

Stewardship of Reproductive Healthcare in South Carolina

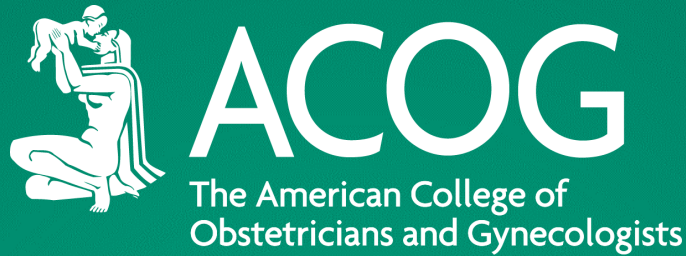
Dawn Bingham, MD, MPH, FACOG

ACOG SC Section Chair and Legislative Chair

Assistant Professor, USC-Colombia School of Medicine

OBJECTIVES

- **Understand immediate and long-term consequences of abortion bans on reproductive health**
- **Recognize how abortion bans harm the ability to practice evidence-based medicine in all fields of medicine**



News Releases

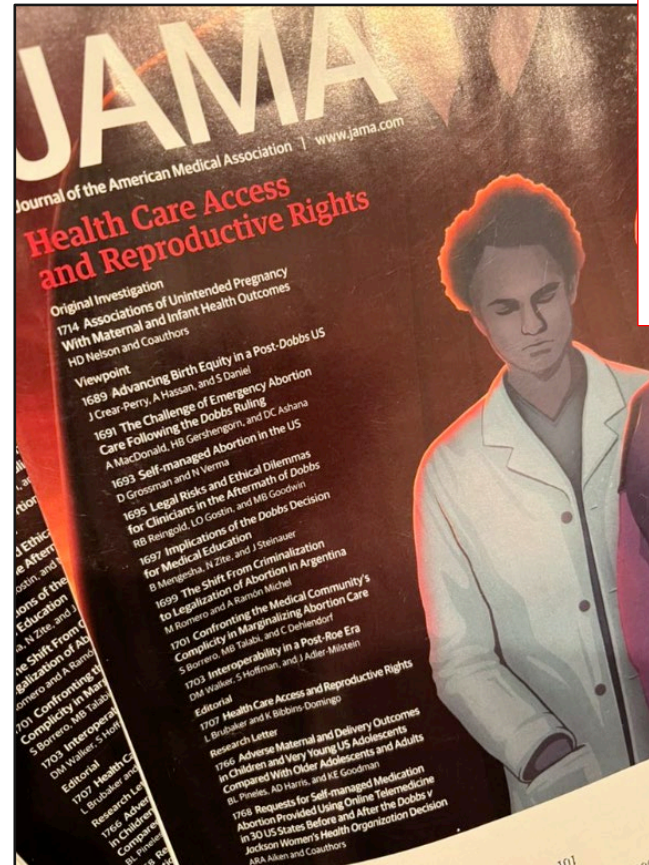
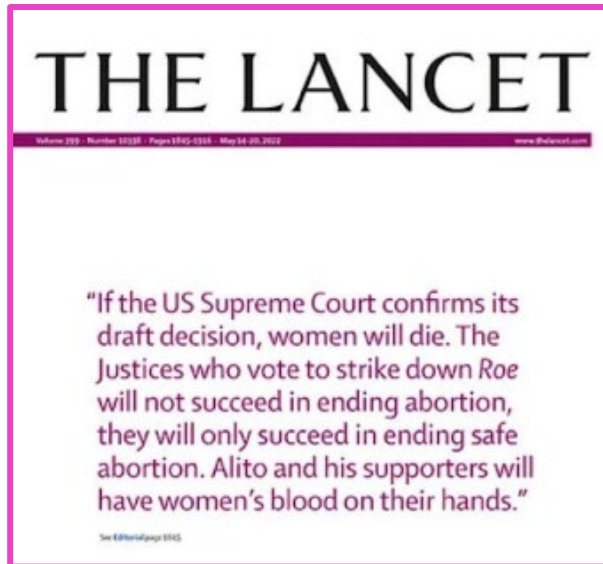
Jul 7, 2022

More Than 75 Health Care Organizations Release Joint Statement in Opposition to Legislative Interference

Our patients need to be able to access—and our clinicians need to be able to provide—the evidence-based care that is right for them, including abortion, without arbitrary limitations, without threats, and without harm.

American Medical Association; Academy of Family Physicians;
American Academy of Pediatrics; American Board of Internal
Medicine; American Board of Surgery; American Board of
Anesthesiology; and over 75 more

Major Medical Journals Agree: Abortion is Essential Healthcare



Definitions of Abortion

- Threatened Abortion
- Incomplete Abortion
- Spontaneous Abortion
 - 23 million a year globally;
28% of all fertilizations
- Missed Abortion
- Induced Abortion – 18%
- Medication Abortion –
 - 54% in the US, 74% in SC



Setting the Stage

Current South Carolina law = abortion is legal up to 21 weeks, 6 days

- Lethal fetal anomalies and life-threatening maternal illness
- 18% of all fertilizations in the United States
- **1 in 4 women access abortion care in their lifetime**

Medication Abortion is Legal in South Carolina

- 74% of all terminations
- SC is one of only 3 states that criminalizes self-managed abortion
- SC does not allow medication abortion by telemedicine.

Pregnancy is not a Benign Condition

- The mortality rate associated with abortion is low (0.6 per 100,000 legal, induced abortions)

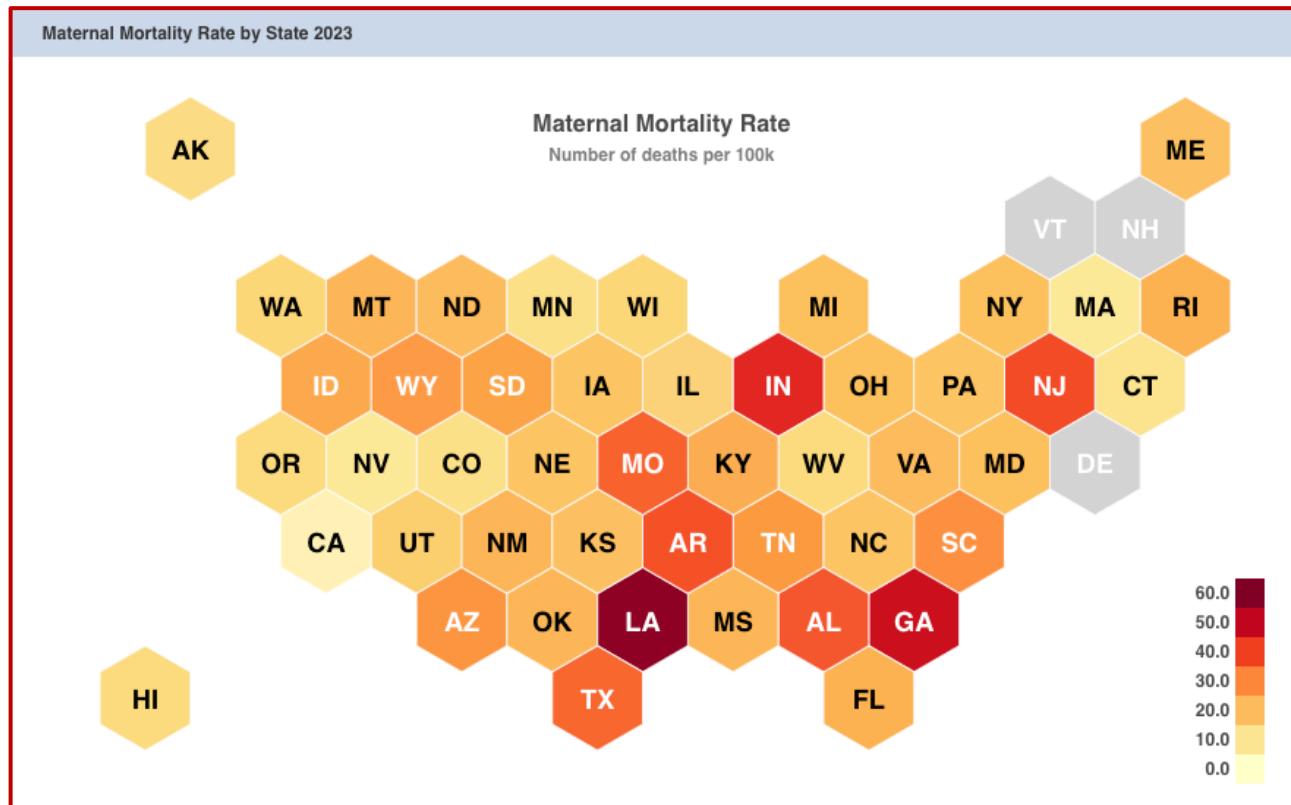
**ABORTION IS
A SAFE AND
SIMPLE HEALTH
INTERVENTION**

- Risk of death associated with childbirth (Maternal Mortality) in USA is approximately 32.9 per 100,000 pregnancies, up from 23.8 in 2020

Raymond EG, Grimes DA. The comparative safety of legal induced abortion and childbirth in the United States. *Obstet Gynecol* 2012;119:215–9. (Level III) [[PubMed](#)] [[Obstetrics & Gynecology](#)]

Pregnancy is not a Benign Condition

- Maternal Mortality in South Carolina is 27.9 per 100,000 births, ranking in the top ten of worst states to give birth.



Raymond EG, Grimes DA. The comparative safety of legal induced abortion and childbirth in the United States. *Obstet Gynecol* 2012;119:215–9. (Level III) [[PubMed](#)] [[Obstetrics & Gynecology](#)]

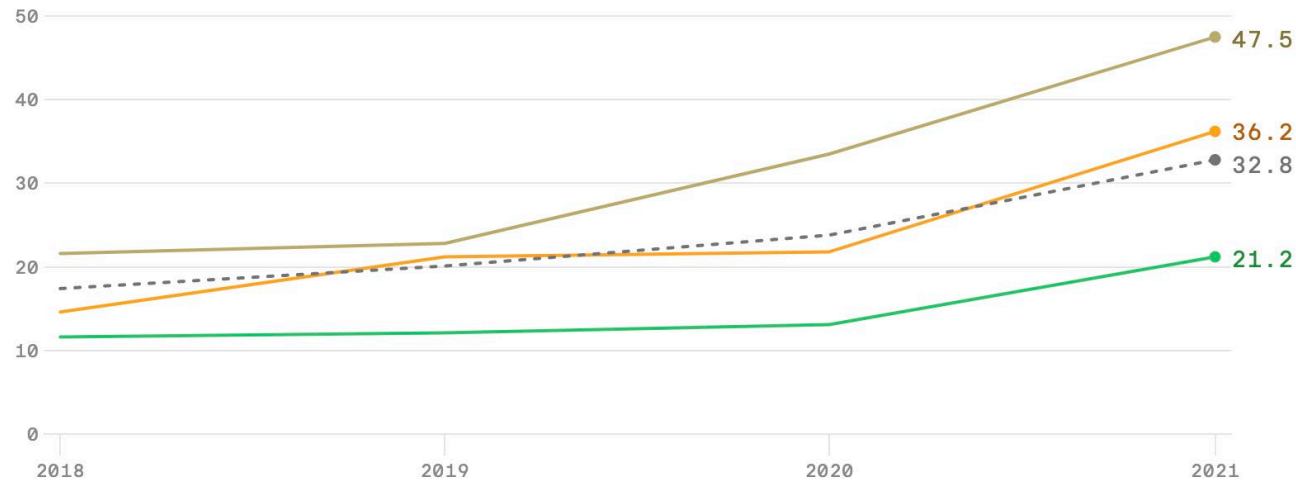
Hoyert DL. Maternal mortality rates in the United States, 2020. *NCHS Health E-Stats*. 2022. DOI: <https://doi.org/10.15620/cdc.113967>.

Pregnancy is not a Benign Condition

Maternal deaths, grouped by state abortion status

Maternal deaths per 100k live births

-- U.S. — Supportive — Restrictive — Banned

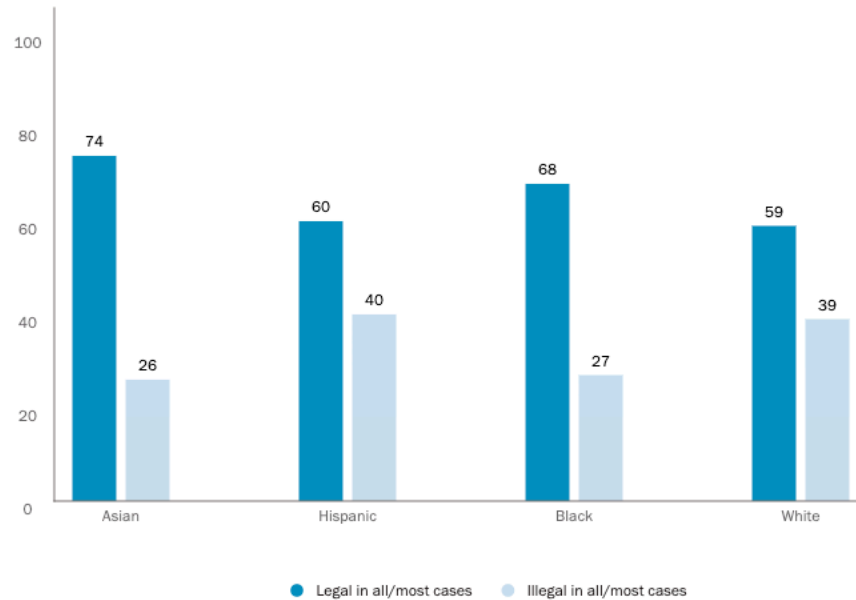


Data: Gender Equity Policy Institute; Chart: Axios Visuals

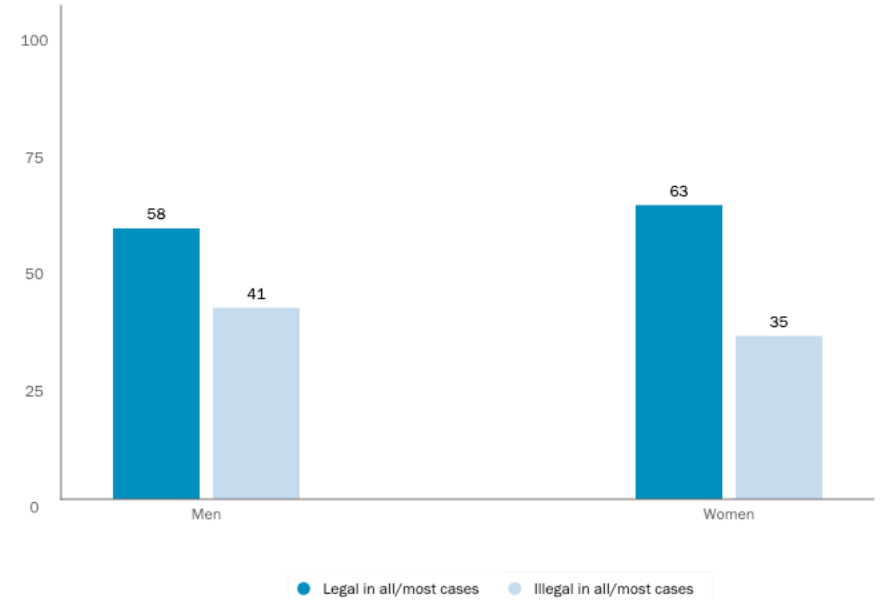
- The U.S. has the highest maternal mortality among developed nations, made worse by abortion restrictions
- Women in states with abortion bans are nearly 3x more likely to die during pregnancy

Public Opinion on Abortion- Favorable

- **61% say abortion should be legal in all or most cases**, while 37% say it should be illegal in all or most cases.



PEW RESEARCH CENTER



PEW RESEARCH CENTER

Consequences of Abortion Bans and Personhood Laws

- **Medical – morbidity and mortality, diminishes medical profession**
- Legal – implications for IVF, taxes, criminal statutes, constitutional rights
- Economic – decreased economic mobility
 - Denying a woman an abortion creates economic hardship and insecurity which lasts for years.
 - Women turned away from getting an abortion are more likely to stay in contact with a violent partner. They are also more likely to raise the resulting child alone.
 - The financial wellbeing and development of children is negatively impacted when their mothers are denied abortion.
- Personal –the ability to make personal choices is integral to the growth of humans

Abortion Bans Endanger Actual Lives- Experiences During Ban 2022

- Medications not available to women of reproductive age
- Miscarriages not treated appropriately, people not seeking care
- Mistrust - Menstrual history not shared due to fear of 'tracking'
- Dilation and Curettage (D&C) -
 “You can’t do that because that surgery is illegal now.”
- Insurance giants changing actuarial tables – decreased life expectancy for women, increased premiums

Abortion Bans Endanger Actual Lives- Experiences During Ban 2022

- Ectopic pregnancy has cardiac activity – ‘can we operate?’
- IUD failed; patient threatened suicide
- PPRROM patient told to ‘wait it out in North Carolina’
- Mediastinal mass; no surgery/chemo available
- Increase in BTL requests – surgical risk, availability
- *Breaking news: 4x terminations*

Abortion Bans Endanger Medical Training and Health Systems

- Abortion training opportunities are required for accreditation of residency programs
 - SC programs already planning out-of-state training, with its accompanying licensure and logistic issues.
- Female students/residents with forced pregnancy
 - Leave of absence, childcare during clerkships, forgo medical degree.
 - Contributes to the current physician shortage.

Abortion Bans Endanger Medical Training and Health Systems

- Medical education degraded if abortion skills can not be taught
 - Puts personal beliefs/ideology over patient beliefs about what is best for themselves given risks/benefits
 - Can't perform informed consent
 - 'Carve outs' for exceptions do not address individual patient circumstances, beliefs, priorities
- Health care system is predominantly staffed by females
 - Already short-staffed, health systems suffer as a larger fraction of the workforce is forced to be pregnant, have complications, or travel for abortion care.

ACOG Guidance:

“Understanding and Navigating Medical Emergency Exceptions in Abortion Bans and Restrictions”

- *“ACOG has long affirmed that medical knowledge is not static... Fundamentally, there is no one-size-fits-all law that can take every individual, family, or medical condition into account, making legislative interference in the practice of medicine incredibly dangerous.”*

<https://www.acog.org/news/news-articles/2022/08/understanding-medical-emergency-exceptions-in-abortion-bans-restrictions>

Abortion Bans Endanger Availability of all Physicians in SC

BUSINESS

A challenge for antiabortion states: Doctors reluctant to work there

Recruiters say OB/GYNs are turning down offers, a warning for conservative-dominated states already experiencing shortages



By [Christopher Rowland](#)

August 6, 2022 at 12:05 p.m. EDT

- Recruiters struggling to get physicians to consider coming to SC because of the overt legislative interference in the practice of medicine –
 - Climate of hostility, criminalization towards doctors and other health care workers
- Right of conscience to provide care according to training
 - Evidence-based, standard of care option as approved by all major medical societies

Abortion Bans Endanger Availability of all Physicians

Los Angeles Times

Column: As professionals flee antiabortion policies, red states face a brain drain

- Chaos and delay on our health care teams
 - Detracts time and resources from other patient care
 - Patient perceive the confusion, leads to distrust
 - ‘Carve outs’ for exceptions seeks to stigmatize abortions in the guise of being ‘merciful’ to only extreme cases

EDITOR'S PICK

SC abortion bill allowing death penalty grabbed headlines. But it's going nowhere.

BY SEANNA ADCOX SADCOX@POSTANDCOURIER.COM
MAR 19, 2023

SC Chapters of Other Medical Associations and SC OB/GYN Society

Over 600 health care professionals from across the state of South Carolina signed the open letter to state lawmakers opposing legislation restricting reproductive health care.

This makes it clear that the health care community in South Carolina is firmly opposed to political interference in the patient-clinician relationship.



South Carolina Academy of Family Physicians

PO Box 312 • 214B West Laurens St. • Laurens, SC 29360



**The American College of
Obstetricians and Gynecologists**
WOMEN'S HEALTH CARE PHYSICIANS



**SOUTH CAROLINA CHAPTER
AMERICAN COLLEGE OF SURGEONS**
Inspiring Quality. Highest Standards. Better Outcomes.

South Carolina Chapter

INCORPORATED BY SOUTH CAROLINA

American Academy of Pediatrics



June 30, 2022

The South Carolina Section of the American College of Obstetrics and Gynecology, representing over 700 obstetrician-gynecologists across our state, condemns the U.S. Supreme Court's decision in the case of *Dobbs v. Jackson Women's Health Organization*. The findings in this decision overrule decades of legal precedent that have ensured access to comprehensive family planning, including both contraception and abortion. ACOG South Carolina Section continues to support access to safe and legal pregnancy termination which is essential to reproductive health and supports access to the full spectrum of reproductive health care. We are also joined in our support of access to safe and legal abortion by the SC Chapter of the American College of Surgeons, SC Chapter of the American Academy of Pediatrics, and the South Carolina Oncology Society.



My patients, **their decision.**



Everyone's personal circumstances around each pregnancy and their family planning decisions are different. Access to the full spectrum of reproductive health care is especially important in South Carolina, which ranks at the bottom of all measures in maternal health and infant mortality: The March of Dimes gives South Carolina an F rating, and South Carolina has one of the highest rates of maternal mortality in the developed world. For the health and well-being of South Carolina patients and the communities we care for, we urge you to reject laws and legislation that impede access to evidence-based reproductive health care. We will never stop striving to take care of the people of South Carolina.

Negatively Affects all Medical Specialties

CLINICAL
IMAGING

PATIENTS & PRACTICE, POLICY & EDUCATION | VOLUME 95, P62-64, MARCH 2023

Antibortion laws and reproductive health information in nuclear medicine

Michael Oumano • Elizabeth Dibble

Published: January 02, 2023 • DOI: <https://doi.org/10.1016/j.clinimag.2022.12.009> • Check for updates

This Issue Views 5,600 | Citations 1 | Altmetric 27

Medical News & Perspectives

October 12, 2022

Threats to Evidence-Based Care With Teratogenic Medications in States With Abortion Restrictions

Rita Rubin, MA

JAMA. 2022;328(17):1671-1673. doi:10.1001/jama.2022.11489



Medical News Website



Medical News Website



JAAD

Journal of the
American Academy of Dermatology

COMMENTARY | VOLUME 87, ISSUE 5, P1225-1226, NOVEMBER 2022

The Supreme Court abortion ban impact on dermatology

Jenna Yousif, BA • Taylor Adlam, MD • Jane M. Grant-Kels, MD • Mehdi Farshchian, MD, PhD

Published: July 18, 2022 • DOI: <https://doi.org/10.1016/j.jaad.2022.07.026> • Check for updates

July 13, 2022

Reproductive Rights in Neurology—The Supreme Court's Impact on All of Us

Sara C. LaHue, MD^{1,2}; Dawn Gano, MD, MAS^{1,3}; Riley Bove, MD, MSc^{1,2}

» Author Affiliations

JAMA Neurol. 2022;79(10):961-962. doi:10.1001/jamaneurol.2022.2347

This Issue Views 2,994 | Citations 0 | Altmetric 42

Viewpoint

August 15, 2022

The Pediatrician in the Post-Roe Landscape

Tracey A. Wilkinson, MD, MPH¹; Julie Maslowsky, PhD²; Elise D. Berlan, MD, MPH^{3,4}

» Author Affiliations

JAMA Pediatr. 2022;176(10):967-968. doi:10.1001/jamapediatrics.2022.2868

Full
Text

The US Supreme Court decision in the *Dobbs v Jackson* case has the potential to instantly destabilize the landscape of reproductive health care access for adolescents and young adults (AYAs). With federal legal protection to abortion access no longer in place, states will permit varying degrees of access, creating challenges for both AYAs and pediatricians alike. Many of the new restrictions are occurring in states where AYAs' reproductive health care access is already restricted and unintended pregnancy rates are higher than average.¹

Negatively Affects all Medical Specialties

> [JAMA Psychiatry](#). 2023 Feb 8. doi: 10.1001/jamapsychiatry.2022.4962. Online ahead of print.

Abortion Restriction and Mental Health

Katherine L Wisner¹, Paul S Appelbaum²

Affiliations + expand

PMID: 36753289 DOI: [10.1001/jamapsychiatry.2022.4962](#)

No abstract available

> [Acad Emerg Med](#). 2022 Dec;29(12):1414-1421. doi: 10.1111/acem.14609. Epub 2022 Nov 3.

Post-Roe emergency medicine: Policy, clinical, training, and individual implications for emergency clinicians

Margaret E Samuels-Kalow¹, Pooja Agrawal², Giovanni Rodriguez¹, Amy Zeidan³, Jennifer S Love⁴, Derek Monette¹, Michelle Lin⁵, Richelle J Cooper⁶, Tracy E Madsen⁷, Valerie Dobiesz⁸

Affiliations + expand

PMID: 36268814 PMCID: PMC9772035 (available on 2023-12-01) DOI: [10.1111/acem.14609](#)



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Journal of the American College of Cardiology

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Overtuning *Roe v. Wade*: Increased Prevalence and Economic Impacts of Congenital Cardiac Defects GET ACCESS

Cardiovascular Medicine And Society

Ashwin Palaniappan, David Blitzler, Emile A. Bacha, and Brett R. Anderson

J Am Coll Cardiol. 2023 Feb, 81 (7) 703-704

| [VIEW FULL TEXT](#) | [PDF](#)

Editorial > [Cureus](#). 2022 Nov 14;14(11):e31506. doi: 10.7759/cureus.31506.

eCollection 2022 Nov.

Abortion Is a Right: Perspectives of Family Medicine Physician Residents

Anita Vasudevan¹, Briga Mullin¹, Reece Fenning¹, Guille Freschl¹, Jacqueline Mostow², Hannah Bogen³, Aljane Whitaker³, Zach Anderson⁴, Alex Su⁵, Seethim Naicker⁵, Yvonne Chow⁶, Jennifer Tsai⁶, Basilia Oseguera⁷, Justin Chin⁷ ⁸

Affiliations + expand

PMID: 36540456 PMCID: [PMC9754741](#) DOI: [10.7759/cureus.31506](#)

Free PMC article

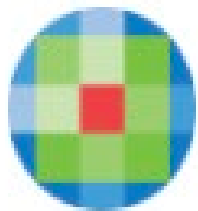
Abortion is

- ✓ **safe**
- ✓ **lifesaving**
- ✓ **common**
- ✓ **necessary**
- ✓ **essential health care**



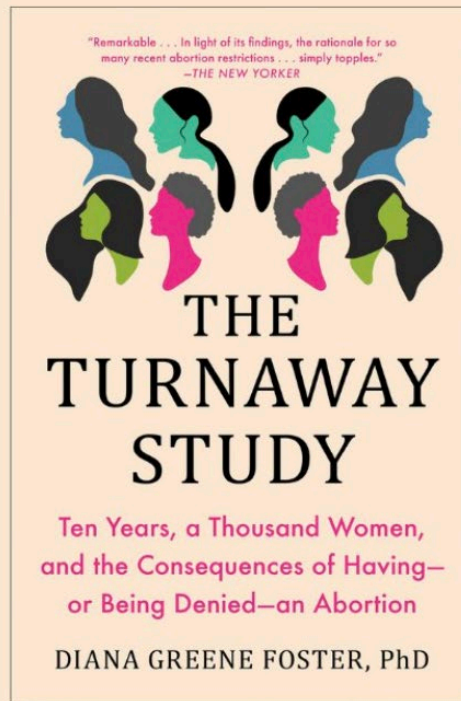
ACOG

acog.org/AbortionIsEssential



UpToDate®

<https://www.uptodate.com/contents/pregnancy-termination-and-potential-psychiatric-outcomes/>



"If you read only one book about democracy, this should be it. Why? Because without the power to make decisions about our own bodies, there is no democracy."

—Gloria Steinem

Call to Action



This app is available only on the App Store for iPhone and iPad.

5 Calls: Contact Your Congress 4+

The latest actions in politics

5 Calls Civic Action

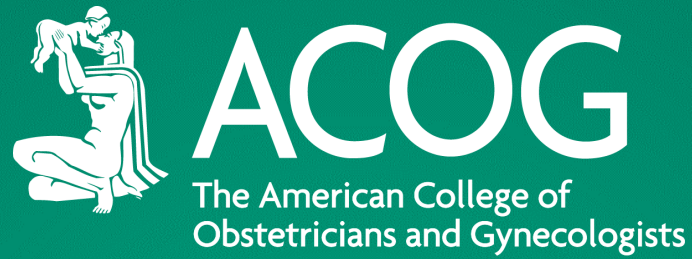
#11 in Reference

★★★★★ 4.5 • 2.1K Ratings

Free



1. Donate to abortion funds.
<https://www.carolinaabortionfund.org/>
2. Donate to independent abortion clinics at Keep Our Clinics.
<https://keepourclinics.org/>
3. Learn how to provide abortion care
<https://rhedi.org/topic/aspiration-abortion/>
4. Advocate with your state chapter of your medical association
5. Become knowledgeable about abortion laws in South Carolina.
<https://reproductiverights.org/maps>
<https://www.scwren.org/take-legislative-action/>
6. Find out where all your lawmakers stand on abortion rights.
<https://www.scstatehouse.gov/legislatorssearch.php>



Thank you

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