

Infanticide: Never Acceptable

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The American College of Pediatricians (ACPeds) views with dismay, is grieved by, and condemns recent efforts by several states to remove all legal protection from infants prior to, during, and shortly after birth. As in ancient Rome, it is now legal in 2019 New York, and soon, potentially other states, to kill a child through exposure, starvation, and/or the denial of medical care.

Roe versus Wade allows that States may have an interest in protecting an unborn child from abortion once the pregnancy is past the point of fetal viability, as long as the pregnancy does not threaten the life or health of the woman. The companion court case of Doe versus Bolton, however, defined health to include not only physical and mental wellness, but also family, social and economic well-being. This broad definition allows any unborn child to be diagnosed as a threat to her mother's "health" and legally aborted.

As a result, there are 12,000 late term abortions in the United States annually,^{1,2} most of them obtained for reasons unrelated to a woman's medical health.³ Although a post-viability pregnancy may rarely threaten a woman's physical health, all that is necessary to preserve her health and life is to deliver her baby prematurely by induction or Caesarean section. Both lives may be saved.

Fetuses who require prenatal surgery from 18 weeks of gestation forward are anesthetized separately from their mother. Blocking fetal pain in this way is associated with better surgical outcomes. Multiple studies have documented that functional pain pathways exist in the fetal brain by 20 weeks gestation whereas inhibitory or analgesic pathways do not mature before term.^{4,5,6,7,8}

Clearly, unborn children who are torn apart during a dilation and extraction abortion or burned in their mother's wombs during a saline induction abortion, experience excruciating pain.

Nothing, especially not fetal malformation, justifies late term abortion and infanticide. Humans who are disabled in the womb deserve the same respect afforded to able-bodied children at similar gestational ages. If a fetus has a potentially life-limiting diagnosis which is expected to result in death, families should be presented with the potential benefits of medical care and, accepting that such care might only prolong an inevitable death, be offered perinatal hospice.^{9,10} This provides optimal care for the mother, honors the life of her child, and allows the family the opportunity to acknowledge, love, and mourn its newest member. Literature comparing outcomes of

delivery and perinatal hospice care with abortion in cases of anencephaly reveals significantly better mental health outcomes for mothers who do not abort.^{11,12,13}

Killing is not healthcare. The American College of Pediatricians calls upon legislators to enact laws that honor the dignity and protect the lives of all people--born and unborn.

REFERENCES

¹ https://www.cdc.gov/reproductivehealth/data_stats/abortion.htm accessed 2/12/19 documents that 1.3% of abortions are done at 21 or more weeks gestation

² <https://www.guttmacher.org/fact-sheet/induced-abortion-united-states> accessed 2/12/19. This documents that approximately 926,200 abortions were performed in 2014; combining information from CDC with that from the Guttmacher Institute: 1.3% of 926,200 is 12,040 abortions after 20 weeks in the US in 2014 – which is the most recent year for which stats are available.

³ Jones, “Who Has Second Trimester Abortions in the U.S.?” *Contraception*. (2012) 85(6):544-551.

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⁶ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4253046/> Hatfield LA Neonatal pain: What's age got to do with it? *Surg Neurol Int*. 2014; 5(Suppl 13): S479–S489. Published online 2014 Nov 13. doi: [10.4103/2152-7806.144630](https://doi.org/10.4103/2152-7806.144630)

⁷ Testimony of Dr. Maureen Condic District of Columbia H R.179J, 23 May 2013 available at: <https://www.govinfo.gov/content/pkg/CHRG-113hhr81175/pdf/CHRG-113hhr81175.pdf> page 36-46

⁸ American Association of Pro-Life Obstetricians and Gynecologists Practice Bulletin 2 Fetal Pain. Available at: <https://aaplog.org/wp-content/uploads/2019/02/PB-2-Fetal-Pain.pdf>

⁹ Perinatal Hospice and Palliative Care <https://www.perinatalhospice.org/>

¹⁰ American Association of Pro-Life Obstetricians and Gynecologists Practice Bulletin 1 Perinatal Hospice. Available at <https://aaplog.org/wp-content/uploads/2019/02/PB-1-Perinatal-Hospice.pdf>

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¹² Calhoun BC, Reitman JS, Hoeldtke NJ. Perinatal Hospice: A Response to Partial Birth Abortion for Infants with Congenital Defects. *Issues in Law and Medicine* 1997; 13(2): 125-143.

¹³ Calhoun BC, Hoeldtke NJ, Hinson RM, Judge KM. Perinatal Hospice: Should all centers have this service? *Neonatal Network* 1997;16(6):101-102.