

THE WALL STREET JOURNAL.

WSJ.com

July 29, 2015, 3:51 PM ET

Another California County Wants Pharma to Pay for Drug Take-Backs

By Ed Silverman



Marin County may become the latest to demand drug makers pay for take back programs, but PhRMA says 'don't flush.'

Agence France-Presse/Getty Images

Yet another California county plans to ask the pharmaceutical industry to fund a drug take-back program. Yesterday, the Marin County Board of Supervisors edged closer to approving an ordinance that would expand an existing program and require drug makers to underwrite the cost. If the board finalizes the ordinance next month, Marin would become the fifth California county to take such a step.

The move comes two months after the U.S. Supreme Court denied an industry [request](#) to review a [lawsuit](#) filed over a drug take-back program in Alameda County, California. Drug makers and biotechs had been fighting a three-year-old ordinance, which was the first in the state to require them to pay for the costs of a program that allows consumers to drop off unwanted medicines.

In explaining the need for an ordinance, Marin officials expressed concerns voiced by the other California counties as well as one in the state of Washington that adopted a similar ordinance. In each case, local officials say they want to reduce contaminants in drinking water and lower the threat of drug abuse stemming from drugs that linger in household medicine chests.

“We’re learning that the same medicines we use to improve our health are also causing real harm in this epidemic of misuse,” Marin County public health officer Matt Willis says in a [statement](#). “Too often, our medicine cabinets are the source of drugs that end up being abused... This ordinance” addresses that.

County officials have also complained that, in the absence of state action, the costs to run take-back programs threatened to overwhelm their budgets. All of the counties have argued that drug makers are capable of funding such programs, since the companies generate substantial revenue doing business in

each county. We asked Marin officials how much they expect to save and will pass along any reply.

[UPDATE: "We're estimating the cost will be similar to the cost of the programs in San Mateo and Alameda counties, which range from \$250,000 to \$330,000," says Rebecca Ng, the deputy director of Environmental Health Services in the county's Community Development Agency.]

The action taken by Marin officials is hardly surprising. Experts predicted that, after the Supreme Court rebuffed the industry, still more counties and cities are likely to consider establishing take-back programs that require drug makers to pick up the tab.

At the time, the Product Stewardship Institute, a nonprofit that supports drug take-back programs, calculated that at least a dozen other local governments around the country are considering similar legislation, including several California counties.

It remains unclear whether the trend will spread across the country. As we noted previously, the federal appeals court that had upheld the Alameda County ordinance has jurisdiction for California and Washington. However, if a city or county outside that jurisdiction passes such an ordinance, it could be challenged in court. And a different appeals court could, theoretically, rule in favor of drug makers.

The pharmaceutical industry had contended the Alameda ordinance was unconstitutional, and unsuccessfully argued that it violated interstate commerce and discriminated against out-of-state companies by unfairly shifting costs to drug makers. We asked the Pharmaceutical Research and Manufacturers of America, the industry trade group, for comment and will update you accordingly.

[UPDATE: A PhRMA spokeswoman sends us this: "We support efforts to help consumers safely dispose of unwanted medicines, but there is no rationale for mandating new, costly and redundant take-back programs when voluntary in-home disposal has repeatedly been shown to be effective, ecologically sustainable, secure, more convenient and less costly for patients."]

Copyright 2015 Dow Jones & Company, Inc. All Rights Reserved

This copy is for your personal, non-commercial use only. Distribution and use of this material are governed by our [Subscriber Agreement](#) and by copyright law. For non-personal use or to order multiple copies, please contact Dow Jones Reprints at 1-800-843-0008 or visit www.djreprints.com