

which would be better than what we have. With 54 different Senators listed as cosponsors, that says to me a majority of this Senate wants to do something and do it now. All of the budget proposals floating around out there include money for a prescription drug benefit.

Both parties made this promise to our elderly in the 2000 election. So why are we waiting? How much longer must we wait? How long are we going to continue to play this nonproductive, partisan, never ending ping-pong game of retribution and payback that takes up so much valuable time and, frankly, makes us all look silly and petty? How long will we keep using the antiquated rules that slow down everything to a crippled snail's pace, that on a regular basis thwarts the clear will of the majority of this body and instead substitutes the tyranny of a minority? We should stop this dilatory dillydallying and put up a sign around here that says "No Loitering."

We should cut down on some of this Presidential candidate posturing. I know you cannot do away with all of it, of course. But you want to be a contender? Quit preaching and preening and produce. You want the well off to show you the money? Show the net so well off a prescription drug benefit.

To do that, you will have to say no to some of those high-priced political strategists, those consultants who couldn't get elected dogcatcher themselves, whose advice is always the same: Have an issue, not a result. Never compromise, never accept a half of loaf of anything.

Remember FDR once said:

Try something. If it doesn't work, try something else. But for God's sake, try something.

That is what I am trying to say. I want Hoyle and all those millions like him in the land of plenty who have played by the rules and worked hard all of their lives to have some peace and hope in the twilight days of their last years.

If this so-called center of democracy keeps piddling and procrastinating and postponing this issue, I hope the American people will rise up as did those fans at that football game in Cleveland and run both teams off the field.

The PRESIDING OFFICER. Under the previous order, the Senator from Tennessee is recognized.

ORDER OF PROCEDURE

Mr. WYDEN. For the purpose of a unanimous consent request, I ask to be recognized after the Senator from Tennessee.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. WYDEN. I appreciate the graciousness of the Senator from Tennessee, and I ask unanimous consent that at this time morning business be extended for 10 minutes so at the conclusion of the remarks of the Senator from Tennessee I can speak as if in morning business for up to 10 minutes.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from Tennessee.

HUMAN CLONING

Mr. FRIST. Mr. President, in the coming weeks the Senate will consider legislation to prohibit human cloning. In advance of that important debate, which will center upon this intersection of values, of ethics as it crosses with science, many have begun studying in a very careful way this complex issue.

A number of colleagues have come forward and asked me, personally, about this issue, in part because of my medical background, but also in large part because they know I am a strong advocate for and a strong supporter of stem cell research, as long as that stem cell research is conducted within a framework of a comprehensive, ethical, and moral oversight system.

The question I hear most is the following: Can one truly be an advocate for stem cell research and, at the same time, oppose human cloning experimentation? After an in-depth study of this issue from a policy standpoint, from the standpoint of being a Senator and looking at that legislation as a science, from a medical standpoint, I believe the answer to this question is yes.

Until now, the overall human cloning debate has been presented almost as an absolute choice between, on the one hand, medical science and the hope for cures and, on the other, ethical restraint.

This is an oversimplification that does not do justice to the clinical, scientific, philosophical, moral, ethical, and spiritual complexities underlying this discussion. I am glad to see that a number of my colleagues and people around the country have not locked into this false choice, but rather have stayed back to examine these in our deliberations.

After carefully considering all of the evidence brought forward in hearings and on the floor in support of human embryo research cloning experimentation, after considering the medical progress being made and that will be made through stem cell research, and after considering the overwhelming ethical concerns about human embryo cloning experimentation, I conclude that a comprehensive ban on all human cloning is the right policy at this time. I intend to support legislation consistent with this policy, and I will encourage my colleagues to do likewise.

As we move forward, one must understand the fundamental fact that I hope plays out over the next several days and weeks in the discussion. It is important; that is, embryonic stem cell research and human embryo cloning research are not the same thing. Human embryo research cloning—called therapeutic or research embryo cloning—is an experimental technique often confused with but distinct from stem cell

research. The promise of stem cell research, for Parkinson's disease, Alzheimer's disease, diabetes, spinal cord injuries, autoimmune disorders, cardiovascular disease—the promise of stem cell research and the science can and will progress with a ban on human cloning embryo experimentation.

Most serious observers—I don't want to say all—agree that human reproductive cloning should be banned, must be banned. Indeed the legislation that will come to this floor will ban reproductive cloning. It is dangerous and it is unethical.

The question this body will be debating is whether or not this ban on human reproductive cloning should extend to all human embryo cloning. The issue is not cloning of DNA, that is going to continue no matter what; not cloning of molecules, that is going to continue; not cloning of cells other than cells that become or are an embryo, that is going to continue. That is not yet fully understood and, in truth, we have not debated the legislation on this floor. But that will become apparent.

The House of Representatives has already overwhelmingly passed strong bipartisan legislation comprehensively banning human embryo research cloning experimentation and reproductive cloning. Now is the time for the Senate to do so.

Those who favor human research cloning experiments often point to its potential to develop tissues that will not be rejected. In fact, on the next chart—which I will not deal with today, but will come back to—are the arguments, the overall claims that human research cloning, or human cloning research is necessary to prevent immune rejection and is necessary for other reasons.

As a heart transplant surgeon, one who spent many years of my life transplanting hearts, this immune phenomenon is something I will come back to the floor and talk about because it is very important for us to address. Advocates for human embryo research cloning and so-called therapeutic embryonic cloning experiments say it will increase the number of embryonic stem cells. We will talk about that. They say it will further basic biological knowledge. Again, we will come back and talk about that as the debate proceeds.

There are facts that will need to be presented. But moving away from the scientific standpoint, if you look at the overall ethical and moral concern, it is this: Regardless of our religious background, most of us—maybe I should say many, but I believe most of us—are extremely uncomfortable today with the idea of creating cloned human embryos, doing an experiment on them, and destroying the human embryo. That is the state of the science. That is the state of the art.

If one supports human research or therapeutic cloning, given where we are today—our understanding of science—you are in support of purposefully creating an embryo, of removing