

What You Need to Know About Aborted Fetal Ingredients and COVID Vaccines



If you're planning to request an exemption to COVID vaccines on religious grounds, arguably your biggest supporting argument will be that all three manufacturers of U.S. authorized vaccines use cell lines obtained from aborted babies in the research, development and/or manufacturing of their products.

To this, you will state you have a "[sincerely held religious belief](#)" that prevents you from injecting the cells, tissue, DNA and proteins of an aborted baby into your body, an objection to the practice of abortion itself and anything derived from it, and/or an objection to participating in a practice that undoubtedly encourages more abortions – something your faith, whatever that may be, prohibits.

The story should end there, as it doesn't matter what belief any other [entity, denomination or religious leader](#) holds on the issue – what matters are your own subjective beliefs.

However, that won't keep you from being subjected to a barrage of misinformation designed to undermine the severity of the aborted fetal issue or your right to obtain a religious exemption.

You may have been told none of the COVID vaccines contain aborted fetal ingredients, that it was just "one abortion" from a very long time ago if it does or it was so far removed from the original abortion it couldn't possibly be associated with any religious or ethical issues. Why? Because there's a concerted effort to undermine the grounds for the religious exemption so that more people are vaccinated.

Yet, all three COVID vaccines currently authorized by the U.S. Food and Drug Administration (FDA) for emergency use have [used aborted fetuses](#) for the research, development or manufacturing of their COVID vaccines. In addition, any vaccine that uses aborted fetal cell lines during manufacturing, like the Johnson & Johnson (J&J) vaccine, [may also contain](#) residual cells, DNA or proteins from an aborted baby.

Johnson & Johnson's COVID vaccine and the PER.C6 cell line

On April 1, 2021, Reuters [published an article](#) entitled, "Fact check-Johnson & Johnson's COVID-19 vaccine does not contain aborted fetal cells." The article purported to tell readers J&J's "vaccine used lab-replicated fetal cells (known as fetal cell lines) during its production process," but does not itself contain any fetal cells.

It then listed the ingredients found in the J&J shot and linked to the FDA's "[Fact Sheet for Recipients and Caregivers](#)," which states:

"The ingredients of the Janssen COVID-19 vaccine can be seen in a fact sheet by the Food and Drug Administration (FDA)

[here](#). These are: recombinant, replication-incompetent adenovirus type 26 expressing the SARS-CoV-2 spike protein, citric acid monohydrate, trisodium citrate dihydrate, ethanol, 2-hydroxypropyl- β -cyclodextrin (HBCD), polysorbate-80, sodium chloride.”

While it’s true the FDA’s fact sheet for recipients excludes aborted fetal ingredients, it’s not true that J&J’s vaccine, developed in conjunction with [Janssen Research & Development, Inc.](#) (a subsidiary owned by J&J) does not contain cells, DNA or proteins from an aborted fetus.

The FDA concealed this information from their fact sheet for “recipients,” and Reuters either intentionally misled the public or failed to adequately fact-check their facts.

According to the FDA’s [EUA fact sheet for Healthcare Providers](#) – who are responsible for providing [informed consent](#) to their patients – the “Ad26 vector expressing the SARS-CoV-2 S protein in J&J’s vaccine is grown in PER.C6 TetR cells.”

According to [Janssen’s website](#), “The SARS-CoV-2 vaccine research program is leveraging Janssen’s AdVac® and PER.C6® technologies in an effort to help combat the current COVID-19 pandemic.” The FDA’s EUA fact sheet for Healthcare Providers and the [Janssen COVID-19 Vaccine EUA Letter of Authorization](#) issued by the agency further state:

Each 0.5 mL dose of Janssen COVID-19 Vaccine is formulated to contain 5×10^{10} virus particles (VP) and the following inactive ingredients: citric acid monohydrate (0.14 mg), trisodium citrate dihydrate (2.02 mg), ethanol (2.04 mg), 2-hydroxypropyl- β -cyclodextrin (HBCD) (25.50 mg), polysorbate-80 (0.16 mg), sodium chloride (2.19 mg). Each dose may also contain residual amounts of host cell proteins (≤ 0.15 mcg) and/or host cell DNA (≤ 3 ng).

The “host cell proteins” and/or “host cell DNA” is referring to the PER.C6 cell line used to [culture the AD26 vector](#), and the language used is consistent with the [vaccine package inserts](#) for other vaccines that contain aborted fetal cells, DNA and proteins.

The PER.C6 [tumorigenic cell line](#) came from the retinal cells of a [healthy 18 week-old fetus](#) aborted for social reasons in 1985. In addition to the PER.C6 cell line, J&J used the [MRC-5 aborted fetal cell](#) line in testing. The [MRC-5 cell line](#) was developed in Sept. 1966 from lung tissue taken from an aborted fetus at 14-weeks gestation.

A [transcript of a meeting](#) held May 2001 by the FDA Vaccines and Related Biological Products Advisory Committee (VRBPAC) contains a discussion of the origins of both the PER.C6 – used in J&J’s vaccine – and the HEK 293 fetal cell line used for research and development of mRNA vaccines, Pfizer and Moderna.

In this document, which has since been removed from the [FDA’s website](#), [Dr. Alex Van der Eb](#), a Dutch molecular biologist and virologist, is quoted:

“So I isolated retina from a fetus, from a healthy fetus as far as could be seen, of 18 weeks old. There was nothing special with a family history or the pregnancy was completely normal up to the 18 weeks, and it turned out to be a socially indicated abortus – abortus provocatus, and that was simply because the woman wanted to get rid of the fetus.”

Van der Eb said the father was unknown, which was the reason why the abortion was requested. He explained:

“There was permission, et cetera, and that was, however, was in 1985, ten years before this. This shows that the cells were isolated in October, 1985, Laeiden University in my lab. At that time already ’85, I should say the cells were frozen,

stored in liquid nitrogen, and in 1995 one of these was thawed for the generation of the PER.C6 cells.

“And this is the final slide just showing you some comparisons between [HEK] 293 and PER.C6. Again, I remind you that both cell lines were made in my lab for different reasons. The objective, as I indicated, is for 293 – was basic research, and we have done many different transformation studies after that, not transformation studies, but gene expressions studies with human embryonic kidney cells in the years following that up to now, I would say.

According to Van der Eb, the PER.C6 cell line was made specifically for pharmaceutical manufacturing of adenovirus vectors. “I realize that this sounds a bit commercial, but PER. C6 were made for that particular purpose,” he said.

Pfizer’s COVID vaccine and the HEK 293 cell line

In a paper [published](#) September 2020 detailing the Pfizer/BioNTech vaccine’s development, Pfizer and BioNTech scientists said their COVID vaccine had been tested using the HEK 293 aborted fetal cell line.

“HEK” stands for “human embryonic kidney, and “293” is the number of aborted fetal experiments that took place prior to [establishing the cell line](#).

[Researchers explained](#) they used HEK 293 in a neutralization assay to detect the presence of antibodies – a test to make sure the vaccine worked as it should – and they transfected HEK 293 cells to test expression.

A [U.S. patent](#) describes how Pfizer and BioNTech made RNA

molecules encoding fusion proteins (like the spike protein) using a variety of cell lines, including HEK 293, and tested them in development.

During a [VRBPAC meeting](#), Van der Eb stated:

“The 293 cell was made by Frank Graham in 1973 from human embryonic kidney cells that were made from fetal tissue one year ago by myself one year before that, so that was in 19 – probably in 1972, whereas the PER.C6 cell was made by Ron Bout and Frits Fallaux in 1995 from embryonic retina cultures that were made from fetal tissue by me ten years before that, in 1985.”

Van der Eb went on to explain the origin of HEK 293:

□□*“So the Kidney material, the fetal kidney material was as follows. The kidney of the fetus was, with an unknown family history, was obtained in 1972 probably. The precise date is not known anymore.*

The fetus, as far as I can remember was completely normal. Nothing was wrong. The reasons for the abortion were unknown to me. I probably knew it at the time, but it got lost, all this information.”

Van der Eb said after the abortion was performed the kidneys were isolated from the fetus, and kidney cells were isolated from the kidneys.

To isolate kidney cells, “the surrounding membranes were removed as completely as possible, and the kidneys were then minced with scissors, trypsinized, and the cells that were recovered after removing the trypsin were cultured in medium containing bovine serum, calf serum,” Van der Eb explained. “That is what we know.”

Van der Eb said multiple experiments took place in the “same general area at the time” with “other human cell cultures,” and numerous experiments occurred before establishing the 293 cell line.

“We also tried human diploid skin fibroblasts for transformation, never any positive result,” Van der Eb said. “We also have tried human embryonic lung cells.”

According to Dr. Alan Wong, M.D., author of “[The Ethics of HEK-293](#),” to develop a cell line using tissue from an aborted fetus, the agent “must arrange for the tissue to be taken from the dead fetus (assuming that the one doing so is sure that the fetus is already dead) and be delivered to him, or obtain the tissue himself.”

“Furthermore, there is the issue of obtaining consent for use of fetal tissue, which is usually done before the abortion is performed, given that the tissue is best worked on while it is fairly “fresh,” and that it may not be appropriate to obtain consent after the abortion because of the potential emotional stress of the mother,” Wong wrote.

According to [Dr. C. Ward Kischer, Ph.D.](#), a leading authority on human embryology, the abortion must be pre-arranged in order to have researchers available to immediately preserve the tissue. “In order to sustain 95% of the cells, the live tissue would need to be preserved within 5 minutes of the abortion,” stated Dr. Kischer.

According to Antonio G. Spagnolo, author of “[Fetal Tissue Transplants and Abortion](#),” “The need for fetal tissue to be in an excellent state of preservation and fully viable would imply that at the time of removal the fetus would have to be in a viable state.”

Project Veritas releases video on Pfizer and HEK 293 aborted fetal cell line

On Oct. 6, 2021, Project Veritas [released the fifth video](#) in its COVID vaccine investigative series featuring an interview with Melissa Strickler, a Manufacturing Quality Auditor with Pfizer. Strickler leaked internal emails showing corporate executives telling staff to be secretive about the use of human fetal tissue in laboratory testing of the COVID vaccine.

Vanessa Gelman, Pfizer Senior Director of Worldwide Research said in a leaked email:

“From the perspective of corporate affairs, we want to avoid having the information on fetal cells floating out there. [...] The risk of communicating this right now outweighs any potential benefit we could see, particularly with general members of the public who may take this information and use it in ways we may not want out there. We have not received any questions from policymakers or media on this issue in the last few weeks, so we want to avoid raising this if possible.”

“We have been trying as much as possible to not mention the fetal cell lines. [...] **One or more cell lines with an origin that can be traced back to human fetal tissue has** been used in laboratory tests associated with the vaccine program,” Gelman said.

When Gelman was asked by a colleague how he should respond to a medical group who specifically asked whether Pfizer made “use of a cell line from an aborted fetus” when carrying out confirmatory tests for their vaccine, Gelman said the colleague should say:

“Human fetal derived cell lines are not used to produce our investigational vaccine, which consists of synthetic and enzymatically produced components,” but should not disclose that one or more cell lines with an “origin that can be traced back to human fetal tissue” were used in laboratory tests associated with the vaccine program.

Moderna’s COVID vaccine and HEK 293

According to [Science](#), aborted fetal cell line HEK 293 was used in the research and development of Moderna’s COVID vaccine but was not used in manufacturing.

In an article published in Science on March 13, 2020, [researchers explained](#) they used HEK 293 cells as a medium to express the 2019-nCoV spike protein.

In a [preliminary report](#) from July 2020, researchers said in the [supplementary appendix](#) that ACE-2-overexpressing 293T cells were used in a [neutralization assay](#) to detect the presence of antibodies.

In an Aug. 2020 [preclinical trial report](#) published in Nature journal, researchers transfected HEK 293 cells to test expression – [adding the vaccine](#) in each step of development to the aborted fetal cells to see if they produced the protein as expected.

Many abortions take place to procure a cell line

Cell lines [derived from aborted fetal tissue](#) have been fairly commonplace in research and medicine since the creation in the 1960s of the [WI-38 cell strain](#), which was derived at the Wistar Institute in Philadelphia, Pennsylvania, and MRC-5, which came from a Medical Research Council laboratory in London.

[IMR-90](#) came from a 16-week old aborted female and can be purchased online for \$476 a sample. [IMR-91](#) came from a male aborted baby.

Viruses multiply readily in these cells, and they are used to manufacture many vaccines, including measles, rubella, rabies, chickenpox, [shingles](#), adenovirus, polio, HIV, tuberculosis, malaria and hepatitis A.

□□In the U.S., tissue is [collected at medical centers](#) and clinics that perform abortions under a patchwork of laws and regulations governing consent, tissue collection and transfer (see '[Fetal tissue and the law](#)'). From the clinics, fetal tissue is then passed to biological-research supply companies, which act as intermediaries and process the tissue before selling it to researchers.

Many abortions are performed in an effort to obtain the ideal cell line for a vaccine, and research is performed every day on [fresh human fetal tissue](#) – much of it funded by the National Institutes of Health (NIH).

It is estimated that eighty elective abortions were involved in the research and final production of the current rubella vaccine – 21 from the original WI-1 through [WI-26](#) fetal cell lines that failed, plus WI-38 itself, plus 67 from the attempts to isolate the rubella virus.

Two hundred ninety-three [experiments occurred](#) before successfully procuring the HEK-293 cell line.

[Walvax-2](#) was created to replace the “immortal” MRC-5 aborted fetal cell line, currently used in COVID vaccine testing. At least nine babies were used in the process of obtaining the established cell line.

In 2014, the [NIH funded 164 projects](#) using aborted fetal tissue, at a cost of \$76 million. An analysis of NIH projects showed the tissue was used most heavily for research on

infectious diseases (52%).

Humanized mice and COVID vaccine research

Every month, Lishan Su [receives a small test tube](#) on ice from a company in California with a piece of liver from a human fetus aborted at between 14 and 19 weeks of pregnancy. The cost is \$830 per sample.

Su and his staff at the University of North Carolina at Chapel Hill “carefully grind the liver, centrifuge it and then extract and purify liver- and blood-forming stem cells. They inject the cells into the livers of newborn mice, and allow those mice to mature.” The resulting animals are the only ‘humanized’ mice with both functioning human liver and immune cells.

Aborted fetal tissue is used to create humanized mice, which are the type of mice [used in COVID vaccine research](#). According to [Kent Scientific Corporation](#) (KSC), conventional mice don’t naturally become infected with COVID, so they can’t be used as models for studying how the disease works or efforts to find a cure.

“Researchers working to find a vaccine or treatment for COVID-19 desperately needed a humanized mouse model, but **not just any humanized mouse**. In order to be effective as a model for COVID-19, researchers needed mice that produce a human version of the protein ACE2, which the SARS-CoV-2 virus attaches to in order to gain entrance to cells,” [KSC’s website states](#).

An article published Oct. 15 in [Virus Research](#) stated, “[...] Animal models must show a similar course of the disease as in human beings. However, the standard inbred strains of mice are not susceptible to the COVID-19 infection, due to the

difference between the humans and mice ACE2 receptors. This calls for the development of transgenic mice, expressing the hACE2 receptor.”

The article went on to state, that two animal models have been developed for SARS-CoV – hACE2 transgenic mice and primate macaques.

[Moderna](#) and [Pfizer](#) used humanized mice in the research and development of their COVID vaccines. [Johnson & Johnson](#) used Siberian hamsters and rhesus macaques. It is unknown whether these animals were humanized.