

Certain methods kill the child through fourth degree burns (e.g. saline solution injection). The child **violently gestures inside** before it dies and is expelled (not necessarily in that order). These gestures of pain and protestation can bring about **injury to the uterus**;

Death of the baby **by heart attack** (injection of potassium chloride or digoxin inside the heart of the baby), paired with early induction of labour, leads to **violent contractions** that can also damage the uterus, and the possibility of a **live birth** remains.

**The Supreme Court of Canada decreed, in 1988, that the risks of abortion increase exponentially with each week of gestation, and declared late-term abortion a threat to women's security.**

As for abortion in early pregnancy, the Court declared itself satisfied of its "relative safety", as have done all courts and legislatures having studied the procedure, based on the voluntary survey *Therapeutic Abortions*, as well as on official statistics on morbidity and mortality caused by legally induction, which the World Health Organization coding rules decree must or can be coded *not* under "legally induced abortion" but

under "**medical misadventure**", "**pregnancy in general**" and a host of other categories other than "legally-induced abortion".

**See Morgentaler Decision extracts on abortion risks at [www.supremecourt.ca](http://www.supremecourt.ca).**

Studies and references showing **all the other possible consequences** of abortion are accessible at [www.abortinfo.org](http://www.abortinfo.org). For example, one cannot logically think that the hormonal disruption caused by the interruption of pregnancy in its course of development will not have some kind of repercussion on procreative health or even on **overall health**, as the latter is, for a significant part, based on the non-disruption of hormonal balance.

Today, animals have more rights to be protected against violence than women, and preborn children, from abortion. Women's right to know is flouted, although the right to informed consent truly is a right (tort law). In the US, abortion in the first two trimesters has been declared a right, by inclusion in the right to privacy. One right, however, does not cancel out the other. In Canada, no right to abortion has been decreed. So the one right that exists in Canada is women's right to informed consent . Discover open, semi-open and closed adoption: [www.adoptionviverecanada.com](http://www.adoptionviverecanada.com).

# The two types of abortion injury

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## BEFORE A WOMAN CONSENTS TO ABORTION, SHE HAS THE RIGHT TO KNOW WHAT FOLLOWS

### INJURY TO THE CERVIX

From the onset of pregnancy, the cervix becomes rigid and closed-shut so as to prepare to keep the growing baby inside. In order to be able to insert the various instruments required for abortion, depending on the technique, the cervix must be opened up, or “dilated”. This must be done very slowly and gradually, with dilators of increasing size, one after the other. This dilation should take at least twenty minutes. However, on the Web sites of abortion clinics, it is claimed that the total time for the entire abortion is “between five and twenty minutes”. With so little time for dilation, this means that the cervix must be all the more forcefully opened. Injury to the cervix can lead to **premature birth** and **stillbirth**, for any subsequent pregnancy.

### INJURY TO THE UTERUS

From the onset of pregnancy, all the organs and tissues of the mother distend (stretch) and thin out so as to be able to welcome the growing baby, and so as to accommodate for the doubling of the mother’s blood volume. So the uterus becomes very thin and fragile. Injury to the uterus can result from any one of the various instruments used for abortion,

depending on the technique. Left untreated, **perforations** of the uterus can lead to **hemorrhage**, **shock** and **death**. Some clinics beg their patients not to report to the hospital with such symptoms (as this will negatively impact their reputation and bottom line), telling them to stay at home and apply pads until bleeding “passes” (it will not pass on its own). **Scarring** due to **lacerations** can lead to **infection** and **endometriosis** (intense and chronic cramps). Scarring can also lead to **sterility** by blocking the Fallopian tubes, and such blockage can also lead to **tubal ectopic pregnancy** in an a subsequent pregnancy (thirteen percent of maternal deaths are due to undetected ectopic pregnancy). Scarring can also lead to a reduced capacity of the uterus to welcome an ulterior pregnancy (**spontaneous abortion** or **placenta abruptio**, the latter leading to potentially fatal hemorrhaging), or to the implantation of a subsequent pregnancy at a place that is improper (**placenta previa**, which can require delivery by **C-section**, which, like any surgical procedure, involves risks, but all the more so during pregnancy, which **doubles the risks of any intervention**). In some cases, the organs of procreation are so damaged by legally-induced abortion that they must be removed during the procedure (**hysterotomy**, removal of one or both tubes). **Other** abdominal organs can also be perforated.

Another possible complication of abortion,

*delayed*, this one, is **incomplete abortion**. In order to avoid general poisoning (**septicemia**) due to infected baby parts left behind by the abortion, the person procuring the abortion must **scrape the uterus vigorously**. They must reconstitute the baby, like a puzzle, on a table, to be able to make sure no body parts remain. This is no guarantee that the abortion is “complete”, but it is the best that can be done.

Other than dilators, the various instruments used for abortion that studies show can cause injury are as follows:

**Curette**: this suction device is twenty-nine times stronger than a regular vacuum. It must be this strong to rip the baby apart and to rip it off of the uterus;

After twelve weeks gestation, the baby body parts are too big to fit inside the curette so the baby must be ripped off and dismembered using a **surgical knife** as well;

For second and third trimester abortion, **tongues** are also used to crush the baby to make sure that it dies before it is taken out of the uterus (if still living outside the uterus and not dying, that creates a legal problem for the woman, the caregiver and the institution);

Medical (chemical) abortion, for its parts induces violent **uterine cramping** that can also **injure the uterus**;