

CALIFORNIA RIGHT TO LIFE EDUCATION FUND

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Ten Fast Facts About Abortion's Injustice and Risks to Women

1. 64% of women having abortions felt **pressured** by others.¹ Coercion can escalate to violence or even murder.^{1,2}
2. 52% felt **rushed** and 54% were not sure about the decision at the time, yet 67% received no counseling beforehand.¹
3. 84% reported that they did not receive **adequate counseling**.¹
4. 79% were **not informed** about available alternatives.¹
5. 31% of women suffered **health complications** after abortion.¹ 10% suffer immediate complications, one-fifth of which are life-threatening.³
6. Women have a 65% higher risk of clinical **depression** after abortion compared to women who give birth.⁴
7. 65% suffer multiple symptoms of **post-traumatic stress disorder** after abortion.¹
8. **Death rates** from all causes are 3.5 times higher among women who abort, compared to women who give birth.⁵
9. 60% said "**part of me died**." according to a survey of women who aborted.¹
10. **Suicide** rates are 6-7 times higher compared to women who give birth.⁶

3. Frank, et.al., "Induced Abortion Operations and Their Early Sequelae," *Journal of the Royal College of General Practitioners* 35(73):175-180 (April 1985); Grimes and Cates, "Abortion: Methods and Complications", in *Human Reproduction*, 2nd ed., 796-813; and M.A. Freedman, "Comparison of complication rates in first trimester abortions performed by physician assistants and physicians," *Am. J. Public Health* 76(5):550-554 (1986).
4. JR Cogle, DC Reardon & PK Coleman, "Depression Associated With Abortion and Childbirth: A Long-Term Analysis of the NLSY Cohort," *Medical Science Monitor* 9(4): CR105-112 (2003).
5. M Gissler et. al., "Pregnancy Associated Deaths in Finland 1987-1994 -- definition problems and benefits of record linkage," *Acta Obstetrica et Gynecologica Scandinavica* 76:651-657 (1997).
6. Mika Gissler, Elina Hemminki, Jouko Lonnqvist, "Suicides after pregnancy in Finland: 1987-94: register linkage study" *British Medical Journal* 313:1431-4, 1996; and M. Gissler, "Injury deaths, suicides and homicides associated with pregnancy, Finland 1987-2000," *European J. Public Health* 15(5):459-63, 2005.
For more information see
<http://www.unfairchoice.info/intro.htm>

Stem Cell Hope for Eye Patients

Stem cell therapy is being used on people who suffer from a rare genetic eye disorder, it was announced recently. Those suffering from aniridia are born without an iris and usually go on to lose most of their vision.

Doctors at Queen Victoria Hospital in East Grinstead, West Sussex, are transplanting stem cells from dead donors, living relatives or the patients themselves onto the cornea. They say that four people so far have reported improved comfort and vision in one eye after successful treatment.

Hospital eye specialist Sheraz Daya said the stem cell transplant activated new limbal stem cell production. "We think the donor cells have attracted stem cells from the bone marrow to make new limbal stem cells, which have arrived at the eye through the bloodstream," he said.

The same hospital has used stem cells to restore vision to people who suffer blindness due to eye injuries.

http://news.netdoctor.co.uk/news_detail.php?id=18091092

Citations:

1. VM Rue et. al., "Induced abortion and traumatic stress: A preliminary comparison of American and Russian women," *Medical Science Monitor* 10(10): SR5-16 (2004).

2. See the special report, "Forced Abortion in America," at <http://www.unfairchoice.info/resources.htm>.

Embryonic Stem Cell Pioneer Says Cures Likely Decades Away

The scientist whose group took part in groundbreaking embryonic stem cell research in 1998 says cures using embryonic stem cells are likely decades away.

University of Wisconsin scientist James Thomson made the comments during a speech Feb. 8 in Lake Delton, Wisconsin, to the Wisconsin Newspaper Association's annual convention, the Associated Press reported. In 1998, Thomson's team became the first group to grow human embryonic stem cells in culture, sparking a controversy over the use of embryos in stem cell research that continues to this day.

Although some supporters of embryonic stem cell research have implied cures are just around the corner, Thomson cautioned that cures probably are decades away, AP said. While Thomson believes researchers will learn how to grow embryonic stem cells into various forms of body tissue and organs within a decade, he also thinks safety concerns will delay cures for humans, AP reported.

"I don't want to sound too pessimistic because this is all doable, but it's going to be very hard," Thomson told convention attendees, according to the Associated Press. "Ultimately, those transplantation therapies should work but it's likely to take a long time." <http://www.bpnews.net/bpnews.asp?ID=24950>

Perinatal Hospice Programs Increasing In U.S.

An increasing number of families who are told that a fetus likely would die hours after birth are enrolling in "perinatal hospice" programs, a collection of services that help with practical and spiritual questions, the [New York Times](#) reports. Most couples choose to have an abortion when the fetus is diagnosed with a fatal condition, but about 20% to 40% of them carry the pregnancy to term, according to the *Times*.

At least 40 perinatal hospice programs have been started in the U.S. during the last 10 years, according to Amy Kuebelbeck, a researcher on the subject whose son died of a heart condition hours after birth.

In addition, Minnesota last year approved a law that requires women to be informed about perinatal hospices. As part of the programs, hospice nurses and social workers give advice on how to tell other children in the family and arrange birthing lessons for women who do not want to take classes with women

carrying healthy fetuses. The hospice staff also teaches the family how to care for the infant at home if he or she lives longer than a few days.

According to the *Times*, some abortion-rights opponents strongly support the programs, but many hospice workers "seem free of ideology." Jody Chrastek, director of the hospice program [Deeya](#) at [Children's Hospitals and Clinics of Minnesota](#), said that many donors to perinatal hospices often stipulate that families be advised against abortion if they reconsider their decision to continue the pregnancy. However, Deeya and "many other programs not affiliated with the antiabortion movement decline" such donations, the *Times* reports.

According to the *Times*, families in perinatal hospice programs often decide to let their children die without aggressive medical intervention -- such as feeding tubes, intravenous fluids and surgeries -- and allow medication to be given to ease discomfort. "Families can choreograph their child's very brief life with their family," Lizabeth Sumner, palliative care coordinator at [Elizabeth Hospice](#) in Escondido, Calif., said. She added, "Sometimes they may have a matter of minutes, so they decide beforehand who can hold the baby, who will cut the umbilical cord, who will hold the baby when you know he is going to die" (Banerjee, *New York Times*, 3/13).

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<http://www.medicalnewstoday.com/medicalnews.php?newsid=65187>

Assisted Suicides at All Time High New Oregon Figures Show

by Steven Ertelt
LifeNews.com Editor

Salem, OR (LifeNews.com) -- The number of Oregon residents using the state's assisted suicide law to kill themselves is on the rise. New figures from the state's health department show more people in Oregon died under the assisted suicide law in 2006 than any year previously.

The Department of Human Services of Oregon, in its annual report, reveals that 46 Oregonians, most of them suffering from cancer, kill themselves after getting a prescription for a lethal amount of drugs from their physician.

The number is up eight from the 38 people took their lives under the assisted suicide law in 2005 and higher than in other years.

State health officials say the demand for assisted suicide is not rising because it said the number of prescriptions issued last year was lower than in previous years.

In 1998, 16 Oregonians used the assisted suicide law to kill themselves, followed by 27 in 1999, 27 in 2000, 21 in 2001, 38 in 2002, 42 in 2003, and 37 in 2004.

As a result from the state's law, the only one of its kind in the United States, some 292 people have killed themselves. The typical profile of a person using the law of a patient using the assisted suicide law is a white male about the age of 70 who is battling cancer. Most have a college education and a handful suffer from either AIDS or Lou Gehrig's disease.

Most have died at home and were receiving hospice care at the time.

While patients cite depression and other emotional fears as their reasons for using the assisted suicide law, just two patients received psychological evaluations prior to being given the lethal drugs in 2005.

The use of assisted suicide hasn't been without problems. Lung cancer patient David Prueitt took a fatal dose of drugs but woke up three days later wondering why he wasn't dead. The 42 year-old man eventually lived two more weeks before dying of natural causes.

Another patient who died in 2005 asked for the drugs three years ago, but the law specifically allows the drugs to be given only to patients expected to live for six months or less.

Diane Coleman, president of Not Dead Yet, a leading disability rights group said that the longer the Oregon law stays around the more disabled patients are feeling obligated to end their lives when they become a so-called "burden" to their families.

"What looks to some like a choice to die begins to look more like a duty to die to many disability activists," she said.

In 1990, the Supreme Court ruled that patients had a right to refuse lifesaving medical treatment and, in 1997, the court ruled unanimously that there is no constitutional right to assisted suicide but that states may ban or allow the practice.

The state came under fire last October for deciding to change the wording of the phrase assisted suicide when referring to the state law. It determined it would begin referring to "physician assisted suicide" as "physician assisted death" on official reports. The change comes as backers of the assisted suicide law claim the original term is offensive to those who kill themselves under the statute. In fact, Compassion & Choices, a national group that backs euthanasia and assisted suicide, pressured state officials to make the change.

Gayle Atteberry, the executive director of Oregon Right to Life called the wording difference "outrageous."

"They have changed it to a euphemism to make it more palatable," she said. "Do they think it is going to make it easier for people to kill themselves?" California, Michigan, Hawaii, Maine, Vermont and Washington have defeated attempts to legalize assisted suicide over the years.

Related web sites:

Physicians for Compassionate Care - <http://www.pcecf.org>
Oregon Right to Life - <http://www.ortl.org>

Printed from: <http://www.lifenews.com/bio2025.html>

Do you know someone who might be considering abortion?

Make sure they get the facts first!

A LIFE depends on it...

1-800-395-HELP (4357)

Around the Office

Aging Computer — Back at the turn of the century (that would be the 20th century), a generous donor gave us a nice computer, which we have been using for almost a decade. With the passage of time, the software, especially the virus protection, is no longer supported by the manufacturer, and newer versions of the software are no longer compatible with the Windows ME operating system. Therefore we will need to consider getting another computer by early summer.

HOWEVER, before we expend your donation money to purchase a new computer system, we are wondering if anyone has an extra computer sitting in a closet that you would like to donate to California Right to Life Education Fund (a nice tax deduction!)

Ideally the computer would have Windows XP or newer, and Microsoft Office would be a plus. If you have an extra computer you would like to donate, please contact our office at 925-944-5351, or if you would like to contribute to our fund drive for the purchase of a new computer, mark your donation “for new computer.” Thank you in advance for your ongoing generosity.

Thank you to all our Donors!

- The monthly donors
- The occasional donors
- The annual donors
- The Payroll Deduction donors
- All the Volunteers
- The “Donations-in-Kind” donors

We couldn't do it without you!

WHO IS CALIFORNIA RIGHT TO LIFE?

This is the newsletter of California Right to Life **Education Fund**, a 501-c-3 organization established to educate the public about pro-life issues. Donations to the EDUCATION FUND are **tax-deductible** and can be sent to P.O. Box 4343, Walnut Creek, CA 94596-0343.

California Right to Life **Committee, Inc.** is a 501-c-4 organization providing information on legislative issues affecting the right to life, and pro-life political advocacy. **CRLC, Inc. is not permitted**, under IRS regulations, to offer a tax deduction for donations. \$24.99 annually is requested for a subscription to the CRLC legislative email updates list and can be sent to 1920 Monument Blvd #309, Concord, CA 94520.

Both are affiliates of American Life League, headed by Judie Brown, and share the same “no-exceptions, no excuses” beliefs and the same dedication to promoting the Culture of Life, respecting all innocent human life from the single-cell stage to natural death.