

January 22, 2011

Chief Lane Roberts
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Chief Roberts:

As a way of introduction, I am a registered pharmacist and pharmacy manager in Washington, MO. I previously was the pharmacy director for a major grocery chain in St. Louis. I understand that your municipality is considering an Anti-Meth Ordinance in the near future and thought it might be helpful for you to have some input regarding the results of the local ordinance we passed here in Washington in July of 2009.

Fact #1. Our sales of PSE dropped dramatically (roughly 85%) for comparable months before and after the ordinance went into effect. Granted, some of the legitimate sales went to neighboring communities, but for the most part we eliminated what we considered questionable or bad sales.

Fact #2. In the eighteen months since the ordinance was passed, I can attest that we have had no one tell us that they were forced to make a doctor visit just to get a prescription for Sudafed. As long as they are regular patients established with a physician, I don't believe anyone has had a problem obtaining the necessary authorization needed to obtain a prescription for the item they wanted. If they are told by their physician to just "pick up some Sudafed", the local doctors are aware of the ordinance and will give them a prescription with no problems.

Franklin County, being so close to St. Louis where precursors are still available, still sees a fair share of meth lab arrests and problems, but it has been my observation that the number of arrests have slowed down somewhat and probably have not increased. Did the problem just move further west? Probably, but I think that is a much bigger reason this type of ordinance needs to be expanded statewide. I even had a customer who is involved with a group that volunteers to do roadside trash pickup that he was utterly amazed at how many empty sleeves from PSE products they see along the highway, undoubtedly from cooks disposing of packaging along the road.

The costs to the community with regard to enforcement, prosecution, cleanup and most importantly care of children involved in endangerment situations is astronomical. I am constantly amazed by reports of meth lab seizures involving young children in close proximity to extremely hazardous and dangerous situations that have been reported over the past several years. They also endanger innocent citizens living around their cooking operations in apartments, motels etc. Police and volunteer fireman are also often exposed to volatile situations when called upon to respond to explosions or suspicious chemical odors evolving from a “cook”. A situation was noted just last month where the local fire chief noticed a 2-liter bottle tossed on the side of the road. He speculated that a “shake and bake” cook had seen him approaching in a marked vehicle and got rid of the bottle thinking he was being pursued. Luckily no children or unsuspecting individuals came upon the caustic solution first.

Will MethChek solve the problem? I agree it is better than the monitoring done previously, but there is already known evidence that “smurfers” can get around the system by using multiple or stolen identification. People who are not even directly connected with a cooking operation can make a good “tax free living” just by providing raw product to the cooks. The recent economic downturn just magnifies that possibility.

As you know most of the communities in Franklin County have passed a prescription requirement ordinance. From what I have heard, I don’t think any of them are sorry that they took that step. We really need a statewide ban on sales, just look at the statistics from the State of Oregon, that pretty much says the whole story in a nutshell.

Feel free to share this with your councilmen if you want. I hope that this can help influence their decision.

Sincerely,

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