



State of Utah Controlled Substances Advisory Committee

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Chair

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Health and Human Services Interim Committee
Office of Legislative Research and General Counsel
W210 State Capital Complex
Salt Lake City, Utah 84114

SUBJECT: Controlled Substances Advisory Committee—2015 Legislative Recommendations

Dear Members of the Health and Human Services Interim Committee:

The Controlled Substances Advisory Committee (CSAC) is pleased to provide for you, as required by law, an update on recommendations for your consideration for action during the 2015 Legislative session. Our committee is composed of individuals with a broad range of expertise and/or experience in public health, clinical care, and academia. The CSAC has met quarterly to address issues related to the use of “recreational drugs” (i.e., substances not currently regulated by the Controlled Substances Act (CSA), but which are considered potentially dangerous to the health and well-being of the public, and “legend” (i.e., approved prescription only drugs) that might merit being added to a designated schedule in the CSA due to new evidence of health risks to the citizens of the State of Utah.

Notwithstanding our collective efforts to control the use of recreational drugs (including spice, bath salts, and analogs) through regulation and law enforcement, new substances continue to be developed, marketed, and sold to a significant number of ready and willing customers. Therefore, after careful review of such activity in our state, we have seen the following spice and bath salt analogs in 2014-15, the committee does recommend at this time that the following two substances be added to the “listed controlled substances” identified in Utah Code 58-37-4.2 during the 2016 Legislative session:

1. *These substances have been encountered multiple times at the Bureau of Forensic Services in casework samples since the current law was enacted in May 2014:*

ABD-FUBINACA; N-(1-amino-3,3-dimethyl-1oxobutan-2-yl)-1-(4-gluorbenzyl)-1H-indazole-3-carboxamide

AB-CHMINACA; N-(1-amino-3-dimethyl-1oxobutan-2-yl)-1-(cyclohexylmethyl)-1H-indazole-3-carboxamide

For further information, the following substances have been rarely encountered at the Bureau of Forensic Services in casework samples since the current law was enacted in May 2014, but do not seem to be emerging substances of concern in Utah at this time. Therefore, the committee

does not recommend these substances be added to the “listed controlled substances” identified in Utah Code 58-37-4.2 during the 2016 Legislative session:

5-MeO-MiPT; N-isopropyl-6-methoxy-N- **FUB-144**; [1-(4-fluorobenzyl)-1H-indol-3-yl]-(2,3,3,3,-tetramethylcyclopropyl)methanone
FUB-AMB; methyl (1-(4-fluorobenzyl)-1H-indazole-3-carbonyl)valinate
Dimethylone (bk-MDDMA); N,N-dimethyl-3', 4'-methylenedioxcathinone
MDAI; 5,6-methylenedioxy-2-aminoindane
NM-2201; naphthalene-1-yl 1-(5-fluoropentyl)-1H-indole-3-carboxylate
5F-AB-PINACA; N-(1-amino-3-methyl-1-oxobutan-2-yl)-1-(5-fluoropentyl)-1H-indazole-3-carboxamide
FUB-PB-22; quinolin-8-yl 1-(4-fluorobenzyle)-1H-indole-3-carboxylate
THJ-2201; [1-(5-fluoropentyl)-1H-indazol-3-yl](naphthalene-1-yl)methanone (Schedule I Federal Controlled Substances Act)

The following substance is an emerging substance in the United States, but has not yet been seen at the Utah Bureau of Forensic Sciences:

Acetyl fentanyl; (N-(1-phenethylpiperidin-4-yl)-N-phenylacetamide) (Schedule I Federal Controlled Substances Act)

- The Utah Legislature made tramadol a Schedule V controlled substance last year, having previously been reported as the fifth highest cause of drug overdose deaths in the State of Utah. The data and scheduling of tramadol as a controlled substance has been re-evaluated in 2015 following the May 14, 2014 effective date of the legislation. There has been a dramatic decrease in reported Tramadol exposures with Schedule V legislation last year. This data is provided by the Medical Examiner’s Office. In addition, the Utah Poison Control Center reports that Tramadol exposures represent a relatively small proportion of total consults and have not increased in the last year. Tramadol exposures reported to the UPCC include unintentional exposures (42%) of all tramadol exposures split between “unintentional general” where toddlers are orally exploring and therapeutic errors with therapeutic errors slightly ahead and “intentional” exposures (51%) of all exposures with a split between suicide, intentional misuse and abuse— with most being suicide attempts.

YEAR	Total Mentions	Accident	Suicide	Undetermined
2015 (through 09/01/2015)	15	--	1	--
2014	34	--	11	--
2013	39	22	9	8
2012	32	16	10	6
2011	26	9	9	8

3. We continue to monitor the interest in some legislators related to the medical use of marijuana, and the passage of HB 105 during the 2013 Legislative Session that legalizes the use of hemp extract oils for the treatment of intractable seizures in children. The CSAC has no legal responsibility for monitoring this program, but stands prepared to advise the Legislature on such matters, including the medical use of marijuana by providing information based on the latest scientific studies as to the potential benefits and health concerns, legal issues, and the perspective of the law enforcement community.

The Committee thanks you for your attention to these important issues and looks forward to continuing to serve as a consultative and advisory body to the Legislature.

Respectively Submitted,

The Controlled Substances Advisory Committee

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