

My name is Devon and I live in Limestone, Maine. I am writing this testimony in opposition to LD 1007, for the public hearing occurring on 3/28/25. I found out I was pregnant in June of 2024. Our baby, Dorothy, was celebrated from the moment we knew about her. We announced our pregnancy the day before our wedding. Daniel (my husband), our family, and I were over the moon with excitement. My pregnancy did not go without complications, however. I was seen and monitored routinely as recommended. All imaging and tests appeared normal until our anatomy scan. At 20 weeks my liver and kidney function labs began to decrease. I started to have blurry vision and was seen by ophthalmology for papilledema (both issues resolved after the delivery of Dorothy). This was discussed with a provider in Portland maternal-fetal medicine, as signs of possible mirror syndrome, a potentially deadly condition if left untreated.

We had our anatomy scan in Bangor, ME, due to my pregnancy being high-risk. Multiple fetal abnormalities were noted. We were told Dorothy would not make it to the third trimester, let alone to full term. We were also prepared for eminent spontaneous abortion. We live on the Canadian Border, in an area without immediate access to medical care. As a nurse working at the local hospital, I have seen first-hand how minor medical procedures or needs can turn life-threatening due to weather or lack of access to specialized care in this area. My due date was March 5th, 2025. February and March are some of the most difficult weather conditions historically in Northern Maine. Often, Life Flight or other transport services cannot operate due to weather conditions. These services are vital for transport to specialty care. When doctors told us we were at high risk for miscarriage, I was immediately concerned for my health and well-being.

We had 2 ultrasounds done a few days apart for a second opinion and were advised for an amniocentesis to confirm a genetic reason for abnormalities. We went down to Maine Medical Center and were advised that an amniocentesis would not change the outcome of our child's inviable diagnosis.

Termination was the safest option for me, the mother, in this case. This occurred at 21 weeks of gestation. This was advised by multiple doctors. Termination also ended the unknown suffering my child was likely going through with the fluid accumulating in her lungs and vital organs. We chose labor and delivery, I was induced and could hold and bond with my child after she was born.

To summarize, my life was endangered due to early signs of mirror syndrome, geographic location/ lack of specialty care, and childbirth in itself. Altering laws to make abortion less accessible would have resulted in profound negative physical and emotional impairment in my case. After reading this testimony, one might believe these laws would not change my outcome due to my life being in danger. You would be wrong. I am currently fighting a denied claim for this care with Blue Cross Blue Shield on the basis it was not medically necessary even after multiple medical professionals said it was the best option for me. This is the future if we allow non-medical professionals to decide what is or is not necessary for women medically.

