

**LATE
TESTIMONY**

SB2361

**HTH, CPN
Committee Hearing
02/13/2012**

LATE



founded 1881

February 13, 2012

The Honorable Josh Green, Chair
Senate Health Committee
Conference Room 229

RE: SB 2361 (Dela Cruz) and SB 2474 (Green) – OPPOSE

Dear Chairman Green:

Thank you for this opportunity to comment and register opposition to SB 2361 by Senator Donovan Dela Cruz and your own SB 2474 . These bills would re-classify common nonprescription medicines containing pseudoephedrine (PSE) as prescription-only medicines. CHPA is the trade association representing major U.S. manufacturers of nonprescription medicines, including products that would be affected by this legislation. We strongly oppose requiring a prescription for nonprescription PSE products.

PSE is a safe and effective active ingredient found in leading cold and allergy medicines like Claritin-D, Allegra-D, Zyrtec-D, Sudafed, Mucinex-D and others to provide congestion relief. An estimated 18 million Americans purchase pseudoephedrine each year. To help prevent illegal diversion of PSE for meth production, federal law moved all PSE products behind the retail counter, limits purchases to 3.6 grams per day and 9 grams per 30 days, and requires a purchaser's signature in a logbook that is accessible by law enforcement. CHPA supported this law.

Nineteen states have gone a step further and enacted laws requiring real time stop sale systems, or e-tracking, of PSE sales. Electronic tracking unifies the logbooks that were previously kept in each individual store, preventing criminals from skirting the limits by visiting multiple stores. We believe that this solution strikes the proper balance between preventing illegal diversion while preserving access to these needed medicines.

Real-time stop sale technology:

- Stops meth crimes before they happen by blocking illegal sales.
- Blocked over 2 million grams (over 850,000 boxes) nationwide from being sold in 2011 alone.
- Is provided free of charge to retailers and Hawaii law enforcement.
- Provides law enforcement with a record of purchase attempts and helps them identify meth cooks and ultimately, meth labs.
- Maintains consumer access to legitimate sufferers of allergies and colds.

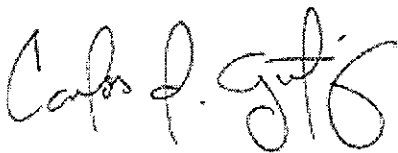
A prescription requirement:

- Does not deter criminals. Illicit use of prescription drugs is the fastest growing category of drug abuse.
- Would remove existing quantity limits on PSE purchases; allowing criminals to obtain large amounts of PSE for greater production of methamphetamine.
- Will raise healthcare costs for consumers, healthcare payors, and the state.
- Would decrease state sales tax revenues, as over-the-counter medications are subject to sales tax while prescription medications are not.
- Is overwhelmingly opposed by consumers. A poll conducted by the Asthma and Allergy Foundation of America found that 71% of patients were against requiring prescriptions for PSE products.
- Will put law enforcement in the position of arresting visitors who bring cold and allergy medication to the Hawaiian islands without a prescription.
- Does nothing to address meth abuse. 80% of law enforcement in Oregon (a state which requires a prescription for PSE) claim meth remains the region's greatest drug threat.
- Does not address meth related crime. In fact, in Oregon meth is the drug that contributes most to violent and property crime as reported by Oregon law enforcement agencies surveyed.

Criminals will continue to adapt to drug laws. Mexico banned pseudoephedrine years ago, yet is the primary source of methamphetamine in the U.S. We would like to work with the legislature on a solution that will not unfairly punish law-abiding Hawaiians. That solution is to pass a bill to require use of the industry-funded National Precursor Log Exchange (NPLEx) as embodied in SB 2228 under consideration by the Health Committee.

Thank you for your attention to this matter. If you have any questions, please contact me or Lauren Zirbel at 808-294-9968.

Sincerely,



Carlos I. Gutierrez
Director, State Government Relations

Cc: Members, Senate Health Committee