



Home Brew

The Methamphetamine Epidemic in America

In the 1980s, cocaine was the drug of choice. In the 1990s, it was crack or heroin. Today, its Methamphetamine, commonly referred to as “speed,” “meth,” “chalk,” “ice,” “crystal,” “glass,” or “tina.” Methamphetamine is easy to manufacture, cheap, and highly addictive. In recent years, meth abuse has risen to epidemic proportions. This paper examines the destructive effects of this drug, the escalation in abuse, and current legislative proposals to combat the meth epidemic.

Background

Methamphetamine is a powerful stimulant that has detrimental affects on the brain and the central nervous system. It is derived from one of three chemicals: ephedrine, pseudoephedrine, or phenylpropanolamine, which “are common ingredients found in legitimate, safe, and effective nonprescription, or over-the-counter (OTC), medicines that are used by millions of consumers every day for relief from the symptoms caused by colds, allergies, and asthma”.¹ Although meth is related to amphetamines, its effects on the central nervous system are far greater.

The process for making methamphetamine is fairly simple, and many recipes for synthesizing meth are available on the Internet. According to the Drug Enforcement Administration (DEA), the majority of meth in the United States comes from “superlabs” located in California and Mexico.² Depending on a meth users tolerance and the substance’s potency, the average dose is approximately 5 milligrams.³ Superlabs are capable of producing 10 or more pounds of meth in less than 24 hours.⁴ These labs smuggle pseudoephedrine in bulk from Mexico and Canada to the United States and then synthesize it to produce methamphetamine. Meth is also produced in Small Toxic Labs (STLs). Unlike Superlabs, STLs yield a much smaller amount of meth and utilize over-the-counter cold medications containing pseudoephedrine, such as Sudafed, or Advil Cold and Sinus.

While meth is manufactured using household products, its synthesis produces toxic chemicals that pose great dangers for those who are near the location of a meth lab. For example, crystalline iodine can burn skin and irritate eyes, and the vapor from iodine crystals can also harm the respiratory system.

According to the DEA, between 2001 and 2004, there were over 60,000 domestic meth-related incidents. Meth investigation and seizure during this four year period experienced a 27%

¹ The Consumer Healthcare Products Association available at www.methwatch.com

² Simpson, Michael. *Methamphetamine Lab Clean-up and Remediation Issues*. Congressional Research Service, Library of Congress. 6/22/2005. page 3

³ Dudley, John. Drug Enforcement Agency. 10/18/2005. The average dose of meth can vary greatly depending on how addicted a meth abuser is, and how pure the substance is. 5 milligrams is an approximation for an early addict.

⁴ *Methamphetamine Fact Sheet*. Office of National Drug Control Policy. 8/15/2005
<http://www.whitehousedrugpolicy.gov/publications/factsht/methamph/>

increase in the number of cases.⁵ The 2003 National Survey on Drug Use and Health found that over 12 million Americans, approximately 5.2% of the population, have used methamphetamine at least once.

Effects

Methamphetamine is a powerful stimulant that targets the central nervous system, causing the release of dopamine in the brain. Dopamine is a chemical naturally produced by the brain that, in addition to its many other physiological effects, is commonly associated with a feeling of pleasure. Meth use causes increased wakefulness, a rise in physical activity, and decreased appetite.

In the short term, methamphetamine harms the brain, resulting in neuronal damage and a potentially lethal increase in body temperature. The long-term consequences of methamphetamine abuse are very dangerous, affecting not only the brain's architecture but also altering social behaviors. Meth abusers commonly experience periods of violent behavior, anxiety, confusion, insomnia, hallucination, and suicidal tendencies. Further, with long-term use, tolerance for methamphetamine can develop, causing the abuser to use meth more frequently and in higher doses. Other physical affects include what is commonly known as "meth mouth", severe periodontal damage to teeth and gums, causing users to lose most or all of their teeth.

Methamphetamine abuse also has both costly and dangerous environmental ramifications. Every pound of meth results in 5-6 pounds of toxic waste.⁶ After "superlabs" and STLs produce meth, the leftover chemical waste is buried or dumped into septic systems. This toxic waste is hazardous to those who live near meth labs, most of whom have no knowledge of their existence, including families with small children who live and play nearby. Law enforcement personnel are at risk when dealing with the toxic waste of meth production sites. Many first responders report respiratory and eye irritations, headaches, dizziness, nausea, and shortness of breath.⁷ The average cost of cleaning up a meth production site is approximately \$5,000 up to \$100,000.⁸

Present Regulations

The Controlled Substances Act (CSA), which is Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, establishes federal standards for drugs and other controlled substances. Considering several factors, such as the substance's medicinal value, harmfulness, and potential for abuse or addiction, the CSA categorizes all federally regulated substances into one of five schedules. Substances classified as Schedule I are the most dangerous drugs with no recognized medicinal use, while drugs that are less problematic are categorized as Schedule V. Meth has a high potential for abuse and is categorized as a Schedule II drug.

⁵ *Methamphetamine Fact Sheet*. Office of National Drug Control Policy. 8/15/2005
<http://www.whitehousedrugpolicy.gov/publications/factsht/methamph/>

⁶ *Drug Policy Information Clearinghouse Fact Sheet*. Office of National Drug Control Policy. 11/2003.
www.whitehousedrugpolicy.com

⁷ *Methamphetamine Fact Sheet*. Office of National Drug Control Policy. 8/15/2005.
<http://www.whitehousedrugpolicy.gov/publications/factsht/methamph/>

⁸ *The Methamphetamine Problem: Question and Answer Guide*. Instituted for Intergovernmental Research.
<http://www.iir.com/centf/guide.htm#How%20is%20methamphetamine%20used>

In 1988, CSA was amended to include provisions of the Chemical Diversion and Trafficking Act to target the manufacture of meth by regulating bulk ephedrine and pseudoephedrine transactions. However, the 1988 alterations created a loophole for over-the-counter ephedrine, pseudoephedrine, and phenylpropanolamine drug product sales, exempting them from record-keeping and reporting requirements. Such products include Alka-Seltzer Plus Cold, Advil Cold & Sinus, Sudafed, Triaminic Infant Oral Decongestant Drops, and Tylenol Cold.

In an effort to close this loophole, Congress adopted the Domestic Chemical Diversion Control Act of 1993. This act requires all importers, exporters, and distributors who handle controlled substances to keep records and register their transactions. However, the Domestic Chemical Diversion Control Act does not apply to drugs that include pseudoephedrine.

In 1996, the DEA implemented the Comprehensive Methamphetamine Control Act (MCA), which expanded previous controlled substances registrations and regulations to include those who distribute substances such as pseudoephedrine, which are used in meth production.

Proposed Legislation

Due to the escalation in meth abuse, the 109th Congress introduced numerous bills aimed at alleviating this problem through increased enforcement, regulation of the every-day substances used in the manufacture of meth, and increased education and prevention.⁹

Wednesday the House will vote on the *Methamphetamine Epidemic Elimination Act* (HR 3889), sponsored by Representative Mark Souder (IN-3). The provisions of HR 3889 include:

- **Domestic Regulation of Precursor Chemicals-** This provision amends the Controlled Substances Act to (1) reduce the retail threshold for the sale of products containing pseudoephedrine or phenylpropanolamine from 9 grams to 3.6 grams; (2) eliminate the "regulated transaction" exemption for any over-the-counter sale of such products (including blister packs) by retail distributors; (3) create a Schedule Listed Chemicals (SLC) designation and classify methamphetamine precursor chemicals as SLCs¹⁰ (4) require meth precursor chemicals to be sold behind-the-counter or in a lockbox¹¹ (5) grant authority to establish production quotas for pseudoephedrine or phenylpropanolamine; and (6) penalize violators of such quotas; (7) limit imports of ephedrine, pseudoephedrine, or phenylpropanolamine; and (8) strengthen the importer reporting requirements.
- **International Regulation of Precursor Chemicals-** This provision: (1) strengthens the reporting requirements for importers of meth precursors substances, forcing importers to file a full report with federal regulators; (2) increases the penalties for those countries who do not comply to meth precursors reporting standards; and (3)

⁹ *Solutions to Limit the Abuse of Methamphetamine (SLAM) Act* HR 3513; *Methamphetamine Abuse Prevention Act of 2005* HR 1446; *Combat Meth Act of 2005* HR 314; *Arrest Methamphetamine Act of 2005* HR 3324; *Methamphetamine Precursor Control Act of 2005* HR 1056; *Ephedrine Alkaloids Regulation Act of 2005* HR 1378; *Angie Fatino Save Our Children from Meth Act of 2005* HR 3568; *Methamphetamine Reduction Act of 2005* HR 1083; *Methamphetamine Epidemic Elimination Act* (HR 3889)

¹⁰ This provision was an amendment added in the Energy and Commerce mark-up on 11/15/2005

¹¹ Ibid.

requires the Bureau for International Narcotics and Law Enforcement (INL) to provide assistance to Mexico to combat methamphetamine production in the country.

- **Enhanced Criminal Penalties for Methamphetamine Production and Trafficking** – This provision: (1) imposes higher penalties on the production or trafficking of meth and its precursors; (2) establishes an additional penalty for those who misuse facilitated entry programs sponsored by the bureau of Customs and Border Protection; (3) requires an additional penalty for producers who use federal property as meth labs, such as parks or national forests; (4) decreases the amount of methamphetamine a person needs to possess in order to qualify as a leader of a drug trafficking ring (“king pin”) and (5) amends the Controlled Substances Act to impose life imprisonments sentences on “king pins”.
- **Enhanced Environmental Regulation of Methamphetamine By-Products** – This provision requires the Transportation Department and the Environmental Protection Agency to compile and report to relevant congressional committees on methamphetamine by-products and the status of their regulation as a hazardous waste or hazardous material under Federal law. This section also holds those who are convicted of meth production liable for any clean-up costs that are required.

Other bills introduced in the 109th Congress address defining meth as a Schedule V drug under the Controlled Substances Act, or establishing and funding local methamphetamine addiction treatment programs.

Conclusion

Methamphetamine is easy and cheap to make, contributing to a nation-wide epidemic. The recent trend in the United States of meth abuse has a detrimental effect on the people, communities, and environment where such behavior takes place. In the 109th Congress, numerous bills have been introduced regarding methamphetamine. The concentration of these legislative proposals vary from law enforcement to regulation on the sale of substances used in meth production. Regardless of the policy approach, methamphetamine abuse in America is a problem that must be addressed.