

New Evidence for Infanticide in the Creation of the Fetal Cell Line Used for COVID Vaccine Testing

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“To obtain embryo cells, embryos from spontaneous abortions cannot be used, nor can those obtained by means of abortions performed via the vagina: in both cases, the embryo will be contaminated by micro-organisms.”

“The correct way consists in having recourse to Caesarian section or to the removal of the uterus. Only in this way can bacteriological sterility be guaranteed.”

“In either case, then, to obtain embryo cells for culture a programmed abortion must be adopted, choosing the age of the embryo and dissecting it while still alive, in order to remove tissues to be placed in culture media.”

“Given these premises, we face the dilemma of whether the deliberate systematic destruction of a human creature to obtain cell material can be justified, when it is recognized that this is of great interest to fundamental research and for the diagnosis of some human diseases. Are research and diagnosis of such great value that they justify the destruction of human beings?”

“The Geneva Declaration affirms that the doctor has the duty to take the greatest care to safeguard the life of a human being from its conception and will not, even under threat, use his knowledge to infringe humanitarian laws.” (1986-04-26; Herranz, Gonzalo; Il Sabato, no.15...Professor Herranz was, at the time, president of the Committee of Medical Ethics of Spanish Doctors and vice-president of the Permanent Committee of Medical Ethics of the European Community.)

What exactly happened in 1972 or 1973, in the Netherlands, where an infant girl was aborted, and her kidneys used to make a cell line that would be used, going forward, in the testing of vaccines?

That cell line is called HEK 293 (HEK stands for human embryonic kidney), and it has been used to test COVID vaccines.

I have already presented evidence for concluding the abortion involved removing the living infant from her mother's womb, and taking her kidneys, which of course killed her.

This evidence rests on the realization that, in order to extract viable and useful kidney tissue, the baby had to have a functioning blood supply, which meant she was alive.

But the evidence ALSO comes from knowing many other abortions have been carried out, in order to harvest tissue for medical research, by murdering living babies.

I have found a very informative article (2/9/2021) at the Centre for Bio-Ethical Reform UK, by Christian Hacking, titled, "[What the HEK?!](#)" by Christian Hacking. Quoting from the article:

"HEK 293 is a human cell line created using a kidney from a dissected unborn baby in the Netherlands between 1972 and 1973. It is the second most common cell line and is used extensively in 'pharmaceutical and biomedical research'. It is also used in vaccine creation and cancer research."

"It was used, along with other human cell lines, to develop a genetically engineered spike protein (that the mRNA vaccine codes for) in the original development stage of the vaccine. The 'new technology' Pfizer vaccine and the Moderna Vaccine were tested on HEK 293 before they began human trials. This testing is ongoing for all new batches. Finally the 'old technology' Oxford AstraZeneca vaccine grew a weakened viral strain in HEK 293 cell culture..."

"The kidney in question was dissected from a healthy Dutch baby girl of unknown origin by the team at Leiden University in the Netherlands in 1972. Despite the inclusion of the term 'embryonic' in the title, the baby in question was probably 12-13 weeks old when she was killed so as to secure functioning kidney cells. The man in charge of the research was named [Alex Jan Van der Eb](#); he is still alive and still based in Holland."

"When questioned on the matter by the FDA in 2001, Dr Van der Eb confirmed it was an intentional abortion of a 'fetus' but gave hazy details of the exact experiments."

"So the kidney material, the fetal kidney material was as follows: the kidney of the fetus was, with an unknown family history, 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 that time, but it got lost, all this information'."

Author Hacking continues:

"...extracting and growing living cells is incredibly difficult. In order to give oneself the best chance of success you need to ensure the child is healthy, fresh, intact and sterile. As one embryologist and Emeritus Professor of Anatomy confirms:"

"In order to sustain 95% of the cells, the live tissue would need to be preserved within 5 minutes of the abortion. Within an hour the cells would continue to deteriorate, rendering the specimens useless'."

[That statement was made by "Dr C Ward Kischer, embryologist and Emeritus Professor of Anatomy; specialist in Human Embryology, University of Arizona College of Medicine..."]

[My comment: This suggests the abortion, in the Netherlands, in 1972, was planned and technicians were standing by. I would say that, to ensure the viability of the tissue, the infant had a functioning blood supply and was alive when her kidneys were removed, killing her.]

Hacking:

“In order for the organs to be at ‘optimal viability’, the child needs to be dissected and organs extracted within 5 minutes of delivery. Anaesthetic also cannot be used so as to not change the cellular activity of the organs the researcher wants to obtain.”

“Acclaimed Doctor, [Ian Donald](#), the pioneer of the ultrasound scanner, also claims to have witnessed the WI-38 [another cell-line] dissections [1962], conducted at the Karolinska Institute; he described them such:

“‘Experiments were being performed on near-term alive aborted babies who were not even afforded the mercy of anesthetic as they writhed and cried in agony, and when their usefulness had expired, they were executed and discarded as garbage’.”

“In his dense book *‘The Foetus As Transplant Donor the Scientific, Social, and Ethical Perspectives’*, immunologist Dr Peter McCullagh relays detailed descriptions of the methods used on dozens of ‘fetal tissue donors’ from the 1970’s onward, including the deaths of babies between 7 and 26 weeks gestation by decapitations, exposure, dissection and drug testing. Gynaecologist and ex-abortionist Dr Bernard Nathanson, relaying his own understanding of abortion, and citing McCullagh’s book claims the Swedish experiments took place thus:

“‘...in Sweden they have been puncturing the sac of a pregnant woman at let us say 14 to 16 weeks, and then they put a clamp on the head of the baby, pull the head down into the neck of the womb, drill a hole into the baby’s head, and then put a suction machine into the brain and suck out the brain cells..... Healthy human fetuses from 7 to 21 weeks from legal abortions were used. This is in Sweden. The conception age was estimated from crown rump length and so on. Fetal liver and kidney were rapidly removed and weighed. Now at 21 weeks, what they were doing, or 18 weeks, or 16 weeks, was what is called prostaglandin abortions. They would inject a substance into the womb. The woman would then go into mini-labor and pass this baby. 50% of the time, the baby would be born alive, but that didn’t stop them. They would just simply open up the abdomen of the baby with no anesthesia, and take out the liver and kidneys, etc.’”

“A research paper from the University of Toronto from June 1952 commenting on the method of their experiments suggests that these techniques were universal with researchers working in close proximity to the abortions.”

“‘No macerated [softened after death] specimens were used and in many of the embryos the heart was still beating at the time of receipt in the virus laboratory.’”

“According to Gonzalo Herranz, former head of the Committee of Medical Ethics of Spanish doctors, the best way to prevent ‘contamination by microorganisms’ is to deliver the child by caesarean section or the removal of the uterus.”

“A 1982 review of a history of tissue donation affirms this, and much of the above

evidence:”

“Fetal tissue for transplantation must be “harvested” within a few minutes of delivery. Ideally this is by hysterectomy, with the fetus delivered in utero. Drugs which reduce fetal physiological activity need to be avoided. The fetus is therefore in as alive and aware a state as possible when being opened’.”

From Hacking’s article, it’s quite clear how the standard procedure of infant-murder is carried out.

It’s entirely reasonable to assume fetal cell line HEK 293—used for COVID vaccine testing—was originally produced, in 1972, by the murder of an infant. Refusal to take a COVID vaccine on the basis of conscience and religion is more than justified.

Given the weight of the circumstantial case, I would say that for all people of faith, refusal is essential.

Lunatic medical murderers and their allies will say anything to avoid blame and the application of true justice to themselves. They will invent “science” at the drop of a hat and couch it in humanitarian terms. They will claim the ends justify the means. They will commit gross forgery to pretend those ends are vital.

But we don’t have to stand by and passively believe them.

Billions of people of faith can stand against them.

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