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Congress of the United States

House of Representatives

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July 9, 2013

The Honorable R. Gil Kerlikowske
Director
Office of National Drug Control Policy
Executive Office of the President
750 17th Street, N.W.
Washington, D.C. 20503

Dear Mr. Kerlikowske:

Thank you for appearing before the Subcommittee on Health on Friday, June 14, 2013, to testify at the hearing entitled "Examining the Federal Government's Response to the Prescription Drug Abuse Crisis."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

To facilitate the printing of the hearing record, please respond to these questions by the close of business on Tuesday, July 23, 2013. Your responses should be mailed to Sydne Harwick, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to **Sydne.Harwick@mail.house.gov**.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,

Joseph R. Pitts
Chairman
Subcommittee on Health

cc: The Honorable Frank Pallone, Jr., Ranking Member, Subcommittee on Health

Attachment

Attachment—Additional Questions for the Record

The Honorable Joseph R. Pitts

1. In 2012, the FDA, in partnership with other regulatory and law enforcement agencies, undertook Operation Pangea V and took action against more than 4,100 internet pharmacies. Operation Pangea V resulted in the shutdown of more than 18,000 illegal pharmacy websites and seized approximately $10.5 million worth of pharmaceuticals worldwide. This operation illustrates the magnitude of the internet pharmacy problem. Online Pharmacies have proven to be very problematic and dangerous as they often do not require any prescription. How is ONDCP combating online pharmacies?

2. How does the ONDCP allocate its funds to address prescription drug abuse?

3. How does the CDC, FDA and ONDCP work together during the development of a promising treatment which could help address the national priority of abating the drug abuse crisis? While obviously approval of any new medication is under the purview of the FDA, I'd like to know more about the extent to which each of your agencies provide your expertise to one another when a therapy with this potential is under review.

4. How do you measure the success of the Prescription Drug Abuse Prevention Plan?

5. Why has ONDCP prioritized reauthorizing NASPER?

6. Are you investigating a strategy involving drug packaging?

7. In the document *Epidemic: Responding to America's Prescription Drug Abuse Crisis,* one of the primary action items is educating prescribers. You note that you would like to amend Federal law to require the training. In conjunction with this legislative approach has your agency talked to medical, nursing, and pharmaceutical schools about including this in the curriculum?

8. It is clear that the prescription drug abuse crisis is extremely complicated and constantly changing. Has the ONDCP altered the prescription drug abuse plan to accommodate for the evolving epidemic? If so, how has the plan changed?
    a. What caused the changes in strategy?
    b. What have been the strongest and most effective parts of the strategy?

9. In your testimony, you note that 49 states have laws authorizing PDMPs. Why do Missouri and the District of Columbia not have legislation authorizing PDMPs?
    a. Which States have the best PDMP programs?
    b. What make PDMPs effective?
    c. Area all PDMPs built upon a similar model?
    d. Are there any outstanding PDMPs that have proven to be more successful than others?
    e. Would you please explain the importance of state PDMPs being interoperable with other states PDMPs?

The Honorable Bill Cassidy and H. Morgan Griffith

An L.A. Times investigation recently uncovered that a small number of doctors were responsible for most of the prescription drug overdose deaths between 2006 and 2011 in Los Angeles, Orange, Ventura and San Diego counties of California. The investigation consisted of examining publicly available cause-of-death, toxicology reports and other information in county coroners' files, including lists of prescription medications found at death scenes.[1] (). If an L.A. Times reporter can uncover provider-specific data on inappropriate prescribing of prescription drugs from publically available data, why can't the federal or state governments do so as effectively with even more robust data monitoring tools?

The Honorable Gus Bilirakis

1. Recently, there was a drug summit in Pasco County, FL where public health officials were talking about the growing problem of babies born addicted to prescription drugs. The Pasco-Pinellas area ranks first in the state for babies born addicted. What tools, programs and grants are available for my community to combat this problem?

2. What changes can we make to our prescription drug laws to make it harder for people to improperly obtain and abuse prescription drugs?

[1] The article is available at: http://www.latimes.com/news/science/prescription/la-me-prescription-deaths-20121111-html,0,2363903.htmlstory?main=true