

the warning states that a woman should only use Depo-Provera Contraceptive Injection as a long-term birth control method (for example, longer than two years) if other birth control methods are inadequate for her.”⁶

Use of Depo-Provera may be associated with ectopic pregnancy, thrombophlebitis (inflammation of blood vessels associated with blood clots), pulmonary embolism (obstruction of the pulmonary artery by a blood clot, air bubble, or other material, which can cause sudden death), cerebrovascular disorders, and partial or complete loss of vision in mothers. More than 5 percent of users suffer headaches, nervousness, abdominal pain or discomfort, dizziness or asthenia (weakness). One to 5 percent reported one or more of these ailments: Decreased libido (sexual desire), depression, nausea, insomnia, leukorrhea (abnormal vaginal discharges), pelvic and breast pain, rashes, hot flashes, edema (swelling), vaginitis and acne.⁷

6 Despite increased HIV risks, promoters won't take “No” for an answer: The Bill and Melinda Gates Foundation has made Depo-Provera/Sayana Press the centerpiece delivery method of its “Family Planning 2020” campaign, which aims to provide 120 million poor African and Asian women with long-term contraceptives like Depo-Provera by the year 2020.⁸ When a Gates Foundation-funded study found in 2011 that Depo-Provera was likely to more than double HIV transmission rates in African women,⁹ the foundation did not hesitate to continue featuring the drug in its implementation of FP2020.

Notes:

1. Pfizer, “Highlights of Prescribing Information” and “Clinical Pharmacology: Mechanism of Action,” *Depo-Provera Contraceptive Injection (Depo-Provera CI) Full Prescribing Information*, October 2010, accessed November 24, 2014, http://www.accessdata.fda.gov/drugsatfda_docs/label/2010/020246s036lbl.pdf.
2. American College of Obstetrics and Gynecology (ACOG), “Terms Used in Reference to the Fetus,” *Terminology Bulletin* (Chicago: ACOG, September 1965).
3. Upjohn Pharmaceutical Company, “Now Available in the U.S.: Depo-Provera Contraceptive Injection,” Patient Information Brochure, December 1992.
4. “Contraceptives: Case for Public Enquiry,” *Economic and Political Weekly* 29 (1994): 825–6.
5. Amy Kaler, “A Threat to the Nation and a Threat to the Men: The Banning of Depo-Provera in Zimbabwe, 1981,” *Journal of Southern African Studies* 24 (1998): 347-376.
6. U.S. Food and Drug Association, “Black Box Warning Added Concerning Long-Term Use of Depo-Provera Contraceptive Injection,” *FDA Talk Paper*, November 17, 2004, accessed November 24, 2014, <http://web.archive.org/web/20051221195621/http://www.fda.gov/bbs/topics/ANSWERS/2004/ANS01325.html>.
7. Pfizer, “Adverse Reactions,” *Depo-Provera Contraceptive Injection (Depo-Provera CI) Full Prescribing Information*, October 2010, accessed November 24, 2014, http://www.accessdata.fda.gov/drugsatfda_docs/label/2010/020246s036lbl.pdf.
8. “About FP2020,” Family Planning 2020, accessed December 23, 2014, www.familyplanning2020.org.
9. Renee Hefron, et al., “Use of hormonal contraceptives and risk of HIV-1 transmission: a prospective cohort study,” *The Lancet* 12 (2012): 19–26.

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PRO-LIFE TALKING POINTS

DEPO-PROVERA: DANGEROUS FOR WOMEN, DEADLY FOR UNBORN CHILDREN

Depo-Provera, a hormonal anti-fertility drug, acts as both a contraceptive and abortifacient and has over sixty unhealthy side effects.



HUMAN LIFE INTERNATIONAL

Depo-Provera: Dangerous for Women, Deadly for Unborn Children

1 What is Depo-Provera? The Depo-Provera injection is a type of hormonal anti-fertility drug that works at times as a contraceptive, but also sometimes as an abortifacient, a drug that causes abortion in some instances. Its active ingredient is depot medroxyprogesterone acetate (DMPA), a synthetic form of the natural hormone progesterone originally developed for the treatment of uterine cancer in the 1950s. A woman on this drug receives 150 milligrams of DMPA via deep intramuscular injection every three months, though there are other delivery methods under development, including a self-administered version subcutaneous injection version being marketed in Africa as “Sayana Press.”

2 Depo-Provera has both contraceptive and abortifacient effects: Depo-Provera has three effects, only two of which are contraceptive. Like most hormonal drugs, it can both prevent ovulation and thicken cervical mucus, making it difficult for the sperm to reach the ovum. Both of these effects would prevent conception, hence are “contraceptive” effects. The patient information insert for Depo-Provera, however, says that it also “inhibits the secretion of gonadotropins which, in turn, prevents follicular maturation and ovulation and results in endometrial thinning.”¹ When the endometrium, the

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lining of the uterus, is thinned, it is rendered hostile to implantation. This means that Depo-Provera sometimes acts as an abortifacient, since it ends the life of a new human being after conception.

3 The debate over effects is not about science, but about language: Many women opposed to abortion would be shocked to learn that the steroid drugs they take, such as Depo-Provera, can also cause abortions at the earliest stage of pregnancy. In 1963, the U. S. Department of Health, Education and Welfare (HEW) defined “abortion” as “all the measures which impair the viability of the zygote at any time between the instant of fertilization and the completion of labor.” The accepted government and scientific definition of pregnancy said it began at fertilization, before implantation. However, in the mid-1960s, in order to make abortifacients acceptable to women and to circumvent laws designed to prohibit abortion, pro-abortion experts changed the beginning of conception from fertilization to implantation.² Under the new definition of conception, if a device or drug — such as Depo-Provera — prevents implantation, then no abortion takes place even though it acts after conception.

4 Depo-Provera is used for population control. Depo-Provera was approved for use in the United States in October 1992. In June 1993, however, Canada’s Department of Health and Welfare prohibited the use of Depo-Provera, saying that the drug did not meet Canadian safety standards. Since it is controlled by doctors more than by women, population controllers consider Depo-Provera to be an excellent tool. In fact, the Food and Drug Administration approved the drug primarily under pressure from groups concerned about the “population explosion” in the Third World.⁴ Depo-Provera is now available in more than one hundred countries. As with other abortifacients that may have posed a danger to Western women, Depo-Provera was extensively



As with other abortifacients that may have posed a danger to Western women, Depo-Provera was extensively tested on Third World women first.

tested on Third World women first. The World Health Organization (WHO) used Depo-Provera on more than 11,000 women in Kenya, Mexico and Thailand, before submitting it to the FDA for approval. Depo-Provera was also tested on Zimbabwean women, many of whom were forced to use it afterwards. This widespread coercion led to the banning of Depo-Provera in Zimbabwe.⁵

5 Depo-Provera can cause many adverse reactions: Like all steroid drugs powerful enough to impair fertility effectively, Depo-Provera can cause a host of side effects. Upjohn’s information pamphlet on Depo-Provera lists more than 60 adverse reactions suffered by women who use the compound. Women on Depo-Provera report an average weight gain of 5.4 pounds in the first year and 16.5 pounds over six years. An FDA paper from November 2004 says that women should not use Depo-Provera for more than two years: “The black box warning for Depo-Provera highlights that prolonged use of the drug may result in significant loss of bone density, and that the loss is greater the longer the drug is administered. This bone density loss may not be completely reversible after discontinuation of the drug. Thus