

In Support of HB23-1097 – Painkiller Administration Prior to Abortion

My name is Tom Perille. I am a physician and President of Democrats for Life of Colorado.

When I was in med school at Northwestern University, I went to a forum on abortion. One of the speakers was an abortionist. He felt compelled to share with the audience exactly what abortion entailed. He passed around a large white bucket. At the bottom of the bucket was a dead late second trimester baby which he had just aborted. I was shocked. You can't see that.

Fast forward to today. While I can't stop abortions here in Colorado, I can at least encourage any effort to reduce the sheer brutality of the procedure. It is hard to imagine a more depraved medical procedure than a late second trimester abortion in which a pain capable human being is literally torn apart limb by limb until her death. Or in the third trimester when a human being is intentionally poisoned with digoxin which can cause hours of agonizing writhing, retching, abdominal pain, and delirium until she dies.

HB23-1097 would mandate that before a 20-week or older fetus is killed by dismemberment or poisoning, she be administered anesthesia to ameliorate her suffering. How can anyone object to that?

We have known for some time that a fetus can feel pain long before there are mature neural connections between the thalamus and cortex. It turns out that the cortical subplate acts as a transient cortical structure that enables the fetus to appreciate pain. This revelation has prompted an emerging consensus that the fetus can feel pain as early as 12 weeks.¹

Surgeons have long recognized that anesthesia is necessary for fetal procedures, and it is now the standard of care.² Maternal anesthesia is insufficient to anesthetize the fetus. One internationally renowned fetal pain specialist asserts "that the human fetus feels pain when it undergoes surgical interventions and direct analgesia must be provided".²

Modern 4D ultrasound has opened a window into the world of the fetus like never before. We can see human fetuses as young as 24 weeks exhibit facial expressions consistent with pain or distress.³⁻⁴ But you don't even need to peer inside the uterus since preemies are commonly surviving as early as 22 weeks. Neonatology years ago, developed validated pain assessment tools for these infants.⁵

So Fetal Surgeons and Neonatologists recognize and act on fetal pain. The only professional blind spot seems to be abortion providers. In France administering fetal anesthesia before second and third trimester abortions is the standard of care.⁶ If they can do it on a national scale in France, what prevents Colorado abortionists from instituting this best practice?

Please alleviate the suffering of late-gestational fetuses in Colorado. Vote YES on HB23-1097.

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