



From Concept to Completion

Dr. Jeanie Jaramillo, PharmD
Managing Director; Texas Panhandle Poison Center
Assistant Professor; Pharmacy Practice
Texas Tech University Health Sciences Center
School of Pharmacy

Objectives

- Describe barriers encountered while planning a medication take-back program and how they are overcome
- List the resources needed for conducting a medication take-back program
- Discuss the implementation of a first-time event
- Describe the results of a first-time event
- Discuss future directions for take-back programs in Texas



Barriers

- ▶ Planning began ~ 4 years ago
- ▶ Barriers
 - Drug Enforcement Administration (DEA)/Controlled Substances act (CSA)
 - Local law enforcement
 - Tx State Board of Pharmacy
 - Environmental Protection Agency (EPA), Texas Commission on Environmental Quality (TCEQ); laws, rules, regulations



Barriers

- ▶ DEA/ Controlled Substances Act
 - “...pharmacies, may dispose of controlled substances already in their possession that have expired, been damaged or contaminated, but may not accept controlled substances from another person solely for the purpose of disposal.” CSA/CFR
- ▶ TSBP
 - Pharmacists may take back controlled substances, but must render them “incompatible with human consumption” and must document abundantly



Barriers

- ▶ It is **ILLEGAL** for **ANYONE** to be in possession of controlled substances that were dispensed to an end-user. (state jail felony)
 - What are controlled substances?
 - Vicodin, Lortab, Fentanyl, morphine, etc.
 - Drugs are classified into controlled substances categories based on their potential for abuse
 - C-I: GHB, heroin
 - C-V: Lyrica



Texas State Board of Pharmacy

- ▶ Tx Administrative Code also not developed with need for return of unused meds from public and subsequent disposal taken into consideration
- ▶ Compliance officers – no solution without law enforcement
- ▶ Amendment to rules proposed
- ▶ Board opted to wait until CSA is amended



Barriers

- ▶ “DEA has recently granted temporary permission to law enforcement agencies who have requested authorization to accept for disposal controlled substances that have been dispensed to ultimate users.” CFR
- ▶ Comment accepted early in 2009 in preparation for revising CSA



Local Barriers

- ▶ Collaboration with law enforcement
 - Local law enforcement already struggles with disposal of substances confiscated through routine law enforcement activities
 - Perceived increase in burden to participate in take-back event with volume unknown and unpredictable
 - Cost for disposal (poor economy); already stressed system
 - Conceptually, agreed with goals/purpose



Laws, Rules, Regulations

- ▶ Environmental regulations
 - Difficult to interpret
 - If resident is disposing of medications → household hazardous waste
 - If many residents bring medications to take-back program → ?
 - Special waste, medical waste, pharmaceutical waste
- ▶ Waste management companies
 - Fairly new concept
 - Often receive conflicting answers to questions based on who is reached even within same company



Barrier Navigation

▶ DEA/CSA

- Gained support of local law enforcement through political route – city commission
- Prepared plan for event – detailed all of the work that we would do and what we needed them to do
- Contacted Special Agent in Charge staff
 - Conduction of event is acceptable if law enforcement disposes of meds in compliance with their respective policy/procedure – THIS VARIES BY REGION
 - DEA unable to provide anything in writing unless through Federal Register



Barrier Navigation

- ▶ TSBP
 - Conduction of event is “out of (their) jurisdiction” if not conducted in conjunction with a pharmacy
- ▶ Laws, rules, regulation
 - Research, interpret, educated guess, pray!



Resources Needed

- ▶ Volunteers / staff
 - Pharmacy school collaboration
 - School district
- ▶ Law enforcement officers
 - Provided at expense of city
- ▶ Locations
 - University provided one site “in kind”
 - AISD provided one site “in kind”



Resources Needed

- ▶ Disposal service
 - Collaboration with local hospital/clinic
 - Difficult without estimate of volume/expense
 - University contract/safety services
- ▶ Advertising
- ▶ \$\$\$
- ▶ TIME & EFFORT – planning, training, communicating
- ▶ Supplies



Marketing

- ▶ Anecdotal reports show that success of events is directly related to advertising efforts
- ▶ Other factors
 - Public interest in “doing the right thing”
 - Poison prevention
 - Public safety



Marketing

- ▶ Website/phone number
- ▶ Billboards
- ▶ Newspaper ads
- ▶ Pharmacy fliers & push cards
- ▶ School fliers
- ▶ Radio
- ▶ TV



Website

- ▶ Developed by poison center staff member
 - Purchased two domains:
 - MedicationCleanout.com (\$15/yr)
 - MedicineCleanout.com (\$15/yr)





Prevent poisonings. Prevent abuse. Prevent misuse. Protect the environment.



[Working hard.](#)



**Next event:
March 27th, 2010
10:00am - 2:00pm**

Click [HERE](#) for our printable brochure.

Feel free to print and share with others.

You may print the brochure, complete the form, and bring it with your unwanted medications to the event. This is optional. *You may bring medicine without a form.*

Get rid of expired, leftover, unneeded medicines on March 27th.

**"Why shouldn't I just save medications in case I need them again?
Why shouldn't I just throw them in the trash or flush them down the toilet?"**

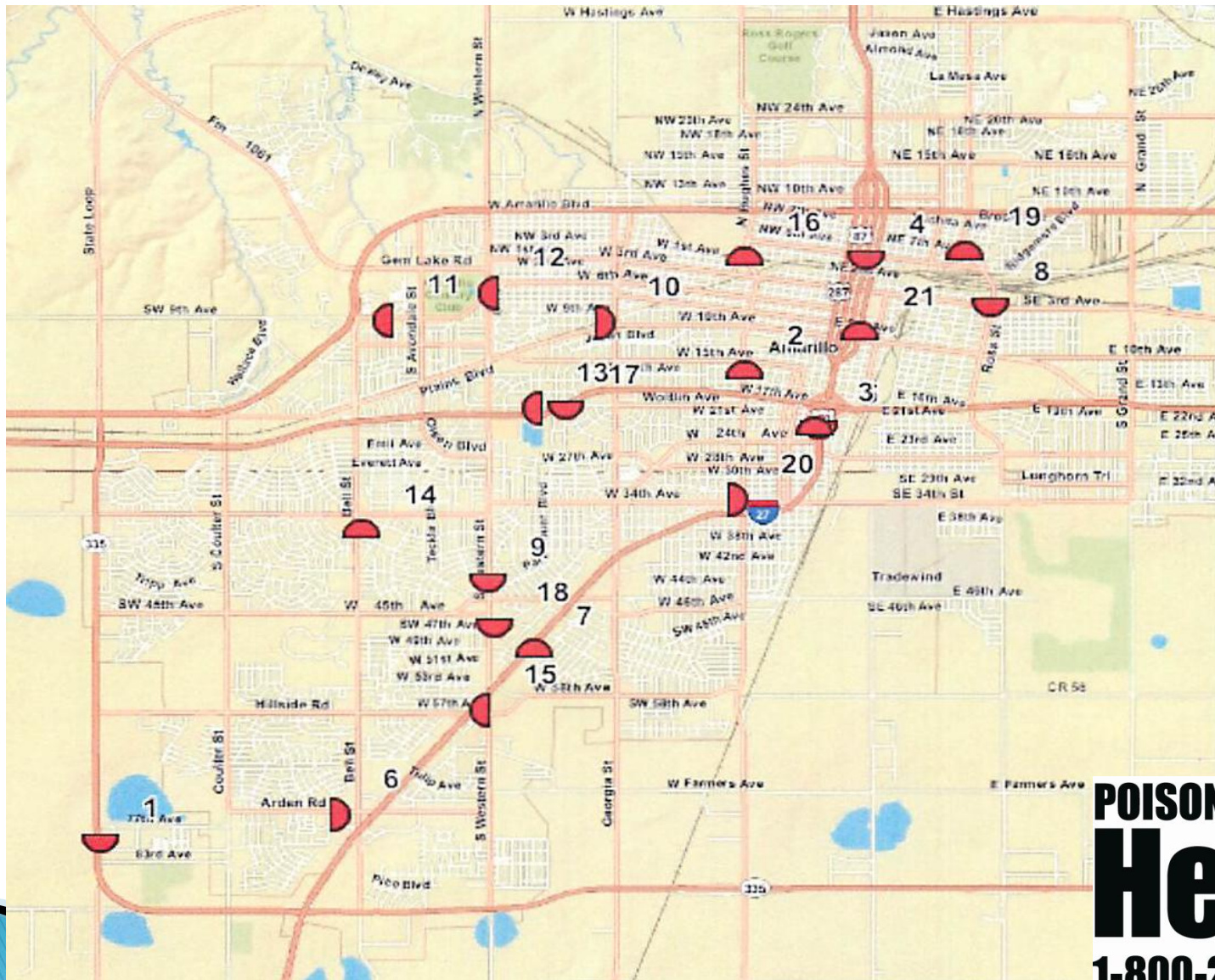
Poisonings	Poisonings are second only to motor vehicle accidents as a cause of death from unintentional injury in the U.S. Medications left around the home can be the source for these poisonings. And poisonings are not limited to children. Adults often "self-treat" with leftover medications from previous illnesses – a dangerous practice that can result in delay in seeking help.
Abuse	Another alarming problem is that of prescription drug abuse by teens. Prescription drug abuse is now second only to marijuana abuse. Each day 2,500 teens use a prescription medicine for the 1st time for a non-medical reason. Medicine cabinets of parents, grandparents, friends, or acquaintances are frequently the source.
Misuse	Self-treatment with an inadequate supply of antibiotics can result in antibiotic resistance as well as a delay in seeking medical attention.

Billboards

- ▶ Lamar Outdoor
 - 21 “mini” billboards through city
 - \$4,000 (labor and vinyls; space donated by Lamar)
 - Designed by Lamar/Poison Center staff



Billboards



POISON
Help
1-800-222-1222



Newspaper


- ▶ Full page ad (Sunday prior to event)
- ▶ Front page “sticky ad” day before the event
- ▶ ¼ page ad (Monday prior to event – Labor day)
- ▶ 90,000 on-line impressions
- ▶ \$4,000



Newspaper

22A Amarillo Globe-News amarillo.com Sunday, September 6, 2009

Prevent poisonings • Prevent abuse
Prevent misuse • Protect the environment



Medication Cleanout™

Free, safe disposal of unneeded medications

Saturday Sept. 12th
10:00 a.m. – 2:00 p.m.

Drive-through event
Texas Tech University School of Medicine
or
Caprock High School

MedicationCleanout.com
806-351-5626 (MCO)

Why is this so important?

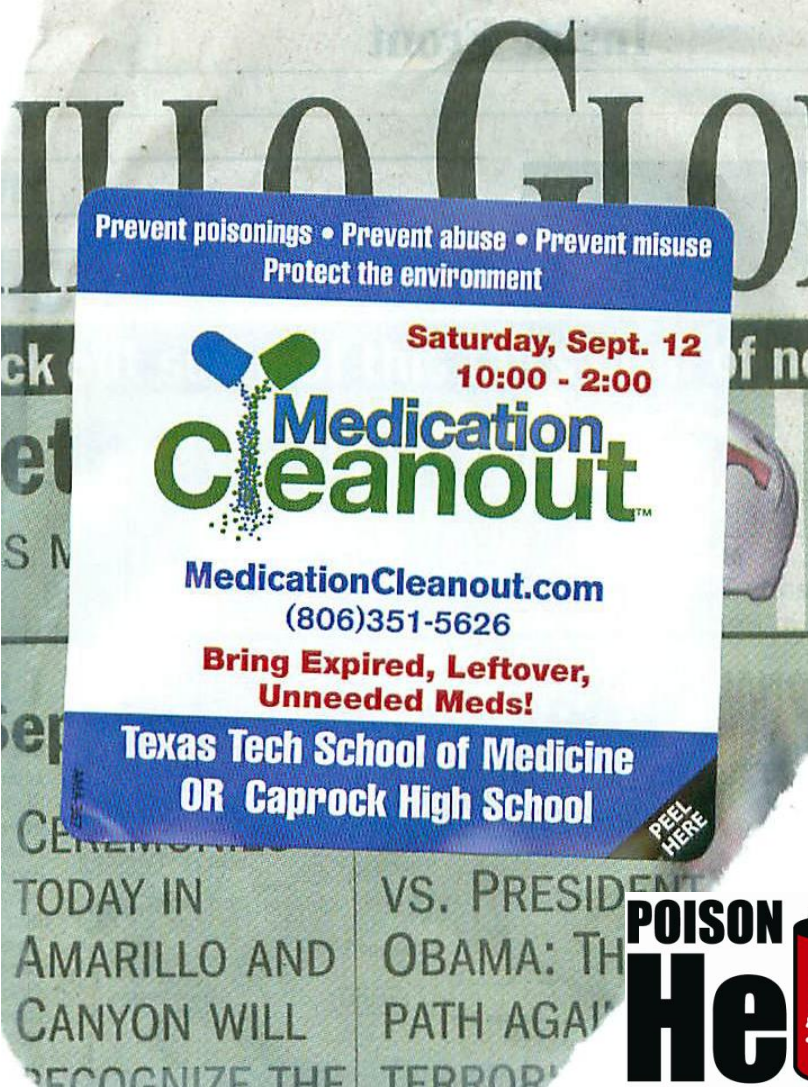
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Abuse: Another alarming problem is that of prescription drug abuse by teens. Prescription drug abuse is now second only to marijuana abuse. Each day 2,500 teens use a prescription medication for the first time for a non-medical reason. Medicine cabinets of parents, grandparents, friends, or acquaintances are frequently the source.

Misuse: Self-treatment with an inadequate supply of antibiotics can result in antibiotic resistance as well as a delay in seeking medical attention.


Environment: Many individuals who would like to dispose of their unneeded medications simply do not because they've heard of contamination of the water supply by medications that are flushed or washed down the drain.

Medication Cleanout™ provides our community with the opportunity to safely and conveniently dispose of medications! Don't miss the chance to safely dispose of your unneeded medicines and make your home and community a safer place.



Prevent poisonings • Prevent abuse • Prevent misuse
Protect the environment

Saturday, Sept. 12
10:00 - 2:00



Medication Cleanout™

MedicationCleanout.com
(806)351-5626

**Bring Expired, Leftover,
Unneeded Meds!**

**Texas Tech School of Medicine
OR Caprock High School**

PEEL HERE

POISON
Help 
1-800-222-1222

Pharmacy Fliers and Push-Cards

- ▶ Provided by print shop of AISD at cost (funded by AISD Safe Schools /Healthy Students program)



Pharmacy Fliers and Push-Cards

Safe, free disposal of expired,
leftover, unneeded medicines



*Saturday,
September 12
10:00 a.m. - 2:00 p.m.
Texas Tech University
School of Medicine
or
Caprock High School*

 Safe Schools
Healthy Students
Amarillo Independent School District
806-426-1358
www.safeschoolsalid.org

**POISON
Heip**
1-800-222-1222

*Prevent poisonings • Prevent abuse
Prevent misuse • Protect the environment.*



*Free, Safe, Confidential
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**POISON
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1-800-222-1222



1-800-222-1222

School Fliers

- ▶ ½ page flier sent home with all elementary students in school district on Tuesday prior to event



Volunteers

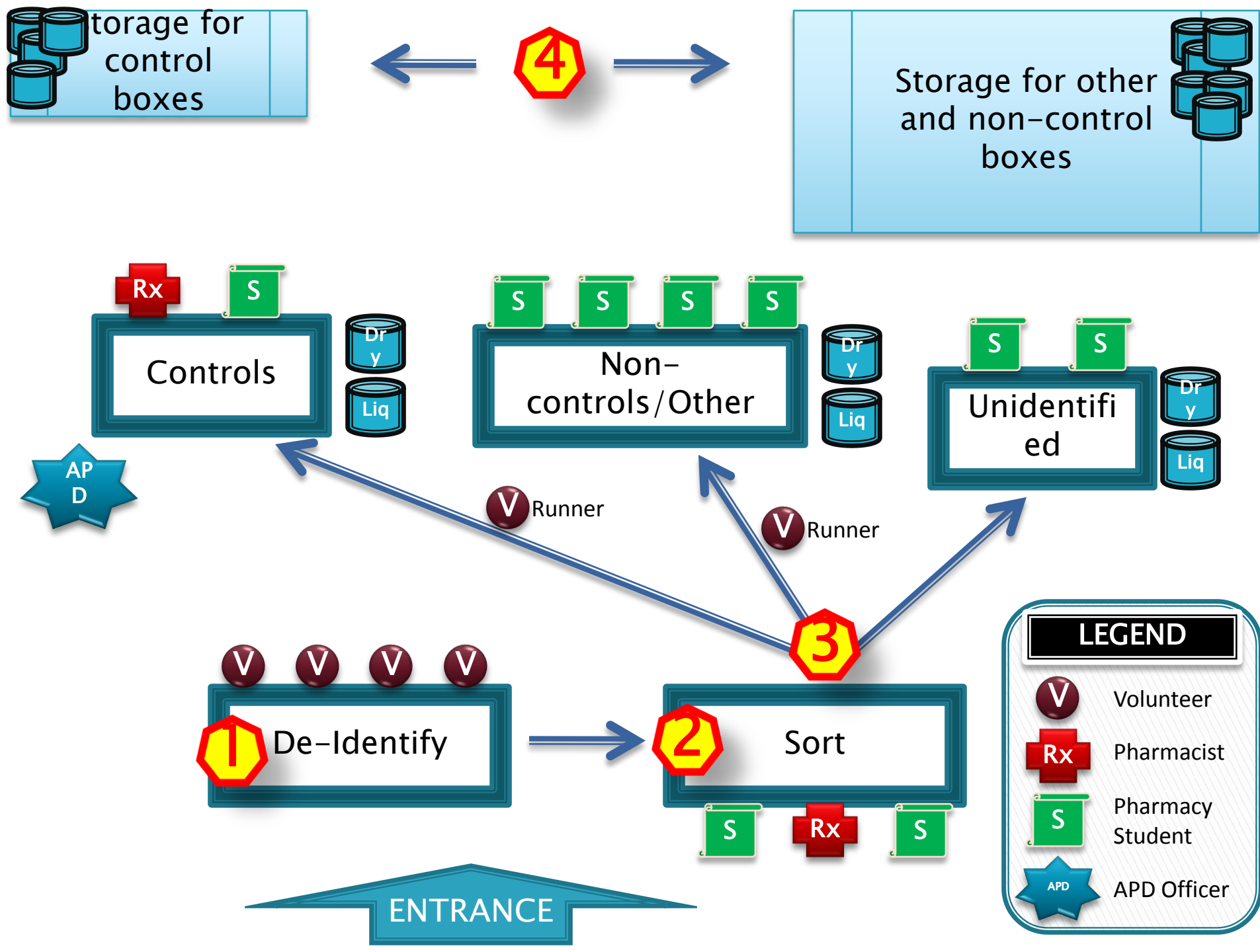
- ▶ 90 volunteers (45 at each site)
 - Large number needed due to desire to inventory all collected items
 - De-identification of all items (paint pens work better than Sharpies)
 - Sorting: controls vs. non-controls
 - Identification of unknowns



Volunteer Training

- ▶ 1 hour training session 2 weeks prior to event
- ▶ Required attendance
- ▶ Reviewed volunteer manual
- ▶ Zero tolerance diversion policy
- ▶ Schematic – flow of meds through collection site





Event

- ▶ 10 a.m. – 2 p.m. Drive-Through Event
- ▶ Only event staff were allowed inside indoor processing area
- ▶ All volunteers provided with event T-shirt and name badge
 - Easy identification of who should be inside

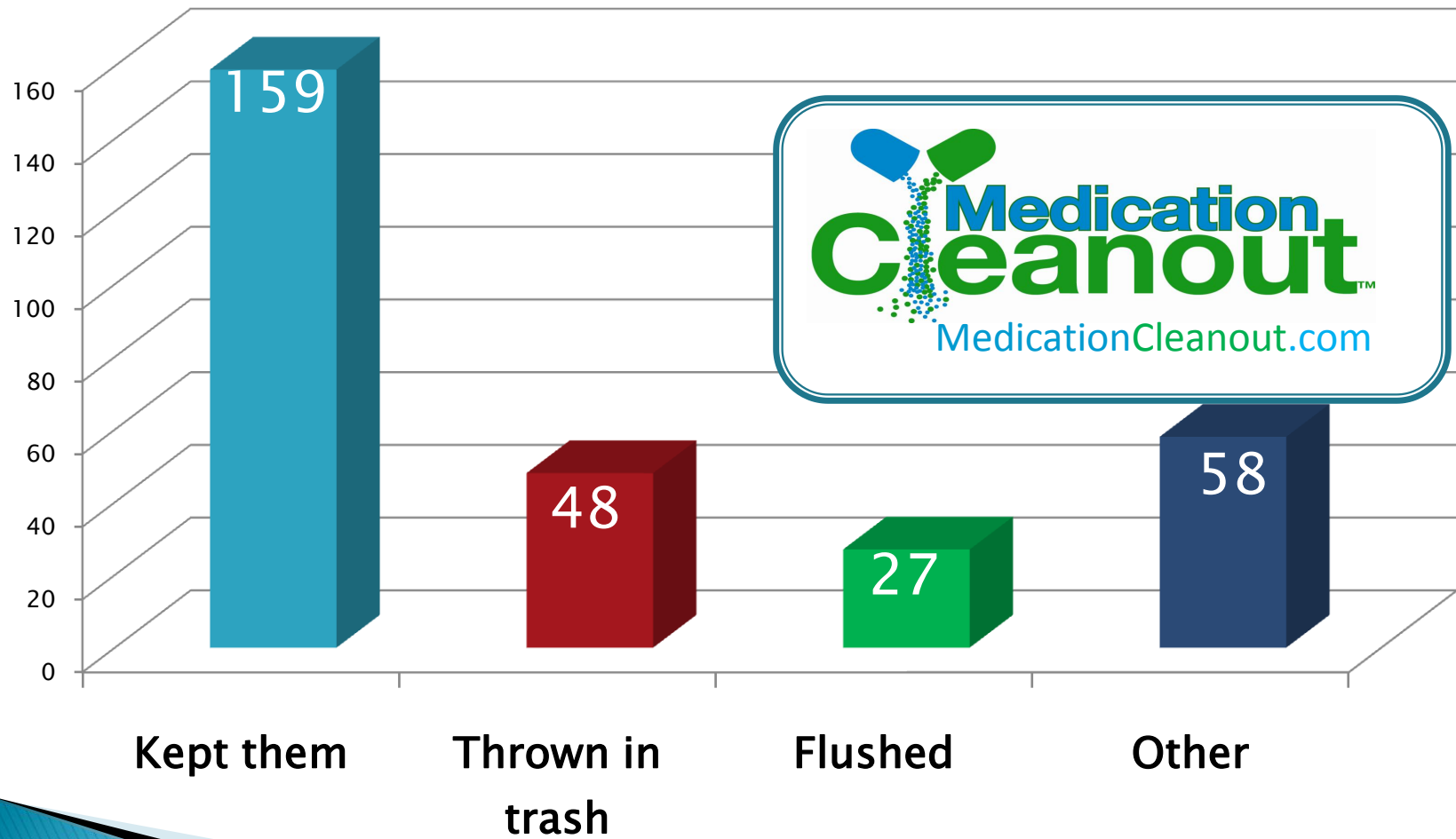


Collection Sites

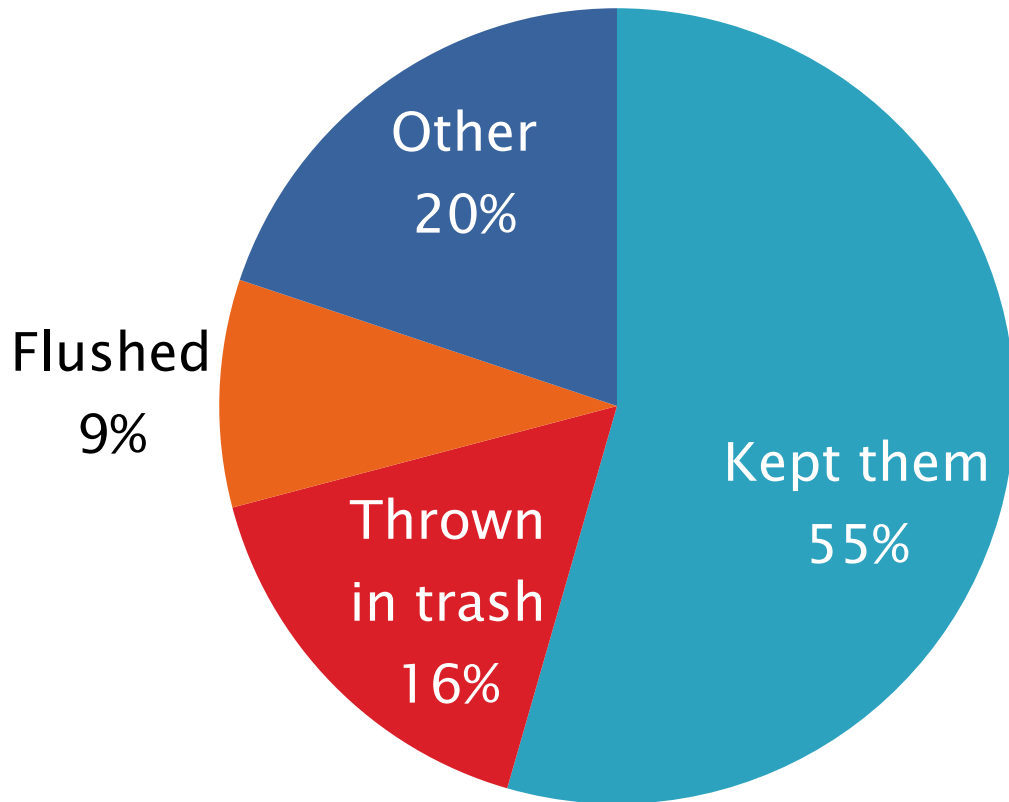
- Caprock High School
 - 113 completed surveys (vehicles & walk-ups)
 - 399 pounds of non-controlled substances
 - 32.5 pounds of controlled substances
- ▶ TT Medical Center
 - 183 completed surveys
 - 397 pounds of non-controlled substances
 - 35 pounds of controlled substances



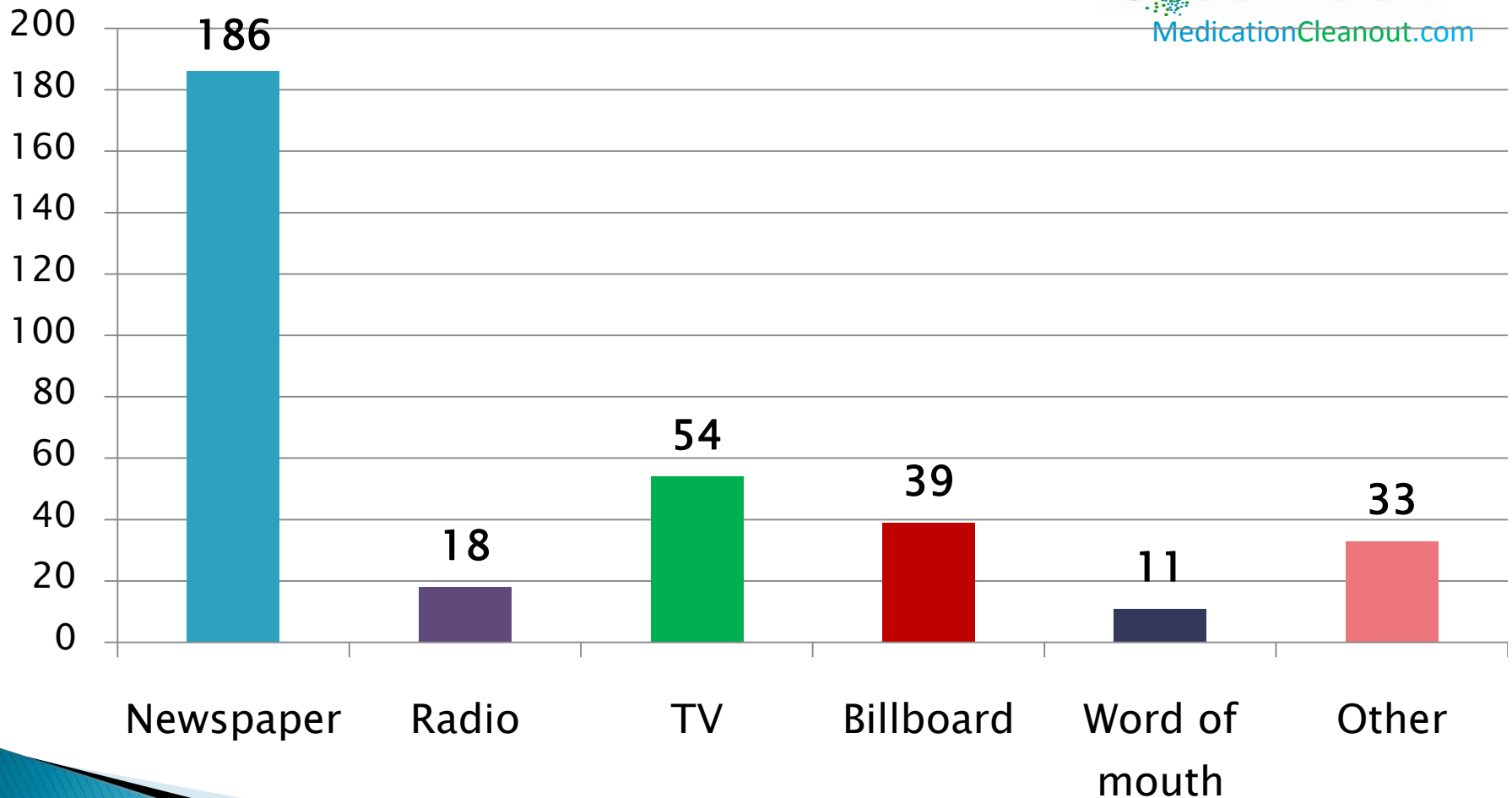
What I Would Have Done With My Meds If Medication Cleanout™ Had Not Been Available



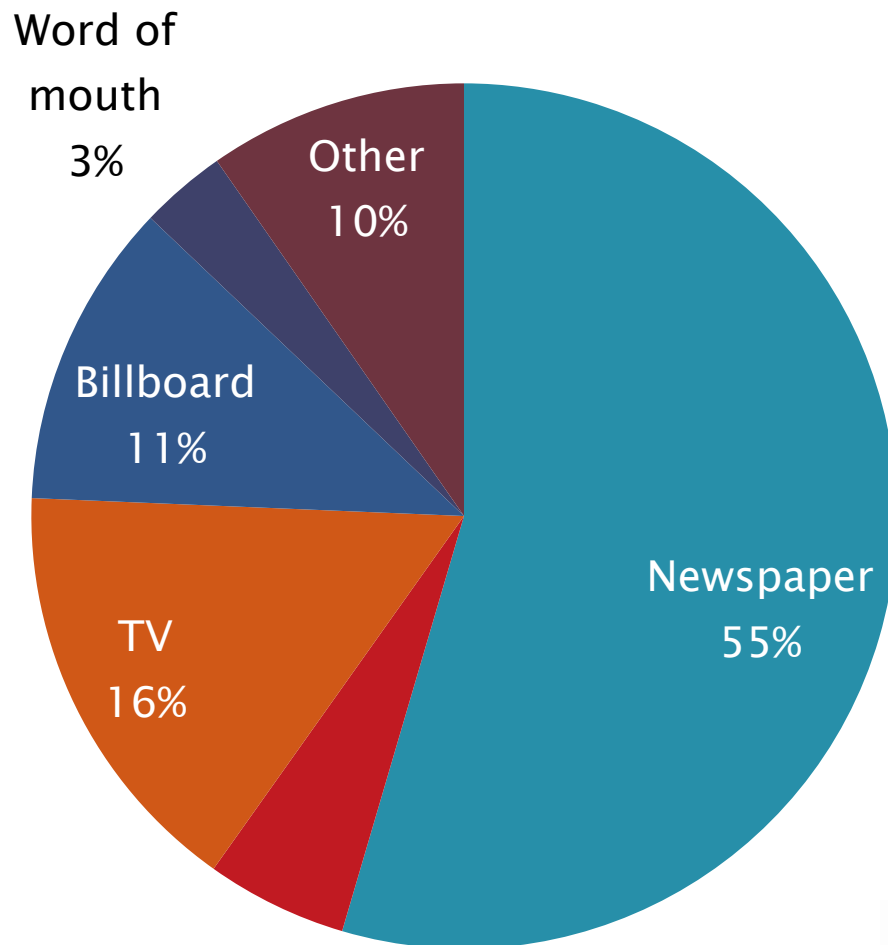
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I Found Out About Medication Cleanout™ From:




I Found Out About Medication Cleanout™ From:



Access Database Collection Form

Security Warning Certain content in the database has been disabled Options...

Sept 2009 Collection Form

 Sept 2009 Collection Form

PLEASE READ THIS ENTIRE INSTRUCTION BOX FIRST. HELP is available at the bottom left of this screen for each field on this form. Until you are familiar with each field, (F1) please review the HELP to know what to enter. ***Use the TAB button on your keyboard to move to next field or left click inside the field you want to type in. When you have completed this record, press your ENTER button to save this record and open a new one. *****Use the drop down list is there is one to see your choices for that field. For long lists (like your name and the name of the item/drug), type a few letters and if the word is in the list it will fill in automatically, hit tab to go to the next field. If what you are looking for is not in the list, type in the correct answer. DO NOT ALTER FORM/DATABASE DESIGN**

Date and Time: 10/17/2009 4:26:43 PM Location: [Dropdown]

Your First Name: [Dropdown] Your Last Name: [Dropdown]

Item ID: (New) Classification: [Dropdown]

Name of Drug or Item: [Dropdown] Formulation: [Dropdown] Strength: [Text] Unit: [Dropdown] enter number: [Text] Measurement: [Dropdown] PER

Original Quantity (#): [Text] Unit: [Dropdown] Manufacturer: [Text] DateDispensed: [Text] DateExpired: [Text] Is the item a sample?: [Dropdown]

Quantity collected (#): [Text] Unit: [Dropdown] Notes: [Text Area]

Record: 1 of 1 No Filter Search

Controlled Substances Collected

Drug Class	Number of Packages	% of Total (Packages)	Number of Pills/Units/ml	% of Total (Pills/Units/ml)
analgesics	399	62.8%	11,671	51.2%
anticonvulsants	17	2.7%	801	3.5%
antitussives	48	7.6%	5,291	23.2%
appetite suppressants	6	0.9%	178	0.8%
benzodiazepines	95	15.0%	3,191	14.0%
CNS stimulants	17	2.7%	387	1.7%
hypnotics	36	5.7%	869	3.8%
miscellaneous other agents (5 or less each)	17	2.7%	416	1.8%
TOTAL	635	100.0%	22,804	100.0%

* excluded medications that were unidentifiable, but assumed to be controlled substances

Expiration Dates

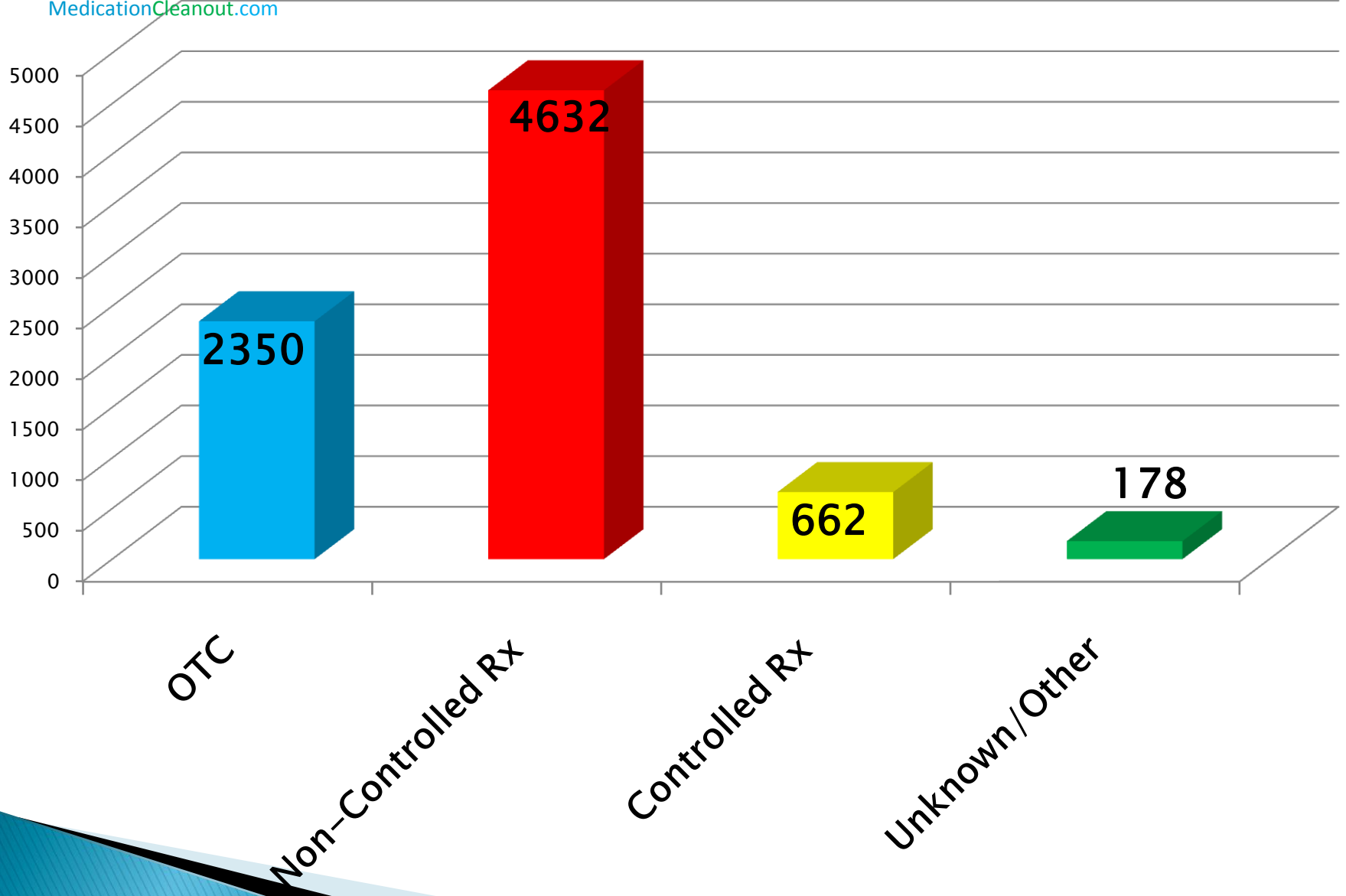
- ▶ Of those packages of controls that were collected and for which expiration dates were recorded (n=148):
 - 93.2% were expired as of the date of the collection
 - [not expired = 10, expired = 138, unknown = 495]



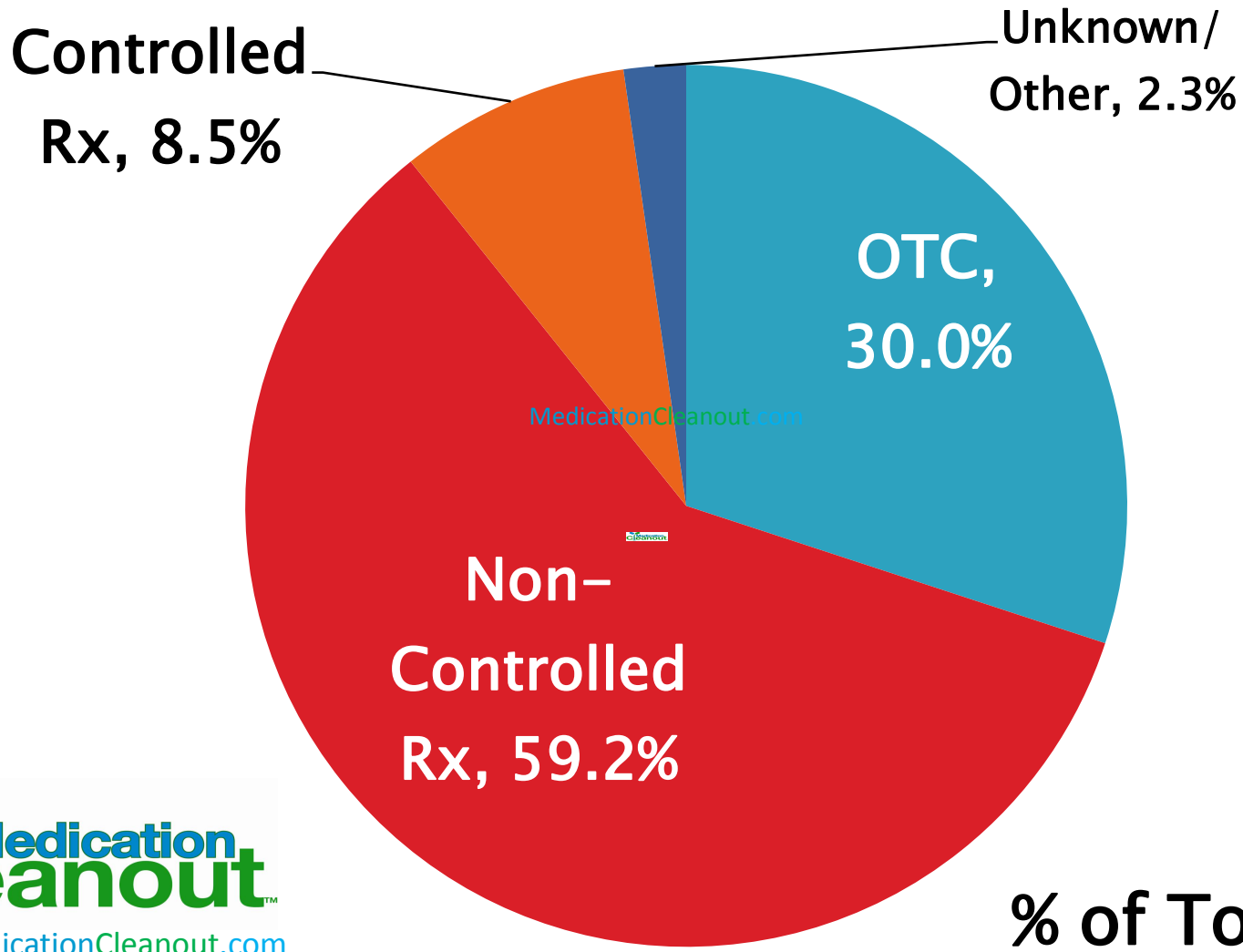
Most Commonly Collected Controls

- ▶ Acetaminophen with codeine (Tylenol w/ codeine); 23 pkgs; 660 pills
- ▶ Alprazolam (Xanax); 15 pkgs; 508 pills
- ▶ Zolpidem tartrate (Ambien, Ambien CR); 29 pkgs; 660 pills
- ▶ Propoxyphene/Acetaminophen (Darvocet-N); 95 pkgs; 2,950 pills
- ▶ Hydrocodone/acetaminophen (Lortab, Vicodin); 220 pkgs; **6,818 pills**

Packages / Bottles



Breakdown of Categories Collected



% of Total

Future Directions

- ▶ Need for state-specific guidance
 - DEA
 - TCEQ, EPA
 - TSBP
- ▶ Need for more than 1 model for programs
 - Academic model- detailed inventory
 - All-inclusive vs. sampling
 - Non-academic model- weights only
- ▶ Need for responsible programs

Risks to Programs

- ▶ Lack of funding
- ▶ Diversion
- ▶ Poor management of collections



Conclusions

- ▶ Programs are greatly needed
- ▶ Many medicines remain in homes
- ▶ Need for research on why medicines are not completed (Unused, Expired Medicines Registry – Community of Competence)
- ▶ If the public is not provided with a method for disposal, meds will remain in their homes or will be disposed of improperly

Contact Information

Jeanie Jaramillo, PharmD

Medication Cleanout Co-Coordinator

1501 S. Coulter

Amarillo, TX 79106

Ph: (806) 354-1611

Fax: (806) 354-1667

Email:

jeanie.jaramillo@ttuhsc.edu

Ronica Farrar, EMT-P

Medication Cleanout Co-Coordinator

1501 S. Coulter

Amarillo, TX 79106

Ph: (806) 354-1633

Fax: (806) 354-1667

Email:

ronica.farrar@ttuhsc.edu



(806) 351-5626

Next Event: March 27, 2010