



Drug Take-Back Saves Lives – and Money

*Protect public health, water quality,
and the bottom line*



Our communities are paying a heavy toll in lives lost to the drug abuse epidemic. Prescription opioid misuse alone costs the U.S. over [\\$500 billion](#) annually in lost productivity and medical and legal spending. Moreover, when drugs are flushed or trashed, they pollute our waterways, including drinking water sources.

Drug take-back prevents drug abuse, pollution, and associated costs.

Seven out of ten Americans who abuse prescription drugs get them from friends and family, often from medicine cabinets. Drug take-back is a safe, convenient way to dispose of unwanted drugs before they end up in the wrong place.

Producer responsibility = maximum efficiency.

When drug manufacturers bear the cost of drug take-back voluntarily or through a [“producer responsibility” law](#), economies of scale and industry expertise keep the cost even lower. Drug take-back costs drug companies just pennies per prescription sold — about one cent per ten dollars of sales. That’s not much to ask of a [\\$775 billion industry](#) with [rising revenues and profit margins](#) as high as 45%.

Drug take-back programs start
at just pennies per prescription sold.
**You can’t put a price on the
health of our communities.**

Long-term drug take-back is economical.

Long-term drug take-back programs start at just \$2 per pound of drugs collected and safely destroyed. Collection receptacles (or “kiosks”) cost only \$2 to \$5 per pound, including liners and a vendor to transport and destroy the material. Costs depend on location, vendor, and whether a kiosk is purchased or rented (which is more expensive over time).

Pre-paid mail-back envelopes cost about four times more, at \$7 to \$22 per pound.

[In-home disposal products](#) claim to render drugs safe to dispose in household trash, but there is little independent data available to support this. They are also the most expensive drug disposal option, costing about \$130 per pound: 25 to 75 times more than kiosks.



Drug take-back at Rochester General Hospital in Rochester, NY, during a PSI-designed program.



Postage-paid drug mail-back envelope used during a PSI-designed program

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