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Newsletter February 2012

A message to fellow providers, referrers, and friends:

This past month I came across three informative articles dealing with important aspects of research in women's health. "Abortion Rates Higher Where it's Illegal", is an interesting article based on a recent study that showed abortion rates are actually higher in countries where the procedure is illegal. The article gives statistics on abortion rates in these countries and analyzes how these issues affect all women, even those living in the United States and Canada.

Secondly, "Contraceptive Recall Could Put Pfizer at Risk of Multi-million dollar Lawsuit, Attorney Says" is an article addressing the recent recall from Pfizer due to low potency levels in their birth control pills. This recall has been said to be the largest in recent years, and could leave Pfizer vulnerable to a multi-million dollar lawsuit

Lastly, "Keep Baby's Sex Secret to Prevent Gender-based Abortions, Doc, Says" deals with the possible legislative changes that could require the sex of a woman's child remain a secret until after 30 weeks of pregnancy. Such a change is designed to be a preventative abortion measure and may conflict with the ethical issue of a woman having the right to obtain personal medical information.

As always, I hope you find this newsletter both interesting and informative.

Irving M. Feldkamp IV, MD

President

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Abortion rates higher where it's illegal

More abortion in countries where procedure illegal and largely unsafe, study finds By Maria Cheng, Associated Press January 18, 2012 <msn.com>

LONDON — Abortion rates are higher in countries where the procedure is illegal and nearly half of all abortions worldwide are unsafe, with the vast majority in developing countries, a new study concludes.

Experts couldn't say whether more liberal laws led to fewer procedures, but said good access to birth control in those countries resulted in fewer unwanted pregnancies. The global abortion rate remained virtually unchanged from 2003 to 2008, at about 28 abortions per 1,000 women aged 15 to 44, a total of about 43.8 million abortions, according to the study.

The rate had previously been dropping since 1995. About 47,000 women died from unsafe abortions in 2008, and another 8.5 million women had serious medical complications. Almost all unsafe abortions were in developing countries, where family planning and contraceptive programs have mostly levelled off. "An abortion is actually a very simple and safe procedure," said Gilda Sedgh, a senior researcher at the U.S.-based Guttmacher Institute, designated by the World Health Organization as an official Collaborating Center for Reproductive Health. "All of these deaths and complications are easily avoidable," said Sedgh, the study's lead author. Sedgh and colleagues concluded that the proportion of unsafe abortions rose from 44 percent in 1995 to 49 percent in 2008, the last year for which statistics were available and studied in the report. Sedgh acknowledged it was difficult to get an accurate number for unsafe abortions in particular and described their estimates as modest. They used sources including official statistics, national surveys, and hospital records. To account for unreported abortions, they made adjustments and relied on information from other kinds of studies, expert assessments, and surveys of women.

The research was published Thursday in the journal, Lancet. Abortion rates were lowest in Western Europe — 12 per 1,000 — and highest in Eastern Europe — 43 per 1,000. The rate in North America was 19 per 1,000. Sedgh said she and colleagues found a link between higher abortion rates and regions with more restrictive legislation, such as in Latin America and Africa. They also found that 95 to 97 percent of abortions in those regions were unsafe. The authors defined unsafe abortion as any procedure done by people lacking needed skills or in places that don't meet minimal medical standards. Sedgh said some women in Africa resort to using broken soda bottles or taking strong doses of medicines or herbal drugs to induce abortions.

Find the rest of the article at http://www.msnbc.msn.com/id/46043957/ns/health-health_care/t/abortion-rates-higher-where-its-illegal/

Contraceptive recall could put Pfizer at risk of multimillion-dollar lawsuit, attorney says

By Alex Crees

February 1, 2012 < Fox News.com >

Pharmaceutical giant Pfizer ordered the recall Tuesday of at least a million oral contractive packets because the pills might not be potent enough to prevent pregnancy. Pfizer said the recall affected 14 lots of Lo/Ovral-28 tablets and 14 lots of Norgestrel and Ethinyl Estradiol tablets. The action could leave the pharmaceutical giant vulnerable to a multi-million dollar lawsuit, according to one attorney.

In a statement, Pfizer said consumers exposed to affected packaging should begin using a non-hormonal form of contraception immediately, and patients who have the affected product (lot numbers are provided on the company website) should notify their physician and return the product to the pharmacy.

Dr. Manny Alvarez, senior managing health editor of FoxNews.com, said this recall of birth control pills is one of the largest he can remember in recent years. "If there's one thing that for years women have relied on, it's that the sun is going to come out in the morning, you have to pay taxes, and that your birth control pills will work," he said.

Find the full article at http://www.foxnews.com/health/2012/02/01/contraceptive-recall-could-put-pfizer-at-risk-multi-million-dollar-lawsuit/?intcmp=obnetwork

Keep baby's sex secret to prevent gender-based abortions, doc says

By MyHealthNewsDaily

January 16, 2012 <msnbc.com>

Doctors should not tell pregnant women the sex of their baby until 30 weeks into a pregnancy, one physician is arguing, taking a stance that is sure to be controversial.

By not revealing a fetus' sex, doctors could prevent abortions related to the sex of the baby, according to Dr. Rajendra Kale, interim editor-inchief of the Canadian Medical Association Journal. The practice of "sex selection," or the aborting of female fetuses because of a preference for sons, is an issue in several Asian countries, and may also be done by some immigrants in Canada and the United States, Kale said. "A pregnant woman being told the sex of the fetus at ultrasonography at a time when an unquestioned abortion is possible is the starting point" of sex selection, Kale wrote in the editorial published online in the lastest issue of CMAJ.

Currently, most pregnant women in the United States get an ultrasound between 18 and 22 weeks of pregnancy to look for fetal anomalies. Kale pointed to research in Canada and the United States indicating that immigrants in certain ethnic groups, including people from China, Korea and India, selectively abort female fetuses: couples who have two daughters are more likely to have a son as their third child than would be expected if left to chance. Two large organizations of doctors — the Society of Obstetricians and Gynaecologists of Canada, and the American Congress of Obstetricians and Gynecologists — agree that sex selection is unethical. Still, withholding information about the sex of a fetus from a woman is also not ethical, according to the ACOG. "Because a patient is entitled to obtain personal medical information, including information about the sex of her fetus, it will sometimes be impossible for health care professionals to avoid unwitting participation in sex selection," according to a 2007 ACOG committee report.

Find the full article at http://vitals.msnbc.msn.com/_news/2012/01/16/10168064-keep-babys-sex-secret-to-prevent-gender-based-abortions-doc-says

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