

Health Risks of Abortion



blood clots

infection

incomplete abortion

> There are several immediate, undisputed health risks a woman faces when undergoing an abortion.

injury to the cervix or other organs

hemorrhage

10% of women experience at least one of these during an abortion. Approximately 1/5 of complications experienced are lifethreatening.





The risks don't end there.

Studies show that there are long-term physical and psychological consequences too, including increased risk of:



Subsequent Pre-term Birth (PTB)

from cervical trauma, infection, or endometrial scarring. 31.5% of PTBs are the result of the mother's history of abortion.



Placenta Previa

is **2-3 times more common** in post-abortive women, depending on the complications she experienced from her abortion.



Mental Health Issues

10% of mental health problems suffered by women are directly attributable to abortion. Post-abortive women score higher on depression scales and have higher rates of suicide, eating disorders, and sleeping disorders.





Breast Cancer

A hotly contested issue, abortion is (statistically significantly) positively associated with breast cancer in 19 different studies.



Miscarriage

Abortion is associated with an increased risk of first-trimester miscarriage in the subsequent pregnancy.



Death

Deaths resulting from abortion are extremely hard to estimate for a variety of reasons addressed below. If complications progress, death can result.

Gestational age is a significant risk factor for health complications from abortion.

1st trimester

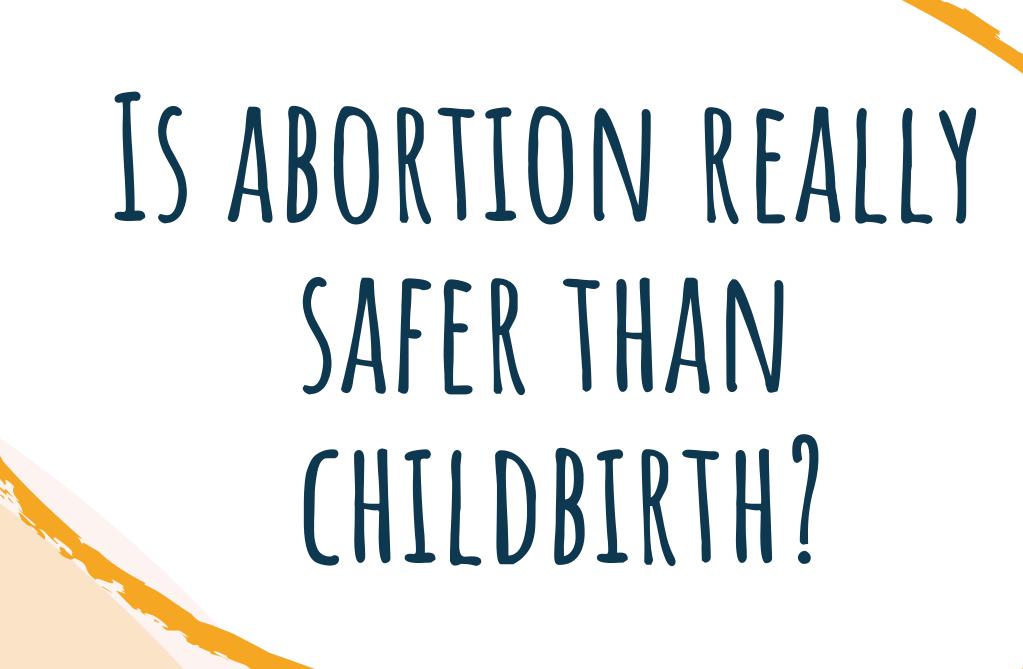
2nd trimester

3rd trimester

Maternal mortality from abortion increases exponentially by 38% each week of gestation.

Women who undergo abortions after 13 weeks report more disturbing dreams, more frequent reliving of the abortion, and more trouble falling asleep.





A 2012 study reporting that abortion is safer than childbirth has been widely circulated as proof of abortion's safety.

It is based on comparing the number of maternal deaths during childbirth to the number of maternal deaths from abortion reported to the CDC.

The study's results are not an accurate reflection of the true maternal risks of abortion. Here are some reasons why:





Abortion death reporting is not mandatory across the country. Maternal death in childbirth reporting, on the other hand, is. For these reasons, the CDC itself admits that its data on abortion deaths and childbirth deaths are not directly comparable, saying they "are conceptually different and are used by the CDC for different public health purposes."

The abortion industry has no requirement or incentive to report complications and deaths resulting from abortion because it only hurts their business.



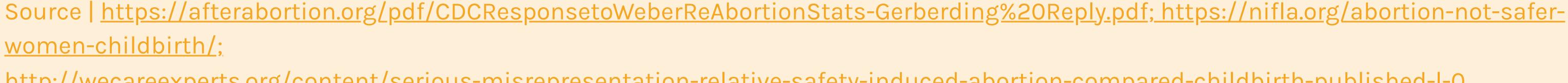
Deaths by suicide are rarely linked back to abortion in state reporting.



Deaths due to complications of abortion are recorded under that complication rather than the abortion itself. For example, if a woman died from an infection that resulted from an abortion, her cause of death would be recorded as infection. This, again, makes the calculation of maternal deaths from abortion more difficult.

Physical and psychological damage from abortions can have effects on later mortality. The model of this study makes no room to account for these affects.



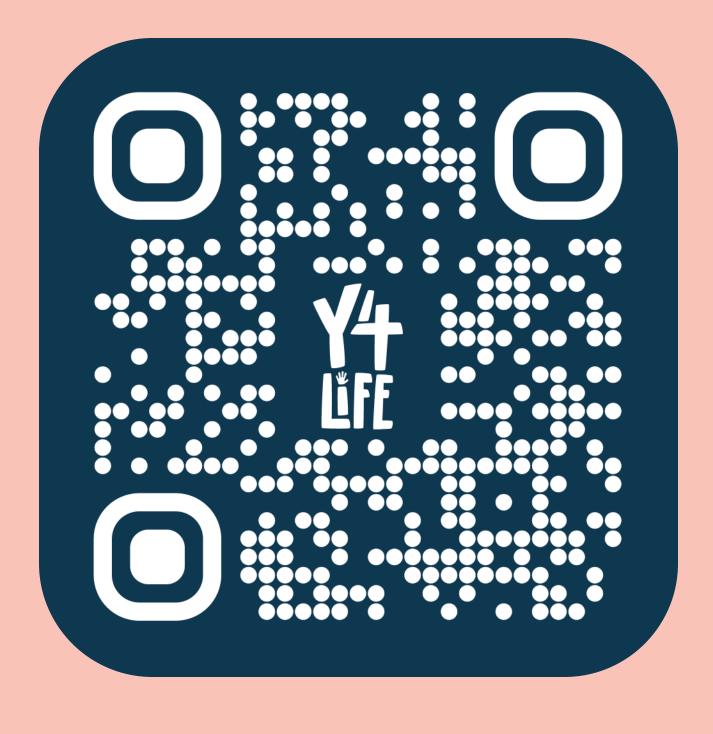




ALL OF THESE MAKE REPORTING OF ABORTION DEATHS VERY INACCURATE IN THE UNITED STATES, RENDERING A STUDY LIKE THIS ONE UNRELIABLE.

AND ON TOP OF ANY POTENTIAL DAMAGE TO THE MOTHER, 100% OF "SUCCESSFUL" ABORTIONS END IN THE DEATH OF AT LEAST ONE HUMAN:

THE CHILD.



To find out how you can be a voice for the lives of mothers and babies, visit **y4life.org.**

