

more than 60% of these are chemical abortions. In England and Wales, 13% of abortions are performed using chemicals, but a growing number of early abortions, especially within the NHS, are done with RU486.

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RU486 Chemical Abortion

What you need
to know



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What is RU486?

RU486 is a drug used to cause an abortion in early pregnancy (up to 9 weeks) or mid-term pregnancy. It is often used in conjunction with a prostaglandin.

How does it work?

A chemical abortion involves at least 2 visits to the hospital or clinic. On the first visit the mother is given three pills and is then sent home. These three pills act to kill the embryo/foetus by attacking the lining of the womb and therefore the placenta which is the baby's oxygen supply and source of sustenance.

48 hours after taking these pills the woman returns to the hospital or clinic to receive the prostaglandin. She will then be kept in over the next few hours until the abortion is complete. The prostaglandin induces labour by causing contractions in order to expel the embryo/foetus.

The woman typically has a follow-up visit a week later to ensure that the abortion is complete.

How effective is RU486?

In about 60%-80% of cases RU486 will cause a complete abortion without the help of the prostaglandin. This is because the body will naturally reject the dead baby.

The effectiveness of RU486 alone means that some women will abort at home in between the first two hospital/clinic visits.

RU486 chemical abortion: Ethical or not?

RU486 can cause major psychological damage to the woman involved.

- The woman is directly involved in the abortion by having to take the pills herself.
- The nature of the drug means that the woman must live with her abortion over the course of a number of days. The president of Roussel Uclaf, the original makers of RU486, said “The woman must live with this for a

full week. This is an appalling psychological ordeal”.

- The woman may abort at home and suffer the distress of seeing the expelled embryo/foetus, which she is required to keep and return to the hospital or clinic to help determine if the abortion is complete.
- In both early and mid-term chemical abortions the prostaglandin induces labour. This can be very distressing as labour, usually associated with child-birth, now becomes associated with the delivery of a dead child.

When abortion was legalised in 1967 we were told that it was to prevent back-street abortions and women aborting in unsafe conditions in their own homes. By using RU486 in early pregnancy women go through the lonely and emotionally distressing experience of aborting alone and at home. However, the government is now considering it as a “more cost-effective use of NHS resource”.

In Scotland more than 60% of abortions are carried in the first 10 weeks of pregnancy and