



Grandmothers For Reproductive Rights

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Senator Carney, Representative Kuhn, and Esteemed Members of the Judiciary Committee,

My name is Cait Vaughan and I am writing to testify on behalf of my employer, Grandmothers for Reproductive Rights (GRR!), and the more than 600 Maine residents we represent, to urge you to vote against the following proposals today: LD 253, LD 682, LD 886, LD 887, LD 975, LD 1007, and LD 1154. GRR! is a grassroots organization that amplifies the voices and status of grandmothers and elders who work intergenerationally, through grassroots education, advocacy, and community-centered initiatives to secure access to sexual and reproductive health, rights, and justice for present and future generations.

GRR! opposes all of these bills and wishes to emphasize that Mainers have repeatedly voted for a majority of elected officials in both chambers who support the right to abortion without undue barriers. These proposals are a waste of the very busy legislature's time. We do, however, wish to focus in particular on exposing the disinformation proposed in both LD 886 and LD 1007 regarding medication abortion. Each of these proposals promote the concept of Abortion Pill Reversal (APR), which has become a popular piece of anti-abortion propaganda in recent years. The truth is that APR is not a medically proven or evidence-based protocol, and we find it concerning that lawmakers would attempt to require clinicians to spread junk science like APR that could endanger patient health if the advice were taken seriously and acted upon.

Firstly, it is critical to note the overwhelming safety and efficacy of medication abortion regimens. The typical protocol used by clinics in the United States involves patients taking a first medication called Mifepristone that stops pregnancy growth and development by blocking progesterone, a hormone that is key to fetal development. The second medication is called Misoprostol and has many uses, including softening of the cervix during a medical induction of labor. In the case of medication abortion, Misoprostol causes the uterus to contract and expel pregnancy tissue. These two medications have very few contraindications, are safer than Viagra and penicillin, and have been successfully used to terminate pregnancies by millions of people across the world for more than 20 years. For more information on the safety and efficacy of these medications, you can peruse this comprehensive review: <https://pmc.ncbi.nlm.nih.gov/articles/PMC10622735/>

In terms of Abortion Pill Reversal (APR), the American College of Obstetricians & Gynecologists (ACOG) has summarily dismissed the recommended APR protocol of taking progesterone following the ingestion of Mifepristone as "not supported by science" (view source here: <https://www.acog.org/advocacy/facts-are-important/medication-abortion-reversal-is-not-supported-by-science>). Furthermore, there have been no completed studies on APR that received Institutional Review Board (IRB) approval, and the only one that was begun in 2020 shut down early due to safety concerns for study participants.

We hope this review of the facts bolsters lawmakers' understanding not only of the quality science behind medication abortion protocols, but also the dangers of legislators with zero medical credentials and qualifications proposing the enforcement of scripted clinician counseling, especially when it comes to stigmatized health care like abortion. We must follow the scientific studies and conclusions drawn by experts in the field, not advance the whims of anti-abortion extremists who would spread disinformation and propaganda without regard for the health of Mainers.

Please vote down all of these proposals and continue Maine's legacy of protecting access to sexual and reproductive health care rooted in evidence and compassion.

Thank you,

Caitlin Vaughan

Cait Vaughan, Director of Programs & Outreach

Grandmothers for Reproductive Rights (GRR!) works, through education and advocacy, to secure access to sexual & reproductive health, rights & justice for present & future generations.