

ProLife OB|GYNS

AAPLOG American Association of Pro-life Obstetricians & Gynecologists

The American Association of ProLife Obstetricians and Gynecologists, a 2500 member organization, supports offering abortion pill reversal (APR) to women who regret initiating the abortion pill process, after appropriate informed consent. We recently co-sponsored a press conference at the National Press Club supporting APR, and dispute the accusation that this procedure is “junk science.” The use of progesterone to counteract mifepristone, a synthetic anti-progesterone steroid, is a logical extension of decades of therapies for pregnancy loss caused by progesterone deficiency. Research studies have shown that use of progesterone reverses the effects of mifepristone blockage, and progesterone has been used safely for decades in pregnant women. Many women are ambivalent about their abortion decision, and there is increasing evidence that many abortions are coerced. These women welcome the opportunity to reverse their initial decision, and should be given accurate information about this process.

Progesterone reversal of mifepristone is an off-label use of an FDA approved drug. Off-label use of FDA approved drugs is legal, and widely prevalent in the USA. *In fact, the most common abortion pill protocols use non-FDA approved doses, and non-FDA approved protocols for pregnancies beyond seven weeks.* It is hypocritical for abortion advocates to criticize off-label use of pharmaceuticals when in fact they are widely engaging in this practice themselves.

It is also inaccurate for abortion advocates to state that 30-50% of babies survive mifepristone. Research studies have demonstrated that the use of mifepristone alone allows for 7% to at the very most 40% initial survival of the mifepristone poisoning, depending on gestational age. Our reversal process has thus far demonstrated better survival than this. Although some babies will survive mifepristone without additional progesterone support, it is scientific common sense to supply the hormone being blocked in order to increase the survival rate of fetuses for women who have changed their mind. We believe there is ample evidence that progesterone markedly improves survival.

A small case series of this new procedure has been reported in the Annals of Pharmacotherapy, a peer-reviewed journal, in December, 2012. As of March 31, 89 babies have been born and dozens more unborn babies are alive following progesterone reversal of mifepristone. Only one minor birth defect, a port-wine stain, has occurred in this group thus far; this does not appear related to the mifepristone or progesterone. More than 200 physicians are part of a national network providing this service to women. Outcomes of treatment are reported to the APR project of Culture of Life Family Services, and analyzed by physicians, RNs and a statistician associated with the project. As more women receive this therapy, the results will continue to be reported in the medical literature. And more mothers of newborns will gladly share their gratitude at receiving help in reversing their mistake.

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www.aaplog.org Life. It's why we are here.

“When mom changes her mind,” Mary L. Davenport, MD, FACOG American Thinker, February 24, 2015
http://www.americanthinker.com/blog/2015/02/when_mom_changes_her_mind_reversing_pill_abortions_in_progress.html

“Wantedness and coercion: key factors in understanding women’s mental health after abortion.” Marth Shuping, MD, June, 2011, Association for Interdisciplinary Research on Values and Social Change,
<http://www.theunchoice.com/articles/howcommoniscoercion.htm>

April 1, 2015