

Abortion Amendment, Senate Bill 798 - Unfavorable Declaration of Rights - Right to Reproductive Liberty

My name is Dr. Kathryn Quinn. Thank you for reading my testimony. I am a Maryland resident and an Emergency Medicine resident physician. I submit this testimony on my own behalf and not on behalf of my employer. Along with many other liberal leaning initiatives, I support universal healthcare, improved maternity leave, prison reform, immigration justice, and strengthening education.

And as your constituent I strongly urge this committee to vote down amendment SB798 on the basis of democratic principles. I don't expect us to agree today on when human life begins, but I do appreciate that we share a concern for the health and empowerment of women.

My Clinical Experience Providing Healthcare to Women

Each month, women walk into our ER suffering sepsis following a dilation and curettage abortion. Others come to us seeking the full range of alternatives that the abortionist would not discuss. One woman asked me to perform an ultrasound simply to show her the baby as the person at the abortion facility—I word-for-word quote—“would not show me the screen.” Time and again, women state that based on race, age, and socioeconomic class, they felt coerced by providers into an abortion, leaving them with the opposite of a free choice.¹ And on the worst day, I explained to a woman that her uterus was ruptured by the abortion and had to be removed. She will never be able to bear children again. This is not a first for our department.

I have watched my pro-choice colleagues react with indignation each time another patient arrives following reckless treatment by the abortion industry. Do no harm, a foundational commitment of our profession is betrayed by abortion providers not only by taking the life of the preborn child but by damaging the health of the mother. Women are being lied to when they are told that “abortion is healthcare”—when abortions are not held to the standards of healthcare. Codifying something that not only kills children but is an unregulated, manipulative attack on women's bodies goes against Democratic and Republican principles alike. This amendment will result in a significant increase in the numbers of women's health issues across Maryland.

Important Distinction Between Elective and Indicated Abortions

As a woman and a physician, I would like to speak to the distinction between elective abortions and medically indicated abortions. Many abortion advocates impune this distinction, but as a physician I can assure you that it is real, commonsensical, important, and valuable for the highest quality healthcare.

¹ One Black woman told me that she had undergone seven abortions, none of which she wanted, because her doctors had pressured her to do so, arguing that in her poverty she would not be a competent parent. For my patients to be treated that way is racist, classist, and unacceptable.

The distinction between elective and medically indicated abortions is also essential for building a bridge of dialogue and mutual understanding between the advocates and critics of abortion. I have always considered myself “pro-life,” I have lived and worked with many fellow “pro-lifers,” and I have often been called upon to explain the pro-life position to people who decidedly do not identify with it. It is with I can assure you that when the pro-life community criticizes abortion, they primarily have elective abortion in mind. To listen to the pro-life community with this in mind is to better understand our concerns, and be able to dialogue with us.

Life-Affirming Medicine

I am proud to support the [American Association of Pro-Life Obstetricians and Gynecologists](#) (AAPLOG). AAPLOG is the leading center for medicine which affirms the life of the mother and her preborn child, for medicine which does everything in its powers to preserve the life of both patients. Unfortunately, contemporary medicine is not always able to save both lives in every situation. In those circumstances, we do what is necessary to preserve the life we can (including what could be called medically-indicated “abortions”) and we mourn the life that is lost. There is no need for a “right to abortion” to protect true healthcare. 86% to 93% of practicing OBGYN’s in the United States do not perform elective abortions (see attached studies). This is a powerful indication that healthcare does not include elective abortion.

Conclusion

I oppose abortion violence as a violation of the Hippocratic oath and the sacred duty of the doctor to serve all her patients, both those born and preborn. No one has a right to do violence to another person; there should not be a right to abortion in the Maryland Constitution. Please vote “no” on SB 798. If nothing else, I beg of you, please let my testimony disabuse you of the delusion that women want this.

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*Equality and
Justice for ALL!*



NO ON HB705
**ABORTION
AMENDMENT**