



## **FOR IMMEDIATE RELEASE**

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## **At 2013 Pharmaceutical Waste Summit, Government Leaders Note Significant Progress, Yet Cite Continued Obstacles**

*Major concerns include lack of funding and unfinalized DEA regulations*

**Milwaukee, Wisc.**—Despite many successes in the pursuit of pharmaceutical waste stewardship across the U.S.—including the June 20 passage of take-back legislation in King County, Washington and the July 2012 passage of take-back legislation in Alameda County, California—a comprehensive solution for all states cannot be achieved until significant funding and regulatory hurdles are surmounted, concluded a group of state government leaders, pharmaceutical waste experts, and other stakeholders at the [2013 Pharmaceutical Waste Stewardship Summit](#).

The summit, hosted June 11 in Milwaukee by the Product Stewardship Institute (PSI) and the University of Wisconsin Cooperative Extension (UWEX) with support from the U.S. EPA, attracted more than 80 attendees from across the U.S.—including Alameda County Supervisor Nate Miley, champion of the nation’s first extended producer responsibility (EPR) law for pharmaceuticals.

“Visionary, steadfast government leaders like Supervisor Miley in Alameda County and Joe McDermott in King County are the lynchpin of a successful product stewardship movement,” says Scott Cassel, chief executive officer of PSI. McDermott is chair of the King County Board of Health. “Alameda County and, now King County, have set into motion what we expect will be a continued domino effect among state and local governments across the U.S.”

### ***Leftover Drugs: Problems and Solution***

Unused prescription drugs pose a serious safety threat in the U.S., contributing to more accidental drug overdose deaths than heroin and crack-cocaine combined, according to the U.S.

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Centers for Disease Control and Prevention. They can also encourage illicit use by drug abusers. Leftover medications can also be problematic from an environmental standpoint if they are flushed or disposed of in the trash, as they can enter our waterways and potentially contaminate our drinking water supply and harm aquatic life.

Take-back programs are the solution. They provide a simple, convenient way for consumers to dispose of their leftover medications safely and responsibly, while making leftover meds inaccessible to children, pets, and potential abusers. They also keep the drugs out of waterways.

### ***Challenges to Creating Take-Back Programs***

One of the most pressing issues that state and local governments face is a lack of funding, which prevents pharmacies and other potential collection sites from participating in pharmaceutical take-back programs. This, in turn, inconveniences residents, who have fewer drop-off location choices, and therefore are more inclined to store, flush, or discard their leftover drugs in the trash. In fact, a recent study by PSI and UWEX about pharmaceutical waste trends in Wisconsin found that, despite the significant efforts of existing programs, only 2 percent of leftover drugs are being collected.

Other challenges that government officials noted include a lack of public awareness and communication, the slow process of finalizing DEA regulations, and a lack of a comprehensive system for convenient drug take-back collection.

### ***Noteworthy Efforts and Successes***

However, despite these challenges, there have been some notable successes. A growing number of collection sites have sprung up throughout the Great Lakes region, helped in part by partnerships with local law enforcement to serve as collection sites. Moreover, the Great Lakes Pharmaceutical Stewardship Project succeeded in producing model programs, policies, and legislation developed by the Product Stewardship Institute that could be implemented in future projects, according to Steve Brachman, waste reduction specialist with UWEX.

“It was great to see how much progress has been made over the last three years in Wisconsin, the Great Lakes states, and across the country in addressing both the health and environmental impacts of unused medicines,” says Brachman. “I hope that local and state governments will continue to work together on a comprehensive solution to this dicey problem.”

### ***What's Needed Next***

Since achieving a sustainable financing mechanism to support pharmaceutical take-back programs depends on legislation, Brachman, Cassel, and others at the Summit concluded that it is imperative to continue pursuing EPR legislation for pharmaceutical waste.

“EPR for pharmaceuticals is catching on because it just makes sense,” Cassel says, noting that King County’s recent passage of EPR legislation came less than a year after Alameda County’s passage. “Through increased stakeholder engagement, greater public outreach and education efforts, and more data gathering and analysis, we can continue to advance pharmaceutical waste stewardship in local and state governments around the country.”

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### **About the Product Stewardship Institute (PSI)**

The Product Stewardship Institute (PSI) is a national nonprofit organization dedicated to reducing the health and environmental impacts of consumer products. Founded in 2000, PSI brings together key stakeholders with varying interests to develop product end-of-life solutions in a collaborative manner, with a focus on having manufacturers assume primary financial and managerial responsibility. With a robust membership base of 47 state governments and over 230 local governments, as well as partnerships with more than 95 companies, organizations, universities, and non-U.S. governments, PSI advances both voluntary programs and legislation to promote industry-led product stewardship initiatives. For more information, visit PSI online at [www.productstewardship.us](http://www.productstewardship.us). You can also follow PSI on Twitter at [twitter.com/ProductSteward](https://twitter.com/ProductSteward) and on Facebook at [facebook.com/ProductStewardship](https://facebook.com/ProductStewardship).

### **About the University of Wisconsin Cooperative Extension (UWEX)**

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