

Drug Disposal Group
Interested Parties Meeting

December 16, 2003

Attached is the attendance list.

Introductory Remarks

Senator Lynn Bromley opened the meeting at 10am. She noted that her goal was to pass a bill on this issue, hoping to come out of today's meeting with an outline. Her deadline for drafting legislation is January 6 at the Revisor's Office. Let's not make perfect the enemy of the good, she suggested.

The group represented a wide variety of constituencies and viewpoints. As individuals introduced themselves and stated their reasons for attending the meeting, Senator Bromley noted the priority categories into which they fell. Seven said they were here for diversion issues, nine regarding waste issues, five for education, three for mistaken prescriptions, and two for security issues.

Karen Simone from the Poison Center noted that the center would support anything environmentally sound, as they used to recommend flushing because of the speed with which you could get rid of it. She noted that garbage cans are not safe for kids and are often raided by drug abusers. We need to make sure we're not making these drugs more accessible.

Many members of the state's environmental community, including the state's fish pathologist, biologist, as well as the state geologist, attended and raised concerns regarding the impact of drug disposal on groundwater. They noted that a lot of work is being done on the downstream effects of flushing prescription drugs. Ann Pistell of the DEP said that they deal a lot with product stewardship issues, which has a role in this discussion. Scott Austin of the DEP noted that he deals with hospitals on this issue and that there are no hospital incinerators left in Maine.

We were joined by Laurie Tenace of Florida who is working on this issue regarding pharmaceuticals and personal care products. She is scheduling a teleconference on this issue in January.

The Rite-Aid representative noted that we need to find out what the Federal regs were for scheduled drugs and that an appropriate method for paying for this needed to be found.

Marci Sorg, from the Margaret Chase Smith Center, was involved in the drug mortality/morbidity studies recently and works with the state medical examiner. She has seen the results of a lot of mistakes, especially in the elderly.

Ann Robinson, representing Pharma, noted that diversion is an issue with today's children, stressing that drugs ought to be taken by those to whom they were prescribed. The science issues are complex and emerging with lots to be learned. She advised the group to proceed with caution.

Jim Cameron from the Maine Attorney General's Office is concerned about diversion, noting that Schedule II drugs have a huge street value. A collection mechanism must keep this in mind. Security must be built in.

Pharmacies, represented by both Jim MacGregor of the Maine Merchants Association, and Bob Morissette, noted that reverse distribution is a common practice.

Current Practices

Scott Austin noted that there are some current requirements, including RCRA, which controls toxic drugs (chemotherapy, etc) and the DEA, which dictates controlled drug disposal. He noted the need to involve the State Board of Pharmacy. The Maine Hospital Association has identified alternatives to incineration. Scott noted that there would be some pollution concerns. Steam sterilization is a cleaner non-incineration option for waste but not for drugs.

It was noted that law enforcement incinerates at 1800 degrees. They incinerate evidence, both pills and marijuana, totaling 9.1 tons per year. This is mostly marijuana. It was also noted that chemo drugs cannot be incinerated.

Ann Pistell noted that the USGS has identified pharmaceuticals in the water. The EPA is doing a sampling and we should have results by the end of the month.

Suggestions for Legislation

Dr. Gressit told the group that the DEA has said that controlled drugs cannot be returned to pharmacies and other providers. Apparently specific licensed individuals cannot handle these as returns. He suggested a mail-back program where a packet would go to the post office and the DEA could empty the box and dispose of the contents appropriately.

Ann Pistell suggested considering product stewardship. The returns could go back to the pharmaceuticals, similar to the mercury switch law. She also suggested that perhaps they could be handled as hazardous waste and be collected as such. The group discussed this but concerns over the safety of handling the drugs were prevalent.

Marci Sorg cautioned the group to consider HIPPA issues.

Senator Bromley threw out the idea of doing a pilot program with one drug but the idea was dismissed. All prescription drugs would be preferable.

The group agreed that incineration would be worth pursuing. However, the “air people” at DEP need to be able to weigh in on this. Extra manpower and resources would be needed for this. Having the DEA incinerate would satisfy the licensing question.

The DEP suggested that Maine needs better waste control treatment plants, which should be the subject of a separate bill.

Roy McInney of the MDEA had a number of comments. 1) From a public safety standpoint, the MDEA would like to be of assistance, as long as it does not endanger its core mission, which is to reduce the drug supply through identification and prosecution of drug traffickers. 2) MDEA has a central evidence facility, which has 5000 individual exhibits collected each year. They dispose of these through incineration. Approx 9 tons were destroyed last year. 3) We must find funding for using MDEA’s infrastructure. It’s \$88/ton for destruction. And the cost of staff needs to be covered. They would need two people and a vehicle to do this. Roy was interested in finding out how much volume we’re expecting but this number was too hard to discern (somewhere between 5000 and 10000 pounds was suggested).

The public health nurse asked the group what they thought of including veterinarian medications. The group seemed interested and agreed to include them.

Focusing the Legislation

Senator Bromley suggested that the legislation be a pilot program. Marci Sorg was solicited to suggest particular counties where diversion was the worst and she recommended Cumberland and Washington. However, Anna Bragdon suggested that we ask for a statewide program and only reduce it to a pilot program if need be.

Dr. Gressit suggested using school districts to distribute information and mailers.

Marci Sorg suggested that there may be federal dollars and money from drug manufacturers. Jim Cameron noted that the manufacturers have foundations. We would need to determine how we would use the money before we asked. It’s important to have no strings attached. He suggested Purdue Pharma and Pfizer.

It was suggested that we poll the state for current disposal behaviors. There is a statewide survey already done which we could add a question to for a fee. It is sent to 4000 Maine residents.

The group discussed doing a random opening of 100 packages to learn from them. We could translate found pills into actual dollars. The Poison Center could do the research on the pills with some staff help. There may be privacy issues that need to be addressed.

Issues needing further attention

Postal inspectors

Liquids

Committee referral – HHS

Mobilization of support (including AARP)

Research aspect

Rules should be minor technical.

Conclusion

Senator Bromley wrapped up the meeting by reviewing the group's progress. A bill will be drafted which will call for mailers for returned prescriptions to be destroyed by the MDEA. It will include veterinary meds and the rules will not be major substantive.