

Pharma loses one battle over drug take-back programs, but wins another

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The latest skirmishes over drug take-back programs yielded a mixed outcome this week for the pharmaceutical industry, which has been battling local governments that want drug makers to pick up the tab.

Two days ago, officials in Snohomish County, Wash., voted unanimously to require drug companies to run a program that would allow consumers to dispose of unwanted and unused medicines. At the same, the Los Angeles County Board of Supervisors delayed passing a similar ordinance until November, when they will review an existing disposal program that is not financed by industry.

The actions, nonetheless, underscore the growing challenge that the pharmaceutical industry faces as more local governments consider such programs. So far, eight counties or cities in California and Washington have created programs that require drug makers to foot the bill, and environmental activists noted that more are being proposed elsewhere, such as in Cook County, III.

Local officials are pursuing these laws in the face of rising disposal costs, growing concerns about contaminants in water supplies, and a desire to reduce the threat of drug abuse stemming from medicines lingering in cabinets. And they have been emboldened after the US Supreme Court last year upheld the legality of the first such ordinance, which was passed in 2012 in Alameda County, Calif.

"We do have an existing take-back program, but we can't sustain it financially," Jefferson Ketchel, the Snohomish County Health District's environmental health director, told us. "The pharmaceutical industry resisted this, but we studied what other counties (that have ordinances) have done and felt this was appropriate." The program is estimated to cost about \$570,000 annually.

For its part, the Pharmaceutical Research and Manufacturers of America, or PhRMA, <u>objected</u> to the effort, saying that maintaining the program would be unwieldy and require the added burden of adhering to US Drug Enforcement Administration regulations because controlled substances would likely be turned in by consumers. The trade group also complained that a mail-back option could be used to divert medicines.

PhRMA, instead, suggested the county embrace an industry effort called <u>MyOldMeds.com</u>, which recommends unused drugs should be placed with cat litter, sawdust, or coffee grinds in plastic bags, and then tossed in the trash. A PhRMA spokeswoman wrote us that this is "the safest, most convenient, affordable and eco-friendly method" for disposing unwanted medicines.

But environmental activists say this should be a last resort. And the US Food and Drug Administration recommended this option only when take-back programs are not available.

In Los Angeles, meanwhile, a proposed ordinance was tabled amid skepticism about the effectiveness of existing programs created by other local governments. "In spite of widespread public support, these efforts have not made much progress due to various obstacles and were ultimately unsuccessful," Michael Antonovich, a Los Angeles County supervisor wrote in the motion to delay a program.

In the interim, the pharmaceutical industry, which opposed the ordinance in Los Angeles, as well, will be asked to undertake a public education program about the proper disposal of unwanted medicines. The PhRMA spokeswoman praised the decision not to pass the ordinance and said the educational effort will include MyOldMeds.com.

One environmental activist told us the decision is a "slight setback" and remains optimistic that an ordinance will pass. "Siding with corporate interests over public health and safety can be a dangerous political position, and the people will have the final say," said Heidi Sanborn, who heads the National Stewardship Action Council. "This is not over," she told us.

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