

RU486: Dangerous and unacceptable

Planned Parenthood calls RU486 “a safe, effective, and acceptable option for women seeking abortion during the first several weeks of pregnancy.” On the contrary, RU486 unjustly kills young members of the human family and risks the lives and health of women. The expansion of RU486 abortions through webcam technology is simply unacceptable. Several states have already enacted laws banning webcam abortions.

MCCL supports legislation to prohibit webcam abortions in Minnesota. Please help us share the truth about the dangers of this unethical and deadly practice.



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The mission of Minnesota Citizens Concerned for Life is to secure protection for innocent human life from conception until natural death through effective education, legislation and political action.

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RU486

Mifepristone



Misoprostol

What you need to know

about the abortion drug and ‘webcam’ technique

In September 2000 the U.S. Food and Drug Administration (FDA) approved the abortion drug RU486 for use in the United States. Marketed as “safe and effective,” RU486 kills young human beings in the womb and threatens the lives and health of pregnant women. The 2010 introduction of “webcam abortions” in Minnesota puts women at even greater risk.

What is RU486?

RU486—sometimes called a chemical or “medication” abortion—is a nonsurgical method of abortion used early in pregnancy. The pregnant woman typically takes two separate drugs.

The first drug is mifepristone, commonly known as RU486, Mifeprex (its U.S. trade name) or “the abortion pill.” It works by blocking the hormone progesterone, which weakens the uterine lining and deprives the developing human being *in utero* of necessary fluids and nutrients. This causes the unborn child’s death.

The second drug, a prostaglandin called misoprostol, is taken about two days later to induce uterine contractions that expel the dead child. The complete expulsion often occurs within several hours of taking the misoprostol, but sometimes it does not occur for several days or even several weeks (and in rare cases, not at all). Many women experience the abortion at home with no doctor or health care worker present.

The woman is supposed to return to the abortion clinic about two weeks after taking the mifepristone to confirm that the abortion has been successful. If not, a surgical abortion may be performed.

How common is RU486?

RU486 is routinely and increasingly used for early abortions. The RU486 method accounted for 2,678 abortions in Minnesota in 2012, according to the Minnesota Department of Health—25 percent of the statewide total. This percentage has risen steadily in recent years. The FDA estimates that more than 1.5 million RU486 abortions have taken place nationwide through April 2011.

Serious health risks to women

RU486 is a particularly dangerous abortion method for pregnant women. A 2009 Finnish study determined that RU486 led to significant “adverse events” in 20 percent of cases—almost four times the rate of immediate complications as surgical abortions. The common side effects of the drugs—including prolonged pain, cramping, heavy bleeding, nausea, diarrhea, vomiting and fever—can mask more serious complications, such as infection, hemorrhage and incomplete abortion, sometimes leading to death.

A total of 2,207 adverse events linked to RU486 were reported to the FDA from September 2000 (when the drug was approved) through April 2011. Of these, 14 women died; 612 women were hospitalized (excluding deaths); 339 women bled so much that they required transfusions; and 256 women developed infections, 48 of them “severe infections.” These do not include women from other countries who have suffered or died as a result of RU486.

RU486 kills a human being

The scientific facts of embryology show that the human embryo is a distinct, living and whole (though immature) human organism from conception. He or she is a member of the species *Homo sapiens*, like each of us, only at a much earlier stage of development.

By the time most RU486 abortions occur, the rapidly-growing unborn human being already has developed a beating heart. Planned Parenthood provides RU486

through 9 weeks’ gestation, when the unborn child has measurable brain waves and can react to touch. Some women report seeing recognizable remains of their baby when the child is expelled at home.



FAILED ABORTION INFECTION HEMORRHAGE SEVERE PAIN RUPTURED TUBAL PREGNANCY DEATH

Most RU486-related deaths are caused by infection, often of the virulent *Clostridium sordellii* bacteria. One Swedish woman bled to death after taking RU486 in 2003. Two U.S. women are known to have taken RU486 and died from ruptured ectopic pregnancy, which can go undetected because its symptoms mirror the expected side effects of RU486.

Holly's story

18-year-old Holly Patterson was seven weeks pregnant when she went to Planned Parenthood on Sept. 10, 2003, and was given RU486.

On Sept. 13 Holly repeatedly called the Planned Parenthood clinic hotline, complaining of severe cramping and bleeding. She was told her symptoms were normal. When her boyfriend took her to the hospital on Sept. 14, she was given painkillers and sent home. She was readmitted to the hospital on Sept. 17, unable to walk and experiencing extreme pain. She died hours later of a massive *Clostridium sordellii* infection.

"RU486 has caused serious injury and has been implicated in the deaths of other young women. Now it has killed our daughter," says Holly's father, Monty Patterson. He has demanded that RU486 be taken off the market "before more parents suffer and women die."

"As a parent, I cannot allow my beautiful Holly's death to be in vain," Patterson explains.

Abortion industry profits

RU486 offers abortion providers a cost-effective means of increasing abortions and revenue, but they do this at the expense of women's health. Planned Parenthood—the leading performer and promoter of abortion in Minnesota and nationwide—violates FDA protocol regarding RU486 in order to reduce overhead costs and maximize profits.

- RU486 is approved by the FDA for use within the first 49 days of gestation (measured since the start of a woman's last menstrual period). Yet Planned Parenthood administers RU486 abortions through 63 days' gestation, when the drugs become less "effective" and more likely to result in complications.

Women who have died from RU486

These are just a few of the women known to have died from complications associated with RU486 abortion.

- **Orianne Shevin**, 34, Sherman Oaks, Calif. (infection)
- **Chanelle Bryant**, 22, Pasadena, Calif. (infection)
- **Vivian Tran**, 22, Costa Mesa, Calif. (infection)
- **Holly Patterson**, 18, Livermore, Calif. (infection)
- **Brenda Vise**, 38, Chattanooga, Tenn. (ruptured ectopic pregnancy)
- **Rebecca Tell Berg**, 16, Uddevalla, Sweden (hemorrhage)
- **Nadine Walkowiak**, Lens, France (heart attack)



Holly Patterson died of massive infection from RU486

- Planned Parenthood disregards FDA protocol by using a cheaper dosage combination. The FDA recommends doses of 600 mg of mifepristone and 400 mcg of



Rebecca Tell Berg died in Sweden of blood loss from RU486

misoprostol, but Planned Parenthood uses less (200 mg) of the significantly more expensive mifepristone and more (800 mcg) of the less expensive misoprostol.

- Planned Parenthood eliminates the FDA-recommended second office visit to take the misoprostol, instead having women take the drug by themselves at home.

Internationally, abortion advocacy groups are pushing the use of "medical" abortions in developing countries that lack the health care infrastructure to prevent and treat complications. They are even advocating the use of misoprostol alone as a less expensive alternative to the typical regimen, despite a greater risk of incomplete abortion.

'Webcam abortions' expand RU486

In 2008 Planned Parenthood began using "telemedicine" to administer RU486 in Iowa. A pregnant woman converses with the abortionist long-distance via videoconference rather than in person; the abortionist then remotely opens a drawer containing the drugs. The woman ingests the mifepristone at the clinic and the misoprostol later at home.

This "webcam abortion" method allows Planned Parenthood to "reach" more women with RU486 abortion,

especially women in rural areas who would otherwise have to travel long distances to meet an abortion doctor in person. The predictable result is more abortions performed and more revenue for Planned Parenthood. The webcam method also exacerbates the dangers of RU486 by offering the abortion drug to women who live far away from the medical help they may need in the event of complications.

Telemedicine can be used to extend legitimate health care to more people, especially in emergency situations in which it is the only option. But RU486 abortion is not a legitimate medical procedure, nor is it ever needed as an "emergency." The use of telemedicine for abortion needlessly threatens the health of pregnant women.

Webcam abortions in Minnesota

In 2010 Planned Parenthood began conducting webcam abortions at its Rochester, Minn., clinic, marking



This is Planned Parenthood's new approach to women's health and abortion

the first time that Planned Parenthood in Minnesota has performed abortions outside of its St. Paul abortion center. Women receiving RU486 at the Rochester clinic talk with an abortionist who is located at the St. Paul center. One of Planned Parenthood's corporate goals is to offer webcam abortions throughout its network of facilities; it already offers them at all 16 of its Iowa locations.

Webcam abortions in Minnesota will further endanger pregnant women and increase the number of unborn human beings who are killed.