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TESTIMONY ON SENATE BILL 1452
RELATING TO UNIFORM CONTROLLED SUBSTANCE ACT
Before the Senate Committee on
PUBLIC SAFETY AND MILITARY AFFAIRS
Monday, February 3, 2025 3:15 PM
State Capitol Conference Room 225 & Videoconference

Chair Elefante, Vice Chair Wakai, and members of the Committee:

The Department of Law Enforcement (DLE) supports Senate Bill (SB) 1452, which proposes to update chapter 329, Hawaii Revised Statutes (HRS), to align with recent amendments to the Federal Controlled Substances Act as required under section 329-11, HRS.

This measure is necessary to maintain consistency between state and federal controlled substances laws, which is mandated by section 329-11, HRS. Keeping Hawaii's controlled substances schedules current with federal regulations is crucial for effective law enforcement, ensuring public safety, and maintaining compliance with national drug control standards.

The alignment of state and federal controlled substances regulations helps prevent confusion among law enforcement agencies, healthcare providers, and the public regarding the legal status of various substances. It also ensures that Hawaii's law enforcement can effectively coordinate with federal agencies in addressing drug-related crimes and maintaining public safety.

The DLE is requesting an amendment to SB 1452 to correct a drafting error that was made by the federal government when it initially scheduled the substance ANPP. The substance ANPP was initially named, "4-anilino-N-phenethyl-4-piperidine". Consequently, in a past act of the Legislature, the HRS was amended to list that substance in Schedule II , Section 329-16, HRS, consistent with that initial federal name. However, the DLE recently became aware that the federal government corrected the name of ANPP as "4-anilino-N-phenethylpiperidine". (No "4" in the name).

Consequently, DLE is requesting that the Committee allow an amendment in Section 329-16 (f)(3)(A), HRS to correct the spelling of ANPP as follows:

§329-16 Schedule II. (a) The controlled substances listed in this section are included in schedule II.

(b) Any of the following substances, except those narcotic drugs listed in other schedules, whether produced directly or indirectly by extraction from substances of vegetable origin, or independently by means of chemical synthesis, or by combination of extraction and chemical synthesis:

(1) Opium and opiate, and any salt, compound, derivative, or preparation of opium or opiate, excluding apomorphine, thebaine-derived butorphanol, dextrorphan, nalbuphine, nalmefene, naloxegol, naloxone, and naltrexone, and their respective salts, but including the following:

(A) Raw opium;

(B) Opium extracts;

(C) Opium fluid;

(D) Powdered opium;

(E) Granulated opium;

(F) Codeine;

(G) Ethylmorphine;

(H) Etorphine hydrochloride;

(I) Hydrocodone;

(J) Hydromorphone;

(K) Metopon;

(L) Morphine;

(M) Oxycodone;

(N) Oxymorphone;

(O) Thebaine;

(P) Dihydroetorphine;

(Q) Oripavine; and

(R) Tincture of opium;

(2) Any salt, compound, isomer, derivative, or preparation thereof which is chemically equivalent or identical with any of the substances referred to in paragraph (1), but not including the isoquinoline alkaloids of opium;

(3) Opium poppy and poppy straw;

(4) Coca leaves and any salt, compound, derivative, or preparation of coca leaves, and any salt, compound, derivative, or preparation thereof which is chemically equivalent or identical with any of these substances, but not including decocanized coca leaves or extractions which do not contain cocaine or ecgonine; cocaine or any salt or isomer thereof; and

(5) Concentrate of poppy straw (the crude extract of poppy straw in either liquid, solid, or powder form that contains the phenanthrene alkaloids of the opium poppy).

(c) Any of the following opiates, including their isomers, esters, ethers, salts, and salts of isomers, whenever the existence of these isomers, esters, ethers, and salts is possible within the specific chemical designation:

(1) Alfentanil;

(2) Alphaprodine;

(3) Anileridine;

(4) Bezitramide;

(5) Bulk Dextropropoxyphene (nondosage form);

(6) Carfentanil;

(7) Dihydrocodeine;

(8) Diphenoxylate;

(9) Fentanyl;

(10) Isomethadone;

(11) Levo-alphacetylmethadol (LAAM);

(12) Levomethorphan;

(13) Levorphanol;

(14) Metazocine;

(15) Methadone;

(16) Methadone-Intermediate, 4-cyano-2-dimethylamino-4, 4-diphenyl butane;

(17) Moramide-Intermediate, 2-methyl-3-morpholino-1, 1-diphenyl-propane-carboxylic acid;

(18) Oliceridine, including the free base form, and its salts, to include the fumarate salt, by definition;

(19) Pethidine (Meperidine);

(20) Pethidine-Intermediate-A, 4-cyano-1-methyl-4-phenylpiperidine;

(21) Pethidine-Intermediate-B, ethyl-4-phenylpiperidine-4-carboxylate;

(22) Pethidine-Intermediate-C, 1-methyl-4-phenylpiperidine-4-carboxylic acid;

(23) Phenazocine;

(24) Piminodine;

(25) Racemethorphan;

(26) Racemorphan;

(27) Remifentanil;

(28) Sufentanil;

(29) Tapentadol; and

(30) Thiafentanil.

(d) Depressants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including their isomers, esters, ethers, salts, and salts of isomers, esters, and ethers,

unless specifically excepted, whenever the existence of these isomers, esters, ethers, and salts is possible within the specific chemical designation:

(1) Amobarbital;

(2) Glutethimide;

(3) Pentobarbital;

(4) Phencyclidine;

(5) Secobarbital.

(e) Stimulants. Any material, compound, mixture, or preparation which contains any quantity of the following substances having a danger or probable danger associated with a stimulant effect on the central nervous system:

(1) Amphetamine, its salts, optical isomers, and salts of its optical isomers;

(2) Any substance which contains any quantity of methamphetamine, including its salts, isomers, and salts of isomers;

(3) Phenmetrazine and its salts;

(4) Methylphenidate; and

(5) Lisdexamfetamine, its salts, isomers, and salts of its isomers.

(f) Immediate precursor. Unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances:

(1) Immediate precursor to amphetamine and methamphetamine:

(A) Phenylacetone, phenyl-2-propanone(P2P), benzyl methyl ketone, methyl benzyl ketone;

(2) Immediate precursors to phencyclidine (PCP):

(A) 1-phenylcyclohexylamine; or

(B) 1-piperidinocyclohexanecarbonitrile(PCC); or

(3) Immediate precursor to Fentanyl:

(A) 4-anilino-N-phenethyl-4-piperidine (ANPP); or

(B) N-phenyl-N-(piperidin-4-yl)propionamide (norfentanyl).

(g) Hallucinogenic substances, unless listed in another schedule, shall include:

(1) Nabilone; and

(2) Dronabinol (-)-delta-9-trans tetrahydrocannabinol in an oral solution in a drug product approved for marketing by the United States Food and Drug Administration.

By updating chapter 329, HRS, we maintain our commitment to protecting public health while ensuring our state's controlled substances laws remain current and enforceable. If the changes recommended in SB 1452 do not become law, then the synchronization of our state laws, which are important for proper scheduling and regulation of new and emerging substances, will not be made and the temporary changes to the drug laws made by DLE, as permitted in statute, will be nullified. As a result, new and emerging substances of concern in Hawaii may pose risks to public health and safety.

Thank you for the opportunity to testify in support of this bill.

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SENATE COMMITTEE ON PUBLIC SAFETY AND MILITARY AFFAIRS
Thirty-Third State Legislature
Regular Session of 2025
State of Hawai`i

February 2, 2025

RE: S.B. 1452; RELATING TO THE UNIFORM CONTROLLED SUBSTANCE ACT.

Chair Elefante, Vice-Chair Wakai, and members of the Senate Committee on Public Safety and Military Affairs, the Department of the Prosecuting Attorney for the City and County of Honolulu submits the following testimony in **support** of S.B. 1452

S.B. 1452 updates the Uniform Controlled Substances Act to align with recent updates to its federal counterpart. It addresses the growing prevalence of designer opioids on the illicit market. These drugs have pharmacological similarities to morphine, heroin, and fentanyl. They operate on the same pain receptors and create similar risks for addiction. In recent years, these poisons have been manufactured and distributed on an industrial scale.

But the slight differences in their chemical structure mean these drugs presently evade Hawaiʻi law. Our courts hold that even a slight misspelling in the name of a scheduled drug will thwart a prosecution.[1] S.B. 1452 precisely identifies these dangerous synthetic opioids.

S.B. 1452 also schedules two hallucinogens and three stimulants in line with the federal regulation. Finally, S.B. 1452 removes fenfluramine from the schedule of controlled substances. The Drug Enforcement Administration undertook this same action in 2022, after the Food and Drug Administration approved this drug for treatment of Dravet syndrome.[2]

S.B. 1452 adds the following drugs to the Uniform Controlled Substances Act:

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[1] *State v. Meyer*, 61 Haw. 74 (1979) (reversing conviction for drug distribution because the statute mistakenly banned lysergic acid diethylamine rather than lysergic acid diethylamide).

[2] Schedules of Controlled Substances: Removal of Fenfluramine from Control, 87 Fed. Reg. 78,857 (Dec. 23, 2022), *available at* https://www.govinfo.gov/content/pkg/FR-2022-12-23/pdf/2022-27400.pdf.

A. Nine Specific Fentanyl-Related Substances

S.B. 1452 adds nine specific fentanyl-related substances to Schedule I under the Uniform Controlled Substances Act.[3] Substances placed on Schedule I have the highest degree of danger or probable danger.[4] These nine fentanyl-related substances are pharmacologically similar to morphine and fentanyl.[5] Available evidence suggests these drugs bind to and activate the same protein receptor implicated in the addictive mechanism for fentanyl.[6]

B. Brorphine

S.B. 1452 adds brorphine to Schedule I.[7] In 2023, the Drug Enforcement Administration added brorphine to Schedule I of the federal Controlled Substances Act.[8] Brorphine bears pharmacological resemblance to heroin and fentanyl.[9] It poses similar abuse potential and has already been associated with fatalities.[10] This substance not formulated or available for clinical use in the United States, but has been on the illicit drug market since April 2019.[11]

C. Etodesnitazene, protonitazene, and N-pyrrolidino etonitazene

S.B. 1452 adds etodesnitazene,[12] protonitazene,[13] and N-pyrrolidino etonitazene[14] to Schedule I. Last year, the Drug Enforcement Administration permanently added these three drugs to the federal Schedule I.[15] These synthetic opioids were first developed by a Swiss

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[3] See Appendix for the specific chemical names for these controlled substances, together with the relevant citation in S.B. 1452.

[4] *See* HRS § 329-13. *See also* HRS § 712-1240 (defining "dangerous drugs" to include all Schedule I substances); § 712-1243 (knowing possession of a dangerous drug in any amount constitutes a felony).

[5] Schedules of Controlled Substances: Placement of Nine Specific Fentanyl-Related Substances in Schedule I, 88 Fed. Reg. 22,391, 22,394 (Apr. 13, 2023), *available at* https://www.govinfo.gov/content/pkg/FR-2023-04-13/pdf/2023-07576.pdf.

[6] *Id.*

[7] S.B. 1452, p. 3, ll. 13-14.

[8] Schedule of Controlled Substances: Placement of Brorphine in Schedule I, 88 Fed. Reg. 13,692 (Mar. 6, 2023) (to be codified at 21 C.F.R. pt. 1308), *available at* https://www.govinfo.gov/content/pkg/FR-2023-03-06/pdf/2023-04364.pdf.

[9] *Id.*

[10] *Id.*

[11] *Id.*

[12] S.B. 1452, p. 4, ll. 11-13.

[13] S.B. 1452, p. 6, ll. 11-13.

[14] S.B. 1452, p. 6, ll. 14-16.

[15] Schedules of Controlled Substances: Placement of Etodesnitazene, N-Pyrrolidino Etonitazene, and Protonitazene in Schedule I, 89 Fed. Reg. 25,514 (Apr. 11, 2024) (to be codified at 21 C.F.R. pt. 1308), *available at* https://www.govinfo.gov/content/pkg/FR-2024-04-11/pdf/2024-07684.pdf.

pharmaceutical laboratory in the late 1950s.[16] Although the research never led to clinical applications, the drugs resurfaced in the illicit market around 2019.[17] As with other addictive opioids, these drugs are highly addictive and can induce dose-dependent respiratory depression.[18]

D. 2-Methyl AP-237

S.B. 1452 adds 2-methyl AP-237 to Schedule I.[19] Last year, the Drug Enforcement Administration added this drug to the federal Schedule I.[20] One study detected this synthetic opioid in at least seven deaths in the United States.[21] Federal prosecutors recently convicted two men for selling this drug in bulk quantities under a false label.[22]

E. Metonitazene

S.B. 1452 adds metonitazene to Schedule I.[23] In 2023, the Drug Enforcement Administration classified this drug under the federal Schedule I.[24] The drug was identified in twenty postmortem cases in seven different states over a nine-month period.[25] National

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[16] Schedules of Controlled Substances: Temporary Placement of Butonitazene, Etodesnitazene, Flunitazene, Metodesnitazene, Metonitazene, *N*-Pyrrolidino etonitazene, and Protonitazene in Schedule I, 87 Fed. Reg. 21,556, 21,557 (Apr. 12, 2022), *available at* https://www.govinfo.gov/content/pkg/FR-2022-04-12/pdf/2022-07640.pdf.

[17] *Id.*

[18] *Id.* at 21, 558.

[19] S.B. 1452, p. 5, ll. 20-21.

[20] Schedules of Controlled Substances: Placement of 2-Methyl AP-237 in Schedule I, 89 Fed. Reg. 18,793 (Mar. 15, 2024) (to be codified at 21 C.F.R. pt. 1308), *available at* https://www.govinfo.gov/content/pkg/FR-2024-03-15/pdf/2024-05543.pdf.

[21] Melissa F. Fogarty, et al., *Toxicological and Pharmacological Characterization of Novel Cinnamylpiperazine Synthetic Opioids in Humans and In Vitro Including 2-methyl AP-237 and AP-238*, 96 Archives Toxicology 1701-10 (2022).

[22] Press Release, U.S. Attorney's Office (W.D. Tex.), New Braunfels Man Sentenced to Five Years in Prison for Selling Misbranded Drugs (Oct. 26, 2023), *available at* https://www.fda.gov/inspections-compliance-enforcement-and-criminal-investigations/press-releases/new-braunfels-man-sentenced-five-years-prison-selling-misbranded-drugs.

[23] S.B. 1452, p. 6, ll. 1-2.

[24] Schedules of Controlled Substances: Placement of Metonitazene in Schedule I, 88 Fed. Reg. 56,466 (Aug. 18, 2023) (to be codified at 21 C.F.R. pt. 1308), *available at* https://www.govinfo.gov/content/pkg/FR-2023-08-18/pdf/2023-17778.pdf.

[25] Schedules of Controlled Substances: Temporary Placement of Butonitazene, Etodesnitazene, Flunitazene, Metodesnitazene, Metonitazene, *N*-Pyrrolidino etonitazene, and Protonitazene in Schedule I, 87 Fed. Reg. 21,556, 21,557-58 (Apr. 12, 2022), *available at* https://www.govinfo.gov/content/pkg/FR-2022-04-12/pdf/2022-07640.pdf.

laboratory data reported nearly four hundred encounters in eighteen states in a two-year period.[26] This drug is often suspected as heroin or fentanyl when first encountered by law enforcement.[27]

F. Eutylone

S.B. 1452 adds eutylone to Schedule I.[28] In 2023, the Drug Enforcement Administration specified the listing for this hallucinogen under the federal Schedule I.[29] It is a positional isomer of pentylone, meaning it has the same molecular formula and core structure, but a slightly different chemical rearrangement.[30] Both eutylone and pentylone are synthetic cathinones, commonly known as "bath salts."[31] The supply of eutylone has rapidly increased in the United States. From January through June 2017, eutylone was found in less than ten drug items obtained by law enforcement seizures in the United States.[32] During January through June 2021, that number rose to 8,379.[33]

G. Zipeprol

S.B. 1452 adds zipeprol to Schedule I.[34] In 2022, the Drug Enforcement Administration placed zipeprol under the federal Schedule I.[35] This drug is pharmacologically an opioid, but has some hallucinogenic properties.[36] Animal studies showed acute cardiovascular and respiratory toxicity when animals were continuously infused with the drug.[37] Reports also indicate users

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[26] *Id.* at 21,558.

[27] *Id.*

[28] S.B. 1452, p. 15, ll. 10-11.

[29] Specific Listing for Eutylone, a Currently Controlled Schedule I Substance, 88 Fed. Reg. 21,101 (Apr. 10, 2023) (to be codified at 21 C.F.R. pt. 1308), *available at* https://www.govinfo.gov/content/pkg/FR-2023-04-10/pdf/2023-07335.pdf.

[30] *Id.*

[31] *See* Schedules of Controlled Substances: Temporary Placement of 10 Synthetic Cathinones Into Schedule I, 79 Fed. Reg. 12,938, 12,939 (Mar. 7, 2014), *available at* https://www.govinfo.gov/content/pkg/FR-2014-03-07/pdf/2014-04997.pdf.

[32] R. Matt Gladden, et al., *Notes from the Field: Overdose Deaths Involving Eutylone (Psychoactive Bath Salts) — United States, 2020*, 71 MMWR MORB. MORTAL. WKLY REP. 1032-34 (2022), *available at* https://www.cdc.gov/mmwr/volumes/71/wr/mm7132a3.htm.

[33] *Id.*

[34] S.B. 1452, p. 15, ll.

[35] Schedules of Controlled Substances: Placement of Zipeprol in Schedule I, 87 Fed. Reg. 70,717 (Nov. 21, 2022), *available at* https://www.govinfo.gov/content/pkg/FR-2022-11-21/pdf/2022-25206.pdf.

[36] *Id.* at 70, 718.

[37] Schedules of Controlled Substances: Placement of Zipeprol in Schedule I, 85 Fed. Reg. 28,899, 28,901 (May 14, 2020), *available* at https://www.govinfo.gov/content/pkg/FR-2020-05-14/pdf/2020-09592.pdf.

may experience seizures at relatively low doses.[38] Clinical studies indicate that abusers of this drug experience psychological and physiological dependence, as well as withdrawal effects.[39]

H. Amineptine

S.B. 1452 adds amineptine to Schedule I.[40] In 2022, the Drug Enforcement Administration placed amineptine on the federal Schedule I.[41] This is a synthetic antidepressant with no currently accepted medical use in the United States.[42] Although previously prescribed in Europe and Asia, it has been withdrawn from over four dozen countries for safety reasons.[43] Adverse effects include liver and pancreatic damage, as well as severe acne requiring hospitalization.[44] It has also high potential for abuse, in ways similar to cocaine and methamphetamine.[45]

I. Mesocarb

S.B. 1452 adds mesocarb to Schedule I.[46] In 2022, the Drug Enforcement Administration placed mesocarb on the federal Scehdule I.[47] This drug is marketed in Russia as a treatment for attention deficit hyperactivity disorder, but has no accepted medical use in the United States.[48] The drug has a slower onset than methamphetamine, but its stimulant effects on the central nervous system last longer.[49] Mesocarb is banned by the International Olympics Committee and the World Anti-Doping Agency.[50]

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[38] *Id.*

[39] *Id.* at 28,902.

[40] S.B. 1452, p. 16, l. 3.

[41] Schedules of Controlled Substances: Placement of Amineptine in Schedule I, 87 Fed. Reg. 68,895 (Nov. 17, 2022), *available at* https://www.govinfo.gov/content/pkg/FR-2022-11-17/pdf/2022-25003.pdf.

[42] *Id.* at 68,895, 68,896.

[43] *Id.* at 68,896.

[44] *Id.*

[45] *Id.*

[46] S.B. 1452, p. 16, ll. 8-10.

[47] Schedules of Controlled Substances: Placement of Mesocarb in Schedule I, 87 Fed. Reg. 71,247 (Nov. 22, 2022), *available at* https://www.govinfo.gov/content/pkg/FR-2022-11-22/pdf/2022-25219.pdf.

[48] Schedules of Controlled Substances: Placement of Mesocarb in Schedule I, 86 Fed. Reg. 43,978, 43,979 (Aug. 11, 2021), *available at* https://www.govinfo.gov/content/pkg/FR-2021-08-11/pdf/2021-16489.pdf.

[49] *Id.* at 43,980.

[50] *Id.* at 43,981.

J. Methiopropamine

S.B. 1452 adds methiopropamine to Schedule I as a proscribed stimulant.[51] In 2022, the Drug Enforcement Administration added this drug to Schedule I.[52] It bears chemical resemblance to methamphetamine.[53] Both data from animal studies and self-reports from methiopropamine abusers indicate it affects the nervous system in similar ways to methamphetamine.[54] There is no currently accepted medical use for this drug in the United States.[55]

Thank you for the opportunity to testify.

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[51] S.B. 1452, p. 16, ll. 12-13.

[52] Schedules of Controlled Substances: Placement of Methiopropamine in Schedule I, 87 Fed. Reg. 75,470 (Dec. 9, 2022) (to be codified at 21 C.F.R. pt. 1308), *available at* https://www.govinfo.gov/content/pkg/FR-2022-12-09/pdf/2022-26805.pdf.

[53] *Id.*

[54] *Id.* at 75,471.

[55] *Id.*

APPENDIX

Chemical Name	S.B. 1452 Citation
alpha′-methyl butyryl fentanyl (2-methyl-N-(1-phenethylpiperidin-4-yl)-N-phenylbutanamide)	p. 2, ll. 6-7
2′,5′-dimethoxyfentanyl (N-(1-(2,5-dimethoxyphenethyl)piperidin-4-yl)-Nphenylpropionamide)	p. 4, ll. 4-6
3-furanyl fentanyl (N-(1-phenethylpiperidin-4-yl)-N-phenylfuran-3-carboxamide)	p. 5, ll. 5-6
isovaleryl fentanyl (3-methyl-N-(1-phenethylpiperidin-4-yl)-Nphenylbutanamide)	p. 5, ll. 9-10
meta-fluorofentanyl (N-(3-fluorophenyl)-N-(1-phenethylpiperidin4-yl)propionamide)	p. 5, ll. 14-15
meta-fluoroisobutyryl fentanyl (N-(3-fluorophenyl)-N-(1-phenethylpiperidin-4-yl)isobutyramide)	p. 5, ll. 16-17
ortho-fluorofuranyl fentanyl (N-(2-fluorophenyl)-N-(1-phenethylpiperidin4-yl)furan-2-carboxamide)	p. 7, ll. 6-7
para-methoxyfuranyl fentanyl (N-(4-methoxyphenyl)-N-(1-phenethylpiperidin-4-yl)furan-2-carboxamide)	p. 8, ll. 6-7
para-methylcyclopropyl fentanyl (N-(4-methylphenyl)-N-(1-phenethylpiperidin-4-yl)cyclopropanecarboxamide)	p. 8, ll. 8-9