

Testimony for Dr. Valerie French
January 21, 2020

I am a board-certified obstetrician-gynecologist practicing in Kansas City. I appreciate the opportunity to share my thoughts and experiences as a physician as they pertain to the proposed constitutional amendment to ban abortion in Kansas.

Abortion is healthcare. By ensuring access to safe abortion, we are protecting women's lives. This amendment would almost eliminate abortions in Kansas. This will undoubtedly result in women getting unsafe abortion. As a physician, I have seen how women try to take matters into their own hands when abortion restrictions make getting a safe abortion onerous. I cared for a young woman who had placed some unknown caustic substance in her vagina because she wanted to end her pregnancy. She became quite ill and had to stay in the hospital for several days. I want all women to have the option of ending a pregnancy safely.

Abortion is one of the safest medical procedures performed in the United States. Data, including from the Centers for Disease Control, show that abortion has a greater than 99 percent safety record. Medically unnecessary, burdensome regulations that single out abortion providers must be recognized as part of an effort to drastically reduce access to safe and legal abortion. As a physician caring for women every day, the health and safety of women is my top priority. Abortion must be safe, legal and accessible, no matter what your zip code. I trust my patients, the women of Kansas, to make their own health decisions.

As a physician caring for women every day, the health and safety of women is my top priority. When my patients ask me about the safety of abortion, I can confidently tell them that abortion is one of the safest medical procedures performed in the United States.¹ Data, including from the Centers for Disease Control, show that abortion has a greater than 99 percent safety record. Abortion is safer than a root canal.¹ It is safer than a shot of penicillin. Medically unfounded laws that erase safe abortion will harm women and their families in our communities.

This amendment is a part of a nationwide movement to eliminate access to safe abortion which is out of touch with American values and the real, lived experiences of people in this country. One in four women choose to have an abortion in their lifetime and seven in ten Americans support legal access to abortion.² I'd like to share true stories about women who I have cared for who had an abortion.

I cared for a woman a few months ago, I'll call her Susanna. Susanna and her husband were delighted to discover their first pregnancy, which passed without complications. She delivered a baby girl, bringing joy to their family. But their baby girl got very sick very fast and ultimately died at nine days old. Susanna explained that she and her husband were carriers of a rare genetic condition called autosomal recessive polycystic kidney disease. They had a 1 in 4 chance of having a baby with the disease, which is often fatal. Susanna and her husband grieved the loss of their baby. With modern medicine, they were able to learn early in their next pregnancy that their son was not affected by the disease. They delighted in having a child and wanted to give their son a sibling. But early genetic testing found that that Susanna's third pregnancy was also affected by the condition. After reviewing her diagnosis, Susanna and her husband decided to end the pregnancy. They did not feel that they could endure the pain that they had experienced with their first pregnancy. I have shared great joy and great pain with patients as they navigate a pregnancy. The complexity of the decision families face when hearing a devastating diagnosis and difficult prognosis cannot be understood by a legislative committee. Even if you heard the

stories of hundreds of families that have faced this decision, you would only be at the very tip of the iceberg. This decision is an intricate balance of medical risk, personal spirituality, and family values among so many other things. Women who have a pregnancy complicated by fetal abnormalities, like my patient, are thinking of the suffering that their baby would endure if they delivered. They choose abortion out of compassion.

I took care of another woman, who I will call Beth. Beth worked as a nurse at my hospital and had three children. After the birth of her last child, she and her husband knew they had completed their family and Beth had a tubal ligation to prevent future pregnancies. At age 43, when her youngest child was 8 years old, Beth went to the emergency room because she felt profoundly fatigued. It was there that she discovered that she was pregnant. How did this happen? She asked med over and over. I did everything right. Beth didn't feel that she could carry another pregnancy at her age and still care for her children. She decided to have an abortion and I trust that she did the right thing for herself and her family.

Let me be crystal clear: facts are important. Abortion is a part of health care. In fact, a recent non-partisan, rigorous scientific report from the National Academies of Sciences, Engineering and Medicine affirms that abortion is safe and effective in all forms.³ The same study found that the largest threat to quality abortion care is the litany of medically unnecessary restrictions, like this proposed ban. Laws like this raise costs, delay procedures for women who have to travel out of state, and ultimately put women's health at risk.

If I have learned one thing from the many journeys I have taken with patients in their pregnancies, it is that you cannot understand a situation until it happens to you. I have learned that women can and must be trusted to make the best decisions for themselves and their families. I stand with my patients. I support continued access to safe, legal and accessible abortion.

Valerie French, MD, MAS

1. Upadhyay UD, Desai S, Zlidar V, et al. Incidence of emergency department visits and complications after abortion. *Obstet Gynecol*. 2015;125(1):175-183. doi:10.1097/AOG.0000000000000603
2. New abortion laws are too extreme for most Americans, poll shows. PBS NewsHour. <https://www.pbs.org/newshour/politics/new-abortion-laws-are-too-extreme-for-most-americans-poll-shows>. Published June 7, 2019. Accessed January 16, 2020.
3. National Academies of Sciences, Engineering, and Medicine, Health and Medicine Division, Board on Health Care Services, Board on Population Health and Public Health Practice, Committee on Reproductive Health Services: Assessing the Safety and Quality of Abortion Care in the U.S. *The Safety and Quality of Abortion Care in the United States*. Washington (DC): National Academies Press (US); 2018. <http://www.ncbi.nlm.nih.gov/books/NBK507236/>. Accessed January 15, 2020.