



MEDIA STATEMENT - 14th February 2006

DEFEAT PROPOSED AMENDMENTS TO RU486 PRIVATE MEMBERS BILL

Two national reproductive health organisations today urged MPs to reject both the proposed Laming and Kelly amendments to the *Therapeutic Goods Amendment (repeal of Ministerial Responsibility for approval of RU486) Bill 2005*

Both of these amendments will defeat the purpose of the Bill.

Politicians rather than the appropriate medical and scientific professionals would retain power over assessing the safety of RU486. Under the Laming amendment, any member of parliament can object to the approval of RU486 and force the parliament into long proxy debates about abortion.

In practice, the amendments would ensure that every application for RU486 evaluated by the TGA would be debated in Parliament.

Parliamentary processes would be tied up for weeks in debates over abortion. Minority pressure groups in marginal electorates will wield disproportionate power and tie up tax payer funded resources of MPs.

These amendments will be more restrictive than the current arrangement requiring Ministerial Approval.

The rigorous process of assessment of an application to the Therapeutic Goods Administration can cost a pharmaceutical company at least several hundreds of thousands of dollars,

sometimes in the order of a million dollars. Why would any commercial enterprise spend such vast sums to obtain approval of a drug on grounds of scientific evaluation of safety and efficiency, faced with the possibility of a capricious disallowance through the views of a single Senator or member?

No pharmaceutical company will apply to import and distribute RU486 into Australia if the Laming amendment is adopted.

Australians will be denied the opportunity of access to a drug that has been approved by scientific and medical bodies in over 30 countries.

We urge members of the House of Representatives to adopt the Bill as moved by Dr Washer, to reject both amendments, and to rely on the expertise of the TGA to assess the drug, and the probity of the RANZCOG to develop appropriate clinical protocols.

For further comment

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