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January 8, 1990

# Under Pressures and Stigma, More Doctors Shun Abortion

By GINA KOLATA

Under siege from protesters and largely isolated from medical colleagues, doctors who perform abortions say they are being heavily stigmatized, and fewer and fewer doctors are willing to enter the field.

Reflecting the public's ambivalence about abortion, many doctors on both sides of the issue say they find abortions emotionally difficult and unpleasant.

A 1985 poll by the American College of Obstetricians and Gynecologists of 4,000 of its 29,000 members reported that 84 percent said they thought abortions should be legal and available, but only a third of the doctors who favored abortions actually performed them and two-thirds of those who did abortions did very few.

About 4 percent of those polled performed 26 or more abortions a month. The researchers did not ask the doctors why they did or did not perform abortions.

## The Act as a 'Contradiction'

"The term 'abortionist' still has a very heavy stigma," said Dr. Curtis E. Harris, an obstetrician in Oklahoma City who heads the American Academy of Medical Ethics, a group of 21,000 doctors that favors greatly restricting availability of abortions.

"Most gynecologists work to bring a child into the world in a healthy state," Dr. Harris said, adding that performing an abortion "is a real contradiction."

With few incentives to perform abortions, most obstetricians and gynecologists avoid them, medical experts say and surveys of doctors report. Those who support abortion rights say the shortage of willing doctors makes it harder for women, who sometimes have to travel hundreds of miles to find a doctor to abort a fetus.

Relying on a relatively small group of doctors for abortions also leaves "the impression that abortion is

a dirty business and that it is somehow not an appropriate or legitimate medical procedure," said Dr. Michael Policar, the medical director of Planned Parenthood in San Francisco and Alameda, Calif., and an assistant professor of obstetrics and gynecology at the University of California in San Francisco. If They Don't, Who Will? Dr. Warren H. Pearse, executive director of the College of Obstetricians and Gynecologists, said: "It's not pleasant being an abortion doctor. By and large, they are zealots who are strongly committed and who believe, in most instances correctly, that if they don't provide the service, no one will."

Dr. Warren Hern, who directs the Boulder Abortion Clinic in Colorado, said abortion doctors "are treated as a pariah by the medical community," adding, "At best, we are tolerated."

He said a recent incident illustrated "the fundamental rejection of what I do by what passes for the sympathetic medical community." Dr. Hern said he called an old friend the day before New Year's Eve, wanting to bring the friend a gift.

"He is one of my best friends, a medical colleague, who is strongly pro-choice and who has done abortions himself," Dr. Hern said. "I called him late Saturday afternoon and said I wanted to come over. He asked me where I was and I told him I was at my office."

#### 'Like a Knife in My Gut'

At that point, Dr. Hern said, his friend quipped, "Still killing babies this late in the afternoon?"

"It was like a knife in my gut," Dr. Hern said. "It really upset me. What it conveys is that no matter how supportive people may be, there still is a horror at what I do."

"It is getting more difficult to identify doctors" who will perform abortions, said Dr. Louise Tyrer, vice president for medical affairs at Planned Parenthood Federation of America.

She went on, "The older doctors like myself who used to see women by the hundreds in hospitals suffering complications of illegal abortions and even dying were highly motivated to change that." But she said these older doctors are now reaching retirement age and the younger doctors "have not seen any of that - they're not aware of the horrors."

Barbara Radford, executive director of the National Abortion Federation, which represents 289 abortion clinics, said that because most doctors are so leery of abortions her group is finding that "it is just very hard to find doctors."

#### 'Happening in Big Cities Too'

"We have members calling and saying, 'I can't find doctors to work,' " she said. "This used to be restricted to rural areas, but now it's happening in big cities too."

Dr. Harris of the American Academy of Medical Ethics said: "I don't think physicians are any different from society at large. Many feel that abortions should be provided for rape, incest, the life of the mother or severe fetal malformation. Physicians act out of the same social conscience that we all do."

"A physician might do abortions for two or three friends or old-time patients, but in the main, patients are referred to existing clinics," said Dr. Pearse, the executive director of the college of obstetricians and gynecologists. He added that the clinics, with their large volume, tended to carry out abortions very well.

Many obstetricians and gynecologists acknowledge they feel great conflict about abortion. A doctor who is an administrator at the National Institutes of Health - and is forbidden to speak for attribution about the time when she performed abortions - said she used to carry them out because she felt strongly that abortions should be available.

But she had to prepare herself emotionally each time, she said, and she often had a sleepless night before a scheduled abortion. "It's a very tough thing for a gynecologist to do," she said. The emotions it arouses are so strong, she said, that doctors "don't talk to each other about it."

### Isolation, Harassment, Collapse

The doctor said she she lost control only once, when she was performing an abortion on a 30-year-old doctor after she herself had just had a miscarriage. She had been trying for seven years to become pregnant. After the abortion, she said, "I just collapsed on the floor," overcome by her emotions.

Doctors who perform abortions tell of isolation and harassment that sometimes give them pause despite their conviction that what they are doing is right.

Dr. Dennis D. Christensen, who directs the Madison Abortion Clinic in Wisconsin, said that once a doctor decides to perform abortions, it can be difficult to do much else.

"In spite of the fact that some patients want the abortion service available, and will go for the abortion service, they will not wish to come back for other services," Dr. Christensen said. "Patients may be willing to walk through a picket line for an abortion but they are not willing to walk through the same picket line for a Pap smear."

### A Surrender for Acceptance

Doctors also say abortion doctors are often isolated from other doctors. At best, Dr. Christensen said, the other doctors in town treat him with "grudging acceptance."

Dr. Joseph S. Randall, an obstetrician and gynecologist in Atlanta, said he performed 32,000 abortions over a nine-year period before he stopped because of a religious conversion. He said that

when he was performing abortions, "other doctors treated us as second-class M.D.'s."

He said that at meetings of the National Abortion Federation, "the other doctors would mention the same kind of hypocrisy - that's what we called it - of our peers." Since he stopped offering abortions, Dr. Randall said, he feels fully accepted by other doctors.

Dr. Curtis Boyd, who said he has suffered severe harassment, directs abortion clinics in Dallas, Albuquerque and Santa Fe. He said he began offering abortions when they were illegal out of concern for women who were dying and out of conviction that women should have the right to abortions.

"When it was illegal, the fear was of losing my medical license and going to prison," Dr. Boyd said. "I had numerous blackmail attempts and people pulled guns on me." But now, he said, "the harassment is tremendous."

"Every day," he went on, "I have to walk through picketers who call me a murderer, who shout obscenities and who make references to my children. We get harassing letters and telephone calls and I have received numerous death threats."

Dr. Boyd's clinic in Dallas has been burned twice, once on Christmas Day by a group that termed the burning "a Christmas present for Jesus," he said.

#### From Those Who Decline

Doctors who decline to perform abortions say they are aware of the stresses that abortionists face.

Dr. Richard Berkowitz directs a clinic specializing in high-risk pregnancy at Mount Sinai Medical Center in Manhattan and does genetic testing to find fetuses with major birth defects. He said he has "an enormous amount of sympathy" for those who are willing to subject themselves to the "abuse" of being a doctor who carries out abortions.

But Dr. Berkowitz said he is afraid that if he offers abortions even for women with badly deformed fetuses the entire program will come under attack. "That's why we stick our heads in the sand," he said. "That's why we hide."

Dr. Constance J. Brumm, who practices in Pullman, Wash., said that she strongly favored legal and available abortions but that "as long as there is someone else to provide abortions, I'd rather not do it."

She said that her 2-year-old son might be taunted; that she dreaded the inevitable harassment; that if she did abortions, she could lose patients who now come to her for gynecological care.

#### Fear for the Future

Since no doctors in Pullman will carry out abortions, most women there have to go to Spokane, 90

miles away, to Yakima, 150 miles away, or even to Seattle, 500 miles away. "We send about 100 women out of the community every year for abortions," she said.

Dr. Brumm said she feared for the future because the only major abortion provider in Spokane was about to retire. "Then there's really going to be nobody," she said. And if no one else takes over at that time, she said, she will.

Asking women to go farther than Spokane for abortions, she said, "is where I draw the line."

Photo: Anti-abortion protests are taking a toll on doctors who perform the operations, many of whom say they are stigmatized. Dr. Warren Hern, who directs the Boulder Abortion Clinic in Colorado, said an abortion doctors in "treated as a pariah by the medical community." (NYT/Vern Walker) (pg. B8)

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