

Limiting Access to Pseudoephedrine May Not Lead to Decreased Methamphetamine Abuse

Research examining the impact of a 2006 Oregon law that requires a prescription to obtain pseudoephedrine, a cold medication that is also a material used in the manufacture of methamphetamine, finds that there has been limited overall impact. The research will be presented at the American College of Medical Toxicology's Annual Scientific Meeting to be held in Phoenix, AZ from March 28-30, 2014.

Phoenix, Arizona ([PRWEB](#)) March 20, 2014 -- Pseudoephedrine is a decongestant medication that is also used in the manufacture of the recreational drug [methamphetamine](#). In the last ten years the sale of pseudoephedrine has become increasingly regulated to prevent such diversion. In most states pseudoephedrine is only available behind the pharmacy counter and limited quantities are sold to any customer. In 2006 Oregon became the first state to enact a law to require a prescription to obtain pseudoephedrine.

Two [medical toxicologists](#) from Oregon Health and Science University, Jennifer Stephani MD and Robert Hendrickson MD, have studied the impact of this law on potential indicators of methamphetamine use. They will present their results at the [Annual Scientific Meeting](#) of the American College of Medical Toxicology (ACMT) in March 2014 in Phoenix, Arizona.

Methamphetamine-related deaths in Oregon before and after the law was enacted were compared to those in Washington, a state that does not require a pseudoephedrine prescription. The [toxicology](#) researchers found that restricting pseudoephedrine availability to prescription-only was not associated with a decrease in methamphetamine-related deaths, nor was there a significant effect on admission rates to rehabilitation centers for methamphetamine abuse. The researchers also compared numbers of calls to the Oregon and Washington poison centers. Only in recent years was a significant difference in call volume identified. According to Dr. Hendrickson, "It is difficult to make solid conclusions as to the cause of this decrease. It may be related to the pseudoephedrine prescription law, or there may be other variables affecting use and call volumes, such as drug purity, price, or supply imported from other states."

The researchers did find an association between prescription pseudoephedrine laws and reported methamphetamine clandestine laboratory incidents. They looked at the number of laboratory incidents in Oregon and Washington state reported by the DEA both before and after the 2006 Oregon law took effect. They did the same for Mississippi, the only other state with a similar prescription pseudoephedrine law, and compared results to five other states in the southeast. They found that the pseudoephedrine legislation was associated with a significant reduction of methamphetamine laboratory incidents in both Oregon and Mississippi when compared to neighboring states. Dr. Stephani comments "In the 2013 legislative session, there were at least sixty-nine bills introduced in eighteen states that would require a prescription to obtain pseudoephedrine. As more states consider similar legislation, it is important to understand the potential effect of these laws on methamphetamine use. Taking these results together, it seems that decreasing access to pseudoephedrine may limit local production of methamphetamine, but overall use may not be significantly decreased because out-of-state suppliers step in to meet the demand."

ACMT is a professional, nonprofit association of physicians with recognized expertise in medical toxicology.