

April 8, 2005

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Re: **The Inherent Immorality of the So-Called “Emergency Contraception”/”Morning-After Pill”**

Your Excellencies:

It has just come to our attention that the Ethics Committee of the St. Elizabeth Hospital in Northern Kentucky has approved a policy, effective January 13, 2005, for the administering of so-called emergency contraception to rape and incest victims, and cited as authority for that position *Guidelines of the Catholic Conference of Kentucky* (November 2004).

The clear and conclusive medical and ethical authorities demonstrate that the use of the “emergency contraception” impedes the implantation of the newly conceived child, resulting in his death, and thus is a chemical abortion.

When Does Human Life Begin?

“It is scientifically correct to say that an individual human life begins at conception, when the egg and sperm join to form the zygote, and that this developing human always is a member of our species in all stages of its life. There is not one medical text in use in one medical school in this country that teaches to the contrary.” – **Micheline Matthews Roth, M.D., Principal Research Associate of Harvard University Medical School**

“After fertilization has taken place, a new human being has come into being. ...This is no longer a matter of taste or opinion. Each individual has a very neat beginning at conception.” – **Dr. Jerome LeJeune, Genetics Professor at the University of Descartes in Paris, internationally famous scientist who discovered the Downs Syndrome chromosome**

“We of today know that man is born of a sexual union; that he starts life as an embryo within the body of the female; and that the embryo is formed from the fusion of two single cells, the ovum and the sperm. This all seems so simple and evident to us that it is difficult to picture a time when it was not part of the common knowledge.”

– **1933 statement by Dr. Alan Guttmacher of Planned Parenthood**

“Virtually every human embryologist and every major textbook of human embryology states that fertilization marks the beginning of the life of the new individual human being.” – **Dr. C. Ward Kircher, Professor of Human Embryology.**

In fact, every responsible scientist (which excludes of course those who have been willing to be politicized for economic or political reasons) recognized, for decades, the creation of a new existing human being at conception (fertilization). See the enclosed copy of *Taber's Cyclopedic Medical Dictionary*, defining “conception” as “the union of the male sperm and the ovum of the female,” “contraception” as “the preventing of conception,” “fertilization” as “fecundation; impregnation of an ovum with the spermatozoon of the male...,” and “nidation” as “implantation of the fertilized ovum in the uterine endometrium.”

Prior to the political redefinition of “conception” in 1965 by the American College of Obstetrics and Gynecology as “the implantation of a fertilized ovum,” everybody understood the truth of the matter that an individual human’s life begins at conception.

In 1933, even **Dr. Alan Guttmacher of Planned Parenthood** stated: “We of today know that man is born of a sexual union; that he starts life as an embryo within the body of the female; and that the embryo is formed from the fusion of two single cells, the ovum and the sperm. This all seems so simple and evident to us that it is difficult to picture a time when it was not part of the common knowledge.”

How Does the Standard Birth Control Pill Function?

“There are no birth control pills that do not have the potential to abort a developing child. At my last count in looking at the *Physicians' Desk Reference* [the mostly widely used medical text in the United States, on the desk of every physician] ... there were 44 different types of birth control pills... None of these so-called birth control pills has a mechanism which is completely contraceptive.” – **Thomas Hilgers, M.D., world famous fertility specialist**

“The birth control pill frequently acts to prevent implantation of a fertilized ovum.” – **Sworn testimony given by Planned Parenthood President Gloria Feldt in front of the U.S. Senate Judiciary Committee on January 18, 2001** (see Senate Judiciary Committee website)

After much study, a **1969 Federal Drug Administration advisory committee** said the pills’ “high degree of contraceptive effectiveness [was] brought about through interference with several phases of the reproductive process. An influence on the hypothalamus...is probably responsible for the inhibition of ovulation. ... The second major effect is on the endometrium. The progestin acts as an anti-estrogen, causing alteration in endometrial glands and as a progestin, causing pseudo-decidual reactions. Both of these alter the ability of the endometrium to participate in the process of implantation.” (This committee included long-time Planned Parenthood associate Dr. Louis Helman, who chaired the committee, and Dr. Christopher Tietze of PPH and Population Council, along with other PPH members.) (This abortive mechanism was mandated by the FDA as required enclosure with all such manufactured birth control pills.)

“These chemicals ‘harden’ the lining of the womb (uterus), creating a hostile environment and thus making it harder for the tiny multi-celled human being from implanting in the wall of the womb. This constitutes abortion

at approximately one week of life.” – *A Declaration of Life*, published by Pro-Life Physicians (8/14/98)

The empirical proof of this known scientific fact of the three-level function of the so-called contraceptive pill is found in the birth of children from a woman who had faithfully followed the pill regimen. In those instances, obviously the pill failed to prevent ovulation and failed to prevent also fertilization, and finally failed to prevent implantation.

This medical truth has been recognized also by the **U.S. Conference of Catholic Bishops**:

“These properties of OCs (Oral Contraceptives) have long been acknowledged, but it is impossible to determine which mode of action is responsible in any given cycle for a woman’s failure to conceive or maintain pregnancy...It is important to note that ‘ovulation is not always stopped...cervical mucus is not always made impenetrable, ...the lining of the womb is not always rendered unreceptive to a fertilized ovum every cycle...’”
– *Life Insight* (September 1998)

How “Emergency Contraception” Functions

“Emergency contraception (also known as the morning-after pill or EC) is a high dosage of the birth control pill. Those who promote EC claim it may be used after sexual intercourse, over a period of 72 hours, to achieve the goal of preventing pregnancy.

“EC consists of multiple doses of pills taken at specific time intervals. The number of pills depends on the specific brand. Pills used for ‘emergency contraception’ contain the same steroids found in the typical birth control pill.

“How does it work?

“EC has three possible ways in which it can work:

- “1. Ovulation is inhibited, meaning an egg will not be released.
- “2. The normal menstrual cycle is altered, delaying ovulation; or
- “3. The lining of the uterus is irritated, so that if the first and second actions fail, and a child is conceived, this tiny baby boy or girl will die before he or she can actually attach to the lining of the uterus. In this third action, her body rejects the tiny baby and the child will die. This is called chemical abortion.” – **American Life League**.

Every so-called “contraceptive” pill manufactured contains a designed abortifacient function (prevention of implantation in the uterus of the newly conceived human being), if the first two designed functions fail, i.e., prevention of ovulation and immobilization of the sperm. This mechanism is clearly recognized by anyone who has studied the issue, and is clearly printed and described (as mandated by the Federal Drug Administration) in the manufacturer’s enclosure that comes with the pills from the manufacturer to the pharmacist.

The same truth applies to the so-called “emergency contraceptive” pill: “EC pills...act by delaying or inhibiting ovulation, and/or altering tubal transport of sperm and/or ova (thereby inhibiting fertilization), and/or altering the endometrium (thereby inhibiting implantation).” – **FDA–Federal Register Notice, Vol. 62, No. 37, 2/25/97**

Physicians’ Desk Reference states: “ECPs (emergency contraceptive pills) ... act primarily by inhibiting ovulation. They may act by altering tubal transport of the sperm and/or ova and/or altering the endometrium

(thereby inhibiting implantation).”

“The evidence that the ‘morning-after’ pills are, in fact, abortifacients, is overwhelming and irrefutable,” states **Dr. Eugene Diamond, Director of the Catholic Medical Association’s Linacre Institute**.

The same conclusion was stated in the paper by **Drs. Kahlenborn, Stanford, and Larimore in the March 2002 *Annals of Pharmacotherapy***.

“While these pills may sometimes have a contraceptive mode of action because they prevent or delay ovulation or fertilization, they are designed to prevent implantation as well.

“Thus some researchers conclude that interfering with the endometrium ‘could explain the majority of cases where pregnancies are prevented by the morning-after pill.’

“Women are being falsely led to believe that these pills are contraceptive in nature. But one of their common and intended modes of action is to prevent the development of the embryo, resulting in his or her death.”

– ***Emergency “Contraception” and Early Abortion*** published by the **U.S. Conference of Catholic Bishops**

Church Doctrine

Of course, the Catholic Church clearly condemns chemical abortion as equally evil with surgical abortion.

The U.S. Conference of Catholic Bishops has addressed specifically the question of treatments morally permissible to a victim of rape or incest: “It is not permissible, however, to initiate or to recommend treatments that have as their purpose or direct effect the removal, destruction, or interference with the implantation of a fertilized ovum.” – ***Ethical and Religious Directives for Catholic Healthcare Services, Directive 36 (2001)***

Most Rev. Charles J. Chaput, Archbishop of Denver, just issued a statement on February 11, 2005 condemning a potential bill pending in the Colorado state legislature which would mandate that women who are victims of rape automatically receive the abortifacient morning after pill by all hospitals, including Catholic hospitals. The Colorado Catholic Conference pointed out: “If enacted, HB 1042 would have the dubious distinction of being the first law in Colorado to require a Catholic entity to actively violate its own teachings. ...”

Prominent moral theologian **Msgr. William Smith, Professor at St. Joseph Seminary** in Dunwoodie, New York, likewise exposed this scam: “It’s wrong to say you can use anything that has abortifacient properties. ‘Emergency contraception’ is double talk. It’s what I call ‘verbal engineering.’ Catholic hospitals are not free to prescribe or provide anything with abortifacient properties without contradicting their witness. If they don’t see a problem with that, someone’s playing a game.”

Medical Testing

It has apparently been suggested now by some that there is a test that can be administered within 24 or 48 hours to a woman who has been raped, which will conclusively determine whether she is or is not pregnant from the rape. **The fact is, there is no such medical test.**

The test suggested by advocates of the use of “emergency contraception” measures the urine or serum to

determine the presence or absence of HCG. The urine or serum becomes positive for that chemical only after about 15 to 20 days after **fertilization**, which is one to two weeks after implantation of the newly conceived child into the lining of the uterus. This is one week after menstruation is missed.

Therefore, a negative HCG is irrelevant in determining whether fertilization has occurred from the rape. It can only tell a physician if fertilization and implantation has occurred 15 to 20 days prior to the test.

Rape and Incest

The woman who has conceived a child by the violent act of rape or by incest needs understanding, encouragement, and support by family, friends, and the entire community. An abortion cannot and will not remove the suffering from such trauma nor cause the woman to forget such acts.

“Rape and incest victims actually suffer considerably from the abortion. What are some of the symptoms or rape? The woman feels dirty, guilty, sexually violated, down on herself, angry, and fearful or hateful toward men; she may experience sexual dysfunction, or feel she has lost control of her life.

“Now let’s look at the symptoms of abortion. The woman feels ditty, guilty, sexually violated, down on herself, angry, and fearful or hateful toward men; she may experience sexual dysfunction or a loss of control of her life – all the same symptoms.

“So instead of curing the problem, we are intensifying the same symptoms by offering abortion. Abortion, then, is a ‘cure’ that only aggravates the problem.” – **David C. Reardon, Director of Eliot Institute for Social Sciences Research**

“I soon discovered that the aftermath of my abortion continued a long time after the memory of my rape had faded. I felt empty and horrible.” – **Jackie Bakker, a victim of rape**

“As horrible as rape is, it very seldom results in pregnancy.” – **C. Everett Koop, M.D.**

“Abortion in the cases of incest is not the answer of convenience. It hides the crime of incest and it continues to hold the female victim in bondage to the secrecy of molestation. This does not mean that incest will stop.”

– **Becky Smith, a victim of incest**

“Abortion for incest victims sounds compassionate, caring, and heroic; but, in actual practice, it is simply another violent and deceptive tool in the hand of the abuser...abortion does absolutely nothing to protect a young girl from continued abuse and, in fact, aids and abets the abuser in his crime.” – **Mary Jean Doe (a pseudonym), a member of Feminists for Life and a victim of incest**

“The crime of rape or incest does not justify the crime of homicide.” – **Henry Hyde, Congressman for Illinois**

“If we have the baby killed by abortion, it certainly does not help the baby. In the short run it may well relieve the mother of a traumatic burden, but it will leave her with a lifelong memory of having once carried a child which she had destroyed. Today’s experiences are tomorrow’s memories. In general, the experience of an abortion

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is a long and painful memory.” – **Fr. John Powell, S.J., Ph.D., psychologist**

Regardless of the circumstances in which a baby is conceived, an unborn baby is still a baby.

Our Request

We request a copy of the *Guidelines of the Catholic Conference of Kentucky* (November 2004), referred to in the St. Elizabeth Medical Ethics Committee document.

We would like to review any contrary argumentations (scientific or moral) that have been presented to you as you reached your decision.

Our research and the unequivocal findings of science and morality demonstrate conclusively that your position is indefensible, and will lead to great moral harm, to the scandal of abortion carried out in Catholic institutions, and to scandal given to the faithful as well as our separated brothers and sisters.

Before we take further steps, we will eagerly await your specific response.

Respectfully,

On behalf of the NKRTL Board of Directors
by its Executive Committee,

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cc: Board of Directors of Northern Kentucky Right to Life

WP\RTL\CCB Ltr 4-05

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