

Chemical Abortion

A Dangerous Process

Chemical abortion involving RU 486 requires at least two drugs taken over a period of several days and multiple visits to the doctor's office.

A woman is given the RU486 pills at her first visit.

These pills are a powerful steroid which blocks the action of the female hormone progesterone. As a result, the tiny developing human being literally starves to death as the nutrient lining the womb sloughs off.

The second pill, a prostaglandin (PG), is usually misoprostol.

Taken several days later, it initiates muscular contractions of the uterus to expel the tiny child's emaciated corpse. The procedure requires 3 to 4 visits to a doctor's office. The final visit requires the woman to bring the expelled dead baby to the doctor's office to determine if the abortion was complete.

There is no doctor or nurse to hide the dead body of baby.

The abortion itself is a bloody, messy, painful affair. Cramping may be severe and may be accompanied by serious nausea, vomiting, and diarrhea.

Bleeding is often heavy and persistent.

Normally, doctors encountering such symptoms would suspect a ruptured ectopic pregnancy or a serious reproductive tract infection and respond accordingly. Yet because these signs are expected side effects of chemical abortion, clinicians and counselors don't always fully consider or investigate other possible causes right away.

This is true in the deaths where the infections or ectopic pregnancies were not caught until it was too late. Clear signs of infections and ectopic pregnancies were ignored because doctors expected



heavy bleeding, cramping and pain as a normal side effect.

50% of women who initiate chemical abortions do not abort and must then undergo a surgical abortion.

The president of the pharmaceutical company which developed RU 486 said:

"The woman must live with this for a full week. This is an appalling psychological ordeal."

Normal post-abortion symptoms of guilt, depression and suicide occur as with surgical abortions in addition to many adverse physical events and side effects.

Think Twice!

Women who DIED from Chemical Abortions

An American, undisclosed

3/3/06

Orianne Shevin, Sherman Oaks, CA

6/14/05

Chanelle Bryant, Pasadena, CA

1/14/04

Rebecca Tell Berg
Uddevalla, Sweden

6/3/03

Vivian Tran, Costa Mesa, CA

12/29/03

Holly Patterson, Livermore, CA

9/17/03

Brenda Vise, Chattanooga, TN

9/12/01

Unidentified 26 year old
Sherbrook, Quebec

9/1/01

Nadine Walkowiak, Lens, France

3/23/91

Two British women, undisclosed

Warning!

THE FDA RECENTLY HAS RELEASED INFORMATION ABOUT THE DEATHS OF FIVE AMERICAN WOMEN WHO HAD MIFEPRISTONE ABORTIONS.

THE DEATHS ALL OCCURRED AFTER INTRAVAGINAL ADMINISTRATION OF THE SECOND MEDICATION, MISOPROSTOL, WHICH IS ONLY FDAAPPROVED FOR ORAL USE.

MIFEPRISTONE IS IMMUNOSUPPRESSIVE AND THAT IMPAIRMENT OF THE BODY'S NATURAL IMMUNITY ALLOWS THE ENDOMETRIAL SPREAD OF C. SORDELLIT INFECTION.

MIFEPRISTONE CAN FACILITATE INFECTION AND LEAD TO LETHAL SEPTIC SHOCK HAS BEEN SUPPORTED BY EXPERIMENTATION.



W . A . K . E . U . P .

Women Against The Killing &
Exploitation of Unprotected Persons

THEOLOGICAL COLLEGE
415 Michigan Avenue, NE
Washington, DC 20017

Office: 202-526-3107 • Fax: 301-424-5590

www.wakeup.net



Considering

Chemical Abortion?

RU 486