

Ryan Haight Act will Require Tighter Restrictions on Internet Pharmacies



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Photo: Ryan Haight died at 18 of a drug overdose in 2001 after he procured Vicodin over the Internet.

"I love you, Mom." Those were the last words Ryan Haight said to his mother as she kissed him goodnight on February 12, 2001. Haight -- a multi-sport athlete and an A student -- died at 18 of an overdose of a prescription drug he ordered over the Internet.

"Just the night before, we had dinner together after he came home from work at a nearby retail store. He used my Jacuzzi tub because he said his back bothered him from lifting things at work," his mother wrote on a Web site dedicated to the memory of people who died from prescription drug overdose.

"After one of his friends told us he got them off the Internet," Haight's mother continued, "we gave our computer to the DEA to investigate."

The DEA found that Haight had ordered Vicodin from a doctor he never saw and had it delivered by an Internet pharmacy.

"We also learned of Web sites on the Internet that have chat rooms that glorify the use of drugs and where sellers go to encourage our children to try them. Since Ryan's death we have found there are hundreds of Internet pharmacies selling prescription drugs," she said.

A 2004 study of prescription drug abuse in the United States found that 6.2 million Americans had abused prescription drugs with 2 million being dependent on that abuse.

To combat the problem, the U.S. Senate recently passed a bill that addresses the problems of how Haight could get Vicodin without ever seeing a doctor. The bill had already been passed by the House. It now heads to the president's desk for his signature.

The Ryan Haight Act provides several measures intended to verify the legitimacy of the medical need for a drug as well as the credentials of the pharmacy dispensing the medication. A doctor must conduct a face-to-face examination of a patient before dispensing medication for a legitimate medical condition. Pharmacies must post truthful information as to their physical location, the license numbers of their pharmacists and get an additional endorsement from the U.S. Drug Enforcement Agency in order to conduct business over the Internet, even if it has registered as a brick-and-mortar pharmacy. The Ryan Haight Act will also make it a crime to use the Internet to advertise the illegal sale of a controlled substance.

The act also makes it easier for states' attorneys general to prosecute violations of the act committed by online pharmacies outside their states. Additionally, penalties for violations of the act have been increased to up to 20 years in prison.

DEA acting Administrator Michele M. Leonhart hailed passage of the act. "Cyber-criminals illegally peddling controlled substances over the Internet have invaded households and threatened America's youth for far too long by supplying pharmaceuticals with a few clicks of a mouse and a credit card number," she said. "This landmark piece of legislation will bring rogue pharmacy operators out of the shadows by establishing a clear standard for legitimate online pharmaceutical sales. The legislation will allow customers to know they are doing business with a trusted, legitimate pharmacy, and give law enforcement the tools we need to identify illegitimate online pharmacies."

The act prohibits dispensing controlled substances via the Internet without a "valid prescription." For a prescription to be valid, it must be issued for a legitimate medical purpose in the usual course of professional practice, meaning that, with limited exceptions, a doctor must conduct at least one in-person medical evaluation of the patient.

This provision would address the primary harm caused by rogue Internet pharmacies: dispensing controlled substances on a large scale without a legitimate medical purpose. Rogue Internet pharmacies typically operate with active participation of an unscrupulous doctor who willingly issues prescriptions to "patients" throughout the country whom the doctor never sees and without a pre-existing bona fide doctor-patient relationship.

The act also requires an endorsement from the DEA before a pharmacy can dispense controlled substances via the Internet. This endorsement is in addition to the registration a pharmacy holds for its brick-and-mortar operation, and it allows law enforcement to clearly identify internet sites where controlled substances can be sold.

Rogue Internet pharmacies are generally supplied by DEA-registered brick-and-mortar pharmacies, according to the agency. Typically, these brick-and-mortar pharmacies have little or no walk-in customers and do most or all of their business online. In some instances, criminal organizations purchase legitimate "mom and pop" brick-and-mortar pharmacies, use them to supply to the operation for just a few months and then walk away with substantial cash.

Rather than try to block all online pharmaceutical sales, the Ryan Haight Act will put online pharmaceutical sales on an equal regulatory footing with those sales through a brick-and-mortar facility. The act requires an endorsement of an existing registration to allow existing pharmacies to sell controlled substances online. This means law enforcement will be able to carefully scrutinize all applications for such registration and be able to easily separate legitimate and illegitimate Internet operations.

The act will also enhance penalties for unlawfully dispensing controlled substances in Schedules III through V. A schedule is a category of drug defined in the Controlled Substances Act of 1974 and subject to regulation by the DEA. Vicodin, which Haight ordered over the Internet without seeing a doctor, is a Schedule III drug. Schedule III also includes ephedrine and Anabolic steroids. Schedule IV includes Xanax and Ambien and the anti-seizure medication Phenobarbital. Robitussin cough syrup is classified as a Schedule V drug.

Criminals are aware of the low penalties associated with Schedule III and Schedule IV substances, and they generally refrain from selling schedule II substances, according to the Drug Enforcement Administration. Schedule II drugs include cocaine, Ritalin and PCP. These changes to maximum penalties apply to all illegal distribution, not just those occurring over the Internet.

Another provision would give the Attorney General of each state the ability to bring a civil action in a federal district court to enjoin the actions of an online pharmacy operating in violation of its provisions. To bring such an action, the state would be required to have given the U.S. Attorney General prior written notice, giving the Attorney General the opportunity to intervene in the litigation.

This would help ensure that state and federal enforcement authorities can work in partnership with each other and that individual states are able to take effective enforcement action. Under current law, a state Attorney General's enforcement authority against an online pharmacy is limited to the geographic boundaries of that state, which causes significant challenges when a case involves illegal activity over the Internet.

While Haight's death at such a young age when he showed so much promise is tragic, what is even more so is that deaths like his are highly preventable. And while the bill that bears his name is a step in the right direction, it only addresses the supply side of the problem. Its provisions may provide consumers with enough information to give them pause about doing business with an Internet pharmacy; but for a person in such desperation he or she needs to procure drugs over the Internet that may not be enough. And criminals who set up shop online are likely not going to be given much pause either. Therefore, a thorough answer to the problem should be founded on educating people to the point where they don't even think to reach for drugs, even in the most desperate straights. Or at least consult a real physician -- not an Internet site.