Introduction

Health Canada has approved Linepharma International Limited’s application to sell RU-486 after approximately three years of consideration. RU-486 is a two drug combination that terminates pregnancies within 49 days of the beginning of a woman’s last menstrual period. There is a distinction between the effect of the “morning-after” pill and RU-486. The “morning-after” pill prevents or delays ovulation, prevents fertilization or prevents implantation of the fertilized egg. RU-486 prevents development after implantation of the fertilized egg in the uterine lining. The effect of RU-486 is to produce a process similar to that of a miscarriage.

How RU-486 works

RU-486 is comprised of mifepristone, which blocks the effects of the hormone (progesterone) required to maintain the uterine lining, and misoprostol, which causes uterine contractions that lead to the expulsion of the contents of the uterus. A patient would take mifepristone on day one and then take the misoprostol 24 to 48 hours later. The average patient will experience approximately 10.8 days of bleeding. The drug fails to completely terminate a pregnancy 2% - 4.8% of the time.

RU-486 reversals

Research indicates that it is possible to reverse the process of RU-486 induced abortion by injecting the mother with progesterone, but it must be done before misoprostol is taken. Since misoprostol is scheduled to be taken on the third day, the timeframe for administering progesterone for a successful result is short.

Known side effects of RU-486

Potential known side effects of RU-486 are vaginal bleeding, diarrhea, nausea, vomiting, headache, dizziness, back pain, and tiredness. Severe infection (sepsis) is a risk associated with any form of abortion, and there have been eight reported deaths from sepsis of women who used RU-486. In four cases, the woman took the second drug intravaginally. A Canadian woman also died of septic shock after taking RU-486 in a clinical trial. The FDA has only approved oral use of the drug. However, medical literature reveals that practitioners are following a variety of regimens for the drug.

Existing medical abortion option in Canada

An alternate medical abortion is currently available in Canada – a two drug process involving methotrexate and misoprostol. This form of medical abortion is reputed to be inferior to RU-486, reportedly being less effective and resulting in a longer time period.
between taking the drugs and completion of the abortion. However, there is a study that suggests that, while RU-486 is a faster process, the effectiveness and health risks of both forms of medical abortion are similar.

**RU-486 advocated for women in rural areas**

Proponents of the drug want to bring RU-486 to the Canadian market in order to increase abortion access for women living in rural areas where surgical abortions aren’t available. However, women who experience heavy vaginal bleeding after using RU-486 would need to undergo surgical procedures. There were approximately 116 cases in the US between 2000 and 2006 in which women required a blood transfusion after experiencing heavy bleeding.

**RU-486 in Canada**

RU-486 will be sold in Canada, through Celopharma Inc, under the name “Mifegymiso”. The drug will probably not be available on the Canadian market before early 2016. Mifegymiso will be sold as a two package kit; a green box will contain the first drug, mifepristone, and an orange box will contain the second drug, misoprostol. Patients will be required to sign a consent form and will need a prescription from a physician to obtain the Mifegymiso.

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RU-486 in Canada

19 Kane, Laura. “Health Canada urged to approve abortion drug RU-486.” The Toronto Star.