

The Honorable Jean Schmidt, Chair
Ohio House Health Committee
Statehouse
Columbus, OH 43215

Dear Chair Schmidt and members of the House Health Committee,
Thank you for this opportunity to provide written testimony on House Bill 324. As a third year medical student at the University of Toledo College of Medicine, I strongly oppose this bill.

First, 'severe adverse effects' is an extremely vague guideline. If we do not outline our exact meaning, different agencies might define 'severe adverse effects' differently. This could cause multiple reports giving conflicting evidence on which medications fit this definition. In this age of medical misinformation as well, untrustworthy and non reputable journals might be used for creating this guideline- even if intentional or not intentional by the policy writers. If we ban one medication under this bill, all other medications can come under attack due to any scientific literature being published, even if this publication is not the most conclusive or most reputable. Additionally, in this country we have a low scientific literacy rate. Labeling drugs under this bill might potentially cause patients to worry, stop their much needed medication, or even refuse life saving drugs. Overall, I worry that this bill could cause further restrictions on many medications due to the vagueness of the guideline.

Second, any reputable physician would ensure their patients are alerted of the side effects of any medication prescribed. Most physicians, and all of the amazing physicians I have worked with, know the power of the patient in their own medical care. A patient being aware of any side effect leads to better outcomes, since they can notice any changes within themselves and alert medical personnel. Additionally, this bill can create an inability of patients to receive life-saving and important medication. The need to have multiple appointments before prescribing a drug can make physician shortages and wait times even longer for other patients. These patients could even develop long lasting physical problems because they did not receive their medication; for example, if a patient is not on a diuretic when they are indicated to be on one, they can develop heart problems. Lastly, in Ohio we already have a registry for psychiatric controlled substances and opioids that tracks prescribing and distribution.

I am a born and raised Ohioan, and I would love to continue to live here and practice medicine in this great state. If this bill passes, I would worry about my future as a practicing physician in the state of Ohio. I worry that many needed medications will become under attack if this bill passes. If one medication comes under attack, what is stopping all medications from being put under scrutiny under this bill? Physicians and other medical personnel are extremely busy caring for patients, and having to defend every medication to the government is a tiresome and burdensome

task. I hope to have a long and lucrative career caring for the people of Ohio, and this bill threatens my future practice.

Thank you,
Savanna King, M3
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