Special Segment
Legal responses to NPS: Multiple approaches to a multi-faceted problem
About the SMART Update

The threat of illicitly used psychoactive synthetic drugs is one of the most significant drug problems worldwide. After cannabis, amphetamine-type stimulants (ATS) are the second most widely used drugs across the globe, with use levels often exceeding those of heroin and/or cocaine. Along with ATS, the continued growth of the new psychoactive substances (NPS) market over the last years has become a policy challenge and a major international concern. A growing interplay between these new drugs and traditional illicit drug markets is being observed. By August 2015, the emergence of NPS had been reported from 96 countries and territories. Trends on the synthetic drug market evolve quickly each year.

The UNODC Global Synthetics Monitoring: Analyses, Reporting and Trends (SMART) Programme enhances the capacity of Member States in priority regions to generate, manage, analyse, report and use synthetic drug information to design effective policy and programme interventions. Launched in September 2008, the Global SMART Programme provides capacity building to laboratory personnel, law enforcement and research officers in the Pacific, East and South-East Asia, South Asia, the Near and Middle East, Africa and Latin America; and regularly reviews the global ATS and NPS situation. Other features of the UNODC Global SMART Programme are online data collection, situation reports and regional assessments. The SMART Early Warning Advisory web-portal offers regular updates on NPS, including trend data on emergence and persistence, chemical data on NPS, supporting documentation on laboratory analysis and national legislative responses (available at: https://www.unodc.org/NPS).

The Global SMART Update (GSU) is designed to provide regular brief reporting on emerging patterns and trends of the global synthetic drug situation. Given the speed at which changes in the ATS and NPS markets occur, it is especially important to have a simple sustainable mechanism for frequent information sharing from different parts of the world. The Global SMART Update is published twice a year and is available in English and Spanish. Electronic copies of the SMART Updates and other publications are available at: https://www.unodc.org/unodc/en/scientists/publications-smart.html.

The GSU reports various synthetic drug information such as: significant or unusual drug or precursor seizures; new manufacturing, transit and destinations locations; methods and chemicals used for clandestine manufacture; new trafficking groups or routes; changes in legislation to address the problem of synthetic drugs; emerging drugs or user groups; and health implications related to their use.*

In this issue

Each issue of the Update contains a special coverage and thematic segments. The special segment of the current issue analyses the legislative responses taken by the international community to address the challenge of NPS in view of protecting public health. It reviews existing legislation to control NPS and explores how countries have introduced new legislation to address this problem. A brief overview is provided on the diverse regional patterns of NPS emergence, which is also reflected at the national level, and partly explains why countries have adapted their legislative frameworks in different ways to respond to NPS. The use of measures such as individual listing, generic and analogue legislation is discussed as well as recent innovative approaches specifically designed to address NPS.

The thematic segments present concrete examples of legislative responses towards controlling NPS at the global, regional and national level. It focuses on the legislation countries have implemented over the past 18 months in Oceania, Asia, Africa, Europe and the Americas to address the threat of NPS. The GSU also covers the latest developments with NPS control under the international drug control system, in particular the decision of the Commission on Narcotic Drugs in March 2015 to place 10 NPS under international control.

Previous issues highlighted the increasing dimension of ATS trafficking from Africa to East and South-East Asia; the ATS situation in South Asia; new psychoactive substances and the changing faces of illicit ATS manufacture; the spread of NPS across the globe; the changing nature of “ecstasy”; global patterns and regional differences in methamphetamine manufacture and precursors trends; and synthetic cannabinoids: key facts about the largest group of NPS.

*The information and data contained within this report are from official Government reports, press releases, scientific journals or incidents confirmed by UNODC Field Offices. Additional or updated information from previously reported incidents may also be included where appropriate. An asterisk (*) indicates that information is preliminary as it stems from ‘open sources’ where UNODC is waiting for official confirmation. This report has not been formally edited. The contents of this publication do not necessarily reflect the views or policies of UNODC or contributory organizations and neither do they imply any endorsement. Suggested citation: UNODC, Global SMART Update Volume 14, September 2015.
Legal responses to NPS: Multiple approaches to a multi-faceted problem

Background

The emergence of new psychoactive substances (NPS)1 is a global phenomenon. NPS that have the potential to pose serious risks to public health and safety continue to be sold on the synthetic drugs market as “legal” alternatives to internationally controlled drugs. Often marketed as “designer drugs”, “legal highs”, “herbal highs”, “research or intermediate chemicals”, “laboratory reagents” and frequently labelled as “not for human consumption”, NPS try to bypass both international and national laws that aim to protect public health and safety. Many countries have experienced the rapid emergence of a large number of different NPS. Some are sold openly in stores, others can be ordered online and are delivered by mail services. In response to this unique situation, which approaches do governments use to establish an appropriate legal framework, bearing in mind their commitment to protect public health and without unduly restricting scientific research and legitimate industrial and medical applications? How is existing legislation on drug control being used as a means of controlling NPS? Which new types of legislation have countries explored to address NPS? How has the international community responded to the threat of NPS?

Legal responses at the international level

Within the framework of article 2 of the Single Convention on Narcotic Drugs and article 2 of the Convention on Psychotropic Substances, the World Health Organization (WHO) Expert Committee on Drug Dependence assessed the risks of 22 NPS4 at its 36th meeting held in June 2014 and recommended changes to the scope of control of 11 substances for the Commission on Narcotic Drugs (CND). Following these recommendations, the CND placed 10 NPS5 under international control at the 58th Session of the CND held in March 2015.

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1 NPS are substances of abuse either in a pure form or a preparation, that are not controlled by the 1961 Single Convention on Narcotic Drugs or the 1971 Convention on Psychotropic Substances, but which may pose a public health threat. United Nations Office on Drugs and Crime (UNODC), The Challenge of New Psychoactive Substances, Vienna, March 2013.


4 Substances that were reviewed included N-benzylpiperazine (BZP); 1,4-butanediol; JWH-018; JWH-073; AM-2201; UR-144; API-NACA (AKB-48); RCS-4; JWH-250; mephedrone; 3,4-methylenedioxyxymethamphetamine (MDMA); 4-methylamphetamine (4-MEC); 4-fluoromethamphetamine (Sibutramine); mephedrone (bk-MDMA); 4-methylmethcathinone (4-MEC); 4-fluromethcathinone (lephedrone); 25B-NBOMe; 25C-NBOMe; 25I-NBOMe; alpha-methyltryptamine (AMT); AH-7921; methoxetamine; methcathinone and ketamine. See World Health Organisation (WHO), “WHO Expert Committee on Drug Dependence: Thirty-sixth report”, WHO technical report series no. 991, Geneva, 2015.

5 25B-NBOMe, 25C-NBOMe and 25I-NBOMe were included in Schedule II of the 1971 UN Convention; N-benzylpiperazine, JWH-018, AM-2201, mephedrone, 3,4-methylenedioxypyrovalerone and methcathinone were added to Schedule II of the 1971 UN Convention; and AH-7921 was included in Schedule I of the 1961 UN Convention.

Diverse regional patterns of NPS emergence

By July 2015, 96 countries and territories had reported over 540 NPS to UNODC, far exceeding the 234 substances currently controlled under the International Drug Conventions By far the largest variety of NPS have been identified in Europe, followed by North America6. However, there is no homogeneity in the appearance of NPS groups across different regions.7 For instance, synthetic cannabinoids, the largest and most dynamic group of NPS (34 per cent of the total number of NPS reported worldwide), constitutes the largest group in North America at 31 per cent, Asia at 44 per cent, Europe at 36 per cent and Oceania at 24 per cent, whereas in the Americas, excluding Canada and the United States, phenethylamines account for the largest group of NPS (at 29 per cent). This pattern may change over time. In Europe, in 2014, 31 synthetic cathinones were reported for the first time, the largest group in that year, followed by 30 synthetic cannabinoids.

National legal responses: dealing with diversity and change

On the whole, the regional diversity of the NPS situation is also reflected at the national level. This is one of the reasons why countries have adapted their legislative frameworks in different ways to respond...
to the challenge of NPS. Regions such as Europe and North America that have reported the emergence of a significant variety of NPS, have implemented multiple legislative approaches. There is a tendency for countries reporting large numbers of NPS to adopt legislation that can place controls on entire groups of NPS.\(^8\)

Up to July 2015, information on legislative responses directed at NPS has been compiled for 56 countries.\(^9\) Many countries have responded to the emergence of NPS by using or amending existing legislation while others have introduced additional, innovative legal instruments. Of the 56 countries reviewed, 52 have amended their existing list of controlled substances to include specific NPS (which is called “individual listing”). This can be carried out through the regular legislative process, through rapid procedures, or by placing substances under temporary control until more evidence is available on their harms and abuse to enable a risk assessment. Generic controls are another widely used approach. For instance, in Europe – the region that is reportedly affected by the largest number of NPS – 13 out of 32 countries reviewed have implemented generic controls for either one or several NPS groups.

Individual listing of substances

Following the model of the international drug control conventions where narcotics, psychotropic substances, and precursor chemicals are individually listed, 52 countries have used this approach with regards to NPS and have added at least one NPS to their list of controlled substances. Controlled substances at the national level are often divided into schedules or lists that classify substances depending on the assessment of their medical use, their relative abuse potential and their risks of dependence. Each schedule is subject to a graded system of control and restrictions. The individual listing of substances has the advantage, in principle, that there is no ambiguity about whether or not a substance is covered by the legislation. And yet, a major drawback of this approach is that adding substance by substance to the schedules of national drug laws can become a lengthy procedure which may not provide a fitting response to the fast-paced nature of the NPS market.

Changes in the scope of control of substances at the national level are often the result of an evidence-based process, where the harms of the drug are assessed and reviewed to determine if and eventually to

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\(^8\) The analysis of national legislative responses is based on information provided by Member States to UNODC such as the UNODC Annual Reports Questionnaire and the UNODC Member State Survey on NPS (July 2014) as well as on publicly available information from Government websites. The UNODC Early Warning Advisory on NPS is used as a repository of this information, which is available at https://www.unodc.org/nps

\(^9\) Sources: UNODC Early Warning Advisory on NPS; UNODC Annual Reports Questionnaire UNODC Member State Survey on NPS, July 2014.
what extent a substance should be controlled. However, the paucity of scientific and human experience data required to assess the harms of many NPS have made this process extremely complex. Information on fatal poisonings in humans and clinical observations of intoxicated patients is often blurred by poly-drug use and by the fact that users frequently cannot identify the exact content of the substances they have consumed.

On the whole, this approach appears to have been selected in countries where a limited number of NPS have emerged. For instance, in the Americas (excluding Canada and the United States), 11 countries and territories have reported the emergence of NPS, 8 of which reported less than 20 NPS and none reported more than 40 NPS between 2008 and 2015. Six of these countries have placed individual NPS under control by adding them to existing lists of controlled drugs such as MDMA and LSD.

**Generic control**

At the global level, 19 countries and territories of the 56 reviewed have complemented their individual lists of controlled substances by using legislation that allows the simultaneous control of clusters of substances, known as generic control. In practice, such a legislative approach defines specific variations, of a core molecular structure which are controlled. Unlike the individual listing where each substance is controlled one by one, generic legislation allows countries to control large groups of substances found in the market and/or substances that have not yet emerged, i.e. to adopt a pre-emptive approach that controls substances that entail health risks to society.

Given that several specific variations of the core molecular structure of a controlled substance are possible, all the possible variants need to be considered when defining the group for generic control. Rigorous definitions of compound clusters as well as specific exceptions for medicines, and chemicals or substances used for research purposes are important elements for this approach. For small molecules, the generic approach seems feasible, because the number of potential variants is limited, but substances with a much larger molecular skeleton, such as the synthetic cannabinoids, present a greater challenge. For instance, generic legislation as a means of controlling synthetic cannabinoids has proven to be particularly challenging, with new variations appearing regularly, apparently intended to circumvent legislation.

Generic legislation as an approach has existed for some time, but many countries have recently updated their generic definitions so as to control certain NPS groups. For instance, in the United Kingdom where generic controls were first introduced in 1977 to control ring-substituted phenethylamines and tryptamines, the generic definitions of synthetic cannabinoids have recently been revised. Since then, a number of other countries have adopted such legislation, but have sometimes used broader definitions that cover larger numbers of compounds. Indeed, the generic language and definitions found in the 19 countries vary greatly.

While generic legislation may present an efficient means of encompassing a large group of substances, it also has a number of drawbacks. Controlling large numbers of substances by generic control might mean that substances with little abuse potential or with no physiological effects could fall under control as chemical similarity does not necessarily equal pharmacological similarity. Further novel compounds used in research could inadvertently fall under such controls and generic definitions could mistakenly place controls on medicines and active ingredients of medicines. When individual substances are not specifically listed, a generic definition might only be decipherable by forensic chemists.

**Analogue legislation**

Among the 56 countries reviewed, 6 countries have complemented their individual lists of controlled substances by using analogue legislation. In this way, substances can be controlled without being specifically referred to in the legislation by invoking the concept of “chemical similarity” to a drug that is already controlled. Analogue controls are much broader than generic controls since they address more general as-

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10 Argentina, Brazil, Cayman Islands, Chile, Colombia, Costa Rica, Ecuador, Mexico, Panama, Peru, Uruguay.
11 Austria, Belgium, China (Macau), Denmark, France, Hungary, Ireland, Israel, Japan, Latvia, Lithuania, Norway, Russian Federation, Switzerland, Singapore, Turkey, United Arab Emirates, United Kingdom and the United States.
13 Canada, Italy, Latvia, Luxembourg, New Zealand and United States.
pects of similarity in chemical structure to a ‘parent’ compound. Unlike generic controls, they operate on a substance by substance basis rather than by groups of substances. For instance, when a substance is not explicitly referred to in the legislation but has a similar structure and effect on the central nervous system as a substance that is already controlled, it can effectively be deemed a controlled substance analogue and is as such also controlled. However, the definition of what is considered to be an analogue, the interpretation and applicability of the concept and the penalties associated with the infringement of an analogue legislation vary from country to country. In some countries, apart from the requirement of chemical similarity, aspects such as pharmacological similarity and/or evidence that the substance is intended to be sold for human consumption are used to delineate more clearly the definition of analogue substances.

Analogue legislation has been implemented for some time. The United States was the first country to adopt analogue controls in the late 1980s to respond to the proliferation of synthetic drugs (e.g. fentanyl derivatives, analogues of MDMA, amphetamine and others). The Controlled Substances Analogue Enforcement Act of 1986 (CSA), known as the “Analogue Act”14 was enacted to control substances which are “substantially similar” to the chemical structure or effect of a substance already controlled. This law has been interpreted by courts in the United States on the terms that both requirements (similarity of the structure and effect) must be satisfied. In Europe, some analogue controls have been implemented in Luxembourg to control synthetic cannabinoids, entirely on the basis of pharmacological activity without reference to chemical structure.

Analogue controls may have a ‘deterrent effect’ on both manufacturers and suppliers who are uncertain whether a substance they are manufacturing or selling is deemed to be an analogue of a controlled substance. In such cases they face the risk of prosecution. However, the use of this approach has limitations. Determining whether a substance is “substantially similar” remains complex. In the United States, a court can determine whether a substance is or is not controlled under the analogue legislation. However, this could affect the right of the defendant to know at the time of the offense whether he/she has committed an offense. In addition, given that analogue controls require case-by-case decisions, they are resource intensive because they require expert chemical and pharmacological testimony at each occasion. Moreover, since scientific evidence for NPS remains scarce and is often unavailable experts may find it difficult to find the evidence to make an informed decision. As a result, court decisions on the “substantial similarity” of a substance might vary.

Recent developments

The rapid proliferation of NPS on the market, the diversification of substances that circumvent legislation and the scarcity of data on their pharmacology and dependency potential, have prompted some governments to look for alternatives to existing drug control systems that are based on the chemistry of substance structures. For example, in the case of the United States, the Synthetic Drug Abuse Prevention Act of 2012 for the first time introduced controls of synthetic cannabinoids not only on the basis of their chemical nature but also referring to the effects on the brain, according to a “neurochemical definition”.

Another approach being considered is a general ban on the distribution of non-controlled NPS. In 2014, the Advisory Council on the Misuse of Drugs was commissioned to undertake a review of legal approaches to tackle NPS in the United Kingdom. The Council considered that a general prohibition on the distribution of non-controlled NPS (sale, advertisement, importation or exportation of any substance intended for human consumption that is capable of producing a psychoactive effect would be banned) would tackle the NPS market by responding to the ease of availability of NPS; it would remove the risks that the legislative response is driving the evolution of the NPS market, whilst minimizing complexity from an enforcement and prosecution perspective.15 This approach is currently being examined by the Government of the United Kingdom and is not yet in force.

The number and type of NPS identified as well as their emergence pattern vary widely from country to country. Against this background, countries have adopted a range of legal measures to control NPS which reflect the diversity of the problem as well as differences in legal frameworks and policy priorities.

Despite this diversity at the national level, a common feature of the NPS phenomenon is the global organization of the market. The international drug control system serves as a common reference to develop an international response to the problem. Identifying the most prevalent, harmful and persistent NPS that may require an international response will be one of the key responsibilities. International measures have a crucial role in supplementing national legislative responses that are needed to address this multi-faceted problem.

14 Controlled Substances Analogue Enforcement Act (CSA) of 1986: section 802 (32) (A) and section 813.

National information on NPS legislation available in the UNODC Early Warning Advisory on NPS
National information on NPS legislation not available in the UNODC Early Warning Advisory on NPS

Regions covered in this issue

The segments presented were selected to illustrate the thematic focus of this Global SMART Update issue. The sequence of the segments follows roughly an east-west direction from Oceania, which has among the highest prevalence rates for ATS use in the world, through East Asia with its large number of ATS users to other regions and continents. The numbered pins on the map above correspond with the index of segments below.

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Note: The boundaries, names and designations used herein do not imply official endorsement or acceptance by the United Nations.
New Zealand: Psychoactive Substances Amendment Act ends licensing period and bans animal testing data for psychoactive substances

WELLINGTON, New Zealand – May 2014. By the signing into law of the Psychoactive Substances Amendment Act, the interim licensing for psychoactive substances ended at midnight on 7 May 2014. In effect, this means that all interim retail and wholesale licenses are cancelled, that the 36 psychoactive substances that had previously received interim approval are removed from sale, and that the manufacture, distribution, retail and possession of psychoactive substances is no longer legal. According to the Health Minister of New Zealand, “the intent of the original Psychoactive Substances Act remains with approved low risk products able to come to market in the future when regulations are made”. With particular concerns over animal testing data, this Amendment Act bans the use of such data as a means of supporting product approvals for psychoactive substances.

Australia: Amendments to the Criminal Code Regulation and Senate passes Crimes Legislation Amendment

CANBERRA, Australia – April 2014. The Criminal Code Regulation of 2005 was amended by the 2014 Criminal Code (Controlled Drugs) Legislation Amendment Regulation in April 2014, to add 44 substances to the list of substances controlled in Schedule I of the Criminal Code Regulation. The majority of these 44 substances include synthetic cannabinoids and phenethylamines, as well as some synthetic cathinones, piperazines, tryptamines and other substances. Later, in February 2015, the Australian Senate passed the Crimes Legislation Amendment (Psychoactive Substances and Other Measures) Bill 2014, amending the Criminal Code Act of 1995 and Customs Act of 1901 with regards to NPS. In accordance with this amendment, it is thus illegal to import any substance with a psychoactive effect or a substance similar to a ‘serious drug’ as defined in the Criminal Code Act.

Japan: Updates to generic legislation and list of “designated substances” target synthetic cannabinoids and cathinones

TOKYO, Japan – August 2014 to May 2015. On 15 August 2014, the Japanese Ministry of Health, Labour and Welfare announced that 21 substances will be placed under national control as of 25 August that year, thereby prohibiting the manufacture, import, sale and use of these substances. Synthetic cannabinoids accounted for more than half of the 21 substances, while the remainder included synthetic cathinones, phenethylamines and a phencyclidine-type substance. In late 2014, another 37 NPS (mostly synthetic cannabinoids and synthetic cathinones) were controlled by the Ministry and classified as “designated substances”. In early 2015, a further 33 synthetic cathinones, phenethylamines, and other NPS, were prohibited in terms of manufacture, import, sale and use and assigned as “designated substances”. Shortly after, the Ministry announced an update to the generic legislation, involving control of substances related to cathinone, with effect from 11 May 2015.

The Republic of Korea: 49 NPS placed under temporary control

SEOUL, Republic of Korea – April to December 2014. On 16 April 2014, the Ministry of Food and Drug Safety (MFDS) of the Republic of Korea announced that 20 substances (mostly phenethylamines and synthetic cannabinoids) will be temporarily scheduled and added to the list of controlled substances of the Act on the Control of Narcotics for a three-year period. Between June and August 2014, another 19 phenethylamines, synthetic cannabinoids and other NPS, were added to this same list of controlled substances. Later that year on 11 December, the MFDS announced that a further 10 NPS (more than half of which are synthetic cannabinoids) would also be temporarily added to the list of controlled substances of the Act on the Control of Narcotics for a three-year period, thereby banning their possession, management, import and export, assistance in the trade, as well as receipt and provision of materials containing these substances.
Malaysia: Proposal to add kratom to the Dangerous Drugs Act as seizures rise

KUALA LUMPUR, Malaysia – April 2015. On 1 April, the Malaysian Ministry of Home Affairs tabled a bill to add kratom (mitragyna speciosa) to the list of controlled substances in schedule I of the Dangerous Drugs Act of 1952, but the amendment was shelved. This would have placed kratom within the same schedule as drugs such as cannabis, opium and coca. In Malaysia, kratom is a commonly used drug and there continue to be reports of cultivation of kratom in the country. In 2013, Malaysia reported that kratom seizures had risen to 9.1 tons, signifying a more than 74 per cent increase from the previous year.

Singapore: Central Narcotics Bureau reclassifies 14 temporarily controlled NPS to Class A drugs and places temporary controls on a further 18 NPS

SINGAPORE – April 2014. According to an announcement of the Central Narcotics Bureau (CNB), all 14 NPS currently listed in the Fifth Schedule of the Misuse of Drugs Act (MDA) will be reclassified to the First Schedule of this Act. In addition, a further 18 NPS will be added to the list of controlled substances in the Fifth Schedule of the MDA. When substances are listed in this Schedule of the MDA, it signifies a form of temporary control for a 12-month period during which time research and industry consultations are conducted. The trafficking, manufacture, import, export, possession or consumption of a substance listed in the Fifth Schedule only constitutes an offense when it becomes reclassified to the list of controlled drugs in the First Schedule of the MDA.

Egypt: 5 synthetic cannabinoids added to the Anti-Narcotics Law

CAIRO, Egypt – November 2014. On 2 November 2014, the Egyptian Ministry of Health added 5 synthetic cannabinoids to the list of controlled substances in Table I of the Anti-Narcotics Law No. 182 of 1960, by Decree no. 691. These 5 substances included JWH-018, JWH-073, JWH-200, CP-47,497 and CP-47,497 C8 homologue. Classified as narcotic drugs, these substances are thereby banned in terms of import, export, production, possession, handling, buying and selling, with exceptions explicitly stipulated by the Anti-Narcotics Law. In accordance with this law, exports or imports of these 5 scheduled substances will require written authorization from the relevant administrative bodies.
UNODC: CND places 10 NPS under international control

VIENNA, Austria – March 2015. During its 58th session in March 2015, the Commission on Narcotic Drugs (CND) decided to place 10 NPS under international control. The CND added a synthetic opioid (AH-7921) to the list of controlled substances in Schedule I of the 1961 Single Convention on Narcotic Drugs, 3 phenethylamines (25B-NBOMe, 25C-NBOMe and 25I-NBOMe) to Schedule I of the 1971 Convention on Psychotropic Substances and 6 other substances (AM-2201, BZP, JWH-018, MDPV, mephedrone and methylone) to Schedule II of that same Convention. The CND decided not to schedule 1,4-butanediol and GBL, which were recommended for control by the World Health Organization, and to postpone discussions on ketamine in order to obtain more information on the matter.

Sweden: synthetic cannabinoids and other NPS identified as “harmful to health”

STOCKHOLM, Sweden – January 2015. With effect from 16 January 2015, the Government of Sweden has added 32 NPS, identified as harmful to health, to the list of substances controlled by the 1999 Ordinance Regarding the Prohibition of Certain Goods Dangerous to Health. Synthetic cannabinoids account for the majority (24) of these substances. Among the other NPS that have been added to this list are 7 synthetic cathinones and the plant-based substance, Salvia divinorum. In accordance with this Ordinance, countries intending to export these substances to Sweden will now require an import authorization from the Swedish Ministry of Health and Social Affairs.

Europe: EU bans MDPV, methoxetamine, 25I-NBOMe and AH-7921

BRUSSELS, Belgium – October 2014. In late September, EU Ministers adopted the proposal put forth by the European Commission to ban 4 NPS: MDPV (a synthetic cathinone), methoxetamine (a phencyclidine-type substance), 25I-NBOMe (a phenethylamine) and AH-7921 (a synthetic opioid). Member States have a one-year period to incorporate this ban into their national legislations at which point it will be illegal for these substances to be manufactured or marketed within the EU. Among EU Member States there have been over 100 reports of poisonings relating to these 4 substances in recent years. Prior to the decision of banning these substances, a control procedure was implemented in April 2014 and a risk assessment was conducted, which found that these substances were being sold as substitutes for illicitly used drugs.

United Kingdom: Reclassification and addition of NPS to the Misuse of Drugs Act and introduction of the Psychoactive Substances Bill

LONDON, United Kingdom – June 2014 to May 2015. Having formerly been subject to control under a Temporary Class Drug Order, the hallucinogenic NBOMe-compounds have been placed under permanent control with effect from 10 June 2014 and classified as Class A drugs under the Misuse of Drugs Act and benzofuran compounds have been classified as Class B drugs under the same Act. Later in January 2015, AH-7921 (a synthetic opioid), LSD-related compounds, and compounds included in the extended definition of tryptamines were added to Schedule II of the Misuse of Drugs Act, while MT-45 (a synthetic opioid) and 4,4’-DMAR (a psychostimulant) where added in March 2015. On 28 May 2015, the Psychoactive Substances Bill 2015 was introduced in the House of Lords. It is intended to make it an offense to produce, supply, offer to supply, possess with the intent to supply, import or export psychoactive substances.
Chile: NBOMe-compounds and other NPS placed under national control

SANTIAGO, Chile – April 2015. On 30 March, the Ministry of Interior and Public Security in Chile added 51 NPS to the list of controlled substances under Article 1 of Decree N° 867 of 2007 (Law N° 20.000) which governs the illicit traffic of narcotic and psychotropic substances. Of the 51 substances placed under national control, 39 are phenethylamines (mostly NBOMe-compounds), 7 are synthetic cathinones and 5 are tryptamines. According to reports from Chile to the UNODC EWA, phenethylamines are a key feature of the NPS market in the country and accounted for 72 per cent of NPS that have emerged since 2014.

Costa Rica: 4 piperazines and other NPS placed under national control

SAN JOSÉ, Costa Rica – February 2014. With effect from 27 February 2014, 8 NPS have been added to the list of controlled narcotic and psychotropic substances in Costa Rica. These substances included two synthetic cannabinoids (JWH-018 and JWH-073), two synthetic cathinones (mephedrone and MPDV) and four piperazines (BZP, mCPP, DBZP and TFMPP). Costa Rica reported to the UNODC Early Warning Advisory, that piperazines accounted for the majority of NPS that have emerged in the country since 2012 (with a total of 6 substances), while another 2 synthetic cannabinoids (JWH-018 and JWH-073) and ketamine were also reported over the same period.

Mexico: mephedrone, TFMPP and synthetic cannabinoids placed under national control

MEXICO CITY, Mexico – January 2014. By a Decree dated 07 January 2014, mephedrone (a synthetic cathinone), TFMPP (a piperazine) and synthetic cannabinoids as an entire group, were added to the list of controlled substances in Schedule I of the General Health Law of 2012. Substances included in Schedule I of this legislation are defined as those that pose a serious threat to public health and do not have any, or only a limited, therapeutic use. According to reports from Mexico to the UNODC EWA, phenethylamines are a key feature of the NPS market in the country and accounted for 72 per cent of NPS that have emerged since 2014.

United States: DEA places temporary controls on 7 synthetic cannabinoids, 10 synthetic cathinones and a synthetic opioid

UNITED STATES – February 2014 to February 2015. In February 2014, the Drug Enforcement Administration (DEA) issued a final order to place under temporary control 4 synthetic cannabinoids (PB-22, 5F-PB-22, AB-FUBINACA and ADB-PINACA) under schedule I, pursuant to the temporary scheduling provisions of the Controlled Substances Act (CSA). In March 2014, the DEA issued another final order to place under temporary control 10 synthetic cathinones, including 4-MEC, α-PVP, butylone and pentedrone under the same schedule of the CSA. Later, in July 2015, the DEA placed acetyl fentanyl (a synthetic opioid) under temporary control under the same schedule.
Global SMART accomplishments for 2015

Since 2008, the Global SMART (Synthetics Monitoring: Analyses, Reporting and Trends) Programme has been working towards improving the capacity of targeted Member States to generate, manage, analyse, report and use information on illicit synthetic drugs. In 2015 the Global SMART Programme:

Published and launched
- The Global SMART Update Volume 13 (in English and Spanish);
- The Early Warning Advisory newsletter Volume 3 and 4;
- The Conference Room Paper covering the UNODC-WHO Expert Consultation on NPS (distributed during the Commission on Narcotic Drugs March 2015);
- The Challenge of Synthetic Drugs in East and South-East Asia and Oceania: Trends and Patterns of Amphetamine-type Stimulants and New Psychoactive Substances, 2015;
- The CICAD report “Drug use in the Americas” chapters six and seven on Amphetamine-type Stimulants and New Psychoactive Substances and other emerging drugs in the region, 2015;
- Updated version of the New Psychoactive Substance leaflet/poster (in Arabic, English and Spanish);

Organised
- Co-organised the Regional Conference on Synthetic Drugs and NPS in the United Arab Emirates (February 2015);
- Co-organised the side event “Meeting the challenges of new psychoactive substances” with the United Kingdom during the 58th session of the Commission on Narcotic Drugs (March 2015);
- A briefing for its stakeholders during the SMART Advisory Group Meeting in Vienna, Austria (March 2015);
- Co-organised the UNODC and INCB International conference on “Precursor chemicals and New Psychoactive Substances in Bangkok, Thailand (April 2015);
- Co-organised with OSCE the regional workshop “New Trends and Identification Techniques in Detection of the New Psychoactive Substances (NPS) and Co-operation among Law Enforcement Agencies in South Eastern Europe” in Sarajevo, Bosnia-Herzegovina (July 2015).

Contributed to
- The 2015 World Drug Report;
- The 55th regular session of the Inter-American Drug Abuse Control Commission (CICAD);
- The Exhibition: 60 Years of Laboratory Science in international Drug Control in Vienna, Austria;
- The dissemination of information related to the synthetic drug situation at relevant conferences and events, such as the Greater Mekong Sub-region Cooperation Mechanism focal point meeting in Viet Nam (January 2015), the ASEAN Regional Forum Meeting on Synthetic Drugs and Precursor Control in Thailand (February 2015), the WCO International Seminar on Combating NPS in the Republic of Korea (May 2015), the Combating Maritime Forces Regional Narcotics Conference in Bahrain (May 2015), the Annual Meeting of the INCB NPS Task Force in Mexico (June 2015), the Annual meeting of the Reitox EU Early Warning System Network in Portugal (June 2015), the Heads of National Law Enforcement Agencies (HONLEA) meeting in Belgium (July 2015) and the Group of Experts on Supply Control of the CICAD/OAS in Ecuador (July 2015).

UNODC would like to thank the following Governments for their financial contributions to the Global SMART Programme.

[Images of flags representing the contributing countries]

UNODC would also like to acknowledge the valuable contributions of the Inter-American Drug Abuse Control Commission (CICAD), a Global SMART partner, to this issue.

The Global SMART Programme is managed by the Laboratory and Scientific Section of the Research and Trend Analysis Branch. UNODC reiterates its appreciation and gratitude to Member States and partner agencies for the data and information that provided the basis of this report.

If you have comments on this report, or would like to contribute information that should be considered for future reports, please contact the Global SMART Programme at globalsmart@unodc.org. Information on the Global SMART Programme can be found via the internet at www.unodc.org and www.apaic.org or by contacting UNODC at the Vienna International Centre, P.O. Box 500, A-1400, Vienna, Austria.