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## Texas: the Wild West

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EDITORIAL

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**The abortion restrictions in the United States are having an adverse effect on women's health and healthcare personnel.**



Photo: Einar Nilsen

Yeniifer Alvarez, known as Yeni, was 27 years old and 31 weeks pregnant when she died of pulmonary oedema in July 2022. The fetus could not be saved either [\(1\)](#). According to her patient history, as reported in *The New Yorker*, Yeni had severe obesity, hypertension, diabetes and a history of pulmonary oedema [\(1\)](#). Her death could likely have been prevented (if she had sacrificed the fetus) had she agreed to a therapeutic abortion. But according to the article, she was never given the option. The doctors perhaps did not dare to ask [\(1\)](#).

There is no federal abortion law in the United States. Access to abortion has been protected at federal level through the Supreme Court decision in the *Roe vs. Wade* case of 1973 [\(2\)](#). However, in September 2021, Texas introduced a law in which providers who perform or assist in an abortion after cardiac activity can be detected in the fetus (usually around week six) can be sued in the civil courts and face hefty fines or imprisonment [\(3\)](#). Abortions are only permitted in Texas in medical emergencies. Since the 1973 ruling was overturned in 2022, a total of 14 states have so far introduced laws that are tantamount to an abortion ban [\(4\)](#).

*«The doctors told of women who had to wait until their condition became life-threatening before an abortion could be performed – by which time it may well be too late»*

This has happened despite the red flags from Texas: in 2022, Texan doctors were already reporting cases of fetal diagnoses, such as anencephaly and bilateral renal agenesis, where the women had to carry their pregnancies to term despite the short neonatal survival times [\(4\)](#). The doctors also told of women, like Yeni, who had to wait until their condition became life-threatening before an abortion could be performed [\(4\)](#) – by which time it may well be too late. Many of the states with abortion bans have exceptions for rape-related pregnancies. However, estimates suggest that very few of the women in such cases actually have an abortion [\(5\)](#). One reason may be the requirement to report the rape [\(5\)](#), which many of them are obviously reluctant to do.

The ban not only affects patients; doctors in Texas are struggling to interpret the law [\(4\)](#). Some think that freedom of speech gives them the right to inform the patient of their abortion options (e.g. out-of-state abortions), or even to contact colleagues who work under less stringent conditions [\(4\)](#). Others have been advised that this would be illegal as it is considered 'aiding and abetting' abortion [\(4\)](#). Many doctors are turning away from the field, leading to poorer health care for women who have to carry their pregnancies to term and give birth under the abortion restrictions [\(1, 6\)](#). Learning how to perform an abortion is part of the training in obstetrics and gynaecology. Texas is therefore seeing a sharp decline in the number of applicants wishing to specialise in this field [\(7\)](#), meaning that access to specialists is likely to decline even further.

The lack of opportunities to provide necessary health care also affects the mental health of doctors, and according to the American College of Obstetricians and Gynecologists, it also impacts the doctor-patient relationship more broadly [\(8\)](#).

In the background is Trump with his threats – and he could be re-elected as President of the United States this autumn. One of the Democrats' two health priority focus areas is women's health, including abortion, while the Republicans believe that states should decide their own abortion policy (9). Trump is unlikely to be able to introduce a federal abortion ban (10), but he may find undemocratic backdoor routes to appease his most conservative voters, such as resurrecting old legal justifications. A lawsuit against the US Food and Drug Administration's (FDA) approval of mifepristone for use in the medical termination of pregnancy will be ruled on this summer. If the FDA loses, abortion options will be severely restricted.

If all else fails for the anti-abortionists, a statute from 1873 that prohibits receiving or posting any 'obscene, lewd, lascivious, indecent, filthy or vile article' could be invoked (10). They argue that this law could make it illegal to distribute mifepristone (10) and that it essentially opens the door to suing senders of any item 'designed, adapted or intended for producing abortion' – including gloves (10). The Wild West indeed.

In Norway, the abortion law is set to be revised following a recommendation by a government-appointed committee in December (11). A total of 366 consultative bodies were involved in the process (11). It is therefore highly likely that a law will be democratically enacted and will safeguard the opportunity to provide and receive safe and necessary health care. Something to be grateful for.

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## REFERENCES

1. Taladrid S. Did an abortion ban cost a young Texas woman her life? The New Yorker 8.1.2024.  
<https://www.newyorker.com/magazine/2024/01/15/abortion-high-risk-pregnancy-yeni-glick> Accessed 10.2.2024.
2. Faktisk. Hva er Roe vs. Wade? <https://www.faktisk.no/artikler/zkx87/hva-er-roe-vs-wade> Lest 10.2.2024.
3. The New York Times. Tracking Abortion Bans Across the Country.  
<https://www.nytimes.com/interactive/2022/us/abortion-laws-roe-v-wade.html> Accessed 10.2.2024.
4. Arey W, Lerma K, Beasley A et al. A Preview of the Dangerous Future of Abortion Bans - Texas Senate Bill 8. N Engl J Med 2022; 387: 388–90. [PubMed][CrossRef]
5. Dickman SL, White K, Himmelstein DU et al. Rape-Related Pregnancies in the 14 US States With Total Abortion Bans. JAMA Intern Med 2024; 0. doi: 10.1001/jamainternmed.2024.0014. [PubMed][CrossRef]
6. Bell SO, Stuart EA, Gemmill A. Texas' 2021 Ban on Abortion in Early Pregnancy and Changes in Live Births. JAMA 2023; 330: 281–2. [PubMed][CrossRef]

7. Sevchenko M. We weren't meant to be criminals': the gynecologists training out of state post-Roe. *The Guardian* 18.6.2023.  
<https://www.theguardian.com/us-news/2023/jun/18/obgyn-doctor-abortion-law-ban> Accessed 14.2.2024.
8. Abortion Policy. The American College of Obstetricians and Gynecologists. Abortion Policy. <https://www.acog.org/en/clinical-information/policy-and-position-statements/statements-of-policy/2022/abortion-policy> Accessed 10.2.2024.
9. Parekh A. Four Defining Health Issues of the 2024 Presidential Election. *JAMA* 2024; 0: 561. [PubMed][CrossRef]
10. Ziegler M. How Trump Could Institute a Backdoor Federal Abortion Ban. *New York Times* 29.1.2024.  
<https://www.nytimes.com/2024/01/29/opinion/biden-trump-abortion-election.html> Accessed 10.2.2024.
11. Helse- og omsorgsdepartementet. Abort i Norge — Ny lov og bedre tjenester. <https://www.regjeringen.no/no/dokumenter/nou-2023-29/id3018279/> Accessed 10.2.2024.

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