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## Archive for Robert Kast

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### Miami Herald, The (FL) September 17, 1989

DO NOT ENTER

Author: DEBBIE SONTAG Herald Staff Writer

Hattie M., a teacher's aide, was 21 years old when she picked up the Dade County phone book and looked under A for abortion.

She and her husband already had two kids and they couldn't afford another. It was that simple.

So — let's see: Abortion Access Center, Abortion Clinic- Hospital Center, Abortion Information Center. There. All in bold type, all at the same phone number. Must be the place to go. Safe, cheap and confidential, said the phone book. Near Dadeland in an affluent area, so it's not some sleaze joint, Hattie thought. She called right away. Bring \$175, they told her. Cash.

Dr. Robert Kast, a graduate of the University of Guadalajara School of Medicine, estimated that she was 16 weeks pregnant. He performed an abortion and sent her home to Florida City, declaring the procedure "complete and uneventful," according to Hattie. She was relieved to have it over.

That night eight years ago, however, she began to bleed. Heavily. By the time the ambulance came to take her to James Archer Smith Hospital in Homestead, she was unconscious.

An X-ray exposed a dead fetus, about five months old.

Later, Kast would tell hospital doctors that he knew the abortion had been incomplete, that he had expected the patient to “pass” the fetus naturally. He would claim he had followed normal, accepted clinical procedures.

“Everybody involved was shocked and outraged,” says Dr. Charles Marshall House, then the hospital’s chief of staff. “It was the first and only time I wanted to report a doctor to the state.”

Surgeons performed a Caesarean section. They removed a mutilated, foot-long male fetus that weighed about four-fifths of a pound.

“It looked like the baby had been half-eaten by a dog,” House says.

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In the days before Roe vs. Wade, emergency room doctors were forever cleaning up after botched illegal abortions. Furtive encounters with back-alley bunglers left nearly 1,700 women dead every year.

These days, abortion is supposed to be safe. Performed by skilled professionals, it is a simple procedure. Only a handful of women die each year from abortions gone bad, and serious complications arise in less than one-half of 1 percent of all cases.

But these statistics belie an unnerving political reality. Though a woman’s right to an abortion was considered the key victory of the feminist movement, abortion has never escaped the moral taint that keeps it the most emotional political issue of our time. And in this climate of shadows, the past lingers.

Clinics have a hard time attracting reputable doctors willing to risk being vilified by the Right to Life movement. Moreover, the stigma of abortion is still so painful that many women — even those with private gynecologists — opt for the anonymity of a clinic chosen from the phone book. They don’t shop around. They want it cheap. They want it fast. And they want it over.

Embarrassed and sometimes ashamed, many women will tolerate a low standard of care without complaint. Unless severely injured, most are reluctant to file lawsuits.

And they’re not the only ones who don’t speak up.

Because of the growing militancy of the anti-abortion movement, and because of the anti-abortion leanings of the present U.S. Supreme Court, competent abortion providers find themselves in an ambiguous moral position. They know about the few bad places, the ones with careless procedures, inept doctors and untrained staff. But they are loathe to report them. They fear the adverse publicity will reflect badly on all of them at a politically inopportune time.

Altogether, it is a bad recipe for good medical care. Abortion is a business, but one in which the normal rules of a free marketplace simply don’t apply. Good clinics don’t necessarily thrive; the few bad ones are free to survive and prosper.

It’s not a happy thought. Even in the days of legal abortion, the back alley persists — on a commercial street, in a medical building, with a front door, and sometimes even with a state license.

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No abortion center in South Florida has a reputation more foul than the Eason family’s 17-year-old clinic at 6950 SW 88th Street, the place Hattie M. picked out of the phone book.

At first, in the mid-1970s, when it offered contraception, the Dadeland Family Planning Center was the place to go for many young women. High school and college students carried the clinic's ID card in their jeans' pockets, a badge of their newly awakened sexuality.

But soon it got too busy for its patients' good. The Easons lured clients with misleading ads, listing the clinic under more than three dozen names in the phone book. Women crowded into the clinic, and, on a busy day, as many as 60 patients — twice that at other clinics — were given abortions by the same physician.

Before long, the clinic's best doctor, the man responsible for its respectable reputation, quit in disgust.

Which is roughly when the Dadeland Family Planning Center — a.k.a. The Women's Referral Group, and The Abortion Counseling Center, and Planned Population, and The Women's Crisis Center, and Dade County Abortion, and Dadeland Abortion, and Florida Abortion, and Florida Family Planning, and Birth Control Information, and Adoption Counseling Association, and The Women's Center of Dade — went into a tailspin.

In the last 10 years, the clinic and its doctors have been sued 15 times. Though lawsuits themselves don't necessarily prove wrongdoing, this number is extraordinary. Over the same period, The Ladies Centers of South Florida, two busy clinics recommended by Planned Parenthood, have been sued only once.

One doctor who worked at the Dadeland clinic was a convicted sex offender. Another was reprimanded by his state licensing board for "gross malpractice." A third was responsible for more than \$500,000 in out-of-court settlements on abortions gone awry.

Year after year, there were ruptured uteruses, perforated colons and emergency hysterectomies.

Women who were not pregnant were told that they were. And probably, although this is impossible to prove, some of these women were then given what they were told, and believe to this day, were abortions.

### **Finally, one woman, the unluckiest of all, died.**

\* \* \*

Meet the Easons.

Susan Eason Hoffman, 39, the clinic president, currently lives at the Levy County Forestry Camp, a state prison in Bronson, Fla. She was convicted on 11 misdemeanor charges, ranging from possession of cocaine to leaving the scene of an accident. She had also chalked up 32 traffic convictions for speeding and reckless driving. For a time, she continued to receive paychecks from the clinic while in jail.

Brother Marc Eason, 42, a former clinic go-fer, is Inmate No. 069502 at the Dade Correctional Institution. He's doing life for karate chopping and hatcheting his Coconut Grove roommates to death. They had complained about his sloppiness, which, Marc Eason argued while representing himself in court, made it justifiable homicide.

Their sister, Marlene Berk, runs the Broward's Women Center, a Fort Lauderdale abortion clinic co-owned by their mother. (The clinic is now operating illegally. Its license expired nearly a year ago.) Berk says she has nothing to do with the Dadeland clinic, of which she was a corporate officer until a few years back.

Which leaves Betty Eason — and her 18- and 21-year-old granddaughters — in charge.

Eason is a 66-year-old widow with a thick scar on her neck from the time her son stabbed her with a serrated steak knife. (Mother deserved it for having poisoned Father, Marc Eason said before he was committed to the Michigan Center for Forensic Psychiatry. His father died of a heart attack in 1969.)

When she recently filed for personal bankruptcy, Eason owned a 1983 Mercedes-Benz, a \$700,000 office building, a \$200,000 property in Kendall and a \$120,000 interest in a property in Upper Matecumbe Key.

A talkative woman given to wearing floral print dresses and thick stockings with runs, she calls the women who visit her clinic "Dear" and "Doll."

"Don't go out there and put yourself in the hands of quacks, dear," Eason tells a Miami Herald reporter posing as a patient. "There are plenty of places that don't care about women like we do."

\* \* \*

Ellen Lorena Williams was 38 years old, and she had a good job as a personnel manager for the Dade County School Board. Married with two kids, she had no place in her life for another child. So when she realized she was pregnant, she called Dadeland Family Planning.

Williams was a big woman, six feet tall and nearly 300 pounds. Dr. Chatoor Bisal Singh, a graduate of the University of the West Indies medical school, could not tell exactly how pregnant she was. He sent her to get a sonogram and estimated from the results that Williams was 13 weeks along.

Singh, newly divorced, had just arrived in Miami from California and was "strapped for cash," he said in an interview with Tropic. He usually did not perform abortions, he said, but accepted a temporary job at the Dadeland clinic while **Robert Kast** was on leave.

Singh performed a suction abortion on Williams, after she signed a mimeographed consent form stating she was aware that "complications from abortions are uncommon in the hands of trained medical personnel; however, they sometimes occur."

Two days later, accompanied by her husband, Walter, a mechanic, she returned to the clinic from her Richmond Heights home. Holding her arms across her stomach and rocking back and forth, she said the pain was nearly unbearable. Betty Eason gave her some tea and called the doctor.

Four hours later, Singh arrived. Williams was resting on a brown Naugahyde lounge chair, covered with a blanket. Singh took Williams into an examining room and performed a second suctioning, assisted by Dr. Nabil Ghali, whose medical license, while active in Florida, had been revoked in Kentucky after he was convicted for having sexual intercourse with a 13-year-old girl.

Williams was discharged with a bottle of antibiotics. The next morning, Eason took a sample of Williams' blood to a laboratory for analysis, but the lab refused to run a culture because the clinic had not protected the specimen in a sterile container. At about the same time, Williams was being rushed by ambulance to Coral Reef Hospital, where she underwent emergency surgery.

The surgery was too late. Her uterus and bowel had been perforated during the first abortion and the infection was acute.

Williams died the next morning.

It was 1985. Of 1.6 million abortions performed in the United States that year, only six resulted in the death of the patient. The odds of dying from an abortion were less than one in 250,000.

Following Williams' death, Eason told The Miami Herald: "This has nothing to do with the clinic at all. As far as we're concerned, he didn't do anything. He did not murder that woman. You can accuse anybody of anything."

The Florida Board of Medical Examiners charged Singh with "gross or repeated malpractice." Singh still does not think he was at fault: "It was just an unfortunate combination of factors. I feel sorry that the lady died."

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Betty Eason says she didn't enter her field for the money.

"Someone very close to me nearly died in an illegal abortion in Mexico," she says. "Also, I saw a black woman in a New York hospital nearly bleed to death after she had an abortion with a coat hanger. I'm pro-choice. That's what gets me up in the morning."

Eason started out both in Michigan, where she began the Abortion AAA Advisory Center, and in Florida, where her daughter Susan Eason Hoffman opened the Women's Referral Group.

This was in 1972, the year before the Supreme Court made abortion accessible in every state. What the Easons did was to make arrangements for women to get abortions elsewhere, usually New York. They charged a fee for a service that Planned Parenthood was performing for free.

Which apparently gave the Easons an idea. They started doing business as Planned Parenthood of Oakland County, Mich., and incorporated as Planned Parenthood of Greater Miami. The Michigan Planned Parenthood people were suspicious early on, when an irate woman whose daughter had flown to New York for an abortion called to complain about the arrangements. Planned Parenthood had no record of the daughter's trip.

This mystery was cleared up when Planned Parenthood began hearing Planned Parenthood ads on the radio — ads it had not placed. In 1974, the national organization filed suit against the Easons for federal trademark infringement, and a judge told the Easons to stop using the name.

"There was a big flap," says Eve Paul, vice president of legal affairs for Planned Parenthood. "They were deliberately trying to appropriate our reputation. It was outrageous. We have very high medical standards."

Once abortion was legalized, the Women's Referral Group became one of a handful of referral agencies that flourished in the shadow of a law prohibiting the advertising of abortion services.

After nearly five years in Miami, the Easons started offering abortions on their premises. They bought their own building at 6950 SW 88th Street for \$490,000.

From the start, they had a sure-fire method for attracting customers. They listed their two phone numbers under about 40 names. One quarter-page ad in the Yellow Pages under the headline DADELAND said the Easons' Abortion Access Center was approved by the Women's Referral Group, which were one and the same.

The clinic's first doctor was **Richard Litt**, a graduate of the University of Florida Medical School who had done his residency at Jackson Memorial Hospital and was board-certified in obstetrics and gynecology. He got involved because a childhood friend, Steve Fisher, was the Easons' administrator.

Litt performed abortions there two days a week. "When I worked there, I ran the medical part and I wouldn't let them near me. I did many procedures, and had no real complications." But by 1981, Litt was disgusted with the place. Outside the procedure rooms, it was dirty, with cigarette ashes scattered about the pale linoleum. Litt says the Easons were asking him to do too many abortions a day, on women too far along in their pregnancy.

And Hoffman, who at that point had had several confrontations with the law, often acted unprofessionally at the office. "She would kick doors in and have loud drunken arguments," says another former employee.

The final indignity, Litt says, was when someone at the clinic started stealing his prescription forms, forging his signature to get narcotics in bulk. He found out after a state computer noticed an unusual number of orders for such drugs as Demerol under his name. The state Department of Professional Regulation investigated. Litt says it was proved his signature was forged, but the state reprimanded him for allowing his prescription forms to fall into the wrong hands. (The state's files from 1983 have been destroyed, says Pat Robinson, public information specialist.)

So, Litt left the clinic.

"Dr. Litt was the last mainstream gynecologist they had," says Lynn Rosenthal, a Tallahassee clinic administrator who used to work in Miami.

And he left with bitterness: "The place is a scum hole. I wouldn't send a dog there . . . They should be put in jail."

\* \* \*

Good clinics do more than provide low-cost abortions. They serve as inexpensive gynecologists, providing contraception and sex education counseling. Their owners are pro-choice activists, who see themselves as advocates for women. Usually, they belong to the National Abortion Federation and abide by a long list of exacting professional standards (including one that specifically prohibits multiple listings in the phone book).

The owners of some National Abortion Federation-certified clinics readily acknowledge that they are in it for the money, too. Clinics are businesses, and as such should be well-run and profitable, says Patricia Windle of The Aware Woman in Melbourne. "I'm a capitalist-feminist," she says.

But in addition to the feminists — the people who say their first concern is their women clients — there are "the entrepreneurs," as Janis Compton-Carr, executive director of the Florida Abortion Rights Action League, euphemistically calls them: Those in it for the bucks alone, attracted by the low start-up costs, the high demand and the all-cash nature of a business that never has any accounts receivable.

The Easons once sought the official acceptance of their respectable colleagues — **membership in the National Abortion Federation**. But they were denied, on the basis of their application, a phone interview with their doctor and a background check. The federation did offer to do an on-site inspection, asking for a deposit of \$1,200. The Easons declined the offer.

They were also considered ineligible for membership in the Florida Abortion Council, a professional association, because their clinic had a poor reputation and didn't "meet the standards," according to Patricia Martin, a former council president.

Local abortion providers never knew quite what to do with the Easons. They were all supposed to be in it together, devoted to making abortion safe, accessible and free of stigma. But solidarity couldn't be indiscriminate.

"I used to call (Hoffman) up all the time and say, 'Do you know how hard we're all working to make this safe and keep it legal? You're a disgrace,' " says Lynn Leight, a registered nurse and owner of The Ladies Centers in North and South Miami.

But no one who believed the Dadeland clinic to be bad news ever spoke up against it publicly, and no one ever registered an official complaint.

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Neither did the women who depended on the clinic. But that is not unusual.

Of all the malpractice suits filed against gynecologists in this country, only about 3.4 percent are related to abortions.

That is, primarily, because complications are so very rare. But it is also because women are reluctant to sue when they encounter difficulties at abortion clinics.

"No one wants to get on the witness stand and tell the world that they had an abortion. They don't want to be cross-examined about how many men they had in how many days," says Barbara Radford, executive director of the National Abortion Federation. "Also, these may be women who have never had access to any good health care. They just don't know they have the right to stand up for themselves."

Given the odds, the Easons had more than their share of legal challenges.

The average obstetrician/gynecologist in Florida is sued 1.2 times over the course of a 33-year career, according to the American College of Obstetricians and Gynecologists.

**Dr. Robert Kast** has been sued seven times — all for abortions done in a three-year period at Eason's clinic. Kast, then 32 years old, began doing abortions at the Dadeland clinic soon after he started practicing medicine in Florida in 1981.

In court records, Kast said the clinic asked him to perform as many as 50 abortions a day, most first trimester, but some second, which are more difficult. That's about eight hours of surgery, virtually nonstop. (**Dr. Arthur Schatz**, an experienced local practitioner, says he prefers to do no more than 35, all first trimester, because "after that, my hand is cramped, and I'm more likely to make mistakes.")

At the Dadeland clinic, Kast's first problem was with Teresa R.

It was Halloween, 1981. Teresa, accompanied by her mother, went to the Dadeland clinic for an abortion. Kast performed the routine dilation and curettage, cleaning the walls of the uterus by suction and scraping. He then sent Teresa on her way.

Two months later, Teresa's stomach was swollen and she was vomiting in the morning. Her mother took her back to the Dadeland clinic, where Kast found the girl was still pregnant, this time about 22 weeks along. He took her into the examining room to perform a second abortion, suggesting



that her mother go get a cup of coffee, according to the mother. Less than a half-hour later, Teresa was hemorrhaging from a perforated uterus. The clinic wouldn't call an ambulance, the mother said, so she had to drive her daughter to Jackson Memorial.

The fetus, which was dead, was removed in emergency surgery. A year and a half of pain later, Teresa had a total abdominal hysterectomy.

She was 16. She dropped out of school.

Of the \$175,000 she got in a settlement, all but \$64,000 went to pay attorney fees and medical bills, her attorney said.

Kast would not comment on the particulars of that or any other case. He maintains that, in every instance, "I did not deviate from any standards of care and my medical care and treatment was appropriate and fully defensible . . . No negligence was attributable to my care."

It was not too long after Teresa R.'s bad experience that Hattie M., the woman whose mangled fetus was removed in emergency surgery at James Archer Smith Hospital, underwent her trauma. (Eight years later, she declined a personal interview, and communicated with The Herald through her brother, a lawyer.)

Despite his intentions when he saw the results of Hattie's incomplete abortion, Dr. House, the former chief of staff at James Archer Smith Hospital, never got around to reporting Kast to the state Department of Professional Regulation. Hattie, who sustained no permanent physical injury, received a \$25,000 settlement, according to her attorney.

The following spring, Dawn J., then 15 years old, visited the Dadeland clinic, one of 46 women to undergo an abortion by Kast that day. For the next week, she called the clinic daily, complaining of pain and a thick vaginal discharge.

"Your symptoms are normal. Take some Tylenol," she said she was told. A week later, in emergency surgery at Baptist Hospital, her perforated uterus, ovaries and Fallopian tubes were removed. .

Dawn received a \$195,000 settlement in her lawsuit against Kast. The doctor was charged with "gross or repeated malpractice" by the state. Later, on the recommendation of a hearing officer, the charge was dismissed by the Florida Board of Medical Examiners.

"While there are physicians who would have reacted differently than (Kast) reacted, it appears that (Kast's) peers who perform abortion procedures . . . would have responded in the same manner," the hearing officer wrote.

Deidre M. was next. Following her abortion by Kast, the 20- year-old was left with a two-inch, jagged rip in her uterus. She ended up having a total abdominal hysterectomy. The case was settled out of court for \$150,000.

There is no question that even the most skilled practitioner can run into a complication during an abortion procedure. But if the doctor takes his time, performs a careful pre-operative exam, and responds immediately to problems, the damage will be avoided or minimized, says **Dr. Arthur Schatz**, the director of medical services for The Ladies Center and a clinical assistant professor at the University of Miami medical school.

Incomplete abortions are the most common complication, occurring in one-half to 1 per cent of all abortions. Handled correctly, however, they should pose no threat to the patient. Generally, only small pieces of tissue are left behind, causing a patient to bleed excessively afterward. The tissue is easily removed by a second suctioning. If a doctor misses



significant remnants of the fetus, Schatz says, it is because he didn't sufficiently examine the tissue he removed.

Perforations of the uterus are more worrisome, and less likely. They can usually be avoided if the physician carefully checks the position of the uterus before beginning, Schatz says. That position tells the doctor the angle at which to insert his instruments. Inserted incorrectly, the instruments can easily tear the uterine wall.

If the uterus is perforated, an experienced doctor should immediately "have a reasonable suspicion," Schatz says. At that point serious complications are easily prevented by halting the abortion and starting the patient on antibiotics. If the doctor instead proceeds, he is likely to perforate other organs and leave the patient vulnerable to infection, eventually necessitating a hysterectomy.

Well-run clinics, however, usually avoid all of the above problems. In a study of three Planned Parenthood clinics in New York, Dr. Michael Burnhill found that there were no deaths and no forced hysterectomies among 170,000 abortions performed over 16 years.

Kast maintains that he did nothing other doctors would not have done. The fact that he settled some suits, he says, implies no admission of culpability. They were all settled for "nominal sums" and for their "nuisance value," he says.

(Dr. Walter Ward, the attorney who represented Dawn, says settlements of \$150,000 and \$195,000 are "by no means nominal in my parlance.")

In the next couple of years, three more women accused Kast of medical malpractice. Sharon S. went to court, alleging that she had an ectopic pregnancy — a fetus in her Fallopian tube — that Kast failed to diagnose, instead performing a suction abortion on her uterus. A jury found Kast wasn't negligent. The two other suits were dropped.

Kast, meanwhile, was studying for exams to be board- certified as an obstetrician/gynecologist. He recommended that **Dr. Chatoor Bisal Singh** take his place.

Singh, a 41-year-old native of British Guyana, had graduated from medical school at the University of the West Indies in Jamaica in 1973. He had done three years of post- graduate work in Guyana, Washington, D.C., and Miami. He was "not an abortionist," he said in an interview, "just an honest, easygoing guy looking for something temporary."

**Dr. Nabil Ghali** was also working at the Dadeland clinic at the time. Ghali had lost his Kentucky license in 1983 after being convicted of four misdemeanor counts of unlawful transaction with a minor; to wit: sexual relations with a 13- year-old girl. But by then, he already had a Florida license — even though he had lied on his application, saying he had been sued for malpractice only once, when he'd really been sued four times.

In 1985, Ellen Williams died after being treated by Singh and Ghali. A jury awarded her family \$1 million.

The same day that Singh perforated Williams' uterus and bowel, he also performed an abortion on Patricia W.

Patricia, 25, began hemorrhaging and passing fetal parts when she got home. She wrapped up the tissue in aluminum foil, put it in a plastic bag and took it to the clinic, where, she says, Eason told her it was "a blood clot." Actually, she learned at the South Dade Community Health Center, it was a 16- week-old fetal head. At Jackson Memorial, her uterus was scraped a second time to clean out the tissue left behind. Her next stop was Circuit Court, where she filed suit, eventually getting a \$100,000 settlement, according to her attorney.

Singh left the clinic after Williams' death. "It was a bad month," he said. Ghali stayed, even after the state of Florida revoked his license in June of 1987, having learned of his record in Kentucky. Ghali appealed that revocation. For the year his appeal was pending, he found work at the Dadeland clinic.

During that time, two women went to court alleging malpractice in abortions Ghali performed there. One of them was Cynthia C., then 30 and the mother of two. She said she called the clinic after her abortion, complaining of heavy bleeding and the discharge of large pieces of tissue. Clinic workers told her to take aspirin, she said. Later that night, she went by ambulance to James Archer Smith Hospital, arriving with no blood pressure because her uterine artery had been severed. She underwent a hysterectomy, eventually receiving a minimal settlement from Ghali, who was not insured.

Grace S., also forced to undergo an emergency hysterectomy, has had to accept that her lawsuit may get nowhere. To date, her attorney's process server has been unable to locate Dr. Ghali.

And the Easons carry no insurance. In every case, it was the physicians' insurers who bore the brunt of the settlements. The Easons, meanwhile, repeated the same refrain when problems arose: We are not a medical clinic. We are not responsible for what the doctors do. We make sure they have a license, and beyond that we are not qualified to pass judgment on their capabilities.

(National Abortion Federation standards state that clinic owners bear a fundamental responsibility to hire trained doctors, and to evaluate their performance. If they cannot judge the physicians themselves, says the federation, they should hire a medical director.)

"All doctors make mistakes," says Eason's daughter, Broward clinic owner Marlene Berk.

Anti-abortionists have known for a long time that the Dadeland Family Planning Center would serve them well.

If you're against a woman's right to choose abortion — if you believe abortion is murder and all persons who perform abortions are butchers — what better place to target for protest than the rare clinic where someone has actually died?

Several years ago, the South Dade Crisis Pregnancy Center opened in the building next door to Dadeland Family Planning. That meant the folks at the pregnancy center were on hand to engage in "sidewalk counseling" and invite women into their office to hear about alternatives to abortion.

"It's the worst clinic around, and somehow also the most prolific," says the Rev. Henry Patino, who serves on the board of the Crisis Pregnancy Center and as president of the local chapter of the anti-abortion Christian Action Council. "Unsuspecting girls keep coming in like sheep to the slaughter, with no idea of the quality or lack of quality of medical care involved."

Last spring, Patino was arrested, along with 137 other anti-abortion demonstrators, for blocking the entrance to Eason's clinic. It was part of Operation Rescue, a national mobilization of the increasingly militant anti-abortion movement.

It was also a major media event, and pro-choice activists believed it demanded a counter-demonstration. That they really should be there, on behalf of the issue, not the individual clinic. But it made them queasy.

Says pro-choice activist Lynn Rosenthal: "We're committed to protecting access to abortion care, but to go and defend that place . . ."

Still, they went.

\* \* \*

For years, there has been a chronic, nagging rumor about the Easons' clinic — that it performs abortions on women who aren't pregnant.

According to the rumor, it works like this: A woman thinks she may be pregnant. She goes to the clinic for a free test. She is told the test is positive, so she makes an appointment for an abortion. The procedure is done, quickly, and, if all goes well, with no complications. And then for the rest of her life, the woman believes, falsely, that she was once pregnant and had an abortion.

The rumor began when women who turned out not to be pregnant would show up at other clinics in town for abortions.

The women would be tested for pregnancy before they met the doctor, and their tests would be negative. "Why were you sure you were pregnant?" they'd be asked. "Well, I had a test at Dadeland, and they said I was positive . . . "

Nella Vicente was one of those women.

Twenty years old and a high-school graduate, Vicente has been on her own since she was 16. For the past two years she has been a cashier with the same company. Earlier this year, she was "behind on my period for like two, three months." A friend had gone to Dadeland, so she went there, too:

"There were so many kids in there. It was crowded and it was mainly kids. I waited there, praying I'm not pregnant. Then this lady, she called my name, and took me out in the hall and said, 'Your test came out positive.' That's when I was crying. She said, 'Would you like to make an appointment? We have an abortion clinic here, too.' I didn't have time to think. I believe I said, 'For when?' I asked her a question, 'Is the doctor . . . can he do a complete job well?'

"She's like, 'Everything'll be fine.'

"I'm surprised I made it home. Through my head, all I did was cry. I was supposed to go the next day. I talked to my boyfriend about keeping it, but there was no way.

"I took out the phone book, and I called other clinics, you know, just to find out what abortion is like. Finally this one lady, she actually talked to me for a long time, she explained it all to me, for like 20 minutes. I decided to go to her place. The Dadeland place was really dirty and gross. I saw a big roach there.

"The next morning, real early, I went to my boss and I was crying and telling her I was pregnant. I had to ask her for the \$200. I was so embarrassed.

"So I went to that other clinic to have an abortion.

"They gave me a pregnancy test. It came out negative. I said, 'That can't be right.' They said, 'Do I want to take the sensitive test?' and I go, 'Yes,' and that was negative, too.

"They said, 'You're not pregnant.' I go, 'Do the abortion. It has to be in there because the other people told me I was pregnant.' I was like, 'Can't you do the abortion anyway?' I wanted this desperate. Then I saw the doctor lady, and she felt, and she said, 'There's nothing inside.'

"After I left, I had to take at least five more tests because I was so nervous, and even when I got my period, I wasn't sure.

I kept thinking I could feel a baby kicking me.

"Later, later, I got to thinking: What would have happened if I went back to that Dadeland place?"

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The Dadeland clinic, like most others, offers for free the "two-minute sensitive" pregnancy test, which examines urine for the fetal hormone.

Essentially, the clinic employee puts one drop of urine on a laboratory slide and mixes it with a testing serum. The sample is checked in a couple of minutes. If it is positive — if the woman is pregnant — it will be smooth and milky. If it is negative, the sample will be speckled.

It is nearly impossible to confuse the two results.

The test, called "latex-agglutination" and administered in laboratories, is 90 to 98 percent accurate, according to the Food and Drug Administration. Nearly all the inaccuracy takes the form of a false negative reading, the FDA says; there is almost no chance that a woman who is not pregnant will test positive.

The only things absolutely known to cause false positive readings are anti-psychotic drugs and kidney disease, says Broden Staples, a reviewer of clinical chemistry and toxicology for the FDA.

If certain manufacturers' tests are used, marijuana, methadone, and some other drugs can distort the test, as can an unusually high concentration of the hormone secreted when a woman ovulates.

However, "If you eliminate serious drug users from your control group, I would not expect to find a false positive rate of even 1 percent," Staples says.

\* \* \*

This summer, on the basis of Nella Vicente's words and the persistence of the rumors, Tropic sent several young women to the Dadeland clinic for pregnancy tests.

None were pregnant. None were drug users. And none had kidney disease.

The pregnancy tests are advertised as free, but when each woman arrived, she was asked for "a donation, whatever you can afford."

Of the 10 women we sent — they each claimed to be several weeks late in their periods — eight were told that they were negative. But all eight were then advised that it was "probably a false negative." Clinic workers suggested they take a \$40 blood test to be sure. A few women were asked if they had \$225 in cash on them before they even took the test. Susan Blazejewski, a Miami Herald employee, was asked if she lived nearby, if she could rush home and get some cash. She said she could not.

"Well, the doctor's here right now, and if you wait until next week it will cost you more money. Do you have \$450?" Eason said.

"Shouldn't I wait and see if I'm pregnant first?" Blazejewski answered. Told later by another employee that her results were "probably a false negative," she asked what that meant.

"You are probably pregnant, but either too far along or not far enough for the test to show positive," she was told.

\* \* \*

Two of the eight women we sent were told they were pregnant.

Both were immediately asked: "Do you want to make an appointment?"

Both said yes. Both then immediately took urine tests elsewhere and were found to be negative.

And both kept their appointments at the Dadeland clinic. Perhaps, as the National Abortion Federation insists should be done, the clinic would repeat the pregnancy test, and the results would be different. Or failing that, perhaps the doctor, on performing a pelvic exam, would suspect that something was amiss.

Judging from the date they gave as the first day of their last menstrual period, one woman would have been 10 weeks pregnant, the other 12. At that stage, a doctor should be able to note changes in the uterus from a manual pelvic exam.

The first doctor, **Scott Dunkin**, who also performs abortions at other clinics, did notice something wrong. When he examined the patient — Herald sports writer Linda Robertson — he said: "There's nothing in here."

Dunkin told Robertson she wasn't pregnant and left the examining room. Then Betty Eason showed up. Eason suggested that Robertson take a \$40 blood test. And she volunteered to "hold on" to Robertson's \$225 — collected up front — in case she did turn out to be pregnant.

Robertson demanded a refund, and was given \$175 back. The remaining \$50, Eason said, was kept as a fee for the day's services — even though they were only necessary because of the clinic's inaccurate urine test.

Things proceeded differently for the second woman.

\* \* \*

E.B. is 22 years old and serves as a clerk at another clinic in Miami, a reputable clinic.

When it turned out she was mistakenly pronounced pregnant, she agreed to return, but asked that we not publish her full name.

She was accompanied to the Dadeland clinic by Herald reporter David Von Drehle, who posed as her boyfriend.

They arrived at 9:15 a.m. The building is squat, two stories of dull brick. It says "Medical Center of Dadeland." Inside and to the right, past peeling plaster, down an unlit hallway, is Room 130, the only suite occupied.

Von Drehle sat with several other men in a waiting room decorated with a brown and orange oil painting depicting autumn. E.B. joined 10 young women inside, behind a locked door. They were asked to fill out forms. They did so without talking.

One consent form — unheard of at other clinics — said: "When a suction curettage is done and the patient is not pregnant because the test turned out to be a false positive, the fact is that a medical procedure was done, and there can be no refund."

She signed. No one made sure she or any other women understood the long, dense forms. There was no counseling (as the National Abortion Federation requires at its member clinics). And no one asked (as the Federation insists be done) if the women had freely chosen to terminate their pregnancy, if they had any concerns about going through with an abortion, or if they had any questions about the procedure.

The women proceeded in a group to the clinic lab, where they stood in a line against the wall. They were not given a repeat urine test (which the

Federation says is mandatory unless the women have had an ultrasound exam, which “sees” a fetus). After a half-hour, when the doctor arrived, E.B. was given a gown and plastic bag for her clothes.

The operating rooms were not soundproofed, so the women waiting listened to the loud suctioning of the machines as other abortions were proceeding. When patients emerged from the procedure rooms, they were led to a bank of brown Naugahyde recliners. Clinic workers spread a fan of brown paper towels on the seats before they sat down.

Finally, E.B. was accompanied into a procedure room by a clinic worker who stayed there with her. E.B. got up on the table, noting the tray filled with instruments — what looked like rods with curved tips, scissors and forceps.

A young doctor entered. “Hi, how are you?” he said. “Looks like someone’s been to the beach lately.” He scrubbed his hands, asking E.B. to recall the first day of her last menstrual period. She said, “June 7,” 10 weeks earlier. He asked her if she had ever been pregnant and she said no.

E.B. says the doctor then performed a standard bimanual pelvic examination, placing one hand in her vagina and the other on her belly. She says she was carefully watching his face, “waiting to see an expression of, ‘Oh, my goodness.’ ”

There was no such reaction. He reached for an instrument.

“No!” she said. “Stop!” She sat up abruptly. “I’m not sure I can do this.”

“Well, no one’s going to force you,” the doctor said.

“I’m just not sure,” she continued.

“Well, you have time to think about it,” the doctor said. And with that, he left the room to go into the next.

After dressing, E.B. asked the clinic worker to check with the doctor as to how far along she was in her “pregnancy.” The worker went into the next procedure room, emerged and said: “He says you’re six to eight weeks pregnant.”

E.B. poked her head into the waiting room to get Von Drehle, her “boyfriend.” They stood whispering at the door until Betty Eason appeared.

“What’s the problem?” Eason asked.

“I couldn’t go through with it,” E.B. said. Eason gestured toward a small room outfitted with a Formica-topped table and three plastic chairs. She told E.B. there was nothing to be afraid of.

“We’ve been in business 17 years,” Eason said. “It’s a very simple procedure. You saw the girls in the recovery room. They can go straight to lunch. They can go back to work this afternoon. It’s just cleaning out the uterus. It’s just cleaning out two periods. Many women who aren’t even pregnant have it done so they can get pregnant.”

“Well, what about the baby?” E.B. asked. “I’m worried about hurting the baby.”

“What baby?” Eason answered. “There’s no baby. There’s just two periods there that will be cleaned out.”

“You mean I’m not pregnant?”

"Oh, you're pregnant. But there is no baby there. Get that out of your head. You know how much blood there is on the pad during your period? That little bit? Well, this will be twice as much. Two periods. And some water. If you don't terminate, then it will become a fetus, and after birth, then it will be a baby."

After a bit more talk, Eason said: "Think about it for a week. Do you want a refund? Or do you want us to hold the money?" She started out of the room, then turned and popped her head back in: "You know 'abort' just means to stop something. You can abort a plane flight."

Eason returned five minutes later.

"I was talking to some of the girls in the waiting room," E.B. said, "and some of them have been throwing up every morning and feeling sick and stuff like that. Are you sure I'm pregnant?"

Eason: "Oh, yes. You're definitely pregnant. You're eight weeks pregnant."

"Eight weeks?"

"Eight to 10 weeks. And I have to tell you that the longer you let this go, the more it is going to cost. Did you see the Spanish woman in there? I hope her husband can find another \$400. They waited too long."

"We just want to think about it," E.B. said.

Eason studied her file. "You need to make a decision. If you decide to have the baby, you should get married and have the baby. But you're 22 and you're still in school. Do you want a career? Can he support you?"

E.B. and Von Drehle left, getting all but \$50 of the \$225 back.

"Nothing has gone on here that you don't know," Betty Eason said. She declined to answer questions for this story on the advice of her attorney. "I don't want people picketing my home," Her daughter Susan did not respond to phone calls and a letter sent to her in prison.

\* \* \*

The doctor who examined E.B. was **Steve Silvers**, who recently completed his residency at Jackson Memorial. He told Tropic that he had only worked at the Dadeland clinic three Fridays, and that he accepted work there because he was \$200,000 in debt and needed cash. He said he relies on the clinic's pregnancy test as a diagnostic tool. "They misled me as well as the patient."

Silvers and a member of the clinic staff who was in the examining room, however, maintain that he did not give E.B. a bimanual pelvic examination, or ever say that she was six to eight weeks pregnant. If he had examined her, Silvers says, he would have noted it on her chart, and there is no notation, he says. Silvers says he "never touched her. . . . She's lying."

"I believe I know when a hand is stuck up my uterus." E.B. responds.

Besides, Silvers says, if he had reached for an instrument after performing a pelvic exam, that wouldn't necessarily mean he was about to proceed with an abortion. The next step would be to insert an instrument called the speculum (also inserted at the start of an abortion procedure) and check the condition of the woman's cervix. If the cervix showed no signs of pregnancy, Silvers said, he would not proceed with an abortion.

\* \* \*



Dr. Arthur Schatz, the University of Miami medical school professor, is a board certified obstetrician/gynecologist and experienced in performing abortions:

"You rely on a pregnancy test, but you fundamentally rely on your own clinical observations. Every patient is to have a bimanual pelvic examination before a procedure. That tells you what you need to know.

"If the uterus is not enlarged, you stop right there. Even if you see changes in the cervix that are consistent with pregnancy, if the uterus is not enlarged, then it is too early to do the procedure.

"If you do it too early, then it's harder to dilate the cervix, and you risk missing the pregnancy.

"So if the patient has on the chart a positive pregnancy test and I find no enlargement of the uterus, I tell the patient to return in two weeks. End of story."

\* \* \*

A clinic such as the Easons put Florida's pro-choice advocates in a difficult ethical position. "In my gut," says Janis Compton-Carr, full-time Florida pro-choice activist, "I am completely aghast at what goes on at that place. But I staunchly oppose anything that would correct this situation in law."

That is: greater state regulation of abortion clinics.

Regulation has been a political battle since the day abortion was legalized. The lines are clearly drawn: The anti-abortion people want them, and, the pro-choice people don't.

Regulations, pro-choice people say, are harassment, governmental interference in a private matter. In practice, they would not protect women but rather make it more difficult for them to obtain an abortion — which is their right.

Anti-abortionists generally interpret this to mean that abortion providers don't want any interference with their "mills" and "butcher shops" — that they couldn't survive close scrutiny.

It's a tricky issue.

"It makes sense to have some kind of regulation and licensing for all out-patient surgery. Podiatrists, whatever," says Barbara Radford of the National Abortion Federation. "We support that. But, unfortunately, you can't assume that lawmakers will do the right thing."

Right after the Supreme Court decided this summer to give states greater power to restrict access to abortion, Florida's anti-abortion governor, Bob Martinez, called a special session of the Legislature expressly for that purpose. What Martinez wants the Legislature to do, when it meets in October, is outlaw abortions in public hospitals, outlaw public funding of abortions and prevent public employees from counseling women about their right to choose abortion. He also wants to prevent women from having abortions after 20 weeks of pregnancy if doctors believe the fetus could survive outside the womb.

Martinez is, in other words, going as far as the state of Missouri went in *Missouri vs. Webster*, the case that the Supreme Court upheld in July. But that decision doesn't hit private clinics — where most abortions are performed — directly.

Pro-choice activists expect that the governor will again follow the Supreme Court's lead if, this fall, it upholds Illinois in its case against Dr.

Richard Ragsdale, a would-be abortion clinic owner. That would mean that Martinez may propose that Florida copy Illinois by requiring state officials to hold public hearings before licensing a new clinic and demanding a minimum size for examining rooms, procedure rooms, recovery rooms, corridors and doors. These requirements would turn clinics into the functional equivalents of hospitals — unnecessary for such a safe, simple procedure, clinic owners say. Besides, they add, it would be so expensive that it would force many abortion providers out of business, and cause others to jack up prices, virtually doubling the cost of a first- trimester abortion.

But that isn't what most scares pro-choice advocates.

The bottom line, the real fear, is that the U.S. Supreme Court will reverse Roe vs. Wade. Turn back the clock. Outlaw abortion.

\* \* \*

It is because they are so leery of what will happen this fall that many local pro-choice activists didn't want this story to be told. Not right now. It is because they have always felt vulnerable that they never spoke up against the Dadeland clinic, which they know to be a bad place.

"The hysteria is already bad enough and we don't want to give the hysterics weapons," says clinic owner Patricia Baird Windle, a founder of the Florida Abortion Council. On behalf of three other Florida abortion providers, Windle wrote the publisher of The Miami Herald requesting that Tropic's story "about a wretched abortion clinic" be held until after October, when the Florida Legislature's special session meets and the Supreme Court's decision on the Ragsdale case is expected.

Now more than ever, Windle believes, pro-choice advocates must maintain a hard line: that a woman is safer when abortion is legal. To acknowledge that in some instances women are still not so safe is to dilute the argument, to hand something over to the other side.

Windle fears all abortion providers will be tarred with the same brush, tainted by association. As do others.

"This will hurt us," says Lynn Rosenthal in Tallahassee, echoing the sentiments of other pro-choice leaders.

They all mention how the pro-choice movement suffered after a previous abortion scandal. In 1983, four women died from botched abortions at Hipolito Barreiro's notorious Biscayne Boulevard clinic called the Women's Care Center. The media closely followed the closing of the clinic by court order, Barreiro's arrest on charges of manslaughter and his ultimate conviction of practicing medicine without a license.

And in response, the Dade County grand jury called for greater state regulation of abortion clinics — regulation previously declared unconstitutional by the Florida Supreme Court.

Between 1985 and 1987, there was greater scrutiny. The Legislature mandated a risk management program for abortion clinics. Clinics had to report annually to HRS all abortion- related complications and all malpractice claims filed against them. They had to report within three days if there was a death at their clinic.

But the program ended because there were so few problems reported by clinics that it wasn't worth the expense.

Which goes to show that greater regulation is not needed, abortion providers say; the regulation that exists is sufficient. And that is: A license.

Every clinic is supposed to have one. To get one, a clinic must pay a \$35 fee, and undergo an inspection.

The inspectors check to make sure the clinic has photocopies of its doctors' licenses; that patient records are kept; and that fetal remains are disposed of in accordance with state law.

When Ellen Williams died after an abortion at the Dadeland Family Planning Clinic, Dade Medical Examiner Joe Davis requested a special investigation. Investigators checked everything they could by law: The clinic indeed had copies of its doctors' licenses; patient records were kept; fetal remains were adequately disposed of.

In other words, the clinic passed.

\* \* \*

"Let's face it," says Barbara Radford of the National Abortion Federation. "Abortion attracted undesirable operators when it was illegal. And it has not been legal that long. In some areas, there is still a feeling that providing abortions is something quasi-legal.

"The anti-abortion people don't help. They harass women who go to clinics, harass women who own clinics and harass doctors who perform abortions. So you find women using false names, clinic workers forced to keep unpublished phone numbers and trained, qualified doctors who think it's not worth the hassle.

"All of this makes it easier for places that take advantage of women to exist. And we just can't allow this. We can't allow the other side to dictate the terms of debate. We shouldn't speak in whispers and we shouldn't be cowed. If we are advocates for women, we have to protect women."

\* \* \*

The last year and a half has been rough for the Easons.

First, Betty Eason's daughter, Susan Hoffman, was thrown in jail for driving under the influence. She was sentenced to two years, six months.

Then they had to shut down the clinic.

Money was their undoing. Not that there wasn't any. They charged \$225 for the simplest, first trimester procedure, of which the doctor got a \$50 cut. Business was pretty good.

But then along came the Internal Revenue Service. First the IRS put liens on Hoffman's and Eason's personal bank accounts, saying they owed \$121,000, and \$84,500 in income taxes. (Dade County said Eason also owed \$40,000 in property taxes.)

Then it seized the bank accounts of the Women's Referral Group, claiming the clinic owed \$330,000 from three years of unpaid corporate taxes. Eason claimed she was running a nonprofit business, although, at the time, the state of Florida listed it as a for-profit corporation. She told the IRS she was not responsible for the money, as it was owed by Dadeland Family Planning Clinic, a corporation she dissolved, and not by the Women's Referral Group. One and the same, the IRS answered.

So Hoffman and Eason filed for protection under the U.S. Bankruptcy Code — for each of them personally and for the clinic. Under Chapter 11 of the code, they would be allowed to continue operating the clinic as long as they came up with a plan for reorganizing their business to pay off debts.

But the U.S. Trustee said no to reorganization. The Women's Referral Group will be dissolved, the trustees said, because of the "gross

mismanagement or dishonesty of the debtor.” The U.S. Trustee’s attorney cited the following: the failure to report salaries of corporate officers to the IRS, and the failure to withhold federal taxes; the use of money from the Women’s Referral Group to pay off personal debts; and the payment of salaries to members of the family who “performed no services.”

The court-appointed trustee for the clinic, Jules Bagdan, had no trouble dissolving the corporation. In June, he disconnected the phones, closed the clinic and terminated its lease (with Eason, who owns the building). Then he had to sell the corporate assets, which amounted to nothing more than \$5,000 in used chairs and suction equipment. He advertised the sale, drawing one bidder only.

Eason.

Within little more than a month, she was back in business at the same location, incorporated as Taurus Management Services. (“It’s not the same place. It has a new owner,” Eason said, but she is listed as president in state records.)

This time, however, Eason was at a disadvantage. Hoffman, usually in charge, was incarcerated. The phone book, usually her chief source of new customers, was suddenly a useless advertising tool. (In order to get back her two old numbers, the ones listed under so many names, or even to get a message forwarding calls, she would have to pay off a \$9,000 bill to Southern Bell.) And, technically, she wasn’t legal. She had lost her license when the old clinic folded.

In mid-July, Eason quickly secured the services of two young doctors — Dunkin, who had worked for her before, and Silvers, who needed quick cash to repay loans — and rehired a handful of her young employees.

Within a week of re-opening, she was able to schedule about 10 women a morning on each day of surgery.

Word of mouth.

So Eason simply whited out the old name and phone number on all the consent forms and scribbled in the new.

Women’s Service Center.

Dedicated since 1-24-73.

On Aug. 21, the state Department of Health and Rehabilitative Services issued Betty Eason a new license.

\* \* \*

Epilogue:

**Dr. Robert Kast**, whose insurer paid more than \$500,000 to women injured in abortions, has a private practice in Boca Raton and Coral Springs. The state Department of Professional Regulation tells callers he has an active license, and is in good standing. Since leaving Eason’s clinic, he has been certified by the national board in obstetrics and gynecology, and accepted as a fellow in the American College of Obstetrics and Gynecology. Since leaving, he hasn’t been sued for medical malpractice once.

**Dr. C.B. Singh** has an office in Fort Lauderdale. The state says he has an active license, and is in good standing. The state does not tell callers that it found him responsible for “gross malpractice” in the death of Ellen Williams, because Singh contested their reprimand. Four years later, his case is considered open and therefore confidential. Singh, meanwhile, says he is trying “to lead the straight and narrow path.”

**Dr. Nabil Ghali**, after surrendering his physicians' license to the state of Florida, continues to fly to Ohio, from Miami, to perform abortions, legally. In June, the state gave him an HRS license to open the Blue Coral Medical Center, a new abortion clinic at 7360 SW 24th Street. He shares a doctor with Betty Eason.

Teresa R., now 23 and working as an office clerk, has moved beyond the anguish she suffered when she underwent her hysterectomy. But she cries a lot, and never dates, and when her mother asks her why not, she says, "Who's going to want me, Mom?"

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