



THE CATHOLIC ASSOCIATION OF POLISH DOCTORS

42-200 Częstochowa, Aleja NMP 54, www.kslp.pl

dr Elżbieta Kortyczko, Head e-mail: prezeskslp@gmail.com

prof. Bogdan Chazan, Deputy Head e-mail: b.chazan@wp.pl

Grażyna Rybak MD, delegate, e-mail: grazyna.rybak@op.pl

STATEMENT

As against the plan of the American Board of Obstetrics and Gynecology (ABOG) to start a new board certification entitled „Complex Family Planning” focusing on late term abortions

The application of the new certification has been submitted by ABOG to the American Board of Medical Specialities. This information was provided on 18 June by dr Peter T. Morrow from the Catholic Medical Association. He drew attention to the fact that new subspeciality, although refers to family planning, is directed to the training of doctors in carrying out abortions in the second and third trimester of pregnancy, and thus to the due date. Dr. Donna Harrison, the managing director of the American Association of Pro-life Obstetricians and Gynecologists (AAPLOG), also asked for urgent intervention in this matter.

We believe that creating a new sub-specialty in the field of obstetrics and gynecology is unnecessary from the point of view of professional training of doctors. From the perspective of the mission and vocation of obstetricians and gynecologists it is harmful. Considering the essence of abortion, which is actually prenatal murder, the new specialty may destroy the sensitivity of the conscience of doctors, their relations with patients and the image of gynecologists-obstetricians in society.

American physicians are well-trained during their post-graduate program in clinical issues and medical procedures that are to be included in the new subspeciality program. They are already covered by the standard Obstetrics and Gynecology residency program. Training in management of high risk pregnancies is already fully accomplished through the Maternal - Fetal Medicine subspecialty board certification. It includes both the mother and the child, unborn or born. Doctors who obtained it are able to recognize female reproductive system disorders, pregnancy complications and treat them properly. This applies, among others, to problems related to family planning, proceedings after miscarriage or fetal death.

The head of ABOG in the meantime acknowledged that the doctors' skills in performing late abortions are too small and proposed a new subspeciality: Complex Family Planning. Abortion is not and cannot be a family planning method. In each stage of pregnancy it means death of a child in the prenatal period of development, physical and mental suffering of the mother and disruptions of family relationships. Performed in advanced pregnancy it poses a

greater threat to the mother's reproductive health and more intense suffering of a child killed being fully aware of pain, anxiety and stress.

Regardless of the period of pregnancy in which abortion is performed, it means killing a person. This is obviously contrary to the doctor's vocation and the professional ethics

We hope the specialists from the American Board of Medical Specialties recognize that the doctor's vocation is to prevent premature death, reduce physical and mental suffering, and cure diseases. Ordering the doctors to perform the abortion is contradictory to this vocation, causes a conflict of conscience, burnout, difficulties in communicating with oneself and the patient. Recommending doctors to kill patients destroys their patients' trust and hinders their recovery. Instructing physicians to kill children destroys their patients' trust and hinders their recovery. There is an obvious inconsistency between the physician's obligation to treat ill fetus as a patient and the simultaneous possibility of killing that patient in the prenatal phase of life.

If in a given country the abortion is permitted by law (let it be as short as possible), it may be allowed to be performed outside public health services by tanatologists, while physicians and public hospitals shall be allowed to perform their duties in accordance with the principles of medical deontology. The practice of abortion, particularly second and third trimester abortion, is especially cruel. The support and approval of doctors' training in it seems unreasonable.

Taking the above into account, we ask our American colleagues not to apply for a new subspeciality entitled „Complex Family Planning” in the field of obstetrics and gynecology.

Prof. dr hab. n. med Bogdan Chazan, gynecologist and obstetrician

Dr n. med. Elżbieta Kortyczko, pediatrician and neonatologist

Lek. Grażyna Rybak, pediatrician

25 June 2018