

When Lilacs Bloomed

ARE THERE

SOME

SITUATIONS IN

WHICH

ABORTION IS

JUSTIFIED? A

NURSE TELLS

HER SIDE.

The early morning sun was already warming the earth on that lovely spring day in 1973. The city of Rochester, N.Y., was preparing for its annual Lilac Festival, and the scent of hundreds of fragrant bushes filled the air. Birds chorused as background to my own humming as I walked across the park to the hospital.

I bubbled with anticipation of the day: I was scheduled to observe a Cesarean birth, and I smiled at the thought. A junior-year nursing student, I was spending my first week on a hospital maternity floor. Although I had already witnessed several births that week, the privilege of being present as a newborn drew its first breath left me amazed and hungry for more.

Leaving the beauty of nature, I pushed open the door to the hospital lobby. Here the sights, sounds and smells were different. The strong odor of antiseptic cleansers stung my nostrils.

Highly waxed floor tiles beamed brightly. A voice blared from a loudspeaker, paging a doctor.

I was reminded that I was entering a battlefield, a place where a fierce fight against death and disease was waged daily. Nowhere else, it seemed to me, was the essence of life such a sacred trust. I felt proud to be a part of such a noble undertaking.

In the elevator, I stared down at my newly polished white nursing shoes and took deep, slow breaths to calm my fluttery stomach. When the doors finally slid open, I quickly checked in with my instructor, then headed for the dressing area; I didn't want to miss

one moment of this exciting experience.

In the dressing room I stuffed my uniform into a locker and threw on a green cotton scrub dress. Drawing another deep breath, I hurried to the scrub room. There I awkwardly tucked my hair into a paper cap and



JULIE MAMMANO

BY
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thoroughly washed my hands. Just as I was reaching for a sterile gown to cover my scrub dress, the head nurse entered the room and explained that there'd been a change: The Cesarean delivery had been canceled. I tried hard not to let her see my disappointment, but my shoulders sagged slightly.

"I'm sure you're disappointed," she observed, and then, brightening, added, "but there's an abortion that's just beginning. You could watch that."

Abortion? Somehow I had never considered the possibility of viewing an abortion! Since childhood I had attended church, and at an early age I committed myself to living by the principles God had set for me. I thought of myself as morally opposed to abortion in principle, but still something made it impossible for me to regard abortion as wrong in every instance.

Surely, I reasoned, there must be isolated instances where abortion is the best option. Simple curiosity, as well as my desire to be considered "open-minded," overcame any doubts I had, and I hastily agreed to observe the procedure.

I paused briefly before the operating room door and squeezed my eyes shut. Then, composing myself, I slipped inside, where everything was in place and the procedure was about to begin.

The lights, the smells, the neat rows of instruments—it was all familiar. I reminded myself that this was a hospital operating room, not some back-alley 'clinic,' and that there was

nothing sinister about it. This was possibly the very same operating room where I would have stood to watch the Cesarean birth.

From the foot of the operating table, I could see that the mother was already under the influence of the general anesthetic. She was about my age, and I began to fantasize about why she had decided on this abortion. Perhaps she'd been pressured by the father of the baby or by her parents. Maybe she was financially unable to care for a child, or perhaps it was just an inconvenient time for a pregnancy.

The low murmuring of the anesthesiologist, the O.R. nurse, and the physician interrupted my thoughts. I then focused on the procedure itself. Dilators of increasing diameter were gradually inserted into the cervix,

or neck, of the uterus until it was stretched enough to insert the suction tube.

I watched with interest—it was all so clinical, so normal, so much like other surgeries I'd previously observed. The medical personnel talked casually as they would during any procedure. My clenched fingers uncurled, and my rigid back muscles softened. I slowly relaxed and grew more comfortable.

The suction tube was connected to a bottle; inside the bottle a gauze bag dangled, waiting to catch the portions of tissue, which would be sent to the lab for routine examination after the procedure was completed.

When the suction machine was flipped on, its smooth whirring

brought a flow of blood down the tube. Then I heard a soft "plop," and the physician muttered an obscenity as she realized that the gauze bag containing the tissue had somehow fallen into the blood at the bottom of the suction bottle.

In what seemed to be only minutes, the procedure was completed, the suction tube was removed and the patient was ready to be wheeled to the recovery room.

One final task remained—the physician had to retrieve the bag of tissue from the suction bottle and have it sent to the pathology department. To ease the task, the physician and the O.R. nurse decided to dump the contents of the bottle onto an instrument tray.

As the physician's gloved fingers poked through the blood, I looked again at the young, unconscious woman and wondered how she'd feel when she awoke. Relieved? Ashamed? Frightened?

My thoughts were interrupted by the physician. "Oooh, look," she whispered, "I've never seen one come out like this before. Here, take a look!"

I stepped closer, and she extended her bloody, gloved hand. Then I froze in horror as I saw what was cradled in her palm: a tiny body. This was not the "blob of tissue" that I expected to see after such an efficient, clinical procedure.

This was a fully formed, 12-week-old, *decapitated* fetus. Two tiny arms with the smallest fingers imaginable hung from thin shoulders. Two fragile legs dangled from the delicate torso. About 2 1/2 to 3 inches in length, this was a perfect miniature human body.

"I'm sure the head is here, too," the O.R. nurse spoke in animated tones, still examining the tangled contents of the gauze snare.

Sick waves of revulsion churned in my stomach, and I backed toward the operating room door. I knew, beyond any doubt, that what I'd witnessed had been the taking of a human life and that there could be no possible justification for it.

When I reached the safety of the



ABORTION: PRO-LIFE VS. PRO-CHOICE

Do you feel like David standing up to Goliath when defending your pro-life beliefs on abortion? The following statements are what pro-choice advocates use most often when arguing for abortion. How can *you* respond?

Put *these* answers in your slingshot when confronted with pro-choice ideas:

◆ *The fetus is just a part of the pregnant woman's body, like her tonsils or appendix.*
A fetus is *NOT* just another part of a woman's body. A body part is defined by the common genetic code it shares with the rest of its body. The unborn's genetic code differs from its mother's. Some of them are even male, while their moms are obviously female.

◆ *The unborn is a simple blob of tissue. So abortion is terminating a pregnancy, not killing a baby.*

An unborn human is *NOT* just a blob of tissue. From the moment of conception the unborn *is* what it is . . . a separate, **LIVING** human being.

◆ *The fetus is a potential human being, not an actual one; it's like a blueprint, not a house.*

A fetus is *NOT* just a blueprint or a "potential human." A fetus is a person at a particular state of development—much like a toddler or adolescent. The fact is, something non-human does not become human by getting older and bigger.

◆ *Life begins at birth. That's why we celebrate birthdays, not conception days.*

Life does *NOT* begin at birth. Science has shown us that human life begins at conception. All genetic characteristics of a distinct individual are present from the moment of conception. Our recognition of birthdays is cultural, not scientific.

◆ *Reproductive freedom is a basic right. Therefore, every woman should have control over her own body, and have the right to choose.*

Restricting abortion does *NOT* step all over a woman's "rights and freedoms." If anything, it ensures the rights and freedoms of the unborn. The one-time choice of abortion robs someone else of a lifetime of choices. Furthermore, responsible societies *must* restrict choices that would harm others.

◆ *If abortion is made illegal, thousands of women will lose their lives to "rusty clothes hangers" in back alleys.*

Not true. Prior to its legalization, 90 percent of abortions were done by physicians in their offices, not in back alleys. In fact, women in America still die from *legal* abortions.

◆ *The unborn isn't a person with meaningful life. It can't even think and is less advanced than an animal.*

The early stages of human life *are* as meaningful as any other stage. But if we listened to pro-abortionists who based human value on size and intelligence, then we'd also have to dehumanize other members of society: midgets, basketball centers, the obese, the mentally handicapped, etc.

◆ *It's unfair to bring an unwanted child into this world. It'll probably end up abused.*

A pregnancy may be "unwanted," but there is no such thing as an unwanted child. The list of couples wanting to adopt runs into the millions. And if we exclude all human beings whom we believe are "unwanted," then *any* segment of society is at risk: AIDS victims, the elderly, the derelicts, etc.

These statements were adapted from Pro-Life Answers to Pro-Choice Arguments by Randy C. Alcorn (copyright (c) 1992, Multnomah Press).

dressing room, I stepped clumsily out of the scrub dress and fumbled with the buttons on my uniform. I felt numb. Dry-eyed, I sat down on the wooden bench and absently scuffed my feet together, noticing with interest that black lines now marred the shine on my white shoes. I'm not sure how many minutes passed before I mustered the strength to get up and walk to the maternity floor. The cries of newborn babies assaulted my ears, shrill and distorted. I stopped in front of the glass windows of the Special Care Nursery and gazed at the incredibly tiny infants, several of them barely four months older than the infant I'd just seen cradled in a bloody hand. Thousands of dollars were being spent to sustain their lives—why wasn't the life of that other infant just as important?

Eighteen years have passed since that spring day in Rochester, and I still like to think of myself as an "open-minded" person. But I'm absolutely certain of *this*—abortion involves the taking of human life. That small lifeless baby I gazed at, horrified, will never celebrate a birthday, walk in the park, smell the flowers or hear the birds. I've buried its memory for too long, and now I'm haunted by the thought of millions of tiny bodies being placed in specimen bottles and sent to pathology labs.

I've asked God to forgive me for remaining silent and to give me the courage to speak. He has, and in speaking I find a measure of peace. Now, at last, my tears flow freely, as I remember that day long ago when life was young and lilacs bloomed. ★



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(If you're interested in how *you* can take a stand against abortion, contact *National Teens for Life*, 419 7th St. N.W., Wash. D.C.)