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Patterson: Michigan Senate bill could curb meth abuse through tracking system

L. BROOKS PATTERSON

I have been serving our region for four decades with the goal to make Oakland County among the best places to live, work, play and raise a family.

From my early days as county prosecutor and now as Oakland County executive, I have witnessed the results of the scourge of illegal drugs in our communities.

Methamphetamine is among the drugs that is drawing a great deal of attention lately around Michigan. Like other drugs, meth has deadly consequences, but it poses an additional threat: it often is made in a neighborhood home, leaving behind a toxic, poisonous mess that poses a danger to nearby families.

Virtually everyone agrees that strong steps must be taken to crack down on the production of meth. The most effective way to do that is to restrict access to some of its precursor ingredients, namely, pseudoephedrine. That's an ingredient found in dozens of over-the-counter cold and allergy remedies that many of us use on a regular basis.

However, I disagree with those who propose to require a doctor's prescription to buy pseudoephedrine-containing cold medicine. It's simply not reasonable to ask every parent to take an afternoon off of work every time a child has a cold, or when allergies kick in and they need relief. It's not sensible to require additional co-pay for a doctor's office visit. Plus, it's not prudent to put an even greater burden on Medicaid, the program taxpayers fund to provide health care for low-income families.

Fortunately, there is a better solution. The Michigan Senate recently passed — with unanimous support — Senate Bill 333 sponsored by Sen. John Proos. This law would set up a real-time electronic tracking system to block the sale of products containing pseudoephedrine if the purchaser exceeds legal limits. Pharmacists would simply input the purchaser's information into the system and if they exceeded the legal limit for the day or the month the pharmacist would be notified to refuse the sale.

This electronic system would replace the paper logs that have proven burdensome to retailers and pharmacists. These paper logs have been an inadequate tool for law

enforcement that currently has to comb through page after page to compare stores in the area to identify individuals abusing the system.

To date, 16 states have adopted this electronic stop-sale technology. The results are encouraging. Already this system is blocking the sale of nearly 126,000 grams of illegal pseudoephedrine sales per month.

The electronic tracking system also stops those in search of pseudoephedrine products from simply crossing state lines to evade the sales limit, enabling neighboring states to work together more effectively to stop the excessive sales of pseudoephedrine products.

It also doesn't burden consumers with time-consuming and expensive doctor visits. And it doesn't add to retailers' or governments' cost of doing business; the makers of pseudoephedrine-containing products fund the system.

In all my years of protecting Oakland County families from illegal drugs, this is one of the most impressive tools I've seen to keep these poisons off our streets.

L. Brooks Patterson is Oakland County Executive. Email comments to letters@detnews.com.

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Opinion

Bill helps track deadly 'meth'

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By Sen. Jim Marleau, R-Lake Orion

A 15-year-old girl is forced to take care of her younger sister because their mother is addicted to methamphetamine.

A wife endures years of loneliness, lies, theft and pain at the hands of her husband, a meth addict.

A 34-year-old chronicles his agonizing descent in a documentary while the drug ravages his body and eventually kills him.

These are true stories of the effects of the devastating drug methamphetamine, or "meth." Meth is deadly. It kills users and it destroys families.

As chair of the Senate Health Policy Committee, I oversee legislation addressing the problems of such lethal drugs. The committee introduced Bill 333 and it passed the Senate unanimously. The bill would implement the National Precursor Law Exchange, or "e-tracking" system. This system blocks the illegal sale of medications containing pseudoephedrine (PSE), one of the primary components used to make meth. But it also maintains consumer access to these medications, which help treat the common cold and allergies.

The process works in a similar way to a credit card system. Under the e-tracking system, pharmacists and retailers can refuse sale of these medications if a purchaser goes over the legal limit. The statewide system provides up-to-the-minute information on PSE purchases and allows law enforcement to identify those who are abusing the system. E-tracking is available at no cost to Michigan taxpayers.

Most important, e-tracking has proven effective. Sixteen states have this type of system. In eight of these states, the technology blocks nearly 126,000 grams of illegal PSE sales per month.

Meth addiction leads to sad and horrific endings. Shawn Bridges, the 34-year-old addict who made the documentary about his death, had a heart attack at age 26, his abuse of the drug crippling his heart. In his final months, Shawn wore a catheter and a feeding tube, he spit up blood, and his weight fell severely before he passed away at 35.

Shawn's story serves as a reminder.

We must do what we can to prevent further tragedies.

An e-tracking system is the most effective way to prevent the manufacturing of this deadly drug in Michigan.

Sen. Jim Marleau, R-Lake Orion, is the chair of the Senate Health Policy Committee. He serves the citizens of the 12th Senate

District.

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Everything Michigan

Viewpoint: E-tracking is best way to balance access to cold medications and fight meth production

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By **Joyce Pines | Kalamazoo Gazette**

Courtesy photo
John Proos

By Michigan Sen. John Proos

Methamphetamine, or meth, is a powerfully-addictive, illegal drug that can be manufactured in homes using pseudoephedrine, a common ingredient in cold medications. Meth abuse can result in violent and psychotic behavior and the labs used to make it are dangerous, often well-armed and full of toxic chemicals that have resulted in explosions and death.

Our local communities have been especially hard hit by this drug, with the majority of meth labs in the state discovered in southwest and south central Michigan. The safest and surest way to protect our children and communities from the harmful impacts of meth is to stop a producer's access to the main ingredient.

There are two means to achieve this. The first is to require doctor prescriptions for cold medication like Sudafed. The other option is the reform that I have sponsored, which would limit the amount of pseudoephedrine a person can buy and require retailers to consult an online system to ensure the buyer has not exceeded the limit. Both plans would drastically curtail meth production by limiting access to supplies, but the cost to the average consumer is dramatically different.

I believe that requiring a prescription for anyone suffering from the common cold, allergies or the flu every time they need medication is punitive, unnecessary and extremely costly. Most Americans get the common cold annually and nearly 60 million of us will get the flu this year.

Forcing residents to see a doctor - at roughly $100 per visit without insurance - will drive up the cost of medical care and overload an already stressed health care system. This tremendous cost increase is one of the reasons that the Asthma and Allergy Foundation of America opposes "prescription mandates." I agree with their concerns that a prescription requirement would make decongestants difficult and expensive to obtain.

We should be doing all we can to lower the cost of health care and make it more user-friendly, not piling on

additional burdens and red tape.

That is why I have offered a different solution to the meth problem. My legislation would have Michigan join more than a dozen other states in using an online tracking system called the National Precursor Log Exchange (NPLEx) to relace the paper logs currently used by pharmacies and retailers today. This system would allow store logs to be discretely compared against one another and across state lines.

The online system is used by pharmacies and law enforcement to track sales of over-the-counter cold and allergy medications containing precursors to methamphetamine, like pseudoephedrine. The National Association of Drug Diversion Investigators provides NPLEx at no cost to states that have legislation requiring real-time electronic monitoring of precursor purchases, and agree to use the system.

E-tracking allows a pharmacist to know - in real time - if a person has reached their pseudoephedrine limit. We currently have laws addressing this ingredient, but nothing to prevent meth manufacturers from going from store to store buying their supplies. This reform would change that.

This system has a proven record in stopping illegal purchases in other states. South Carolina stopped nearly 6,000 boxes of cold medicines in January alone and Iowa officials reported blocking more than 17,000 illegal sales since September - enough to make more than 45 pounds of meth.

As chair of the Senate Appropriations Corrections and Judiciary subcommittees, I am also ensuring that Michigan supports the drug courts that help drug addicts by prescribing treatment instead of prison. This is the moral thing to do and will save tax dollars.

There is no debating that meth is a serious problem and that we must do something more to prevent producers from making this dangerous drug. The difference is how to accomplish this without making the daily lives of Michigan families unnecessarily difficult.

I am working to implement NPLEx in Michigan because e-tracking of pseudoephedrine cold medications is the only solution that balances the priority of access to needed medication and curbing supplies for meth producers.

John Proos is state senator representing the 21st District, which is Van Buren, Berrien and Cass counties.

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Fight Meth Without Penalizing Law-Abiding Citizens
By Henry Fuhs Jr.
Chairman of the Michigan Pharmacists Political Action Committee.
Lansing State Journal (Lansing, MI)
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There has been intense debate as of late around the methamphetamine problem here in Michigan, as well as steps to combat it with a prescription-only bill being debated in Lansing that restricts access to medicines containing pseudoephedrine (PSE).

Such a debate has engulfed policymakers and Michiganders from all corners of the state, leading many to believe that cold and allergy sufferers, to say nothing of taxpayers and medical professionals, should have to bear the weight of such a policy for the greater good. While I respect the critical nature of the meth problem, I simply cannot agree with that argument.

The policy would simply be too damaging, particularly when a viable alternative exists.

First, a prescription-only policy for common cold and allergy medications containing PSE means that law-abiding citizens will need to take time from work and school to visit their clinicians, who themselves will suffer from an influx of patients.

Indeed, basic math tells us that as patients flood to clinics in search of prescriptions for basic medicines like Aleve-D or Advil Cold & Sinus, which they would otherwise obtain by visiting a community pharmacy or local retailer, fewer patients who actually need a doctor's attention can receive the care they need.

Also, with a shortage of doctor availability, more will flock to urgent care and emergency rooms based on the belief that they will be seen that day (as opposed to waiting for an appointment), again leaving those in dire need of attention out in the cold.

In addition to problems at the clinic or hospital, a prescription-only policy will bring massive, additional costs to our state in general.

The loss of sales tax revenue from over-the-counter PSE-containing medications would end up costing the state dearly, likely into the millions, as prescriptions are not subject to our state sales tax.

Moreover, such a policy would bring increases in Medicaid payments to physicians further exacerbating an already dire budget situation. Making matters worse, with nearly 29 percent of Michiganders uninsured, increases in hospital visits would certainly burden state finances.

In addition to problems with the implementation of this bill, a prescription-only policy

would be far more injurious than simply tracking the purchase of these medications in real time and blocking illegal ones.

Such a system is available in the National Precursor Law Exchange (NPLEx), which, in addition to blocking the illegal sale of PSE medications, would also maintain consumer access. The system works similar to a credit card system, whereby pharmacists and retailers can actually refuse sale of these medications if a purchaser approaches or goes over the legal limit.

The system would span statewide, and provide up-to-the-minute information on PSE purchases. Through and through it is a far more painless, yet effective approach to combating meth production.

We must emphasize that 16 states have adopted or implemented this electronic stop-sale technology and in the eight states that have had the system in place long enough to track, this technology blocks nearly 126,000 grams of illegal pseudoephedrine sales per month.

Michigan saw 756 meth incidents in 2010. Meth infects our children, schools, cities and towns, and our policymakers must work to find new solutions.

However, punishing law-abiding citizens, their doctors and pharmacists is hardly the way to get there. This problem does require us to rise above politics, as many prescribe, and recognize bad policy when we see it: prescription-only does not work for Michigan, electronic tracking does.