



17 November 2005

The Hon Tony Abbott
Minister for Health and Ageing
House of Representatives
Parliament House
Canberra ACT 2600

Copy: The Hon John Howard MP
Prime Minister
House of Representatives
Parliament House
Canberra ACT 2600

Dear Minister

The Royal Women's Hospital and Family Planning Victoria repeat our advice and again urge you to lift the legislative restrictions on mifepristone, formerly known as RU-486.

Further to our letter of 20th October, we are concerned that your departmental advice on this matter appears to have been based on limited information about potential risks of unsupervised use in remote areas.

Clearly mifepristone should only be used under medical supervision and when there are appropriate protocols in place, including arrangements for follow up, for curettage when indicated and for urgent care in the rare circumstances when this may be needed. Such protocols can be established in rural and in metropolitan areas. There is good evidence of the safety and efficacy of mifepristone with prostaglandin for medical abortion when used within appropriate protocols.

As for other drugs, evaluation of the research data about mifepristone and consideration of the conditions under which it may and should be prescribed are the proper preserve of the Therapeutic Goods Administration. The establishment of suitable protocols is the responsibility of medical practitioners and health care agencies.

Many women undergoing a termination of pregnancy want to access safe medical abortion in preference to surgical abortion. We reiterate that access to medical abortion via mifepristone is an alternative that should be available to Australian women, as it is to women in the United States, United Kingdom, New Zealand and many other countries worldwide. Australian women should not be denied this access on the basis of limited and unbalanced information.

Yours sincerely

Dale Fisher
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The Royal Women's Hospital, Melbourne

Lynne Jordan
Chief Executive Officer
Family Planning Victoria