

September 14, 2012

Federal Trade Commission
Office of the Secretary
Room H-113(Annex X)
600 Pennsylvania Ave, NW
Washington, DC 20580

Re: Pet Medications Workshop, Project No. P12-1201

To Whom It May Concern:

I am writing to you regarding my opposition to HR 1406, the Fairness to Pet Owners Act of 2011. As a veterinarian, I am devoted to maintaining the health and well-being of my patients. This includes writing scripts when requested for pet medications which my clients can fill where they choose. However, I find it troubling that I regularly receive requests from online pharmacies, such as PetMeds Express for scripts that I have not written. These are typically for heartworm preventatives and NSAIDS, and are usually client requests made directly to the online pharmacies. For the past few months, I have been receiving requests from local pharmacies (Costco, Target, Walmart, Osco, Walgreens, CVS and Sams Club) for pet meds and nutritional supplements that I didn't script. It's not that I wouldn't, but my clients didn't request scripts from me. Now these pharmacies too are contacting me by phone and fax for authentication and verification of scripts that my clients didn't request from me. In addition to these requests, these pharmacies are asking for my NPI number (which I don't have) or DEA number (which I won't provide for non-controlled drugs. I was so concerned about use of my DEA number for general tracking such as this, that I contacted the DEA Diversion Control Division for clarity. As it was explained to me, there is not a national oversight mechanism for practitioners to use.

The prescription and fulfillment of medications for animals and the delivery of veterinary services are interwoven in the practice of veterinary medicine and should remain firmly under the authorization of veterinarians. Regarding the delivery of pet medications to the general pet owning public, the discussion is cheapened by the consideration of price alone. More important than price is the determination of Cost-to-Benefit. This is where I am left with more questions than I have answers.

- **What is the benefit to the consumer when the veterinarian and animal hospital staff's time is consumed in the administrative process of writing, processing, verifying and subsequently archiving unrequested scripts for pet medications?** These increased overhead costs coupled with the loss of in-clinic pharmacy sales will undoubtedly result in higher overall veterinary prices. The same will likely hold true on the human pharmacy side as well.
- **What is the benefit to the consumer when the pharmacist and pharmacy staff's time is consumed with handling scripts for animals for both human and veterinary drugs?**

- **How does the pet owner ultimately benefit from taking a script to a pharmacist who is unfamiliar with the indications for therapeutic use of human and veterinary drugs in animal species, the dosage by species, the interaction with other drugs, toxicity by species and contraindications for use?**
- **Does one expect that this additional time and effort spent on the part of the pharmacist validating pet scripts and dealing with the myriad of pet owner questions will not ultimately result in higher costs to the consumer?** These unintentioned consequences will not ultimately help pet owners or their pets.
- **What about the pharmacist being distracted from their true role, which is the delivery of human drugs to people?** There is already enough room for error in dosing human drugs for humans. As a consumer myself, I want my pharmacist to devote their time and talent to their job which is to ensure that my medications and those of my family members are filled accurately and safely. Since pharmacists lack the training in veterinary pharmacology, this poses an unnecessary risk to the pet owning public, and diverting the pharmacists time and attention away from their true mission of fulfilling scripts for people poses a risk to everyone relying on pharmacists to oversee their medications.
- **Who is ultimately liable for dosing errors?** If the comparison to the Fairness to Contact Lens Consumers Act is the guideline, though federally mandated, the States determine liability.

Regarding the comparison of HR 1406 to the Fairness to Contact Lens Consumers Act, I do not believe that medical devices such as contact lenses are comparable to medications. The key distinction is that medications can be lethal if not administered correctly, and thus require diligent oversight. Regarding pet medications, no one should doubt that a veterinarian is the most qualified and capable professional to oversee and administer medications to pets. Given the critical dosing issues involved with medicating the wide array of animal species, a very troubling aspect of the Fairness to Contact Lens Consumers Act is the 8 Hour, Passive Verification Rule which allows for automatic verification of a script in the event that the prescriber “fails to communicate with the seller within 8 business hours” after receiving a verification request. When dealing with medicating ill pets, a delay like this in dispensing medication may mean the difference between the life and death of the animal, and an error in dosing that gets automatically fulfilled could likewise result in under or overdosing an animal and subsequent harm.

Another major concern I have involves pharmacists counseling my clients outside the scope of their training. Most recently one of my clients sought after-hours advice on a Saturday from a local Walgreens pharmacist because he thought his dog was “straining” due to constipation. Instead of being advised that this was an urgent veterinary matter, he was told to give the dog mineral oil by mouth because this is what the pharmacist does for their own dog when it is constipated. Upon examination of the pet on Monday, I determined that the dog was not constipated, but was

straining to urinate and was unable to do so due to a complete blockage due to urinary stones. This dog came to me in critical condition and in acute kidney failure with subsequent loss of bladder function (atony). Instead of seeking the urgent care his dog needed, my client delayed because of the inappropriate and potentially deadly advice given to him by a pharmacist that he trusted. My patient could have died from being given mineral oil, as he was vomiting and could have easily aspirated the material into his lungs. My patient suffered needlessly and my client endured unnecessary cost from being ill advised. Though he went home yesterday, after weeks of hospitalization, the owner must now manually express this dog's bladder to help him void. This will go on until the dog regains his bladder control; if he ever does. Though far from well, my client is thankful that their dog survived this episode.

In all fairness to consumers, prescribing medications is much more than writing a script and filling medications is much more than counting them out. My role as a veterinarian involves verifying the need and appropriateness for use of pet medications, as well as counseling, educating and overseeing the process. As such, the responsibility for medicating pets should remain firmly in the hands of veterinarians, not big box stores and 3rd party suppliers, who are ill equipped to provide the vital information needed to protect the health and wellbeing of animals.

Respectfully submitted,

Shannon Greeley, DVM