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POSITION PAPER ON THE REPRODUCTIVE HEALTH BILL (RESPONSIBLE PARENTHOOD BILL)

The Philippine Medical Association (PMA) supports the Reproductive Health Bill (or otherwise also called The Responsible Parenthood Bill) insofar as it is founded strongly on the principle that “**life or conception begins at fertilization**” at that moment where there is fusion or union of the sperm and the egg and thus a human person or human being already does exist at the moment of fertilization. The PMA thus abhors any procedure, machination or scheme or medication that will interrupt any stage of fertilization and prevents its normal, physiological, uninterrupted growth to adulthood until the stage of natural death. In adopting this stand, the PMA thus explains its reason therefore, as follows:

MEDICAL, SCIENTIFIC AND BIOLOGICAL BASIS

Right after fertilization, there is no way one could alter the natural and normal outcome other than a human being until natural death. The fertilized egg, now a human being, unstoppably grows by itself and, there is no other path it takes but to evolve into a full mature human being. There is no human embryologist in the world who would deny that life begins at fertilization. Some secular debaters may insist but not a single human embryologist will ever say that human life is, at some early stage, only a “potential” human life. Textbooks in Human Embryology are replete with discussions on the beginning of life. The zygote (fertilized egg) is that cell that results from the union of an oocyte and a sperm. A zygote is the beginning of a new human being (i.e., an embryo). Human development begins at fertilization, the process during which a male gamete or sperm ... unites with a female gamete or oocyte ... to form a single cell called a zygote. This highly specialized, totipotent cell marks the beginning of each of us as a unique individual^[1].

¹ Science and Abortion: The Scientific Basis for a Pro-life Position by Rich Deem quoting from the book *The Developing Human: Clinically Oriented Embryology* (pp 2-18)

Some will maintain that the beginning of life does not start before the formation of the embryo (pre-embryonic stage) but this is not supported by the scientific discussions by human embryologists. Dr. Kischer, emeritus professor of Anatomy at the University of Arizona, writes, "...the first thing learned in human embryology [is] that the life of the new individual human being begins at fertilization (conception)". He continues, "we should respect a microscopic human embryo because at that time it is an integrated whole organism, just as the human is at every moment in time until death. Every human embryo deserves as much respect as you or I because it is formed as a new individual human life within the continuum of life ..." To deny this, Kischer says, is "a trivialization and corruption of the science of human embryology."^[2] Thus, any scheme, procedure or medication that destroys the fertilized egg or the embryo is called abortion. Even the official U.S. Public Health Service Policy states: "All the measures which impair the viability of the zygote anytime between the instant of fertilization and the completion of labor constitute, in the strict sense, procedures for inducing abortion".^[3]

Some many years ago, the American College of Obstetrics and Gynecology has changed the meaning of "conception" and according to its new meaning "conception", no longer meant "fertilization." Surprisingly "conception" was redefined as the implantation of a blastocyst on the uterine wall, typically occurring 1-2 weeks after fertilization.^[4] In his presidential address in 1984, however, Dr. Richard Sosnowski of ACOG refuted this change and thus he said-

"I do not deem it excellent to play semantic gymnastics in a profession ... It is equally troublesome to me that, with no scientific evidence to validate the change, the definition of conception as the successful spermatic penetration of an ovum was redefined as the implantation of a fertilized ovum. It appears to me that the only reason for this was the dilemma produced by the possibility that the intrauterine contraceptive device might function as an abortifacient".^[5]

² Life Begins at the Beginning, By Fritz Baumgartner, MD, April 12, 2005; (*Kischer CW. Let's be factual about the human embryo, <http://www.all.org/abac/ab020128.htm>*).

³ *Public Health Service Leaflet no. 1066, US Dept of Health, Education, and Welfare, 1963, 27*

⁴ *ACOG Terminology Bulletin. Terms used in reference to the fetus. Chicago, ACOG, no.1, September 1965*

⁵ *Sosnowski JR. The pursuit of excellence: have we apprehended and comprehended it? Am J Obstet Gynecol 150: 115-9; 1984; Gambrell RD. Physicians should provide moral leadership to their communities. Am J Obstet Gynecol 183: 261-70; 2000*

The new IUD, the copper containing edition, is presently favored by the World Health Organization. Its proponents contend that it damages the sperm before it meets with the ovum and thus it prevents pregnancy. Experience from practitioners, however, reveal that still, pregnancy is not absolutely prevented by the new version of the IUD and thus, abortion is still a possibility.⁶

This is rather concerning in connection with the use of contraceptive. A practicing physician could easily discover from the Physician's Desk Reference (PDR) that a contraceptive exerts its effect by suppressing hormones called the gonadotropins which in turn prevents ovulation. But its other effect may include changes in the endometrium or changes in the internal lining of the womb and thus reducing the likelihood of implantation. Thus, in the rural areas when the period of ovulation is not determined with accuracy, the use of contraceptive would certainly result to abortion.

One plus one equals one - that from the mother and that from the father results into one human being - a rather correct mathematical myth so to speak. There is no more pivotal moment in the subsequent growth and development of a human being than when the chromosomes of the father join with the chromosomes of the mother to form a unique individual, with a gender, who had previously simply not existed. There is no more appropriate moment to begin calling a human "human" than the moment of fertilization.^[7]

The embryo is not something that is being passively built by the process of development, with some unspecified, external "builder" controlling the assembly of embryonic components. Rather, *the embryo is manufacturing itself*. The organized pattern of development doesn't produce the embryo; it is produced by the embryo as a consequence of the zygote's internal, self-organizing power. Indeed, this "totipotency," or the power of the zygote both to generate all the cells of the body and simultaneously to organize those cells into coherent, interacting bodily structures, is the defining feature of the embryo.^[8]

⁶ Dr. Santiago Del Rosario, past President, Philippine Medical Association

⁷ Life Begins at the Beginning, By Fritz Baumgartner, MD, April 12, 2005;

⁸ "When Does Human Life Begin?", A Scientific Perspective, Maureen L. Condic, Ph.D., Westchester Institute White Paper, Volume 1, Number 1

THE PMA STAND ON THE SO-CALLED "PRE-EMBRYO" STAGE

The "pre-embryo" stage of fertilization was advocated by Clifford Grobstein and Richard McCormick, S.J., in 1979. Both Grobstein^[9] and Fr. McCormick advanced the idea that there is a human being before 14 days but no human individual. Thus they maintain that at this stage there is no "person" yet because before 14 days two or more pregnancies may be an outcome (e.g. twin pregnancy). Both likewise advanced the idea that it is the inner layer of the 4-7-day blastocyst that will become the human because after birth the outer layer is cast off. They argue that before the 14th day, there is only a "pre-embryo" stage which could be a "potential person". According to them after 14 days twinning can no longer take place and thus there is already a definite individual or a person. The other terms used for this stage is "pre-implantation embryo" which simply means that conception or life begins only two weeks after fertilization (syngamy) and during this pre-embryo stage, there is only a potential to become human being.

It is well to stress that Grobstein and Fr. McCormick have based their conclusions on frog biology. But unlike frogs, human embryos do not divide synchronously, and the two layers of the human blastocyst are in fact interactive. Furthermore, [in humans] some of the cells of the outer layer are retained after birth, and they form blood cells and other tissues. The whole human blastocyst is a human being, not just the inside part.^[10]

Thus, the PMA does not support the studies done on frogs but rather it supports the scientific data that a new cell, the zygote, comes into existence at the "moment" of sperm-egg fusion, an event that occurs in less than a second. At the point of fusion, sperm and egg are physically united—i.e., they cease to exist as gametes, and they form a new entity that is materially distinct from either sperm or egg. The behavior of this new cell also differs radically from that of either sperm or egg: the developmental pathway entered into by the zygote is distinct from both gametes. Thus, sperm-egg fusion is indeed a scientifically well defined "instant" in which the zygote (a new cell with unique genetic composition, molecular composition, and behavior) is formed.^[11]

⁹ An embryologist who does studies on frogs (frog embryologist)

¹⁰ Life Begins at the Beginning, By Fritz Baumgartner, MD, April 12, 2005

¹¹ "When Does Human Life Begin?", A Scientific Perspective, Maureen L. Condic, Ph.D., Westchester Institute White Paper, Volume 1, Number 1

The material composition of the cell does not change from the instant prior to syngamy (14 days after fertilization) to the instant after it takes place. There is no substantive change in the behavior of the cell at syngamy; all the preparations for cell division (DNA replication, assembly of the mitotic spindle, chromatin condensation) are already underway as the pronuclei move together. Indeed, nuclear membrane breakdown is not a unique, “zygote-forming” event, but rather it is cell—and it continues doing exactly what it was doing (i.e., preparing to undergo cell division) both before and after the pronuclei come into physical proximity. The developmental program observed during the first cell cycle (including the breakdown of nuclear membranes at syngamy) is clearly initiated by the fusion of the sperm and egg, and it progresses seamlessly from that instant forward.^[12]

PMA ON THE MEDICO-SOCIO-BIOETHICAL IMPACT OF FERTILIZATION AS THE BEGINNING OF CONCEPTION

In this age of cyberworld, the human body seems to be that of a machine maintained with spare parts. Contraception treats the women’s body as though there were something wrong with it. The use of contraception suggests that God made a mistake in the way He designed the body and that we must correct the error. In an age that has become very weary of dumping pollutants into the environment, it is so ironic that people are so willing to dump pollutants into their bodies. The health risks of contraception to women are considerable; the list of side effects is long, and includes high blood pressure, strokes, increased incidence of some forms of cancer. The IUD went off the market because of so many lawsuits against manufacturers. More importantly, many form of contraceptives work by causing an early term abortion, they work by preventing the fertilized egg, the tiny new human being, from implanting in the wall of the uterus^[13]. The modern age tends to treat babies as burdens and not gifts. It tends to treat fertility as some dreadful condition that needs to be guarded against. Some speak of ‘accidental pregnancies’ as if getting pregnant were like getting hit by a car- some terrible accident has happened. But the truth is that if a pregnancy results

¹² *ibid*

¹³ *A Law Each Day [Keeps Trouble Away] by Jose C. Sison, Philippine Star, Feb 15 2011*

from an act of sexual intercourse, this means that something has gone right, not that something has gone wrong.^[14]

The pending legislation purports to reduce the alarming rise in the maternal and child deaths in the Philippines. This goal could be attained by improving maternal and child health care without the necessity of distributing contraceptives. The millions of funds intended for the contraceptive devices may just well be applied in improving the skills of our health workers in reducing maternal and child mortality in the Philippines. It may not be too much to ask that the millions of funds intended for the contraceptive devices may well be applied to finance the Magna Carta of Health Workers in the Philippines. Bioethically, the proposed legislation recognizes the right of the spouses to decide for themselves in making their own choice. The legislative bill stresses the right of the spouses to make what is called an informed consent. Caution must however be exercised lest their informed decision may lead to abortion or may place their own health at risk.

The word “contraception” itself means “against the beginning of new life”. The spouses engaged in contraception put “barrier methods in place – for protection-protection against a new baby... God gives the spouses the mission of transmitting human life. Contraception says ‘no’ to God; It says those using it want to have the wonderful physical pleasure of sex but do not want God to perform His creative act. A sexual act open to the possibility of procreation ideally represents the kind of bond to which spouses have committed themselves. Contraceptives, however, convey the message that while sexual intercourse is desired, there is no desire for a permanent bond with the other person. The possibility of everlasting bond has been wilfully removed from the very act designed to best express the desire for such relationship. It reduces the sexual act to a lie.^[15]

A member of the Philippine Medical Association must consider recalling provisions of the Geneva Declaration of Physicians, written as a direct result of the Nazi medical atrocities soundly condemned at the Nuremberg Medical Trials. This universal Declaration of Physicians states: “ *I will maintain the utmost respect for human life, from the time of its conception, even under threat. I will not use my medical knowledge contrary to the laws of humanity*” .^[16]

¹⁴ *Humane Vitae* quoted by Jose C. Sison in his article *A Law Each Day [Keeps Trouble Away]*

¹⁵ *A Law Each Day [Keeps Trouble Away]* by Jose C. Sison, *Philippine Star*, Feb 15 2011

¹⁶ *The Geneva Conventions of 1949. In Human Rights Documents: Compilation of Documents Pertaining to Human Rights. Pp 325-*

461, Washington DC U.S. Government Printing Office, 1983

CONCLUSION

The PMA throws its full weight in supporting the RH Bill at the same time that PMA maintains its strong position that fertilization is sacred because it is at this stage that conception, and thus human life, begins. Human lives are sacred from the moment of conception, and that destroying those new lives is never licit, no matter what the purported good outcome would be. In terms of biology and human embryology, a human being begins immediately at fertilization and after that, there is no point along the continuous line of human embryogenesis where only a "potential" human being can be posited. Any philosophical, legal, or political conclusion cannot escape this objective scientific fact^[17].

The scientific evidence supports the conclusion that a zygote is a human organism and that the life of a new human being commences at a scientifically well defined "moment of conception." This conclusion is objective, consistent with the factual evidence, and independent of any specific ethical, moral, political, or religious view of human life or of human embryos.^[18]

FURTHER ON THE REPRODUCTIVE HEALTH BILL

The previous position paper of the PMA is herein re-incorporated as follows-

The PMA most respectfully prays that the rights of physicians must be given utmost respect. They must be left undisturbed to decide what is best for their patients. No proposed penalty or censure must be left hanging over their heads in carrying out their commitment to their patients. The PMA likewise prays that the patient's right to exercise of his or her religion must be accorded full respect and more importantly the PMA is with the patient in the exercise of his or her right to quality and affordable health services.

¹⁷ Life Begins at the Beginning, By Fritz Baumgartner, MD, April 12, 2005

¹⁸ "When Does Human Life Begin?", A Scientific Perspective, Maureen L. Condic, Ph.D., Westchester Institute White Paper, Volume 1, Number 1

There must be in the RH Bill directing the government to set up a national emergency obstetrical and child care by providing adequate facilities and qualified staff for maternity and pediatric cases to address the problem of alarming maternal and child deaths in the country.

As emphasized in the previous discussions, the Philippine Medical Association abhors the employment or promotion of contraceptive devices and instead prays that the government crafts a program for the proper education of the public on reproductive health and responsible parenthood.

The Philippine Medical Association shuns mandatory imposition of family size. The PMA proposes the better alternative of informing the public of the benefit of adequate family size taking into consideration the family's income, culture, values and religious affiliation.

Lastly, the PMA being a major participant in the discussion on health care issues, and being the mother association of all medical societies, organizations and associations in the Philippines, a representative of the Philippine Medical Association must be included in the proposed composition of the POPCOM.



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