MISSOURI RIGHT TO LIFE ISSUES MIXED REACTION TO COURT RULING

“Missouri Right to Life has mixed emotions about Judge Ortrie Smith’s ruling on HB 1055 on September 24, 2007,” said Pam Fichter, President of Missouri Right to Life.

“Missouri Right to Life is disappointed that Judge Smith of the U. S. District Court did not acknowledge the dangers of chemical abortions in his ruling on HB 1055 in line with the dangers the FDA recognized in its approval of the abortion drug, mifoprostone, in 2000,” said Pam Fichter, President of Missouri Right to Life.* "The FDA requires abortionists who dispense this drug to have access to medical facilities equpped to provide emergency care because in the clinical trials, nearly one out of twelve women required surgical intervention after taking it. In view of the dangers, it is certainly reasonable for the Missouri Legislature to make these abortionists comply with Missouri's surgical center regulations," said Fichter.

Fichter continued, “At the same time, Judge Smith ruled it was reasonable for the Legislature to say that the safety of women who have surgical abortions would be promoted by applying Missouri’s ambulatory surgical center regulations to them. He gave the parties time to negotiate variances in the details of the structural requirements for the clinics, as allowed by Missouri law.”

“Missouri Right to Life hopes that the Department of Health continues to maintain a firm position in favor of women’s health,” said Fichter. “We consider it a positive development, at this point, that Planned Parenthood is not being allowed to tie this legislation up in court for many years and that they are going to be regulated by the Department of Health,” said Fichter.

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* The record shows that the FDA approved the abortion drug, mifepristone, only under the following condition, "Mifepristone must be provided by or under the supervision of a physician who meets the following qualification: . . . Ability to provide surgical intervention in cases of incomplete abortion or severe bleeding, or have made plans to provide such care through other qualified physicians, and are able to assure patient access to medical facilities equipped to provide blood transfusions and resuscitation, if necessary." (Memorandum, Dept. of Health and Human Services, Public Health Service, Food and Drug Administration, Center for Drug Evaluation and Research, to "NDA 20-687 MIFEPREX (mifepristone) Population Council," September 28, 2000, p. 6.) (copies available from Missouri Right to Life).