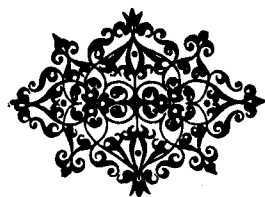


For informational purposes only.



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is for the benefit of all people.
Ideas cannot be owned.*

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Penny Royal.





Reproductive Freedom:

An Introduction

EBERHARDT PRESS IS PLEASED TO PRESENT A NEW edition of *Reclaiming Our Ancient Wisdom: Herbal Abortion for Midwives and Herbalists*. It remains a worthy addition to the canon of pamphlets, zines and documents on the subject. Much of the spirit of the current discourse maintains a specifically Do It Yourself emphasis. Certainly we support the drive for women to have as much control and involvement in their reproductive health as is possible and desired. It is with this intention that we make this pamphlet available.

More specifically, this pamphlet is intended as a resource for practiced herbalists and midwives to better serve the women of their communities. It provides a fine historical overview of herbal abortion that should be read by all. As a working guide this information must be taken very seriously. Herbal abortion, like many health care procedures, carries certain risks. The information contained within this pamphlet is for the education of the reader, but does not constitute a comprehensive set of instructions.

All women deserve access to *safe* methods of birth control. Any woman involved in providing or assisting in an herbal abortion procedure must be well trained. This training may begin with midwifery or herbalism as starting points, and should include learning directly about women's reproductive anatomy. Extensive self-education, utilizing medical texts is also necessary, as is independent research and a deep understanding of the use of herbs. One should also be familiar with currently practiced methods of medical and surgical abortion. Herbal abortion should be considered within the context of available abortion services, the physical and emotional health of the women involved and availability of local herbalists, medical personnel and women's health collectives. This pamphlet is meant to be one piece of a much greater whole. Let's respect ourselves and our bodies by making safe, educated choices and helping those around us to do the same.

With this in mind, let us remember that we women have controlled our reproductive cycles for millennia. Institutions such as the patriarchal family, the church and sexism – often with the assistance of the state – have sought to narrow or eliminate our choices. Currently the main discourse within the pro-choice movement focuses on the right to have an abortion. It is vital that we open the definition of choice to include the fight for all women's *full* reproductive freedom. Full reproductive freedom means every woman has the ability to direct her own reproductive destiny. This is integrally linked with the conditions of her society and

is not merely a matter of individual choice or access.. This also includes the freedom to bring children into a healthy and safe world.

At times, narrowing views have appeared within the pages of herbal abortion zines. We have been forced to sift through dogma and moralism to find the information we seek. If an herbal abortion does not work for you, or is not appropriate to your situation, it does not mean you are less in touch with your body or your spirituality. An herbal abortion is no less "right" or "wrong" than a medical abortion. We can re-learn our history and share information while respecting the choices and beliefs of our sisters, mothers and daughters. Let's continue to fight for a world where women bring children into being not from compulsion but by choice, out of love and courage.

Our hope is that by bringing abortion back into the hands of women healers, herbalists and midwives, we can reconnect with the profoundly empowering forces that women hold when they command their reproductive destiny.

—*Esther Eberhardt*



Reclaiming Our Ancient Wisdom:

HERBAL ABORTION PROCEDURE & PRACTICE
FOR MIDWIVES AND HERBALISTS

by Catherine Marie Juenet

"Herbal abortifacients have been used by women beyond recorded history... Ancient herbal abortifacients were an integral part of every culture that respected the woman, the mother earth, and her powers."

—UNI M. TIAMAT



Herbal abortion has been with women since the beginning of time. It has at times been a forbidden wisdom, passed by word of mouth between midwives, herbalists, and women healers. Beginning in the 14th century and through the 17th century, performing or simply knowing how to perform an herbal abortion was a danger. Those who held this information were murdered or frightened into silence. Eventually this knowledge was erased from the memories and lives of nearly all women.²¹

Today, we have only remnants of this once common knowledge. We are left to piece together the clues left behind in an effort to regain the wisdom of our foremothers. With this document, I will compile the currently available information on the subject of herbal abortion. Through

examples from research studies, journal articles and written texts, I will outline the historic connection between midwifery and the use of abortifacient herbs. I will discuss the use of abortifacient herbs historically and presently, their safety, risk, efficacy and preparation. I will also evaluate their role in today's midwifery practice and how the current-day midwife can implement these herbs and techniques in her own practice.

Women have regulated their fertility for thousands of years. The earliest evidence of fertility control comes from archeological findings from ancient habitation sites in the Mediterranean regions. The female pelvic bones were studied for changes associated with childbirth giving the estimated number of pregnancies a woman had during her lifetime. Paleontologist J. Lawrence Angel estimates that the average woman living around 2000 BC had five childbirths. The number of pregnancies then gradually decreased from 4.7 births circa 1500 BC, 4.1 childbirths circa 1150 BC, 3.6 births circa 300 BC to 3.4 average births circa 120 AD.¹⁹ These findings indicate that during this time women gradually had fewer children throughout their lives. This may indicate the use of some fertility regulation.

Herbal abortion is an ancient method of birth control. The first document of herbal abortions is found in the Ebers Scroll, one of the largest Egyptian papyrus scrolls in existence. This scroll, dated between 1550 and 1500 BC, contains prescriptions for a variety of ailments and "recipes that are made for women," including an herbal abortion recipe "to cause a woman to stop pregnancy in the first, second and third period."¹⁶ Soranos, an ancient Greek writer on gynecology during the early first century AD, wrote about herbal contraception and birth control,

including the use of vaginal suppositories and oral plant-based contraceptives.¹⁷

Herbal abortifacients were an integral part of every matriarchal culture. The use of herbal abortion is directly linked to the role of the midwife throughout history. Midwives did not limit their profession to pregnancy and birth; their care involved issues with menstruation, breast-feeding, infertility, reproductive infections, birth control, abortion and death.¹⁶ Midwives used herbs to regulate, promote and suppress fertility. Women looked to midwives for their specialized knowledge, and midwives procured abortive herbs for those who desired them.¹⁹

Midwives were specifically targeted (by patriarchal forces) because of their knowledge and use of herbal birth control and abortion. The witch hunts, spanning more than four centuries, saw an orchestrated campaign by the Christian church and growing scientific and medical professions, which sought to wipe out the women healers.³ Midwives, herbalists, lay healers and accused "witches" were all targeted. Thousands upon thousands of executions took place; 85% of those executed were women.⁵ Henry Boquet's *Examen of Witches*, published in 1590, associated many midwives with witchcraft:

Those midwives and wise women who are witches are in the habit of offering to Satan the little children which they deliver, and then killing them.... They do even worse; for they kill them while they are yet in their mother's wombs. This practice is common to all witches.¹⁶

An estimated 9,000,000 women, children and men were killed during the witch hunts.¹⁹ By the 1900s most information on herbal abortion was lost, but not all. Never has the



"Many poor women imprisoned, and hanged for Witches." Ralph Gardiner, *England's Grievance Discovered* (1655).

old herbal knowledge completely left this world. Women continued to regulate their fertility in secrecy with herbs despite fear of persecution, regulations and laws.

During the last part of the twentieth century ethnobotanists and anthropologists have documented the use of herbal abortives among a wide variety of peoples living traditionally. The use of herbal abortives has been found from among the people of New Guinea to the former Soviet Union as well as in Malaysia, India and Haiti to name only a few. Researchers are beginning to piece together these studies along with the wise woman knowledge passed through generations. These various herbal traditions have been used to regulate fertility for thousands of years.

The first legal restrictions on abortion appeared in the US in the 1820s. By 1900 abortions were banned in most states. Though abortion eventually became illegal across

the US, clearly this did not eliminate its need nor stop its practice. Many women successfully aborted without regard for the law. However, thousands upon thousands of women died due to unsafe, illegal abortions.⁷ On January 22, 1973 the US Supreme Court, in the famous *Roe vs. Wade* decision, proclaimed abortion legal. Since that landmark decision, anti-abortion forces have been fighting to overturn it. Though abortion remains legal in the US, access to abortion has become increasingly difficult and dangerous due to these efforts.

Even with *Roe vs. Wade*'s protections still in place, 87% of US counties have no abortion provider.⁷ According to a 2001 study done by the Alan Guttmacher Institute (AGI), a minority of abortion providers offer services before five weeks of pregnancy; women having abortions in clinic settings travel 50 miles or more for services, and more than half (56%) of providers experienced anti-abortion harassment.¹¹ Another study done in 2000 by AGI found that abortion incidence and the number of abortion providers continued to decline during the late 1990s.⁸ Two decades after *Roe vs. Wade* made abortion legal and safe, many women in the US have already lost access reasonable to safe and legal abortion.

Unsafe abortion is a major cause of illness and death among women. Worldwide, 20 million unsafe abortions are performed annually and 13-20% of all maternal deaths worldwide are due to unsafe abortion.⁷



The need for abortion availability and accessibility is clear. Because conventional abortion access is in danger of becoming less available it is wise to look for additional options for fertility control. We should examine the wealth of knowledge that the history of herbal abortion has to offer. It can be viewed as a resource for women exercising their ability and making safe choices about their reproduction.

Safety of Herbal Abortion

The first question to consider when thinking about herbal abortion is safety. Herbal abortion is considered safest and most effective in early pregnancy, before six weeks. After six weeks the chance of having an incomplete abortion increases. The safest time to use herbs is before the pregnancy takes hold and before the egg attaches to the wall of the uterus. This is about one week before menstruation occurs.²⁴ As a rule, the more established a pregnancy is, the harder it is to disrupt.

It is important to know that many herbal abortives are toxic and do have side effects. Many herbal abortives are mildly poisonous to potentially fatal in large doses and are not considered safe for use on a regular basis or for long periods of time.²¹ An herbal abortive study done by herbalist Collette Gardiner found that

almost all women report at least one of the following side effects: Increased bleeding, dizziness, nausea, visual disturbances, sweats, chills, diarrhea and that less commonly reported side effects were incomplete abortion, irregular cycles for 1-3 months, kidney irritation and breast lumps.²⁶

It is necessary to note that incomplete abortion and irregular cycles can also occur in surgical abortions.

Gardiner's study also found that the most serious side effects occurred when women remained pregnant and attempted to carry to term. These serious side effects include incomplete or low implantation of the placenta and premature detachment of the placenta before birth.²⁶

Benefits of Herbal Abortion

There are many advantages to choosing an herbal abortion. Often women choose herbal abortion for the autonomy and freedom they feel in having direct control over their bodies. Herbal abortion gives some women a greater sense of self-reliance and empowerment. Other benefits are listed below.

1. *At Home Procedure*

Herbal abortion can be done in the privacy and security of the woman's home. The abortion can then occur in a supportive and familiar atmosphere.

2. *Accessible*

Most herbal abortifacients are readily accessible over the counter in health food stores, through herbal mail order catalogs, grown in the garden and/or wildcrafted from nature.

3. *Inexpensive*

The monetary cost of purchasing the herbs is minimal when compared to the price of a surgical abortion.

4. *Empowering*

Many women feel empowered when taking direct control of their reproductive choices. Herbal abortion puts abortion back into the hands of women and away from the dominant medical paradigm.

5. *Natural*

Many herbalists believe that the chemical constituents in herbs have fewer side effects than synthetic pharmaceuticals.

Risks of Herbal Abortion

Herbal abortifacients are strong and powerful allies. They can be toxic and should only be used for short periods of time. They can stress the liver and kidneys and put strain on the body. Herbalist Collette Gardiner believes you should use them for no longer than two weeks maximum.²⁷ However, herbalist Feather Jones believes you can use them for up to one month or longer.¹³

There are a number of things that can go wrong when attempting an herbal abortion. The following is a description of the possible complications involved with herbal abortion.

1. *Unsuccessful Herbal Abortion*

The recorded success rates of herbal abortion vary greatly (from 20% -80%).^{13,14,23,26} It is important to know that herbs will not always work. *When they fail it is critical that women follow up with a surgical abortion.* The effects these herbs will have on the developing fetus are unknown, but are likely to cause birth defects, placenta abnormalities and/or labor and birth complications.

2. *Unsuccessful Expulsion of Embryo/Fetus*

This occurs when the fetus/embryo dies but is not expelled. Bleeding may start and only occur for a few hours or days. The symptoms of pregnancy will continue and a pregnancy test will be positive. The only way to confirm this situation is with an ultrasound. A surgical abortion should be obtained to complete the abortion.

3. Overdose

Excessive doses of herbs can cause intoxication. These overdoses can cause serious repercussions, including damage to internal organs and even death. Several women have died from ingesting the essential oil of pennyroyal.¹⁰

ESSENTIAL OILS SHOULD NEVER BE INGESTED.

The signs and symptoms of toxicity are nausea, vomiting, headache, dizziness, ringing ears, sweating, chills, fever, diarrhea, restlessness, sleeplessness, exhaustion, confusion, shock, decreased blood pressure, increased pulse, tremors, convulsions, mania, hallucinations, collapsing and coma.¹⁹

To avoid intoxication do not exceed recommended dosages, personalize dosage to suit body size, begin with the lowest dose and gradually increase as needed, and always reduce dosage at the first signs of toxicity.

4. Hemorrhage

The risk of hemorrhage increases dramatically when inducing abortion after the eighth week of pregnancy. Hemorrhage is a serious situation that can lead to anemia, shock, and death. Soaking through a pad in one hour is considered hemorrhage. If this continues for more than a few hours or if bleeding is profuse, immediate medical attention is needed.

5. Incomplete Abortion

The risk of incomplete abortion increases dramatically after eight weeks of pregnancy. Incomplete abortion occurs when fetal tissue is retained inside the uterus. The tissue can decompose and cause a uterine infection. If the infection is left untreated, sterility and even death can occur. The first signs of uterine infection are fever followed by abdominal pain and tenderness. Incomplete abortion can also cause the uterus to not return back to its normal size and hemorrhage

can result. The bleeding may range from mild bleeding that lasts for an abnormally long time to very heavy, profuse bleeding. These situations require medical attention and often require a surgical abortion, possible blood transfusion and antibiotics.

6. Ectopic Pregnancy Complications

Ectopic pregnancy occurs when the fertilized egg becomes implanted in the fallopian tube. This is a life-threatening situation that cannot be resolved with an herbal abortion. The signs of ectopic pregnancy include severe sharp abdominal pain on one side, irregular bleeding accompanied with early signs of pregnancy (breast tenderness, nausea, etc.) and feelings of dizziness and weakness. The only way ectopic pregnancy can be resolved is by medical care and medical attention is clearly indicated.

Efficacy of Herbal Abortion

Recorded success rates of herbal abortion are greatly varied. The estimates range between 20-80% depending on the source.^{13,14,23,26} When considering these rates it is important to know that they are largely based on unconfirmed pregnancy termination. To date I have found only one source using confirmed pregnancy statistics. This success rate was 47.7%.²²

The research on the efficacy of herbal abortion is scarce and mostly anecdotal, qualitative and unscientific. There is little to no scientific research, and most of the research that does exist consists of unempirical studies done by herbalists and anonymous healers. That said, there are a number of studies that have been done on herbal abortion that I will review.

Rina Nissim, founder of the Dispensaire des Femmes in Switzerland, writes of a 60-80% effectiveness rate of herbal abortion among women who suspected an undesired pregnancy in her book *Natural Healing in Gynecology*. Nissim states that the women studied used two herbs at a time (generally pennyroyal, cotton root bark or mugwort with parsley, blue cohosh or black cohosh). Nissim reports that the effectiveness dropped considerably after six days past when menstruation was due.¹⁴ Unfortunately this information is anecdotal as there were no confirmed pregnancies cited, and the herbs used were unregulated in their amount, frequency and duration.

A survey from herbalist Collette Gardiner found a high success rate of herbal abortion (75%).²⁶ However only one woman out of the ten in the study had a confirmed pregnancy test, and she did not list the herbs used, their amount and duration. Gardiner also states in her research that her experience with herbal abortion leads her to estimate "a realistic success rate of 20%."²⁶

An informal study done from May 1992 to February 1993 by Robin Bennett evaluated the effects of Wild Carrot Seed (WCS) in preventing implantation. This study was done on thirteen sexually active women, who each took identical dosages and preparations of WCS for one year. Of the thirteen women, three became pregnant, but only one had a confirmed pregnancy test.²⁹ Bennett believes WCS is an effective means of contraception based on her findings and the supplementary research, scientific studies and anecdotal information. One need merely look at Bennett's study, wherein three out of thirteen women in one year became pregnant, to see that it is clearly not a fully effective means of contraceptive.

The most thorough and complete findings on the effectiveness of herbal abortion come from the website of Sister Zeus (www.sisterzeus.com). This website contains a database of herbal abortion findings based on information obtained from a voluntary questionnaire on attempted herbal abortion. According to the herbal abortion database findings as of June 22, 2001: 143 women attempted to start a late period with herbs. Of these 143 women, 52 (36.4%) had unsuccessful herbal abortions, 1 (.7%) miscarried at ten weeks, 1 (.7%) continued the pregnancy, and 88 (61.5%) had a successful herbal abortion. Of these 88 women, 46 (52.2%) had an unconfirmed pregnancy and 42 (47.7%) had a confirmed pregnancy. Out of the 143 women total, 98 had a confirmed pregnancy with a positive pregnancy test. Of these 98 women, 43 (44%) had a successful herbal abortion and 55 (56%) had an unsuccessful herbal abortion. Of the confirmed pregnancies that were successfully aborted with herbs, 7.1% of women began bleeding on day three, 11.9% began bleeding within four days, 16.7% began bleeding in five days, 21.4% began bleeding in six days of herbal treatment, 11.9% began bleeding in seven days, 4.8% began bleeding in ten days and 7.1% began bleeding in fourteen days of herbal treatment.²²

Before going into the specific herbs, their dosages and preparations, I want to discuss the criteria and protocol for herbal abortion and the general characteristics of an herbal abortion.

Criteria for Herbal Abortion

When attempting herbal abortion, the first criteria is to *confirm pregnancy with a pregnancy test*. The next step is to have a back up plan in case the herbal abortion is not completely

successful. This includes having an appointment made in advance at an abortion clinic or with a self help group that does menstrual extractions. A menstrual extraction (ME) is a process in which the contents of the uterus are suctioned out via a device called the DEL-EM. The DEL-EM consists of a suction syringe, tubing, mason jar, and sterile cannula.^{4,7,25} Menstrual extractions are done at home by an experienced group of women. It can be difficult to find an ME, as doctors or nurses do not perform them. ME is only effective up to the eighth week of pregnancy.

The second criteria is *to be under six weeks pregnant*.²⁸ The studies, anecdotal information and research I have done clearly indicate that attempting herbal abortion after six weeks is incredibly risky and increasingly ineffective. A woman attempting herbal abortion should be in good physical and emotional health, she should be clear in her decision and have good support throughout the process. Ideally an individual attempting herbal abortion would have the support and guidance of a knowledgeable herbalist.

Herbal Abortion Protocol

Before an herbal abortion, one should fast on fresh vegetable or fruit juices and water to flush out toxins and stimulate functioning in the organs.¹⁹ During an herbal abortion, it is advisable to eat a healthy whole foods diet of fruits, vegetables, whole grains, nuts and legumes. It is also advised to drink plenty of water, nourishing teas of alfalfa and nettles, and liver-toning herbs after the abortion is complete.

During an herbal abortion, some women have found the following to be helpful: Vigorous exercise, hot baths, "communicating with the spirit child", meditation, visualization, relaxation, sex, orgasm, and nipple stimulation.^{19,21,28} It

is important to *never use tampons when bleeding from an herbal abortion*, so as to be able to assess the amount of blood lost and to prevent an infection. It is necessary to keep the herbs in the bloodstream constant by taking smaller doses every couple of hours throughout the day and night.^{13,19,21} It is also critical to decrease dosage at the first signs of toxicity.

General Characteristics of Herbal Abortion

The following is a summary of some of the general characteristics of a normal herbal abortion. Every woman's body is unique, and every herb has a different effect on the body. This is a general summary of normal characteristics and not a specific prediction for how an herbal abortion will be for every woman.

The first sign of an herbal abortion is vaginal bleeding. This bleeding is a result of the placenta separating from the uterine wall (endometrium) and is similar to or somewhat heavier than an average menstruation. Once bleeding is underway, the herbs should be stopped and the body allowed to continue the abortion. Clotting and cramping occur due to continued placental separation and the dilating of the cervical opening (os) to pass the placenta and embryo. This clotting and cramping can be similar to or much more intense than a normal period. Cramping can range from painful and achy to incredibly intense.

During the first four weeks of pregnancy, most women who abort do not notice the embryo passing. During the fifth to eighth week the embryo becomes bigger and more noticeable. The amniotic sac ranges from the size of a large grape to a chicken egg depending on the length of pregnancy. Prior to the fifth week, most women do not notice the placenta that is passed. Between the fifth to eighth week the

placenta ranges in size from a nickel to a fifty-cent piece. Once the placenta has passed, the uterus contracts and closes off the blood vessels. The bleeding slows and then gradually stops. Bleeding may start and stop for a few weeks. After the abortion is complete, signs of pregnancy will begin to disappear. In general, herbal abortions should occur within five to ten days.^{19,28} If bleeding hasn't begun by two weeks, discontinue the herbs and obtain a surgical abortion or menstrual extraction.

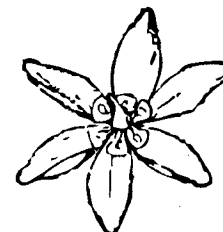
Herbal Abortifacients

The use of herbal abortifacients have been found throughout numerous cultures, countries and periods of history.^{2,6,12}

The list of herbs used to induce abortion is as long as the history of their use. For the purpose of this research paper I am focusing on the herbal abortifacients that have been most commonly used in the western world. I choose to focus on these herbs because they are native to my land and culture, and they have a rich history in western herbalism and midwifery. These herbs have been the most broadly studied and researched herbal abortifacients that I have found. In addition, these are the herbs that are most commonly available in the US.

The following is a list of abortifacient herbs, their dosages and preparation. The list is broken into three sections: Implantation Inhibitors, Emmenogogues, and Oxytocics. Implantation Inhibitors prevent the implantation of the fertilized egg. Emmenogogues stimulate blood circulation to the pelvis and help to bring on menstruation. Oxytocic herbs imitate oxytocin in the body and help to bring on uterine contractions. It is important to note that all oxytocic

herbs are toxic to some degree and are hard on the liver. Women with a history of liver disease are advised to avoid them. One last note: when taking the herbs, only take them in tea, tincture or capsule form. NEVER TAKE ESSENTIAL OILS INTERNALLY. Watch for signs and symptoms of toxicity and decrease dosage at the first signs of toxicity.



PREPARATION TERMINOLOGY

I use some terminology when describing the different herbal preparations. The definitions of these terminologies are as follows.

DECOCTION: A process used to extract the water-soluble properties of hard, fibrous medicinal plants like roots, stems and barks. To make a decoction, simmer the herb in a covered pot for anywhere from 5-30 minutes depending on the herb.

INFUSION: A process used to extract active herbal properties that are readily soluble in water. These include flowers, leaves and non-woody stems. To make an infusion, pour boiling water over the herb and let steep covered for anywhere from 5-20 minutes, depending on the herb.

TINCTURE: A process in which the herb is steeped in a menstrum, usually alcohol, at room temperature. Tinctures can be made from all parts of the herb. To make a tincture, first chop the herb and fill a mason jar. Cover the herb with vodka until the alcohol is one inch above the herb line. Let stand covered in a dark place for anywhere between two weeks to a few months. Strain the herb and store the liquid tincture in a dark place.

GUIDE TO THE PLATES

Eberhardt Press is pleased to reprint the following botanical illustrations. Those found in editions of *General Historie of Plants* by John Gerard (1633), with woodcuts by Jacob Dietrich from *English Physician Enlarged*, commonly known as *Culpeper's Herbal* (1824), and the *British Herbal* (1795) are from the special collections of the research library at Ranch Santa Ana Botanic Gardens. Many thanks to Linda and the Botanic Gardens for their assistance.

These images are for the interest of the reader and are not to be used as a guide for plant identification. When harvesting herbs, it is important to use proper plant identification books or to be in the company of an experienced herbalist.



BH = British Herbal (1795)
CH = Culpeper's Herbal (1824)
GH = Gerard's Herbal (1633)

IMPLANTATION INHIBITORS

Queen Anne's Lace

Daucus carota

The dried seeds of Queen Anne's Lace are used to prevent implantation. The seeds are harvested in the fall when they are dry and ripe. The dosage is: chew 1 tsp. of seeds after unprotected sex twice a day for seven days. In addition, 1 tsp. can be taken daily during ovulation.^{19,20,29}

NOTE: Queen Anne's Lace has a few incredibly poisonous look alikes. When harvesting the seeds, make absolutely certain that you are harvesting the right plant, and only harvest with an accurate field guide or knowledgeable herb person.



IMPLANTATION INHIBITORS

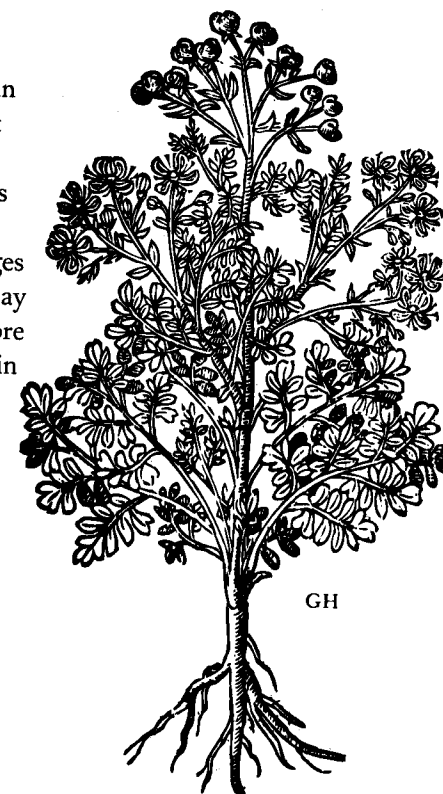
Rue

Ruta graveolens

The leaves and new shoots of Rue are used as strong implantation inhibitors. Women with heart, kidney, or liver damage or who are on heart medications should not take Rue. The dosage is: infusion of the leaves and flowers, 1-3 Tbs. three to four times a day. Or tincture of leaves and flowers, 5-15 drops three to four times a day. Rue is known to cause contact dermatitis and may cause rashes and blistering. It is important to take Rue after eating as it may cause vomiting.¹⁹

Rutin

Rutin occurs naturally in many plant leaves, most commonly Rue, Buckwheat and Elder. It helps to prevent pregnancy. Take as a tablet in dosages of at least 500mg everyday for several days just before and after ovulation. Rutin may also be taken after unprotected intercourse and continued until menstruation occurs.²⁰



EMMENOGOGUES

Angelica

Angelica atropurpurea

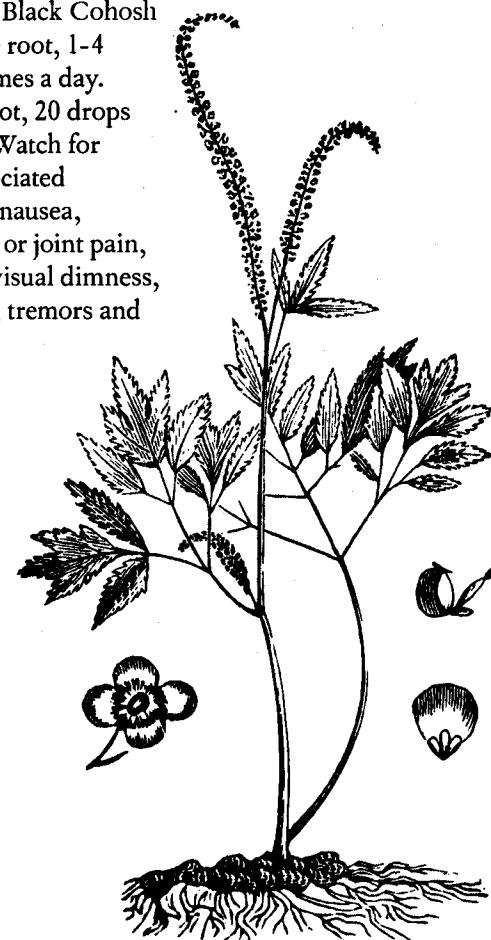
The roots of Angelica are used as a uterine stimulant to help strengthen contractions and encourage the uterus to expel its contents.²¹ Women with a history of cancer, diabetes or heart attack should not use Angelica. The dosage is: a decoction of Angelica root, 1-2 ounces after each meal. Or tincture of Angelica root, 10-20 drops every two hours.^{19,26} Watch for signs of toxicity specific to Angelica: stomach pain, nausea, diarrhea, dilated pupils, labored breathing, weak or rapid pulse, frothing at mouth and convulsions.¹⁹

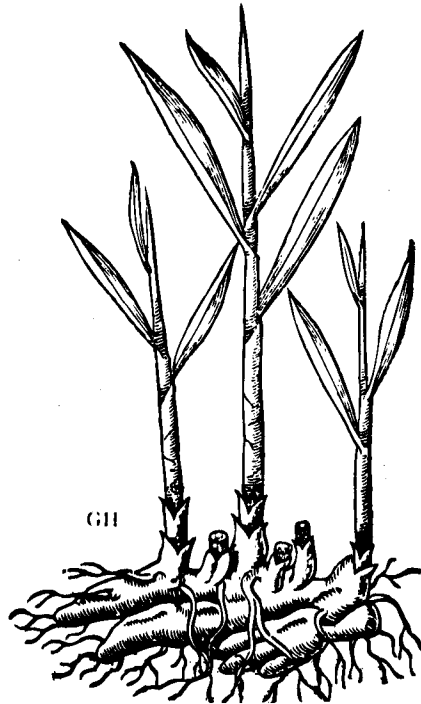


Black Cohosh

Cimicifuga racemosa

The root of Black Cohosh is used to help the cervix relax and open.²¹ Women with a history of heart disease should not use Black Cohosh as it can depress heart rate. The dosage for Black Cohosh is: a decoction of the root, 1-4 Tbs. three to four times a day. Or tincture of the root, 20 drops every six hours.^{19,26} Watch for signs of toxicity associated with Black Cohosh: nausea, diarrhea, abdominal or joint pain, tremors, headache, visual dimness, depressed heart rate, tremors and convulsions.¹⁹





Ginger
Zingiber officinale

The root of ginger is used to bring on menstruation and enhance the effectiveness of other abortifacient herbs. The dosage is a decoction of the root, 1-2 Tbs. four to six times a day. Or tincture of the root 1-4 droppers, four to six times a day.¹⁹

Mugwort

Artemisia vulgaris

Mugwort has been used as a medicinal plant by women beyond recorded history. The leaves are used as a menstrual promoter to bring on menstruation and are best used 10-14 days prior to menstruation.¹⁹ Women with a history of uterine inflammation and recent pelvic infections should not use Mugwort.¹⁴ The dosage is: 1 tsp.-1 Tbs. of leaf infusion taken four to six times a day. Or 30-60 drops of leaf tincture taken four to six times a day. It is important not to take Mugwort for longer than six days!^{19,26}





Parsley

Petroselinum sativum

Parsley is a menstrual regulator and is used as a vaginal suppository and as a tea. The dosage is 3 cups of tea per day and a suppository inserted three days before a period is due. Change suppository every 24 hours. When making the tea, use parsley leaf only, not the seed. Do not exceed the recommended dosage, as overdoses are toxic.^{14,23}

Pennyroyal

Hedoma pulegoides, Mentha pulegium

Pennyroyal is an incredibly strong abortifacient herb. THE ESSENTIAL OIL OF PENNYROYAL SHOULD NEVER BE TAKEN INTERNALLY. A woman with a history of kidney disease or damage should not use Pennyroyal. The dosage is: an infusion of the leaves, 1/2 - 3/4 cups up to 4 cups a day for no more than six days. Or tincture of leaves and flowering tops, 20-60 drops taken up to four times a day for no longer than six days. The signs of toxicity associated with Pennyroyal are: nausea, numbness in hands and legs, liver irritation, kidney and bladder irritation and diarrhea.^{14,18,19,20,21,23,26}



Tansy

Tanacetum vulgare

Tansy should be used with caution and not confused with Tansy Ragwort (*Senecio jacobaea*), a poisonous plant known to cause death in cattle by liver failure.²⁶ Tansy is the most toxic herb listed here and often has side effects such as breast lumps and hemorrhage. The dosage for Tansy is an infusion of the leaves and flowers, 1/2-1 Tsp. three to four times a day. Or tincture of the leaf and flower, 20-45 drops three to four times a day. Do not exceed this dosage and do not take for longer than five days. Watch for signs of toxicity associated with Tansy: Nausea, vomiting, inflammation of the stomach lining, dilated pupils, weakened and/or rapid pulse, convulsions and coma.^{19,21,26}



OXYTOCIC HERBS



Blue Cohosh

Caulophyllum thalictroides

The root of Blue Cohosh is used as a uterine stimulant.²¹ Women with a history of low or high blood pressure, stroke and heart disease should not take Blue Cohosh. The dosage is a decoction of the root, 3/4 - 1/2 cup, three to four times a day. Or tincture of the root 20 drops every four hours for six days or until bleeding occurs.^{19,21} Watch for signs of toxicity associated with Blue Cohosh: Nausea, vomiting, gastritis, headache, thirst, dilated pupils, muscle weakness, poor coordination, cardiovascular collapse and convulsions.^{13,19}

Cotton Root Bark

Gossypium hirsutum

The inner bark of the Cotton Root stimulates uterine contractions and interferes with progesterone to prevent implantation.^{19,21} When using Cotton Root Bark it is important to use only ORGANIC Cotton Root, as non-organic Cotton Root Bark often contains an extremely high amount of herbicides and pesticides. The dosage is: 1-2 ounces of Cotton Root Bark decoction every 30 minutes to one hour. Or tincture of Cotton Root Bark, 10 drops every two to three hours until bleeding begins, to be taken for no longer than six days.^{13,19,23,26}



Blue Cohosh and Cotton Root Bark Compound

Herbalist Feather Jones reports a 70-80% effectiveness rate when using a combination of Blue Cohosh and Cotton Root Bark to induce abortion. She indicates a preparation of 2 parts Blue Cohosh to 1 part Cotton Root Bark. The dosage she recommends is 18 droppers - 1 ounce of the combination spread throughout the day an hour before meals. Jones claims that this remedy can be taken for up to two to three weeks or longer.¹³

CONCLUSION

THIS PAMPHLET IS THE CULMINATION OF MANY YEARS of research into the historic practice of herbal abortion. It has been my attempt to compile this traditional knowledge into a comprehensive resource for midwives and herbalists to use in their practice. The use of herbal abortifacients can play a valuable role in herbal and midwifery practice and is a needed skill for many future midwives. By reclaiming this knowledge midwives will provide women with more abortion choices, while at the same time reclaiming the wise woman tradition of the midwife as pregnancy, birth and abortion provider.

There is still a great deal of knowledge yet to be discovered and reclaimed in the field of herbal abortion. As current information is reevaluated, studied and scrutinized, historic methods are rediscovered and deciphered. While more studies and research into herbal abortion are useful, it is also important to critically analyze the role that science and medicine have played historically in wiping out this information in the first place. I would encourage all midwives who wish to integrate this knowledge into their practice to do further research into this subject. It is through our own investigations and research that we will keep this knowledge in the hands of women.

It is my hope that this pamphlet will act as a catalyst for further research, study and experimentation. I anticipate that abortifacient herbal practice will be reintegrated with midwifery practice. It is my sincere wish that herbalists and midwives will once again provide women with the ancient methods of herbal abortion in new, safe and effective ways.

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