

# US abortion ruling threatens access to arthritis drug

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When Alabama nurse Melissa went to pick up her regular prescription for rheumatoid arthritis last week, she was told the drug was "on hold" while the pharmacist checked she wasn't going to use it to induce an

abortion.

"He said, 'Well I have to verify if you're on any contraceptives to prevent pregnancy.' The hell you do," she recalled thinking.

Melissa—who is in her early forties and asked to be identified only by her first name for fear that speaking out might affect her livelihood—then called her doctor, who succeeded in having the pharmacy in the southern US state release the medicine.

"I picked it up a couple hours later, but I felt violated," she told AFP, explaining she had had a hysterectomy six years ago, and that her lack of recent contraceptive history may have led the pharmacist to suspect she was pregnant.

Stories of people facing similar struggles have come to light in the weeks since the United States Supreme Court overturned *Roe v Wade* on June 24, highlighting an overlooked consequence of new state-level bans or severe restrictions on abortion.

It's not yet clear how widespread the cases are, but national organizations including the Lupus Foundation of America and the American College of Rheumatology said they were aware of such concerns and asking people affected to come forward.

"The Arthritis Foundation supports unencumbered access to and coverage of FDA-approved drugs for managing arthritis in alignment with scientific and clinical guidelines, as well as evidence-based [medical recommendations](#)," the organization said.

The issue centers on [methotrexate](#), a drug which tempers inflammation and is commonly used against autoimmune conditions including inflammatory arthritis, psoriasis and lupus.

Methotrexate stops cell division and is given in [higher doses](#) as a cancer drug.

It can also sometimes be used in medical abortions, though not as frequently as the Food and Drug Administration-approved combination of two other drugs, mifepristone and misoprostol.

Nevertheless, many states have passed laws carrying threats of legal action against [health care workers](#) and pharmacies providing methotrexate.

## 'It's terrifying'

Another woman contacted by AFP, a 20-year-old university student from Ohio, said she has had a methotrexate prescription since 2020 to treat her lupus, which affects her kidney and liver and causes [joint pain](#).

A pharmacist at a national chain told her they were "no longer accepting prescriptions for methotrexate unless it was for the FDA-approved use of (treating) breast cancer, or the patient was not presumably fertile," she said.

She tried again, without success, to fill her prescription at a family-owned pharmacy, and this week got a letter from her doctor's office stating the practice would no longer be prescribing methotrexate because of the number of patients having difficulty accessing it.

Though the first pharmacy later changed its position, the experience left her "annoyed and angry," she said.

A third woman, 48-year-old Jennifer Crow, a writer and produce gardener in Tellico Plains, Tennessee, told AFP she received an automated call from CVS saying her methotrexate refill had been

declined "pending provider approval."

Crow said Methotrexate had helped her enormously in managing her inflammatory arthritis, allowing her to roll out of bed and get dressed without severe pain, and walk without a cane for the first time in years.

Though her doctor was able to resolve the situation, Crow, who has also had a hysterectomy, said she was worried for other chronic illness patients who didn't have the same access to resources that she does.

In statements to AFP, national pharmacy chains CVS and Walmart confirmed they were working to adhere to new state regulations in light of the high court's decision to revoke the [constitutional right](#) to an abortion.

CVS added: "We encourage providers to include their diagnosis on the prescriptions they write to help ensure patients have quick and easy access to medications."

Alisa Vidulich, policy director of the Arthritis Foundation, told AFP she was hopeful the situation might be remedied quickly as [medical professionals](#) and pharmacies developed new guidelines.

"But that may not actually be the case in all states and it may in fact turn into a longer term issue," she acknowledged.

Melissa, the nurse, said she was incensed at the double standard that allowed one of her best friends, who is a man, to get his methotrexate prescription filled right away with no questions asked.

"We're headed in the wrong direction and it's terrifying. I have two daughters. I don't want to see this," she said.

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