

From: Alberta Health - Public Health Division <ah.publichealth@gov.ab.ca>
Date: Thu, Oct 23, 2025, 4:12 p.m.
Subject: Abortion Services
To: [REDACTED]

Dear [REDACTED]

Thank you for your thoughtful and heartfelt response to Honourable Adriana LaGrange, Minister of Primary and Preventive Health Services. She has forwarded your letter to our team and requested that we respond with additional information. We appreciate your engagement on this deeply sensitive and complex issue, and we want to acknowledge the sincerity and compassion behind your concerns.

You are correct that the Canadian Institute for Health Information (CIHI) is an independent national agency that compiles hospital discharge data, including cases coded under P96.4 – "Termination of pregnancy, affecting fetus and newborn." This code can include instances where a fetus shows signs of life following a termination, particularly in later gestational ages (≥20 weeks). In Alberta, CIHI data for 2023–24 does indicate that 28 live births occurred following termination of pregnancy in acute care settings.

However, it's important to clarify what this data does and does not represent:

- CIHI's data does not provide clinical detail about the circumstances of each case, including whether resuscitation was attempted, the gestational age, or the medical reasons for termination.
- A live birth, as defined by CIHI, refers to any fetus that shows signs of life after delivery, regardless of viability or prognosis.
 - This includes any detectable sign of life, even if brief or transient such as a single breath, a heartbeat that lasts seconds or minutes after delivery or a brief movement or umbilical cord pulsation.
 - These signs do not indicate viability or the potential for survival, but they are used for statistical and clinical classification purposes.
- CIHI does not assess parental intent, nor does it evaluate the appropriateness or ethics of care provided.

As noted in the letter from Minister LaGrange, in Alberta, clinical decisions regarding infants born at the threshold of viability are guided by national practice standards, medical evidence, and ethical frameworks. These standards apply regardless of the circumstances of birth, whether spontaneous or following a medically indicated termination. Acute Care Alberta has confirmed that should a fetus show signs of life following a pregnancy loss or termination, clinical teams assess the situation with sensitivity and in close collaboration with the family. Clinical teams ensure that care is appropriate to the clinical circumstances and consistent with ethical standards and professional guidelines. This includes access to palliative care, counselling and bereavement support. Decisions are made in consultation with families, medical specialists, and ethics teams. The goal is always to provide compassionate, respectful, and evidence-informed care.

Regarding Policy PS-92, it is true that feticide may be recommended in certain cases to prevent distressing outcomes, such as a live birth in the context of a termination for severe fetal anomalies. However, this is not mandated, and some families choose to proceed without feticide so they can hold and meet their baby, even briefly. These decisions are deeply personal and supported by care teams through comprehensive counselling and palliative pathways.

We also want to acknowledge your broader point about the value of every child. Advances in neonatal care have indeed shifted viability thresholds over time, and Alberta's policies are regularly reviewed to reflect these changes. However, care decisions will always consider gestational age, medical prognosis, and the wishes of the family, especially in cases involving fatal anomalies or maternal health risks. We remain committed to ensuring that Alberta's policies reflect both clinical integrity and compassionate care for all families navigating these profoundly difficult circumstances.

If you would like to explore clinical practices in more detail, we recommend contacting the Alberta Medical Association's Section of Obstetrics and Gynecology. This professional body represents obstetricians and gynecologists across Alberta and is well-positioned to speak to evolving standards of care, ethical considerations, and clinical decision-making in complex perinatal situations. You can learn more at www.albertadoctors.org.

Thank you again for writing.

Sincerely,

The Health Protection Branch

The logo for the Government of Alberta, featuring the word "Alberta" in a stylized script font with a small red and blue emblem to the right.

Classification: Protected A