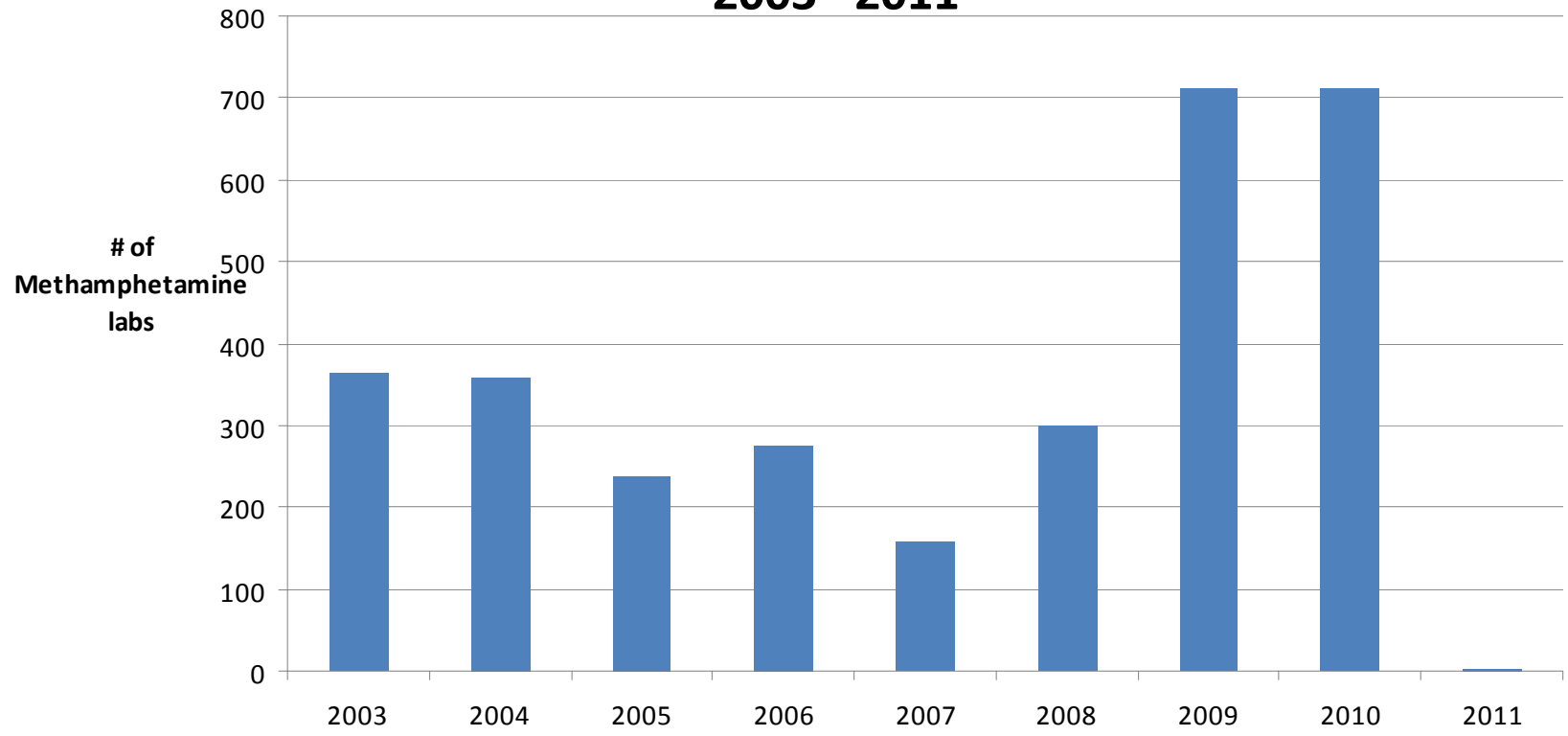


Mississippi Methamphetamine Labs 2003 - 2011

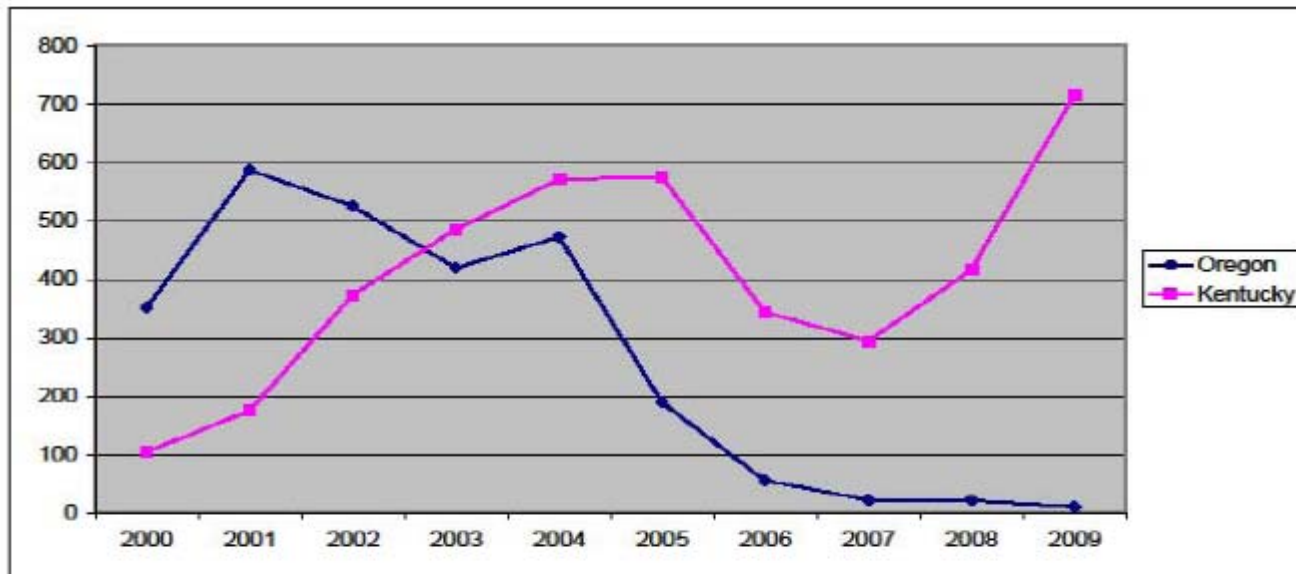


Meth Lab Incidents*

Comparing Oregon and Kentucky trend lines

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Oregon	351	587	525	418	472	188	55	22	21	10
Kentucky	104	175	373	485	571	574	343	294	418	718

* Per EPIC for 2000-2008. 2009 is directly from Oregon and Kentucky. NOTE: The Kentucky number may go higher due to late reporting.



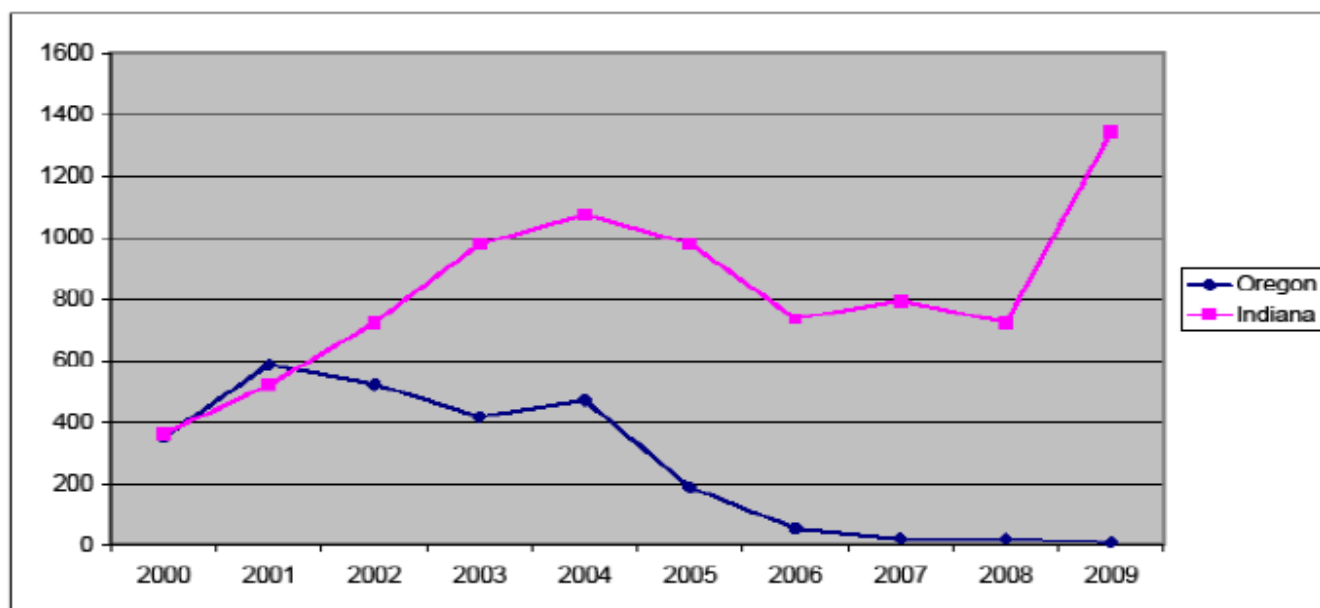
IN Lab Seizures up 270%

Meth Lab Incidents*

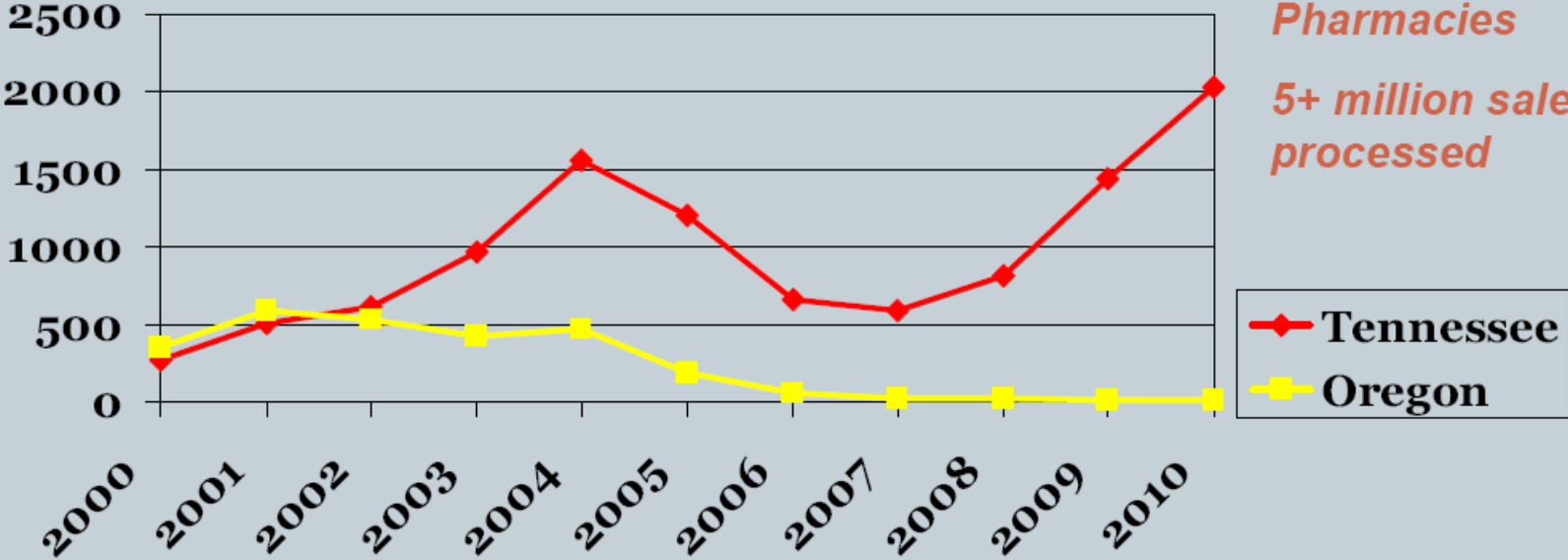
Comparing Oregon and Indiana trend lines

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009
Oregon	351	587	525	419	472	189	55	22	21	10
Indiana	363	521	723	979	1074	981	737	785	724	1,343

* Per EPIC/NCLD/DEA for 2000-2008. See http://www.justice.gov/dea/concern/map_lab_seizures.html 2009 is directly from Oregon and Indiana.



Lab Seizure Comparison

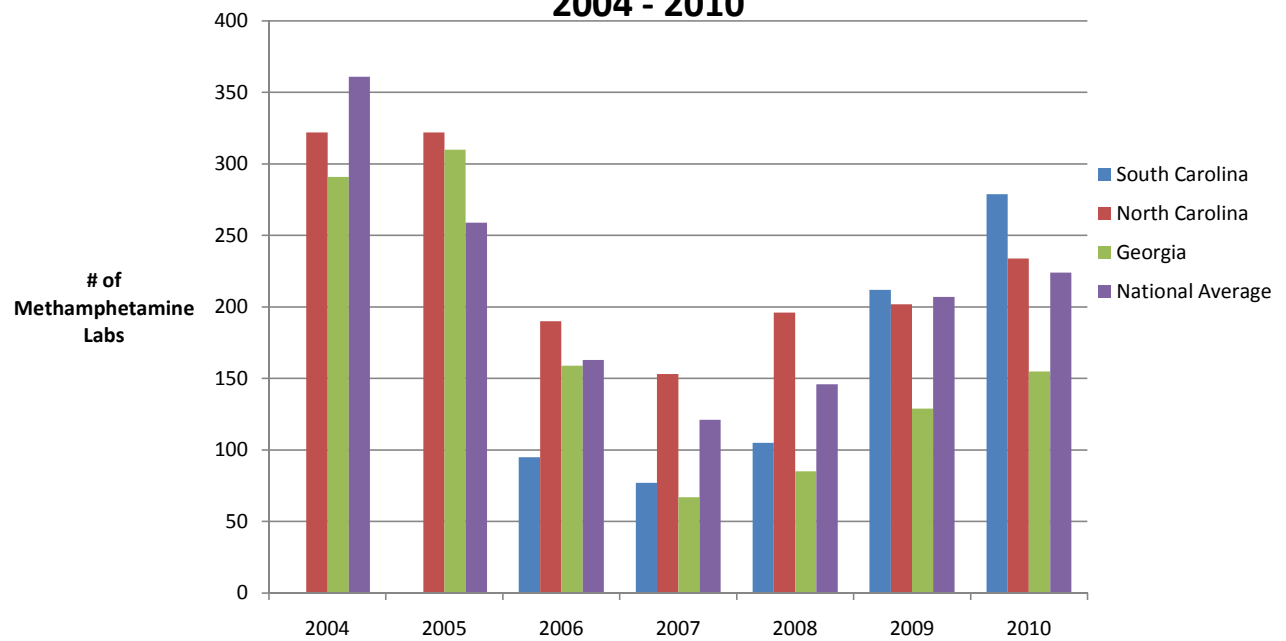


80% electronic compliance by Pharmacies

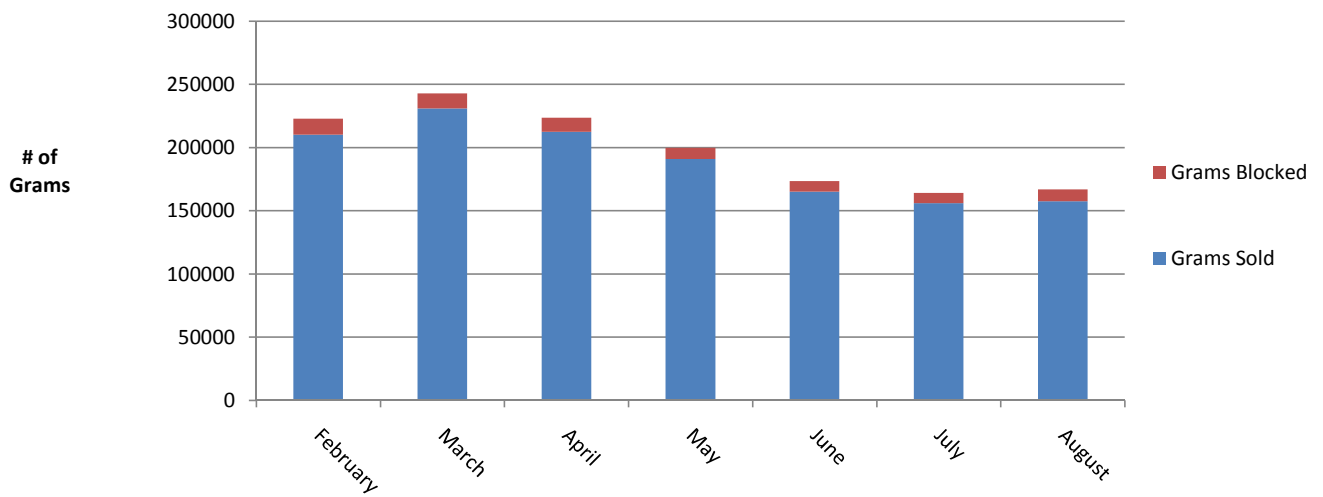
5+ million sales processed

- Tennessee**
- Oregon**

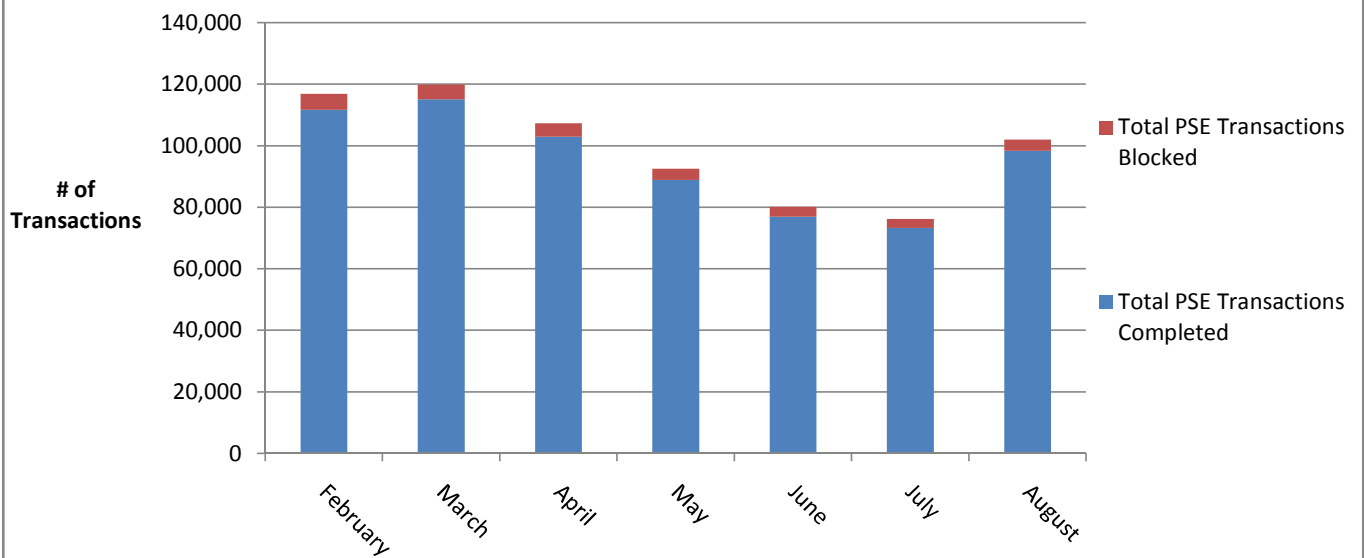
Yearly Comparison of State Methamphetamine Labs 2004 - 2010



**Number of PSE Grams
(Sold and Blocked)
Feb 2011 - Aug 2011**



Number of PSE Transactions (Completed and Blocked) Feb 2011 - Aug 2011



Bill would target pill sales tied to meth

By Franco Ordoñez

PUBLISHED IN: CRIME & JUSTICE

Confronted with surging abuse of methamphetamine, some North Carolina legislators want to require consumers to get a prescription to buy Sudafed, Allegra-D and other cold and allergy pills containing the pseudoephedrine used to make the highly addictive drug.

Legislators will take up a bill this morning that supporters say would curb meth abuse but critics contend will mean hassles for consumers who would be forced to trek to the doctor to get medicine they now buy over the counter.

Supporters say the bill would help slow a record pace of meth production, a dangerous cooking process that combines ingredients from the popular decongestant with other elements to make the drug. If production continues at its current rate, investigators project they will dismantle more than 400 meth labs across the state this year.

"People are dying. Kids are getting hurt," said State Rep. Craig Horn, a Weddington Democrat, who is sponsoring the bill. "We're spending lots and lots of money we don't have. We're screwing up our own environment. ... Your choices are you put a bigger band aid on it or cure it."

A judicial subcommittee meeting has scheduled a hearing on the bill, which would make pseudoephedrine a Class III controlled substance. The State Bureau of Investigation is expected to testify in favor, while some drug makers have expressed opposition.

Opponents say the measure would make it harder for legitimate users to obtain their favorite cold remedies and would drive up costs to consumers.

Some 20 million Americans use pseudoephedrine products, according to the Washington D.C.-based Consumer Healthcare Products Association, which represents drug makers. If half of those consumers went to the doctor for a prescription just once a year, it would add a billion dollars in health care costs, the group says.

The association instead supports an electronic tracking of pseudoephedrine sales to stop illegal purchases.

Currently, North Carolina requires that purchasers of the drug show identification and register at pharmacies. But meth makers have found ways around the rules. Buyers, dubbed "smurfs," purchase pseudoephedrine legally in small doses at many different locations. Sometimes they use fake IDs to disguise their identity.

Fred Eckel, executive director of the North Carolina Association of Pharmacists, said his group has not taken an official position on the bill.

"But we recognize it's important to control the inappropriate use of pseudoephedrine while still allowing the appropriate use to be convenient," he said.

Similar bills also have been considered by lawmakers in Alabama, Arizona, Arkansas, California, Colorado, Indiana, Kansas, Kentucky, Missouri, Nevada, Oklahoma, Tennessee, Virginia and Washington.

Only Oregon and Mississippi have passed laws that require a prescription to get pseudoephedrine.

As a result of the law, meth production labs in Oregon fell from a high of 525 in 2002 to 13 in 2010. In Mississippi, which adopted a prescription-only law in 2009, authorities say meth lab seizures have dropped by nearly 70 percent.

"The impact of the legislation has been dramatic," said John Emerson, who directs the federal High Intensity Drug Trafficking Area program in North Carolina. "If we can control the primary ingredients of a major drug, then we can have control over the manufacturing and distribution."

Meth is an addictive drug that can induce euphoria but can also cause severe health problems. It can be taken orally, snorted, smoked or injected.

It no longer requires a hot plate or heating source for ingredients to be cooked together. All that's needed is a 2-liter soda bottle to shake together the few ingredients in methamphetamine, whose key component is extracted from cold medication.

Experts are particularly alarmed that more children are being exposed to the dangerous chemicals as their parents find easier ways to mix ingredients to make the highly addictive drug.

Last year, the SBI discovered 60 children were discovered exposed to meth labs.

In a case this month, Michael Anthony Howell, 48, and Crystal Marie Flowers, 24, of Bessemer City were arrested for drug manufacturing and child abuse when Gastonia police said they found a meth lab in the home where two children were living.

A 2005 state law restricting the sale of pseudoephedrine helped reduce state production of the drug, said Emerson, formerly of the DEA's North Carolina bureau. The law limited the amount of cold medicine containing pseudoephedrine that a customer could buy and requires stores to keep the medicine behind the counter. Buyers must register when purchasing the drugs.

But meth production is on the rise again.

Horn said he understands that some in the public will worry about restricting access to the popular decongestant, but he says there are good alternative drugs. And he said those people who feel they must have pseudoephedrine can get a prescription.

"The benefits far outweigh those few problems people will have," Horn said. "We're in no way prohibiting people from getting pseudoephedrine. We're just trying to get it out of the hands of the bad guys."