

## Criminal Abortion Is A Curse

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Six hundred women were admitted in 'B' wing of Lady Willingdon Hospital, Lahore for abortion. One hundred and fifty six cases admitted that they had gone back to street abortionists. There were 43 maternal deaths in unit II that year out of which 87% were due to deaths. Out of these 35 deaths were due to abortions. 34 were having procured illegal abortion. Out of 34 patients 66% were grand multipara and nearly 50% had residence outside Lahore 25-30 % were of over 30 years of age, 83% belonging to poor socioeconomic grade.

**Key Words:** Criminal abortion, maternal mortality.

Abortion is the expulsion of products of conception before the foetus becomes viable. Is the issue of abortion as simple as this definition? I wish it would be, but it is not. The attitude of different people living in different countries belonging to different communities and religions is different towards abortion. This is not a straight forward clinical problem but of great emotional and sentimental importance for the individual. A spontaneous abortion is taken calmly but if a couple decides induction of abortion, they are not at liberty, until it was illegal nearly in every country. Every religion condemns it. Did this strict standard stop abortion? This has been going on everywhere all the time. The result of this scornful and strict attitude has been flourishing illegal abortions. They are usually done by untrained and unskilled persons ignorant of medical principles in most unhygienic way by dangerous articles and methods<sup>1</sup>. These abortions by back street abortionists have taken a lot of lives and complicated many more.

In recent years abortion laws have been liberalised in many countries and medical profession is allowed to induce abortions in scientific way for social and psychiatric reasons as well.

Pakistan's law is still strict and Islam does not allow abortions. We attribute the liberal attitude of other countries to their permissiveness, abnormality and deplore their way of life. But every active gynaecologist in Pakistan knows the magnanimity of the problem. Every day we admit in our hospitals women in serious condition who had procured abortion somewhere. Many die and those who survive undergo a traumatic experience of long ailment. We decided to assess the whole situation at Lady Willingdon Hospital.

### Material and Method

There are separate isolation wards at Lady Willingdon Hospital where all the abortion cases are admitted. We carried out a retrospective study on all the abortion cases which were admitted in Unit-II. All the records of these patients were analysed. Additional information was collected from the registers of admission, annual statistics register and record of the operation theatres. History given by the patient was carefully noted. Pelvic examination and reports of the specimen if available were scrutinised. On the basis of this history we collected the cases where outside interference was suspected. The real figures of

interference may be much higher than presented in this paper. We all know that in most of the cases of illegal abortion, there is always some kind of strict confidentiality that the patient does not disclose the name of the abortionist. So there must be many in our survey who did not admit the attempt of abortion.

### Results

1. Six hundred women were admitted in 'B' Wing of Lady Willingdon Hospital for abortions but only 13.33% of the total number. 86% resulted in foetal wastage.
2. One hundred and fifty six cases admitted that they had gone to back street abortionists. Very high proportion (22%). Those who survived remained hospitalised for long times as much as two to three months.
3. There were 43 maternal deaths in Unit-II that year out of which 35 (i.e. 81%) were due to abortions. Out of these 35 deaths due to abortions 34 were the women who had procured illegal abortion.

Further analysis of the patients who had criminal abortion revealed that:

- a. 40% women were in the age group of 25-30 years of age.
- b. 83% belonged to the poor social grade.
- c. 66% were grand multipara and
- d. nearly 50% had residence outside Lahore in either small town or village.

### Discussion

These results should be an eye opener for anybody. I am sure that this is the representation of all the busy units in major cities. A maternal mortality rate of 17 per thousand births due to criminal abortions is not something on which citizens of a civilised country should sit quietly. These are not the unmarried girls who have procured abortion but the married women of low social grade in the prime of their life who have attempted it. We cannot reject them simply by labelling them as a moral girls. There might have been a genuine reason. She may be thinking that the next child is coming to soon and because of low income, she cannot look after her. It is not necessary that she hates the child in her womb but she may be loving the existing child too much. We know very well that women are afraid of undergoing even a minor operation like D&C. Nobody

likes to put her life into danger without reason. A reason which may not be a sound one in our view. When there was discussion in U. K. about liberalising the abortions, medical profession was very much divided about it. The protagonists argued that the object allowing the induction of abortion in hospitals under good medical care was not to increase abortions but to reduce and stop the back street abortions as a result of which many women either die or develop permanent ill health. They insisted that a woman who decides to have an abortion, gets it somehow. You cannot stop her just by saying no. She has to be pursued. The reports after liberalisation confirmed this view. In recent years death due to abortion is non-existent<sup>2</sup>. Similar results are described by Leuman in 1974 from New York where abortion was liberalised in 1970. There was 58% increase of hospital induced abortions but the annual delivery rate did not fall. It increased by 8% like previous years. The other interesting findings were the spontaneous abortion fell by 20% and the unclaimed babies by 56%. Francis Bandry et al (1974) grouped the pregnant women in three categories.

1. Those who know immediately that the pregnancy is for them and that they will carry through to term regardless of the conflict involved.
2. Those who know immediately that they cannot, should not or do not want to have a baby, on a conscious level.
3. Those who are unable to decide.

These comments hold good for us as well. Just by saying that because Islam does not allow abortions and just because our sexual morals on face value are higher than other nations is not enough. Do our people really understand abortion and think that it is a sinful act. Every general practitioner and gynaecologist receives couples almost daily who state that the period is delayed only for few days, can we have some medicine for it? If you say it is not possible and it is not right. The usual answer is well it is only in early phase. These people come from every class of our society and include the religious men as well. So in their minds conception is only in early phase and if it can be procured by the use of medicine, it is right, but if it is advanced and surgical method has to be used, then many might have a second thought<sup>3</sup>. Probably this attitude in most of the cases is due to the fear about what the other persons might say. As long as they can get it done without the knowledge of somebody else it is right. Where is the morality? It is just the fear of gossip and condemnation from others which stops them. These people could be placed in group 3 of the grouping of Francis Bandry (mentioned before). Most of these and those of group 2 get the abortions done, no matter where they have to go. There are plenty of places in our country, known to every body including the legal authorities. Who does not know ABC in Lahore. There are many others like DEF and XYZ.

These women have killed more pregnant women than any other single factor. At Lady Willingdon Hospital more than 80% maternal deaths are in cases of illegally induced abortions, and if I start describing individual complicated cases, this can go on for days. Even 26% admission of illegal abortions is very high and maternal mortality rate of 17 per 1000 deliveries should be an eye opener for everybody. We cannot sit idle in this situation. These are not adulterous or promiscuous women, as I have already said, they are married, multigravida in the prime of their fertile life. The pregnancy was unwanted so they want to get rid of it. There have been suggestions that the population planning is the answer. I have heard my professor many times saying that during the 30 years of professional life, he has noticed tremendous increase in the abortions since the population planning campaign started. His view was that the way population planning is being promoted and advertised, it is educating the people to hate their children. If they get pregnant for the fourth or fifth time, they are made to feel as if they have done a terrible thing and they want to get rid of it. The real sin has become a minor offence in their minds. I do not know how far you should accept this but I do believe that there is truth in it.

I am sure you will agree with me that the above mentioned rate of deaths due to illegal or criminal abortions is a real curse on our society. These women who decide about abortion, either have clear ideas or are in state of conflict. We must help them. We must not keep double standards. On one had we say abortion is illegal, on the other back street abortionists are allowed to have open shops. Our women must be protected from these murderers. The members of the society must find ways to ask law to act. I am not in favour of liberal attitude towards abortion. I do believe it is a sin. Doctor's prime duty is to save life. If knowing we let people die with out acting, this is equally a sin I would go as far to say that if you cannot educate the people to stop them from going to ABC and if you cannot get those shops closed, then open your minds and welcome these women so that they get proper advise/treatment under full medical care. This is saving life.

#### References

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