ONDCP seeks to foster healthy individuals and safe communities by effectively leading the Nation’s effort to reduce drug use and its consequences.

Synthetic Drugs

Overview and History

- Synthetic marijuana (often known as “K2” or “Spice”) and bath salts products are often sold in legal retail outlets as “herbal incense” and “plant food,” respectively, and labeled “not for human consumption” to mask their intended purpose and avoid FDA regulatory oversight of the manufacturing process.
- Synthetic marijuana consists of plant material that has been laced with substances (synthetic cannabinoids) that users claim mimics Δ9-tetrahydrocannabinol (THC), the primary psychoactive active ingredient in marijuana, and are marketed toward young people as a “legal” high.
- Use of synthetic marijuana is alarmingly high. According to data from the 2011 Monitoring the Future survey of youth drug-use trends, 11.4 percent of 12th graders used Spice or K2 in the past year, making it the second most commonly used illicit drug among seniors.
- Bath salts contain manmade chemicals related to amphetamines that often consist of methylenedioxypyrovalerone (MDPV), mephedrone, and methylene, also known as substituted cathinones.
- The Administration has been working over the past 24 months with Federal, Congressional, State, local, and non-governmental partners to put policies and legislation in place to combat this threat, and to educate people about the tremendous health risk posed by these substances.

A Rapidly Emerging Threat

- Synthetic cannabinoids in herbal incense products were first detected in the United States in November 2008, by the Drug Enforcement Administration’s (DEA) forensic laboratory. These products were first encountered by U.S. Customs and Border Protection.
- According to the American Association of Poison Control Centers, 2,906 calls relating to human exposure to synthetic marijuana were received in 2010. Twice that number (6,959) were received in 2011, and 639 had been received as of January 2012 (see chart at right).

Calls Received by Poison Control Centers for Human Exposure to Synthetic Marijuana, 2010 to January 2012

<table>
<thead>
<tr>
<th>Year</th>
<th>Calls Received</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>2,906</td>
</tr>
<tr>
<td>2011</td>
<td>6,959</td>
</tr>
</tbody>
</table>

Source: American Association of Poison Control Centers, Synthetic Marijuana Data, Updated February 8, 2012 (Preliminary data).

February 2012
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According to the American Association of Poison Control Centers, the number of calls related to bath salt exposure received by poison control centers across the country increased by more than 20 times in 2011 alone, up from 304 in 2010 to 6,138 (see chart at left).

### Risk to the Public Health
- Health warnings have been issued by numerous State and local public health authorities and poison control centers describing the adverse health effects associated with the use of synthetic cannabinoids, substituted cathinones, and their related products.
- The effects of synthetic marijuana include agitation, extreme nervousness, nausea, vomiting, tachycardia (fast, racing heartbeat), elevated blood pressure, tremors and seizures, hallucinations, and dilated pupils. Similar to the adverse effects of cocaine, LSD and methamphetamine, bath salt use is associated with increased heart rate and blood pressure, extreme paranoia, hallucinations, and violent behavior, which causes users to harm themselves or others.

### Sources and Continuing Availability
- According to U.S. Customs and Border Protection, a number of synthetic marijuana and bath salts products appear to originate overseas and are manufactured in the absence of quality controls and devoid of governmental regulatory oversight.
- Law enforcement personnel have also encountered the manufacture of herbal incense products in such places as residential neighborhoods. These products and associated synthetic cannabinoids are readily accessible via the Internet.
- The large profits from sales, plus the fact that these chemicals can be easily synthesized to stay one step ahead of control, indicate there is no incentive to discontinue retail distribution of synthetic cannabinoid products under the current statutory and regulatory scheme.

### Government Efforts to Ban Synthetic Drug Products
- The DEA and State drug control agencies have recognized the need to monitor and, when necessary, control these chemicals. The Comprehensive Crime Control Act of 1984 amends the Controlled Substances Act (CSA) to allow the Attorney General to place a substance temporarily in Schedule I when it is necessary to avoid an imminent hazard to the public safety (21 U.S.C. § 811(h)).
- On October 21, 2011, DEA exercised its emergency scheduling authority to control some of the synthetic substances used to manufacture bath salts; these synthetic stimulants are now designated as Schedule I substances.
- In March 2011, five synthetic cannabinoids were temporarily categorized as Schedule I substances under the CSA. Unless permanently controlled, the ban on these five substances is set to expire in March 2012.
- At least 38 states have taken action to control one or more of these chemicals. Prior to 2010, synthetic cannabinoids were not controlled by any State or at the Federal level.
Congress has taken initial steps to ban many of these substances, and the Administration has sought to support their efforts.

The Synthetic Drug Control Act (HR 1254) was approved by the House of Representatives on December 8, 2011. The Department of Justice has issued a “views letter” in support of the Act.

In the Senate, several pieces of legislation concerning synthetic drugs are pending, including one that deals specifically with synthetic cannabinoids.

Resources

- Drug Policy Information: http://www.whitehouse.gov/ondcp
- Drug Enforcement Administration: http://www.justice.gov/dea/pubs/pressrel/pr030111.html
- National Institute on Drug Abuse (NIDA):
  - Synthetic marijuana (“spice”): http://www.drugabuse.gov/infofacts/Spice.html
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