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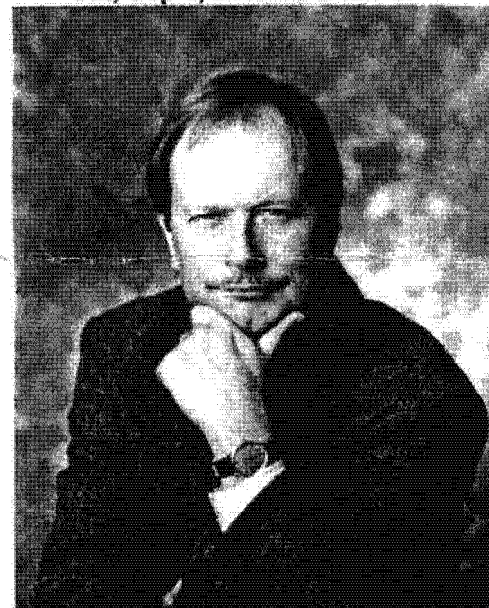
Eminent Scientist Blew the Whistle on Abortion-Preemie Risk

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Sat, Sep 6, 2008 at 4:42 PM

Scientist who 'blew the whistle' on the Abortion-Preemie risk
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"It is with deepest regret that we report the passing of one of the most eminent scientists of our time - Greg Roy Alexander, ScD, MPH. Dr. Alexander passed away in Tampa, Florida, on 20 February 2007. He was born on 20 September 1950 in Washington, DC.....
..Many of Dr. Alexander's prominent contributions occurred during this highly productive sojourn at UAB [University of Alabama]. In fact, he strove to make UAB's Department of Maternal and Child Health one of the best in the country - and he was successful in doing so. Among several other distinctions and honours, he became (with Dr. Donna Petersen) Co-Editor-in-Chief of the Maternal and Child Health Journal, and steered the journal to its present form.....Perhaps, one of his most significant contributions to the field in perinatal epidemiology was his work on establishing the cut-off of birthweight-for-gestational age;Greg always questioned the sacred measures and tenets of our field - why do we focus on low birthweight, what do we really mean by neonatal mortality...."
(from a 2007 In Memoriam by Dr. Cande V. Ananth and Dr. Russell S. Kirby in the medical journal Paediatric and Perinatal Epidemiology (2007;21:284-285))



That very fine tribute to Dr. Greg Alexander is missing the most courageous and most useful scientific contribution made by Alexander. In 2006 an Institute of Medicine (IoM) book addressed a puzzling major American health problem: the ever increasing rate of preterm births in the U.S. (Preterm Birth: Causes, Consequences, and Prevention (Dr. Richard E. Behrman, Adrienne S. Butler (PhD)) The U.S. 'preemie' rate has escalated by 44% between 1980 and 2006 (from 8.9% to 12.8%); URL (2006 rate): <http://pediatrics.aappublications.org/cgi/content/abstract/121/4/788> Premature newborn (i.e. gestation under 37 weeks' gestation) have higher risk of mental retardation, Cerebral Palsy, autism, epilepsy, blindness, deafness, serious infections, respiratory distress, gastrointestinal injury, etc. Alexander's IoM Appendix B reveals fourteen "Immutable Medical Risk Factors Associated with Preterm Birth"; third on Alexander's list is: "Prior first trimester induced abortion"; URL: http://www.nap.edu/openbook.php?record_id=11622&page=625. Thus, Dr. Alexander had the courage to 'blow the whistle' on the abortion-preemie risk. Both the 2006 and 2007 editions of the IoM book have the Greg Alexander revelation. Lest anyone think that Dr. Greg Alexander was a 'lone wolf' in exposing the APB (Abortion Preterm Birth) risk, others who affirm the APB risk include:

Barbara Luke (ScD), Judith Lumley (PhD), Dr. Carolyn Moreau, Dr. Emile Papiernik*, Dr. Byron Calhoun, Dr. Elizabeth Shadigian, Dr. Philip Steer, Dr. John Thorp, Dr. Pierre Ancel, Dr. Katherine Hartmann

The Institute of Medicine is a very prestigious medical research organization, so its recognition of the APB risk in their 772 page 2007 tome lends tremendous credibility to this important health risk.

The IoM book addressed a 'medical mystery' that has puzzled 'preemie' researchers for at least two decades: why do Black American Women have a much higher 'preemie' risk than Caucasian women? In the main part of the book Dr. Behrman and Butler (PhD) address this issue several times. However, it is possible that neither Behrman nor Butler carefully read Dr. Greg Alexander's Appendix, since they never mentioned induced abortion as even a possible cause of the Black/Caucasian 'preemie gap'. If Black American Women have a significantly higher induced abortion rate than Caucasian women, then this possible risk factor can not be ignored by honest researchers. The CDC reported that in 2004 Black American Women (who comprise about 12.5% of the U.S. female population) had 38.2% of all induced abortions, a disproportion of 4 to 1 ($(38.2\%/12.5\%) / (61.8\%/87.5\%)$). Thank you, Dr. Greg Alexander for providing an answer that will speed the day when the U.S. rate of newborn with mental retardation and Cerebral Palsy will markedly decline.

'Suction' Abortion = 'Mengele Medicine'

Why did not animal testing demonstrate the 'preemie' risk of prior 'suction' abortions and thus, prevent such risky medicine being applied to humans? Answer: there are ZERO published animal studies of 'suction' abortion, PERIOD! This was first revealed by Brent Rooney (MSc) and Wm. Robert Johnston (M.S.) in the 2007 Winter issue of the Journal of American Physicians and Surgeons; URL: <http://www.jpands.org/vol12no4/correspondence.pdf> . Thus, each and every vacuum aspiration (aka 'suction') abortion violates rule 3 of the 1947 Nuremberg Code that insists on validation of a new surgery or new drug on animals BEFORE human trials can begin. The Nuremberg Code with its 10 rules was formulated to radically reduce the odds of the medical research atrocities of Nazi doctors being repeated. If a woman sues an abortion clinic for medical negligence involving a 'suction' abortion, she may consider adding the claim of being subjected to a medical procedure never safety validated via published animal studies in peer-reviewed medical journals.

In 2008 the abortion-preemie risk is confirmed yet again:

Dr. Darios T. Getahun (Darios.T.Getahun@kp.org) of Kaiser Permanente and colleagues have fingered prior induced abortions and other stress factors as boosting a woman's future risk of a premature delivery (and other problems); URL: http://apha.confex.com/apha/136am/techprogram/paper_185396.htm .

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* In a 2004 Human Reproduction article with Dr. Emile Papiernik as a co-author it was revealed that a woman with one prior induced abortion boosted her relative odds of a VERY preterm (under 33 weeks' gestation) birth by 34%, but if she had more than one prior IA, her relative odds were raised by 82%.

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