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I am an emergency medicine physician in rural Northern Maine. This is a part of the country where it is extremently difficulty to recruit and retain physicians given how remote it is here. Thus, it is basically a health care desert. I, myself, have just been plugged into a primary care doctor's clinic after being on a waitlist for nine months.

If you take measures to make abortion illegal or criminalize abortion or place limits on medical abortions, I will not be staying in Maine. You will lose many doctors like me, not only in the OB/gyn field but other fields such as family medicine, internal medicine, emergency medicine, etc. who do not want to practice in an environment where we cannot care for a woman who may need a medical abortion due to pregnancy complications or because of an unwanted pregnancy. One only has to look at the awful effects of laws like this in places like Texas, where just last year, a young 18 year old woman went to multiple emergency rooms sick with sepsis related to her pregnancy where the treatment would have been a medical abortion, and she died because clinicians couldn't intervene to offer her the procedure she needed to treat her, due to fears of going to jail had they offered this young woman the medical abortion she needed to treat the source of her sepsis.

I firmly believe it is a woman's right to choose what happens with and to her body, and it should be made with the support of clinicians who have the medical training to understand the risks and benefits of medical abortions in each special circumstance. The government should play no role in violating or impinging on this right. This law will provide no benefit to anyone, and will only endanger the lives of young women who need an abortion, oftentimes for medical reasons such as immensely heavy bleeding from an otherwise non-viable pregnancy. These general acts governments try to pass don't take into account these special cases since legislators, not trained in the medical field, do not understand the nuances of when a pregnancy is nonviable, when it is life-threatening for the mother, etc. Leave this judgment at the hands of women and their clinicians who are trained to make the best choice for their patients. Passing these acts/laws will only serve to create an environment of fear in clinicians while endangering the lives of your daughters, sisters, and other loved ones.

Furthermore, by losing us as physicians, you will create more barriers to health care access in rural Maine. It is not only women of reproductive age who will suffer, but all patients who already have limited access due to lack of providers in this area. If rural Maine loses even a few emergency medicine and family medicine providers, it will have devastating effects on this community where access to primary care is already stretched impossibly thin. Thus, I urge you to not pass laws that place restrictions on abortions.