Dear Representatives of the Public Health and Human Services Committee:

Thank you so much for your generous service to our state and your willingness to engage in such important areas of public policy. I am asking for your opposition to HB 1194.

On the surface, this bill looks very attractive. Its intent is to reduce unintended pregnancies as well as abortion rates. These are outcomes that any physician would support. In asking you to oppose this bill, I ask you to consider two thoughts:

- 1. I do not prescribe contraceptives in part because of the concern over the abortifacient possibilities. There is significant debate over this. As you consider both arguments on this issue, consider that "pregnancy" is a definition applied to the mother. "Alive" is a definition applied to an embryo. Some will say that pregnancy begins at implantation and therefore long acting contraceptives cannot be called abortifacient. At the moment of fertilization, a new being comes into existence with active biological processes and with a unique set of chromosomes – distinct from either father or mother. At fertilization, this new life is a traveler - on a journey from the Fallopian Tube to the uterine wall where it will implant. If life begins at fertilization, then the loss of a fertilized egg is a loss of life. Although IUD's and Implants do not primarily work by an abortifacient mechanism, the loss of fertilized eggs can and does sometime occur. We know this because both methods have a stated failure rate - times where escape ovulation has occurred and pregnancy ensues. I personally have been involved in cases where a woman presents with an unintended pregnancy with an IUD in place. I do not prescribe contraception because I cannot in good conscience sign my name to something that can, in some cases, lead to the loss of a life. Can you as a legislator sign your name to a law that will fund such measures?
- 2. As a physician, I witness daily the pain caused by the eroding family in our society. Broken marriages and families have led to significant anguish and poverty. Much of this can be rooted in how sexuality has been re-defined the past two generations. The young people of our culture engage in sexual and emotional intimacy with multiple partners and then, when they meet the right person, try to relearn everything they have experienced and attempt to enter into a commitment for life. Policy that encourages and enables our young people to engage in sexual activity before they enter into a committed life long relationship, in the greater picture, sets them up for their own broken marriages and families in the future. I realize that recapturing the beauty of sexuality is well beyond your charge as legislators and must fall to others in our society. You, our leaders, are doing your best to make our society better and stronger. My concern is that well intentioned measures such as this and others will have longer lasting unintended harmful consequences.

Thank you again, for your thoughtful consideration.

John W. Volk, MD