House Human Services Committee HB 1478 Wednesday January 29, 2025

Chair Ruby and Committee Members, I am Dr Collette Lessard, a board-certified physician in Obstetrics and Gynecology. I have been practicing for nearly 12 years and have spent my entire career in Grand Forks, North Dakota at Altru Health System. I am also writing as the Legislative Chair for the North Dakota section of the American College of Obstetricians and Gynecologists (ACOG).

I am writing in support of HB 1478. Contraception is an important part of my practice as an OBGYN physician. While contraception is often thought of as a medication or device used to prevent pregnancy, many contraceptives are also used to treat gynecologic problems that women face throughout their reproductive years. A women's reproductive years can span 40 years or more, starting from the very first menstrual period until the final one (usually early to mid 50s). Contraceptives have a large amount of scientific research supporting their safety and their effectiveness when used for either preventing pregnancy or treating a gynecologic health problem. The decision to use contraception is individualized, as physicians and other health care providers consider each patient's health, medical and gynecologic problems. We also discuss a patient's goals and discuss risks and benefits of available options. Women need to be able to access any and all contraceptives.

Utilizing contraception to prevent an unplanned pregnancy is a choice made by many women. This allows them to complete their education and have the financial means to start their family. It also allows women to prevent pregnancy all together if they do not want to be pregnant. Contraception allows women to prevent an unplanned pregnancy while they optimize their health. For example, I have seen women focusing on weight loss or hypertension management before conceiving a pregnancy. This helps to improve their pregnancy outcomes and lower their risk of pregnancy complications in the future. Being able to access full scope contraception allows them to plan their family when they are ready.

Nearly half of pregnancies in this country are unplanned. Contraception and preventing unplanned pregnancies have been shown in research to reduce abortion rates. The North Dakota legislature has seen multiple attempts focused at reducing or eliminating abortions in our state. Ensuring women in our state always have access to full scope contraception will help reduce unplanned pregnancies and abortions in our state now and in the future. There are no contraceptive options that cause abortion. Contraception, including emergency contraception and IUDS, prevent pregnancy from occurring at all.

There are dozens of gynecologic problems that hormonal contraception is used to treat. Some of these are listed as examples in HB 1478. Two of the most common examples are

for the treatment of heavy and/or painful menstrual periods. A woman who has severe pain before and during menstruation (a menstrual period) due to endometriosis, for example, may miss work and school every month due to these symptoms. Use of many hormonal contraceptives can significantly minimize or eliminate some of these symptoms, allowing that woman to function and go to work/school and take care of her family without such debilitating symptoms from menstruation. These medications can also decrease the blood loss from menstruation significantly. Without them, some women suffer from anemia (low hemoglobin) and even need iron or blood transfusions from how much bleeding occurs.

Contraception is not needed by every woman, but every woman deserves access to these options if they want or need. These are all personal and individual decisions. I had the privilege of being able to give expert medical guidance when this bill was drafted and I understand the need for this legislation. I have heard from dozens of patients about their concerns of losing access to basic reproductive healthcare, such as contraception. I urge you to give a "do pass" and support HB 1478 so that every woman has continued access to contraception in North Dakota.

Respectfully,

Collette Lessard, MD, FACOG