



CONNECTICUT PHARMACISTS ASSOCIATION

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Testimony
Before the Judiciary Committee
Monday
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Re: HB 5029: An Act Concerning Methamphetamine

Good afternoon Senator McDonald and Representative Lawlor. My name is Jennifer March-Wackers. I am the Communications Director of the Connecticut Pharmacists Association. The Connecticut Pharmacists Association is a professional organization representing more than 1,000 pharmacists throughout the state. I am here today to address HB 5029: An Act Concerning Methamphetamine.

Pharmacists recognize that there is an increase in the use and abuse of methamphetamine. What was once considered a problem only in the rural areas of a few mid-western states has made its way across the country into our backyard. While the problem is still considered minimal in the New England and Northeast region, it is certainly necessary to address the issue.

Many states in the west and mid-west have already passed legislation. Some states require that certain products used in methamphetamine production must be kept behind the pharmacy counter. Other states have limited these products to only single ingredient pseudoephedrine solid dosage forms. Some states restrict the sale of all products containing pseudoephedrine. Certain states have designated these products as a Schedule V controlled substance. Tennessee has actually limited these products to be dispensed by a pharmacist and sales are tracked in the form of a pharmacist prescription order.

Since the drafting of this proposed legislation, Congress has passed the Combat Methamphetamine Epidemic Act of 2005 as part of the U.S. Patriot Act (Public Law 109-177). Under the federal legislation sales of pseudoephedrine and phenylpropranolamine are limited to 3.6 grams per person per day or 9 grams per person per month. It also requires sellers to place pseudoephedrine and phenylpropranolamine behind the counter. There are provisions for a written or electronic "log book" that lists the product name, quantity sold, name and address of the purchaser, date and time of the sale, and requires that the purchaser present a photo ID and sign the logbook.

The federal law is extensive and is considered a minimum standard from which states can build on. It will go into effect on April 9, 2006. Whatever we decide, we must consider that there needs to be a delicate balance between protecting public health and ensuring access to necessary medications when looking at legislation. Methamphetamine is a serious nationwide problem. We have a great opportunity to be ahead of the game in Connecticut and take lessons learned from other states. Let's look at their lessons learned and apply them to our situation here in Connecticut. We believe this federal legislation is a great start.