



Fabella Memorial Hospital
Manila City, Philippines

MYLENE'S STORY

Mylene, a twenty-six year old doctor, became pregnant after being raped by the politician who sponsored her medical school scholarship. She died as a result of a severe infection after attempting to self-induce an abortion.

Facing an unplanned, unwanted pregnancy, **Mylene** confided in almost no one and went only to seek medical services at the public hospital where her friend and classmate, **Dr. Sam**, was a resident physician. When she first approached Dr. Sam, Mylene requested a prenatal exam. Her results seemed entirely ordinary to Dr. Sam. However, when she returned a week later for a follow-up, Dr. Sam noticed a bruise on her abdomen and cotton fibers in her vagina. Dr. Sam asked Mylene, “What are you doing to yourself?” but Mylene did not say anything. She confided later, however, that she had been **raped** by her benefactor, a politician who paid for her education.

A couple of weeks later, Mylene returned to the hospital complaining of abdominal pain and was admitted by another physician. After examining her, the physician performed a **dilation and curettage (D&C)** on Mylene. Dr. Sam stated that her colleague did not observe anything unusual and did not prescribe an antibiotic. She was “due for release.” Dr. Sam learned of Mylene’s admission to the hospital shortly after her D&C and visited with her.

The next morning Mylene awoke with severe abdominal pain, and her physicians put her under observation for 24 hours. The physicians diagnosed her with hyperacidity and gave her several medications. The following day Mylene’s symptoms worsened dramatically, and she began experiencing even more severe pain. Dr. Sam recalls, “I would touch her and she would feel so cold.” It was only when the doctors put in a urinary catheter and no urine was released that they realized Mylene was experiencing renal failure from sepsis.

Suspecting that there might have been a perforation of the uterus during the D&C, Mylene was taken into surgery. Rather than a perforation, her doctors found a severe infection that had spread to her entire pelvic cavity, which was covered in pus. **Mylene died on the operating table.**

Despite her training as a physician, Mylene was unable to seek safe abortion services or post-abortion care due to the illegality of the procedure. As a doctor, Mylene knew the risk of infection and had been self-medicating with antibiotics until she was admitted to the hospital; these had suppressed her fever and masked any signs of infection. In a climate of stigma surrounding both sexual violence and abortion, Mylene was scared to talk about the pregnancy and her abortion, leading to delays and ambiguities that compromised her care. Even after she passed away, only a few close friends and her family knew the true cause of her death. Her family requested that her death certificate not reveal that she had died of abortion-related complications.