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June 14, 1995

## Dear Colleague:

You may have recently received a letter from the National Abortion Federation ("NAF") alleging that our June 8 letter to you contained "inaccurate and deceptive information" about partial-birth abortions. In fact, it is the NAF letter that is inaccurate and deceptive.

The NAF, a trade association of abortion providers, makes a number of claims regarding the partial-birth abortion procedure that are inconsistent with the statements of both Martin Haskell and James McMahon, the abortionists who actually invented and perform these procedures.

NAF's letter asserts that the drawing we provided you was "highly imaginative" and "misleading." However, the <u>American Medical News</u> reported that Dr. Haskell said the drawings were accurate "from a technical point of view."

Prof. Watson Bowes of the University of North Carolina at Chapel Hill, a distinguished physician and prominent authority on fetal and maternal medicine, reviewed an article by Dr. Haskell describing a partial-birth abortion procedure and confirmed that the drawings are "an accurate representation of the procedure described in the article by Dr. Haskell."

The NAF letter claims, "[F]etal demise is virtually always induced by the combination of steps taken to prepare for the abortion procedure." But, in an American Medical News article published July 5, 1993, both Drs. Haskell and McMahon "told AM News that the majority of fetuses aborted this way are alive until the end of the procedure."

Furthermore, Dr. Haskell has referred to the scissors thrust itself as the act that kills the baby: "When I do the instrumentation on the skull...it destroys the brain sufficiently so that even if [the baby's head] falls out at that point, it's definitely not alive." (Dayton News, Dec. 10, 1989.)

After a review of Dr. Haskell's article, Prof. Bowes concluded that the fetus is alive at the time the partial-birth procedure is performed and noted that Dr.

Haskell explicitly contrasts his procedure with other procedures that do induce fetal death within the uterus.

The NAF letter also suggests that these partial-birth abortions are only performed in unusual circumstances. Yet neither Dr. Haskell nor Dr. McMahon claims that this is a technique of last resort. In fact, their writings advocate this method for <u>any</u> late-term abortion. Moreover, a previous NAF memo to its members counsels them not to apologize for this particular procedure and states:

There are many reasons why women have late abortions: life endangerment, fetal indications, lack of money or health insurance, social-psychological crises, lack of knowledge about human reproduction, etc. (emphasis added).

The NAF letter further states, "This is not a different surgical procedure than D&E...." This statement is clearly erroneous. D&E involves fetal dismemberment within the uterus. While indeed cruel and violent, D&E is nevertheless distinct from the partial-birth method. Dr. McMahon himself has provided the Constitution subcommittee with a factsheet distinguishing the intrauterine dismemberment D&E procedure (which he calls "disruptive D&E") from the partial-birth procedure (which he calls "intact D&E").

Finally, NAF claims the term "partial-birth abortion" is erroneous. On the contrary, there is no uniformly accepted medical terminology for the procedure, and we define "partial-birth abortion" in our bill as "an abortion in which the person performing the abortion partially vaginally delivers a living fetus before killing the fetus and completing the delivery." Clearly, the term "partial-birth abortion" is straightforward and accurate.

It is our hope that we can have a candid debate on the realities of this procedure, without disinformation or euphemisms. Please join us in putting a stop to these abhorrent procedures by becoming a cosponsor of the Partial-Birth Abortion Ban. Call Keri Harrison at 6-7680 with questions or to cosponsor.

Sincerely yours,

Charles T. Canady Member of Congress

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