## ACMD Advisory Council on the Misuse of Drugs

Chair: Professor Les Iversen NPS Committee Secretary: Linsey Urquhart 1<sup>st</sup> Floor (NE) Building 2 Marsham Street London SW1P 4DF Tel: 020 7035 8846 Email: <u>ACMD@homeoffice.gsi.gov.uk</u>

Sarah Newton MP Parliamentary Under Secretary of State for Vulnerability, Safeguarding and Countering Extremism Home Office 2 Marsham Street London SW1P 4DF

30 September 2016

Dear Minister,

## **Re: Temporary Class Drug Order on methiopropamine**

On 18 November 2015 the Advisory Council on the Misuse of Drugs (ACMD) wrote to the then Minister for Policing, Crime and Criminal Justice, Mike Penning, with a recommendation to lay a temporary class drug order (TCDO) pursuant to section 2A of the Misuse of Drugs Act 1971 on N-methyl-1-(thiophen-2-yl)propan-2-amine, (methiopropamine or MPA).

The ACMD's advice followed reports that MPA had been gaining popularity as a Novel Psychoactive Substance (NPS) and evidence of an increasing number of associated deaths and harms.<sup>1</sup> Of particular concern to the ACMD was the reported displacement to intravenous administration of MPA following the earlier TCDO on methylphenidate-based NPS in June 2016.<sup>2</sup>

The TCDO on MPA was introduced on 27 November 2015 and is due to expire on 26 November 2016. With this timing in mind, the ACMD started

<sup>&</sup>lt;sup>1</sup> <u>https://www.gov.uk/government/publications/acmds-temporary-class-drug-order-report-on-methiopropamine</u>

<sup>&</sup>lt;sup>2</sup> <u>https://www.gov.uk/government/publications/methylphenidate-based-novel-psychoactive-substances-temporary-class-drug-order-report</u>

gathering evidence from our stakeholders on MPA and invoked a Drugs Early Warning System (DEWS) request for information on MPA in June.

It has been difficult to find any significant additional data relating to harms, seizures and prevalence of MPA since our first report and the introduction of the TCDO. Much of the evidence we have received relates to the period prior to the TCDO's commencement.

Some of the evidence we have received for the period since the commencement of the TCDO, although mainly anecdotal, indicates that whilst the harms associated with the use of MPA remain, the prevalence and problematic use seen prior to the TCDO seem to have abated, particularly in relation to its intravenous administration:

- Police Scotland, who initially alerted the ACMD to the possible displacement to MPA from ethylphenidate have reported reduced instances of injecting of MPA;
- The number of phone call and database enquiries to TOXBASE (part of National Poisons Information Service (NPIS)) regarding MPA have reportedly decreased;
- There has been a reported decrease in the availability of MPA on online markets;
- Coroner reports of deaths where MPA has been detected as present in the body have also identified a number of other substances, making the role that MPA may have played in the death difficult to distinguish.

In light of this evidence our view is that the TCDO has been effective in halting the problematic proliferation of MPA. However, we cannot substantiate a recommendation for full control under the Misuse of Drugs Act 1971 at this stage due to lack of sufficient evidence to show that the level of misuse is capable of having harmful effects sufficient to constitute a social problem. To do so would be a disproportionate response to the current evidence available.

## Recommendation

The ACMD recommends that the TCDO for methiopropamine (MPA) is remade for up to a further 12 month period at its expiry (to expire 26 November 2017) to allow us time to gather and consider more evidence to make a substantiated recommendation.

The ACMD is of the opinion that TCDO action and TCDO-related offences remain proportionate and necessary whilst we gather this further evidence.

Yours sincerely,

Jes Fusen

Professor Les Iversen

Chair of ACMD

CC: Rt Hon. Amber Rudd MP (Home Secretary) Rt Hon. Jeremy Hunt MP (Secretary of State for Health) Nicola Blackwood MP (Parliamentary Under Secretary of State for Public Health and Innovation)