

New Study Debunks Claim That the Abortion Pill Is ‘Safer Than Tylenol’

by Zelda Caldwell

In their efforts to make access to the abortion pill widespread, abortion advocates have repeated a talking point that has gone largely unchecked by the mainstream media: that “the abortion pill is safer than Tylenol” for the women who take it. A new study examines the origins of that claim and asserts that it was based on flawed methodology and ignores documented risks of the abortion pill mifepristone.

Last week, the Charlotte Lozier Institute (CLI) published a peer-reviewed article in the journal *BioTech*, debunking that safer-than-Tylenol claim, which focuses only on deaths despite clinical evidence of serious adverse health events in women who have taken the abortion pill.

Cameron Louttit, director of life sciences at CLI and author of the article, said that there was never any evidence to support the claim. “For years now, the abortion lobby’s claim that abortion drugs are ‘safer than Tylenol’ has dominated public discussion, propelled by the illusion of scientific consensus. However, no such support exists. This baseless claim, repeated by medical societies, politicians, media pundits and researchers, has profoundly influenced public opinion and policy,” Louttit said in a statement.

The study argues that to prove the abortion pill is safer than Tylenol would require a controlled study — and there has never been one. So, what was the source of the claim that the drug is safer than Tylenol? The CLI paper traces it back to a 2003 Chicago Tribune article about the death of a teenager who had taken mifepristone.

The article quoted Dr. David Grimes, an abortion provider and former head of the U.S. Centers for Disease Control’s abortion surveillance branch, who compared the number of deaths from those using the abortion pill to those taking penicillin.

He compared the number of deaths from the abortion pill (less than one per 100,000) to deaths from those who have taken penicillin (two deaths per 100,000 people). Based on this data, he concluded that “having an abortion this way is safer than that.”

For years, the assertion that the abortion pill was safer than commonly used drugs was repeated, eventually morphing into the comparison with Tylenol. The problem, the CLI study points out, is that looking at the deaths as the lone data point doesn’t give an accurate idea of the health risks involved. A truer comparison would highlight the serious adverse health effects associated with the abortion drug.

The paper notes that the drug comes with a U.S. Food and Drug Administration-mandated warning about possible side effects of the drug, including “severe and life-threatening bleeding and infections.” But because the effects are “expected,” they are not listed in the table of reported adverse reactions to the drug. Nevertheless, the report cites clinical evidence of adverse effects.

“To brush aside these clinical realities and collapse all considerations of safety into a simple comparison of mortality is irresponsible and dangerous,” the study concludes. The study further notes that the claim is flawed because Tylenol-related deaths often result from misuse of the drug, while deaths from abortion drugs result from a doctor’s prescription.

Katie Glenn Daniel, director of legal affairs and policy counsel at Susan B. Anthony Pro-Life, welcomed the CLI study debunking the oft-repeated claim. “The claim that abortion drugs are safer than Tylenol is a reckless slogan that is not backed by science. No study accurately comparing abortion drugs to Tylenol can exist because they’re used for entirely different purposes. Yet the claim is aggressively pushed by the legacy media and politicians focused on advancing a pro-abortion agenda and stripping away safeguards on drugs responsible for the majority of abortions in the United States,” Daniel said.

“Not to mention, the Biden administration’s decision to strip away in-person dispensing requirements fueled an unregulated online drug market, all in the name of ideological convenience. Americans deserve

evidence-based policy, not political slogans that put women's lives at risk. We should demand more from medical and scientific leaders who have repeated and amplified this misleading, pro-abortion talking point without proper scrutiny," she added.

The CLI study follows the release of a major study of public health-insurance records that found that more than 1 in 10 women who take the abortion pill suffer a serious health effect from the drug. "This isn't idle speculation; this is based on the largest data set that we know of," Ryan Anderson, the president of Ethics and Public Policy Center (EPPC) and one of the study's authors, told EWTN News.

The EPPC study, based on 865,727 patients between 2017 and 2023, found that 4.7% of women who took the abortion pill had to visit an emergency room; more than 3.3% suffered hemorrhaging; and more than 1.3% reported infections, resulting in thousands of hospitalizations for life-threatening events.

In addressing how safety should be evaluated, Anderson emphasized, "You know, specify who is going to be safe, because, sadly, it always kills the baby when it's effective."

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Zelda Caldwell is senior writer at the National Catholic Register based in Washington, D.C.

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