

Testimony Provided to Mississippi House of Representatives
Judiciary B Committee, January 24, 2018

Good afternoon. My name is Dr. Jameson Taylor. I am acting president of the [Mississippi Center for Public Policy](#). I hold a Ph.D. and have spent the last 10 years working on health care policy at the state level. I am also a parent, a man of faith and a pro-lifer.

In particular, I believe God created human life to be something special. I believe life is sacred.

Thus, it was with horror that I first discovered that a number of common vaccines are cultured on aborted fetal tissue. That deeply troubles my conscience. And a vaccine mandate forcing my children to use such vaccines violates my freedom and my children's freedom. For this reason, I strongly support a religious vaccine exemption.

You already know that nearly every other state, and the DOD, provides for a religious or philosophical exemption. You already know that the policy discussion about vaccines is not whether some kids are harmed by vaccines. The federal government acknowledges this and thus created the National Vaccine Injury Compensation Program.

Go to [their .gov website](#) and read what they say:

In very rare cases, a vaccine can cause a serious problem, such as a severe allergic reaction. ... The National Vaccine Injury Compensation Program is a no-fault alternative to the traditional legal system for resolving vaccine injury petitions. It was created in the 1980s, after lawsuits against vaccine companies and health care providers threatened to cause vaccine shortages.

If it were not for this program, pharmaceutical manufacturers would no longer produce vaccines. Again, this program exists because some kids are harmed from vaccines.

I am not anti-vaccine, but I do believe that because vaccines do harm some children the state has an obligation to provide for an exemption. As a pro-lifer, I also believe the right thing to do is to offer a religious exemption. Such an

exemption should respect the diversity of religious belief we have in our state and trust parents to prayerfully decide what is best for their children.

Now, I don't blame you for being skeptical about all this. You lawmakers are told many things by many people, but we at MCPP exist to provide accurate, objective information.

If you don't believe me, look up the product insert for the vaccines. Doctors, by the way, are supposed to give these inserts to patients when they are vaccinated, but that rarely happens.

As you read the product insert for some vaccines you will run across the term, "human diploid cell line." The cell line in question is taken from an electively aborted baby.

It has to be an elective abortion, by the way, because a miscarriage might have been caused by an unknown problem. A healthy, human baby, just coming out of the first trimester, is the gold standard for vaccine cultivation.

Let me say a word about how vaccines are made. A vaccine is essentially an attenuated virus mixed with various additives and preservatives. Once introduced into the body, the weakened or dead virus is supposed to trigger an immune response sufficient, not only to destroy the virus, but also provide long-term protection against stronger, naturally occurring strains of a disease.

Scientists create vaccines by first isolating the virus (or bacterial agent) they want to provide immunization against. The virus is then cultivated on a cell substrate because viral vaccines—unlike vaccines for bacterial infections—must be grown on living cells. This culture is at the center of the vaccine manufacturing process—it is to a vaccine what gas is to a car. The importance of a culture for the vaccine manufacturing process can hardly be overemphasized.

The live virus feeds off of the culture and often continues to feed on the culture even once it is transformed into a vaccine. Vaccines cultured on fetal tissue—what the industry calls a "human diploid cell strain culture system" (HDCS)—contain remnants of an aborted baby. Specifically, as the chickenpox vaccine's product insert states, each dose contains "residual components of [human diploid] cells

[including DNA and protein.](#)” Along with the virus, these fetal cells are injected into the vaccine recipient.

The chickenpox vaccine is only one of several common immunizations cultured on aborted fetal tissue. At least ten different vaccines for chickenpox, hepatitis A, polio, rabies and rubella are cultivated on two fetal cell lines: WI-38 and MRC-5. Several more vaccines are currently being tested on these and other fetal cell lines.

The WI-38 “human-diploid” cell culture is derived from a voluntary abortion performed in Sweden in 1962, as detailed in the August 1969 issue of the *American Journal of Diseases of Children*.ⁱ “WI” is an acronym used by the Wistar Institute. WI-38 was the 38th cell line created by Wistar as part of an ongoing fetal tissue research program. In other words, the WI-38 abortion was only one of many. Wistar also created rabies, rubella and polio vaccines and performs a great deal of embryonic stem cell research.

Unfortunately, scientists were so impressed with WI-38’s pedigree that it became the vaccine culture of choice for many companies. Because of WI-38s success, other companies also produced and are producing additional cultures from other aborted children. One of these is MRC-5, which was taken from the lung tissue of a fourteen-week-old preborn baby boy. MRC stands for Medical Research Council, a U.K. research center. According to the Coriell Cell Repositories, “The MRC-5 cell line was developed [by J. P. Jacobs] in September 1966 from lung tissue taken from a 14 week fetus aborted for psychiatric reasons from a 27 year old physically healthy woman.”ⁱⁱ

Another culture taken from an aborted baby is [PER.C6](#). PER.C6 is derived from the retinal tissue of an unborn eighteen-week-old baby. In the words of the researcher who developed the cell line, the abortion was completely voluntary and was performed “simply because the woman wanted to get rid of the fetus.”ⁱⁱⁱ The abortion that led to the creation of PER.C6 occurred in October 1985.

Now, when I first learned all this, I was shocked. But my shock turned to outrage and disappointment when I realized my doctor never informed me that some vaccines are cultured on aborted fetal tissue.

My church teaches human life is sacred. For that reason, I am opposed to abortion, and I am opposed to procedures and activities that promote and justify abortion. The widespread use of fetal cell lines in the vaccine industry has certainly done that.

After careful study and prayerful discernment, I have concluded that using these particular vaccines constitutes material cooperation with the sin of abortion.^{iv} The use of such vaccines is also a cause of scandal because it furthers and incentivizes additional fetal tissue research. For this reason, I do not use these vaccines on my children and choose to homeschool. To say the least, this is a significant burden.

This is what I believe. This is part of my faith. And just like almost every other state in America, I am asking the Mississippi legislature to protect my religious liberty and my freedom of conscience.

Jameson Taylor, MCPP

ⁱ“Gamma globulin prophylaxis; Inactivated rubella virus; Production and biologics control of live attenuated rubella virus vaccines,” Discussion on Session V, *American Journal of Diseases of Children*, vol. 118, no. 2, August 1969, pp. 377-378.

ⁱⁱAlso see J. P. Jacobs, C. M. Jones and J. P. Baille, “Characteristics of a human diploid cell designated MRC-5,” *Nature*, vol. 227, no. 254, 7/11/70, pp. 168-170.

ⁱⁱⁱVaccines and Related Biological Products Advisory Committee (VRBPAC), Center for Biologics Evaluation and Research, FDA, Gaithersburg, Md., 5/16/01 meeting (Neal R. Gross transcribers) p. 91. “PER” is the name used by Crucell to refer to its line of genetically engineered cells; “C6” is PER clone number 6. See F. J. Fallaux, “New helper cells and matched early region 1-deleted adenovirus vectors prevent generation of replication-competent adenoviruses,” *Human Gene Therapy*, vol. 9, no. 13, 9/1/98, pp. 1909-1917.

^{iv}More specifically, the use of such vaccines constitutes remote material cooperation, meaning each case is a matter for individual discernment. For instance, it is difficult to maintain that chickenpox vaccination is as necessary to public health as is polio vaccination. Thus, a parent might decide to use an immorally manufactured vaccine to immunize against polio, but not chickenpox. Such nuances illustrate just why a religious exemption is necessary. Some have cited a statement from the Pontifical Academy for Life as proof that the Catholic Church “is unequivocal in its support for vaccines.” This is a very misleading conclusion. The statement (which is merely an opinion and not formal Church teaching) concludes with the following guidance:

To summarize, it must be confirmed that:

- there is a grave responsibility to use alternative vaccines and to make a conscientious objection with regard to those which have moral problems;
- as regards the vaccines without an alternative, the need to contest so that others may be prepared must be reaffirmed, as should be the lawfulness of using the former in the meantime inasmuch as is necessary in order to avoid a serious risk not only for one's own children but also, and perhaps more specifically, for the health conditions of the population as a whole - especially for pregnant women;
- the lawfulness of the use of these vaccines should not be misinterpreted as a declaration of the lawfulness of their production, marketing and use, but is to be understood as being a passive material cooperation and, in its mildest and remotest sense, also active, morally justified as an *extrema ratio* due to the necessity to

provide for the good of one's children and of the people who come in contact with the children (pregnant women);

- such cooperation occurs in a context of moral coercion of the conscience of parents, who are forced to choose to act against their conscience or otherwise, to put the health of their children and of the population as a whole at risk. This is an unjust alternative choice, which must be eliminated as soon as possible.