

OHSU Emergency Department reports fewer meth-related visits following 2006 'anti-meth' legislation

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The number of methamphetamine-related emergency room visits decreased significantly in the year following the implementation of Oregon's law prohibiting the sale of over-the-counter decongestant containing pseudoephedrine, according to Oregon Health & Science Emergency Department physician-researchers.

Their findings will be presented Saturday, June 5, at the annual meeting of the Society of Academic Emergency Medicine in Phoenix, Ariz.

"This is one of the first studies to suggest that limitation of supply of an illicit substance may be effective at decreasing its use as well as its associated medical problems," said Rob Hendrickson, M.D., principal investigator, medical toxicologist and an associate professor of emergency medicine in the OHSU School of Medicine. "Our research suggests that the state legislation limiting the supply of [methamphetamine](#) was associated with a decrease in methamphetamine use and, in particular, a decrease in medical problems related to methamphetamine."

Methamphetamine is an illegal drug of abuse typically produced through the chemical conversion of over-the-counter pseudoephedrine. In July 2006 Oregon became the first state to make over-the-counter medicines containing ephedrine, pseudoephedrine and phenylpropanolamine — key ingredients used in the illegal manufacture of meth — prescription-only

drugs.

Following the law's implementation, Hendrickson and colleagues in the OHSU [Emergency Department](#) (ED) sought to determine whether the new legislation was an effective deterrent of methamphetamine use or methamphetamine-related disorders.

To conduct their research, the research team queried OHSU ED physicians to determine whether each individual patient visit to the ED was methamphetamine-related. The ED physicians were required to enter a response in the patient's electronic medical record prior to discharge. A database was kept and 38,417 patients were recorded. Of those patient encounters, 721 were deemed meth-related.

Following the one-year study, Feb. 5, 2006, to Feb. 5, 2007, the researchers found a 35 percent decrease in visits to the ED that were related to methamphetamine and a 29 percent decrease in patients who admitted to methamphetamine use. They also report that in the months prior to the law's enactment, they had an average of 18 methamphetamine-related Emergency Department visits per week in the OHSU ED. Post-legislation, that number fell to an average 11.3 per week.

"We are hoping to further explore if the decreases that we see in methamphetamine-related visits continue in the future and if further limitations of supply or other interventions affect ED visits," Hendrickson said.

Provided by Oregon Health & Science University

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