

To Whom it May Concern,

Open Letter

24/1/19

PILL TESTING – A Mistake that should not be Made!

In our current 'post-truth' era, we see not only truth, but now facts and sound evidence not simply ignored, but willfully vilified in vitriolic rants that trade off genuine (and sadly blind) grief to fulfill a disturbing agenda. Perhaps more cynically, using a 'faux-compassion' by pro-drug activists seeking not an outcome of best practice health, safety and well-being of delaying or denying uptake of illegal drugs, rather a surreptitious, yet increasingly unsubtle push for drug use normalization.

Let us be very clear; **Every** drug taking episode puts that 'user' in harm's way – every episode. Our concern, as should be yours, is that permission granted episodes would be even more disturbing!

Regardless of the illegal substance abused, every consumption is doing harm, both short and long term, to the individual. The role of a healthy and functional society is not only preventing harm, though a good start, but to maximize potential in health and well-being and safety. However, if 'avoiding death' becomes the only concern of small group of policy-makers, politicians and pushers, and no other concern by what good governance is ignored, then one must wonder what duty of care is being practiced?

Civil Society with best practice at the fore for the health and well-being of its citizens, doesn't start with a permission modelling enterprise that seeks, at best, to simply minimize potential for death – such societies are in a serious mess. Demand is what is driving supply and it is permission modelling and utter disregard for personal responsibility, legal and health accountability that continue to deny best practice, and simultaneously empower, endorse, encourage and enable drug use!

These National Drug Strategy and UNODC best practice undermining models, have one clear agenda. Put the self-harming drug user in charge of drug policy interpretation, enable drug use, then hold the rest of the best-practice adhering communities to ransom for personal and dangerous conduct.

According to investigations by Drug Free Australia, Coroner's toxicology reports about the actual cause of death from party pill consumers are clear as to what is the issue, but this data is not being at all, accurately report by any of the 'activists', seeking to introduce Pill Testing. Sadly, the media, for the most part, have bought into the propaganda, rather than investigate the truth.

The only Australian study on an extensive number of ecstasy-related deaths looked at 82 coroners' reports from between 2001 and 2005. First, that is a lot of under-reported ecstasy deaths in five years. Second, 23% of those deaths were caused solely by the MDMA in the pill. Another 59% were caused by MDMA when used with other legal and illegal drugs. Conclusion? 82% of the 82 deaths reviewed were directly attributed to MDMA. Ecstasy is the killer. Third, none of these 82 deaths were from impurities or other unknown drugs in the pills. And recent coroners' reports concur. The Daily Telegraph reported January 15 that Professor Dawson had indicated MDMA was implicated in early toxicology tests on four recent NSW deaths. (DFA)

MDMA does kill, and according to data from other Harm Reduction groups, it is rare, yet clearly acknowledged. The term 'overdose' is a widely misused term and is of course a complete misnomer when used in relation to illicit substances. Technically and accurately speaking, for someone to 'overdose' it can only be done in a prescription setting, in which there is a therapeutic dose that is 'safe'. So, if one takes more than the prescribed amount of the pharmaceutical, then harm is likely. However, with illicit drugs, there is NO SAFE dose, so again, it's not overdosing that is the culprit, it is a combination of one or many factors including an allergic, or biochemical idiosyncratic response by the drug taker to a psychotropic toxin, that was never meant to be ingested!

We are all familiar with Australia's first (arguably) recorded death from an illegal drug at a music festival in 1995. Anna Wood's story is uncontested. Of the half a dozen friends who took the same tablet, she was the only one who died. The coroner's report was unequivocal, it was pure MDMA that took her life. In more recent years it was significant ingestion of LSD that took a life a music festival... In these and any other scenario, pill testing would have done nothing to prevent the deaths. In fact, in the current regime is to be believed, then once 'purity/content' is confirmed, then choice to use still remains, but now with a validation from government (if Pill Testing enacted). The breach of Supply, Demand and Harm Reduction (all pillars of the National Drug Strategy) is complete!

"Alcohol is certainly a damaging drug, but to suggest that MDMA is less damaging than alcohol does not agree with the scientific evidence. Comparing these two drugs is like comparing an F1 sports car to a basic family saloon. MDMA is an extremely

*powerful drug, which heats up the brain, causing a massive increase in neurochemical activity, dramatic changes in mood state, and it takes the brain several days to recover. Regular MDMA usage impairs memory, reduces problem-solving ability, reduces white cell blood count, increases susceptibility to infections, causes sleep problems, and enduring depression. In pregnant women MDMA impairs foetal development. We and other research groups worldwide have compared the psychobiological functioning of recreational Ecstasy/MDMA users with alcohol drinkers, and in numerous studies it is always the Ecstasy/MDMA users who are comparatively worse. The 'family car' may kill more people each year than the F1 speed machine, but to suggest that the latter would be safer for everyday driving is completely erroneous. MDMA kills many young people each year, and the death toll is currently rising."*¹

That sobering data, should be enough alone to warrant a campaign of demand reduction, to save lives, not permission and promotion that Pill Testing will induce. However, toxicologist John Lewis recently wrote about real liabilities of such an mechanism...

If pill testing were trialled, you would need sophisticated instrumentation such as high-resolution mass spectrometry to rapidly analyse the contents of the unknown substance. Such instrumentation is not amenable to on-site music festival venues. Critically, operators of the instrumentation would need to ensure their database of compounds is up to date. As newer synthetic drugs are regularly entering the market, forensic laboratories are struggling to obtain appropriate and expensive analytical reference material to identify unequivocally all ingredients in a pill.

*To date, analytically trained experts have yet to explain adequately the complexity of attempting to test pills reliably and quickly at an on-site venue to be reasonably confident they can eliminate minute amounts of potentially lethal ingredients such as the deadly carfentanil.*²

John Lewis is honorary associate at the Centre for Forensic Science at the University of Technology Sydney

To that, even Harm Reduction Australia, who are the key drivers for this drug normalization strategy, will not put their hand up for responsibility for the negative short and long term outcomes of this mechanism – And why should they, when we no longer encourage our young adults to be responsible and/or accountable for their deliberate, self-aware, law breaking and self-harming behavior?

In recent Daily Telegraph article, a representative of Pill-Testing Australia is quoted as saying... *"The testing capabilities are so limited that revelers would be required to sign a death waiver, which includes a warning that tests cannot accurately determine drug purity levels or give any indication of safety"*.

Breathtaking in its cognitive dissonance. Again, further evidence that this mechanism has little value, other than to 'punch' another hole in best-practice drug policy for the sake of.... 'Getting wasted?'

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Executive Director

References

1. [Andy Parrott](#), Professor of Human Psychopharmacology, School of Health Sciences, Swansea University. (May 30, 2018)
2. <https://www.theaustralian.com.au/opinion/pills-will-kill-but-testing-them-is-not-yet-the-answer/news-story/f5366e8b4f01b1bc0a81363e283cc256>
3. G Vumbaca-Pill Testing Australia (Daily Telegraph 5.1.19,p7)