Written by **William F. Jasper** on November 6, 2000

Unleashing the Killer Pill

On September 28, the Clinton administration launched its chemical warfare attack on unborn Americans with the announcement that the Food and Drug Administration (FDA) had approved RU-486, also known as the "abortion pill," for marketing and prescription in the United States.

Predictably, abortion advocates hailed the announcement as a great triumph. The FDA approval is a "total victory for U.S. women,'' Eleanor Smeal, president of the Feminist Majority Foundation, declared. "At long last, science trumps anti-abortion politics.'' Gloria Feldt, president of Planned Parenthood, proclaimed that RU-486's U.S. arrival marked the "beginning of a new era'' for American women. Vice President Al Gore was also pleased with the action. "Today's decision is not about politics but the health and safety of American women and a woman's fundamental right to choose,'' he announced.

Pro-life leaders were just as quick to denounce the FDA action as a purely political maneuver. "The Clinton-Gore Administration, which claimed it wanted to make abortion rare, has embraced an abortion pill that will result in more abortions and new risks to women," National Right to Life Committee (NRLC) spokeswoman Laura Echevarria declared. Commenting on an ABC News poll conducted September 6-10, which found that a plurality of Americans opposed making RU-486 legal (47 percent to 45 percent), Echevarria noted: "The degree of opposition would no doubt be even higher were it not for the misinformation that has colored much of the past media coverage of the issue, including highly inaccurate references to RU-486 as a 'morning-after pill' or as a drug that causes expulsion of a 'fertilized egg.'" "In reality," Echevarria said, "this method involves administration of two potent drugs, and frequently produces profuse bleeding, in order to kill a human embryo who is two to five weeks old.

According to the NRLC, the FDA approval of RU-486 represents "the first time in our nation's history that our government has ever approved a drug for the specific purpose of taking the life of another human being." Pro-life advocates point out that the abortion pill, like surgical abortion, is never "safe" for the baby who is the target and bears health risks for the mother as well, risks that are neglected or grossly understated by pro-abortion militants. "Only four months ago, after years of study, the FDA recognized the substantial risks of this two-drug abortion method, proposing restrictions such as requiring administration within one hour of an emergency room," noted Dr. Randall K. O'Bannon, NRLC's director of education. "Now, four months later, the FDA has dropped most of these protections for women's health. What has changed, other than a four-month campaign of political pressure by the abortion industry and its allies? The FDA opted for the convenience of abortionists over the safety of women."

The FDA's approval of RU-486 will likely "result in more abortions and therefore more dead babies and injured women," according to Teresa Wagner, legal analyst for the Family Research Council. "It's not only unprecedented for the FDA to approve a drug that has no therapeutic effects, but it's unethical as well," says Wagner.

Communist Pedigree

In addition to many indications that the Clinton administration short-circuited the normal FDA process to facilitate approval of the abortifacient, there is also mounting concern over the fact that the RU-486 to be marketed in this country actually is being manufactured in Communist China.

"The manufacturing label for RU-486 in the United States may soon read 'Made in China,'" said Father Matthew Habiger, president of Human Life International, in an October 4 press statement. "It is

possible that an agreement will be made by the Population Council, owner of the patent rights to RU-486, with a large pharmaceutical company in China to produce the drug for mass distribution in the United States. This pact would constitute another terrifying chapter in the global war against women and children."

"China is notorious for its wide-scale human rights and religious rights abuses, as well as for its one-child policy implemented through forced abortion, contraception, sterilization, and infanticide," charged Fr. Habiger. If the U.S. RU-486 is being manufactured there, he says, there should be added concern because "it is clear that Communist China's anti-life policy would be expanding its grasp over the unborn children in the United States."

Claiming that it is keeping the manufacturer's identity confidential to protect the company against potential violence by pro-life forces, the FDA has refused to confirm whether or not RU-486 is being manufactured in China. However, an October 12 report in the *Washington Post* vindicated Fr. Habiger's concerns. The *Post* cited several Chinese officials and the head of a foundation who confirmed that the Hua Lian Pharmaceutical factory near Shanghai is producing the abortion pill for the U.S. market. Joachim Oehler, head of the Concept Foundation, told the *Post* that his group, together with the World Health Organization, World Bank, and Rockefeller Foundation, had helped get the factory geared up for RU-486 production. The Rockefeller Foundation had contributed $2 million to the project.

The Red China connection is a natural fit for RU-486, for a number of reasons. The Population Council, which owns the rights to the drug, has long been an ardent admirer and supporter of China's totalitarian population control programs. When the United States cut off funds for the United Nations Population Fund (UNFPA, formerly United Nations Fund for Population Activities) because of its support for the Chinese population program, it was the Population Council, together with the Population Institute, which sued to restore funding. The Council, which is headquartered in New York, at Dag Hammarskjold Plaza, across the street from the UN, and at Rockefeller University, works closely with the UN to establish coercive population control programs throughout the world.

Nazi Ties

Founded in 1952 by John D. Rockefeller III, the Population Council also has longstanding ties to the Nazi eugenicist movement, which, understandably, the Council is none too anxious to advertise. Certainly the pro-abortion lobby is not about to draw attention to the fact that the French manufacturer of the abortion pill, Roussel-Uclaf (the "RU" in RU-486), is a subsidiary of the "reformed" Nazi chemical giant, I.G. Farben. Infamous for its production of the cyanide gas Zyklon-B, and for other assistance it provided to Hitler's murderous regime, I.G. Farben attempted to shake its abominable image through corporate restructuring and renaming after World War II. One of its major reincarnations is the Hoescht AG pharmaceutical giant, which owns Roussel-Uclaf. So it would seem that pro-life advocates are not merely engaging in heated rhetoric or seeing phantasms when they assert that there is a Nazi bent to the "science" of abortion, and particularly as it pertains to RU-486.

RU-486 was invented by Dr. Etienne-Emile Baulieu, who states in his book The "Abortion Pill" that he views the drug as an important adjunct to contraception and surgical abortion. Moreover, he sees a "broader role" for the chemical in helping "governments to dampen a population explosion which threatens to outstrip the world's resources." The drug became legal in France in 1988 and is available in China and a number of other European countries as well. However, until now, its availability in the U.S. has been blocked by a number of impediments. Although the FDA approval process was one roadblock, the pill's advocates were also stymied by their own legal problems and the difficulty of

finding a manufacturer who would produce the controversial drug.

With the stigma of abortion hanging over the drug and U.S. right-to-life groups threatening to boycott any company that produced or marketed the abortion pill, Hoescht-Roussel-Uclaf decided against entering the U.S. market.

Three days after being sworn into office in 1993, President Clinton signed an executive order directing the Department of Health and Human Services and the FDA to take steps to promote the testing, licensing, and manufacturing of the drug in the United States. The National Right to Life Committee points out that in the course of carrying out the president's directive, the FDA:

• actively pressured French manufacturer Roussel-Uclaf to submit a marketing application;

• helped negotiate the transfer of manufacturing and marketing rights from Roussel-Uclaf to the Population Council of New York once it became clear Roussel-Uclaf would not submit an application of its own;

• allowed the Population Council to use data from foreign studies in its marketing application, rather than require the Council to wait until it was ready to submit data from American studies;

• allowed the Population Council to submit its marketing application despite not having a finalized deal with any manufacturer or having any finished chemical product from its would-be manufacturer. The FDA allowed the Population Council to use chemical and manufacturing data from Roussel-Uclaf as the basis of the Council's application, knowing that Roussel-Uclaf would not be the manufacturer;

• submitted the application to an advisory panel stacked with known abortion activists and RU-486 supporters; and

• processed the application for RU-486 in just six months, while potentially life-saving drugs were taking as long as 17 months to be processed.

After receiving the U.S. rights to RU-486 in 1994, the Population Council hired attorney Joseph Pike to set up a number of companies to handle various aspects of the "killer pill" business. The companies in this confusing network of death include Advances in Health Technology, Danco Laboratories, Neogen Pharmaceuticals, Inc., N.D. Management, and Neogen Investors, Neogen Holdings, L.P.

None of these companies was actually going to manufacture RU-486; that function had been arranged with a Hungarian manufacturer, Gedeon Richter. However, these well-laid plans began unraveling in 1996. As the old saying goes, there's no honor among thieves. Well, there's even less among killers, particularly the abortionist variety. The exposure of the Population Council's barrister, Mr. Pike, as a disbarred lawyer and convicted felon (forgery), set off a number of lawsuits between Pike, the Council, and investors. Those problems, though, appear to be settled and the principals are proceeding with their grisly business.

False Panacea

All the hype and ballyhoo notwithstanding, RU-486, also known by its generic name, mifepristone, and by its brand name, Mifegyne, is not the silver bullet its pro-abort champions imagine it to be. It will not solve all their problems or eliminate the "need" for surgical abortions. Its physical side-effects for women (which can be considerable, including death), and the potential for serious birth defects for those children who survive this chemical killer, may end up bankrupting the multi-billion dollar abortion industry, if the massive judgments awarded in the tobacco and asbestos lawsuits are any indication of what lies ahead.

RU-486 is a synthetic steroid that interferes with the action of progesterone, a natural hormone vital to the early stages of pregnancy. Progesterone stimulates and maintains the nutrient lining of the uterus, which nourishes the developing child. It also suppresses normal uterine contractions that could detach the baby implanted on the wall of the mother's womb. RU-486 fills the chemical receptor sites normally reserved for progesterone, causing the baby to starve to death. The baby is then discharged from the woman's body along with the decayed uterine lining. This may occur in a matter of hours, days, or weeks. Or it may not happen at all. In which case the woman will then be faced with the "need" for a surgical abortion.

Used alone, RU-486 is successful in inducing an abortion only between 64 percent and 85 percent of the time. Which is why it is most frequently used in conjunction with the prostaglandin misoprostol (trade name: Cytotec) to induce uterine contractions to expel the baby's corpse. Because the use of a prostaglandin (PG) is so regularly a part of the standard RU-486 abortion procedure, it is frequently referred to in medical literature as an "RU-486/PG" abortion.

Contrary to the many inaccurate and favorable stories carried by much of the pro-abortion media, RU-486 abortions are not as simple as popping a few pills that can be obtained at the drug store. It is at least a three-step process (and may take up to seven steps) and requires constant monitoring by a doctor. On the first visit to the abortionist, the woman receives a pregnancy test and an ultrasound to verify that she is three to nine weeks pregnant (the time period during which RU-486 is deemed to be an "effective" abortifacient). If it is determined that she is a suitable candidate for the abortion, she will sign for and ingest the mifepristone (RU-486) pills.

After a two-day waiting period, the RU-486 protocol requires that the mother return to the abortionist for a follow-up exam. According to studies on RU-486 conducted here and abroad, three percent of women will have experienced an abortion at home during this 48-hour period. Those women who have not already aborted their child will, at the second visit, be given the prostaglandin and will remain in the doctor's office for four hours to be monitored for side effects as the powerful (and painful) contractions begin. According to the studies, about half of the RU-486 abortions take place in the doctor's office during this four-hour wait. Another 26 percent of women deliver a dead baby on the way home, at home, or wherever they may be over the next 20 hours after the prostaglandin is administered. The rest who abort do so at various times during the following two weeks. Between eight percent and 23 percent (depending on how many weeks pregnant the mother was) never completely abort or don't abort at all using the drugs. Thus a third visit, usually two weeks after the second, is necessary in order for the abortionist to confirm whether or not the process has been "successful." If it hasn't, the abortionist will encourage the woman to undergo a surgical abortion to guard against infection. If she chooses not to have the surgical procedure, the possibility exists that she might give birth to a child who may have been harmed by the drugs.

Side Effects

From studies conducted thus far, as well as from our experience with the duplicity and deception of the abortion lobby over the past several decades, there is every reason to believe that the new "miracle" abortion pill will yield a great many physical and psychological casualties among women, in addition to the horrible holocaust of babies killed and maimed.

In France, which has much more restrictive prescription and abortion procedures than the U.S., a woman suffered heart failure and died from an RU-486/PG abortion. In U.S. trials, 79 percent to 96 percent of women taking RU-486/PG reported prolonged pain requiring some form of painkiller.

Between 24 and 61 percent of RU-486/PG patients experienced nausea. Other side effects included very heavy vaginal bleeding, diarrhea, vomiting, infection, fatigue, hot flashes, fainting, anemia, heart palpitations, dizziness, mood changes, skin conditions, and breast conditions.

G.D. Searle, the pharmaceutical company whose prostaglandin misoprostol (Cytotec) is regularly used with RU-486, has opposed the use of its drug for this purpose and warned that "serious adverse events" including "maternal and fetal death" and "uterine hyperstimulation, rupture, and perforation" have been associated with "off-label" uses of the drug. The company, which developed Cytotec for the treatment of gastric ulcers, said in a March 13, 1993 letter to the *Wall Street Journal* that "Searle strongly opposes any efforts to approve its use with RU-486 in abortion, either in the U.S. or elsewhere." In a physician alert dated August 23, 2000, Searle reminded doctors that it had not conducted research on the use of the drug for abortions and warned that "in addition to the known and unknown acute risks to mother and fetus, the effect of Cytotec on the later growth, development, and functional maturation of the child when Cytotec is used for induction of labor or cervical ripening has not been established."

The U.S. tests of the abortion pill have been conducted on "ideal" candidates who have been carefully selected for the best results. Nevertheless, two percent of these select participants in the RU-486 trials have hemorrhaged, with one percent bleeding severely enough to require hospitalization. Some required surgery and transfusions. Outside the strictures of a clinical trial, it is virtually certain that we will see far higher rates of serious complications, and even deaths of mothers from the drugs. In fact, it is altogether possible that women who participated in the trials have already died from RU-486, but that such deaths have not been reported. Consider that in Ohio it was reported that "no complications" had occurred among the 238 women who had taken part in the tests. That lie may well have gone unchallenged if not for Dr. Mark Louviere, who treated one of the RU-486 test women — after she had lost one-half of her total blood volume. According to the doctor, she probably would have died if not for emergency surgery. "If near death due to the loss of half of one's blood volume, surgery, and a transfusion of four units of blood do not qualify as a complication," Dr. Louviere told the *Waterloo Courier*, "I don't know what does."

Monstrous lies and coverups are to be expected from those who traffic in this wretched business, as we have learned from Dr. Bernard Nathanson, Carol Everett, Norma "Jane Roe" McCorvey, and other abortion insiders who have turned against the bloody slaughter. In his powerful 1996 autobiography, *The Hand of God*, Dr. Nathanson recalls, for instance, that he and his fellow revolutionists at the National Abortion Rights Action League (NARAL) regularly lied with statistics. "There were perhaps three hundred or so deaths from criminal abortions annually in the United States in the sixties," writes Nathanson, "but NARAL in its press releases claimed to have data that supported a figure of five thousand."

The pro-abortion Establishment press helped them foist this lie and many others on an unsuspecting public. In like fashion, the pro-abortion media repeatedly helped them cover up the steamier aspects and scandals of the abortion trade, which constantly burbled to the surface and threatened to discredit their "noble" crusade. Their friends in the press reliably downplayed or completely spiked stories about women who were killed, maimed, or rendered sterile by abortions, and rarely acknowledged the health risks to the pregnant mother from the various methods of abortion.

This pattern of lies and coverup is being repeated with regard to RU-486. Rare is the story which mentions the caveats that many medical researchers have made with regard to the drug. According to

reports on RU-486 that have appeared in the *New England Journal of Medicine* and other medical journals, the RU-486/PG treatment could prove a serious danger to women with severe asthma or adrenal failure, and those on glucocorticoid therapy. Researchers also warned that the drugs could pose dangers to women with complicated diabetes mellitus, severe anemia, hemorrhagic disorders, and those being treated with anticoagulants. Other risk categories include high blood pressure, bronchitis, menstrual irregularity, fibroids, endometriosis, recent use of IUD or oral contraceptives, history of problem pregnancy, current ectopic pregnancy, pelvic inflammatory disease, allergies, epilepsy, adrenal insufficiency, recent intake of steroid or anti-inflammatory medication, or a history of liver, stomach, or intestinal disease.

Psychological Toll

And those are just some of the areas where *physical* complications are likely to pop up. Nobody in the media thought-cartel is even considering the psychological, moral, and spiritual toll this new technology of death will exact on the survivors. It is not because they do not know. They have been told, in an extraordinary admission against interest, by one of those who helped develop the drug and who is profiting from its destructive efficacy, that it inflicts "an appalling psychological ordeal" upon women who use it. That admission comes from Dr. Edouard Sakiz, who was CEO of Roussel-Uclaf during the period when RU-486 was being developed. He now heads Exelgyn, a company set up specifically to market this "human insecticide" or "new Zyklon-B," as some critics have aptly dubbed it. In a surprising statement reported in the *Boston Herald* on July 31, 1992, Sakiz denied claims that the new abortion pill offered a painless alternative to surgical abortion techniques. "In fact it is much more complex than the technique of vacuum extraction," said Sarkiz. "True, no anaesthetic 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."

<>Even more appalling is the campaign of misinformation, lies, and deceit that is being waged to promote this latest abomination in the ongoing war against the most innocent and helpless members of our society.

Sidebar: The Facts of Life

A popular pro-life bumper sticker proclaims: "Abortion Stops a Beating Heart." That is certainly true. But what about the baby — or "fetus" or "embryo" — in an RU-486 chemical abortion? What is his or her developing status during the early weeks of pregnancy? The following is taken from *The Facts of Life: An Authoritative Guide to Life and Family Issues by Brian Clowes, Ph.D.*

• 3 weeks: Your early forming baby has a beating heart.

• 4 weeks: He has developing muscles, and his arm and leg buds are visible. His first neocortal cells appear. He has grown in size by a factor of 10,000 [since fertilization]. Blood flows in his veins, separate from your blood.

• 5 weeks: Her pituitary gland is forming, and her mouth, ears, and nose are taking shape.

• 6 weeks: His cartilage skeleton is completely formed and ossification begins. His umbilical cord has developed. His brain coordinates movement of muscles and the involuntary movement of organs. Reflex responses are present. At 43 days, his brain waves can be recorded.

• 7 weeks: Your early forming baby girl has lips that are sensitive to touch, and her ears resemble her

family's pattern. The first fully developed neurons (nerve cells) appear on the top of the spinal cord, beginning construction of the brain stem.

• 8 weeks: He is well proportioned, about 11/2 inches long. All his organs are present, complete and functioning (except the lungs). His fingerprints have been engraved.

• 9 weeks: She will bend her fingers around an object placed in her palm. Her fingernails are forming, and she sucks her thumb.