



ATTORNEY GENERAL OF MISSOURI
CATHERINE L. HANAWAY

June 5, 2026

U.S. Environmental Protection Agency
EPA Docket Center
Water Docket (No. EPA-HQ-OW-2022-0946)
Mail code: 28221T
1200 Pennsylvania Ave. NW
Washington, DC 20460

RE: Draft Sixth Contaminant Candidate List

To Whom It May Concern:

In our capacity as chief legal officer of our respective states, we have become aware of a growing threat to the country's waterways as a result of the pharmaceutical drug mifepristone and its approved generics that ought to be addressed by this agency.

To offer some background, mifepristone is a synthetic steroid and endocrine disruptor that interferes with progesterone receptors in the uterus.¹ When a woman ingests mifepristone, it blocks her natural progesterone, which chemically destroys the baby's uterine environment, preventing the baby from receiving nutrition and ultimately starving the baby to death in the womb. Because of these effects, mifepristone has become a common abortifacient that is administered orally to induce termination.

When mifepristone was first approved, back in 2000, the Food and Drug Administration (FDA)—recognizing the inherent danger posed by the drug—promulgated a regimen and risk evaluation and mitigation strategy (REMS). Over the last decade, however, the FDA has eliminated many of the protections that minimized the health risks posed by mifepristone and its

¹ FDA, *Questions and Answers on Mifepristone for Medical Termination of Pregnancy Through Ten Weeks Gestation* (Apr. 8, 2026), <https://www.fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/questions-and-answers-mifepristone-medical-termination-pregnancy-through-ten-weeks-gestation>; see FDA, *MIFEPREX (mifepristone) Tablets Label*, https://www.accessdata.fda.gov/drugsatfda_docs/label/2000/206871bl.htm.

approved generics, including the in-person dispensing and check-up requirements that kept medical staff involved in the process.²

Not only were the FDA’s changes to the REMS unlawful and unsafe,³ but the loosened regulations have also increased the number of chemical abortions occurring in the home, resulting in tons of chemically tainted medical waste being flushed into American waterways.⁴ According to the Guttmacher Institute, chemical abortions accounted for 63 percent of all US abortions in the formal health care system as of 2023, compared to 31 percent in 2014 and 14 percent in 2005.⁵ These numbers do not include self-managed chemical abortions that occur when abortion providers mail mifepristone in violation of state law, which the Guttmacher Institute notes is also increasing.⁶

The upsurge in home-setting chemical abortions has serious implications for the Safe Drinking Water Act. The metabolites in mifepristone and its approved generics remain active post-excretion, meaning they “retain [their] considerable affinity toward the human progesterone and glucocorticoid receptors” after disposal.⁷ On top of this, conventional wastewater treatment is not designed to remove these type of contaminants, so there is strong reason to conclude that the compounds persist in both the environment and the water supply.⁸

By design, mifepristone harms an existing pregnancy by “competitively inhibit[ing] the actions of progesterone at progesterone-receptor sites” and by “promot[ing] uterine contractions and

² FDA v. All. for Hippocratic Med., 602 U.S. 367, 375–76 (2024) (summarizing regimens governing mifepristone from 2000 to 2021). See generally FDA, *Risk Evaluation and Mitigation Strategy (REMS) Single Shared System for Mifepristone 200 MG* (Jan. 2023), https://www.accessdata.fda.gov/drugsatfda_docs/remis/Mifepristone_2023_01_03_REMS_Full.pdf.

³ See, e.g., Danco Labs., LLC v. Louisiana, No. 25A1207, 2026 WL 1345578, at *2 (U.S. May 14, 2026) (Alito, J., dissenting) (noting that the FDA admitted that it “gave inadequate consideration to patient safety when it approved the 2023 REMS”); see also Louisiana by & through Murrill v. FDA, 175 F.4th 310, 321 (5th Cir. 2026) (finding that the 2023 REMS was likely arbitrary and capricious because “the literature did not affirmatively support its position” to remove the in-person requirement).

⁴ Multiple abortion providers encourage women to pass and flush the embryo down the toilet. See, e.g., AID ACCESS, *What to do with blood and tissue after abortion?*, <https://aidaccess.org/en/page/456/blood-and-tissue-after-abortion> (“It is best to flush everything down the toilet . . .”).

⁵ Rachel K. Jones & Amy Friedrich-Karnik, *Medication Abortion Accounted for 63% of All US Abortions in 2023—An Increase from 53% in 2020*, GUTTMACHER INSTITUTE (Mar. 19, 2024), <https://www.guttmacher.org/2024/03/medication-abortion-accounted-63-all-us-abortions-2023-increase-53-2020>.

⁶ *Id.* (citing Dr. Abigail R. A. Aiken et al., *Requests for Self-managed Medication Abortion Provided Using Online Telemedicine in 30 US States Before and After the Dobbs v Jackson Women’s Health Organization Decision*, JAMA, Nov. 1, 2022, <https://jamanetwork.com/journals/jama/fullarticle/2797883>).

⁷ Oskari Heikinheimo, *Clinical Pharmacokinetics of Mifepristone*, 33 CLINICAL PHARMACOKINETICS 7–17 (July 1997), <https://link.springer.com/article/10.2165/00003088-199733010-00002>.

⁸ See generally EPA, *How Pharmaceuticals Enter the Environment* (Jan. 22, 2026), <https://www.epa.gov/household-medication-disposal/how-pharmaceuticals-enter-environment>; see also, e.g., EPA, *Management and Disposal of Unused Pharmaceuticals (Interim Technical Report) (EPA-821-R-08-013) - DCN 05519*, Aug. 2008, at 3-2, <https://www.regulations.gov/document/EPA-HQ-OW-2006-0771-1694>.

softening of the cervix.”⁹ It follows that if mifepristone reaches sufficient concentration, pregnant women who unintentionally ingest the drug through the public water supply could be at greater risk of health complications than the general population.

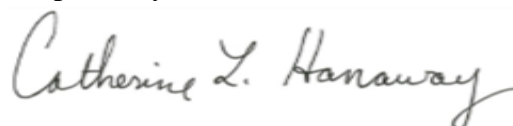
In addition, recent research suggests that mifepristone can affect reproductive organ development and fertility.¹⁰ Yet, unlike other endocrine-disrupting chemicals, such as polyfluoroalkyl substances,¹¹ the agency has yet to take necessary action to mitigate the risks to vulnerable populations.

Since becoming Attorney General of our respective states, we have made it a priority to protect women from the harms associated with mifepristone. Not only have many of our offices taken the lead in multi-state actions aimed at restoring REMS protections,¹² but we have also initiated suit in state court against abortion providers for their misrepresentations about the severity and frequency of side effects that can occur after taking mifepristone.¹³

This comment stems from the same drive to guard public health, particularly among women. As acknowledged by the EPA notice and request for comment, the CCL is to serve “as a first level of evaluation for unregulated drinking water contaminants that may need further investigation of potential health effects.” As mifepristone’s use is now at an all-time high, its inclusion on the CCL is a logical step to further investigate the impact of its newfound prevalence on the public health.

We therefore urge this agency to abide by its duty to identify the contaminants most harmful to “sensitive subgroups,” including “pregnant women,” 42 U.S.C. § 300g–1(b)(1)(C), and amend the 6th CCL to include mifepristone and its approved generics. The health of pregnant women and Americans everywhere may depend on it.

Respectfully Submitted,



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⁹ National Library of Medicine, *Mifepristone, Mechanism of Action (Complete)*, Hazardous Substances Data Bank, PUBCHEM <https://pubchem.ncbi.nlm.nih.gov/source/hsdb/6841#section=Mechanism-of-Action-Complete&fullscreen=true>

¹⁰ Cf. V.L. Marlatt et. al, *Impacts of endocrine disrupting chemicals on reproduction in wildlife and humans*, ENVIRONMENTAL RESEARCH, Vol. 208, May 15, 2022, <https://www.sciencedirect.com/science/article/pii/S0013935121018855> (finding that exposure to endocrine disrupting chemicals is a significant risk factor for decreased fertility in wildlife and humans).

¹¹ Press Release, *Biden-Harris Administration Finalizes First-Ever National Drinking Water Standard to Protect 100M People from PFAS Pollution*, EPA (Apr. 10, 2024), <https://www.epa.gov/newsreleases/biden-harris-administration-finalizes-first-ever-national-drinking-water-standard>.

¹² See, e.g., Suppl. Am. Compl., *Missouri v. FDA*, No. 4:25-cv-01580 (E.D. Mo Dec. 19, 2025), ECF 281.

¹³ See, e.g., *Missouri v. Planned Parenthood Fed’n of Am.*, 25AC-CC05812 (Cole Cnty. Cir. Ct. July 23, 2025).

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