

Submission for Parliamentary Joint Committee Inquiry on Amphetamines and Other Synthetic Drugs

**Prepared by
Australian Self-Medication Industry (ASMI)**

What is Pseudoephedrine?

Pseudoephedrine (PSE) is a safe and effective oral nasal decongestant used in the relief of symptoms of colds and flu and allergies. PSE has been on the market for 30 years and is the most effective oral medicine for the relief of nasal congestion. It is also the most common ingredient of cold and flu tablets.

Pseudoephedrine (PSE) is a precursor chemical for manufacturing methamphetamine, which is a core ingredient for making illicit drugs. As a result of Pharmacy being the only licensed and ready source of PSE containing products, they have become targets of problem suspect purchasers.

Overview of the PSE situation.

The targeting of PSE containing products for illicit use has become a very common occurrence. The use of PSE to create drugs such as "Speed" and other substances has become a highly lucrative market and their consumption is seen as a public health hazard.

In the past it has been PSE only products that have been targeted for illicit use, however it is now common for PSE combination products such as, PSE and antihistamine or PSE and analgesic, to be targeted. As a result of this, all PSE containing products have now been rescheduled from S2 (Pharmacy Only) to S3 (Pharmacist Only) or S4 (Prescription) to control the purchase of PSE containing products for illicit use.

Activities undertaken by ASMI to help prevent the diversion of PSE

1. ASMI PSE subcommittee

This was established in January 2002 with the objective of providing a whole of industry approach to the illicit diversion of PSE. This subcommittee was comprised of both ASMI Member and non-member companies and has met regularly to develop strategies to help contain the illicit diversion of PSE.

2. Code of Conduct – Helping prevent the Diversion of Pseudoephedrine-Containing Non-Prescription Medicines

This code was developed by the Subcommittee and was granted full authorisation for five years by the Australian Competition and Consumer

Commission (ACCC) effective from 13 November 2003. By adopting this code the non-prescription medicines industry demonstrated its commitment to the responsible sale and promotion of PSE containing medicines to ensure legitimate consumers continue to have access to this medicine while reducing the potential for illicit diversion.

In 2005, in response to voluntary recommendations made by NSW Poisons Advisory Committee regarding the storage and handling of pseudoephedrine containing products, the Code was revised to incorporate these recommendations.

ASMI has been instrumental in encouraging sponsors and manufacturers of pseudoephedrine-containing products to assist pharmacy in minimising their stock holdings and ensuring promotional activities do not encourage theft and/or multiple purchases.

ASMI continues to work with key stakeholders to establish a better understanding of the Code of Conduct in terms of what constitutes acceptable and unacceptable promotional activity in relation to pseudoephedrine-containing products.

3. ASMI awareness campaign

In April 2005, ASMI commenced an awareness campaign targeted to retail pharmacies.

The elements of the campaign included advertising in trade journals aimed at pharmacists and pharmacy assistants, a direct mailer with posters and counter cards, and, leaflets in pharmaceutical wholesalers tote bins. The advertisements and the tote bin leaflets include messages regarding storage and display of PSE products. The posters and counter are directed to consumers to assist them understand the changed storage conditions and to assist pharmacists explain these changes.

4. National Working Group for the Prevention of Diversion of Illicit Chemicals

ASMI has been an active participant and supporter of the activities of this Working Group for several years.

5. “Project Stop”

ASMI has been a keen supporter of “Project Stop” initiated by the Pharmacy Guild.

Issues

- **Advertising**

There is no evidence that advertising increases overall demand for cough cold products. Its function is to create consumer awareness of a particular brand and the purpose is to promote switching in market share between one brand and another. Criminals understand already that pseudoephedrine products are available in pharmacy and advertising is not influencing their behaviour. There is no proven link between advertising and the illicit diversion and thus ASMI recommends that pseudoephedrine should remain as an advertisable substance.

Existing advertising requirements for all S3 products under clause 6.2(e) of the Therapeutic Goods Advertising Code make it clear to consumers that the intervention of a pharmacist will be required in the purchase of these products by the use of a mandatory statement.

- **Ramifications of Rescheduling**

The rescheduling of all pseudoephedrine products has required the entire range of pseudoephedrine-containing products to be repackaged and a Consumer Medicines Information leaflet produced. The estimated cost is over \$1 million to the industry as a whole.

In addition many products are being deleted from the market place thus reducing the available options to consumers. Some companies are developing alternative cold and flu products that substitute phenylephrine for pseudoephedrine in the formulation. Phenylephrine is generally considered an inferior substance to pseudoephedrine from an efficacy point of view.

Summary and Conclusions

The rescheduling of PSE containing products to S3/S4 status has had a marked impact on illicit diversion and additional restrictions on its availability should only be considered after careful evaluation of the impact of the recent measures.

In our view the problem of pseudoephedrine diversion can only be successfully addressed through a multi-faceted, cooperative and national approach involving all stakeholders.