

Testimony of U.S. Rep. Nick J. Rahall (WV03)
“The Prescription Drug Epidemic in America”
Committee on the Judiciary, Subcommittee on Crime, Terrorism and Homeland Security
Wednesday, March 7, 2012
10am
2141 Rayburn House Office Building

Thank you Chairman Sensenbrenner and Members of the Subcommittee for this hearing. Thank you to my colleagues – my good neighbor and Chairman of the Appropriations Committee, Hal Rogers, and Congresswomen Mary Bono Mack and Congressman Stephen Lynch – all tremendous leaders on our fight to stop this epidemic.

I appreciate the opportunity to appear before the Subcommittee and to submit statements on behalf of the law enforcement officials, health care professionals, and community leaders I represent. I encourage the Subcommittee make available the full record of this hearing to facilitate a deeper understanding of the drug challenge before us and the need for legislative action by the Congress.

What was once described as America's "Silent Epidemic," can now be openly witnessed any hour, day or night, on countless street corners across the country. It is the crippling epidemic of prescription drug abuse that we are facing. Every day, news stories report overdoses, deaths, accidents and families torn apart by the vicious cycle of prescription drug abuse.

And, the cycle is certainly vicious.

Unlike cocaine or heroin, prescription drugs are legal; frequently prescribed by caring physicians, led by the principle oath of “first, do no harm.” Yet, alarming statistics show that children and adults are blind to the harmful consequences of these drugs – even as they become addicted – paying upwards of \$150 per pill to buy them on the black market.

Distressingly, West Virginia has our nation's highest rate of drug-related deaths. In fact, between 2001 and 2008, more than nine out of ten of those deaths involved prescription drugs. Incredibly, drug overdoses now kill more West Virginians each year than car accidents.

But the alarming use and deaths by prescription drugs is not just in West Virginia. As the other distinguished Members of this panel can tell you, they are seeing and hearing of this epidemic from their communities, as well.

Drug overdose death rates in the United States have more than tripled since 1990 and have never been higher. In 2008, more than 36,000 people died from drug overdoses, and most of these deaths were caused by prescription drugs. From newborn babies addicted to opiates to seniors overdosing, this nationwide problem knows no boundaries and it needs national attention.

I have met numerous times with law enforcement, community organizations, educators, physicians, and many more of my constituents. Clearly, fighting back against prescription drug

abuse will take the efforts of an entire village with determination and persistence and the coordination of federal, state, and local resources and networks.

We must strengthen drug diversion, educate children and adults on prevention, work with the medical community on addiction and pain treatment, and treat and rehabilitate those affected by vicious addiction before they succumb to the death spiral.

I, and my distinguished colleagues, have put forth and supported legislation that aims to combat prescription drug abuse. We know that something more needs to be done from a federal level, and that's why I introduced H.R. 1925, the Prescription Drug Abuse Prevention and Treatment Act. This bill would implement multiple measures essential to combating prescription drug abuse – education and training, monitoring, evaluation and enforcement – and it provides a good guideline to coordinate federal, state, and local efforts to fight this epidemic.

The bill establishes mandatory physician and consumer education, as well as authorizes federal funding to help states create and maintain prescription drug monitoring programs that all states can access. The bill would also set up a uniform system for tracking pain killer-related deaths, helping states and law enforcement manage and report data. The West Virginia State Police, our state's Attorney General, and even physicians all consistently stress the need for access to a prescription drug monitoring system that shared between state lines and updated in real time.

I know my colleagues have authored and support similar bills, like H.R. 2119, the Ryan Creedon Act, which also seeks to implement targeted physician education on prescription drug abuse and addiction.

These bills address the critical issues that ought to be part of this Subcommittee's efforts to craft legislation to assist our states and communities in combating prescription drug abuse.

From the evidence submitted to this Subcommittee, one unmistakable conclusion emerges. The toll of destruction and devastation heaped upon America's families and our economy by this epidemic demands the United States Congress must act, and act swiftly.

I urge you, Mr. Chairman, to strongly consider and move forward on legislation that encompasses the provisions I've mentioned. Let us act with dispatch and compassion and with an acute understanding of the enormity of the challenge before us.

I thank you for your time today, and with the aid of legions of willing and able community professionals and leaders throughout the country, I look forward to working with you and my colleagues in the coming weeks and months to fashion a national response.