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New Study Reveals Increasing Severity and Frequency of Emergency Department Visits Following Use of Abortion Drugs

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Charlotte Lozier Institute

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Washington, D.C.— A new study published in the *International Journal of Epidemiology and Public Health Research* by Dr. James Studnicki, Dr. Ingrid Skop, Tessa Cox, and other Charlotte Lozier Institute (CLI) scholars, reveals the increasing severity and frequency of emergency department (ED) visits among Medicaid-eligible women from 17 states where Medicaid pays for abortion following different pregnancy outcomes. The study, titled “Comparative Acuity of Emergency Department Visits Following Pregnancy Outcomes Among Medicaid Eligible Women, 2004-2015,” confirms the risks of abortion drugs, presenting data that highlights their adverse effects on women. The study focused on ED visits within 30 days of a

pregnancy outcome—whether use of abortion drugs (mifepristone and misoprostol), surgical abortion, or live birth—and compared them to visits by women who were not pregnant.

Key Findings Include:

The likelihood of an ED visit with a severe or critical acuity code following the use of abortion drugs was more than twice as high as that of women who were not pregnant.

Compared to surgical abortions and live births, abortion drugs were associated with significantly higher rates of severe or critical ED visits.

The overall acuity and number of ED visits have increased across all pregnancy outcomes from 2004 to 2015, with the most dramatic rise seen following the use of abortion drugs.

“Abortion drugs now constitute a significant portion of all abortions in the United States. Although abortion providers acknowledge the high rate of ED visits after abortion, they minimize their seriousness by labeling them as ‘visits for symptoms, not complications,’” said **Dr. Studnicki, CLI’s Vice President and Director of Data Analytics**. “Our study reveals that by 2015, 75% of these visits within 30 days of the use of abortion drugs were coded as severe or critical—conditions that require urgent medical attention or

pose an immediate threat to life, such as severe respiratory distress, sepsis, or new neurological symptoms like paralysis or suicidal ideation.”

Charlotte Lozier Institute was launched in 2011 as the education and research arm of Susan B. Anthony Pro-Life America. CLI is a hub for research and public policy analysis on some of the most pressing issues facing the United States and nations around the world. The Institute is named for a feminist physician known for her commitment to the sanctity of human life and equal career and educational opportunities for women.

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