

The National Drug Policy Team  
Ministry of Health  
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A Submission  
To the Consultation on the Proposed Classification of  
Benzylpiperazine, Phenylpiperazine and Related Substances

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The closing date for submissions is Friday 23 February 2007.



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1. This submission from the Alcohol Drug Association New Zealand (ADANZ) and is to the consultation on the proposed classification of benzylpiperazine, phenylpiperazine and related substances.
2. Cate Kearney, Chief Executive Officer, Alcohol Drug Association New Zealand is the contact person. ADANZ requests that Ms Kearney have the opportunity to present the submission in person. She may be contacted at ADANZ, PO Box 13-496 Armagh, Christchurch, telephone 03 3798626, fax 03 3775600, email [cate.kearney@adanz.org.nz](mailto:cate.kearney@adanz.org.nz) .
3. The Alcohol Drug Association New Zealand (ADANZ) is a not-for-profit organisation and has been operating in the South Island since 1982. ADANZ's statement of purpose is  
*“Improving the health of the community by minimising harm associated with alcohol, other drugs and gambling”.*
4. Based in Christchurch, ADANZ provides coordination and information dissemination services to the AOD sector in the South Island and in some instances, nationally. ADANZ's core clinical service is the national Alcohol Drug Helpline. Other services are the Addictions Treatment Directory; Alcohol and other Drug (AOD) Consumer Advisors; Canterbury AOD Addiction Advocacy Service and National Problem Gambling Coordination Service along with local, regional and national representation on various AOD and problem gambling advisory committees.
5. The common use of the terms ‘party pills’ and ‘herbal highs’ also include products such as *Pepe* and *Nirvana* (Cosmic Corner brand names) that are BZP free, in this submission where those terms are used they will refer to products that do contain BZP and related substances. Also where the abbreviation ‘BZP’ is used in this submission it will refer to benzylpiperazine, phenylpiperazine and related substances.
6. As part of ADANZ's role
  - Advocacy - to identify issues and actions to raise awareness or influence decision making at policy level through submissions and direct lobbying. All related to limiting the harm associated with alcohol and other drugs in our community
  - Bringing people together to help services work together
  - Providing excellence in information and brief interventions to the people of New Zealand

- Encouraging and supporting people to access addiction treatment services
7. As part of the consultation process, input was sought from other organisations and individuals from the AOD sector and allied health, social service professionals and AOD service consumers. A BZP presentation was delivered and discussed at seven LOAD forums throughout the South Island with the aim of gaining feedback. Discussion was thoughtful and considered yet there was no clear consensus as to whether we as a sector should support the EACD's recommendation to make BZP illegal or whether we should advocate for keeping it legal with stronger controls. Considering this ADANZ makes this submission on its own behalf but makes the comments from other organisations and individuals available in a separate document (see appendix 1).
  8. A statement of ADANZ's position on the proposed re-classification of BZP will be followed by a list of the key points and ADANZ's recommendations. A general comment, followed by a brief explanation, examples and the rationale behind the recommendations will be given before the conclusion.

#### **ADANZ's Statement of position**

9. BZP (benzylpiperazine), phenylpiperazine and related substances should remain licit and included as 'Class D' and not be made illicit by being reclassified to Class C1. This decision is in accordance with our statement of purpose above. ADANZ believes that tightening controls using rigorous enforcement of regulations of the production, advertising, marketing, sale and purchase age of products that contain BZP will be a more effective way of controlling the harm than a C1 Classification, i.e. making it illegal.
10. ADANZ's views are concurrent with those of the New Zealand Drug Foundation and the National Addiction Centre and also support their submissions.

#### **Key Messages**

- Rather than banning BZP and similar substances, there is a need for rigorous reinforcement of regulations to control the production, advertising, labelling, potency and age of purchase of party pills/herbal high products. The frameworks for control are already available through the D Classification established in the MoDA Amendment 2005.
- While there is now evidence that 'party pills/herbal highs' or products containing BZP and similar piperazines do lead to some personal and social harm and although it is noted that the harm is at the lower end of the scale compared to other licit drugs such as alcohol and tobacco, and illicit drugs such as cannabis a substance which is Class C1, potential harm should be minimised through regulation rather than legislation.
- ADANZ acknowledges the work the EACD has carried out to come to their recommendation on the classification of BZP and similar substances be moved from Class D to Class C1 of the , making them illicit, however, ADANZ does not support this recommendation and recommends the following.

### **ADANZ Recommends**

- The classification of products containing benzylpiperazine, phenylpiperazine and related substances remain Class D and not be made illegal
- That the party pill industry be clearly regulated by government rather than the current self regulated status
- Venues that sell all party pills and products containing BZP, similar piperazines and substances to be licensed. To be done separately from petrol stations, liquor outlets – the sale of party pills/herbal highs must not be sold with or alongside alcohol products
- Retailers to be responsible and the regulations rigorously enforced
- Age limit for purchase set at 20 years or over
- Prohibit all advertising and marketing of products containing BZP and similar piperazines i.e. to be the same as tobacco
- Regulate the potency (content level) of BZP, phenylpiperazine and related substances in pills and other products
- the sale of BZP powder in bags be banned
- Continued research into the effects of long term use of any products containing BZP and similar piperazines.
- That the regulatory regime provided for in Schedule D of MoDA be immediately implemented for BZP, similar piperazines and substances, with a further review in 18-24 months.
- Overall regulations to be strengthened to address the recommendations above.
- That an excise tax be applied to all products containing BZP and similar substances to ensure adequately funded enforcement
- There is a general perception that because herbal high/party pills are legal they are safe, this perception requires harm minimisation information to be increased and to be made more visible.

### **Comment**

11. In January 2005, ADANZ identified a number of concerns regarding ‘herbal highs/party pills’ and products containing benzylpiperazine (BZP) and similar substances. These concerns were expressed in the submission ADANZ made to the Health Committee, on the Supplementary Order Paper 298 Misuse of Drugs Amendment Bill (No 3). The submission covered a number of substances including BZP and herbal highs and supported the recommendations made by the Expert Committee on Drugs and BZPs classification as ‘Class D’ along with the need for more research into the effects of it.

12. Since 2005 there has been a useful programme of research on BZP in New Zealand allowing consideration of the risks, the costs and benefits of moving BZP from the class D to Class C1<sup>1</sup>. However, it is noted that there have been questions raised by some commentators about the strength of the available evidence, particularly the

Medical Research Institute study and also the haste with which reports have been written to present to the EACD. This is especially of concern as several studies have not yet been peer-reviewed, and two research projects have not been completed. This is a particular issue, as there is still little information about the toxicology of BZP, especially its interaction with other substances.

13. This submission is based on that research along with discussions with other stakeholders in the AOD sector and allied sectors and professionals.
14. Although the research has produced evidence of the harm from consuming BZP products<sup>2</sup>, ADANZ agrees with NZDF that these do not support the need to make BZP illegal and that reducing the harms from its use can be more efficiently and effectively brought about through making BZP products less attractive by tightening the regulations and enforcing them.

### **MoDA Amendment Act 2005**

15. ADANZ acknowledges the value and usefulness of the addition in June 2005, of a Restricted Substances Schedule to the Misuse of Drugs Act (MoDA) 1975 creating an additional class of drugs, commonly known as “Class D”. This addition to the MoDA was an important achievement both nationally and internationally. However, the strength of the amendment has yet to be put into action. Until this has been done and the benefit of enforcing the regulations and the effects assessed it seems imprudent to reclassify the BZP and similar piperazines to Class C1.
16. As pointed out by the New Zealand Foundation (NZDF)<sup>3</sup> the legislation restricted sales to those over 18 (S36); section 43 banned most conventional advertising (billboards, posters, TV and radio); section 55 provided for enforcement officers to be appointed. The Act also provided for regulations on where restricted drugs could be sold, and the dosage, packaging and marketing of products.
17. Regulations have not yet been passed, and it appears no enforcement officers have been appointed, so no formal monitoring or enforcement of the industry has been carried out. There is no licence or training required before selling the product, and because of this many dairies, off-licences and garages are currently selling them (an area of major concern to the public and health sector workers). Many outlets also display extensive point-of-sale advertising and party pill give away enticement deals have been promoted in Christchurch (see appendix 2).
18. ADANZ considers that the newly created schedule, class D for BZP, has the potential to work well in controlling the harms that have been associated to BZP and similar substances. Particularly if the regulatory regime allowed for in the amendment is implemented and controls are rigorously enforced utilising those statutory powers specifically to regard to the:

- Sale to minors should be identified and prosecutions undertaken.
- Sale from petrol stations, liquor stores and licensed premises are prohibited
- Maximum dosage per pack restrictions are agreed upon and imposed
- Sale of loose powdered piperazines in bags banned

### **Making BZP Products Less Attractive**

19. The availability and accessibility of BZP products is high<sup>4</sup>. Along with the perception that party pills/herbal highs are safe, low prices mean that party pills are attractive. It is anticipated that a tax and licensing venues from which BZP products can be sold and sellers, will help reduce the availability of party pills/herbal highs.

20. It is anticipated that the cost to retailers of training and licenses will be added with the tax making party pills less attractive and accessible to consumers and particularly to people younger than eighteen years. Regulations and taxes imposed on tobacco illustrate this.

21. It is also anticipated that the income could be made from a well calculated tax to adequately fund administration and enforcement. With responsibility falling to the retailer to meet regulations, failure to do so will incur fines that must be rigorously enforced and also go towards the cost of developing information, enforcement and the other associated costs associated to use and related to health.

### **Conclusion**

22. ADANZ strongly believes that the New Zealand Government policy makers progress to a more sophisticated level of controlling substances such as BZP, that is, using regulation and enforcement, and education and culture change, rather than legislation. ADANZ has considered the strengths and weaknesses of the evidence that is currently available and acknowledges there are harms associated to BZP and similar piperazines. Having done so, ADANZ reinforces its message and those of the NZDF and NAC, that the classification of products containing benzylpiperazine, phenylpiperazine and related substances remain Class D and not be made illegal.

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<sup>1</sup> E-mail communication 22 February 2007 Reclassification of BZP from Class D of MoDA to Class C1 - issues to be considered in Drug Foundation submission.

<sup>2</sup> See 1

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<sup>3</sup> See 1

<sup>4</sup> Wilkins, C., Girling, M., Sweetsur, P., Huckle, T. & Huakau, J. (2006) Legal party pill use in New Zealand: Prevalence of use, availability, health harms and 'gateway effects' of benzylpiperazine (BZP) and trifluorophenylmethylpiperazine (TFMPP). Auckland: Centre for Social and Health Outcomes Research and Evaluation (SHORE), Massey University