

The push for DYI abortions proceeds.

The Mifeprex (RU-486) abortion regimen was first approved by the FDA in 2000, under the “Restricted Distribution” clause of Subpart H, which at the time was the only way for FDA to restrict the post-approval use of any drugs they found particularly dangerous. The very minimal restrictions on gestational age (use at less than 49 days gestation) and required follow up visit for administration of the second drug (misoprostol/Cytotec) were swept away under the Obama administration FDA revision of the label, which now allows for use up to 70 days gestation, and no requirement for in person follow up visit prior to administration of misoprostol.

But, the fact that there are ANY restrictions on this drug means that the ultimate goal of over-the-counter marketing of abortion pills is not possible. So, in October, the [ACLU filed suit against the FDA](#) to demand that FDA restrictions be dropped altogether.

Currently there are 86 websites from which the abortion pill regimen can be ordered online, without a physician prescription. FDA has done nothing to date to address this problem.

And now, California is considering [SB 320](#) to mandate that Student Health Services on campus administer Mifeprex abortions.

<https://www.npr.org/sections/health-shots/2018/01/23/579106229/california-bill-would-mandate-on-campus-access-to-abortion-pills>

<http://thefederalist.com/2018/02/09/california-moves-force-public-universities-administer-abortion-pills/>

What this means for you is more ER calls from women “miscarrying”. The hemorrhage associated with mifeprex abortions is not limited to situations of retained tissue, since Mifeprex itself can interfere with hemostasis at the level of the spiral arteries, leading to massive hemorrhage despite an empty uterus. And in women with a high WBC, have a low index of suspicion for sepsis.

Please contact the FDA for known complications of Mifeprex abortions that you handle or become aware of. <https://www.fda.gov/Safety/MedWatch/default.htm>