

LIVE ACTION

PRO-LIFE REPLIES

**HOW TO REPLY TO
"ABORTION MAY BE
NECESSARY TO SAVE THE
LIFE OF THE MOTHER"**

LiveAction.org

Introduction

Health of the mother is often touted as an exception for when abortion is permissible or needed.

However, thousands of medical professionals say abortion is **not** a medical necessity for any case of preserving the health or life of the mother.

In this e-Book, we will discuss what is and is not abortion, and what that means in terms of a mother's wellbeing. Within these distinctions, we will explore medical advancements, preterm labor, and other non-abortive medical treatments.

Defining Abortion

When discussing abortion, particularly in this context of the life or health of the mother, it's crucial to define and explain our terms in order to have a fruitful conversation.

Abortion is the direct and intentional killing of a baby in the womb. A procedure or surgery to save the life of the mother that has as an *unintentional* and negative side effect of the death of her child in the womb is **not an abortion**.

Supreme Court Decisions and Defining "Health"

The Supreme Court case *Roe vs. Wade* legalized abortion in the United States on January 22, 1973. A second case [Doe vs. Bolton](#) was decided the same day. *Doe vs. Bolton* allowed mothers to have access to an abortion for the sake of their broadly-defined term "health":

In Doe, the Court announced that health, for the purposes of late-term abortion law, would be synonymous with the mother's "**physical, emotional, psychological, familial ... wellbeing**" — in other words, every reason a pregnant woman could give for seeking an abortion in the first place.

This mentality is dangerous, because it essentially allows a woman to say she "needs" an abortion for any reason.

But in conversation, when someone makes reference to abortion for the health of the mother, most commonly they have a mother's *physical* health mind -- that her very life would be at risk by continuing her pregnancy.

Preterm Delivery

There are certainly medical conditions that do endanger a mother's life if she continues with her pregnancy.

These situations occur in cases of mothers who [develop dangerously high blood pressure, have decompensating heart disease, life threatening diabetes, cancer](#), or a number of other very serious medical conditions.

Even in the most high-risk pregnancies, there is no medical necessity for an abortion.

In situations where the mother's life is truly in jeopardy and her pregnancy must end, an early delivery for the baby both acknowledges the dignity of the child and is the safest option for the mother.

Former abortionist and now OB/GYN Dr. Anthony Levatino spent 9 years in residence at a hospital designated to care for high-risk pregnancies. [Of his experience there, he said:](#)

"I saw hundreds of cases of really severe pregnancy complications. Cancers, heart disease, intractable diabetes out of control, toxemia pregnancy out of control... I saved hundreds of women from life-threatening pregnancies. And I did that by delivering [the babies], by ending their pregnancy by delivery, either by induction or cesarean section. ...In all those years, the number of babies that I had to deliberately kill [in an abortion] was zero. None."

Some babies do need to be delivered before they are able to survive outside of the womb. But each new year brings with it greater medical advancements. Today, children have been known to survive outside the womb [as early as 22 weeks](#), with proper medical attention and care. The children who tragically don't survive a preterm delivery deserve to be treated with respect and compassion, and parents should be given the opportunity to honor and cherish their child's life.

If a woman's life is imminently in danger, a preterm delivery is also a much safer procedure than an abortion.

[Florence was 30 weeks pregnant](#) when her blood pressure became dangerously high. Her life would have been at risk if she continued her pregnancy, but her doctors were able to save Florence from this dangerous condition by delivering her baby, Willow, in a preterm delivery.

"It wasn't even, I swear, five minutes later I heard my baby cry," said baby Willow's father Randall. *"We weren't expecting her to come out as early as she did, but ever since she came out she's been a straight fighter."*

An emergency C-section can be completed in less than an hour (in Florence's case, it was 5 minutes). An abortion after 24 weeks, when the most common life-threatening complications occur, takes 2-3 days to complete due to the necessary dilation process. In essence, abortion delays treatment and significantly increases the risk of death and serious disability to the mother - on top of killing her preborn child.

Medical Treatments

There are also times when it may be necessary to give a pregnant mother medical treatments which may tragically result in the loss of the baby. It is important to understand that these treatments are NOT abortions, because the intention of the treatment is not to kill the preborn child.

For example, if a pregnant mother has cancer and chooses to undergo chemotherapy, that treatment may result in a miscarriage. However, the treatment given is a completely different action from abortion.

The intention of chemotherapy and the intention of abortion are not the same.

The abortion's only goal is to directly and intentionally destroy the preborn child.

The purpose of the chemotherapy is to address and heal the mother's illness. Radiotherapy is exceedingly powerful, and often preborn children are just too underdeveloped to withstand its effects.

In this situation, the resulting death of the preborn child is tragic. The child is mourned as a human being with dignity and worth. There was no intention or desire in the chemotherapy to end the child's life and, if it were possible to save it, every measure would be taken to do so.

Ectopic Pregnancy

Some will also confuse the necessary treatment for an ectopic pregnancy with an abortion. An ectopic pregnancy occurs when the preborn child implants in the mother's fallopian tubes or somewhere outside of the uterus. When a preborn child implants outside the uterus, it is a hostile environment for the baby. It is impossible for the baby to survive, and unless addressed quickly the ectopic pregnancy will also result in the mother's death.

Removing the baby from the fallopian tube or abdominal cavity is necessary to save the life of the mother. These situations are devastating, but they are not abortions.

Again, the intention of treating an ectopic pregnancy and the intention of abortion are absolutely different. The abortion's only goal is to directly & intentionally destroy the preborn child. Removing the child from the fallopian tubes where she is found does tragically result in the child's death, but that's certainly not the intention or desire of the procedure. If it were possible to save the child's life, every measure would be taken to do so.

The Dublin Declaration

[The Dublin Declaration](#), which has more than one thousand signatures from obstetricians, neonatologists, pediatricians, midwives, and other medical professionals, states the following:

As experienced practitioners and researchers in obstetrics and gynaecology, we affirm that direct abortion – the purposeful destruction of the unborn child – is not medically necessary to save the life of a woman.

We uphold that there is a fundamental difference between abortion, and necessary medical treatments that are carried out to save the life of the mother, even if such treatment results in the loss of life of her unborn child.

We confirm that the prohibition of abortion does not affect, in any way, the availability of optimal care to pregnant women.

In Conclusion

As shown through the stories and examples shared above, abortion is never medically necessary to save the life of the mother.

Mothers and families deserve to know that it is never necessary to violently end a baby's life in order to save the mother.

In challenging circumstances, both the mother and the baby in her womb deserve to be recognized and treated as two patients, two human beings worthy of life and proper medical care.