Testimony of Ian Goldstein Verde Environmental Technologies, Director of Government Affairs

Testifying in Support of H.B. No. 570 "An Act concerning Public Health, Prescription Opioids, Deactivation and Disposal Systems" Health and Government Operations Committee Maryland General Assembly

Chair Pena-Melnyk, Vice Chair Cullison, and members of the Health and Government Operations Committee, thank you for the opportunity to testify before you today in support of H.B. 570 "*An Act concerning public health, prescription opioids, and deactivation and disposal systems,*" which would require a personal use pharmaceutical deactivation and disposal system to be dispensed with an opioid prescription, at no cost to the end user, for the purpose of allowing the intended user to safely deactivate and dispose of leftover or an unused/unwanted supply.

My name is Ian Goldstein, and I am the Government Affairs Director for Verde Environmental Technologies, maker of the patented Deterra Drug Deactivation and Disposal System. I have spent my professional career working in public health policy and specifically substance misuse policy for the last 10 years. I am also a Howard County resident and lifelong Marylander. Deterra utilizes proprietary activated carbon, which permanently deactivates opioids and other dangerous drugs by adsorbing and permanently binding drugs, rendering them inert, unavailable for misuse and safe for the environment.

I applaud the Committee for introducing this bill aimed at lessening opioid misuse initiation rates with a commonsense approach to preventing misuse before it starts by requiring pharmacies to co-dispense drug deactivation and disposal systems with all future opioid prescriptions.

Since the start of the opioid epidemic, Maryland leaders have implemented evidence-based upstream prevention strategies such as prescription drug monitoring programs and youth prevention support programs to break the cycle of addiction that can lead to illicit drug misuse and overdose. I also applaud the efforts of Maryland leaders to prevent overdose by distributing naloxone in at-risk communities and schools and implementing other overdose prevention strategies. However, according to the Centers for Disease Control and Prevention (CDC), overdose deaths reached record highs in 2021 with over 108,000 reported, including more than 2,800 Marylanders; however, it is clear that more must be done to prevent addiction and misuse before it starts.

Many Marylanders have extra medication bottles in the medicine cabinet, and nationally more than 60% of people hold onto opioids indefinitely, greatly increasing the risk that a child, friend, or relative could misuse them¹. Co-dispensing a deactivation and disposal system with an opioid prescription greatly reduces potential poisonings or initiation to drugs with addictive properties. Maryland has not yet tried this approach, but I believe it can make a measurable difference and save lives.

For many Marylanders, substance misuse starts with a simple opioid prescription, perhaps following surgery or taking a family member's leftover prescription painkiller from the home medicine cabinet for acute pain. All too often this leads to misuse and addiction. According to the National Institute on Drug Abuse (NIDA), 80% of heroin and other illicit opioid users first began misusing prescription opioidsⁱⁱ. Further, according to the 2017 National Survey on Drug Use, 40% of respondents obtained prescription

opioids from friends and relatives, while 30% received a prescription from their physicianⁱⁱⁱ. As the fentanyl crisis in this country grows, Maryland must ensure that we cut down on initiation rates to prescription drugs with addictive properties by requiring deactivation and disposal systems to be codispensed with opioid prescriptions.

I testify in front of you today, not only as a representative of Deterra, but also as an individual who lost his own family member to a prescription drug overdose. March 1 marked the seven-year anniversary of my first cousin Alexia Springer's death. Alexia was a 17-year-old senior at Centreville High School in Virginia, where she was a good student and homecoming princess. She hoped to graduate that year and go on to dental school. On the night of Feb. 28, 2016, Alexia went to a "skittles" party where she traded medications with friends and was given a lethal dosage of morphine, she mixed with other prescription medications. That night Alexia's heart stopped as her friend slept in her bed beside her. Our family, like millions of families across the country, has been forever impacted.

Co-dispensing an at-home deactivation and disposal method at the time of prescription is an effective tool to encourage patients remove leftover medications from the home, decreasing the risk of possible misuse or diversion. This legislation will be an important policy to support and expand Maryland's efforts to prevent future substance misuse while still tackling the challenges of the current epidemic.

Thank you for the opportunity to present this testimony, and I look forward to answering your questions.

ⁱ JAMA Internal Medicine, *Medication Sharing, Storage and Disposal Practices for Opioid Medications Among US Adults* <u>https://www.washingtonpost.com/news/to-your-health/wp/2016/06/13/nearly-six-in-10-american-households-have-leftover-narcotics-in-their-medicine-cabinets/</u> July, 2016. Retrieved 3/2/2023.

ⁱⁱ National Institutes on Drug Abuse, *Heroin Drug Facts*, <u>https://nida.nih.gov/publications/drugfacts/heroin</u> Retrieved 3/2/2023

^{III} National Institutes of Health, *Friends and relatives as sources of prescription opioids for misuse among young adults: The significance of physician source and race/ethnic differences* <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6954351/</u> Retrieved 3/2/2023.