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		Approved	March 5	, 1986	5
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MINUTES OF THE _SENATE (COMMITTEE ON	JUDICIARY			•
The meeting was called to order by	Senator Robe	rt Frey Chairperson			at
	uary 21	, 19 <u>86</u> i	n room <u>51</u>	4-S	of the Capitol.
AAN members xxxxe present xxxxxxt:	Senators Frey, Langworthy, Pa Winter and Yos	rrish, Steine			

Committee staff present:

Mary Sue Hack, Office of Revisor of Statutes Mike Heim, Legislative Research Department Jerry Donaldson, Legislative Research Department

Conferees appearing before the committee:

Everett L. Willoughby, State Board of Pharmacy

Chairman Frey called upon Mr. Willoughby who presented a request for introduction of a bill in regard to controlled substances (See Attachment I). Committee voted to introduce the bill; motion was made by Senator Yost; seconded by Senator Burke, and the motion carried.

Senator Frey presented another request by Judge Theissen from Wichita regarding expenditure of monies generated by the DWI law. He stated the request would amend current law to allow the money to be used for treatment programs and facilities to accomplish legal requirements. Senator Talkington moved above request be introduced; seconded by Senator Yost and passed by committee.

Senate Bill 474 - Personal property liens; time for filing.

This bill relates to liens on personal property concerning time limit for filing. Senator Hoferer moved to report the bill favorably for passage; seconded by Senator Parrish, and the motion carried.

Senate Bill 473 - Technical amendments to act for review and enforcement of agency actions.

This act concerns judicial review and civil enforcement of state agency actions and had been discussed previously.

Senator Frey commented on the amended bill in regard to de novo which relates to the order that was violated and not to criminal penalty. He said the criminal proceeding is separate.

Senator Hoferer moved that Senate Bill 473 be reported favorably as amended for passage; seconded by Senator Parrish, and the motion carried.

Senate Bill 556 - Garnishment order; fee paid to financial institution.

This measure which was passed yesterday with Senate Bill 585 amended into it was again discussed. Senator Gaines moved to reconsider action on Senate Bill 556; seconded by Senator Hoferer, and the motion carried.

CONTINUATION SHEET

MINUTES OF THE	SENATE CO	MMITTEE O	N JUDICIAR	Y	,
E34 C o 1	10.00	4	Echanon	. 01	O.C
room 514-S, Statel	nouse, at <u>10:00</u>	a.m./pxnx. on	February	<u> </u>	1 <u>986</u> .

Senate Bill 533 - Factors in determining child's custody of residency in domestic actions.

Senator Frey stated an amendment was proposed to Senate Bill 533 relating to respect and appreciation of bond between child and other parent.

Senator Parrish moved to amend bill in this regard; seconded by Senator Gaines, and the motion carrried. Senator Hoferer moved to recommend Senate Bill 533 be passed favorably as amended; seconded by Senator Langworthy, and the motion carried.

Senate Bill 534 - Supreme court guidelines for child support.

This bill relates to child support and guidelines to be considered. Discussion was held in regard to usage of child support payments and referral was made to Mr. Vest's previous testimony who had a problem in this regard.

Senator Frey then referred to Senate Bill 535 which he said is an example of some new law similar to what Mr. Vest had recommended. He felt it could be expanded to include the problem referred to above and then let the courts make the final decision as to disbursement of funds.

Senator Parrish made a motion to amend Senate Bill 534 on line 24 as requested by Linda Elrod previously; seconded by Senator Yost, and the motion carried.

Senator Feleciano moved to recommend Senate Bill 534 favorably as amended for passage; seconded by Senator Gaines, and the motion carried.

Senate Bill 535 - Expedited process for enforcement child visitation orders.

Senator Gaines moved to amend the bill on page 1, line 40, subsection (e) changed to subsection (f). Senator Hoferer seconded the motion, and the motion carried. Senator Hoferer moved to amend the bill on page 2 by striking lines 63 through 65 and inserting, notice of the hearing date set by the hearing officer shall be given to all interested parties by certified mail, return receipt requested, or as the court may order. Senator Winter seconded the motion, and the motion carried. Senator Steineger moved to amend the bill in line 79, following "fees," by inserting mediation costs. Senator Talkington seconded the motion, and the motion carried. Further discussion on the above bill was postponed until a later date.

The meeting adjourned.

Copy of the guest list is attached (See Attachment II).

GUEST LIST

COMMITTEE:	SENATE JUDICIARY COMMITTEE				DATE: 2-21-86			
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Kansas State Board of Pharmary

503 KANSAS AVENUE, SUITE 328 P.O. BOX 1007 TOPEKA, KANSAS 66601 PHONE (913) 296-4056

STATE OF KANSAS



EVERETT L. WILLOUGHBY EXECUTIVE SECRETARY

LYNN E. EBEL BOARD ATTORNEY

January 21, 1986

Mr. Ross O. Doyen
President of the Senate
Capitol Building
Topeka, Kansas 66111

Mr. Michael Hayden Speaker of the House Capitol Building Topeka, KS 66111

Re: Proposed Rescheduling of Controlled Substances

Dear Mr. Doyen:

Pursuant to K.S.A. §65-4102 of the Kansas Uniform Controlled Substances Act, the Board of Pharmacy of the State of Kansas is required to report annually to the President of the Senate and the Speaker of the House regarding any proposed scheduling, rescheduling, or descheduling of controlled substances.

In compliance with said statute, the Kansas State Board of Pharmacy is proposing, for the 1986 legislative session, the following:

- (1) The scheduling of 3-methylfentanyl (3,4-methylenedioxymethampetamine) [MDMA] into Schedule I;
- (2) Scheduling of 1-methyl-4-phenyl-4-propionoxypiperidine (MPPP) into Schedule I;
- (3) Scheduling of 1-(2-phenylethyl)-4-phenyl-4-acetyloxpiperidine (PEPAP) into Schedule 1.

5. Judiciary 2/21/86

A-1

The Board is required to consider, in its recommendation regarding scheduling, descheduling and/or rescheduling the following factors:

- (1) Actual-relative potential for abuse;
- (2) Scientific evidence of pharmacological affect, if known;
- (3) The state of current scientific knowledge regarding the substance;
- (4) The history and current pattern of abuse;
- (5) The scope, duration and significance of abuse;
- (6) The risk to public health;
- (7) The potential of the substance to produce psychological and/or physiological dependence liability; and
- (8) Whether the substance is an immediate precursor of a substance already controlled.

Because of the number of controlled substances being proposed for scheduling and rescheduling this session, three separate reports addressing the above-enumerated factors are submitted for your review and information for each drug proposed for scheduling.

I. Scheduling of MDMA into Schedule I of the Controlled Substances Act

MDMA is a "designer drug" which are new chemical analogs or variations of existing controlled substances, or other new substances which have a psychedelic, stimulant, or depressant effect and have a high potential for abuse. MDMA can produce a psychedelic affect and the Drug Enforcement Administration first placed MDMA into Schedule I on an emergency basis on April 25, 1985. On May 31, 1985, MDMA was placed into Schedule I of the federal Controlled Substances Act.

The scheduling of MDMA into Schedule I is warranted and proposed by the Board of Pharmacy for the following reasons:

- (1) MDMA is chemically and pharmacologically related to 3,4-methylenedioxyamphetmine (MDA), a Schedule I controlled substance.
- (2) MDMA has no legitimate medical use or manufacturer in the United States;
- (3) MDMA is produced in clandestine laboratories and encountered in the illicit drug traffic; and
- (4) MDMA has been associated with medical emergencies as reported by the Drug Abuse Warning Network and Drug Abuse Treatment Programs and on the scientific and medical

evaluations and scheduling recommendations for MDMA by the Department of Health and Human Services which found that MDMA has high potential for abuse, MDMA presents a significant risk of harm to the public health, and MDMA should be placed into Schedule I of the Controlled Substances Act.

Furthermore, there is a lack of accepted safety for the use of MDMA under medical supervision.

II. Scheduling of MPPP into Schedule I

MPPP is a "designer drug" which are new chemical analogs or variations of existing controlled substances, or other new substances which have a psychedelic, stimulant or depressant effect and have a high potential for abuse. The ability to establish controls on MPPP, if its production for drug abuse were to be encountered more often, would be important to protect the public health and to prosecute those who wantonly risk the public health. MPPP is a reversed ester analog of the Schedule II synthetic narcotic analgesic, meperidine (pethidine, demerol). Analgesic screening indicates that MPPP is a measured after intravenous and subcutaneous administration, ranges from 5 to 30 times that of meperidine on a molar basis. The Drug Enforcement Administration is unaware of any legitimate medical use or manufacture of MPPP in the United States.

The abuse of MPPP was first reported in 1976 in the Washington D.C. area when a 23 year old male was referred to the National Institute of Mental Health for evaluation after exhibiting symptoms of Parkinson's Disease. The Parkinsonian Syndrome has been identified in individuals who were exposed to MPTP as an impurity in the narcotics substance MPPP or accidentally in an industrial setting.

In January of 1985, the Centers for Disease Control, Department of Health and Human Services, in conjunction with the state of California and the Santa Clara Valley Medical Center in San Jose, California, began an interview program to locate persons who may have used MPPP. The Center for Disease Control found that a number of interviewees reported the use of the substance after 1982 which produced symptoms identical to those produced by acute MPPP exposure. Emergency scheduling was requested by the Secretary of Health for the reason that MPPP poses substantial risk to public health and safety. The continued availability and possible spread of the use of MPPP will undoubtedly result in the development of a chronic, irreversible and progressive Parkinsonian Syndrome in many more individuals either immediately after use or at some later time.

The data indicates that the production, distribution and use of MPPP continues to pose a very serious hazard to the public health and safety. On August 12, 1985, the acting administrator of the Drug Enforcement Administration placed MPPP, its optical isomers, salts and salts of isomers into Schedule I of the federal Controlled Substances Act.

III. Scheduling of PEPAP into Schedule I of the Controlled Substances Act

PEPAP is a "designer drug" which are new chemical analogs or variations of existing controlled substances, or other new substances, which have a psychedelic, stimulant or depressant effect and have a high potential for abuse. Analogs of synthetic narcotic analgesic meperidine include PEPAP. PEPAP is a reversed ester analog of the Schedule II synthetic narcotic analgesic meperidine (pethidine, demerol). Analgesic screening indicates that PEPAP is a meperidine-like opiate analgesic. The Drug Enforcement Administration is unaware of any legitimate medical use or manufacturer of PEPAP in the United States.

PEPAP can be synthesized via the appropriate piperidional intermediates. It is not known at this time whether PEPTP (resulting from PEPAP synthesis) causes a neural toxicity similar to MPTP (yielded from MPPP) and results in a Parkinsonian Syndrome.

In October of 1984 the Drug Enforcement Administration seized a large scale PCP laboratory in Brownsville, Texas, which was in the process of making an intermediate which could have been converted into PEPAP. Analysis of the reaction mixture showed that PEPTP was present. The Secretary of Health encouraged scheduling of PEPAP into Schedule I of the Controlled Substances Act for the reason that it posed substantial risk to the public health and safety. Although PEPAP has a chemical structure similar to that of MPTP it is not yet known whether it will produce toxic effects similar to those produced by MPTP. The current availability and use of PEPAP as a drug of abuse, its lack of any known accepted medical use and its possible toxicity warrant action to prevent further risk to the public health and safety and should be placed in Schedule I of the Kansas Uniform Controlled Substances Act.

The data reported by the Drug Enforcement Administration in the Federal Register indicates that the production, distribution and use of meperidine analogs, specifically PEPAP, continues to pose a very serious hazard to the public health and safety.

On August 12, 1985, PEPAP was placed into Schedule I of the federal Controlled Substances Act by the Drug Enforcement Administration.

The Board of Pharmacy respectfully requests that legislation be initiated in order to accomplish the scheduling of the above-listed substances into Schedule I of the Kansas Controlled Substances Act. The Board of Pharmacy office remains open and available for your questions and

concerns concerning the recommended scheduling. Please do not hesitate to contact me if I can be of any assistance to you or answer any questions you may have.

Lynn E. Eb

Attorney,

Kansas State Board of Pharmacy

cc: Bob Frey, Chairman of the Senate Judiciary Committee
Roy Ehrlich, Chairman of the Senate Public Health & Welfare Committee
Everett Willoughby, Executive Secretary, Kansas Board of Pharmacy
Ken Schafermeyer, Executive Director, Kansas Pharmacists Assoc.
Board of Pharmacy Members

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