【一群頂級的美國醫生指出: 墮胎永不是拯救母親的方法】

一群維護生命的醫生，來自美國多個醫學協會，完全擁護該國的「墮胎倖存者保護法」（S. 130），並斷言故意殺害未出生的孩子絕不是挽救母親生命的醫療程序。

S. 130保護法指出: 「提供合理的科學解釋、醫學的準確性和尊重的方式，以確保在墮胎中倖存下來的無辜人類，同樣擁有人類的尊嚴和待遇，接受同等級的新生兒醫療護理。 它更確保有殘疾的嬰兒，不會在出生時成為被殺害的目標。」

值得一提的是，醫生們特別指出: 在20週或以後的妊娠期，絕對沒有需要先把胎兒殺掉而拯救患危病的母親，正確的做法是，馬上以剖腹產把嬰兒取出，這才是關顧及同時拯救母親及嬰兒的方法，醫生們認為在醫學上沒有需要以不人道的墮胎手術把一個小人類殺害。

這群來自美國多個醫學協會的醫生，代表著該國超過3萬名的醫生會員。

<https://tinyurl.com/y6c48umv>

#保護胎兒 #不墮胎

[https://www.facebook.com/prolife.dpcmf/posts/2482886458452154?\_\_xts\_\_[0]=68.ARA52bqty6lt6g\_72O9Dayd5V\_8VYh6LtxATkeNZinp48htKG05eSNtLyZMWDv4YNXEyOkd3juYOXbgWJP0F\_KAuqeni\_2PPYpdpXke3bofZkOwbKHefqDFR\_E5xMg47QyCllegrRn\_ijpAIhE0xuYqZcpE7IZD1e\_zpHcQaQngxWxU4JzG810ZoOCJKK5Rl6Hvd\_sa4xhZxN8usDF4ajZGWInSEP9jqwCUausHwucGiNQeQadwRG-ZSgARrU\_lc54N\_0yctARqtJsNJBXXaFSpCyUKgVCkOC13n9UeVpMUH8lcIOc7Hb8QpHuIqLjcRsZQ1dEDZAP\_ZQdnMOvDyiwNrLSVO&\_\_tn\_\_=-R](https://www.facebook.com/prolife.dpcmf/posts/2482886458452154?__xts__%5b0%5d=68.ARA52bqty6lt6g_72O9Dayd5V_8VYh6LtxATkeNZinp48htKG05eSNtLyZMWDv4YNXEyOkd3juYOXbgWJP0F_KAuqeni_2PPYpdpXke3bofZkOwbKHefqDFR_E5xMg47QyCllegrRn_ijpAIhE0xuYqZcpE7IZD1e_zpHcQaQngxWxU4JzG810ZoOCJKK5Rl6Hvd_sa4xhZxN8usDF4ajZGWInSEP9jqwCUausHwucGiNQeQadwRG-ZSgARrU_lc54N_0yctARqtJsNJBXXaFSpCyUKgVCkOC13n9UeVpMUH8lcIOc7Hb8QpHuIqLjcRsZQ1dEDZAP_ZQdnMOvDyiwNrLSVO&__tn__=-R)

**Top docs say no abortion is ever necessary to save a mother’s life**

<https://www.lifesitenews.com/news/top-docs-say-no-abortion-is-ever-necessary-to-save-a-mothers-life>

Mar 6, 2019

PRINCETON, New Jersey, March 6, 2019 ([LifeSiteNews](https://www.lifesitenews.com/)) — Physicians who lead medical associations in the United States fully endorsed the Born-Alive Abortion Survivors Protection Act (S. 130) and asserted that the intentional killing of a pre-born child is never a medical necessity to save a mother’s life.

In endorsing S. 130, they wrote that the bill “provides a scientifically sound, medically accurate, and respectful approach to ensure that the innocent human being who survives an attempted abortion will be treated with the same human dignity and respect that similarly aged human beings receive in the course of good neonatal medical care. It also ensures that human beings with disabilities are not targeted for intentional killing at the moment of birth.”

A Senate vote on Feb. 25 failed to reach the 60 votes necessary for the Born-Alive Abortion Survivors Protection Act, [sponsored by Republican Sen. Ben Sasse of Nebraska](https://www.senate.gov/legislative/LIS/roll_call_lists/roll_call_vote_cfm.cfm?congress=116&session=1&vote=00027), for the bill to overcome the current filibuster rules and pass. Originally introduced in 2015 and proposed in the current session, the act would require abortionists to provide medical care for babies who survive abortion. Under the [2002 Born-Alive Infants Protection Act](https://www.congress.gov/bill/107th-congress/house-bill/2175), abortion survivors are recognized as human beings with human rights, but did not specify how they should be treated by medical professionals.

The article at [Public Discourse](https://www.thepublicdiscourse.com/2019/02/49619/) cited certain “medical facts” to bolster the physicians’ endorsement of the bill.

**“Fact 1: It is an undisputed scientific fact that a distinct, living human being exists in the womb of a pregnant mother.”**

The article noted that at the moment of fertilization, a human being meets scientific criteria for a living organism completely distinct from the mother and forming no part of her body. Therefore, the doctors argue that it is “scientifically correct” for S. 311 to identify abortion survivors as human beings worthy of the “full protection of the law.”

To the contrary of assertions heralded by the leftist ACLU that “abortion is healthcare,” the signatories of the article noted:

**“Fact 2: Abortion is not healthcare, much less an essential part of women’s health care, and abortions in the third trimester are not done to save a woman’s life.”**

They argued that because less than 15 percent of OB-GYNS commit abortions. “Abortion is not an essential part of women’s healthcare. The vast majority of abortions are done by abortion providers who do not provide any other kind of medical care for the woman. Abortion treats no disease. Pregnancy is not a disease, and deliberately killing the unborn child by abortion is not healthcare,” they wrote.

Referring to testimony provided by abortionists to Congress that abortion separates the mother from her baby with the purpose of killing the baby, the physicians noted that an abortion survivor is called a “failed abortion” by abortion providers. This is unlike a normal delivery, they wrote, which “separates the mother and her fetus for the purpose of life.”

They wrote that there are “rare circumstances” leading to the jeopardy of a mother’s life, which may be due to pre-existing conditions or pregnancy complications. “It is extremely rare for this to occur prior to the point of viability (currently 22 weeks after last menstrual period, 20 weeks after fertilization). After 20 weeks’ fertilization age, it is never necessary to intentionally kill the fetal human being in order to save a woman’s life.” They argue that in cases when the mother is actually in danger in the latter half of pregnancy, “there is not time for an abortion, because an abortion typically is a two- to three-day process.” Instead, immediate delivery is needed, which can be done by inducing labor or carrying out a Caesarean section. Saving and caring for the lives of the mother and baby, they wrote, is the appropriate response. “There is no medical reason to intentionally kill that fetal human being through an inhumane abortion procedure,” they wrote, which includes poisoning and dismemberment.

**“Fact 3: No matter the circumstances of their birth, infants who are born alive must be given appropriate medical care.”**

“Any infant who is born alive, at any stage of development, is a person entitled to the protections of the law and appropriate care as a new patient. There is no scientific or legal reason to distinguish between human beings born after an attempted abortion and human beings born after attempted live birth,” the doctors wrote. “Obviously, a distressed newly born baby presents for emergency medical care at the moment of her or his birth, regardless of whether that birth results from an abortion attempt or attempted live delivery. Citing the [Emergency Medical Treatment and Live Labor Act](https://en.wikipedia.org/wiki/Emergency_Medical_Treatment_and_Active_Labor_Act) of 1986, they noted that hospitals are required to examine and treat any person who presents for emergency medical care.

“There is no scientific or legal reason to distinguish between human beings born after an attempted abortion and human beings born after attempted live birth,” they wrote, adding that medical professionals are “notoriously poor predictors of whether infants will live or die when supportive medical care is offered.” If a baby’s life is in danger, parents should be offered the benefits of medical care and be offered perinatal hospice, they wrote.

It is common for abortionists to carry out abortions on preborn babies at 22 weeks’ gestation or after. [Late-term abortionist Dr. Leroy Carhart](https://www.lifesitenews.com/news/late-term-abortionist-says-protecting-babies-born-alive-after-failed-abortions-is-ignorant)recently said in an interview that Sen. Sasse is “ignorant” or even “lying” with regard to the practice. “I don’t care what her reasons are, if she knows it’s what she needs to do,” Carhart told KETV Newswatch 7 of his willingness to commit abortions.

The pro-life physicians signing the article at Public Discourse were: Dr. Donna J. Harrison, executive director of the [American Association of Pro-Life Obstetricians and Gynecologists](https://aaplog.org/); Dr. Michelle Cretella, executive director of the [American College of Pediatricians](https://www.acpeds.org/); Dr. John Schirger, president of the Catholic Medical Association; Dr. David Stevens, CEO of Christian Medical & Dental Associations; and Dr. Jane Orient, executive director of the Association of American Physicians and Surgeons. They represent more than 30,000 physicians in the United States who, according to their article, “practice according to the Hippocratic Oath.”