RU-486 Death is Just One Example of the Greater Dangers of Abortion

by Andrew Walther

SAN FRANCISCO - Abortion can be deadly - and not just to the child - according to a growing body of medical literature. When Holly Patterson died Sept. 17 after having a chemical abortion, debate swirled regarding the safety of abortions done using the RU-486 (Mifeprex) regimen, but articles published recently in major medical journals have shown that all types of abortion increase long-term health problems for women who abort. "There is a statistically significant increase in morbidity and mortality among women who have abortions," said Ronald Connolly, a doctor who has been practicing medicine near San Francisco for more than 30 years. Connolly cited an article that appeared in the August 2002 issue of the Southern Medical Journal as part of a growing wave of studies showing that while few women might die during the abortion procedure itself, the long-term effects of abortion are harmful to women both physically and emotionally. Additional studies have been published in The American Journal of Obstetrics and Gynecology, the Journal of American Physicians and Surgeons and the Canadian Medical Association Journal.

According to the Southern Medical Journal article, a study in Finland showed that in the first year following an abortion, "women who had an induced abortion were 76% more likely to die than women who had not been pregnant, 102% more likely to die than women who miscarried and 252% more likely to die than women who carried to term." The authors of the article then examined statistics from California and looked at the eight years following their abortions or childbirths to see if a similar increased mortality rate among women who abort was prevalent in the United States.

Higher Risk

The article's researchers concluded that "deaths from all causes in the eight years after the first known pregnancy outcome were significantly higher among women with a known history of abortion." David Reardon, founder of the Elliot Institute in Springfield, Ill., which does research on the effects of abortion, was the lead author of the Southern Medical Journal article. Reardon, who holds a doctorate in biomedical ethics, told the Register that not only are women more likely to die in the years after an abortion but "the number of deaths directly attributable to abortion are also underreported."

Connolly agreed. He pointed out that Holly Patterson, who died from complications that occurred shortly after her chemically-induced abortion, would not count statistically as an abortion-related death since she did not die during the actual procedure. The problem with such underreporting, according to Reardon, is that the Supreme Court decision in Roe v. Wade "accepted the argument that abortion is safer than childbirth." However, when the years following abortion are factored in, he said, the statistics tell a different story. The NARAL Pro-Choice America Foundation's Web site claims statistics linking women's health problems to abortion are unfounded: "Anti-abortion forces are making unsubstantiated claims that legal abortion is harmful to a woman's health."

Ignoring Evidence

The group claims "the risk of death from abortion is lower than that from a shot of penicillin." The site also denies there is a significant percentage of women who experience psychological problems after having an abortion. NARAL Pro-Choice America did not return the Register's request for comment on the recent studies showing long-term health risks from abortion. Reardon said the evidence definitely shows mental-health problems among women who abort. "Women after abortions have a greater tendency to be suicidal," he said. Women who abort "also have higher rates of psychiatric hospitalizations," he added. Denials of the evidence, he said, are based on ideology. "It gores the sacred cow - they have been telling women abortion is safe, and [these studies] run counter to their interest." Reardon also noted that although there might be a lower risk from an abortion than from childbirth during the actual procedure, "over the course of a year or even over 90 days, the risks [for women who abort] are much higher."

Connolly agreed with Reardon's assessment. "The medical and scientific data is overwhelming that abortion is absolutely devastating to women," he said. Connolly said political correctness has stifled the debate on the medical

evidence. He said if Planned Parenthood and the media "were really concerned about women," they would look seriously at the evidence linking abortion to problems with women's health. As it is, he said that even his local paper would not publish a letter to the editor detailing the risks of abortion he sent in the wake of Holly Patterson's death.

According to Connolly, evidence such as that presented in the Southern Medical Journal article simply proves the Catholic Church knew what it was doing in its consistent opposition to abortion. Citing the Second Vatican Council, Pope John Paul II wrote in 1995 in his encyclical *Evangelium Vitae* (The Gospel of Life): "Thirty years later, taking up the words of the council and with the same forcefulness I repeat that condemnation in the name of the whole Church, certain that I am interpreting the genuine sentiment of every upright conscience: 'Whatever is opposed to life itself, such as any type of murder, genocide, abortion, euthanasia or willful self-destruction ... poison human society, and they do more harm to those who practice them than to those who suffer from the injury. Moreover, they are a supreme dishonor to the Creator." Connolly said he hopes the Church in the United States will provide a conduit through which people can learn that abortion is not only a great moral evil but also a great physical harm to both child and mother.

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