

## **Please Vote No on SB3502**

### **Making pseudoephedrine and ephedrine prescription only C-III controlled substances!**

Pseudoephedrine is a common nasal decongestant used in a variety of allergy and cold remedies or by itself or in combination with other medications but is sold without a prescription in Illinois. Pseudoephedrine and ephedrine (a less effect nasal decongestant) have been used in the production of methamphetamine and therefore have been scheduled as a C-V controlled substance in Illinois.

SB3502 if passed, will change pseudoephedrine and ephedrine to schedule III and move any product containing those two compounds to prescription only. While this is an attempt to further curtail methamphetamine production in Illinois this move will create undue hardships for patients and pharmacies across the State!

Currently pseudoephedrine and ephedrine sales are limited to pharmacies in Illinois and every sale is reported in real time to the **National Precursor Log Exchange (NPLEx)** which is readily accessible to law enforcement within the states that participate. Currently Iowa, Indiana, Missouri and Kentucky participate as bordering states with Illinois. Illinois is more restrictive than many states, limiting total monthly purchases of pseudoephedrine products to 7.5gms while federal restrictions are set at 9.0gms. Finally, Wisconsin does not participate and has much less restrictive sales limitations for these products. The same is

Changing pseudoephedrine and ephedrine to C-III and prescription only will have a variety of unintended consequences. It will require pharmacies to report sales to the Illinois Prescription Monitoring Program (not a real-time system of reporting) in addition to reporting to the National Precursor Log Exchange increasing dispensing cost and time. It will require Illinois patients to obtain prescriptions from a physician, physician's assistant or advanced practice nurse, often requiring an office visit and additional payment. Many insurance drug benefit programs will not pay for over-the-counter medications (these products will remain OTC at the federal level), leaving the patient to pay out of pocket for additional costs related to filling these medications as prescriptions. Physician offices will be inundated with additional calls for prescriptions for cold treatments that have currently been handled well by the patients themselves complicating access that is already stretched in many parts of the State. While access to the National Precursor Log Exchange will remain in place, law enforcement does not currently have immediate access to Illinois' PMP and all medical records require a subpoena to access.

#### **Negative effects of SB3502:**

- Dual reporting to the PMP and NPLEX by pharmacies
- Limited access for patients with simple colds
- Increased costs to patients
- Increased demands on primary care providers limiting overall patient access
- Increased time for proper dispensing
- Complications for law enforcement investigations

As you can see, there are many good reasons to vote NO on SB3502! Please Vote NO!  
THANK YOU!