As we were sending the March 1998 newsletter out to our readers we heard about a Supreme Court judgement delivered in response to a public interest litigation filed to seek ban on the use of quinacrine for female sterilisation and to punish the involved doctors and distributors. The judgement upheld the decision conveyed to us by the Drugs Controller General of India in December 1997. See March 1998 newsletter for details.

Though the import, manufacture, distribution and sale of quinacrine for the purpose of chemical sterilisation of women has been declared unlawful, the concerned people have not been proclaimed guilty of playing with thousands of Indian women's lives with a dangerous drug!

Quinacrine in the form of small rice-grain size pellets (tablets) is inserted into the woman's uterus with the help of an inserting device as a quick outpatient procedure. This method of sterilisation has not been proven to be safe. It's use has the potential of being dangerous to the woman's health e.g. ectopic pregnancy, can trigger cancer. The method is not proven to be very effective either on a short-term or a long-term basis as compared to conventional methods. Failures may be associated with genetic abnormalities in the foetus resulting in birth of a defective child. Because the cost involved per sterilisation is very low and it is one of the easiest methods available for sterilisation, the proponents of this method have been campaigning for its large scale use in a poor country like ours.

We have always argued against aggressive population control policies in the past and we will continue to do so. It has been more than a year, since we started the campaign to stop the use of quinacrine for chemical sterilisation of women. Quinacrine sterilisation procedure is being seen as an easy tool for mass sterilisation in the hands of crusaders of population control and hence there is a necessity to put a stop to women falling prey to the use of this illegal, inadequately tested, dangerous, occasionally life threatening method of sterilisation.

After the gazette notification in August 1998, we suspect that the quinacrine sterilisation procedure will be practised clandestinely, especially in relatively remote areas of the country. As in the past, mostly women from the economically backward areas are likely to be targeted to avoid confrontation with the law enforcing authorities, unless the authorities punish those involved in such activities. We are aware of extensive use of quinacrine sterilisation in the states of Karnataka and West Bengal by doctors and non-governmental organisations. It is quite likely that such activities are continuing even in other states. There is a need to know about them.

We are worried about women being targeted for quinacrine sterilisation without being given adequate and appropriate information. Doctors, midwives and health workers in dispensaries, hospitals and private clinics may offer this as a cheap or even a free method of sterilisation. The distinction between a temporary, reversible method like copper-T (Cu-T) and an irreversible, permanent method like the use of quinacrine may not be made clear to women. Hence, we thought of providing an easy guide to identify quinacrine sterilisation.

If you as an individual suspect to have undergone this illegal procedure of sterilisation, or as a member of a group or a well-wisher who has come across any woman, you think, might have undergone chemical sterilisation, the following set of questions will help in establishing the use of quinacrine as a method of sterilisation.