

Testimony of Catherine Romanos, MD
in Opposition to House Bill 258
Submitted to the Senate
Committee on Health, Human Services, and Medicaid
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I am a family physician who lives and works in Columbus, Ohio. I completed a Bachelor of Arts in Spanish literature at New York University, received my medical degree from the University of Connecticut, and completed a residency in family medicine with an emphasis on social justice and caring for underserved Spanish-speaking patients at the Lawrence Family Medicine Residency Program in Lawrence, Massachusetts. I am board certified in family medicine. As a physician, I vehemently oppose House Bill (HB) 258. This bill represents extreme government interference into medicine and would greatly undermine the health of Ohio women and their families.

I am also an abortion provider and I meet women every week who are seeking abortion for a myriad of reasons. Each of these women has her own set of infinitely complicated circumstances that bring her to me. It is not my job to judge her, it is my job to trust her decision and keep her safe. If this bill becomes law, I will no longer be able to trust her to make decisions for herself and I will not be able to keep her safe if she needs to terminate her pregnancy.

HB 258 would ban abortion after a “fetal heartbeat has been detected,” which can occur as early as six weeks in pregnancy, often before a woman even knows that she is pregnant. Furthermore, cardiac motion at such an early stage is no guarantee of a healthy pregnancy or a healthy baby. This bill would essentially ban abortion in the state of Ohio, without exception, including exceptions for a woman whose fetus has a medical condition incompatible with life, a woman whose health would be compromised by

remaining pregnant, or a survivor of rape or incest.

I see dozens of women every week, each of who come to me with a unique set of circumstances. I see women who were raped. In one day I saw one woman who was raped by her abusive boyfriend and came to me in her second trimester and another who was drugged at a party and came to me as soon as she realized she was pregnant, just after six weeks. She only vaguely remembered waking up naked, in a strange place, weeks before. Every week I see women who receive devastating diagnoses of fetal anomalies. Each come with their partners and each cry after making the decision to end their pregnancy rather than carry a child to term who would have a shortened or painful life. And then there are the women who are already mothers. I saw a woman who's oldest of three children was in college and could not financially support a fourth child, and another who's youngest of two was only six months old. This woman could not physically or emotionally manage another pregnancy or another infant so soon. I see students who want to finish their studies before starting their families. No two women are the same. No two decisions are the same. None of these women came to me before a fetal heartbeat was detected.

Fortunately for these women, they were able to obtain the health care they needed in our home state of Ohio. But what would you have me tell my patients if HB 258 becomes law? How am I to explain to a patient that despite her thoughtful, careful decision, politicians in our state have made it a criminal act for any Ohio physician to provide them an abortion? HB 258 would require Ohio physicians to send their patients in need of abortion out of state for a basic procedure. This policy would not only devastate the health and wellbeing of women and their families across the state but it

would also devastate the quality and high standard of Ohio's medical care.

To deny women access to safe, legal abortion care is to ignore the reality of their health care needs. One in four U.S. women will have an abortion by age 45. Abortion is one of the safest outpatient procedures performed in this country. If HB 258 becomes law, only women who can afford to go out of state will be able to safely obtain an abortion – potentially creating a pre-*Roe* setting for Ohio's poorest and most vulnerable women. Women desperate to protect their families will resort to desperate measures. As a physician, my job is to take care of my patients and their health. I was not alive to care for dying women who had attempted self-abortion or sought out illegal abortions in 1972 and I hope that I will not be required to do so in 2018. It is critical to the lives and health of women in Ohio that you vote against HB 258.