

Impact of HB 5029 on Connecticutians

As currently written, House Bill 5029 would:

- **Require a doctor's prescription for pseudoephedrine**
 - Pseudoephedrine (PSE) is a safe and effective decongestant found in many over-the-counter (OTC) cough/cold/allergy medications. These products, used by millions of consumers, are found in virtually every medicine cabinet in America. They are convenient and cost-effective components of the healthcare system and carry some of the brand-names you know: **Sudafed, Tylenol Sinus, Advil Cold & Sinus, Claritin-D, Aleve Sinus & Headache, TheraFlu, Nyquil and Contac.**
- A box of medicine that can now be purchased at any pharmacy, grocery, or other retail establishment for a few dollars will cost more than \$75.00 due to the required doctor visit and prescription.
- **The cost to the state of Connecticut will likely be significant**
 - Connecticut agencies that currently distribute PSE medicines, such as prisons, mental health institutions and university health centers will be required to provide a doctor consultation before dispensing this medicine, thereby increasing costs.
- According to the DEA, Connecticut has had virtually no small clandestine methamphetamine labs in the state. There was one methamphetamine lab incident/seizure per year in 2001, 2002 and 2003 and none in 2004. Though press articles report two such events in 2005, this legislation is highly restrictive compared to the actual scope of the methamphetamine lab problem in the state.
- Phenylephrine (PE) is a decongestant medicine that is being substituted for PSE in many formulations, which cannot be converted into methamphetamine. This process has begun but might take a few more years to complete if FDA (the federal Food and Drug Administration) approval is required. Therefore, it may be some time before PE is available in most medicines that currently contain pseudoephedrine. Cutting off Connecticutians' option for cold/cough/allergy relief is an extreme measure that is not warranted.
- Last week, federal legislation which addresses the methamphetamine problem was enacted by Congress. By April 7, 2006, Connecticut stores will have to limit the amount of PSE sold to a customer each day, and in a 30-day period. Furthermore, by September 30, 2006, retailers in Connecticut must place all PSE products behind a store counter or in a locked case and require purchasers to show a photo ID and sign a log of their purchase. These stringent requirements will keep PSE out of the hands of local methamphetamine cooks. Therefore, placing PSE on prescription status will impose excessive restrictions on needed, cost-effective medicines without evidence it will further reduce methamphetamine labs.