

HB

163

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Copies of minutes listed below were originally included in this file. The minutes are available on the legislative computer database. In order to save space copies of minutes have not been left in the files.

Mary Pagenkopf

Senate Rules Committee 5/8/97 1:10 pm

Alaska State Legislature

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Session Address:
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Official Business

Representative Al Vezey

HB 163

CLASSIFYING GAMMA HYDROXYBUTYRATE AS A CONTROLLED SUBSTANCE

Gamma Hydroxybutyrate (GHB), is known by street names that include Liquid E, Liquid X, GBH, Gib, liquid ecstasy, Scoop, Georgia Home Boy, Natural Sleep-500, and Oxy-sleep. is one of the many "date rape" drugs being used in the United States. Illegal use of the drug is on the increase in the United States and passed illegal drug use trends indicate that Alaska will soon be confronted with GHB's effects. Currently, GHB is not scheduled as a controlled substance in Alaska.

GHB depresses the respiratory system and reduces the amount of oxygen the brain receives, resulting in unconsciousness and loss of memory. As is the case with Rohypnol, victims of drug induced rape through use of GHB can not identify their victims and conviction is difficult and rare. This bill further send the message that we will not tolerate in our society those who would perpetrate sexual abuse.

According to James Tolliver of DEA's Seattle office, the major problem with GHB is this drug is exclusively made in home laboratories. He said home brewers mix the chemicals into a milky paste which they let sit. After a while the liquid separates from the powder. If the compound sits longer, the liquid evaporates and the producer has a powder material. The powdery salt dissolve instantly when added to liquid. The drug is odorless and nearly tasteless so is virtuously undetectable in a drink.

Until the drug was banned by FDA, bodybuilders used it as a "soft drug" steroid to build muscles and enhance performance.

Orphan Medical is currently going through the FDA process to get approval to use **Xyrem**, a trademark name for gamma hydroxybutyrate in powder form, for Narcolepsy treatment.

California passed legislation on February 25, 1997 that classifies the drug as a Schedule IV Controlled Substance.

FISCAL NOTE

STATE OF ALASKA

BILL
NO:

HB 163

1997 LEGISLATIVE SESSION

Revision Date: _____	Dept. Affected: <u>Public Safety</u>
Title: <u>Gamma-Hydroxybutyrate as Controlled</u>	<u>DPS Statewide Support</u>
Substance _____	Component: <u>Commissioner's Office</u>
Sponsor: <u>Representative Vezey</u>	
Requestor: <u>H. Judiciary</u>	COMPONENT SERIAL NO. <u>0523</u>

EXPENDITURES/REVENUES: (Thousands of Dollars) (inflation not included)

OPERATING	FY 98	FY 99	FY 00	FY 01	FY 02	FY 03
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-
CAPITAL EXPENDITURES	-0-	-0-	-0-	-0-	-0-	-0-
CHANGE IN REVENUES ()	-0-	-0-	-0-	-0-	-0-	-0-
Code Revenue						

FUNDING: (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1006 GF/MHTIA						
Other						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

Estimate of current year (FY 97) impact: \$ _____

POSITIONS

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

ANALYSIS (Attach a separate page if necessary.)

No fiscal impact is anticipated to the Department of Public Safety

Prepared By	Sandy Perry-Provost, Special Assistant to the Commissioner	Phone:	465-4322
Division	Commissioner's Office	Date:	2/22/97
Approved by Commissioner:		Date:	4/22/97
Agency	Ronald L. Otte, Dept. of Public Safety		

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FISCAL NOTE

STATE OF ALASKA
1997 LEGISLATIVE SESSION

BILL NO. HB 163

Revision Date: _____

Department Affected: Administration

Title: "An Act relating to designating gamma-Hydroxybutyrate as a schedule IVA controlled substance"

BRU: Public Defender Agency

Component: Public Defender Agency

Sponsor: Representative Vezey

COMPONENT SERIAL NO. 1631

Requestor: (H) JUD

EXPENDITURES/REVENUES:

(Thousands of Dollars)

OPERATING EXPENDITURES	FY 98	FY 99	FY 00	FY 01	FY 02	FY 03
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES	0.0	0.0	0.0	0.0	0.0	0.0
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CHANGE IN REVENUES ()	0.0	0.0	0.0	0.0	0.0	0.0
-------------------------------	-----	-----	-----	-----	-----	-----

FUND SOURCE:

(Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
OTHER						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY 97) cost: \$ 0.0

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

ANALYSIS: (Attach a separate page if necessary.)

The bill makes gamma-Hydroxybutyrate a schedule IVA controlled substance and could result in charges ranging in offense level from a class B felony down to an A misdemeanor. The Department of Law has not been made aware of any such cases in Alaska.

Prepared by: Barbara K. Brink, Director
Division: Public Defender Agency

Phone: (907) 264-4414
Date: _____

Approved by Commissioner: Mark Boyer
Agency: Department of Administration

Date: 4/22/97

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House Targets Another 'Date Rape' Drug For Felony Status

For Immediate Release: May 2, 1997

Contact: Rep. Al Vezey (907) 465-3719

JUNEAU - Targeting drugs used in conjunction with sexual assault, the House of Representative Friday unanimously passed a measure which makes the use and possession of the "date rape" drug Gamma Hydroxybutyrate (GHB), a controlled substance and possession a felony.

Representative Al Vezey (R-Fairbanks), sponsor of HB 163 which outlaws GHB, said the drug is known by street names that include Liquid E, Liquid X, GBH, Gib, liquid ecstasy, Scoop, Georgia Home Boy, Natural Sleep-500, and Oxy-sleep.

Rep. Vezey said it is one of the many date rape drugs being used in the United States. The Legislature recently passed HB 69, which classifies Flunitrazepam, also known as Rohypnol, as a controlled substance and makes possession of that drug a felony.

Vezey said the illegal use of GMB is also on the increase in the United States and past illegal drug use trends indicate that Alaska will soon be confronted with the increased use of GHB's, just as Rohypnol use has recently been confirmed in Alaska. Currently, GHB is not scheduled as a controlled substance in Alaska or by the Federal government. The Drug Enforcement Agency is currently working to schedule GHB as a controlled substance under federal law.

GHB depresses the respiratory system and reduces the amount of oxygen the brain receives, resulting in unconsciousness.

"As is the case with Rohypnol, victims of drug induced rape through use of GHB can not identify their victims and conviction is difficult and rare. This bill further sends the message that we will not tolerate those in our society who would perpetrate drug induced sexual assault," said Vezey.

According to James Tolliver of the DEA's Seattle office, the major problem with GHB is this drug is exclusively made in home laboratories. The drug is odorless and nearly tasteless so it is virtuously undetectable in a drink.



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March 1997

Gamma Hydroxy Butyrate Use — New York and Texas, 1995–1996

Gamma hydroxy butyrate (GHB) is a central nervous system depressant approved as an anesthetic in some countries; however, with the exception of investigational research, it is not approved for any use in the United States. Primary groups using GHB include party and nightclub attendees and bodybuilders. In addition, GHB is one of several agents characterized as a "date rape" drug. During August 1995–September 1996, poison control centers in New York and Texas received reports of 69 acute poisonings and one death attributed to ingestion of GHB. This report describes two cases and summarizes the investigations of GHB use in Texas and New York. The findings of these investigations underscore the health hazards associated with use of GHB.

Texas

At 12:30 p.m. on August 5, 1996, a 17-year-old girl with no previous history of drug or alcohol use was admitted to an emergency department (ED) because of cardiac arrest with cardiopulmonary resuscitation in progress. She was pronounced dead at 12:40 p.m. On the night of August 4, she had been at a local dance club, where she was reported to have ingested soft drinks. An autopsy was performed; multiple toxicologic screens of blood and bile samples did not detect alcohol or other drugs. However, on September 13, a test on previously obtained serum detected a serum level of 27 mg/L of GHB.

From November 14, 1995, through September 30, 1996, the Texas Department of Health received reports of 57 persons who had adverse health effects attributed to ingestion of GHB, including the one death described in this report. Of the 57 reports, 30 were received from the Dallas Poison Control Center, and 26 were received from the Galveston Poison Control Center. The death was reported by the Assistant Medical Examiner in Harris County, who listed the death as a homicide as the result of GHB toxicity. Of the 56 reports from the poison control centers, 34 involved males; 10 reports involved teenagers aged 16–18 years. Nineteen persons were treated in and released from hospital EDs, and 25 were admitted to intensive-care units with severe clinical symptoms, including coma (15), respiratory depression (three), and agitation (one); six required intubation. Of the 56 reports, 12 included ingestion of both alcohol and GHB, and three included the use of GHB with other drugs.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES / Public Health Service

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MMWR

April 4, 1997

*Gamma Hydroxy Butyrate Use — Continued***New York**

On October 30, 1996, a 20-year-old man who was unresponsive after several episodes of vomiting was taken to an ED 2½ hours after ingesting a mixture of GHB and sodium hydroxide. He was intubated and admitted to the intensive-care unit, where a bronchoscopy indicated friable lung tissue that was attributed to aspiration of gastric contents containing sodium hydroxide. He developed bilateral pneumothoraces and had generalized seizures and was transferred to a third hospital for possible extracorporeal membrane oxygen therapy and lung transplant. However, his condition improved, and he was extubated and placed on supportive care and recovered.

During August 27, 1995–October 30, 1996, the Long Island Regional Poison Control Center received reports of 13 persons with exposure to GHB. All 13 were evaluated in hospital EDs. Four of the 13 also consumed ethanol. All five persons initially had altered mental status, including coma (three), stupor (one), and inebriation (one). Eight of the 13 persons had prepared GHB at home using sodium hydroxide and butyrolactone; of the eight, three required admission to a hospital.

Reported by: J Carter, DO, H Mofenson, MD, T Caraccio, PharmD, Long Island Regional Poison Control Center, Winthrop-Univ Hospital, New York; P Smith, MD, State Epidemiologist, D Morse, MD, New York State Dept of Health. C Keys, MD, L Williams, Poison Center Network, Div of Emergency Medicine, Univ of Texas Southwestern School of Medicine, Dallas; G Coody, Drug and Medical Devices Div, Bur of Food and Drug Safety, Texas Dept of Health. Office of Diversion Control, Drug Enforcement Administration. Environmental Hazards Epidemiology Section, Health Studies Br, Div of Environmental Hazards and Health Effects, National Center for Environmental Health, CDC.

Editorial Note: GHB increases dopamine levels in the brain and has effects through the endogenous opioid system; most GHB is excreted during the first hours after ingestion (1). Manifestations of acute GHB toxicity include coma, seizures, respiratory depression, and vomiting. Other documented effects of GHB include amnesia and hypotonia (associated with doses of 10 mg/kg body weight); a normal sequence of rapid eye movement (REM) and non-REM sleep (doses of 20–30 mg/kg body weight); and anesthesia (doses of approximately 50 mg/kg body weight). Doses of >50 mg/kg body weight can decrease cardiac output and produce severe respiratory depression, seizure-like activity, and coma (2); coma and respiratory depression may be potentiated by concomitant use of alcohol (3). There is no antidote for GHB overdose, and treatment is restricted to nonspecific supportive care. Patients in New York and Texas have required ED care; many of those hospitalized have required ventilatory support and intensive care.

In the United States, GHB has been produced clandestinely in widely varying degrees of purity. GHB has been marketed as a liquid or powder and has been sold on the street under names such as "Grievous Bodily Harm," "Georgia Home Boy," "Liquid Ecstasy," "Liquid X," "Liquid E," "GHB," "GBH," "Soap," "Scoop," "Easy Lay," "Salty Water," "G-Riffick," "Cherry Menth," and "Organic Quaalude." Improper preparation of GHB can result in a mixture of GHB and sodium hydroxide that can be severely toxic because of the combined effects of the GHB and the direct caustic effects of sodium hydroxide.

In Dallas, GHB use has been associated with events at which several persons have been found comatose. Some persons who have sustained adverse effects of GHB have reported being given the drug surreptitiously (e.g., having it slipped into their drink), while others have admitted to intentional use. The Drug Enforcement

Gamma Hydroxy Butyrate Use — Continued

Administration (DEA) is examining the distribution and abuse of GHB in the United States; although distribution has been documented in 27 states, GHB use is highly prevalent in California, Florida, Georgia, and Texas.

In the United States, GHB is under specific Food and Drug Administration exemptions for investigational research protocols for the treatment of narcolepsy. Although possession of GHB is not illegal under federal law, its manufacture and sale is prohibited under the Food, Drug, and Cosmetic Act. In Georgia and Rhode Island, state controlled substances acts have classified GHB into Schedule I*, and other states are considering similar action. In addition, the DEA is gathering information and considering a scheduling review for possible control of GHB under the Federal Controlled Substances Act†. Public health officials should report episodes of adverse effects of GHB use to DEA, telephone (202) 307-7183.

References

1. Vayer P, Mandel P, Maltre M. Gamma-hydroxy butyrate, a possible neurotransmitter. *Life Sci* 1987;41:1547-57.
2. CDC. Multistate outbreak of poisonings associated with illicit use of gamma hydroxy butyrate. *MMWR* 1990;39:861-3.
3. Mamelek M. Gammahydroxybutyrate: an endogenous regulator of energy metabolism. *Neurosci Biobehav Rev* 1989;13:167-98.

*Drugs that do not have currently accepted medical use in the United States, have a high abuse potential, and are not proven to be safe under medical supervision.

†Public Law no. 91-513.

Pregnancy-Related Behaviors Among Migrant Farm Workers — Four States, 1989-1993

The U.S. workforce includes an estimated 3-5 million migrant and seasonal farm workers (1,2); approximately 16% of migrant farm workers are women (R. Mines, U.S. Department of Labor, personal communication, 1997). Early enrollment in prenatal care and proper weight gain during pregnancy can reduce the risk for poor birth outcomes (1-4). To characterize pregnancy-related behaviors and outcomes among migrant farm workers, CDC analyzed data for 1989-1993 on prenatal-care use, weight gain during pregnancy, and birth outcomes among migrant farm workers enrolled in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) in four states participating in CDC's Pregnancy Nutrition Surveillance System (PNSS). This report presents the results of that analysis, which indicate that the goals of the national health objectives for the year 2000 for pregnant migrant women enrolled in WIC have not been met.

The PNSS collects prenatal and postpartum information about women and their infants who are enrolled in publicly funded health, nutrition, and food-assistance programs. For this report, PNSS data from four states were compared for two groups of pregnant women enrolled in WIC programs: women who were classified as migrants (n=4840) and those who were not (n=610,728). A migrant farm worker was defined as a person whose primary employment is in agriculture on a seasonal basis, who has been employed within the previous 24 months, and who establishes, for the purposes of such employment, a temporary abode in the United States (5).

Overall, migrants were more likely than nonmigrants to be of Hispanic origin, younger, and married and were less likely to have attained a high school education

GAMMA-HYDROXYBUTYRATE (GHB)

James M. Tolliver, Ph.D.
Pharmacologist
Drug and Chemical Evaluation Section
Office of Diversion Control
Drug Enforcement Administration
March 27, 1997

Other Names: Sodium Oxybate, 4-Hydroxybutanoic acid monosodium salt.

Pharmacological Effects of GHB:

Naturally occurring metabolite in mammalian tissues.
Depression of the Central Nervous System (CNS) --> Sedation, Sleep
1 to 3 Grams ----> Sleep
Greater than 3 to 4 Grams ----> Anesthesia
Promotes release of growth hormone from pituitary gland.
Convulsions
Production of a trance-like state.
Used as an animal model for petit mal epilepsy.
Euphoria
Potentiates CNS Effects of Alcohol and Other Depressants

Clinical Uses of GHB

Anesthetic Adjunct
Approved for this use in some countries, but not U.S.
Narcolepsy
Not yet approved for this use in any country.
Under experimental study, using an FDA protocol in the United States.
Investigational New Drug Application from the FDA exist on the drug.
Specifically to treat nighttime sleep disruption in narcoleptics.
Alcohol Withdrawal
Not an approved use in any country.
Experimental use only.
Heroin Withdrawal
Not an approved use in any country.
Experimental use only.

Marketing Status of GHB

Has never been approved by the Food and Drug Administration (FDA) for medical use in the United States.
Is currently under development by the drug company, Orphan Medical Inc., for the treatment of narcolepsy in the U.S.
Approval by FDA for medical use in the United States is expected in 2 to 3 years providing that there are no problems with the development process.
Available in Tunisia, New Zealand, Netherlands, Morocco, Italy, French West Africa, France, Spain, Hungary and Germany as intravenous anesthetic.
Trade Names in other countries: Alcover, Anelamin, Gamma-OH, Somsanit
All are injectable solutions.

Disposition of GHB in Body

Readily absorbed in gastrointestinal tract.
Readily reaches the brain.
Metabolized in liver to carbon dioxide and water.
No active metabolites.
Excreted in urine in largest amount within 2 to 5 hours after ingestion.
Not detectable in biological fluids (blood, urine) after 12 hours following ingestion.

Individuals Who Abuse GHB

Bodybuilders
High School and College Students
Rave Party Attendees
Night Club Attendees
Individuals Intent on Sexual Assault

Reasons Cited for Abuse of GHB in the United States

Promotion of muscle growth via increases in endogenous growth hormone production.
Used as sedative to come down off of stimulants (e.g. ephedrine).
Achieve an intoxicated "high" (usually in combination with alcohol).
Cheap substitute for ecstasy (MDMA).
Mentally and physically incapacitate women for purposes of committing sexual assault.
Promoted as nutritional supplement.
Abused as aphrodisiac.

Use of GHB to Commit Sexual Assault.

GHB is used to mentally and physically incapacitate potential sexual assault victims.

The DEA is aware of sexual assault cases involving flunitrazepam in Florida, California and Louisiana.

In at least two cases in Florida, GHB has been detected in the urine of sexual assault victims.

GHB should be looked for in the urine of potential sexual assault victims.

GHB will primarily be found in the first urine sample voided after the assault victim wakes up.

GHB is eliminated quickly and is not likely to be detectable by 12 hours post-administration.

Forms of GHB on Street:

Liquid Form

Most common form encountered.

Usually clear.

Usually viscous.

Has a salty taste.

Clandestinely made.

Powdered Material

Grainy

White to off-white (sand) colored.

Tends to take on water (hygroscopic).

Most likely primarily clandestinely produced.

At least one foreign source has been identified.

Not known how much if any GHB imported from foreign source.

Available from some chemical supply stores in powdered form.

Specific Formulations

Rarely found.

Has been found in capsule form.

Street Names for GHB:

Greivous Bodily Harm (GBH)

Georgia Home Boy

Liquid Ecstasy

Liquid X

Liquid E

Liquid G

G

Soap

GHB

GBH

Scoop

Easy Lay

Salty Water

G-riffick

Cherry Meth

Organic Quaalude

How is GHB Taken:

Oral Administration Only.

Usually in quantities of 0.5 to 2 or 3 grams per dose.

Dose can vary considerably.

Liquid GHB

Taken either alone or in other drinks.

Primarily used in conjunction with alcohol consumption.

In Texas - 1 Bottle Cap full about every hour.

Powdered GHB

One to two spoonfuls at a time.

Dissolved in liquids such as water or alcohol beverages.

Adverse Effects of GHB:

Drowsiness	Reduced Muscle Tone (Hypotonia)
Dizziness	Reduced Blood Pressure (Hypotension)
Euphoria	Decreased Heart Rate (Bradycardia)
Reemergent Delirium with Hallucinations	Decreased Respiration Rate
Agitation	Seizures -
Restlessness	Absence Seizures
Delusions	Grand Mal Seizures
Headache	Amnesia
Nausea and Vomiting	Reduction or Loss of Gag Reflex
Enuresis	Abrupt Loss of Consciousness
Excessive Salivation	Coma
Sweating	DEATH
Reduced Body Temperature (Hypothermia)	(Primarily with other drugs)

Effects of GHB appear with an onset of about 15 minutes and last approximately 3 hours.

GHB potentiates the central nervous system (CNS) depressant effects of alcohol and other CNS depressants. Likewise, alcohol and other CNS depressants will potentiate the CNS depressant effects of alcohol.

Dependence can develop with prolonged use of the drug.

There have been numerous emergency room encounters with what is presumed to be GHB in many parts of the United States. Some of the states where GHB has been encountered in the emergency rooms are listed below.

California	Michigan
Florida	Nebraska
Georgia	New York
Illinois	North Carolina
Iowa	Rhode Island
Louisiana	Texas
Massachusetts	

Deaths In Which GHB Was Found in Biological Fluids. For these cases the DEA has received toxicology and/or autopsy reports from toxicology laboratories and medical examiners' offices. (The fact that GHB was detected in the biological fluids does not necessarily mean that GHB was the sole cause of death!)

May, 1993	Italy	42 Year-old heroin addict in which GHB, morphine and 6-monoacetylmorphine were found in various biological fluids and tissues. This case was reported in a 1996 issue of the Journal of Forensic Science.
March, 1995	Huntington Beach California	White, male, bodybuilder (34 years old) with GHB, ethanol and MDMA in blood.
October 1995	Omaha, Nebraska	White, female found with ethanol in in blood and GHB in urine.
January 1996	Walnut Creek, California	White, male (25 years old) with ethanol and GHB in blood.
March 1996	Charlotte, North Carolina	White male with ethanol and GHB in blood.
April, 1996	Killeen, Texas	White female with gamma-butyrolactone detected in blood.
May 11, 1996	Florida	White female 26 years old. (Details not releasible at this time)

August 1996	Ocean City, Maryland	Professional male wrestler found to have GHB, ephedrine, anabolic steroids and alcohol in his system.
August 1996	La Porte, Texas	Hispanic female (17 years old) found to have GHB but no other drugs in blood.
Sept. 1996	Pomona, California	White, Male (18 years old) found with ethanol and GHB in postmortem blood.
December 1996	Florida	White, male 30 years old. (Details cannot be released at this time.)
January 1997	Florida	White, male 25 years old. (Details cannot be released at this time.)

Foreign newspaper articles have reported on the GHB-related death of a 21 year old female in Stourbridge, West Midlands in Great Britain in March 1996. DEA has no confirmation of this case.

On February 18, 1997, the Food and Drug Administration (FDA) issued a warning that GHB could be deadly. According to the report, GHB is blamed for dozens of hospitalizations and at least three deaths. The FDA urged police, emergency rooms and coroners to begin aggressively testing for GHB when young people wind up in the emergency room with the symptoms produced by GHB.

It is becoming increasingly evident that the consumption of GHB in combination with sublethal doses of alcohol can result in death.

Source and Distribution of GHB Found on Street in U.S.

Primarily via clandestine laboratory synthesis.

Usually liquid is formed.

Need chemicals: Gamma-Butyrolactone, Sodium Hydroxide and Hydrochloric Acid, Buffer Solutions.

Very little diversion or smuggling of pharmaceutical and chemical grade GHB.

In Texas, bottle cap full of liquid GHB sold for \$10.00

In some states, liquid GHB sold by the drops dispensed from a medicine dropper for \$5.00 per several drops.

Clandestine Synthesis of GHB

Conversion of gamma-butyrolactone with base to GHB.

One-Step Reaction

No special reactions conditions required.

Special chemical knowledge is not required.

Required chemicals are cheap and easy to obtain.

Synthesis has been described extensively on the Internet.

Chemicals Used: Gamma-Butyrolactone
 Sodium or Potassium Hydroxide
 Ethanol (Ethyl Alcohol)
 Acid - Hydrochloric and/or Sulfuric
 PH Buffer Solutions

Chemical Equipment: General Lab Equipment
 Mixing Bowl
 PH Meter or PH Paper
 Hot Plate

Gamma-Butyrolactone (GBL) is the precursor for GHB. GBL cannot be used to make any controlled drugs. Finding GBL at a potential laboratory site indicates the presence of a GHB clandestine laboratory.

GBL is a liquid that can be purchased fairly cheaply from most chemical supply stores in large (kilogram) quantities. Sodium or potassium hydroxide is cheap and can be purchased in large (hundreds of grams or kilograms) quantities. Such large quantities allow for the synthesis of large (kilogram) quantities of GHB.

States with Documented GHB Distribution As Determined From State and Local Forensic Laboratory Analysis of Submitted Exhibits:

Alabama	Louisiana	Rhode Island
Arizona	Maryland	South Carolina
California	Michigan	Texas
Colorado	Missouri	Virginia
Florida	Nebraska	Wisconsin
Georgia	New Hampshire	Iowa
Hawaii	New York	North Carolina
Illinois	Ohio	
Kansas	Oklahoma	

Submission of GHB and GBL Exhibits to DEA Forensic Laboratories Over Period of August 1994 to February 1, 1997. (Information Collected From the DEA Stride System)

26 Total Cases Involving 40 Total Exhibits.

Breakdown of Cases by Year

1994 - 2

1995 - 11

1996 - 12

Of 40 Total Exhibits

25 Exhibits were liquids.

14 Exhibits were powdered material

1 Exhibit was capsules each containing 1.14 grams GHB.

Distribution of Cases Among States

California	8
Illinois	3
Georgia	3
Louisiana	2
Florida	2
Texas	2
Michigan	2
Arizona	1
Rhode Island	1
Colorado	1
Massachusetts	1

Examination of DEA casefiles outside of the STRIDE system reveals additional cases involving GHB clandestine laboratories in Washington, North Carolina and Texas.

The DEA has several cases in which the clandestine synthesis of GHB was carried out in clandestine methamphetamine laboratories.

Regulatory Control Actions

Not presently scheduled under the federal Controlled Substances Act.

DEA is currently collecting the data to administratively place GHB under the Federal Controlled Substances Act.

In November, 1991, the FDA banned the sale of GHB in health food stores.

It is a violation of the federal Food, Drug and Cosmetic Act to manufacture and sell GHB in the United States.

It is not necessarily illegal to be in possession of GHB for personal use only.

Georgia and Rhode Island have placed GHB in Schedule I of their state's Controlled Substances Act.

March 20, 1997 Florida placed GHB permanently into Schedule II of state

Controlled Substances Act.
Texas, Virginia, Hawaii, Louisiana, Michigan, Nebraska, Tennessee, and
California are moving towards the scheduling of GHB under
their state laws.

Countries With GHB Abuse:

United States
England
Spain
Sweden
Australia
Italy
Germany
Netherlands