Students for Sensible Drug Policy
1800 M St NW, #33051
Washington, DC 20033
ssdp.org

March 26, 2026

To: The Honorable Chair and Members
House Committee on Energy and Commerce
Health Subcommittee
2123 Rayburn House Office Building
45 Independence Ave SW, Washington, DC 20515

Statement of Opposition to H.R. 8000 "End The Needless Distribution of 7-OH" Act

To The Honorable Chair and Members of the House Energy and Commerce Health Subcommittee:

My name is Brooke Sanders and I am a Neuroscience PhD researcher at the University of South Florida, where I study the epigenetic impacts of various substances on the human genome, as well as Director of Network Relations at Students for Sensible Drug Policy (SSDP).

Students for Sensible Drug Policy respectfully urges the Subcommittee to oppose H.R. 8000, which would classify 7-hydroxymitragynine (7-OH) as a Schedule I controlled substance under the federal Controlled Substances Act.

As the world's largest youth-led nonprofit dedicated to advancing evidence-based, public health–oriented approaches, SSDP supports thoughtful policy that protects health and safety. However, **scheduling 7-OH as Schedule I would have serious unintended harms and is not grounded in a comprehensive scientific assessment.**

Summary of Evidence and Harms

What is 7-OH?

7-hydroxymitragynine (7-OH) is a naturally occurring alkaloid found in the kratom plant (*Mitragyna speciosa*), a tropical tree native to Southeast Asia. **It is not a novel synthetic drug, nor is it a laboratory invention.** Like many plant-derived compounds — from morphine in poppy plants to caffeine in coffee — 7-OH exists as part of a complex botanical profile that humans have interacted with for centuries. It can be present naturally in kratom leaves or produced through simple oxidation processes, similar to how other botanical compounds are stabilized or concentrated for consistency.

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How 7-OH Works in the Body

7-OH is a partial agonist at the mu-opioid receptor, meaning it binds to the same receptors targeted by prescription pain medications, but does so in a fundamentally different way. Unlike full opioid agonists such as oxycodone or fentanyl, partial agonists have a natural ceiling effect — beyond a certain dose, additional amounts do not produce proportionally greater receptor activation. This pharmacological distinction is significant from a safety and policy standpoint. Importantly, 7-OH appears to act through pathways that may produce less respiratory depression — the primary cause of opioid overdose fatalities — compared to traditional opioids. These characteristics make 7-OH a **compound of genuine scientific interest,** particularly in the context of the ongoing search for safer pain management alternatives.

7-OH products are used by adults seeking

- Alleviation of chemotherapy side effects (Farkas et al., 2022)
- Relief from chronic pain (Spetea & Schmidhammer, 2019)
- A reduced dependence liability on opioids (Boyer et al., 2008)

For many individuals, access to kratom-derived compounds has been life-changing — particularly for those failed by conventional pain and substance-use treatment systems.

Current Scientific Evidence

A 2023 study showed that the viability, proliferation, and migration of cancer cells is directly inhibited by mitragynine and its active metabolites, such as 7-OH (Viwatpinyo et al., 2023). The reduction of brain tumor cells were observed via mitragynine and its metabolites ability to induce targeted cell death, cell cycle arrest, and cell migration of C6 rat glioma, SHSY-5Y human neuroblastoma, and HT22 mouse hippocampal neuronal cells. The evidence presented by Viwatpinyo and colleagues represents mitragynine and its active metabolites' unique ability to induce antitumor effects in three different organisms.

7-OH has been noted as a novel therapeutic agent for the treatment of Human Epidermal Growth Factor Receptor 2 (HER2) positive breast cancer (Akbar et al., 2025). 7-OH exhibited strong and stable interactions in high affinity to HER2, which is a classic pharmacological identifier of a drug with chemotherapeutic properties. Akbar and colleagues present significant data which supports 7-OH as a “viable candidate for HER2-targeted breast cancer therapy”.

When assessing the genotoxicity risk of 7-OH enriched mitragynine, there is no significantly observed hazard (Harnkit et al., 2026). In in-silico genotoxicity, 7-OH was inactive in a model of micronucleus activity and non-genotoxic. In addition, this work exemplifies the compound's low risk profile for chromosomal damage. Computational analysis concluded that the assays conducted were “quite trustworthy” in the lack of genotoxic evidence found with 7-OH.

Research Harm

Placing 7-OH in Schedule I of the Controlled Substances Act would put an immediate freeze on all research currently being conducted on 7-OH and negatively impact the ability of researchers to continue scientific and medical research into this compound, its potential uses, and any existing safety concerns.

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Federal Legal Status

At the federal level, 7-hydroxymitragynine and kratom broadly remain legal and unscheduled under the Controlled Substances Act. The most significant federal action came in 2016, when the DEA announced its intent to temporarily place kratom's primary alkaloids, including 7-OH, into Schedule I of the Controlled Substances Act. Following substantial public comment and congressional concern, the DEA withdrew the proposal and opened a formal public comment period to gather more information. Since then, the FDA has continued to raise questions about the safety profile of kratom products, issuing import alerts and warning letters to certain manufacturers, while stopping short of pursuing federal scheduling. The result is a federal status that remains unresolved — kratom and its alkaloids are neither approved nor prohibited at the federal level, leaving consumers, researchers, and manufacturers operating without a clear or consistent regulatory framework.

The Facts Do Not Justify Schedule I Prohibition

While there are legitimate concerns about 7-OH products sold without clear labeling or regulatory oversight, these findings support regulation—not criminalization. Schedule I classification is reserved for substances with *no accepted medical use* and *no pathway for safe study*. Applying it here would shut down urgently needed research into pharmacology, novel therapeutics, toxicity thresholds, safer formulations, and appropriate regulatory controls—leaving policymakers blind to the very risks they seek to address. And it would negatively impact consumers who would now seek alternatives from the illicit market, risking overdose and death.

Criminalization Will Increase, Not Reduce, Public Health Risk & Public Safety Concerns

Adding 7-OH to Schedule I of the Controlled Substances Act will not improve public safety, but it will divert resources from treatment, education, and oversight — evidence-based practices — into enforcement.

H.R. 8000 is entitled the 'End Needless Distribution of 7-OH Act,' but if H.R. 8000 passes, demand for 7-OH will not disappear. Instead, it will be pushed into illicit markets, where products are more likely to be adulterated, mislabeled, or dangerously potent.

Available evidence indicates that severe adverse outcomes associated with kratom-derived compounds are consistently linked to polysubstance use, contamination, or prior history of substance abuse—not typical use alone (United Nations Commission on Narcotic Drugs, 2021). Schedule I enforcement would drive consumers away from regulated environments and education about safer consumption practices, increasing the likelihood of unsafe use.

Criminalizing 7-OH will not eliminate its production or demand; it will instead displace regulated small businesses—those with clear incentives to comply with safety standards and oversight—and cede the market to unregulated actors operating outside the reach of public health protections and accountability, while further exposing thousands of Americans—particularly young people and communities already over-policed under harmful drug war policies—to arrest, prosecution, and incarceration.

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A Sensible Path Forward

H.R. 8000 would expand criminalization, suppress research, and drive risk underground—all while failing to address the root causes of harm associated with 7-OH products.

For these reasons, **Students for Sensible Drug Policy respectfully urges the House Committee on Energy and Commerce Health Subcommittee to OPPOSE H.R. 8000** and instead adopt a sensible approach to reasonable public health concerns.

We do not need to choose between inaction and prohibition. SSDP urges the Subcommittee to reject H.R. 8000 and instead pursue evidence-based safeguards, including:

- Product testing and accurate labeling
- Clear dosage and consumer education standards
- Ongoing research access for universities and medical institutions
- Age verification through valid ID at the point of purchase
- Good Manufacturing Practice (GMP) standards to ensure product consistency and purity
- Adverse event reporting requirements so regulators and researchers can track safety data over time

Rather than criminalization, these measures address the real risks associated with unsafe formulations of 7-OH products while preserving opportunities for research, informed use, and public safety policies that reflect evidence.

Thank you for your consideration.

Sensibly,

Brooke Sanders, MS
Director of Network Relations & Strategic Expansion
brooke.sanders@ssdp.org
202-393-5280