

## **HOUSE HEALTH & WELFARE COMMITTEE, May 17, 2006**

[My name is] Robert Chasuk, [I am a] Family Physician, Director of the Family Medicine Residency Program at the Baton Rouge General Medical Center, and I am also a member of the Institutional Review Board at that same institution, a board which oversees human experimentation.

I represent *The Hippocratic Resource*, a Louisiana-wide organization of physicians and other health professionals, who are committed to promoting the principles of the Hippocratic Oath, the foundation of medical ethics.

I am testifying in favor of Senator Nevers' SB33 for several reasons including:

### **1. Human life Begins at fertilization. Abortion ends a human life.**

From the moment of fertilization, a new, distinct, unrepeatable person is formed; a new life is begun which is neither that of the father nor of the mother; it is rather the life of a new human being with his own growth. It would never be made human if it were not human already. (paraphrase JPII)

Modern genetic science has demonstrated that, from the first instant, the program is fixed as to what this living being will be: an individual person with his characteristic aspects already well determined.

All reputable embryologists recognize that there is no developmental stage at which the embryo or fetus suddenly becomes human. Only our scientific labeling changes to help us communicate about the different stages of development from zygote (1 cell) to embryo to fetus (8 weeks gestational age).

In fact, the whole medical field of maternal/fetal medicine has grown up around the recognized fact that physicians attending a pregnant woman have two patients (more in the case of twins, etc.) and that the baby sometimes needs its own specialist. And the field of fetal surgery is a new frontier in **human** medicine.

High-resolution ultrasound imaging shows the undeniable humanity of the unborn child. We have all seen these. How can we label the thumb sucking and kicking subjects of these pictures babies if the mother intends to bring the child to birth, but then call it only a blob of tissue or a potential life once a woman decides to have an abortion?

### **2. Abortion harms women.**

The chief harm is psychological. There are many adverse psychological effects. Two of them are suicide and post traumatic stress syndrome.

a. Suicide is increased in the year after abortion: 3 times over that of all women and six times greater than those women who gave birth. This was a study in Finland looking at the lifetime medical records of patients.

A follow up Welsh study looked at medical records of women having an abortion before and after the abortion. There was no increase in suicide before having an abortion, but after having an abortion, the risk of suicide became twice that of women giving birth.

b. Post traumatic stress syndrome: Abortion is recognized by the American Psychiatric Association's Diagnostic and Statistical Manual lists abortion as a life event which may produce Post Traumatic Stress Disorder.

A major study found that a minimum of 19% of post- abortion women suffer from diagnosable post-traumatic stress disorder (PTSD). Approximately half had many, but not all, symptoms of PTSD, and 20 to 40 percent showed moderate to high levels of stress and avoidance behavior relative to their abortion experiences. (Catherine Barnard, *The Long-Term Psychological Effects of Abortion*, Portsmouth, N.H.: Institute for Pregnancy Loss, 1990)

### **3. Abortion is never the only alternative when a mother's physical health is in danger.** Life threatening complications of pregnancy many times have already taken the life of the unborn child. Most of the time the induction of labor, which does not directly attack the unborn baby, is the procedure of choice for complications such as bleeding and pregnancy induced hypertensive syndromes.

Abortions are rarely done for the health of the mother, and the vast majority of the estimated 3% that are done for health reasons are done for mental health. However, as I have just discussed, there is much debate about whether abortion harms more than helps the psychological state of women.

I think it appropriate to mention here also, that one of the reasons, if not the reason, that abortion is promoted in the case of rape or incest is a hoped for beneficial psychological impact. However, it is not clear that killing a second victim achieves that intended effect. Books such as Dr. David Reardon's *Victims and Victors* are increasingly published documenting the additional psychological harm done to women in this situation. Why can we not care for both the woman and her baby?

And according to the Louisiana Department of Health and Hospitals, only 1 of 43,157 abortions performed in this state in the years 2001-2003 was done for the reason of rape or incest. Surely, rape and incest cannot validly be a major reason to support continued legalized abortion.

**4. Abortion is outside the mainstream of medicine.** The vast majority of all U.S. hospitals, whether secular or religious, public or private, do not participate in abortions. 71% of abortions are performed in free-standing abortion-dedicated clinics. Some 2 percent of obstetrician/gynecologists carry the burden of performing abortions. Organizations have been founded to "eradicate the stigma that has become attached to abortion and abortion providers within mainstream healthcare."

**5. As a physician, I took the Hippocratic Oath, which has long protected the patient in the practice of medicine.** I would like to quote two sentences from the Louisiana Medical Society's version, which adheres to the original intent of the Oath:

"To please no one will I prescribe a deadly drug, nor give advice which may cause death.  
Nor will I give a woman a pessary to produce abortion."

In summary, I urge a strong vote in favor of Senator Nevers' bill, SB33, and I thank you for your attention!