

**TESTIMONY OF MISSOURI RIGHT TO LIFE  
IN OPPOSITION TO HB 1607  
March 21, 2012**

Missouri Right to Life is energetically opposed to HB 1607. HB 1607 is actually a call for the State of Missouri to encourage emergency abortions, not emergency contraceptives. It orders the Department of Health & Senior Services to disseminate factually erroneous information that the use of emergency contraception does not harm or terminate a pregnancy, when in fact terminating a very early pregnancy is one of the primary ways that emergency contraception works. The end result is that HB 1607 requires the Department of Health & Senior Services to ignore Missouri law by using state resources to encourage abortion drugs, in violation of sections 1.205 and 188.200-.215, RSMo. The law aside, spending the state's money to encourage abortions, even very early abortions, is a policy that is offensive to the vast majority of Missourians.

The pro-abortionists claim that so-called "emergency contraception" is not abortion. They do this only by re-defining "pregnancy" to begin with implantation of the week-old human being, not with fertilization. But medical textbooks agree that pregnancy begins at fertilization, with the union of egg and sperm.

"Human development begins after the union of male and female gametes or germ cells during a process known as fertilization (conception)... This fertilization ovum, known as a zygote, is a large diploid cell that is the beginning . . . of a human being." K. Moore, *Essentials of Human Embryology* 2 (1988).

"The development of a human begins with fertilization, a process by which the spermatozoon from the male and the oocyte from the female unite to give rise to a new organism, the zygote." T. Sadley, *Langman's Medical Embryology* (1995).

"Almost all higher animals start their lives from a single cell, the fertilized ovum (zygote)... The time of fertilization represents the starting point in the life history, or ontogeny, of the individual." B. Carlson, *Patten's Foundations of Embryology* 3 (1996).

True “contraception” is “contra-conception.” In other words, it is the preventing of conception. Preventing implantation of the newly-conceived life is not “contraception,” it is abortion. Politically-driven organizations such as Planned Parenthood have worked hard to try to make people think that pregnancy begins at implantation and not fertilization. They have allies in the medical profession who are going along, so you will hear definitions of the beginning of pregnancy that follows Planned Parenthood’s new political line. Nevertheless, a fact remains that they cannot define away: preventing implantation means the loss of a human life that has already begun. Conception is not prevented by so-called emergency contraception.

At the time of implantation, when the pro-abortionists say that pregnancy begins, a new human being is already a week old and is many times the size it was when its existence began. While its phenomenal growth continues, the new human being is also beginning the fascinating process of specialization, an orchestration of biological processes that is so complex that scientists cannot yet follow it. The most complicated structure or machine ever built by mankind is a tinker-toy compared to what a week-old human is already making of himself or herself by the time of implantation.

The promoters of the morning-after pills admit that the pills often work by preventing implantation.

“[S]ometimes emergency contraception prevents fertilization, and sometimes it prevents implantation after fertilization has already occurred.” Medline Plus Medical Encyclopedia, “Emergency Contraception,” available on-line at <http://www.nlm.nih.gov/-medlineplus/ency/article/007014.htm>.

The Food & Drug Administration has described the mechanism of emergency contraceptives as follows:

“EC pills...act by delaying or inhibiting ovulation, and/or altering tubal

transport of sperm and/or ova (thereby inhibiting fertilization), and/or altering the endometrium (thereby inhibiting implantation).” (FDA Notice, 62 Federal Register 861 [Feb. 25, 1997]).

Even Planned Parenthood’s own research arm, the Alan Guttmacher Institute, has confirmed the effect of emergency contraception on implantation:

“Emergency contraceptive pills, also known as morning-after pills, are a postcoital hormonal treatment that appears to inhibit implantation of the fertilized ovum” (C. Harper and C. Ellertson, “Knowledge and Perceptions of Emergency Contraceptive Pills Among a College-Age Population: A Qualitative Approach,” 27 Family Planning Perspectives 149 [July-August 1995]).

There can be no mistake about it; emergency contraception is often an abortion, not contraception. It is not just pro-life groups and religious leaders that say so, For example, Brown University associate professor of medicine, Ralph Miech, M.D., Ph.D., wrote in 1998, “This type of pill causes an abortion...From a pharmacologic perspective, this type of pill should be called an ‘abortion-after pill’.” (Providence Journal, August 3, 1998.)

Germaine Greer, one of the best-known feminists of the 1960’s, has referred to the campaign for emergency contraceptives as “the cynical deception of women by selling abortifacients as if they were contraceptives,” a deception she finds “incompatible with the respect due to women as human beings” (Greer, *The Whole Woman*, 1999, p. 93).

If HB 1607 is amended to reflect the scientific truth, it could actually serve a useful purpose. For example, if it required the Department of Health to disseminate materials advising women that emergency contraception often works to cause abortions, it would do a service to Missouri women. But as long as HB 1607 serves as a vehicle for

misinformation rather than truth, this Committee and the General Assembly should have no part of it.

For these reasons, Missouri Right to Life urges that HB 1607 be defeated.