Committee Secretary
Community Affairs Committee
Department of the Senate
Parliament House
Canberra ACT 2600

SUBMISSION TO THE SENATE COMMUNITY AFFAIRS LEGISLATION COMMITTEE

Inquiry into the Therapeutic Goods Amendment (Repeal of Ministerial Responsibility for Approval of RU 486) Bill 2005

This submission is made as an individual citizen.

As a medical graduate and a former adviser to the Commonwealth Government on issues related to women's health I have some qualification to comment on the safety and efficacy of Mifepristone, RU486 versus surgical methods to prevent the implantation of a fertilized ovum in the uterine wall. However, this is best determined by the Therapeutic Goods Administration with the advice of suitably qualified experts and the scientific literature on the subject.

As an individual I have concerns about the number of induced abortions in Australia and believe, as a nation we could reduce this by a more open and practical discussion about human relationships and education on safe and responsible sexual activity. However, it is not appropriate or useful to visit these issues in this submission.

My submission concerns the substance of this inquiry - that present legislation requires the Commonwealth Minister of Health to specifically sanction the importation of a substance that could be used to procure an abortion.

This legislation places the Minister in a vulnerable position in that the opinion and wishes of some of the individuals who have voted for him/her weigh heavily against decisions that must be made on a strictly scientific basis – in this case the safety and efficacy of medically induced versus surgically induced abortion during the first trimester of pregnancy – on behalf of the entire Australian community.

Health Ministers are frequently untrained either in medicine or in scientific method and are not in a position to judge either the merits or dangers of an agent capable of changing physiological function or judging the validity of advice received. In this area, Australia has been well served by the Therapeutic Goods Administration and such decisions should remain the responsibility of this agency.

While it can be argued that RU486 differs from other medications in that it involves the viability of a fertilized ovum as well as the health and well being of an individual woman, this applies equally to surgically induced abortion and is not relevant to this inquiry.

Logically, if this argument were to be sustained, the Minister of Health would be required to approve surgical instruments that could be used to procure an abortion.

This legislation sets a precedent that has potential dangers both for the community and for the reputation of our health system.

A number of medications have the potential to kill or seriously harm the unborn child. Such agents include chemotherapeutic agents used to treat malignancy during pregnancy and agents to treat severe mental illness in suicidal pregnant women. The risks and benefits of using such medications must be weighed very carefully for each individual situation. Such decisions are made, as they should be, by consultation between the individual woman and her medical advisers. The decision on the safety and efficacy of the drugs concerned are made, as they should be, by the Therapeutic Goods Administration.

I therefore request that the Senate inquiry make its recommendations with due reference to the object of the inquiry – the return of decision making on the safety and efficacy of all drugs, including RU486 to the appropriate authority – and with respect for the integrity of the Australian health system.

Yours sincerely

Margaret Dean MBBS. FRACP.FAFPHM 18 January 2006