

Leo J. Trich

July 10, 1989

Let me take this opportunity to thank the distinguished members of the Judiciary Committee for consenting to hold a public hearing on this important issue, and for permitting me the opportunity to testify in behalf of HB 855. The concerns addressed in this legislation are real, and the need for tighter controls, relative to the abuses of anabolic steroids, in my estimation (as well as nearly 70 of my House colleagues) is also real.

For the record, and as a means of insuring that my background warrants my interest in this legislation, for nearly fifteen years, I was personally involved in amateur youth sports. From 1971 through 1986, I served as a national administrator with the PONY BASEBALL program. From 1980 through 1986, similar responsibilities also included my position as Vice President of the U.S. Baseball Federation. Additionally, from 1980 through and including the Los Angeles summer games of 1984, I served as a member of the U.S. Olympic Committee.

Realizing that the problem of mis-using anabolic steroids goes beyond the headlines of professional and olympic class athletes, studies show that these drugs are now getting into the hands of young amateur athletes - even at the junior high level. A recent Penn State study shows that between 6 and 8% of the male athletes polled have used steroids. A 3% figure of 8th and 9th graders was also reported, with 12th graders admitting to the highest rate, or 8%. Female use is substantially lower but, unfortunately, even their use is on the increase. In total a conservative estimate shows that nearly a half million high school students have used, or continue to use, steroids.

Young people see the use of anabolic steroids as a means by which they can quickly become faster, stronger and athletically better. Some coaching staffs and others in leadership positions have

encouraged that concept. Unfortunately, what has not been stressed are the adverse effects of these drugs when mis - used. Liver disorders, blood disorders, temporary and in some cases permanent infertility, as well as heart damage are but a few of the problems associated with the side effects of steroids.

The Penn State report went on to say that of those who admitted using these drugs, 38% said they did so for the first time at age 15 or younger. Nearly half of these users (44%), indicated that they used more than one drug at the same time - something they referred to as "stacking". Thirty-eight percent stated that they had administered the drugs orally and by injection.

The largest percentage of users (47%) did so because they felt it would enhance athletic performance. "Appearance" was selected as the main reason by 26% of the user group. And, although not accepted as a medical practice in this country, 11% said they took anabolic steroids for injury prevention or treatment.

While it was reported that nearly 60% of these drugs were obtained from "other athletes", coaches, trainers etc., more than 20% or one-fifth listed their primary source as a health care professional (ie; physician, pharmacist or veterinarian)

To address this problem, it was my intent to deal with anabolic steroids in a realistic, defined manner. Having them placed in a Schedule II "controlled substance" status is indeed justifiable. With research help from support staff in Harrisburg, it was found that at least 10 other states have seen fit to deal with this growing problem. It was my objective to look at those sister states and their legislation, and to use their findings as a guide - to take the "best of all worlds", so to speak.

With that accomplished, HB 855 was developed and assigned to your

are attached for the record) and were acceptable to me as prime sponsor. On June 13th, I announced yet another amendment dealing with one of the 20 items previously listed in the bill, known as the Human Growth Hormone.

Let me paraphrase from that memo, sent to Committee members, for the purpose of entering it into today's records:

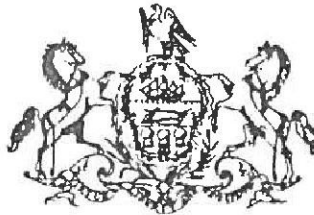
It should be noted that the PA Medical Society, in a letter copy sent to my office on April 24, 1989, indicated support of HB 855 with only a few reservations. Again let me paraphrase:

Others will testify in behalf of this bill, many for, and perhaps some against. The request that I made of this committee to hold a public hearing, was two fold. One, to gain additional input so that various aspects of this issue could be looked at; all in an effort to fine tune this legislation. That, I am confident will take place. The second part of my request dealt with the hope that additional publicity would bring to light the critical problem that exists. Moms and dads, who consider themselves well-meaning and in some instances assist Bobby or Susan in gaining access to anabolic steroids (all in the hope of seeing their child achieve a college athletic scholarship and perhaps a pro-career), need to know that harm can, and is being done, to their children.

Practitioners must also realize the long term negative effects of their liberal distribution of anabolic steroids. Publicity from this hearing and future projects "to get the story told" will help make that happen.

Thank you again for your time and favorable consideration.

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House of Representatives
COMMONWEALTH OF PENNSYLVANIA
HARRISBURG

June 13, 1989

M E M O

SUBJECT: HB 855 (Making anabolic steroids a controlled substance)

TO: Judiciary Committee Members

FROM: Rep. Leo Trich, Jr. *LOT*

This communique is merely to update you relative to HB 855. Concerns have been expressed to my office and that of Chairman Caltagirone's regarding a specific drug named in the bill - Human Growth Hormone (HGH).

Since presenting this bill to your committee, I have held four different meetings with various professionals (medical, drug manufacturers, etc.) concerning human growth hormones. I have found this drug to be very much in control at present. Only a limited number of doctors are permitted to prescribe HGH and it can only be obtained through two (2) drug manufacturers. The drug itself is not a steroid, and is neither chemically or functionally related to anabolic steroids.

Based in large part on the above information, and in that the use of HGH is primarily used for children with severe growth disorders (dwarfism), it is my intention to amend HB 855 by eliminating "human growth hormone" from the list of steroids proposed for schedule II classification.

The attached letters have been sent to those who have made their concerns known to me. As you can see, one is geared towards parents of children who rely on HGH and the other is directed towards professional health groups and universities.

Of the information received to date, 90% is running in support of the bill, with nearly all negatives dealing with the HGH issue. One letter voiced concern with placing too strict a limitation on Ergot Alkaloids, and one other questioned the affect (if any) it would have on research facilities and their accessibility to steroids.

April 21, 1989

Honorable Nicholas Moehlmann
House Post Office
Main Capitol Building
Harrisburg, PA 17120

Dear Representative Moehlmann:

I am writing in response to your request for the position of the Pennsylvania Medical Society on House Bill 855. This legislation would include anabolic steroids as a Schedule II controlled substance in recognition that it is a substance with a high potential for abuse. The Society agrees with this assessment and has a policy position supporting legislation to "classify anabolic steroids as a controlled substance." The Society believes that the requirements for recording distribution of controlled substances and the severe penalties are appropriate with regard to anabolic steroids.

With regard to the provisions of House Bill 855, we would suggest that the language on page 3, lines 25 through 27, regarding possession by "any person other than a practitioner, pharmacist or manufacturer" be revised. Specifically the prohibition against possession of "twenty-five labels or three 2 cc bottles" is relatively liberal and very unclear.

The Society has reviewed other legislation which would prohibit the use of anabolic steroids by high school athletes. Although we can support the intent of those proposals, you should be aware that there are valid clinical applications of this substance which for medical reasons may benefit those athletes. The Society believes that House Bill 855 should be enacted into law, unless the Secretary of Health utilizes regulatory authority to classify anabolic steroids as controlled substances.

Sincerely,

Gerald L. Andriole, MD
President

1568Dss

cc: Honorable Thomas Caltagirone, Chairman
House Judiciary Committee
House Judiciary Committee Members
✓ Honorable Leo Trich
Honorable N. Mark Richards, MD

APR 24 1989

HOUSE BILL 855
PRINTER'S NUMBER 973

Rep. Moehlmann Amendment

Amend page 3, line 26 by striking "practitioner, pharmacist or a manufacturer," and inserting:

registrant

Amend page 3, line 27 by striking "labels" and inserting:

or more doses

Amend page 3, line 27 by striking "2cc bottles" and inserting:

or more trade packages

Amend page 3, line 27 by inserting before the "period:"

listed in subsection (vi)