

TESTIMONY for HB 562 (Peterson)
(To require health insurance coverage for contraceptives)
House Insurance Committee, May 14, 2008

Mr. Chairman, Members of the Committee:

My name is Dr. W. A. Krotoski. I am an internist and medical researcher, now retired, holding both Ph.D. and M.P.H. – or Master of Public Health – degrees in addition to the M.D. I have lived in Louisiana for 34 years, and in the Baton Rouge area since 1981. Until retirement, my practice was mostly with the U.S. Public Health Service, but I also served on the faculties of LSU's and Tulane's Public Health and Medical Schools. I have authored or co-authored 54 research articles and a medical text, and have contributed to several others. Currently, I am President of *The Hippocratic Resource*, a Louisiana organization of life-respecting physicians, dentists, nurses, and other health professionals, who strive to promulgate objective truth in medicine...

I am here today to testify in opposition to Representative Peterson's HB 562, and would appreciate your considering the following four points:

First, ... Hormonal contraception is not health care. It starts with a healthy woman with a naturally complicated, but finely tuned hormonal system, and ends up upsetting that system with external hormones, to render her hormonally out of kilter. Serious side effects after *short-term* use, while fortunately rare, include intravenous blood clots and stroke, and the appearance of non-malignant liver tumors and breast lumps, among others. More commonly, difficulty in conceiving may result after stopping the contraceptive hormones, often leading to otherwise unnecessary and expensive medical reproductive intervention and IVF, to create their own problems.

Second, ... Most contraceptives have at least some of their efficacy due to an abortifacient mechanism. In up to one-third of instances in which break-through ovulation occurs, the inhospitable lining of the uterus prevents implantation of the early embryo, thus resulting in a so-called mini-abortion and his or her death; this is acknowledged by hormonal contraceptive package inserts. Other contraceptives, for instance intra-uterine devices (IUDs) and the so-called "morning-after" pills, are even more clearly abortifacient.

Third, ... Like any physician who subscribes to the principles of the Hippocratic Oath, I respect the sanctity of each individual human life during his or her entire existence, and have sworn to strive to do no harm. Therefore, I – and others like me – object to mandating medications or procedures that destroy such lives, no matter the stage of development between fertilization and natural death.

Fourth, ... Data have been accumulating over the years to the effect that *long-term*, chronic use of hormonal contraceptives may produce an increase in breast cancer rates. Clearly, this is not acceptable for any mandated coverage. Additionally, the most recent study available on hormonal contraceptives and *cervical* cancer, published just last November (2007) in *The Lancet* – a highly respected British medical journal – confirmed, in a study of 52,082 women, the results of an earlier study involving one quarter that number (12,531), **that there is a significantly increased risk of cancer of the cervix with oral contraceptive use**. This work was conducted by the Cancer Research UK Epidemiology Unit, the Institute of Cancer Research, and the London School of Hygiene and Tropical Medicine - in Britain - and the Agency for Research on Cancer - in France. It showed that the risk almost doubled for pill use of over 5 years in women not infected with HPV, and was even greater for pill use of over 10 years in women who *were* infected. The results of this systematic review of published data also show that the relative risk of cervical cancer increases with increasing duration of oral contraceptive use. Surely, it is not acceptable to mandate payment for chronic use of any pharmaceutical with such a degree of carcinogenicity! Finally, by mandating hormonal contraception coverage, the liability for malpractice suits in cases of serious side effects could move from the insurance company to the State of Louisiana. Is the State prepared to pay for malpractice litigation?

Mr. Chairman and Committee members, I appreciate your attention, and urge you to deny any such contraceptive mandate by voting against HB 562.

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