For discussion on
6 February 2018

Legislative Council Panel on Security

**Proposed Amendments to the
First Schedule to the Dangerous Drugs Ordinance and
Schedule 2 to the Control of Chemicals Ordinance**

PURPOSE

This paper seeks Members' views on the Administration's proposal to –

(a) bring five dangerous drugs, namely ethylphenidate, methiopropamine, MDMB-CHMICA, 5F-APINACA and U-47700 under control in the First Schedule to the Dangerous Drugs Ordinance (DDO) (Cap. 134); and

(b) bring two chemicals, namely ANPP and NPP under control in Schedule 2 to the Control of Chemicals Ordinance (CCO) (Cap. 145).

BACKGROUND

Ethylphenidate (EPH)

2. According to the report of the 38th Expert Committee on Drug Dependence (ECDD) of the World Health Organization (WHO) published in November 2016, EPH is a homologue of methylphenidate[1]. EPH demonstrates typical adverse effects of amphetamine-like stimulants, including tachycardia, hypertension, dilated pupils, agitation and fever. Its use has been associated with a number of intoxications and fatalities,

[1] Methylphenidate has been included in both the First Schedule to DDO and Schedule 3 (i.e. substances required to be sold by retail only upon a prescription) and Schedule 10 (Poisons List) to the Pharmacy and Poisons Regulations (Cap. 138A). Methylphenidate is used in the treatment of attention deficit hyperactivity disorder.

including one death in the United Kingdom (UK) in 2015 attributable solely to use of the drug.

3. During the 60th Session of the United Nations Commission on Narcotic Drugs (UNCND) held in March 2017, Member States adopted ECDD's recommendation to place EPH under international control.

4. Currently, EPH is not controlled in Hong Kong. There is no record of local seizure of EPH by law enforcement agencies. EPH does not have any recognised medical use and there is no registered pharmaceutical product containing this substance in Hong Kong. As regards trade declarations, there is no record of import and export of this substance since January 2013.

Methiopropamine (MPA)

5. According to the report of the 38th ECDD of the WHO, MPA is a methamphetamine analogue having similar effects as amphetamine[2]. Reported adverse effects include chest pain/tightening, tachycardia, anxiety, panic attacks, perspiration, headache, nausea, difficulty in breathing, vomiting, difficulty in urinating, sexual dysfunction, auditory and visual hallucinations. According to the Advisory Council on the Misuse of Drugs of the UK, MPA was implicated in the cause of death in over 30 cases between 2012 and 2016.

6. During the 60th Session of UNCND, Member States adopted ECDD's recommendation to place MPA under international control.

7. Currently, MPA is not controlled in Hong Kong. There is no record of local seizure of MPA by law enforcement agencies. MPA does not have any recognised medical use and there is no registered pharmaceutical product containing this substance in Hong Kong. As regards trade declarations, there is no record of import and export of this substance since January 2013.

MDMB-CHMICA

8. According to the report of the 38th ECDD of the WHO, MDMB-CHMICA is used as an active ingredient of products sold as

[2] Both methamphetamine and amphetamine have been included in the First Schedule to DDO.

cannabis[3] substitutes. Use of MDMB-CHMICA has been associated with acute toxicities and serious adverse events, including respiratory acidosis, hypothermia, loss of consciousness, severe behavioural and psychological effects. 29 deaths were associated with MDMB-CHMICA in Europe between 2014 and 2015.

9. During the 60th Session of UNCND, Member States adopted ECDD's recommendation to place MDMB-CHMICA under international control.

10. Currently, MDMB-CHMICA is not controlled in Hong Kong. There is no record of local seizure of MDMB-CHMICA by law enforcement agencies. MDMB-CHMICA does not have any recognised medical use and there is no registered pharmaceutical product containing this substance in Hong Kong. As regards trade declarations, there is no record of import and export of this substance since January 2013.

5F-APINACA

11. According to the report of the 38th ECDD of the WHO, 5F-APINACA (also known as 5F-AKB-48) belongs to the category of synthetic cannabinoid receptor agonists, which may cause nausea, vomiting, agitation, hallucinations, panic attacks, tachycardia, hypertension, and occasionally chest pain, acute psychosis, and seizures. Long term use of 5F-APINACA is characterised by loss of appetite, cognitive impairment, breathlessness, cardiac conditions requiring medication, skin ablations, tooth decay, lethargy, apathy, tremors and insomnia. One case of fatal 5F-APINACA intoxication was reported in the UK in 2015.

12. During the 60th Session of UNCND, Member States adopted ECDD's recommendation to place 5F-APINACA under international control.

13. Currently, 5F-APINACA is not controlled in Hong Kong. There is no record of local seizure of 5F-APINACA by law enforcement agencies. 5F-APINACA does not have any recognised medical use and there is no registered pharmaceutical product containing this substance in Hong Kong. As regards trade declarations, there is no record of import and export of this substance since January 2013.

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[3] Cannabis has been included in the First Schedule to DDO.

U-47700

14. According to the report of the 38th ECDD of the WHO, U-47700 demonstrates opiate-like adverse effects, including pinpoint pupils, respiratory depression, cyanosis, and depressed consciousness. More than 15 fatalities were associated with the presence of U-47700 in Europe and the United States (US) in 2016.

15. During the 60th Session of UNCND, Member States adopted ECDD's recommendation to place U-47700 under international control.

16. Currently, U-47700 is not controlled in Hong Kong. U-47700 does not have any recognised medical use and there is no registered pharmaceutical product containing this substance in Hong Kong. As regards trade declarations, there is no record of import and export of this substance since January 2013.

ANPP and NPP

17. According to the report of the International Narcotics Control Board (INCB) [4] published in February 2017, ANPP is an immediate precursor of fentanyl [5] and acetyl fentanyl [6] which are very potent narcotic drugs typically 10 to 100 times stronger than heroin. NPP can be used as a starting material for ANPP, or as a direct precursor to a number of fentanyl analogues. Fentanyl and fentanyl analogues caused over 9 000 overdose deaths in the US in 2015.

18. INCB is of the opinion that international control of ANPP and NPP is required in order to limit their availability to traffickers, with a view to reducing the quantity of fentanyl, acetyl fentanyl and other fentanyl analogues illicitly manufactured from these substances and trafficked internationally.

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[4] INCB is the independent monitoring body for the implementation of the United Nations international drug control conventions.

[5] Fentanyl has been included in both the First Schedule to DDO and Schedule 10 (Poisons List) to the Pharmacy and Poisons Regulations (Cap. 138A).

[6] Acetyl fentanyl has been included in the First Schedule to DDO.

19. During the 60th Session of UNCND, Member States adopted INCB's recommendation to place ANPP and NPP under international control.

20. Currently, ANPP and NPP are not controlled in Hong Kong. There is no registered pharmaceutical product containing ANPP or NPP in Hong Kong. As regards trade declarations, there is no record of import and export of these two substances since January 2013.

PROPOSAL

EPH, MPA, MDMB-CHMICA, 5F-APINACA and U-47700

21. Under DDO, substances included in Part I of the First Schedule are dangerous drugs and are subject to the control of a licensing scheme administered by the Department of Health. The manufacture, import, export and supply of these substances will require respective licences issued by the Department of Health. Trafficking and manufacturing of the substances in contravention of DDO will be subject to a maximum penalty of life imprisonment and a fine of $5 million. Possession and consumption of the substances in contravention of DDO will be subject to a maximum penalty of 7 years' imprisonment and a fine of $1 million.

22. In order to enable law enforcement agencies in Hong Kong to respond effectively to the latest developments as set out above, we propose including EPH, MPA, MDMB-CHMICA, 5F-APINACA and U-47700 in the First Schedule to DDO.

ANPP and NPP

23. Under CCO, substances specified in Schedule 2 are subject to the control of a licensing scheme administered by the Customs and Excise Department. It is an offence for a person to have in his/her possession, manufacture, transport or distribute these substances for the unlawful production of dangerous drugs; or import or export these substances not under and in accordance with a licence. The maximum penalty is imprisonment for 15 years and a fine of $1 million.

24. Given the adversity of the use of ANPP and NPP as outlined above, we propose including these two substances in Schedule 2 to CCO.

CONSULTATION

25. The Administration has consulted relevant trades, as well as holders of licenses issued under DDO, CCO and the Pharmacy and Poisons Ordinance (Cap. 138). There was no adverse comment.

26. The Administration has also consulted the Action Committee Against Narcotics, which supports the proposed control.

WAY FORWARD

27. Pursuant to section 50(1) of DDO, the Chief Executive may by order published in the Gazette amend the First Schedule to DDO. Section 18A(1) of CCO provides that the Secretary for Security may by order amend Schedule 2 to CCO.

28. After obtaining Members' views on the above proposal, we plan to table the relevant amendment orders in the Legislative Council for negative vetting within the 2017-2018 legislative session.

ADVICE SOUGHT

29. Members are invited to comment on the proposal as set out in paragraph 1 above.

Narcotics Division
Security Bureau
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