



Christian Voices for Life

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www.ChristianVoicesForLife.org

Dear Pharmacist / Pharmacy Manager:

I am sure that as a pharmacist, you gain satisfaction from knowing that you are providing people with the medications that can relieve their discomfort or even cure their illness. But do you want to be providing “medicine” designed to kill rather than heal?

I am sure you are aware of the “morning after pill” (“Plan B”) or “emergency contraception.” Depending on the time of the cycle when these drugs are taken, they may prevent ovulation, or they may cause the death of a preborn child by preventing implantation. Pharmacists for Life International reports that “Numerous studies support the notion that the high dose, high-powered steroid(s) found in Emergency Abortion Drugs like Plan B are abortifacient 75 to 89% of the time.”(1) In fact all hormonal birth control methods, whether the hormone is delivered by pill, patch, shot, or implant, can act to prevent implantation if conception does take place.(2,3) (Also see http://pfli.org/faq_oc.html and your Physician’s Desk Reference.)

While some people may define “pregnancy” as beginning at implantation, **there is no question that a new, unique, human life begins at the union of the egg and sperm. If implantation is blocked, that new life dies.** If you have not been aware of this action of birth control pills, it is probably because the manufacturers are not overly anxious for it to be known.

Many women using birth control or the morning after pill may believe that they are truly preventing a new life from coming into being. By defining “pregnancy” to begin at implantation rather than conception, the manufacturers of the drugs can present the products as “preventing” and not ending “pregnancy.” This misleading language is clearly intended to avoid moral qualms concerning the ending of life.

As a pharmacist charged with educating your clients on the use of the drugs you dispense, please **make sure that everyone who purchases these drugs at your pharmacy is aware**

1. of the serious health risks of the pill: particularly, increased risk of blood clots and breast cancer. Even third generation low dose pills are associated with increased risk of stroke (4), and if the Pill is taken before a woman’s first pregnancy, there is a 44% increased risk of breast cancer.(5)

2. that they could be conceiving a child and then killing that child with the use of these drugs.

Isn’t it true that **informed consent is a basic ethical standard in the practice of medicine?** A simple label that could be used for this purpose is shown here:

One reader who learned of the abortifacient method of birth control by reading an article online commented:

I've literally been crying for an hour after reading this.

The thought that there is a possibility that I may

have killed my own child rips me apart. I've been on the pill 3 years now since my husband and I

were married. We both just talked about this and I am now going off the pill. We both wish we

would have know [sic] this sooner. “(6)

Please be advised:

1. Hormonal birth control has been linked to increased risk of stroke and breast cancer.
2. It is possible for ovulation and conception to occur, and the newly conceived child to be prevented from implanting in the uterus.

If you do agree that abortion is wrong, that killing a preborn child is morally offensive, how do you feel about participating in that act, by providing and dispensing drugs that are being **purchased for the**

purpose of “preventing” birth – but **which, in some cases, will actually be killing a child?** Please keep in mind that the birth control pill and morning after pill do not address any disease, but are rather being given to perfectly healthy individuals **in order to disrupt, rather than aid, the normal functioning of their bodies.**

The ultimate question is this: If you are aware that **a drug may kill a child** that has been conceived, **can you morally fill that prescription?**

If you control what drugs are carried in your pharmacy, can you carry these drugs and so facilitate the distribution of the drug, even if you do not personally hand out the pills?

I encourage you to seek out the support of [Pharmacists for Life International](http://www.pfli.org) (www.pfli.org). They have a [FAQ page](#) on conscience protection and moral questions about what one should or should not do. There is also a pamphlet from OneMoreSoul.com entitled *Discontinuing Contraceptives in Your Pharmacy: One Pharmacist’s Insights*. The article also addresses what employee pharmacists can do.

Please speak to your employer about your right to follow your conscience. Religious freedom is not limited to choosing where to worship; it includes the freedom to refuse to participate in something you believe is morally wrong. Can you at least begin by informing your employer that you feel that the dispensing of these drugs is immoral; that you are causing harm to your clients by doing so? Perhaps other pharmacists working at the pharmacy can fill those prescriptions rather than you. Perhaps a frank discussion with your employer might eventually lead to a change in policy! Pharmacists for Life lists some employers (Eckerd-Brooks, Walgreens, CVS) who have been hostile to allowing pharmacists to follow their conscience, and one (Harris-Teeter) that has a more positive and accommodating policy. Perhaps if you’re current employer will not allow you to follow your conscience, you could look for another job opportunity with one who will.

Surely your pharmacy carries hundreds of different medications which offer legitimate and ethical help to many people. Is really of significant economic value to include abortifacient drugs in what they offer?

Please consider these questions and prayerfully discern your best course of action.

My prayers are with you, that you can make a choice that will lead to a clear conscience and peace of mind.

Sincerely,



Marie McCoy

Executive Director, Christian Voices for Life of Fort Bend County

Ref.

1. <http://www.pfli.org/main.php?pfli=planbfaq#.V5ZyMLgrLNM>
2. “Preventing Pregnancy, Protecting Health: A New Look at Contraceptive Choices in the United States” by Susan Harlap, Kathryn Kost, and Jacqueline Darroch Forrest (The Alan Guttmacher Institute, 1991) pp. 17-28.
3. “How Do the Pill and Other Contraceptives Work” The Polycarp Research Institute, accessed 7/25/16 at http://www.polycarp.org/how_does_the_pill_work.htm
4. Baillargeon JP, et al. Association between the current use of low dose oral contraceptives and cardiovascular arterial disease: a meta-analysis. *J Clin Endocrinol Metab.* 2005; 90(7):3863-3870
5. Kahlenborn C, et al. Oral contraceptive use as a risk factor for pre-menopausal breast cancer: a meta-analysis. *Mayo Clin Proc.* 2006; 81(10):1290-1302.
6. From <http://www.epm.org/resources/2010/Mar/21/responses-readers-does-birth-control-pill-cause-ab/>