

Report From Agency

**STATE OF WISCONSIN
CONTROLLED SUBSTANCES BOARD**

**IN THE MATTER OF RULEMAKING :
PROCEEDINGS BEFORE THE : REPORT TO THE LEGISLATURE
CONTROLLED SUBSTANCES BOARD : CR 20-079**

I. THE PROPOSED RULE:

The proposed rule, including the analysis and text, is attached.

II. REFERENCE TO APPLICABLE FORMS: N/A

III. FISCAL ESTIMATE AND EIA:

The Fiscal Estimate and EIA is attached.

IV. DETAILED STATEMENT EXPLAINING THE BASIS AND PURPOSE OF THE PROPOSED RULE, INCLUDING HOW THE PROPOSED RULE ADVANCES RELEVANT STATUTORY GOALS OR PURPOSES:

Flualprazolam is an analog of alprazolam (an FDA approved schedule IV controlled substance), differing in chemical composition by the presence of a fluorine atom. Flualprazolam is a benzodiazepine synthesized and patented in 1970s for research purposes but was never marketed as a medicine. Flualprazolam is not used clinically.

The onset of action due to flualprazolam is reported to be 10-20 minutes after oral use with a duration of action of 6-14 hours. Flualprazolam depresses the central nervous system resulting in sedation, reduced anxiety, and loss of consciousness. Flualprazolam is similar to alprazolam which has demonstrably greater abuse liability compared to diazepam, especially for those with a personal or family substance use disorder history.

The World Health Organization released a critical review report on flualprazolam in October 2019. On March 4, 2020, the United Nations Commission on Narcotic Drugs placed flualprazolam under international control as a Schedule IV. Delaware added several benzodiazepines, including flualprazolam, to Schedule IV due to the serious potential for abuse. Flualprazolam is on several states' law enforcement watchlists or alerts.

In 2019 and 2020, there has been an increased prevalence of flualprazolam in the United States. Law enforcement officers and medical examiners have provided information to the Controlled Substances Board indicating this substance is implicated in Wisconsin overdose cases, including those resulting in death. Alprazolam is not a schedule I

controlled substance, therefore, a prosecution involving flualprazolam can't be commenced under Wisconsin's analog law (s. 961.25, Stats).

Public health concerns are similar to other benzodiazepines which are higher potency with a relatively fast time of onset. When flualprazolam is combined with opioids, this contributes to increased overdose through benzodiazepine-potentiated opioid-induced respiratory depression. In addition, flualprazolam causes disinhibition and sedation that impair driving. There have been reports of intentionally counterfeit alprazolam product containing flualprazolam entering the drug supply chain in other states.

Flualprazolam has a fast onset of action and similarities to alprazolam and has a relatively high dependence liability.

The Controlled Substances Board considered the following factors in making the determination to add flualprazolam to the controlled substance schedules in ch. 961, Stats.:

- The actual or relative potential for abuse.
- The scientific evidence of its pharmacological effect.
- The state of current scientific knowledge regarding the substance.
- The history and current pattern of abuse.
- The scope, duration and significance of abuse.
- The risk to the public health.
- The potential of the substance to produce psychological or physical dependence liability.
- Whether the substance is an immediate precursor of a substance already controlled under ch. 961, Stats.

The Controlled Substances Board makes a finding that flualprazolam has a potential for abuse.

V. SUMMARY OF PUBLIC COMMENTS AND THE BOARD'S RESPONSES, EXPLANATION OF MODIFICATIONS TO PROPOSED RULES PROMPTED BY PUBLIC COMMENTS:

The Controlled Substances Board held a public hearing on January 15, 2021. No comments were received.

VI. RESPONSE TO LEGISLATIVE COUNCIL STAFF RECOMMENDATIONS:

There were no recommendations suggested in the Clearinghouse Report.

VII. REPORT FROM THE SBRRB AND FINAL REGULATORY FLEXIBILITY ANALYSIS: N/A