

The "morning-after pill", abortion and informed consent

by Gene Rudd, MD
Obstetrician / Gynecologist
Associate Director, Christian Medical Association

What does it mean when "morning-after pill" advocates assert to congressional leaders, "Emergency contraception cannot interrupt or disrupt an established pregnancy"?¹ The implication is that post-coital hormones ("emergency contraception" pills) do not cause abortion. Stripped of its semantic bias, however, this claim is patently *untrue*. A scientifically objective review of human development separates propaganda from fact.

Medical facts on early development

Fertilization--the union of a female's egg and a male's sperm--can occur as early as one hour after sexual intercourse. This union normally takes place in the fallopian tube. An individual's complete and unique genetic information is present upon fertilization.

Conception occurs three to five days later, as the multi-cell conceptus enters into the uterine cavity to implant. Depending on the stage of development, the developing human life at this point is called a morula, blastocyst, pre-embryo or embryo. Thus, fertilization and conception are distinct events separated by a few days.

Embryo is the term applied by the American College of Obstetricians and Gynecologists (ACOG) to the developing human being a full two weeks after fertilization.

Political agendas spur semantic amendments

Those who advocate abortion upon demand realize that moving the definition of pregnancy from fertilization to a point later in development will facilitate the acceptance of methods that end what others contend is early human life. As a result, the beginning of life becomes a moving target, semantically adjusted to suit the intent of the lobbyist, politician or politically activist medical group.

Depending on who is using the terms and for what purpose, some claim that pregnancy begins at *fertilization*, others claim it begins at *conception*, and still others claim it begins at the *embryo* stage.

Given this political situation, the phrase "established pregnancy" begs the question, "Established in *whose* opinion and *why*?" The answer is especially important in protecting the rights of patients.

Medical research indicates abortifacient action of "emergency contraception"

Does so-called "emergency contraception" have a post-fertilization effect? In simple terms, does the "morning-after pill" act to end a human life, defined as beginning at fertilization?

A recent journal article (*Obstetrics & Gynecology* 1999;93:872-6) examines these crucial questions through a review of the world's medical literature. The researchers sought to learn about the "mechanism of action" of the pills' hormones when given after intercourse. How do the pills prevent identifiable pregnancies? Is it only by preventing ovulation or by also preventing implantation of a fertilized egg?

The authors conclude that the success of these hormones in preventing a recognizable pregnancy *cannot* be simply explained by preventing ovulation. Using conservative estimates, the study concludes that other mechanisms of action are at work up to 38 percent of the time. These mechanisms include post-fertilization effects--actions against a fertilized but not yet implanted human egg.

Accordingly, those who consider life to begin at fertilization recognize the pills' mechanisms as *abortifacient*. The "morning-after pill" can end a developing human life.

Implications for informed consent

The time-honored medical ethics principle of *informed consent* demands that patients fully understand the implications of drugs they may take. Regardless of what an assembly of experts define, or fail to define, as the beginning of pregnancy, if a patient retains the moral conviction that life begins at *fertilization*, she must be made aware of information relevant to that conviction.

Given the lack of consensus over when human life begins, it is clearly deceptive to baldly assert that "emergency contraception cannot interrupt or disrupt an established pregnancy". What is really meant is that the pill does not dislodge an implanted egg or a developing embryo. To cover up the pills' lethal action on a fertilized egg is disingenuous and irresponsible.

Physicians must recognize that many of our patients hold the conviction that human life begins at fertilization. Physicians and others caring for these patients must lay their personal interpretations aside and provide these patients with relevant information about the pills' potentially abortifacient mechanisms. Legislators must candidly include such morally relevant information in communicating with their constituents on this issue. Abortion rights activists and other pill promoters must avoid deceptive language that obscures the lethal effects of these drugs on what many believe to be early human life.

The purpose of informed consent is not to protect the personal interpretations of the physician, the rhetoric of the politician or the agenda of the lobbyist, but rather the safety, the rights and the convictions of the *patient*.

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¹ From a letter by Planned Parenthood and other organizations dated October 10, 2001 and distributed to members of the U.S. House of Representatives.