

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. I have worked as an educator and fundraiser in HIV prevention [REDACTED] and as consultant and communications specialist in the LGBTIQ community [REDACTED], as well as managed LGBTIQ community venues [REDACTED] and held advisory positions within Midsumma and other LGBTIQ Cultural institutions. I now work with Civil Society Organisations in capacity and advocacy training where we work with many non-profits working on LGBTIQ health and wellness issues.

I have used inhaled nitrites, popularly known as ‘poppers’, on occasion since 2006.

The effects of poppers use are extremely short-acting, less than 60 seconds. They play a very important role for many gay men in making sexual intercourse less painful, and less dangerous, due to their principal effect of relaxing smooth muscle. Indeed, a topical nitrite product, glyceryl trinitrate, is available for the same purpose as a pharmacist-only medication.

In the United Kingdom, the Conservative Party MP Crispin Blunt spoke publicly about the benefits that nitrite inhalants offer gay men, during debate over legislation to ban legal highs. 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.’**[\[i\]](#)

Poppers have been used by gay men for sexual purposes since the 1970s. The medical literature shows only a very low and negligible number of case reports documenting injuries attributed to improper popper use. Only recently have there been reports of retinal injuries subsequent to poppers use. This trend needs to be understood in a regulatory context.

In the EU in 2007 and in Canada in 2013, regulatory action was taken to ban the sale of the chemical formulations commonly included in poppers products. This in turn caused some manufacturers to include different formulations in poppers products. 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. 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 dangerous alternative products.

Poppers have been in use for nearly five decades with very few reports of serious harm, and recent case reports describe a previously undocumented form of harm. This suggests the harm is the result of the reformulated products, which were only adopted due to regulatory action. Banning nitrite inhalants *as a class* will have a significant impact on the capability of many gay men to achieve sexual pleasure and intimacy without pain, discomfort, and danger from damage (which includes the risk of anal fissures which heighten risks of blood borne diseases like HIV and HEP-C). In addition, it will expose a historically and culturally marginalised, stigmatised and criminalised community to a new vulnerability to criminal prosecution, totally disproportionate to the “crime”

A more targeted ban, leaving long-standing formulations, that have long been safely and legally used, legal, would reduce the risks of rare but serious clinical harms, and prevent the import and widespread uptake of copycat products whose risks are substantially unknown, it would also reduce the risks of criminalising a marginalised community and causing relationship stress through impacts on intimacy, while also preventing a possible increased risk from blood borne infection.

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. [https://doi.org/10.1016/S0140-6736\(14\)60887-4](https://doi.org/10.1016/S0140-6736(14)60887-4).