

These figures are contrasted with propoxyphene which is implicated in 15 deaths per million prescriptions dispensed.

I want to emphasize that this does not show the complete picture.

One of the biggest problems, and it has been alluded to here this morning is that with propoxyphene, unlike some of these other drugs, it is regarded by many of the medical profession in my judgment, and by patients as well, as a relatively innocuous drug in terms of relative possibility of harm, and it has proven to be, according to the data and according to the testimony you have heard here this morning, far from a harmless substance.

A significant question, and one that has a bearing on the outcome of the pending petitions, is "Has placing propoxyphene in schedule IV as of March 1977 had an impact on its abuse?"

With respect to DAWN ER mentions, I can point to a statistically significant decrease since that time.

At this point there is insufficient data for DAWN ME reports to make a comparable claim for ME mentions.

It will be another 6 to 9 months before that data is complete for 1978.

For medical examiners mentions, from January 1975 to February 1977, they average about 40 a month, and from April 1977 through December of 1977, which is as far as we can go at this point, they average about 42 mentions a month, and as I indicated, during the first 3 months of 1978, they are running about the same level.

With regard to propoxyphene, the number of thefts are very slight compared with some of the other drugs that we have under control.

It just does not appear to be a product that is preferred by thieves. This is in sharp contrast to the well-orchestrated attempts to divert such drugs as the amphetamines, phenmetrazine, the barbiturates, methaqualone, methadone, and hydromorphone, all schedule II substances. Fraudulent prescriptions and illegal dispersing are not problems with propoxyphene as they are with the drugs I just noted, although there are some problems with propoxyphene in that area. Regardless of what I have just said, the Drug Enforcement Administration is most concerned about the abuse of propoxyphene. The sizable number of deaths alone is cause for constant monitoring and interest in this problem.

The toxicity problem with propoxyphene is very real.

The Drug Enforcement Administration feels consideration should be given to several possible options in order to determine the best means of addressing the toxicity problem.

The petitions set forth two of these: Removal of propoxyphene from the market or placement in schedule II. The questions of medical usefulness of propoxyphene and the need for its continued marketing are determinations for HEW and the FDA, and DEA does not presume to venture into that area.

As to rescheduling, under the provisions of the CSA, DEA has moved into schedule II substances that we believe had a high popularity among abusers and which are available on the streets in significant quantities.

I just mentioned several of those. We will be looking for data of a similar nature, to determine whether propoxyphene meets schedule II criteria.