

111TH CONGRESS
1ST SESSION

S. 450

To understand and comprehensively address the oral health problems
associated with methamphetamine use.

IN THE SENATE OF THE UNITED STATES

FEBRUARY 13, 2009

Mr. BAUCUS (for himself, Ms. STABENOW, Mr. TESTER, Mr. CONRAD, Mr. JOHNSON, and Mr. SCHUMER) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To understand and comprehensively address the oral health
problems associated with methamphetamine use.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; PURPOSES.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Meth Mouth Prevention and Community Recovery Act”.

6 (b) PURPOSES.—The purposes of this Act are—

7 (1) to investigate and report on all aspects of
8 meth mouth, including its causes, public health im-

1 pact, innovative models for its prevention, and new
 2 and improved methods for its treatment;

3 (2) to ensure dentists and allied dental per-
 4 sonnel are able to recognize the signs of substance
 5 abuse in their patients, discuss the nature of addic-
 6 tion as it relates to oral health and dental care, and
 7 facilitate appropriate help for patients (and family
 8 members of patients) who are affected by a sub-
 9 stance use disorder;

10 (3) to determine whether, how, and to what de-
 11 gree educating youth about meth mouth is an effec-
 12 tive strategy for preventing or reducing the preva-
 13 lence of methamphetamine use; and

14 (4) to underscore the many ways that dentists
 15 and other oral health professionals can contribute to
 16 the general health of their patients, their commu-
 17 nities, and the country as a whole.

18 **SEC. 2. TABLE OF CONTENTS.**

19 The table of contents for this Act is as follows:

- Sec. 1. Short title; purposes.
- Sec. 2. Table of contents.

TITLE I—EVIDENCE-BASED PREVENTION

- Sec. 101. Findings; purpose; definitions.
- Sec. 102. Methamphetamine prevention demonstration projects.
- Sec. 103. Education for American Indian and Alaska native children.
- Sec. 104. Authorization of appropriations.

TITLE II—METH MOUTH RESEARCH INVESTMENT ACT

- Sec. 201. Findings; purpose; definitions.
- Sec. 202. Research on substance abuse, oral health, and dental care.
- Sec. 203. Study of methamphetamine-related oral health costs.

Sec. 301. Findings; purpose; definitions.
Sec. 302. Substance abuse training for dental professionals.
Sec. 303. Authorization of appropriations.

3 SEC. 101. FINDINGS; PURPOSE; DEFINITIONS.

(1) According to the Substance Abuse and Mental Health Services Administration, first-time methamphetamine use is most likely to occur between the ages of 18 and 25. Prevention efforts must therefore begin during the teen years.

(2) Most young people do not realize that methamphetamine use can quickly leave their teeth blackened, stained, rotting, and crumbling or falling apart and that the treatment options are often limited.

(3) By educating youth about meth mouth, oral health advocates can play a substantial role in helping to prevent first-time methamphetamine use.

(b) PURPOSE.—The purpose of this title is to provide for a number of projects to evaluate whether, how, and to what degree educating youth about meth mouth is an effective strategy for preventing or reducing methamphetamine use.

22 (c) DEFINITIONS.—In this title:

1 (1) ANTI-DRUG COALITION.—The term “anti-
2 drug coalition” has the meaning given to the term
3 “eligible coalition” in section 1023 of the National
4 Narcotics Leadership Act of 1988 (21 U.S.C. 1523).

5 (2) DENTAL ORGANIZATION.—The term “dental
6 organization” means a group of persons organized to
7 represent the art and science of dentistry or who are
8 otherwise associated for the primary purpose of ad-
9 vancing the public’s oral health.

10 (3) DIRECTOR.—The term “Director” means
11 the Director of the Center for Substance Abuse Pre-
12 vention.

13 (4) ELEMENTARY SCHOOL; SECONDARY
14 SCHOOL.—The terms “elementary school” and “sec-
15 ondary school” have the meanings given to such
16 terms in section 9101 of the Elementary and Sec-
17 ondary Education Act of 1965 (20 U.S.C. 7801).

18 (5) INDIAN; INDIAN TRIBE; TRIBAL ORGANIZA-
19 TION.—The terms “Indian”, “Indian tribe”, and
20 “tribal organization” have the meanings given to
21 such terms in section 4 of the Indian Self-Deter-
22 mination and Education Assistance Act (25 U.S.C.
23 450b).

24 (6) METH MOUTH.—The term “meth mouth”
25 means a distinct and often severe pattern of oral

(7) SUBSTANCE USE DISORDER.—The term “substance use disorder” means any harmful pattern of alcohol or drug use that leads to clinically significant impairment in physical, psychological, interpersonal, or vocational functioning.

8 (8) YOUTH.—The term “youth” has the mean-
9 ing given to such term in section 1023 of the Na-
10 tional Narcotics Leadership Act of 1988 (21 U.S.C.
11 1523).

12 SEC. 102. METHAMPHETAMINE PREVENTION DEMONSTRATION
13 TION PROJECTS.

(a) IN GENERAL.—In carrying out section 519E of the Public Health Service Act (42 U.S.C. 290bb–25e), the Director of the Center for Substance Abuse Prevention shall make grants to public and private nonprofit entities to enable such entities to determine whether, how, and to what degree educating youth about meth mouth is an effective strategy for preventing or reducing methamphetamine use.

22 (b) USE OF FUNDS.—

(1) MANDATORY USES.—Amounts awarded under this title shall be used for projects that focus

on, or include specific information about, the oral health risks associated with methamphetamine use.

(2) AUTHORIZED USES.—Amounts awarded under this title may be used—

(A) to develop or acquire instructional aids to enhance the teaching and learning process (including audiovisual items, computer-based multimedia, supplemental print material, and similar resources);

(B) to develop or acquire promotional items to be used for display or distribution on school campuses (including posters, flyers, brochures, pamphlets, message-based apparel, buttons, stickers, and similar items);

(C) to facilitate or directly furnish school-based instruction concerning the oral health risks associated with methamphetamine use;

(D) to train State and local health officials, health professionals, members of anti-drug coalitions, parents, and others how to carry messages about the oral health risks associated with methamphetamine use to youth; and

(E) to support other activities deemed appropriate by the Director.

(c) GRANT ELIGIBILITY.—

1 (1) APPLICATION.—To be eligible for grants
2 under this title, an entity shall prepare and submit
3 an application at such time, in such manner, and
4 containing such information as the Director may
5 reasonably require.

6 (2) CONTENTS.—Each application submitted
7 pursuant to paragraph (1) shall include—

8 (A) a description of the objectives to be at-
9 tained;

10 (B) a description of the manner in which
11 the grant funds will be used; and

12 (C) a plan for evaluating the project's suc-
13 cess using methods that are evidence-based.

14 (3) PREFERENCE.—In awarding grants under
15 this title, the Director shall give preference to appli-
16 cants that intend to—

17 (A) collaborate with one or more dental or-
18 ganizations;

19 (B) partner with one or more anti-drug
20 coalitions; and

21 (C) coordinate their activities with one or
22 more national, State, or local methamphetamine
23 prevention campaigns or oral health promotion
24 initiatives.

25 (d) LIMITATIONS.—

1 (1) GRANT AMOUNTS.—The amount of an
2 award under this title may not exceed \$50,000 per
3 grantee.

4 (2) DURATION.—The Director shall award
5 grants under this title for a period not to exceed 3
6 years.

7 (e) EVALUATION AND DISSEMINATION.—The Direc-
8 tor shall collect and widely disseminate information about
9 the effectiveness of the demonstration projects assisted
10 under this title.

11 **SEC. 103. EDUCATION FOR AMERICAN INDIAN AND ALASKA**
12 **NATIVE CHILDREN.**

13 Not less than 5 percent of the funds appropriated
14 pursuant to section 104 for a fiscal year shall be awarded
15 to Indian tribes and tribal organizations for the purpose
16 of educating Indian youth about the oral health risks asso-
17 ciated with methamphetamine use.

18 **SEC. 104. AUTHORIZATION OF APPROPRIATIONS.**

19 There are authorized to be appropriated for the pur-
20 pose of carrying out this title \$1,000,000 for each of fiscal
21 years 2010 through 2012. Amounts authorized to be ap-
22 propriated under this section are in addition to any other
23 amounts authorized to be appropriated for such purpose.

TITLE II—METH MOUTH RESEARCH INVESTMENT ACT

SEC. 201. FINDINGS; PURPOSE; DEFINITIONS.

(a) FINDINGS.—The Congress finds as follows:

(1) As the number of regular methamphetamine users has increased, so has a peculiar set of dental problems linked to the drug. The condition (known as “meth mouth”) develops rapidly and is attributed to the drug’s acidic nature, its ability to dry the mouth, the tendency of users to grind and clench their teeth, and a drug-induced craving for sugar-laden soft drinks.

(2) Meth mouth is regarded by many as an anecdotal phenomenon. Few peer-reviewed studies have been published that examine its causes, its physical effects, its prevalence, or its public health costs.

(3) Enhanced research would help to identify the prevalence and scope of meth mouth. Such research would also help determine how substances of abuse can damage the teeth and other oral tissues, and offer the possibility of developing new and improved prevention, harm-reduction, and cost management strategies.

(b) PURPOSE.—The purpose of this title is to provide for enhanced research examining all aspects of meth

1 mouth, including its causes, its public health impact, inno-
 2 vative models for its prevention, and new and improved
 3 methods for its treatment.

4 (c) DEFINITIONS.—In this title:

5 (1) CLINICAL RESEARCH; HEALTH SERVICES
 6 RESEARCH.—The terms “clinical research” and
 7 “health services research” shall have the meanings
 8 given to such terms in section 409 of the Public
 9 Health Service Act (42 U.S.C. 284d).

10 (2) INDIAN; INDIAN TRIBE; TRIBAL ORGANIZA-
 11 TION.—The terms “Indian”, “Indian tribe”, and
 12 “tribal organization” shall have the meanings given
 13 to such terms in section 4 of the Indian Self-Deter-
 14 mination and Education Assistance Act (25 U.S.C.
 15 450b).

16 (3) METH MOUTH.—The term “meth mouth”
 17 means a distinct and often severe pattern of oral
 18 decay that is commonly associated with meth-
 19 amphetamine use.

20 (4) PUBLIC HEALTH RESEARCH.—The term
 21 “public health research” means research that fo-
 22 cuses on population-based health measures.

23 (5) SECRETARY.—The term “Secretary” means
 24 the Secretary of Health and Human Services.

1 (6) SUBSTANCE USE DISORDER.—The term
 2 “substance use disorder” means any harmful pat-
 3 tern of alcohol or drug use that leads to clinically
 4 significant impairment in physical, psychological,
 5 interpersonal, or vocational functioning.

6 **SEC. 202. RESEARCH ON SUBSTANCE ABUSE, ORAL**
 7 **HEALTH, AND DENTAL CARE.**

8 (a) EXPANSION OF ACTIVITY.—In carrying out part
 9 A of title III of the Public Health Service Act (42 U.S.C.
 10 241 et seq.), the Secretary shall expand and intensify the
 11 clinical research, health services research, and public
 12 health research on associations between substance use dis-
 13 orders, oral health, and the provision of dental care.

14 (b) ADMINISTRATION.—In carrying out subsection
 15 (a), the Secretary—

16 (1) may enter into contracts or agreements with
 17 other Federal agencies, including interagency agree-
 18 ments, to delegate authority for the execution of
 19 grants and for such other activities as may be nec-
 20 essary to carry out this section;

21 (2) may carry out this section directly or
 22 through grants or cooperative agreements with
 23 State, local, and territorial units of government, In-
 24 dian tribes, and tribal organizations, or other public
 25 or nonprofit private entities; and

1 (3) may request and use such information,
2 data, and reports from any Federal, State, local, or
3 private entity as may be required to carry out this
4 section, with the consent of such entity.

5 **SEC. 203. STUDY OF METHAMPHETAMINE-RELATED ORAL**
6 **HEALTH COSTS.**

7 (a) IN GENERAL.—In carrying out section 202, the
8 Secretary shall conduct a study to determine whether,
9 how, and to what degree methamphetamine use affects the
10 demand for (and provision of) dental care. The study shall
11 account for both genders, all racial and ethnic groups (and
12 subgroups), and persons of all ages and from all geo-
13 graphic areas as appropriate for the scientific goals of the
14 research.

15 (b) REPORT.—Not later than 1 year after the date
16 of enactment of this Act, the Secretary shall publish a spe-
17 cial report detailing the results of the study described in
18 subsection (a), with findings that address—

19 (1) the prevalence and severity of oral health
20 problems believed to be associated with methamphet-
21 amine use;

22 (2) the criteria most commonly used to deter-
23 mine whether a patient’s oral health problems are
24 associated with methamphetamine use;

1 (3) the therapies most commonly used to treat
2 patients with meth mouth;

3 (4) the clinical prognosis for patients who re-
4 ceived care for meth mouth; and

5 (5) the financial impact of meth mouth on pub-
6 licly financed dental programs.

7 **SEC. 204. AUTHORIZATION OF APPROPRIATIONS.**

8 There are authorized to be appropriated for the pur-
9 pose of carrying out this title, \$200,000 for each of fiscal
10 years 2010 through 2012. Amounts authorized to be ap-
11 propriated under this section are in addition to any other
12 amounts authorized to be appropriated for such purpose.

13 **TITLE III—SUBSTANCE ABUSE**
14 **EDUCATION FOR DENTAL**
15 **PROFESSIONALS**

16 **SEC. 301. FINDINGS; PURPOSE; DEFINITIONS.**

17 (a) FINDINGS.—The Congress finds as follows:

18 (1) The use of certain therapeutic agents in
19 dental treatment can jeopardize the health and af-
20 fect the relapse potential of patients with substance
21 use disorders.

22 (2) Screening patients for substance abuse is
23 not a common practice among dentists, according to
24 several peer-reviewed articles published in the “Jour-
25 nal of the American Dental Association”. Limited

1 time, inadequate training, and the potential for
2 alienating patients are among the reasons often
3 cited.

4 (3) Dentists receive little formal education and
5 training in screening patients for substance abuse,
6 discussing the nature of addiction as it relates to
7 oral health and dental care, and facilitating appro-
8 priate help for patients, and family members of pa-
9 tients, who are affected by a substance use disorder.

10 (4) The American Dental Association maintains
11 that dentists should be knowledgeable about sub-
12 stance use disorders in order to safely administer
13 and prescribe controlled substances and other medi-
14 cations. The American Dental Association further
15 recommends that dentists become familiar with their
16 community's substance abuse treatment resources
17 and be able to make referrals when indicated.

18 (5) Training can greatly increase the degree to
19 which dentists, allied dental personnel, and other
20 health professionals can screen patients for sub-
21 stance abuse, discuss the nature of addiction as it
22 relates to oral health and dental care, and facilitate
23 appropriate help for patients, and family members of
24 patients, who are affected by a substance use dis-
25 order.

1 (b) PURPOSE.—The purpose of this title is to provide
2 for enhanced training and technical assistance to ensure
3 that dentists and allied dental personnel are able to recog-
4 nize the signs of substance abuse in their patients, discuss
5 the nature of addiction as it relates to oral health and
6 dental care, and facilitate appropriate help for patients,
7 and family members of patients, who are affected by a
8 substance use disorder.

9 (c) DEFINITIONS.—For the purposes of this title:

10 (1) ALLIED DENTAL PERSONNEL.—The term
11 “allied dental personnel” means individuals who as-
12 sist the dentist in the provision of oral health care
13 services to patients, including dental assistants, den-
14 tal hygienists, and dental laboratory technicians who
15 are employed in dental offices or other patient care
16 facilities.

17 (2) CONTINUING EDUCATION.—The term “con-
18 tinuing education” means extracurricular learning
19 activities (including classes, lecture series, con-
20 ferences, workshops, seminars, correspondence
21 courses, and other programs) whose purpose is to in-
22 corporate the latest advances in science, clinical, and
23 professional knowledge into the practice of health
24 care (and whose completion is often a condition of
25 professional licensing).

1 (3) CONTINUING EDUCATION CREDIT.—The
 2 term “continuing education credit” means a unit of
 3 study that is used to officially certify or recognize
 4 the successful completion of an activity that is con-
 5 sistent with professional standards for continuing
 6 education.

7 **SEC. 302. SUBSTANCE ABUSE TRAINING FOR DENTAL PRO-**
 8 **FSSIONALS.**

9 (a) IN GENERAL.—In carrying out title V of the Pub-
 10 lic Health Service Act (42 U.S.C. 290 et seq.), the Admin-
 11 istrator of the Substance Abuse and Mental Health Serv-
 12 ices Administration shall support training and offer tech-
 13 nical assistance to ensure that dentists and allied dental
 14 personnel are prepared to—

15 (1) recognize signs of alcohol or drug addiction
 16 in their patients and the family members of their pa-
 17 tients;

18 (2) discuss the nature of substance abuse as it
 19 relates to their area of expertise;

20 (3) understand how certain dental therapies can
 21 affect the relapse potential of substance dependent
 22 patients; and

23 (4) help those affected by a substance use dis-
 24 order to find appropriate treatment for their condi-
 25 tion.

1 (b) CONTINUING EDUCATION CREDITS.—The Ad-
2 ministrator of the Substance Abuse and Mental Health
3 Services Administration may collaborate with professional
4 accrediting bodies—

5 (1) to develop and support substance abuse
6 training courses for oral health professionals; and

7 (2) to encourage that the activities described in
8 paragraph (1) be recognized for continuing edu-
9 cation purposes.

10 **SEC. 303. AUTHORIZATION OF APPROPRIATIONS.**

11 There are authorized to be appropriated for the pur-
12 pose of carrying out this title, \$500,000 for each of fiscal
13 years 2010 through 2012. Amounts authorized to be ap-
14 propriated under this section are in addition to any other
15 amounts authorized to be appropriated for such purpose.

○