

Health Insurance Amendment (Medicare Funding for Certain Types of Abortion) Bill 2013

Dear Sir/Madam,

In relation to this Bill I wish to make the following points.

- Gender selection abortion is opposed by the vast majority of Australians, according to a recent survey of 2500 people (Kippen, 2010; <http://newsroom.melbourne.edu/news/n-436>)
- Every Australian state bans the use of reproductive technology (eg. IVF) for the purpose of sex selection, in line with NHMRC guidelines which in turn reflect community attitudes and near-universally accepted ethical norms.
- Sex selection (including via abortion) is an endemic practice among certain South and East Asian ethnic groups, which are well represented in Australia. The practice is documented as widespread in the United Kingdom (eg. <http://www.telegraph.co.uk/health/healthnews/9104994/Sex-selection-abortions-are-widespread.html>), demonstrating that immigration to a liberal western country does not abolish this cultural tradition.
- Apart from a preference for boys in some cultures, it is also well documented that sex selection occurs for "family balancing" reasons. (See <http://www.who.int/genomics/gender/en/index4.html>). One specific example from Australia was widely publicised a few years ago, where healthy twin boys were aborted by their parents who wanted a girl.
- In the State of Victoria it is legal to abort a baby for *any* reason up to 24 weeks of gestation. Ultrasound reveals the sex of a baby as early as the late first trimester, as do genetic tests which are becoming widely available. (See <http://healthland.time.com/2011/08/10/controversial-blood-test-can-determine-babys-sex-earlier-than-ever-but-at-what-cost/>). A blood test now available via Australia's three largest pathology providers (Sonic, Primary and Healthscope) "can also reveal the gender of the fetus" (see attached article from Australian Doctor) from 12 weeks of pregnancy. It is therefore legal and entirely feasible to obtain sex selection abortion at least in Victoria.

In summary, (1) *motives* for sex selection abortion certainly exist in Australian society; (2) sex selection abortion is *legal* at least in one State (and travel between States presents a very minimal challenge where there is sufficient motive); (3) early determination of foetal sex is easily available, making sex-selection abortion very much *feasible* in Australia; (4) there is established evidence that sex-selection abortion does actually happen.

Sex-selection abortion should be criminalised; at the very least, it should not be supported by the Commonwealth via Medicare. The Australian Parliament should take appropriate action.

Regards,
Dr. Jereth Kok
MBBS, FRACGP

Down's blood tests now widely available

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A new era of Down syndrome testing has begun, with diagnostic maternal blood tests being offered for the first time by Australia's three largest pathology providers.

The high-tech, high-cost tests, which promise accuracy of 99% and above, have been billed as breakthroughs that could avert thousands of unnecessary invasive diagnostic procedures each year.

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However, there is already concern about the speed of the rollout of such complex, high-stakes new technology in the face of huge anticipated demand.

Sonic, Primary and Healthscope are each offering a different non-invasive prenatal test, through separate tie-ups with overseas diagnostics companies.

Costing \$1250 and up, the tests are performed from 10-12 weeks' gestation to analyse fragments of fetal DNA circulating in the maternal blood.

They are being offered principally to screen for trisomies 21, 18 and 13, only in women deemed by obstetric specialists to have a high chance of fetal chromosomal aneuploidy.

A negative result effectively rules out Down syndrome, but positive results will still require confirmation by amniocentesis.

The tests can also reveal the gender of the fetus, although this will not be routinely disclosed.

Dr Greg Kesby, a Sydney maternal-fetal medicine specialist who began ordering the tests seven weeks ago, said the lack of onshore laboratories with the technical wherewithal had bred fierce competition between foreign companies "jockeying for market share" in Australia.

"It's a very complicated area. I've just done four tests today ... the demand is huge," said Dr Kesby.

He warned that the indications for prenatal blood tests could creep up if not tightly controlled, stressing they should be an adjunct to ultrasound, not a replacement.

"We worry that people are going to start thinking, 'Oh, I've had the Down syndrome test' and forget about nuchal translucency screening, which gives you a lot more information in terms of fetal abnormality and wellbeing."

Primary Health Care [announced last week](#) that it would roll out the iGeneScreen test nationally by March. They will cost \$1400, and be offered from 12 weeks' gestation. Results will be processed by INEX in Singapore and returned within 2-3 weeks.

Sonic Healthcare, meanwhile, [is offering the Verifi prenatal test](#) costing \$1250 from 10 weeks' gestation, through Verinata in the US.

Healthscope Pathology [has been offering the MaterniT21 test](#) since January, via US-based Sequenom, at \$1450 from 10 weeks' gestation.

All companies stressed the tests had been extensively validated in their target populations, and would be provided in conjunction with appropriate counselling.

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists said non-invasive prenatal testing had "the potential to be fantastic but needs to be treated with caution".

"The tests are being introduced very rapidly. It's a difficult area and there's a lot of potential for harm if things are gotten wrong," said college vice-president Dr Stephen Robson.

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