

Use of medication abortion rose after Dobbs decision

March 26 2024, by Robin Foster



As the U.S. Supreme Court prepares to hear arguments Tuesday in a case that could determine nationwide access to the abortion pill, a new study finds requests for the medication made outside the traditional health care system surged after Roe v. Wade was overturned.



There were about 26,000 more self-managed <u>medication</u> abortions than expected, based on trends before the ruling, researchers <u>reported</u> Monday in the *Journal of the American Medical Association*.

"What was once considered a marginal practice is becoming more mainstream," study author Abigail Aiken, an associate professor of public affairs at the University of Texas at Austin, told CNN.

"We have consistent findings that in response to abortion restrictions, particularly abrupt ones like the bringing in of an abortion ban, a trigger law, that the locus of where people are trying to access care shifts," she explained.

"So, when abortion becomes less available in the formal health care setting, people will look outside of the formal health care setting to meet their needs. Self-managed abortion is probably here to stay at its increased levels for as long as we have that reduced access in the formal health care setting."

In the study, her team compiled data from 15 sources that provide pills for self-managed medication abortion, including telemedicine organizations, community networks and online vendors.

They tracked trends in the number of requests for abortion medications and adjusted that based on the likelihood that they were used, which earlier estimates have pegged at between 86% and 99% of the time.

Requests specifically made for later use were excluded, and other methods of self-managed abortion, such as herbs, botanicals and <u>self-harm</u>, were not assessed.

Self-managed abortions happen outside of the formal health care system and without the formal supervision of a doctor or nurse, but most of the



sources that provide pills for medication abortion also provide information and support through online help desks or peer-to-peer networks.

The safety and effectiveness of medication abortion is well-established, and <u>recent research</u> has shown it's just as safe delivered through telehealth as through in-person clinics.

About half of the pills for self-managed medication abortions in the six months post-Dobbs were provided by <u>community organizations</u>, while another third were from telehealth providers and the rest from online vendors, investigators found.

While data on self-managed medication abortion trends is not available beyond the first six months after the Dobbs decision, a separate <u>report</u> tracked abortions within the formal health care system and found abortions actually increased in the year post-Dobbs and beyond.

In 2023, there were more abortions in the United States than there have been in more than decade, spurred by a surge in medication abortion.

A continued increase in self-managed abortions can have "huge public health implications," Aiken said. "Just because someone is now able to self-manage safely and effectively, that doesn't mean that they won't wish to interact with the formal <u>health</u> care setting at some point, either before, during or after their experience."

For instance, they may seek a checkup to make sure they're no longer pregnant or to help manage an incomplete abortion, she noted.

"I don't think we've seen this kind of picture in the U.S. for quite some time, and I don't know that our system is really prepared for that," she added.



More information: KFF has more on <u>medication abortion</u>.

Abigail R. A. Aiken et al, Provision of Medications for Self-Managed Abortion Before and After the Dobbs v Jackson Women's Health Organization Decision, *JAMA* (2024). DOI: 10.1001/jama.2024.4266

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