

The Murder of George Tiller—Where Is Family Medicine’s Response?

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On Sunday, May 31, 2009, George Tiller, MD, was murdered. He was shot in the head while serving as an usher in his church in Wichita, Kansas. Dr Tiller was a family physician who had practiced in that community for nearly 40 years. He was 67 years old and left behind his wife of 45 years, four children (two of them physicians), and 10 grandchildren.

We know why Dr Tiller was murdered. He was an abortion provider, one of the most well-known and most reviled by abortion opponents. He was also one of the few in the country who performed late-term abortions for women whose pregnancies, most initially wanted, had gone horribly wrong. These were women with wanted pregnancies in whom amniocentesis or ultrasound had demonstrated anencephaly and other fetal abnormalities incompatible with life, women who had been diagnosed with cancer and needed treatment that would harm the fetus, or women who had other diseases for which pregnancy threatened their lives. Others who came to him very late included girls, such as an 11 year old from far away who had been raped by her father. Dr Tiller’s caring and compassion for all his patients, and the counseling he and those working with him did, made him the referral of choice for many doctors seeing such cases.

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For those opposed to abortion, the fact that he performed them so late in pregnancy was particularly evil; for those women whom he helped, he was their only hope.

Dr Tiller’s father, Jack Tiller, MD, was also a family doctor. He was the director of the 2-year General Practice Residency at Wesley Hospital in Wichita. When that program became one of the first 3-year family medicine residencies in the country in 1968, he turned the directorship over to G. Gayle Stephens, MD, one of the founders of our discipline. On completing his internship, George Tiller planned a career in dermatology, but in 1970 a small plane piloted by his father crashed, killing both his parents, his sister, and his brother-in-law. George adopted his 1-year-old nephew and took over his father’s practice with the intention of closing it. But sometimes things don’t work the way one intends, and he continued the practice, doing general family medicine, including lots of deliveries. The story is that when he took over his father’s practice, one of his new patients asked George if he would provide abortions “like your father did.” It was the first George knew that his father did abortions; he later discovered that his father started after a woman he had refused had an illegal abortion and died. Abortion was legal in Kansas several years before *Roe v. Wade*, and George decided that he would perform this service for his patients. His own words describing this decision are at www.prch.org/george-r-tiller-md.

For many years he continued an active family practice, until the demand of abortion care, as others exited the field, became his entire practice. During his career, his clinic was bombed, he was shot in both arms, and he wore a bullet-proof vest. He was the subject of picketing, attacks, vitriol, and an ongoing legal assault by a former Kansas attorney general, whose charges, when it finally came to trial, were dismissed by a jury within minutes.

There are many, many comments in his online condolence book¹ attesting to his caring, his humanity, and his deep religious conviction. One of his eulogists noted that Dr Tiller saw his work in reproductive health care as his ministry. His clinic contained a chapel, which helped his patients to make a decision and was an important consideration in many of the referrals made to him from far away. A letter to the *Wichita Eagle* (which has provided excellent balanced coverage and a strong editorial condemning “demonizing abortion doctors”²) noted how he took pregnant young women, who had been kicked out of their own homes, into his and cared for them until they delivered. A strongly anti-abortion Wichita legislator visited his clinic and was surprised that he “didn’t have horns” but was a gentle and kind man. It didn’t change her position on abortion, but it made her realize his humanity.

After the killing, well-attended vigils were held in Wichita and

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around the nation. There has been a large outpouring of condemnation of this murder from a variety of organizations. The American College of Obstetrics and Gynecology (ACOG) found:

... the murder of George Tiller, MD, deplorable and tragic. There is no excuse, no explanation, and no justification for this brutal slaying of a courageous and honorable physician who provided safe and legal reproductive health care to women who otherwise might not have received it. It is especially chilling and deeply disturbing that this violence has occurred at a time when the leaders of this country are committed to finding a common ground in the abortion debate.³

The American Medical Association (AMA)⁴ and the House of Representatives of the US Congress,⁵ as well as both Operation Rescue, the anti-abortion organization that has regularly picketed Dr Tiller's clinic⁶ and the pro-choice physicians group Physicians for Reproductive Choice and Health (PRCH)⁷ have issued statements condemning the murder.

While ACOG, AMA, PRCH, and Congress have commented, family medicine organizations have been notable for their lack of comment. Dr Tiller was not only a family doctor, he was a member of both the American Academy of Family Physicians (AAFP) and the Kansas Academy of Family Physicians (KAFFP), neither of which saw fit to comment publicly on or condemn his murder. The AAFP has indicated that it does not comment publicly on a member's death (regardless of how it occurred) but expresses condolences privately to the family.

The KAFP has similarly noted that it does not comment publicly on the death of members unless they have been past presidents or award winners. The KAFP also acknowledges that abortion is a very controversial matter, both among the public and its members; the same is certainly true for the AAFP. However, the same is true for ACOG, AMA, and the Congress, and they still took a stand against this terrorism. A public statement of condemnation for this assassination need not take a position on abortion. The disclaimers about not commenting publicly on the death of a member are disingenuous in this context. Dr. Tiller did not just "die," he was cold-bloodedly murdered, in a house of worship, because the killer disagreed with his medical practice. In the face of all the discussion, within and outside the organizations, in the public, in the nation, and in the comments of so many others, the absence of any condemnation of this murder from our organizations—from Dr Tiller's organizations—implicitly conveys the unintended message "It is OK with us if you murder a family doctor if you disagree strongly enough with his practice."

Gayle Stephens, MD, wrote to the *Wichita Eagle*:

As a physician, I feel profound disappointment that a family physician can be assassinated in Wichita, and local physicians can be silent and largely absent from public discourse. If a firefighter or police officer were murdered in the line of duty, their colleagues would rise in anger and protest, call for justice, and attend a public funeral in uniform. They would vow to seek justice and pledge support for the victim's

family. Tiller was a legitimate family physician who practiced medicine as well as performing abortions. He was not a butcher, profiteer, opportunist, or fraud. His murder diminishes us all, and nobody is safer or better off because he is dead.⁸

It would be difficult to say it more eloquently. The AAFP and our other family medicine associations have said nothing at all, and that is shameful.

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