



A December 2013 article in the Canadian Medical Association Journal revealed that a pharmaceutical company has submitted an application to Health Canada which, if approved, would bring into our country the dangerous chemical abortion drug, RU-486, also known as mifepristone.

An RU-486 abortion involves a 2-drug combination usually offered to women less than 9 weeks pregnant. Mifepristone, a synthetic steroid, blocks the hormone called progesterone. This shuts down the woman's pregnancy-sustaining mechanism with the result that the baby, deprived of nutrition, starves to death and detaches from the uterine wall. Misoprostol, given about a day later, initiates powerful uterine contractions that cause the woman to expel her baby.

Many women have died after taking RU-486, including at least 14 in the U.S. as reported by the U.S. Food & Drug Administration in 2011. The same FDA report revealed there was a total of 2,207 reported adverse effects after using the drug. Of the women experiencing medical and physical problems, 612 required hospitalization, 339 experienced blood loss significant enough to require a transfusion, 256 experienced infections, and 48 women experienced "severe infections."

"Severe infections generally involve death or hospitalization for at least 2-3 days, intravenous antibiotics for at least 24 hours, total antibiotic usage for at least 3 days, and any other physical or clinical findings, laboratory data or surgery that suggest a severe infection," the FDA report says.

Given that only 1% to 10% of complications are ever reported to the FDA, the numbers could be **up to 10 times as high**. Other known side-effects include heart attack, especially in women over age 35.

Canadian trials of the drug were halted in 2001 after a woman died from septic shock, brought on by the RU-486 abortion. The drug was effectively banned for use in Canada at that time. The medical reason for the Canadian woman's death is related to the way in which this particular chemical abortion method throws the natural immune functions of the female body into disarray.

MECHANICS OF HOW RU-486 KILLS WOMEN VIA SEPTIC SHOCK

A mifepristone abortion produces the optimum environment for the common vaginal bacteria, *Clostridium sordellii*, to proliferate. Dr. Ralph P. Miech, Professor Emeritus at Brown University, published¹ a study in the September 2005 issue of the *Annals of Pharmacotherapy*, which offered evidence of how this lethal reaction may occur. The progesterone-blocking effects of mifepristone, which deliberately cut off nutrition to the pre-born baby, also permit the common vaginal bacteria, *Clostridium sordellii*, to enter the cervical canal and release toxins into the blood. Meanwhile, the antiglucocorticoid effects of mifepristone inhibit the innate immune system, impairing the body's ability to fight off the infection. This combination sometimes results in widespread septic shock. This is believed to be how the Canadian, clinical trial victim died.

It is notable that *Clostridium sordellii* infections rarely take place... except when mifepristone has been administered! A *C. sordellii* infection is especially dangerous because it often lacks the common warning signs associated with other infections (e.g. fever, abdominal pain), leaving little opportunity for the infected person to receive medical attention in time.

RU-486: A RETURN TO THE BACK ALLEY

Numerous studies from around the world have proven this abortifacient drug to be dangerous. One Australian study found evidence that RU-486 abortions have a far higher rate of serious complications than surgical abortion. Published in the *Australian Family Physician* in 2011, a medical journal for Australia's general practitioners, the study found that a massive 5.7% of women undergoing such chemical abortion, versus 0.4% of women who had surgical abortion, were re-admitted to the hospital for post-abortion treatment.

In 2006, post-marketing studies in the United States and France cited by researcher Regine Sitruk-Ware, found² that of the women who reported taking this drug, 10% experienced excessive bleeding. That's a stunningly high complication rate, especially for something that could potentially be life-threatening. The studies also found that 1.4% of women required curettage to control bleeding, and 0.25% needed blood transfusions. Would any other drug be allowed on the market with such an abysmal safety rate? The answer is no. No exception should be made even if demanded by the abortion industry.

Even the pro-abortion, feminist author, Renate Klein, published a [book](#), *RU-486: Misconceptions, Myths and Morals*³ in 2012, stating that the drug is an "*unsafe, second-rate abortion method with significant problems*" after seeing its effects for more than 20 years.

Shall the government of Canada allow a greedy pharmaceutical company's desire for profit at all costs, put the lives of women at risk?

¹ The Annals of Pharmacology, "Pathophysiology of Mifepristone-Induced Septic Shock Due to *Clostridium sordellii*", URL source: <http://aop.sagepub.com/content/39/9/1483.abstract>, Sep. 2005.

² Randall K. O'Bannon, LifeSiteNews.com, "Feminist researcher: RU-486 is still not safe", Nov. 22, 2013

³ Amazon.com, URL: <http://www.amazon.ca/RU486-Misconceptions-Morals-Renate-Klein/dp/1875559019>

A MACABRE LINEAGE

RU-486 has links to the Nazi death camps of WWII⁴. It was designed by Roussel Uclaf, a subsidiary of the same company (Hoechst AG, formerly IG Farben) which produced the Zyklon-B gas used in Auschwitz' gas chambers to kill millions of Jews, Polish Catholics, blacks and others who were deemed "unfit". The company's engineers were also tried at Nuremberg for helping to design the actual gas chambers. It would seem those who brought us the Nazi holocaust have also helped usher in an abortion holocaust.

UNCONSCIONABLE HEALTH RISK TO YOUNG GIRLS

If approved, this unsafe chemical concoction will become available to underage girls, just as surgical abortion is now available to them. For example, a recent news [article](#) quotes the 'Medical Director' of a Toronto abortion facility at Lawrence & Dufferin Street, admitting to the fact that she has committed abortion on girls as young as 14-years-old. On its website, the abortion facility also invites girls as young as 12-years-old to become "customers"⁵.

If Health Canada reverses the existing ban on RU-486, this dangerous chemical soup will be given to children as young as 12-years-old, whose bodies are still developing and are more susceptible to harm from powerful synthetic steroids than are adults.

ENABLING SEXUAL ABUSE

One of the little-known negative consequences of today's widespread availability of surgical abortion is that sexual abusers of young girls are using abortion-on-demand to cover up rape and sexual abuse.

Often the abuser is in a position of influence or authority over his victim (e.g. a relative) and can coerce the young girl to get a surgical abortion which is necessary for him to conceal his crimes and continue to abuse her. There are many documented cases where the abortion industry has ignored apparent cases of sexual abuse and statutory rape, sending the victim back into the arms of her abuser.

The abuser in such cases seeks out abortion because a pregnancy would bring an end to the sexual abuse cycle by exposing his crime to the girl's other family members. The tragic reality is that societal acceptance of abortion has inadvertently made it easier for the abuser to cover up the evidence and continue the abuse cycle, sometimes for years, with devastating consequences to his victims.

If this is already a problem **now** with surgical abortion being so readily available, how much more so would it exacerbate the situation if a simple abortion pill were also available on-demand in Canada? Please consider that several U.S. states have evolved their acceptance of RU-486 into "telemed"⁶ abortions, whereby women can pick up the pills remotely, without ever having to physically meet a doctor. The doctor-patient relationship is thus destroyed, and it would become that much easier for coercion to take place.

Canada must not give sexual abusers one more tool to cover up their crimes and continue to abuse their victims.

⁴ William P. Brennan, PhD, Life Issues Institute, "Hoechst's Connection to the Jewish Holocaust", March 1995. Link [here](#).

⁵ Tony Gnosgnach, LifeSiteNews.com, "Abortionist takes witness stand at Mary Wagner trial", Dec. 9, 2013

⁶ LifeSiteNews.com, "Telemed Abortions Under Investigation in Iowa", May 4, 2010

RU-486 history/Timeline

Back in 1992, French geneticist Dr. Jerome Lejeune who was a strong opponent of RU-486 argued that it was the first pesticide developed specifically for use against humans and that this drug is “a pill to eliminate the Third World”. In 1993 at a press conference in Toronto, Lejeune warned reporters of a “chemical warfare” which North America will face if the RU-486 abortion pill is legalized. He asked the reporters “Why do governments which have signed treaties forbidding chemical warfare against soldiers and civilians in wartime, allow it against women and children in peacetime?”

On June 21, 1993, Canadians marched in front of the French Embassy and consulates across the country to show their strong opposition towards “killer” drug RU-486 from entering the country from France. The protests were part of an international campaign held in various countries to put pressure on the French government that participates with the French company Roussel-Uclaf in producing the pill. Also targeted were the offices of Roussel Canada Inc. and its affiliate Hoechst-Roussel

On July 27, 2000, CLC Youth and other pro-life students organized protests in Toronto and Vancouver opposing the RU-486 Canadian Trials. These protests occurred a few weeks before a Canadian woman died from RU-486. The trials were dismissed shortly after.

For years, Campaign Life Coalition together with doctors, pharmacists and others in the medical field have strongly opposed RU-486 and so far, this ‘kill pill’ has not entered the Canadian Market. (Although there have been instances where it has been used illegally by some doctors).⁷

Back in 1990’s Dr. Lejeune warned that “If it is put on sale, it will kill more people than Hitler, Stalin and Mao-Tse-Tung put together.” Since it’s legalization in Europe and the U.S., millions of pre-born children have been killed as a result of this lethal drug.

CONCLUSION

Children in the womb are fully human and have an inherent right not to be unjustly killed against their will. The mifepristone chemical abortion pill is one more tool of violent injustice against the most vulnerable of Canadians.

At the same time, it would cause tremendous harm to their mothers including severe bleeding, infections, sepsis and for many, even death.

Therefore, Campaign Life Coalition, joined by pro-life citizens across Canada, calls upon Health Minister Rona Ambrose to maintain the existing ban on RU-486 by definitively rejecting the current application under review by Health Canada.

⁷ The Interim, “RU-486 sold under the counter Anonymous Toronto doctor illegally trafficking unsafe, untested and unapproved abortion pill”, June 16, 1994.