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A PRESCRIPTION FOR

CHANGE

HOW IMPROPERLY STORED AND DISPOSED MEDS AND NEEDLES AFFECT OUR COMMUNITY HEALTH

THE THREATS NO ONE'S TALKING ABOUT

And they're right in your bathroom

BY SHANNON SPRINGMEYER

Prescription drug use is on the rise, both nationally and here in Marin County. This leads to a lot of leftover pills, which can pose a risk of accidental poisonings to children, older adults and even pets. Pills stored in the home can also fuel the abuse of prescription medication.

"There is a concerning trend in Marin toward increased narcotic prescriptions, more emergency room visits for drug-related illness and more overdose deaths," says Marin County Public Health Officer Matt Willis. "All Marin communities are affected."

In addition, the needles and syringes, or "sharps," used to inject medicines like insulin pose a risk of accidental injury.

The threats are real, but many people don't know how to safely dispose of pills and sharps, and instead throw them in the trash or flush them down the toilet. This can lead to a host of problems, including accidental needle-stick injuries and infections among sanitation workers, damage to water treatment systems and pollution of the environment and waterways. Improper disposal of sharps has been illegal in California since 2008, but the law left it up to local communities to figure out disposal solutions. It's also illegal to flush or trash certain medications.

Luckily, Marin County residents have safe disposal options. Residents can drop off approved containers filled with sharps and receive a replacement container for free. They can also participate in secure pharmaceutical take-back programs at various locations (see pages 3, 5 and 8 of this publication or visit <http://tinyurl.com/MarinDisposal>).

"Studies have shown that the majority of prescription medicines that are abused come from families



and friends. Our own medicine cabinets are helping fuel this epidemic," Willis says. "The safe storage and timely removal of unused or unwanted medications and sharps from our homes is one of the simplest and most effective steps we can take."

However, the programs are expensive for the county to run, and the taxpayer ultimately helps foot the bill. Heidi Sanborn, executive director of the nonprofit California Product Stewardship Council (CPSC), wants to change that. Her job is to increase the awareness and effectiveness of recycling and disposal programs for a variety of products and ensure all the costs are not borne solely by government.

"The bottom line is local governments cannot afford to provide the programs to the level that they need to be available to get a high level of participation from the public," Sanborn says.

Instead, CPSC educates and advocates for the extended producer responsibility (EPR) approach to product end-of-life management. Supporters of EPR suggest that manufacturers should share responsibility for the disposal costs of products.

"All of those disposal costs today, 100 percent, are externalized to the public sector to clean up the mess — meaning the manufacturer privatizes profit and socializes 100 percent of disposal cost," Sanborn says. "We don't think that's fair."

CPSC's board and supporters think EPR is a better way, citing successful manufacturer-funded take-back programs for medications and sharps in Canada and Europe.

The EPR approach is starting to catch on closer to home. In July 2012, Alameda County supervisors passed a pioneering EPR ordinance requiring pharmaceutical producers to fund local take-back programs. The Ninth U.S. Circuit Court of Appeals upheld the law in September 2014. That ruling is paving the way for EPR legislation throughout California and beyond, as exemplified by the introduction of a similar ordinance by the City of San Francisco on October 21, 2014, Sanborn says.

Read on to find out more about the consequences of improper disposal of medications and sharps in our community, local solutions for free, safe disposal, and successful EPR programs.



Matt Willis
Marin County public health officer
PHOTO COURTESY OF MARIN COUNTY



Heidi Sanborn
Executive director of California Product Stewardship Council
PHOTO COURTESY OF HEIDI SANBORN

Rx ABUSE TAKES A TOLL

Prescription medication abuse is a real problem — in Marin County and across the U.S. Safely store and dispose of your meds to keep them out of the wrong hands.



In 2012, **27 people died** in Marin County from accidental drug overdose.



1 in 5 of Marin County 11th graders say they've used painkillers recreationally.



20% of people using drugs for the first time in 2011 began by abusing prescription meds.



For every **1 death** from painkiller overdose, there are **1,000 people** who are misusing.



Juan Martinez was stuck by an improperly disposed needle at work in May 2009. Martinez says many people don't know what to do with used needles.

PHOTO BY OWEN KAHN

HANDLE WITH CARE

Man fears worst after being stuck by needle in trash

BY MIKE BLOUNT

Mill Valley Refuse Service sanitation worker Juan Martinez is used to hauling off whatever people throw in the trash. From old furniture and makeup to refrigerators and basketball hoops — Martinez will take it away. But one thing he is never prepared to handle is a used needle. After being stuck by one on the job in May 2009, he feared his life was changed forever.

Martinez was grabbing a bag of trash out of a can on his route when he felt a sharp pain in his palm. It was 5:20 a.m. and still dark outside, so he couldn't see what stuck him. He immediately opened the garbage bag and his heart sank. He was stuck by an uncapped needle.

Martinez called his boss and immediately drove to the hospital.

"I was terrified because I didn't know what that person was using them for," Martinez says. "I was angry that it happened. I couldn't believe someone would be that careless and throw needles away like that."

A doctor washed the wound and took some of his blood for tests. But there was little Martinez could do except wait 30 days for the results to come back. He went through several

FREE AND SAFE SHARPS DISPOSAL

Does someone in your home use needles, syringes or lancets to take medication?

Throwing used sharps in the trash can injure and infect sanitation workers, curious children and pets. Needle-stick injuries occur even through protective shoes and gloves!



Flushing needles down the toilet can block water treatment filters, resulting in hazards to workers and higher utility bills.

DISPOSE OF USED SHARPS THE SAFE WAY:



1 Find a Marin County drop-off location near you. See the list of more than 20 locations on the back page or at <http://tinyurl.com/MarinDisposal>.



2 Pick up a free approved sharps container at any location.



3 Drop off full containers at any location, **not in the trash.**

Using an approved sharps container is the only safe, legal way to dispose of used sharps in California. It's free and easy, and helps protect our community and environment. Find out more at www.calrecycle.ca.gov/homehazwaste/sharps/.

scenarios in his head: "What if I have AIDS? What is my life going to be like?"

Martinez was living with his fiancée at the time, but he was scared to be around her because he was unsure if he had contracted anything from the needle stick.

"I was angry that it happened. I couldn't believe someone would be that careless and throw needles away like that."

Juan Martinez
Mill Valley Refuse Service sanitation worker

"I was freaked out to even give her a kiss," Martinez says. "You don't want to exchange any fluids or anything. We had to be very careful around each other. There's not much else you can do except wait for the blood test to come back."

A month later, Martinez finally received the results: He had no infections. It was a huge weight lifted off his shoulders. Mill Valley Refuse Service also implemented changes to reduce the risk of their employees being stuck by a sharp on the job, including dumping trash by using the handles on trash containers. But Martinez still cautions that he could get stuck again if someone else is careless. As more and more injectable medicines are prescribed without proper education on and access to convenient, safe disposal options, sanitation workers are increasingly at risk for needle sticks. Accidental needle stick injuries could expose workers to diseases such as hepatitis B and C or HIV. The U.S. Centers for Disease Control and Prevention estimates that a half-million accidental needle sticks occur in the United States annually, with many of those injuries going unreported.

"The providers of sharps aren't really educating the public on how to dispose of them," Martinez says. "There are places you can drop them off, but I think the providers need to show people how to get rid of them properly."

GONE TOO SOON

Parents raise awareness of prescription medication abuse after son's death

BY MIKE BLOUNT

When Ric Torchon received a phone call at 3 a.m. from his son's ex-girlfriend, his heart sank. It was his and his wife Jeannette's worst nightmare.

On December 1, 2012, their son Alec Jacob Torchon, known as "A.J." to his family and friends, died in his apartment after taking the prescription medication Opana. The drug — stronger than both OxyContin and Vicodin — is typically given to terminally ill cancer patients for pain relief. The powerful dose of the opioid caused A.J.'s body to go into respiratory arrest.

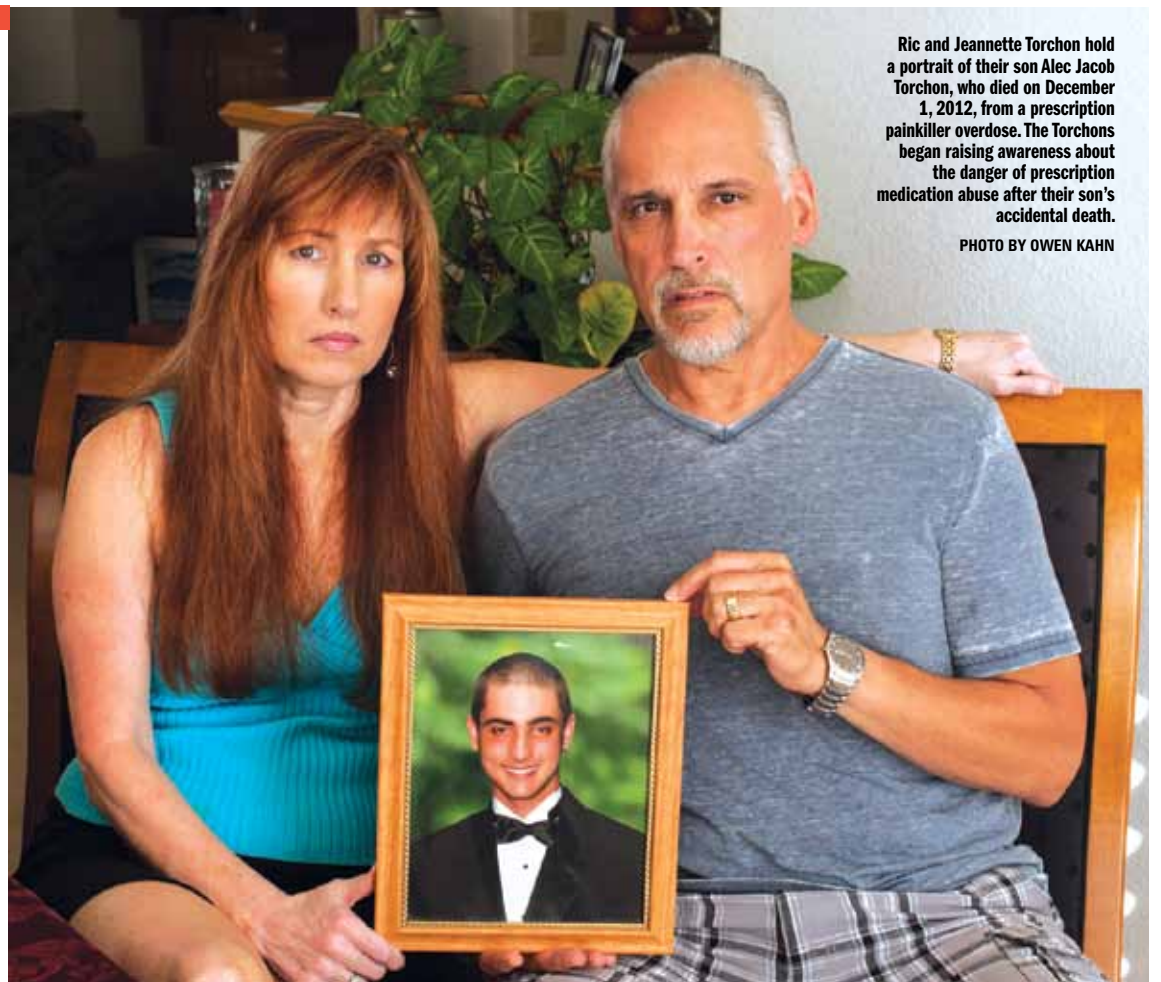
A.J. didn't fit the stereotype of someone who would lose his life to a drug overdose. He'd maintained a 4.167 GPA in high school and went on to major in biopsychology at UC Santa Barbara. A sophomore at the time, he also worked 30 hours a week at the UCSB Recreation Center. Before his life was tragically cut short, Ric

and Jeannette say A.J. may have been the happiest he had been in his entire life. But the choice to experiment with a prescription painkiller was a one-time mistake that cost him his life. And losing A.J. created a ripple-effect through the lives of his friends and family that will last forever, his parents say.

Ric and Jeannette talked to their son regularly about the consequences of using illegal drugs and alcohol. But neither was aware that prescription medication abuse was such a growing problem. They aren't sure where A.J. obtained the drugs that cost him his life.

"If we had known about the problems with prescription pain medication, we would have had a different conversation with our son," Ric says.

Prescription medication abuse is on the rise due to an increase in accessibility. According to the Centers for Disease Control and Prevention, three out of four



Ric and Jeannette Torchon hold a portrait of their son Alec Jacob Torchon, who died on December 1, 2012, from a prescription painkiller overdose. The Torchons began raising awareness about the danger of prescription medication abuse after their son's accidental death.

PHOTO BY OWEN KAHN

drug overdoses are now caused by prescription painkillers.

In 2011, the CDC declared prescription drug abuse an epidemic, while the White House defined it as "the nation's fastest growing drug problem." But despite the growing number of deaths attributed to overdosing on prescription medication, Ric and Jeannette say many who are affected by the issue choose not to talk about it because of the surrounding stigma.

"Just because your loved one died of an overdose, it does not make them bad people or you a bad parent," Jeannette says.

Shortly after their son's death, Ric and Jeannette founded a nonprofit in their son's honor. The Alliance to Change Actions and Attitudes is an effort to raise awareness and provide education about the deadly consequences of alcohol and drug use.

"We wanted something good to come from this," Jeannette

says. "We didn't want his death to be in vain."

Their efforts include educating the public about how easy access to prescription medication fuels the epidemic of abuse.

"Because this medication is prescribed by a doctor, there's an inherent feeling that the pills are safe — they are not," Ric says. "More people die from prescription medication overdoses than heroin and cocaine combined. In Marin County, it has overtaken vehicle accidents as a cause of accidental death. We want to make people as informed as possible."

Marin County officials say all members of the community should secure any prescription medications stored at home and dispose of unneeded medications at secure collection locations to help prevent meds from making their way into the wrong hands.

For more information on the Alliance to Change Actions and Attitudes, visit indiegogo.com/projects/in-memory-of-alec-torchon.

HELP FOR Rx DRUG ABUSE

The National Institute on Drug Abuse says symptoms of abuse can vary, but in general look for: **drowsiness, weight loss, depression, confusion, agitation, restlessness, impulsive behavior and dizziness.** If you suspect someone you know is abusing prescription medication, get help today.

- Rx Safe Marin is a grassroots effort to raise awareness and prevent prescription medication abuse in Marin County. It includes members of law enforcement, physicians, pharmacists, school staff and concerned family members. For more information, visit rxsafemarin.org.

- The Marin County Department of Health and Human Services provides education, prevention, treatment and counseling services to Marin County residents struggling with addiction. For more information, call 415-755-2345 or visit marinhhs.org/substance-use-services.
- For a list of substance abuse treatment facilities near you, call 1-800-662-HELP or visit the Substance Abuse and Mental Health Services Administration's website at findtreatment.samhsa.gov.



Sgt. James O'Callaghan of the Fairfax Police Department says that prescription drug abuse is a significant concern to the local community, threatening the health and safety of residents and increasing crime. Disposing of unused prescription medications at safe take-back locations can help residents keep their families and communities safe.

PHOTO BY OWEN KAHN



NEIGHBORHOODS AT RISK

The national epidemic of prescription medication abuse hits home

BY EVAN TUCHINSKY

One weekend last year, a half-dozen teens broke into an unoccupied home undergoing a renovation and made it their site for a wild party. They caused \$10,000 in damage — some from vandalism, mostly from spills and dirt. The contractor returned Monday to find three milk crates full of liquor bottles, along with discarded pill bottles.

This episode didn't transpire in a gritty inner city. No, it happened right here, in Marin County.

"The good news was there wasn't a passed-out kid," says Sgt. James O'Callaghan of the Fairfax Police Department, which investigated the incident and found youths involved ranging in age from 13 to 17. They had to go to a juvenile diversion program, but were lucky they didn't wind up in the hospital. When mixing medications with alcohol, Sgt. O'Callaghan says, "the potential for disaster is right there."

Prescription drug abuse represents a major concern for law enforcement officials. Not only do juveniles suffer

ill effects from popping pills, addicts resort to crime in order to acquire or afford pharmaceuticals.

"In this area, 75 percent of burglaries and thefts and property crimes are related to drug addicts," Sgt. O'Callaghan says. "It can be stimulants or depressants; it can be methamphetamine or opiates. The end result is these are the people who are smashing car windows to take property or doing residential burglaries."

"It's about keeping your home secure."

Sgt. James O'Callaghan
Fairfax Police Department

Home medicine cabinets represent a prime source of the prescription drugs that make their way into the community. Burglars often rifle through pill bottles, Sgt. O'Callaghan says, and teens getting their hands on medications tend to take them from their own

houses — often to use themselves, but sometimes to sell to others.

"A lot of people don't finish their prescriptions," Sgt. O'Callaghan points out. That's why the Fairfax Police Department, like sister agencies nationwide, hosts take-back events in which residents bring unused medicines and used needles or syringes to the police station for safe disposal. In just the past two take-backs, Fairfax collected 258 pounds of bottled pills alone.

Law enforcement officials see pharmaceuticals as potential gateways to other drugs, like heroin. On the way, prescription pills can do ample damage, especially in the hands of young people who, in Sgt. O'Callaghan's words, "are not experienced drug users nuanced in dosages and are ignorant as to the hazards of what they have."

Mindfulness and responsibility are key, especially for parents.

"It's about keeping your home secure," Sgt. O'Callaghan says.

MANAGE YOUR MEDS THE SAFE WAY

It's important to store medications securely while they're in use, and dispose of leftover or expired medications quickly and safely. Here's how:

Store meds safely

- Store medicines out of reach of children or pets.
- Ask your pharmacist if any of your prescriptions are at risk for abuse.
- Lock up medicines at risk for abuse in a cabinet, drawer or medicine safe.
- Keep an updated inventory of all prescription medicine in your home.
- Pay attention to unexpected changes in pill quantities.



Find out more at www.safeguardmymeds.org.

Dispose of meds safely

1. CHECK IF YOUR ITEMS ARE ACCEPTED:

Accepted:

- Prescription medications
- Medicated ointments, lotions and creams
- Liquid medication
- Pet medication

Not Accepted:

- Controlled medications (see below)
- IV bags
- Waste containing blood or infectious material
- Personal care products
- Empty pill containers
- Hydrogen peroxide
- Aerosol cans

Controlled Medications

Some meds, like narcotic medications, can only be returned to law enforcement agencies. See www.deadiversion.usdoj.gov/schedules/ for a complete list.

2. PREP YOUR MEDS.

- Dump pills into clear plastic baggies.
- Peel off or black out the labels on pill containers and recycle the containers at home.
- Keep liquids, creams and gels in original packaging.

3. DROP OFF MEDS!

Approved Marin County drop-off locations are listed on the back page or at <http://tinyurl.com/MarinDisposal>.



Don't flush or throw medications in the trash. Proper disposal is safer for our community and the environment.

KEEPING OLDER ADULTS SAFE

BY EVAN TUCHINSKY

Managing prescription meds and needles poses special concerns for the aging

As a nurse with more than 30 years of experience, Pamela Meigs knows the dangers prescription drugs can pose for elderly adults. Impaired vision can cause a senior to mistake one pill for another, while faulty memory can lead to overdoses. Seniors don't like to throw things away, so they'll save unused medications for later use, even after the expiration date, and self-prescribe when they feel ill.

Mistakes in prescription drug use are not just a problem for the elderly — 40 percent of adults ages 40 to 75 take at least five medications — but what Meigs calls “the aging factor” compounds risks of accidental misuse.

More seniors are also living with their children and adolescent grandchildren, giving teens greater contact with prescription medications that can be abused. The most recent National Survey on Drug Use and Health shows that more than 70 percent of people who abused prescription painkillers got them from family or friends.

Needles and syringes used for medicine delivery are another concern, Meigs says.

Seniors, who are often homebound, sometimes find it difficult to dispose of sharps properly or to pay for expensive mail-back programs. Instead, sharps are hoarded unsafely in old milk jugs or even flushed.

But Meigs, who serves on the board of directors of the Ross Valley Sanitary District, says flushing pills or sharps is a bad idea.

“The molecules from pharmaceuticals are hard to get out of waste water,” she explains. “It's a difficult and expensive process.”

Meigs says that sharps flushed down the toilet can become lodged in sanitation equipment, forcing workers to remove them by hand. This can damage equipment and increase workers' risk of needle-stick injury, infectious diseases and bacterial infection. Tossing pills in the trash has risks, too.

Instead, Meigs encourages people to look for local take-back locations, which she hopes will increase in light of statewide efforts.

“Education needs to be offered where you buy drugs or needles,” Meigs says, “that you

need to discard your outdated, unused drugs and used needles at the same places you purchased them. It should be so easy and so obvious, for a consistent, safe drop-off system. The expansion of drop-offs would address a lot of the safety issues and would help the environment.”



Pamela Meigs, R.N.
PHOTO COURTESY OF
PAMELA MEIGS



PROTECTING THE ENVIRONMENT

Flushing meds threatens water quality

BY MEREDITH J. GRAHAM

Many people don't realize it, but the medications they take — or those they flush down the toilet — ultimately end up in our drinking water. While we are still in the beginning stages of understanding the effects of pharmaceuticals in our water supply, most scientists agree that it's worthy of further study.

“When we take a medication or use a cleaning agent, and we put it down the drain, it goes somewhere,” says David Sedlak, co-director of the Berkeley Water Center and director of the Institute for Environmental Science and Engineering at UC Berkeley. “There's not some sort of magic process that can remove everything we put down the drain.”

Many medications dissolve easily in water. But they are not so easily removed when they get to wastewater treatment facilities, which are designed primarily to filter out particles, not liquids. Once the treated wastewater is returned to the river, some of it may end up in drinking water treatment systems that serve communities downstream.

“We have seen effects on aquatic organisms,” Sedlak explains. “And there are concerns that these pharmaceuticals are making their way back into our drinking water.”

There has been no study on the effect of these drugs in the water on humans. Sedlak says there's not enough research yet to show the repercussions of flushing unused medications down the toilet — most studies include pharmaceuticals that have been excreted — but he says it's a subject worth exploring.

“There's not some sort of magic process that can remove everything we put down the drain.”

David Sedlak
Director of the Institute for Environmental Science
and Engineering at UC Berkeley

Other scientists agree. The World Health Organization's website includes a discussion of pharmaceuticals and the environment. It suggests that to minimize the amount of chemicals that end up in our drinking water, we should not flush medications we don't take.

“The most appropriate approach to minimize the presence of pharmaceuticals in drinking water and reduce human

exposure is to prevent or reduce their entry into the water environment as far as reasonably practical,” the website reads.

But throwing drugs in the trash with some cat litter isn't the solution either. While some experts suggest mixing pills with unsavory substances to prevent abuse and then tossing them into the garbage, studies have shown that rainfall on landfills can dissolve the chemicals, causing them to leach.

Leachate is the liquid that gets into landfills from rain and percolates through material deposited in a landfill, dissolving contaminants. The leachate is then collected and either injected back into the landfill, treated on-site or sent into the sanitary sewer system for treatment.

Sedlak says the biggest way we can help the environment is to change our attitudes about medicines. He points to Sweden, where medications are classified in relation to their effect on the environment. This classification system, which the Swedish government uses when approving new drugs, has led to further research on environmental impacts as well as pharmaceutical companies creating medicines that are less harmful to the ecosystem.



Brad Wright participated in stakeholder discussions to design Ontario Regulation 298/12, which shifted to manufacturers the responsibility for managing pharmacy-based take-back programs for sharps and pharmaceuticals.

PHOTO BY NANCY PAIVA



CAN WE LEARN FROM CANADA?

Looking north for a model for the safe disposal of pills and sharps

BY SHANNON SPRINGMEYER

NOT MAKING THE GRADE

More and more lawmakers in California and beyond are turning to the extended producer responsibility (EPR) model to improve disposal options for meds and sharps.

One EPR-inspired bill was California Senate Bill 486, which was signed into law in October 2009. It required makers of injectable drugs to submit annual reports to CalRecycle outlining their plans to provide patients with disposal options for used sharps.

Rebecca Ng, deputy director of Marin County Environmental Health Services, serves on the SB 486 Evaluation Team. The team has given letter grades to manufacturers' plans annually since 2010. They've found that producers still have a lot of work to do.

"Let's just say there's a lot more Fs than As," Ng says.

In fact, for 2013, the team gave As and Bs to only a handful of the 25 producers. The rest all received F grades, meaning their plans were not deemed convenient or effective enough. While a few companies have improved their scores since 2010, Ng says the majority have not. She says this points to the need for stronger EPR legislation.

"I'm a supporter of EPR," Ng says. "My feeling is, these manufacturers are making a lot of money selling these products to patients. And I think they could maybe use some of their profits to help get rid of the sharps and of pharmaceutical waste."

★ See who's making the grade, and who's not. Find the report cards evaluating producer disposal plans at: www.acgov.org/board/district5/sharps_reportcard.htm

🔍 Find disposal plans and more information about SB 486 on CalRecycle's website at: www.calrecycle.ca.gov/homehazwaste/sharps/Reporting/default.htm

Our neighbors to the north have a successful and sustainable solution for disposing of potentially harmful pharmaceuticals waste. And it's one that doesn't burden the taxpayer or hurt business.

Pharmacies in Canada began voluntarily collecting and disposing of sharps and medications in the early 1990s as a service to attract customers, says Brad Wright, principal consultant for Environment and Resources Consulting in Toronto. Pharmacy-based take-back programs make a lot of sense, offering convenience and accessibility to customers, as well as expertise in managing these materials safely. However, a lot of the materials collected in such programs ended up in the municipal waste collection system — at the taxpayers' expense.

To address this problem, lawmakers in Ontario turned to extended producer responsibility (EPR), a policy approach for placing responsibility for end-of-life product management on the producers rather than government. Wright participated in stakeholder meetings to develop Ontario Regulation 298/12, which came into effect in 2012. The regulation assigned responsibility for end-of-life management of pharmaceutical waste and sharps to the manufacturers.

"The burden of cost shifted from the retail pharmacy to industry," Wright says. "And with the shift in that burden of cost, pharmacy enrollment in the program for collecting this material tripled."

In fact, a recent press release from the Health Products Stewardship Association, the nonprofit organization that manages the programs on behalf of industry, notes that nearly 3,400 pharmacies in Ontario, or more than 90 percent, are now enrolled.

"Better accessibility for the consumer means that more material is being returned to these collection locations by the consumer, and less of it is making its way into the environment," Wright says. "Both programs are operating exceptionally well."

EPR has also proven cost-effective. In British Columbia, the cost per year per pharmacy for running these programs is less than \$1,000. And all three programs have not led to any cost increase in the price of medications to consumers. The success of these programs is inspiring similar regulations in other provinces. Prince Edward Island became the newest province to pass EPR regulations for

sharps and medications in June 2014.

"The future for these programs is that they're going to expand," Wright says. "So you are going to end up with, in Canada, regulated programs for EPR for pharmaceuticals and for sharps in pretty much every province."

Increasingly, communities in the U.S. are turning to EPR. Alameda County has passed and the City of San Francisco has proposed ordinances that create producer-funded take-back networks for medications and sharps. Wright suggests that the success of EPR programs in Canada for these products going back to 1996 could serve as a model for U.S. industry and lawmakers alike.

"There's an opportunity for jurisdictions in the U.S., whether it's at the county level or the state level, to get it right from a regulatory perspective," Wright says. That includes allowing producers freedom in determining how to comply with the regulated program targets, just as in Ontario, he says.

"The onus in terms of liability has to be on the individual producer, and what they really should do is look to the excellent example here in Canada — in B.C., Manitoba, and Ontario — of how these programs have been operating for years, and operating very effectively, meeting targets in getting this material managed properly."

ONE MANUFACTURER'S SOLUTION

UltiCare syringes and pen needles are packaged in a plastic container that offers a unique solution to the safe disposal of sharps, at no extra cost to consumers. UltiCare's container holds new sharps at the bottom, while opening up to safely hold used sharps at the top. "We feel it's our responsibility, as a manufacturer of devices designed to puncture skin, to make sure sharps are disposed of safely," says Tom Erickson, CEO of UltiCare's parent company, UltiMed.

