

The debate over RU486

Long time waiting

—THERESA ANASTI

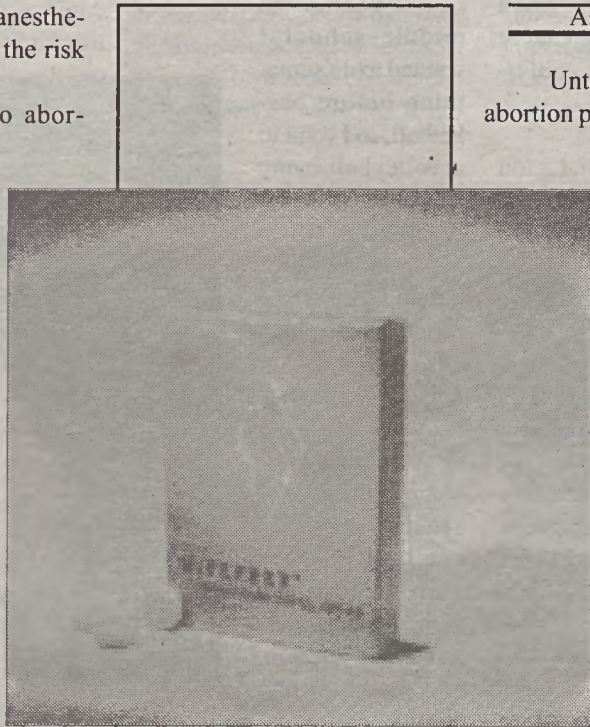
After about ten years of delays by anti-choice activists and politicians, RU 486, or mifepristone, has finally been approved by the FDA in September. In Europe, where it has been available for over a decade, it has been seen as a safe and effective alternative to surgical abortions. Even since the controversial Roe vs. Wade decision was decided over 25 years ago, pro-lifers have consistently been trying to deter women from choosing to have an abortion; at times through violent means. Since mifepristone will broaden women's choices and make it harder to target abortion clinics with violence and harassment, anti-choice politics has tried to deny women the right to non-surgical methods of abortion.

In the United States, abortion clinics are relatively rare, as eighty-six percent of counties have no abortion provider. Even today, doctors still see patients who try to create a miscarriage by taking quinine pills, asking their boyfriends to jump on them, or come into the hospital with electrical cords hanging out of them. Since nearly half of all doctors in the U.S. are going to prescribe mifepristone, this will expand the number of abortion providers, making illegal and harmful abortions less common. If this pill would become available internationally, it would greatly reduce the 20 million unsafe abortions occurring every year. Many pro-lifers claim that the pill will make abortions more common and that it will be taken less seriously; however, the pill will cost almost as much as a surgical abortion, and it will involve frequent trips to the doctor's office for physicals and other medical matters. Mifepristone merely provides a more private, safer alternative to the surgical abortions. Indeed, RU-486 is less harmful than surgical abortions. The pill does not require an invasive procedure or sur-

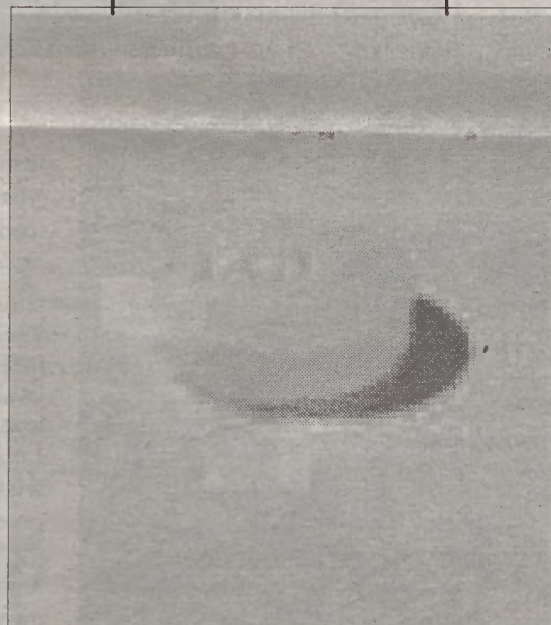
gery, does not require anesthesia, and does not have the risk of injury to a woman.

In addition to abortion, mifepristone, as an antiprogesterin, also has other potential uses. Antiprogesterins such as mifepristone can help induce labor, treat infertility, and help certain kinds of tumors. Mifepristone may also be useful in treating AIDS, but because a source of the drug has been previously unavailable, many medical leads have been delayed. The drug also works as an antigluco-corticoid, which means it may interfere with adrenal gland hormones which are involved in regulating tissues in the body; possible uses as an antigluco-corticoid include the treatment of Cushing's disease and glaucoma.

The advancements mifepristone can provide are now being threatened by pro-life politicians. Mifepristone is one of the most important advancements in women's reproductive health that we have seen in an extraordinarily long time. Its approval has marked another milestone to women's complete reproductive freedom and equality. As mifepristone becomes distributed across the country, women will no longer be subject to ridicule and fear as she makes a personal choice affecting her life. Indeed, a decision which should be made by a woman and her doctor should not be regulated by the government.



The abortion pill manufactured by Danco



The French chemist Emille-Etienne Beulieu, with the pill

Murder, she wrote

—ASHLEY RANKIN

Until a few weeks ago, the abortion pill mifepristone, more commonly known as RU-486, was not readily available to women considering an abortion. This changed on September 28th of this year, when the FDA approved its sale in the United States. Since the controversial Roe vs. Wade decision in 1973, there have already been 27 million abortions. Each year, four to five hundred children are born alive and then killed after late term abortions. Unfortunately, many of today's teenagers view abortion as a form of birth control. However, many of these teens forget that by making the choice to abort, they are committing what many view as murder.

"Never before has the FDA approved a drug intended to kill people", said Congressman Tom Coburn.

After years of a steady decline in abortion rates in the United States, many pro-life activists feel that the pill will simply reverse these statistics and encourage women to view abortion more casually. "I fear that making this abortions pill widespread will make abortions more and more common rather than more and more rare", said, Presidential candidate George W. Bush.

Juxtaposed to a common belief among those who are not educated about the procedure, it's not as easy as popping a few pills and then it's all over

with. It's at least a three-step process (which can take up to seven steps) and requires constant monitoring by a doctor. Following the initial visits in which the doctor verifies that the woman is within 49 days of pregnancy, she returns in two days to the doctor's office to take another pill which is designed to abort the fetus, if this has not already occurred.

The side effects of this pill aren't a walk in the park either. In many studies now being conducted, most women experience excessive bleeding, nausea, and diarrhea. Other risk categories include high blood pressure, bronchitis, menstrual irregularity, a history of problem pregnancy, pelvic inflammatory disease, allergies, epilepsy, adrenal insufficiency, and recent intake of steroid or anti-inflammatory medication. The long-term effects of the pill are still unknown, as it is a relatively new procedure.

Aside from these physical side effects, the psychological toll on the women who choose the method is extensive. In most studies, women who have been given mifepristone experience a greater risk of developing psychological problems because of the lingering side effects, than women who choose the surgical method. "True, no anesthetic is required, but a woman who wants to end her pregnancy has to 'live' with her abortion for at least a week using this technique. It's an appalling psychological ordeal," says Dr. Edouard Sakiz, who now heads Exelgyn, a company set up to market RU-486. Thus, the notion that a surgical abortion somehow is more psychologically damaging than a chemical one is very untrue.

While many women feel that they have no other option, many pro-lifers feel that even if the child is not yet fully developed, it is murder, and should be outlawed.

Objective opinion of RU486

—KATIE WATLINGTON

Last month having an abortion became as easy as taking a pill, when the FDA approved the drug mifepristone or RU-486. This drug allows women to have abortions in the first seven weeks of pregnancy without ever having surgery. Surprisingly the FDA put few restrictions on the drug, allowing practically any doctor to pre-

scribe the drug (as long as they have surgical backup). While mifepristone could change "a woman's choice" drastically, it still has quite a few hurdles to climb.

Another problem facing mifepristone is manufacturing. Few companies are willing to face the opposition of producing the pill. Even the French company who has been marketing the pill for years in France

decided against marketing the pills in the US. Instead they donated the rights to the Population Council in NYC. They eventually chose Danco to manufacture the drug. The company does not even have a listed phone number or a public office due to the controversy of the issue.

Mifepristone is a type of antiprogesterin. Progesterone is the hormone in women that is

necessary for the development of the fertilized egg. After mifepristone is administered, the uterus begins shedding the lining thus dislodging the embryo. Two days later Misoprosotol is administered which causes contractions that expel the embryo. It is about 95% effective.

Whether this drug will be readily available soon is up in the air. The recent election of

George W. Bush or Al Gore will definitely effect whether abortion will be legal in years to come. The future President has the right to appoint future members of the Supreme Court, and with four possible spots opening up in the coming years it seems as though this year's election may prove not only to be a decision over the Presidency but also over a woman's right to choice or a baby's right to life.