

Yesterday, U.S. Representative Mike Quigley (IL-05) gave the following statement in the House Judiciary Committee, offering an amendment to the District of Columbia Pain-Capable Unborn Child Protection Act (H.R. 3803). The legislation would protect cancer patients from an effort which would otherwise ban all abortions in the District of Columbia (DC) after twenty weeks of pregnancy with extremely limited exceptions.

Mr. Chairman, I have an amendment at the desk.

H.R. 3803 aims to ban abortion after 20 weeks in the District of Colombia.

First of all, this bill is patently unconstitutional. The Supreme Court has made clear a woman has the right to choose up to the point of viability, and this bill is a clear attempt to implement an unconstitutional pre-viability ban.

But it doesn't stop there.

Not only does this bill attempt to overturn Roe v. Wade, it goes even further by not including a single exemption if a woman is raped, if a woman is the victim of incest, or if a woman's health is at risk.

The only exemption is if the life of the woman is in jeopardy. This completely ignores the unique and often heart-wrenching situations of individual women.

The fact is, not all pregnancies go according to plan, and each woman has to be able to make the decision she feels is best for her and her family.

A woman could have a completely desired pregnancy, and find out that she has anhydramnios. This is a disorder where membranes rupture prematurely, leaving the fetus

without sufficient amniotic fluid.

Without this vital fluid, the fetus will likely be born unable to move its limbs and unable to eat and breathe on its own.

Under H.R. 3803, a woman and her partner who know their fetus will not be able to survive on its own would be forced to carry the fetus to term only to watch it die.

This bill also ignores the situation of a woman who receives the horrible news that she has cancer while she is pregnant. This may sound rare, but sadly it's not. Approximately one in 3,000 pregnant women has breast cancer during her pregnancy.

The choice between receiving vital cancer treatment or continuing her pregnancy was not hypothetical for Jennifer Peterson. Jennifer was 35 and pregnant when she found a lump in her breast, and soon learned she had invasive breast cancer.

She then had to make the impossible decision of receiving care for her cancer, including chemotherapy, which would likely end the pregnancy, or carry the pregnancy to term and forego cancer treatment that could mean the difference between life and death.

My amendment would create an exemption for women, who like Jennifer are faced with the impossible decision of whether to receive cancer treatment or carry a pregnancy to term.

But the truth is, this is just one of a number of gut-wrenching situations a woman can face during her pregnancy.

Every pregnancy is different, and every woman has to be able to make the decision that is right for her and her family. Every instance of cancer is unique and no one can know with certainty if it is life threatening.

But this bill ignores the unique circumstances of each woman and supplants the judgment of a woman with the judgment of a politician.

We hear a lot in this committee about government over reach, and we hear a lot of arguments that the government does not always know best.

Yet when it comes to a woman's intimate, personal, and sometimes impossibly difficult decision of whether to protect her own health or carry a pregnancy to term, those same opponents of big government get quiet.

How can we, sitting in this sterile committee room, possibly think we should get to make that deeply personal and often heart-wrenching decision for a woman and her family?

The truth is: We can't.

I encourage my colleagues to support my amendment and oppose this unsympathetic bill.

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