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1ST SESSION

S. 1955

To allow patients access to drugs and medical devices recommended and provided by health care practitioners that are not approved by the Food and Drug Administration, and for other purposes.

IN THE SENATE OF THE UNITED STATES

NOVEMBER 18, 1999

Mr. DASCHLE (for himself, Mr. HARKIN, Mr. INOUE, Mr. REID, and Mr. JOHNSON) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To allow patients access to drugs and medical devices recommended and provided by health care practitioners that are not approved by the Food and Drug Administration, and for other purposes.

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.**

4 This Act may be cited as the “Access to Medical
5 Treatment Act”.

6 **SEC. 2. DEFINITIONS.**

7 In this Act:

1 (1) ADULTERATED.—The term “adulterated”
2 means any unapproved drug or medical device that
3 in whole or part consists of any filthy, putrid, or de-
4 composed substance that has been prepared, packed,
5 or held under unsanitary conditions where such drug
6 or device may have been contaminated with such
7 filthy, putrid, or decomposed substance and be inju-
8 rious to health.

9 (2) ADVERTISING CLAIM.—The term “adver-
10 tising claim” means any representation made or sug-
11 gested by statement, word, device, sound, or any
12 combination thereof with respect to medical treat-
13 ment.

14 (3) COSTS.—The term “costs” means a charge
15 to patients equal to the amount necessary to recover
16 expenses for making or obtaining the unapproved
17 drug or medical device and providing for its trans-
18 port to the health care practitioner.

19 (4) DANGER.—The term “danger” means an
20 adverse reaction, to an unapproved drug or medical
21 device, that used as directed—

22 (A) causes serious harm to the patient in
23 a case in which such harm would not have oth-
24 erwise occurred; or

1 (B) causes harm that is more serious than
2 side effects for drugs or medical devices ap-
3 proved by the Federal Food and Drug Adminis-
4 tration for the same disease or condition.

5 (5) DRUG.—The term “drug” has the same
6 meaning given that term in section 201(g)(1) of the
7 Federal Food, Drug, and Cosmetic Act (21 U.S.C.
8 321(g)(1)).

9 (6) HEALTH CARE PRACTITIONER.—The term
10 “health care practitioner” means a physician or
11 other individual who is a provider of health care,
12 who is authorized under the law of a State to pre-
13 scribe drugs or devices.

14 (7) INTERSTATE COMMERCE.—The term “inter-
15 state commerce” means commerce between any
16 State or Territory and any place outside thereof,
17 and commerce within the District of Columbia or
18 within any other Territory not organized with a leg-
19 islative body.

20 (8) LEGAL REPRESENTATIVE.—The term “legal
21 representative” means a parent or other person who
22 qualifies as a legal guardian under State law.

23 (9) MEDICAL DEVICE.—The term “medical de-
24 vice” has the same meaning given the term “device”

1 in section 201(h) of the Federal Food, Drug, and
2 Cosmetic Act (21 U.S.C. 321(h)).

3 (10) PATIENT.—The term “patient” means any
4 person who seeks medical treatment from a health
5 care practitioner for a disease or health condition.

6 (11) SECRETARY.—The term “Secretary”
7 means the Secretary of the Department of Health
8 and Human Services.

9 (12) UNAPPROVED DRUG OR MEDICAL DE-
10 VICE.—The term “unapproved”, with respect to a
11 drug or medical device, means a drug or medical de-
12 vice that is not approved or authorized for manufac-
13 ture, sale, and distribution in interstate commerce
14 under section 505, 513, or 515 of the Federal Food,
15 Drug, and Cosmetic Act (21 U.S.C. 355, 360c, and
16 360e) or under section 351 of the Public Health
17 Service Act (42 U.S.C. 201).

18 **SEC. 3. ACCESS TO MEDICAL TREATMENT.**

19 (a) IN GENERAL.—Notwithstanding sections
20 501(a)(2)(B), 501(e) through 501(h), 502(f)(1), 505,
21 513, and 515 of the Federal Food, Drug, and Cosmetic
22 Act (21 U.S.C. 351(a)(2)(B), 351(e) through 351(h),
23 352(f)(1), 355, 360c, and 360e) and section 351 of the
24 Public Health Service Act (42 U.S.C. 201) or any other
25 provision of Federal law, a patient may receive, and a

1 health care practitioner may provide or administer, any
2 unapproved drug or medical device that the patient desires
3 or the legal representative of the patient authorizes if—

4 (1) the unapproved drug or medical device is
5 recommended by a health care practitioner within
6 that practitioner's scope of practice under State law;

7 (2) the provision or administration of the unap-
8 proved drug or medical device is not a violation of
9 the laws of the State or States in which the activity
10 is carried out; and

11 (3) the health care practitioner abides by all of
12 the requirements in subsection (b).

13 (b) REQUIREMENTS.—A health care practitioner may
14 recommend, provide or administer any unapproved drug
15 or medical device for a patient, pursuant to subsection (a),
16 if that practitioner—

17 (1) does not violate State law by providing or
18 administering the unapproved drug or medical de-
19 vice;

20 (2) does not violate the Controlled Substances
21 Act (21 U.S.C. 801 et seq.) by providing or admin-
22 istering the unapproved drugs;

23 (3) has concluded based on generally accepted
24 principles and current information that the unap-

1 proved drug or medical device, when used as di-
2 rected, will not cause a danger to the patient;

3 (4) provides the recommendation under cir-
4 cumstances that give the patient sufficient oppor-
5 tunity to consider whether or not to use such a drug
6 or medical device and that minimize the possibility
7 of coercion or undue influence by the health care
8 practitioner;

9 (5) discloses to the patient any financial inter-
10 est that such a practitioner may have in the drug or
11 medical device;

12 (6) has informed the patient in writing, prior to
13 recommending, providing, or administering the un-
14 approved drug or medical device—

15 (A) that the unapproved drug or medical
16 device is not approved by the Secretary as safe
17 and effective for the condition of the patient
18 and is considered experimental;

19 (B) of the foreseeable risks and benefits of
20 the unapproved drug or medical device, includ-
21 ing any risk to an embryo or fetus, and ex-
22 pected possible side effects or discomforts that
23 the patient may experience and any medical
24 treatment available if side affects occur;

1 (C) of any appropriate alternative proce-
2 dures or courses of treatment (including proce-
3 dures or courses of treatment that may involve
4 the use of a drug or medical device that has
5 been approved by the Food and Drug Adminis-
6 tration), if any, that may be advantageous for
7 the patient's condition;

8 (D) of any interactions the unapproved
9 drug or medical device may have with other
10 drugs, if any;

11 (E) of the active and inactive ingredients
12 of the unapproved drug and the mechanism of
13 action of the medical device, if known;

14 (F) of the health condition for which the
15 unapproved drug or medical device is provided,
16 the method of administration that will be used,
17 and the unit dose;

18 (G) of the procedures that will be employed
19 by the health care practitioner in using such a
20 drug or medical device;

21 (H) of the extent, if any, to which con-
22 fidentiality of records identifying the patient
23 will be maintained;

24 (I) for use of such a drug or medical de-
25 vice involving more than minimal risk, of the

1 treatments available if injury occurs, what such
2 treatments involve, and where additional infor-
3 mation regarding such treatments may be ob-
4 tained;

5 (J) of any anticipated circumstances under
6 which the patient's use of such a drug or med-
7 ical device may be terminated by the health
8 care practitioner without regard to the patient's
9 consent;

10 (K) that the use of an such a drug or med-
11 ical device is voluntary and that the patient
12 may suspend or terminate treatment at any
13 time;

14 (L) of the consequences of a patient's deci-
15 sion to withdraw from the use of such a drug
16 or medical device;

17 (M) if any information described in sub-
18 paragraphs (A) through (L) cannot be provided
19 by the health care practitioner because such in-
20 formation is not known at the time the practi-
21 tioner provides or administers such drug or
22 medical device, that such information cannot be
23 provided by the practitioner; and

24 (N) of any other information or disclosures
25 required by applicable State law for the admin-

1 istration of experimental drugs or medical de-
2 vices to human subjects;

3 (7) has not made, except as provided in sub-
4 section (d), any advertising claims for the unap-
5 proved drug or medical device;

6 (8) does not impose a charge for the unap-
7 proved drug or medical device in excess of costs;

8 (9) complies with requirements for reporting a
9 danger in section 4; and

10 (10) has received a signed affidavit from the
11 patient or the patient's legal representative con-
12 firming that the patient or the legal representative—

13 (A) has received the written information
14 required by this subsection and understands it;
15 and

16 (B) desires treatment with the unapproved
17 drug or medical device as recommended by the
18 health care practitioner.

19 (c) MANDATORY DISCLOSURE.—Any manufacturer of
20 an unapproved drug or medical device shall disclose, to
21 any health care practitioner that has received such drug
22 or medical device from such manufacturer, all information
23 available to such manufacturer regarding such drug or
24 medical device to enable such practitioner to comply with
25 the requirements of subsection (b)(3) and make a deter-

1 mination regarding the danger posed by such drug or med-
2 ical device. Compliance with this subsection shall not con-
3 stitute a violation of the Federal Food, Drug, and Cos-
4 metic Act (21 U.S.C. 301 et seq.).

5 (d) ADVERTISING CLAIMS EXCEPTION.—Subsection
6 (b)(7) shall not apply to a health care practitioner’s dis-
7 semination of information on the results of the practi-
8 tioner’s administration of the unapproved drug or medical
9 device in a peer-reviewed journal, through academic or
10 professional forums, or through statements by a practi-
11 tioner to a patient. Subsection (b)(7) shall not apply to
12 any accurate and truthful statement made in person by
13 a health care practitioner to an individual or a prospective
14 patient.

15 **SEC. 4. CESSATION OF USE, AND REPORTING OF, DAN-**
16 **GEROUS DRUGS AND MEDICAL DEVICES.**

17 (a) DUTY TO PROTECT PATIENT.—If a health care
18 practitioner discovers that an unapproved drug or medical
19 device causes a danger to a patient, the practitioner shall
20 immediately cease use and recommendation of the unap-
21 proved drug or medical device and provide to the manufac-
22 turer of the unapproved drug or medical device and the
23 Director of the Centers for Disease Control and
24 Prevention—

1 (1) a written evaluation of the patient's medical
2 condition before and after administration of the un-
3 approved drug or medical device;

4 (2) a written evaluation of the adverse reaction,
5 including its physiological manifestations, duration,
6 and the effect of cessation of treatment upon the pa-
7 tient's condition;

8 (3) any other information the health care prac-
9 titioner deems pertinent to an evaluation of the ad-
10 verse reaction;

11 (4) the name, occupation, business address, and
12 business telephone number of the physician;

13 (5) the name of the unapproved drug or med-
14 ical device and a description of the method of ad-
15 ministration and operation, dosage, and duration of
16 treatment;

17 (6) the lot number, if any, of the unapproved
18 drug or medical device; and

19 (7) an affidavit pursuant to section 1746 of
20 title 28, United States Code, confirming that all
21 statements made to the manufacturer are accurate.

22 (b) MANUFACTURER'S DUTY TO REPORT.—Any
23 manufacturer of an unapproved drug or medical device
24 that receives information provided under subsection (a)
25 shall immediately—

1 (1) cease sale and distribution of the unap-
2 proved drug or medical device pending completion of
3 an investigation to determine the actual cause of the
4 danger;

5 (2) notify all health care practitioners to whom
6 the manufacturer has provided the unapproved drug
7 or medical device of the information provided to the
8 manufacturer under subsection (a); and

9 (3) report to the Secretary in writing that an
10 unapproved drug or medical device (identified by
11 name, known method of operation, unit dose, and in-
12 tended use) that the manufacturer provided to a
13 health care practitioner for administration under
14 this Act has been reported to be a danger to a pa-
15 tient and confirming that the manufacturer—

16 (A) has ceased sale and distribution of the
17 unapproved drug or medical device pending
18 completion of an investigation to determine the
19 actual cause of the danger; and

20 (B) has notified health care practitioners
21 to which the unapproved drug or medical device
22 has been sent of the information it has received.

23 (c) INVESTIGATION.—

24 (1) IN GENERAL.—The Director of the Centers
25 for Disease Control and Prevention, upon receipt of

1 the information described in subsection (a), shall
2 conduct an investigation of the unapproved drug or
3 medical device that a health care practitioner has
4 determined to cause a danger to a patient in order
5 to make a determination of the actual cause of such
6 danger.

7 (2) REPORT TO SECRETARY.—The Director of
8 the Centers for Disease Control and Prevention shall
9 prepare and submit a report to the Secretary re-
10 garding the determination made under paragraph
11 (1), including a determination concerning whether
12 the unapproved drug or medical device is or is not
13 the actual cause of danger or whether the actual
14 cause of danger cannot be determined.

15 (3) DUTY OF SECRETARY.—Upon receipt of the
16 report described in paragraph (2), the Secretary
17 shall—

18 (A) if the Director of the Centers for Dis-
19 ease Control and Prevention determines that
20 the cause of such danger is the unapproved
21 drug or medical device, direct the manufacturer
22 of such drug or medical device to—

23 (i) cease manufacture, sale, and dis-
24 tribution of such drug or medical device;
25 and

1 (ii) notify all health care practitioners
2 to whom the manufacturer has provided
3 such drug or medical device to cease using
4 or recommending such drug or medical de-
5 vice, and to return such drug or medical
6 device to the manufacturer as part of a
7 complete recall;

8 (B) if the Director of the Centers for Dis-
9 ease Control and Prevention determines that
10 the cause of such danger is not such drug or
11 medical device, direct the manufacturer of such
12 drug or medical device to inform all health care
13 practitioners to whom the manufacturer has
14 provided such drug or medical device of such a
15 determination; and

16 (C) if the Director of the Centers of Dis-
17 ease Control and Prevention cannot determine
18 the cause of the danger, direct the manufac-
19 turer of the drug or medical device to inform all
20 health care practitioners to whom the manufac-
21 turer has provided such drug or medical device
22 of such a determination.

23 (d) SECRETARY'S DUTY TO INFORM.—Upon receipt
24 of the report described in subsection (b)(3), the Secretary
25 shall promptly disseminate information concerning the

1 danger to all health care practitioners in the United
2 States, to the Director of the National Center for Com-
3 plementary and Alternative Medicine, and to agencies of
4 the States that have responsibility for regulating unsafe
5 or adulterated drugs and medical devices.

6 **SEC. 5. REPORTING OF RESULTS OF UNAPPROVED DRUGS**
7 **AND MEDICAL DEVICES.**

8 (a) REPORTING OF RESULTS.—If a health care prac-
9 titioner provides or administers an unapproved drug or
10 medical device, that in the opinion of the health care prac-
11 titioner, produces results that are more beneficial than re-
12 sults produced from any drug or medical device approved
13 by the Food and Drug Administration, or produces other
14 results regarding the effectiveness of the treatment rel-
15 ative to treatments approved by the Food and Drug Ad-
16 ministration for the same condition, the practitioner shall
17 provide to the manufacturer—

18 (1) the results of the administration of the drug
19 or device;

20 (2) a written evaluation of the patient's medical
21 condition before and after administration of the un-
22 approved drug or medical device;

23 (3) the name, occupation, business address, and
24 business telephone number of the physician;

1 (4) the name of the unapproved drug or med-
2 ical device and a description of the method of oper-
3 ation and administration, dosing, and duration of
4 treatment; and

5 (5) an affidavit pursuant to section 1746 of
6 title 28, United States Code, confirming that all
7 statements made to the manufacturer are accurate.

8 (b) MANUFACTURER'S DUTY TO REPORT.—Any
9 manufacturer of an unapproved drug or medical device
10 that receives information under subsection (a) shall pro-
11 vide to the Director of the National Center for Com-
12 plementary and Alternative Medicine—

13 (1) a complete copy of the information;

14 (2) the name, business address, and business
15 telephone number of the manufacturer;

16 (3) the name, business address, and business
17 telephone number of the health care practitioner who
18 supplied information to the manufacturer;

19 (4) the name of the unapproved drug or med-
20 ical device;

21 (5) the known method of operation and admin-
22 istration of the unapproved drug or medical device;

23 (6) the per unit dose; and

24 (7) the intended use of the unapproved drug or
25 medical device.

1 (c) DIRECTOR'S DUTY TO MAKE PUBLIC.—The Di-
2 rector of the National Center for Complementary and Al-
3 ternative Medicine shall review and analyze information
4 received pursuant to subsection (b) about an unapproved
5 drug or medical device and make available, on an Internet
6 website and in writing upon request by any individual, an
7 annual review and analysis of such information, and in-
8 clude a statement that such drug or medical device is not
9 approved by the Food and Drug Administration.

10 **SEC. 6. OTHER LAWS NOT AFFECTED BY THIS ACT.**

11 This Act shall not be construed to have any effect
12 on section 503A of the Federal Food, Drug, and Cosmetic
13 Act (21 U.S.C. 353a) nor does this Act supersede any law
14 of a State or political subdivision of a State, including laws
15 governing rights and duties among health care practi-
16 tioners and patients. This Act shall also not apply to state-
17 ments or claims permitted or authorized under sections
18 403 and 403B of such Act (21 U.S.C. 343, 343–2). This
19 Act shall not in any way adversely affect the distribution
20 and marketing of vitamins and supplements.

21 **SEC. 7. AUTHORIZED ACTIVITIES OF HEALTH CARE PRAC-**
22 **TITIONERS.**

23 (a) INTRODUCTION IN INTERSTATE COMMERCE.—To
24 the extent necessary to comply with this Act, a health care
25 practitioner may—

1 (1) introduce an unapproved drug or medical
2 device into interstate commerce;

3 (2) deliver an unapproved drug or medical de-
4 vice for introduction into such commerce;

5 (3) transport an unapproved drug or medical
6 device in such commerce;

7 (4) receive an unapproved drug or medical de-
8 vice in such commerce and deliver the unapproved
9 drug or medical device; and

10 (5) hold an unapproved drug or medical device
11 for sale after shipment of the unapproved drug or
12 medical device in such commerce.

13 (b) **RULE OF CONSTRUCTION.**—This Act shall not be
14 construed to limit or interfere with the authority of a
15 health care practitioner to prescribe, recommend, provide
16 or administer to a patient for any condition or disease any
17 unapproved drug or medical device lawful under the law
18 of the State or States in which the health care practitioner
19 practices.

20 **SEC. 8. PENALTY.**

21 A health care practitioner or manufacturer found to
22 have knowingly violated this Act shall be denied coverage
23 under this Act.

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