

SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

**Placement of Acryl Fentanyl into Schedule I of the S.C. Controlled Substances Act**

WHEREAS, pursuant to S.C. Code Section 44-53-160(C), the South Carolina Board of Health and Environmental Control (Board) is authorized to add a substance as a controlled substance if the Federal government has so designated; and

WHEREAS, the U.S. Department of Justice, Drug Enforcement Administration (DEA), published on July 14, 2017, its notice of intent to temporarily schedule the synthetic opioid, *N*-(1-phenethylpiperidin-4-yl)-*N*-phenylacrylamide (acryl fentanyl *or* acryloylfentanyl), into Schedule I of the Controlled Substances Act (CSA), effective upon publication of the Final Order. Federal Register, Volume 82, Number 134, pp. 32453-32457; <https://www.gpo.gov/fdsys/pkg/FR-2017-07-14/pdf/2017-14880.pdf>; and

WHEREAS, substances listed in Schedule I are those that have a high potential for abuse, no currently acceptable medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision. Acryl fentanyl (*N*-(1-phenethylpiperidin-4-yl)-*N*-phenylacrylamide), is an opioid analgesic that has been found powder form, in solution, and packaged similar to that of heroin. The DEA noted that acryl fentanyl has an abuse potential similar to heroin and prescription opioid analgesics.

WHEREAS, since 2016, acryl fentanyl has been associated with 83 deaths in several states. The National Forensic Laboratory Information System (NFLIS) and STARLiMS (a web-based, commercial laboratory information management system) have compiled a total of 110 drug reports in which acryl fentanyl was identified in submissions to forensic laboratories in 2016 and 2017 from law enforcement encounters in Alabama, Arkansas, California, Connecticut, Illinois, Indiana, Iowa, Kentucky, Louisiana, Minnesota, Missouri, North Carolina, Ohio, Pennsylvania, South Carolina, Tennessee, Texas, West Virginia, and Wisconsin. It is likely that the prevalence of acryl fentanyl in opioid analgesic-related emergency room admissions and deaths is underreported, as standard immunoassay testing may not differentiate this substance from fentanyl; and

WHEREAS, available information for acryl fentanyl indicates this substance has a high potential for abuse, no currently acceptable medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision. Therefore, the DEA has determined that placing acryl fentanyl into Schedule I is necessary to avoid an imminent hazard to the public safety; and

THEREFORE, the Board of Health and Environmental Control adopts the federal scheduling of acryl fentanyl and amends Section 44-53-190 by adding and designating *N*-(1-phenethylpiperidin-4-yl)-*N*-phenylacrylamide (acryl fentanyl *or* acryloylfentanyl), its optical, positional, and geometric isomers, salts and salts of isomers into Schedule I of the South Carolina Controlled Substances Act.



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Allen Amsler, Chairman  
S.C. Board of Health and Environmental Control

August 10, 2017  
Columbia, South Carolina