



Maine Benzodiazepine Study Group
University of Maine Center on Aging
5723 Donald P. Corbett Building
Orono, Maine 04469-5723
Phone: 1 (207) 581-3444
Fax: 1 (207) 581-4490
Website: <http://www.mainebenzo.org/>

DATE: November 22, 2006

TO: **John P. Walters**
Director, Office of National Drug Control Policy
Executive Office of the President

Michael Chertoff
Secretary, Department of Homeland Security

Karen P. Tandy
Administrator, Drug Enforcement Administration

Andrew C. von Eschenbach
Acting Commissioner, Food and Drug Administration

Stephen L. Johnson
Administrator, Environmental Protection Agency

Scott Burns
Deputy Director, Office of State and Local Affairs,
Office of National Drug Control Policy

John C. Horton
Associate Deputy Director, Office of State and Local Affairs,
Office of National Drug Control Policy

FROM: **The Undersigned Individuals and Organizations**

RE: **Proposal for a National Unused Drug Disposal Program**

According to the National Survey on Drug Use and Health, over 15 million Americans misused psychotherapeutics and pharmaceuticals in 2005, including approximately 2.5 million Americans who misused pharmaceuticals for the first time, outpacing new

initiates for marijuana and cigarettes.¹ “The illicit use of synthetic drugs such as methamphetamine and otherwise-legal prescription drugs,” the President warned, “has become a severe and troubling problem, both at the national level and in affected communities.”²

One of the most common sources of illicit pharmaceuticals is the home medicine cabinet. In many cases, large amounts of unused and expired pharmaceuticals are readily accessible to potential abusers through theft, diversion, or criminal resale. In most jurisdictions, no sanctioned mechanism exists to collect and dispose of unused pharmaceuticals, forcing legitimate users to stockpile unused medicine or dispose of them in an environmentally unsafe manner. “Greater educational efforts are needed regarding quick and safe disposal of unused and unneeded medications,” an Administration official recently observed.³

One strategy for responding to this alarming national problem that the undersigned support is the development of a national program that would oversee the collection and disposal of all unused pharmaceuticals. By ridding medicine cabinets of unused medicines, we would significantly reduce the availability of pharmaceuticals for illicit diversion, provide a mechanism for disposal more environmentally sound than “hush and flush,” and remove a significant source of accidental and lethal poisonings among children.

The data gathered from sampled returns associated with such a national program will be valuable for analyzing waste in existing prescribing and compliance practices, generating significant savings for the national healthcare system.

Such a program would incorporate a mail-back and/or drop-off framework that permits residents to return pharmaceuticals to an alternative secure repository.

We recommend:

- Establishing a pilot mail-back program before instituting a national program; steps prudent to benchmark outreach, participation, volume, return and disposal practices; and
- Following evaluation, a standardized unused medicines collection, disposal, and education program should be established nationwide.

To ensure this program remains self-funded and reduces the burden on local jurisdictions, we propose a nominal 25 cent fee be assessed to each filled prescription.

We believe the effectiveness of an unused medicines disposal program will be resounding and can be measured through:

- A reduction in crime related to household prescription theft and diversion,
- A reduction of medication-related accidental poisonings among children,
- A decrease in new initiates of abused pharmaceuticals,

- A reduction in medication errors among older adults from excess stored medicines,
- A reduction in negative environmental impact from improperly disposed medicines, and
- A reduction in donation of inappropriate medicines following disasters.

We recognize that excess pharmaceuticals pose a national health, safety, and environmental threat that must be combated with a standardized program. We offer our assistance in developing such a system and encourage your thoughtful review of our recommendation.

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1. *Results from the 2005 National Survey on Drug Use and Health: Detailed Tables*; Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies; September 2006.
 2. *National Drug Control Strategy*, The White House, February 2006.
 3. *Testimony before the House Government Reform Committee Subcommittee on Criminal Justice, Drug Policy, and Human Resources*; Joseph T. Rannazzisi, Deputy Assistant Administrator, Office of Diversion Control; July 26, 2006.

Stevan E. Gressitt, M.D.
 Acting Secretary
 Maine Unused Drug Disposal Group
 314 Clark Road
 Unity, Maine 04988

gressitt@gmail.com 207-441-0291

Lenard W. Kaye, D.S.W./Ph.D.
 Acting Secretary

Maine Benzodiazepine Study Group
 UMaine Center on Aging
 5723 D.P. Corbett Bldg.
 Orono, Maine 04469

len.kaye@umit.maine.edu 207-581-3483

cc: Christopher Williamson, Ph.D., Lieutenant Commander, U.S. Navy, Policy Analyst,
 Office of Supply Reduction, Office of National Drug Control Policy, Executive
 Office of the President

**Supporters of the Initiative
 (As of November 22, 2006)**

American Society of Health-System Pharmacists
 (Kasey K. Thompson, Pharm.D., Director, Practice Standards and Quality Division,
 Director, Patient Safety)

Endorsers of the Initiative

(As of November 22, 2006)

ORGANIZATIONAL AND PERSONAL ENDORSEMENTS

Ruth Blauer, Executive Director
Maine Association of Substance Abuse Programs, ME

Wesley R. Davidson, Chief Executive Officer
Aroostook Mental Health Services, Inc., ME

Dave Galvin
PH:ARM: Pharmaceuticals from Households: A Return Mechanism Pilot Project in
Washington State; Manager, King County, Washington State, Hazardous Waste, WA

Stevan Gressit, M.D.
Maine Unused Drug Disposal Group, ME

Joseph Lebenzon, M.D., Chief, Child & Adolescent Psychiatry
Washington County Psychological Assoc., PA, ME

Jim Maier M.D., Research Psychiatrist
P.I.E.R. Program, ME

Dan Moody, Solid Waste Coordinator
Washtenaw County, MI

Edward Pontius, MD; President
Maine Association of Psychiatric Physicians, ME

Ilene S. Ruhoy, M.D.
University of Nevada, Las Vegas, NV

Susan Sullivan, Program Director
CAP Quality Care, Inc., ME

ORGANIZATIONAL ENDORSEMENTS

American College of Emergency Physicians - Maine Chapter, Manchester, ME
(Anna Bragdon, Executive Director)

City of Palo Alto, Palo Alto, CA
(Phil Bobel, Manager Environmental Compliance Division)

Community Environmental Council, Santa Barbara, CA

(Jenny Phillips, Pollution Prevention Program Manager)

Unused and Expired Medicines Registry, Bellaire, TX
(Matthew Mireles, Ph.D., President and Director of Research)

Cuyahoga County District Board of Health, Parma, OH
(Erv Ball, R.S., Assistant Director of Environmental Health)

Day One, South Portland, ME
(David J. Faulkner, M.S.W., Executive Director)

EXP Pharmaceutical Services Corporation, Fremont, CA
(Mark Harvey, Director of Operations)

Health Care Without Harm, Arlington, VA
(Anna Gilmore-Hall, Executive Director)

Hudson Valley Regional Council, New Windsor, NY
(John F. Crews, Executive Director)

Maine Department of Public Safety, Augusta, ME
(Michael P. Cantara, Commissioner)

Maine Drug Enforcement Agency, Augusta, ME
(Roy E. McKinney, Director)

Maine General Health, Waterville, ME
(Emilie van Eeghen, Vice President)

NeedyMeds.com, Gloucester, MA
(Richard J. Sagall, M.D., President)

North East Occupational Exchange, Bangor, ME
(Charles Tingley, Ph.D., ABPP, Executive Director)

Orange County Sanitation District, Fountain Valley, CA
(Thomas E. Gaworski, Principal Environmental Specialist)

Pharmaciens Sans Frontieres Comite Intl, Clermont-Ferrand, FRANCE
(Ghislaine Soulier, Communication Officer)

PharmEcology Assoc, LLC, Brookfield, WI
(Charlotte A. Smith, R.Ph., M.S., President)

Pleasant Point Health Center, Perry, ME

(Jack Martinez, Psy.D.)

Rutland County Solid Waste District, Rutland, VT
(Deane Wilson, Waste Reduction)

UMaine Center on Aging, Orono, ME
(Lenard W. Kaye, D.S.W./Ph.D.; Professor and Director)

Washtenaw County, Ann Arbor, MI
(Janis Bobrin, Washtenaw County Drain Commissioner)

PERSONAL ENDORSEMENTS

Heather Ashton, D.M., FRCP
(Emeritus Professor, University of Newcastle upon Tyne, Great Britain)

Chris Baumgartner
(PMP Coordinator, Maine Office of Substance Abuse, ME)

James Berry, M.D.
(Family Physician Faculty, EMMC Center for Family Medicine, ME)

Lynn Bromley
(Senator, Maine Legislature, ME)

Steve Burke
(Health & Environmental Investigator III, Public Health - Seattle & King County, WA)

James R. Burnett, Jr., M.D.
(Psychiatrist, Kennebec Valley Mental Health Center, ME)

Mary Jane Bush
(Health Planning Director, Bucksport Bay Healthy Communities, ME)

Gail M. Chase
(The Honorable and former State Auditor, ME)

Benjamin Crocker, M.D.
(Medical Director, MMC PHO Behavioral Healthcare Program, ME)

Kathleen F. DeHaven
(Graduate Student, UMaine School of Social Work, ME)

Mike Driscoll

(Member, Prince Edward Island Prescription Drug Awareness Group, Canada)

Jerry Evangelista

(Engineering Supervisor, Orange County Sanitation District, CA)

Bill Flagg

(Director, Community Relations and Development, Cary Medical Center, ME)

Percy Galimberti, M.D., Ph.D.

(Research Scientist, Texas A&M Health and Science Center, TX)

Angela Harnish

(Member, Prince Edward Island Prescription Drug Awareness Group, Canada)

Sharon D. Hart

(Health Director, South Hadley Board of Health, MA)

Kerry M. Kenney, R.Ph.

(A*VISTA Senior Sense, ME)

Sonya Khan

(MPH Candidate, Boston University, MA)

Paula Knight, R.Ph., ME

Peter J. Koutoujian

(Representative, Chairman, Joint Committee on Public Health, MA)

Shawn Lewin

(Member, Penobscot Area TRIAD, ME)

Peter McCorison

(Director, Substance Abuse Services, Aroostook Mental Health Center, ME)

Gerry Mugford, Ph.D.

(Clinical Epidemiologist, Memorial University, Canada)

Anni Outinen-Jones, R.N., B.S.N.

(Maine School Administrative District 49, ME)

Julie Pease, M.D.

(Psychiatrist, Sweetser, ME)

Anne Perry

(Representative, State of Maine, House, ME)

Sidney H. Schnoll, M.D.
(Vice President, Risk Management, Pinney Associates, CT)

Sarah Sellers, Pharm.D., M.P.H.
(Consultant, IL)

Stephen Soumerai, Sc.D.
(Professor, Harvard Medical School and Director, Drug Policy Research Group, MA)

Erik Steele, D.O.
(Eastern Maine Healthcare Systems, ME)

Joe Stephenson, ME

Kevin Wallace, M.D.
(Clinical Associate Professor of Medicine, Dartmouth Medical School, MA)

Alice White
(Graduate Student, UMaine School of Social Work, ME)

Jessica Winter, ME

Biruh Workeneh, M.D., ME