

9/23/25

To: Chair Schmidt

Vice Chair Deeter

Ranking Member Somani House Health Committee

From: David Mahan

Policy Executive Director Center for Christian Virtue

Re: Support for HB324

Chair Schmidt, Vice Chair Deeter, Ranking Member Somani, and members of the House Health Committee,

My name is David Mahan and I am representing the Center for Christian Virtue, Ohio's largest Christian public policy organization. I am here testifying today in support of HB324, the patient protection act. HB324 will help inform patients of the potential severe adverse effects of certain medications, and ensure that they receive the in-person care necessary to monitor the safety and efficacy of such drugs.

"Safe and Effective"

These are the comforting words that consumers want to hear when considering a new medication. When we hear these words, the assumption is that they are not mere marketing terms. We assume that they are carefully spoken and come with the weight of rigorous study, and when deemed necessary, stringent regulations.

"Serious Adverse Effects"

These terms are not so comforting, and that's why they get jammed into the very end of flowery infomercials at 2.0 speed. We've all seen them, "SIDE EFFECTS MAY INCLUDE, PROJECTILE VOMITTING, SUICIDAL THOUGHTS, TREMORS, STROKE, OR EVEN DEATH...PLEASE TAKE RESPONSIBLY". We laugh sometimes, but apparently the real world effects of the drug were common enough to require pharmaceutical companies to include them in their paid advertisements, and therefore should cause us to pause and weigh the benefits against the risks. Recently, the most extensive analysis of the effects of the drug Mifepristone has caused not just consumers, but the US Department of Health to pause and

reconsider how "Safe and Effective" it is for Women. The study analyzed data from an all-payer insurance claims database that included over 860,000 prescribed mifepristone abortions from 2017-2023, and found that the real world rate of serious adverse events was **22 times higher** than the "less than .05%" listed on the drug label. While it's been reported that the drug is "safer than Tylenol", the data shows that nearly 11% of women experienced sepsis, hemorrhaging, transfusion, hospitalization, surgical interventions, or other serious adverse events within 45 days following a mifepristone abortion.

As staggering as this revelation is, HB324 does not seek to ban the use of mifepristone but rather, require common sense safeguards to ANY DRUG that causes severe adverse effects in greater than 5% of patients. Provide the patient with accurate information regarding the potential risks. Ensure that there is an in-person exam and a follow up visit... Again, these are not overburdensome barriers to care, but critical safeguards necessary to protect consumers. In fact, in the case of Mifepristone, HB324 doesn't even go as far as the FDA's original regulations from 2000 that required 3 in-person visits and that the drug only be dispensed and taken at the doctor's office. Moreover, those more stringent recommendations were put in place after analysing the results of clinical trials involving just 30,966 participants, compared to the 865,727 cases analyzed in this most recent study.

The bottom line is, patients deserve to have all of the information necessary to weigh the risks of taking drugs that have been found to cause serious adverse effects, and this body has the responsibility of making sure that proper safeguards are in place to protect Ohio citizens.

Thank you for allowing me to speak in support of this critical piece of legislation.

The Center for Christian Virtue (CCV) is a non-profit, non-partisan organization that endeavors to create an Ohio where God's blessings of life, family, and religious freedom are treasured, respected, and protected. www.ccv.org -- (513) 733-5775

¹ https://eppc.org/stop-harming-women/