cells were derived from an embryo. There are stringent ethical guidelines included in this bill. First among them requires that researchers work only with stem cells from embryos that would have otherwise been discarded by fertility clinics. Furthermore, the legislation stipulates that embryos can be used only if the donors give their written consent and receive no money or other inducement in exchange for the embryos.

These strict ethical standards are critical to the advancement of this ground breaking science. The scientific community has the opportunity to ease the suffering of thousands of Americans and their families. A new round of federally funded stem cell research is desperately needed in order to find cures and treatments for diseases such as diabetes, Parkinson's disease, Alzheimer's, ALS, multiple sclerosis, and cancer.

The State of California recognized early on the extraordinary significance of stem cell research. The people of California voted for Proposition 71 to provide $3 billion to unleash the dynamic force of medical research and unlock the promise of life saving scientific research. Researchers in my district are already hard at work and with the enactment of this legislation the scientific community in the bay area will be unshackled. They will lead the way to help those who have been stricken with debilitating diseases.

Mr. Speaker, it is my great hope that this legislation will soon be on the President's desk awaiting his signature. I urge the President to listen to the will of Congress and the pleas of the American people and sign this bill into law.

Mr. WAXMAN. Mr. Speaker, I rise today in strong support of H.R. 3

Since President Bush announced his stem cell funding restrictions, we've learned a number of things that, in my opinion, make the policy even less ethical than it was in 2001.

We learned that the President was wrong about how many stem cell lines would be available to researchers under his ban. The President said there were more than 60 available lines, and soon after it was claimed that there were 78. We learned later that year that only 24 or 25 of those lines were ready for research. In 2003, the administration was conceded that only 11 lines were available to researchers. Today only about 20 lines are available, and all of them were grown on substances that might make them unfit for future use in therapies.

We've also learned that since the President's announcement, the proportion of stem cell research conducted in the United States has shrunk. There's a recent analysis that looked at all scientific papers on human embryonic stem cell research published over the last several years. The White House has cited this study to point out that almost half of the labs producing papers on the topic from 1998 through 2004 were in the U.S. But in pulling out this overall statistic, the White House seems to have ignored the study's title: ''An international gap in human embryonic stem

cell research.'' The authors found that after the restrictions, the U.S. contribution to embryonic stem cell research dropped. In 2001, about one-third of all stem cell research papers were produced here. But by 2004—just three years later—that proportion had dropped to about one-quarter.

The study's authors wrote that the U.S. is ''falling behind'' in embryonic stem cell research. They wrote that this growing gap could put U.S. patients at a disadvantage if therapies are discovered. In fact, they concluded that ''U.S. congressional delays and the Bush administration's resistance to an expansion of Federal funding suggest a real danger for U.S. biomedicine.''

Scientists are saying that the administration's ban stymies their research. Many U.S. scientists are getting offers to work overseas because funding is available there and policies are clear. The most discouraging news is that young scientists are reportedly hesitating to even enter this field because it's not being funded in proportion to its potential.

The White House is pushing other distorted interpretations of the issue. In a report released yesterday, the White House pointed out that there are many clinical trials related to adult stem cells, but none related to embryonic stem cells. This is truly an Alice-in-Wonderland style argument. The administration sharply restricts researchers' ability to work with embryonic stem cells and pushes researchers to work with adult stem cells. Then, it turns around several years later and notes, to no one's surprise, that most of the clinical trials are being done with adult stem cells. One can only wonder where we'd be if America's top researchers were free to work with the most powerful tools.

Some of you may have noticed last week's news reports on amniotic stem cells. These cells appear to hold some potential for research because they can develop into multiple cell types. We all want to understand what this research means for this debate. And I think we can probably agree that the lead researcher, Dr. Anthony Atala, is a good interpreter.

What he has said, consistently, is that amniotic stem cells do not substitute for embryonic stem cells. He has said that the cells have different qualities, may have different potentials for growing into different cell types, and may have different applications down the road.

I think we should listen to the scientist behind this study, and not those who want to distort this promising news to suppress other potentially life-saving research.

Dr. Atala's explanation makes one thing very clear. The most important reason amniotic stem cells can't replace embryonic stem cells is that we do not know enough about either type. A growing body of research has made clear that stem cells of all kinds have much to teach us about the human body and disease. Hopefully this knowledge will lead to treatments and cures. But if we're going to get there, we need a serious Federal commitment to funding all promising and ethical stem cell research.

That is what this bill will do. I respect the beliefs of those who are concerned about protecting human life. But it is my opinion—widely shared by most Americans—that the use of cells from embryos that will otherwise be discarded is well within ethical boundaries.

Like many of my colleagues here, what I consider unethical is telling people suffering from diseases like Parkinson's and Alzheimer's that their suffering doesn't justify the strongest possible federal commitment to finding a cure.

What I consider unethical is turning to the generations following us and telling them that we didn't make as much progress, and we won't be passing on as much scientific understanding, as we could have.

We have already squandered valuable time, but it is not too late. It's time to recover lost ground—and reclaim the leadership role our country has earned in biomedical science—by supporting this ethical and important research.

Mr. LEVIN. Mr. Speaker, I rise in strong support of the Stem Cell Research Enhancement Act.

Embryonic stem cell research holds potential for some of the most far-reaching breakthroughs seen in modem medicine. This is a field filled with promise, with the potential to cure the incurable and to heal that which was once thought impossible to mend.

We're bringing this bill up again with the hope that the President will hear the scientists and researchers and hear the voices of the American people that he do the right thing and sign this vital measure into law. We need to take action now so that this crucial research can go forward for the sake of the millions of people dealing with incurable or debilitating diseases—diseases such as juvenile diabetes, Parkinson's, Alzheimer's, multiple sclerosis, and cancer. We can never guarantee the results of scientific research, but without it we guarantee there can be no results.

The President's current stem cell policy is not working. Research is practically at a standstill in this country. Of the 78 existing stem cell lines permitted for use in Federally funded research, only 21 of these lines are currently used for research, and many of the available stem cell lines are contaminated, making their therapeutic use for humans questionable.

The Stem Cell Research Enhancement Act is a well-crafted, bipartisan approach. Let me be clear that the bill only allows the use of stem cell lines generated from embryos that would otherwise be discarded by fertility clinics. The legislation contains strict ethical guidelines, including the requirement that embryos can be used only if the donors give their written consent and receive no money or other inducement in exchange.

There has been recent news regarding ongoing research using non-embryonic stem cells. While I believe it is necessary to support study on all stem cell types, this research alone is in no way a substitute for embryonic stem cell research, whose potential is different from that of other stem cell types.

We need to pass this bill today on a strong, bipartisan vote. I truly hope the President will reconsider and do the right thing and sign this bill into law. This legislation is so important to millions of Americans, and we stand with them as we vote for the Stem Cell Research Enhancement Act today.

I urge all my colleagues to join me in supporting this vital legislation.

Mr. LARSON of Connecticut. Mr. Speaker, today I rise in strong support of H.R. 3, the Stem Cell Research Enhancement Act of 2007, which holds tremendous hope for the 100 million Americans affected by devastating diseases and medical conditions.

In 2001, President George W. Bush announced his final decision on the use of Federal funds for embryonic stem cell research. According to the National Institutes of Health, of the 78 stem cell lines that were declared eligible for Federal funding in the President's executive order of August 2001, only 21 lines are now still available for researchers. The 21 stem cell lines that remain available today are contaminated with ''mouse feeder'' cells, making their therapeutic use for humans uncertain.

I am proud to be an original cosponsor of the Stem Cell Research Enhancement Act, which increases the number of embryonic stem cell lines eligible to be used for Federally-funded research. The bill also authorizes the Department of Health and Human Services to support research involving embryonic stem cells meeting certain criteria, regardless of the date on which the stem cells were derived from an embryo. This legislation authorizes the use of stem cell lines generated from embryos that would otherwise be discarded by fertility clinics and it has strict ethical guidelines. These guidelines include stipulating that embryos can be used only if the donors give their written consent and receive no money or other inducement in exchange for the embryos.

In the 109th Congress, this bill passed the House by a vote of 238–194 and in the Senate by a vote of 63–37. Unfortunately, the President used his first veto to stop lifesaving stem cell research and set back the hopes of so many who are suffering. Today, we owe it to the millions of Americans with chronic diseases like Parkinson's, Multiple Sclerosis, Alzheimer's, diabetes, and ALS to invest in this promising research and renew the hopes of millions.

Expanding stem cell research has the support of more than 70 percent of Americans. This vote today has the potential to unlock the doors to treatments and cures to numerous debilitating and life-threatening diseases and will send a clear signal that this Congress is committed to improving the lives of millions of patients affected by these diseases. Passage of H.R. 3 is critical and I hope the President listens to the American people by signing this bill that will allow this groundbreaking research to move forward.

Mr. CONYERS. Mr. Speaker, I rise in strong support of H.R. 3, the DeGette-Castle stem cell research bill. Our Nation's top scientists agree that embryonic stem cell research has the potential to unlock the doors to treatments and cures to numerous diseases, including diabetes, Parkinson's disease, Alzheimer's, ALS, multiple sclerosis and cancer. Tens of millions of Americans and their families stand to benefit from this life-saving research.

Current policy allows Federal funds to be used for research only on those stem cell lines that existed when President Bush issued an executive order on August 9, 2001. However, few of the stem cell lines authorized by President Bush are now useful for research. According to the National Institutes of Health, of the 78 stem cell lines that were declared eligible for Federal funding in the President's executive order of August 2001, only about 22 lines are now still available for researchers; and, many of these 22 ''available'' stem cell lines are contaminated with ''mouse feeder'' cells, making their therapeutic use for humans uncertain.

H.R. 3 authorizes government support of research involving embryonic stem cells that

meet certain criteria, regardless of the date on which the stem cells were derived from an embryo. The bill creates an ethical framework for this research. It prohibits funding for research unless the cell lines were derived from excess embryos that were created for reproductive purposes and would otherwise be discarded. It also requires voluntary informed consent from the couples donating the excess embryos and prohibits any financial inducements.

H.R. 3 represents real hope to the tens of millions Americans suffering from devastating illnesses, and I encourage my colleagues to support it.

Mr. BOSWELL. Mr. Speaker, I would like to thank the gentlewoman from Colorado for yielding me the time. I would also like to thank Mrs. DEGETTE for her leadership on this very important issue. And I rise in support of H.R. 3, the Stem Cell Research Enhancement Act.

Today, I want to talk about a young girl who I have the honor of knowing, Karle Borcherding from Ankeny Iowa. In 2005, at the age of 10, Karle was diagnosed with juvenile or Type I diabetes. Over the course of the past year she has had to give herself 4 to 5 shots a day. A burden no 10 year old should have to deal with. Karle and her mother, Darcy, have been leaders on the finding a cure for Type I diabetes across Iowa, the Midwest, and all the way to Washington, DC, with the Juvenile Diabetes Research Foundation.

Karle is a vibrant young girl who does not let her disease control her life. When asked why Karle wants to find a cure she responds ''Not just so I will be cured and can be a normal kid, but because other kids will be cured too.'' I am hopeful that, for Karle's sake and every child affected by debilitating diseases, we will pass this vital legislation today.

Opponents of this legislation will argue that we should focus our attention to adult stem cell research. And while adult stem cell research can be useful, embryonic stem cell research offers hope to cure diseases. Some of the leading scientists in the country have stated that adult stem cells would not be able to find a cure for disease such as ALS, Parkinson's, Alzheimer's, or Type I diabetes.

I ask my colleagues to join me today and vote on the side of hope and science, and support H.R. 3.

Mr. CUMMINGS. Mr. Speaker, I rise today in strong support of H.R. 3 and of the promise that it offers to the literally millions of Americans battling terrible illnesses and the effects of devastating injuries for which we currently have no cures and few effective treatments.

I approach stem cell research with deep respect for the significant ethical concerns that it raises, and I strongly believe we must never lose our diligent focus on ensuring that these research techniques are not abused for immoral ends.

H.R. 3 will guarantee the highest ethical standards will be applied to stem cell research and will allow only embryos that would otherwise be destroyed to be used for research purposes.

Critically, H.R. 3 will also fulfill our duty to recognize the sanctity of human life by supporting the research that may one day yield the cures and treatments that could help so many in our nation who are being robbed of their sacred lives by disease.

I urge the passage of H.R. 3 and strongly urge the President to reconsider his past veto and let this bill of compassion become law.

Mr. PORTER. Mr. Speaker, I rise today in strong support of H.R. 3, Expanding Stem Cell Research.

I believe stem cell research holds enormous promise for easing human suffering for people like my constituents Judy Reich and Jake Page, both of whom suffer from diabetes. Embryonic stem cell research could lead to a cure that could dramatically improve their lives. Federal support is critical to its success which is why I was pleased when President Bush announced his stem cell policy in August 2001.

Scientists have learned a great deal about stem cells in the five and a half years since that announcement. Medical researchers believe that embryonic stem cell research has the potential to change the face of human disease. A number of current treatments already exist, although the majority of them are not commonly used because they tend to be experimental and not very cost-effective. Medical researchers anticipate being able to use technologies derived from stem cell research to treat cancer, Parkinson's disease, spinal cord injuries, and muscle damage, amongst a number of other diseases, impairments and conditions.

Current federal policy on human embryonic stem cell research allows federally funded research be conducted on those stem cells derived before August 9, 2001. Today, only 22 stem cell lines are available to federally funded scientists. The United States Congress has passed legislation which would lift the date restriction and allow federally funded scientists to research a greater number of stem cell lines; however, the President has vetoed this legislation. The legislation would also provide stronger ethical requirements on those stem cell lines eligible for funding including donor consent, certification that embryos donated are in excess of clinical need, and that the embryos would be otherwise discarded.

While I disagree with the creation of human embryos for scientific purposes, I agree that embryos created as a by-product of in vitro fertilization, which would otherwise be destroyed, should be allowed to provide greater insight into the myriad afflictions that can potentially be alleviated through stem cell research.

As with all scientific endeavors, we must ensure that the limitless bounds of science do not infringe on the beliefs that we hold as ethical human beings. For this reason, I categorically oppose the harvesting of embryos for scientific research as well as any attempt to use our scientific knowledge to clone human beings.

I urge my colleagues to support H.R. 3, Expanding Stem Cell Research.

Mrs. MALONEY of New York. Mr. Speaker, a founder and co-chair of the Congressional Working Group on Parkinson's Disease, I rise in strong support of H.R. 3, the Stem Cell Research Enhancement Act.

This bill expands current policy by providing for federal funding of embryonic stem cell research on lines derived after August 9, 2001 while still requiring strong ethical guidelines for research.

I am grateful to the new Democratic Leadership for bringing up this legislation during the first 100 hours after both the House and Senate passed the bill last summer, only to see the President veto it, without regard for the millions of suffering Americans and their families.

An overwhelming 72% of the American people support federal funding for stem cell research because they know that by lifting the arbitrary ban that the President put in place in 2001, research will move forward and mil1ions of Americans will benefit.

Let's be clear: this bill is very simple—it's about saving lives.

It's about preventing devastating diseases from ravaging and ending people's lives.

I urge my colleagues to think about their loved Ones when deciding how to cast their vote. It's literally a matter of life and death.

According to the National Institutes of Health (NIH), of the 78 stem cell lines that were declared eligible for federal funding in the President's executive order of August 2001, only about 22 lines are now still available for researchers.

And many of these 22 ''available'' stem cell lines are contaminated with ''mouse feeder'' cells, making their therapeutic use for humans uncertain.

Just this week, a new study was released noting that scientists see potential in Amniotic Stem Cells.

This is extraordinary new finding highlights the importance of continued research in all types of stem cell research and regenerative medicine.

It does not lessen the need to increase the number of embryonic stem cell lines which will ultimately lead to therapy and treatment.

Instead, it demonstrates the relative infancy of this area of research and the need for a significant federal commitment.

Today, we have the opportunity to make a difference in the lives of millions of afflicted people and their families.

Let's each do the right thing. I urge a ''yes'' vote on H.R. 3.

Mr. TIAHRT. Mr. Speaker, I rise in strong opposition to H.R. 3, the Stem Cell Research Enhancement Act, a bill that is both morally and ethically compromising. H.R. 3, sponsored by Rep. DIANA DEGETTE, would expand federal funding of embryonic stem cell research. Supporters of this legislation are encouraging the destruction of human embryos in the hope of one day treating diseases.

The timing of this bill is especially ironic as we learned on January 7, 2007 that amniotic fluid stem cells were found to have pluripotent properties and grow as fast as embryonic stem cells. This is yet another example of a successful ethical alternative to embryonic stem cell research.

To date, there are 72 diseases and injuries that have been successfully treated with adult stem cells unlike embryonic stem cells which have yet to yield a single successful human treatment. Proponents of embryonic stem cell research would like you to believe there is no ongoing federal research using embryonic stem cell lines approved by the NIH, however, the United States leads the world in embryonic stem cell research.

Embryonic stem cell research received no federal funding through the NIH prior to 2001 when President Bush established a policy to allow for embryonic stem cell research on a line of existing cells. This was the first time the federal government had ever made funding available for embryonic stem cell research. Since then, more than $130 million of federal money has been spent on human embryonic stem cell research and over $3 billion has been spent on all stem cell research. This does not include the billions of dollars raised in the private sector for stem cell research.

While bioethics and science have brought about medical advancements and breakthroughs, our society should promote the protection of human life and dignity in all its forms. We can promote science and technology while applying ethical and moral guidelines that err on the side of life. Science can and should be used to improve the quality of lives, to save lives, cure fatal diseases and bring hope to those who are suffering, yet I cannot support legislation that would require the destruction of human embryos. Adult stem cell research has provided treatments of diseases while applying ethical standards.

I will continue to support legislation that promotes ethical science and produces an uncompromised standard that values all human life. H.R. 3 would only further expand the destruction of human life.

I will vote against this unethical and morally compromising bill, and I urge my colleagues to do the same.

Mr. PAUL. Mr. Speaker, the issue of government funding of embryonic stem cell research is one of the most divisive issues facing the country. While I sympathize with those who see embryonic stem cell research as providing a path to a cure for the dreadful diseases that have stricken so many Americans, I strongly object to forcing those Americans who believe embryonic stem cell research is immoral to subsidize such research with their tax dollars.

The main question that should concern Congress today is does the United States Government have the constitutional authority to fund any form of stem cell research. The clear answer to that question is no. A proper constitutional position would reject federal funding for stem cell research, while allowing the individual states and private citizens to decide whether to permit, ban, or fund this research.

Federal funding of medical research guarantees the politicization of decisions about what types of research for what diseases will be funded. Thus, scarce resources will be allocated according to who has the most effective lobby rather than allocated on the basis of need or even likely success. Federal funding will also cause researchers to neglect potential treatments and cures that do not qualify for federal funds.

In order to promote private medical research, I will introduce the Cures Can Be Found Act. The Cures Can Be Found Act promotes medical research by providing a tax credit for investments and donations to promote adult and umbilical cord blood stem cell research and providing a $2,000 tax credit to new parents for the donation of umbilical cord blood from which to extract stem cells. The Cures Can Be Found Act will ensure greater resources are devoted to this valuable research. The tax credit for donations of umbilical cord blood will ensure that medical science has a continuous supply of stem cells. Thus, this bill will help scientists discover new cures using stem cells and, hopefully, make routine the use of stem cells to treat formerly incurable diseases.

The Cures Can Be Found Act will benefit companies like Prime Cell, which is making great progress in transforming non-embryonic stem cells into any cell type in the body. Prime Cell is already talking to health care practitioners about putting its findings to use to help cure diseases.

Companies like Prime Cell are continuing the great American tradition of private medical research that is responsible for many medical breakthroughs. For example, Jonas Salk, discoverer of the polio vaccine, did not receive one dollar from the federal government for his efforts.

Mr. Speaker, there is no question that forcing taxpayers to subsidize embryonic stem cell research violates basic constitutional principles. Therefore, I urge my colleagues to vote against HR 3, and support the Cures Can Be Found Act.

Mr. VAN HOLLEN. Mr. Speaker, I rise in strong support of the Stem Cell Research Enhancement Act of 2007 (H.R. 3).

This bipartisan legislation will provide countless number of Americans hope of finding cures for many life-threatening diseases. I strongly believe stem cell research holds the promise of scientific breakthroughs that could improve the lives of millions of Americans afflicted with a debilitating disease—such as Parkinson's, diabetes, spinal cord injuries, autoimmune diseases, cardiovascular disease, and cancer—for which there is currently no cure. For these patients and their families, stem cell research is the last hope for a cure.

I wholeheartedly believe we should allow the expansion of federally supported research of human embryonic stem cell lines. The Stem Cell Research Enhancement Act of 2007 would provide federal for a wider range of stem cell research while establishing ethical guidelines. In addition, the legislation would provide that embryos that are otherwise likely to be discarded can be used to develop treatments for debilitating diseases and life-saving cures.

I was extremely disappointed that the President exercised his first veto on a piece of legislation that has bipartisan support. A majority ofthe American people support stem cell research. In the last election, Missouri voters approved a ballot measure to allow stem cell research in that state.

It is expected that the Senate will pass H.R. 3. If that is the case, I hope the President will listen to Congress and the American people rather than to the extreme right of his own political party and not wield his veto pen on this promising legislation. We must put the health of the American people over politics.

Mr. Speaker, this is an issue that affects every family in America. I strongly urge my House colleagues to support this bipartisan legislation.

Mr. STARK. Mr. Speaker, this bill to allow federal funding for stem cell research involves a simple question: should we use frozen cells to help millions of Americans with Parkinson's, Alzheimer's, and diabetes, or throw them away and claim moral superiority?

A supermajority of the American people wants to advance medical science. Congress has already passed this same legislation only to be met with President Bush's veto. Because we know that the President never lets the facts get in the way of his decisions, we know he won't change his mind. It is up to a handful of Republicans to say yes to the voters and no to the Christian Right so we can pass this bill by a veto-proof majority.

I urge my colleagues to prove that they heeded the message of the recent election to stop posturing and start passing commonsense legislation.

Ms. WOOLSEY. Mr. Speaker, I'm so pleased to have another opportunity to support this stem cell research bill today. But let me say that we cannot allow this crucial legislation to once again come so close, only to—in the end—be kept so far from those who would benefit from its outcome on a daily basis.

Change does not come easily. This is a big step in providing America's world-class researchers with the resources they need to make a difference in the lives of those with serious illnesses. But let us take a moment to weigh the kind of change in federal policy it would take to provide researchers with access to new embryonic stem cell lines, with the kind of change a person faces when he or she hears the words Parkinson's, or diabetes, or spinal cord injury.

The debilitating symptoms of these diseases can alter the course of a person's life—not to mention their family's—and change their day-to-day lives in ways it is impossible for most of us to even imagine. I ask you to take a moment to think of the changes you would have to make to accommodate a chronic illness in your life.

Our scientists and researchers need new cell lines so they can move beyond the contaminated, and often unusable, lines that were in existence before 2001. Let's transform the way we experience disease in this country and take the first step today by supporting H.R. 3.

Mr. MCGOVERN. Mr. Speaker, time and time again, the American people have spoken on this issue—they overwhelmingly support the expansion of embryonic stem cell research. And today, Congress has the opportunity to take heed and do the bidding of the people by passing H.R. 3.

Recent developments have proven that we are not far off from recognizing the true potential of embryonic stem cell research. In meetings with researchers at ViaCell and New World Laboratories, two small biotech companies in my home state of Massachusetts, I have seen first-hand the notable progress made in their research on spinal cord injuries and tissue regeneration. All around the world, researchers are gaining similar ground. However, our nation's current policy stands to limit such critical advancements.

And that is why I am proud to be an original cosponsor of H.R. 3. It marks the way for an increased number of embryonic stem cell lines while also developing strong ethical guidelines to protect the integrity of this research.

We have the rare opportunity to help spur scientific innovation that could, with the proper research and development, produce better treatments—or even cures—for diseases like diabetes, Parkinson's disease, and cancer. But absent a federal investment in embryonic stem cell research, we will never witness its true potential. I urge my colleagues to join me in supporting this bill.

Mr. GINGREY. Mr. Speaker, I rise today in strong opposition to H.R. 3, the Stem Cell Research Enhancement Act. I do so not because

I oppose embryonic stem cell research but because as an OB/GYN physician I oppose federally funded embryonic stem cell research that destroys life. And the truth of the matter is, Mr. Speaker, I am not alone in this belief; in fact I am joined by nearly half of the American public.

Let me say that again, nearly half of the American public opposes using taxpayer dollars to fund embryonic stem cell research when a human embryo is destroyed in the process.

I know that the supporters of this bill claim that an overwhelming majority of Americans whole-heartedly endorse their bill. However, when individuals in our society are asked specifically whether or not they would like the Federal Government to fund research that destroys a human embryo, the survey results are absolutely divided.

And that Mr. Speaker is what we are actually debating on the floor of the House today. We are debating the question of whether or not the American taxpayer should pay for research that encourages the destruction of human embryos.

We are not debating whether or not embryonic stem cell research is legal in this country, because, of course, it is not only completely legal but also well funded in both the private and public sector. In fact, between state governments and the private sector there is nearly $4 billion committed to embryonic stem cell research over the next 10 years.

I also want to dispel the myth that the Federal Government currently does not fund human embryonic stem cell research. In actuality, by the end of 2007, the Federal Government will have spent over $160 million. When President Bush signed the Executive Order in 2001, he made possible the federal funding of embryonic stem research. His executive order merely limited federal funds to support research which utilized already established stem cell lines. This decision removed any backdoor federal incentive and separated the United States government from the business of encouraging the destruction of human embryos.

Mr. Speaker, another policy issue we are unfortunately not debating today, is the use of federal funds to research alternative and ethical ways to extract embryonic-like or pluripotent stem cells. The fact of the matter is the hope held dearly by many individuals of this country with respect to embryonic stem cell research is not grounded solely in the fact that these cells are embryonic. Rather, researchers are interested in embryonic stem cells because they are flexible, that is they can specialize into any type of human tissue. This characteristic is also true of pluripotent stem cells, and the good news is that pluripotent stem cells can be obtained in a variety of ethical and scientifically promising ways.

Mr. Speaker, this point cannot be illustrated anymore clearly than in the study made public this weekend by researchers at Wake Forest and Harvard. This study shows not only the capability of researchers to obtain pluripotent stem cells from amniotic fluid but that these stem cells grow fast and show great flexibility.

This new, cutting edge research has great relevance in the debate we are engaged in today. The fact of the matter is that this study is yet another reminder that science moves faster than the Federal Government. We no longer need to engage in a passionate debate that divides our country in half. We no longer need to contemplate a unilateral decision to spend taxpayer dollars on research methods that nearly 50 percent of the public oppose.

No, Mr. Speaker, let us instead bring to the floor legislation that unites this country and does not divide. Let us examine and debate the multitude of alternative and ethical methods of obtaining pluripotent stem cells, methods similar to the research recently published regarding amniotic stem cells.

Representative BARTLETT and I have introduced such a piece of legislation, it is bill H.R. 322. Today, on the hallowed floor of the House of Representatives, I ask my colleagues on both sides of the aisle to join with us and half of the American public, in supporting a bill that promotes lifesaving medical research that does not sacrifice life in the process.

Mr. SENSENBRENNER. Mr. Speaker, I rise today in opposition of H.R. 3, a bill authorizing taxpayer funding for human embryo-destroying stem cell research. This bill would reverse the reasonable embryonic stem cell policy, set in place by the President in 2001, which allows federal funds to be used for research on existing stem cell lines where the life and death decision has already been made.

There have been exciting and dramatic developments in adult stem-cell research that hold great promise for medical advancements. I strongly support the need to pursue new treatments and cures to the diseases affecting millions of people world wide. However, in this pursuit we must be careful not to compromise our values of respecting human life. Embryonic stem cell research destroys human life at its earliest stage for experimental research purposes.

There are many types of stem cell research that are worthwhile and that do not raise such ethical and moral concerns. Alternative sources such as umbilical cord and adult tissue cells are currently being used to treat people, and successfully. Earlier this week, scientists reported that amniotic non-embryonic stem cells may offer the same research possibilities as stem cells obtained through the destruction of living human embryos. Not only are these cells highly versatile, they are readily available. Such alternatives make clear that we are capable of achieving successful stem cell research without the intentional destruction of human embryos.

The debate today is not about blocking embryonic stem cell research. There are vast financial resources available to fund this controversial research and any company or organization that wants to conduct or fund embryonic stem cell research may do so. And yet, despite extensive private research, there have been no successful therapeutic treatments with embryonic stem-cell research—none. With adult stem cells, physicians have successfully treated patients with diabetes, multiple sclerosis, sickle cell anemia, heart disease, Crohn's disease and rheumatoid arthritis, among many others. These examples are a strong testament to the amazing power of adult stem cells.

By voting against this bill, we can avoid not only the ethical and moral questions that are raised, but we can make sure that taxpayer dollars are invested wisely.

Congress can provide and must help scientists realize the promise of embryonic stem cell research without authorizing the destruction of human life in the process. Once again, I urge my colleagues to support ethical stem cell research and to vote against this bill.

Mr. ETHERIDGE. Mr. Speaker, I rise in support of H.R. 3, the bipartisan DeGette-Castle bill on stem cell research that is identical to legislation passed by the Republican 109th Congress and vetoed last year by President Bush.

This bill allows federal funding for stem cell research that gives hope to 100 million Americans and their families afflicted by debilitating or life-threatening diseases. This research is critical to find new treatments and possible cures to terrible diseases like diabetes, Parkinson's disease, Alzheimer's, ALS, multiple sclerosis, and cancer.

It is important to note this bill's ethical safeguards, including requirements that forbid financial inducements for donations, mandate informed and written consent for donation, and requires HHS and the National Institutes of Health to produce ethical guidelines. DeGette-Castle promotes the most ethical use of discarded fertility clinic products because rather than flushing them down the drain, ethically-monitored scientists can utilize them to promote life-saving research.

Mr. Speaker, this is important policy matter, but for me, it's personal. My college basketball coach, a friend and mentor for several decades is a victim of Alzheimer's disease. Others I am close to suffer from Lou Gehrig's disease. After prayerful consideration, I have arrived at the strong conclusion that we must allow the ethical advance of research to relieve human suffering.

I urge my colleagues to join me in passing H.R. 3, and I urge the President to sign it into law.

Mr. THOMPSON of California. Mr. Speaker, I rise in support of H.R. 3, legislation to expand Federal research on devastating diseases like Alzheimer's, diabetes, spinal cord injuries, and various cancers.

When President Bush announced in 2001 that Federal funds would be available for research performed using currently existing embryonic stem cell lines, I truly believed we had begun to open the door for life-saving research. Unfortunately for all Americans, less than a quarter of those lines proved suitable for research. As a result, research conducted in the United States has slowed considerably.

Federal restrictions on new lines have dashed the hopes of millions of Americans who are impacted by life-threatening illnesses stem cell research may cure. In addition, America is losing top medical researchers and scientists to other nations without such restrictions.

A handful of States have stepped in where the Federal Government has failed. My home state of California was the first to act, passing a ballot initiative in 2005 that authorized $3 billion in funding for embryonic stem cell research. I strongly supported that ballot initiative, and I would like to acknowledge the other States that have stepped up to the plate in a similar fashion.

Last year, I voted with 237 of my colleagues in the House and 63 Senators to pass Federal legislation to fund stem cell research. Tragically, the President ignored the will of the Congress and the American people by casting the only veto of his administration against this bill.

I am very proud that the Democratic majority has made facilitating this life-saving research a cornerstone of our agenda. Today's

vote signifies a Federal commitment to exploring every possible option available for curing these terrible illnesses.

Today, we cast a vote for hope. I urge my colleagues to vote in support of H.R. 3, the Stem Cell Research Enhancement Act.

Mr. TERRY. Mr. Speaker, I rise in strong opposition to H.R. 3, legislation to expand taxpayer funding of human embryonic stem cell research and give a ''stamp of approval'' from the Federal government for scientists to destroy human embryos to harvest stem cells for medical experiments.

The pain and suffering of citizens afflicted with debilitating diseases concerns me greatly. I served for 7 years on the board of directors for the Great Plains Region of the American Diabetes Association because I am committed to finding a cure for people afflicted with this disease.

I strongly support scientific research to find cures and effective treatments to relieve human suffering. I voted to double the Federal investment in biomedical research from $13.6 billion in fiscal year 1998 to $27.1 billion in fiscal year 2003. The National Institutes of Health received $28.5 billion from Congress last year to do research on new cures for diseases.

Embryonic stem cell research is not the ''silver bullet'' for every disease. The potential benefits of this research have been blown out of proportion by eager scientists and some in the news media. The fact is that 25 years of human embryonic stem cell research have not produced even one treatment for suffering Americans.

Adult stem cell research, on the other hand, is producing real and tangible results with no ethical concerns. In fact, adult stem cells have produced treatments for 72 serious diseases and conditions in humans, and shown strong potential for permanent reversal of severe diseases such as diabetes and Parkinson's.

Research has consistently shown that human embryonic stem cells grow tumors once implanted in an animal, became uncontrollable, or form various and wrong types of tissues. Some studies have shown moderate improvement in rats with spinal cord injuries, but some of those rats were not kept alive long enough to see if tumors formed. Many scientists argue this is a new medical field and limitations such as cancerous tendencies can be overcome through additional Federal funding and more time in the lab.

These arguments callously gloss over the fact that embryonic stem cell research requires the destruction of human embryos—and 48 percent of Americans surveyed last year opposed this type of research after being informed of that fact. We have a responsibility as public officials to direct limited Federal dollars toward the most promising and ethical research possible.

The strongest potential for cures at this time is not in embryonic stem cells, but in ethical research using adult stem cells, umbilical cord blood stem cells, and most recently, amniotic fluid stem cells, all of which uphold and support human life. These ethical approaches show promise that rivals the potential of embryonic stem cells without forcing many American taxpayers to fund research that threatens the dignity of human life.

Amid all the scientific jargon in today's debate, let us not forget the fact that each one of us started life as a human embryo. There is no way around that basic fact, no matter how many scientific terms are used to conceal or confuse it. Embryos are the tiniest of human lives, but they are nevertheless human lives, and we must defend the defenseless.

If embryos are not fundamentally human lives, how can you explain the fact that frozen embryos from in vitro fertility clinics grow into children once they are implanted in a woman's womb? Does an embryo somehow become less of a human being if we choose to donate it to a scientist to be experimented upon and ultimately destroyed? Those same human embryonic stem cells lying in a cold Petri dish will undeniably grow into a human child if given a chance at life. We must not allow scientific terminology to desensitize us to the miracle and sanctity of human life.

Here are some published examples of the differences between embryonic stem cell research and adult stem cell research:

Numerous attempts over the last 5 years to use human embryonic stem cells to cure diabetes repeatedly produced tumors or failed to generate insulin to reverse the disease. In the most successful experiment, human embryonic stem cells produced only one-fiftieth the amount of insulin needed to sustain life, and the mice died.

For Parkinson's disease, researchers found that human embryonic stem cells grew uncontrollably in 100 percent of rats with the condition. All the animals showed indications of early tumor formation. These findings were duplicated by scientists in Sweden and Japan.

Adult stem cells, on the other hand, have treated multiple types of cancers, including breast cancer and Leukemia, as well as autoimmune diseases, heart defects, heart disease, osteoporosis and spinal cord injuries, and demonstrated excellent potential to treat diabetes and to reverse Parkinson's.

In 2003, researchers used adult stem cells to help regenerate pancreatic islet cells that produce insulin, permanently reversing diabetes in mice. The lead researcher stated that: ''Patients with fully established diabetes possibly could have their diabetes reversed.'' The FDA has approved a human clinical trial for diabetes based on this successful research. In 2005, a mother donated live stem cells for her diabetic daughter, alleviating the diabetic symptoms. Human umbilical cord blood stem cells can also generate insulin to reverse diabetes.

Just last year, scientists used adult umbilical cord stem cells to treat rats with Parkinson's, and found significant recovery in motion and behavior. In 2002, a Parkinson's patient testified that his symptoms were 80 percent reversed after being treated with his own adult neural stem cells. British researchers in 2003 injected a natural protein into the brains of five Parkinson's patients and found that it stimulated existing adult neural stem cell growth, yielding a 61 percent improvement in motor function. University of Kentucky researchers treated 10 Parkinson's patients with similar results.

And just this week, researchers at Harvard University and Wake Forest University reported a breakthrough discovery that stem cells found in amniotic fluid show incredible promise for cures without concerns for tumor growth or immune system rejection.

Amniotic stem cells can be safely and easily extracted from pregnant women, and are ''pluripotent'' like human embryonic stem cells, meaning they have the ability to transform into each of the three major types of tissue found in the body. The researchers stated: ''We conclude that amniotic fluid stem cells are pluripotent stem cells capable of giving rise to multiple lineages including representatives of all three embryonic germ layers.''

Using amniotic stem cells, the research team created nerve cells, liver cells, endothelial cells that line blood vessels, and cells involved in the creation of bone, muscle and fat. In fact, the nerve cells successfully generated a neurotransmitter crucial to forming dopamine, which is lacking in Parkinson's patients. In testing on mice, amniotic stem cells were shown to re-grow and repair damaged areas of the brain.

The incredible promise of such ethical stem cell research is worthy of taxpayer funding. It holds real promise and real hope for citizens needing cures and tangible relief from pain and disease.

This debate today is not about whether we should fund stem cell research with tax dollars. The National Institutes of Health spends about $600 million every year on stem cell research, and almost $40 million of those funds are unfortunately being spent on research involving human embryonic stem cells.

The real debate today is about whether scientists will be able to create more embryonic stem cell lines by destroying more embryos. The next thing these scientists will be asking for is the ability to clone embryos because they cannot get enough stem cells from frozen human embryos at in vitro fertility clinics. This is no ''slippery slope,'' it is the ethical equivalent of jumping off a cliff.

As public officeholders sworn to uphold the United States Constitution, we will have failed in our duty if we fail today to protect the right to life of the youngest homo sapiens—human embryos. We cannot fail in defending the defenseless, and we must keep faith with American taxpayers by funding the most ethical research to relief the suffering of ailing Americans.

I urge my colleagues to join me today in voting against this unethical bill that would exploit human life while preying on the emotions of suffering American citizens.

Ms. LORETTA SANCHEZ of California. Mr. Speaker, I rise today in support of H.R. 3, the Stem Cell Research Enhancement Act of 2007.

I am proud to have been an original cosponsor of this legislation in both the 109th and 110th Congresses.

H.R. 3 will increase the number of embryonic stem cell lines that are eligible for use in federally funded research while maintaining strict ethical standards ensuring that only stem cells from embryos that would otherwise be discarded by fertility clinics can be used for research.

My home State of California has taken the lead in stem cell research.

In Orange County, California, the University of California-Irvine's Reeves Center is the home to spectacular research that is utilizing stem cells to work towards finding new treatments for spinal cord injury.

I hope that any Member who has questions about stem cell research will seek out a research center like the Reeves Center to learn about the amazing progress that researchers are making towards finding treatments and cures for spinal injury, diabetes, Parkinson's

disease, Alzheimer's, ALS, multiple sclerosis, and cancer among others.

Federal support for this groundbreaking research will help researchers find answers even faster.

I urge my colleagues to support this critical legislation.

Mr. LATHAM. Mr. Speaker, I rise in opposition to H.R. 3 because revising the current Federal policy on stem cell research is completely unnecessary. Sadly, the ethical debate over human embryonic stem cell research has completely overshadowed the fact that the Federal Government is devoting $600 million each year for all types of stem cell research. The current policy does not ban stem cell research in the United States, nor does it ban Federal funding for embryonic-type stem cell research. It only limits federally funded embryonic stem cell research to stem cell lines existing before August 9, 2001. The National Institutes of Health, through its peer-review selection process, currently directs only about $39 million of the total to human embryonic stem cell research. While some conclude that the stem cell lines approved under the administration's policy are not adequate, 85 percent of all the published research on embryonic stem cells, whether U.S. or foreign, was conducted using these stem cell lines. The fact is, despite these investments, embryonic stem cell research has yielded few and modest results in animals, and no clinical treatments in humans.

In stark contrast, non-embryonic stem cells are showing far more potential to develop treatments. Just this week, it was reported around the country that researchers from Wake Forest University found that stem cells extracted from amniotic fluid have the same growth and differentiation capabilities as embryonic stem cells. These cells are shed by the developing fetus and are easily obtained during prenatal testing without destroying human embryos. Other research using stem cells from non-embryonic sources, such as existing adult cells, umbilical chord blood and human placentas, has resulted in 72 experimental treatments for a number of diseases.

According to a study by the RAND corporation, there are approximately 400,000 frozen embryos at fertility clinics in the U.S., most of which have been set aside for future use. Only approximately 11,000 have been donated for research so far. If there is a breakthrough that provides a treatment using embryonic stem cells, the fact is that fertility clinics could never provide the number of stem cells needed for treatment: 50 to 100 eggs are needed to produce just one petri dish of cells. Donors would have to be solicited, which would put women all over the world at risk for coercion as well as the health complications associated with egg donation.

Finally, Mr. Speaker, I would like to point out that the United States is not alone in the world in addressing this issue; Italy, Austria, Ireland, Norway, and Poland have an outright prohibition on human embryo research. In other countries, such as France and Germany, human embryonic stem cell research is only permitted for stem cell lines created before a certain date, which is similar to the current U.S. policy. Federal resources should continue to be directed toward the most promising medical research. I urge my colleagues to uphold the current policy on stem cell research and vote "no" on H.R. 3.

Mrs. MYRICK. Mr. Speaker, I rise today in opposition to H.R. 3. Like my colleagues, I believe in the transforming and life-saving power of scientific progress. I've seen first-hand how cutting-edge research can impact the lives of Americans who suffer from all sorts of disease, and I understand the inherent value of federally supported research.

As many of my colleagues have stated today, scientists at Wake Forest University and Harvard University reported 4 days ago that they've drawn incredibly promising stem cells from amniotic fluid.

To quote Anthony Atala, the director of Wake Forest's Institute for Regenerative Medicine, ''They grow fast, as fast as embryonic stem cells. But they remain stable for years without forming tumors''.

This means that if 100,000 women were to donate amniotic cells, scientists could have enough diverse cells to provide compatible tissue for most Americans.

All of this without destroying embryos for research that hasn't proven it can cure a single ailment.

Perhaps we're having the wrong debate today. If we can derive disease treatments from cells without destroying embryos, isn't this the best option for Federal funding?

Embryonic stem cell research is legal in this country. Our debate is about the expansion of Federal funding to cover the destruction, and the eventual creation of embryos for the sole purpose of research.

I ask my colleagues to vote ''no'' on this bill, particularly in light of new research that could provide an alternative.

Mr. SIRES. Mr. Speaker, I rise in support of H.R. 3 and Federal stem cell research funding.

The Federal Government is behind the times. Many States, including my home State of New Jersey, have already authorized State funding for stem cell research. In fact, just last month I stood next to Governor Corzine as he signed a bill authorizing $270 million for new laboratories and stem cell research facilities throughout New Jersey. The time has come for this Congress and the President to do the same.

On the merits, embryonic stem cell research offers great promise to everyone suffering from a disease or illness. We all know someone or have ourselves been affected by diabetes, Parkinson's disease, Alzheimer's, cancer, or another disease that could be cured or treated with therapies formed from stem cells. Cures and treatments will not be found overnight, but we will never know what could be accomplished if we don't make a real commitment to this research. That is why it is so important that we pass H.R. 3 today.

There are an estimated 100 million Americans waiting for us to take action. They don't believe this is a partisan or political issue. They just want hope for a cure. Let's give them that hope. I urge my colleagues to support H.R. 3.

Mr. KENNEDY. Mr. Speaker, I would like to thank the gentlelady from Colorado and the gentleman from Delaware for their leadership in bringing this bill to the floor for a vote today. I must also extend my thanks to our distinguished Speaker for her commitment to returning the House to the hands of the American people during the first 100 hours of the 110th Congress.

I rise today to join my colleagues in support of the Stem Cell Research Enhancement Act. Each year, dozens of health advocacy groups flood my Washington, D.C., office to discuss the importance of medical research. While all experiences are memorable, the difficulties faced by the children with Type I, or juvenile diabetes, really stay with me.

Last year, a brother and sister, ages four and five, visited my office and shared with me their hatred of needles, and how much they would like to enjoy birthday cake and other foods with their friends. They didn't understand why they were chosen to be sick. They didn't understand why there are people in D.C. blocking bills that would help them get better. These children had one simple request, to pass a law to increase the most promising research tool available that may lead to a cure for their disease.

Advancements in science and technology have put our Nation in the position to make breakthroughs for these children. How did the President respond to their request? He made this bill the first veto of his Presidency. Everyone in this Nation knows someone, or has a friend or family member, who could benefit from stem cell research.

It is time for a new direction for America and it is time for the Stem Cell Research Enhancement Act to become law.

Mr. TOM DAVIS of Virginia. Mr. Speaker, I rise in support of H.R. 3. We are all aware of the potential embryonic stem cells hold for mankind. It could very well be that these cells prove to be the Rosetta stone of medical research—allowing us to break the code on some of the worst afflictions: Alzheimer's, Parkinson's, juvenile diabetes.

We must acknowledge, however, that there is much we don't know about embryonic stem cells, and we are mistaken if we believe great cures are right around the corner. But we will never know either the true potential—or the dangers of stem cell related treatments if our scientists are overly constrained.

I understand the concerns of those who question the ethics of embryonic stem cell research, and agree that we must not throw caution to the wind at the hint of miraculous cures. Indeed, left unconstrained, this type of research could lead to dangerous outcomes.

That is a key reason why I support the Stem Cell Research Enhancement Act. It provides essential ethical guidelines to which federally funded researchers must adhere. It would be far preferable to have the Federal Government setting standards in this field rather than a hodge-podge of states and private entities. In fact, I believe that the National Institute of Health's rigorous ethical guidelines would prove to be more protective of human life than individual states or private entities. Remember, embryonic stem cell research is not illegal, and individual states have already moved forward on their own. It is crucial that the Federal Government lead the way.

I supported President Bush when he announced his plan to allow federally funded research on 60 pre-existing stem cell lines. But we now know that only 21 stem cell lines are available for research. These 21 have significant shortcomings that make them of dubious value.

Federally funded U.S. researchers are at a technological disadvantage as they lack access to newer stem cell lines. This is causing concern that some of the top stem cell biologists will move into non-federally funded research, or even move overseas. We should not allow this to happen.

There are a great many difficult questions that attend this debate. However, I can not look in the eyes of a couple whose child is suffering from a debilitating disease and tell them that I am doing everything possible to stop their child's suffering without supporting this legislation.

I believe expanded Federal funding of embryonic research is the right course to take—a view shared by increasing numbers in both parties.

I am proud to be an original cosponsor of the Stem Cell Research Enhancement Act of 2007.

I believe this bill is an important step in making the United States a leader in all facets of the stem cell issue—both scientifically and ethically.

Ms. BORDALLO. Mr. Speaker, I rise today in general support of H.R. 3, the Stem Cell Research Enhancement Act of 2007. This bill would authorize the Department of Health and Human Services to support the expansion of research involving stem cells regardless of the date on which the stem cells are derived and under the principal condition that such research conforms to certain ethical standards that would be set forth by the bill.

I have joined over 200 of my colleagues in cosponsoring this legislation to demonstrate my general support for ethically responsible, expanded, federally funded scientific research that stands to yield advances toward discovering treatments and cures for many terminal, debilitating diseases and physical impairments.

It is true that research on the lifesaving qualities of stem cells predominantly remains in preliminary stages. But the potential for easing the suffering of individuals, curtailing illnesses, and protecting the general health and welfare of future generations that is offered by continuing and expanding this research is too great to ignore. Authorizing Federal support for the continuation and expansion of this research under strict ethical guidelines is an investment worth making today. We should pass legislation to enhance the abilities of and authorize funding for the scientific community to attain the most advanced scientific achievements possible that modern technology can bring and that we, as a society, can morally afford.

I believe that this legislation provides for the ethical safeguards needed to ensure that government funding is not used to compromise the integrity and morality of the American people in exchange for supporting research that could lead to cures for many illnesses. I support H.R. 3 because it provides appropriate safeguards while promoting the lifesaving research that will make a profound difference in many lives in the future.

Ms. SCHAKOWSKY. Mr. Speaker, I rise today in strong support of H.R. 3, the Stem Cell Research Enhancement Act. Seventy-two percent of Americans and a bi-partisan majority of Congress strongly support embryonic stem cell research. The research could prove to improve the lives and ease the suffering of the over 100 million Americans who have juvenile diabetes, ALS, Alzheimer's, Parkinson's, cancer, heart disease, spinal cord injury, muscular dystrophy, and other diseases.

Parkinson's affects over 1 million people, including my close friend and our colleague, former-Rep. Lane Evans. During his time in Congress, Lane was dedicated to advancing stem cell research because he understands what it is like to struggle with an incapacitating disease, and he understands the hope that embryonic stem cell research held. Why would we want to destroy that hope?

I would like to thank the Juvenile Diabetes Foundation and their young advocates for all the work they have done to raise awareness about the need to pursue embryonic stem cell research. The Juvenile Diabetes Foundation recognizes the need to allow embryonic stem cell research to transcend political lines and partisan fighting so that critical gains can be made in medicine in America and millions of human lives could be saved. I would also like to send a special thanks to my friend, Bonnie Wilson, whose daughter has juvenile diabetes.

Since I have been in Congress, I have received an overwhelming number of calls and letters from my constituents detailing their daily pain and suffering from debilitating diseases. In March 2006, I received a letter from my constituent Liz O'Malley. In her letter, she described the daily struggles of her son, Seamus. Seamus has muscular dystrophy. He is only 11-years old. Stem cell treatment may be his only hope. Why would we want to destroy that hope?

The opponents of this measure wrongly portray the decision on funding for additional stem cell research as a choice between one life or another. In fact, we are choosing between disposing of embryonic stem cells or using those cells to save countless lives and advance life-saving science in previously unrealized ways. Embryonic stem cell research offers the hope of a better life. It is incomprehensible that anyone would allow politics and personal preference to trump hard facts and science. They wrongly portray amniotic fluid stem cells as the only legitimate form of stem cell research. While this method is promising, it should not be the only type of stem cell research conducted. Every type of stem cell is different, every type has a unique ability, and none are a replacement for another. Any strides made in one form of stem cell research may be essential to gains in another area. We must not act to prevent embryonic stem cell research and dash the hopes of so many families who are battling critical illnesses and disorders.

America has always been on the cutting edge of innovation and now we stand on the brink of groundbreaking medical advancements that would dramatically alter the lives of people such as Seamus. We must not prohibit this promising research. States are already moving forward with this research by committing public funds. Illinois has already awarded $10 million in grant funding to research institutes and hospitals because Governor Blagojavich recognizes the advances embryonic stem cell research could make in science and medicine and the great potential it holds. I urge my colleagues vote to ''yes'' on H.R. 3 and to follow the lead of Illinois and many other states and allow for Federal funding of embryonic stem cell research.

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Speaker, I rise today in strong support of H.R. 3, providing for embryonic stem cell research.

The majority of Americans are in favor of stem cell research, as am I.

Scientists in this country have been handcuffed by politicians who do not trust them to conduct research in an ethical manner.

My colleagues, you have heard an argument that ''adult'' stem cells have yielded greater benefits than ''embryonic'' stem cells in clinical research.

The fact is that adult stem cells receive much more Federal funding, while embryonic stem cells have received little.

It's not right for legislators or the President to be telling scientists how to do their work. Researchers need freedom to pursue science that yields benefits.

A vote for H.R. 3 is a vote for millions suffering from diabetes, Parkinson's, and other diseases.

It is time to say ''no'' to the ultraconservative lobby that has blockaded stem cell research for so long, and it is time for a change.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to section 509 of House Resolution 6, the bill is considered read and the previous question is ordered.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

MOTION TO RECOMMIT OFFERED BY MR. BURGESS

Mr. BURGESS. Mr. Speaker, I offer a motion to recommit.

The SPEAKER pro tempore. Is the gentleman opposed to the bill?

Mr. BURGESS. In its current form I am.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Mr. Burgess moves to recommit the bill (H.R. 3) to the Committee on Energy and Commerce with instructions to report the same back to the House forthwith with the following amendment:

Page 4, line 11, strike the close quotation marks and the period at the end and insert the following:

''(e) PREVENTING FEDERAL SUPPORT FOR HUMAN CLONING.—

''(1) PROHIBITION.—In conducting or supporting research described in subsection (a), the Secretary may not award a grant to, enter into a contract with, or provide any other support to any entity (including any public or private entity and any Federal, State, or local agency) for such research, unless the entity provides assurances satisfactory to the Secretary that—

''(A) the entity has not conducted or supported, and will not conduct or support, any activity described in paragraph (2) during any fiscal year for which the grant, contract, or support is provided; and

''(B) any entity that controls, is controlled by, or is under common control with such entity has not conducted or supported, and will not conduct or support, any activity described in paragraph (2) during any fiscal year for which the grant, contract, or support is provided.

''(2) ACTIVITIES.—The activities described in this paragraph are any research utilizing all or part of human embryonic stem cells from any cloned human.

''(f) DEFINITIONS.—In this section:

''(1) The term 'asexual reproduction' means reproduction not initiated by the union of oocyte and sperm.

''(2) The term 'cloned human' means an organism produced by human cloning.

''(3) The term 'human cloning' means human asexual reproduction, accomplished by introducing nuclear material from one or more human somatic cells into a fertilized or

unfertilized oocyte whose nuclear material has been removed or inactivated so as to produce a living organism (at any stage of development) that is genetically virtually identical to an existing or previously existing human organism.

''(4) The term 'human embryo or embryos' has the meaning given to that term in section 509(b) of the Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2006 (Pub. L. 109–149; 119 Stat. 2833).

''(5) The term 'human embryonic stem cell' means a cell derived from a human embryo or embryos.

''(6) The term 'somatic cell' means a diploid cell (having a complete set of chromosomes) obtained or derived from a living or deceased human body at any stage of development.''.

Mr. BURGESS (during the reading). Mr. Speaker, I ask unanimous consent that the motion to recommit be considered as read and printed in the RECORD.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

The SPEAKER pro tempore. The gentleman from Texas is recognized for 5 minutes in support of his motion to recommit.

Mr. BURGESS. Mr. Speaker, we have heard a lot of discussion today, and a lot of it good on both sides. I again remain disappointed we were not allowed in our committee to fully investigate and understand some of the new issues that surround this science.

I think it is extremely important to know that nothing that we have done so far would preclude the cloning of human tissue, and that is something that needs to be addressed.

□ 1430

So for that, I have asked Dr. DAVE WELDON to share some of his thoughts with us on this subject.

Mr. WELDON of Florida. I thank the gentleman for yielding.

Mr. Speaker, I rise in strong support of this motion to recommit, and I would encourage all of my colleagues to vote for it. Why are we offering this motion to recommit? It is really very, very simple. This institution, the House of Representatives, is previously on multiple occasions on record being in opposition to human cloning, both human cloning for the purpose of creating a baby and human cloning for the purpose of creating embryos for research purposes.

Why do we bring this up? Why do we offer this motion to recommit in its current form? Well, it is very, very simple. Some of the labs that are going to get the money under this bill are currently pursuing an agenda of human cloning. I would encourage you all to go to the Harvard medical school Web site. You can pull this down. I have it right here. I would be very interested to share it with any of my colleagues how they are pursuing, through the process that they refer to as Somatic Cell Nuclear Transfer, which is human cloning, an agenda to create disease-specific cell lines for embryonic stem cells. That is their agenda through the process of cloning.

Now, we are on record wanting to make it illegal, make it criminal, to do human cloning. This motion to recommit doesn't do that. This says something much milder than that, and this is why I think most people in this body should be very, very comfortable with this motion to recommit. It simply says, we don't want to be using Federal dollars in a lab that is engaging in human cloning. If we can't get through the Senate a ban, a total ban on human cloning, at least let's make sure that, as we move forward in this brave new world of using human embryos in research and discarding them, that at least we are not incentivizing cloning.

I commend my colleague from Texas and the staff for developing this motion to recommit, and I would just again remind all of my colleagues, we are out of step with the civilized world. Canada, France, Germany and Italy have all completely banned embryo cloning. All the other G–8 countries have serious restrictions on it. This is a restriction on human cloning, a simple, mild restriction that we won't allow Federal dollars to be going to a lab that is doing cloning.

Mr. BURGESS. I thank the gentleman from Florida. I will yield any time remaining to the gentleman from Iowa (Mr. KING).

Mr. KING of Iowa. I thank the gentleman for yielding and appreciate the privilege to address this subject matter.

This motion to recommit is a motion about cloning. Many of the other civilized nations in the world have taken a position against cloning. This Congress has taken a position against cloning, but there isn't a way in the laboratory to move forward with these experiments on embryos without cloning.

We are asking for a moral standard here. The people say, on the one side of this argument, No, we're opposed to human cloning; we think that's abhorrent to us; that that is ethically something that we're opposed to. This motion to recommit allows a Member to take that stand and put that vote up and say, I'm opposed to cloning, whatever you believe about the research that is involved here.

Mr. FEENEY. Will the gentleman yield?

Mr. KING of Iowa. I would yield.

Mr. FEENEY. I would say to my friend, Mr. KING, yesterday in the bill there was a discriminatory provision that favored or discriminated for or against some territories or States as opposed to others in the minimum wage bill. Is there anything that the gentleman is aware of in this bill that would discriminate in terms of Federal funding for human cloning, helping some territories and treating some States and territories different from one another as, unbeknownst to the Members, occurred yesterday in the minimum wage bill?

Mr. KING of Iowa. Yesterday what happened in the minimum wage bill seemed to be discriminatory for some reasons that I think we all know. I am not aware that there is a political subdivision, a geographical area or even a subdivision of some university that might have assisted——

Mr. FEENEY. Is it theoretically possible that people in American Samoa who do not make minimum wage——

The SPEAKER pro tempore. The gentleman from Florida will suspend.

The gentleman from Iowa has the time. If he wants him again to yield, he should ask him to yield, not simply speak.

Mr. FEENEY. Will the gentleman yield?

Mr. KING of Iowa. I would be happy to yield to the gentleman from Florida.

Mr. FEENEY. Is it theoretically conceivable if yesterday's minimum wage exemption for American Samoa becomes law and today's bill passes that people that make less than the minimum wage in American Samoa will be doing with Federal funds embryonic stem cell research?

Mr. KING of Iowa. I would say that I am not aware of a circumstance like that, of whether there happens to be a geographical area or a political subdivision or an interest that might be from a university that could be part of this bill.

Ms. DEGETTE. Mr. Speaker, I rise in opposition to motion to recommit.

The SPEAKER pro tempore. The gentlewoman is recognized for 5 minutes.

Ms. DEGETTE. Mr. Speaker, this motion does not ban human cloning. It does not ban reproductive cloning. What it is, is a desperate attempt to derail ethical scientific research on embryonic stem cell research, which is unrelated.

Not a single person in this House supports reproductive cloning. But again, the motion doesn't ban reproductive cloning. What it does is it says, if you are an entity conducting research on Somatic Cell Nuclear Transfer, which is a way to look at these cells, with private dollars, not even with public dollars, you will be prevented from receiving Federal funding for conducting embryonic stem cell research. This will, frankly, tie the hands of some of the preeminent research entities in the world from conducting this life-saving research.

The motion is a thinly veiled attempt to define human life in a manner that can have profound implications beyond the issues raised in H.R. 3. It contains vague terms like ''assurances'' and undefined terms such as ''satisfaction of the Secretary.''

What the frank intent of this motion is, is to gut H.R. 3 by strapping it with undefined standards and terms that are extraneous to the bill. The motion is a procedural vote without meaning. It is a ruse, a red herring designed to frighten, to obfuscate and to distract.

We all think that banning reproductive cloning is important, and that is

why the chairman of the Energy and Commerce Committee has assured me that he will examine this issue further to see what legislation we can do to protect ourselves.

And I will finally say, I do not know of one research institution which would be eligible for Federal funds through the NIH under H.R. 3 that is conducting any experiments or attempts for human reproductive cloning; it is unethical, and our research institutions are not engaged in these efforts.

Rather than a sincere attempt to legislate on matters of great importance, this motion is partisan, and it should be defeated.

With that, Mr. Speaker, I plan to vote ''no'' on this motion, I strongly encourage my colleagues to vote ''no.''

And I yield the balance of my time to the distinguished gentleman from Delaware (Mr. CASTLE).

Mr. CASTLE. I thank the gentlewoman from Colorado.

This motion is a poison pill in the greatest way, and it goes a little beyond the normal poison pill. It has basically been designed by those who would oppose the legislation in a way of trying to knock it out because they know very well we have the votes for it on the floor here today. But it goes beyond that; it actually eliminates part of the research which may be essential in the implanting of the embryonic stem cells eventually in a human being called Somatic Cell Nuclear Transfer, which really doesn't relate ultimately to the human reproductive cloning.

I have discussed introducing legislation, I have co-sponsored legislation in the past on banning reproductive cloning. I happen to believe in that, with the gentlewoman from Colorado, we both believe in that very strongly; but the bottom line is that we need to be able to develop the research on embryonic stem cells in every way we possibly can.

Somatic Cell Nuclear Transfer is currently legal. It is just not funded by the Federal Government. This bill does not fund SCNT in any way whatsoever.

The motion to recommit is shortsighted. It is very damaging to any possible future research. It should be opposed by anybody who plans to vote for this legislation. And I would hope that 100 percent of the individuals who are going to vote for our bill are going to oppose the motion to recommit which is being presented here today.

I think in the names of those who are supportive of it, be it Senator HATCH or Nancy Reagan or Michael J. Fox or a lot of other people, but particularly all those people out there who are ill, who have some hope, and that is what it is, it is hope, will make absolutely sure that we do not vote for the motion to recommit, that we defeat it and then, right after that, we go on to pass the legislation which is so important and vital for the future of health of people in America.

Mr. DREIER. Mr. Speaker, I was very interested to hear the remarks of the gentlelady from Colorado (Ms. DEGETTE) when she inferred that the vote on the motion to recommit was not a substantive or amendatory vote. This is simply not the case. The motion to recommit has been held as the opposition's, traditionally the Minority's, last opportunity to perfect the bill prior to its adoption. The motion to recommit was often denied the Republicans when they were in the Minority prior to 1995. When the Republicans took the majority in the 104th Congress we had promised to protect the Minority's right to offer the motion to recommit and we kept our promise by instituting a rules change which prohibited the Rules Committee from denying that motion.

And to simply make the point more clear that a motion to recommit is a substantive amendatory vote, I would like to refer the gentlelady to page H210 of the CONGRESSIONAL RECORD dated January 9, 2007. There she will find a series of parliamentary inquiries directed to the Chair by the gentleman from Texas, Mr. HENSARLING. In one of the inquiries the gentleman from Texas specifically asks the Chair, Does the special order provide for the consideration of any amendments? To which the Speaker replied, ''By way of the motion to recommit.'' So, unless the gentlelady would like to overturn the ruling of the Chair, clearly the motion to recommit is amendatory and therefore highly substantive.

Ms. DEGETTE. Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Without objection, the previous question is ordered on the motion to recommit.

There was no objection.

The SPEAKER pro tempore. The question is on the motion to recommit.

The question was taken; and the Speaker pro tempore announced that the noes appeared to have it.

Mr. BURGESS. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Evidently a quorum is not present.

The Sergeant at Arms will notify absent Members.

Pursuant to clause 8 and clause 9 of rule XX, this 15-minute vote on the motion to recommit will be followed by 5-minute votes on passage, if ordered; and on the motion to suspend the rules on H. Res. 15.

The vote was taken by electronic device, and there were—yeas 189, nays 238, not voting 8, as follows:

[Roll No. 19]

YEAS—189

Aderholt
Akin
Alexander
Bachmann
Bachus
Baker
Barrett (SC)
Bartlett (MD)
Barton (TX)
Bilirakis
Bishop (UT)
Blackburn
Blunt
Boehner
Bonner
Boozman
Boustany
Brady (TX)
Brown (SC)
Buchanan
Burgess
Burton (IN)
Calvert
Camp (MI)
Campbell (CA)
Cannon
Cantor
Capito
Carter
Chabot
Coble
Cole (OK)
Conaway
Costello
Crenshaw
Cubin
Culberson
Davis (KY)
Davis, David
Davis, Jo Ann
Deal (GA)
Diaz-Balart, L.
Diaz-Balart, M.
Doolittle
Drake
Dreier
Duncan
Edwards
Ehlers
Ellsworth
Emerson
English (PA)
Everett
Fallin
Feeney
Ferguson
Flake
Forbes
Fortenberry
Fossella
Foxx
Franks (AZ)
Gallegly
Garrett (NJ)
Gerlach
Gillmor
Gingrey
Gohmert
Goode
Goodlatte
Granger
Graves
Hall (TX)
Hastings (WA)
Hayes
Heller
Hensarling
Herger
Hobson
Hoekstra
Holden
Hulshof
Hunter
Inglis (SC)
Jindal
Johnson (IL)
Johnson, Sam
Jones (NC)
Jordan
Keller
King (IA)
King (NY)
Kingston
Kline (MN)
Knollenberg
Kuhl (NY)
LaHood
Lamborn
Latham
LaTourette
Lewis (CA)
Lewis (KY)
Linder
LoBiondo
Lucas
Lungren, Daniel E.
Manzullo
Marchant
Marshall
McCarthy (CA)
McCaul (TX)
McCotter
McCrery
McHenry
McHugh
McIntyre
McKeon
McMorris Rodgers
Mica
Miller (FL)
Miller (MI)
Moran (KS)
Murphy, Tim
Musgrave
Myrick
Neugebauer
Nunes
Oberstar
Paul
Pearce
Pence
Peterson (MN)
Peterson (PA)
Petri
Pickering
Pitts
Platts
Poe
Price (GA)
Putnam
Regula
Rehberg
Renzi
Reynolds
Rogers (AL)
Rogers (KY)
Rogers (MI)
Rohrabacher
Ros-Lehtinen
Roskam
Royce
Ryan (WI)
Sali
Saxton
Schmidt
Sensenbrenner
Sessions
Shadegg
Shimkus
Shuler
Shuster
Simpson
Smith (NE)
Smith (NJ)
Smith (TX)
Souder
Stearns
Stupak
Sullivan
Tancredo
Taylor
Terry
Thornberry
Tiahrt
Tiberi
Turner
Upton
Walberg
Walsh (NY)
Wamp
Weldon (FL)
Weller
Whitfield
Wicker
Wilson (NM)
Wilson (SC)
Wolf
Young (AK)
Young (FL)

NAYS—238

Abercrombie
Ackerman
Allen
Altmire
Andrews
Arcuri
Baca
Baird
Baldwin
Barrow
Bean
Becerra
Berkley
Berman
Berry
Biggert
Bilbray
Bishop (NY)
Blumenauer
Bono
Boren
Boswell
Boucher
Boyd (FL)
Boyda (KS)
Brady (PA)
Braley (IA)
Brown, Corrine
Brown-Waite, Ginny
Butterfield
Capps
Capuano
Cardoza
Carnahan
Carney
Carson
Castle
Castor
Chandler
Clarke
Clay
Cleaver
Clyburn
Cohen
Conyers
Cooper
Costa
Courtney
Cramer
Crowley
Cuellar
Cummings
Davis (AL)
Davis (CA)
Davis (IL)
Davis, Tom
DeFazio
DeGette
Delahunt
DeLauro
Dent
Dicks
Dingell
Doggett
Donnelly
Doyle
Ellison
Emanuel
Engel
Eshoo
Etheridge
Farr
Fattah
Filner
Frank (MA)
Frelinghuysen
Giffords
Gilchrest
Gillibrand
Gonzalez
Gordon
Green, Al
Green, Gene
Grijalva
Gutierrez
Hall (NY)
Hare
Harman
Hastings (FL)
Herseth
Higgins
Hill
Hinchey
Hinojosa
Hirono
Hodes
Holt
Honda
Hooley
Hoyer
Inslee
Israel
Issa
Jackson (IL)
Jackson-Lee (TX)
Jefferson
Johnson (GA)
Johnson, E. B.
Jones (OH)
Kagen
Kanjorski
Kaptur
Kennedy
Kildee
Kilpatrick
Kind
Kirk
Klein (FL)
Kucinich
Lampson
Langevin
Lantos
Larsen (WA)
Larson (CT)
Lee
Levin
Lewis (GA)
Lipinski
Loebsack
Lofgren, Zoe
Lowey
Lynch
Mack
Mahoney (FL)
Maloney (NY)
Markey
Matheson
Matsui
McCarthy (NY)
McCollum (MN)
McDermott
McGovern
McNerney
McNulty
Meehan
Meek (FL)
Meeks (NY)
Melancon
Michaud
Millender-McDonald
Miller (NC)
Miller, George
Mitchell

Mollohan
Moore (KS)
Moore (WI)
Moran (VA)
Murphy (CT)
Murphy, Patrick
Murtha
Nadler
Napolitano
Neal (MA)
Obey
Olver
Ortiz
Pallone
Pascrell
Pastor
Payne
Pelosi
Perlmutter
Pomeroy
Porter
Price (NC)
Pryce (OH)
Rahall
Ramstad
Rangel
Reichert
Reyes
Rodriguez
Ross
Rothman
Roybal-Allard
Ruppersberger
Rush
Ryan (OH)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schiff
Schwartz
Scott (GA)
Scott (VA)
Serrano
Sestak
Shays
Shea-Porter
Sherman
Sires
Skelton
Slaughter
Smith (WA)
Snyder
Solis
Space
Spratt
Stark
Sutton
Tanner
Tauscher
Thompson (CA)
Thompson (MS)
Tierney
Towns
Udall (CO)
Udall (NM)
Van Hollen
Velázquez
Visclosky
Walden (OR)
Walz (MN)
Wasserman Schultz
Waters
Watson
Watt
Waxman
Weiner
Welch (VT)
Wexler
Wilson (OH)
Woolsey
Wu
Wynn
Yarmuth

NOT VOTING—8

Bishop (GA)
Buyer
Davis, Lincoln
Hastert
Miller, Gary
Norwood
Radanovich
Westmoreland

□ 1502

Mr. BISHOP of New York changed his vote from ''yea'' to ''nay.''

Messrs. YOUNG of Alaska, REGULA, and ROHRABACHER changed their vote from ''nay'' to ''yea.''

So the motion to recommit was rejected.

The result of the vote was announced as above recorded.

Stated for:

Mr. NORWOOD. Mr. Speaker, on rollcall No. 19, on Motion to Recommit with Instructions (H.R. 3), had I been present, I would have voted "yea."

PARLIAMENTARY INQUIRY

Mr. BURGESS. Parliamentary inquiry.

The SPEAKER pro tempore (Mr. FRANK of Massachusetts). The gentleman from Texas may state his parliamentary inquiry.

Mr. BURGESS. Mr. Speaker, would it be in order to inquire where we are in the 100 hours time? I see it is 3 o'clock in the afternoon; in Texas, that is 2 o'clock.

The SPEAKER pro tempore. The gentleman from Massachusetts is the Speaker pro tempore, not the timekeeper.

The question is on the passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

RECORDED VOTE

Mr. BARTON of Texas. Mr. Speaker, I demand a recorded vote.

A recorded vote was ordered.

The SPEAKER pro tempore. This will be a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 253, noes 174, not voting 8, as follows:

[Roll No. 20]

AYES—253

Abercrombie
Ackerman
Allen
Altmire
Andrews
Arcuri
Baca
Baird
Baldwin
Barrow
Barton (TX)
Bean
Becerra
Berkley
Berman
Berry
Biggert
Bilbray
Bishop (NY)
Blumenauer
Bono
Boren
Boswell
Boucher
Boyd (FL)
Boyda (KS)
Brady (PA)
Braley (IA)
Brown, Corrine
Brown-Waite, Ginny
Butterfield
Calvert
Capito
Capps
Capuano
Cardoza
Carnahan
Carney
Carson
Castle
Castor
Chandler
Clarke
Clay
Cleaver
Clyburn
Coble
Cohen
Conyers
Cooper
Costa
Courtney
Cramer
Crowley
Cuellar
Cummings
Davis (AL)
Davis (CA)
Davis (IL)
Davis, Tom
DeFazio
DeGette
Delahunt
DeLauro
Dent
Dicks
Dingell
Doggett
Doyle
Dreier
Edwards
Ellison
Emanuel
Emerson
Engel
Eshoo
Etheridge
Farr
Fattah
Filner
Fossella
Frank (MA)
Frelinghuysen
Gerlach
Giffords
Gillibrand
Gonzalez
Gordon
Granger
Green, Al
Green, Gene
Grijalva
Gutierrez
Hall (NY)
Hare
Harman
Hastings (FL)
Heller
Herseth
Higgins
Hill
Hinchey
Hinojosa
Hirono
Hodes
Holden
Holt
Honda
Hooley
Hoyer
Inslee
Israel
Issa
Jackson (IL)
Jackson-Lee (TX)
Jefferson
Johnson (GA)
Johnson, E. B.
Jones (OH)
Kagen
Kanjorski
Kennedy
Kildee
Kilpatrick
Kind
Kirk
Klein (FL)
Kucinich
Lampson
Langevin
Lantos
Larsen (WA)
Larson (CT)
LaTourette
Lee
Levin
Lewis (CA)
Lewis (GA)
Loebsack
Lofgren, Zoe
Lowey
Lynch
Mack
Mahoney (FL)
Maloney (NY)
Markey
Matheson
Matsui
McCarthy (NY)
McCollum (MN)
McDermott
McGovern
McKeon
McNerney
McNulty
Meehan
Meek (FL)
Meeks (NY)
Melancon
Michaud
Millender-McDonald
Miller (NC)
Miller, George
Mitchell
Moore (KS)
Moore (WI)
Moran (VA)
Murphy (CT)
Murphy, Patrick
Murtha
Nadler
Napolitano
Neal (MA)
Obey
Olver
Ortiz
Pallone
Pascrell
Pastor
Payne
Pelosi
Perlmutter
Platts
Pomeroy
Porter
Price (NC)
Pryce (OH)
Ramstad
Rangel
Regula
Reichert
Reyes
Rodriguez
Rohrabacher
Ross
Rothman
Roybal-Allard
Ruppersberger
Rush
Ryan (OH)
Salazar
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schiff
Schwartz
Scott (GA)
Scott (VA)
Serrano
Sestak
Shays
Shea-Porter
Sherman
Sires
Skelton
Slaughter
Smith (WA)
Snyder
Solis
Space
Spratt
Stark
Sutton
Tanner
Tauscher
Thompson (CA)
Thompson (MS)
Tierney
Towns
Udall (CO)
Udall (NM)
Upton
Van Hollen
Velázquez
Visclosky
Walden (OR)
Walz (MN)
Wasserman Schultz
Waters
Watson
Watt
Waxman
Weiner
Welch (VT)
Wexler
Wilson (NM)
Woolsey
Wu
Wynn
Yarmuth
Young (AK)
Young (FL)

NOES—174

Aderholt
Akin
Alexander
Bachmann
Bachus
Baker
Barrett (SC)
Bartlett (MD)
Bilirakis
Bishop (UT)
Blackburn
Blunt
Boehner
Bonner
Boozman
Boustany
Brady (TX)
Brown (SC)
Buchanan
Burgess
Burton (IN)
Camp (MI)
Campbell (CA)
Cannon
Cantor
Carter
Chabot
Cole (OK)
Conaway
Costello
Crenshaw
Cubin
Culberson
Davis (KY)
Davis, David
Davis, Jo Ann
Davis, Lincoln
Deal (GA)
Diaz-Balart, L.
Diaz-Balart, M.
Donnelly
Doolittle
Drake
Duncan
Ehlers
Ellsworth
English (PA)
Everett
Fallin
Feeney
Ferguson
Flake
Forbes
Fortenberry
Foxx
Franks (AZ)
Gallegly
Garrett (NJ)
Gillmor
Gingrey
Gohmert
Goode
Goodlatte
Graves
Hall (TX)
Hastings (WA)
Hayes
Hensarling
Herger
Hobson
Hoekstra
Hulshof
Hunter
Inglis (SC)
Jindal
Johnson (IL)
Johnson, Sam
Jones (NC)
Jordan
Kaptur
Keller
King (IA)
King (NY)
Kingston
Kline (MN)
Knollenberg
Kuhl (NY)
LaHood
Lamborn
Latham
Lewis (KY)
Linder
Lipinski
LoBiondo
Lucas
Lungren, Daniel E.
Manzullo
Marchant
Marshall
McCarthy (CA)
McCaul (TX)
McCotter
McCrery
McHenry
McHugh
McIntyre
McMorris Rodgers
Mica
Miller (FL)
Miller (MI)
Mollohan
Moran (KS)
Murphy, Tim
Musgrave
Myrick
Neugebauer
Nunes
Oberstar
Paul
Pearce
Pence
Peterson (MN)
Peterson (PA)
Petri
Pickering
Pitts
Poe
Price (GA)
Putnam
Rahall
Rehberg
Renzi
Reynolds
Rogers (AL)
Rogers (KY)
Rogers (MI)
Ros-Lehtinen
Roskam
Royce
Ryan (WI)
Sali
Saxton
Schmidt
Sensenbrenner
Sessions
Shadegg
Shimkus
Shuler
Shuster
Simpson
Smith (NE)
Smith (NJ)
Smith (TX)
Souder
Stearns
Stupak
Sullivan
Tancredo
Taylor
Terry
Thornberry
Tiahrt
Tiberi
Turner
Walberg
Walsh (NY)
Wamp
Weldon (FL)
Weller
Whitfield
Wicker
Wilson (OH)
Wilson (SC)
Wolf

NOT VOTING—8

Bishop (GA)
Buyer
Gilchrest
Hastert
Miller, Gary
Norwood
Radanovich
Westmoreland

□ 1511

Mr. MELANCON changed his vote from ''no'' to ''aye.''

So the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

Stated against:

Mr. NORWOOD. Mr. Speaker, on rollcall No. 20, on passage of H.R. 3, had I been present, I would have voted "no."

MOURNING THE PASSING OF PRESIDENT GERALD RUDOLPH FORD

The SPEAKER pro tempore (Mr. WELCH of Vermont). The unfinished business is the question of suspending the rules and agreeing to the resolution, H. Res. 15, as amended.

The Clerk read the title of the resolution.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Michigan (Mr. EHLERS) that the House suspend the rules and agree to the resolution, H. Res. 15, as amended, on which the yeas and nays are ordered.

This will be a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 423, nays 0, not voting 12, as follows: