Summary Paper on the impact of induced abortion on women’s subsequent mental and physical health

For a comprehensive examination of these issues, based on over 500 studies, see Elizabeth Ring Cassidy and Ian Gentles, *Women’s Health after Abortion: The Medical and Psychological Evidence* [Toronto: de Veber Institute for Bioethics, 2nd edition, 2003.] Some of the material below will appear in the forthcoming third edition of the book.

1. **Suicide**
   - Within 12 months of the abortion or live delivery, Scandinavian women who aborted experienced a suicide rate of 34.9 per 1000, compared to a suicide rate of 5.9 per 1000 for women who delivered their babies. This is a suicide rate nearly six times greater. (Gissler et al., *British Medical Journal*, 1996) [WHAA, 193]
   - A similar study in Wales discovered that women who aborted experienced a suicide rate 3.25 times greater (Morgan et al., *BMJ*, 1987) [WHAA, 196-7]
   - A similar study in the U.S. found a suicide rate 2.6 times greater (Reardon et al., *Archives of Women’s Mental Health*, 2001) [WHAA, 197]

2. **Mental Health**
   - A study sponsored by the College of Physicians and Surgeons of Ontario found that after three months, aborted women had a rate of 5.2 per thousand hospitalizations for psychiatric problems, compared to a rate of 1.1 per thousand for the control group. (Ostbye et al., *American Journal of Medical Quality*, 2001) [WHAA, 3]
   - Recently (Nov. 2006), a rigorously neutral study from New Zealand has uncovered a strong correlation between induced abortion and subsequent mental health problems. By every measure, whether it is major depression, anxiety disorder, suicidal ideation, alcohol dependence, illicit drug dependence, or mean number of mental health problems, those who terminated their pregnancy by abortion suffered much higher rates of disorder than those who were never pregnant, and those who were pregnant but did not abort. After ‘covariate adjustment’, they found that those in the ‘not pregnant’ and ‘pregnant no abortion’ categories ran far lower risks of suffering various disorders.

Table: percentage lower risks experienced by Not pregnant and Pregnant No Abortion, compared to Pregnant Abortion
<table>
<thead>
<tr>
<th>Measure</th>
<th>Not pregnant</th>
<th>Pregnant no abortion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major depression</td>
<td>52</td>
<td>65</td>
</tr>
<tr>
<td>Anxiety disorder</td>
<td>48</td>
<td>56</td>
</tr>
<tr>
<td>Suicidal ideation</td>
<td>58</td>
<td>76</td>
</tr>
<tr>
<td>Illicit drug dependence</td>
<td>80</td>
<td>85</td>
</tr>
<tr>
<td>Number of mental Health problems</td>
<td>34</td>
<td>42</td>
</tr>
</tbody>
</table>

(Source: Fergusson et al., *Journal of Child Psychology and Psychiatry* 2006; 47(1): 16-24, Table 3)

3. **Prematurity**
   - Induced abortion was associated with an 86% increased risk of very preterm birth (under 33 weeks’ gestation) among women with previous first-trimester abortions, and a 267% increased risk among women with previous second-trimester abortions. (Ancel, Papiernik et al., *British Journal of Obstetrics and Gynaecology*, 1999) [WHAA, 46]
   - Two large multi-centre case-control studies were conducted in Europe. Both studies revealed that previous induced abortion was associated with increased risk for very preterm delivery. (Moreau et. Al., *International Journal of Obstetrics and Gynaecology*, 2005. Ancel et. Al. *Human Reproduction*, 2004)
   - The risk of prematurity following an induced abortion is the same as the risk of prematurity if the woman smokes a pack of cigarettes a day when pregnant. (Moreau et. Al., *International Journal of Obstetrics and Gynaecology*, 2005.)
   - Prematurity in turn is associated with an enormous increase in the risk of cerebral palsy and other health problems.

4. **Lower fertility after abortion**
   - Women who have abortions experience 6% lower fertility than women who do not have abortions. (Frank et al., *British Journal of Obstetrics and Gynaecology*, 1993) [WHAA, 64]
5. **Abortion and STDs**
   - Women with a history of induced abortion were found to be 3.15 times more likely than women without a history of induced abortion to be seropositive for the organism causing Pelvic Inflammatory Disease (PID). (Jonsson et al., *Sexually Transmitted Disease*, 1995) [WHAA, 67]
   - Chlamydia is a major cause of post-abortion PID (Giertz et al., *Acta Obstetrica et Gynecologica Scandinavica*, 1987) [WHAA, 68]

6. **Abortion and breast cancer**
   - Out of 37 studies up to the year 2003 of the link between induced abortion and subsequent breast cancer, 23 showed a 30% increased risk of breast cancer for women who experienced induced abortion. [WHAA, 26-8].
   - Since 2003 five studies have been published showing no link between abortion and breast cancer. However, these studies are either underpowered or use a control group with the same risk characteristics as the women who have had induced abortions.
   - The National Cancer Institute denies any link between induced abortion and breast cancer
   - However, the National Cancer Institute has itself sponsored two major studies which discovered a 50% greater risk and 137% greater risk respectively of breast cancer among women who aborted their pregnancy. (Daling et al., *Journal of the National Cancer Institute*, 1994; Pike et al., *British Journal of Cancer*, 1981) [WHAA, 19]

7. **Complication rates**
   - A study conducted by the College of Physicians and Surgeons of Ontario shows that after induced abortion there is a 4 times increase in medical admissions and a 5 times increase in surgical admissions to the hospital. (Ostbye T, Wenghofer EF, Woodward CA. *American Journal of Medical Quality* 2001.)