

14 September 2018

To whom it may concern,

I am writing in relation to the proposal to move nitrite inhalants onto Schedule 9 of the Poisons Standard, which would make the sale, possession, use or administration of poppers a criminal offence under controlled substances legislation in Australian states and territories.

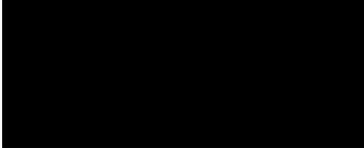
I am a widely published sociologist with over 20 years experience researching substance and medication use in various cultural, social and historical contexts, particularly among gay and other men who have sex with men. I sit on the editorial boards of several scholarly journals related to drug policy and sexual health, including the *International Journal of Drug Policy*, *Contemporary Drug Problems*; *Culture, Health & Sexuality*; *Biosocieties*; and *Sexualities*, and I am a Chief Investigator on an Australian Research Council Discovery Project (2017) exploring the use of medications and illicit substances among LGBTQ individuals and communities in Australia.

Since the mid 19th century, amyl nitrite and related compounds have a long and well-documented history of use for a variety of purposes. Over the last century they have primarily (although not exclusively) been used among gay and bisexual men who have sex with men, who typically use the substance in private, with sexual and romantic partners, as a muscle relaxant to help facilitate anal sex. Nitrites are typically used in small doses, in an event and episode specific manner, with minimal impact the vast majority of users' lives. In addition, the vast majority of use-events do not require any form of medical attention whatsoever and result in little if any ongoing physiological harm for the user.

The TGA's interim decision on nitrates states on several occasions that nitrites have no therapeutic use or benefit. This is an erroneous claim that rests upon a very limited – one might say myopic, if not downright homophobic – definition of what counts as 'therapeutic'. There is clear historical and cultural evidence that gay and other men who have sex with men have found inhalation of nitrites useful as a sexual aid and ameliorative technique to help the user participate in a sexual practice that is widely desired and considered fundamental for many members of the populations in terms of sexual congress and intimacy.

The interim decision also cites data indicating that Australia Poisons authorities have received 273 relating to concerns around nitrite poisoning over the past decade, with 72% of these calls requiring hospitalisation, with 41 cases *over ten years* requiring treatment with an antidote.

In a country with a population of over 24 million people, in which adults can easily obtain nitrite inhalant products in any adult shop in urban centres throughout the nation, this amounts to 27 calls per year: 0.00000135% of the population can be considered to



experience serious adverse events a year. While it would be foolhardy to try to estimate the prevalence of amyl use within the general population without sales data, recent cross-sectional surveys among gay men in Sydney and other urban centres published by the Commonwealth funded Centre for Social Research in Health at UNSW indicate that 50-60% of this sample of gay and bisexual men report having used nitrite inhalants such as amyl in the past 6 months (Hull et al. 2017, UNSW). Following Roy Morgan's estimate that 4-5% of Australians identify as homosexual men, it would be reasonable to claim that there are at least 600,000 regular users of amyl nitrate in Australia (this estimate is confined merely to the population of gay and bisexual men), who are likely to use the substance weekly, fortnightly, or at least monthly.

On the most conservative estimate, this generates 72 000 000 use events among gay and other men who have sex with men in a given year. I find it quite extraordinary that the TGA would consider moving this substance onto Schedule 9 of the Poisons Standard – a status similar to heroin – on the basis of fewer than 27 emergencies out of an estimated 72 million use events (at least) per year.

The effects of reclassification and heightened criminalization must also be considered. It is highly likely that intensified policing and criminalization of nitrite inhalant possession and sales will result in consumers seeking out substitute chemicals for the same effect, including black-market products, other dangerous inhalants, and substances obtained over the internet/darknet, an eventuality which is likely to pose considerable and increased danger to current users of the substance.

In short, I find no plausible justification for the proposed reclassification of nitrite inhalants, and would add that it smacks, if not of homophobia, then at the very least wilful disregard of the purported benefits of occasional use among non-heterosexual men, an already stigmatised and over-policed minority in most states in this country.

I suggest sales of safer nitrite products should continue to be permitted at restricted premises such as adult bookstores and that provisions should be introduced to decriminalise possession and use of these substances in the privacy of people's homes, where few casualties ever occur, and restricted premises such as licensed sex-on-premises venues. Moving this substance to Schedule 9 is unwarranted, unnecessary, callous to a social minority, and is likely to cause more harm than good.

Yours sincerely



A/Prof Kane Race