

'Substantial demand' for abortion pills ordered in advance, study finds

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A U.S. online provider of the mifepristone/misoprostol abortion pill combo saw a ten-fold jump in orders when the Dobbs decision overturning *Roe v. Wade* was first leaked in 2022, a new study finds.

Such orders declined a bit in the months after the decision was officially announced but have risen once again as women remain uncertain about access to the controversial pills.

"We observed substantial demand for advance provision of [abortion](#) medications," said a team led by Abigail Aiken, of the University of Texas at Austin.

"Requests peaked following the Dobbs leak and after conflicting legal rulings regarding FDA mifepristone approval created confusion and uncertainty," her team wrote.

They [published](#) their findings Jan. 2 in the journal *JAMA Internal Medicine*.

Aiken is an associate professor of public affairs at UT Austin. Her team looked at orders placed to Aid Access, an online telemedicine service that has offered advance access to abortion pills since September 2021.

They tracked orders placed during four periods: Before the Dobbs decision was first leaked to the public on May 2, 2022; after the leak, but before the decision was formally announced on June 23, 2022; after the formal announcement (June 24, 2022 to April 6, 2023); and between conflicting judicial rulings on the availability of one of the pills, [mifepristone](#) (April 7 to April 30, 2023).

Before the Dobbs decision was leaked, Aid Access received about 25 requests per day for advance access to the abortion pills combo, Aiken's team reported.

Immediately after the leak that Roe v. Wade would be overturned, orders skyrocketed 10-fold, to 247 orders per day. By the time the decision was formally announced, orders had subsided to about 89 per

day but have since steadily risen again to over 172 orders per day, the study found.

"States considering future abortion bans had the highest rates of requests, and requestors were motivated by a desire to preserve reproductive autonomy," Aiken's group noted.

When asked why they had ordered the pills, 74% of customers said they'd done so "to ensure personal health and choice," and 73% said they had done so "to prepare for possible abortion restrictions."

White, urban and more affluent women were most likely to order the pills in advance via telemedicine.

"A key focus for services will be ensuring affordability, visibility and access for racial and ethnic minority groups and marginalized groups," Aiken's group noted.

More information: Abigail R. A. Aiken et al, Advance Provision of Mifepristone and Misoprostol via Online Telemedicine in the US, *JAMA Internal Medicine* (2024). [DOI: 10.1001/jamainternmed.2023.7291](https://doi.org/10.1001/jamainternmed.2023.7291)

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