

18 May 2006

Hon Jim Anderton
Associate Minister of Health
Parliament Buildings
WELLINGTON

Dear Minister

Advice on issues arising at the EACD Meeting on 30 March 2006

The Expert Advisory Committee on Drugs (EACD) met on 30 March 2006 and there were three issues that we wish to inform you about.

The legal status of methylone

I have already provided you with an oral report on the conclusions of the EACD on the legal status of methylone. In the view of the EACD, methylone is an analogue of an existing controlled drug, cathinone, and is therefore considered a controlled drug analogue under the Misuse of Drugs Act 1975.

The Committee also considers that there is merit in specifically listing methylone on one of the Schedules of the Misuse of Drugs Act 1975 as a named substance. There was discussion about where methylone should be listed and two options were identified:

1. To classify methylone as a Class C7 drug, given its status as an analogue of an existing controlled drug and the lack of knowledge about whether it is as harmful as cathinone
2. To classify methylone as a Class B2 controlled drug at the same level as cathinone.

The Committee did not reach a consensus on this issue, as there are advantages of both approaches. Regarding the option of classification as a Class C7 substance, the following points were made:

- methylone may turn out to be a more harmless substance than cathinone and other drugs with a similar effect
- it is difficult to downgrade the classification of substances once they are listed
- classification as a Class C7 substance does provide important powers in terms of the enforcement and sentencing.

Regarding the option of classification as a Class B2 substance (at the same level as cathinone), the following points were made:

- in the absence of any good information about the potential harms of Methylone, it is not possible to conclusively determine that it poses a high risk of harm
- while little is known about the potential harm of this substance, it may be reasonable to assume its harm profile is similar to that of cathinone
- such substances are often not used alone but in combination with other drugs (including alcohol), which increases the risk of harm
- a precautionary approach would be to list methylone at the same level as cathinone as a Class B2 controlled drug, which would provide for greater powers regarding enforcement and sentencing.

In both cases a search warrant is required by Police. The main difference between the two classifications is the maximum length of imprisonment for importation, manufacture and supply; and for conspiracy to commit an offence. For a B2 classification imprisonment may be up to 14 years and 10 years respectively whereas in the case of a C7 classification imprisonment is for up to 8 years and 7 years respectively. In both classifications possession is up to three months imprisonment and/or a \$500 fine.

Classification of LSD

As you know, there was a preliminary discussion on this issue at the EACD meeting on 27 October 2006. As a result, the EACD asked the secretariat to prepare a paper comparing LSD with methamphetamine, both Class A Drugs.

As you can see from the enclosed minutes, based on what is now known about LSD, it does not appear to be as harmful as many other Class A drugs, especially methamphetamine. Its current status probably reflects its historical classification, which occurred originally in 1967.

However, members also agreed that while the classification of LSD appears to be an anomaly, it is not alone in this respect and there are other apparent anomalies, probably also for historical reasons. New Zealand is not alone having apparent anomalies – the issue recently received media attention in the UK, as reported in the attached Guardian article.

One relevant issue is that New Zealand's obligations as a signatory to three United Nations drug control treaties has an influence on the classification of substances. The EACD asked the secretariat to prepare a paper on this topic for its next meeting.

The Committee agreed to bring the generic issue of apparent classification anomalies to your attention, and seek your view on whether you would like further advice on this topic at this time.

It will be useful to discuss these issues with you at our next meeting and prior to the next EACD meeting on 27 July 2006.

Yours sincerely

A handwritten signature in black ink, reading "Ashley Bloomfield". The signature is written in a cursive style with a large initial "A".

Ashley Bloomfield (Dr)
Chair
Expert Advisory Committee on Drugs

cc Debbie Chin, Acting Director-General of Health
Dr Don Matheson, Deputy Director-General, Public Health
EACD members

Encl. Minutes of 30 March 2006 EACD meeting
Article from UK Guardian newspaper