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ABORTION POLITICS THREATENS U.S. ECONOMY

by Cynthia Dudek

The economic consequences of *Roe v. Wade*, which legalized abortion in 1973, and the first test tube baby born in 1978, are cannibalizing our economy. Both have numerous and catastrophic health consequences, which result in skyrocketing health care costs and inflation.

In 1970, National Health spending was reported at \$75 billion. There was a dramatic increase to \$253 billion in 1980, \$714 billion in 1990, \$1.354 trillion in 2000, \$1.973 trillion in 2005, with projected figures of \$2.394 trillion in 2008.¹ Costs are expected to increase, reaching \$4.2 trillion in 2016, or 20 percent of GDP.²

Health care spending increased 78 percent between 1996 and 2006. In 2008, the annual per person costs are projected to be \$7,868.³ If we cannot afford medical insurance now, how do we expect consumers and businesses to afford health care in 2016? What about the impact on corporate profits and investment returns?

Abortion Debate

Abortion consequences may be short term, occurring at the time of the abortion, or within six weeks of the abortion. Other consequences may not be known by a woman until sometime in the future.

The Michigan Department of Community Health advises Abortion Providers of the following consequences:

Shock (post-operative, septic), circulatory collapse, uterine perforation, cervical laceration, hemorrhage, allergic response, renal failure due to allergic response, infection, death, renal failure not due to allergic response, damage to pelvis, organs or tissues (excluding uterus, cervix), metabolic disorder, embolism, retained products.⁴

Michigan's website on Informed Consent for Abortion addresses the emotional consequences of abortion, and references the relationship between prior induced abortions and preterm births.

Unfortunately for women, they misrepresent pregnancy deaths and hospitalizations, as there is a failure to statistically link these consequences, so that a determination could be made, as to which are linked to prior abortions. This distorted picture provides an incentive to abort, especially in young females who are already scared about telling their parents, and/or dealing with the reality of a pregnancy outside marriage. I can easily imagine these

young females thinking, "I didn't know that pregnancy was more dangerous than abortion."

We cannot ignore the fact that forced abortion is part of America's reality. There are no safeguards to protect girls and women who are not given the "choice" to have their babies. There are no safeguards to protect a woman's future insurability. There are no safeguards to protect the economic security of policyholders, creditors, or the public from abortion consequences.

Decisions have been made that negatively impact generations of women based on half truths and lies. This poses serious problems for those women, their future children, their families, and for all of society who are paying for the costs associated with abortion consequences.

Environment of Adverse Selection

Economists acknowledge "Adverse Selection"⁵ and "Moral Hazard"⁶ as two main causes of market failure. Since these are main causes which negatively impact insurance, and therefore every sector of society, they must be addressed, and not dismissed, ignored, or politicized.

"Moral hazard" simply means that the person who is causing the problem is not paying for the consequences of their actions, or they may actually be profiting from them.

Insurance companies use the term "adverse selection" to describe a serious economic condition in their risk pool. The use of a broad term is necessary as there may be numerous sources associated with various problems, so those acting as insurers should be diligent in identifying and managing risks, to protect economic security.

Consequences of prior induced abortions have many tentacles that result in increased morbidity and mortality for women, and their future children.

Consequences include: cervical incompetence, placenta previa, ectopic pregnancies, Asherman's Syndrome, post traumatic stress disorder, endometrial ossification, post-traumatic stress disorder, substance abuse and more. For more information see, "Women's Health After Abortion—The Medical and Psychological Evidence".⁷

While the National Cancer Institute (NCI) has denied the link between abortion and breast cancer, they have arrived

at a contradictory conclusion, as they admit to the protective effects of pregnancy:

- “Early age at first term birth is related to a lifetime decrease in breast cancer risk.
- Increasing parity (the number of children a woman has) is associated with a long-term risk reduction, even when controlling for age at first birth.
- The additional long-term protective effect of young age at subsequent term pregnancies, is not as strong as the first term pregnancy.
- Nulliparous women (those who have not given birth) have approximately the same risk as a woman with a first term birth around age 30.”⁸

The NCI acknowledges what has never been—nature provides a biological mechanism which reduces a woman’s risk of breast cancer. A first term pregnancy, early age at first term birth, and having more children, result in a decreased risk of breast cancer. This is a result of the biological mechanism that takes a woman through a differentiation stage of breast development, which allows her to breast feed her child.

There are four stages of breast development. By the end of the 3rd trimester, 85 percent of the breast is fully mature to Type 4 lobules, and only 15 percent remain immature cancer susceptible lobules, leaving fewer places for cancer to start. At delivery, the mother’s breasts are now predominantly Type 4 lobules. They are fully mature and resistant to carcinogens, resulting in lower long-term risk of breast cancer for the mother.⁹

In their “Understanding Cancer Series: Estrogen Receptors/SERMs,” the NCI acknowledges that Estrogens are signaling molecules which exert their effects by traveling through the bloodstream and interacting with cells in a variety of target tissues, with the breasts and the uterus being the two main targets. They also acknowledge that estrogen can be both a beneficial and harmful molecule, causing damage at the cellular level. This statement confirms what is already known in the scientific community, which is: estrogen acts as a mitogen (triggers cell division) and a genotoxin (cellular poison).

Currently, eight Medical Organizations recognize the abortion/breast cancer link.¹⁰ The Journal of American Physicians and Surgeons published “The Breast Cancer Epidemic,” acknowledging seven risk factors, and indicating that abortion is the “best predictor of breast cancer,” and fertility is also a useful predictor.

The first pregnancy is critical. The first pregnancy is a unique, unrepeatable event and what happens with this pregnancy impacts a woman’s future health and her security.

The preterm birth and the abortion/contraceptive breast cancer links are both of great concern. Abortion is a very common procedure, with abortions exceeding a million a year.

Damage to the womb or the cervix is of great concern because of the initial catastrophic nature of these claims, as well as the long term costs associated with ongoing medical care. The cost of preterm births is dependent on how early the child is born. It is possible for claims to cost \$200,000; \$300,000; \$500,000 or more. In addition, the special needs of children have to be addressed in terms of delayed developmental concerns, as well as the emotional impact on women and their families.

In an average week, 79,584 babies were born in 2005. Of those, 10,056 were born preterm, 6,511 babies were born low birth weight, and 536 babies died before their first birthday.¹¹

Eleven percent of newborns covered by employer health plans are born prematurely. The direct health care costs to employers for a premature baby average \$41,610, which is 15 times higher than the \$2,830 for a healthy, full-term delivery. Additional costs to employers in lost productivity average \$2,766.¹² Hypothetically, the cost of the 861,484 preterm births and low birth weight babies, at an average cost of \$41,610, totals \$35,846,349,240.

That which is good: fertility, marriage, and the natural family should be built up and protected from those things which harm and destroy.

Tensions are high and rightfully so. Technology, medicine, and politics have separated themselves from moral reason in the name of progress, and a bogus description of freedom. They have become destructive forces that threaten the common good, and the economic security of our nation, and indeed our world.

– Cynthia Dudek is a health insurance agent working to educate others on the economic issues associated with legalized immorality.

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4. State of Michigan, Department of Community Health, *Physician’s Handbook on the Reporting of Abortions*, p. 17
5. *Economics A-Z*, “Adverse Selection”
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