

## Is Vaccination Complicit with Abortion?

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Does having your child vaccinated for measles, mumps, and rubella morally link you to an abortion performed 42 years ago? Some patients think so, but is this perspective reasonable?

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Perhaps unknown to many readers of *The Annals* is a debate in the pro-life community having to do with the cell cultures used in the manufacturing of several commonly used vaccines (e.g., measles, mumps, and rubella; hepatitis A; hepatitis B; varicella). These cell cultures originated from tissue obtained by abortions done approximately 4 decades ago.

I first became aware of the issue more than 6 years ago when I was asked by an attorney to counsel a US Army sergeant who was facing court-martial for his refusal to take a vaccination required for deployment. The sergeant had been told that aborted embryos were used to manufacture the vaccine. He had chosen to disobey the order to be vaccinated rather than submit to what he considered an act complicit with abortion. My research led to the discovery that the sergeant was not the only person who shared this conviction. The issue is still being debated in certain religious circles and among certain ethicists, but there remains little written in the healthcare literature. Every month or two, I am asked for my opinion on this issue by a patient

or colleague. While I share my opinion here to help inform my healthcare colleagues, this is certain not to be the final word. Passions run deep.

As it turned out, the sergeant's information was not exactly true. Aborted embryos are not used in the manufacturing of vaccines — at least not in an ongoing sense. However, there is little debate about the fact that 2 particular cell cultures used for vaccine production (MRC-5, WI-38) were derived from abortions performed years ago. (The WI-38 cell culture is reported to have been derived from an abortion done in 1962.) With this link to abortion, for those of us who consider most abortions to be morally unacceptable, the question of using vaccines poses a real dilemma.

This is hardly a trivial debate. Whether or not we in healthcare have personal concerns about the origins of these cell cultures, we must regard the concerns of those patients who do. Moreover, within reasonable boundaries, we have an obligation to allow patients, and parents of patients, the autonomy to make informed decisions based on their understanding of what is known, filtered through their convictions. But while we most often defer to this autonomy, this dilemma regarding vaccination is made more difficult by its implications on public safety. Should our concern for the common good (immunization) trump individual autonomy? Should we have mandatory vaccination of school children and Army personnel against their convictions?

Back to the original question: Is it reasonable to conclude that accepting a vaccine manufactured using cells cultured from embryonic tissue obtained from an abortion done many years ago makes you complicit with that abortion — or any abortion? Here is a brief summary of arguments I have heard claiming that there is moral complicity: the end (benefits of vaccination) does not justify the means (abortion); never do evil that good might result; accepting the vaccination is cooperation with the original moral act;

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accepting the vaccination exhibits tolerance to, if not encouragement for, today's abortion industry.

Instead, I am persuaded by these arguments:

**Medicine's history in perspective** — Sadly, the history of medicine has its dark past. Today we benefit from knowledge and technologies that we advanced via experimentation that should shame a civilized society (e.g., use of information gained from human experimentation by Nazi physicians during WWII). Would we ever condone such behavior again so that useful knowledge might be gained? Of course not! Yet, can we disentangle that knowledge from what is known and applied today? I think not. Opposing vaccination because of its sordid past suggests a standard that would be impossible to apply throughout healthcare.

**Clarity of moral obligations** — In the US, there are no approved alternatives to the vaccines manufactured using these cell lines. To reject these vaccines without satisfactory alternatives would be to expose our families and society to unacceptable disease risks. When we compare our clear moral duty to care for our children with a much less certain moral duty to reject a vaccine because of potential complicity with abortion, the choice seems clear.

**Endorsing evil** — Unfortunately, some, like the Army sergeant mentioned above, are misinformed about the manufacturing process. A fresh supply of embryonic tissue is not required to sustain vaccine production. The cell cultures are self-propagating. Therefore, accepting these vaccines does not endorse or encourage abortions being done today. However, one concern is that pharmaceutical companies may seek new uses of aborted embryonic tissue. Some hope to discourage this by use of a boycott of vaccines. But unless many participate, a boycott will be futile. If a boycott were to attract large numbers, public health could be threatened by a shutdown of an industry already operating on small margins. A far better solution would be to enact legislation against unacceptable practices (e.g., the current federal ban on embryonic stem cell research).

**Cost and benefits of protest** — Do you recall seeing film clips of individuals burning themselves in protest over some issue? Perhaps it attracted attention to the cause, but was the sacrifice necessary or effective? I believe an effective protest against using cell cultures derived from abortion can be made without putting ourselves and our children at risk.

**Intent is important** — It is relevant that those who accept vaccination for themselves or their children do so without any intention of endorsing abortion. The fact that there is a remote association with abortion does not establish moral culpability.

**Absence of intrinsic evil** — Some protest the use of vaccines for other reasons (e.g., complications), but I found no one in this debate claiming that the vaccination itself is intrinsically evil. Again, the concern regards linkage to acts done more than a generation ago.

**Temporal relationship with the act** — In determining complicity, some ethicists distinguish between "immediate and mediate" and "proximate and remote" cooperation with the immoral act. While at times confusing, these distinctions describe the degree of separation between 2 events that also separate their moral complicity. These arguments are supportive of the opinion that someone can remain opposed to abortion without having to refuse vaccinations. While time does not change the face of evil, it can separate us from being an accomplice.

**Applying redemption** — Since this debate seems focused mostly among those with religious convictions, adding a comment about redemption seems appropriate. While never condoning evil acts so that good may result, the Judeo-Christian tradition teaches of a loving God who seeks to make good out of evil. A Christian does not reject the resurrection (good) because of its linkage to crucifixion (evil). Though linked, participation in the good does not endorse the evil. Neither does one need to reject the benefits of vaccination (good) solely because of its past linkage with abortion (evil).

My conclusion that it is morally permissible to accept these vaccinations despite their historical link to abortion does not diminish my concern about the use of cell cultures linked to abortion. Such concerns should motivate the pharmaceutical industry to find morally acceptable alternatives.

Unfortunately, these arguments were not persuasive to the Army sergeant. He was court-martialed — his sentence unknown to me.

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