## Mugged by Ultrasound

Why so many abortion workers have turned pro-life.

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Abortion rights activists have long preferred to hold themselves at some remove from the practice they promote; rather than naming it, they speak of "choice" and "reproductive freedom." But those who perform abortions have no such luxury. Instead, advances in ultrasound imaging and abortion procedures have forced providers ever closer to the nub of their work. Especially in abortions performed far enough along in gestation that the fetus is recognizably a tiny baby, this intimacy exacts an emotional toll, stirring sentiments for which doctors, nurses, and aides are sometimes unprepared. Most apparently have managed to reconcile their belief in the right to abortion with their revulsion at dying and dead fetuses, but a noteworthy number have found the conflict unbearable and have defected to the pro-life cause.

In the aftermath of Roe v. Wade, second-trimester abortions were usually performed by saline injection. The doctor simply replaced the amniotic fluid in the patient's uterus with a saline solution and induced labor, leaving it to nurses to dispose of the expelled fetus. That changed in the late 1970s, when "dilation and evacuation" (D&E) emerged as a safer method. Today D&E is the most common second-trimester procedure. It has been performed millions of times in the United States.

But although D&E is better for the patient, it brings emotional distress for the abortionist, who, after inserting laminaria that cause the cervix to dilate, must dismember and remove the fetus with forceps. One early study, by abortionists Warren Hern and Billie Corrigan, found that although all of their staff members "approved of second trimester abortion in principle," there "were few positive comments about D&E itself." Reactions included "shock, dismay, amazement, disgust, fear, and sadness." A more ambitious study published the following year, in the September 1979 issue of the American Journal of Obstetrics and Gynecology, confirmed Hern and Corrigan's findings. It found "strong emotional reactions during or following the procedures and occasional disquieting dreams."

Another study, published in the October 1989 issue of Social Science and Medicine noted that abortion providers were pained by encounters with the fetus regardless of how committed they were to abortion rights. It seems that no amount of ideological conviction can inoculate providers against negative emotional reactions to abortion.

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