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THE ABSURDITY OF BANNING PARTIAL-BIRTH ABORTION

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 Apr 24, 2012 / By: [Michael Spielman](#)

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Abortion rights advocates bristle at the term "[partial-birth abortion](#)"—not because they're ashamed of the procedure, but because they take offense at the name. So it is with the authors of the National Abortion Federation's (NAF) [Management of Unintended and Abnormal Pregnancy](#), who refer to the procedure in question as "so-called partial-birth abortion." (38) And the only reason they acknowledge the term at all is because of the federal Partial-Birth Abortion Ban that was enacted in 2003 and upheld by the Supreme Court in 2007 (*Gonzales v. Carhart*). What is partial birth abortion? It is an "intact" variant of a particular type of second-trimester abortion known as [dilation and evacuation \(D&E\)](#). It's also known as [dilation and extraction \(D&X\)](#). In a normal D&E procedure, the body of the fetus is dismembered by forceps and pulled out of the womb piece by piece. In the intact version, the body of the fetus is left whole and only the head is crushed so that it can pass through the cervix more easily. The NAF abortion textbook describes the procedure this way:

As a general rule, when cervical dilation is sufficient, fewer instrument passes are needed to remove the fetus. In some cases, intact delivery is feasible. Because the cranium represents the largest and least compressible structure, it often requires decompression... Removal of an intact or near-intact fetus minimizes the risk of retained tissue... Decompression can be accomplished with forceps or by making an incision at the base of the skull through which the intracranial contents are suctioned. If the fetus is in cephalic presentation with the calvarium well-applied to the cervix, the surgeon can pierce the calvarium with a sharp instrument and collapse it externally.

(173)

Though medical jargon helps mask the barbarity of what is being described, it remains a chilling account. There are two ways the abortionist can get the baby's head (cranium) through the mother's cervix. The head can be crushed with forceps or it can be punctured with a sharp instrument so that the brain can be removed by suction aspiration. If the baby is delivered head first (cephalic presentation), the top of the head (calvarium) can be punctured externally! Because a portion of either the baby's head or body is outside the womb before the abortion takes place, lawmakers labeled the procedure, "partial birth abortion."

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Included in [the statute of the 2003 Partial-Birth Abortion Ban](#) is the assertion that, "moral, medical, and ethical consensus exists that the practice of performing a partial-birth abortion... is a gruesome and inhumane procedure that is never medically necessary and should be prohibited." The reason I call this ban an absurdity is not because I disagree with the law's assertion, but because partial-birth abortion is no more "gruesome and inhumane" than any other form of abortion. And if you read the accounts of D&E and D&X side by side, you'd be hard pressed to say that D&X is the more gruesome of the two. In fact, one of the advantages the NAF attributes to D&X is the opportunity it affords grieving mothers to "hold an intact fetus." (173) By comparison, D&E tears the baby's entire body to pieces.

Don't get me wrong. Partial-birth abortion *should* be banned, along with every other form of elective abortion. My remarks are not meant to be an indictment against the men and women who labored to ban this particular procedure, but rather to point out how absurd it is for the law to single out partial-birth abortion amongst other equally-barbaric methods. The NAF rails at the [Gonzales v. Carhart verdict](#) for failing to see that partial-birth abortion is not materially different from any other form of abortion, and quite frankly they're right. If there's nothing wrong with abortion, there's nothing wrong with partial-birth abortion. On the other hand, if there is something wrong with partial-birth abortion, it's only because there's something wrong with abortion.

The most practical problem with banning just one abortion method is that all sorts of legal alternatives remain. Unfortunately, it is probably fair to say that the Partial-birth Abortion Ban has not prevented a single baby from being aborted. It has simply mandated that they be aborted in slightly different ways. The NAF textbook points out that physicians can circumvent the D&X ban by simply killing the baby by lethal injection, before the procedure begins. Specifically:

Injections to cause fetal demise prior to operative evacuation may have certain benefits. At gestational ages when a live birth is possible, these injections avoid that possibility... Some clinicians believe that the process of cortical bone softening, which begins within 24 hours of fetal death and makes fetal tissue more pliable, may facilitate evacuation and avoid lacerations caused by sharp fragments of fetal bone. Some patients may find solace in knowing that fetal death occurred prior to operative evacuation. US abortion providers may prefer using these injections to ensure compliance with the federal Partial-Birth Abortion Ban Act of 2003 and related state laws. The act is an intentionally imprecisely worded statute prescribing criminal sanctions against offending physicians but applicable only when a "living fetus" is present at the outset of evacuation. (166)

There is much to draw out from this excerpt, but let's begin at the end. Because the Partial-Birth Abortion Ban is only applicable if the baby is alive at the procedure's outset, the only adjustment required by the abortionist is to kill the baby before performing the D&X. How is this achieved? By administering "agents to cause fetal demise 1 to 2 days before (intact) D&E, often in conjunction with cervical preparation." (167) These agents are "administered via intraamniotic or intrafetal injection... [with] a 20-gauge or a 22-gauge spinal needle." (166) Digoxin or potassium chloride are the agents of choice. When using digoxin, the text says that "providers may feel a change in resistance at the needle tip as it enters the fetus" (167) Fetal demise usually occurs within five hours. When using potassium chloride, "injection into the fetal heart or umbilical cord is required [and] needle placement should be maintained until fetal death is confirmed monographically." (167) Once the baby is dead, the rest of the D&X procedure is materially unchanged. Its gruesomeness remains the same.



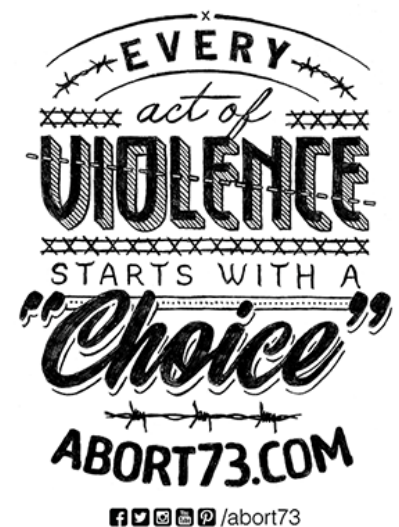
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The second thing to note is the assertion that some patients "find solace in knowing that fetal death occurred prior to operative evacuation." The implication here is that death by injection is a more humane way to die, which raises an interesting question. If the cause of death for this procedure is lethal injection, what is the cause of death in a [D&E, D&X, or suction curettage procedure](#)? Penetrating trauma. Think about that for a moment. [Penetrating trauma](#) is an injury sustained as a result of sharp force, which includes injuries from cutting or piercing instruments. If death by lethal injection is the most humane way to kill someone, death by penetrating trauma has to be among the least humane ways to kill a person, and this is precisely what most abortions do. That doesn't mean that abortion by injection is any more justified than abortion by curettage, but the violence intrinsic to most abortions is something worth noting.

Finally, and most significantly, the first benefit listed by the NAF in regard to fetal injection is the fact that it removes the risk of the baby being born alive. They elaborate in the excerpts below:

Published data confer no clear medical benefit of causing fetal demise (by injection), although individual practitioners may want to consider it if... (3) they desire to avoid the possibility of unscheduled delivery of a live fetus; or (4) they are concerned about compliance with the Partial-Birth Abortion Ban Act of 2003. (169)

Providers should consider the possibility of a live-born fetus, particularly if fetal death is not induced prior to the procedure and the gestational age is 18 to 20 weeks or more...

Besides the emotional and ethical difficulties for patients, their partners, and staff, a delivery with signs of life may have legal implications. This situation necessitates a clearly defined protocol for resuscitation that involves neonatal intensive care staff, abortion providers, ancillary staff, and legal consultation. (180)

Do not miss the significance of these revelations. The foreword of the NAF textbook declares that "access to safe abortion is as essential to modern living as the internal combustion engine or silicon chip." (xiv) That's their starting point. From there, their attitudes and prescriptions regarding post-viability abortions (including partial-birth abortion) make it clear that they see no moral distinction between early abortion and late abortion. They are one and the same. And now they make the final progression, implying that there is no moral distinction between abortion and infanticide. If you don't see it, read the quotes above again. Delivering a live baby *MAY* have legal implications. Physicians should use lethal injection *IF* they want to avoid the possibility of delivering a live baby. In other words, the NAF urges abortionists to be cautious about delivering babies alive and killing them outside the womb, lest they get in trouble with the law. Depending on the state, depending on the circumstances, the law might require them to let this baby live. It is on this point that the depraved absurdity of abortion is exposed in the clearest light. So long as a portion of the baby is in the womb, the abortionist can kill him or her with impunity. But if he's not able to kill the baby before the entire body is out, suddenly that baby is a person protected by the law. Killing that same baby now *may* have legal implications. God help us!

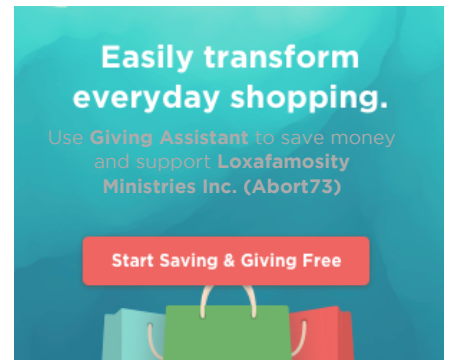
All that to say, if you have created categories in your head which views infanticide as worse than late-term abortion and late-term abortion as worse than early-term abortion, take a lesson from the National Abortion Federation, take a lesson from [Peter Singer](#), and wake up to the fact that they are all the same. Each year in the United States, roughly 134,400 American babies are torn to pieces by dilation and evacuation. (157) Partial-birth abortion may have a worse reputation, but all methods yield equally monstrous results.

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Michael Spielman is the founder and director of [Abort73.com](#). His book, *Love the Least (A Lot)*, is available as a [free download](#). You can also find him on [Facebook](#) and [Google+](#). Abort73 is part of Loxafamosity Ministries, a 501c3, Christian education corporation. If you have been helped by the information available at [Abort73.com](#), please consider [making a donation](#).

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