SUMMARY OF RECOMMENDATIONS ON H.R. 17463

A BILL TO REGULATE CONTROLLED DANGEROUS SUBSTANCES AND TO AMEND THE NARCOTICS AND DRUGS LAWS

PREPARED FOR THE USE OF THE

COMMITTEE ON WAYS AND MEANS

OF THE

U.S. HOUSE OF REPRESENTATIVES

BY THE

STAFF OF THE JOINT COMMITTEE ON INTERNAL REVENUE TAXATION

AUGUST 6, 1970

U.S. GOVERNMENT PRINTING OFFICE
48-634 WASHINGTON : 1970 JCS-7-70

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In 1968, under Reorganization Plan No. 1, the drug enforcement agencies of the Department of Health, Education and Welfare and the Treasury Department (except those involved with customs) were merged and transferred to the Department of Justice as the Bureau of Narcotics and Dangerous Drugs.

In July of 1969, the Administration sent to the Congress its recommendations with respect to drug control. The primary purpose of these recommendations was to reorganize the existing narcotics and dangerous drugs control laws and to place them in a single statute to be enforced—in accordance with the 1968 reorganization plan—by the Bureau of Narcotics and Dangerous Drugs.

In the Senate the Administration's recommendations were introduced on July 16, 1969, as S. 2637, and referred to the Judiciary Committee. The Senate Judiciary Committee reported a clean bill, S. 3246, which is essentially the same as the Administration proposal except for the revision of the existing penalties structure. The Senate passed the bill on January 28, 1970.

In the House the original Administration proposal was divided into two parts and introduced as two separate measures: H.R. 13742, "The Controlled Narcotics Drug Act of 1969," introduced on September 11, 1969, by Chairman Mills and Mr. Byrnes and referred to the Committee on Ways and Means; and H.R. 13743 "The Controlled Depressant and Stimulant Drug Act of 1969," introduced the same day by Chairman Staggers and Mr. Springer of the Committee on Interstate and Foreign Commerce and referred to that Committee. The Subcommittee on Public Health and Welfare of the Interstate and Foreign Commerce Committee held hearings on H.R. 13743, completed its consideration of the bill, and on July 22, 1970, reported a clean bill, H.R. 18583, to the full Committee.

On May 6, 1970, Chairman Mills and Mr. Byrnes introduced H.R. 17463, which is essentially the Senate passed bill except for a few minor changes recommended by the Administration. The Committee on Ways and Means held public hearings on the bills presently pending before the Committee to regulate controlled dangerous substances and to amend the narcotics laws from July 20, 1970, through July 27, 1970.

The following are the recommendations of the witnesses at these hearings in regard to H.R. 17463, which is the Administration supported bill before the Committee.

TITLE I: FINDINGS AND DECLARATIONS, DEFINITIONS, AND REPEALING AMENDMENTS

Definitions (Sec. 102 of Bill)

Dr. John J. Boren, Professor, Department of Psychology, The American University, Washington, D.C. (July 22, 1970, p. 5) [1]: Recommends that a "laboratory research scientist" (as distinct from a "practitioner") be defined so that the term can be used in other places in the bill.

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, p. 6): Recommends that the term "dangerous" be eliminated in the term "controlled dangerous substance." States that most of the drugs to be controlled have a useful and legitimate medical purpose and are necessary to maintain the health and general welfare of the American people.

TITLE II: STANDARDS AND SCHEDULES

Authority To Control (Sec. 201 of Bill)

Honorable Claude Pepper, Member of Congress, State of Florida (July 21, 1970, p. 18): Recommends that the authority to schedule substances be vested in the Secretary of Health, Education, and Welfare rather than in the Attorney General. Indicates that a scheduling decision is essentially a scientific and medical one with incidental law enforcement aspects. Proposes, as an alternative which is a compromise between law enforcement and the medical communities, to create a commission on drug classification with 5 commissioners appointed by the President—one from HEW, one from the Department of Justice and three knowledgeable people from the general public.

Dr. Henry Brill, Chairman, Committee on Narcotics and Drug Dependence, American Medical Association (July 22, 1970, p. 3): Recommends that the Secretary of Health, Education, and Welfare have the final decision on the medical and scientific aspects of scheduling, and that the scheduling be predicated on his decision. Believes that the Secretary is in a favorable situation to provide for the necessary basic studies and to evaluate recommendations for classifying drugs.

Dr. Daniel X. Freedman, Louis Block Professor of Biological Sciences and Chairman, Department of Psychiatry, University of Chicago (July 22, 1970, p. 3): Does not believe that the public health dangers of a drug should be adjudicated by the Attorney General.

Lawrence Speiser and Hope Eastman, Washington, D.C. Office, American Civil Liberties Union (July 22, 1970, p. 3): Recommends that the Secretary of HEW, in consultation with the Attorney General, be authorized to establish classes of drugs requiring Federal control.

Dr. Jonathan O. Cole, Superintendent, Boston State Hospital, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 2): Believes that drug classification belongs solely in the Department of Health, Education and Welfare and that the regulations governing these areas should be prepared by HEW.

Neil L. Chayet, attorney, lecturer in legal medicine, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 4): Opposes the provision in the bill giving final authority to the Attorney

[1] All page numbers refer to the page in the prepared statement of the witness.

General to control all dangerous substances. Suggests an alternative approach to give the appropriate power to the Secretary of Health, Education and Welfare, while at the same time retaining for the Attorney General, the veto power if he deems that the substance cannot appropriately be controlled because of legal reason.

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, p. 8): Believes that determinations and ultimate decisions on scientific and medical matters must be made by qualified medical and scientific personnel on the basis of medical and scientific evidence. Recommends the provisions of section 201(b) of H.R. 18583; believes it contains a satisfactory compromise with respect to various factors involved in the determination of whether or how to control a substance.

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, pp. 6–7): Recommends that it be made clear that Congress intends that interested parties should continue to be entitled to an opportunity for a hearing on the record in case of decisions concerning the control of drugs. Suggests that this could be accomplished by referring in section 201 of the bills specifically to sections 554, 556 and 557 of Title 5 of the United States Code. Believes that the reference in section 201 of the bill to the procedures of subchapter II of chapter 5 of Title 5 of the United States Code could, depending on how it is interpreted, impair the right of an interested individual or company to notice and opportunity for a hearing as provided under present law.

Schedules of Controlled Substances (Sec. 202 of Bill)

Dr. Roger O. Egeberg, Assistant Secretary for Health and Scientific Affairs, Department of Health Education and Welfare (July 21, 1970, p. 6): Recommends that two hallucinogens, MDA(3,4—methylenedioxy-amphetamine) and TMA(3,4,5—Trimethoxyamphetamine) be added to the list of hallucinogenic substances in schedule I. Indicates that these two hallucinogens are known by the National Institute of Mental Health to be actively abused.

Dr. Daniel X. Freedman, Louis Block Professor of Biological Sciences and Chairman, Department of Psychiatry, University of Chicago (July 22, 1970, p. 3): Opposes the criteria for scheduling especially in the case of marihuana which is to be in the same schedule as heroin because there is presently no medical utility for marihuana. Believes that the effects and consequences of marihuana do not warrant its classification for control in the same manner as heroin.

States that the criteria for scheduling also forces the classifiers to include methamphetamine ("speed," a toxic, dangerous and fairly widely abused drug) with sedative agents, such as chloral hydrate (rarely abused in actuality) and chlordizepoxide, a medically useful and not widely abused drug. Points out that methamphetamine is also more dangerous than marihuana to personal health and public safety, but receives a lesser classification. Points out further that the effects of short-acting barbituates, which are abused, and long-acting barbituates, which are also used for sedatives and not abused (and are useful in the treatment of many neurological diseases), are not properly distinguished.

Suggests that the easiest and most flexible approach is to be able rapidly to assign a drug for which an actual pattern of abuse can be

reliably detected to the appropriate control measures. The most efficient control measures in some instances may simply be the formal or informal institution of quota regulations, or possibly tightened regulations on prescriptions and refills.

Dr. Roger E. Meyer, Associate Professor of Psychiatry, Boston University School of Medicine, on behalf of Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 5): Suggests that there should be more flexibility in changing the schedule.

Dr. Jonathan O. Cole, Superintendent, Boston State Hospital, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 2): States that the criteria for classification are poor and mixed up. Believes that one of the criteria for Schedule I ("high potential for abuse") is a term which covers many substances. States that what really matters is the seriousness of the consequence of abuse. Recommends the following criteria for the schedules:

Schedule I: (1) very serious danger to the individual resulting from illicit use; (2) substantial evidence of illicit use or very substantial evidence based on experimental studies in man that illicit use is very likely to occur; (3) assuming that the above two criteria are met, absence of above appropriate medical use.

Schedule II: (1) serious damage to the individual resulting from illicit use; (2) same as in Schedule I; (3) medical or research use under Schedule II controls appropriate.

Schedule III: (1) moderate danger to the individual resulting from illicit use; (2) same as Schedule I; (3) medical or research use under Schedule III controls appropriate.

Schedule IV: Drugs included in this schedule would have only mild or infrequent danger to the individual.

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, pp. 10 and 11): States that historically the criteria for classifications have been based on the degree of medical utility and the degree of hazard or risk to the public health. Suggests that in keeping with our historical approach to this subject and in anticipation of possible international treaty obligations, we should maintain these important premises for such classifications.

Believes that the classification of drugs and controlled substances in the 5 schedules proposed in H.R. 18583 was a distinct improvement as it provides greater flexibility but does not weaken necessary control.

States that dextrorphan, item 13 of schedule I of H.R. 17463, is not controlled under the Single Convention on Narcotics of 1961 and is not addictive and should not be listed in schedule I.

TITLE III: REGULATION OF MANUFACTURE, DISTRIBUTION, AND DISPENSING OF CONTROLLED DANGEROUS SUBSTANCES

Registration and Requirements for Registration (Secs. 302 and 303 of Bill)

Dr. Daniel X. Freedman, Louis Block Professor of Biological Sciences and Chairman, Department of Psychiatry, University of Chicago, (July 22, 1970, p. 5): Suggests that the Secretary of HEW rather than

the Attorney General should review the protocols of researchers and register such workers.

Dr. John J. Boren, Professor, Department of Psychology, The American University, Washington, D.C. (July 22, 1970): States that the bill does not clearly provide for a research scientist (either a PH.D., or a M.D. who is not licensed to practice medicine) to have access to the drugs for laboratory research and, further, burdens a scientist with annual registration procedures. Recommends that a laboratory research scientist be specifically authorized to use controlled substances for research purposes and that certain obstacles to research be removed.

Dr. Henry Brill, Chairman, Committee on Narcotics and Drug Dependence, American Medical Association (July 22, p. 5): Recommends that physicians not be required to register in order to dispense drugs in schedules III and IV. Believes that the control provisions be concentrated on the points of origin and distribution, rather than on the practice of medicine.

Dr. Roger E. Meyer, Associate Professor of Psychiatry, Boston University School of Medicine, on behalf of Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 6): States that the registration of researchers and practitioners and their recordkeeping responsibilities under the bill is unclear.

Dr. Jonathan O. Cole, Superintendent, Boston State Hospital, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 5): States that the role of the Ph. D. research investigator who dispenses drugs to animals or test tubes needs clarification. Indicates that such investigators are not now licensed by most States and would not have clear access to standard research drugs under the bill.

Neil L. Chayet, attorney, lecturer in legal medicine, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, pp. 7–8): States that registration of persons who dispense schedule I and II substances is appropriate, but there is little need for registration by persons who deal with schedule III and IV substances in the course of their professional practice.

The only exception to this would be doctors who really dispense substances and charge for these substances an additional amount other than their usual charge for services rendered to the patients (some diet doctors who in essence are operating a kind of pharmacy).

States that the legislation should be clear to allow the Ph.D. researcher to be registered to possess the drugs in his own right for animal and other non-human laboratory research.

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, p. 9): Concerned that section 303(f) providing for the registration of research practitioners might severely hamper important research relating to the development and evaluation of drugs.

Does not object to the annual registration of practitioners who engage in research, but is vigorously opposed to these requirements which would duplicate and extend the existing investigational new drug procedures now administered by the Food and Drug Administration. States that the delay would be involved in a preclearance of proposed research protocols which would hinder and discourage valuable research and evaluation relating to potential legitimate and scientific development and use of new drugs.

Stephen Ailes, attorney, on behalf of S. B. Penick & Company, Division of CPC International, Inc., Merck & Co., Inc., and Mallinckrodt Chemical Works (July 27, p. 2): Supports section 303(a) of the bill and believes that it makes it clear that the long-time National policy of closely limiting the number of manufacturers of opium derivatives remains the National policy.

Denial, Revocation, or Suspension of Registration (Sec. 304 of Bill)

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, pp. 11 and 12): Suggests that it should be made clear that administrative procedures appropriate to licensing, notice and opportunity for hearing are guaranteed to all parties by amending section 304(c) specifically to refer to the necessary portions of the act.

Quotas Applicable to Certain Substances (sec. 306 of bill)

Dr. Daniel X. Freedman, Louis Block Professor of Biological Sciences and Chairman, Department of Psychiatry, University of Chicago (July 22, 1970, p. 5): Opposes the provision allowing the Attorney General to determine the nation's needs and production quotas. Believes that the medical, scientific and industrial needs of the U.S. could be best assessed by the Department of HEW, in consultation with all the affected parties, and simply enforced by the Department of Justice.

Neil L. Chayet, attorney, lecturer in legal medicine, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, pp. 6–7): Recommends that the establishing of the total quantity and production quotas should be in the hands of the Department of Health, Education and Welfare, with appropriate consultation with the Attorney General, if a peculiar law enforcement problem is presented. Indicates, however, that the power to enforce and control the quotas once established should go to the Attorney General.

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, p. 13): Recommends that section 306 of the bill be made clear that in determining production quotas for the controlled substances in schedules I and II the Attorney General shall make the quotas applicable to basic classes of the controlled substances rather than to individual dosage forms or salts or other variations of the basic classes.

Records and Reports of Registrants (sec. 307 of bill)

Dr. Henry Brill, Chairman, Committee on Narcotics and Drug Dependence, American Medical Association (July 22, p. 6): Suggests that physician recordkeeping requirements not be expanded beyond those in present law. Believes that the intent of the bill is to cover only those who regularly dispense drugs to patients and charge for them and is not intended to apply to a physician acting in the course of his professional practice.

Dr. Daniel X. Freedman, Louis Block Professor of Biological Sciences and Chairman, Department of Psychiatry, University of Chicago (July 22, 1970, p. 5): States that the recordkeeping requirements of section 307 of the bill are not clear as to the procedures applicable to legitimate practitioners, researchers and teachers in the biomedical sciences.

Dr. John J. Boren, Professor, Department of Psychology, The American University, Washington, D.C. (July 22, 1970, pp. 6–7): Recommends reducing the amount of bookkeeping for scientists in the same way and for the same reasons as the bill does for the practitioner.

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, p. 15): Recommends the adoption of the provisions of section 307 of H.R. 18583, especially with the requirements of subsection (b)(2) regarding the maintenance of records. States that this provision is a clear acknowledgment of modern business methods.

Order Forms (Sec. 308 of Bill)

Neil L. Chayet, attorney, lecturer in legal medicine, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 8): Recommends that in section 308 of the bill the words "however, such practitioner must comply with the requirement in section 306 of this Act" should be deleted as it seems to take away the exemption for physicians and makes no constructive addition to the section.

Prescriptions (sec. 309 of bill)

Cyril F. Brickfield, Legislative Counsel, American Association of Retired Persons, National Retired Teachers Association (July 23, 1970, pp. 1–3): Believes that section 309 of the bill (entitled prescriptions) imposes sufficient controls over the dispensing of dangerous substances. Concerned that an attempt may be made to amend that section to prohibit the sending of certain prescription medicines through the mail. Believes that such a prohibition would discriminate against the aged, especially those who are immobilized and cannot leave their homes and those who are impoverished and must obtain prescription medicines at the lowest possible cost.

Points out that the National Retired Teachers Association and the American Association of Retired Persons, among other things, provide a convenient, low-cost mail order prescription service to their retired and elderly members. Indicates that this service is provided to meet a need, and hundreds of thousands of older persons in this country have come to rely on this and similar services provided by other organizations.

General

Dr. Henry Brill, Chairman, Committee on Narcotics and Drug Dependence, American Medical Association (July 22, p. 7): Recommends in the case of physicians' offices and of hospitals and clinics, that patients' records be exempt from inspection and be protected from the broad subpeona powers granted the Attorney General. States that such records contain information concerning individuals which is of no relevance to drug law enforcement, and which should be regarded as privileged.

Suggests that information which a physician is required to give concerning the dispensing of a controlled substance to a patient be limited to the name and amount of the drug administered or prescribed, the date given, and the name and address of the patient.

Dr. Daniel X. Freedman, Louis Block Professor of Biological Sciences and Chairman, Department of Psychiatry, University of Chicago (July 22, 1970, p. 4): Recommends that the bill be modified to protect the

privacy and confidentiality of the patient-physician relationship. Suggests that the meanings of "dispensor" and "distributor" be clarified and restricted to drugs listed in schedule I or II, so that the terms would not apply to any physician who gives a starter dose fo a minor tranquilizer and to every medical student who utilizes a barbiturate in a rat in the course of his routine training in physiology laboratories

TITLE IV: IMPORTATION AND EXPORTATION

Importation (Secs. 401 and 402 of Bill)

Stephen Ailes, attorney, on behalf of S. B. Penick & Company, Division of CPC International, Inc., Merck & Co., Inc., and Mallinckrodt Chemical Works (July 27, p. 2): Supports section 401(a) which he states perpetuates a long-time National policy against importation of finished narcotic drugs.

Exportation (Sec. 403 of Bill)

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, p. 15): Recommends that the requirement of the use of a special invoice notice to the Attorney General for exportation purposes be eliminated and that these sections be changed so as to permit a notification system utilizing either the invoice or the export declaration form now used by the United States Department of Commerce for such exports.

TITLE VI: OFFENSES AND PENALTIES (SECS. 501–509 OF BILL)

Honorable Claude Pepper, Member of Congress (July 21, 1970, p. 25): Recommends that the penalty for simple possession of marihuana be lessened to a misdemeanor pending the results of an authoritative study.

Dr. Henry Brill, Chairman, Committee on Narcotics and Drug Dependence, American Medical Association (July 22, pp. 8–9): Suggests that penalties applicable to physicians for infraction of dispensing and recordkeeping requirements be reduced. Points out that the unintentional failure of a physician to make an entry in his records concerning a small amount of a controlled drug could place him in violation of the law and subject him to a fine of up to $25,000.

Suggests that medical procedures be provided for the handling of drug abuse where medical treatment is indicated. Recommends that the bill provide a procedure whereby the court is to appoint one or more medical experts in each case where a drug abuser is brought to trial on a charge of illegal possession and where, in the court's opinion, medical treatment may be indicated. A medical determination would then be made as to whether the defendant has a medical problem associated with his abuse of drugs and, if so, recommending to the court the type of treatment needed.

Lawrence Speiser and Hope Eastman, Washington, D.C., Office, American Civil Liberties Union (July 22, 1970, p. 2): Opposes the continuation of any criminal penalties on the use and possession of marihuana.

States that the definition of "continuing criminal enterprise" is so broad, vague, and ambiguous that it is void for vagueness under the due process clause of the Fifth Amendment.

TITLE VI: ADMINISTRATIVE PROVISIONS

Education (Sec. 602 of Bill)

Dr. Henry Brill, Chairman, Committee on Narcotics and Drug Dependence, American Medical Association (July 22, p. 4): Suggests that the principal efforts in education and research programs should remain in the Department of Health, Education, and Welfare with the Department of Justice having a responsibility to conduct research in matters that pertain to drug abuse law enforcement.

Dr. Daniel X. Freedman, Louis Block Professor of Biological Sciences and Chairman, Department of Psychiatry, University of Chicago (July 22, 1970, p. 5): Believes that the provision on research and education should limit such programs to operations concerning the effectiveness of policing supplies and the authority preferably to contract for or directly to operate laboratories to identify seized contraband and street substances.

Dr. Jonathan O. Cole, Superintendent, Boston State Hospital, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 2): Believes that the making of decisions about medical research and practice belongs solely in the Department of Health, Education and Welfare and that the regulations governing these areas should be prepared by HEW.

Neil L. Chayet, attorney, lecturer in legal medicine, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 8): Opposes section 602(a) which authorizes and directs the Attorney General to carry out educational and research programs. States that the primary responsibility for research involving controlled substances should remain with the Department of Health, Education and Welfare.

Scientific Advisory Committee (Sec. 604 of Bill)

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, pp. 12 and 13): Suggests that any provision such as section 604 of H.R. 17463, providing for a scientific advisory committee, should authorize at least some representation on the committee of those having expert knowledge about the manufacture and distribution of drugs.

Administrative Hearings (Sec. 605 of Bill)

Stephen Ailes, attorney, on behalf of S. B. Penick & Company, Division of CPC International, Inc., Merck & Co., Inc., and Mallinckrodt Chemical Works (July 27, pp. 2–3): Supports section 605(b) which he states preserves existing law by calling for appropriate hearings under the Administrative Procedure Act if the Attorney General wishes to register additional manufacturers or permit importation of these substances.

Subpoenas (Sec. 606 of Bill)

Lawrence Speiser and Hope Eastman, Washington, D.C. Office, American Civil Liberties Union (July 22, 1970, p. 7): Opposes the provision that authorizes the Attorney General to subpoena witnesses and documents without adequate regard for the requirement of the Fourth Amendment that warrants be specific.

TITLE VII: ENFORCEMENT PROVISIONS

Search Warrants (Sec. 702 of Bill)

Lawrence Speiser and Hope Eastman, Washington, D.C. Office, American Civil Liberties Union (July 22, 1970, pp. 8–9): Opposes the provision authorizing "no-knock warrants" as violating the Fourth Amendment to the Constitution.

Dr. Roger E. Meyer, Associate Professor of Psychiatry, Boston University School of Medicine, on behalf of Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 6): States that the "no-knock" provisions of the bill present certain civil liberties questions. Indicates a concern that they may at times involve physicians in practice and researchers as well.

Neil L. Chayet, attorney, lecturer in legal medicine, on behalf of the Committee for Effective Drug Abuse Legislation (July 23, 1970, p. 9): Opposes the "no-knock" provision and urges its deletion from the bill. States that this provision violates one of our most basic freedoms—the freedom to remain undisturbed in the sanctity of our home.

Administrative Inspections and Warrants (Sec. 703 of Bill)

Lawrence Speiser and Hope Eastman, Washington, D.C. Office, American Civil Liberties Union (July 22, 1970, pp. 6–7): Opposes the provision that permits administrative inspections on merely a showing of a "valid public interest" and then permitting such inspections without warrants. Believes that this provision would create an entirely new category of warrantless searches which are unjustified by any showing of "exceptional need" and which represents a dangerous and unwarranted infringement on the protection guaranteed to each citizen by the Fourth Amendment.

Immunity and Privilege (Sec. 707 of Bill)

Lawrence Speiser and Hope Eastman, Washington, D.C. Office, American Civil Liberties Union (July 22, 1970, pp. 10–11): Opposes the provision which compels a witness to testify or produce evidence "necessary to the public interest" with a grant of immunity. Believes that the grant of immunity is incomplete by not prohibiting all future prosecutions and penalties but only offers immunity from the use of the evidence compelled in any subsequent criminal case. Also, believes the provision undermines the Fifth Amendment privilege against self-incrimination.

General

Honorable Claude Pepper, Member of Congress, State of Florida (July 21, 1970, p. 20): Suggests making the arrest of a person with a substantial amount of narcotics in his possession a nonbailable offense.

Lawrence Speiser and Hope Eastman, Washington, D.C. Office, American Civil Liberties Union (July 22, 1970, p. 4): Believes that the proposed elaborate enforcement provisions greatly undermine the constitutional restrictions against arbitrary government.

OTHER COMMENTS

Honorable Claude Pepper, Member of Congress, State of Florida (July 21, 1970, p. 22): Suggests considering the problem of limiting and registering the production and distribution and sale of narcotics diluents and paraphernalia, which are necessary for the merchandising and packaging of heroin.

William Campbell, Assemblyman, Chairman, Subcommittee on Alcoholism and Drug Abuse, California State Legislature (July 27, 1970, p. 4): Recommends that an amendment be added to any legislation passed by this Committee which would prohibit the solicitation or sale of amphetamines and barbiturates by use of the mails. Suggests that this prohibition extend to prescriptions as well as mail order sales.

Mrs. Edward F. Ryan, National PTA Chairman for Legislation, National Congress of Parents and Teachers (July 27, 1970, p. 4): Urges:

(1) that legislation provide separately for controlling nonuser sources and distributors of drugs, retaining constitutional safeguards, and that research be encouraged to govern the classification of drugs;

(2) that courts be given discretion in handling the cases of all users, for it is known that many users are compelled to distribute by fear or by necessity of supporting a habit; and that treatment should be encouraged through cooperative means, not through control, for these problems are medical and psychological;

(3) that medical and psychological resources be provided with increased funds as required;

(4) that the Drug Abuse Education Act be amended to authorize funds for comprehensive health education rather than for drug abuse education alone;

(5) that funds be authorized to assist community agencies in developing coordinated programs to involve all youth in constructive activity.

William Campbell, Assemblyman, Chairman—Subcommittee on Alcoholism and Drug Abuse, California State Legislature (July 27, 1970, pp. 4–5): Suggests that Congress consider drug advertising. States that the Federal Communications Commission has done a fairly good job in controlling advertising that is obviously false, misleading or offensive, but advertising which has a more subtle effect on social patterns and customs—and this is the category of drug advertising—is much more difficult to come to grips with. Suggests that guidelines be provided to the Federal Communications Commission to insure that such advertising is not simply an inducement to use drugs as an excuse for honestly facing the social and personal problems of our time.

Bruce J. Brennan, Vice President and General Counsel, Pharmaceutical Manufacturers Association (July 27, 1970, p. 5): Suggests that certain essential Federal preemption provisions should be enacted to provide that conformance with the Federal regulatory requirements would constitute conformance with similar State requirements in the following fields: classification of drugs; definitions, registration or licensing of manufacturers; maintenance of records, including inventories, and reports regarding the manufacture, shipment and receipt of controlled drugs and substances; and labeling.

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