

# EC CLINICAL AND MEDICAL CASE REPORTS Guest Editorial

# **Abortion History and Concepts**

## Siniša Franjić\*

Faculty of Law, International University of Brcko District, Brcko, Bosnia and Herzegovina

\*Corresponding Author: Siniša Franjić, Faculty of Law, International University of Brcko District, Brcko, Bosnia and Herzegovina.

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It has been a little less than 100 years since the words birth control first appeared in print, but birth control, as a social practice, is as old as human history [1]. Since the beginning of civilization, women were expected to produce children from marriage to menopause, in a constant battle to birth more children than died in utero, in infancy, or of childhood disease. Yet women in every era and culture, acting alone or with their husbands or lovers, sought ways to delay childbearing or reduce the odds of pregnancy. They did so in spite of cultural and religious prohibitions or societal pressures to increase the size of the tribe. Couples attempted family limitation for reasons that included their own health and sanity and the well-being of their existing children, economic benefits of a smaller family, to reduce the population in times of disease or famine, and because of particular circumstances of time and place.

A woman's body undergoes significant changes in pregnancy, with the developing fetus making increasing demands [2]. Preparation for pregnancy should begin before conception, as fetal development begins from the third week after the last menstrual period. Damaging effects (e.g. exposure to drugs) may occur before the woman is even aware she is pregnant. Being as fit and healthy as possible before conception maximizes chances of a healthy pregnancy, but not all poor obstetric outcomes can be avoided. Pre-pregnancy counselling by a specialist team is recommended where specific risks and diseases are identified.

Besides contraception, two other deliberate methods of family limitation, abortion and infanticide, have also been practiced throughout history, sometimes rarely and at other times with far greater frequency than contraception. However, neither act, occurring after fertilization and birth respectively, is considered a form of birth control in the context of this narrative. While infanticide is usually viewed as a most extreme form of population control and is universally condemned in the modern era, perceptions about abortion have changed repeatedly over time. Abortion has been conflated with contraception in the past, and strong debate continues as to whether it should be considered an acceptable and legal form of reproductive control. It is worth noting that the birth control movement of the early 20<sup>th</sup> century, which evolved into a reproductive rights movement that vowed to make and keep abortion legal, set out initially to end the practice of abortion, which was then illegal.

#### **Pregnancy**

Pregnancy is one of the happiest periods in a woman's life if it is planned and desired [3]. Pregnancy is a period that begins at fertilization and ends with the birth of a child. It takes nine calendar months or 40 weeks, or 280 days. Pregnancy is a period when a caution expectant mothers, pregnant women to give birth to a healthy, adopted child, is able to live outside of the uterus. If there is an interruption of pregnancy before 28 weeks, this interruption is called abortion because the fetus is not viable outside of the uterus. Childbirth is called every termination of pregnancy after 28 weeks. According to the time when it happens, birth can be premature, at the time and later, a newborn undelivered (prematurus), issued (maturus) and transferred (postmaturus).

Most particularly, women who are pregnant are generally expected to act in ways that help, or at least do not harm, the embryo or foetus they are carrying, in the same way as it is anticipated that they will behave responsibly, conscientiously and for the welfare of born

children [4]. It is, of course, not necessary to conceptualise the woman as being in some form of conflict with her foetus, and most women will do everything in their power to ensure that their future child has the best possible start in life. This holds true even if it means making personal sacrifices. For example, so many products in daily life are now known to be potentially harmful to the developing embryo that women will give them up; alcohol, cigarettes, even caffeine may all harm the embryo and are often willingly sacrificed by women when they become pregnant - sometimes even beforehand. Yet, on a liberal account, the woman is, and should be, entitled to make the opposite choice. While some commentators have proposed that once a woman decides to carry a pregnancy to term she must accept certain constraints on her personal freedom, the liberal account would dispute this, arguing that what matters is that the individual woman is competent and making autonomous decisions; the consequences of these decisions are not relevant unless they harm others, a group to which non-persons arguably do not obviously belong.

#### **Abortion**

Abortion or termination of pregnancy is a spontaneous or induced termination of pregnancy by removing or expelling embryos or fetuses from the uterus before the ability of the fruit of the uterus for life [5]. It is caused by the death of a fetus or resulting in his death. Abortion can occur spontaneously, because of complications during pregnancy or abortion can cause it. To meet the definition of abortion, it must occur before the 28<sup>th</sup> week of pregnancy, provided that the length of the fruit of the uterus is less than 35 centimeters and the weight is less than 1000 grams.

In many jurisdictions, abortion has been, or continues to be, prohibited unless legal exceptions apply [6]. A notable exception to this approach can be found in the United States, where women have a constitutional right to privacy that encompasses the right to terminate a pregnancy (at least until viability, when the state's interest becomes compelling). However, in many jurisdictions where no such right is recognized, lawful abortion has historically been tethered to assessments of the danger posed by the pregnancy to the life or health of the woman. Although this "maternal health" exception has been interpreted as broad enough to encompass abortion for serious fetal abnormalities, some jurisdictions have created a distinct exception to permit abortion to avoid the risk of "serious handicap." The impetus for such an exception has resulted from the tremendous recent advances in prenatal diagnosis. Although such advances have enabled these abortions to take place earlier in pregnancy, they have also enabled doctors to detect serious conditions only diagnosable later in pregnancy. Because these abortions sometimes occur after viability, arguments about "serious handicap" as a regulatory concept tend to converge upon arguments about the status of the fetus as birth approaches.

The purpose of pre-natal diagnosis is to discover as much as possible about the unborn child and, in particular, to detect any abnormality or illness [7]. Once a diagnosis has been made and with due recognition of any potential limitations on the accuracy of diagnosis, the information may be used in one of the following ways:

- It may be used as a reason for abortion;
- It may indicate the need for treatment, either in utero or immediately after birth;
- It may identify an indication for pre-term delivery or delivery in an environment where special facilities are available;
- It may be used to prepare the parents or the staff involved for an adverse outcome, although nothing can be done to alter this or a decision has been made not to alter this.

The consequences of failure to make a pre-natal diagnosis may be a complaint or legal action under any of the following headings. Parents may claim that, if they knew of a fetal abnormality in advance, they may have sought a pregnancy termination. The parents or the child may claim that a failure to treat in utero or immediately after birth might have led to permanent damage or handicap that, otherwise, could have been avoided. Finally, the parents may claim that they had a right to know the abnormal results of tests taken antenatally, so that they could prepare themselves for a baby with an impairment or abnormality.

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