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May 1, 2023

Dear Chairman Cutrona and members of the Health Provider Services Committee,

I write to express my concerns regarding House Bill 73 (The Dave and Angie Patient and Health Provider Protection Act). As you know, prescribers have long held and utilized the ability to prescribe medications for use that is beyond the FDA approved indication(s). Pharmacists have supported this practice and will continue to do so. That said, I believe there is an unintended counterproductive consequence of the legislation.

During the COVID-19 Pandemic, drugs such as hydroxychloroquine and ivermectin had perceived benefits against the virus. This causes a surge in use of these drugs. For background, drug manufacturers produce drugs in batches or lots. The equipment used to produce tablets of hydroxychloroquine, for example, may be used to produce another drug unrelated to the prior. Thus, production is not ongoing and is estimated from historic use until the next batch/lot is estimated to maintain that supply.

Hydroxychloroquine was originally used for the treatment of malaria. Today it is used mostly to treat lupus and rheumatoid arthritis. Production was historically based on these uses. When its possible benefit became known during COVID-19 pandemic, the prescribing and dispensing rate multiplied, and the supply became exhausted. Pharmacists had to make a choice, with limited inventory of the drug, between dispensing to existing patients with lupus and rheumatoid arthritis or dispensing to a new set of people under the proposed benefit related to COVID-19.

The issue was further amplified by a limited number of prescribers across the country who pandered to this new prophylactic use. Prescriptions were given for entire members of a family in quantities of months in duration en masse. This placed pharmacists in a difficult place of aiding patients with a painful if not crippling condition of either lupus and rheumatoid arthritis or dispensing to otherwise healthy individuals under this new use for COVID-19.

I very much doubt it is the sponsor's goal to cause harm to those currently under treatment with a given medication. Given the already strained supply chain of pharmaceutical production, I fear House Bill 73 would cause the exact opposite to which it intends. New ivermectin prescribing also caused a parallel ripple within the veterinary committee regarding the treatment of animals. Additionally, the costs of these medications increased significantly due to scarcity. I would only ask the Committee to consider such factors as it contemplates the impact of such legislation should it become law.

Most Respectfully,

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Executive Director
The Ohio Pharmacists Association