

life-threatening disease and sexual promiscuity are different issues. One is the responsibility of the health care provider, while the other is primarily the responsibility of parents or of young women and men. Fourth, there is no evidence that providing the vaccine to young girls will encourage or facilitate increased sexual activity. Finally, not

providing the vaccine could be viewed as judgmental, harsh, and punitive. This hardly seems consistent with carrying on the healing mission of Jesus or the church's long theological and sacramental tradition of forgiveness.

The fundamental commitments of Catholic health care—respect for life and human dignity, acting on behalf of

the common good, prudent stewardship of resources, and justice—all seem to point in the direction of providing the HPV vaccine. Application of the principle of double effect, as well as the principle of cooperation, would seem to lead to the same conclusion. However, the issue also merits ongoing ethical review and analysis.

OF NOTE

Great Britain's senior family court judge last fall ordered that a woman who had been in a vegetative state for three years be given a sleeping pill before a decision was made to withdraw life-sustaining treatment. The pill, zolpidem, has been administered to other PVS patients in the U.S. and South Africa with the result that they have "woken up." The family wants the woman to be allowed to die and claim that she would not want to live with severe disabilities. This was the first such case in Great Britain, but others are expected to follow. (*Times Online*, November 20, 2006)

An editorial in the Phoenix diocesan newspaper, *The Catholic Sun*, urged Catholics to pressure the Susan G. Komen Breast Cancer Foundation to stop funding cancer screenings at Planned Parenthood clinics. After the October 2006 Race for the Cure, Komen granted \$25,000 to Planned Parenthood of Central and Northern Arizona to be used only for cancer screenings. The editorial, published with the approval of Bishop Thomas Olmstead, claims that the grant frees up Planned Parenthood money for other

purposes that are contrary to the Catholic faith. (*The Arizona Republic*, November 3, 2006)

The New York Court of Appeals ruled, on October 19, 2006, by a vote of 6-0 that the Women's Health and Wellness Act of 2002 does not violate the constitutional rights of religious organizations. The Act requires that employers pay for contraceptive drug coverage as part of prescription drug coverage in employee health plans. While the Act contains an exemption for religious organizations, it limits those organizations to those that have as their purpose to spread religious values and so long as they primarily employ and serve people of the same faith. The exemption does not cover educational, health, and social service ministries. The New York State Catholic Conference is considering petitioning the U.S. Supreme Court and/or possibly self-insuring. (*Catholic News Service*, October 20, 2006)

The Federal government is moving aggressively to create the first national banking system for umbilical cord blood. The Health Resources and Services Administration has awarded

contracts totaling nearly \$10 million to coordinate cord blood donations and to monitor the outcome of transplants. An additional \$14 million is being awarded to public cord blood banks around the country partly in order to increase the supply of cord blood donations. Most of the nearly two dozen public banks nationwide currently rely on donations to operate. The number of cord blood transplants is expected to increase significantly in coming years as scientists make progress in developing therapies from stem cells found in cord blood. (*The Associated Press*, October 16, 2006)

President Bush recently asked Congress to pass legislation that would safeguard individuals' genetic privacy. Experts say such a law would encourage Americans to undergo testing that could lead to prevention and treatment of many diseases. Scientists and patient advocates have previously pushed for legislation barring employers and insurance companies from discriminating based on the results of genetic tests. A so-called genetic discrimination bill passed the Senate unanimously in 2003, but died in the House. (*The New York Times*, January 18, 2007)