



House Health Committee
Rep. Derek Merrin, Chairman

WITNESS INFORMATION FORM

Date: 3/26/2019

Name: Kimberly Shepherd, MD

Are you representing: Yourself Organization

Organization (If Applicable): _____

Position/Title: Physician (Ob/Gyn)

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Do you wish to be added to the committee notice email distribution list? Yes No

Business before the committee

Legislation (Bill/Resolution Number): SB 23

Specific Issue: _____

Are you testifying as a: Proponent _____ Opponent Interested Party _____

Will you have a written statement, visual aids, or other material to distribute? Yes No

(If yes, please send an electronic version of the documents, if possible, to the Chair's office prior to committee. You may also submit hard copies to the Chair's staff prior to committee.)

How much time will your testimony require? _____

Comments:

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My name is Dr. Kimberly Shepherd. I am a private practice Ob/Gyn in Columbus, Ohio and I am writing today to implore you to vote against SB23, the fetal heartbeat bill. I realize that this is an ideologic and emotional issue for many people, but I am asking you to consider the science and factual implications that this bill would impose.

As written, this bill states that as early as 5.5-6 weeks of gestation, a woman and her physician, have no choice but to continue with a pregnancy. At 6 weeks of gestation, an embryo is approximately 4 millimeters in size. The embryo is far from developing into human form as it has no formed face or mouth, no hands or feet, no trachea or bronchi. I explain this to remove the myth that this is just a tiny human waiting to grow. We are fortunate that we have developed technology sophisticated enough that we can witness this development in action, but this ability should not be used as the benchmark for defining what is "human" or "alive".

As an extremely busy obstetrician, over the last 20 years I have had the honor of taking care of thousands of women and families through their pregnancy journeys. Pregnancy can be a joyous, wonderful experience and in some cases it can be wrought with sorrow and fear. Many times, when women and families decide to interrupt a pregnancy, it is a decision made with a very heavy heart. It is a decision that is made because the health of the woman would be in jeopardy if she were to continue with pregnancy, the fetus has a condition (genetic or structural) that is not compatible with life, the emotional toll of enduring a pregnancy or having a child would put the woman's life or well-being at risk. Pregnancy itself imposes a significant risk on the health and life of a woman. I have seen numerous women die, or nearly die, in pregnancy and childbirth despite all of our wonderful advances in medicine. The decision to continue a pregnancy should be a decision made by a woman in counsel with her physician, not a decision made by lawmakers. To give you an example, I have had numerous patients over the years who we discovered that their fetuses had anencephaly, a condition where the skull does not fully form over the brain and is never compatible with life. This condition cannot be diagnosed before the development of a fetal heartbeat. I believe it is unfair to require a woman to continue with the pregnancy, putting her own life at significantly greater risk, only to lose the child after delivery. The same is true of many genetic disorders. We are fortunate that science has helped us develop ways to detect some genetic abnormalities as early as 10-11 weeks gestation. With this however, comes the shock to some families that their fetus has a genetic condition not compatible with life. The physical and emotional toll that continuing the pregnancy places on a woman in this circumstance is often too great. Continuation of the pregnancy places otherwise healthy women at risk of many medical complications including the development of diabetes, hypertensive crises, hemorrhage, seizures, strokes, blood clots, delivery complications with lifelong sequelae and death, just to name a few. It puts her at risk for bedrest, taking her away from her work, family and friends. This can further lead to financial hardship, anxiety, depression and physical complications. Even when a pregnancy is uncomplicated in a medical sense, almost all pregnant women endure a significant amount of physical discomfort, alterations in sleep, need for changes in her professional life and restrictions on travel. Women are often willing to endure this sacrifice when they know the reward is a healthy child. The loss of a healthy child is always devastating but having walked this walk with many women, it is much

harder once you have felt the baby move and grow inside of you. There is absolutely no justification to forcing women to endure this outcome.

As an Obstetrician/Gynecologist in Ohio, I am extremely concerned about the impact this bill would have on recruitment of physicians for training and practice in the state. For the safety of women, it is paramount that we are able to adequately train physicians on proper techniques used for early pregnancy interruption. If physicians lose the ability to counsel patients and help women make the personal, private decisions on how to proceed with their pregnancy, I believe many physicians will choose to practice elsewhere. The criminalization of physicians that this bill proposes is astounding. We dedicate our lives to taking care of patients and providing them with honest, factual information and safe medical care. We do not impose our personal morals. We guide, we support and we respect the women we care for.

It was not that long ago in our nation's history that women were forced to make very difficult decisions regarding pregnancy continuation. Their choice was either to continue with an undesired pregnancy or to seek illegal, potentially unsafe abortions. To continue with pregnancy forced women into a situation where their lives were at risk, their ability to progress academically or professionally was at risk and their financial security was at risk. As this is an issue that can only affect the well-being of a woman, I would argue that this is unfair to mandate a woman endure these situations. Abortion in the US is now a safe medical procedure performed either medically or surgically with an extremely low complication risk. The risks imposed by pregnancy continuation FAR exceed the risk of early pregnancy interruption. Deaths from illegal, unsafe abortions still account for a significant percentage of maternal deaths worldwide. In fact, The World Health Organization estimates that in developing countries where it is illegal, abortions account for over 25% of maternal deaths. It is completely unacceptable that we would risk the lives of women to return to this archaic practice. The laws may change, but women will not stop seeking interruptions of pregnancy if they see that this is their best option. It will only serve to put them at great risk.

As women are the only gender who can become pregnant, I would also argue that imposing such strict regulations on a woman's body, and forcing her to remain pregnant, is an issue of gender discrimination. It takes both a male and female to create an embryo, but after that, all of the risk is assumed by the woman. It is unfair to mandate this burden. Early pregnancy termination is safe, safer than pregnancy continuation. It is important that we respect a woman's choice as to whether or not she should be faced to endure the risks of pregnancy. I can think of no health risk that a man is FORCED to endure, that puts his life and well-being at risk, when there is an option that can be safely performed to avoid it. Women put their lives at risk every day for their children, to create families. I have three boys and endured complications in pregnancy, took time out of my training and practice to have them and recover, had major surgery to deliver them and then complications because of the c-sections that later required hysterectomy. I lost income, time from my patients and put my life at risk. For me, it was a risk worth taking, but I would never force someone else to endure these things if it was not a desired choice. Neither should lawmakers.

In conclusion, SB 23, the fetal heartbeat bill, would serve only to push forward a political and/or religious agenda. It is not about the safety and well being of our society. Early pregnancy termination is a safe option, at a stage far from fetal viability, that should be maintained. The difficult choice that women make regarding pregnancy continuation, their lives and their health, should not be determined by lawmakers. Physicians should not be criminalized for providing appropriate, safe medical care to their patients. The impact of this will result in under-trained physicians in our state and the loss of quality physicians who care for women. Furthermore, women should not be judged for making the best possible decision for themselves and their families. The passage of this bill will increase the risk to the lives and well-being of women across the state. Please consider this carefully when determining your vote. Thank you for your time.

Rumby Shepherd