

Criminals All: Will Drug Dealers Play While the Law Abiding Pay?

Contributed by Aaron Lee
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For Immediate Release

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Fairfax, VA. The illegal production and distribution of highly addictive and dangerous Methamphetamine is on the rise in the United States. Its manufacture and use has devastating consequences on users as well as on public safety and the taxpayer.

Although large labs run by criminal gangs produce the majority of “Meth”, about 20% is produced by Mom & Pop shops found primarily in rural areas.

Recipes for cooking Meth are readily available on the Internet, and ingredients are common household items such as camping fuel, drain cleaner, and pseudophedrine (“PSE”), a decongestant in Over-the-Counter cold remedies. Although local and federal law enforcement and state legislators have been actively combating Meth labs, legislation has now been drafted in the U.S. Senate and House to address the problem.

But according to Kerri Houston, Vice President of Policy for Frontiers of Freedom, one provision of the federal legislation is not only a misallocation of resources, but penalizes consumers, pharmacists and retailers without an in-store pharmacy.

“The goal of the Combat Meth Act of 2005 is laudable,” states Houston, “but one of its key provisions runs the risk of turning people with runny noses into lawbreakers and pharmacists into cops — a role they are neither prepared for, nor should they be expected to assume.”

The provision that Ms. Houston calls “anti-consumer” and “ineffective” is a rule change requiring all cold medicines that contain PSE to be placed behind the counter at pharmacies to be distributed only by licensed pharmacists. Cold remedy purchasers would also be required to sign a registry for the medications that could lead to an invasion of privacy as their purchases are tracked even though no criminal behavior is present.

“It will be nearly impossible for consumers to comparison shop for cold remedies by price or by reading labels for ingredients and directions. And as pharmacists will have to share time formerly spent dispensing and advising on prescription drugs with handing out OTC products, this will surely raise the cost of these medications. Consumers and pharmacists will be put out, but illegal drug makers will still have easy access to PSE through other means.”

Houston believes that cracking down on illegal cross-border Internet sales would do more to dry up PSE needed for Meth production than “making me stand in line with my Kleenex box waiting to see the pharmacist for an Over-the-Counter medication.”

“Nearly 80% of PSE used for Meth is either smuggled into the U.S. from Mexico or Canada, or purchased through the Internet. Placing OTC cold remedies behind the counter is at best a 20% solution to an 80% problem. At worst it’s erodes consumer choice and privacy.”

“An additional problem with restricting cold remedy sales is that many consumers live in areas where a full service pharmacy is a long drive away, so they purchase Aspirin, Sudafed or Tums a local convenience or grocery stores. This regulatory move will completely eliminate their access to cold remedies. And what about workers who come off a third shift with a bad cold? If the pharmacist’s window closes at 8 p.m., they are out of luck.”

Houston continued, “OTC drugs are a safe and effective way to take care of a common ailment. It’s supposed to be easy.”

“Placing an added burden of convenience and cost onto consumers and pharmacists will not stop criminals bent on illegal activity. Taxpayer dollars could spent more wisely on public education regarding the dangers of Meth and recognizing the signs of use, providing grants to local law enforcement for finding and busting Meth labs, encouraging “anti-bond” legislation and stiffer sentencing guidelines that keep Meth producers of the street, and putting reasonable limits on one-time retail sales of PSE products to a single purchaser.”

Oklahoma recently shut down a number of Meth labs by monitoring excess sales of PSE in retail stores that exceeded reasonable usage for the local population. “This is direct interdiction with the criminals,” says Houston, “and serves as a great model for anti-Meth resource allocation.”

Houston concludes, “Out of frustration and born of good intentions, politicians sometimes legislate just because they can. There is no question that Senator Jim Talent (R-MO) and Representative Roy Blunt (R-MO), sponsors of the Control Meth Act of 2005 are concerned about the harm that its use incurs.”

“But when the intent is to take out the bad guys, you need to make sure you are aiming directly at them, and not innocent bystanders with white hats and miserable colds.”

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