



# NATIONWIDE CHILDREN'S<sup>®</sup>

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November 5, 2019

Testimony of Henry Spiller  
House Bill 29—Dextromethorphan Sales to Minors

Chairman Lipps, Vice Chair Manning, Ranking Member Boyd, and members of the House Health Committee, thank you for the opportunity to provide testimony today on House Bill 29. This legislation represents a simple, common sense solution to a problem that impacts thousands of teens each year.

My name is Henry Spiller and I am the director of the Central Ohio Poison Center at Nationwide Children's Hospital. I am Board Certified in Toxicology by the American Board of Applied Toxicology, an elected Fellow of the American Academy of Clinical Toxicology and an Assistant Professor at Ohio State University, College of Medicine. I have spent more than 30 years in the field of toxicology and childhood safety with more than 300 publications relating to toxicology.

Today I would like to offer my support for HB 29, which would prohibit children under the age of 18 from purchasing products that contain Dextromethorphan. I want to commend Representative Koehler for his willingness to take on this issue in both this General Assembly and last General Assembly. Let me first provide you with a little background on Dextromethorphan.

Dextromethorphan, or DXM, is a common ingredient in over-the-counter cough and cold products. Dextromethorphan is used as a non-addictive cough suppressant and, if used appropriately, is quite safe. However in recent years it has become a drug of abuse, increasingly used and abused by adolescents and young adults to get high. There are a number of alternative names it goes including "triple c's", robo, skittles, velvet syrup, and Vitamin D. DXM can also be used in combination with other drugs such as methylenedioxy methamphetamine, also called Molly or MDMA. Unfortunately, Dextromethorphan is widely available and is becoming very popular with adolescents and young adults. At the Central Ohio Poison Center we see on average 100 to 125 cases of abuse of dextromethorphan each year. The typical case is a high school age patient abusing an over-the-counter product arriving in the ER with confusion, hallucinations, agitation, rapid heart rate, and hypertension. Sometimes we also see vomiting and, in rare cases, seizures.

Let me now share with you some numbers that will help make this problem clearer. In Ohio, since 2000, the Poison Center has treated more than 2,000 patients for Dextromethorphan abuse. Of these cases more than 1,500 ended up being admitted to the emergency room; 1,288 of these cases were considered serious, with 2 fatalities reported. Serious cases were those patients with hallucinations, agitation, tachycardia (rapid heart rate), hypertension and seizures.



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Of the more than 2,000 cases handled by the Poison Center since 2,000, two-thirds (1606) were children between the ages of 13 and 18. Nationally, in 2014 there were more than 8,000 adolescent cases of DXM abuse reported to US poison centers, with an average of more than 15 cases per million population in the 15-19 year old age group.

Passage of HB 29 will make Ohio the 9th state to prohibit the sale of DXM products to minors. Nationally, we are already seeing the positive results of regulation in other states and increased consumer awareness. I strongly encourage the committee to support HB 29. Thank you for your time, and please feel free to contact me with questions.

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