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# Correspondence

## Abortion and Preterm Birth

In his 2008 article,<sup>1</sup> Brent Rooney asserts that the high preterm birth rate suffered by African-American women is, in large part, caused by the high abortion rate of that race. Do other races or groups in the U.S. or other countries also suffer the same effect?

**Babette Francis**  
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**Author Reply:** The first-ever systematic reviews and meta-analyses (SRMAs) of the abortion-preterm-birth (APB) risk appeared in 2009, with both finding significantly higher preterm delivery (PTB) risk for women with prior induced abortions (IAs).<sup>2,3</sup>

Prakesh Shah of the University of Toronto,<sup>2</sup> using data from 37 prior APB studies, reported that one prior IA nearly doubles PTB odds (OR 1.93; 95% CI, 1.28-2.71). There are no SRMAs reporting that prior IAs do not raise PTB risk. Some of the countries included in the Shah meta-analysis are Australia, Scotland, France, Italy, Germany, Denmark, Israel, Taiwan, Greece, U.S., Finland, Sweden, and Russia.

Swingle et al. reported that women with prior IAs have 64% higher odds of very preterm birth (<32.0 weeks' gestation) than women with no prior IAs.<sup>3</sup>

Extremely preterm newborns (<28 weeks' gestation) have an autism risk of 25%<sup>4</sup> and a cerebral palsy (CP) risk of 14.6%.<sup>5</sup> Between 1989 and 1993, Poland's IA rate per 1,000 births plunged by 98%.<sup>1</sup> Between 1995 and 1997, Poland's rate of extremely preterm newborns decreased by 21%.<sup>1</sup> Between 1989 and 2006, Poland's mortality rate for children under age 5 years with CP plummeted by 71%, according to data I received by email from Poland's Central Statistical Office on Jun 12, 2008. This trend suggests a dramatic drop in the incidence of severe brain injury, a major cause of both autism and CP,<sup>4</sup> in Polish newborns.

The total lifetime cost of autism for a U.S. resident, including medical and nonmedical expenses and lost income, is an estimated \$3.2 million, according to Harvard researcher Michael Ganz.<sup>6</sup> The approximately 39,000 cases of autism presenting in the U.S. each year represent a future drain of about \$125 billion on the U.S. economy. Prior IA is likely the cause of some of those cases of autism.

No ethnic group has been shown to be exempt from the APB risk. Ross et al.<sup>7</sup> showed 31% higher odds of PTB in women with previous IAs compared with women

with no IAs. In this study, performed at the University of California at Los Angeles, 84% of the women were of Hispanic ethnicity. We challenged the congressional representative from this district, Henry Waxman (D-CA), to find any systematic review performed in this century that did *not* find an APB risk. So far he has provided no citations.

Calhoun et al. estimate that 31.5% of U.S. very preterm births in 2002 were attributable to prior IAs, and that 1,096 cases of CP in newborns under 1,500 grams were attributable to prior IAs.<sup>8</sup>

In August 2010 Ohio State University professor Dr. Jay Iams wrote the following in the *American Journal of Obstetrics & Gynecology*:<sup>9</sup> "Contrary to common belief, population-based studies...have found that elective pregnancy terminations in the first and second trimesters are associated with a very small but apparently real increase in the risk of subsequent spontaneous preterm birth (PTB)." For this statement, he referenced Shah and Zao.<sup>2</sup>

**Brent Rooney, M.Sc.**  
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<sup>1</sup> Rooney B, Calhoun BC, Roche L. Does induced abortion account for racial disparity in preterm births, and violate the Nuremberg Code? *J Am Phys Surg* 2008;13:102-104.

<sup>2</sup> Shah PS, Zao J. Induced termination of pregnancy and low birthweight and preterm birth: a systematic review and meta-analysis. *BJOG* 2009;116:1425-1442. Available at: www.bjog.org/details/journalArticle/345727/Induced\_termination\_of\_pregnancy\_and\_low\_birth\_weight\_and\_preterm\_birth\_a\_systema.html. Accessed Aug 17, 2010.

<sup>3</sup> Swingle HM, Colaizy TT, Zimmerman MB, Moriss FH. Abortion and the risk of subsequent preterm birth: a systematic review and meta-analysis. *J Reprod Med* 2009;54:95-108.

<sup>4</sup> Limperopoulos C. Autism spectrum disorders in survivors of extreme prematurity. *Clin Perinatol* 2009;36:791-805.

<sup>5</sup> Himpens E, Van Den Broeck C, Oostra A, Claders P, Vanhaesebrouck P. Prevalence, type, and distribution and severity of cerebral palsy in relation to gestational age: a meta-analytic review. *Dev Med Child Neurol* 2008;50:334-340.

<sup>6</sup> Ganz ML. The lifetime distribution of the incremental societal costs of autism. *Arch Pediatr Adolesc Med* 2007;161:343-349.

<sup>7</sup> Ross MG, Hobel CJ, Bragonier JR, et al. A simplified risk-scoring system for prematurity. *Am J Perinatol* 1986;4:339-344.

<sup>8</sup> Calhoun BC, Shadigian E, Rooney B. Cost consequences of induced abortion as an attributable risk for preterm birth and informed consent. *J Reprod Med* 2007;52:929-937.

<sup>9</sup> Iams JD, Berghella V. Care for women with prior preterm birth. *Amer J Obstet Gynecol*. 2010;203:89-100.