

1 Complications Translations
Complications: Abortion's Impact on Women publication and Handbooks are now available worldwide in French, Spanish and Portuguese.

2 Echoes Stories
 New *Echoes: Palliative Care Stories of Canada* are available online at echoescanada.com. Now a collection of 8 narratives.

3 New Staff
 Hired research intern Sona Mahtani to work under the guidance of Dr. Zeni, Dr. Pritchard, and Dr. Bouchard.

4 New Research
 Published new research findings on chemical abortion available exclusively on our website at www.deveber.org/book-store

5 Updated Complications
 Updated *Complications: Abortion's Impact on Women* Chapter 2, "Maternity and Infant Mortality". Available online at www.deveber.org/book-store

1 New Publication
 New brochure publication *What Do I Say When a Loved One Wants MAiD?* Available in 2026.

2 Annual Lecture
 To be announced in 2026! Hope to see you there.

Why Your Donation Matters

Every year, we ask for your support and this year is no different. As we reach out again, we want to be sure you know just how deeply your generosity strengthens the deVeber Institute.

Your contributions don't just sustain our work — they make it possible.

Where do we receive funding from?



How are donations and grants used?



We are wise with your money. Every dollar truly makes an impact.

We keep overhead costs low with a team of one paid staff member and 17 volunteer Directors and Advisors.

Remember, all donations are **tax-deductible** and directly support future projects like the initiatives highlighted in the sidebar.

You can donate by cheque or credit card using the enclosed donation slip, or online at CanadaHelps, or by phone at 416-800-2803.

This holiday season, let's come together to inspire hope and cultivate meaningful change that supports Life.



From my family to yours, Happy Chanukah, Merry Christmas, and warmest wishes for the New Year.



Complications: Global Influence

The deVeber Institute's publication *Complications: Abortion's Impact on Women* is the most comprehensive review of the global research on abortion. This year, we expanded its reach by translating both the full volume and the abridged *Complications* handbook into French and Portuguese, joining the existing Spanish edition.



The French and Spanish translations are exclusively available on our website at deveber.org/book-store



French

Complications Handbook translated and published in collaboration with Laurie Gagnon in Quebec.



Portuguese

Complications full volume translated and distributed by CEDET Publishing Company in Brazil.



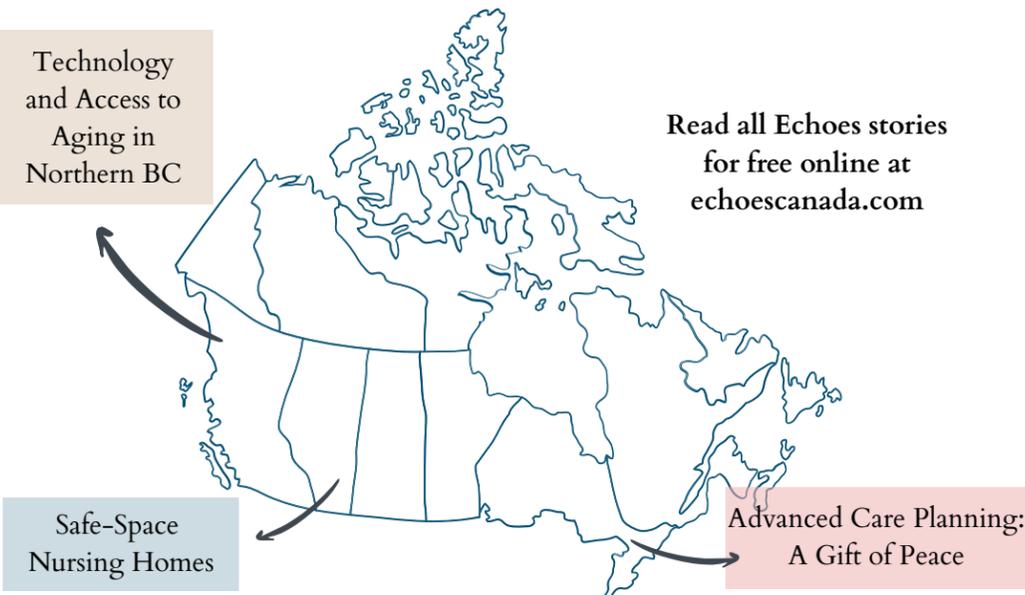
Spanish

Complications Handbook translated and published in collaboration with Sofia de Köhler in Guatemala.



Echoes: Voices of Canadian Palliative Care

Echoes: Palliative Care Stories of Canada brings together inspiring stories that celebrate the people and achievements shaping palliative care from coast to coast. New stories are added regularly — explore some of the latest below.



Celebrating the life of Janet Ajzenstat

We are sad to say goodbye to our long-time advisor and friend, Janet Ajzenstat, who died peacefully this past spring.

Janet's academic work helped revolutionize Canadian political history through her studies of the debates surrounding the adoption of the 1867 Constitution.

In her obituary, her son Sandor recounts, "A few days ago I told Oona that I didn't want Mum to ever die, but a while before that we had agreed that life without death would be meaningless. So, it is her spirit that will be living on, within our hearts, and in the hearts of others who have loved her."

You will be missed Janet.




The deVeber Institute for Bioethics and Social Research

255 - 4936 Yonge Street
 Toronto, ON
 M2N 6S3



bioethics@deveber.org
www.deveber.org
 416-800-2803

Executive Director
 Zoe Stewart-Bedard

Charitable Business Number
 11896 4915 RR 0001

CHEMICAL ABORTION

By Sonali Mahtani and the deVeber Institute for Bioethics and Social Research



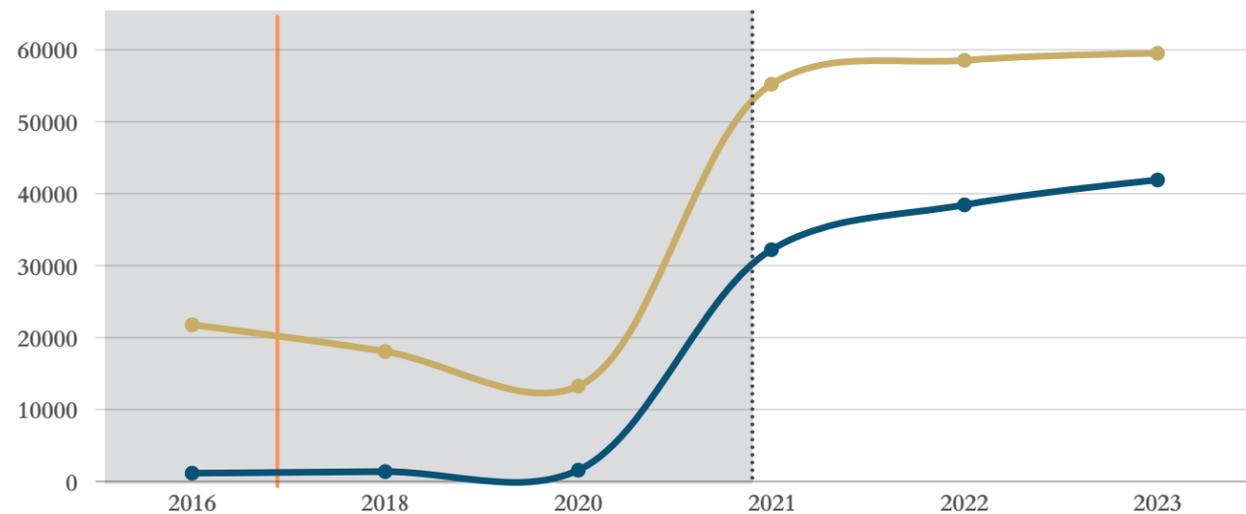
SONALI MAHTANI

“I am Sonali, an international medical graduate from the Philippines, currently preparing for exams to qualify for residency training in Canada. My passions include primary care, teaching, and mentoring.”

Chemical abortions are often described as a safe, private, and increasingly accessible option. *Complications: Abortion's Impact on Women* compared the risks of surgical and chemical abortions in Chapter 13, and since its publication, chemical abortions have become far more common in Canada. This past summer, the deVeber Institute collaborated with researcher Sonali Mahtani on a new study examining chemical abortions, raising important questions about how complications are defined, tracked, and reported.

The research explores complications associated with chemical abortions, particularly bleeding and related outcomes, and assesses the systems used to monitor adverse events in Canada and internationally. It also reviews emerging evidence on the use of high-dose progesterone, commonly known as the “reversal pill,” drawing on studies published between 2015 and 2025.

The Increase of Chemical Abortions in Canada



■ Surgical Abortions ■ Chemical Abortions

Notes:

- Mifepristone was introduced in Canada in 2015 and became widely available by 2017.
- Statistics prior to 2021 represent abortions performed only in hospital settings. Data from 2021 onward include all facilities, including non-hospital settings.

WHAT ARE CHEMICAL ABORTIONS?

Chemical abortions, often called *medical abortions*, use a two-drug regimen of Mifepristone and Misoprostol to end a pregnancy. In Canada, these medications are provided together as Mifegymiso, which contains one Mifepristone tablet followed by four Misoprostol tablets. Mifepristone works by blocking the action of progesterone, while Misoprostol induces uterine contractions to deliver the fetus. The delivery of the aborted fetus typically takes place outside of any medical facility. Note: This is not the “morning after pill,” a common but incorrect point of confusion.

COMPLICATIONS

- The U.S. has reported 36 **deaths** associated with mifepristone since 2000, including 13 sepsis-related deaths, most linked to *Clostridium sordellii* and misoprostol use.
- **Hemorrhage definitions vary:** There is no standardized definition of hemorrhage in abortion literature, making complication rates difficult to compare. Blood loss thresholds and treatment criteria differ widely across studies. Focusing only on transfusions overlooks other serious bleeding events requiring ER visits, uterotonics, IV fluids, or surgical intervention.
- ICD-9 coding issues: “**Legally unspecified**” abortion codes (637.xx) make it impossible to know how many are actually legal abortions and their complication rates, creating gaps in safety data.
- High prevalence of **anemia:** About 14% of Canadian women of reproductive age are anemic, raising concerns about a greater risk of bleeding during chemical abortion.

REVERSAL PILL

The “reversal pill” uses supplemental progesterone to counteract mifepristone, based on the understanding that mifepristone competes with, but does not irreversibly block, progesterone. Early studies in 2012 reported successful continuation of pregnancy in 4 of 6 women, and an overall 48% reversal rate was observed in a larger follow-up analysis of 547 cases, which increased to 64% when progesterone was administered intramuscularly. Research on progesterone reversal continues to develop, with early results suggesting positive outcomes for women who seek to continue their pregnancies after taking mifepristone.