Getting rid of what the doctor ordered

Proper disposal of unwanted medications is daunting, costly

By Lisa Kocian, Globe Staff | June 15, 2008

Over the course of a four-hour event last weekend at a Wellesley drugstore, 41 people from area communities, including Natick and Needham, dropped off enough unwanted painkillers, antibiotics, and antidepressants to overflow a 30-gallon barrel. The idea was to prevent those drugs from reaching the water supply.

"I'm thrilled," Wellesley resident Angelika Angino said as she handed over a bag of unwanted medications. "I don't want to pollute the water."

Efforts to keep pharmaceuticals out of the water supply are ramping up in Massachusetts, but they are running into legal and financial constraints that make the proper disposal of drugs difficult.

For years, the federal government advised flushing prescriptions down the toilet once they were no longer needed. But recently, an increasing number of reports of potentially harmful medications making their way into water supplies through ground water have caused concern around the country.

One new solution has been to hold medicine-collection events, or "takebacks," at which unwanted or outdated prescription and over-the-counter medications are gathered for incineration. Although several have been held in Western Massachusetts, last Saturday's collection at the Eaton Apothecary in Wellesley apparently was the first in Greater Boston.

An officer from the Norfolk County sheriff's office was present at all times and was responsible for the controlled substances, as required by law. All the drugs will eventually be incinerated, considered to be safer for the environment.

The \$2,000 to \$3,000 cost of the collection and disposal, which will be paid by Eaton Apothecary, stems largely from incineration fees and payments to law-enforcement officials to watch over the controlled substances until they are destroyed.

Other costs can surface unexpectedly, according to Lynn Rubinstein, executive director of the nonprofit Northeast Recycling Council, who was on hand to help count and sort the medications. Someone had brought in an ancient-looking brown glass bottle, with a typed label that was decades old, containing a mercury-based medication. With the highly toxic mercury considered a hazardous waste, disposing of just that bottle's contents would cost \$200, she said.

Based in Brattleboro, Vt., the Northeast Recycling Council has become the leader in medicine takebacks for the region. In addition to its work with Eaton Apothecary and municipalities in Western Massachusetts, the organization has partnered with the CVS pharmacy chain in other states to collect unwanted drugs.

What makes Massachusetts "a tough nut to crack," said Rubinstein, is the extra burden associated with the disposal of controlled substances. In many states, once police collect the drugs, they can be destroyed alongside substances collected as criminal evidence. But in Massachusetts, controlled substances collected in takebacks cannot be combined with criminal evidence, and so requires a separate incineration and a separate law-enforcement witness, she said.

The requirement adds financial and logistical burdens to a process that's already cumbersome, Rubenstein said.

State Representative Peter Koutoujian is hoping to change the situation, however. As a chairman of the Legislature's Joint Committee on Public Health, the Waltham Democrat held a hearing last month on pharmaceuticals in the water supply and is now promising to file legislation to try to mitigate the problem.

"We've got to make it easier for those communities that want to properly dispose of drugs to do so," said Koutoujian. "I've got to believe there's a better system we can utilize in Massachusetts. We just have to determine what that is."

The state Department of Public Health, in coordination with the state Department of Environmental Protection and other agencies, is also working on the issue, according to Suzanne Condon, director of the DPH's Bureau of Environmental Health. The state is looking at annual household hazardous-waste collection days as an alternative to the special takeback events, for example, as well as the model used for the disposal of hypodermic needles and other medical "sharps," she said.

"We think this is an emerging area of public health science, and we need to pay close attention to it," she said.

Water quality has received heightened attention recently, after an Associated Press investigation earlier this year reported that the drinking water supplies of 41 million Americans are contaminated with some level of pharmaceuticals.

In Massachusetts, the possibility of drugs in the water is largely an unknown. Water supply systems are not required to test for pharmaceuticals.

The Massachusetts Water Resources Authority, which provides water to 11 area communities among its 50 municipal clients across the eastern half of the state, performed some testing and released results in April. Of the 31 medications - including Prozac, Ibuprofen, several hormones, and some endocrine disruptors, which are thought to interfere with regular hormonal function - included in the screening, none were found in the MWRA's water supply.

Environmentalists were first alerted to potential problems a few years ago, when aberrations in aquatic life were discovered - specifically, male fish that had taken on female characteristics.

A Boston-based nonprofit group, the Product Stewardship Institute, said it recognizes the potential for environmental concern in disposing of prescription medications, but considers the safety issue - keeping drugs away from those who might abuse them - to be a more immediate concern.

The institute is pushing pharmaceutical companies to take responsibility for disposal, adding the extra costs to its retail prices, according to Scott Casel, its executive director. Disposal simply costs too much for the government to handle, he said.

"There needs to be a national solution," said Casel, who added that some pharmaceutical companies are signaling a willingness to comply, and some are not.

Canada uses a takeback program that adds only a few pennies to the cost of each prescription, according to David Galvin, president of the PSI's board.

Galvin works as a hazardous-waste program manager in the state of Washington, where pharmacies are experimenting with drop boxes to collect unwanted medications, but not controlled substances, he said.

"Ultimately I think we may need to amend the federal controlled substance law to allow a little flexibility there for handling these leftovers," said Galvin.

Part of the answer might come from a pilot program recently launched in Maine. The state is testing a mail-back system, allowing any medications, including controlled substances, to be sent directly to state drug-enforcement authorities for disposal, he said.

So what should consumers do while the authorities are trying to figure all this out?

Depends on whom you ask. DPH official Condon says right now, the state advises flushing highly addictive drugs, like the painkiller OxyContin, and throwing away other medications after mixing them with a substance like cat litter to make them less attractive to scavengers.

But the Northeast Recycling Council's Rubinstein disagrees with the state's policy, which is similar to federal guidelines. She discourages any flushing, saying people should, if possible, hold onto their old medications and wait for an official collection day.

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