

Depo

Coming soon to a

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Canadian University Press

The federal government has been holding a series of closed-door meetings on contraception which critics say are a "sham" and merely an attempt to deflect attention away from a demand for public hearings on the pending approval for the use of the controversial drug Depo-Provera as a contraceptive in Canada.

Health and Welfare Canada is presently winding up a series of one day, "invitation-only" meetings this month in six Canadian cities, aimed at assessing the risks and benefits of using Depo-Provera and making recommendations on the controversy to senior Health and Welfare officials.

And, the Canadian Coalition on Depo-Provera, an umbrella group of 75 organizations across the country opposed to the certification of the drug, has criticized the federal government for not opening the meetings to the public and the media. "They've been set up only to sidetrack the Coalition's request for public hearings about Depo," a Toronto representative of the Coalition told reporters outside the Sept. 15 Toronto meeting. "They're a mockery of democratic process."

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But Karen Kennedy, coordinator and chair of the meetings, responded to the criticism levelled at the process by telling reporters outside the Toronto meeting that the panel will discuss a wide range of birth control issues and not make any recommendations to the government. "We're looking at the whole area of fertility control, not only Depo-Provera," the Health and Welfare consultant said.

Depo-Provera, a synthetic hormone manufactured by the U.S.-based multinational Upjohn Co., is currently used in over 80 countries and has been given to over ten million women in the Third World for birth control, with the approval of the World Health Organization (WHO) and the International Planned Parenthood Federation (IPPF).

But the U.S. Food and Drug Administration (FDA) disallowed the drug because tests on animals over the past 15 years indicate the drug causes cancer. That the drug is fit for the use of Third World women but

not white women in the U.S. has led many critics to the conclusion that women in underdeveloped countries are being used as human guinea pigs to test new contraceptive technology.

"After refusal in the U.S. on the grounds Depo is unsafe," says Deborah Van Wyck of the Canadian Coalition, "Upjohn is treating Canada as a Third World dumping ground. It's hoping a well-funded, well-cloaked lobby will result in the certification of the controversial drug here, where it failed in the U.S.," she said.

Used by doctors in Canada since the '60s to treat endometriosis and cancer, as well as to stop the menstrual bleeding of mentally handicapped and physically disabled women, Depo-Provera boasts a myriad

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of adverse side effects. Temporary or permanent infertility, anemia, diabetes, uterine disease, permanent damage to the pituitary gland, lowered resistance to infection, deformities in offspring, severe mental depression, as well as cervical, endometrial and breast cancer are some of the reported long term effects of the drug.

A 1981 study by Dr. Donald Zarfes, a professor of pediatrics and psychiatry at the University of Western Ontario, found that the rate of breast cancer was 25 times above average in the institutionalized handicapped women in Canada who had been given the drug — "usually without their informed consent," he wrote.

Short term effects include weight gain or loss, abdominal discomfort, nausea, headaches, loss of hair, limb pain, disruption of the menstrual cycle, vaginal discharge and the spotty darkening of facial skin.

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The drug also causes a loss or decrease of sexual libido and/or orgasm. While a loss of libido would probably not be tolerated by most men, population experts and Upjohn managers — predominantly men — are willing to inflict this on women. Male sex offenders who have been administered the drug as a "cure" have called Depo "chemical castration."

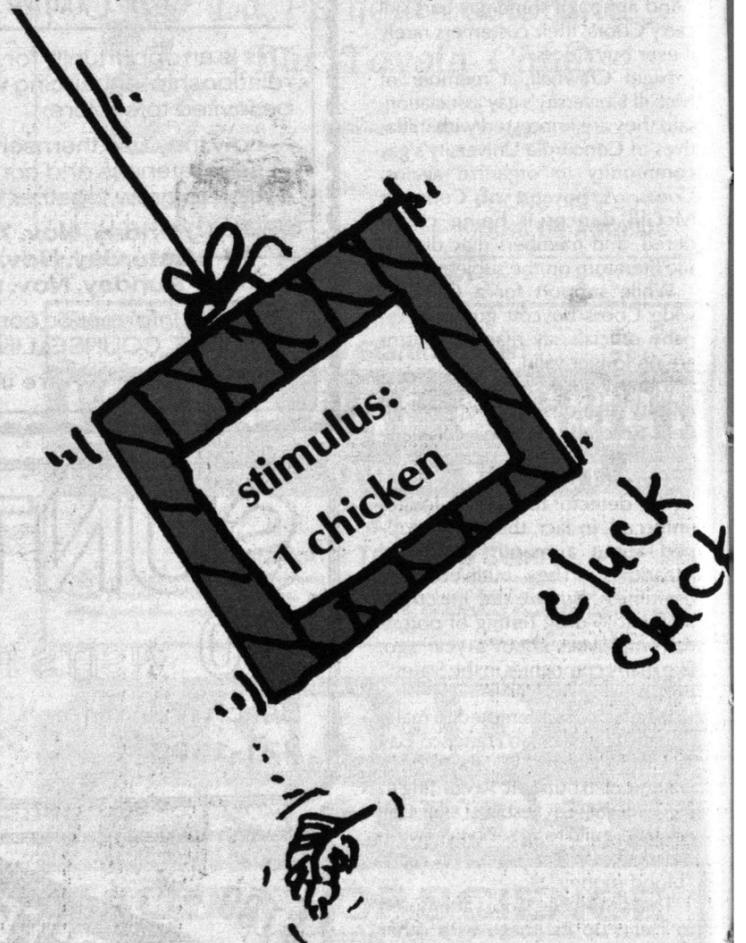
Depo is administered by injection every three months and works similarly to the Pill. It inhibits ovulation by suppressing hormones to the pituitary gland. After discontinuation of the drug, a woman's body takes from six to eighteen months to become fertile again. The injections last for three months so if any negative side effects arise, a woman must suffer through them until the injection wears off.

Worried the drug would be quickly and silently approved without adequate research of consultation, the Coalition presented four demands to federal Health Minister Jake Epp last year. The Coalition wanted information in the hands of Health and Welfare Canada and Upjohn to be made public, public hear-

away from the meeting in Toronto that the meetings were closed "entirely for the protection of the groups who are presenting. We want them to feel free to speak their minds," he said.

"That's a load of crap," Joanne Doucette of the Toronto Disabled Women's Network (DAWN), one of the groups that made a submission to the panel. "We argued with them for half an hour this morning about public meetings." Doucette said none of the groups presenting briefs to the panel had raised any objection to opening the meeting to the public and media.

But Kennedy said at least two groups — one in Halifax; the other in Calgary — had said they would not make a presentation if the meet-



ings on the drug composed of medical as well as consumer representatives, and a guarantee that the safety of the drug be firmly established before its certification in Canada.

But the Coalition's demands fell on deaf ears. Not only have the meetings been closed, but concerned groups also expressed disappointment that there had been no attempt by the government to publicize the meetings and that some of the invited groups had not been given adequate time to prepare their submissions to the panel.

Health and Welfare official Nes Lubinsky told angry women turned

ings were open to the media, but she refused to name the two groups. "We felt we had to be consistent across the country," she said.

Sylvia Gold, president of the Canadian Advisory Council on the Status of Women said her group "would have preferred open meetings so that our recommendations regarding research into contraception could be reported to the public."

Many groups were concerned that the panel was formed entirely of medical practitioners, two of whom had already expressed their approval for the certification of Depo for contraceptive use. "These are not the neutral experts the government