

## **Senate Bill 45 / House Bill 281 (replaced HB-15)**

- Senate Bill 45 makes “any material, compound, mixture, or preparation which contains any quantity of ephedrine, pseudoephedrine, or phenylpropanolamine, or their salts, isomers, or salts of isomers” a Schedule IV drug; limits medical practitioners from dispensing more than 9 grams of such products within a 30-day period; and prohibits the refill of a prescription of such products prior to 30 days from the date of the previous prescription.
- House Bill 281 replaced House Bill 15 on February 1 and mirrors the language of SB-45.
- Making pseudoephedrine a scheduled drug would: 1) allow the drug to be tracked using KASPER (Kentucky All-Schedule Electronic Reporting System) and 2) enables law enforcement to charge individuals with illegal possession and/or trafficking.
- Two other states have made pseudoephedrine (PSE) products available only by prescription
  - Oregon in 2006. Number of meth lab seizures dropped from an average of 450 labs in 2004 to 12 labs in 2010 (a 97.3% decrease).
  - Mississippi in July 2010. Number of lab seizures dropped approximately 65% within months.
- Approximately 77 percent of pseudoephedrine sales in 2009 was diverted to methamphetamine production.
- Pseudoephedrine is the only ingredient that cannot be substituted in the manufacturing of methamphetamine.
- Requiring a prescription for PSE would only impact 15 products; there are hundreds of over-the-counter products without PSE that will still be available to treat cold and allergy symptoms.
- PSE was a prescription drug until the Food and Drug Association (FDA) changed it to over-the-counter in 1976, against DEA advice.
- Kentucky had 111 children contaminated at meth labs during 2009.
- From 2007-2010 there were 350 children removed from the home because they were present when police discovered an active meth lab. The actual number of children affected is about 4 times higher.
- The total annual costs for Kentucky law enforcement to respond to and clean up meth labs in 2010 is estimated to be \$2,916,761. This does not include the costs related to those arrested (trial, plea agreements, public defender, incarceration), which is estimated at more than \$26 million for 2009.
- The rise in “one-step” cooking methods has made it easier to produce and transport meth. Many of the containers used in the production process are then discarded, creating “Environmental/contamination issues, as well as dangerous exposure issues to the public.”
- Every 1 pound of methamphetamine that is produced creates 5 pounds of hazardous waste.
- Moving PSE to prescription-only will not cause an increase in PSE use. It will, however, greatly reduce abuse and meth cooking.
- The practice of “smurfing” – getting a number of people to buy their limit of PSE and turn them over to the meth cooker – will virtually be eliminated, freeing up law enforcement resources.
- There will not be an increase in the work load for pharmacists, doctors or emergency rooms. There are plenty of alternative drugs to prescribe, and pharmacists will receive an additional dispensing fee.
- To contact your legislator call toll-free – 1-800-372-7181.

**Get additional information about the bills and need for legislation at  
<http://operationunite.org/investigations/sb45hb15-facts-sheet/>**