

Abortion research paper

[Family](#), [Abortion](#)



“ Unless and until it can be proven that the unborn child is not a living entity, then its right to life, liberty, and the pursuit of happiness must be protected.” (“ Reagan, “ Evil Empire,” Speech Text”). Abortion, a word derived from the Latin abortus meaning to be aborted or to miscarry, refers to the premature end or termination of a pregnancy (“ Latin Definition for: aborior, aboriri, abortus (ID: 171)”). Generally, a majority of women get an abortion performed before they are twelve-week pregnant, i. e. during the first-trimester. However, some women may also get an abortion performed up to twenty-four weeks in the second trimester or, in rare cases, women who are in between twenty-four and thirty-six weeks of their pregnancy may also get an abortion performed. Abortion is an unnatural procedure since the premature termination of the pregnancy is medically and/or surgically induced, and as such, it is not the same as a miscarriage that occurs naturally and spontaneously. Based on a basic understanding of an abortion, it is logical to claim that an abortion should be legally performed without any ethical concerns only in cases where a woman’s life is at risk.

There are several methods used in the United States for induced abortion, but none of them are without complications. Vacuum curettage, which is the most common method, can be performed in the first-trimester. Excessive bleeding, uterine atony, and uterine injury are among the immediate complications of this abortion procedure (Stubblefield, and Berek 181-184). Bleeding and lower abdominal pain is among the most common complications that are experienced post-abortion. For first-trimester pregnancies, early medical abortion is another option available in the U. S., especially with the use of mifepriston/misoprostol. However, expected

complications of early medical abortion include abdominal pain, cramping and vaginal bleeding, along with further persistent bleeding as a more serious principle complication. For pregnancies at or after thirteen weeks, i. e. in the second-trimester, Dilation and Evacuation (D&E) can be performed for an abortion. The D&E technique of abortion has the same complications as surgical vacuum curettage abortion. In fact, the complications that occur are often more serious.

Even though debates over abortion are not very old, the procedure itself actually dates back ancient Egypt, and a 1550 BCE Egyptian medical document referred to as the Ebers Papyrus suggests that this was when the world's first abortions started taking place (Manning). It was not the 1820s when laws emerged in order to prevent women who are over four-month pregnant to have an abortion (Shenkman 68-70). Early feminists were among the early opposers of abortion. Moreover, during the early days of feminism, abortion was not a safe procedure as it is believed to be today, and getting it performed meant that a women's health and life would be at risk. Perhaps the worst moment in history of abortion, or at least for pro-life believers, was in 1973 when the constitutional right to privacy was extended by the U. S. Supreme Court to include a woman's right to choose to prematurely end her pregnancy ("Roe v. Wade - 410 U. S. 113 (1973)").

Perhaps these following statistics could be regarded as direct or indirect result of laws and rulings like the one above. According to the WHO, out of over two hundred million pregnancies that take place all over the world, one-third of them end prematurely, as a result induced abortion, miscarriage, or stillbirth (Department of Reproductive Health and Research, World Health

Organization). Moreover, out of the little over forty million induced abortions that take place every year, almost half of them are performed by unskilled conditions and/or in unsafe conditions, which results in large numbers of deaths (Department of Reproductive Health and Research, World Health Organization). If these statistics are narrowed down, out of ten pregnancies all over the world, at least one is prematurely ended through an unsafe abortion (Shah, and Ahman 9-17). Similarly, pregnancy-related deaths that occur all over the world, more than 10% of them occur due to getting an abortion performed. To some, especially abortion advocates, this may not seem like much, but these statistics cannot be ignored.

One reason the debate about abortion has become so bewildering and obscured by an air of the smog is because of doubts over when a human life begins. It is true that no one can easily answer when life begins in the course of the development of the embryo or fetus during pregnancy. One view that physicians and scientists find it very convincing that syngamy is an interpret point for the commencement of human life since it is onset of the first mitosis. They find it instinctively apparent that the distinct events of the first mitosis come to an end upon syngamy when the gametes have fully united. They believe that progress of fertilization also comes to an end upon syngamy. An even later point is also advocated, i. e. until the commencement of particular process or development of particular structures. Even though this manner of thinking is convincing, it is not without its own discrepancies.

A fact that cannot be refuted is that there is no external builder involved in the development of the embryo and it is produced by itself. It is the embryo

itself that produces the organized pattern through which it develops, rather than vice versa. In other words, unlike any of the cells in the human body, including the sex cells, the human embryo is not dependent on a large organism in order to function. Instead, a human embryo already has the inherent qualities and the resources within it that are necessary for it to survive and develop into a fully functional human being. External influences may prolong or retard the development of a human embryo but they cannot stop its development. Thus, it is still a viable assumption that a human embryo is indeed a living being at an immature stage, and so, conception somewhat marks the beginning of life.

In the case of abortion, being pro-life is not about going to crazy or to the extreme in order to oppose the procedure, such as claiming that abortion is wrong even in the case of incest, rape, or when a woman's life is threatened. Research is definitely helpful and it is not wise to make a decision on the basis of emotion, but there are times when emotion can be a guiding force and doing research along may not make an advocate of abortion pro-life. The only thing that pro-life is supposed to mean, and the reason I personally am pro-life is because life is a blessing and that should be respected. Sure it may not be logical enough to oppose pro-abortion beliefs, but anyone who respects life will realize that an abortion is taking a life, regardless of when that life begins, because it is meant to begin at some point unless it is prematurely ended.

However, that is not all; rather I have several pro-life arguments as well. Perhaps one of my biggest beliefs that is often ignored or overlooked is that abortion actually has quite a feasible alternative in the form of adoption,

where virtually the same result can be achieved without the murder of a human life. In 2013 alone, foster care adoptions and private domestic adoptions had a similar percentage between 37% and 38%, and positive social behaviors exhibited by adopted children above the age of 6 is also significantly high. (" Adoption Statistics"). Moreover, leading books on the subject of embryology have confirmed that even in the earliest stages of development, a human embryo is a distinct and living human being (Ronan and Müller). Even if it is claimed that birth or brain development is when life begins, then perhaps those suffering from Alzheimer's Disease or those below a certain IQ level could also not be regarded as humans.

The general public, especially advocates of abortion feel uncomfortable about the notion of an absolute ban on all abortions, unless delivering a baby would threaten the mother's life. Abortion should not be a choice, regardless of the situation, perhaps it may be a means of saving another life, but it should not be a choice. Even then, a human life is ultimately claimed, but perhaps it is for the greater good. Perhaps in a way, limitation of insurance coverage on abortions in Michigan, even in instances of rape or incest, is somewhat commendable, especially considering that it has led to a decline in elective abortions in the state. Of course, there are reasons to support that abortions are not really necessary, even in these two cases.

Sure, rape and incest may result in an unwanted pregnancy. Neither rape nor incest should be an exception because it was not the fault of the unborn human life that it was procreated, even if by force or unintentionally. It can certainly not be denied that sexual assault is an emotionally traumatic ordeal for the female victim, who may feel that she is somehow defiled and tainted.

However, abortion is not the viable solution to this trauma, rather these feelings themselves stem from how society views women who have been raped.

Moreover, pregnancies from rape and incest are not as common as they are believed to be because more than often ovulation does not occur in the presence of severe emotional trauma, perhaps that is why no more than 1% of rape victims ever become pregnant (Clowes). Despite the fact that incest takes place over a prolonged period of time, there is again not more than a 1% probability of pregnancy in cases of incest (Maloof). Moreover, it is often claimed that the risk of fetal deformity is a sound argument to justify abortions in cases of incest, but there is actually no proof that a child born of an incestuous sexual relationship will be malformed.

Perhaps the only situation in which it may make sense to reasonably justify an abortion would be when continuing with the pregnancy and/or delivering the baby would threaten the life of the mother. Indeed, it is a reasonable argument to defend a woman's choice, or the choice of her loved ones, to get an abortion performed, but even then it does not make the procedure itself justifiable. In fact, an abortion should be a last resort, and doctors should do whatever possible to save both the mother and her baby's life, unless they are absolutely certain that the mother could die if she gives birth.

Despite the debates, an abortion has become a very common procedure that is taking place quite frequently. Medical science has definitely advanced to an extent that abortions can apparently be performed safely or at least safer than they were in the past, but the procedure is still not without its distinct

complications. Statistics, which cannot be ignored or overlooked, further suggests the risks involved in getting an abortion performed, risks that extend to a large percentage of abortion-related deaths. Moreover, it makes quite a relative sense to assume that life begins at conception. Similarly, for someone who holds pro-life beliefs, it would be hypocritical to justify abortions in cases of rape and incest, when evidence suggests that abortion is not necessary even then. Therefore, it is safe to say that it should only be legal to perform an abortion, turning a blind eye to ethics, when the pregnancy or childbirth could result in the mother's death.

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