The industry is now using talking points created in August of 2011 entitled:

MYTH VS. FACT ON PSE PRESCRIPTION

The industry talking points are full of false and misleading statements.

This is a direct response.

1. THE INDUSTRY ATTEMPTS TO MISLEAD YOU: The industry begins by declaring that it is a myth that "In a State Like Oregon That Has Implemented Prescription-Only Requirements For PSE, The Number Of Meth-Related Incidents Have Decreased." The industry cites an *Oregon Public Broadcasting* story from April of 2011 discussing rising meth arrests in Oregon.

THE TRUTH: Returning PSE to a prescription drug is about getting rid of meth labs, not getting rid of meth. Most meth comes from Mexico, therefore Oregon meth arrest data tracks with the purity and potency of meth coming from Mexico. That has nothing to do with stopping meth labs in Oregon by returning PSE to a prescription drug. That being said, recent Oregon meth arrest data is as follows:

March 2007: 25.8 meth arrests per 100,000 population December 2009: 14.2 meth arrests per 100,000 population September 2011: 18.5 meth arrests per 100,000 population

2. THE INDUSTRY ATTEMPTS TO MISLEAD YOU AGAIN: The industry next states that it is a myth that "Requiring A Prescription For PSE Would Not Increase Healthcare Costs." The industry cites a *Las Vegas Review-Journal* article from April of 2011 which quotes a retail lobbyist who said "only 2 percent of the products in question end up in the black market." The industry also cites an Op-Ed In the *San Francisco Chronicle* and a story from the *Denver Post* to support their position that returning PSE to a prescription drug would "Drive Up Health Costs."

THE TRUTH: Requiring a prescription for PSE will increase some healthcare costs, but those pale by comparison to the costs associated with smurfing and meth labs. In Oregon, Medicaid costs went up by a little under \$8,000 per year for the entire state: http://www.oregondec.org/CSPSC/012b-DHS.pdf. This amount is less than the cost of a single day of burn unit care for one child.

The estimate of a 2 percent diversion rate for PSE going to meth labs stems from an unpublished report from the Kentucky Legislative Research Service. The reason that report was unpublished is because it was full of errors, including that estimate, which made two irrational and absurd assumptions: (1) That Kentucky law enforcement authorities caught every meth lab in Kentucky the year of the study; and (2) that each meth cook only cooked once a year. Law enforcement experts that have spent a good portion of their careers taking down meth labs and going after smurfers estimate that the real diversion rate is around 70 to 80 percent.

Furthermore, it is important to keep in mind that we are only talking about 15 products and their generics, all of which are already behind the counter. Hundreds of other products will remain over-the-counter and on store shelves. Those are the products that most consumers purchase.

3. THE INDUSTRY ATTEMPTS TO MISLEAD YOU YET AGAIN: The industry states that it is a myth that "The NPLEx System Does Not Go Far Enough In Stopping Illegal Purchases Of PSE." They cite an April 2011 article from the *Birmingham News* reporting that 26,354 attempted purchases of PSE were blocked in the first three months of operation of NPLEx in Alabama. They also cite similar blocked sales statistics from Florida and Missouri.

THE TRUTH: This completely misses the point. The NPLEx system stops sales of PSE beyond legal limits ("exceedence smurfing"). But that is not the problem. The problem is group smurfing and false ID smurfing. NPLEx does not stop those forms of smurfing, which are fueling thousands of small "one pot" meth labs, as well as super labs in California which use organized groups of smurfers in interstate and intrastate operations. Stopping exceedence smurfing is great. But the fact that there are so many meth lab incidents even when exceedence smurfing is being stopped is direct evidence that group smurfing is the main way that meth cooks are supplied. This is not a sign of success. It is a sign of failure. Smurfers are using NPLEx to ensure their purchases are lawful, so they can continue to feed the underground market for PSE without exceeding lawful limits and getting caught.

4. THE INDUSTRY ATTEMPTS TO MISLEAD YOU YET AGAIN: The industry states that it is a myth that a "Prescription-Only Law Would Not Have An Effect On Law-Abiding Citizens." The industry cites a December 2010 editorial from the *Springfield News-Leader* discussing the "burden for all those people who already have difficulty getting in to see a doctor, the cost of a prescribed medicine compared to one over the counter and lost time waiting in a doctor's office."

THE TRUTH: We are only talking about 15 products and their generics, all of which are already behind the counter. Hundreds of other products will remain over-the-counter and on store shelves. Those are the products that most consumers already purchase. Furthermore, law abiding citizens actually benefit from not having the house next to them go up in flames in a meth lab explosion, and by savings in crime and health care costs they pay for through their taxes.

5. THE INDUSTRY ATTEMPTS TO MISLEAD YOU YET AGAIN: The industry states that it is a myth that "Implementing A Prescription-Only Law For PSE Would Make It More Difficult For Criminals To Obtain The Product." The industry cites an April 2011 article from *KPBS* reporting that meth seizures on the Mexican border have spiked.

THE TRUTH: Returning PSE to a prescription drug is about getting rid of <u>domestic</u> meth labs and their effects, not getting rid of all meth. Most meth comes from Mexico. Furthermore, Mexico has completely banned PSE. As such, meth from Mexico is mostly made from another precursor, and is weaker as a result. Weaker meth is less damaging and less dangerous to the community.

QUESTIONS? Contact:

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Relevant web site: http://www.oregondec.org/pse.htm