EDITORIAL

Embryonic stem cells: back to 70’s

The moral and ethical discussion about organ transplants of the 1970s is back. Considerations regarding “using a life” to save another versus the revolutionary therapeutic possibility appear again in the discussion about using embryonic stem cells. In this setting, it is important to emphasize that, today, Brazil holds the required intellectual and physical technology to become a large global center in the development of this type of research. In addition, the uninterested and unorganized population, moved by Latinity and a deep religious bias, allows the ethical and moral discussion to remain only among the elite, and thus the information is limited and restrictive.

Was the population, at any moment, informed that the internal cell mass of a blastocyst is only a group of 64 to 100 agglomerated cells? And that it is not a baby with a body structure, physiognomy, personality – rather, it is a pre-embryo? And that it will never have a womb to develop in? And that therapeutic cloning does not mean it is possible to create copies of individuals (reproductive), but it is possible for cells, tissues and organs? In the 1980s, England started a discussion in order to define its laws about the theme. Over the years, the country allowed the use of embryonic cells, considering that until the 14th day, i.e., before the primitive nervous system appears, there is no embryo, but a pre-embryo, that can be manipulated. Despite the efforts of a few, who strove for this achievement in Brazil, the 2005 Biosafety Law represents a restricted advancement, which is in agreement with the modest support and research initiatives for any development in this area. As of 2008, however, they have become more incisive. Over this period, emphasis should be placed on the role that the media had in broadcasting each achievement, regarding the use of adult, umbilical cord, or embryonic stem cells. In spite of the acknowledgement of the small, but excellent work that has been done here, apparently appreciated by the population, the scene sometimes does not clarify that the tests of therapeutic trials still have steps, often large ones, to take before achieving well-established treatments, which are well managed, approved, and accessible to the population. Instead of fearing that names like therapeutic cloning, gene therapy, embryonic stem cells can be considered entities that violate human integrity and values, the population should be alert and active, experiencing the well-established and morally accepted reality, which favors millions of people: that of organ transplants.

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