CENTER FOR ARIZONA POLICY

POLICY PAGES

Chemical Abortion

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OVERVIEW

Chemical abortion, also referred to as medication abortion or the abortion pill, is a non-surgical form of abortion used to terminate the life of an unborn baby within the first 70 days of pregnancy. The chemical abortion process is most commonly carried out via the use of two abortifacient drugs: mifepristone, and misoprostol. These drugs are used in conjunction to stop the growth of the baby, and then cause contractions to expel it from the mother. This process can be both painful and traumatic, and carries with it numerous harmful side effects, some of which could lead to serious septic infections if not immediately addressed. Arizona law *A.R.S. § 36-2160* currently prohibits abortion-causing pills to be ordered through the mail, though there is no question that these pills are being sent into the state from out of the country (i.e. India or Mexico) and likely from other states in order to bypass state regulation, and subsequently any safety measures. This endangers women by foregoing in-person evaluations which would determine how far along their pregnancy has progressed.

ANALYSIS

Administration of the Abortion Pill

The abortion pill terminates a pregnancy that is already underway, ending the life of the unborn baby. This process is done using a combination of two different pills: mifepristone (commonly prescribed as the pill Mifeprex) and misoprostol. The mifepristone and misoprostol duo is the most often prescribed, and makes up for approximately 98% of chemical abortions nationwide, as of 2019-2020 statistics. The total number of abortions resulting from use of the pill rose 19% between 2019 and 2020 to account for about 53% of total abortions across the nation.³

Mifepristone is taken first, within the first 10 weeks of pregnancy, usually at the clinic where it was prescribed by the physician so that the woman can be monitored for any reactions. This pill is administered orally and works by blocking progesterone, a hormone necessary for fetal



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development and growth.⁴ Once the first pill is taken, the woman will then be sent home with the second pill.

This second pill, misoprostol, needs to be administered within 72 hours of the first pill in order to work effectively. The pill is taken either buccally, (in the cheek pouch) or vaginally. Misoprostol induces cramping and contractions, which expel the unborn baby. This process is painful and is compared in severity to a heavy period with abdominal cramping. Testimony from women who have undergone the process mention severe vomiting in conjunction with the cramps, followed by contractions and heavy bleeding.⁵

Alternatively, methotrexate can be used in combination with misoprostol. A lesser-known abortion drug, methotrexate works similarly to mifepristone, halting the growth of the unborn baby prior to it being expelled using misoprostol.⁶

Chemical abortion numbers in AZ

The number of non-surgical abortions in the state of Arizona totals approximately 5,790 as of 2022. Of that number, 5,764 were the result of a combination of both mifepristone and misoprostol, and 20 were due to sole use of misoprostol. The totaled number of chemical abortions makes up roughly 50.7% of resident abortions in the state, bringing the ratio to nearly half.⁷

Risks and side effects

Aside from the fact that these drugs end the life of an unborn baby in its mother's womb, there is also the risk of harmful side effects. The listed side effects on the drug Mifeprex include high fevers, severe nausea, and dizziness, while the more severe potential side effects could include loss of vision, irregular heartbeat, slurred speech, trouble walking, and even death.⁸

The details of risks associated with chemical abortions as listed in A.R.S 36-2152 include, "hemorrhage, infection, failure to remove the unborn child that may result in an additional procedure, sterility, and the possible continuation of the pregnancy." The FDA lists 'serious and sometimes fatal infections or bleeding' as a warning to some of the more serious risks associated with usage of the pill. ¹⁰

Because the second pill is usually taken at home, the woman will often go through the expected cramping and abdominal pain, by themselves. Additionally, they will have to deal with the traumatic process of expelling the unborn baby's remains, which can sometimes be recognized as such. This takes place without the supervision of a medical professional, leaving the woman vulnerable to any complications that may arise. ¹¹

Countless testimonies of women describe this process as extremely painful, and they often confess to being shocked at the sight of their well-formed baby's remains floating in the toilet.

Many claim to have been misinformed, led to believe that the unborn baby was nothing more than a lump of tissue, or that the process would be less painful than it really was. They frequently confess to be filled with feelings of regret, guilt, and remorse after holding their lifeless baby, sometimes falling into bouts of depression as a result.¹²

The problems don't stop there. In the event that the administration of both pills fails to result in the expulsion of the unborn baby, the woman then has the option of taking a repeat dose of the second pill (misoprostol), in which case she will then need to follow up with a medical practitioner to make sure all the remains have been evacuated from her uterus. This is done to prevent risk of infection and sepsis caused by decay of the remains of the unborn baby.¹³

The Journal of Physicians and Surgeons found that women who take the abortion pill are four times more likely to suffer complications than those who get surgical abortions. ¹⁴ A doctor's visit both before and after are crucial to rule out high-risk circumstances. For example, if a woman with an undiagnosed ectopic pregnancy takes the abortion pill, she is in danger of serious complications, <u>including death</u>. If she misjudges the gestational age of the unborn child beyond 10 weeks, she could end up in surgery. An <u>Oxford Academic study</u> found more than 38% of second trimester chemical abortions resulted in surgery, compared to about 8% in the first trimester. ¹⁵

Abortion pill lawsuits

Among all the turmoil of the abortion pill Mifeprex is a recent lawsuit questioning its safety. The lawsuit, Alliance for Hippocratic Medicine v. FDA was filed by Alliance Defending Freedom in November of 2022, challenges the FDA with the claim that they exceeded their regulatory authority when certifying the safety of the pill's use.

In August of 2023, the United States Court of Appeals for the Fifth Circuit ruled that the FDA must reinstate important safeguards for the drugs including ending their delivery by mail, limiting use of the pills to seven weeks' gestation, requiring office visits, requiring physician-only dispensing, and reporting non-fatal adverse events.

Enforcement of the appeals court ruling is on hold pending review by the U.S. Supreme Court.

As of now the pill still remains available, though several abortion providers have gone so far as to say that "they are prepared to prescribe a misoprostol-only regimen for abortions in the event of mifepristone being pulled off the market."¹⁶

Arizona Law

Under current Arizona law, abortion is limited to the first 15-weeks of pregnancy. This includes chemical abortions, although taking the pills beyond the 7-10 week gestational limit increases

risks to the mother. This is why, in part, Arizona law requires abortion pills be prescribed by a qualified physician and are illegal to order via mail.¹⁷

When a woman obtains the abortion pill through the mail, eliminating the oversight of a physician, she is left at greater risk. A physical exam prior to taking the pills will verify the gestational age of the unborn baby, catch a potentially deadly ectopic pregnancy, and lessen the risk of future infertility by appropriately treating a woman with a certain blood type prior to the chemical abortion. A physical exam after taking the pills can ensure no remains are left in the uterus to cause serious and sometimes deadly infections.¹⁸

Arizona law requires a woman to have an ultrasound done prior to getting a prescription for the abortion pill (ARS 36-2156(A). This helps ensure that the baby is not past the abortion limit set in the state, as estimating gestational age can be unreliable.

Minors seeking to obtain a chemical abortion must be able to provide proof of consent from a parent or guardian. In the instance where a minor wishes to avoid parental consent, a judicial bypass must be obtained. This is done by filing a petition and attending a hearing during which the judge determines whether or not the minor is of sufficient maturity to provide consent for an abortion. If this determination is made, the minor would then be able to take the abortion pills without parental knowledge or consent. (ARS 36-2152)

TALKING POINTS

- Abortion pills end the life of an unborn baby and can harm the mother both physically and emotionally. Women are four times more likely to experience complications with the abortion pills than they are during a surgical abortion.
- The abortion pills come with harmful side effects and dangerous risks, including uterine bleeding, vomiting, and in more serious cases, sepsis and even death. This says nothing of the traumatizing emotional pain experienced by the woman who goes through this gruesome process.
- The abortion industry misleads women by downplaying the realities of chemical abortions, leaving many women traumatized by the sight of their unborn baby's remains and the painful, bloody process. This lack of care harms women, and frequently leaves them with feelings of guilt, remorse, and regret.

CONCLUSION

Pro-abortion advocates call the abortion pill "medication." This is a false narrative. Medication treats an ailment; pregnancy is not an ailment. Abortion pills, on the other hand, are used to end the life of an unborn baby in the womb.

The pills come with serious side-effects and risks to the mother, especially if the woman takes the pills without the oversight of a physician.

The reality of chemical abortion is that it can cause immense emotional, mental, and physical distress to women. The abortion industry downplays the harm that this form of abortion causes, falsely describing the process as a 'bad period,' and the unborn baby as a 'lump of tissue.'

¹ Research, C. F. D. E. A. (2023b, September 1). Questions and Answers on Mifepristone for Medical Termination of Pregnancy Through Ten Weeks Gestation. U.S. Food And Drug Administration. Retrieved September 5, 2023, from <a href="https://www.fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/questions-and-answers-mifepristone-medical-termination-pregnancy-through-ten-weeks-gestation#:~:text=Mifepristone%20is%20a%20drug%20that,of%20the%20last%20menstrual%20period).
² FDA. (2023, January). Highlights of Prescribing information. U.S. Food & Drug Administration. Retrieved September 5, 2023, from https://www.accessdata.fda.gov/drugsatfda docs/label/2023/0206870rig1s025Lbl.pdf

³ Jones, R. K., Kirstein, M., & Philbin, J. (2022). Abortion incidence and service availability in the United States, 2020. Perspectives on Sexual and Reproductive Health, 54(4), 128–141. https://doi.org/10.1363/psrh.12215
⁴ FDA. (2023, January). Highlights of Prescribing information. U.S. Food & Drug Administration. Retrieved September 5, 2023, from https://www.accessdata.fda.gov/drugsatfda docs/label/2023/020687Orig1s025Lbl.pdf

⁵ AZ Senate Judiciary (2021, February 4). [Video]. Arizona State Legislature. Retrieved September 5, 2023, from https://www.azleg.gov/videoplayer/?eventID=2021021015&startStreamAt=346

⁶ AZDHS. (2022, December 5). Abortions in Arizona - 2022 Abortion Report. Arizona Department of Health Services. https://www.azdhs.gov/documents/preparedness/public-health-statistics/abortions/2022-arizona-abortion-report.pdf

⁷ Ibd

⁸ Mifeprex (Mifepristone (RU486)): Uses, dosage, side effects, interactions, warning. (2023, March 30). RxList. https://www.rxlist.com/mifeprex-ru486-drug.htm

⁹ A.R.S. 36-2152 - Parental consent; exception; hearings; time limits; violations; classification; civil relief; statute of limitations. (n.d.). https://www.azleg.gov/ars/36/02152.htm

¹⁰ FDA. (2023, January). Highlights of Prescribing information. U.S. Food & Drug Administration. Retrieved September 5, 2023, from https://www.accessdata.fda.gov/drugsatfda docs/label/2023/020687Orig1s025Lbl.pdf

¹¹ AZ Senate Judiciary (2021, February 4). [Video]. Arizona State Legislature. Retrieved September 5, 2023, from https://www.azleg.gov/videoplayer/?eventID=2021021015&startStreamAt=346

¹² I saw my baby | Live Action, (n.d.), https://www.liveaction.org/i-saw-my-baby/

¹³ FDA. (2022). Mifepristone U.S. Post-Marketing Adverse Events Summary. U.S. Food & Drug Administration. Retrieved September 5, 2023, from https://www.fda.gov/media/164331/download?attachment

¹⁴ Medical Abortion: What physicians need to know, Journal of Physicians and Surgeons https://jpands.org/vol24no4/skop.pdf

¹⁵ Immediate adverse events after second trimester medical termination of pregnancy: results of a nationwide registry study, Oxford Academic February 11, 2011 https://academic.oup.com/humrep/article/26/4/927/627865 Noor, P. (2023, May 17). Abortion pill case: where does the lawsuit against the pill currently stand? The

Guardian. https://www.theguardian.com/us-news/2023/may/17/abortion-pill-ruling-mifepristone-fifth-circuit-supreme-court-explained

¹⁷ A.R.S. 36-2160 - Abortion-inducing drugs; definition. (n.d.). https://www.azleg.gov/ars/36/02160.htm

¹⁸ Septic shock after medical abortions with mifepristone (Mifeprex, RU 486) and misoprostol Research Gate September 2005

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