ABORTION IS SAFER THAN CHILDBIRTH??

Feb, 2012  The prominent "Original Research" article "The Comparative Safety of Legal Induced Abortion and Childbirth in the United States", by Raymond and Grimes in the Feb, 2012, journal "Obstetrics & Gynecology," rehearses the "original mantra" of the choice argument: "Abortion is safer than Childbirth."  To reach this conclusion, Raymond and Grimes employ statistical methodologies seen before, using inadequate or incomplete data, ignoring some important literature, and drawing general conclusions using limited and, we feel, inaccurate "facts."  AAPLOG finds this article to be a very serious distortion of reality as we understand the reality. AAPLOG's evaluation of this "Original Research" is summed up in the 3 separate commentaries which follow:

First, a commentary from the AAPLOG Board:  The new study by Dr. Grimes relies on two magic tricks of statistics.  The key to the first trick is the word "reported" deaths.  It is well known that over 95% of live births occur in hospitals, where the death will be recorded.  So, live birth mortality is a pretty accurate number.

But, abortion mortality is not systematically collected.  The CDC states clearly on their website that only 45 of the 50 states even report the number of abortions, much less their complications and deaths.  Many of states that do report deaths collect the data haphazardly, by voluntary reporting.  That is why the Guttmacher Institute and the CDC total numbers for abortion are significantly different.  Even Dr. Grimes hints at this, since even he doesn't rely on either number, but also searches the literature.

A great illustration of this is found in the 4 California women who died after medical abortion.  At least 2 of those women had "unknown" listed as the cause of death on their death certificates.  They would not even have been counted in the abortion deaths.

So, the dirty secret of the abortion industry is that no one is watching.  There is no mandatory reporting of abortion deaths or complications.  And even the total number of abortions reported each year does not reflect reality because of the voluntary and haphazard nature of the CDC and Guttmacher data collection.

So, when you don't know either the numerator (number of abortion deaths) or the denominator (total number of abortions performed), then as a statistician, you are left free to "interpret" the data according to your particular bias.  Dr. Grimes is an avid abortion activist.

The second magic trick is his use of the "Unknown outcome of pregnancy" deaths.  It is a stretch of the imagination to believe that live births account for 71% of the "unknown outcomes" of pregnancy mortality.  When a woman who has been pregnant dies, and no one knows what happened to her pregnancy, it is intuitive that the outcome hidden is less likely to be a live birth than an abortion.  In fact, it would be more reasonable to assume that the vast majority of "hidden outcomes" of pregnancy would be terminations rather than live births.  But either case is
speculation. And Dr. Grimes paper uses this speculation to inflate the mortality of live birth.

What Dr. Grimes paper most clearly illustrates is the immediate need for reporting requirements for abortion deaths in all 50 states. Until we have mandatory reporting of abortion deaths and complications, papers like Dr. Grimes will be continue to be playgrounds for pro-abortion speculation.

Second: a commentary by Dr. Priscilla Coleman, which can be found at http://www.wecareexperts.org/content/serious-misrepresentation-relative-safety-induced-abortion-compared-childbirth-published-1-0.
This analysis points out that the data reported by abortion clinics to state health departments and ultimately to the CDC significantly under-represents abortion morbidity and mortality for several reasons: 1) abortion reporting is not required by federal law and many states do not report abortion-related deaths to the CDC; 2) deaths due to medical and surgical treatments are reported under the complication of the procedure (e.g., infection) rather than the treatment (e.g., induced abortion); 3) most women leave abortion clinics within hours of the procedure and go to hospital emergency rooms if there are complications that may result in death; 4) suicide deaths are rarely, if ever, linked back to abortion in state reporting of death rates; 5) an abortion experience can lead to physical and/or psychological disturbances that increase the likelihood of dying years after the abortion, and these indirect abortion-related deaths are not captured at all.

Third, comments by Dr. David Reardon are found at http://afterabortion.org/2012/re-hash-of-abortion-safety-claim-ignores-all-inconvenient-evidence-to-the-contrary/.
Reardon points out that there is no accurate or formal mechanism for reporting abortion-related deaths. Indeed, the rules regarding completion of death certificates specifically exclude identifying abortion as a cause of death.
At least in part, this is why CDC officials have admitted that maternal mortality rates and abortion mortality rates “are conceptually different and are used by the CDC for different public health purposes.”
In other words, the CDC numbers on abortion-related deaths cannot be meaningfully compared to maternal mortality rates. CDC methods simply do not rely on a uniform method of collecting data on abortion related deaths.
In short, Grimes used a very incomplete record of abortion-associated deaths and compared it to a complete record of deaths associated with non-abortion pregnancies, and found that the death rate is lower. Therefore, he concludes, abortion is safer than childbirth.
The most damning evidence of the authors’ biases is that their “review” of the evidence totally ignores numerous record-based studies using data from both the United States and Finland — studies that clearly show that abortion is associated with significantly higher mortality than both childbirth and not being pregnant.
For a complete review of the literature on mortality rates related to abortion and childbirth, readers should study “Deaths Associated With Abortion Compared to Childbirth: A Review of New and Old Data and the Medical and Legal Implications.” www.afterabortion.org/pdf/DeathsAssocWithAbortionJCHLP.pdf