



Testimony of the Maine Public Health Association in Support of L.D. 8, An Act To Support Collection and Proper Disposal of Unwanted Drugs

Joint Standing Committee on Environment and Natural Resources
Room 216, Cross State Office Building
Wednesday, February 17, 2021

Good morning Senator Brenner, Representative Tucker, and distinguished members of the Joint Standing Committee on Environment and Natural Resources. My name is Rebecca Boulos. I am a resident of South Portland and executive director of the Maine Public Health Association. I am here today in support of LD 8, “An Act To Support Collection and Proper Disposal of Unwanted Drugs.”

MPHA is the state’s oldest, largest, and most diverse association for public health professionals. We represent more than 500 individual members and 30 organizations across the state. The mission of MPHA is to improve and sustain the health and well-being of all people in Maine through health promotion, disease prevention, and the advancement of health equity. As a statewide nonprofit association, we advocate, act, and advise on critical public health challenges, assuring that all people in Maine lead healthful lives, regardless of their income or where they live. We are not tied to a national agenda, which means we are responsive to the needs of Maine’s communities and we take that responsibility seriously.

This bill establishes drug take-back stewardship programs, to be approved by the Department of Environmental Protection, and requires certain drug manufacturers to collect and dispose of certain drugs for these programs.

According to the National Survey on Drug Use and Health, in 2019, more than 20 million Americans misused controlled prescription drugs, including opioids and pain relievers.¹ The study showed that most abused prescription drugs were obtained from family and friends, often from the home medicine cabinet.

Given this public health problem and to prevent misuse and safe drug disposal, each year National Prescription Drug Take Back Days are led by the National Drug Enforcement Administration (DEA) and held across the country. October 24, 2020 was the most recent Take Back Day. In Maine, on that one day alone, 119 law enforcement officials participated in the event; there were 144 drop-off locations across the state; and *40,148 pounds of drugs were collected* – slightly less than Massachusetts (40,285 pounds), but more than New Hampshire, Vermont, Rhode Island, and Connecticut *combined* (total: 35,560 pounds).

During the 19 years of the drug take back program, Maine has collected 452,265 pounds of medication – again, greater than the combined totals of New Hampshire, Vermont, Rhode Island, and Connecticut (total: 422,946 pounds), and more than Massachusetts (425,517 pounds).²

A 2015 study published in the *American Journal of Public Health* analyzed data collected in 11 Maine cities from 2011-2013 during 6 DEA national medication take-back events.³ During this time, 13,599 individual medications from 1,049 participants were taken; and 553,019 units were cataloged, resulting in 69.7% medication waste (see Table 1 below).

TABLE 1—Medication Returns by Number of Units and Percentage Waste for Each Medication Category: Drug Enforcement Administration Medication Take-Back Events, Maine, 2011–2013

Medication Category ^a	Original Units, ^b No.	Returned Units, ^c No.	Waste, ^d %
Noncontrolled Rx	393 640	311 670	79.2
Over-the-counter	248 867	173 452	69.7
Schedule II Rx	25 196	18 337	72.8
Schedule III Rx	20 023	14 371	71.8
Schedule IV Rx	15 373	12 441	80.9
Nonmedication item	13 110	11 950	91.2
Unknown	1420	5413	. . .
Schedule V Rx	7369	5386	73.1
Total combined units	724 997	553 019	69.7

Note. Rx = prescription medication.

^aBased on Micromedex American Association of Poison Control Centers coding and the Controlled Substance Act of 1974.^{16,17}

^bCapsules, tablets, milliliters, patches, or grams, obtained from returned-bottle label.

^cDetermined by manual counting.

^dCalculated by units returned divided by original units dispensed. If original units were missing, medication was excluded from the total percentage waste calculation.

While the drug take-back event has had great success in Maine over the years, a solution is needed every day. There is a need in Maine for more regular collection and disposal of unused prescription medications. Safe and regular disposal prevents medication misuse and ensures that medications do not end up in our water supply. This bill is critical for addressing this public health issue. Therefore, we respectfully ask you to vote LD 8 “Ought to Pass.” I would be happy to answer any questions you may have. Thank you.

¹Substance Abuse and Mental Health Services Administration. (2020). Key substance use and mental health indicators in the United States: Results from the 2019 National Survey on Drug Use and Health (HHS Publication No. PEP20-07-01-001, NSDUH Series H-55). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from <https://www.samhsa.gov/data/>

²U.S. Department of Justice, Drug Enforcement Administration Diversion Control Unit. National Prescription Take Back Day Collection Results. https://www.deadiversion.usdoj.gov/drug_disposal/takeback/index.html

³Stewart, H., et al. Inside Maine’s medicine cabinet: Findings from the drug enforcement administration’s medication take-back events. *AJPH*. 2015,105:1.