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AMERICAN LIFE LEAGUE

The Abortion Pill in 2026

From Shield Laws to ‘Miso Cards’ and DIY Pills

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KEY FINDINGS

- Independent analyses and real cases show serious complication rates far higher than many abortion advocates claim, especially with telehealth and later-gestation use.
- Federal protection still shields mifepristone—including widespread mail-order access—despite dozens of state restrictions.
- Twenty-eight states limit the abortion pill on paper, yet shield laws in eight states let out-of-state providers ship it nationwide with near impunity.
- A New York doctor sued by Texas and Louisiana (including a felony charge involving a minor) was fully protected by New York's shield law, prompting an even stronger "Shield Law 2.0."
- The Supreme Court restored mail-order shipping after a brief Fifth Circuit Court block, leaving restrictive states largely unable to stop the flow.
- The FDA approved a new generic version of mifepristone in 2025 while delaying the release of its own safety review until early 2027.
- New abortion pill marketing pushes "just-in-case" stockpiling and rebrands the same drugs as "missed period pills" that require no pregnancy test.
- Misoprostol-only abortions, "miso cards," and DIY recipes using veterinary powder are openly promoted as workarounds.

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Introduction

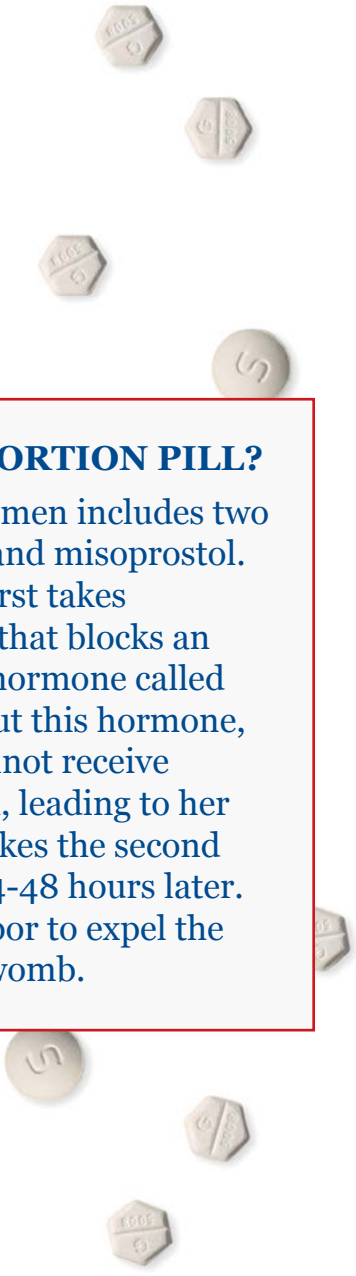
This report is an update to ALL's 2024 investigation and report entitled *Beneath the Surface: Exposing the Abortion Pill Drug Cartel*.[1] In that report, we discussed both the obvious and hidden dangers of the abortion pill regimen.

For this report, our research team examined the latest legal battles, the FDA's continued expansion of supply, the rise of "just-in-case" stockpiling, the rebranding of abortion pills as "missed period pills," and the growing promotion of riskier misoprostol-only and DIY methods.

Despite lawsuits, public outcry over its risks, and dozens of state restrictions, mifepristone remains federally protected and available by mail, and it is flowing into every state and territory in the US. Shield laws in eight states now allow out-of-state abortion providers to prescribe and ship the drugs across borders with near impunity. At the same time, a growing network of underground "community partners" ships free or low-cost pills with almost no verification—no proof of pregnancy, no identity check, and no medical screening—directly into states that have banned or tightly limited abortion.

This report documents the life-threatening and life-altering costs of the abortion pill regimen.

In the four years since the Supreme Court's *Dobbs* decision returned abortion policy to the states, one reality has become unmistakable: The abortion pill market is not just surviving, it is thriving. And what emerges is a clear picture: While pro-life states fight to protect women and preborn children, federal policy, interstate shield laws, and black-market networks have rendered many of those protections largely symbolic. As one prominent abortion advocate put it, "The genie is out of the bottle."[2]



WHAT IS THE ABORTION PILL?

The abortion pill regimen includes two drugs: mifepristone and misoprostol. A pregnant mother first takes mifepristone, a drug that blocks an essential pregnancy hormone called progesterone. Without this hormone, the preborn baby cannot receive nutrients and oxygen, leading to her death. The mother takes the second drug, misoprostol, 24-48 hours later. This drug induces labor to expel the dead baby from the womb.



Current Status of the Abortion Pill in the US and Legal Attempts to Stop It

CURRENT LAWS

Since ALL's 2024 report, mifepristone has continued to receive federal protection, overriding any state-level attempts to block or police this drug. This federal protection includes the widespread accessibility of mifepristone through the postal service, as the FDA's approval of mail-order abortion pills through its 2023 REMS rules still stands.

The Guttmacher Institute, a pro-abortion research group, claims that as of August 2026, 28 states restrict access to mifepristone in varying degrees. According to its research, some of the restrictions on mifepristone in these states include the following:[3]

- 26 of the 28 states only allow licensed abortionists to prescribe the abortion pill
- 6 ban the use of telehealth for the abortion pill
- 19 require an in-person visit for patients to obtain the abortion pill
- 3 prohibit the mailing of abortion pills to a patient

Although these laws attempt to limit licensed abortionists and their staff from prescribing the abortion pill into or out of the respective state, they do not prevent the abortion pill from entering those states through other channels. Shield laws in eight states and the rise of community partner networks continue to allow these drugs to flow into all 50 states and US territories.

SHIELD LAWS

Following the 2022 *Dobbs v. Jackson Supreme Court* decision, 23 states and Washington, DC, enacted shield laws to protect abortionists and pregnant women seeking an abortion. Of these 23 states, eight (California, Colorado, Maine, Massachusetts, New York, Rhode Island, Vermont, and Washington) have enacted specific shield laws that protect licensed abortionists in these states from facing prosecution when they use telehealth to prescribe abortion pills to people living in states with legal restrictions on mifepristone.[4]

Abortionists have used these shield laws to continue sending abortion pills nationwide. For example, Dr. Maggie Carpenter, an abortionist in New York, was sued by Texas and Louisiana in 2025 for prescribing and sending abortion pills into their states, even though both states have legal restrictions on the dispensing of mifepristone within their borders.[5] Louisiana specifically charged her with a felony for prescribing abortion pills to a pregnant minor in the state. Despite both states' laws, Carpenter was protected by New York's shield law, which does not allow a state that has abortion restrictions to penalize an abortionist for sending mifepristone across its borders. This specific case also inspired New York's

governor to introduce "Shield Law 2.0," which would further protect abortionists by shielding their identity on the prescription labels for abortion pills and allowing them to use the name of the "medical practice" they work for instead.[6]

LEGAL ATTEMPTS

Since our last report, several states have attempted to restrict, or have successfully restricted, the mailing of mifepristone by licensed abortionists within their borders.[7] For example, a law in Oklahoma that went into effect in August 2026 seeks to prosecute "traffickers" of abortion pills with fines or prison time if they deliver "unlawful" abortion pills within the state or give them to a pregnant woman without her consent.[8] However, this law provides exceptions for licensed abortionists and pharmacists, allowing them to continue dispensing the pill in the state under its "life of the mother" exception.

Some attorneys general have also filed lawsuits against federal entities for permitting abortion pills to be sent through the mail, stating that this distribution violates state abortion laws. The most notable of these cases came from Louisiana, which filed a lawsuit against the FDA in October 2026,[9] challenging its 2023 REMS rules that allowed mail-in abortions and stripped away the need for a doctor to physically administer the drugs.[10]

> This approval by the FDA is a tremendous failure for the safety and protection of preborn children and their mothers.

On May 1, the Fifth Circuit Court of Appeals in Louisiana blocked the mailing of mifepristone, a decision that then made its way up to the US Supreme Court. While the Supreme Court reviewed the case, mifepristone was not allowed to be mailed by licensed abortion providers, such as Planned Parenthood. However, just three days later, the Supreme Court issued a temporary stay of the order.[11] On May 14, the Supreme Court placed an indefinite stay that allowed mifepristone to once again flow through the mailing system. This seemingly quick decision by the US Supreme Court has allowed the FDA-approved, free-range abortion pill dispensing via mail to continue unabated.

FDA APPROVAL OF THE ABORTION PILL

Amid the battle to regulate the distribution of mifepristone through the mail, the Trump administration's FDA approved a second generic version of mifepristone in October 2025.[12] A third company, Evita Solutions, can now dispense the drug, supporting its commitment to "increasing access to medical abortion."[13] Because these pills can now be produced in larger quantities, it will be much easier for anyone to obtain them. This approval by the FDA is a tremendous failure for the safety and protection of preborn children and their mothers. Despite the administration's promise to look into the "safety" of mifepristone, the review continued to be delayed under FDA commissioner Dr. Marty Makary, compelling pro-life leaders and organizations to call for his removal. Makary resigned in May 2026, with Kyle Diamantas now serving as the acting commissioner. On October 7, 2026, the FDA announced that it expected to complete its "safety study" of mifepristone in December 2026 and should release a report on its findings "no later than March 2027."[14]



The Dangers of Telehealth Abortions

For decades, abortion advocates have claimed that the abortion pill is "safer than many other medicines like penicillin, Tylenol, and Viagra."[15] But the data used to support this false claim is incomplete. Since 2016, manufacturers have only been required to track deaths caused by mifepristone.[16] We must face the reality that mothers might only seek medical care if their side effects are truly life-threatening, which omits less serious side effects from reports. Abortion activists also tell women to lie to medical personnel and say they are having a miscarriage rather than an abortion.[17] This means that the drug's adverse event reports may only represent a fraction of the actual dangers.[18]

In 2025, for example, the Ethics & Public Policy Center released a study that analyzed data from insurance claims related to the abortion pill.[19] It found that 11% of women experienced serious, potentially life-threatening side effects, including hemorrhage, sepsis, infection, and other dangers within 45 days of taking the drugs. Another study revealed that the complication rate for pill abortions is four times higher than surgical abortions.[20]

WATCH

Dr. Christina Francis, CEO of the American Association of Pro-Life OB/GYNs, ordered illegal abortion pills from Aid Access, a third-party pill vendor. She provided concerning information to the organization, which claims to have an abortionist review each order, saying she was a 13-year-old girl experiencing her fifth pregnancy and listing numerous serious health complications. Her order was approved within minutes and without any follow-up. Watch her experience on YouTube.[21]

And telehealth adds several additional risks to a chemical abortion. Mothers lack medical oversight, which may lead to delayed care and greater risks to their health. For example, taking the abortion pill when a mother has an ectopic pregnancy—where the baby implants outside of the uterus and often in the fallopian tube—can lead to life-threatening infections and internal bleeding. A physical exam and ultrasound are required to rule out this condition, but telehealth completely omits this crucial step.

Mothers also need an exam and ultrasound to determine the gestational age of their baby. The FDA has only approved the abortion pill for use in the first 10 weeks of pregnancy,[22] as the risk of complications, including the live birth of the baby, increases with gestational age.[23] But abortion supporters openly advocate for its use beyond this point.

In August 2026, the Guttmacher Institute published an update on the abortion pill, stating that mifepristone "is commonly, safely and legally used later in pregnancy on an off-label basis."[24] The study it cited concluded that using the abortion pill at home through 16 weeks gestation "can be more physically intense" and found that 24% of the 264 participants received treatment following their abortions.[25] Mothers who were 12 or more weeks gestation had a 16% higher risk of needing emergency treatment.

Because preborn babies are larger further along in pregnancy, the study stated that later pill abortions carry "a higher risk of being discovered, particularly salient in settings where abortion is criminalized." The focus is not on the greater health risks mothers face by using the deadly drug later in pregnancy but on the fact that it will be harder for her to kill her baby in secret.

Additionally, online and telehealth pill vendors rely on the date of the mother's last period to determine gestational age, but this method isn't always reliable. A mother may lie about the date or may miscalculate it if her cycle is irregular, if she misremembers the date, or if she had spotting or bleeding in early pregnancy that she mistook for a period.

In 2020, for example, Planned Parenthood provided abortion pills through telehealth to an 18-year-old mother after using the date of her last period to determine she was six weeks pregnant.[26] According to the lawsuit she filed against the abortion business, the mother took the pills and then gave birth to a stillborn 30-week-old baby boy. Planned Parenthood was sued by another mother that same year for miscalculating her baby's age and facilitating a pill abortion that resulted in the stillbirth of her 22-week-old baby boy.[27] And in early August 2026, two teen parents in North Carolina were arrested after the 18-year-old mother took abortion pills at 31 weeks gestation.[28] The baby was born alive into the toilet and was left there until first responders rescued the child. The newborn had a pulse and was taken to the hospital, but at the time of this report's publication, police hadn't released further details about the baby's condition.

Though abortion advocates insist that "abortion is healthcare," their dismissal of the risks of the abortion pill and telehealth abortion shows the hypocrisy of their claims. These methods are unsafe for mothers and deadly for their babies.



Abortion Pill Access by State



STATE	AVAILABLE PURCHASE METHODS			
	In Person[1]	Direct from Web[2]	Via Telehealth[3]	Plan C Network[4]
Alabama		✓	✓	✓
Alaska	✓	✓	✓	✓
Arizona	✓	✓	✓	✓
American Samoa		✓	✓	✓
Arkansas		✓	✓	✓
California	✓	✓	✓	
Colorado	✓	✓	✓	
Connecticut	✓	✓	✓	
Delaware	✓	✓	✓	
Florida	✓	✓	✓	✓
Georgia	✓	✓	✓	✓
Guam		✓	✓	✓
Hawaii	✓	✓	✓	
Idaho		✓	✓	✓
Illinois	✓	✓	✓	
Indiana		✓	✓	✓
Iowa	✓	✓	✓	✓
Kansas	✓	✓	✓	✓
Kentucky		✓	✓	✓
Louisiana		✓	✓	✓
Maine	✓	✓	✓	✓
Maryland	✓	✓	✓	
Massachusetts	✓	✓	✓	
Michigan	✓	✓	✓	✓
Minnesota	✓	✓	✓	
Mississippi		✓	✓	✓
Missouri	✓	✓	✓	✓
Montana	✓	✓	✓	✓
Nebraska	✓	✓	✓	✓

STATE	AVAILABLE PURCHASE METHODS			
	In Person[1]	Direct from Web[2]	Via Telehealth[3]	Plan C Network[4]
Nevada	✓	✓	✓	✓
New Hampshire	✓	✓	✓	✓
New Jersey	✓	✓	✓	
New Mexico	✓	✓	✓	
New York	✓	✓	✓	
North Carolina	✓	✓	✓	✓
North Dakota		✓	✓	✓
Northern Mariana Islands		✓	✓	✓
Ohio	✓	✓	✓	✓
Oklahoma		✓	✓	✓
Oregon	✓	✓	✓	
Pennsylvania	✓	✓	✓	✓
Puerto Rico	✓	✓	✓	✓
Rhode Island	✓	✓	✓	
South Carolina	✓	✓	✓	✓
South Dakota		✓	✓	✓
Tennessee		✓	✓	✓
Texas		✓	✓	✓
US Virgin Islands	✓	✓	✓	✓
Utah	✓	✓	✓	✓
Vermont	✓	✓	✓	
Virginia	✓	✓	✓	✓
Washington	✓	✓	✓	
Washington, DC	✓	✓	✓	
West Virginia		✓	✓	✓
Wisconsin	✓	✓	✓	✓
Wyoming	✓	✓	✓	✓
TOTAL	40	56	56	39

1 In-person facilities that offer pill abortions for pickup and consultation.

2 E-commerce websites that sell and ship pills to addresses in all US states and its territories. They do not require a prescription or ID and do not provide consultation.

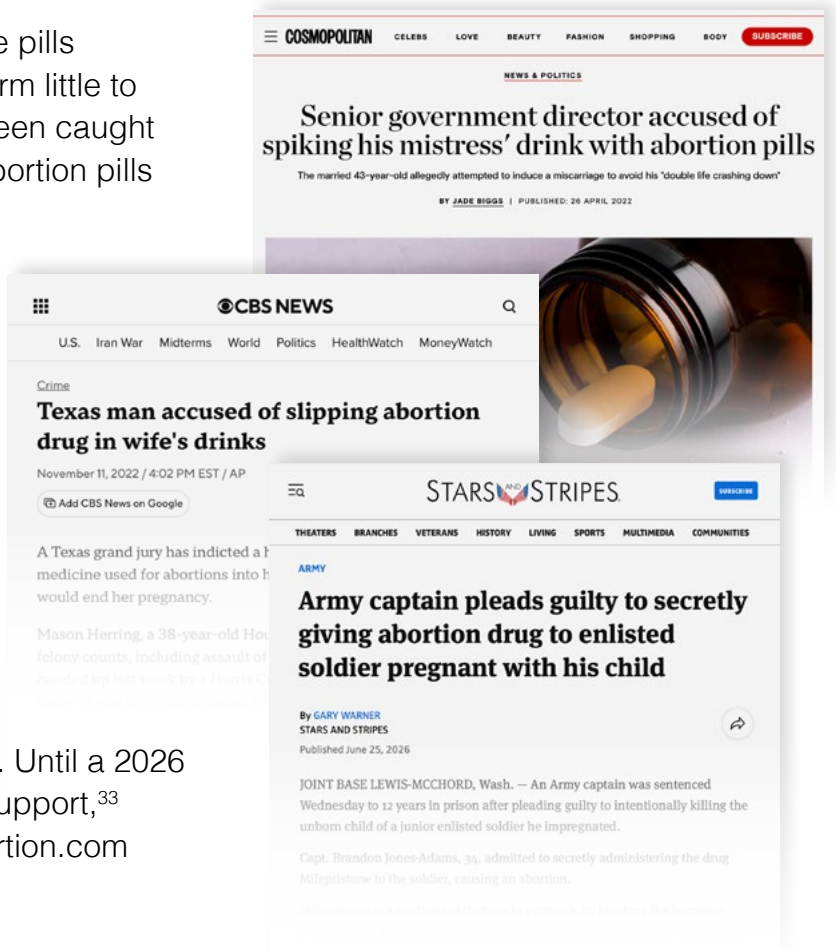
3 Online facilities that employ US-licensed clinicians and ship pills after a brief online form or phone/video chat. Aid Access (recommended on Plan C's website) sends abortion pills to all 50 states via telehealth consultation.

4 Networks of community-based volunteers who ship generic abortion pills to people in the US. They believe in a model of community care and ship pills for free. The pills often come repackaged in plastic or mylar baggies.

Today's Abortion Pill Landscape

In *Beneath the Surface: Exposing the Abortion Pill Drug Cartel*, we exposed the dangers that come from abortion pills dispensed through "community partner networks."[29] These black-market abortion drugs are frequently produced in foreign countries that bypass safety restrictions. Some third-party vendors require payment or a "donation fee," often on a sliding scale, while others ship the drugs for free.

The information required to obtain these pills varies as well, and many vendors perform little to no verification. Several abusers have been caught using these lax procedures to obtain abortion pills that they then secretly use to kill their preborn children. Alarmingly, black-market abortionists also openly discuss how minors can obtain these pills without parental knowledge or consent.



And yet, despite the many risks caused by third-party abortion pills, the three US manufacturers of legal mifepristone—Danco,[30] GenBioPro,[31] and Evita Solutions[32]—promote online directories that connect users to black-market vendors. Until a 2026 US Senate investigation exposed this support,[33] Danco even directly linked to both Abortion.com and Plan C on its website.[34]

In 2023, the most recent year for this data, abortion pills were used in 64% of abortions committed by abortionists.[35] The Society for Family Planning estimates that 27% of clinician-committed abortions in the first six months of 2025 were facilitated through telehealth appointments and mail-order pills.[36]

Community partner networks operate outside of the law, so the true number of abortions they facilitate is unknown. One study, however, estimates that these vendors sent abortion pills to an average of nearly 6,000 mothers per month in the six months following the *Dobbs*

> The Society for Family Planning estimates that 27% of clinician-committed abortions in the first six months of 2025 were facilitated through telehealth appointments and mail-order pills.

decision.[37] In July 2026, a *Bridge Michigan* article shared that virtual access to abortion pills—both legal and not—is cutting into the in-person abortion business.[38]

Telehealth access has certainly played a role in this spike, but it's not the only factor. Since our 2024 abortion pill report, abortion activists have continued their campaign to destigmatize abortion pills and downplay their harm. This includes ever-increasing and creative ways to market these drugs and convince the public that they are essential for women's health and freedom.

STOCKPILING ABORTION PILLS

After the *Dobbs* decision, pro-abortion fearmongering reached a new level. Activists insist—without evidence—that a nationwide abortion ban is imminent and that women should stockpile abortion pills "just in case" they need them.

Planned Parenthood Great Northwest, Hawai'i, Alaska, Indiana, Kentucky, for example, launched its Just in Case Abortion Pills service in May 2026.[39] The affiliate's CEO stated that the organization has "an opportunity and an obligation to not only protect abortion access but also to expand it."[40] But PP isn't the only organization that offers these advance pills. Plan C, a prominent abortion pill referral site, offers a list of nine telehealth vendors that offer pills for future use[41] and an additional eight sellers that don't require a prescription or proof of pregnancy.[42]

These just-in-case pills raise several concerns. For instance:

- There's no limit to the number of pills a woman can obtain, and many vendors send their shipments without instructions, creating a higher risk of complications from overdosing.
- They could harm women who take them when they aren't pregnant.
- Abusers can steal and use the pills to force their victims to have abortions.
- Women may receive sugar pills or pills that include harmful substances rather than the drugs they ordered.
- Customers can use these programs to create a community black market of abortion drugs.

There's a certain irony in the "abortion is healthcare" crowd supporting the stockpiling of dangerous prescription pills. Such a program shows little concern for women and their well-being.

"MISSED PERIOD PILLS"

Encouraging women to stockpile pills is dangerous enough, but Planned Parenthood and other abortion activists also tell women to take abortion pills *without even taking a pregnancy test to confirm that they are actually pregnant*.[43]

In a blog published in May 2026, Planned Parenthood introduced readers to "period pills" or "missed period pills."[44] These pills **are** mifepristone and misoprostol, the same drugs used in a chemical abortion, just under a sneaky new name. The blog states:

> People take period pills if they think they might be pregnant and don't want to be. **You don't take a pregnancy test or get an ultrasound to see if you're actually pregnant before taking them.** But if you ARE pregnant, period pills will end the pregnancy (emphasis added).

This marketing campaign targets women who don't want to be pregnant but who also, for moral or religious reasons, don't want to have an abortion. Taking these pills will cause vaginal bleeding, whether the woman is pregnant or not. As long as she doesn't take a pregnancy test first, she will never truly know if she was pregnant or if her period was just late.

The mothers targeted by this method know that abortion kills babies, but they may be willing to use these pills to end an unconfirmed pregnancy in an attempt to avoid moral culpability for killing their children.

By saying that period pills are simply used to "make your period come," abortion activists seek to create a fantasy where mothers aren't responsible for killing their babies if they never confirmed the baby existed. The mothers targeted by this method know that abortion kills babies, but they may be willing to use these pills to end an unconfirmed pregnancy in an attempt to avoid moral culpability for killing their children.

More egregiously, the "period pill" method puts mothers at extreme risk, exposing them to the following dangers:

- The mother may be too far along to take the pills, which can cause serious complications for her and may result in the live birth of her child.
- An untreated ectopic pregnancy may rupture and cause severe, potentially life-threatening complications.
- If her body fails to pass the baby and placenta, the mother may develop an infection or hemorrhage, both of which can lead to death if left untreated.
- A woman who isn't pregnant may experience excessive and unnecessary bleeding and pain.
- Women lack medical supervision in the event of complications.

Somewhat paradoxically, Planned Parenthood tells women that they shouldn't take these pills if they have missed more than one period because they could cause "an abortion or miscarriage, a stillbirth, or a premature birth."

Since women aren't supposed to take a pregnancy test before taking missed period pills, they must obtain these pills from a third-party vendor or from a doctor who doesn't require proof of pregnancy.

MISOPROSTOL-ONLY ABORTIONS

Unlike mifepristone, misoprostol—the second pill in the abortion pill regimen—is not primarily a drug used to kill.[45] Its main function is preventing stomach ulcers, but off-label applications include inducing labor, miscarriage care, and abortion.

Because its primary function is preventing ulcers, misoprostol is easier to obtain than mifepristone. This has led to its use around the world as an abortion drug, especially in countries with restricted access to the first pill in the regimen. The World Health Organization supports this method, even while admitting it needs more research and is less effective.[46]

> Babies are born alive in 17% of misoprostol-only abortions.

In the post-*Dobbs* era, misoprostol-only abortions have also found more acceptance in the US. Plan C offers instructions and a directory of vendors who facilitate these abortions.[47] When the availability of mifepristone was threatened in early 2026, Planned Parenthood of Northern New England announced that it would switch to offering misoprostol-only abortions through telehealth.[48]

Abortion advocates claim that these abortions are "safe" and "effective," but research shows otherwise.[49] Studies have shown a failure rate between 24% and 39% when using the misoprostol-only method.[50] This can include either a failure to pass all the pregnancy tissue or a failure to kill the baby, both of which require further surgical treatment. If the pregnancy does continue, misoprostol is known to increase the risk of birth defects for the developing baby.[51]

Even more horrifying, babies are born alive in 17% of misoprostol-only abortions.[52] This drug only induces labor and isn't intended to kill the baby as mifepristone does. Since most chemical abortions take place in the first trimester, mothers are left to watch as their tiny babies struggle and die after this unexpected birth.

This method increases the risks for mothers as well. Misoprostol's drug label warns that it can cause uterine ruptures in pregnant mothers, which can lead to future infertility, hysterectomy, and even death.[53] Research shows that mothers experience higher rates of side effects such as vomiting, nausea, and hypothermia as well.[54]

MISO CARDS

While conducting research for this report, our team discovered a disturbing underground method of facilitating covert misoprostol-only abortions.





An organization called the Four Thieves Vinegar Collective developed "miso cards," which are postcards soaked with three doses of misoprostol.[55] The card is divided into six sections (two per dose) that can be cut or torn into individual pieces. For each dose, mothers are instructed to tuck one section into each cheek and wait an hour for the misoprostol to be absorbed.

At one point, the organization made and hid abortion cards in public places across more than 20 US cities, placing them within easy reach of mothers and even abusers and children. Some third-party vendors, such as Women Helping Women, offer miso cards as well.[56]

The Four Thieves Vinegar Collective also created a series of videos teaching viewers how to make DIY misoprostol and mifepristone pills, as well as miso cards. These instructions include buying misoprostol powder intended to treat horse ulcers and suggestions for obtaining mifepristone powder.

At-home abortions are dangerous enough, but these DIY options create an untold number of additional risks. Mothers might misjudge the doses or consume substances that are dangerous to humans. Abusers might use these instructions to harm pregnant mothers. And if women choose to insert homemade pills vaginally, they may develop life-threatening infections from contaminated pills.

> Abortion pills are everywhere, they're safe, they're effective, and they're pretty much unstoppable.
> —Elisa Wells of Plan C

Regardless of the method, misoprostol-only abortions are dangerous for mothers and deadly for their babies. Abortion advocates show just how little they care about women when they promote this type of killing without being honest about its risks.

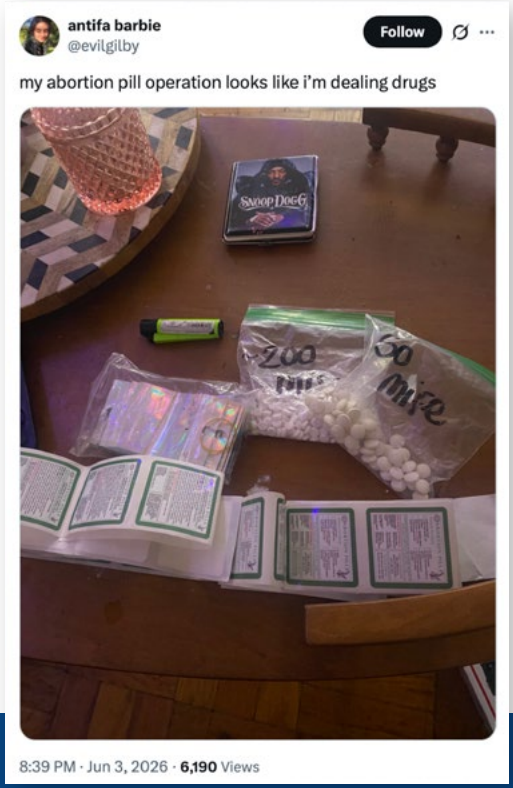
UNDERGROUND ABORTION DEALERS

Abortion pills are indeed everywhere, but only agenda-driven activists would call the lack of oversight seen in the abortion pill drug trade "safe."

For example, on June 3, 2026, a person with the username @evilgilby on X posted a picture of a table in her home with this caption: “My abortion pill operation looks like I’m dealing drugs.”[57]

The picture showed plastic sandwich bags filled with mifepristone and misoprostol pills, mylar bags, and “abortion pills” labels. The account’s bio described the user as an “underground abortion dealer.”

This tweet was quickly deleted, and the account is now private, but it provides evidence of abortion pill “dealers” who work outside of the legal abortion industry and who may even operate independently of established third-party vendors.



We Must Take Action

At the time of our first report’s publication, we called on the FDA, DHS, and USPS to stop the distribution of these pills. While any effort to stop this madness is noble, we acknowledge that, at this point, it would not be a complete or viable solution. With the current state of shield laws and the chaos of third-party vendors, restoring previous federal restrictions and implementing more state regulations on mifepristone will not eliminate chemical abortions.

The answer to this crisis lies with all of us, as changing our culture will not take one giant action but rather many small ones. We must work to educate all people on the dangers of these pills and the deadly effects on babies. Moreover, we must work to reinforce a respect for all human beings so that this respect becomes part of our value system.

In conjunction with the release of this report, American Life League will expand our efforts to create educational content on abortion pills. We are calling on pro-lifers to help us spread the word by sharing this important content far and wide.

The hearts and minds of many are closed to the reality that abortion ends the life of a human child and harms the overall well-being of his mother. These pills permit these actions to occur in secret, and many people simply remain supportive or indifferent to it. Apathy is our greatest enemy, especially when dealing with crimes against human beings. We hope and pray that knowledge, education, and the sharing of these dangerous truths will not only open minds and hearts but save lives.

ENDNOTES

1. Judie Brown, et al., *Beneath the Surface: Exposing the Abortion Pill Drug Cartel*, American Life League, September 2024, all.org/wp-content/uploads/2024/09/ALL_AbortionPillReport2024.pdf.
2. Selena Simmons-Duffin, "Abortion Pills 'Just in Case'? Planned Parenthood Will Offer Them in Two States," NPR, May 21, 2026, npr.org/2026/05/21/nx-s1-5827444/abortion-pills-mifepristone-misoprostol-planned-parenthood-advance-provision.
3. "Medication Abortion," Guttmacher Institute, August 13, 2026, guttmacher.org/state-policy/explore/medication-abortion.
4. "Shield Laws Related to Sexual and Reproductive Health Care," Guttmacher Institute, August 25, 2026, guttmacher.org/state-policy/explore/shield-laws-sexual-and-reproductive-health-care.
5. Jamie Stengle, "New York Doctor Is Fined in Texas, Charged in Louisiana over Abortion Pills in Tests of Shield Laws," Associated Press, February 14, 2025, apnews.com/article/abortion-doctor-maggie-carpenter-pills-847112cde026e29333c3481310593582.
6. "Protection from Liability for Legally Protected Health Activity (Shield Law 2.0)," New York City Bar Association, December 22, 2025, nycbar.org/reports/protection-from-liability-for-legally-protected-health-activity.
7. Geoff Mulvihill, "States with Abortion Bans Target Pills Sent by Out-of-State Providers," PBS News, March 24, 2026, pbs.org/newshour/nation/states-with-abortion-bans-target-pills-sent-by-out-of-state-providers.
8. "Felony Trafficking of Abortion Pills Signed into Law," Oklahoma House of Representatives, okhouse.gov/posts/news-20260519_1.
9. *State of Louisiana v. Food & Drug Administration*, No. 26-30203 (5th Cir. May 1, 2026), assets.aclu.org/live/uploads/2026/05/2026-05-01-Fifth-Circuit-Order-Granting-Stay-of-2023-REMS.pdf.
10. "Information about Mifepristone for Medical Termination of Pregnancy through Ten Weeks Gestation," US Food and Drug Administration, January 17, 2025, fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/information-about-mifepristone-medical-termination-pregnancy-through-ten-weeks-gestation.
11. *Pro-Life This Week*, American Life League, May 15, 2026, all.org/pro-life-this-week/pro-life-this-week-05-15-2026.
12. Christina Mattina, "FDA Approves Second Generic Mifepristone Pill for Abortion," *The American Journal of Managed Care*, October 3, 2025, ajmc.com/view/fda-approves-second-generic-mifepristone-pill-for-abortion.
13. "What Is Medical Abortion and Mifepristone?," August 21, 2026, evitasolutionsllc.com.
14. "FDA Says Its Safety Review of Abortion Pill Will Continue into Next Year," CNN, October 8, 2026, cnn.com/2026/10/08/health/abortion-pill-mifepristone-fda-review.
15. "How Safe Is the Abortion Pill?," Planned Parenthood Federation of America, plannedparenthood.org/learn/abortion/the-abortion-pill/how-safe-is-the-abortion-pill.
16. *Mifeprex (Mifepristone) Tablets, 200 mg: Risk Evaluation and Mitigation Strategy (REMS)*, US Food and Drug Administration, modified March 2016, fda.gov/media/164649/download.
17. "What to Do in Case of Emergency?" Women Help Women, September 9, 2014, consult.womenhelp.org/en/page/417/what-to-do-in-case-of-emergency.
18. "It's Common Knowledge That Many Side Effects Don't Get Reported to FDA. But Study Reveals Startling Scope of Problem," 2019, KFF Health News, December 5, 2019, kffhealthnews.org/morning-breakout/its-common-knowledge-that-many-side-effects-dont-get-reported-to-fda-but-study-reveals-startling-scope-of-problem.

19. Jamie Bryan Hall and Ryan T. Anderson, "The Abortion Pill Harms Women: Insurance Data Reveals One in Ten Patients Experiences a Serious Adverse Event," Ethics and Public Policy Center, April 28, 2025, eppc.org/publication/insurance-data-reveals-one-in-ten-patients-experiences-a-serious-adverse-event.
20. Maarit Niinimäki, et al., "Immediate Complications after Medical Compared with Surgical Termination of Pregnancy," *Obstetrics & Gynecology*, October 2009, pubmed.ncbi.nlm.nih.gov/19888037.
21. "Doctor Goes Undercover to Buy Abortion Pills. The Reality Is Worse Than You Think," YouTube, March 11, 2026, youtube.com/watch?v=4qAG4V-zHD4.
22. "Questions and Answers on Mifepristone for Medical Termination of Pregnancy through Ten Weeks Gestation," US Food and Drug Administration, April 8, 2026, fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/questions-and-answers-mifepristone-medical-termination-pregnancy-through-ten-weeks-gestation.
23. "Medication Abortion up to 70 Days of Gestation," American College of Obstetricians and Gynecologists, *Obstetrics & Gynecology* 136 (2020): e31–e47, acog.org/clinical/clinical-guidance/practice-bulletin/articles/2020/10/medication-abortion-up-to-70-days-of-gestation.
24. "Medication Abortion," Guttmacher Institute, August 13, 2026, guttmacher.org/state-policy/explore/medication-abortion.
25. Heidi Moseson, et al., "Effectiveness of Self-Managed Medication Abortion between 9 and 16 Weeks of Gestation," *Obstetrics and Gynecology* 142 (2): 330–38, journals.lww.com/greenjournal/fulltext/10.1097/aog.0000000000005266~effectiveness-of-self-managed-medication-abortion-between-9.
26. Carole Novielli, "Lawsuit against Planned Parenthood: Abortion Pill Caused Toilet Delivery of 'Fully Formed' 30-Week Baby," Live Action News, October 24, 2022, liveaction.org/news/planned-parenthood-lawsuit-abortion-pill-30-week.
27. *Doe v. Planned Parenthood of Greater New York, Inc.*, Complaint, Index No. 501606/2021 (N.Y. Sup. Ct., Kings Cnty., Jan. 20, 2021), liveaction.org/assets/1749502065-lawsuit.pdf.
28. Ben Bokun, "North Carolina Teen Parents Charged after 18-Year-Old Allegedly Took Abortion Pills While 31 Weeks Pregnant," FOX8 News, August 6, 2026, myfox8.com/news/north-carolina/north-carolina-teen-parents-charged-after-18-year-old-allegedly-took-abortion-pills-while-31-weeks-pregnant.
29. Judie Brown, et al., *Beneath the Surface: Exposing the Abortion Pill Drug Cartel*, American Life League, September 2024, all.org/wp-content/uploads/2024/09/ALL_AbortionPillReport2024.pdf.
30. "How Do I Get Mifeprex?," Mifeprex, July 23, 2026, earlyoptionpill.com/how-do-i-get-mifeprex.
31. "Patient Resources," GenBioPro, March 11, 2025, genbiopro.com/products/mifepristone/patient/abortion-resources.
32. "Resources to Improve Your Experience," Evita Solutions, evitasolutionsllc.com/patients/resources.
33. *Mifepristone without Guardrails: An Investigation into How Chemical Abortion Drug Makers Are Putting Mothers and Babies at Risk*, US Senate Committee on Health, Education, Labor, and Pensions, August 2026, help.senate.gov/imo/media/doc/mifepristone_report_finalpdf.pdf.
34. "How Do I Get Mifeprex?" Danco Laboratories, archived February 6, 2026, Internet Archive, Wayback Machine, web.archive.org/web/20260206121659/https:/www.earlyoptionpill.com/how-do-i-get-mifeprex.
35. "Medication Abortion Accounted for 63% of All US Abortions in 2023—An Increase from 53% in 2020," Guttmacher Institute, December 9, 2024, guttmacher.org/2024/03/medication-abortion-accounted-63-all-us-abortions-2023-increase-53-2020.
36. Melissa Duque, "#WeCount Report, April 2022 to June 2025," Society of Family Planning, December 9, 2025, https://societyfp.org/research/wecount/wecount-june-2025-data.

37. Abigail R. A. Aiken, et al., "Provision of Medications for Self-Managed Abortion before and after the *Dobbs v. Jackson Women's Health Organization Decision*," JAMA 331, no. 18 (2024): 1558–1564, jamanetwork.com/journals/jama/fullarticle/2816817.

38. Robin Erb, "Michigan Was to Be a 'Haven State' for Abortion. It Didn't Happen," *Bridge Michigan*, August 3, 2026, bridgemi.com/michigan-health-watch/michigan-was-to-be-a-haven-state-for-abortion-it-didnt-happen.

39. "Planned Parenthood Expands Abortion Access in Washington & Hawai'i with 'Just in Case' Abortion Pills," Planned Parenthood Great Northwest, Hawai'i, Alaska, Indiana, Kentucky, May 21, 2026, plannedparenthood.org/planned-parenthood-great-northwest-hawaii-alaska-indiana-kentuck/press/planned-parenthood-expands-abortion-access-in-washington-hawaii-with-just-in-case-abortion-pills.

40. ibid.

41. "How People Are Getting Abortion Pills in Advance," Plan C, plancpills.org/in-advance.

42. "Websites That Sell Abortion Pills," Plan C, plancpills.org/websites-that-sell-pills.

43. "What Are Period Pills?," The Period Pills Project, periodpills.org.

44. "What Are 'Period Pills'?" Planned Parenthood Federation of America, July 23, 2026, plannedparenthood.org/blog/what-are-period-pills.

45. Carmen Pope, "What Is Misoprostol?," Drugs.com, September 8, 2026, drugs.com/misoprostol.html.

46. *Medical Management of Abortion*, World Health Organization, (Geneva: World Health Organization, 2022), iris.who.int/server/api/core/bitstreams/63c5eaad-95e8-4616-8a17-0518c1fb3064/content.

47. "How to Take Abortion Pills: Step by Step Instructions," Plan C, plancpills.org/protocol#method-2-misoprostol-only.

48. "Court Ruling Blocks Access to Medication Abortion through Mail and Telehealth," Planned Parenthood of Northern New England, May 2, 2026, plannedparenthood.org/planned-parenthood-northern-new-england/newsroom/court-ruling-blocks-access-to-medication-abortion-through-mail-and-telehealth.

49. "How Does an Abortion Using Only Misoprostol Work?" Planned Parenthood Federation of America, plannedparenthood.org/learn/abortion/the-abortion-pill/how-do-i-have-an-abortion-using-only-misoprostol.

50. Ingrid Skop, MD, FACOG, "Induced Abortion with Misoprostol Alone," Lozier Institute, May 22, 2026, lozierinstitute.org/induced-abortion-with-misoprostol-alone-3.

51. Daniel Grossman and Kate Grindlay, "Safety of Medical Abortion Provided through Telemedicine Compared with In Person," *Contraception* 87, no. 4 (2013): 524–528, europepmc.org/article/MED/28885427.

52. Ingrid Skop, MD, FACOG, "Induced Abortion with Misoprostol Alone," Lozier Institute, May 22, 2026, lozierinstitute.org/induced-abortion-with-misoprostol-alone-3.

53. *Cytotec (Misoprostol Tablets) Prescribing Information* (2018), US Food and Drug Administration, accessdata.fda.gov/drugsatfda_docs/label/2018/019268s051lbl.pdf.

54. Ingrid Skop, MD, FACOG, "Induced Abortion with Misoprostol Alone," Lozier Institute, May 22, 2026, lozierinstitute.org/induced-abortion-with-misoprostol-alone-3.

55. "Abortion Care," Four Thieves Vinegar Collective, March 10, 2025, fourthievesvinegar.org/abortion-care.

56. "Paper Revolution," Women Help Women, womenhelp.org/en/page/1612/paper-revolution.

57. @evilgilby, "My abortion pill operation looks like I'm dealing drugs," X (formerly Twitter), June 3, 2026.

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