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Item 8 (b) of the provisional agenda*

**Implementation of the international drug control
treaties: changes in the scope of control of
substances**

**Changes in the scope of control of substances: proposed
scheduling recommendations by the World Health
Organization****Note by the Secretariat***Summary*

The present document contains recommendations for action to be taken by the Commission on Narcotic Drugs pursuant to the international drug control treaties.

In accordance with article 3 of the Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol, the Commission will have before it for consideration a proposal from the World Health Organization concerning a recommendation to place U-47700 and butyrfentanyl in Schedule I of the 1961 Convention.

In accordance with article 2 of the Convention on Psychotropic Substances of 1971, the Commission will have before it for consideration a proposal from the World Health Organization concerning a recommendation to place 4-MEC (4-methylethcathinone), ethylone, pentadone, ethylphenidate, MPA (methiopropamine), MDMB-CHMICA, 5F-APINACA (5F-AKB-48) and XLR-11 in Schedule II of the 1971 Convention.

The comments provided by Governments on economic, social, legal, administrative and other factors relevant to the proposed scheduling under the 1961 Convention and the 1971 Convention will be issued in an addendum to the present note (E/CN.7/2017/8/Add.1).

* E/CN.7/2017/1.



I. Consideration of the notification from the World Health Organization concerning scheduling under the Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol

1. Pursuant to article 3, paragraphs 1 and 3, of the Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol, the Director-General of the World Health Organization (WHO), in correspondence dated 25 November 2016, notified the Secretary-General of the United Nations that WHO recommended that U-47700 and butyrfentanyl be placed in Schedule I of the 1961 Convention (see annex for the relevant extract of that notification).

2. In accordance with the provisions of article 3, paragraph 2, of the 1961 Convention, the Secretary-General transmitted to all Governments, on 21 December 2016 and 16 January 2017, a note verbale, annexing the notification and the information submitted by WHO in support of that recommendation.

Action to be taken by the Commission on Narcotic Drugs

3. The notification from the Director-General of WHO is before the Commission on Narcotic Drugs for its consideration, in accordance with the provisions of article 3, paragraph 3 (iii), of the 1961 Convention, which reads as follows:

If the World Health Organization finds that the substance is liable to similar abuse and productive of similar ill effects as the drugs in Schedule I or Schedule II or is convertible into a drug, it shall communicate that finding to the Commission which may, in accordance with the recommendation of the World Health Organization, decide that the substance shall be added to Schedule I or Schedule II.

4. With regard to the decision-making process, the attention of the Commission is drawn to rule 58 of the rules of procedure of the functional commissions of the Economic and Social Council, which stipulates that decisions shall be made by a majority of the members present and voting. On the assumption that all members are present and voting, that means that for a decision to be adopted, an affirmative vote of at least 27 members of the Commission is required.

5. The Commission should therefore decide:

(a) Whether it wishes to include U-47700 in Schedule I of the 1961 Convention or, if not, what other action, if any, might be required;

(b) Whether it wishes to include butyrfentanyl in Schedule I of the 1961 Convention or, if not, what other action, if any, might be required.

II. Consideration of a notification from the World Health Organization concerning scheduling under the Convention on Psychotropic Substances of 1971

6. Pursuant to article 2, paragraphs 1 and 4, of the Convention on Psychotropic Substances of 1971, the Director-General of WHO, in correspondence dated 25 November 2016, notified the Secretary-General that WHO recommended placing 4-MEC (4-methylethcathinone), ethylone, pentedrone, ethylphenidate, MPA (methiopropamine), MDMB-CHMICA, 5F-APINACA (5F-AKB-48) and XLR-11 in

Schedule II of the 1971 Convention (see annex for the relevant extract of that notification).

7. In accordance with the provisions of article 2, paragraph 2, of the 1971 Convention, the Secretary-General transmitted to all Governments, on 21 December 2016 and 16 January 2017, a note verbale annexing the notification and the information submitted by WHO in support of its recommendations.

Action to be taken by the Commission on Narcotic Drugs

8. The notification by the Director-General of WHO is before the Commission on Narcotic Drugs for consideration, in accordance with the provisions of article 2, paragraph 5, of the 1971 Convention, which reads as follows:

The Commission, taking into account the communication from the World Health Organization, whose assessments shall be determinative as to medical and scientific matters, and bearing in mind the economic, social, legal, administrative and other factors it may consider relevant, may add the substance to Schedule I, II, III or IV. The Commission may seek further information from the World Health Organization or from other appropriate sources.

9. With regard to the decision-making process, the attention of the Commission is drawn to article 17, paragraph 2, of the 1971 Convention, which stipulates that the decisions of the Commission provided for in articles 2 and 3 shall be taken by a two-thirds majority of the members of the Commission. From a practical point of view, this means that, for a decision to be adopted, an affirmative vote of at least 35 members of the Commission is required.

10. The Commission should therefore decide:

(a) Whether it wishes to place 4-MEC (4-methylethcathinone) under Schedule II of the 1971 Convention or, if not, what other action, if any, might be required;

(b) Whether it wishes to place ethylone under Schedule II of the 1971 Convention or, if not, what other action, if any, might be required;

(c) Whether it wishes to place pentedrone under Schedule II of the 1971 Convention or, if not, what other action, if any, might be required;

(d) Whether it wishes to place ethylphenidate under Schedule II of the 1971 Convention or, if not, what other action, if any, might be required;

(e) Whether it wishes to place MPA (methiopropamine) under Schedule II of the 1971 Convention or, if not, what other action, if any, might be required;

(f) Whether it wishes to place MDMB-CHMICA under Schedule II of the 1971 Convention or, if not, what other action, if any, might be required;

(g) Whether it wishes to place 5F-APINACA (5F-AKB-48) under Schedule II of the 1971 Convention or, if not, what other action, if any, might be required;

(h) Whether it wishes to place XLR-11 under Schedule II of the 1971 Convention or, if not, what other action, if any, might be required.

Annex

Extract of the notification from the Director-General of the World Health Organization to the Secretary-General dated 25 November 2016 concerning the scheduling of substances under the Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol, and the Convention on Psychotropic Substances of 1971, including the relevant extract from the thirty-eighth report of the Expert Committee on Drug Dependence

With reference to Article 2, paragraphs 1 and 4, of the Convention on Psychotropic Substances (1971) and Article 3, paragraphs 1 and 3, of the Single Convention on Narcotic Drugs (1961), as amended by the 1972 Protocol, I am pleased to submit recommendations of the World Health Organization as follows:

To be placed in Schedule I of the Single Convention on Narcotic Drugs (1961), as amended by the 1972 Protocol:

U-47700

chemical name: 3,4-dichloro-*N*-(2-dimethylamino-cyclohexyl)-*N*-methyl-benzamide

butyrfentanyl

chemical name: *N*-phenyl-*N*-[1-(2-phenylethyl)-4-piperidinyl]butanamide

To be placed in Schedule II of the Convention on Psychotropic Substances of 1971:

4-MEC (4-methylethcathinone)

chemical name: 2-(ethylamino)-1-(4-methylphenyl)propan-1-one

ethylone

chemical name: 1-(2*H*-1,3-benzodioxol-5-yl)-2-(ethylamino)propan-1-one

pentedrone

chemical name: 2-(methylamino)-1-phenylpentan-1-one

ethylphenidate

chemical name: ethyl phenyl(piperidin-2-yl)acetate

MPA (methiopropamine)

chemical name: *N*-methyl-1-(thiophen-2-yl)propan-2-amine

MDMB-CHMICA

chemical name: methyl *N*-{[1-(cyclohexylmethyl)-1*H*-indol-3-yl]carbonyl}-3-methyl-L-valinate

5F-APINACA (5F-AKB-48)

chemical name: *N*-(adamantan-1-yl)-1-(5-fluoropentyl)-1*H*-indazole-3-carboxamide

XLR-11

chemical name: [1-(5-fluoropentyl)-1*H*-indol-3-yl](2,2,3,3-tetramethylcyclopropyl) methanone.

In addition, the Expert Committee recommended to carry out a critical review at a subsequent Expert Committee meeting for:

3-MMC (3-Methylmethcathinone)

chemical name: 2-(methylamino)-1-(3-methylphenyl)propan-1-one

It also recommended to continue to keep the following substance under surveillance:

JWH-073

chemical name: (1-butyl-1*H*-indol-3-yl)(1-naphthyl)methanone

The Committee recommended that a specific ECDD meeting dedicated to cannabis and its component substances be held within 18 months of the thirty-eighth meeting, and will carry out pre-reviews for the following substances:

- Cannabis plant and cannabis resin
- Extracts and tinctures of cannabis
- *delta*-9-tetrahydrocannabinol (THC)
- Cannabidiol (CBD)
- Stereoisomers of THC

The recommendations and the assessments and findings on which they are based are set out in detail in the report of the thirty-eighth Expert Committee on Drug Dependence, which is the Committee that advises me on these issues.

Extract from the thirty-eighth report of the Expert Committee on Drug Dependence

Substances recommended to be scheduled in Schedule I of the Single Convention on Narcotic Drugs (1961), as amended by the 1972 Protocol

U-47700

Chemically, U-47700 is 3,4-dichloro-*N*-(2-dimethylamino-cyclohexyl)-*N*-methyl-benzamide. U-47700 has two chiral centres resulting in four isomers; *cis*- and *trans*-conformations each have two enantiomers [*cis*- are (1*R*,2*R*) and (1*S*,2*S*); *trans*- are (1*R*,2*S*) and (1*S*,2*R*)].

U-47700 was not previously pre-reviewed or critically reviewed by the Committee. A direct critical review is proposed based on information brought to the attention of WHO that U-47700 is clandestinely manufactured, poses a risk to public health and society, and has no recognized therapeutic use by any Party.

U-47700 (3,4-dichloro-*N*-(2-dimethylamino-cyclohexyl)-*N*-methyl-benzamide) is a compound liable to similar abuse and similar ill effects as controlled opioids such as morphine and AH-7921, which are included in Schedule I of the 1961 Single Convention on Narcotic Drugs. It has no recorded therapeutic use, and its use has resulted in fatalities. There is sufficient evidence that it is being, or is likely to be, abused so as to constitute a public health and social problem, warranting the placing of the substance under international control. Thus, because it meets the required condition of similarity, it is recommended that U-47700 be placed in Schedule I of the Single Convention on Narcotic Drugs, 1961, as consistent with Article 3, paragraph 3 (iii), of that Convention in that the substance is liable to similar abuse and productive of similar ill effects as drugs in Schedule I.

Butyrfentanyl

Chemically, butyrfentanyl is *N*-phenyl-*N*-[1-(2-phenylethyl)-4-piperidinyl]butanamide.

Butyrfentanyl has not been previously pre-reviewed or critically reviewed by the Committee. A direct critical review is proposed based on information brought to the attention of WHO that butyrfentanyl is clandestinely manufactured, poses a risk to public health and society, and has no recognized therapeutic use by any Party.

Butyrfentanyl (*N*-phenyl-*N*-[1-(2-phenylethyl)-4-piperidinyl]butanamide) is a compound liable to similar abuse and similar ill effects as controlled opioids such as morphine and fentanyl that are included in Schedule I of the 1961 Single Convention on Narcotic Drugs. It can be converted into fentanyl as well. It has no recorded therapeutic use, and its use has resulted in fatalities. There is sufficient evidence that it is being or is likely to be abused so as to constitute a public health and social problem, warranting the placing of the substance under international control. Thus, because it meets either of the required conditions of similarity or convertibility, it is recommended that butyrfentanyl be placed in Schedule I of the Single Convention on Narcotic Drugs, 1961, as consistent with Article 3, paragraph 3 (iii), of that Convention, in that the substance is liable to similar abuse and productive of similar ill effects as drugs in Schedule I.

Substances recommended to be scheduled in Schedule II of the Convention on Psychotropic Substances (1971)

4-MEC (4-Methylethcathinone)

Chemically, 4-methylethcathinone (4-MEC) is 2-(ethylamino)-1-(4-methylphenyl)propan-1-one. 4-MEC has a chiral centre giving rise to an enantiomeric pair of (S)-4-MEC and (R)-4-MEC isomers.

A critical review report on 4-MEC was discussed in June 2014 at the thirty-sixth meeting of the WHO Expert Committee on Drug Dependence. The Committee recommended that 4-MEC not be placed under international control at that time owing to insufficiency of data regarding dependence, abuse and risks to public health, but be kept under surveillance. 4-MEC continues to appear as a psychostimulant with monoamine transporter activity with indications of abuse liability. New data have emerged from in vitro and in vivo studies since the thirty-sixth ECDD meeting that has prompted the current critical review.

The Committee considered the degree of risk to public health and society associated with the abuse of 4-MEC (2-(ethylamino)-1-(4-methylphenyl)propan-1-one) to be substantial. Therapeutic usefulness has not been recorded. It recognized that it is liable to similar abuse and similar ill effects as substances in Schedule II of the 1971 Convention on Psychotropic Substances. The Committee considered there to be sufficient evidence that 4-MEC is being, or is likely to be, abused so as to constitute a public health and social problem, warranting the placing of the substance under international control. As per the “Guidance on the WHO review of psychoactive substances for international control”, higher regard was accorded to the substantial public health risk than to the lack of therapeutic usefulness. The Committee recommended that 4-MEC be placed in Schedule II of the 1971 Convention on Psychotropic Substances.

Ethylone

Chemically, ethylone is 1-(2*H*-1,3-benzodioxol-5-yl)-2-(ethylamino)propan-1-one. It is a chiral compound with isomers, and its hydrochloride salt can exist in two conformations (polymorphs) at the C-C bond linking the side chain to the aromatic ring.

Ethylone was not previously pre-reviewed or critically reviewed. A direct critical review is proposed based on information brought to the attention of WHO that ethylone is clandestinely manufactured, poses a serious risk to public health and society, and has no recognized therapeutic use by any Party.

The Committee considered the degree of risk to public health and society associated with the abuse of ethylone (1-(2*H*-1,3-benzodioxol-5-yl)-2-(ethylamino)propan-1-one)

to be substantial. Therapeutic usefulness has not been recorded. It recognized that it is liable to similar abuse and similar ill effects as substances in Schedule II of the 1971 Convention on Psychotropic Substances. The Committee considered there to be sufficient evidence that ethylone is being, or is likely to be, abused so as to constitute a public health and social problem warranting the placing of the substance under international control. As per the “Guidance on the WHO review of psychoactive substances for international control”, higher regard was accorded to the substantial public health risk than to the lack of therapeutic usefulness. The Committee recommended that ethylone be placed in Schedule II of the 1971 Convention on Psychotropic Substances.

Pentedrone (α -Methylaminovalerophenone)

Chemically, pentedrone is 2-(methylamino)-1-phenylpentan-1-one. It has a chiral centre giving rise to two stereoisomers, (*S*)- and (*R*)-pentedrone.

Pentedrone has not been previously reviewed or critically reviewed by the Expert Committee on Drug Dependence of WHO. A direct critical review is proposed based on information brought to WHO’s attention that pentedrone is clandestinely manufactured, poses a serious risk to public health and society, and has no recognized therapeutic use by any Party.

The Committee considered the degree of risk to public health and society associated with the abuse of pentedrone (2-(methylamino)-1-phenylpentan-1-one) to be substantial. Therapeutic usefulness has not been recorded. It recognized that it is liable to similar abuse and similar ill effects as substances in Schedule II of the 1971 Convention on Psychotropic Substances. The Committee considered there to be sufficient evidence that pentedrone is being, or is likely to be, abused so as to constitute a public health and social problem, warranting the placing of the substance under international control. As per the “Guidance on the WHO review of psychoactive substances for international control”, higher regard was accorded to the substantial public health risk than to the lack of therapeutic usefulness. The Committee recommended that pentedrone be placed in Schedule II of the 1971 Convention on Psychotropic Substances.

Ethylphenidate (EPH)

Chemically, ethylphenidate is ethyl phenyl(piperidin-2-yl)acetate.

Ethylphenidate was not previously pre-reviewed or critically reviewed. A direct critical review is proposed based on information brought to the attention of WHO that ethylphenidate is clandestinely manufactured, poses a serious risk to public health and society, and has no recognized therapeutic use by any Party.

The Committee considered the degree of risk to public health and society associated with the abuse of ethylphenidate (ethyl phenyl(piperidin-2-yl)acetate) to be substantial. Therapeutic usefulness has not been recorded. It recognized that it is liable to similar abuse and similar ill effects as substances in Schedule II of the 1971 Convention on Psychotropic Substances. The Committee considered there to be sufficient evidence that ethylphenidate is being, or is likely to be, abused so as to constitute a public health and social problem, warranting the placing of the substance under international control. As per the “Guidance on the WHO review of psychoactive substances for international control”, higher regard was accorded to the substantial public health risk than to the lack of therapeutic usefulness. The Committee recommended that ethylphenidate be placed in Schedule II of the 1971 Convention on Psychotropic Substances.

MPA (Methiopropamine)

Chemically, methiopropamine is *N*-methyl-1-(thiophen-2-yl)propan-2-amine. It has a chiral centre with two enantiomers.

Methiopropamine was previously critically reviewed by the Committee at its 36th meeting. Owing to the insufficiency of data regarding dependence, abuse and risks to public health, the Committee recommended that methiopropamine not be placed under international control but be kept under surveillance. Subsequent data collected from the literature and from different countries indicated that this substance may cause substantial harm and that it has no medical use warranting an updated critical review.

The Committee considered the degree of risk to public health and society associated with the abuse of methiopropamine (*N*-methyl-1-(thiophen-2-yl)propan-2-amine) to be substantial. Therapeutic usefulness has not been recorded. It recognized that it is liable to similar abuse and similar ill effects as substances in Schedule II of the 1971 Convention on Psychotropic Substances. The Committee considered there to be sufficient evidence that methiopropamine is being, or is likely to be, abused so as to constitute a public health and social problem warranting the placing of the substance under international control. As per the “Guidance on the WHO review of psychoactive substances for international control”, higher regard was accorded to the substantial public health risk than to the lack of therapeutic usefulness. The Committee recommended that methiopropamine be placed in Schedule II of the 1971 Convention on Psychotropic Substances.

MDMB-CHMICA

Chemically, MDMB-CHMICA is methyl *N*-{[1-(cyclohexylmethyl)-1*H*-indol-3-yl]carbonyl}-3-methyl-L-valinate. MDMB-CHMICA has a chiral carbon in the butanoic chain. Therefore, two stereoisomers exist: (*S*)-MDMB-CHMICA and (*R*)-MDMB-CHMICA.

MDMB-CHMICA has not been previously pre-reviewed or critically reviewed. A direct critical review is proposed based on information brought to the attention of WHO that MDMB-CHMICA is clandestinely manufactured, poses a serious risk to public health and society, and has no recognized therapeutic use by any Party.

The Committee considered the degree of risk to public health and society associated with the abuse of MDMB-CHMICA (methyl *N*-{[1-(cyclohexylmethyl)-1*H*-indol-3-yl]carbonyl}-3-methyl-L-valinate) to be substantial. Therapeutic usefulness has not been recorded. It recognized that it is liable to similar abuse and similar ill effects as substances in Schedule II of the 1971 Convention on Psychotropic Substances. The Committee considered there to be sufficient evidence that MDMB-CHMICA is being, or is likely to be, abused so as to constitute a public health and social problem warranting the placing of the substance under international control. As per the “Guidance on the WHO review of psychoactive substances for international control”, higher regard was accorded to the substantial public health risk than to the lack of therapeutic usefulness. The Committee recommended that MDMB-CHMICA be placed in Schedule II under the United Nations 1971 Convention on Psychotropic Substances.

5F-APINACA (5F-AKB-48)

Chemically, 5F-APINACA is *N*-(adamantan-1-yl)-1-(5-fluoropentyl)-1*H*-indazole-3-carboxamide.

5F-APINACA has not been previously pre-reviewed or critically reviewed by the Expert Committee on Drug Dependence of WHO. A direct critical review is proposed based on information brought to the attention of WHO that 5F-APINACA is clandestinely manufactured, poses a serious risk to public health and society, and has no recognized therapeutic use by any Party.

The Committee considered the degree of risk to public health and society associated with the abuse of 5F-APINACA (*N*-(adamantan-1-yl)-1-(5-fluoropentyl)-1*H*-indazole-3-carboxamide) to be substantial. Therapeutic usefulness has not been recorded. It recognized that it is liable to similar abuse and similar ill effects as substances in Schedule II of the 1971 Convention on Psychotropic Substances. The Committee considered there to be sufficient evidence that 5F-APINACA is being, or is likely to be, abused so as to constitute a public health and social problem, warranting the placing of the substance under international control. As per the “Guidance on the WHO review of psychoactive substances for international control”, higher regard was accorded to the substantial public health risk than to the lack of therapeutic usefulness. The Committee recommended that 5F-APINACA be placed in Schedule II of the 1971 Convention on Psychotropic Substances.

XLR-11

Chemically, XLR-11 is [1-(5-fluoropentyl)-1*H*-indol-3-yl](2,2,3,3-tetramethylcyclopropyl)methanone.

XLR-11 has not been previously reviewed or critically reviewed. A direct critical review is proposed based on information brought to WHO’s attention that XLR-11 is clandestinely manufactured, poses a serious risk to public health and society, and has no recognized therapeutic use by any Party.

The Committee considered the degree of risk to public health and society associated with the abuse of XLR-11 ([1-(5-fluoropentyl)-1*H*-indol-3-yl](2,2,3,3-tetramethylcyclopropyl)methanone) to be substantial. Therapeutic usefulness has not been recorded. It recognized that it is liable to similar abuse and similar ill effects as substances in Schedule II of the 1971 Convention on Psychotropic Substances such as JWH-018 and AM-2201. The Committee considered there to be sufficient evidence that XLR-11 is being, or is likely to be, abused so as to constitute a public health and social problem, warranting the placing of the substance under international control. As per the “Guidance on the WHO review of psychoactive substances for international control”, higher regard was accorded to the substantial public health risk than to the lack of therapeutic usefulness. The Committee recommended that XLR-11 be placed in Schedule II of the 1971 Convention on Psychotropic Substances.

Substance recommended for critical review*3-Methylmethcathinone (3-methyl-N-methylcathinone; 3-MMC)*

Chemically, 3-MMC is 2-(methylamino)-1-(3-methylphenyl)propan-1-one. 3-MMC contains a chiral centre at the C-2 carbon of the propane sidechain, so two enantiomers exist: (*R*)-3-MMC and (*S*)-3-MMC.

3-MMC was not previously pre-reviewed or critically reviewed. A direct critical review is proposed based on information brought to the attention of WHO that 3-MMC is clandestinely manufactured, poses a serious risk to public health and society, and has no recognized therapeutic use by any Party.

The Committee deliberated at length regarding the information available pertinent to the degree of risk to public health and society associated with the abuse of 3-MMC (2-(methylamino)-1-(3-methylphenyl)propan-1-one). The Committee decided that the information as currently provided, and the ensuing discussions that had occurred, were inadequate to form a consensus and confident recommendation regarding the scheduling of 3-MMC. As per paragraph 59 of the “Guidance on the WHO review of psychoactive substances for international control”, and as supported by its procedural reference to the thirty-fourth report of the WHO Expert Committee on Drug Dependence, “... in cases where additional information concerning the substance under review is required, the Committee may decide that it will reach a final opinion at a subsequent meeting” and “...it should request another critical review in order to refer the matter to a subsequent Expert Committee.” As directed by these guidelines, the Committee requested that the Secretariat arrange another critical review of 3-MMC at a subsequent Expert Committee.

Substance recommended for surveillance

JWH-073

Chemically, JWH-073 is (1-butyl-1*H*-indol-3-yl)(1-naphthyl)methanone.

During its thirty-sixth meeting, the WHO Expert Committee on Drug Dependence discussed the critical review report on JWH-073 and concluded that, owing to the insufficiency of data regarding dependence, abuse and risks to public health, JWH-073 should not be placed under international control at that time but be kept under surveillance. New information on its pharmacology and abuse potential warranted an update of the critical review report for discussion at the thirty-eighth ECDD.

The available pharmacodynamic data related to JWH-073 (1-butyl-1*H*-indol-3-yl)(1-naphthyl)methanone demonstrate that this substance has the capacity to produce some effects similar to its homologue, JWH-018, which is included in Schedule II of the 1971 Convention on Psychotropic Substances. However, the data currently available do not make it possible to establish a direct link between JWH-073 abuse and appearance of public health and social problems that would be a requirement for placing this substance under international control. It is therefore recommended not to place JWH-073 under international control but to continue to keep it under surveillance.

Update on cannabis and cannabis resin

At the thirty-seventh ECDD meeting, the Committee requested that the Secretariat begin collecting data towards a pre-review of cannabis, cannabis resin, and extracts and tinctures of cannabis at a future meeting. Consistent with this request, two updates on the scientific literature on cannabis were prepared and subsequently presented to the Expert Committee. Following its deliberations the Committee noted that the current Schedule I of the 1961 Convention groups together cannabis, cannabis resin, and extracts and tinctures of cannabis. Cannabis plant and cannabis resin are also in Schedule IV of the 1961 Convention. The Committee further noted that there are natural and synthetic cannabinoids in Schedule I and Schedule II of the 1971 Convention. The Committee recognized:

- An increase in the use of cannabis and its components for medical purposes
- The emergence of new cannabis-related pharmaceutical preparations for therapeutic use
- Cannabis has never been subject to a formal review or critical review by ECDD

The Committee requested that the Secretariat prepare relevant documentation in accordance with the “Guidance on the WHO review of psychoactive substances for international control”, in order to conduct pre-reviews for the following substances:

- Cannabis plant and cannabis resin
- Extracts and tinctures of cannabis
- *delta*-9-tetrahydrocannabinol (THC)
- Cannabidiol (CBD)
- Stereoisomers of THC

The Committee recommended that these pre-reviews be evaluated at a specific ECDD meeting dedicated to cannabis and its component substances, to be held within 18 months of the thirty-eighth meeting.

The purpose of the pre-review is to determine whether current information justifies an Expert Committee critical review. The categories of information for evaluating substances in pre-reviews are identical to those used in critical reviews. The pre-review is a preliminary analysis, and findings at this stage should not determine whether the control status of a substance should be changed.
