

To whom it may concern,

Re: Including a group entry for nitrite inhalants in Schedule 9 of the Poisons Standard

I am a gay man – a member of the community most affected by the proposed changes. Nitrite inhalants play an important role for many gay men in making sexual intercourse less painful, due to their principal effect of relaxing smooth muscle. The interim decision does not consider the *probability* of injury, which is likely to be extremely low given the common use of poppers in the gay community.

The Centre for Social Research in Health *Annual Report of Trends in Behaviour* (2016) reports that among gay men,

Amyl nitrite is the most commonly used drug by gay men in the GCPS (Gay Community Periodic Survey, a yearly survey conducted in capital cities since 1996). The proportion of men reporting the use of amyl nitrite has remained stable over the last decade, and was used by around 35%-40% in the six months preceding the survey. ([CSRH 2016 p8](#))

Given the high usage within the gay community, it should be noted the low level of injury, with only a small number of cases of ‘poppers maculopathy’ having been reported in the ophthalmology literature. Any experience of vision loss is a serious harm, but the *risk* -- the probability of this harm -- is incredibly low, given the high rate of poppers use in the gay community alone. The effects of nitrite inhalant use are extremely short-acting lasting a number of minutes. In the United Kingdom, A Home Affairs Select Committee report found the use of poppers was ‘not seen to be capable of having harmful effects sufficient to constitute a societal problem.’[i]

In Fact, the medical literature shows a smattering of case reports documenting injuries attributed to amyl nitrite inhalant use. It is only recently that there have been reports of retinal injuries subsequent to nitrite inhalant use and this trend is linked to the regulation of nitrite inhalants in both Canada and the European Union. Reports of ophthalmic injury only emerged after earlier attempts to regulate poppers in Canada and the European Union where the common ingredient in nitrite inhalant products, isobutyl nitrite, was banned by the European Union in 2007 over concerns about possible links to cancer and reproductive problems (something which it should be noted is not a concern for the majority of those who use this product). Since it was banned, isolated case reports have described partial vision loss as a result of using a changed formulation that was only adopted as a result of the EU ban. The potential for unintended consequences of regulatory action has not been properly considered by the TGA in its interim decision. Users have reported the reformulated products often cause an intense headache, ‘blue lips’ and a characteristic chesty cough in the days after use. The Lancet attributes ‘poppers maculopathy’ to the reformulated product.[ii]

This highlights the risk of product substitution posed by any ban similar to the many injuries and deaths caused due to Synthetic cannabinoids. Following the EU and Canadian regulatory action, alternative products have been brought to market. These are packaged in aerosol cans. These are not nitrite inhalants and their mechanism is effectively the same as paint-sniffing. These products would not be captured by the proposed ban, and indeed the proposed ban is highly likely to increase the market for such products.

Making nitrite inhalants illegal will drastically increase the risk of social harms caused by criminal prosecution. The harms caused by criminalisation far outweigh the harms prevented by restricting access to nitrite inhalants. Penalties for offences involving schedule 9 substances vary widely between states/territories, making the ban unpredictable and arbitrary in its effects. ACT has separate offences for supply, possession and use, with up to five years' imprisonment for each one. Victoria has a single offence with a fine of \$1600. The ban will create a black market in poppers products and further marginalised a community who have been historically marginalised, stigmatised and criminalised.

Yours sincerely,

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[i] Home Affairs Committee, Psychoactive Substances (report), London: Stationery Office, 23 Oct 2015, p. 14

<https://publications.parliament.uk/pa/cm201516/cmselect/cmhaff/361/361.pdf>

[ii] Gruener, Anna M., Megan A. R. Jeffries, Zine El Housseini, and Laurence Whitefield.

"Poppers Maculopathy." *The Lancet* 384, no. 9954 (November 1, 2014): 1606.

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