

Open Letter to Sandra E. Brooks, MD, MBA, FACOG, CEO of the American College of Obstetricians and Gynecologists

CC: The Board of Directors of the American College of Obstetricians and Gynecologists

Dear Dr. Brooks,

We are the American Association of Pro-Life Obstetricians and Gynecologists (AAPLOG), an organization of over 7,000 obstetrician-gynecologists and other medical professionals committed to defending the lives and dignity of our pregnant and preborn patients.

Over the past two years, we have fought to provide clarity and accuracy on induced abortion and state abortion laws, combating **false** narratives such as the following:

- Pro-life laws do not allow physicians to perform medically indicated procedures during medical emergencies;
- Women will be prosecuted under pro-life laws for seeking induced abortions;
- Abortion drugs are safe to take with little to no medical supervision;
- And many more.

We have seen that this misinformation creates fear and confusion among physicians and patients. This has deadly consequences.

Amber Thurman and Candi Miller both passed away in Georgia after taking abortion drugs.

Ms. Thurman died due to complications related to those drugs as well as what appears to be gross medical negligence. It has been suggested that physicians may have failed to give her lifesaving care because they falsely thought the Georgia law would not allow them to.

Ms. Miller died after ordering abortion drugs online, taking them at home, and not seeking medical attention. Her family stated that she was hesitant to seek medical care because she mistakenly believed she would be prosecuted for undergoing an induced abortion.

Furthermore, both women passed away after taking abortion drugs, which we have long heard are "safer than Tylenol" and can even be "self-managed" without medical supervision.

Lying to patients and physicians can have deadly consequences. For our colleagues and patients, medical organizations must commit to educating the public based on facts, not political agendas (on either side).

ACOG can substantially impact Americans' understanding of these issues. Here are just a few ways that ACOG and AAPLOG, despite our differences in opinions on induced abortion, could come together to improve education and patient outcomes:

- Give clear and accurate information on the risks of the combination of mifepristone and misoprostol for induced abortion, and advocate for safeguards to ensure that women receive appropriate supervision during the abortion process. This would include an inperson evaluation to rule out contraindications and at least one follow-up visit to ensure she is not experiencing complications.
- Create educational materials for physicians treating women in emergency rooms on how to recognize complications of these drugs, including having a high index of suspicion for clostridial sepsis which presents with an atypical presentation and is a known risk of mifepristone.
- Work with state-level attorneys general, health departments, and medical boards to ensure that physicians are receiving appropriate guidance on their state laws.
- Promote educational content that offers clarity on state abortion laws and empowers
  physicians to offer their patients the care they need.
- Assure women that they will not be prosecuted for seeking care while facing abortion complications.

Our nation's maternal mortality rate is already shamefully high, with 80% of maternal deaths being preventable – including Ms. Thurman's and Ms. Miller's. As physicians, we cannot afford to let any more of the patients we were sworn to protect die due to false understandings of state abortion policy or distorted narratives surrounding abortion drugs.

We look forward to working alongside ACOG in the service of our patients and look forward to hearing from you.

Respectfully,

Christina Francis, MD

CEO

American Association of Pro-Life Obstetricians and Gynecologists (AAPLOG)