

ABORTION ACTIVISTS ENDANGER PUBLIC HEALTH

Should abortions be considered elective surgery and therefore not be permitted during the coronavirus pandemic, or are they an essential healthcare issue that should be permitted? Predictably, in pro-life states like Ohio and Texas officials are saying abortions constitute elective surgery and should therefore not be allowed, while in pro-abortion states like Massachusetts and Washington, officials are defending them.

This issue has even split those in the medical community working in the same facility. Nearly 300 doctors, nurses and other healthcare workers at the University of Pittsburgh Medical Center recently sent a letter to management asking them to “postpone procedures that can be performed in the future” so that they can accommodate the expected surge in patients due to the coronavirus.

The central issue in this case transcends the usual abortion debate: any elective surgery that is being performed during this crisis uses resources that are needed to help those who are hospitalized with the coronavirus.

Chethan Sathya is a pediatric surgeon and journalist in New York City. Here is his analysis of what is at stake. “Surgeries are resource-intensive—requiring surgeons, anesthesiologists, nurses, transport teams, medical beds and equipment such as ventilators. Suspending elective surgeries will free up those doctors, other medical personnel, and rooms and equipment.”

Dr. Sathya is also concerned about the effect that doing elective surgeries is bound to have on medical staff. “Because of the number of health-care workers required to work close to one another for each surgery,” he writes, “I have no doubt

that continuing to perform non-urgent surgeries would lead to further spread of the virus among health-care workers.”

In other words, those who are pushing for abortions during the coronavirus are endangering the lives of healthcare workers. But do they care?

Here is how Planned Parenthood has responded. “We’re closely monitoring the spread of the new coronavirus, or COVID-19. The health and safety of our patients, staff, and communities is our top priority.”

Notice that Planned Parenthood is only interested in its own agenda. It says not a word about tying up resources needed by those who are truly sick. By taking away needed personnel, gear and equipment from servicing those who are infected with the coronavirus, it is jeopardizing the lives of those at risk.

The heart of this dispute rests on the question of whether abortion is elective surgery or not. Planned Parenthood, NARAL, and others in the abortion industry argue that abortion is not elective surgery and must be provided at all times. But is it?

Take two women, Joy and Jane. Joy has a life-threatening heart problem and is scheduled for surgery. Jane wants an abortion. No one in his right mind would equate the two. If Joy doesn’t get heart surgery, she will probably die. If Jane is denied her abortion, she lives (as does her baby).

It comes down to this: Joy has a need; Jane has a want. No woman wants to have heart surgery—they either need it or they don’t. Conversely, no woman needs an abortion—it is, as they like to say, a matter of choice.

Does that mean that abortion is like any other elective surgery, such as a facelift (rhytidectomy) or a tummy tuck (abdominoplasty)? No. In those cases, only the person’s face or tummy is affected. In the case of an abortion, another person is affected. And there is nothing elective about that person’s fate.