

## **Aid for pregnant women: the abortion pill regret story**

*Presented by Dr Dermot Kearney, Catholic Medical Association (UK) at FEAMC Symposium, Assisi, May 27<sup>th</sup> 2022.*

In many countries, the majority of abortions are now carried out by pharmacological rather than surgical means. In 2020, 85% of abortions in the UK were pharmacologically-induced. In abortions induced by drugs, two agents are most frequently used in a two-stage process. The first drug administered is Mifepristone, a Progesterone receptor antagonist that competes with and blocks the action of Progesterone by binding to Progesterone receptors. Progesterone is essential for maintaining a pregnancy and Mifepristone frequently results in decidual necrosis and placental separation resulting in the death of the developing child.

After Mifepristone has been taken by the expectant mother to induce abortion, Misoprostol is administered 24-48 hours later with the intention of completing the abortion. This is a prostaglandin analogue that causes uterine contraction, usually resulting in the expulsion of the foetus or embryo and other products of conception.

If both Mifepristone and Misoprostol are taken as instructed by the abortion industry, the chance of continuing pregnancy is 1-2%. The abortion process is complete in 93-94% of cases, although sometimes additional surgical interventions are required to complete the abortion when the abortion is incomplete.

With pharmacologically-induced abortion, there is a window of opportunity to preserve pregnancy and save some babies, if some mothers change their minds about continuing the abortion process after Mifepristone has been ingested, as long as Misoprostol is not administered.

If Mifepristone is ingested but not followed by Misoprostol, there is approximately a 20% chance that a baby may survive. If Progesterone is administered promptly, up to 72 hours after Mifepristone has been administered, that survival rate can be more than doubled with expected baby survival rates of 50-60%, as long as Misoprostol is not administered. Sadly, not all babies can be saved with abortion pill rescue treatment using Progesterone.

In the UK, two doctors, Dermot Kearney and Eileen Reilly, offered an abortion pill reversal service to mothers seeking help when they changed their minds and wanted to save to their babies after they had taken Mifepristone. Between May 2020 and April 2021, they were contacted by 144 women who expressed interest in receiving Progesterone rescue treatment after they regretted taking Mifepristone to induce abortion. Of these, 67 commenced and continued Progesterone therapy. Of these women, 32 have given birth to live healthy babies. Others suffered late miscarriages, more than 40 days after commencing rescue treatment and eight were lost to follow-up. This resulted in an overall success rate of 50-55% with Progesterone rescue therapy, representing more than double the expected survival rate of 20% with expectant management alone.

The abortion industry in the UK, however, did not like the fact that some doctors were offering this choice of abortion pill reversal therapy to expectant mothers. Attempts were made to prevent the abortion pill rescue service from being offered and to discredit the doctors who had been promoting it. The General Medical Council endorsed the complaints and forced the two doctors involved to discontinue the service pending a formal investigation.

Backed by Christian Concern and the Christian Legal Centre, expert witness reports and reports from many women who had availed of the abortion pill reversal service were obtained and an application was made to the High Court for the case against Dr Kearney to be reviewed. With the threat of this High Court hearing that was scheduled to take place on 24<sup>th</sup> February 2022, the GMC formally dropped the case the restrictions that had been imposed on Dr Kearney, preventing him from offering abortion reversal treatment, were revoked on 18<sup>th</sup> February 2022. The restrictions imposed upon Dr Reilly were also removed some weeks later when her case was reviewed.

Doctors in the UK are once again free to provide abortion pill reversal service for mothers who request it.