lifefacts/

ABORTION IS DAMAGING WOMEN

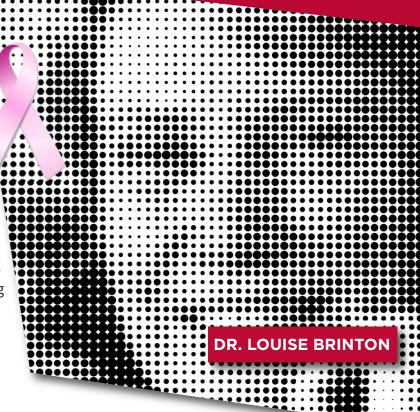
/the physical harm caused

Abortion is invasive and unnecessary and the evidence shows that it offers a real threat to women's physical health.

DR. LOUISE BRINTON recently published research in the JOURNAL OF CANCER EPIDEMIOLOGY, BIOMARKERS AND PREVENTION, which concluded that abortion

increases the risk of triple-negative breast cancer in women. This is only one of many studies that conclude that there are real and lasting negative physical consequences to women following abortion.

Here's what some of these studies verified:



- Abortion boosts risk of breast cancer by 193% giving birth lowers the risk.¹
- Abortion increases the risk of a specific type of cancer called triple-negative by 40%.²
- Abortion is one of the major causes of breast cancer. ³
- Women who had a previous abortion have a 60% higher risk of miscarriage during a later pregnancy. ⁴
- Post-abortive women run a higher risk of future infertility, stillbirths, miscarriages and premature births. ⁵
- Hemorrhage, or heavy bleeding, is one of the most common after-effects of abortion. ⁶
- Complications such as hemorrhage or uterine atony, incomplete abortion, and/or inadvertent perforation of the uterus, increase the risk of infection after an abortion.⁷
- Compared to women who delivered, those who aborted had a statistically higher risk of dying from circulatory diseases. ⁸
- 4 Abortion can cause endometritis (infection of the uterine lining) and can lead to toxic shock syndrome, which can be fatal. ⁹
- Compared to women who give birth, women who abort have an elevated risk of death. ¹⁰

THE EVIDENCE IS VERY CLEAR: ABORTION KILLS CHILDREN AND HURTS WOMEN.

THE REALITY

'Many girls and women have wound up in the emergency room, bleeding uncontrollably or deathly sick from infection. Many have had to undergo hysterectomies. Quite a number of women and girls have died from abortion on demand.'

KEVIN SHERLOCK, THE SCARLET SURVEY

'After the inspectors left, it was business as usual. The very next abortion patient ended up in the emergency room...' MARK CRUTCHER, LIME 5: EXPLOITED BY CHOICE

'Abortion is a simple procedure except for the uterus' total intolerance to poor technique... In the medical practice, there are few surgical procedures given so little attention and so underrated in its potential hazard as abortion...it is a commonly held view that complications are inevitable.'

> ABORTIONIST WARREN HERN, *ABORTION PRACTICE* (J.B. LIPPENOT COMPANY)

'I had complications, just like everybody else. I have perforated uteruses. I have had all kinds of problems - bleeding, infections Lord knows how many of those women are sterile now. I remember getting called down to my chairman's office because a young lady that I had done an abortion on showed up...and the abortion had been incomplete. I had not done my job right, and she passed an arm or a leg and she freaked out because she didn't realize what happened.'

DR. ANTHONY LEVANTINO, 'MEET THE ABORTION PROVIDERS CONFERENCE'

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'A young woman about 20 years old came to the ER because she was feeling very sick. The following days revealed that the pneumonia was just a part of the problem—she had overwhelming sepsis, which is infection throughout her entire body, which had at its source, the abortion. ... This woman died. The medical diagnosis reads 'severe pain' - the real cause is abortion. The record reads 'vaginal bleeding' the real cause is abortion. The operative note says 'ruptured ectopic pregnancy and internal hemorrhage' - the real cause is abortion. The autopsy states 'cause of death - overwhelming sepsis'—the real cause is abortion.'

EMERGENCY ROOM PHYSICIAN LENORA BERNING, M.D., ABORTIONISTS NOT HELD ACCOUNTABLE FOR MISTAKES

1. Hajian-Tilak, K.O., Kaveh-Ahangar, T. (3 April 2010). 'Reproductive factors associated with breast cancer risk in northern Iran.' *Medical Oncology*. 2. Dolle J, Daling J, White E, Brinton L, Doody D, et al. (2009). 'Risk factors for triple-negative breast cancer in women under the age of 45 years.'

Cancer Epidemiology, Biomarkers & Prevention Journal, 18(4).

- 3. Carroll, Patrick. (2007). 'The Breast Cancer Epidemic,' The Journal of American Physicians and Surgeons.
- 4. Maconochie, N., P. Doyle, S. Prior, R. Simmons. (December 2006). 'Risk factors for first trimester miscarriage-results from a
- UK-population-based case- control study,' BJOG: An International Journal of Obstetrics & Gynaecology.
- 5. Strahan, T. (2002). Detrimental Effects of Abortion: An Annotated Bibliography with Commentary. Springfield, IL: Acorn Books.
- 6. Stubblefield, P.G., Carr-Ellis, S., and Borgatta, L. (2004). 'Methods for induced abortion.' Obstetrics and Gynecology.
- 7. Owen, J., Gilstrap, L.C., Cunningham, F.G., and Van Dorsten J.P. (2002). Pregnancy termination: First and second trimesters. New York: McGraw-Hill.
- 8. Reardon, D. et al. (2001). 'Suicide Deaths Associated with Pregnancy Outcome:
- A Record Linkage Study of 173279 Low Income American Women.' Clinical Medicine and Health Research.
- 9. Fischer, M.D., Bhatnagar, J., Guarner, J., Reagan, S., Hacker, J.K., Van Meter, S.H., Poukims, V., Whiteman, D.B., Iton, A., Cheung, M., Dassey, M.D.,
- Shieh, W.J., and Zaki, S.R. (1 December 2005). 'Fatal toxic shock syndrome associated with clostridium sordiellii after medical abortion.' New England Journal of Medicine, 353(22): 2352-2360.
- **10.** Reardon D.C., Ney P.G., Scheuren F.J., Cougle J.R., Coleman, P.K., Strahan T. (August 2002).

'Deaths associated with pregnancy outcome: a record linkage study of low income women.' Southern Medical Journal, 95(8):834-841.



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