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The Ethics of Abortion, Sterilization and Birth Control.*

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DURING the last 50 years men and women have been busily engaged in examining and revaluing their traditions, their beliefs, and their social customs. The conclusions arrived at are not so obvious as their practical results, but the following summary may serve our purpose:—

1. The terrors or joys of a life to come have been heavily discounted.

2. While the Ten Commandments and the teachings of Christ are still revered even by those who do not observe them, the authenticity of the rest of the Scriptures as statements of fact and a guide to life has been badly shaken.

3. The idea that this life is only a painful preparation for the life to come has been abandoned. We no longer hear the hymns we sang in our youth—"Here we suffer grief and pain . . ." and "There is a happy land, far, far away."

4. The individual's right to freedom and to get as much out of life as possible has been established as a popular theory.

The results of these conclusions are apparent in all directions. For my purpose, it suffices to say that the position of women and the relations of husbands and wives have been entirely changed, that men and women no longer fear to disobey what they regard as merely conventional rules of conduct, and that many reputable citizens have no hesitation in breaking the law of the land when they consider that, in so doing, they are not guilty of moral turpitude.

This accounts for the modern attitude regarding abortion, sterilization, and birth control.

The much-discussed subject of abortion raises questions of supreme difficulty. The practice was one which few of the

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ancients before the Christian era seriously condemned. Indeed, certain Greek philosophers, notably Plato and Aristotle, expressed themselves directly in its favour. Abortion was not expressly prohibited by the Mosaic Law, and the New Testament is silent. Therefore the Christian Fathers in the two first centuries A.D. were faced with the question whether abortion was contrary to the Sixth Commandment, "Thou shalt not kill." They faced the situation with characteristic resolution and more than characteristic precision. They declared that "One identical life principle exists from conception to death," and that consequently abortion at any stage was murder. This is still the Roman Catholic view. The Jews, on the contrary, regarded abortion as justifiable when performed to protect the mother. Their view, as expressed in the Talmud, was that the foetus must be regarded as an assailant against whom the mother must be protected. In England abortion has been a crime for some 600 years. Contraception also seems to have been illegal. Fleta's treatise on the laws of England, published in the thirteenth century, contains a passage in which he states that the giving or taking of drugs "to the intent that no generation or conception shall take place" is homicide. The first statutes prohibiting abortion were not passed until 1802 and 1828. These drew a distinction between a woman quick with child and one not quick. Quickening is supposed to occur about the eighteenth week. The existing law is comprised in the Offences Against the Person Act, 1861, and in the Infant Life (Preservation) Act, 1929. The former provides that any person who shall unlawfully use any instrument or drug with the intent to procure a miscarriage shall be guilty of a felony. The latter, to fill a gap in the law, provides that any person who, with intent to destroy the life of a child capable of being born alive, by any wilful act causes the child to die before it has an existence independent of its mother, shall be guilty of a new offence called "child destruction," rendering the offender liable to penal servitude for life. The fact that the woman had been pregnant for 28 weeks when the offence was committed is *prima facie* evidence that the child was capable of being born alive. It is a defence that the act was done in good faith to preserve the mother's life. Subject to the provisions of this statute it is agreed by lawyers and doctors that a miscarriage may be lawfully procured when the object is to save the mother's life or to avoid serious injury to her health. The essence of the offence is a guilty intent. Now, however, we are faced with a fresh aspect of the subject. There is no doubt that abortion is rife among all classes in this country, Germany, and U.S.A., particularly among married women. The reasons are

various—poverty, disinclination to undergo disabilities of pregnancy which interfere with social life and sport, desire to avoid the disgrace of an illegitimate child, fear of pain, or fear that the child may be unhealthy, mentally or physically. Obviously, some of these reasons appeal to our sympathy, while others do not. Mr. Justice McCardie recently caused a sensation by his startling criticism of the administration of the law of abortion. He pointed out that the prisoner was technically guilty of manslaughter, and had no defence against the present law. She was originally charged, as her counsel had pointed out, with wilful murder, but the very last thing she desired was the death of the woman at whose request she acted, and yet the charge of wilful murder was made against her.

“Such a charge illustrates, in my opinion,” his Lordship continued, “the ignorance and brutality with which the law of abortion is too often administered, and it is plain to me that many of those who seek to uphold and administer the present law of abortion are wholly ignorant of the social problems which not only persist in our midst, but which menace the nation at the present time.

“In this case the now dead woman had no wish for a child. She had already borne three, aged six, five, and three years. Her husband had wished for a child, but it was the wife who had to undergo the burden of child-bearing, and I repeat once more that this case illustrates the need for wider extension of birth-control knowledge than at present exists. I cannot think it is right that a woman should be forced to bear a child against her will.”

There is no doubt that the learned Judge performed a public service in directing attention to this subject, but he has undoubtedly created a most difficult situation. What is the abortifacient to expect? If the prisoner comes before Mr. Justice McCardie or some other Judge who shares his views, lenient treatment may be expected if it can be shown that the abortifacient was trying to help a woman in distress. On the other hand, if the case is tried by a Judge with more conventional views, the abortifacient may expect a drastic sentence. It may be pointed out that the severity of the abortifacient's sentence cannot be measured by the needs of his or her client. Abortifacients usually ply their trade to make money, not to relieve distress.

Then, again, there is abortion and abortion. A large number of women who have no hesitation in trying to rid themselves of a foetus in an early stage of development pause before attempting to remove one in its later stages. Furthermore, to the

average mind, there is a vast difference between the two species of abortion. There is no doubt that the two early statutes and the Act of 1929 to which I have alluded describe what still is the distinction in the minds of the public. *It seems highly necessary that either the law should be altered or that there should be an agreement between the Judges as to the principle on which these cases should be dealt with.* The fact must, however, be faced that Parliament is unlikely to change the law without strong pressure from public opinion. Whether public opinion is sufficiently strong or interested to provide the necessary pressure I will not venture to say. Hitherto abortion has been a question entirely in the hands of men, but it is mainly a woman's question. In Germany, where abortion is more prevalent than in any other country, the subject has been actively taken up by women. German writers insist that the foetus is not yet an independent human being and that every woman, by virtue of the right over her own body, is entitled to decide whether it shall become one. I doubt whether these theoretical views are widely held here, but in practice a very large number of women hold that there is no moral turpitude in ridding themselves of an unwanted child if action is taken in the early stages of pregnancy. This idea has serious repercussions, as there is ample evidence that our failure to reduce the maternal mortality-rate is largely due to the influence of abortion and attempted abortion. We cannot hope for an early solution, as the subject is tangled up with tradition, religion, sentiment, false modesty, and the like. We can only hope that temperate discussion may enable us to find a way out of the difficulty.

We cannot overlook that in Russia facilities for abortion are provided by the State on a huge scale, and that this practical demonstration of ideas held by large sections of the communities in other countries is likely to have widespread influence.

Leonard Phillips,¹ who has recently visited Russia, gives a most interesting account of his visit. He says: "An abortion can be demanded by the expectant mother, and is performed in State clinics, social and economic indications being sufficient, as long as the abortion is demanded before the 12th week. . . . State abortion is performed partly to control the birth-rate and partly because of the great loss of life and ill-health following illegal abortions by unskilled persons. In the last 200,000 abortions performed in the State clinics, there were only nine deaths. Contraception is taught and practised, but not to the extent which is possible or desirable as an alternative to legalized abortion. Probably it is too expensive and difficult a method to teach

peasants and workers of limited intelligence. The Union, however, is very alive to its importance. In spite of legalized abortion, the unauthorized abortionmonger still exists, and the toll of life from this source is still a heavy one. Outside the clinic I visited is written in large letters, 'We welcome you this time—but we do not want to see you again.' Patients come up for consultation one day, are admitted for operation the next morning, operated upon the same day, and discharged from the clinic three days later. Anaesthetics are given only in exceptional cases."

Abortion is carried out by surgical methods, the operation lasting only a few minutes. Between 70,000 and 80,000 abortions are performed yearly in Moscow alone. The clinic Mr. Phillips visited was responsible for about 18,000 per annum. Six doctors each performed about 10 operations a day.

The subject has recently aroused much interest in the United States of America. At the request of the White House Conference on Maternal Mortality and Morbidity, Taussig prepared an elaborate survey of abortion.² He estimates the number of abortions in the United States of America at 700,000 per annum, or roughly two abortions to seven confinements, which he describes as an under-estimate. He fortifies himself by the following comparative figures:—

"In England, Whitehouse of Birmingham gives the ratio of abortions to pregnancies as one to 5.9. More complete data are available from Germany, where the ratio given by Schottelius in Hamburg for 1919 was 8,707 abortions to 16,779 confinements, or a ratio of one to two. Heynemann is convinced that the ratio of abortions to confinements (in Germany) has steadily increased until at the present time the number of abortions equals those of confinements at term. Latzko of Vienna has found a similar marked increase in the percentage of abortions."

Taussig estimates that 50 per cent of American abortions are criminal, and on the authority of Heynemann gives the German figure at about 80 per cent. Taussig asserts that every year 15,000 American women die of abortion, or, say, about two per cent of the 700,000.

These are astonishing figures. In England and Wales in 1929 there were 643,673 births and 2,854 deaths due to childbirth, including 372 caused by abortion. In addition, there were 182 deaths associated with abortion, but classified to non-puerperal causes, thus giving a total of 554, or nearly one per thousand of the births. Considering the prevalence of attempted abortions, we may assume that these figures do not tell the whole story and that

a larger proportion of the 2,854 deaths was due directly or indirectly to this cause. This assumption is confirmed by the fact that puerperal sepsis is the chief villain in the piece. In 1930 no fewer than 1,243 deaths were ascribed to this cause. Taussig reports that an exhaustive enquiry by the United States Government concerning maternity conditions in certain States, proved that :

“Forty-five per cent of all deaths assigned to puerperal septicaemia were preceded by abortions. Criminal abortions caused one-fourth of all the deaths assigned to puerperal septicaemia.”

May it not well be that the failure to reduce maternal mortality is due to the wide-spread practice of attempted abortion ?

In his concluding remarks, Taussig says :

“The abortion problem, so vital to the human race, demands more careful and more open study, free from the trammels of political or religious dogma. . . . Women should be told that interference with pregnancy is a procedure inevitably associated with considerable risk to life and especially to future health.”

In the course of the discussion which took place after I had given my address a member of the medical profession, who was in the audience, stated that he had been informed that a new method of procuring abortion, by intra-muscular injection of some preparation, had been devised in Germany. I enquired of the Editor of this journal whether he had heard of this method. His answer was in the negative. Later he sent me a letter received from Geheimrat Döderlein dealing with the subject. As it may prove interesting to readers of this Journal, the Editor has given me leave to publish it.

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München,

9,ii,1932.

My Dear Colleague,

Thank you very much for your friendly letter regarding abortion.

It is very interesting to me to hear that the question of legal and illegal abortion is such a prominent one in England to-day, and that unorthodox attitudes towards pregnancy are on the increase there, as elsewhere in the world to-day.

With regard to the question of procuring abortion by means of an intra-muscular injection, it would seem that there has been a misunderstanding. Such a procedure is unknown to me, and I do not believe that anything of the sort is practised anywhere in Germany to-day. What has, however, become very widespread is the intra-uterine injection of a given dose of “Interruptin” or “Provokol,” these consisting of mixtures of different drugs. And

a glance at our publications will show that the actions and dangers of these drugs are some of the most discussed questions in our journals to-day. I am enclosing you a list of references to our literature on the subject, from which you may gather the latest views.

I have in my clinic at the present moment 35 cases of abortion, induced by "Interruptin" for medical reasons. I am more than satisfied with the results. We have had no single instance of failure to procure swift and safe abortion. On the other hand, as you will see by the literature, there is a good deal of controversy raging on the subject, as in some 12 cases throughout Germany death has resulted from air and fat emboli, and these deaths have been charged to the "Interruptin." Personally, I doubt very much if these cases would stand rigorous criticism, though we are not really in a position to assign any cause of death, since, in some instances no sections are available, and in others such sections as are to hand are equivocal. It is not, therefore, possible at the moment of writing to give a considered opinion as to the indications for the usefulness of, or the dangers of, "Interruptin" and similar methods.

The question of providing free abortion, following the lead of Russia, is also being discussed here, but Parliament has not pronounced a final word, either on that or on the question of removing the procuring of abortion from the roll of offences punishable at law.

Should you desire further information on this subject I am wholeheartedly at your service.

With my very kindest regards,

Sincerely yours,

Döderlein.

To turn to birth control, it is not generally known that the movement started in 1822, when its originator, Francis Place, the celebrated social reformer, published his book on population, and began to promulgate his doctrines by means of handbills. Place was a tailor with a shop at Charing Cross. They say it takes nine tailors to make a man. It may be said with more truth that one tailor has prevented the making of millions of men and women. Place's book was a commentary on Malthus's famous essay. He agreed that, unless controlled, the population was likely to outrun the means of subsistence, but advocated contraception as an alternative to Malthus's proposal that the population should be limited by self-restraint, enforced by starvation

of such of the indigent as were so improvident as to produce families they were unable to maintain.

In 1832, inspired by Place's ideas, Dr. Knowlton, an American doctor, issued in New York, anonymously, his "Fruits of Philosophy, or The Private Companion of Young Married People," in which he described practical contraceptive methods. He was promptly prosecuted and imprisoned. The movement made slow progress until Bradlaugh republished "Fruits of Philosophy" in 1877. His prosecution and imprisonment gave the movement a great impetus, but for many years these practices were not openly discussed, although books on the subject were covertly sold. Public discussion was only rendered possible by changes in fundamental ideas already described. It goes almost without saying that certain sections of the community are still bitterly opposed to contraception. Roman Catholics and numerous members of other religious bodies object on religious grounds, and there is a certain amount of criticism based on hygienic reasons. The Roman Catholic point of view may be gathered from the following extracts from the Pope's Encyclical. After stating that "The Catholic Church, to which God has entrusted the defence of the integrity and purity of morals, stands erect in the midst of the moral ruins which surround her," he says, among other things: "Any use whatsoever of matrimony exercised in such a way that the act is deliberately frustrated in its natural power to generate life, is an offence against the Law of God and nature, and those who indulge in such are branded with the guilt of a grave sin. . . . Holy Writ bears witness that the Divine Majesty regards with greatest detestation this horrible crime and at times has punished it with death. As St. Augustine notes, 'Intercourse even with one's legitimate wife is unlawful and wicked where the conception of the offspring is prevented. Onan, the son of Juda, did this, and the Lord killed him for it!'"

The official views of the Church of England are set forth in the Resolutions of the Lambeth Conference of 1930. They say: "It is axiomatic that parenthood is for married people the foremost duty; to evade or disregard that duty must always be wrong. . . . It can never be right for intercourse to take place which might lead to conception when a birth would involve grave danger to the health, even to the life, of the mother, or would inflict upon the child to be born a life of suffering; or when the mother would be prematurely exhausted, and additional children would render her incapable of carrying out her duties to the existing family. The primary and most obvious way of dealing with such circumstances . . . is total abstinence from intercourse,

even if it may be for long periods. . . . Yet there exist moral situations which make it obligatory to use other methods. To a certain extent this obligation is affected by the advice of medical and scientific authority. . . . Each couple must decide for themselves, as in the sight of God, after the most careful and conscientious thought, and, if perplexed in mind, after taking competent advice, both medical and spiritual. In our judgment the question which they should put to themselves is this: Would conception be for any reason wrong? If it would clearly be wrong, and if there is good moral reason why the way of abstinence should not be followed, we cannot condemn the use of scientific methods to prevent conception, which are thoughtfully and conscientiously adopted.”

I am not aware whether the Church of Scotland and the Nonconformist Churches have expressed their views officially.

The exponents of birth control state their case thus:—

There is no divine or human law prohibiting birth control. Practised in moderation it exercises a hygienic, moralistic influence, inasmuch as it facilitates marriage, prevents the ruin of women’s health by too frequent pregnancies, enables parents to moderate their families in proportion to their means, and thus to maintain and educate their children in comfort. It is agreed that few pass through the ordeal of squalid, hopeless poverty or even long-continued pecuniary embarrassment without serious injury to their characters, and that birth control is a potent remedy for these evils. Further, it is said that unemployment and low wages are due to a redundant population and that the standard of living and happiness would be raised if there were fewer people. In short, the birth-control party claim with much vehemence that the subject should be dealt with on purely utilitarian principles. As a *tu quoque* argument they say, if we are “branded with the guilt of a grave sin, is it not a fact that, until a recent date, you Roman Catholics castrated thousands of boys every year to supply Cathedral choirs?” Of course these vituperations, so freely indulged in by both sides, lead nowhere. In all these controversies we are faced with the question: Is it permissible to perform the sexual act for enjoyment, or should it be performed only for purposes of propagation? The answer involves two views so essentially different that no logical reconciliation is possible. When faced with the problem each individual must decide according to his or her lights. It may be noted, however, that the Encyclical contains a helpful passage:—

“Holy Church knows well that not infrequently one of the parties is sinned against rather than sinning, when for a grave

cause he or she reluctantly allows the perversion of the right order. In such a case, there is no sin, provided that, mindful of the law of charity, he or she does not neglect to seek to dissuade and to deter the partner from sin. Nor are those considered as acting against nature who in the married state use their right in the proper manner although, on account of natural reasons either of time or of certain defects, new life cannot be brought forth. For in matrimony as well as in the use of matrimonial rights there are also secondary ends, such as mutual aid, the cultivating of mutual love, and the quieting of concupiscence, which husband and wife are not forbidden to consider so long as they are subordinated to the primary end and so long as the intrinsic nature of the act is preserved."

Perhaps the answer will be best provided by the verdict of the majority. As Aristotle says when dealing with another matter: "The Many are better judges than the Few, for some of us can judge one side and some another, but all of us together can judge all sides." The birth-rate figures in all European countries and in U.S.A. show the views of the majority in unmistakable fashion. It is notable that many persons who view with justifiable alarm the enormous increase of abortion practices look to birth control as a remedy. Taussig's remark that "Birth control may prove a factor in the reduction of criminal abortions, especially if more reliable contraceptive measures are discovered" is likely to meet with general approval.

It is generally agreed that lunacy and mental deficiency are serious menaces to the national well-being. We are told authoritatively that there are 300,000 mental defectives, and that institutional accommodation is required for at least 64,000. In addition there are about 140,000 notified insane persons. The Board of Control is urging local authorities to spend 30 millions in providing institutional accommodation for mental defectives. If these adjurations are complied with, we shall be called upon to spend 20 millions per annum upon the insane and mentally deficient. As it is, the annual expenditure in England and Wales on mental defectives has risen in 10 years from £640,000 to £1,440,000. We spend only £60,000,000 per annum for elementary education. Mental defectives attending day special schools are kept at school until 16 and trained in classes of 30, whereas normal children are discharged at 14 and mostly trained in classes of 50. Mentally deficient children attending day special schools get a substantial dinner, which, to quote the Board of Control, "not only benefits the child physically, but affords educational opportunities in table manners."

It is agreed that lunacy and mental deficiency are largely hereditary diseases. The ghastly life-stories furnished by the Board of Control to stimulate local authorities to action are adequate evidence of that melancholy fact. This is the main reason for segregating mental deficient, but it should be observed that segregation is incomplete, since the patients are usually allowed out on parole for short periods. Needless to say, mental deficient are insufficiently protected by the statute which makes it a criminal offence to have sexual relations with a mental defective. Apart from sexual dangers, there is no reason why a large proportion of these unfortunates should not reside with their relatives. Social reformers allege that voluntary sterilization, surrounded by numerous precautions, would go far to prevent the propagation of more mental defectives. They contend also that much-needed economies might be effected and that the lives of many of these unfortunate people might be made happier if they were thus enabled to reside with their relatives.

The objections to these proposals are threefold:—

First, similar objections are urged as in the case of abortion;

Second, it is urged that sterilization would infringe individual freedom;

Third, there is the sentimental objection which may be expressed in the words of the Bishop of Exeter when dealing with birth control: "If life has been sweet to us, why should we deprive others of the privilege we value and enjoy? Every child deprived of the privilege of life is treated cruelly and unjustly."

As in the case of abortion, the religious objection does not lend itself to argument. As to the other two objections, the exponents of birth control point out that the operation would be performed only with the consent of the patient or that of his or her relatives, and that the sanction of an independent judicial body would be required. These exponents further point out that a slight operation only is necessary, and that the individual is not thus deprived of sexual powers except in the matter of procreation. They characterize the sentimental objection as absurd.

It is easy to appreciate the arguments against abortion and birth control among the normal, but from a logical, ethical, and economic point of view it seems that the arguments of the sterilization party are unanswerable.

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