



Big-government addicts can't solve the meth problem

By Jim Waters

While the Kentucky Senate did pass meaningful legislation dealing with school choice, tax reform and state sovereignty during the first week of this year's General Assembly session, there was still too much of business-as-usual activity in Frankfort.

There's no better example of this than [a bill](#) filed by [Rep. Linda Belcher](#), D-Shepherdsville, which mirrors [similar legislation](#) filed by [Sen. Tom Jensen](#), R-London, requiring prescriptions for cold medicines simply because some have ingredients used to make methamphetamine.

Such sensational bills allows politicians to feign doing something meaningful while avoiding real action on tough issues such as the state's \$31 billion unfunded pension liability. But let's face it – dealing with complex and politically difficult pension issues doesn't garner near as many warm fuzzies as, say, fighting a politically correct and popular, if losing, drug war.

Meth is a big problem in Kentucky. In 2009, the commonwealth ranked third in the nation in the rate of meth-lab incidents behind Missouri and Indiana. More than 1,000 meth labs and dumpsites were found in 2010 and more than 4,000 have been discovered since 2000.

It's also dangerous, involving combustible ingredients that explode and destroy.

These statistics and incidents get the lion's share of attention. But what often goes unreported is the fact that most of the meth-making operations involve a relatively small number of people in concentrated areas.

The U.S. Department of Justice reports that nearly half of meth-making operations in Kentucky were concentrated in six counties while 14 counties accounted for more than 70 percent of reported sites. In fact, 44 counties reported no meth activity at all.

Yet, Belcher wants to force all law-abiding citizens to ante up not only the money for a prescription, but a trip to the doctor's office too – just to get a simple, useful and effective cold medicine.

It's not the first time that Kentucky has tried to legislate a solution to the meth problem. During the past decade, several laws and regulations have been enacted to deal with anhydrous ammonia, also a key meth ingredient.

"We made that difficult to get – and that was going to stop the manufacture of meth in Kentucky," said Rep. Bill Farmer, R-Lexington, on [a recent "Kentucky Tonight" show](#) on the issue. "Well, it didn't work."

Farmer also pointed out that past attempts to deal with other drug-making activity didn't work either. When OxyContin became more difficult to get, there were pain clinics popping up all over the state. If Belcher's bill passes, expect allergy "clinics" to suddenly appear – involving more individuals in the illegal drug trade and making addicted criminals more dangerous as they become increasingly determined to do whatever it takes to access ingredients.

In recent years, legislation has capped the amount of pseudoephedrine an individual can purchase in a month's time and instituted a tracking system that makes the names of those purchasing large amounts of the drug immediately available to law-enforcement officials.

Belcher's proposal is a perfect example of government overkill that not only fails to effectively address the problem, but can make it worse. Making these prescription-only drugs would prohibit law-enforcement from using the current tracking system, which blocked sales of 10,000 grams of meth ingredients each month.

Maj. Tony King of the Jefferson County Sheriff's Office told the "Kentucky Tonight" audience that the best way to fight meth in Kentucky "is going to be (to) continually educate the public – the potential meth abusers – about the dangers of methamphetamine. If we don't have a market, we won't have labs."

Meth is certainly addictive and dangerous. But sometimes I wonder if we don't have the equivalent in lawmaking – politicians addicted to the idea that government can control every single thing. That could be dangerous, too.

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