



ND RIGHT TO LIFE ASSOCIATION • P.O. BOX 551 • BISMARCK, ND 58502 • 701-258-3811 • 1-800-247-0343 • www.ndrl.org

Protecting Life . . . Today and Tomorrow

On October 8, 2005, the North Dakota Right to Life Association held its 28th Annual Educational Conference in Bismarck. Our guest speaker, Brian Johnston, author of the book "Death As A Salesman, What's Wrong with Assisted Suicide" gave two great workshops. In Brian's workshop on Assisted Suicide he talked about; "Physician Assisted Suicide is not a natural act. It is not letting people go, not letting nature take its course, it is not any of the above. It is not designed for people who are dying, it is designed for people who aren't dying, it is for people who are biologically tenacious. It's about causing death. The good news is that the more someone knows about the details, the actual details of physician assisted suicide, the less likely they are to support it."



Brian Johnston

"When looking for a hospice, some of the things to look for are; hospice is like a democracy, it is not medical abandonment....there is an attending physician....including sustenance (food and water). A good hospice views the patient and the family members, the circle of people around the patient, as the target of care."

We would like to invite all of you to check out Brian's book "Death As A Salesman, What's Wrong with Assisted Suicide" and the video of the conference. Just call the office and we will send them to you.

Bruce Levi, Executive Director and General Counsel of the North Dakota Medical Association, gave a very interesting and informative workshop on North Dakota's Health Care Directive. Included in this workshop were the interesting topics of 'Advance Care Planning,' 'Patient Self Determination Act' and 'Advance Care Planning-Why is it Important to YOU?' 1. Who will speak for you when you can't speak for yourself? 2. Talking about our wishes is not just for "older" people - and is not just end-of-life situations. 3. Without a health care directive, state law decides who makes decisions for you when you can't make or communicate decisions for yourself.

John Hougen, Director of Public Assistance for the Department of Human Services gave an interesting workshop on the new Alternatives to Abortion Services Program that was introduced and passed in the last legislative

session. This workshop consisted of telling how the legislative interim committee is working on the details of the program and getting everything established.

Linda Jaeger, Child Welfare Supervisor at Catholic Charities North Dakota, gave an excellent workshop on Crisis Pregnancies. Linda talked about cases that she has handled and the events that led up to the women who she has helped. She stated that the women continue to keep in contact with the agency even years after they have been helped with an adoption or the raising of their children.

Essay Contest: Two of the essay contest winners read their essays. They were Shane R. of Bismarck who was the winner in the age group of 13 and over, and Allison K. of Bismarck who was the winner in the age group of 9 to 12. They both wrote excellent essays and these essays can be read on page 2 of this newsletter.

The North Dakota Teens for Life Association also held their annual conference. Although there was a smaller group this year a lot was learned. The Teens really enjoyed the talks given by Brian Johnston and Rebecca Lengenfelder. We have a new slate of officers this year and hope to be active across the state.



*We wish you a
Happy Thanksgiving
and may you have a
Happy Holiday
and New Year!*

ND Right to Life and Staff



ESSAY CONTEST WINNERS

The Strength of YOUTH

- Allison K. -

“Why did you commit abortion? I could have been the greatest joy in your life - or even someone else’s joy. You didn’t have to kill me!”

“Instead of just staring at me, like I am some sort of freak, why won’t you just help me? I am just like the lot’a you.”

“I am growing old. I can’t do things for myself anymore. Put me in a nursing home, honey, or take me into your house. Or at least help me to cross the street.”

If an aborted baby could talk, or a disabled person would express his or her feelings, or even if an elderly person would talk to their family about what they feel, this is what might be said.

The un-born, disabled, and elderly are human beings, whether we never see them, see them differently than ourselves, or just don’t care to see them at all. They, every last one of them, deserve respect. The un-born can be respected by choosing life. Simply allowing these children to be born gives them a chance. We all have a responsibility in taking care of this mater. We are responsible for their development and birth. Giving your child up for adoption at least gives them a chance for a good life. But killing them is just plain wrong.

People with disabilities come first. They have needs, opinions, and feelings. Even though their disability causes them to walk differently, talk differently or not at all, or require special medical attention just to stay alive, they are here for a purpose even though we may not be able to understand it. They need to be shown respect.

The elderly are the grandmas, grandpas, great grandmas, and great grandpas of this world. It is because of them that we are here today. They hold wisdom, experience, and knowledge in their hearts and minds. Some members of our society look at them as unnecessary, as baggage without value. They deserve our utmost respect.

Everyone deserves respect. No one should have to earn it in any way whatsoever. The born, able-bodied, and young are not better than the un-born, disabled, or elderly. We, the young people of this nation, are the ones who can make a difference if we just believe that the un-born, disabled, and elderly have value and deserve respect. But it is up to each of us to decide what to do about it.

Protecting the Un-Born, Elderly, and the Disabled

- Shane R. -

These words in the title have deep meaning to me. Each of these people are fully loving, and caring people made by our God. They are as equal in all ways, and should be treated with respect. All of these people are part of our society, and touch our hearts in different ways.

The disabled of our society influence me in very many ways. The way they show their strength and courage to keep on going puts me in a state of awe. But yet, everyday these people get put down and are discriminated against. That is not right, and they should be treated with respect. We can fix this by helping at the local homes, by visiting and participating in particular events, and making them feel welcome in any situation. I believe that we should all be moved with compassion and step up to help these people.

The un-born of our world touch my heart in a very deep way. It breaks my heart to know and to hear about abortion and how it happens on a regular basis. The un-born don’t even get to experience life outside of the womb. To me these babies could one day change our world and how we live, but are thoughtlessly aborted. The un-born are aborted and yet there are so many other ways around it. The mother, instead of aborting, could give their baby up for adoption to a lovely family that would bring the child up with good faith and morals. We can help by influencing others away from this awful thing and make them consider other options.

Another group that is very special to me is the elderly of our day. To me, I see this group as people full of joy. They have so much from their life within them, which makes them so beautiful in and out. Most of our elderly are in our local nursing homes. This can be good and bad in ways. It is very good that those people are taken care of in a very warm, hospitable, and caring environment. I see also the bad side of this. I see this when I look at the elderly in the nursing homes who are to say “left behind.” It seems that their families have left them, and don’t come to visit, suddenly there joy filled faces are gone. I know that I can help by going to visit them in the homes and participating in daily events. I can be there and step in to help them get over problems that they are facing, and help them feel comfortable when no family is around. I believe that everyone can help by just putting in a few hours with the elderly.

These groups of people have touched my heart in so many ways. It saddens me to see them unhappy in any way. I think we all need to STOP, and lend a helping hand.



Official publication of the North Dakota Right To Life Association. NDRL is a not-for-profit, non-partisan, non-sectarian, grass roots volunteer organization dedicated to the protection of all innocent human life from conception to natural death.

Purpose of this publication is to educate about pro-life issues. NDRL maintains a state office at 1102 S. Washington St., Suite 110 in Bismarck. Phone 701-258-3811 or 1-800-247-0343. Office hours are Monday-Friday 8:30 a.m. to 4:30 p.m. Write NDRL at PO Box 551, Bismarck, ND 58502-0551 or fax us at 701-224-1963, email: ndr1@btinet.net.

Tiniest Baby Turns One Year Old

Rumaisa Rahman, the smallest known surviving baby, celebrated her first birthday September 19, along with her bigger twin sister in the suburban Chicago hospital where she was born. Rumaisa weighed only 8.6 ounces when she and her sister Hiba were delivered in an emergency Caesarean section at only 26 weeks, the *Associated Press* (AP) reported.

Rumaisa now weighs 13 pounds and is 24 inches tall, according to the AP. Hiba, who weighed 1 pound, 4 ounces at birth, is now 17 pounds and 26 inches tall.

“I feel very optimistic that I don’t think that either of them will have any significant handicaps,” Dr. Jonathan Muraskas of Loyola University Medical Center told the AP.

Rumaisa has received a place in the Guinness Book of World Records as the lightest birth in the world, the *Chicago Daily Herald* reported. Loyola University Medical Center also delivered the previous record holder, Madeline Mann, who weighed 9.9 ounces when she was born in 1989.

The twins’ parents said they are both doing well, and are growing and acting normally. “They both are doing great,” their father Mohammad Abdul Rahman told the *CBS Early Show*. “They are ruling the world. They love to play with each other’s feet, you know, they start imitating, you know. When you do something to them, they do it back to you.”

“If you have faith in God, everything is going to be OK,” he told the AP.

Preventing Use of Federally Controlled Drugs to Assist Suicide Doesn’t Violate States’ Rights.

The federal government and the states both have authority (concurrent jurisdiction) over dangerous drugs and other controlled substances. In any given state, a use of a drug might be:

- 1) against both federal *and* state law
- 2) against neither federal *nor* state law
- 3) against state *but not* federal law
- 4) against federal *but not* state law

If the Supreme Court upholds the Bush Administration policy, Case (4) will apply in Oregon to the use of federally controlled drugs to assist suicide.

It does not violate federal authority for a state to prohibit something federal law does not permit; it happens all the time (for example, laws against robbery or violations of zoning ordinances).

In the same way, it does not violate state authority for federal law to prohibit something state law does not prohibit, for example, evasion of federal taxes, or racial discrimination in public accommodations as specified in the Civil Rights Act of 1964.

Under the Bush Administration’s directive, use of federally controlled drugs to assist **suicide** in Oregon simply violates federal law without violating state law. A Supreme Court ruling upholding it would not validate, supersede, or pre-empt Oregon’s law. **It would simply be the case that federally controlled drugs could no longer be used to facilitate assisting suicide in Oregon.**

In 1984, Congress amended the Controlled Substances Act (CSA) *specifically* to authorize the Justice Department to revoke doctors’ registrations to prescribe federally controlled drugs when the doctors *did not* violate the state law. As the Senate Report on the amendments explained, the amendments were deemed necessary because, under the then-current CSA, “the Attorney General must presently grant a practitioner’s registration application unless his State license has been revoked or he has been convicted of a felony drug offense, even though such action may clearly be contrary to the public interest.”¹

This federal authority fulfills the stated intent of Congress that, for the purpose of ensuring that and **international treaty** on the control of psychotropic substances be appropriately applied through the CSA, the scope of “ethical medical practice” be determined “on the basis of a consensus of views of the American medical and scientific community”—not on the basis of standards that vary from state to state.²

Notes

1. *S. Rep. No. 98-225, at 262 (1984)*
2. *10.21 U.S.C. 801a.(3)*

2005 CHAPTER AWARD

The North Dakota Right to Life Association presents an annual chapter award to a chapter of the Association that works hard toward the goal of the association. The 2005 Chapter Award was presented to **Greater Grand Forks Right to Life.** **Greater Grand Forks Right to Life** has been working hard to build a Culture of LIFE for many years. Some of the criteria that helps determine a winner includes: collecting memberships, attending Board Meetings, selling ads for the Educational Conference Book, having regular chapter meetings, doing community activities such as; newsletters, fair booths and letters to the editor.

Past recipients of this award include: Ramsey County Area Right to Life (1994); Griggs County Right to Life (1995 & 2002); Traill County Right to Life (1996); Fargo Right to Life (1997); Bismarck/Mandan Right to Life (1998 & 2002); Minot Right to Life (1999); New Salem/Almont Right to Life (2000); Hankinson Right to Life (2001); Nelson County Right to Life (2003) and Glen Ullin Right to Life (2004).

If you know a chapter that is deserving of this award, please call the STATE OFFICE.

Poll: Americans Think Adult Stem Cell Research Shows Better Promise

by Steven Ertelt
LifeNews.com Editor
October 24, 2005

Richmond, VA (LifeNews.com) — Some politicians and lobbyists say embryonic stem cell research holds the most promise for treating various diseases and conditions, but more Americans join scientists who say the use of adult stem cells should give patients more hope. That's according to a new poll conducted by Virginia Commonwealth University.

When asked which types of stem-cell research offered the greatest promise for discovering new treatments for disease, the greatest number of respondents (37 percent) cited specific types of adult stem cell sources such as an umbilical cord blood. Another 7 percent cited adult stem cell research in general.

While 44 percent named adult stem cells, just 14 percent said embryonic stem cell research held the greatest promise and only 7 percent said both types hold equal promise.

For pro-life groups that means the public is beginning to understand that adult stem cell research, which has produced cures or treatments for dozens of diseases and conditions, is vastly superior to embryonic stem cell research, which has yet to cure or treat any patients.

The VCU poll says most Americans are either very clear or somewhat clear on the differences between embryonic stem cells, which come from destroying human embryos, or adult stem cells, which are derived from noncontroversial sources. Some 32 percent are either not very clear or not at all clear.

The Virginia Commonwealth University poll also found 81 percent of Americans either somewhat or strongly opposed to human cloning.

However, two-thirds of those polled said they don't know the difference between reproductive and research-based human cloning. Those who were less familiar with what cloning involves were less likely to oppose human cloning.

The VCU Life Sciences Survey was conducted by telephone with 1,002 adults nationwide from Sept. 14 through Sept. 29. The margin of error for the poll is plus or minus 3 percentage points.

Protecting Life. . .

Today and tomorrow



God bless you! Fr. Frank Blessing the Grave

I recently had the privilege of blessing the grave of Terri Schindler-Schiavo, who was murdered on March 31, 2005 by dehydration. Her grave is not far from the place where she died, and where people from around the world had gathered to protest and pray.

Those who visit the gravestone, however, will notice something highly unusual. While on most graves there is an inscription of two dates - when the person was born and when he or she died - on Terri's there are three. Here's exactly what the grave says:

Born December 3, 1963

Departed this Earth February 25, 1990

At Peace March 31, 2005

The whole world knows that she died on March 31, 2005. National and global media were present at the scene for days, covering every detail. Media were present again when I preached at her funeral mass. We know when she died.

But her gravestone has become a pulpit for the euthanasia movement. Those who killed her are now using her grave as a platform for their twisted ideology. What they are trying to say is that once her brain was injured in 1990 and she was no longer functioning like most of us, she wasn't one of us anymore. She "departed this earth."

This is actually a variation on an ancient heresy, which says that we are really spirits inhabiting a body. Terri couldn't communicate normally. So, her "spirit" must have left her. The body was just a shell left behind. Those who believe she really "departed this earth" in 1990 can therefore pretend it was OK to kill her in 2005. After all, it wasn't really her. She was already gone.

This is heresy, because Christianity teaches that we are a unity of body and soul, not simply a soul "using" a body. The body matters. What we do to the body, we do to the person.

Moreover, the gravestone inscription is a deep insult to all who are disabled, and to all those who love and care for them. Should they be considered already dead, too? Are we just wasting our time caring for them? Euthanasia advocates would have us think so.

A recent news story about a disabled unborn child quoted one as saying, "There's no human life there." Isn't that the same idea? They think the baby has already "departed this earth," so they don't hesitate to abort the body.

As I blessed Terri's grave, I also prayed that God's people would be kept safe from this falsehood. And I recalled being in Terri's room the day she died. I remembered her face, dehydrated from not having had a drop of water in two weeks. I recalled seeing the flowers, inches away, on her night table. They were immersed in water. And as I left the grave, I gave a final glance to the vase of flowers that was standing by the stone.

Senate: Will Postpone Embryonic Stem Cell Research Vote Until 2006

by Steven Ertelt-LifeNews.com Editor

October 21, 2005

Washington, DC (LifeNews.com) — A leading member of the Senate who is sponsoring a bill to overturn President Bush's limits on embryonic stem cell research funding says he will agree to a proposal by Senate Majority Leader Bill Frist to put off a vote on his bill until next year.

Sen. Arlen Specter, a Pennsylvania Republican, threatened to attach his legislation to a federal spending bill that Senate leaders are having difficulty passing. However, because Frist agreed to work out a specific date on which to have a vote on this bill, Specter says he'll wait until next year to push it.

In a speech on the floor of the Senate, Specter said it would add to the difficulty of approving the spending bill if he pressured the Senate to attach his measure to it.

"It would cause a multifaceted controversy with about five different positions to be inserted," Specter said. "And the majority leader has agreed to make this a priority item at the beginning of the next session of Congress."

"The majority leader has committed to bringing it up as one of the first items next year," Specter added.

Sen. Sam Brownback, a Kansas Republican who is the leading lawmaker opposed to spending tax money on the destructive research, said delaying a vote would help him be more likely to defeat the bill.

Brownback also said new revelations about alternative types of embryonic stem cell research that may be performed without destroying human life could relieve some of the pressure lawmakers face to vote for Specter's bill.

"Science continues to move forward," Brownback said.

The House approved its version of Specter's bill in May, although without a veto proof majority. President Bush has promised to veto the bill because he doesn't want to spend any public funds on new embryonic stem cell research because it would involve the destruction of unborn children in their earliest days.

Instead, President Bush has spent more than \$400 million on research using adult stem cells, which have already provided cures and treatments for dozens of diseases and conditions.

Frist previously said he would allow a vote on the measure by the end of the year, and some advocates of embryonic stem cell research hope the vote won't be delayed. However, Frist says the Senate is busy with several other contentious issues such as hurricane relief and approving spending bills.

"The problem is, when do you get the floor time," Specter said earlier.

Whenever the bill comes up for a vote, pro-life groups plan to strongly oppose it and to urge pro-life lawmakers to engage in a filibuster to prevent its passage. They point to the fact that embryonic stem cell research has not cured any patients while the use of adult stem cells can treat dozens of diseases and conditions.

A bill to establish a national umbilical cord stem cell bank is also awaiting a vote.

A Gift for Life

The NDRL "A Living Tribute In Celebration of Life" Program

What better way to honor a family member or friend, either living or deceased, than by making a contribution in the person's name to the cause of LIFE!

Your contribution to NDRL's "A Living Tribute In Celebration of Life" Program will enable us to continue and expand our vital endeavors on behalf of defenseless human beings.

Commemorative donations can be made for occasions such as births, anniversaries, birthdays, weddings, religious holidays or memorials. An acknowledgment card will be sent to the honored person or to the family of the deceased.

Your contribution is sincerely appreciated.

A Living Tribute In Celebration of Life

OCCASION (check one) Memorial Birthday Anniversary
 New Baby Other _____

IN HONOR OF _____
Please Print

AMOUNT ENCLOSED: \$ _____

THIS DONATION IS PRESENTED BY:

Name _____

Address _____

City, State, Zip _____

SEND ACKNOWLEDGMENT TO:

Name _____

Address _____

City, State, Zip _____

Mail: NDRL, Living Tribute Program, PO Box 551, Bismarck ND 58502-0551

SUZANNE AND SANDI'S EXTRAORDINARY CHOICES

At First Choice Clinic, we are privileged to be invited into the lives of our clients...these actual client scenarios help show how First Choice plays a vital role in our community and is making a difference in many lives.

Suzanne visited our clinic one time. She came in for a pregnancy test, which was positive. This young college student was scared to tell her Christian parents of the pregnancy. She was given information on her options - including adoption resources. We were never able to reach her for continuing follow-up. This sometimes happens to clients. When in Crisis or need the client fails to reconnect and when their life stabilizes, they return! Ten months later, Suzanne contacted the clinic to let us know that she had given birth to a healthy baby and was working with an agency we referred her to and had made an adoption plan for her child. She thanked us for the "kind and good-hearted" nurses that helped her out and now wants to help other young women that find themselves in the same situation. She has offered to share the story with women who come to the Clinic for help or to speak to young people in the community about making good decisions for themselves.

Sandi came to the clinic after a first sexual experience, worried that she may be pregnant. She was in her first year of college and had been committed to saving sexual expression until marriage. After having a negative test and finding out that she was not pregnant, the nurse talked with her about sexual integrity, starting over and returning to saving sexual expression for marriage and setting boundaries in her dating relationship. Sandi was very open to the message of starting over and has checked out a variety of motivational books and videos from the clinic. Sandi has become a key volunteer for some of our educational "abstinence until marriage" events! Sandi has taken this opportunity to become stronger in her commitment to her values and is continuing on with her plan of finishing college.

So you can see, we don't use the same "cookie-cutter" approach for everyone. Every client's problems and concerns are different. We are successful because we offer a personal touch - we meet them where they are, we are honest and caring and treat them with respect and dignity. Whether our clients have a positive pregnancy test or a negative one, we tailor our services to meet their needs...always helping them on their way to a healthier life. It Works!

Year-to-date Client statistics

(Jan. 2005 - Sept. 2005):

On-site visits - 649

Pregnancy tests - 279

Positive Pregnancy tests - 133

Ultrasound Exams - 66

Earn While You Learn - 204

Also of interest: Father of baby visits to clinic - 56

Phone calls from males - 22

*This article was printed with permission of the FirstChoice Clinic. As you can see from the statistics projects at FirstChoice are helping young women and men. Phase one and two of the "The Loving Choice" billboards are complete and phase three is the process of raising funds to keep the billboard up for the next year. This billboard is only one block from the abortion clinic. We would like to take this opportunity to say thanks to all who have donated in the past. Whatever role you play, please know that each and every one of you are important to the success of the campaign. **God Bless You all.***



"Every good and every perfect gift is from above, and cometh down from the Father of Lights."

-(James 1:17)

Oregon Law Only First Step Euthanasia Not Just Voluntary

by Burke J Balch, J.D., Director, Robert Powell
Center for Medical Ethics

The Oregon statute legalizes physician-assisted suicide for competent adults who voluntarily say they want to be killed. The evidence is growing, however, that this is only the first step—that the slope is well greased to nonvoluntary and then to involuntary killing.

Nonvoluntary and involuntary euthanasia are easily confused, but they are distinct. If someone is incompetent and that person's wishes are unknown, when a surrogate—such as a family member or court—decides that the person ought to die, that is nonvoluntary euthanasia. On the other hand, when it is known that a person wants to live and despite this a health care provider or governmental or some other authority then ensures that the person dies, against that person's express wishes, that is involuntary euthanasia.

Nonvoluntary killing. On December 3, 1997, Fay Girsh, executive director of Hemlock USA (now renamed "Compassion & Choices"), the leading group promoting the legalization of assisting suicide, issued a statement endorsing killing individuals—such as people with Alzheimer's disease and children with disabilities—who are legally incapable of making the decision for themselves.

"A judicial determination should be made," Girsh said, "when it is necessary to hasten the death of an individual whether it be a demented parent, a suffering, severely disabled spouse or a child. Consultants should evaluate what other ways might be used to alleviate the suffering and, if none are available or are unsuccessful, a non-violent, gentle means should be available to end the person's life."

Confronted with vigorous protests by disability rights activists, on February 6, 1998, Girsh issued a "clarification statement." She said that her earlier statement described a model developed by Professor Eike Kluge in Victoria, British Columbia, and proposed by the Right to Die Network of Canada.

Girsh said this "model is in no way endorsed by the Hemlock Society USA. It was mentioned as one suggestion about the question of ending suffering. There must be a dialogue about these issues, both from the able-bodied and the disabled communities."

Despite this (highly qualified) backtracking by Hemlock, the route from voluntary to nonvoluntary euthanasia is direct. It has been traveled in the context of passive euthanasia—the withholding of lifesaving medical treatment, food and fluids.

Numerous state courts have ruled that since competent people have the right to reject them, it would be an unconstitutional denial of equal protection for incompetent people whose wishes are unknown to be "deprived" of this right. These courts have ruled that under their state constitutions another individual, often called a "surrogate", must be al-

lowed to decide "on behalf of" the incompetent person that she or he would want to reject treatment and die.

Once direct killing is established as a statutory right in the context of physician-assisted suicide, then by the same logic these state courts are virtually certain to rule that the right to be killed by lethal prescription or lethal injection cannot constitutionally be withheld from incompetent people who have never asked to die. This "choice" must be exercisable on their behalf by a "surrogate."

Involuntary killing. In a book published in 1998, the founder of the Hemlock Society, Derek Humphry, wrote supportively of the use of assisted suicide as "one measure of cost containment." "[T]he elderly," he said, are "putting a strain on the health care system that will only increase and cannot be sustained."

Speaking of people with disabilities, he wrote, "People with chronic conditions account for a disproportionately large share of health care use, both services and supplies." In light of all this, he asked, "Is there a duty to die—a responsibility within the family unit—that should remain voluntary but expected nevertheless?" He asserted that "economics, not the quest for broadened individual liberties or increased autonomy, will drive assisted suicide to the plateau of acceptable practice."

Research Shows Adult Stem Cells Help Years After Heart Attacks

Bethesda, MD (LifeNews.com) — Unlike embryonic stem cells, adult stem cells taken from bone marrow have proven effective in treating heart damage suffered from heart attacks. Now, researchers have shown that such treatments years after a heart attack are still helpful. Left ventricular function and exercise capacity increased, while the area of heart muscle damage shrank, in 18 patients given infusions of their own bone marrow stem cells up to eight years after a heart attack, according to a new study in the Nov. 1, 2005, issue of the Journal of the American College of Cardiology. "This new therapy is able to treat until now irreversible heart complaints and function disturbances in patients with chronic coronary artery disease after myocardial infarction, even many years after heart attack.

Therefore there is hope for this large amount of patients with previous myocardial infarction and non-treatable complaints," said Bodo E. Strauer, M.D. from the Heinrich-Heine-University in Düsseldorf, Germany. If further trials produce similar results, cardiac regeneration using stem cells could help to not only reverse some heart attack damage, reduce symptoms and improve the daily functioning of patients; it might also reduce the risk of heart failure, Dr. Strauer said.

ATTENTION:

ADULT'S & TEENS - Advisor(s) Needed

North Dakota Right to Life is looking for an **advisor(s)** for the North Dakota Teens for Life Association. After much discussion we have come to the conclusion that it might work better to have co-advisors, dividing the projects between two people to lighten the responsibilities of this position. If you know of anyone who is interested, please call the state office for details.

We are also looking for adults that would be interested in being an advisor(s) for your local Teen Chapter. We have several areas within the state with teens that would be interested in starting a chapter and need adult supervision to get a chapter started. **TEENS** if you know someone who you think would make a good advisor, and are not sure how to approach them, give us a call and we will see how we can help you. **Please call if you are willing to help lead our next generation in our fight to protect life.**

Rally At The Capitol

North Dakota Right to Life is once again sponsoring a peaceful, prayerful, pro-life rally on the North Dakota Capitol steps to remember the day - January 22, 1973 - when the U.S. Supreme Court made abortion legal throughout all nine months of pregnancy. Please join us as we speak out for the precious gift of life.

*Sunday,
January 22, 2006*

2:00 p.m. CT
Capitol Steps

Reception to follow at the DAYS INN
1300 E Capitol Avenue-Bismarck

P.O. Box 551
Bismarck, ND 58502-0551



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