

# The Politics of Abortion: Medical Science Advances Threaten Roe v. Wade

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Global Research, January 06, 2022

Region: [USA](#)

Theme: [Law and Justice](#)

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*As Planned Parenthood gears up for the fight of its political life to save [Roe v. Wade](#) from a Supreme Court reversal, new medical concerns have emerged that were not part of the debate in 1973.*

At issue for today’s Court is the long-standing question of when personhood begins; that is when a fetus exhibits the first signs of life. While Roe gave women the ‘constitutional’ right to an abortion up to six months (27 weeks) of pregnancy, the Court amended Roe in 1992 when [Casey v. Planned Parenthood](#) entitled women to an abortion up to 24 weeks. However, two pending cases before the Court challenge the concept of abortion with evidence of life’s beginning. One recent subject of oral arguments was [Mississippi’s](#) Dobbs v. Jackson Women’s Health which bans an abortion after fifteen weeks while the Court allowed [Texas SB 8](#) which bans abortion when a fetal heartbeat is detected (six weeks), to continue without a ‘stay’.

Legal affirmation of the first signs of life may also dramatically affect PP’s sale of abortion-generated fetal parts and tissue to research labs. While the fetus grows to human shape by 12 weeks, PP’s abortions and fetal tissue recovery begin at 16 weeks (4 months pregnant) through 22/24 weeks (5 – 6 months pregnant) with an 18 week/second trimester fetus especially valuable. Obviously the longer the pregnancy, the more developed and valuable fetal parts and tissue are on the medical research market. The ideal for any research lab is a fully intact fetus whose organs are considerably developed and therefore most valuable, especially its brain and heart.

While the Court may be tempted to apply [stare decisis](#) (‘to stand by that which has already been decided’) which reaffirms earlier S.Court decisions as settled law; yet to allow Roe/Casey to remain would refute medical or science advances while affirming that Roe’s original legal underpinnings were as legally and morally valid today as in 1973.

## The Reality of Abortion Politics

While the medical and health issues of abortion may appear to take precedence, the political reality is that the national Democratic party has made a significant political investment over the years in preserving Roe as it cultivated PP's impressive membership just as PP benefitted from its association with the Democrats as its guardian on the battlefield of legislative conflict.

Both sides have been intent to convey the politically sensitive message that PP is an unapologetic ally of the Democrats and that it is the Dems who care about women's health. Today abortion can be counted as one of the Democratic party's most valuable historic successes that provided them with a massive politically active national constituency. That membership is now of paramount importance to the Democrat's 2022 re-election and its domestic agenda which has taken a hit since the 2020 election, having lost much of its blue collar support with Biden's questionable election.

As new science, medical, technology and cultural facts have come to light since 1973, there is no room for disenfranchisement or any possible dissension within the ranks. Dems cannot allow the Supreme Court to tarnish that political history, to besmirch an issue that once defined PP as a respected community minded, egalitarian association as an indispensable support network for American women. Instead of participating in an open dialogue about *'when does life begin'*, we can expect the usual Democratic spin of obfuscation and falsehoods, a reliance on their tried-and-true strategy in the face of the hard scientific evidence. The predicted political dispute is that neither PP nor the Dems will admit that abortion exhibits any profound flaws and offer no concession that the beginning of life is now decided science.

In other words, the stakes could not be higher for both PP and the Democrats as Roe must prevail at the Supreme Court or face the very real catastrophic disintegration of one of the party's most reliable bastions for electoral support.

### **Fetal Tissue Controversy**

In July, 2015, the [Center for Medical Progress](#) released a series of nineteen [undercover interview videos](#) with numerous PP executives especially focused on sale of its abortion-provided human fetal tissue. One video is more shocking than the next as PP staff discuss how to end a baby's life as casual and nonchalant as if discussing the family dog's visit to the vet. Appearing totally focused on the organization's bottom line, each reveal little emotion or compassion and a troublesome disconnect from any real awareness of the implications of their behavior. The interview videos reveal that the entire fetal tissue process is more of an organizational priority, more predominant and essential to PP as a business opportunity than otherwise expected.

There was discussion as to what type of abortion technique was better utilized for its lack of injury on a fetus: whether [digoxin](#) which induces an almost immediate 'demised' fetus before abortion or other 'dismemberment' techniques like suction or how to skirt the Congressional partial birth abortion ban.

In 2018, [a National Institute of Health](#) paper [entitled](#) *"The Use of Aborted Fetal Tissue in Vaccines and Medical Research Obscures the Value of all Human Life"* further stated that *'the commercialization of fetal tissue is not a new practice. The utilization of embryonic and fetal cells from elective abortions in the pharmaceutical industry and medical research is commonplace.'*

While the [National Institutes of Health Revitalization Act of 1993](#) allows a woman to ‘donate’ her fetal tissue after an abortion, fetal tissue is often passed to biological-research supply companies as intermediaries which then process the tissue before selling it to medical lab researchers.

One can only imagine how a woman who experienced an abortion now knows that her baby was destroyed with a functioning human heart and its parts sold to a commercial lab.

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