

**Medical Professionals of Ohio
HB 258 – Six-week Abortion Ban
Opponent Testimony
Ohio Senate Health, Human Services, and Medicaid Committee
December 5, 2018**

Chairman Burke, Vice-Chair Beagle, Ranking Minority Member Tavares, and Members of the Committee,

As medical professionals - including practicing Obstetrician/Gynecologists, medical students, and other health providers, we see firsthand the impact of political decisions on patients' health. Regardless of one's personal faith or moral code, it is completely untenable for the State of Ohio to criminalize physician behavior and to deny a medical procedure to patients that is both Constitutional and consistent with a physician's professional medical standards of care. **We respectfully ask you to vote against HB 258 as it is not evidence based and criminalizes medical care.**

Currently in the state of Ohio, we are facing incredibly high maternal mortality rates - according to the Ohio Department of Health, the number of Ohio mothers dying directly from complications of pregnancy has reached 85 women per 100,000 live births.¹ Denying women the right to choose to have an abortion in a sterile, physician-led environment would only result in an increase in this number. In fact, research has shown that removing abortion restrictions to allow for greater access to medically safe abortions results in a subsequent drop in maternal mortality and reduces the rates of unsafe abortions.² As we have seen in Ohio following the 20-week ban put in place in 2017, abortion restrictions did not decrease the number of abortions taking place, but rather served to increase their number along with causing an increase in number of maternal deaths.³ Many of us remember the years before 1972, when women would come to the emergency room with infections and as a result often died after attempting to abort a fetus. Legal, accessible abortion is extremely safe with a mortality rate of 0.7 per 100,000 procedures - much lower than the current mortality rate for carrying a pregnancy;⁴ to put this in perspective, legal abortion has the same risk to the mother as receiving a shot of penicillin, a very common antibiotic.⁵

Medically, the justification of this bill is unsound, because merely seeing a fetal heartbeat does not in any way ensure a healthy outcome. A fetal heartbeat can develop as early as six-weeks, often before the mother knows she is pregnant. Even if the mother is aware that she is pregnant, there are other concerns surrounding this time frame. One of the components of standard prenatal care includes the choice to undergo genetic testing, and most of these tests are not available before the six-week threshold introduced by the ban. A law of this nature would leave families unable to obtain standard prenatal genetic or anatomic diagnoses. If there is a genetic or anatomic disorder this would prevent their access to abortion care once the diagnosis is made.⁶ This would not only negatively impact the family in their ability to plan for their future, but also would negatively impact the patient-physician relationship.

Criminalizing a physician's actions that are consistent with their professional standards of care is simply unacceptable. If laws like this are allowed in Ohio, it is conceivable that there will be a shortage of obstetricians in our state, as young professionals will avoid choosing Ohio to begin or continue their education or their practice. Why would these young doctors voluntarily place themselves in the midst of a potential legal quagmire that would not only prevent them from meeting their moral obligations to provide the full spectrum of evidence-based care for their patients, but might also result in criminalizing their practice? In a state where there is already a high maternal mortality and a severe shortage of providers, this would only exacerbate problems with access to healthcare for Ohio constituents.

Ohio has an egregious track record in terms of infant mortality, to the point that there are active task forces which are working to address the state's staggeringly high rates of infant mortality. Unfortunately, women that are forced to carry a pregnancy that is unwanted or has been conceived by rape or incest, also tend to be less likely to seek prenatal care. Poor prenatal care has already been shown to worsen infant mortality rates and outcomes. Inadequate prenatal care and the effect of abortion restrictions, disproportionately affect young mothers and those already facing challenges: those who are young or already raising children, especially on their own, women who suffer from depression and substance use, those facing domestic violence, and those who are unable to access quality care.⁷ In fact, the women who delay seeking prenatal care often delay visiting a provider due to travel and visit costs, pointing even further to limits on abortion care largely affecting our most vulnerable populations.⁸

Each individual bill may not seem to have that great an impact, but it has added up to the point that it is becoming logistically impossible for a woman to obtain an abortion in Ohio, particularly a women in poverty or from a rural and medically underserved area. This is especially true of those who are unable to take time off of work to travel to the clinic multiple times or are unable find transportation to one of the few clinics left in Ohio. If you and other politicians truly care about women and about the preservation of life, you should support women through these difficult situations and fund organizations such as Planned Parenthood. This organization provides free and comprehensive contraception and sexual education, works to stop the cycle of poverty and teenage pregnancy, and advocates to keep abortion safe and legal.

Regardless of your personal beliefs, this bill is unconstitutional and will be challenged as such, adding an undue burden to the taxpayers of this state. Women and the providers who care for them should be the ONLY ones involved in making decisions regarding a pregnancy. Please vote against HB 258. This bill has been reintroduced several times in different forms and has not gone anywhere in the past. It should again be stopped in committee. Governor Kasich vetoed it in the past and I sincerely hope this committee will do the right thing and vote against HB 258 before it goes to the floor.

Sincerely,

Medical Professionals of Ohio

Physicians Action Network, Worthington
Medical Students for Choice at OSUCOM
Medical Students for Choice at OU-HCOM
Medical Students for Choice at WSU-BSOM
Anita Somani, MD, Dublin
Annamarie Beckmeyer, Med Student, Columbus
Dr. Rebecca Rudesill, Physician, Dublin
Ariunaa Bayan, Med Student, Columbus
Erin Bishop, Med Student, Columbus
Dr. Ean Bett, Physician, Columbus
Dr. Mitchell Silver, Physician, New Albany
Katherine A Lambes, MD, Dayton
Dr. Allison Murphy, Physician, Columbus
Ashlee Weaver, Med Student, Columbus
Dr. Martin Fried, Physician, Columbus
Catherine Romanos, MD, Columbus
Dr. Stephanie Conway, Physician, Powell
Nikila Luke, Med Student, Sylvania
Dr. Gregory Boone, Physician, North Canton
Elizabeth Page, Med Student, Columbus
Nathan Callender, Med Student, Columbus
Rebecca Glowinski, Med Student, Columbus
Dr. Matthew Noordsij-Jones, Physician, Dayton
Emily Turnquist, Med Student, Columbus
Austin Oslock, Med Student, Columbus
Trieu-Mi Dao, Med Student, Beavercreek
Wendelyn Oslock, Med Student, Columbus
Romi Xi, Med Student, Columbus
Althea Anne Perez, Med Student, Columbus
Jordan Vajda, Med Student, Columbus
Emily Sims, Med Student, Dayton
Joshua Omade, Med Student, Beavercreek
Jeremiah Shaw, Med Student, Columbus
Dr. Roma Amin, Physician, Columbus

Marisa DeSanto, Med Student, Athens
Dr. Lopa Pandya, Physician, Columbus
Dr. Jessica Q., Physician, Columbus
Keira Wilson, Med Student, Solon
Lyon Wang, Med Student, Columbus
Louise Acheson, MD, Cleveland
Anthony Nguyen, Med Student, Columbus
Jeanette Schnierle, Med Student, Columbus
Katie Cross, Med Student, Beavercreek
Mitchell Graham, Med Student, Beavercreek
Kristin Foley, MD, Bexley
Kelly Muterspaw, Med Student, Dayton
Dr. Kristin Conners, Physician, Columbus
Jack Holdford, MSN, RN, Columbus
Sarah Leslie, Med Student, Beavercreek
Eighin Chan, Med Student, Rootstown
Dr. Alyson Leeman, Physician, Columbus
Matthew Lovell, Med Student, Munroe Falls
Karen G. King, MD, Hilliard
Brandon M. Snyder, Med Student, Columbus
Beth Lafont, MD, Columbus
Erin Schnackel, MD, Columbus
Sarah Cremeans, Med Student, McDermott
Dr. Karin Moorma, Physician, Westerville
Ellen Jochum, Med Student, Toledo
Matt Leupold, Med Student, Columbus
Jasmine Binod, Med Student, Akron
Dr. Alexander Curtis, Physician, Portsmouth
Dr. Heena Santry, Physician, Bexley
Sarah Burns, Med Student, Columbus
Mark McLoney, MD, Cleveland
Dr. Emily Hamburg-Shields, Physician, Columbus
Rachel Miglioizzi, Registered Nurse, Columbus
Sean Mack, Med Student, Toledo

Rebecca Potts, Med Student, Toledo
Dr. Matthew Adkins, Physician, Columbus
Kimberly Shepherd, MD, Columbus
Antonio Jackson, Med Student, Toledo
Gabrielle Fernandez, Med Student, Toledo
Dr. Anne Albers, Physician, Columbus
Maria Libertin, Med Student, Green
Jasneet Singh, Med Student, Columbus
Katlyn Allen, Med Student, Smithville
Alexander Young, Med Student, Toledo
Alyssa Wolfinger, Med Student, Toledo
Matt Mingione, MD, Columbus
Elizabeth Harlan, Med Student, Toledo
Jonathan Doan, Med Student, Holland
Dr. Kelsey Murray, Physician, Columbus
Elijah Lux, Med Student, Toledo
Carolee Noonan, Genetic Counselor, Riverlea
Douglas Weaver, Med Student, Columbus
Tanisha Kashikar, Med Student, Athens
Jennifer Chishko, Med Student, Rootstown
Jacob Burlew, Med Student, Ravenna
Samuel Doerle, Med Student, Rootstown
Danielle Tsevat, Med Student, Columbus
Kinnari Sorathia, Med Student, Kent
Stephanie Wolff, Med Student, Kent
Akul Yajnik, Med Student, Toledo
Kevin J Hackett, MD, Dublin
Kelly Thibert, DO, MPH, Columbus
N.D., Dentist
J.J., Med Student
S.W., Med Student
V., Med Student
N.J., Med Student
B.B., Physician
J.H., Med Student
J.X., Med Student
N.G., Physician
P.T., Med Student
S.S., Med Student
S.M., Med Student

M.H., Med Student
A.M., Med Student
P., Physician
H.S., Med Student
S.P., Med Student
M., Physician
R.G., Physician
R.V., Med Student
O.N., Med Student
B.D., Med Student
M., Physician
J.P., Med Student
S.C., Med Student
J.A., Med Student
N.L., Med Student
H.S., Med Student
U., Physician
P.P., Med Student
O.W., Med Student
M.N., Med Student
J., Med Student
J.S., Med Student

J.M., Med Student
A.R., Physician
K.C., Med Student
A.O., Med Student
J., Physician
F.H., Med Student
C.W., Med Student
G.S., Med Student
B.K., Physician
A.C., Physician
M.C., Med Student
J.G., Physician
K., Med Student
A.E., Med Student
H.C., Med Student
R., Med Student
H.R., Med Student
C.A., Med Student
S.S., Physician
M., Med Student
S., Med Student
B.B., Physician

Citations:

- 1 — <http://www.ohiohouse.gov/democrats/press/as-pregnancy-related-deaths-rise-in-ohio-sykes-looks-to-raise-maternal-mortality-awareness>
- 2 — Briozzo L1, Gómez Ponce de León R2, Tomasso G1, Faúndes A3. Overall and abortion-related maternal mortality rates in Uruguay over the past 25 years and their association with policies and actions aimed at protecting women's rights. *Int J Gynaecol Obstet.* 2016 Aug;134(S1):S20-S23. doi: 10.1016/j.ijgo.2016.06.004.
- 3 — Paulsen, J., Smith, D. (2017). *Induced Abortions in Ohio, 2017*. Ohio Department of Health.
- 4 — Zane, S., Creanga, A. A., Berg, C. J., Pazol, K., Suchdev, D. B., Jamieson, D. J., & Callaghan, W. M. (2015). Abortion-Related Mortality in the United States: 1998-2010. *Obstetrics and gynecology*, 126(2), 258-65.
- 5 — World Health Organization (2011). *Unsafe abortion: Global and regional estimates of the incidence of unsafe abortion and associated mortality in 2008*. Sixth Edition. ISBN 9789241501118.
- 6 — Farrell, R., Mabel, H., Reider, M., Coleridge, M., Yoder Katsuki, M. Implications of Ohio's 20-Week Abortion Ban on Prenatal Patients and the Assessment of Fetal Anomalies. *Obstetrics and Gynecology*. 2017 May;129(5):795-799. doi: 10.1097/AOG.0000000000001996.
- 7 — Foster, D., Kimport, K. Who seeks abortion at or after 20 weeks? *Perspect Sex Reprod Health*. 2013 Dec;45(4):210-8. doi: 10.1363/4521013. Epub 2013 Nov 4.
- 8 — Upadhyay, U. D., Weitz, T. A., Jones, R. K., Barar, R. E., & Foster, D. G. (2014). Denial of Abortion Because of Provider Gestational Age Limits in the United States. *American Journal of Public Health*, 104(9), 1687-1694. doi:10.2105/ajph.2013.301378