

Healthcare Supply Chain Association (HSCA) Position:

Controlling narcotics use – particularly outpatient prescription opioid abuse – remains a public health priority that HSCA supports. However, hospitals and other healthcare providers are currently experiencing critical shortages of a number of injectable narcotics – including morphine, hydromorphone, and fentanyl – that are an essential element of treatment for post-surgical and medical pain management. Without the necessary injectable narcotics available, many medical procedures would have to be postponed or cancelled, jeopardizing the wellbeing of patients across the country.

Due to manufacturing delays, the primary manufacturer of some key injectable narcotics has been unable to produce the required quantities of these drugs. Other manufacturers who are willing to come to the table to produce these medications to help mitigate the shortages are unable to due to DEA aggregate production quotas (APQs). The DEA has begun to take steps by temporarily increasing quotas for one manufacturer, but more action is needed.

The DEA should take additional steps to adjust aggregate production quotas for select injectable narcotics in order to alleviate the ongoing drug shortages facing hospitals and the patients they serve.

Injectable Narcotic Shortages Threaten Patient Care

- ✓ Injectable narcotics are used for pain management and sedation, making them a critical component of treatment during and immediately after many operations. Hospitals and providers are currently experiencing injectable narcotic shortages, endangering patient care. **Absent the necessary injectable narcotics, numerous medical procedures would have to be canceled, endangering patient care nationwide.**
- ✓ **Narcotic shortages increase the risk of medication and dosing errors.** During shortages, medical personnel are forced to prescribe narcotics based on availability rather than effectiveness. Furthermore, proper dosages vary significantly between narcotics, increasing the likelihood of dosage errors and, in turn, adverse patient outcomes.

Additional Manufacturers are Unable to Produce the Medications Due to DEA Restrictions

- ✓ Because injectable narcotics are controlled substances, the DEA has limits on how much can be sold. In response to the nation's opioid epidemic, the DEA has reduced the aggregate production quotas (APQs) for morphine, hydromorphone, and fentanyl by 25% in 2017 and 20% in 2018. Although reducing quotas for non-injectable narcotics is appropriate, reducing quotas for injectable narcotics is not.
- ✓ Due to manufacturing delays, the primary manufacturer of key injectable narcotics has been unable to produce the drugs. The DEA has temporarily adjusted allocations for another manufacturer, but **additional manufacturers who are willing to produce the medications are still unable to do so due to the DEA's current aggregate production quota limits.**

The DEA should take additional steps to temporarily adjust aggregate production quotas (APQ) for select narcotics in order to alleviate the ongoing drug shortages facing our nation

- ✓ Unlike other drug shortages, shortages regarding injectable narcotics cannot be mitigated through additional manufacturers unless the DEA adjusts the aggregate production quotas. If the necessary steps aren't taken, quality of care provided will decline as patients will be prescribed less effective treatments, and patient access to care will be restricted as numerous operations and procedures will have to be postponed or canceled.
- ✓ Although controlling narcotics use—particularly outpatient prescription opioid abuse—remains a public health priority, injectable narcotics are a medical necessity for hospitals providing post-surgical and medical pain management. **The DEA should temporarily revise aggregate production quotas for certain injectable narcotics** to allow additional manufacturers to produce the necessary medications to ease the current shortages affecting hospital and provider systems nationwide.