

# LI support for state Rx drug tracking plan

By Kathleen Kerr



Long Island pharmacists and physicians who specialize in pain management welcomed the State Legislature's agreement last week on a new electronic system for tracking narcotics prescriptions as they are written and filled. But some said it could be unwieldy and might lead some doctors to refrain from prescribing controlled substances for patients who really need them.

The plan calls for doctors and pharmacists to use an electronic database when prescribing and filling prescriptions for controlled substances in an effort to cut down on the abuse of such drugs.

Dr. Neil Kirschen, chief of pain management at South Nassau Communities Hospital in Oceanside, said the new system could be "a lot more work," especially for doctors accustomed to whipping out paper prescription pads instead of using computers. But Kirschen said it will be worth it.

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"Patients who are seeking medications, oftentimes, they are going to multiple providers," Kirschen said. "We need to know

that they got a prescription yesterday."

In the end, he said, "It'll save us work later on with patients who shouldn't have received a prescription from us. It's a good step in the right direction."

Republican and Democratic legislative leaders in Albany have agreed on the drug tracking plan, but rank-and-file lawmakers must still approve it before they

adjourn June 21. Under the plan, physicians must enter prescriptions for controlled substances such as hydrocodone and oxycodone into a state database as they prescribe them. And pharmacists must enter information into the database as they fill narcotics prescriptions.

Dr. John Di Capua, senior vice president of anesthesiology services for the North Shore-LIJ Health System, acknowledged the need for improved tracking, but said the state must assure doctors they will not be penalized if they show up often in the database because they regularly treat people in need of pain medication -- such as cancer patients.

"The goals of the program sound wonderful," Di Capua said, but noted that a fear of appearing too often in the database and possibly attracting legal scrutiny could "create unnecessary anxiety among the best of practitioners who are trying to do the best for their patients."

The new system, Di Capua said, could "drive the medical community to fear the process and not write the prescriptions" when they are needed.

Pharmacists at several drugstores in

Nassau and Suffolk said the legislature's plan could help crack down on narcotics abuse and over-prescription.

At Dale Drug in Valley Stream, pharmacist Robert DeVivo said even if the plan causes initial inconveniences, "electronic tracking on both ends is the proper way to do it. It's better than anything that's going on now."

DeVivo said he's willing "to work a little harder" if the new system can cut down on the number of prescription drug abusers.

"At the store, we have to be apprehensive for filling prescriptions for people we don't know," DeVivo said. "The problem is not small."

A report by Attorney General Eric Schneiderman earlier this year found that prescriptions for oxycodone have skyrocketed "an astonishing 82 percent" across New York from 2007 to 2010, with admissions to hospitals and drug-related deaths rising correspondingly.

Pharmacist Nick Simone at Village Pharmacy in Babylon said that while he was not familiar with the details of the plan, he supports the tracking of narcotics prescriptions from the time they are written.

"This is a huge move," Simone said. "You prevent a lot of the abuse of these drugs by people going from pharmacist to pharmacist and doctor to doctor. The system will be a bit more time consuming but it's time well spent."

And at Beacon Pharmacy in Port Washington, pharmacist Iman Bishara said, "It's a very good idea. I get so many prescriptions for controlled narcotics for the same patient from different doctors. If it's a valid prescription I have to fill it."