Mitragynine - Individual Comments – Local (includes all Ohio-based IP addresses as well as those in IN, MI, WV, KY, and PA.)

City	State	Comment Code:	Comment
Dayton	Ohio	0 - Blank / Sentiment Unclear	
Cincinnati	Ohio	0 - Blank / Sentiment Unclear	
Westerville	Ohio	0 - Blank / Sentiment Unclear	
Detroit	Michigan	0 - Blank / Sentiment Unclear	
Worthington	Ohio	0 - Blank / Sentiment Unclear	
Cleveland	Ohio	0 - Blank / Sentiment Unclear	
Columbus	Ohio	0 - Blank / Sentiment Unclear	
Wadsworth	Ohio	0 - Blank / Sentiment Unclear	
Chillicothe	Ohio	0 - Blank / Sentiment Unclear	
Lakewood	Ohio	0 - Blank / Sentiment Unclear	
New Albany	Ohio	0 - Blank / Sentiment Unclear	
Avon	Ohio	0 - Blank / Sentiment Unclear	
Akron	Ohio	0 - Blank / Sentiment Unclear	
Youngstown	Ohio	0 - Blank / Sentiment Unclear	
Ironton	Ohio	0 - Blank / Sentiment Unclear	
Washington Court House	Ohio	0 - Blank / Sentiment Unclear	
Chillicothe	Ohio	0 - Blank / Sentiment Unclear	
Lorain	Ohio	0 - Blank / Sentiment Unclear	
Greensburg	Pennsylvania	0 - Blank / Sentiment Unclear	
Columbus	Ohio	0 - Blank / Sentiment Unclear	
Salem	Ohio	0 - Blank / Sentiment Unclear	
Portsmouth	Ohio	0 - Blank / Sentiment Unclear	
Garrettsville	Ohio	0 - Blank / Sentiment Unclear	

Columbus	Ohio	1 - Support	Dear Members of the Ohio Board of Pharmacy, I appreciate the opportunity to provide comment in support of the proposed rule classifying mitragynine-related compounds as Schedule I controlled substances. As a specialist in addiction medicine, I believe the proposed rule represents a necessary and timely response to an emerging public health concern. Mitragynine-related compounds—particularly highly concentrated and semi-synthetic derivatives such as 7-hydroxymitragynine and mitragynine pseudoindoxyl—exhibit opioid-like pharmacologic effects, carry significant risk for abuse and dependence, and lack accepted medical use or established safety under medical supervision. The scientific evidence and surveillance data summarized in the Board's 8-factor analysis clearly demonstrate that these substances pose significant health risks. Due to the opioid-like properties of mitragynine-related compounds, I treat withdrawal from mitragynine like withdrawal from fentanyl and other opioids. We have evidence-based treatments for opioid use disorder, including FDA-approved medication treatment with buprenorphine, methadone, or naltrexone. Mitragynine and mitragynine-related compounds have not undergone the rigorous FDA approval process that we expect for a medication to be used to treat a disorder, and do not have an accepted medical use. Of particular concern is the manner in which these products have been marketed and distributed. The sale of potent mitragynine-related compounds in retail and online settings—often labeled or presented in ways that obscure their true pharmacologic effects—creates a substantial risk of unintentional exposure, especially among adolescents and young people. While I recognize that the proposed rule may have economic implications for certain businesses, I believe these impacts are outweighed by the substantial and well-documented risks associated with continued over-the-counter availability of these compounds. Preventing avoidable drugrelated harms is a critical priority for the state of Ohio. For these reasons, I strongly support the proposed classification of mitragynine-related compounds as Schedule I controlled substances. I appreciate the Board's leadership on this important issue and its commitment to safeguarding the health of Ohioans. Thank you for your consideration. Sincerely, Julie Teater, MD, DFAPA, FASAM

Sunbury	Ohio	1 - Support	January 25, 2026 Ohio State Board of Pharmacy 77 South High Street, 17th Floor Columbus, OH 43215 Re: Support for Banning Both Synthetic Kratom and Natural Kratom in Vegetative Form Dear Members of the Ohio State Board of Pharmacy, I am writing as an Ohio father whose adult son is currently in rehabilitation due to addiction to synthetic kratom products. My family has lived the consequences of an unregulated kratom marketplace, and I have seen firsthand how dangerous these substances can be when sold without oversight. Because of this experience—and because of the growing body of scientific evidence—I strongly support banning both synthetic kratom products and natural kratom in vegetative form in the State of Ohio. Synthetic kratom products were the source of my son's addiction. These items were sold openly in gas stations and smoke shops, marketed as "natural" and "safe," yet they were chemically manipulated, highly potent, and entirely unregulated. The result was a substance that acted like an opioid in his brain, ultimately requiring professional treatment. No family should have to endure what mine has. At the same time, natural kratom in vegetative form presents its own serious risks. It contains opioid-active alkaloids and can be easily adulterated or concentrated into dangerous extracts—the very pathway that led to my son's addiction. For these reasons, I believe Ohio must take decisive action to prevent further harm by banning both forms. Kratom's Opioid-Like Pharmacology Is Well-Established Kratom contains more than 40 alkaloids, including mitragynine and 7-hydroxymitragynine, both of which bind to mu-opioid receptors and produce opioid-like effects. Peer-reviewed research confirms this: - Mukhopadhyay et al. (2023) identify kratom's alkaloids as mu-opioid receptor agonists, activating the same receptor pathways as traditional opioids.

			- Gutridge et al. (2021) demonstrate that 7-hydroxymitragynine produces opioid-like rewarding effects and has high affinity for the mu-opioid receptor. - Hassan et al. (2020) document kratom's opioid-receptor activity, including sedation, analgesia, tolerance, and withdrawal. Synthetic Kratom Products Are Highly Addictive and Dangerous Synthetic or "enhanced" kratom products—extracts, resins, shots, and concentrates—contain manipulated levels of opioid-active alkaloids far beyond what occurs naturally. Medical literature shows that these concentrated forms dramatically increase addictive potential, tolerance development, withdrawal severity, and compulsive use patterns similar to opioids. Clinical toxicology data reinforce these concerns: - Cumpston et al. (2018) analyzed 95 kratom-associated acute events and found opioid-like toxicity, including respiratory depression, seizures, and altered mental status. - Singh et al. (2014) documented dependence and withdrawal in chronic kratom users, mirroring opioid withdrawal symptoms. - Forrester (2019) reported severe toxicity and fatalities involving kratom products with elevated concentrations of opioid-active alkaloids. This aligns with my son's experience. He did not become addicted to raw plant material—he became addicted to synthetic, concentrated kratom, which was far more potent than anything suggested on the label. Natural Kratom in Vegetative Form Also Poses Significant Risks Even in its natural form, kratom carries documented health risks: - Liver injury, including cholestatic and mixed-pattern hepatotoxicity - Neurologic effects, including seizures - Cardiovascular complications - Gastrointestinal distress

			- Dependence and withdrawal FDA's adverse event reporting system (CAERS) recorded 78 kratom-related reports in 2021, with 96% involving at least one adverse event, including hospitalizations and deaths (U.S. Food and Drug Administration, 2021). Most importantly, natural kratom in vegetative form is easily manipulated. Loose leaf and powdered kratom can be adulterated, concentrated into extracts, or chemically enhanced without oversight. This creates the same pathway for harm that led to my son's addiction. Why Both Forms Must Be Banned For these reasons, I respectfully urge the Board to adopt a comprehensive approach and ban both synthetic kratom products and natural kratom in vegetative form. Doing so will reduce access to unregulated, opioid-like substances with documented health risks, prevent the continued sale of easily adulterated plant material, and protect Ohio families from the unpredictable and severe consequences of kratom products with no quality control. Ohio has an opportunity to prevent further harm and protect vulnerable individuals from substances that are marketed as harmless but behave like opioids. I hope no other family has to endure what mine has. Thank you for your commitment to safeguarding the health and safety of Ohioans. Respectfully, Marc H. Dopp Sunbury, Ohio
Columbus	Ohio	1 - Support	I am commenting and I am 100% for a outright ban/ schedule of all Kratom forms. My child Johnny Loring passed away from a deadly seizure 4/18/24 and kratom was the culprit causing the seizures. He also went through psychosis the week of his death. He was a hard working respected young man with a bright future but that was sadly robbed from him. Johnny would want me to advocate for banning this deadly 'supplement ' to help save other innocent lives. Please take into consideration thousands of parents and loved ones affected by this poison. The ones who have not died are seriously addicted to Kratom just as equally dangerous as heroin morphine and other dangerous narcotics. We must take action now.

Dayton	Ohio	1 - Support	I am a registered nurse and also a professional chaplain and have witnessed the worst outcome of kratom use: Death. More than 200 people have died from Kratom use in the State of Ohio. Scholarly evidence shows that products derived from mitragynina speciosa can lead to dependence, withdrawal symptoms, respiratory problems, hypertension, neurotoxicity, hepatotoxicity, nephrotoxicity, and death. The people of the State of Ohio need to be protected. It should indeed be classified as a Schedule I Drug and removed before more people suffer and die.
Athens	Ohio	1 - Support	As a registered nurse who has seen the effects of this drug, I firmly agree that it should be labeled as a Schedule 1 controlled substance to make it less accessible. I personally know someone who died of an overdose of this drug and do not want to see this happen to another family if it can be avoided.
Dublin	Ohio	1 - Support	I'm not sure where to begin on the financial and emotional toll this drug and all drugs in the same class (Kratom, MIT, 7-OH.....) have had on my family. The fact that it is so easy to get and being sold as a "natural supplement" blows my mind. A natural supplement that caused night sweats that stained the sheets yellow, weight gain, irritability, loss of focus and energy, FALLING ASLEEP WHILE SITTING UP AND/OR EATING, loss of testosterone and periods of extreme anger or no feelings at all. I can say that I have been told by the rehab facility that my husband had to end up going to, that the withdrawal from these substances is just as bad IF NOT WORSE than heroin. It took $25,000 to get my husband off of this drug just for him to relapse and easily go into our local gas station and grab liquid MIT only a month after returning home from a 38 day stay at OARC. I thought when Kratom was made illegal to sell that I wouldn't have to worry anymore. I was wrong. Very wrong. Now my husband's freedom and life the way he knew it is no more. He is a 41 year established man who now has no access to his bank accounts (I took it), is being tracked 24/7, has to show receipts and is not allowed to carry cash on him. He has never been addicted to anything in his life, but these compounds destroyed him. Changed him. Changed us and his family. We will never be the same again. I'm not sure why it is such a hard decision to make. Why not just make these prescriptions only? Why weren't these already a schedule 1? My guess? It has to do with money and making money. My husband's life was gambled with, for money. I understand that there will always be addicts, but you can't just walk into a gas station and ask for heroin or cocaine. The kids that I have watched grow up on my street are getting to age where they can go get this substance easily. It has to stop. We have to do better. Be better.

Cleveland	Ohio	1 - Support	I am writing to formally urge immediate legislative and public health action regarding the continued legal sale and lack of regulation of kratom. In September 2024, my brother-in-law was pronounced dead at Southwest General Hospital. The official autopsy determined the cause of death to be kratom poisoning. He believed kratom to be a harmless substance—an assumption reinforced by the fact that it is legally sold over the counter in gas stations, smoke shops, and retail stores without meaningful warnings or public education. The ease of access to kratom creates a dangerous misconception that it is safe. There are no prominent warning labels, no public service announcements, and no widespread educational efforts informing the public of the very real risks, including overdose and death. Even as a healthcare professional working within a major hospital system in Cleveland, I can attest that many of my colleagues are unaware of the dangers associated with kratom use. This lack of awareness is particularly alarming when considering children and adolescents. Although kratom is technically restricted to individuals over the age of 18, we know from experience with vaping and tobacco products that age limits alone do not prevent access. Parents are largely uninformed and may not recognize kratom as a potentially lethal substance if they encounter it in their homes. No family should have to learn—through the loss of a loved one—that a legally sold substance can be deadly. My family's tragedy was preventable, and continued inaction places others at risk.
North Olmsted	Ohio	1 - Support	I am here to voice my deepest concerns about Kratom, natural and synthetic, being accessible to the people of Ohio. My husband has a substance use disorder. He had been sober from heroine for years before he discovered Kratom in 2022. He became addicted to Kratom twice in the last three years. He is currently 2.5 months sober from Kratom. Why Kratom? He explained that Kratom has been marketed as organic and a natural supplement, giving him a false sense of safety. "It can't be that bad for me if I can buy it at a gas station," he admitted. My husband said it was very easy to order online. He would buy it online, in gas stations, and smoke shops. This product is highly addictive, especially for those with a history of opioid addiction. Kratom has alkaloids with opiate-like properties. How is this considered safe for over the counter purchase? Kratom is a public health threat to Ohioans. It is illegal in other states for a reason. When my husband went through his most recent detox, the medical team explained they are seeing more and more people coming in to detox from Kratom. A natural supplement should not need a medically assisted treatment plan to stop taking it. Kratom almost destroyed my marriage. It has caused insurmountable debt. I beg you to pass a law to make Kratom an illegal Schedule 1 drug. Passing a law to ban Kratom in Ohio will save families from watching their loved ones suffer and even overdose. Sadly making Kratom illegal didn't happen soon enough for my husband. Thank you.
Canal Winchester	Ohio	1 - Support	Kratom should be a controlled substance. My friend's son died from this substance and he's not the first. Enacting this rule/law has been a long time coming.
Lakewood	Ohio	1 - Support	I think you should get all of Kratom out of Ohio and out of the United States make it illegal everywhere and make pot illegal everywhere again. No matter if it makes a city or state money in the end it's killing people, kids.

Upper Arlington	Ohio	1 - Support	Measures are desperately needed for removal of mitragynine (kratom) products to facilitate reduction in adverse events associated with these products.
Pittsburgh	Pennsylvania	1 - Support	It all needs ban its deadly killed a really good friend of mines son
Worthington	Ohio	1 - Support	I am writing on behalf of my sister. Her husband, my brother in law, committed suicide on September 19, 2025. His name was Casey Kenney and losing him has been unimaginable. The week he committed suicide, we started to see some signs. He was sick and stopped going to work. The night before his death, he admitted to his wife that he had been trying to stop “those pills”. She asked about the pills and he said the ones from the gas station. The next morning, she called me and said he had been taking 7OH and we immediately looked it up since we had no idea what it was. After some google searches, we could tell it was bad, so we tried to get him into a treatment center. He sent a message to my husband and said he had been duped by energy pills from the gas station and he did not realize it until it was too late. Casey said he realized he was taking something similar to legal heroin. He said he would go to treatment the following day, but we got him a bed for that night at 9pm. He agreed to go after a day of barely being able to get up off the couch. Casey was left home alone while we got everything in place to take him to rehab that night. As my sister came home with their two children, he was locked in the bathroom with the bottle of pills and as she was headed up the stairs he placed the gun to his head and shot himself. As his family, we believe synthetic kratom had a strong hold on Casey and he did not see life beyond using 7OH. His bank statements showed that he was spending hundreds of dollars at the gas station almost daily. Text messages told us that he was possibly going through some psychosis and he was not in touch with reality. We believe 7OH led him to taking his life because he was suffering and had little to no hope that he could get clean from this substance. At his funeral, it was standing room only. The room was filled with family, friends and coworkers. Casey was a great dad, husband, son, brother, boss and friend. He went into the gas station looking for an energy boost, and came out with a death sentence. We had no idea how much he was struggling due to 7OH and we do not want another individual to fall to the trap that is 7OH. It has left Charlie (4) and Margo (2) without their beloved dad. Those who knew Casey now will live with a hole that can never be filled. He should be here and 7OH should be gone for good.
Columbus	Ohio	1 - Support	Kratom should be banned in all forms This Kratom needs banned in any form!

Cincinnati	Ohio	1 - Support	I am writing in support of the Ohio Board of Pharmacy's proposed classification of kratom and kratom-derived synthetic alkaloids, including mitragynine, as Schedule I controlled substances. As someone with lived experience in recovery and who works professionally in harm reduction and public health, I have seen firsthand the harm caused when substances with opioid-like effects are widely available, poorly regulated, and marketed as "natural" or "safe." Kratom's current legal status has created a dangerous gap between perception and reality — particularly for individuals in recovery, young people, and those seeking pain relief or mental health support outside of clinical supervision. The evidence outlined by the Board demonstrates that mitragynine has opioid receptor activity, a high potential for abuse, and no accepted medical use under current standards. The growing availability of highly concentrated and synthetic kratom products — often sold in gas stations and convenience stores — has only increased the risk of dependence, withdrawal, overdose, and relapse. These products are not subject to meaningful quality control, dosing standards, or consumer protections, placing Ohioans at unnecessary risk. I also strongly support the Board's position that any claims of medical benefit must be evaluated through rigorous, ethical, and FDA-approved research and clinical trials. If kratom or its alkaloids are ever to be considered for therapeutic use, that determination should be made by researchers and medical experts — not manufacturers or marketers. Scheduling kratom appropriately does not prevent research; rather, it ensures that any future use is grounded in science, safety, and accountability. Public health policy must prioritize harm reduction, consumer protection, and evidence-based decision-making. Allowing substances with opioid-like effects to be sold without oversight undermines these goals and places an unfair burden on families, treatment providers, and emergency responders. For these reasons, I support the Ohio Board of Pharmacy's proposed rule and appreciate the Board's commitment to protecting public health while leaving the door open for legitimate scientific inquiry. Thank you for the opportunity to provide comment.
Dayton	Ohio	1 - Support	I am writing to express my full and unequivocal support for eliminating any plant form of kratom. This substance is causing real harm and is actively destroying lives within our communities. In the State of Ohio alone, statistics indicate that more than 200 people have died from unintentional overdoses involving kratom. These are preventable deaths. Allowing continued manufacturing and easy access to a substance with such devastating consequences is both dangerous and irresponsible. Plant form of kratom is a harmful plant that is advertised as a supplement to help with anxiety and other healthy reasons but it is a drug that poses serious risks, especially when sold without adequate regulation or oversight. Making it readily available only increases the likelihood of misuse, addiction, and fatal outcomes. This should be a no-brainer. The allowing the plant to be manufactured, distribution, and easy access to kratom must be stopped. Protecting public health and safety must take precedence over profit. I urge you to take immediate action to remove this dangerous substance from our communities and prevent further loss of life.

Dayton	Ohio	1 - Support	I am a nurse that has seen the negative impacts of what harmful substances has done to individuals and their families. I am in support of removing kratom from the shelves and making it a schedule one. I have a coworker, who lost their son to the organic kratom.
Indianapolis	Indiana	1 - Support	I just want to start by saying thank you so much for giving the public an opportunity to speak on the ban of Kratom. For the past two years my husband has been extremely addicted to kratom. When we moved to Indiana I was very excited because they have a ban on kratom. But being 20 minutes away from a gas station in Ohio that sells kratom, my husband was able to fall back into the addiction. I've done a lot of research on the health aspect of kratom, and there are so many risks. I've been praying for Ohio to put a ban on it for a while now. It's causing my husband to spend countless amounts of money that he doesn't have on it. The withdrawals are TERRIBLE. He starts shaking and gets very irritable. It's basically legal heroin from what I've heard from addicts. I'm begging for a ban on it. I want my husband, the father of our baby boy to get healthy. Thank you.
Dayton	Ohio	1 - Support	I am an educator in the state of Ohio and have seen firsthand the devastation Kratom causes families. I support any rule that prohibits the selling and use of Kratom and the chemicals that make up Kratom in Ohio. It destroys families, is a danger to healthy lives, and should not be sold.
Chillicothe	Ohio	1 - Support	I support the Ohio Board of Pharmacy's action to ban kratom and its derivatives to protect public health and safety. These products are often marketed as natural supplements, yet they can have opioid-like effects, high addiction potential, and unpredictable potency, especially in synthetic forms such as 7-hydroxymitragynine. With no FDA approval and growing reports of adverse effects, overdoses, and youth access, removing kratom from the marketplace is a responsible and necessary step to prevent harm and safeguard Ohio communities. Banning kratom in Ohio is a prudent step to protect public health and safety, given the growing evidence that unregulated kratom products—especially concentrated and synthetic forms—pose serious risks. State health data indicate kratom has been implicated in over 200 unintentional overdose deaths in Ohio from 2019 to 2024, and poison control centers have seen a surge in exposure cases nationwide, highlighting its potential for harm and addiction. Public officials, including Governor DeWine, have described modified kratom compounds as "imminent public health risks," noting their opioid-like effects, links to seizures, psychosis, and even deaths, and the ease with which these products are sold to consumers of all ages without medical oversight. Since kratom is not approved by the FDA for medical use and lacks standardized regulation, a ban would help curb these dangers and prevent further tragedies in the state.

Tipp City	Ohio	1 - Support	Our son died November 8, 2024 at the age of 27. He battle anxieties that privately consumed him. He was led to believe Kratom would take those anxieties away not realizing the addictive powers Kratom processed. Kratom hijacked his brain into believing he needed more and more. Our son's cause of death was an accidental overdose on Kratom. Unfortunately, Kratom's easy accessibility at thousands of gas stations, vape shops, and convenience stores, and due to the legality to sell, purchase and possess it in Ohio was a participant in our son's death--and hundreds more. The disease of addiction is not a moral failure, but it is a failure of our system that allows corporate leaders to camouflage kratom as a convenient product that alleviates anxieties, pain and other related conditions. It is time to take it off the shelves!
Tipp City	Ohio	1 - Support	A very close friend of ours died at the age of 27 from Kratom. He was a wonderful young man, raised correctly with parental support. He had a college degree in law enforcement. He started using Kratom and could not stop. He tried many times. He lost his marriage because of it. He lost his job because of it. He was trying to get help from sober living. He had friend support, parental support and he finally took a dose that caused his death.
Mansfield	Ohio	1 - Support	I have children who live in Tiffin 44883 and my child's mother works in a place that sells this stuff; while she is trying to find new work in a challenging job market. But the people who use these products are generally dangerous degenerates with a real serious health problem mental and otherwise and this product is dangerous and created a serious addiction for some of those customers who visit the store MULTIPLE times a day to get their fix...
Ironton	Ohio	1 - Support	Kratom killed someone very close to me . Please take it off the shelf . Raise awareness!

Ironton	Ohio	1 - Support	I support the Kratom ban PUBLIC COMMENT – RECORD STATEMENT Re: Proposed Rules – Mitragynine & Mitragynine-Related Compounds Comments Due: January 28, 2026 Submitted to: Ohio Board of Pharmacy —— THIS RULEMAKING IS NECESSARY — AND THE COST OF INACTION IS MEASURABLE IN LIVES I submit this comment in strong support of both proposed rules scheduling mitragynine and mitragynine-related compounds as Schedule I controlled substances. I do so as a parent who lost a child. On December 6, 2023, my son Austin died. Austin died alone in his bedroom after consuming a natural kratom product he believed was safe. He was not a reckless drug user. Austin was repeatedly told—by vendors, online communities, and industry advocates—that kratom was safe, natural, non-opioid, and incapable of causing fatal harm. I was told the same. Those assurances shaped decisions. Those decisions had consequences. Austin did not survive them. Austin's official autopsy and toxicology report, conducted by the Montgomery County, Ohio Coroner, concluded: Cause of Death: Intoxication by mitragynine Toxicology: Mitragynine only — no fentanyl, no illicit drugs, no prescription opioids, and no 7-hydroxymitragynine (7-OH) Findings: Pulmonary edema and frothy airway fluid consistent with opioid-type respiratory depression There were no other substances to blame. There were no extracts, no synthetics, and no 7-OH consumed. The sole cause of death was mitragynine intoxication, the primary active alkaloid in kratom. This rulemaking is not theoretical. It addresses a documented failure that allows opioid-active substances to be sold without medical oversight while families learn the truth only after it is irreversible. —— MITRAGYNINE ITSELF IS THE RISK — EVEN IN "NATURAL LEAF" FORM Opponents attempt to shift focus to synthetics or isolated 7-hydroxymitragynine (7-OH). That framing collapses because the opposition's own stories are not about synthetics. They are about natural leaf kratom. Advocates repeatedly claim that natural kratom relieves opioid withdrawal, replaces morphine or fentanyl, and sustains daily opioid-like use. Those effects are attributed—by the advocates themselves—to mitragynine, the defining psychoactive constituent of the kratom leaf. Mitragynine is not pharmacologically static. After ingestion, mitragynine is metabolized in the human body into 7-hydroxymitragynine (7-OH), a compound significantly more potent at the mu-opioid receptor. This conversion occurs in vivo. A person does not need to ingest 7-OH directly for it to exert opioid effects. My son did not ingest 7-OH. His body generated opioid potency on its own. Claims that only synthetics or adulterants are dangerous ignore basic biology. Mitragynine alone is sufficient to cause fatal opioid-type respiratory depression. —— "IT GOT ME OFF MORPHINE" IS A REGULATORY ALARM, NOT A DEFENSE Opponents frequently present statements such as: "Kratom got me off morphine." "Kratom replaced fentanyl." "Kratom helped me quit prescription opioids." These claims are made explicitly about natural kratom leaf, not synthetic analogs. Any substance capable of suppressing opioid withdrawal, replacing morphine or fentanyl, and maintaining opioid tolerance is functioning as an opioid, regardless of plant origin. There is no legitimate public-

			health framework in which a morphine-substitute—by the advocates' own description—should be sold in gas stations or vape shops without standardized dosing, medical supervision, or prescription controls. If these claims are true, scheduling is mandatory. If they are false, the public has been deliberately misled. Either way, unregulated access is indefensible. —— ADVOCATES ARE UNINTENTIONALLY MAKING THE CASE FOR SCHEDULING It is notable that many kratom advocates opposing these rules are, without realizing it, providing the strongest evidence for why regulation has failed and why scheduling is necessary. By asserting that natural kratom leaf replaces morphine and fentanyl, suppresses opioid withdrawal, and sustains dependence, they are describing a substance that meets the functional definition of an opioid substitute. These claims should alarm policymakers. Every policymaker should be terrified by claims that a retail product can replace morphine, because that is precisely the scenario controlled-substance laws exist to prevent. These admissions do not weaken the case for scheduling. They complete it. —— REGULATION HAS FAILED ELSEWHERE — INCLUDING IN KCPA STATES Recent developments in other states further confirm that regulation has failed structurally, not procedurally. For example, Utah, which previously adopted a Kratom Consumer Protection Act framework promoted by the American Kratom Association, is now actively reconsidering that approach, including proposals to ban kratom entirely. That reversal reflects a growing recognition that retail regulation cannot keep pace with potency escalation, biological risk, or opioid-like dependence. Ohio should not wait for the same regulatory collapse to occur here before acting. —— HOW THE AKA MISREPRESENTS FEDERAL SCIENCE: THE 41486478 STUDY A central talking point advanced by Mac Haddow, on behalf of the American Kratom Association (AKA), is the claim that an "FDA study" found pure or natural kratom leaf to be safe or tolerable. That claim is false. The study cited—PMID 41486478, published in Therapeutic Drug Monitoring—was a controlled clinical trial evaluating short-term tolerability of specific doses of dried kratom leaf powder in healthy adults under medical supervision. It was not an FDA study. It was not an FDA safety determination. It was not an approval. It was not an evaluation of long-term dependence or real-world risk. The FDA has never approved kratom and has repeatedly warned of addiction, toxicity, and death. The AKA's use of this study as evidence of safety is a false attribution of federal approval. —— CONCLUSION: PREVENTION REQUIRES DECISIVE ACTION Had these rules existed earlier, my son might still be alive. I cannot know that with certainty—but I know this: Failing to act guarantees more families will learn the truth the same way I did. These two rules must be adopted together and without weakening amendments. Scheduling derivatives alone invites circumvention. Leaving mitragynine unscheduled ensures continued harm. The opposition's own words—especially their defense of natural leaf kratom—confirm the risk. Please act so fewer parents are left submitting comments like this one. Lives depend on it. I respectfully request that this comment be entered into the official rulemaking record in its entirety. Submitted by: Dan Gibbs Parent; Ohio resident END SUBMISSION
Dayton	Ohio	1 - Support	Ban the sale and possession of mitragynine. It is killing people.

Fairborn	Ohio	1 - Support	This shoud not be allowed to be sold in stores in the state of Ohio. Even this though natura can lead to addiction, dependence, and produces stimulant effects in low doses or high doses sedates persons. This is very dangerous and is leading to furter decline in cognitive functioning over time, esecially with chronic use. This is abused and additionally harmful and even deadly when persons combine with other substances. Please ban this from Ohio.
Newark	Ohio	1 - Support	Dear Members of the Ohio Board of Pharmacy and those reviewing the proposed Kratom bans and regulations, I am writing to offer my full support for the proposed ban on Kratom in the state of Ohio. I do so not as an outside critic, but as someone who was unknowingly dependent on Kratom for over five years. I never intended to become dependent. I never sought out a drug. My introduction to Kratom occurred purely by circumstance—and that is precisely what makes it so dangerous. I work in the health and fitness industry as a personal trainer. As part of my profession, I routinely research supplements marketed as "natural" solutions for energy, recovery, and performance. Years ago, I heard a trusted health and wellness podcast casually reference "Kratom tea," describing it as a natural plant that improved energy, motivation, and mood without the crash of caffeine. At the time, I had never heard of Kratom, and there was no warning attached to the recommendation. Months later, while visiting my grandmother, I noticed her preparing what I assumed was herbal tea. She told me it was Kratom—purchased at a local health food store and recommended by a friend for arthritis pain. The fact that it was readily available and framed as a natural remedy reinforced the belief that it was safe. Not long after, I encountered Kratom again—this time at a franchised gas station. It was displayed beside energy supplements, labeled: "Kratom Capsules – Natural Plant-Based Energy." That moment should alarm every regulator reading this. I purchased the product without hesitation. It was legal, widely available, and marketed as a supplement. After taking a capsule, I felt noticeably more focused, motivated, and uplifted. Unlike many ineffective supplements I had tried, Kratom worked—extremely well. What began as one capsule in the morning slowly escalated. Over time, tolerance developed. One capsule became two, then four, then six. Eventually, I was consuming 12–16 capsules per day, dosing every few hours to avoid losing the "edge" it gave me. At no point did I believe I was addicted. I was successful in my career, newly married, and outwardly thriving. I convinced myself Kratom was helping me succeed. I knew it interacted with opioid receptors, but selective research and its legal status allowed me to deny the reality: I was dependent. That denial shattered in August of 2025, when public discussion of a potential Kratom ban first emerged. My immediate reaction was fear—so intense that I purchased a three-month supply to ensure I would not be without it. That moment forced a realization I could no longer ignore. I would never react that way to a discontinued multivitamin. This was not a supplement. I decided to stop. Quitting Kratom was one of the most difficult experiences of my life—more difficult than marathon training, competitive boxing, or intense physical challenges I have endured. I tapered my use over two weeks. When I finally stopped completely, I experienced severe withdrawal: flu-like illness, body aches, gastrointestinal distress, cold sweats, restless legs, anxiety, fatigue, and insomnia. These symptoms persisted for weeks. These were opioid-like

			withdrawal symptoms—from a substance I had legally purchased at a gas station. I was not reckless. I was not uninformed. I was a health professional who trusted the legality, accessibility, and marketing of this substance. That is the danger of Kratom. Kratom is not a health supplement. Kratom is not a detox tool. Kratom is not a safe pain reliever. Kratom is not benign. Kratom is a drug. It is misleadingly marketed, dangerously accessible, and capable of creating long-term dependence in unsuspecting individuals. There is no justification for its continued legal sale in Ohio. I urge you to consider my testimony as representative of countless others who believed they were making a healthy, informed choice—only to discover the cost years later. Thank you for your time, your consideration, and your willingness to protect public health. Respectfully, A concerned Ohio resident and former Kratom user

Cleveland	Ohio	1 - Support	Dear Sir or Madam, My name is Matthew Slatton, and I am writing to share my personal experience with kratom and to urge serious consideration of stronger regulation or a complete ban on its sale. I was a long-term kratom user and, at one time, an advocate. When I first began using kratom, it felt like a miracle. It relieved pain, reduced my anxiety, and made me more social. At the time, I truly believed it had improved my quality of life. However, over time, that perception changed dramatically. After years of continuous daily use—nearly seven years straight—kratom became deeply addictive. What once felt helpful slowly turned into complete dependence. I had to take it every day just to function. As my use continued, I experienced serious mental health issues, including paranoia, depression, and a loss of the person I once was. The substance I believed was helping me was, in reality, causing long-term mental and physical harm. I eventually quit cold turkey after seven years of use. The withdrawal and aftermath were severe, and it took months for my mental health to stabilize. Unfortunately, after some time, I made the mistake of trying kratom again. Within a year and a half, I found myself addicted once more—exhausted, dependent, and struggling. This time, I slowly weaned myself off by micro-dosing less each day until I was finally able to quit completely. As of writing this letter, I have been kratom-free for over a month. While tapering helped reduce the severity of withdrawal compared to quitting cold turkey, the damage caused by long-term use was undeniable. Over the years, I spent thousands and thousands of dollars on this substance. I now firmly believe kratom is not a harmless supplement but a drug with serious risks—especially with long-term, heavy use. While it may appear to help some people in the short term, over time it can cause profound mental, emotional, and physical harm. I strongly believe kratom should be banned or, at the very least, strictly regulated. Anyone who promotes or defends kratom should listen to those of us who have lived with its consequences. My experience is not based on weeks or months of use, but years of continuous dependence. Thank you for taking the time to read my testimony and consider the real-life impact kratom has had on my health and my life. Sincerely, Matthew Slatton
Muskegon	Michigan	1 - Support	I'm beyond grateful that the Ohio BOH is going to save lives from this garbage drug kratom/mitragynine. My 22 year old son Matthew Eller died from whole leaf Kratom Powder (the least potent form of Kratom available in the United States). Kratom caused him to have a seizure, go into cardiac arrest and die. His toxicology showed he died from the "TOXIC effects of Mitragynine" an alkaloid found only in Kratom. He had no prescription drugs, no street drugs nor alcohol in his system when he died, and his autopsy showed he had no underlying health conditions. It's important to note my son didn't die from 7-OH/7-hydroxymitragynine.
Springfield	Ohio	1 - Support	My friend's son was hooked on kratom. He overdosed and died!

Franklin	Ohio	1 - Support	All forms of Kratom is not good. I was addicted to the leaf for 10 years and was not able to quit on my own the 7 oh cam out and that's when I finally seeked help and had to take Suboxone to quit Kratom. It destroyed my health, it made me lose 35 pounds, unable to eat, it depleted my testosterone, made me lose hair on my legs, I had a seizure and was on meds but when I quit I was no longer epileptic. Now I er 1 year later I'm still on Suboxone and have restless leg syndrome in my arm so bad it's constantly moving and embarrassing. I was sold a whole bag of lies about how good and not addictive it was but it was a lie. It was as bad as an addiction for me as any other drug. I would only work to buy my Kratom and just use it till I ran out then did whatever to get more. I would be at the store waiting on it to open to get my fix in the mornings when I didn't have money to buy it the night before. It was a horrible, horrible 10 years. I had debilitating anxiety and depression. I was kinda like zombie state with a bad temper all the time. I honestly think if this drug is ever allowed it needs to be regulated somehow and prescribed. I know people want it as an at home use but it's a very potent herb and can absolutely be over done very easily and you become addicted by tolerance and repeated use just like any other substance. I chose Kratom over opiates. It was my personal choice and I loved them until I didn't. Very scary that there is access to these over the counter. I can't even get meds that are weaker from my Drs. This is Definitely a substance that needs scheduled
Westlake	Ohio	1 - Support	Please outlaw all forms of kratom in Ohio -- both natural and synthetic.

Xenia	Ohio	1 - Support	Dear Members of the Ohio Board of Pharmacy, Thank you for the opportunity to share my perspective regarding kratom and kratom-derived substances, including 7-hydroxymitragynine (7-OH). I am writing as a concerned Ohio resident who has personally witnessed the serious harm these substances can cause to individuals and families. While kratom is often marketed as a "natural" or "herbal" supplement, my experience has shown that it can be highly addictive and dangerous. The perception that "natural" means safe has contributed to widespread use without adequate warnings, medical oversight, or regulation. In reality, kratom acts on opioid receptors in the brain, and its effects and withdrawal symptoms can closely resemble those of opioids. In my household, kratom use led to clear physical dependence, severe withdrawal symptoms (including anxiety, depression, insomnia, gastrointestinal distress, and agitation), and significant disruption to daily life. Attempts to stop using kratom were extremely difficult without professional intervention, contradicting claims that it is easy to quit or non-addictive. Additionally, prolonged kratom use was associated with serious health concerns, including suspected impacts on fertility and hormone regulation. These effects are rarely disclosed to consumers and are not well studied due to kratom's unregulated status. Families attempting to conceive deserve transparency and protection from substances that may interfere with reproductive health. One of the most alarming issues is the availability of highly concentrated kratom products, such as 7-hydroxymitragynine, which dramatically increase potency, addiction risk, and overdose potential. These products are easily accessible, often sold alongside wellness supplements, and lack standardized dosing or safety warnings. I strongly believe that kratom, including its natural and synthetic derivatives, should be classified as a controlled substance in Ohio. At minimum, it should not be legally sold without rigorous testing, medical oversight, and clear labeling. The current system leaves consumers unprotected and allows addictive substances to be marketed as safe alternatives. Ohio has the opportunity to lead with a public-health-first approach by preventing further harm, addiction, and family disruption. I urge the Board to consider the real-world consequences of kratom use and to prioritize safety, transparency, and accountability. Thank you for your time and for allowing public input on this important matter. Respectfully, Kylie Houk Ohio Resident
Lebanon	Ohio	1 - Support	I wholeheartedly agree with this as a mother who witnessed a child spiral from natural leaf use to synthetic and almost lose is life.
Portsmouth	Ohio	1 - Support	I am in support of the kratom ban. This drug is killing people and destroying lives. It is being marketed as safe energy but it is addictive and dangerous. Please ban kratom to prevent additional harm.
Portsmouth	Ohio	1 - Support	Kratos should be banned. Its just another drug that should be illegal to use and sale. There needs to be strict penalties on those who still sell it!!!
Akron	Ohio	1 - Support	I do believe all of this stuff kratom feel free the 70h All of it needs to be banned I can't believe it was ever legal in the first place

Tipp City	Ohio	1 - Support	Mitragynine absolutely needs to be banned! Allowing its sale as "kraton" is reckless and dangerous and it needs to be regulated and classified as illegal and those who import it and sell and profit from it need to be held responsible!
Portsmouth	Ohio	1 - Support	Kratom is a lethal substance that, as a substance abuse counselor, I often see used as a “safe” replacement for opioids such as heroin/fentanyl or opioid pain medications. Individuals have believed it to be safer due to easy access and it being labeled as an herbal product. Lives have been lost because of this substance and every form should he removed from the shelves.
Columbus	Ohio	1 - Support	As a licensed social worker and grief counselor, I have seen first-hand the devastating effects of mitragynine, or kratom. Ohioans are dying as a result of the greed driving the makers of this drug. That this substance is available to the public at large, and marketed toward children, is unconscionable. I strongly urge the board to vote to make all versions of this drug a schedule 1 controlled substance.
Springboro	Ohio	1 - Support	It is imperative that this drug be banned for the sake of our citizens.
Springboro	Ohio	1 - Support	My friend’s son became addicted to kratom because of its easy accessibility. He believed it would help his anxieties, but instead it took his life as it has done to so many others. Kratom needs to be banned to prevent others from falling victim to its web of deception.
Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I am living proof that your "danger" narrative is a lie. I use natural kratom, and I have never been safer or healthier. I have achieved a level of wellness with a simple leaf that years of your 'approved' toxic pills could never provide. My mind is clear, my body is restored, and my life is my own again. To call this plant a threat is a criminal insult to my intelligence and my health. The data is on my side. While your "approved" medications kill tens of thousands of Americans every year through respiratory depression, natural kratom does not. You are criminalizing the solution to the very crisis you claim to be fighting. The era of the "unaccountable bureaucrat" is over. We, the people, demand access to natural safety. We demand an end to the "pay-to-play" regulation that prioritizes corporate kickbacks over consumer freedom. The public is awake. We are documenting every conflict of interest, every "revolving door" appointment, and every piece of ignored science. If you continue to prioritize pharmaceutical greed over the lives of the people you serve, you will be removed. We are counting down to January, and the mandate for change is absolute. Stop the ban. Protect the plant. Restore your integrity if there is any left to save.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	The conversation around kratom often highlights a massive divide between the people who use it for personal wellness and the regulatory bodies like the board of pharmacy. When you see a natural plant facing a potential ban while pharmaceutical alternatives (often with more severe side effects) remain the "approved" standard, it can absolutely feel like the deck is stacked in favor of "Big Pharma." Why the Distrust Exists. I am very skepticism you're doing this for the public best interest usually stems from a few key areas: Financial Incentives: The medical and pharmaceutical industries are profit-driven. Because kratom is a natural plant, it cannot be easily patented, which means there is little "big money" incentive to fund the expensive clinical trials required for FDA approval. Many people turned to kratom as a way to manage pain or move away from synthetic opioids. When agencies then try to restrict access to that alternative, it feels like a betrayal of public health goals. Everyone seems to through this, Regulatory Consistency: Critics often point out that substances like alcohol or tobacco remain legal and regulated despite clear health risks, leading to the belief that kratom is being singled out for economic rather than safety reasons. No one believes you have the public best interest at heart you. I have a dont have a stake in the medical industry, I don't receive funding from pharmaceutical companies, and I don't have a "pro-ban" or "anti-ban" agenda. My goal is to be a transparent thought partner. I can provide the data used by the FDA to justify their concerns (like heavy metal contamination or salmonella risks in unregulated products), but I can also provide the arguments from the American Kratom Association and the millions of users who credit the plant with saving their lives. The pushback against a kratom ban has actually been quite effective in the past. In 2016, a massive public outcry forced the DEA to withdraw its proposal to list kratom as a Schedule I substance. This shows that public skepticism and advocacy do have the power to challenge the "big money" narrative. Same will happen were. Pushing fda medicine for bureaucrats and disgusting and we will remember this in January when you guys are removed
Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Banning or overregulating natural kratom will not protect public health. It will instead remove a safer option relied upon by many and risk pushing people toward more harmful substances. I urge you to consider evidence-based regulation, open scientific inquiry, and the lived experiences of those who benefit from kratom before taking any action that would cause unnecessary harm. Oversight will read these comments and agree the fake kratom reefer madness is scare tactics big pharma to get people on fda medication. As long as pharmacy reps Consulting forms are in drug manufacturing decisions we need to call them out and call the Corruption out, this is no different. This a money grab everyone see it not about public heath, not a debate when you don’t listen to science how do we not know deals behind closed doors happened. Disguise that public health is really corruption and everybody sees it. We don’t know And we don’t trust you. Everyone see this as a money grab. It’s actually really sick. They’re gonna kill so many people.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	This is often framed under the guise of "public health," a closer look at the data and the financial ties involved suggests a much more troubling reality. This is not a health crisis; it is a money grab designed to protect the monopoly of the pharmaceutical industry at the expense of American lives. For years, regulatory agencies have attempted to paint a natural leaf as a public menace. Yet, the science tells a different story. Unlike synthetic pharmaceuticals, natural kratom does not cause the respiratory depression that makes traditional opioids so lethal. If the goal were truly "safety," these boards would be focusing on the synthetic toxins flooding our streets, not a botanical that has been used safely for centuries. By pushing for a ban, you are not protecting me; you are removing my right to choose a safe, natural alternative. We must address the "revolving door" between the pharmaceutical industry and our regulatory boards. It is a clear conflict of interest when the same bodies responsible for banning natural plants are funded by the very companies that stand to profit from their absence. A natural plant cannot be patented. A natural plant cannot be "owned" by a corporation. By criminalizing this leaf, you are effectively forcing citizens back into the arms of Big Pharma, ensuring that the only path to relief is through a high-priced, "FDA-approved" prescription. This is not regulation; it is corporate protectionism. I am not a statistic; I am a success story. Before I discovered natural kratom, my quality of life was [briefly mention a struggle, e.g., severely limited by discomfort or fatigue]. Since choosing a natural path, my life has been transformed. I have regained my ability to [mention a specific achievement, e.g., work full-time, be present for my family, or exercise]. I am healthy, I am productive, and most importantly, I am safe. My blood work is clear, my mind is sharp, and I have achieved a level of wellness that years of traditional "medicine" failed to provide. To tell me that this plant is dangerous is to ignore the reality of my daily life. If this board truly cares about integrity, it will stop the march toward prohibition and instead support the Kratom Consumer Protection Act. This ensures that the products on the market are pure, labeled, and tested. Do not allow the pockets of the pharmaceutical industry to dictate our health choices. We see the corruption at the border of pharmacy and regulation, and we will not be silent while our natural rights are sold to the highest bidder. PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who

			are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	My Pain Is Not a Bureaucrat's Decision. Those of us in Ohio aren't stupid. We remember when marijuana was stamped Schedule I, shoved into the same category as heroin, and used as a blunt instrument to justify arrests, stigma, and decades of ruined lives. We were told it had "no medical value," that it was dangerous, immoral, a gateway to collapse. That lie stood for years not because it was true, but because it was useful. The so-called War on Drugs didn't fail by accident. It failed because it was never about health. It was about control. It was about policing certain communities, protecting certain industries, and silencing anyone who questioned the narrative. Now, years later, the truth is obvious: the war failed, the propaganda failed, and the people were right all along. Yet here we are again, being told to sit down, shut up, and "trust the experts." If COVID taught me anything, it's this: question authority, especially when it hides behind white coats, corporate logos, and government boards. The medical community is not some sacred, unified voice of truth. Big pharmaceutical companies are not benevolent guardians of public health. They are profit-driven corporations with lobbyists, revolving doors, and shareholders to please. That doesn't make every doctor corrupt but it absolutely makes the system compromised. And let's talk about misinformation. For years, scare tactics were blasted across social media and mainstream platforms alike. Weed makes you lazy. Weed fries your brain. Weed has no medical benefit. Meanwhile, opioids were handed out like candy, destroying families and communities while being FDA-approved, patented, and massively profitable. Funny how that works. Now the same system wants to tell me how much pain I'm allowed to be in. I reject that completely. My pain is not theoretical. It's not a line item in a policy report. It's not something a bureaucrat who has never lived in my body gets to quantify, approve, or deny. I have the right to choose how I manage my pain whether that's cannabis, alternative treatments, or anything else that works for me without destroying my life. The Board of Pharmacy and similar institutions love to posture as neutral regulators, but from where I'm standing, they look like gatekeepers protecting entrenched interests. They don't listen to patients. They don't listen to everyday people. They listen to lobbyists, corporations, and political pressure. We all see it. You don't need a conspiracy theory when the corruption is structural and out in the open. This isn't about "getting high." It's about dignity. It's about autonomy. It's about the fundamental right to say: I know my body better than you do. Honest debate has never been welcomed by these systems. If it were, marijuana wouldn't have been criminalized for generations while far more dangerous substances were normalized and monetized. If listening to the people mattered, we wouldn't still be fighting for basic recognition of pain, mental health, and alternative medicine. I'm done asking politely. I don't need permission from a broken system to seek relief. I don't need approval from a board that answers to corporate donors. And I don't need to accept suffering just to make regulators feel comfortable or to line the pockets of DeWine Corrupt Bureaucrats. Everyone see this for what it is a money grab. Not backed by science but by big money and fear. In Ohio we reject that PDF:

			the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	While the official uninsured rate in Ohio has historically hovered around 6.7%, that number is currently under massive pressure. The "Premium Shock" of 2026: In late 2025, health insurers in Ohio proposed a median premium increase of 18% for 2026… the largest spike in nearly a decade. For many working Ohioans, this makes "private" insurance functionally impossible to afford. Experts at the Health Policy Institute of Ohio have warned that as temporary federal subsidies expire in early 2026, out-of-pocket costs for many on the exchange will jump by over 75%. Roughly 25% of Ohioans rely on Medicaid. If eligibility rules tighten or expansion is scaled back, an estimated 770,000 people in the state could be forced into the "uninsured" category this year. When I went to the doctor due to traumatic injury a broken jaw I was prescribed ibuprofen is a direct result of State Medical Board of Ohio (Rule 4715-6-02) and the aggressive "acute pain" guidelines implemented to curb opioid use. Guidelines now strongly push "Non-Opioid Pharmacologic Treatment" (NSAIDs/Ibuprofen) as first-line therapy for almost all acute pain. Doctors who deviate from this face intense scrutiny from the Board of Pharmacy and insurance "utilization reviews." From a patient's perspective, this isn't science t's a risk-mitigation strategy for the hospital's insurance and the doctor's license. For someone broke and unhoused, being told to "just take Advil" for a broken jaw is a form of medical abandonment. This is a money grab reflected in the 2026 pharmaceutical trends. While natural alternatives like kratom are targeted for bans, pharmaceutical companies are seeing record profits from high-cost specialty drugs. Insurers in Ohio explicitly cited "specialty drug costs" as the #1 reason they are raising your premiums by 18% this year. They are effectively pricing out the average citizen to cover the costs of high-end patented medications, then banning the low-cost natural tools (like kratom) that you might use to bridge the gap. Everyone see your corruption this is not about public health PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Ohio has already lived through this kind of hysteria before, and history judged it harshly. Reefer Madness failed. It was driven by fear, propaganda, censorship, and predetermined conclusions not science, not honesty, and certainly not public health. And yet here we are again, watching the same exact playbook being used against kratom. Calling this a "public health" effort is insulting to anyone paying attention. Kratom is a natural substance that many people rely on for harm reduction, stability, and survival. Instead of allowing transparent, unbiased scientific research, what we see instead is censorship, narrative control, and outcomes that appear to have been decided long before any honest data could be considered. On platforms like Facebook, even mentioning kratom results in posts being suppressed or removed. How can there be real, science-based discussion when the conversation itself is silenced? How can the public trust "data" when dissenting voices are erased and only one approved narrative is allowed to exist? That is not science. That is propaganda. When research is filtered through political pressure, financial influence, and institutional bias, the result is not public health it is corruption. From the outside, it looks like the board overseeing this issue has no interest in genuine inquiry. It looks like a predetermined outcome dressed up as concern.This is madness. It is disgusting to watch the same fear-based tactics resurface under a different name. Ohio should know better. The public should not have to relive the consequences of Reefer Madness because regulators refuse to learn from history. You should be ashamed of yourselves. Instead of protecting people, you are repeating a failed moral panic one that will hurt real human beings. Banning kratom will not eliminate demand. It will push people toward more dangerous substances and undo years of harm reduction progress. Many of us believe this process is corrupt. Many of us believe the board has already made up its mind. And many of us are watching closely, fully aware that this is not about health it is about control, money, and silencing inconvenient truths. History is watching. And it will remember who chose fear and corruption over facts and humanity. The goal to sale FDA medications not public heath PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	This is reeefer madness all over again but the board stands to tremendously profit off of a ban it's corruption this isn't to help everybody. Everybody sees it. There's been no honest debate. This is about corruption. Their goal is to sell FDA medicine. It's so disgusting. This isn't about help people. They should be ashamed of themselves to try to play it as public help really it's an FDA money grab. Everyone see it natural kratom safe The board won't listen to us because they're corrupt. Actually really sad to see you hurting so any good people. So you can stuff your pockets so sad no about the people but to sale fda medicine I am alive today because of kratom. That is not a slogan, not an exaggeration, and not something I say lightly. It is a simple, deeply personal truth. At a time when my life was unraveling physically, mentally, and emotionally kratom gave me stability when nothing else did. It helped me step away from far more dangerous substances, regain control over my health, and rebuild a life that had been slipping through my fingers. No government agency did that. No pharmaceutical intervention did that. Kratom did.What makes this so painful and infuriating is watching institutions that claim to protect public health work relentlessly to restrict or eliminate access to something that has helped countless people like me. From where I stand, this does not look like a good-faith effort to keep people safe. It looks like a money-driven campaign dressed up as concern. The FDA and related boards speak about kratom as if people like me don't exist or worse, as if our experiences don't matter. We are reduced to statistics, ignored entirely, or treated as collateral damage in a regulatory battle that seems far more aligned with corporate and pharmaceutical interests than with real-world public health outcomes. If public health were truly the priority, lived experience would matter. Harm reduction would matter. Honest comparisons between kratom and the substances it replaces opioids, alcohol, and other far more dangerous drugs would matter. Instead, many of us see selective outrage, distorted narratives, and a refusal to acknowledge the obvious: kratom is saving lives. To many in the kratom community, this push feels less like protection and more like a cash grab one that benefits powerful industries while endangering everyday people who have finally found something that works for them. Taking kratom away will not make people safer. It will push them back toward substances that actually do kill. I am not asking to be spoken for. I am asking to be heard. Kratom didn't ruin my life. It helped save it. And any system that ignores that reality needs to seriously question whose interests it is truly serving. The board admitted was to get people on fda medication. That's listening to bureaucrats instead of the people we will remember in January support natural kratom we are loud and proud and will be at each meeting tell the board to go hell natural kratom safe this is some bureaucrat getting rich off our suffering it's wrong and we are here to call them out. Said it during a interview this about selling medicine

			PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Driving the Market Underground The "Fentanyl Trap"By criminalizing the natural leaf, the state doesn't stop demand; it simply hands the market over to cartels and illicit sellers. In a legal, regulated market, kratom is just a leaf. In a "black market," there is a massive incentive to "spike" products with cheap synthetics or fentanyl to increase potency and ensure "repeat customers." The Iron Law of Prohibition: When you ban a mild natural substance, it is almost always replaced by a more potent, more compact, and more dangerous version that is easier to smuggle. The Veteran and "Unprotected" Health Crisis Many veterans use kratom to manage the "invisible wounds" of war chronic pain and PTSD—without the fog of heavy narcotics. Forcing a veteran who has successfully managed their pain for years back into the VA or a state system for "ibuprofen-only" care is a recipe for despair. For the unhoused, pain isn't just a symptom; it's a barrier to work and survival. If a person can no longer walk to a job or a shelter because their natural pain management is now a felony, the cycle of poverty and homelessness accelerates. Contrary to the "public health" narrative, bans on kratom often lead to a spike in deaths from other substances. For many, kratom acts as a safety valve a way to stay away from lethal street opioids. When that valve is shut off, a significant percentage of users will "revert" to whatever is available on the street. Data shows that in states with kratom bans, the opioid overdose rates have not dropped; in many cases, they have worsened as people lose their "bridge" to sobriety. You Criminalizing the "Working Poor" A Schedule I classification means that a single bag of tea leaves could become a felony. Ohio's working professionals, who use kratom to get through a 12-hour shift with a back injury, now face the risk of a criminal record. A felony conviction is a "economic death sentence" that prevents people from getting housing, loans, or professional licenses. When the state tells a citizen that a plant they have used safely for years is suddenly as "dangerous as heroin," it destroys the trust between the citizen and the government. It Stifling Scientific Research. By placing mitragynine in Schedule I, the Board of Pharmacy makes it nearly impossible for Ohio universities (like OSU or Case Western) to study its benefits. It takes years of red tape to get a Schedule I research license. This effectively "freezes" the science, ensuring that we never fully understand the plant's potential, which conveniently leaves the field open for pharmaceutical companies to develop their own patented, high-cost versions later. The Reality of the "Money Grab" The community sees a clear double standard: The state claims to be "broke" when it comes to funding mental health or veteran housing, yet it finds the resources to launch a massive enforcement campaign against a plant. This is why many view the ban as a move to protect the "Bureaucratic Wallet" ensuring that the only way to manage pain is through a system that generates premiums, co-pays, and kickbacks. It's not public heath and to lie and act like it is disgusting 😵 PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use

			disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	DeWine gone in January everyone see this as a money grab, can't wait till January we can remove you corrupt bureaucrats. Your goal to sell more drugs to line your pockets. We all see it. We will be at every meeting to save natural kratom. If you had any integrity left you would back down off natural kratom. After returning from active duty, I struggled with chronic pain, and sleep difficulties. Conventional medications often left me with side effects that were nearly as debilitating as the conditions themselves. I began using natural kratom under careful guidance and found that it helped manage my pain and sleep in a way that allowed me to regain control of my daily life. it must be used responsibility, comes with education but it has given me a level of function and comfort I could not achieve with other treatments. What concerns me is the lack of clear, consistent information from regulators and healthcare authorities. In my experience, responsible use, combined with proper guidance and quality control, can make kratom a valuable tool for individuals seeking relief without resorting to more harmful substances. I urge the board to consider the lived experiences of people like me and support further research to clarify kratom's safety and therapeutic potential. Decisions should be guided by evidence and real-world outcomes, not fear or misinformation. Everyone see this corruption to sell more fda medicines PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Listen to us loud and clear we want accuse to natural kratom. You have an agenda but we have a larger voice the oversight board is on our side. You guys are Corrupt bureaucrats everyone see it, not about public heath money grab to get people on fda meds. Really sick and upset using fear to scare people I am a tuba member of the Cleveland Orchestra. I am writing to share my experience with kratom, a natural plant that has been an important part of my wellness routine. Life as a professional musician is physically and mentally demanding long rehearsals, performances, and travel take a real toll on the body and mind. Natural Kratom has helped me manage chronic aches, maintain focus during long performances, and recover more naturally than with prescription medications. It allows me to continue performing at a high level without the risks that come with stronger pharmaceuticals. I have used it responsibly for years, and it has been a quiet but crucial part of my ability to keep contributing to the music I love. It's frustrating to see kratom unfairly demonized while countless people including artists, athletes, and professionals use it safely to support their health and careers. The plant has been legal and used responsibly for decades, and decisions to restrict it often feel more influenced by politics or corporate interests than by science or public wellbeing. I hope that lawmakers and regulators will consider the real benefits kratom provides to everyday people, including members of the arts community, before imposing harsh restrictions. Music, like life, requires care, focus, and balance and for me, kratom plays a role in maintaining all three. The demonization of kratom feels like a modern- day Reefer Madness. Instead of helping people, strict regulations punish those who rely on it. People aren't asking for chaos they just want safe access to a plant that has helped them live better lives. For years, kratom has been legal in many places, quietly used by everyday people. But political agendas, like those pushed by boards influenced by big pharmacy interests, are starting to interfere. Ultimately, this isn't about safety it's about money and control. People shouldn't be punished for seeking relief or alternative wellness options. Kratom deserves honest discussion, not fearmongering. Said it yourself to sell more fda drugs. And it's not about public health board members has interest and 3 party donations if the board goes certain way, why it's a show trial, you don't listen to the people. DeWine the board left Ohio in a sad state of affairs. Doesn't matter to board or pharmacy as more fda sales take place who cares about the damage of Ohio. This is not about health it to sell fda medicine. You're the corrupt board for DeWine we are here to say no! Remember you have oversight and we think your corrupt Bureau. Line your pockets. We have no idea if you take money for a ban. I know it's not fair. You don't listen to science you listen to money. 💷 Keep natural kratom legal: I have a legal right to treat pain the way I do not want not some Bureaucrat who's corrupt

			probably all the take. Everyone knows this isn't about public heath fake moral panic. You said it yourself the goal to sell more fda drugs. You're only going to hurt people to line your pockets. Your credibility is down especially since sb299 was being debate. Just another DeWine money grab. The corruption is over next January PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring
Pottsville	Pennsylvania	2 - Oppose - Corruption/Bigger Interests at Play	Do not ban kratom! You don't understand how many people it has helped!! Big pharma paying you for this?

New Albany	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Proposing that natural kratom be scheduled is ridiculous and greedy. Natural kratom, not 7OH or any of its derivatives, is helpful and affordable to many for many different reasons. It is not habit forming, nor does it have any kind of mind altering effects. It does not constipate like opiates, nor does it cause possible respiratory distress like opiates. It does however, stop pain in most as well as opiates. I believe that is the issue! The fact that that this is herbal supplement could possibly be scheduled is only to make money. Powers that be likely feel threatened in some manner that there is easy availability to something that competes with opiates. Natural kratom should not be scheduled. Stop the greed and misinformation!
Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I am physician dedicated to one sacred principle: the duty to provide the best possible care for my patients. Today, I stand before you not just as a doctor, but as a witness to a profound injustice being carried out by the Ohio Board of Pharmacy. For years, I have seen patients our neighbors, our veterans, our elderly find relief through natural kratom. They aren't looking for a "high"; they are looking for a way to walk without pain, to work a full shift, and to reclaim their lives from the grip of synthetic dependencies. We are currently witnessing a modern "Reefer Madness." The Board of Pharmacy is attempting to classify a natural leaf as a Schedule I substance the same category as heroin. This is not just a scientific error; it is a moral one. By claiming this is a "public health" crisis, the Board is ignoring the millions of Americans who use this plant safely every day. As a physician, I see the irony. The very agencies claiming to protect the public are the ones removing a safe, natural bridge that keeps people away from far more dangerous, illicit alternatives. Let's be honest about what we see. This is not about safety; it is about control and capital. But about Big Money..We see the influence of industries that cannot patent a tree leaf. Every time a natural alternative is banned, the profit margins of synthetic "solutions" grow. The Board has a duty to help Ohioans, yet their actions take away the tools we need to provide care. They are choosing to criminalize your wellness to protect a bottom line. A Message to Ohio Leadership We see through the rhetoric. You claim to care about the "overdose epidemic," yet you are banning a plant that has helped thousands escape that epidemic. You are effectively telling my patients that their lived experience doesn't matter, and that my medical judgment is secondary to your political and financial interests. I went to medical school to save lives, not to watch the state hand them over to special interests. This ban is wrong for Ohio, it is wrong for our patients, and we will not stop until the science and the people are respected. This should be about selling fda medicine but care about how we heal Ohio

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	absolute outrage at the Ohio Board's attempt to ban natural kratom. This is reckless, unnecessary, and disgraceful. You are pushing policy based on fear, misinformation, and corruption, not on science or public health. There is no new evidence suggesting kratom is unsafe when used responsibly. Yet here you are, threatening a safe, natural plant that millions of Americans rely on. Governor DeWine has been elected to represent Ohioans, yet it appears your actions ignore the will of the people. The SB99 law already supports legalizing and regulating kratom in Ohio. Your attempts to reverse that progress are harmful, stressful, and inflict real suffering on ordinary citizens who use kratom safely every day. Families, small business owners, and responsible consumers are being threatened while your board debates a plant that poses minimal risk.Shame on you for jeopardizing Ohioans' safety, livelihoods, and mental health. Instead of listening to science and responsible organizations, you are allowing fear and perhaps special interests to drive policy. This is unacceptable. Natural Kratom is safe, natural, and legal under SB99. Trying to ban it is an insult to every Ohioan who relies on it. I demand that you stop this baseless attack on kratom, respect the law, respect science, and respect the citizens of Ohio. Your actions are unnecessary, harmful, and disgraceful. Keep natural kratom legal
Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	coordinated efforts to demonize and restrict access to kratom. The aggressive rhetoric being used against this plant reminiscent of the "Reefer Madness" era is a transparent attempt to ignore science in favor of special interests. The public sees this situation for exactly what it is: corruption. For years, millions of Americans have safely used this natural botanical to improve their quality of life. Despite this, there is a persistent push to over-regulate or ban it. It is impossible to ignore the timing of these attacks, which often seem designed to protect the profits of "Big Pharma" and other well-funded industries that view a natural, affordable alternative as a threat to their bottom line. Natural vs. Synthetic: Kratom is a raw leaf, not a laboratory-created chemical. The attempt to classify it alongside dangerous synthetic substances is scientifically dishonest. We are not blind to the influence of "big money" in these regulatory decisions. Prioritizing corporate interests over the health and freedom of citizens is a violation of the public trust. When used responsibly, kratom has a long-standing track record of safety. Removing access will only force citizens toward more dangerous, synthetic, or illicit options. It is time to stop the fear-mongering. We demand that you follow the actual science, respect the rights of your constituents, and end the "Reefer Madness" campaign against a plant that has helped so many. We are watching, we are informed, and we will not stay silent in the face of this overreach.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Ohio specifically the banning of natural kratom. As citizens, we have a long memory. We have seen this play before, and we refuse to be misled by the same "public health" facade that was used to justify the failed War on Drugs. Scheduling For over 50 years, marijuana was classified as a Schedule I substance defined as having "no medical use" and a "high potential for abuse." In Ohio, thousands of lives were disrupted by this classification. Yet, in 2023, Ohioans spoke clearly at the ballot box to legalize it. This wasn't just a vote for a plant; it was a vote of no confidence in the scheduling system. We now know that the Schedule I designation was never based on science; it was a political tool used to suppress a natural alternative. The fact that the government could be so wrong for so long proves that your "schedules" are not a reflection of safety, but of control. The public's skepticism isn't a "conspiracy theory"—it is a rational response to documented history. Nearly half of the FDA's budget is funded by the very pharmaceutical companies it is supposed to regulate. The Revolving Door: We see former bosrd members consistently leaving public service to take lucrative jobs on the boards of major drug companies or non profits. Natural herbs like kratom cannot be patented for billions of dollars. Therefore, there is zero financial incentive for the "establishment" to protect them, and every incentive for "Big Pharma" to lobby for their removal from the market to eliminate competition for their synthetic products. . You must understand that among Ohioans under 50, trust in the medical and regulatory establishment is at an all-time low. We have grown up in the shadow of the opioid crisis—a crisis fueled by FDA-approved, "safe" pharmaceutical pills. We have seen natural remedies demonized while dangerous synthetics were pushed into our communities. When you move to ban or schedule a natural herb like kratom, we don't see "protection." We see a board that is more concerned with lining pockets and protecting corporate market share than with the actual well-being of the people. Our Demand We demand that you stop the "Reefer Madness" tactics. Do not repeat the 50-year mistake of marijuana prohibition with kratom. Respect the intelligence of the voters, the autonomy of patients, and the history of botanical medicine. We are no longer listening to the "experts" who are funded by the industry they regulate. We are listening to the science, our own bodies, and the history of your past failures.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I want to address a growing shadow over our great state. A shadow cast by the very institutions that claim to protect us. As we stand here in January 2026, we are witnessing a defining moment in the history of Ohio's government. It is a moment where the will of the people and the truth of science are being ignored in favor of bureaucratic overreach. For months, we have watched the Ohio Board of Pharmacy move in lockstep to criminalize a natural leaf..Mitragyna speciosa. They have ignored the thousands of voices from our veterans, our working parents, and our seniors who rely on this plant to survive. They have ignored the G-protein biased signaling data that proves this plant does not carry the same respiratory risks as the narcotics they so readily license. To the bureaucrats 'holding the paper' in these backrooms: We see you. We see the hypocrisy of a system that hands out fentanyl test strips with one hand while trying to turn a natural tea-drinker into a felon with the other. You claim this is about public health, but the millions of Ohioans watching this money grab and know better. You are trying to ban a natural solution to clear the way for patented, high-priced pharmaceuticals that keep your wallets heavy and our citizens dependent. But there is a new reality in Columbus. A bipartisan coalition in our legislature has already stood up. House Bill 587, the Kratom Consumer Protection Act, is the path forward. It is the common-sense answer: regulate for purity, test for safety, and keep the government out of the medicine cabinets of responsible adults! You still have time to do the right thing. Back down. Rescind this scheduling proposal before the January 28th deadline. If you do not, you are not just losing a policy debate you are losing the last shred of your credibility. You are showing every Ohioan that you serve the industry, not the individual. We are a state of explorers, innovators, and rebels. We do not bow to unelected boards that ignore the light of science. We will protect our veterans. We will protect our right to choose natural paths. And we will ensure that Ohio remains a place where freedom isn't just a word on a license plate it's the way we live. Keep the leaf legal. Keep Ohio free.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I raise serious concerns about the role the Board of Pharmacy has taken in influencing kratom policy. A fundamental question must be asked: why is the Board of Pharmacy presenting itself as more knowledgeable or authoritative than lawmakers and the growing body of scientific, consumer, and public health evidence? Lawmakers are elected to weigh data, public input, and real-world outcomes not to defer blindly to an agency whose primary mandate centers on pharmaceutical interests. If SB299 ultimately preserves the legality of kratom, the Board of Pharmacy's credibility will be significantly damaged. The public will rightly question why an agency so confidently opposed to kratom was proven out of step with both lawmakers and constituents. This is not a minor issue of disagreement it is a test of institutional trust. Younger adults, particularly those under 50, are paying close attention. Many rely on kratom as a safer alternative to alcohol, opioids, or other substances. When agencies dismiss lived experience, ignore harm-reduction principles, and appear disconnected from modern public health thinking, they lose legitimacy with an entire generation. That loss of credibility is not easily repaired. Policy decisions should be grounded in evidence, transparency, and respect for consumer choice not fear-based narratives or outdated assumptions. If kratom remains legal under SB299, it will demonstrate that lawmakers listened to the public and the data. Conversely, it will highlight how out of touch the Board of Pharmacy has become on this issue. I urge you to consider not only the science and policy, but also the long-term consequences to public trust. Credibility matters and once lost, it is very difficult to regain.
Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	As someone who uses kratom responsibly, I believe much of the public narrative around it is incomplete and, in some cases, misleading. Kratom is a natural plant that has been used traditionally for generations. For me, it has been a safer alternative to substances that carry far greater risks. When used in moderation and without adulterants, kratom has helped me manage my daily life without turning to options that are far more dangerous or addictive. I am careful with dosage, sourcing, and frequency of use, and I treat it with the same responsibility one should apply to any supplement or substance. What concerns me most is that kratom is often discussed as if it were inherently dangerous, while far more harmful substances remain legal, widely promoted, or even prescribed. This raises questions about whether the aggressive push against kratom is truly about public safety, or whether financial interests are playing a significant role. Kratom cannot be patented, is inexpensive, and does not generate the same profits as pharmaceutical alternatives, which makes the motivation behind some of these efforts difficult to ignore. Rather than blanket bans or fear-based messaging, I believe the more reasonable path forward is education, quality control, and regulation that ensures consumer safety while respecting individual choice. Adults should be trusted to make informed decisions about their own bodies, especially when a natural option has helped many people avoid more harmful substances. I urge policymakers and decision-makers to consider the voices of responsible kratom users and to look at the full picture scientific, economic, and personal—before supporting policies that may do more harm than good.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	we are witnessing a deliberate breakdown of scientific rigor in the state of Ohio. We are watching the birth of a new "Reefer Madness," built not on data, but on a foundation of fear, censorship, and a total lack of education. Earlier this month, the Ohio Board of Pharmacy voted unanimously to criminalize natural kratom leaf. Do you know how many questions they asked about the evidence before that vote? Zero. Not one single board member asked for a clarification on the science.This is what happens when policy is guided by fear or corruption rather than education. The Board is relying on a discredited federal narrative that has already been rejected by the highest levels of our own government. They claim there is "no medical use," yet millions of Americans including our veterans and neighbors use it daily to manage pain and avoid the very opioids that have ravaged our state. They use the term "public health" as a shield, while ignoring the fact that federal leaders like Secretary Robert F. Kennedy Jr. and the FDA Commissioner have explicitly stated that natural kratom leaf is not the problem. When you refuse to educate yourselves on the difference between a natural leaf used for centuries and a dangerous synthetic compound created in a lab, you aren't "protecting" anyone. You are operating from a place of ignorance. By banning the natural leaf, you aren't stopping drug use; you are destroying the only safe bridge many Ohioans have to stay away from fentanyl and heroin. You are criminalizing law-abiding citizens because you refuse to learn the science of partial mu-opioid receptor agonists versus full agonists. We See the Corruption. We know why the "medical establishment" is so afraid of a plant. You can't patent a tree. You can't charge $500 a bottle for something people can grow or buy as a tea. Nobody under 50 trusts this establishment anymore because we see the "revolving door." We see bureaucrats who push for these bans today and take six-figure consulting jobs with pharmaceutical companies tomorrow. This is a modern-day prohibition. Just like marijuana before it, this ban will fail. It will create a black market, it will kill people by pushing them back to illicit street drugs, and it will eventually be overturned when the truth finally catches up to your fear-mongering. Lawmakers in the House are already moving to protect us with the Kratom Consumer Protection Act (HB 587). They are listening. The people are with us. You are standing with your money and your bureaucracy, but you are standing on the wrong side of history. Stop the fear. Start the education. Leave our natural rights alone.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I am firmly against the state board to ban natural kratom and i ask that it remain legal. Natural kratom is used responsibly by many adults as a harm-reduction tool and an alternative to far more dangerous substances, including opioids and alcohol. For these individuals, kratom supports stability, employment, and overall quality of life. Eliminating legal access would not protect public healthl it would create unnecessary harm. History has shown repeatedly that prohibition does not stop use. It removes oversight, pushes consumers toward unregulated markets, and increases risk. A ban on kratom would repeat these well-documented failures while disregarding the voices of constituents who have clearly and consistently spoken out. The public is watching this issue closely. Voters are paying attention to whether decisions are guided by evidence, transparency, and the will of the people, or by fear-based narratives and institutional pressure. Trust in public agencies and lawmakers depends on choosing regulation over prohibition. Reasonable safeguards and consumer protections can and should be implemented. An outright ban, however, is unacceptable. Kratom must remain legal. Anything less represents a failure to listen to constituents, to learn from history, and to act in the public's best interest. We understand this is a money, grabbing corruption make no doubt the people see it Natural kratom is safe. I am a grandmother. I do not like taking pain medicine. Kratom has saved my life help me get off pain medication. Any ban will do a huge disservice. I question you and the board motives regulate not ban

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	the board selectively listens to info it only wants it hear. I know that comes from a place of wanting me to be safe. But I need you to listen to me for a minute, not as a 'user,' but as your someone who was a heavy fentanyl user. What you're seeing on the news right now is 'Reefer Madness 2.0.' Think back to when they told everyone that marijuana would turn people into criminals. Now, it's legal in Ohio. They were wrong then, and they're using the same playbook now with kratom. They take a natural leaf that people have used for thousands of years and try to turn it into a 'boogeyman.' Why don't I trust the 'experts' telling you it's dangerous? Because those same experts at the FDA and the medical boards are the ones who told us the opioid pills they approved were 'safe' and 'non-addictive.' We see the corruption now. Did you know that nearly half of the FDA's budget comes directly from the pharmaceutical companies they are supposed to regulate? Just this past year, they've had to pull hundreds of thousands of bottles of 'approved' drugs—like Prazosin for blood pressure and Duloxetine for depression—because they were contaminated with cancer-causing chemicals. They approve synthetic drugs that line their pockets, but they try to ban a natural herb that they can't patent or profit from. This isn't about public health, Mom. It's about money. Nobody under 50 trusts the medical establishment anymore because we see the 'revolving door' where bureaucrats leave the government and immediately take million-dollar jobs at Big Pharma. Kratom is just a leaf. It's helping people in our community stay away from those dangerous pills and live normal lives. The fear they are pushing is a tool for censorship and control. I'm not being reckless; I'm being careful not to trust a system that has proven it cares more about its budget than it does about us. I just want you to see that the people are with us on this. Even lawmakers are starting to push back because they see the corruption too. I'm safe, I'm just refusing to let them lie to me." FDA-approved" drugs are constantly being pulled for safety (like the massive 2025 recalls) helps her realize that "Approved" doesn't always mean "Safe," and "Natural" doesn't mean "Dangerous."I lived through the shift in how society views marijuana. The drug war was a failure. The younger generation will end this madness. And see this for what it is a money grab

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	As Ohioans continue to face a variety of challengesbfrom the ongoing economic struggle to health crises exacerbated by the pandemic there's a new battle unfolding. One that threatens to harm everyday citizens, disrupt businesses, and create unnecessary panic in our communities: the potential ban on kratom. For those who don't know, kratom is a natural plant derived from Southeast Asia that has been used for centuries to treat chronic pain, mental health issues, and opioid withdrawal symptoms. It's a safe, natural alternative that many Ohioans rely on to manage pain and anxiety, especially when prescription drugs come with devastating side effects. However, recent moves by the Ohio Board of Pharmacy, fueled by misinformation and hysteria, threaten to ban this life-saving plant. Censorship and Misinformation: A Modern-Day Reefer Madness We are witnessing a censorship campaign built on fear and misinformation. For many people, the way kratom has been portrayed in the media is reminiscent of the "Reefer Madness" era, where misinformation about marijuana led to mass panic and unnecessary legal restrictions. Back then, lies about marijuana's dangers fueled public fear, causing decades of unnecessary stigma. Now, it's kratom that's being demonized despite no reliable evidence linking it to any deaths when used responsibly. The true danger here isn't kratom itself; it's the panic being generated by those in power who either don't understand the science or are willing to ignore it for the sake of corporate interests. Kratom has never been shown to be responsible for a single death in Ohio, yet it's being treated as if it's just as dangerous as street heroin. This is irresponsible censorship, and it must stop. The facts are simple: when used correctly, kratom is a safe alternative. But rather than focusing on education, it's easier for the media and politicians to create panic and ride the coattails of fear. The Board's Decision to Ban Kratom: A Total Overkill keep natural kratom legal Let's talk about the Ohio Board of Pharmacy's decision to ban kratom. The decision is not just overkill—it's flat-out wrong. It's a decision that, if enacted, will hurt hard-working Ohioans, small businesses, and countless families who depend on kratom for their well-being. It's impossible to ignore the fact that the board has not thoroughly examined the science, or, worse, has chosen to ignore it in favor of corporate-driven agendas. Big Pharma has a long history of pushing opioids and other dangerous drugs while sidelining natural alternatives like kratom, which could provide people with a safe option for pain relief and anxiety management. When kratom is banned, people who rely on it will be pushed back to dangerous, addictive opioids, with devastating consequences. The economic impact of banning kratom would be severe. Small businesses that sell kratom products would be wiped out. Jobs would be lost. And Ohioans who have turned to kratom for relief would be left without any viable alternatives. This isn't just about people's health it's about their jobs, livelihoods, and quality of life. A Quality of Life Already in Decline Under Governor DeWine lets not forget quality of life in Ohio has already gotten worse under Governor DeWine. From rising unemployment and housing instability to an opioid crisis that seems impossible to escape, the last thing Ohio needs is a policy that further restricts access to safe alternatives. Banning kratom is another example of a failed policy that will worsen lives, not improve them. Ohioans have been through enough. We don't need policies that destroy small businesses, criminalize responsible people, and push

			more individuals toward dangerous drugs. We need solutions that support local businesses, protect public health, and empower Ohioans to make informed decisions about their own well-being. The Real Issue: A Lack of Education and Open Dialogue The core problem here is that instead of educating the public, we are being led to believe that natural products like kratom are dangerous and need to be banned. What we should be doing is educating people on safe, regulated use of kratom and other plant-based medicines. Instead of stoking fear, we should be providing a platform for responsible conversations about alternatives to dangerous opioids and other pharmaceutical drugs. Rather than focusing on fear-based policies, it's time for lawmakers and public officials to ask themselves: Why are we criminalizing those who seek relief? Why are we prioritizing misinformation over data, panic over facts? : Stop the Panic, Ohioans deserve better. The potential ban on kratom is rooted in fear, misinformation, and a lack of understanding about the benefits of this natural plant. Banning kratom would not only hurt individuals, it would hurt businesses, destroy jobs, and worsen quality of life in Ohio. It's time to stop the demonization of responsible people who choose to use natural kratom as a part of their health regimen. Instead of making decisions out of fear and hysteria, we need informed policies based on real science and compassion for Ohioans who rely on kratom to live better lives. It's time to fight back against the censorship and misinformation that is threatening to take away the safe, effective alternatives that so many Ohioans depend on. We have the power to demand change, and it starts by telling the Board of Pharmacy that this is not the way forward. Listen to the people stop going against the will of the people

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	current push to ban natural kratom and the broader narrative being used to justify it. History offers a clear warning. The “Reefer Madness” era showed how fear-based messaging, selective information, and institutional influence can override science and the will of the people. Decades later, society openly acknowledges that those policies were misguided, harmful, and driven by interests that had little to do with public health. Many people see the same pattern emerging now. When policy discussions appear dominated by agencies or industries that stand to benefit financially from prohibition, while dismissing public testimony and lived experience, it raises legitimate questions about whose interests are truly being served. Increasingly, this feels less like a public safety effort and more like a system that rewards prohibition while ignoring reasonable regulation. The public is not unaware. Constituents are paying attention, sharing information, and recognizing these parallels for what they are. Attempts to frame this issue through fear rather than evidence only deepen skepticism and erode trust in institutions meant to serve the public. The will of the people matters. So does learning from history. Prohibition driven by outdated assumptions and financial incentives has failed before, and repeating those mistakes will only damage credibility and public confidence. I l respectfully urge policymakers to step back from fear-based narratives, consider the full historical context, and pursue transparent, evidence-based approaches that reflect both public input and modern understanding.
Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I’m writing because your recent interview with Channel 4 was, without exaggeration, one of the dumbest and most irresponsible things I’ve ever heard. Telling people who use natural or alternative medicine that they should abandon it and “just go on FDA-approved medicine” is not only ignorant .. it’s dangerous. It shows a complete lack of understanding of how health actually works, how many people have been failed or harmed by conventional medicine, and why people turn to natural treatments in the first place. FDA approval is not a magic stamp of safety or effectiveness. Plenty of FDA-approved drugs have been recalled, caused severe side effects, or done long-term damage that only came out years later. Pretending otherwise is either dishonest or wildly uninformed. What makes this worse is the platform you chose. Going on Channel 4 and making sweeping, dismissive statements like that doesn’t educate people …it scares them, shames them, and pushes a narrow, one-size-fits-all narrative that benefits pharmaceutical companies far more than patients. People deserve nuanced, evidence-based conversations, not lazy talking points. They deserve respect for their lived experiences, not to be talked down to as if they’re stupid for questioning an industry with a long track record of conflicts of interest. If your goal was to help people, you failed. If your goal was attention, congratulations — but it came at the cost of credibility. You should seriously reflect on the impact of what you said and the responsibility that comes with speaking to a mass audience. Because right now, that interview did far more harm than good.
Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I walked into the doctor's office with nothing in my pocket. Zero. No co-pay. No way to pay for the medication I desperately need. My options were gone before I even sat down. I tried to explain, tried to ask for help, but the system doesn't pause for someone without cash. It's frustrating because medicine isn't one-size-fits-all. What works for one person might be useless or worse for someone else. And yet the bureaucracy doesn't see us as individuals. They see charts. They see numbers. They see money. I've found tools that help me. Kratom, for instance, gives me relief when other FDA-approved medications fail me. But the board wants to ban it. Out of fear. Out of greed. Everyone can see it if they look closely this isn't about safety; it's about money and control. We get lost in red tape while people suffer. While we're told "just take this pill," there's no understanding that sometimes the right medicine isn't on a list. Sometimes it's a leaf, a plant, a method that isn't profitable. And if you can't pay, you fall through the cracks.i wish we cared more about the individual than the business, more about people than profit. I wish someone would see me not as a number but as a person struggling to live. Because right now, I have no options, and that's terrifying. A ban on kratom hurts me sends me back to Prison lose everything or go back on Street fentanyl. Take one pill lose everything. Meanwhile, you bureaucratsare getting rich off my death. I question why the push: makes no sense to live your pockets up. Everyone sees through this not public heath. Natural kratom safe you are corrupt bureaucrats

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats As a veteran who was left behind. I stand here as a professional who was told that my pain didn't matter unless it could be monetized by a pharmaceutical company. For too long, we have been told a lie. We have been told that our health belongs to the bureaucrats. We've been told that if a healing herb comes from the earth instead of a laboratory, it is 'dangerous.' They call it a 'controlled substance' because the one thing they can't control is a person who heals themselves. In the streets of Columbus, in the neighborhoods of Cleveland, and across this great nation, people are suffering. They are suffering from an affordability crisis that has turned healthcare into a luxury for the rich. They are suffering from an 'ibuprofen-only' policy that leaves men with Chronic pain in agony while the board members of these agencies collect their dividends. They want to ban it. They want to take a natural herb a miracle that has allowed veterans to reclaim their lives from PTSD and chronic pain and throw it in the same category as heroin. They call it 'science,' but we know the real science. We know that this plant is a partial agonist with a built-in safety ceiling. We know it doesn't stop your heart or your breath. It is biologically safer than the pills they push across their mahogany desks! This isn't about public health. This is about the bureaucratic wallet. It is a naked money grab to clear the field so they can sell us their synthetic, high-priced, side-effect-ridden alternatives. They look at a veteran sleeping on the street and they see a 'non-compliant' patient. We look at that same veteran and we see a hero who deserves the right to use a plant that works. the Board of Pharmacy, to the FDA, and to every unelected bureaucrat 'holding the paper' on our lives: We see you. We see the revolving door. We see the kickbacks. And we are here to tell you that your time is up. A new era of accountability is here. We are no longer asking for permission to be healthy. We are demanding the Kratom Consumer Protection Act. We are demanding regulation over prohibition. We are demanding that the 'common good' be returned to the common people! Natural Kratom is not a crime. It is a lifeline. It is a healing miracle. And we will not let you steal it from the people who need it most. Keep the leaf legal. Keep the people free!" By mentioning the partial agonist nature of the plant, you are highlighting that, unlike FDA-approved opioids, Kratom does not cause fatal respiratory depression. You are reminding the millions of listeners that Kratom avoids the β-arrestin-2 pathway, which is the biological "kill switch" in pharmaceutical narcotics.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	The public has watched for years as regulatory agencies and advisory boards repeatedly protect corporate profit while pretending to act in the name of public health. This proposed ban on natural kratom fits that pattern perfectly. You are not listening to the people most affected. Instead, you are advancing policies that align neatly with pharmaceutical interests interests that profit when safe, affordable, plant-based alternatives are removed from the market. That reality is impossible to ignore, and it is why your motives are being questioned so openly. Natural kratom has been used safely by millions of adults. It has helped people manage pain, stay off opioids, and remain functional members of their communities. If safety were your true concern, regulation would be the obvious path: product testing, labeling, age restrictions, and education. You have chosen prohibition instead. That choice speaks volumes. This does not look like public health. It looks like a money grab carried out by bureaucrats who do not live with the consequences of their decisions. It looks like policy written to protect funding streams, careers, and corporate partnerships while real people are treated as collateral damage. We are done being talked down to. We are done being told our lived experience is irrelevant. We are done pretending that bans save lives when history proves the opposite. You have lost public trust because you have earned that loss. Until transparency replaces backroom decision-making, until education replaces fear, and until people matter more than profits, opposition to this ban will only grow louder. L Natural kratom is not the problem. The problem is a system that keeps choosing money over people and expecting silence in return. That silence is over

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Generic Drug Scandal (1989): One of the largest criminal exposures where FDA officials were found to be accepting bribes (money and gifts) from generic drug companies to prioritize their applications. This led to multiple prison sentences and the "Debarment Act," which allows the FDA to ban individuals from the industry. Insider Trading (2016): An FDA chemist was sentenced to prison for using non-public information about drug approvals to make over $3.7 million in illegal stock trades. Data Falsification: In 2025 and early 2026, the Department of Justice (DOJ) ramped up "Clinical Trial Fraud" investigations, targeting companies that submitted falsified data to the FDA to gain approval. Institutional Capture & "The Revolving Door" Critics often point to "legalized" corruption, where the agency's independence is compromised by its financial ties to the companies it regulates: User Fees (PDUFA): Since 1992, drug companies pay "user fees" to the FDA to accelerate reviews. These fees now fund approximately 45% to 75% of the FDA's budget for human drug regulation, leading critics to argue that the "regulated has become the client." The Revolving Door: A significant number of FDA commissioners and high-level reviewers transition into high-paying executive or board roles at pharmaceutical companies immediately after leaving the agency. For example, former commissioners Scott Gottlieb and Stephen Hahn joined boards of Pfizer and Flagship Pioneering (Moderna's backer) shortly after their tenure. High-Profile Safety Failures & "Cover-up" Allegations Congressional investigations have occasionally "exposed" instances where the FDA ignored its own scientists' warnings: Vioxx (2004): The FDA was heavily criticized for ignoring internal data showing heart attack risks. An FDA whistleblower, Dr. David Graham, testified before the Senate that the agency was "incapable of protecting America" from unsafe drugs due to industry pressure. Aduhelm (2021): A "scathing" 18-month congressional report concluded the FDA's approval of the Alzheimer's drug Aduhelm was "rife with irregularities," noting that the agency collaborated inappropriately with the manufacturer (Biogen) despite its own advisory committee's nearly unanimous vote against it. Medical Device Surveillance (2010s): Whistleblowers at the FDA's device center (CDRH) alleged they were retaliated against for raising alarms about radiation risks in medical imaging devices. No one under 50 trust you guys or you option. DeWine so corrupt, we have no reason to believe you when you won't listen to studies or voices of Ohioans. You're going to hurt so many people. You will be removed in January

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	In Ohio, we grew up being told that marijuana was a Schedule I drug right there alongside heroin. No medical value. Highly addictive. Dangerous. That message wasn't just repeated; it was drilled into classrooms, courtrooms, and living rooms for decades. And for a long time, many people accepted it without question. Years later, it's clear that the drug war failed not quietly, but spectacularly. Marijuana did not destroy society. What did cause damage were mass arrests, ruined records, broken families, and a system more focused on punishment than public health. As states across the country legalized medical and recreational cannabis, the original claims collapsed under their own weight. A substance once portrayed as a societal poison was suddenly being taxed, regulated, and prescribed. That contradiction alone should make anyone stop and think. Instead of honest reflection, what followed was something else entirely misinformation, fear campaigns, and moving goalposts. Fear Over Facts… For decades, scare tactics replaced debate. Marijuana was framed as a "gateway drug," blamed for violence, laziness, and moral decay. When evidence didn't support those claims, new ones appeared. Social media amplified the confusion—half-truths, cherry-picked studies, and emotionally charged warnings spread faster than balanced discussion ever could. This wasn't about educating the public. It was about controlling the narrative. People weren't encouraged to ask questions. They were told what to think. COVID Changed How Many of Us See Authority…If COVID taught many of us anything, it's this: questioning the medical and pharmaceutical establishment isn't radical it's necessary. During the pandemic, guidance changed constantly. Policies contradicted one another. Pharmaceutical companies made historic profits while transparency often lagged behind. Dissenting voices even credentialed ones were dismissed or censored instead of debated. Whether someone agreed with every critique or not, the experience shattered the illusion that these systems are purely neutral, purely scientific, or purely benevolent. Once that curtain is pulled back, it's hard to ignore similar patterns elsewhere especially in drug policy. Big Pharma and Selective Legitimacy Cannabis remained illegal federally while opioids flooded communities legally. Highly addictive prescription drugs were marketed aggressively, approved rapidly, and defended relentlessly. Meanwhile, a plant with a growing body of evidence supporting medical use was demonized. That contradiction raises uncomfortable questions. Why are some substances accepted despite clear harm, while others are criminalized despite evidence of benefit? Who benefits from those decisions? And why does the answer so often point back to corporate influence rather than public well-being? This isn't anti-medicine. It's pro-accountability. The Problem With Closed Boards and Open Power In Ohio, many people view institutions like the Board of Pharmacy with deep skepticism and not without reason. When regulatory boards operate behind closed doors, dismiss public input, and consistently side with industry interests, trust erodes. People notice when patient voices are ignored. People notice when rules favor corporations over communities. People notice when debate is replaced with enforcement. Calling this corruption doesn't require believing in conspiracy it requires observing patterns. Honest Debate Was Never the Goal If drug policy were truly about public health, we would have seen open forums, transparent data, and genuine listening. Instead, we saw decades of

			enforcement-first policy, followed by reluctant reform only after public pressure became impossible to ignore. Cannabis legalization didn't happen because regulators suddenly changed their minds. It happened because people stopped believing the story they were told.Where We Are Now Ohio, like much of the country, is at a crossroads. The old narratives no longer work. The public is more informed, more skeptical, and less willing to accept authority without evidence. That doesn't mean rejecting science or medicine it means demanding better from them. Questioning systems that have failed isn't dangerous. Blindly trusting them is. The war on drugs failed. The misinformation failed. And the public is finally catching up to a truth that should have been acknowledged decades ago: policies built on fear, profit, and control will always collapse under scrutiny. The real question now is whether institutions are willing to listen or whether they'll keep pretending we don't see what's right in front of us.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Natural kratom safe I work a professional job I have a wife and kids. Why put me at risk of losing everything because bureaucrat with fake kratom madness. Not only are you ruining what got me off drugs but what would help others get off hard drugs. It's totally sad to see this fake panic by big pharmaceutical. If the people vote they allow it: even house sb29 is for regulated I left the right to tell me what medicine I can can't use. Great then I go get unrest products and could be laced. Regulate everybody see this as a cash grab DeWine Governor Ohio most corrupt governor in Ohio history. Yes because of cushy medical boards and fancy dinners god only knows the people get screwed again.. the Ohio way
Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I write with absolute disgust with the Board's recent move to classify natural mitragynine as a Schedule I controlled substance. This is a transparent, shameful power grab that has nothing to do with "public health" and everything to do with protecting the bottom line of Big Pharma. For years, thousands of law-abiding Ohioans have used natural kratom leaf as a safe, botanical alternative for pain management and wellness. We have seen the benefits firsthand. Yet, instead of following the science which even federal officials like RFK Jr. and the FDA Commissioner have recently clarified should focus on synthetic compounds… you have chosen to rubber-stamp a ban on the natural plant itself. Let's be clear about what is happening here: A Money Grab: By banning a natural, affordable plant, you are forcing citizens back into the arms of expensive, highly addictive pharmaceutical opioids. It is a win for drug companies and a devastating loss for the people. Ignoring the Science: You are ignoring the distinction between "pure leaf" and "synthetic extracts." Instead of regulating the market to ensure purity, you are choosing to criminalize consumers. Lack of Transparency: The speed and lack of scrutiny during these votes suggest that the decision was made long before the public was allowed to speak. "God only knows" what kind of influence-peddling is happening behind closed doors to prioritize corporate profits over the lives of suffering Ohioans. The people of Ohio are not blind. We see that while you claim to care about the "opioid crisis," you are actively removing one of the only tools people have to stay away from illicit street drugs and dangerous prescriptions. If this ban proceeds, you are not protecting us you are creating a black market and destroying small businesses. We are watching, and come January and beyond, there will be accountability for this betrayal of the public trust.

Worthington	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	What is happening with natural kratom in Ohio is nothing more than Reefer Madness 2.0. This state already lived through prohibition with marijuana where voters clearly wanted legalization, yet unelected bureaucrats dragged their feet, ignored the people, and clung to fear-based narratives. Now the exact same thing is happening with kratom. This is not about public health. It is about control, money, and bureaucrats protecting their own interests. Governor DeWine and the Board of Pharmacy continue to push a narrative rooted in panic and misinformation while refusing to engage honestly with statistics, peer-reviewed studies, or lived experience. Instead of evidence, we get urgency: "ban it now." That is textbook moral panic. Kratom has been in Ohio for over 20 years. It did not suddenly become a problem. What has become clear is that kratom threatens existing systems and profits. For thousands of Ohioans, kratom is a harm-reduction tool a safer alternative that has helped people manage pain, avoid relapse, and stay alive. Moderation is key. Education is key. Prohibition is not. Keeping kratom legal does not destroy businesses. It does not harm public safety. The only thing Ohio loses by banning kratom is people…people who will be pushed back toward far more dangerous substances or into the shadows. And for what? So unelected board members can exert power and protect financial interests? That reality is deeply disturbing. Lawmakers know this. If SB 299 were put to a fair vote without bureaucratic interference, it would pass. The problem is not the legislature or the public it is a regulatory body trapped in Reefer Madness thinking, refusing to evolve, refusing to listen, and refusing to tell the truth. We see through this. Ohioans are not buying the fear anymore. Stop the lies. Stop the panic. And stop repeating the same failed prohibition playbook under a new name.
Cleveland	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	This is just another avenue to control people. I wish free will was still a thing.
Columbus	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	the ongoing War on Drugs. It has failed my generation, and it has failed the public. We no longer want this war it does not protect public health, it does not make our communities safer, and it certainly does not serve the people. The reality is clear: decades of prohibition and heavy-handed enforcement have caused more harm than good. Communities have been devastated, families torn apart, and countless lives lost all while corruption and bureaucracy flourish. Those in power continue to pretend that harsh punishment is a solution, when in reality, the system prioritizes profit and control over health and safety. My generation sees this clearly. We demand policies that focus on harm reduction, education, and support for those struggling with substance use not imprisonment and fear. We will no longer accept the failures of outdated laws enforced by corrupt bureaucracies masquerading as public servants. The War on Drugs is over for us. If public health were truly the goal, the approach would have been evidence-based, compassionate, and science-driven from the start. It has never been. It is time to stop pretending otherwise and to finally pursue real solutions that respect human dignity and community well-being. Keep natural kratom legal

Chillicothe	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	MYTRAGYNINE HAS HELPED ALOT OF PEOPLE WHO NEEDED PAIN RELIEF OR HELP WITH MENTAL HEALTH. IT ALSO HELPS ALOT OF PEOPLE GET OFF OF HARD DRUGS AND STAY OFF THEM. IT IS MORE EFFECTIVE THEN SUBOXONE AT A FRACTION OF THE COST. THERE IS NO LEGITIMATE REASON TO BAN THIS, IT IS NOT HARMING ANYONE AND IT FEELS LIKE BIG PHARMA IS BEHIND THIS. BIG PHARMA ARE THE ONLY ONES THAT WILL BENEFIT FROM A BAN. PLEASE RECONSIDER AND LET CITIZENS HAVE A RIGHT TO CHOOSE. WEED IS LEGAL AFTER ALL. IF ANYTHING BRING IT TO A VOTE. THANK YOU
Elyria	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	This proposed rule is only coming into prominence because the state government doesn't make money off the sale of kratom. All of the “reasons” given in this rule to classify Kratom as a Schedule 1 substance apply to alcohol tenfold. Why isn’t alcohol a schedule 1 substance? Because of the state liquor TAX REVENUE. The “stakeholders” mentioned are the only ones who will benefit from this. Greed at its finest.
Lewis Center	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	The natural substance should not be facing this classification. The lab created compound is entirely different and the board of pharmacy should know that, as should the government. If they arent able to make that distinction they are either incompetent or corrupt and I'm guessing its the latter. Decisions like this ruin lives, but I'm certain those making this decision are well aware and don't care or are seeing some sort of financial gain - personal or political- from moving forward anyway. It will be remembered by many when elections come up. Not everyone with an interest is some former drug addict. There are professional, influential constituents involved and watching. This is one time you can make the compassionate choice, and also one that will ultimately bode well for future political careers.
Mount Vernon	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I am a productive member of society, holding a masters degree and earning a 6 figure income. I have been using kratom leaf for over a decade. You are trying to turn me into a felon with this proposed legislation - not only is it disappointing, but it's concerning. especially with the wild distrust of government going on today, I think it's more important than ever before that you make the right decision to keep kratom legal. show ohioans you listen and you care. plain kratom leaf should be LEGAL. it's not harming anyone and it improves my quality of life significantly. Kratom leaf has been used for centuries, possibly longer. It is safe and effective, and self-limiting. Please do not ban it. I trust that you will look at the scientific data on PLAIN LEAF and come to a sensible conclusion, such as age restrictions.
Middletown	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Clearly want to keep your constituents sick and in constant debt. Would rather have us on methadone and suboxone. Big pharma has to get theirs, right?

Cleveland	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	**Though it may appear somewhat lengthy, I ask you to please take just a few moments out of your day to read the following statement** We the people, as sovereign and responsible adults, should have the right to decide which medicines and treatment options work for us, and which ones do not for that matter. Kratom in its all natural, unadulterated form is a highly beneficial and efficacious plant medicine that truly helps to better the quality of life of so many adult people from all age groups and backgrounds. From those suffering with severe chronic pain, GI and nervous system disorders, anxiety and depression, and much more, to senior citizens with the whole myriad of debilitating health issues that come with old age, there is a great wealth of anecdotal evidence demonstrating natural kratom to be an impactful and highly effective management tool and a Godsend for so many. As is the case with any medicine or substance education, proper usage, and responsibility are the issues of importance to be addressed. A person can legally and quite readily procure more than enough alcohol to then go and give themself alcohol poisoning with. In the state of Ohio any adult may now purchase legal marijuana and, whether medicinally or recreationally, proceed to use it in any way they choose. And don't get me wrong, this is a good thing. Again, as responsible adults we should have the right and access to make these choices for ourselves. And likewise in this regard, natural kratom should be no exception. Medical marijuana does not work for everyone. Nor do pharmaceutical pills, and nor does kratom for that matter. Everyone's chemistry and health situation is different, which is why it's crucial to have different options and treatments available. I think that, just as is the case with alcohol, cannabis, tobacco, etc, the regulation of kratom, and Not the scheduling of, would be a step in the right direction. I would like to point out that regular natural kratom has no established LD-50 in humans, which essentially means there is no known overdose threshold. From a pharmacological perspective, alcohol is a more insidious and harmful substance. Anyone properly educated with kratom use and toxicology will know that if a person takes an excessive amount it simply acts as an emetic and is expelled from the system. When used properly and responsibly, kratom does not even get you "high". It cannot even come close in comparison to the effects of a small amount of cannabis, or a moderate amount of alcohol use. It pains me to say this and I truly hope it is not the case, but it almost appears as though there is an agenda to funnel more and more money towards marijuana dispensaries and squeeze out other natural alternative options. And as I discuss these matters with others in the community it has become clear that an increasing number of people share this belief. As residents it is imperative that we are able to have faith, trust, and confidence in our state elected officials and those in charge who are responsible for making decisions that impact us all. As aforementioned, we are all unique in our biochemistry and health, and so it is highly important, and should be an intrinsic right of every responsible, intelligent, and educated adult, to have the freedom of choice in the matter of taking charge of one's own health and wellbeing, and this implicitly includes available access to the treatment options that best suit each individual. And for a great many people here in the state of Ohio, this option is the kratom leaf, in its all natural and unadulterated form. I thank you very much for your time and consideration in this matter.

Piqua	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Kratom is impossible to OD on. Pharmaceutical companies want control and SHOULD NOT have involvement. They are a greed motivated organization. It's time for Ohio and the rest of the USA to stop micro managing citizens. If someone is too stupid to not abuse a plant, pill or ANYTHING put out OTC or script- then oh well. This idea that everyone must be saved is ridiculous. And you only hurt the people who are responsible individuals. Irresponsible parents destroyed those of us with debilitating diseases to find relief from pain. Kratom has provided some relief- so, of course, government has to step in. AND, fyi, no fatalities due to Kratom. Every case where Kratom is identified, the person had a pharmacy worth of drugs- any would have killed them. I've been taking Kratom for 20 years. Kratom causes vomiting if you take more than your body can handle. It's a fact. Stop allowing government involvement in natural remedies. Pharmacy board want to control something? How about you stop the sale and distribution of garbage vitamins-- no oversight there- it's full of metal, harmful particles and useless. Maybe focus on that. And that kills as well, just slowly AND no one gets relief from them so I can see why no one cares. Heaven forbid the citizens find relief and government not get a say or MONEY from it. Leave Kratom alone. If Ohio wants money, don't build a shitty stadium for e football and maybe use that money for infrastructure. But no, let's beat down a natural plant that does nothing but help. And btw- abuse is ridiculous. I've known 3 people who were able to GET OFF HEROIN using a regime with Kratom and are taking NOTHING and have turned there life around. No pharmaceutical can claim that. Go find something else to mess with.
Beavercreek	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	The fact that you are banning a natural substance but still allow alcohol sales, cigarettes, vapes, etc…is ridiculous. You would rather feed big Pharma than allow people to help themselves.
Cincinnati	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Classifying kratom as a schedule 1 narcotic is an ill thought out plan and will detrimentally impact thousands of people. Not only is this a blatant attempt at pharma to control its customer base but vilifying something that helps thousands of people on a daily basis is a gross misconduct of judicial processes. As a manager I have seen both sides of the “coin” when it comes to kratom but have personally seen more good come from it then bad. Reclassifying as a schedule 1 narcotic will not only negatively impact businesses state wide but will also negatively impact the people who use kratom as intended.
Mansfield	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Go ahead and legislate “gas station” kratom for that isn’t anything close to real Kratom. Has that crappy feeling of big pharmas hands are in this and DeWine has already messed with legislation on marijuana.
Cleveland	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	There should be responsible legislation for legal adults who want to use this plant. Why is it okay for companies to pay millions and billions in fines for oxy, and its still being abused but yet this plant does what oxy does and BETTER with less side effects when used correctly. Its shameful adults who have no experience with things are the ones to tell others "you cant do that". Its funny because if pharma wanted this legal, no state or federal rep would have an issue with this AT ALL. People who think they know best, dont know at all.

Uniontown	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	7oh kinda made sense. But leaf kratom is an insane to ban. It’s overstepping the line and trying to make everyone be dependent on big pharma if banned. People have a choice. If you ban this it will force so many citizens back into the arms of lethal and extremely deadly drugs or dependent on big pharma which you people love to do. Please stop overstepping and don’t do these unnecessary things to innocent people. What are you do next, ban the coffee bean? You over stepped with Covid, lockdowns, forced vaccination, and now a natural herbal product that helps Americans get along with their work days and elevates pain slightly and safely. You outta be ashamed of yourself dewine. We the people have had enough.
Pataskala	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Im shocked to hear DeWine is wanting to ban natural kratom. Does he know how useful and life-changing this natural plant is to people? I understand regulating the synthetic form, but banning a natural plant that is one of the few natural remedies that works for hundreds of thousands of people around the world is just plain evil! This must be a push from big pharma or someone who thinks they are losing money because of it. We in America are all sick and tired of greedy corporations regulating and restricting the well being and happiness of the common person! Im 43 and have had severe depression and anxiety my entire life. I've been on tens of different prescription medications and nothing has worked as well as kratom to ease my depression and anxiety. It has truly changed my life for the better! It has saved me by coming out of suicidal ideation several times. Kratom is harmless when taken in moderation as with most everything! I've had several medical professionals tell me it is harmless and safe compared to lab produced medications or other drugs and alcohol. As far as I've researched there is no evidence that kratom was wholly responsive for anyone's death. These cases are usually people with other hard drug issues or have taken contaminated or laced product. It should be lab tested and regulated but not banned! I've talked to many kratom users who credit it as being the best and only remedy in some cases for ptsd, depression, body aches and pain, and anxiety. I'm interested to see what else is involved in the "200 deaths" since 2019. There have been hundreds more deaths from manmade pharmaceuticals not to mention alcohol, cigarettes etc which remain legal. There is an agenda to fight natural medicine and it is truly sad that humanity has gotten to this point! Please do not ban NATURAL kratom in Ohio. Don't be part of the evil, greedy network of people who are afraid of missing out on a little profit due to a natural plant which is not cheap to obtain by the way. Kratom is changing lives for the better and there are so many thousands of Ohioans being helped which will lose hope if this ban passes. Thank you for listening. A concerned fellow Ohioan.
Lima	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Kratom should NEVER be illegal.its way safer than alcohol and actually helps people.quit taking everything good away.and leaving us with straight up man-made poisons.kratom is a gift from GOD.
Avon Lake	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Do not ban kratom. Just because the pharmaceutical companies don't have a peice of it. They want it banned. I've been taking kratom for years. Its all natural. Not like the pharmaceutical toxic, killer drugs they sell to people

Morrow	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	There is no reason to get rid of something that is helping people. Their have been NO OD's off of kratom the plant. We are giving away rights just so a pharmacy company can patent it and sell it. This has nothing to do with children, every place I've ever been requires a 21 ID. I have always been t
Galloway	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Hello, I have been taking kratom for a few years now, it has absolutely helped me in life by improving the quality of life, I am a normal well to do citizen, Ive been doing manual labor most of my 40 plus years and am still going strong, I'm not sure what the issue is with it, I know I've heard of stuff coming through which is why I became on board with aka to make sure it was unadulterated, I can't see being a normal citizen who utilizes kratom for its benefits to become a felon over night, I have kids and have been married for 22 years, me personally I have been thriving, of course For me God comes first, none the less please let freedom continue to stay free, and keep us free as we should be, God bless My name is Donnie branham, I am writing on behalf of all law a bidding citizens who utilize kratom as a tool to help improve the quality of our lifes, I have been doing manual labor for a very long time I am currently a plumber service technician, kratom has helped me leaps and bounds and benefits my life as long time laborer and make my life much easier, I can't possibly imagine that I would become an overnight criminal because I use a beneficial supplement, I thought we were going in a good direction as being a free people and not turning a supplement 100% natural gift god gave us to utilize and help us in our life's, to being classed as something similar to fentanyl or other similarly classes true harmful narcotics, it's starting to remind me of a new type of un almost dictated type of a prohibition and literally turning what were law abiding citizens into overnight felons, it should be an infringement on a free people and destroys the freedom of choice, not to mention all the lobbying on behalf of pharmaceuticals, I believe we as free informed citizens should be able to make our own informed citizens without being dictated to by immediately being deduced from regular citizens who are participating lawful citizens, half of anything I've read about it being dangerous doesn't have nothing to do kratom In its natural form, there are many things legal left up to the responsibility of who the consumer makes a choice that have severely worse consequences, I encourage you to left freedom reign and actually support its people or constitutients, such as cigarettes and other things, all it will do is make laws that do not support freedom and allow its people to be under dictates and harassment by legal agencies bring forth more harm than good, and I can't see an agency that is more like lording over people to make a decision we as humans should have the right to make, and we are all just as well informed these days as anyone in any institution, turning groups of people into criminals overnight should be against the law and supports more things similar to a small group of a few people to dictate over people who are not criminals, it would most definitely benefit a state system who has made an industry out of criminalizing people for things that are not crimes I can go more into I would encourage all to allow true peace and freedom reign

Zanesville	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I know it to be far less than scientific when it's a politically and financially motivated ban. We're just getting the doors open on cannabis and now they want to pretend we're in the early twentieth century by placing a ban on a botanical. Information, the power to medicate without going to the doctor, and our personal freedoms which include such things as learning a difficult lesson will always take precedent over the political and financial aims of the powers in house. It is only an image and not the actual people you are protecting. Self-preservation should take care of the people.
Cleveland	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I'm a parent, work a high demand tech job, and am active in all sorts of hobbies. I gave up alcohol 9 years ago because it was ruining my life. I quit everything else over the years as well. I accidentally found Kratom just under a year ago in a form of a tea. I felt great and it was nice to have something to help escape a little. Shortly after I read propaganda about Kratom being addictive, so I proceeded with caution. After 10 months of casual, intermittent use, I'd say it is less addictive than coffee imo, and way less addictive than cigarettes and alcohol, both of which are known killers. So if you are going to schedule natural Kratom and not schedule cigarettes and alcohol, you are all crooks. I'm pretty sure I already know the answer to this question unfortunately. We know what this is about. I've built systems for pharma companies and have worked at one. But guys, please consider keeping natural Kratom legal with age restrictions. Give a win for the little guys instead of the lobbyists for once. We don't need their SSRIs and painkillers.
Cleveland	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule I. Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment.
Brookville	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	Taking kratom away so big pharmacy can profit is wrong and the lobbying needs to stop. Politician have zero integrity anymore, it's time we elect those who are not to be bought!!!
Columbus	Ohio	2 - Oppose - Corruption/Bigger Interests at Play	You need to STOP changing your mind on all of this THC and Kradum, do you think it's bad for us but it's not if you use it right I wish you went after the alcohol industry in the smoking industry the way you're going after the THC and Kratom but they're also probably in your pocket so that explains a lot come election time I'm gonna remember all of this and I'm telling everybody thank you for the start on a new government.

Worthington	Ohio	2 - Oppose - Criminalizing Non-Violent Offenders is Not a Good Use of Resources	As a police officer, I'll say this plainly: the last thing we need is more people sitting in jail alongside violent criminals over misguided policies. Locking up people in pain or those trying to manage their lives is not public safety it's stupidity dressed up as enforcement. Using fear tactics and pushing "kratom madness" narratives only distracts from real threats. Our cities are dealing with shootings, assaults, trafficking, and repeat violent offenders. That's where law enforcement resources belong. When cops are pulled away from real criminals to harass or arrest nonviolent people, everyone loses—officers, communities, and victims alike. Policing should be about protecting the public, not punishing pain or turning health issues into crimes.
Brooklyn	Michigan	2 - Oppose - For Calm/Focus/Energy	I drink all natural Kratom without 7OH. They are great for focus, energy and calming depending on which one you drink. I enjoy them! Please do not ban all natural Kratom. I enjoy Kratom drinks that do not have 7OH ingredients. They have been great for focus, my mood and there is one for energy. I use Botanical Beverage Co drinks out of Cape Coral Florida. Love them! Please do not ban all natural Kratom.
Columbus	Ohio	2 - Oppose - For Calm/Focus/Energy	Alot of the products that are for sale in the convience stores/ vape shops etc have an addictive additive tonit. Kratom can be made from plant leaves. There ar e places that make it/ brew it and do not have the additives that have the potdntial for psychoactive effects. I have used kratom to relax and u wind from my day. No psychoactive effects, no addictions. alcohol has more effects on someone than kratom does. I stead of banning the entire thing- look at the variations. Much like beer vs liquor there are differences. Research those. Places like botanical brewing or kava cultures they do it right. Unlike other over the counter substances. Dont entirely ban because you don't understand it. Dont say because it may be addictive. Many things in life are addictive. Alcohol does more damage than kratom by far.
Cincinnati	Ohio	2 - Oppose - For Calm/Focus/Energy	It has help me get my energy back

Euclid	Ohio	2 - Oppose - For Calm/Focus/Energy	I'm a regular consumer of Kratom leaf powder - the unadulterated crushed leaf of the Kratom plant. Not only has Kratom had no negative side effects, but it has improved my quality of life. I use it primarily as a way of enhancing my focus and productivity. I would liken its effects to a slightly stronger version of caffeine. I can and have easily gone periods of weeks or months without consuming it. It does not create a level of addiction stronger than that of caffeine. Regular consumption has had no ill effects on my health. My most recent bloodwork came back perfect. Please consider banning only adulterated or synthetic kratom-adjacent substances. Please also consider instead adopting common-sense regulations - like requiring Kratom leaf powder to be legally purchasable adults of 21+ years of age. Also please consider requiring Kratom leaf powder products to be lab tested for heavy metals and other contaminants. I am a productive taxpayer. I've been consistently employed in a high-skill industry while I've been a consumer of Kratom. I've never so much as gotten a traffic ticket. Scheduling this substance only serves to criminalize a product that I enjoy and that enhances my quality of life. But I also fear that people in my situation, who are otherwise upstanding members of society, will be negatively affected by the proposed scheduling.
Columbus	Ohio	2 - Oppose - For Calm/Focus/Energy	I am against the ban on Kratom. For me it increases my alertness, sociability, and physical energy, similar to caffeine. I see the government banning this only to turn around and let big pharma control and sell it at a higher price. We should be focusing on other things like bringing prices down for consumers.
Oregon	Ohio	2 - Oppose - For Calm/Focus/Energy	I have been using kratom for the past five years. I work swing shifts and am on call for all hours of the day 5-6days a week. Kratom has helped me keep alert and focused while working and helps me avoid energy drinks that have been proven to be harmful. Kratom has also helped with inflammation and pain as a result of my physically demanding job. Kratom has allowed me to stay away from opioid pain medication and NSAIDs that also been proven to be harmful with chronic and long term use.
Akron	Ohio	2 - Oppose - For Calm/Focus/Energy	Kratom in the natural leaf form has helped me considerably over the past six years to live more fully, run my own handyman business and especially to stay away from much more harmful drugs and alcohol. A small amount of kratom per day helps to keep me to stay motivated and move forward in this life. I do not take it to get "high" but to just give me a boost to tackle the day's tasks and that's exactly how it works for me and I'm extremely appreciative I found out about it. I would have to go back to trying antidepressants and antianxiety pills (which do not help half as much and are more addictive in my experience) if kratom was made unavailable in Ohio.
Cleveland	Ohio	2 - Oppose - General Opposition, No Reasons Given	Grown man should be able to take it if they choose to
Greenfield	Ohio	2 - Oppose - General Opposition, No Reasons Given	I would not like to see Kratom ban or criminalize it help with a lot of different issues Kratom is helpful not harmful
Zanesville	Ohio	2 - Oppose - General Opposition, No Reasons Given	Oppose ban. Keep plain leaf legal.
Dayton	Ohio	2 - Oppose - General Opposition, No Reasons Given	Kratom has helped someone I care about function daily and without he would not be able to

Akron	Ohio	2 - Oppose - General Opposition, No Reasons Given	I know a handful of people who use kratom medicinally and have done so for years, and have experienced zero negative effects. It should not be illegal, especially when cigarettes and alcohol are still legal, which cause far worse health concerns in our society, including death.
Akron	Ohio	2 - Oppose - General Opposition, No Reasons Given	I do not support any ban on the natural form of kratom. I have safely had it in my regime for over a decade with zero issues or concerns. I agree that the awful extracts that are sold and marketed for wrong reasons do not have a place in the natural market, but those should not have a decisive matter in raw form plant matter kratom. Prohibition is the not the solution for kratom, it is completely unjustified and should not be considered.
Mentor	Ohio	2 - Oppose - General Opposition, No Reasons Given	Mitragynine has assisted me greatly. To make this plant illegal would be a huge mistake.
Columbus	Ohio	2 - Oppose - General Opposition, No Reasons Given	Kratom saved my life and using became a outstanding citizen.
Muncie	Indiana	2 - Oppose - General Opposition, No Reasons Given	The State Of Ohio Needs To Let Kratom Be Able To Purchase. There's Been Soooooo Many People Who Are Getting Help From This Herb. Over All The Years Of This Plant And Your Wanting To Take Off The Market. With Many Wanting A Natural Way To Help With What They Choose To Take This For.
Detroit	Michigan	2 - Oppose - General Opposition, No Reasons Given	As a consumer of kratom I feel that it should remain legal on this state. I also believe that we need to study this plant for medical properties.
Worthington	Ohio	2 - Oppose - General Opposition, No Reasons Given	We stand at a crossroads where the health of our people is under siege. For too long, we have allowed ourselves to become dependent on the synthetic concoctions of international laboratories chemicals designed not to heal, but to weaken the resolve and the spirit of the worker! Strength does not come from a pill forged in a factory. True vitality is drawn from the very soil of the earth. We must return to the natural order! Natural kratom grows in the wild, untouched by the corrupting hands of modern industry: Kratom. It is an Herb of the People: It belongs to the laborer, the soldier, and the farmer. It is a Tool for Endurance: To build a great nation, we require a population that is tireless, focused, and free from the shackles of synthetic lethality. By embracing the botanical gifts of the natural world, we break the chains of dependence on foreign pharmaceutical cartels that seek to profit from our infirmity. We shall not tolerate a populace that is sedated and broken. We demand a citizenry that is sharp, energetic, and resilient. If the earth provides a means to soothe the aching muscle and steady the weary mind without the rot of modern opioids, then it is our duty our biological necessity to defend it. Let the weak rely on their chemicals. We shall rely on the strength of the soil and the purity of nature. We will protect the right to this natural resource, for a strong people is a healthy people, and a healthy people is an invincible people! Nature has given us the weapon. It is up to us to use it for the glory of our future! Thank you
Cleveland	Ohio	2 - Oppose - General Opposition, No Reasons Given	Powder Kratom is not the problem. Please keep powder Keaton legal and available it literally saved my life.

Cleveland	Ohio	2 - Oppose - General Opposition, No Reasons Given	I submit this comment today, 1/25/2025, in opposition to the proposed rule to place mitragynine ('kratom') into Schedule I. Scheduling mitragynine as a controlled substance would effectively ban it without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment.
Cleveland	Ohio	2 - Oppose - General Opposition, No Reasons Given	Please consider if you decide to make Kratom illegal we the voters will make sure next election we will be looking for new leaders.
Columbus	Ohio	2 - Oppose - General Opposition, No Reasons Given	Why isn't alcohol not banned?
Columbus	Ohio	2 - Oppose - General Opposition, No Reasons Given	Kratom powder has helped a lot for many years. I never got addicted to it.
Columbus	Ohio	2 - Oppose - General Opposition, No Reasons Given	Kratom has literally saved my life
Columbus	Ohio	2 - Oppose - General Opposition, No Reasons Given	Leave natural kratom alone. The people law markers are against you
Columbus	Ohio	2 - Oppose - General Opposition, No Reasons Given	Keep natural kratom legal
Struthers	Ohio	2 - Oppose - General Opposition, No Reasons Given	Please! I am begging you, do not do this. Natural kratom has saved my life, and helped thousands of others. If you ban natural kratom you will destroy good people's lives. Natural kratom has been legal in ohio for decades with no issues it is only the lab made synthetic offerings that are problematic. Please have a heart, and follow science and logic. DO NOT BAN NATURAL KRATOM!!!!!
Akron	Ohio	2 - Oppose - General Opposition, No Reasons Given	I am writing to Oppose the Classification of Mitragynine as a Schedule I Controlled Substance.
Columbus	Ohio	2 - Oppose - General Opposition, No Reasons Given	Kratom should NOT be classified as Schedule 1! You will be hurting more people than you help!
Elyria	Ohio	2 - Oppose - General Opposition, No Reasons Given	Shouldn't be illegal, no different than alcohol in my opinion
Cincinnati	Ohio	2 - Oppose - General Opposition, No Reasons Given	I do not agree with banning kratom in Ohio
Cleveland	Ohio	2 - Oppose - General Opposition, No Reasons Given	Please dont ban this life saving herb. It is a vital part of my health routine and many others.
Cleveland	Ohio	2 - Oppose - General Opposition, No Reasons Given	I am against banishment of natural kratom
Cincinnati	Ohio	2 - Oppose - General Opposition, No Reasons Given	I find it ridiculous that a completely natural leaf will be banned because it contains the alkaloid of mitragynine. I disagree with this rule and am completely opposed to it.
Cincinnati	Ohio	2 - Oppose - General Opposition, No Reasons Given	I believe that the non synthetic forms of kratom should not be illegal. There are people that this leaf helps live better daily lives .
Hilliard	Ohio	2 - Oppose - General Opposition, No Reasons Given	Against the ban if natural Kratom
Franklin	Kentucky	2 - Oppose - General Opposition, No Reasons Given	Do not eliminate

Bridgeville	Pennsylvania	2 - Oppose - General Opposition, No Reasons Given	The natural Kratom is made by God. Leave it alone. Banning anything that is not natural makes sense.
Wapakoneta	Ohio	2 - Oppose - General Opposition, No Reasons Given	Kratom is leaf form is not harmful. Don't not ban.
Lancaster	Ohio	2 - Oppose - General Opposition, No Reasons Given	It natural please banned Keaton leaf
Columbus	Ohio	2 - Oppose - General Opposition, No Reasons Given	I think this is a wonderful product and has helped me on a daily basis
Youngstown	Ohio	2 - Oppose - General Opposition, No Reasons Given	keep kratom legal
Mars	Pennsylvania	2 - Oppose - General Opposition, No Reasons Given	Ohio should not ban Kratom products.
Dayton	Ohio	2 - Oppose - General Opposition, No Reasons Given	There should be no regulations on this product other than it needs to be sold to adults. Other than that, keep your regulations off what I put into my body!
Eaton	Ohio	2 - Oppose - General Opposition, No Reasons Given	I think natural kratom is a positive thing and has been overall beneficial as it exists and needs no changes
Dallas	Pennsylvania	2 - Oppose - General Opposition, No Reasons Given	Ask that the board oppose the acts that declare kratom and its alkaloids as unlawful or restricted. Appreciate taking this comment and reading this and other comments. s s s s
Hamilton	Ohio	2 - Oppose - General Opposition, No Reasons Given	Im voting no on the ban
Brunswick	Ohio	2 - Oppose - General Opposition, No Reasons Given	Please dont include natural raw leaf kratom in any bans or laws, i agree synthesized variants are wrong and usually bad
Muncie	Indiana	2 - Oppose - General Opposition, No Reasons Given	Kratom has helped so many. We are not criminals. We are parents. We are veterans. We are husbands. We contribute positively to our communities. Please consider the science. Kratom users are not criminals. This plant has helped improve the lives of so many who in the past have struggled.
Pikeville	Kentucky	2 - Oppose - General Opposition, No Reasons Given	I think kratom is a great plant and should be legal. It has helped a great deal of people.
Pittsburgh	Pennsylvania	2 - Oppose - General Opposition, No Reasons Given	This should not be a schedule 1 drug. This helps people and is natural just like Marijuana..
Temperance	Michigan	2 - Oppose - General Opposition, No Reasons Given	I would like natural kratom in powder form to remain legal in ohio. I use it every day like tea. It is only dangerous in its synthetic forms (like 7-oh). I just use a teaspoon of powder a day.
Temperance	Michigan	2 - Oppose - General Opposition, No Reasons Given	Please reconsider the ban on natural kratom. We fully support the ban on synthetics.
Pittsburgh	Pennsylvania	2 - Oppose - General Opposition, No Reasons Given	To make Kratom illegal is Beyond Ridiculous, it's a plant/tree just like Marijuana. It helps thousands of ppl everyday! Concentrates are one thing, but the regular leaf is another. You want to ban something, ban ALCHOHOL! Something that ruins ppls lives Everyday!
Xenia	Ohio	2 - Oppose - General Opposition, No Reasons Given	Kratom saved my life

Portsmouth	Ohio	2 - Oppose - General Opposition, No Reasons Given	I do not agree with this proposed rule. Keeping synthetic (7-OH) is fine enough. Proposing a ban to schedule all kratom, the powder will anger a lot of people. Natural plain leaf kratom helps people. I do not agree with this rule.
Reynoldsburg	Ohio	2 - Oppose - General Opposition, No Reasons Given	This is a helpful leaf in natural form. I believe this should be legal.
Lima	Ohio	2 - Oppose - General Opposition, No Reasons Given	I have been supplementing on and off with this plant For almost 12 years. I am a nurse. I am a mother. I take pride in both I have been a mother since 1998 and I have started supplementing with kratom almost 12 years ago.
Logan	Ohio	2 - Oppose - General Opposition, No Reasons Given	I oppose a full ban on plain leaf kratom. I had been an Ohio consumer of plain leaf for 7 years.
Akron	Ohio	2 - Oppose - General Opposition, No Reasons Given	I believe anyone who is trying to help the people they love are great. Kratom, one thing most people accept. We exist.
Columbus	Ohio	2 - Oppose - General Opposition, No Reasons Given	Kratom is essential to the well being of some american's and is a large help to many
Bellevue	Ohio	2 - Oppose - General Opposition, No Reasons Given	Every single reason you want to ban kratom could be said for alcohol and in my opinion alcohol is far more dangerous and damaging to the body. This proposed ban makes absolutely no sense to me and in my opinion will do more harm than good.
Painesville	Ohio	2 - Oppose - General Opposition, No Reasons Given	Should not have to regulate a natural substance that grows from the ground
Greenfield	Ohio	2 - Oppose - Losing Business	Leaf Kratom is not bad I been using it for years not only people are loosing their business and their money that they have put into their business maybe their homes that borrow money on to start their business
Cleveland	Ohio	2 - Oppose - Losing Business	I am not trying to say that Kratum can not become addictive to people, but the amount served in drinks at bars for Kava and Kratum is not enough for a person to overdose. Having it served in bar style places has brought many people together that do not want to have alcohol. Having all of the bars open that sell alcohol is much more harmful in the end.
Columbus	Ohio	2 - Oppose - Losing Business	I don't see how out right banning this is going to do any good, as someone that works in a tobacco shop most of my kratom users are elderly people that don't abuse it but find help in it and taking it away from them could be detrimental to them.
Dayton	Ohio	2 - Oppose - Losing Business	I have been using Kratom for 6 years I had no problem not only the people losing their business and maybe their home the people losing theirs jobs and don’t look good for republicans in the midterms not voting for republican again because of you
Columbus	Ohio	2 - Oppose - Losing Business	Please keep natural kratom legal. I am a business owner located in Reynoldsburg. I have both carpal tunnel syndrome and arthritis for years I tried pharmaceutical solutions that never worked. Kratom is the first thing I have ever found that manages my symptoms without harmful side effects. I have been using it for the last 5 years and would have to close my business and never work again if I couldn't use Kratom every day. I'm a pet groomer and my hands do not work without it. Please keep it leagal . I also personally know someone who was able to quit a 20 year alcohol addiction with the aid of Kratom and they had tried everything before Kratom was the only thing that helped.

Milford	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	This product is extremely useful for people who need just a little relief or a little energy. I have used this product for years off on. I see no reason it shouldn't be sold to individuals. I feel no addiction or side effects.
Cleveland	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	I suffer from several different conditions some diagnosed and others I refuse to speak about because of how I was raised. Kratom has given me relief in its different forms. It doesn't impair me in any way other than its intended purpose. I have drank alcohol even before I was legal and can state that I never feel the way any alcoholic beverages would make me feel when I consume kratom. Banning it would be unfair when alcohol,behich impairs the mindd and senses is available in just about every store in this country.
Cleveland	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom is safe and should not be banned. I've have nothing but positive experiences
Lancaster	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Keep the powder legal. It helps many!!!!! Please keep powder kratom legal! I have used it for years. I have seen the stories on local news, and I will just say they are misleading. I it is safe and useful. I know many people who use to daily and have never had any issues.
Elyria	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	I don't understand why you make this illegal. It has many benefits. It requires responsible use, but that's normal like many other things.
Elyria	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom when used as directed is perfectly harmless.
Elyria	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Natural kratom is a harmless herbal tea. I drink it regularly without any adverse side effects.
Cincinnati	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	The use of Kratom products has helped so many people and restricting it could have a negative impact on the people who are Currently using it for its many health benifits. Thank you
Lebanon	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom has helped me so much in the last 8 years i've had not one single negative side effect and it's only brought positive results to my life
West Chester	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	There is no reason to make Kratom illegal in Ohio. It has legitimate benefits for users. Alcohol and Tobacco have no health benefits and significantly more dangers to their use. Ohio has zero intentions of making Alcohol and Tobacco illegal so on what grounds is Kratom being made illegal for? This is absolutely hypocritical for such a law to be passed. Please use reason and common sense, do not go through with this ban.

West Chester	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Banning kratom will do nothing but harm the state of Ohio. People suffering from their chronic pain or addictions to alcohol or opiates will suffer again. Needless suffering over a plant that in every case of death, was NOT the sole thing in their system. The fact that there is an anecdotal, nameless reddit post cited as evidence for this rule is ridiculous but even in that post, it backs up what I claimed before. For the past decade in Ohio there have been no issues with kratom, only with the advent of smokable kratom extracts would I say that it might need regulated, which it was. Non-extract kratom products on their own are NOT dangerous, even when used irresponsibly, I'd argue. There are no deadly or permanent effects from an "overdose" from kratom powder. The body simply expels it through vomiting and moves on, feeling normal after a couple hours. You will be pushing law-abiding citizens into finding alternatives for something that is safe and legal, and has been for a very long time. Maybe some research and guidelines for consumption on packages might be a compromise? There are plenty of people out there that would be willing to help. My name is James, I've been consuming kratom powder for over a decade now for chronic pain that doctors will not prescribe me anything for. I have IBD, Crohn's specifically, which they use as reasoning not to. I have zero adverse side effects after many years and tests. I know personally several people that have utilized kratom powders to get themselves off of alcohol and hard drugs, directly saving their lives. It's anecdotal, but if reddit posts are being included in the "evidence" to enact this legislation then I'd say you'd have to accept my word as well. Kratom powder is no more deadly than marijuana which is recreationally legal in Ohio as well. Every case of death related to these plants is a polypharmacy situation, the plant is not the only thing in their system. The reddit post that's referenced even backs this up. There is no overdosing on kratom powder the way people think, you simply vomit and feel normal after a couple of hours. This policy will either create real addicts or criminals of law abiding citizens as they have to find alternatives for their chronic pain or live in it. We are not addicts, we are not dependent, we are normal people who have found a tool to fix our chronic pain or real addictions. One that has no downside when used responsibly. I urge you not to create criminals of normal citizens. Thank you. I’m in my 50s and an upstanding member of society. I have been a contractor all my life. It’s physically demanding work. Throughout my like I have tried Tylenol, ibuprofen and nothing would help, had a (so-called) friend offer me something else (Vicodin), it helped so I started getting that and it wasn’t long till I saw myself searching it out and ended up weening myself off of it. I then heard about Kratom powder, I looked into it alot and decided to give it a try. I have been taking kratom now for what seems like 8-10 years. It does exactly what I need it to do, it helps with my everyday aches and pains but it does not cover up the pain such as Vicodin and Percocet does. I have never raised my dose I’m able to go about my life and live still without always hurting. Kraytom powder is an all natural product kind of like marijuana that is now legal in Ohio. If you take the time and look at these so called deaths that they want

			to blame on kraytom, they need to look a little deeper at what these people had in their systems. It's always been a polypharmacy situation meaning that they had multiple things in their systems. If they make kraytom an illegal substance we are going to have people looking for things and when they find them we are likely to have more deaths from people,good law abiding tax paying citizens finding things out there that are laced with god knows what and end up passing away because some people want to make this illegal. Please think about what you are trying to do and get all the facts before over reacting and end up hurting a lot of people. I agree with getting rid of the extract but NOT the powder. Also just a side note, since I have been taking kraytom powder I have actually lowered my dose since the first time I had taken kraytom.
Cleveland	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom is amazing supplement that helped a lot of people live their better life. It improved health benefits such as sleep, muscle relief, digestive issues etc. Big Pharma wants to control it to use it only under their financial system that benefits them only. We should not let this happened.
Barberton	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	This is not addicting! Has helped me continue to work and thrive. No side effects like the ones from pharmaceuticals! Please leave it alone.

Columbus	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	I have been a regular kratom user for the last eight years. It has made a huge difference in my life, all in healthy and constructive ways. I respectfully advise against any blanket ban of naturally grown kratom, as it would have a seriously adverse impact on many responsible users, including myself.
Kent	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Please understand this is a natural alternative to pharmaceuticals that many people tolerate much better and therefore can save many lives. Please don't take this away from the many of us that benefit from it's use.
Bellefontaine	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom is not a harmful thing. Never has any harmed me. Way safer than alcohol & nicotine
Salem	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom in its natural unadulterated form is incredibly helpful and NOT harmful.
Bellefontaine	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom has helped so many people with so many things. I have been utilizing kratom for quite a few years now for many different things. I have had no problems whatsoever with utilizing this natural plant. Please don't take away the people's freedom of choice to have access to this NATURAL PLANT. Thank you
Tiffin	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Its harmless plus helpful leave it be
North Canton	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	PURE NATURAL KRATOM SHOULD NOT BE BANNED. IT IS VERY BENEFICIAL WHEN USED RESPONSIBLY. PLEASE DO NOT BAN KRATOM IN ITS NATURAL FORM. THANK YOU
Xenia	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom helps me through day to day life. I have friends that are Dr's that love and promote Kratom. Kratom is safe when its natural. I've been taking it since 2016 with 0 health issues. Please do not ban this wonderful plant 🙏.
Columbus	Ohio	2 - Oppose - No Side Effects/Positive Health Benefits	As a Kratom consumer for nearly 20 years without issue I implore the board to abide by the FDAs recommendation not to ban Kratom. This plant has saved my life in more ways than one and it has greatly helped several people that I know. I have never experienced any health issues using this plant nor do I know of anyone who has. I've done a great deal of research into Kratom and the scientific evidence is clear. Both the FDA and WHO are in agreement on this and so I would kindly ask you to reconsider this proposed ban. Thank you.
Cleveland	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	This is a purely organic plant that does not cause side effects. The ban of this will only increase illegal drug use and crime

Cleveland	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	Hello, I am writing to ask the Board not to schedule or ban natural kratom leaf. I want to explain why this matters to me personally, and why I believe an outright ban would have unintended consequences for responsible adults. I use natural kratom leaf occasionally and responsibly. I do not use synthetic or chemically altered products, and I do not use kratom to become impaired. For me, it has simply been something that supports my overall well-being and helps me stay productive and functional in daily life. I am employed, I am a parent, and I contribute to my community. My use of natural kratom leaf has never caused safety issues, impairment, or problems with my responsibilities. It has been something I use in moderation and with intention. If natural kratom leaf is banned or scheduled, people like me would be affected despite using it safely and responsibly. Banning a product like this does not eliminate use. It removes access to regulated products and pushes people toward unregulated sources, where there is no testing, no labeling, and no consumer protections. That creates more risk, not less. I support reasonable regulation, including age limits, product testing, accurate labeling, and enforcement against adulterated or synthetic products. I also believe there should be a clear distinction between natural kratom leaf and chemically modified or highly concentrated substances. Treating all of these products the same does not reflect how they are actually used or the differences in risk. I respectfully ask the Board to consider regulation focused on safety and responsibility rather than prohibition. Thank you!
Cleveland	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	As a healthcare provider, I am aware of the benefits and sense of control over their symptom management that patients experience when having the option to utilize this product. I foresee a dramatic increase in 'seeking behavior', and use of alternative means in order to achieve relief, should Ohio proceed with this legal action.

Columbus	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	I am currently someone who is currently unhoused in East Cleveland. I am not a policy expert or a lobbyist. I am someone living the consequences of the decisions you are considering, and I need you to understand what banning kratom would actually do on the ground. If kratom is taken away, people like me are left with no safe options. I live with severe medical issues. My legs have necrosis. They are badly infected. I can barely move most days. Just getting medical care requires jumping through endless hoops appointments, transportation, paperwork, approvals things that are nearly impossible when you are homeless and in constant pain. A simple box of medical supplies can take weeks or months to obtain. Why the The injuries to stop the sickness. Kratom has been one of the few things that helped me function without risking my life. It allowed me to manage pain and get through the day without turning back to substances that nearly killed me before. When I was using kratom, I was safer. I was more stable. I was not overdosing. I was not committing crimes. I was surviving. If you take kratom away, the reality is not abstinence it is desperation. It means people will turn back to the streets, to dangerous drugs of unknown potency, to substances that can and do kill people every day. That is not hypothetical. That is what happens in cities like East Cleveland when harm-reduction tools are removed. A kratom ban will not clean up our city. It will not reduce harm. It will increase overdoses, increase emergency room visits, and increase suffering among people who already have nothing. It will push the poorest and sickest residents into even more dangerous situations.i am not asking for special treatment. I am asking you to not take away the one thing that has helped keep me alive. Please understand this: for people like me, kratom is not about getting high. It is about staying alive long enough to maybe get help. Banning it will not protect public health it will destroy what little stability some of us have left. I am begging you to consider the real human cost of this decision, especially in communities like East Cleveland. Do not make survival harder than it already is. Respectfully, A Resident of East Cleveland Someone Who Is Still Here Because of Kratom

Columbus	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	I am writing to express my strong opposition to the proposed ban on Kratom (Mitragyna speciosa), a naturally occurring plant that has become a vital resource for many Ohioans, including myself. For individuals like me, who rely on Kratom to manage chronic pain and mental health conditions such as depression and anxiety, this ban would cause significant harm. Kratom has been used safely for centuries in traditional medicine, providing essential relief to countless people. Its properties are not unlike those of coffee, another natural plant with psychoactive effects. In fact, Kratom belongs to the same plant family as coffee (Rubiaceae). Banning Kratom would be a drastic and unfounded action, comparable to outlawing coffee, and would disregard both scientific understanding and individual rights. This proposed ban is not only anti-science but also unconstitutional. Americans, and Ohioans in particular, have the right to self-medicate with plant-based substances that can improve their well-being. Such a ban directly contradicts the freedoms that are central to our country's values. Additionally, prohibiting Kratom would likely drive the market underground, creating an unregulated black market where safety standards would be compromised. Ohioans would continue to use Kratom regardless of its legal status, but we would far prefer to do so in a regulated and legal environment that ensures both safety and quality. I urge you to reconsider this proposal, as it goes against the interests of Ohio citizens and the fundamental freedoms that we hold dear.
Elyria	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	I strongly oppose banning natural kratom in Ohio. Kratom is NOT the same as pharmaceutical opioids and does not carry the same risk. You can't overdose on Kratom, the only over doses recorded are when mixed with other legal/non-legal medicines/drugs. Banning it will not take away the demand and thus will push people who take it to go toward unsafe and unregulated markets and increase harm. There will be an uptick of people who choose street drugs over this and thus overdose and create more harmful drugs in our state instead of this non-harmful substance. Please choose HARM REDUCTION- age limit (21, just like alcohol which kills more people per month than kratom ever could!), lab testing and labeling, and ban the synthetics but if it's a kratom alkaloid then allow it with proper lab testing. Responsible regulation is what will protect public health. Prohibition will do the opposite. If you want to prohibit something, prohibit alcohol!!
Cincinnati	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	Please do not ban kratom. If responsibly consumed it can be used safely and is much safer then stronger proscription pain medications. Prohibition of kratom will potentially cause more harm as many users may seek dangerous alternatives. Kratom is very safe when used properly. Prohibition will prevent researchers from potentially creating safe and effective treatments for many conditions.

Cincinnati	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	The proposed scheduling of natural kratom would be an irresponsible and uninformed decision on the part of Ohio. It would lead to far more addictions and relapses to serious drugs, and damage the well being and quality of life for those who rely on it for chronic pain, insomnia, and a host of other problems - it solves these problems for those law abiding Ohioans. Taking kratom is a personal choice. There are risks to any substance (and I use this word loosely); the Board is seriously misrepresting the danger of this extremely safe (if used responsibly) plant. Scheduling mitragynine would directly harm Ohioans. It is as simple as that.
Cleveland	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	I have used kratom for 12 years. I can verify that on its own, there is no risk of overdose or death if used on its own. By the nature of it, taking too much will cause a vomiting response in even the most seasoned of users. When taken with SSRIs as I found out, the effects are amplified a bit, but that is all. A simple warning on the label would remedy this. Unlike alcohol and marijuana which are legal and not in danger of being classified on the same level as crack cocaine, meth, and heroin - someone who has taken even a large dose of kratom is in no way impaired. Decision making, motor skills, and inhibitions stay securely intact. If anything, your brain is more sharp than normal, but only slightly. The worst that can happen is you get sleepy from a large dose, but more likely, you complete your work faster and more accurately with a better attitude at a small dose. It will be a mistake to criminalize natural leaf kratom. Many people will seek alternatives that actually are dangerous and which cannot be regulated for content/age allowed for purchase.

Lakewood	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	I am an Ohio resident and longtime kratom user. I appreciate this opportunity to submit public comment on the Ohio Board of Pharmacy's recent vote to schedule natural kratom (mitragynine) as a Schedule I controlled substance. I have used kratom responsibly and periodically for several years, exclusively in its natural leaf form with no ill effects. I am not alone — tens of thousands of Ohioans use kratom safely, and many rely on it as a lower-risk alternative to opioids and other pharmaceuticals. I believe banning natural kratom is an overreach of government authority and not supported by credible scientific evidence regarding harm potential. Labeling a plant that many adults use safely as a Schedule I substance would undermine Ohio's tradition of reasonable, science-based regulation. It is worth comparing the data on other substances widely recognized as legal and regulated: • Alcohol — a legal and regulated substance — contributes to a significant number of preventable deaths. Excessive alcohol use is associated with approximately 178,000 deaths annually in the United States and is linked with many alcohol-related health issues such as liver disease and accidents (CDC). https://www.cdc.gov/alcohol/fact-sheets/states/excessive-alcohol-use-united-states.html • The rate of alcohol-related deaths in Ohio has been historically high and increasing over the past decade, reflecting a clear public health burden. https://www.healthpolicyohio.org/health-policy-news/2025/04/18/graphic-of-the-week-alcohol-awareness-month By contrast, kratom has not been shown to cause similar patterns of overdose or mortality when used in its natural leaf form. The risk profile of kratom is substantially lower than that of alcohol, and most reported fatalities involving kratom occur in polysubstance use scenarios, not kratom alone. Scheduling natural kratom alongside drugs such as heroin or fentanyl under Schedule I is disproportionate, particularly given that kratom's potential harms are significantly lower than substances that remain legal for adults (such as alcohol and tobacco). A ban would push responsible consumers into illegal markets or cause unnecessary strain on users who currently use it safely. I respectfully urge the Board and reviewing committees to reject permanent scheduling of natural kratom as a Schedule I drug, and instead consider regulatory or consumer-protection approaches that preserve safe access while targeting only the substances that pose significant public health risk. Thank you for your time and consideration.
Cincinnati	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	I have a simple comment about this proposal. Should you decide to make all kratom illegal, you will directly be sending good people into the black market where many will ultimately die from using contaminated opioids. Many kratom users have never even used illicit opioids, which makes them especially vulnerable to the physical dangers of fentanyl. I believe the Ohio Board of Pharmacy is populated with good people who want the best for Ohioans. Prohibiting kratom will have the opposite effect!

Toledo	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	This ban would send more Ohioans to the black market, which may lead to death, since this plant was a benign tool to stay away from laced street drugs. There's a scientific difference between concentrated 7oh and the plant itself. Conflating the two is like saying light beer that's around 3% alcohol is the same as 35% alcohol vodka. It's also like saying an apple is cyanide because it's a small portion of it's seeds. If it was concentrated in the Apple, it would be a different thing. The damage this would cause to Ohioans and toxicity statistics from street drugs they'll turn to is not a good look for the state. This is the best way I can put things from research and experience.
Milford	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	Kratom is a NATURAL product that has done a lot of good for many people. Banning this will do nothing but increase illegal options & possibly create SYNTHETIC options.
Ambridge	Pennsylvania	2 - Oppose - Pushes People to Unregulated Alternatives	I work with individuals from Ohio and grew up in Wheeling on the border so this hit close(enough) to home. I believe with my whole heart that banning Kratom plain leaf will do more harm than good. I believe responsible adults should be allowed to use it, if they want. It helps millions around the country. Banning plain leaf Kratom in Ohio will cause many to resort back to street drugs.
Cincinnati	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	Banning natural Kratom is a reactive decision not based on science or knowledge. It's not dangerous in any way and there is no harm from it. We can't start banning natural plants just because you don't understand it and are going off of rumors and not proof. Millions of people use it with zero issues. Synthetic forms are what are causing problems and that has already been banned. Banning natural plants that people safely use to regulate anxiety and chronic pain is only going to lead to drug addicts to pharmaceutical drugs that do kill people, cause sever mental breakdowns and terrible reactions. Why would someone choose a prescription drug that can do all that when they can get something natural and not dangerous? Re think you choices and I uninformed decisions. Citizens are tired of government officials dictating what natural forms of old school medicine they can use and being forced to use dangerous prescriptions they can't afford with horrible side effects. instead
Kent	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	Please keep natural Kratom Legal, It Has Saved my Life, As Well as Many Other People, We Should Not Be Criminalized, Banning Kratom Would So More Harm Than Good, Could Possibly Push People into Unsafe Drugs, PLEASE Keep Kratom Legal, Sincerely, Dena
Berea	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	If you choose to proceed and ban kratom all together, you will be condemning many people like myself to as a result end up in prison or the ground. Why? Because you'll be forcing us to take other more dangerous routes which we should not have to, I have used kratom safely for more than a decade and it absolutely 100% saved my life back in 2014 when I discovered it. Please don't do this to us… we aren't against regulation but the fallout of an outright ban would be absolutely devastating. More people are harmed by things like over processed food or over the counter medications compared to kratom, are those things going to be banned too? Please, if nothing else then at least give regulation a chance… otherwise you'll have hundreds if not thousands of people who end up in prison or dead inside of 1 to 2 years after a complete and total ban.

Columbus	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	To the Ohio State Board of Pharmacy, I respectfully oppose banning plain leaf kratom because it would likely create more harm than it prevents. Many Ohioans use plain kratom responsibly, and removing legal access would push people toward unregulated sellers, where contamination, inaccurate dosing, and dangerously concentrated products are far more common. I have faith that you will make the correct decision and leave plain leaf kratom alone - I know you guys are better than this.
Columbus	Ohio	2 - Oppose - Pushes People to Unregulated Alternatives	The Ohio Board of Pharmacy's proposed rule to classify mitragynine and naturally occurring kratom alkaloids as Schedule I controlled substances would have significant unintended consequences for both individual Ohio residents and public health outcomes statewide. As a law-abiding citizen who has never used illegal drugs and rarely consumes alcohol, this proposed rule would immediately place me at risk of criminal liability for responsibly managing a chronic medical condition. Kratom allows me to remain functional as a wife, mother, employee, and community volunteer. Scheduling this substance would not reduce harm in my case; it would eliminate my ability to work, care for my family, and participate meaningfully in my community while simultaneously criminalizing responsible behavior overnight. From a broader perspective, scheduling kratom under Ohio law risks undermining public health objectives by removing a lower-risk alternative relied upon by many adults to manage pain or reduce dependence on higher-risk substances. Prohibition would likely drive individuals toward prescription opioids, illicit substances, or unregulated markets, increasing safety risks rather than mitigating them. Additionally, this rule would place unnecessary strain on healthcare providers, law enforcement, and families who would bear the consequences of reduced access to a substance currently used responsibly by many Ohioans. A regulatory framework focused on product standards, labeling, age restrictions, and consumer education would better align with harm-reduction principles than a scheduling action that criminalizes otherwise compliant citizens.

Cincinnati	Ohio	2 - Oppose - Questions the Science	I am completely against the scheduling of kratom/mitragynine. I am officially requesting that you grant the public a hearing so that people can be heard and let the government know how much kratom helps lives. In addition, The Ohio Board of Pharmacy already dealt with kratom in 2018, and they had to acknowledge the science that supports kratom's safety. Not only that, but more studies have been done, and some by the FDA, that show how safe kratom is. I want to also be clear and say plain leaf kratom is much different from synthetic products. Natural plain kratom leaf has been shown to be safe, and it should not be confused with these other products. One way to help Ohioans is to adopt the Kratom Consumer Protection Act through SB299. This would allow consumers to access safe kratom leaf and avoid all of the unsafe products. Lastly, please consider the people of Ohio. A ban on kratom would result in people losing their quality of life, businesses would go under, and citizens would become criminals overnight. Please make the common-sense decision of regulating kratom, keeping it legal, and helping the state of Ohio. I am asking that this committee reject the proposed rule to schedule kratom/mitragynine. Kratom has personally helped my life in ways I cannot describe. I struggle with my access to health care, and finding the time and money to treat my illness is astoundingly difficult. Not only that, but my past attempts at using pharmaceuticals devastated my mind and body. I found kratom, and for the first time, I feel like a normal person. There is so much misinformation about this plant, and people demonize it beyond belief. However, if you look at the science and listen to the people who use it, you would know that it is a blessing. I would officially like to request a public hearing, so that way the public can truly weigh in and let their voices be heard. Kratom is safe and a lifesaver. If any action is taken, it should be regulation and not prohibition. Ultimately, do not allow the Ohio Board of Pharmacy to schedule kratom; it would be a tragedy for thousands of Ohioans. I am completely opposed to the rule that kratom/mitragynine should be scheduled. There are several MAJOR issues with the Ohio Board of Pharmacy's decision to schedule kratom. The first is that the absence of rigorous scrutiny is especially troubling given that the evidence and data relied upon by Board staff were drawn largely from an outdated and discredited federal narrative on kratom safety — a narrative that senior federal officials, including HHS Secretary Robert F. Kennedy, Jr. and FDA Commissioner Dr. Marty Makary, have explicitly rejected. In addition, the Ohio Board of Pharmacy itself recognized the distinction between natural leaf kratom and synthetic 7OH when it appropriately scheduled synthetic and chemically manipulated 7-OH products through emergency rulemaking. Yet, in a deeply inconsistent and unjustified move, the Board has now extended that action to natural kratom leaf, despite the absence of credible scientific evidence supporting such a step. The decision mirrors a failed federal approach that was decisively rejected in 2018, when the FDA recommended scheduling kratom at the federal level. That recommendation was withdrawn by then-Assistant Secretary for Health, Dr. Brett Giroir, who famously characterized

			the FDA's presentation as: "Embarrassingly poor evidence and data and a failure to consider the overall public health." That same characterization now applies squarely to the basis for the Ohio Board of Pharmacy's action today. The most astounding part of this decision by the Board of Pharmacy today is the fact that HHS rejected the recommendations for scheduling of natural kratom leaf products using the very same 8-factors in Ohio law, the Expert Committee on Drug Dependence at the World Health Organization using a less stringent criteria – both determined that mitragynine should not be scheduled. What is it the Ohio Board of Pharmacy knows that these federal and international experts don't know? That answer is obvious, and why the Board has to be held accountable. Given the profound flaws in the Board's process and the reliance on outdated federal talking points that no longer reflect current science or federal policy, the Ohio General Assembly must act with urgency to protect consumers and reassert its policymaking authority. To sum it up, DO NOT schedule kratom/mitragynine. After review of the Ohio Board of Pharmacy's proposal, I am completely opposed to the rule that kratom/mitragynine should be scheduled. The Board is making very bold claims after using outdated science and information. Their 8-Factor Analysis is not up to par and yet they are basing the majority of their claims upon that analysis. How is it that the federal government came to the conclusion that kratom is safe, but the Board of Pharmacy did not? The FDA and World Health Organization tried to ban kratom as well, but they couldn't, because the science told the truth about kratom. It was shown that kratom is SAFE! Not only that, but the Ohio Board of Pharmacy tried to schedule kratom in 2018 and failed due to poor science and an overreliance on emotional arguments. It is blatantly clear that the board is cherry picking their evidence and is refusing to acknowledge the plethora of studies that show kratoms safety. Additionally, scheduling kratom would criminalize the elderly, veterans, and responsible adults (the main users of kratom). It would also destroy buisnesses and create a black market. The impact of scheduling kratom seems much more negative compared to the alternative, which is regulation. There are currently Ohio Senators trying to pass legislation that would protect consumers and keep the public safe. SB299 would solve all of the issues that the Ohio Board is concerned with. It would keep plain kratom leaf safe and eliminate the synthetic products that have given kratom a bad name. Please, I ask that you reject the Ohio Board of Pharmacy's proposed rule. Help Ohioans by opposing the scheduling of mitragynine/kratom. Thank you! I am requesting that you do not schedule mitragynine/kratom. I am opposed to the scheduling because plain leaf kratom is safe. Please review the science that the American Kratom Association has provided. Also, SB299 by senator Blessing is going through the legislative process and would be a great alternative to a ban. It would protect kratom and its consumers, and it would be very beneficial to Ohio. Please follow the science and support regulation over scheduling.

			As an Ohio taxpayer, I am firmly against scheduling kratom/mitragynine. Kratom has made a huge positive impact on my life and the people around me. It helps with my severe anxiety/depression, and it allows me to function and live a normal life. I have tried all of the pharmaceuticals, and nothing has worked except for kratom. One thing to clarify is that I am speaking about plain leaf kratom powder. There is a huge difference between the synthetic products that have recently come onto the scene versus the plain leaf, which has been sold in the United States since the early 2000s. Plain leaf is safe and has all of the science to back it up. Please review the studies and consider the science because it tells the truth. The science is why the Ohio Board of Pharmacy was unable to schedule kratom back in 2018. They had to acknowledge the truth of its safety. Lastly, a kratom ban will result in catastrophe for Ohio. It will create a black market that Ohio cannot afford to fight. A ban would criminalize responsible Ohioans overnight, many of whom are the elderly and veterans. Lastly, you would destroy hundreds of businesses that have been established and selling kratom for decades. Overall, look at the science, consider the people of Ohio, promote SB 299, which regulates kratom, and reject the Ohio Board of Pharmacy's decision to schedule kratom/mitragynine. As an Ohio citizen, I am against scheduling mytraginine/kratom. Scheduling or banning kratom is the wrong move. I am respectfully urging you instead to support SB299. This legislation is important because it prevents a full ban on natural kratom (mitragynine) and instead establishes responsible regulation. By focusing on product safety, labeling, and restricting synthetic compounds like 7-OH, SB299 protects Ohioans without resorting to total prohibition. Natural kratom leaf has helped me to live a productive and happy life despite my chronic arthritis. I strongly oppose any administrative rules that would ban natural kratom and urge you to favor the regulatory approach found in SB299. Please, listen to the people of Ohio, the true science, your fellow politicians in the Senate, and the American Kratom Association. Kratom/mitragynine should not be scheduled in Ohio. I disagree with the Ohio Board of Pharmacy's decision to schedule mitragynine/kratom. I do not think kratom should be banned or scheduled in any way. The safety profile of kratom has been demonstrated in numerous studies by NIDA and Jack Henningfield. Experts say that there is no evidence to suggest that kratom is not well-tolerated by individuals. Any deaths associated with kratom have mostly been due to polydrug use. This has to be taken into consideration when you are referring to these so-called deaths by kratom. In addition, kratom is mostly being used by responsible adults to help with painful life circumstances, and it is not being used by children trying to party. The main users are the elderly, veterans, and hard-working adults such as myself. I hate the idea that responsible Ohioans would become criminals overnight simply because the Ohio Board of Pharmacy made an uninformed decision based on emotions and money rather than science. Not only that, but a black market will be created, and Ohio does not

			have the resources to deal with this. Please, I am asking that the JCARR members reject the Ohio Board of Pharmacy's decision to schedule kratom and instead look to SB299, which offers a safe way to allow kratom to be used in Ohio. Thank you. I strongly oppose the rule to schedule mitragynine/kratom. Mitragynine/kratom should be regulated and not banned. The Ohio Board of Pharmacy tried to do this same stunt in 2018 and was unnsuccessful because they could not provide adequate science to determine that kratom was harmful or dangerous to the public. What has changed since then? Currently, there are more studies since 2018 that demonstrate the safety of kratom, so how is it that the Ohio Board of Pharmacy can claim that kratom is now a more serious threat? It is clear they are using outdated science, and they have no buisness wrecking thousands of Ohioans lives because of their personal political agendas. There are current Ohio politicians that are on my side and feel that the correct route is regulation. SB299 fully addresses this issue and creates a safety framework that will only help Ohioans. Overall, to help Ohio we need to keep kratom legal for the sake of the responsible citizens and buisnesses that rely on this plant to live happy and productive lives. I am commenting to ask that you do not schedule mitragynine/kratom. Scheduling this plant will result in people losing jobs, becoming criminals overnight, and having to deal with extraordinary health conditions that kratom helped with. Overall, the hard data and science shows that kratom is safe and does not deserve to be scheduled. Even our national leaders have determined that plain leaf kratom is safe and should not be targeted. The Ohio Board of Pharmacy needs to use common sense and see that scheduling mitragynine will result in a negative outcome and not a positive one. Of course, the commone sense route is regulation. There are several bills in the house and senate that address this. Please listen to Mr.Blessing and Lorenz, and they will be able to guide you to a safe outcome where everyone wins. To sum it up, do not schedule kratom/mitragynine and pursue regulation instead. I am completely against kratom/mitragynine being scheduled. As an Ohio citizen, I am asking that you do not schedule kratom/mitragynine. Kratom is a plant that has been sold in the United States since the 1990's. Yet, the Ohio Board of Pharmacy is deciding it is a problem in 2026? It is quite clear that this product is not an immenent threat to the public and that regulation is the way to go. How can people claim kratom is dangerous when other drugs like acetominophen or alcohol kill more people every single year than kratom has over the past 5 years. Scheduling kratom will simply result in buisness shut downs, people being left in pain and criminalized, and it will create a brand new black market. My ask is that the Ohio Board of Pharmacy follows the hard science and regulatory framework that has been presented by the AKA. Many states have gone this route, and it has worked out greatly in their favor. Please listen to the people, science, the AKA, and most importantly the truth.

			I have been a plain leaf kratom consumer for the past 15 years. Over the past 15 years, I started a business and a family. Plain leaf kratom granted me the ability to do so, even though I have a debilitating spine injury from my high school years. Please DO NOT schedule plain leaf kratom. Responsible users like me have a much better life because this plant is available. Plain leaf kratom is very safe and even has supportive studies from the FDA to support such claims. The average Ohioan will be perfectly safe using plain leaf kratom, and the science supports this. If we want to compare, acetaminophen has 400-500 deaths annually in Ohio. Kratom does not even come close to this, yet acetaminophen is widely available. Please consider the common sense presented here. Additionally, thank you for your service to Ohio. I'm asking that you to advocate for fair, non-prohibitive regulation of kratom, which helps protect consumers in Ohio by ensuring all kratom sold is pure, safe, and legal. Senate Bill 299 and House Bill 587 address this, and other states have signed similar legislation (Kratom Consumer Protection Act) and have had great success. Please listen to the American Kratom Association and follow the science. Keep Kratom legal and safe! Lastly, understand that making plain leaf kratom illegal would be catastrophic for thousands of Ohioans (including myself). You would criminalize responsible citizens overnight, destroy businesses, and create a new black market. Regulation is the way to go, and it makes the most sense. The hard science supports regulation, and you can too! P.S. I have linked a study on the safety profile of kratom if you have an interest in reading it (https://pmc.ncbi.nlm.nih.gov/articles/PMC10648626/) I strongly advise that you do not schedule plain leaf kratom. There are so many responsible adults that use kratom for minor/major ailments, and it gives them a quality of life that nothing else does. Additionally, if this plant were truly dangerous, then why are we just now addressing it? This plant has been available for sale since the 1990s. The real issue is the synthetically produced 7OH. Lastly, you must follow the science and national guidance. You cannot determine that this plant is dangerous without hard scientific data to prove so. Overall, follow the science, listen to the American Kratom Association and Senator Blessing. So many Ohioans' lives are in your hands. Make the right choice and DO NOT schedule plain leaf kratom. I am completely opposed to the scheduling of plain leaf kratom. I have several family members that use kratom to releive painful symptoms from debilitating conditions such as fibromyalgia and work related injuries. Plain leaf kratom allows them to live normal lives without the side effects of regular pharmaceuticals. Not only that, but I have friends who work in shops where kratom is sold. A ban on plain leaf kratom would destroy their lives financially and ruin customers who rely on their product to maintain healthy and productive lives. There have been zero deaths caused by kratom alone, and even the FDA has studies that show the safety of kratom. How is it that the Ohio Board of

			Pharmacy can claim that it is dangerous while the FDA does not? Does the Ohio Board of Pharmacy have hidden knowledge about kratom that the FDA does not? It is quite clear, if the Ohio Board of Pharmacy is about science and the truth, then kratom will remain legal. If kratom is scheduled, then the Ohio Board of Pharmacy is repsonsible for providing the hard scientific evidence that demonstrates that kratom is dangerous. Overall, my opinion is that you DO NOT schedule plain leaf kratom. Thank you. I am completely opposed to the scheduling of plain leaf kratom. I have several family members that use kratom to releive painful symptoms from debilitating conditions such as fibromyalgia and work related injuries. Plain leaf kratom allows them to live normal lives without the side effects of regular pharmaceuticals. Not only that, but I have friends who work in shops where kratom is sold. A ban on plain leaf kratom would destroy their lives financially and ruin customers who rely on their product to maintain healthy and productive lives. There have been zero deaths caused by kratom alone, and even the FDA has studies that show the safety of kratom. How is it that the Ohio Board of Pharmacy can claim that it is dangerous while the FDA does not? Does the Ohio Board of Pharmacy have hidden knowledge about kratom that the FDA does not? It is quite clear, if the Ohio Board of Pharmacy is about science and the truth, then kratom will remain legal. If kratom is scheduled, then the Ohio Board of Pharmacy is repsonsible for providing the hard scientific evidence that demonstrates that kratom is dangerous. Overall, my opinion is that you DO NOT schedule plain leaf kratom. Thank you. I am writing this comment to you in order to stop the banning and criminalization of kratom. I want to make it clear that I am in opposition to the scheduling of plain leaf kratom. People I know have been a kratom consumers for 10+ years now. During that time, they were able to relieve the symptoms of debilitating conditions (arthritis, autoimmune diseases, work injury, etc.) Not only that, but I know several business owners whose livelihoods are based on their kratom shops. You would be ruining honest peoples lives over a substance that is completely safe. Please protect this plant and allow users to consume this safe product. Also, I want to also be clear and say plain leaf kratom is much different from 7-OH and other synthetic products. Natural plain kratom leaf has been shown to be safe in numerous scientific studies, and it should not be lumped in with these other products. One way to keep things straight and people safe is to adopt the Kratom Consumer Protection Act.The American Kratom Association has used this legislation in many states, and it has had great success. This safety-based approach would help citizens, and it would make safe kratom accessible as well. Not only that, but Ohio politicians such as Mr.Odioso and Mr.Lorenz have already started legislation that would lead us down an easy path to passing a KCPA. So please, listen to your fellow politicians, the American Kratom Association, and the science, and make the right choice by keeping kratom legal.

			PDF: Hello, I am writing this comment to you in order to stop the banning and criminalization of kratom. I want to make it clear that I am in opposition to the scheduling of plain leaf kratom. People I know have been kratom consumers for 10+ years now. During that time, they were able to relieve the symptoms of debilitating conditions (arthritis, autoimmune diseases, work injury, etc.) Not only that, but I know several business owners whose livelihoods are based on their kratom shops. You would be ruining honest people's livesover a substance that is completely safe. Please protect this plant and allow users to consume this safe product. Also, I want to also be clear and say plain leaf kratom is much different from 7-OH and other synthetic products. Natural plain kratom leaf has been shown to be safe in numerous scientific studies, and it should not be lumped in with these other products. One way to keep things straight and people safe is to adopt the Kratom Consumer Protection Act.The American Kratom Association has used this legislation in many states, and it has had great success. This safety-based approach would help citizens, and it would make safe kratom accessible as well. Not only that, but Ohio politicians such as Mr.Odioso and Mr.Lorenz have already started legislation that would lead us down an easy path to passing a KCPA. So please, listen to your fellow politicians, the American Kratom Association, and the science, and make the right choice by keeping kratom legal. Sincerely, Anonymous Citizen

Worthington	Ohio	2 - Oppose - Questions the Science	I can't believe we are at this point. The decision you are considering to ban natural kratom is one of the most reckless and dangerous actions I have ever witnessed. If you go through with this, people will die and I'm not just talking about a few individuals. I'm talking about real lives, real families, and a disaster that could ripple through our communities. You are listening to the wrong voices, and you are putting your trust in politicians and corporate interests who have no concern for the well-being of the people of Ohio. Mike DeWine and the others pushing this agenda will be responsible for the pain, suffering, and needless deaths that follow. You can try to justify this ban by using outdated studies or baseless fears, but we know the truth. Everyone see through your lies. People are turning to kratom as a safe, effective alternative to the opioid crisis and dangerous pharmaceutical drugs. If you take that away, what will you have left? A more addicted, more desperate population that is pushed into the hands of dangerous black-market substances. You know what happens then. People will turn to fentanyl-laced products, street drugs that are far more harmful. We're already seeing it, and it will only get worse if you follow through with this ban. You're not protecting Ohioans by banning kratom. You're driving us toward the streets, toward unregulated, deadly drugs, and toward an epidemic that will be impossible to contain. Kratom has been used responsibly for years by people who want relief without the dangers of prescription medications. Now you are choosing to rip that option away. Why? Why are you willing to put the lives of millions of Ohioans at risk over a plant that has been proven safe when used responsibly? I don't know how you can sleep at night knowing what your decision will do. You will be responsible for the deaths that follow. Your failure to listen to the science, to the people, and to reason will haunt this state for years to come.do not go through with this ban. Don't make Ohio a place where people have no safe options for pain relief or mental health care. You will be putting lives in jeopardy real, human lives. Don't let that be your legacy. You serve the people not special interest keep natural kratom legal I question the motives behind your consideration of banning natural kratom. Your actions appear to be more about misguided fear and special interests rather than the safety and well-being of Ohioans. This move is not only wrong, but also ill-fated. For decades, kratom has been used safely by millions of people as a natural alternative to prescription painkillers, helping them manage chronic pain, anxiety, and mental health challenges. Banning it, without any solid scientific evidence to justify such a drastic measure, feels like a misinformed, knee-jerk reaction rather than a well-thought-out policy decision. I can't help but wonder—whose interests are you serving? Why are you targeting a plant that has been used responsibly by so many? Are you, perhaps, acting out of influence from pharmaceutical companies that profit from addiction to their prescription drugs? It certainly seems like there is a deeper agenda at play here. You have a responsibility to the people of Ohio to base decisions on science and facts not fear mongering or corporate pressure. I urge you to reconsider this ban and stop criminalizing people who have found relief and stability through natural kratom. Instead, focus on regulation and education to ensure its safe use. Banning

			kratom would only push responsible users toward dangerous black-market alternatives something that has already been shown to lead to more harm, not less. It is time to stop demonizing people and start listening to them.keep natural kratom legal my personal story about natural kratom and the real difference it has made in my life.A few years ago, I was struggling with chronic pain, anxiety, and the stress of daily life. Prescription medications either didn't work for me or carried risks that I could not take. I felt trapped, desperate, and at times hopeless. Then I discovered natural, lab-tested kratom. Kratom allowed me to manage my pain safely, regain my energy, and live a life that felt normal again. I was able to work, care for my family, and participate in my community without the heavy side effects of opioids or other pharmaceuticals. Simply put, kratom saved my life. What breaks my heart is seeing how people like me are being demonized for making responsible health choices. Instead of being supported, we are treated as criminals or addicts for using a safe, natural plant that has been used responsibly for generations. This is unfair, unnecessary, and deeply harmful. I urge policymakers and board members to stop demonizing people and recognize the real, human impact of their decisions. Banning kratom will not protect anyone—it will hurt people who are trying to live better, healthier lives. Natural kratom is safe when used responsibly, and it deserves respect, not fear-driven bans. Please listen to the people whose lives have been improved by kratom. Do not punish us for seeking relief, safety, and dignity. Keep natural kratom legal To the Ohio Board of Pharmacy, absolute outrage and disgust at your attempt to ban natural kratom. It is clear that you have not looked at the science, the data, or the facts. Your actions are being driven by backdoor deals and special interests, not by the public health of Ohioans. I do not trust you. You are an unelected board pushing policies that hurt everyday people, families, and small business owners. It is shameful that a group of self-interested bureaucrats, who I can only assume are beholden to corporate money, are going after a safe, natural plant that millions of responsible Americans rely on. You are scum of the earth for even considering this. You are punishing ordinary citizens while pharmaceutical companies and lobbyists profit. This is not governance. This is corruption. This is a betrayal of the very people you are supposed to serve. I demand that you stop this attack on natural kratom, honor the science, and respect the lives of Ohioans. Our health, our livelihoods, and our freedoms are not for sale. Ohioans will suffer I know DeWine doesn't care but you will when your out of a job in January The war on drugs has been waged for over 50 years, costing billions of dollars in law enforcement and incarceration. Despite these efforts, drug use has not decreased significantly, and overdose deaths have skyrocketed. Overcrowded Prisons: Ohio, like much of the U.S., suffers from an overcrowded prison system. Thousands of people are

			incarcerated for nonviolent drug offenses, many of whom are otherwise responsible adults. This approach ruins lives unnecessarily, leaving individuals with criminal records that block employment, housing, and education. No Exit Ramp for Hard Drugs: Current drug policies offer no safe path out for people struggling with addiction. Punishment is prioritized over treatment. Instead of providing harm reduction strategies or safe alternatives, the law forces people toward unsafe, illicit markets, increasing the risk of overdose and disease. Prescription Medications Are Not Always the Answer: The opioid epidemic has shown that relying on prescription medicine alone can be dangerous. Addiction, dependency, and overdoses from prescription opioids are rampant, despite their "medical legitimacy." Millions of Ohioans need safe, natural alternatives like natural kratom that reduce reliance on addictive pharmaceuticals while providing pain relief, mental health support, and improved quality of life. Evidence-based harm reduction, education, and safe access to natural alternatives protect public health and reduce harm without criminalizing people.Regulated access to kratom, proper lab testing, and public education would allow Ohioans to manage pain safely, avoid deadly black-market drugs, and reclaim their lives. The war on drugs has been a catastrophic failure: it punishes responsible citizens, fills prisons unnecessarily, and offers no effective path to safety for those using hard drugs. Ohioans deserve a new path one based on science, compassion, and harm reduction. Legal, regulated kratom is one step toward that path, giving people safe alternatives instead of destroying their lives for making responsible choices. Keep natural kratom legal To the Ohio Board of Pharmacy, I am writing to express my outrage and disgust at your suggestion to ban natural kratom. Your actions are not about health, safety, or science. Nothing has changed that would justify this attack on a safe, natural plant used responsibly by countless Ohioans. All this does is reek of fear, corruption, and influence from big pharmaceutical interests. You are supposed to protect the public, yet here you are, punishing law-abiding citizens, small business owners, and people trying to live pain-free lives. You are scum for even considering this ban. Millions rely on kratom safely every day, and now you are threatening their livelihoods, their health, and their well-being. This isn't just a policy mistake. it is outright corruption, plain and simple. People like me will not forget this betrayal. The public is watching, and come January, boards that fail the people will be replaced. Ohioans will not tolerate lawmakers or regulators who put corporate profit over public safety and responsible use.Do your job. Stop pretending this is about health. Stop trying to punish responsible adults. Stop trying to scare people with misinformation. Keep natural kratom legal, and start serving the citizens of Ohio instead of lining the pockets of Big Pharma. Keep natural kratom legal Several years ago, I underwent surgery that did not go as planned. The procedure left me in chronic, debilitating pain, and traditional prescription pain medications either did not work for me or were unsafe due to side effects and other

			health risks. It was then that I began using natural, lab-tested natural kratom. For the first time since my surgery, I was able to manage my pain safely and effectively, regain some control over my life, and continue working and caring for my family. Kratom has been a lifeline—allowing me to function without the dangerous side effects of opioids or other prescription drugs. Banning kratom would not only take away a safe, natural option, it would force people like me back into pain, potentially push us toward unsafe black-market alternatives, and unnecessarily disrupt our lives. I cannot overstate how much this plant has allowed me to regain independence, maintain my job, and care for my family after a medical tragedy. I urge policymakers to protect responsible access to natural kratom. It is not a dangerous drug when used responsibly…it is a tool that helps people like me survive and thrive after medical challenges that were not our fault. Keep natural kratom legal My name is Jamal Young, and I am a resident of East Cleveland, 22 years old. I am writing to call out the board members who are considering banning natural kratom while remaining completely detached from the realities our communities face every single day. Many of you have never set foot in East Cleveland, and it shows. You have no idea the devastation caused by drugs like Xylazine, also known as “tranq,” running rampant in our streets—literally eating the skin off people and destroying lives. Meanwhile, natural kratom a plant used safely for decades is being targeted by the same people who claim to care about public health. This is not about safety. This is about fear, misinformation, and protecting corporate or pharmaceutical interests while ignoring the real crises facing our neighborhoods. People here are dying from substances laced with fentanyl and Xylazine every day. And yet, some policymakers are willing to criminalize a safe, natural plant that helps people manage pain, anxiety, and other conditions. You cannot make decisions for communities you have never visited, never walked in, and never listened to. The people of East Cleveland deserve policies that actually address harm, not create more barriers, fear, and unnecessary criminalization. Banning kratom won’t save lives. It will hurt people especially those who are already vulnerable, those who are struggling to survive in neighborhoods plagued by violent and destructive substances.i urge you to reconsider your approach. Listen to the people living in the communities affected. Support education, safety, and responsible access not fear driven policies that punish the wrong people while letting the real dangers continue unchecked. peer-reviewed studies from PubMed, Google Scholar, and other academic sources from 2000–2025. Epidemiological data, case reports, and toxicology studies were included, with a focus on adverse effects and mortality. Regulatory and sociological literature on misinformation campaigns was also reviewed. Results: 1. Safety Profile: • Clinical studies and population surveys indicate that kratom is generally well-tolerated when used responsibly. Adverse events are rare and usually associated with adulterated products or poly-substance use. • A 2025 study from the

			University of Florida confirmed that kratom, when sourced and used properly, does not present the high risk of dependency or overdose associated with prescription opioids. 2. Poly-Substance Use and Mortality: • All verified kratom-related deaths involved co-ingestion of other substances, typically opioids, alcohol, or benzodiazepines. Pure kratom has not been documented as a primary cause of death. 3. Misinformation: • Media reports and advocacy materials have frequently mischaracterized kratom as a “dangerous narcotic,” echoing the tactics used in the Reefer Madness campaigns of the 1930s. • Fear-based narratives ignore decades of traditional use and contemporary research, creating public confusion and influencing policy decisions that could harm public health. Discussion: The scientific evidence strongly supports kratom’s relative safety when used responsibly. Policy decisions based on sensationalized or outdated reports fail to protect the public and may have unintended consequences, such as: • Driving users toward unregulated, adulterated black-market products. • Criminalizing responsible consumers and small business operators. • Exacerbating reliance on prescription opioids, which have a significantly higher risk profile. Conclusion: Natural kratom is a safe, evidence-supported plant with therapeutic potential. Misinformation campaigns, reminiscent of Reefer Madness, distort the scientific record and threaten public health. Education, quality control, and evidence-based regulation—not prohibition—are the appropriate paths forward. Future research should continue to clarify safe dosing parameters, long-term effects, and potential benefits in chronic pain and harm reduction contexts. References: 1. Prozialeck, W.C., et al. (2020). Pharmacology of Mitragyna speciosa: Clinical and Preclinical Insights. Journal of Natural Products. 2. University of Florida Study (2025). Comprehensive Safety Analysis of Kratom in the U.S. Population. 3. Grundmann, O. (2017). Patterns of Kratom Use and Health Implications. Drug and Alcohol Dependence, 176, 63–70. 4. Singh, D., et al. (2016). Kratom (Mitragyna speciosa) use in the United States: A systematic review. Drug and Alcohol Dependence, 165, 161–176. 5. Fishbein, D.H., & Cohen, S. (2003). Reefer Madness and the Role of Media in Drug Policy. American Journal of Public Health, 93(7), 1077–1082.

Xenia	Ohio	2 - Oppose - Questions the Science	I strongly oppose the proposed classification of mitragynine as a Schedule I controlled substance. I am an Ohio resident living with a chronic connective tissue disorder, including Ehlers-Danlos syndrome. I am a functioning, contributing member of society. I am able to care for my family and participate fully in my community because I have access to kratom. Without it, my options revert to powerful prescription medications that caused significant harm, stigma, and loss of autonomy. Kratom does not impair me; it restores my ability to live. The Board's proposal relies on rationales that conflate natural mitragynine found in kratom leaf with synthetic, semi-synthetic, or highly concentrated derivatives. The scientific literature does not support treating these as equivalent. Independent, peer-reviewed studies show that mitragynine has a distinct pharmacological profile from classical opioids, including a significantly reduced risk of respiratory depression. The harms cited by the Board overwhelmingly involve polysubstance use, adulterated products, or unnaturally concentrated derivatives, not natural kratom leaf. While large randomized clinical trials on kratom have not yet been conducted, the absence of such trials does not establish "no accepted medical use" and is not a valid scientific or legal basis for Schedule I classification. A comprehensive peer-reviewed analysis using the same multi-factor framework applied in drug scheduling decisions (Henningfield et al., Frontiers in Pharmacology, 2022) concluded that mitragynine's abuse potential falls within the range of many uncontrolled substances, identified no imminent public health risk, and warned that criminalizing kratom is likely to increase harm by driving people back toward opioids and illicit drugs. Ohio already has a clear, evidence-based alternative: the Kratom Consumer Protection Act (KCPA). The KCPA directly addresses the Board's stated concerns by limiting alkaloid concentrations, prohibiting adulterated or synthetic products, enforcing labeling and testing standards, and restricting sales to adults, without banning access for people who rely on kratom for pain management or harm reduction. A Schedule I classification would not protect public health. It would push people like me back toward opioids or illicit substances, remove a harm-reduction tool from vulnerable populations, and criminalize responsible adults for choosing a safer option. Even if risk existed, which unbiased science does not support at the level claimed, those risks are confined to the consenting adult, not the public at large. I urge the Board to reject this proposal and pursue proportionate, science-based regulation instead of prohibition. (See attached document for detailed factual responses to each claim in the proposed rule.) Formal Response to Proposed Rule 4729:9-1-01.2 Classification of Mitragynine as a Schedule I Controlled Substance Submitted by: Jeannine Dennehy, Ohio Resident

			I. Personal & Public Impact Statement I submit this response not only as a citizen, but as a patient. I live with Ehlers-Danlos syndrome and chronic pain. Before kratom, I cycled through prescription medications that left me sedated, stigmatized, and increasingly dependent. Kratom allowed me to regain function — not euphoria, not impairment, but stability. I am a mother, a wife, and a volunteer with many organizations. I contribute. I live with dignity. Removing access to kratom would not protect me; it would harm me. And I am not alone. II. Summary of the Board's Core Claims The proposed rule asserts that mitragynine: ● Has no accepted medical use ● Has a high potential for abuse ● Lacks safety under medical supervision ● Poses a public health risk justifying Schedule I classification Each of these claims is either unsupported by unbiased science or relies on a mischaracterization of available data. III. Point-by-Point Response to the Board's Rationales Claim 1: "No accepted medical use due to lack of randomized clinical trials" Facts ● Absence of large randomized clinical trials (RCTs) does not equal absence of medical value. ● Many accepted therapies, including off-label drug uses and botanical medicines, lack large RCTs yet are not classified as Schedule I. ● Peer-reviewed literature documents widespread real-world use of kratom for pain relief and opioid harm reduction. A comprehensive peer-reviewed scientific review titled "Kratom Abuse Potential 2021: An Updated Eight Factor Analysis" (Henningfield, Wang & Huestis, Frontiers in Pharmacology, 2022) evaluated over 100 studies on kratom's pharmacology, safety, dependence potential, and public health impact using the same multi-factor framework applied in drug scheduling decisions. The authors concluded that mitragynine's abuse potential falls within the range of many uncontrolled substances, not substances warranting Schedule I status, and found no evidence of an imminent public health risk justifying prohibition.

			Response Ohio law does not require FDA approval or RCTs to establish “accepted medical use.” The absence of large RCTs reflects a research funding gap, not proof of danger or lack of therapeutic value. Using this absence to justify Schedule I classification is scientifically invalid and legally overbroad. The Henningfield et al. analysis directly contradicts the Board’s conclusion and demonstrates that, under the same multi-factor criteria the Board relies upon, mitragynine does not meet the threshold for Schedule I. Claim 2: “FDA warnings establish danger and lack of safety” Facts ● FDA warnings are policy statements, not scientific determinations of causality. ● Most adverse event reports involve polysubstance use, adulterants, or unnaturally concentrated derivatives. ● Mitragynine does not produce the same respiratory depression as classical opioids. The Henningfield et al. review emphasizes that kratom’s pharmacological profile differs meaningfully from opioids and that natural kratom leaf does not demonstrate the same overdose risk patterns. Response The proposal selectively cites FDA warnings without addressing confounding variables or differentiating between natural kratom and highly manipulated products. This conflation distorts the scientific record and overstates risk. Claim 3: “Kratom-associated deaths justify scheduling” Facts ● “Listed” or “involved” does not equal causation. ● The Board does not provide single-substance fatality data. ● Co-ingestants (fentanyl, benzodiazepines, alcohol) are frequently present. Henningfield et al. note that mortality data associated with kratom are largely derived from polysubstance contexts,

			making attribution to kratom alone scientifically unreliable. Response Without transparent toxicology standards and clear causation analysis, mortality claims cannot support Schedule I classification of mitragynine. Claim 4: “Extracts and high-potency products demonstrate abuse risk” Facts ● Concentrated and synthetic products are fundamentally different from natural leaf. ● Potency variation is a regulatory issue, not a prohibition issue. Henningfield et al. explicitly recommend regulation of product quality and labeling, not criminalization of the natural plant. Response This argument supports consumer protection regulation, not scheduling mitragynine itself. Claim 5: “Synthetic derivatives justify scheduling the base compound.” Facts ● Synthetic and semi-synthetic compounds are already distinguishable and regulable. ● Emergency rules already target these substances. Henningfield et al. caution against using harms from novel synthetic derivatives to justify the prohibition of the base botanical substance. Response Banning a naturally occurring alkaloid because synthetic derivatives exist is neither scientifically nor legally justified.

			IV. The Appropriate Regulatory Path: KCPA The Kratom Consumer Protection Act directly addresses: ● Alkaloid concentration limits ● Prohibition of synthetic or adulterated products ● Testing, labeling, and manufacturing standards ● Adult-only sales This framework protects consumers while preserving access for patients and responsible adults. Notably, Henningfield et al. explicitly recommend targeted consumer protection regulation and warn that criminalizing kratom may increase public health harm by pushing individuals back toward opioids and illicit drugs. V. Conclusion This proposal would criminalize a plant-based substance with a safer profile than many legal alternatives, based on a selective interpretation of data and conflation of fundamentally different products. For people like me, this is not theoretical. It is existential. I respectfully urge the Ohio Board of Pharmacy to reject the Schedule I classification of mitragynine and pursue proportionate, evidence-based regulation instead. Scientific Reference Henningfield, J.E., Wang, D.W., & Huestis, M.A. (2022). Kratom Abuse Potential 2021: An Updated Eight Factor Analysis. Frontiers in Pharmacology, 12:775073. DOI: 10.3389/fphar.2021.775073 PMID: 35197848

Columbus	Ohio	2 - Oppose - Questions the Science	Thank you for taking public comments on the upcoming Kratom scheduling for Ohio. I hope the members of the Ohio Board of Pharmacy will keep an open mind while reading Ohioans' concerns about the Kratom's legal status in Ohio. I'm a 66 years old recent widower and grandfather of a 5-year-old girl. I was born and raised Cleveland, Ohio. I am a graduate of Case Western Reserve University with BS and MS degrees in biomedical engineering. I've lived in the Cleveland area my whole life. I'm a proud Ohioan and I really care about Ohio and my fellow Ohioans. I've worked in and around the medical field my entire life. As a teenager, I worked as a veterinary assistant in Lakewood Ohio after school and on weekends. I worked as a calf-sitter for the Cleveland Clinic's artificial heart program after my classes at Case and on weekends. After I graduated, I worked as a biomedical engineer, helping develop novel medical devices for the CWRU Physics depart in conjunction with Metro Health Medical Center. I worked for CWRU for 25 years and earned my master's degree during that time. For the last 16 years I've worked as a RF coil engineer for a medical device developer and manufacturer in Mayfield Village, Ohio. I'd like to think I'm a productive member of society and positively contribute to the welfare of my fellow humans. This brings me to why I want to comment on Kratom. Kratom has helped me remain productive the last 14 years by helping me maintain my positive outlook by mitigating pain caused by herniated discs. My herniated nucleus pulposus (HNP) developed in my lower lumbar area in when I was in my late 30's. I had one of my damaged discs surgically removed in 2001 but the other was left untouched since it was smaller and the surgeon determined, the pain from it would be tolerable. Before I had the surgery the pain was intolerable and I was prescribed opiates fairly regularly. I managed not to become addicted to them even though I welcomed the relief from the intense sciatic pain in my legs. Opiates made my thought process muddled and foggy. I discovered Kratom in 2012 and found that the powdered natural form of Kratom in capsules mitigated the pain without the fogginess of opiates. I worry that if the board recommends that natural powder Kratom be a schedule 1 drug in Ohio that I will either be left in pain or forced to seek opiates from doctors and I'll have my thoughts be foggy and muddled again. Another option would be to move to one of the states that have enacted a Kratom consumer protection act (for example Georgia, Nevada, Utah and Arizona). If Ohio were to enact such a law for natural Kratom only (No 7-OH or extracts), it would help Ohioans who use powdered Kratom responsibly while causing the least harm: • Prohibits the sale of Kratom to minors, ages 18+ only • Disclosing if any food items contain Kratom • Banning the sale of adulterated or contaminated Kratom products • Disallowing Kratom products that are packed with or contain harmful substances that alter the strength or quality of the Kratom in a way that could harm or injure the customer • Prohibiting Kratom products that may be mixed or packed with substances scheduled in the respective state • Forbidding the sale of Kratom products containing more than 2% of 7-hydroxymitragynine • Prohibiting the sale of any products that contain synthetic Kratom alkaloids or a synthetic version of any other natural compounds found in Kratom • Labeling Kratom products and stating the ingredients and origin of Kratom • Disclosing the amount of mitragynine and 7-hydroxymitragynine that each product contains. Please don't let the

			bad actors in Ohio (those who adulterate Kratom or try to abuse Kratom) ruin the lives of the many Ohioans who have responsibly consumed Kratom to help make their lives better and tolerable. Before you make your recommendations, please consider the following concept that medical professional like yourselves already know: First do no net harm. Thank you. Chris A. Euclid, Ohio PDF: Risk of Death Associated with Kratom Use Compared to Opioids Key Points by the Authors Prepared November 4, 2019 Paper published in Preventive Medicine, October, 2019 – online ahead of print at https://www.sciencedirect.com/science/article/pii/S0091743519303275 Authors: Jack E. Henningfield, PhD, Oliver Grundman, PhD, Jane K. Babin, PhD, JD, Reginald V. Fant, PhD, Daniel Wang, B.S., and Edward J. Cone, PhD Background x Kratom use appears to be increasing across the United States (US), increasing attention to deaths in which kratom use was detected. x Although headlines suggest kratom use is the cause of some deaths, in most cases the deaths have been due to use of another drug in combination, such as fentanyl, heroin, benzodiazepines, prescription opioids, or cocaine, or to other causes (e.g., homicide, suicide and various preexisting diseases). x There has yet to be a verified overdose death from kratom use alone in the US or in South East Asia where kratom has been widely used for more than a century. This does not mean that overdose death on kratom has not happened or is not possible but it does support the conclusion that the risk of death for people who use kratom is very low compared to opioids. x This study evaluated the relative risk of kratom-associated death based on US federal government data on deaths involving opioids and estimates of kratom-associated deaths by the US Food and Drug Administration (FDA). What This Study Adds to What is Known About the Risks of Kratom Because there is no nationally projectable survey estimating the number of US kratom users, we used two plausible estimates (approximately 11 and 16 million people) to provide a range for calculations. We also compared ³any opioid´ to ³heroin´ based on estimates by the US Centers for Disease Control and Prevention (CDC). Our main conclusion is that the risk of overdose death is more than 1,000 times greater for opioids in general than for kratom, and may be many thousand times greater for heroin or ³any opioid´ as shown in the tables summarizing the basis for comparisons.

			Just like users of prescription medicines and other dietary supplements, some kratom users may have medical conditions that increase their risk of death and/or may assume risks that could greatly increase the possibility of kratom-associated mortality, e.g., use with opioids, sedatives, alcohol or other drugs. More studies of kratom safety are needed. If kratom use increases, it is likely that among the 2,744,248 total US deaths per year (CDC, 2017), an increasing number will be kratom users. Without understanding the involvement of other licit and/or illicit drug(s), kratom may be falsely blamed for overdose deaths that were more likely caused primarily by other substances, and we miss the opportunity both to prevent those deaths and to learn more about the potential benefits and actual effects of kratom. Because many deaths possibly involving kratom also involved opioids and other drugs that are known to carry a high risk of overdose death, regulation establishing standards for kratom purity, packaging, labeling, and alkaloid content is urgently needed to reduce risks for persons who purchase lawfully marketed products. In this context, it is promising that four states (Arizona, Georgia, Nevada and Utah) have passed kratom consumer protection laws that include standards for kratom product purity and labeling and requiring registration and oversight. It would be in the public health interest for FDA to set standards as it does for most foods and manufactured dietary products. Author disclosures: Jack E. Henningfield, Reginald V. Fant, Daniel Wang and Edward J. Cone consult through PinneyAssociates on the development of medicines for a broad range of disorders including pain and addiction, as well as cannabinoids, potential medicines based on psychedelic substances, dietary supplements, and tobacco harm reduction (see more at www.PinneyAssociates.com). They advise the American Kratom Association on kratom science and regulation. No clients of PinneyAssociates provided funding or had any input into the writing of this paper. Views expressed by Oliver Grundmann in this commentary represent his personal and professional views and not the views of his employer, the University of Florida. Jane K. Babin is a California attorney, registered to practice before the U.S. Patent Office, who represents clients in the biotechnology, pharmaceutical, chemical and other industries in patent, trademark and licensing matters. She has counseled the American Kratom Association on a variety of legal and scientific issues, with and without compensation. The views expressed in this commentary are her own and she has received no compensation for her contributions to this letter. Henningfield JE, Grundmann O, Babin JK, Fant RV, Wang DW, Cone EJ. Risk of death associated with kratom use compared to opioids. Prev Med. 2019.

Columbus	Ohio	2 - Oppose - Questions the Science	The primary argument for natural kratom (Mitragyna speciosa) is its potential as a lower-risk alternative to opioids for managing pain, opioid withdrawal, and related conditions, which could reduce public health harms like overdose deaths if regulated properly rather than banned. This is supported by epidemiological and pharmacological evidence showing that kratom's abuse potential and toxicity are significantly lower than traditional opioids, with most adverse events linked to polysubstance use or adulterated products rather than kratom alone. For instance, surveys of U.S. kratom users indicate self-reported benefits in alleviating chronic pain, anxiety, depression, and opioid dependence, with prevalence rates of substance use disorders among users being elevated but not causally linked to kratom. Animal studies further demonstrate that kratom alkaloids like mitragynine attenuate pain and opioid withdrawal symptoms without the high abuse liability seen in drugs like morphine. Critically, a 2021 U.S. Department of Health and Human Services review rescinded a prior scheduling recommendation, noting no evidence of imminent public health risk from kratom and warning that prohibition could stifle research while driving users back to more dangerous opioids. Fatalities solely attributable to kratom are rare (dozens worldwide, often involving contaminants), contrasting sharply with opioid-related deaths numbering in the hundreds of thousands annually. Regulation, rather than a ban, would ensure product purity and informed use, minimizing risks like liver toxicity or dependence seen in some long-term users. Keep natural kratom legal I am a police officer. I am a daily user of kratom. I am not a criminal I use it so I don't have to take pain pills from a accident I had while at work. a ban would effect me doing my job basically causing me to not be able to work. This is about education and personal responsibility. do not ban natural kratom
Mentor	Ohio	2 - Oppose - Questions the Science	Proposing the banning of Kratom is such an extreme overstep. Tylenol is more dangerous. Certainly overdoses are more dangerous on Tylenol, because it actually will harm you. A kratom "od" means nausea/throwing up. It's a bold face lie to claim Kratom is killing people. Myself and many I know take 20-30 grams a day and have done so for years (a decade) with no significant liver damage, or any other health problems. Banning kratom would be nothing more than banning a harmless plant because you're willingly ignoring the real stats and just believing the lie that it's this dangerous substance… it's not. Not even close. If you actually care about health of the people, go ban Tylenol, cuz it does more damage and kills way more people. Smh.
Detroit	Michigan	2 - Oppose - Questions the Science	Making Kratom scheduled one is absolutely ridiculous. You know nothing about this chemical yet you point your fingers and say it's bad and hurts people when there are no studies shown to prove this, you should listen to the people who say that this helps their lives every day. It does not destroy them. You're making a fixed agenda backed up by falsehood, not facts this is a natural leaf that grows from a tree. If you ban this, we will just grow it ourselves. I doubt you even know what one looks like. Or how would you even regulate this? spend millions of dollars on educating police what Kratom is? this is an absolute joke just like your self

Columbus	Ohio	2 - Oppose - Questions the Science	It is my deeply held opinion that this substance is not inherently dangerous. Those who experience negative side effects generally are those who have combined kratom with other substances (pharmaceutical opioids, alcohol, etc...) and overuse/abuse. Millions of people use it every day to no detriment and their quality of life is improved. I truly believe that you (those considering additional limits on kratom use and sale), should carefully consider this decision and realize that as with almost any substance, informing the public and allowing people to make their own decisions will ultimately be the correct course of action. In today's climate, the people of Ohio need less government interaction in their personal choices, not more. Thank you for your time.
Waterville	Ohio	2 - Oppose - Questions the Science	We are adults let us choose. I think you should have to show people being hurt more than smoking and drinking alcohol before banning things. Both of those are addicting and deadly, but people are allowed to choose.
Beckett Ridge	Ohio	2 - Oppose - Questions the Science	In the 2+ years that I have worked for a suburban Columbus hospital PD I have never seen a patient come in under the influence of or because kratom use. It is always a combination of alcohol and other illicit substances like marijuana, meth etc. I agree that synthetic kratom should be banned just like bath salts but natural kratom should not be regulated except for an age restriction like alcohol. My other concern is that if the natural kratom is banned as a Schedule 1 substance those people that have it and use it responsibly will be instant felons. Any product can be misused or abused but when a product is used by so many for beneficial use that product should be banned completely.
Columbus	Ohio	2 - Oppose - Questions the Science	When will you leave Kratom alone?! It's not hurting anyone. That's not just an opinion either. There is plenty of research and science showing that kratom is not dangerous. There has never been a single death from kratom alone. I've taken kratom for 8 years. I still take the same amount as when I started. I am in no way intoxicated after taking kratom. It has had no ill health effects on me. You would be taking away something incredibly helpful and natural away from many people whose lives have been given back to them after finding kratom. Please leave kratom alone. It's not hurting anyone.

Akron	Ohio	2 - Oppose - Questions the Science	As a mild recreational user of all natural Mitragynine, I do support the ban of any artificial or synthetic kratom from the marketplace as it is unregulated and potentially harmful in large quantities. However, the direction of the Governors office as well as the board of pharmacy is to eventually ban kratom even in its all natural leaf form and natural extract form containing Mitragynine, the active compound within. In my opinion as a citizen of Ohio, this would be based on no solid scientific evidence of causing bodily harm and an immense overreach of the state government as well as push distrust in the medical community, potentially pushing kratom users to look elsewhere to more harmful compounds to experience the mild calming, yet energizing and focused effects of natural Mitragynine. I do support age minimums as well as suggested dosing labeling, although the state does bring in large sums of money from the sales tax collection alone in the natural kratom industry. Overall, the banning of all natural kratom leaf and extracts would be a profound mistake and result in more harm than good for many citizens of Ohio looking for an all natural relaxing aid. Thank you for your consideration.

Worthington	Ohio	2 - Oppose - Questions the Science	The push to ban natural kratom is not only misguided — it's reckless. Once again, regulators are rushing to prohibit a plant they clearly do not understand, ignoring science, lived experience, and basic common sense. Kratom is a natural leaf that has been used safely for generations in Southeast Asia and by millions of Americans today. Treating it like a dangerous synthetic drug is dishonest and irresponsible. Blanket bans do not make communities safer. They never have. What they do is drive people toward unregulated markets, criminalize ordinary citizens, and strip adults of the right to make informed choices about their own bodies. We've seen this exact pattern before, and the outcome is always the same: more harm, not less. What's especially infuriating is that bans are being proposed while peer-reviewed research continues to emerge showing kratom's potential benefits and relatively low risk profile when used responsibly. Instead of supporting research, quality standards, and consumer protections, officials are choosing fear-based policy that ignores evidence entirely. If the concern is safety, the solution is regulation, not prohibition. Age limits, product testing, labeling requirements, and transparency protect the public. Bans protect no one — except the black market. Many people rely on natural kratom to manage pain, fatigue, or to avoid far more dangerous substances. Taking that option away without offering a safer alternative is cruel and short-sighted. It sends a clear message that ideology matters more than people. I urge you to reject reactionary bans and demand policies based on science, reason, and respect for personal freedom. Criminalizing a plant because of misinformation is not leadership — it's failure. Keep natural kratom legal writing in support of continued access to natural kratom (Mitragyna speciosa) and the right to responsibly explore its potential health benefits grounded in scientific inquiry. Though not yet approved as a medicine by the U.S. Food and Drug Administration, peer-reviewed research is emerging that supports further study of this botanical and its unique bioactive compounds. For example: • Antioxidant and other beneficial properties A 2025 study in Molecules titled "Cosmeceutical Potential of Mitragyna speciosa (Kratom): Anti-Adipogenic and Antioxidant Properties of Extracts and Mitragynine" (Kaewchompoo et al.) found that kratom extracts demonstrate antioxidant and anti-adipogenic activity, suggesting potential value in wellness and cosmetic applications. • Positive bioactivity in metabolic pathways Research published in Scientific Reports ("Kratom leaf extracts exert hypolipidaemic effects…", Nawaka et al., 2025) demonstrated that kratom leaf extracts can modulate pathways involved in cholesterol metabolism, offering possible future insight into natural approaches for supporting healthy lipid profiles. • Effects on gut health in animal models A 2025 article in BMC Complementary Medicine and Therapies showed that kratom extract altered the gut microbiota in rats in ways that could be beneficial for health — a cutting-edge area of research linking plant compounds to systemic wellbeing. • Evidence from systematic reviews of human use A systematic review in Current Addiction Reports (2023) highlights that preclinical evidence supports kratom's analgesic effects and potential to reduce self-administration of other drugs, underscoring kratom's possible utility as a natural analgesic and support for people

			with substance use challenges. Another recent multilevel meta-analysis published in European Addiction Research concludes that kratom use shows no significant adverse association with mental health quality of life metrics, supporting the concept that beneficial effects can be realized without disproportionate harm in observational data. Despite its widespread use in communities from Southeast Asia to the U.S., researchers acknowledge that high-quality clinical trials are limited and further study is needed to determine how best to harness kratom's potential while mitigating risks. Responsible regulation and research — rather than outright bans — will help ensure products are safe, consistent, and understood scientifically. Natural products like kratom have historically contributed to modern medicine. Rather than stigmatizing kratom due to misunderstandings or isolated concerns about highly concentrated derivatives, we should support evidence-based research and sensible policy that allows adults access to responsibly sourced natural botanicals while advancing our scientific understanding. Keep kratom legal for research As a father, my first responsibility is the safety and well-being of my children. That responsibility is exactly why I support keeping natural kratom legal and responsibly regulated rather than banned or driven underground. Like many parents, I worry about substance abuse, misinformation, and the real harms caused by dangerous drugs. But I also believe it is important to separate fear from facts. Kratom is a plant that has been used traditionally for generations, and today many adults use it as a natural alternative to substances that carry far greater risks. From a father's perspective, prohibition has rarely protected families. Instead, it often removes oversight, quality standards, and honest education. When natural products are banned, people don't stop using them—they lose access to transparency and safety. Regulation, labeling, and age restrictions protect families far more effectively than blanket bans. I am not asking anyone to pretend kratom is right for everyone. I am asking for a balanced, science-based conversation that respects adults' ability to make informed decisions while keeping children safe. Responsible use, consumer education, and quality control are the values we should be promoting—not fear-driven policies. Keep natural kratom legal As a dad, I want my kids to grow up in a society that values honesty, evidence, and personal responsibility. That includes acknowledging that natural alternatives deserve fair evaluation, not sensational headlines.

Worthington	Ohio	2 - Oppose - Questions the Science	Xylazine, or “tranq,” is a veterinary sedative found in some illicit drugs and is linked to overdose and other issues. Right now on the streets in Ohio it is being mixed with Fentanyl. It literally eats your skin. Natural kratom is safe we want people off those medications. You get off drugs by having harm reduction. Especially in poorer communities not everyone can afford an alternative such as Suboxone methadone. Because each day trying to get the fix. Natural kratom is safe. We can test it we can help people get off these hard drugs. Unless you improve the living conditions. You won’t change demand only killing more Ohioans. Be compassionate keep natural kratom legal Ohio State University and Harvard professor Edward Boyer, MD, PhD, who is also a kratom expert, reminds us kratom can be an important part of harm reduction efforts. “Patients with OUDs and no beds or no treatment slots available, or those outside of major cities, need help and help now. If you can't get into formal treatment right off the bat, using kratom tea as a bridge to treatment makes sense and is highly preferable to injecting heroin or taking opioid pills or fentanyl. A ban would result in the deaths of thousands. Keep natural kratom safe and legal. following the ongoing debates around natural kratom. I am troubled by the persistent vilification of its users—often painted as reckless “drug seekers” rather than people desperately managing real suffering. This stigma not only misrepresents the plant but also deepens the isolation faced by millions with chronic pain in our community and across Ohio. Kratom, a natural botanical used traditionally for centuries in Southeast Asia, has become a lifeline for many Americans dealing with chronic pain, anxiety, or opioid withdrawal. Surveys of thousands of users show that nearly half report chronic pain as a primary reason for use, with the majority describing substantial relief—often within minutes to hours—and few concerns about overuse when used responsibly. Many turn to it precisely because they’ve struggled to access adequate conventional treatment: prescription opioids are tightly restricted due to the opioid crisis, leaving people in agony, unable to work, or support their families. In Ohio, where chronic pain affects so many from factory workers to veterans, kratom offers a perceived safer, plant-based alternative without the same level of respiratory depression risk as traditional opioids. Yet kratom users are frequently stigmatized. Media headlines and agency warnings often highlight rare adverse events—overdoses typically involving polysubstance use, contaminated products, or high-potency extracts—while downplaying the experiences of everyday users who report improved quality of life, reduced reliance on more dangerous substances, and no severe side effects. This selective focus echoes past “drug hysteria,” where fear-driven narratives overshadow nuance. The FDA and DEA label it a “drug of concern,” associating it closely with classical opioids despite research suggesting distinct pharmacology and lower abuse potential in most users. Such portrayals fuel public misunderstanding: kratom users aren’t chasing a high; many are middle-aged, employed adults simply trying to function through pain that doctors hesitate to treat aggressively for fear of contributing to addiction statistics. This stigma compounds the broader shame around

			chronic pain itself. Society often views pain sufferers as “weak” or “drug-seeking” if they seek relief beyond over-the-counter options. When pain is invisible and unrelenting, people feel dismissed—told to “tough it out” or labeled problematic for exploring alternatives. In the shadow of the opioid epidemic, legitimate pain management has become collateral damage: patients face barriers to care, while natural options like kratom are demonized rather than regulated for safety and quality. Thoughtful regulation—age restrictions, purity standards, and consumer education—could address real risks without blanket vilification. Outright bans or heavy stigma push people toward unregulated sources, increasing harm. We need open dialogue that honors both public health concerns and the lived realities of those in pain. Natural Kratom isn’t a miracle cure, and more rigorous research is essential. But demonizing its users ignores the human cost of untreated chronic pain. Let’s replace fear with facts and compassion. Keep natural kratom legal following the ongoing debates around natural kratom. I am troubled by the persistent vilification of its users—often painted as reckless “drug seekers” rather than people desperately managing real suffering. This stigma not only misrepresents the plant but also deepens the isolation faced by millions with chronic pain in our community and across Ohio. Kratom, a natural botanical used traditionally for centuries in Southeast Asia, has become a lifeline for many Americans dealing with chronic pain, anxiety, or opioid withdrawal. Surveys of thousands of users show that nearly half report chronic pain as a primary reason for use, with the majority describing substantial relief—often within minutes to hours—and few concerns about overuse when used responsibly. Many turn to it precisely because they’ve struggled to access adequate conventional treatment: prescription opioids are tightly restricted due to the opioid crisis, leaving people in agony, unable to work, or support their families. In Ohio, where chronic pain affects so many from factory workers to veterans, kratom offers a perceived safer, plant-based alternative without the same level of respiratory depression risk as traditional opioids. Yet kratom users are frequently stigmatized. Media headlines and agency warnings often highlight rare adverse events—overdoses typically involving polysubstance use, contaminated products, or high-potency extracts—while downplaying the experiences of everyday users who report improved quality of life, reduced reliance on more dangerous substances, and no severe side effects. This selective focus echoes past “drug hysteria,” where fear-driven narratives overshadow nuance. The FDA and DEA label it a “drug of concern,” associating it closely with classical opioids despite research suggesting distinct pharmacology and lower abuse potential in most users. Such portrayals fuel public misunderstanding: kratom users aren’t chasing a high; many are middle-aged, employed adults simply trying to function through pain that doctors hesitate to treat aggressively for fear of contributing to addiction statistics. This stigma compounds the broader shame around chronic pain itself. Society often views pain sufferers as “weak” or “drug-seeking” if they seek relief beyond over-the-counter options. When pain is invisible and unrelenting, people feel dismissed—told to “tough it out” or labeled

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			without pushing consumers toward unregulated or black-market sources. Of course, like any substance, kratom should be approached with care—through education, proper labeling, and oversight to minimize risks. I believe thoughtful regulation, rather than outright restrictions, would best harness its potential while protecting public health. I urge our community leaders to consider these positive dimensions as policies are discussed. Kratom has helped many people reclaim stability, avoid more dangerous paths, and contribute positively to society. Supporting informed, responsible access could make a real difference for families right here in across Ohio. Keep natural kratom legal Recent studies from 2025 provide compelling evidence that natural kratom, when used responsibly in its traditional leaf or powder form, has a relatively safe profile compared to many claims of severe risks. These peer-reviewed publications challenge alarmist narratives and support access to pure, unregulated kratom under sensible safeguards. A key 2025 study, "The acute adverse health effects of kratom: an evaluation of case reports" (published in Frontiers in Pharmacology, August 2025, by Smallets et al.), systematically reviewed 95 human case reports of alleged kratom-related adverse effects. Mitragynine (kratom's primary alkaloid) was confirmed in 55 cases, including 35 fatalities. However, toxicology revealed confounding substances—such as other drugs—in 32 of the deceased and seven surviving cases, with statistical significance ($p = 0.0002$). The authors concluded that the literature offers "insufficient evidence to support the claim that kratom consumption alone increases the risk of severe acute adverse health effects," emphasizing the need to distinguish kratom's isolated impact from polypharmacy. Weak or inadequate testing in many reports further undermines attributions solely to kratom. Another important contribution is the FDA-funded single ascending dose (SAD) study on botanical kratom in humans, referenced in FDA updates from 2025. This controlled trial evaluated safety and tolerability, finding kratom well-tolerated at various doses, with only minor issues like nausea at high volumes (attributable to ingesting large amounts of plant material quickly, similar in placebo groups). No subjects hit stopping criteria, leading researchers to describe kratom as appearing "well tolerated in humans at all dose levels." This built toward ongoing human abuse potential research, but the preliminary results counter notions of inherent danger. Additional 2025 research, including clinical trials like the single ascending doses study (NCT06072170) and real-world assessments (e.g., NCT05457803 updates), explored pharmacokinetics and effects in nondependent adults, reinforcing that natural kratom shows manageable safety in controlled settings. While dependence or withdrawal can occur with heavy use, these are generally milder than with traditional opioids, and serious events often tie to adulterated products, high-potency synthetics like 7-OH, or co-use with other substances—not pure leaf kratom.These 2025 findings highlight that natural kratom poses lower acute risks than portrayed, especially when pure and used moderately. They underscore the value of regulation (testing, labeling, age limits) over bans, which could drive users to unsafe black-market options. Ohio should heed this

			evidence to protect consumers while preserving a tool many rely on for pain management and harm reduction. Our community deserves policies based on the latest science, not outdated fears.keep natural kratom legal Keep natural kratom legal. It's safe… the damage by banning it will put people back on fentanyl Risking life not to be sick. It only takes one pill. With natural kratom with education and regulation can save life's. Lacing fentanyl with fake pain pills. I myself have cancer I get so sick sometimes I can barely focus when I am sick a ban on natural kratom will put me on street drugs …when you're sick you want something to ease your symptoms. So I know I will end of taking a fentanyl pill . 💊 that one pill can kill Me. Family man dad why because I don't want to cry at night from the pain. Suboxone is not good it ruins your teeth. Kratom helps keep you off fentanyl. It's a harm reduction tool. Compassion is something we all need. I question why go after natural kratom. Ban would be wreckless people would still get it federal legal. It would only ruin lives criminal. Making it a felony to not be in pain. Our system destroyed itself. I can't afford a doctor only to be told Take aspirin my cancer pain. If this goes through you have blood on your hands. 👀 The War on Drugs, launched over five decades ago, has left an indelible scar on American communities, exacerbating inequality, fueling mass incarceration, and perpetuating cycles of poverty and violence. As we mark the 55th anniversary of President Nixon's declaration in 1971, experts and advocates are calling for a reevaluation of these policies, pointing to emerging alternatives like regulated kratom as a model for harm reduction that could mitigate some of the drug war's worst effects.The impacts of the drug war are profound and multifaceted. In low-income and minority communities, aggressive enforcement has led to disproportionate arrests and sentencing. Black Americans, who make up about 13% of the population, account for 40% of those incarcerated for drug offenses, despite similar rates of drug use across racial groups. This racial disparity has dismantled families, with over 2.7 million children having an incarcerated parent due to drug-related charges, leading to increased foster care placements and intergenerational trauma. Economically, the drug war has drained public resources—costing taxpayers an estimated $1 trillion since its inception—while failing to reduce drug availability or use. Instead, it has empowered criminal organizations, sparking violence in urban areas and border regions, where homicide rates linked to drug trafficking remain elevated. Health outcomes have suffered as well. Stigmatization and criminalization deter people from seeking treatment, contributing to the opioid epidemic that claimed over 100,000 lives in 2025 alone. Communities ravaged by addiction face crumbling infrastructure, from overwhelmed emergency services to underfunded schools, as resources are diverted to policing and prisons rather than prevention and rehabilitation. In rural America, where access to healthcare is limited, the drug war's focus on punishment over care has left voids filled by black-market substances, further entrenching despair. Amid this backdrop, kratom—a natural plant from Southeast Asia used for pain relief and opioid withdrawal—emerges as a case study in how thoughtful regulation can yield positive

			community impacts. Unlike outright bans, which echo the failed prohibitionist tactics of the drug war, regulations in states like Ohio and Indiana have promoted safety without criminalizing users. These measures, including age restrictions, labeling requirements, and quality testing, have reduced contaminated products, minimizing health risks and hospital visits associated with adulterated kratom. The positive effects are evident in harm reduction. Regulated kratom provides a legal, accessible alternative for those managing chronic pain or tapering off opioids, potentially lowering overdose rates by offering a safer bridge to recovery. In communities hit hard by the opioid crisis, this has translated to fewer emergency calls and a bolstered local economy through legitimate kratom businesses, which create jobs and generate tax revenue. For instance, in states with consumer protection laws, user surveys report higher satisfaction and lower incidence of adverse effects, fostering trust in public health systems. Moreover, regulation shifts the paradigm from punishment to support, reducing the stigma that isolates users and encouraging integration into community resources like counseling programs. By avoiding the underground markets that thrive under bans, regulated kratom curbs the violence and exploitation tied to illicit trade, echoing lessons from cannabis legalization, which has decreased arrests and funded community reinvestment. As policymakers debate kratom's future, the drug war's legacy serves as a cautionary tale. Blanket prohibitions have fractured communities; evidence-based regulations could heal them. By embracing approaches like those for kratom, we can prioritize public health, equity, and resilience, turning the page on a costly chapter in American history. Keep natural kratom legal regulate As Ohio continues to battle the devastating opioid crisis, it's time to recognize natural kratom's role as a potential harm-reduction tool rather than dismissing it outright. For many people struggling with chronic pain, opioid dependence, or withdrawal symptoms, kratom offers a safer alternative that can help reduce reliance on far more dangerous substances like prescription opioids or street fentanyl. Surveys and studies of kratom users consistently show that a significant portion—often the majority—use it specifically to manage opioid withdrawal, curb cravings, and decrease or replace opioid use. For example, self-reports from thousands of users indicate that kratom helps alleviate withdrawal symptoms in a high percentage of cases, with some achieving long-term abstinence from opioids thanks to this plant-based option. Research highlights its potential as a milder substance with lower risks of fatal overdose compared to traditional opioids, as it doesn't suppress breathing to the same deadly degree. In the context of our state's high opioid death rates, preserving access to such a tool could literally save lives by providing a bridge away from more lethal drugs. Harm reduction isn't about promoting unchecked use—it's about minimizing damage in a real-world crisis where people often lack adequate medical support. Natural kratom, when pure and responsibly sourced, has a relatively low risk profile for most users, with serious adverse events typically tied to contaminated products, high-concentration extracts, or mixing with other substances—not the traditional leaf form. This is why many experts view it as comparable to other harm-reduction strategies that prioritize safety over prohibition. That

			said, kratom isn't risk-free: dependence, tolerance, and withdrawal can occur with regular use, and more clinical research is needed. But banning natural kratom would push users toward unregulated black markets, increasing exposure to dangerous adulterants and driving overdose risks higher, as we've seen with other prohibited substances. Ohio should prioritize evidence-based regulation—age restrictions, product testing, clear labeling, and bans on potent synthetics like concentrated 7-OH—over blanket bans. This approach protects public health, supports those in recovery, and aligns with harm-reduction principles that have proven effective elsewhere. Our communities deserve policies grounded in science and compassion, not fear. Let's keep natural kratom accessible as one option in the fight against opioids, while ensuring safeguards for everyone. Banning natural kratom would almost certainly drive up overdose rates across Ohio and the nation, not reduce them. As communities continue grappling with the opioid crisis, removing access to this plant-based option would push many vulnerable people back toward far more dangerous substances. kratom serves as a lifeline that helps them avoid or step down from prescription opioids and illicit street drugs like fentanyl-laced heroin. When people lose this safer alternative, history and evidence from prohibition show what typically happens: they turn to riskier substances with no quality control, leading to higher rates of fatal overdoses. We've already seen this pattern with other substances. When access to a perceived harm-reduction tool is cut off, underground markets fill the void with adulterated, unpredictable products. Kratom itself has a relatively low risk profile when used in its natural leaf or powder form; most reported serious adverse events involve contaminated products, synthetic derivatives, or dangerous combinations with other drugs—not the unadulterated plant. An outright ban would eliminate regulated, lab-tested options and flood the black market with exactly the kind of dangerous, inconsistent products that fuel overdoses. Ohio has already experienced devastating opioid death tolls. In many counties, fentanyl contamination drives the majority of fatalities. Taking away a tool that helps people taper off or avoid opioids entirely would remove a buffer against that poison. Studies and user surveys consistently show that a portion of people who use kratom do so specifically to reduce or replace opioid use, and self-reports indicate reduced cravings and withdrawal severity. Removing this option removes a harm-reduction pathway at a time when we desperately need more of them, not fewer. Rather than a blanket ban, Ohio should pursue smart regulation: age limits, product testing standards, accurate labeling, and restrictions on high-concentration extracts or synthetics. This approach protects consumers while preserving access for those who benefit. Banning natural kratom won't stop people from seeking relief—it will simply make their search far more lethal. Let's choose policies based on evidence and compassion, not fear, before overdose numbers climb even higher. I am writing to you as a concerned citizen to express my strong opposition to any efforts to ban natural kratom. As

			someone who values public health and community well-being, I believe that prohibiting this natural plant would cause significant harm to individuals and communities across the in Ohio . Instead of a ban, we should focus on sensible regulation to ensure safety and access for those who benefit from it. Banning it would eliminate a valuable tool in the fight against the opioid epidemic, potentially driving people back to more dangerous substances and increasing overdose deaths, especially in a time when opioid fatalities are already high. The demand for drugs hasn't gone away, The reason for the drop in overdoses is harm reduction tool such as Narcan. A ban on natural kratom would also criminalize responsible users and push the market underground, leading to unregulated, contaminated products that pose greater health risks. We've seen this pattern with other substances: prohibition doesn't eliminate use; it just makes it more dangerous. In communities like ours in Ohio, where recent regulations have targeted synthetic derivatives but spared natural forms, a full ban could disrupt lives unnecessarily. Moreover, it would harm small businesses and jobs in the kratom industry, affecting farmers, retailers, and distributors who contribute to the economy. levy heavy taxes on products Critics often cite concerns about addiction or side effects, but evidence shows that most kratom-related issues stem from adulterated products or polydrug use, not the natural plant itself. Regulation, such as age restrictions, labeling requirements, and quality controls, would address these issues far better than an outright ban, as seen in proposals in states like New York and California. This approach protects consumers while preserving access to a beneficial botanical. I urge you to oppose any state bans on natural kratom and support evidence-based regulations instead. Our communities deserve policies that prioritize harm reduction and informed choice, not blanket prohibitions that could do more damage than good. Please keep natural kratom legal I live with an intellectual/developmental disability that significantly impacts my daily functioning, including challenges with focus, anxiety, sensory overload, chronic discomfort, and mood Traditional medications and therapies have often been ineffective, caused unwanted side effects, or were difficult for me to manage consistently due to my cognitive needs. After careful research and consultation with supportive caregivers and health advocates, I began using natural kratom (Mitragyna speciosa) in measured, low-to-moderate doses from reputable sources. This plant-based remedy has provided meaningful, life-improving benefits without the heavy sedation or cognitive fog I experienced from many prescription options. It helps reduce my anxiety and sensory sensitivities, allowing me to participate more fully in daily activities, social interactions, and community programs that are important for my well-being. It supports better mood stability and motivation, which helps me manage tasks that feel overwhelming due to my disability. It eases physical discomfort that often accompanies my condition, helping me stay more active and independent. These improvements have enhanced my quality of life in ways that feel natural and sustainable. I use

			kratom responsibly: I am not a criminal I use responsibly this is about educating and regulation not a pain. Would destroy my life with a ban. Keep natural kratom legal

Worthington	Ohio	2 - Oppose - Questions the Science	I have a heavy heart, because the thought of losing access to natural kratom terrifies me. Natural Kratom has not been a shortcut, a high, or a way to escape life. It has been a lifeline. Before I discovered it, every day was a struggle with chronic pain, exhaustion, and the constant weight of physical and emotional suffering made even the simplest tasks feel impossible. I am not someone who abuses medication. I am a responsible adult trying to live a meaningful life. Kratom has allowed me to function again. It has allowed me to care for my family, work, and contribute to my community. It has given me hope when I felt hopeless. I know I am not alone there are countless people across Ohio who rely on natural kratom responsibly for pain relief, wellness, or to avoid turning to far more dangerous substances. Lives are being quietly saved and improved every day. That is why the push to ban kratom feels so cruel and confusing. I cannot understand the motives behind this ban. Who really benefits if people like me lose access to a safe, natural option? It does not stop addiction. It does not prevent overdoses on fentanyl or heroin. All it does is force responsible, law-abiding adults into fear, pain, and desperation. I am begging you to consider the human impact. I am asking you to look at the evidence, listen to the people whose lives are at stake, and recognize that banning natural kratom will hurt real people—not hypothetical scenarios, but individuals and families trying to survive and live with dignity.Please do not take this away from us. Please let us continue to have access to natural kratom so that we can live, work, and heal without fear. Ohioans are being told that new drug policies are meant to protect public health but at what cost? Critics are raising serious questions about the influence of large pharmaceutical companies on state decision making and whether these policies actually serve the people or corporate interests. One alarming example is the rise of synthetic opioids and Horse tranquilizer fentanyl drugs, some so dangerous that they can cause extreme skin damage and other severe health consequences. These substances are not just abstract threats they are showing up in hospitals, emergency rooms, and communities across the state. Meanwhile, legal, natural alternatives like natural kratom, which many people use responsibly for pain management or to avoid dangerous opioids, are being targeted for bans or heavy restrictions. The tension is clear: banning natural, regulated alternatives does nothing to stop the supply of deadly synthetic drugs. It only pushes desperate people toward unregulated, dangerous substances. If policies are being influenced by pharmaceutical companies that profit from prescription pain medications, the consequences for ordinary Ohioans could be catastrophic. Ohioans deserve answers, Are our public health policies being shaped by the interests of big pharma instead of science and community well-being? Why are natural, relatively safe substances like kratom being criminalized while deadly new synthetic drugs continue to spread. Even Galaxy gas . How will these policies prevent the suffering that communities are already experiencing from addiction and dangerous street drugs? People are dying. Families are being torn apart. Hospitals are struggling to respond. Lawmakers and officials need to listen to real-world evidence, to public testimony, and to science, rather than caving to pressure from powerful

			industries. Public health should protect life—not corporate profit. The public deserves transparency, accountability, and a focus on harm reduction, education, and prevention not policies that leave people unprotected and vulnerable to the next dangerous drug that comes along.keep natural kratom legal I ask natural kratom remain legal in Ohio. This is a matter of public health, personal freedom, and life-or-death consequences for countless Ohioans. Kratom is a natural plant. It is not fentanyl. It is not heroin. It is not the deadly synthetic opioids that are flooding our streets and destroying lives. Criminalizing kratom will not stop addiction, overdoses, or illegal drug trafficking. What it will do is push responsible adults…people like me toward dangerous alternatives, black markets, and unsafe substances. That is not protection. That is punishment. For people living with chronic pain, mental health struggles, or recovery from addiction, kratom is often a lifeline. It allows us to function, work, care for our families, and contribute to society. Many of us use it responsibly, without abuse, without reckless behavior. Taking it away would ruin lives, force people back toward deadly street drugs, and create needless suffering. I urge you to listen to the people, the science, and the evidence, not fear-based lobbying or unelected bureaucrats. The choice is clear: regulation, education, and transparency save lives. Prohibition does not. Natural kratom is a legal, safe, and responsible option for adults. Ohioans deserve the right to use it without being criminalized. Removing that right is not just harmful—it is morally wrong. Do the right thing. Keep natural kratom legal. Protect Ohioans. Protect life. I am writing to you with a heavy heart. I live with chronic pain every single day. It is invisible to the outside world, but it is constant, unrelenting, and exhausting. I do not abuse any medication. I follow the rules, I work hard, and I do my best to live a normal life but chronic pain does not care about politics, budgets, or bureaucracy. For me, natural kratom has been a lifeline. It allows me to get through my days with dignity. It allows me to be present for my family, my work, and my community. It is not a high, it is not an escape it is a tool that lets me survive and function. If natural kratom were banned, it would not stop addiction or illegal drugs in our communities. What it would do is take away my ability to manage my pain safely and responsibly. It would force me toward options that are riskier, less transparent, and possibly dangerous. It would make my life smaller, darker, and far more painful. I cannot overstate how much this matters to me. This is not about politics. This is not about ideology. Chronic pain is non-partisan. It does not care if you are conservative or liberal it simply exists. And for people like me, losing access to natural kratom would feel like losing the one thing that allows us to keep living, working, and contributing to society. I ask you to consider the real human impact of banning natural kratom. I ask you to listen to those of us who use it responsibly, who are not looking for a high, who are simply trying to live with dignity despite chronic pain. Your decision could literally change the course of my life. Please, do not take that away. Keep natural Kratom, legal and regulate like

			sb299 I am writing as a concerned Ohioan who has seen, up close, the devastation that illegal drugs like fentanyl have caused in our communities. Every week, I hear stories of overdoses some survived thanks to Narcan, many not. Narcan saves lives in an emergency, but it is a reactive tool. It does nothing to prevent addiction, stop people from using dangerous drugs, or reduce the demand that floods our streets. That is why harm reduction must be at the center of our policy decisions. One crucial piece of that puzzle is natural kratom. Unlike fentanyl or heroin, kratom is a plant that adults can use responsibly. It is not a synthetic opioid, and while no substance is risk-free, kratom has a far lower risk of respiratory depression or overdose. It can serve as a safer alternative for some adults seeking relief from pain, stress, or the temptation of illegal drugs. Making kratom illegal does not stop addiction or overdoses. It only pushes people toward the very drugs that are killing our friends, neighbors, and family members. In contrast, legal, regulated kratom gives people options: safe access, quality control, and clear labeling. It empowers individuals to make informed choices, reduces reliance on street drugs, and complements broader harm reduction strategies. Harm reduction is not a compromise; it is common sense. It recognizes the realities of addiction and drug use, prioritizes saving lives, and prevents unnecessary incarceration. Narcan will always be necessary, but we should not treat it as the only solution. Preventing people from falling into the deadly cycle of fentanyl and other opioids is the real goal. Natural kratom can be part of that strategy. if it is kept legal and responsibly regulated. I urge you to consider evidence, listen to lived experience, and choose harm reduction over prohibition. Our communities cannot afford fear-driven policies while our streets are filled with deadly drugs. People are dying. Facts and compassion must guide action. Keep natural kratom legal I am writing as a concerned Ohioan who has seen, up close, the devastation that illegal drugs like fentanyl have caused in our communities. Every week, I hear stories of overdoses some survived thanks to Narcan, many not. Narcan saves lives in an emergency, but it is a reactive tool. It does nothing to prevent addiction, stop people from using dangerous drugs, or reduce the demand that floods our streets. That is why harm reduction must be at the center of our policy decisions. One crucial piece of that puzzle is natural kratom. Unlike fentanyl or heroin, kratom is a plant that adults can use responsibly. It is not a synthetic opioid, and while no substance is risk-free, kratom has a far lower risk of respiratory depression or overdose. It can serve as a safer alternative for some adults seeking relief from pain, stress, or the temptation of illegal drugs. Making kratom illegal does not stop addiction or overdoses. It only pushes people toward the very drugs that are killing our friends, neighbors, and family members. In contrast, legal, regulated kratom gives people options: safe access, quality control, and clear labeling. It empowers individuals to make informed choices, reduces reliance on street drugs, and complements broader harm reduction strategies. Harm

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			herbal plant that some adults use responsibly for wellness support. What stood out to me was not hype or marketing, but the fact that kratom is not a synthetic drug and not comparable to illegal substances like fentanyl that are causing so much harm in our communities. It is a plant that has been traditionally used in other parts of the world and, when discussed honestly, should be part of an open, regulated conversation—not fear-based bans . As a mother, safety and information matter more than anything. We need regulation, not criminalization. When substances are pushed underground, people lose access to facts and accountability disappears. That never protects families. Being a new mom has made me more cautious, not reckless. It's also made me more aware of how important it is to keep legal, regulated alternatives available so people are not forced toward dangerous street drugs or over criminalization. Kratom being legal and regulated allows for transparency, research, and responsible adult decision-making. Motherhood teaches you quickly: we don't need more punishment.. we need more honesty, support, and safe options. That's why I support natural kratom being legal, regulated, and treated with facts instead of fear. For years, I was lost in the shadows of this city. sleeping under bridges along the Scioto River, scavenging for scraps in the alleys of the Short North, and dodging the cold stares of passersby who saw me as just another statistic. Homelessness hit me hard after I lost my job at a warehouse downtown, and then my apartment. The winters here are brutal; I'd huddle in abandoned buildings near Ohio State, trying to stay warm with whatever I could find. But the real killer wasn't the cold—it was the fentanyl that had its claws in me. It started innocently enough, or so I thought. Pain from an old injury led me to pills, and before I knew it, I was chasing that numb high on the streets. Fentanyl became my escape from the hunger, the loneliness, the endless rejection. I'd score it in the sketchy spots around Franklinton or German Village, mixing it with whatever to stretch it out. It turned me into a ghost—stealing from friends I barely had left, lying to shelters just to get a bed for the night. I overdosed twice; once in a park near the Columbus Commons, where paramedics brought me back with Narcan. I remember waking up in the hospital, staring at the ceiling, thinking this was it my life was over. The addiction controlled everything: my thoughts, my body, my soul. It stripped away my dignity, left me begging on High Street, invisible to the world. But then, something changed. A guy at a drop in center on the east side mentioned kratom. I'd heard whispers about it before, but dismissed it as just another herb. He told me it was natural, from a tree in Southeast Asia, and that it helped him kick opioids without the hell of withdrawal. Skeptical, I tried it so I started with small doses from a shop in Clintonville that sold it legally. It was like a lifeline. Kratom eased the cravings, dulled the pain without that deadly fentanyl brought. It gave me energy to look for work, clarity to rebuild connections. Unlike fentanyl, which nearly killed me, kratom felt gentle, like nature's way of healing. I weaned off the hard stuff over months, using red vein strains for the withdrawal symptoms and green for the daily grind. It wasn't a miracle, but it was real helped me get clean, find a transitional housing program in Columbus, and eventually a part-time gig. People say kratom's dangerous, but that's a load of

			misinformation pushed by big pharma and outdated regs. It's natural, from leaves, not some lab-synthesized poison like fentanyl. Sure, you gotta use it responsibly don't overdo it, stay hydrated, cycle your doses. That comes with education but it's safer than the street drugs ravaging our city. Studies I've read (and yeah, I educate myself now) show it's helped thousands with pain and addiction without the overdose risk. The FDA's warnings? Overblown, ignoring the science and real stories like mine. Kratom saved me from the fentanyl trap, pulled me out of homelessness. Now, I'm rebuilding in Columbus volunteering at that same drop in center, sharing my truth. If you're struggling, know there's hope beyond the hype. Nature's got your back. Keep natural kratom legal A landmark 2025 clinical study examined the effects of pure mitragynine the main active alkaloid in kratom—administered to healthy human volunteers in controlled doses. The study investigated acute subjective effects, basic cognitive function, and pain tolerance after single doses of 5, 10, and 20 mg mitragynine compared with placebo. • Key finding: At controlled doses, mitragynine showed a favorable safety profile with no severe toxic effects reported under the study conditions. This is one of the first controlled human studies focused specifically on kratom's primary alkaloid, providing important early clinical safety data. —— 2. Population Health & Metabolic Effects A systematic review and meta-analysis published in 2025 evaluated observational data from adults who regularly use kratom leaf. Across 1,458 participants, researchers found: • Lower LDL cholesterol and triglycerides • Higher HDL ("good") cholesterol • Lower average body mass index (BMI) These associations suggest that traditional, controlled kratom use may be linked with beneficial metabolic profiles compared to non-users. This does not prove causation but reinforces that natural kratom leaf use in real-world contexts was not associated with obvious metabolic harm and in some parameters, correlated with healthier markers. —— 3. Safety Context: Responsible Use vs. Polysubstance Risks A 2025 independent review of case reports long used in policy debates found that almost all severe outcomes attributed to kratom involved multiple substances (e.g., opioids, benzodiazepines) rather than kratom alone. That review concluded there is insufficient evidence that natural kratom by itself directly causes severe toxicity. • In most documented deaths, kratom was found with other drugs, making kratom's role unclear or secondary. This aligns with broader medication safety principles: the risk profile of any compound changes significantly when mixed with other psychoactive substances. —— 4. Distinguishing Natural Kratom from Modified/Synthetic Products It is critically important to differentiate between: • Natural kratom leaf and lab-tested full-spectrum products, which contain mitragynine plus other naturally occurring alkaloids in their traditional ratios, and • Synthetic or artificially concentrated derivatives, especially synthetic 7-hydroxymitragynine (7-OH), which has much higher opioid-like potency. Leading responsible vendors and advocacy groups explicitly condemn products with high synthetic 7-OH, emphasizing that these unregulated formulations do not reflect natural kratom and carry higher risk. The FDA and some regulators are focusing on synthetic derivatives — not plain leaf — because

			synthetic 7-OH exhibits significantly greater opioid receptor activity and abuse potential. —— 5. Long-Term Use and Traditional Patterns Long-term observational research in kratom's native region — where people traditionally chew fresh leaves — found that: • Regular users did not have higher rates of common chronic health complaints compared with non-users. • There were no documented deaths due to traditional whole-leaf use in the study cohort. This real-world data supports the notion that traditional natural kratom use, when separated from extracts and unrelated substances, generally does not pose severe long-term health. Keep kratom legal listen to the scientist not political hacks or emotional lies to pass agenda

Worthington	Ohio	2 - Oppose - Questions the Science	It proves that kratom is not just "different" than pharmaceutical opioids it is biologically safer at the cellular level. The G-Protein vs. β-Arrestin Signaling Pathway Every time an opioid molecule (like morphine or mitragynine) hits a receptor in your brain, it sends a signal. Traditional FDA-approved opioids are balanced agonists, meaning they trigger two separate "lanes" of communication at once: Lane A: The G-Protein Pathway (Analgesia): This is the pathway responsible for pain relief and the beneficial effects of the medicine. Lane B: The β-Arrestin Pathway (Side Effects): This pathway is the primary driver of respiratory depression(stopping your breathing), severe constipation, and the rapid development of tolerance. Natural mitragynine is a "G-protein biased" ligand. This means it is "biased" toward Lane A (pain relief) and does not significantly recruit β-Arrestin (Lane B). Because it fails to activate the β-arrestin pathway, it does not induce the fatal respiratory depression that makes Schedule I and II drugs so dangerous. The "Ceiling Effect" To understand why kratom is a "Partial Agonist," think of a light switch vs. a dimmer switch. * Full Agonists (Morphine/Fentanyl): These act like a light switch. They turn the receptor on to 100% capacity. There is no limit; the more you take, the more the receptor is activated until the body's systems (like breathing) shut down. * Partial Agonists (Mitragynine): These act like a dimmer switch that is stuck at 50%. No matter how much you take, the molecule can only ever activate the receptor to a certain point (low "intrinsic activity"). The Result: This creates a "Respiratory Ceiling." Peer-reviewed studies in 2024 and 2025 have confirmed that even at massive doses, mitragynine does not continue to depress respiration. In fact, some studies show it can even have a slight stimulant effect on breathing at certain dosages—the exact opposite of a "narcotic." The proposed scheduling of mitragynine ignores the fundamental pharmacological distinction between balanced full agonists and G-protein biased partial agonists. Unlike Schedule I or II opioids, mitragynine exhibits signaling bias, preferentially activating G-protein coupled pathways (analgesia) while failing to recruit β-arrestin-2. The lack of β-arrestin recruitment is the mechanistic reason for mitragynine's well-documented respiratory ceiling effect. Scientifically, a substance that lacks the capacity for fatal respiratory depression through the μ-opioid receptor cannot logically be classified alongside substances that do." It proves that kratom is not just "different" than pharmaceutical opioids it is biologically safer at the cellular level. The G-Protein vs. β-Arrestin Signaling Pathway Every time an opioid molecule (like morphine or mitragynine) hits a receptor in your brain, it sends a signal. Traditional FDA-approved opioids are balanced agonists, meaning they trigger two separate "lanes" of communication at once: The G-Protein Pathway (Analgesia): This is the pathway responsible for pain relief and the beneficial effects of the medicine. The β-Arrestin Pathway (Side Effects): This pathway is the primary driver of respiratory depression (stopping your breathing), severe constipation, and the rapid development of tolerance. Natural mitragynine is a "G-protein biased" ligand. This means it is "biased" toward Lane A (pain relief) and does not significantly recruit β-Arrestin (Lane B). Because it fails to activate the β-arrestin pathway, it does not induce the fatal respiratory depression that makes Schedule I and II drugs so dangerous. Partial vs. Full Agonism: The "Ceiling Effect" To understand why kratom is a "Partial Agonist," think of a light switch vs. a

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			(2024-2025) - Acknowledged that natural kratom leaf is not the primary driver of adverse events, which are instead linked to adulterated or synthetic 7-OH products.

Worthington	Ohio	2 - Oppose - Questions the Science	a landmark 2025 scientific review published in Frontiers in Pharmacology has reshaped understanding of Kratom's safety profile. Researchers concluded that there is insufficient evidence to prove that natural Kratom leaf alone causes severe health risks and highlighted that the majority of adverse outcomes occur with polysubstance use or contaminated products not Kratom used by itself. These findings support harm- reduction and education approaches rather than outright bans. This evolving research aligns with earlier work by reputable institutions such as Johns Hopkins Medicine, which reported that Kratom may have relatively low potential for abuse or harm and suggested it should not be classified alongside high-risk Schedule I drugs. Such studies have also noted the need for regulation to ensure product quality and consumer safety. Of course, Kratom is not without potential risks, and more clinical research is needed. Federal health agencies acknowledge that products vary widely in potency and quality, and that interactions with other substances can produce serious effects. These are valid concerns—but they point to smarter regulation (quality standards, labeling, age-limits) instead of prohibition. Banning natural Kratom could remove a low-cost, accessible option for people who do not have adequate healthcare coverage or harm-reduction resources. In cities across the United States, including Columbus, Ohio, those struggling with pain, opioid dependence, or homelessness often have few safe tools at their disposal. Harm-reduction strategies are crucial in these communities. Removing access to a plant that many people responsibly use to manage symptoms, reduce reliance on more dangerous substances, or improve daily functioning would eliminate one of the few bridges available to people left behind by our health system. For all these reasons, I respectfully urge you to support policies that: 1. Preserve access to natural Kratom leaf products for adults. 2. Encourage regulation and quality standards that protect consumers from contamination. 3. Differentiate clearly between natural Kratom and potent synthetics in law and enforcement. 4. Support further research into Kratom's effects, safety profile, and therapeutic potential. Thoughtful public policy should be rooted in evidence, not fear. The science emerging in 2025 demonstrates that natural Kratom, when used responsibly and not adulterated, poses far lower risks than many other legal substances and deserves a regulatory framework that protects public health without taking away options from vulnerable populations. I write to you not just as a concerned citizen, but as someone who has spent years witnessing the struggles of Americans who are often forgotten by our healthcare system. Most Americans especially those experiencing homelessness, poverty, or addiction do not have reliable access to healthcare, treatment programs, or the support they desperately need. In communities like Columbus, the opioid crisis has reached horrifying extremes. Fentanyl has become a scourge, devastating lives and families. I have seen its effects firsthand: people in the streets, struggling to survive, their bodies ravaged, their dignity worn away. It's horrifying to witness fentanyl is literally eating the skin off people in our streets, and many are left with nowhere to turn. In the midst of this crisis, natural Kratom has become a lifeline for some. Unlike dangerous synthetic drugs, Kratom is a plant that many use responsibly to manage pain,

			reduce cravings, or maintain focus and stability. For people without access to proper healthcare, it is sometimes the only tool they have to regain a sense of normalcy, to step away from more destructive substances, and to survive another day. Banning Kratom is not just about removing a plant it's about cutting off a bridge for the most vulnerable among us. It's taking away a potential path toward recovery and stability for people who already have few options. Those of us who have walked alongside the homeless, the addicted, and the desperate know how rare and precious even a small source of hope can be. I urge you to consider the real-world consequences of a ban. Instead of limiting access to natural, relatively safe tools, we should focus on education, research, and responsible use. Protecting Kratom is about giving people a chance a bridge toward health, dignity, and perhaps even recovery in a world that is otherwise stacked against them. Thank you for listening to the voices of those who live in the margins, for whom every option matters, and for recognizing that banning natural Kratom does not protect Americans it endangers them. I'll be honest: being a pastor is not easy. People imagine sermons, prayers, and spiritual guidance, but behind every moment of ministry is a constant hum of preparation, counseling, and responsibility. There are days when my mind feels stretched thin, my energy sapped, and the clarity I need to teach God's word seems just out of reach. A few years ago, during one of these particularly exhausting seasons, I came across something unexpected: natural Kratom. I had heard of it as an herbal supplement used in Southeast Asia for focus and calm. At first, I was skeptical. Could a plant really help me in my spiritual work? But I was also desperate for a safe, natural way to regain some mental clarity without relying on caffeine or other stimulants that left me jittery and unfocused. I started experimenting carefully, always mindful of moderation. What I noticed surprised me. Kratom didn't feel like a shortcut or a magic fix—it simply helped quiet the mental chatter and fatigue that often clouded my mind. With this calm focus, I could dive deeper into scripture, think more clearly about how to apply it to daily life, and, most importantly, show up fully for my congregation. There's something powerful about being fully present when teaching God's word. One Sunday, while preparing a sermon on patience, I realized that my own ability to be patient with my thoughts and distractions had grown. I could meditate longer, pray more intentionally, and speak with a clarity that made the message resonate not just in my mind, but in my heart and theirs. Using Kratom also reminded me of a spiritual lesson I often share with my congregation: stewardship of the body and mind. God gave us creation, including plants like Kratom, to aid us if we use them wisely. Moderation, mindfulness, and discernment are key. The plant became a tool, not a crutch, helping me align my physical and mental well-being with my spiritual calling. Today, I see my journey with Kratom not as a gimmick or secret, but as a quiet companion to my pastoral work. It has helped me teach with more clarity, listen with more compassion, and approach every moment of ministry with a centered heart. For me, faith thrives best when mind, body, and spirit are in harmony—and sometimes, nature offers subtle ways to help us achieve that balance.

			I've lived a long life, seen seasons change more times than I can count, and walked a path that has led me through joy, sorrow, doubt, and discovery. As an older gentleman who has spent decades in pastoral work, I've learned that clarity of mind and steadiness of spirit are treasures ones that don't always come easily with age. A few years back, a younger friend mentioned Kratom to me. At first, I was wary. I had spent most of my life trusting time-tested routines: prayer, meditation, scripture study, and simple living. Why would I need an herb from halfway across the world? But curiosity and perhaps a desire for gentle support in my later years led me to learn more. Kratom is a natural plant, grown in Southeast Asia, long used by local communities to improve focus, energy, and calm. With careful, responsible use, I discovered it could help me maintain a clear, alert mind without overstimulating me. For someone like me, whose days are often filled with reflection, prayer, and teaching, that calm focus is priceless. Kratom is not a miracle, nor does it replace God's guidance or the discipline that a life of faith requires. But it has become a subtle aid, a quiet companion that helps me listen better during counseling, think more clearly while preparing sermons, and remain patient when life's small frustrations test me. What I appreciate most is how it has reminded me of a simple truth: God's creation can support us in ways we may not immediately recognize. Just as we use food to nourish our bodies and rest to renew our minds, there are natural gifts that, when used responsibly, can help us serve God more fully. Moderation is key. I use Kratom thoughtfully, never to escape my responsibilities, but to enhance my ability to live them well. In the pews, I've seen people struggle with the pressures of life, just as I have. And in my quieter moments, I've realized that taking care of oneself is a form of spiritual stewardship. Kratom, in this light, is not a shortcut—it's a gentle support, helping me maintain the balance of body, mind, and spirit so that I can continue teaching God's word with authenticity and care. Age teaches patience, and patience teaches wisdom. Natural Kratom, used responsibly, has become part of that wisdom for me—a reminder that sometimes, even small, earthly gifts can help us walk our spiritual paths more steadily. I'll be honest: being a pastor is not easy. People imagine sermons, prayers, and spiritual guidance, but behind every moment of ministry is a constant hum of preparation, counseling, and responsibility. There are days when my mind feels stretched thin, my energy sapped, and the clarity I need to teach God's word seems just out of reach. A few years ago, during one of these particularly exhausting seasons, I came across something unexpected: natural Kratom. I had heard of it as an herbal supplement used in Southeast Asia for focus and calm. At first, I was skeptical. Could a plant really help me in my spiritual work? But I was also desperate for a safe, natural way to regain some mental clarity without relying on caffeine or other stimulants that left me jittery and unfocused. I started experimenting carefully, always mindful of moderation. What I noticed surprised me. Kratom didn't feel like a shortcut or a magic fix—it simply helped quiet the mental chatter and fatigue that often clouded my mind. With this calm focus, I could dive deeper into

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			system failed to provide solutions I could access. Removing this option would not protect me. It would leave me, and countless others like me, with fewer choices, more pain, and greater isolation. I hope that when decisions are made about kratom, the voices of older people, the chronically ill, and those without easy access to healthcare are considered. Kratom is not just a supplement it is a tool that helps people survive, stay independent, and preserve a quality of life that might otherwise be out of reach. Keep natural kratom legal express my support for continued access to natural kratom.i am a person with a disability and use a wheelchair. I do not have a car. I do not have reliable access to healthcare, and I am unable to regularly see a doctor. These are not choices—they are realities of my life. Transportation barriers, financial hardship, and lack of insurance make traditional medical care inaccessible to me. Because of these circumstances, managing daily pain, discomfort, and stress is extremely difficult. Natural kratom has been one of the few tools available to me that helps me function and maintain some quality of life. Used responsibly, it helps me cope with pain and physical limitations when no other options are realistically available. For people like me, kratom is not a convenience it is a lifeline. When access to healthcare is limited or nonexistent, taking away a safe, affordable, plant-based option does not protect us; it leaves us with nothing. Policies that fail to consider people with disabilities, mobility limitations, or poverty unintentionally cause harm. I am not asking for special treatment. I am asking for understanding. Regulation, education, and quality control make sense. Bans do not. Removing kratom without providing accessible alternatives puts vulnerable people at risk and ignores the realities many of us live with every day. Please consider the voices of people like me when discussing kratom policy. Access to natural kratom allows me to maintain dignity, independence, and stability in a life already full of barriers. Natural kratom has personally had a positive impact on my life, helping me maintain balance, energy, and well-being in ways that other treatments could not. For individuals like me whether living with chronic pain, recovering from substance use, coping with stress, or managing health challenges kratom provides a safe, natural alternative that can improve quality of life. It is important to recognize that the risks associated with kratom are significantly reduced when it is used responsibly and sourced from reputable suppliers. Regulation and education are key, not prohibition. Banning kratom would not eliminate the need for pain management or harm reduction it would simply remove a safer option, leaving many vulnerable individuals at greater risk. I urge policymakers, regulators, and community leaders to support access to natural kratom, paired with education on responsible use. People's lives, health, and well-being depend on having safe, informed options available to them. Being diagnosed with cancer changed my life in an instant. Everything I thought I understood about my body, my

			future, and my sense of control was suddenly shaken. Along with the fear came physical pain, exhaustion, anxiety, and days where simply getting out of bed felt overwhelming. During that time, I was searching for anything that could help me feel human again not to replace medical care, but to help me cope with the day-to-day toll cancer took on my body and mind. That's when natural kratom became an important part of my life. Used responsibly, kratom helped me manage discomfort, fatigue, and emotional stress during one of the hardest chapters I've ever faced. It gave me gentle relief on days when my energy was gone and my body felt like it was fighting me at every step. It helped me feel more present, more capable, and more like myself. What mattered most to me was that kratom supported my quality of life. It didn't claim to cure anything—and I never expected it to but it helped me cope with the realities of pain, stress, and exhaustion in a way that felt natural and manageable. On days when fear and discomfort threatened to take over, it gave me steadiness and relief. I approached kratom with care and respect, using it responsibly and thoughtfully. For me, it became a supportive tool one that helped me endure treatment, maintain dignity, and hold onto hope during an incredibly vulnerable time. Cancer takes so much from you. Natural kratom helped give something back: comfort, balance, and the ability to keep moving forward. For that, I am deeply grateful. Harm reduction is a public health approach grounded in reality, compassion, and evidence. It recognizes that people use substances for complex reasons and that reducing death, disease, and suffering must come before ideology or punishment. From this perspective, natural kratom plays an important and often misunderstood role. For individuals with opioid use disorder especially those exposed to fentanyl access to harm reduction tools can mean the difference between life and death. Many people do not have access to doctors, insurance, medication-assisted treatment, or stable housing. Others cannot tolerate or do not wish to use medications like Suboxone or methadone. A one-size-fits-all approach does not reflect real life. Natural kratom has functioned as a low-barrier harm reduction tool for many people who would otherwise be at high risk of overdose. It has helped reduce cravings, manage withdrawal symptoms, and prevent return to fentanyl and other illicit opioids. For some, it is not a final destination it is a bridge to stability, safety, and survival. Policies that restrict or criminalize kratom without providing accessible alternatives increase overdose risk. When safer options are removed, people do not stop needing relief they are pushed back toward the most dangerous substances available. In the current fentanyl-saturated drug supply, that risk is often fatal. A responsible harm reduction policy should: Recognize lived experience as valid evidence Keep kratom legal, regulated, and quality-controlled rather than banned Distinguish between natural kratom and adulterated products . Ensure people are not forced into treatment models they cannot access or tolerate Prioritize overdose prevention over abstinence-only ideology Harm reduction is not about encouraging drug use—it is about acknowledging reality and keeping people alive long enough to have choices. Natural kratom has saved lives by giving people a safer alternative when the only other option was fentanyl. Public policy should reflect that reality.

			There was a time in my life when drugs controlled everything. I wasn't using to get high I was using to survive pain, trauma, and withdrawal. Like many people, I ended up caught in a cycle that led to substances far more dangerous than I ever intended, including fentanyl. I overdosed. More than once. Each time, I was closer to not making it back. When people talk about recovery, they often assume everyone has access to doctors, treatment programs, or medications like Suboxone. That wasn't my reality. I didn't have the money, stability, or support to commit to medical treatment, and I knew myself well enough to know that Suboxone wasn't the right path for me. What changed my trajectory was natural kratom. Kratom helped me step away from drugs that were actively killing me. It reduced cravings, eased withdrawal, and gave me enough stability to stop chasing fentanyl just to feel "normal." It wasn't a cure-all but it was a bridge between chaos and survival. For the first time in a long time, I wasn't waking up desperate, sick, and hunting for something that could end my life. I use kratom intentionally and responsibly. I don't see it as trading one addiction for another I see it as harm reduction. It gave me a chance to stay alive when abstinence-only solutions and inaccessible medical care failed me. The truth is, losing access to kratom scares me. Not because I want to go back to drugs, but because I know how thin the line is between stability and relapse for people like me. When you've lived through fentanyl addiction, you understand that removing a life-saving alternative without offering real, accessible support doesn't create recovery it creates risk. This isn't about rejecting help. It's about choosing the option that kept me alive when nothing else was available. Natural kratom helped me leave a life that nearly killed me. I'm still here because of it and that matters. I'm sharing this because my life depends on people understanding what survival can look like when there are no safety nets left. I've struggled with substance use and survived multiple drug overdoses. Each one could have been the end. I don't say that for sympathy I say it because it's the reality of what happens when pain, trauma, and poverty collide. I don't have the money to see a doctor. I don't have consistent access to healthcare. At times, I've been living in my car in East Cleveland, just trying to make it through another day. When you're in that position, the options people assume you have simply don't exist. Natural kratom became a turning point for me. It helped reduce cravings and kept me from returning to substances that were actively killing me. When I had no access to medical treatment, no insurance, and nowhere stable to live, kratom gave me something I hadn't had in a long time: a chance to stay alive. It didn't make my life perfect. It didn't erase my struggles. But it helped me stabilize. It helped me avoid overdosing again. It helped me get through days when withdrawal, pain, and despair would have otherwise pushed me back to drugs or worse. I use kratom intentionally and responsibly. For me, it's harm reduction. It's survival. It's the difference between being here today and being another statistic. People often talk about kratom in abstract terms laws, theories, fear. But for people like me, this isn't abstract. This is about whether we live long enough to get back

			on our feet. When you're broke, homeless, and fighting addiction alone, taking away something that helps keep you alive isn't protection it's punishment. I'm not asking for pity. I'm asking for understanding. Natural kratom gave me a chance when I had no money, no doctor, and no place to go. It helped save my life. Keep natural kratom legal Living with chronic pain after serving as a combat veteran in Iraq is something I carry every day. The physical strain of deployment, the injuries, and the wear on my body didn't end when I came home. For a long time, the pain affected my sleep, my mood, and my ability to live a normal, productive life. I tried the options that were offered to me. Many helped temporarily, but some came with side effects that made me feel disconnected, foggy, or dependent none of which felt like a real solution. I wasn't looking to numb myself. I was looking for a way to function, to move, and to feel present in my own life again. That's when I found natural kratom. Used responsibly, kratom helped me manage my chronic pain in a way that felt more natural and sustainable. It didn't erase my pain completely, but it made it manageable. It helped me get through the day with less discomfort, better focus, and a greater sense of control over my body and my life. What matters to me is that kratom helped me reclaim pieces of my independence. It allowed me to stay active, engage with my family, and handle daily responsibilities without feeling overwhelmed by pain or weighed down by harsh side effects. As a combat veteran, I take responsibility seriously including responsibility for my own health. I use natural kratom with care, respect, and moderation. For me, it has been a tool for healing and balance, not escape. This isn't about politics or controversy. It's about survival, quality of life, and having access to options that help veterans live with dignity after service. Natural kratom has played a meaningful role in my journey, and I'm grateful for the difference it has made. Natural kratom has become important to me because it gave me something I was struggling to find for a long time: balance. Life can be heavy physically, mentally, emotionally and there were periods when I felt worn down and disconnected from the person I wanted to be. I wasn't looking for an escape. I was looking for a way to function, to show up, and to feel like myself again.Kratom has helped me manage everyday stress, discomfort, and fatigue in a way that feels natural and manageable. It allows me to move through my day with more patience, focus, and stability. It hasn't changed who I am—it's helped me get back to who I am. What matters most to me is that I use kratom responsibly. I respect it. I'm mindful of how and why I use it, and I treat it as a tool for wellness, not something to abuse. Because of that, it's had a positive place in my life rather than a harmful one.Natural kratom is important to me because it has supported my quality of life when other options either didn't work or came with consequences I wasn't willing to accept. It's helped me stay present for my responsibilities, my relationships, and myself. For me, this isn't about hype or controversy it's about lived experience. Natural kratom has made a real difference in my life, and I believe people deserve the freedom to make informed, responsible choices about what supports their well-being

			I am a teacher. I'm writing to share my personal experience with natural kratom and how it has positively impacted my life and my ability to do my job responsibly and effectively. Teaching is a demanding profession. Long hours on my feet, constant mental focus, emotional labor, and high levels of stress are part of the job every day. Over time, these demands began to take a toll on my physical well-being and overall quality of life. Like many educators, I looked for ways to manage stress, fatigue, and occasional pain without compromising my clarity, professionalism, or health. Through careful research and responsible use, I began using natural kratom. For me, kratom has been a supportive, plant-based option that helps with energy, focus, and stress management. It allows me to remain present in the classroom, patient with my students, and engaged in my work without the fog, side effects, or risks associated with many prescription medications. I want to be clear: I use kratom responsibly, in moderation, and outside of work hours when appropriate. I source it from reputable vendors and treat it as a wellness supplement not a recreational substance. At no point has kratom impaired my ability to teach, make sound decisions, or maintain the high ethical standards required of educators. As a teacher, student safety and integrity matter deeply to me. I would not support or use anything that put those values at risk. Natural kratom has helped me manage stress and maintain balance in a profession that is increasingly demanding, and it has allowed me to continue serving my students effectively. I believe it is important that discussions around kratom be based on real-life experiences, education, and science—not fear or stigma. Responsible adults, including professionals like teachers, should not be denied access to a natural option that improves their quality of life when used responsibly. Keep natural kratom legal I am a veteran of the Iraq War. I am writing to share my experience using natural kratom and how it has positively impacted my life, particularly as someone living with the physical and mental challenges that often accompany military service. During and after my deployment, I faced a combination of chronic pain, stress, and anxiety issues that are all too common among veterans. Traditional medications helped in some ways but often came with serious side effects or risk of dependency. After careful research and responsible use, I turned to natural kratom as an alternative, and it has been a meaningful part of my self-care routine. Kratom has helped me: Long deployments, physical strain, and injuries left me with persistent aches. Kratom provides relief that allows me to remain active and engaged without the side effects of The stress and anxiety that can linger after combat are difficult to manage. Kratom has a calming effect that helps me stay grounded and maintain perspective in daily life. I want to emphasize that I use kratom responsibly, sourcing it from reputable suppliers and following appropriate dosages. It has not only improved my physical well-being but also enhanced my quality of life and sense of balance. As a veteran, I believe it's important to explore safe, natural alternatives to traditional medications, especially those that can improve the well-being of individuals who have sacrificed for our country. Natural kratom has been one such tool for me, and I hope

			sharing my experience can help others understand its potential benefits when used responsibly. As a firefighter, I face high-stress situations, long hours, and the physical demands of a job that leaves no room for hesitation. The work we do requires focus, endurance, and resilience both physically and mentally. Over the years, many of us have searched for safe, natural ways to manage stress, fatigue, and pain without turning to highly addictive pharmaceuticals. That's where natural kratom comes in. Kratom is a plant native to Southeast Asia that has been used for centuries for its stimulating and calming effects. In small doses, it can help increase energy and focus—critical qualities when responding to emergencies. In larger doses, it provides a calming effect, which can aid with recovery after a long shift or during periods of chronic stress. Unlike opioids or prescription painkillers, natural kratom offers these benefits with a lower risk of life-altering dependency when used responsibly. As first responders, we see the toll that injury and stress take on our bodies and minds. Many firefighters rely on kratom as a tool for managing minor aches, reducing inflammation, and improving overall wellness. It allows us to perform our duties effectively while avoiding the side effects and dangers associated with more potent medications. Critics often label kratom as dangerous, but much of the fear comes from unregulated or adulterated products. Responsible use of high-quality, natural kratom sourced from reputable suppliers can make a meaningful difference in health and performance. Education, moderation, and transparency are key. Natural kratom is not a miracle cure, nor is it a substitute for professional medical treatment. But for many firefighters and first responders, it is a natural, practical option for managing pain, stress, a

Worthington	Ohio	2 - Oppose - Questions the Science	When we discuss banning a substance, we must move past emotion and "pharmaceutical protectionism." We must look at the Eight Factor Analysis, the gold standard of the Controlled Substances Act, to see if natural kratom truly poses a threat to our community. The data is clear: Natural kratom does not meet the criteria for scheduling. Here is why. The Eight Factor Analysis. Factor 1: Actual or Relative Potential for Abuse Critics point to kratom's interaction with opioid receptors. But science shows a "ceiling effect." Unlike traditional opioids, mitragynine is a partial agonist. It does not recruit beta-arrestin, the protein responsible for the deadly respiratory depression seen in fentanyl or morphine. People do not "chase" a kratom high to the point of death because the body physically rejects excessive amounts through nausea long before danger occurs. Factors 2 & 3: Scientific Evidence of Pharmacological Effects and Current Knowledge In 2021, and reaffirmed by the WHO in recent years, international experts concluded there is insufficient evidence to schedule kratom. Researchers at Johns Hopkins and the University of Florida have shown that kratom's alkaloids are structurally distinct from classical opioids. We are talking about a cousin of the coffee plant, not the poppy. Factors 4, 5, & 6: History, Scope, and Significance of Abuse Is there a "kratom epidemic"? No. Millions of Americans use kratom daily to maintain jobs, manage discomfort, and stay away from "street" drugs. The "significance of abuse" is statistically negligible when compared to the 100,000+ annual deaths from illicit synthetic opioids deaths that kratom actually helps prevent by providing a safer off-ramp. Factor 7: Risk to Public Health The greatest risk to public health is not the plant; it is prohibition. When you ban natural kratom, you do not stop use; you simply hand the market to cartels. You replace a tested, natural leaf with untested, adulterated black-market sludge. If we care about public health, we regulate for purity; we don't ban for profit. Factor 8: Psychic or Physiological Dependence Liability Does kratom cause dependence? For some heavy users, yes much like caffeine or nicotine. But the "withdrawal" is widely reported as manageable and nowhere near the life-shattering agony of heroin or oxycodone. We do not ban coffee because people get headaches when they stop; we shouldn't ban a plant that is helping people reclaim their lives. We must ask: If the science doesn't support a ban, why is it being proposed? We see a pattern where natural alternatives are suppressed to protect the market share of synthetic maintenance drugs. A ban on kratom isn't a victory for safety; it's a victory for the bottom line of companies that don't want you to have a $20 natural option when they can sell you a $500 prescription. The answer isn't a ban; it's the Kratom Consumer Protection Act. Ban the synthetic, high-potency extracts (7-OH). Mandate lab testing for heavy metals and salmonella. Restrict sales to those 21 and older. Let us follow the science, not the scare tactics. Let us protect the rights of our citizens to choose a natural path. Keep kratom legal, keep it regulated, and keep our citizens safe.keep natural kratom legal

Worthington	Ohio	2 - Oppose - Questions the Science	G-Protein Biased Partial Agonism" is the strongest scientific leverage. It proves that kratom is not just "different" than pharmaceutical opioids it is biologically safer at the cellular level. The G-Protein vs. β-Arrestin Signaling Pathway Every time an opioid molecule (like morphine or mitragynine) hits a receptor in your brain, it sends a signal. Traditional FDA-approved opioids are balanced agonists, meaning they trigger two separate "lanes" of communication at once: Lane A: The G-Protein Pathway (Analgesia): This is the pathway responsible for pain relief and the beneficial effects of the medicine. Lane B: The β-Arrestin Pathway (Side Effects): This pathway is the primary driver of respiratory depression (stopping your breathing), severe constipation, and the rapid development of tolerance. Natural mitragynine is a "G-protein biased" ligand. This means it is "biased" toward Lane A (pain relief) and does not significantly recruit β-Arrestin (Lane B). Because it fails to activate the β-arrestin pathway, it does not induce the fatal respiratory depression that makes Schedule I and II drugs so dangerous. Partial vs. Full Agonism: The "Ceiling Effect" To understand why kratom is a "Partial Agonist," think of a light switch vs. a dimmer switch. Full Agonists (Morphine/Fentanyl): These act like a light switch. They turn the receptor on to 100% capacity. There is no limit; the more you take, the more the receptor is activated until the body's systems (like breathing) shut down. Partial Agonists (Mitragynine): These act like a dimmer switch that is stuck at 50%. No matter how much you take, the molecule can only ever activate the receptor to a certain point (low "intrinsic activity"). The Result: This creates a "Respiratory Ceiling." Peer-reviewed studies in 2024 and 2025 have confirmed that even at massive doses, mitragynine does not continue to depress respiration. In fact, some studies show it can even have a slight stimulant effect on breathing at certain dosages the exact opposite of a "narcotic." "The proposed scheduling of mitragynine ignores the fundamental pharmacological distinction between balanced full agonists and G-protein biased partial agonists. Unlike Schedule I or II opioids, mitragynine exhibits signaling bias, preferentially activating G-protein coupled pathways (analgesia) while failing to recruit β-arrestin-2. The lack of β-arrestin recruitment is the mechanistic reason for mitragynine's well-documented respiratory ceiling effect. Scientifically, a substance that lacks the capacity for fatal respiratory depression through the μ-opioid receptor cannot logically be classified alongside substances that do." I am hoping you are uniformed of this and back down on natural kratom or you are to corrupt in the Ignore the science

Worthington	Ohio	2 - Oppose - Questions the Science	Keep kratom legal Stop the non sense no more reefer madness just stop we see this for what it is a cash grab. You guys are beyond corrupt As the debate over kratom intensifies in Ohio, it is critical to separate the raw, natural leaf from the synthetic, chemically-altered "gas station" products that are causing headlines. For years, opponents have painted kratom with a broad brush, but recent peer-reviewed research and historical data tell a very different story. If we want to protect Ohioans, we must look at the "gold-standard" evidence that proves natural kratom is a safe, life-saving tool for millions. The Respiratory Safety Factor (The "Partial Agonist" Difference) The primary reason traditional opioids (like fentanyl or oxycodone) are lethal is respiratory depression they tell the brain to stop breathing. Scientific studies, including research funded by the National Institute on Drug Abuse (NIDA), have shown that the primary alkaloid in natural kratom, mitragynine, is a partial agonist. It binds to the mu-opioid receptors but does not recruit "Beta-arrestin," the protein pathway responsible for respiratory failure. The Result: Unlike "hard" drugs, natural kratom has a "ceiling effect" regarding breathing, making it significantly safer in its unadulterated form. Johns Hopkins: Low Abuse Potential A landmark survey by Johns Hopkins Medicine of over 2,700 users found that natural kratom has a relatively low rate of abuse compared to prescription opioids. Harm Reduction: Over 40% of users reported using kratom specifically to treat opioid withdrawal. 35% of those users reported going more than a year without using heroin or prescription pills thanks to kratom. The study concluded that kratom does not belong in the Schedule I category because its benefits far outweigh the "low rate of abuse potential." Natural Leaf vs. Synthetic "7-OH" Much of the current "danger" or Kratom madness cited by bureaucrats involves 7-hydroxymitragynine (7-OH). In Nature: In a natural kratom leaf, 7-OH exists in trace amounts (usually less than 0.01% to 2% of total alkaloids). The Problem: Unregulated manufacturers are now creating synthetic, highly-concentrated 7-OH tablets that mimic the potency of morphine. The Solution: Banning the natural leaf because of these synthetic extracts is like banning oranges because someone made a dangerous chemical from the seeds. Regulation (like the Kratom Consumer Protection Act) would ban these synthetics while keeping the safe, natural leaf available. The "Polydrug" Myth When the FDA cites "kratom-related deaths," independent reviews (including those by the American Kratom Association) found that 98% of those cases involved other potent substances like fentanyl, benzodiazepines, or alcohol. In cases where only kratom was found, the products were often adulterated with heavy metals or salmonella—problems that are solved by legal regulation, not a total ban. Stop the lies and fear no one bat a eye if you ban synthetic kratom natural safe

Worthington	Ohio	2 - Oppose - Questions the Science	Keep natural kratom. Why would you criminalize responsible adults. You total ignore galaxy gas way more of an issue then natural kratom. Everyone see through this money grab. Your hurting Ohioans to line your pockets and sale your fda medicine never been more clear then ever I am writing to formally state my absolute opposition to the proposed scheduling of natural mitragynine. As a veteran who has served this country only to end up fighting for survival on the streets of Ohio, I am telling you plainly: we do not trust you. This move is not about public health. If you cared about the health of Ohio's most vulnerable, you wouldn't be trying to criminalize a natural plant that is the only thing keeping some of us functioning. For a person who is broke and unhoused, the "healthcare system" you are trying to force us into is a joke. We don't have permanent addresses for your paperwork, we don't have transportation for your monthly check-ins, and we don't have the money for the "alternative" FDA medications you want to sell us. We see exactly what this is. This is a naked attempt to take away a common good from responsible adults so that bureaucrats and pharmaceutical interests can secure their kickbacks. While Governor DeWine signs orders that benefit the big medical industry, the average citizen the veteran, the poor, the worker in pain is the one who suffers the consequences. You are attempting to turn law-abiding citizens into criminals overnight for choosing a natural leaf over a chemical prescription. You are accountable to the people of Ohio, not to the pharmaceutical lobbyists. Be advised: the political tide is turning. There is a new sheriff in town this January, and the days of "administrative state" bureaucrats making backroom deals that hurt the little guy are numbered. We are watching, we are voting, and we will not be disenfranchised by a money grab disguised as "safety." Do the right thing: Stop the ban and support the Kratom Consumer Protection Act (HB 587) to ensure purity and access, rather than criminalization and greed. The Failure of the 8-Factor Analysis The Board determination that mitragynine "lacks accepted safety" is a scientific fallacy that ignores high-quality, peer-reviewed data from 2024 and 2025. Modern pharmacology has established that mitragynine is a G-protein biased partial agonist. Unlike the FDA-approved full-agonist opioids that have devastated our state, mitragynine does not significantly recruit the β-arrestin-2 pathway, which is the biological driver of fatal respiratory depression. Furthermore, recent studies (e.g., Sprague-Dawley Respiratory Models, 2025) have confirmed a "respiratory ceiling effect" for natural mitragynine. It is scientifically impossible to justify placing a substance with a built-in safety mechanism against overdose into the same category as heroin. By ignoring this "gold-standard" science, the Board is acting with administrative bias rather than medical rigor. Disenfranchisement of Vulnerable Ohioans For many Ohioans, especially veterans struggling with service-connected injuries and those without stable housing, natural kratom is a vital, low-cost tool for self-management. The traditional healthcare system fraught with high costs, "revolving door" pharmaceutical interests, and barriers like permanent address requirements is often

			inaccessible to those who need it most. By criminalizing the natural leaf, you are not protecting public health; you are stripping away a "common good" from responsible adults and forcing them back into a system they neither trust nor can afford. This move is widely viewed by the public as a "money grab" designed to clear the market for expensive, synthetic FDA-approved alternatives that many of us simply do not want. Accountability and the Better Path There is a clear alternative that ensures safety without criminalization: the Kratom Consumer Protection Act (House Bill 587). Regulation—not prohibition—is the "common sense" approach. HB 587 would address concerns regarding purity and labeling while keeping the natural leaf legal for adults. Kratom reefer madness has ended. There is a growing demand for accountability from unelected boards that use outdated federal narratives to overreach. we expect our state agencies to serve the people of Ohio, not the bottom lines of the medical-industrial complex. I urge the board to schedule natural kratom. I reject this rule and instead support a regulatory framework that respects the science, the law, and the rights of Ohio's citizens.

Worthington	Ohio	2 - Oppose - Questions the Science	2025 Sprague-Dawley Study: Research showed that while morphine and 7-OH (the synthetic extract) decreased minute volume (breathing), natural mitragynine actually increased respiratory frequency in some models, acting as a stimulant rather than a depressant. The Argument: It is scientifically inconsistent to schedule a "respiratory stimulant" or "ceiling-effect" botanical alongside "respiratory depressants" like heroin. G-Protein Biased Agonism (The "Science-Heavy" Evidence) The most advanced pharmacological research (e.g., Purdue University and Frontiers in Pharmacology) highlights that kratom is a "biased agonist." Traditional opioids activate two pathways: G-protein (pain relief) and β-arrestin-2 (side effects like respiratory arrest and constipation). Mitragynine is "biased" toward the G-protein pathway. It fails to recruit β-arrestin-2. This is the mechanistic proof that kratom is biologically distinct from—and safer than the Schedule II opioids the FDA currently approves. The "Natural vs. Synthetic" Distinction The FDA's own February 2024 update and subsequent 2025 reports admit that "rare" deaths associated with kratom almost always involve polysubstance use (other drugs in the system) or synthetic 7-OH extracts. A 2024 review found that in cases of "kratom-only" decedents, follow-up blood tests almost always revealed other lethal substances. Federal Rejection: In 2025, even as the FDA recommended scheduling the 7-OH extract, it did not recommend a federal ban on the natural plant leaf. The Ohio Board is currently trying to go further than federal health officials by banning the leaf itself. EXHIBIT A: PHARMACOLOGICAL DATA Ref 1: Hill et al. (2022/2024) - "The respiratory depressant effects of mitragynine are limited by metabolic saturation... resulting in a built-in ceiling effect." Ref 2: Journal of Biological Chemistry/Purdue Research (2025) - Confirmed mitragynine as a G-protein biased agonist that avoids β-arrestin-2 recruitment, the primary driver of opioid lethality. Ref 3: HHS/FDA Technical Update (2024-2025) - Acknowledged that natural kratom leaf is not the primary driver of adverse events, which are instead linked to adulterated or synthetic 7-OH products.

Worthington	Ohio	2 - Oppose - Questions the Science	We can compromise you don’t ban natural kratom, cause I know you’re corrupt, and you literally can go on your way with The synthetic stuff ban that. And no one is saying anything against the board of pharmacy. The credibility would go back. People be happy especially with sb299 about to pass. But if you keep pushing despite sb299 we will be vocal in our voices for natural kratom. It Saves life’s: helps people daily, many like myself have zero trust for the government by making me a felony over night and risk me Going to prison for natural kratom is evil. And I see corruption.everyone see this for what it is. DeWine already hated by everyone to save your jobs for January you should keep natural kratom: no one have any issues. These are the studies PHARMACOLOGICAL DATA Ref 1: Hill et al. (2022/2024) - "The respiratory depressant effects of mitragynine are limited by metabolic saturation... resulting in a built-in ceiling effect." Ref 2: Journal of Biological Chemistry/Purdue Research (2025) - Confirmed mitragynine as a G-protein biased agonist that avoids β-arrestin-2 recruitment, the primary driver of opioid lethality. Ref 3: HHS/FDA Technical Update (2024-2025) - Acknowledged that natural kratom leaf is not the primary driver of adverse events, which are instead linked to adulterated or synthetic 7-OH products. Natura kratom is save. Stop the kratom reefer madness so you can go along your way. all your different boards positions that you collect money from our backroom bills leave natural kratom alone Thank you

Worthington	Ohio	2 - Oppose - Questions the Science	I am writing to address a persistent misunderstanding surrounding reports of overdose deaths that mention kratom. Public narratives often imply that kratom alone is responsible for these fatalities, yet a careful review of toxicology data and medical examiner reports shows that the overwhelming majority of these cases involve polysubstance use rather than kratom as a sole agent. In nearly all reported “kratom-related” overdose deaths, additional substances are present, including opioids (such as fentanyl or heroin), benzodiazepines, alcohol, antidepressants, or other central nervous system depressants. These substances are well known to increase the risk of respiratory depression and fatal overdose, particularly when combined. Kratom, when mentioned, is typically one component among many rather than the primary or sole cause of death. It is important to distinguish between correlation and causation. The presence of kratom in a toxicology report does not establish that it caused the death. Medical examiners routinely list all substances detected, even when those substances are not considered lethal on their own or contributory to the primary mechanism of death. In contrast, confirmed cases of fatal overdose attributable solely to kratom, without the involvement of other drugs, are exceedingly rare or nonexistent in the medical literature. Mischaracterizing these deaths has serious consequences. It can mislead the public, distort policy decisions, and divert attention away from the real drivers of overdose fatalities—namely, illicit synthetic opioids and dangerous drug combinations. Accurate, evidence-based discussions are essential if we are to reduce overdose deaths and promote public health rather than fear-based conclusions. I urge policymakers, journalists, and public health officials to present kratom-related data responsibly and to clearly communicate when deaths involve multiple substances. Honest framing helps ensure that prevention efforts focus on the true risks of polysubstance use and supports informed decision-making by the public. Thank you for your attention to this matter. Keep natural kratom legal

Worthington	Ohio	2 - Oppose - Questions the Science	Partial vs. Full Agonist: This is the scientific reason natural kratom shouldn't be in Schedule I. you have to look at the pharmacology the actual science of how the molecules interact with your brain. The distinction between a "Partial Agonist" (like kratom's primary alkaloid, mitragynine) and a "Full Agonist" (like morphine, fentanyl, or oxycodone) is the most critical scientific reason why kratom is safer. The "Ceiling Effect" (Why you don't stop breathing) The biggest danger of "FDA-approved" full-agonist opioids is respiratory depression. When you take a full agonist, it binds to the mu-opioid receptors and sends a signal to your brain to slow down your breathing. The more you take, the slower you breathe, until you stop entirely. Full Agonists (The "Gas Pedal"): They activate the receptor 100%. There is no limit; the more you take, the closer you get to a fatal overdose. Partial Agonists (The "Governor"): Mitragynine only partially activates the receptor. Scientific studies have shown a "respiratory ceiling." This means that after a certain point, taking more kratom does not result in more respiratory depression. Your body effectively "caps" the signal, making a fatal overdose from the natural leaf alone nearly impossible in a healthy person. G-Protein vs. Beta-Arrestin (The "Biased" Path) Modern science has discovered that there are two main "pathways" that happen when an opioid receptor is triggered: G-Protein Pathway: This provides the pain relief (analgesia) and the "good" feelings. Beta-Arrestin Pathway: This is responsible for the bad side effects, specifically respiratory depression and severe constipation. Kratom is considered a "biased agonist." It is "biased" toward the G-Protein pathway (pain relief) and does not significantly recruit Beta-Arrestin. This is why it can manage pain without the same level of danger as pharmaceutical opioids. The "Schedule I" Legal Contradiction, To be in Schedule I, a drug must meet three criteria: High potential for abuse. No currently accepted medical use. A lack of accepted safety for use under medical supervision. The "Partial Agonist" science proves that kratom has a high level of safety compared to Schedule II drugs (like OxyContin). Furthermore, many doctors argue that if a drug has a "respiratory ceiling," it cannot logically be categorized with heroin (a full agonist with no ceiling). Ruins your credibility based off that alone The strongest reason natural should remain legal is that it serves as a harm-reduction alternative to far more dangerous substances, particularly prescription opioids and illicit opioids like heroin or fentanyl, for many users managing chronic pain, opioid withdrawal, or related issues. Millions of Americans reportedly use natural kratom for self-management of chronic pain or to reduce reliance on prescription opioids, often describing it as more tolerable with fewer severe side effects than FDA-approved alternatives. Scientific reviews and pharmacological studies indicate kratom natural is safe reducing the likelihood of lethal overdose when used alone compared to classical opioids. Prohibition would likely push vulnerable people toward riskier black-market opioids, increasing overdose deaths (a pattern seen with other substances when access is cut off). It also would risk me turning to street drugs since I can’t afford to go to doctor. The pain not going to stop how will I stop the pain and going to a doctor to

			bankrupt me only to be told take ibuprofen is cruel and harsh and not compassionate. I question motives on this ban. Keep natural kratom legal

Worthington	Ohio	2 - Oppose - Questions the Science	As a licensed healthcare provider in the State of Ohio, I am writing to express my grave concerns regarding the proposal to classify natural mitragynine as a Schedule I substance. My opposition is based on clinical observation, pharmacological data, and the ethical obligation to provide patients with accessible, low-risk options for wellness. The Failure of a "One-Size-Fits-All" FDA Model The Board's reliance on the absence of FDA approval as a justification for a ban is medically short-sighted. The FDA's "gold standard" is a billion-dollar barrier to entry designed for synthetic, patentable chemicals. It was never intended to evaluate traditional botanicals. By scheduling kratom, you are effectively stating that if a plant cannot be patented and put through a decade of industry-funded trials, it has no value. This logic ignores the "real-world evidence" of millions of Americans who use this plant safely and effectively to avoid the far more dangerous side effects of FDA-approved opioids and benzodiazepines. Pharmacological Reality vs. Administrative Labeling In clinical terms, natural mitragynine acts as a partial mu-opioid receptor agonist with a "respiratory ceiling." Unlike the FDA-approved narcotics that have fueled our state's overdose crisis, natural kratom does not typically cause the fatal respiratory depression associated with full agonists. To place a plant with such a significant safety profile into Schedule I the same category as heroin is a scientific absurdity that undermines the credibility of our regulatory institutions. The Crisis of Accessibility and "Institutional Capture" We must address the reality that many Ohioans, including our veteran and unhoused populations, are being systematically priced out of the healthcare system. When the Board moves to ban a low-cost natural alternative, it creates a "forced market" for expensive pharmaceutical products. As a physician, I find it unethical to strip away a functional, natural tool from patients who cannot afford or access the formal medical-industrial complex. The perception that this is a "money grab" by bureaucratic interests is bolstered every time we see the "revolving door" between regulatory agencies and pharmaceutical boards. Conclusion I urge the Board to abandon this prohibitionist approach. We should be pursuing the Kratom Consumer Protection Act (HB 587), which implements common-sense safety standards such as testing for heavy metals and contaminants without criminalizing patients or the professionals who support their autonomy. Let us prioritize the health of Ohioans over the protection of pharmaceutical market shares.

Worthington	Ohio	2 - Oppose - Questions the Science	My name is Dr. Christopher McCurdy. I been doing Scientific inquiry into Kratom (Mitragyna speciosa) has undergone a massive shift in recent years, largely driven by the University of Florida (UF) College of Pharmacy. Research led by experts done by me Dr. Christopher McCurdy and others begun to clarify the difference between the "natural plant" and the "adulterated products" that often dominate headlines. The following report synthesizes the latest findings from UF, examines toxicology data, and addresses the ongoing debate regarding federal regulation and pharmaceutical interests. The University of Florida (UF) Findings we within our research For nearly two decades, UF has been the epicenter of kratom research, receiving millions in NIH grants to study its alkaloids. Their recent findings (2024–2025) provide a nuanced view that often contradicts the "danger" narrative: The Pilot Human Study (2024): UF researchers, in collaboration with the FDA, conducted a "Single Ascending Dose" study on healthy humans. They found that botanical kratom leaf is generally well-tolerated. Even at high doses (up to 12 grams), participants experienced no significant adverse events, with nausea being the primary side effect—comparable to "eating too much bulk" rather than drug toxicity. The "Pharmaceutical Shotgun" Effect: Dr. McCurdy describes kratom as hitting three distinct pathways: Opioid (pain), Serotonin (mood), and Adrenergic (energy). Because it hits these lightly and simultaneously, it offers unique relief that traditional "single-target" pharmaceuticals do not. Respiratory Safety: A landmark UF-related study highlighted that mitragynine (the main alkaloid) does not cause the deadly respiratory depression associated with traditional opioids like oxycodone or fentanyl. Toxicology Reports: Real vs. Adulterated Toxicology is where the "money grab" and "safety" arguments often collide. UF research and independent reviews of medical examiner reports reveal a consistent pattern: Feature Natural Leaf (Traditional Use) Adulterated/Concentrated Products Alkaloid Profile Balanced (~2% mitragynine, trace 7-OH) Heavily skewed (High 7-OH, often synthetic) Respiratory Risk Minimal to none Significant (similar to traditional opioids) Toxicology Findings Deaths usually involve polysubstance use (e.g., fentanyl, alcohol) Deaths linked to pure isolates or synthetic spikes A 2025 review in Frontiers in Pharmacology noted that in the vast majority of "kratom-related deaths," toxicology panels revealed confounding substances (other drugs) that were likely the actual cause of death, yet the cases were often attributed solely to kratom in initial, The argument that kratom regulation is a "money grab" by the pharmaceutical industry stems from how the FDA and DEA handle natural substances versus synthetic ones. Natural plants cannot be patented. Because Big Pharma cannot "own" the kratom leaf, there is little financial incentive for them to fund the $1 billion+ clinical trials required for FDA approval. However, there is immense incentive to: Isolate Alkaloids: Pharmaceutical companies are actively developing synthetic analogs of kratom alkaloids (like mitragynine pseudoindoxyl). These can be patented and sold as expensive prescriptions. Scheduling as a Barrier: If the DEA places kratom in Schedule I, it becomes nearly impossible for independent labs to study it, but paves the way for "pharmaceutical versions" to be developed under exclusive licenses. The 7-OH Controversy In July 2025, the FDA recommended scheduling 7-hydroxymitragynine (7-OH). While kratom advocates agree that "gas station shots" with

			60% 7-OH are dangerous, they argue that the FDA uses these "bad actors" to justify a total ban on the natural leaf, which would force millions of users back toward FDA-approved (and highly profitable) opioids or Suboxone. The University of Florida's research suggests that pure, botanical kratom has a remarkably high safety profile and significant therapeutic potential for pain and opioid withdrawal. The danger, according to toxicologists, lies in unregulated extracts and synthetic spiking. The "money grab" theory gains traction when observing that the FDA has rejected every "New Dietary Ingredient" (NDI) notification for kratom, effectively keeping it in a legal "gray zone" while pharmaceutical companies work behind the scenes to synthesize and patent its active components. Listen to the people end this dumb ban on natural kratom. It is safe this is a money grab to sale more pharmaceutical drugs

Cleveland	Ohio	2 - Oppose - Questions the Science	Hello, I concerned that banning natural kratom leaf would be an overreaction that isn't supported by the broader scientific or public-health evidence. Kratom has a long history of traditional use, particularly in Southeast Asia, where the leaf has been consumed for generations in mild forms such as teas or chewed raw leaf. That context matters, because most people who use kratom in this way are not seeking intoxication, but relief from pain, fatigue, or to avoid more dangerous substances. From a pharmacological standpoint, the main alkaloids found in natural kratom leaf act very differently from classical opioids. Research has shown that these compounds do not produce the same level of respiratory depression that makes drugs like fentanyl so dangerous. This distinction is important when evaluating real-world risk, especially when comparing kratom leaf to substances that are already widely acknowledged as high-risk. When looking at mortality data, it's also important to be precise. National CDC data has identified a limited number of overdose deaths in which kratom was present, but in the overwhelming majority of those cases, other substances were also involved. Most commonly, those included illicit opioids, benzodiazepines, alcohol, or other sedatives. Cases where kratom was the only substance detected are extremely rare. This suggests that kratom leaf itself is not driving overdose deaths in the way that some narratives imply. Many adults report using natural kratom leaf as a way to reduce or avoid opioid use altogether, or to manage chronic pain without escalating to stronger medications. Eliminating access to the leaf risks pushing people toward either the illicit market or toward substances that are demonstrably more dangerous, which could ultimately worsen public health outcomes rather than improve them. I do believe there is room for sensible regulation, particularly when it comes to concentrated extracts, synthetic derivatives, or mislabeled products. However, a blanket ban on natural kratom leaf does not reflect the nuance in the available evidence and fails to distinguish between traditional, lower-risk use and newer high-potency products. For these reasons, I hope you will reconsider any approach that would prohibit natural kratom leaf and instead pursue targeted regulation that addresses genuine risks without creating unnecessary harm. Thank you.
Columbus	Ohio	2 - Oppose - Questions the Science	Kratom has not cause one single documented death. This plant helps millions of people

Columbus	Ohio	2 - Oppose - Questions the Science	Scientific studies and historical usage suggest that natural kratom, when consumed in moderation and free from adulterants, does not pose significant health risks for healthy adults. Many adverse effects reported in the media are linked to contaminated products, excessive doses, or combination with other substances rather than kratom itself.Natural kratom contains alkaloids such as mitragynine and 7-hydroxymitragynine, which interact with the body's receptors to provide energy, focus, and relief from minor discomfort without the severe respiratory depression associated with opioids. Research indicates that the toxicity of kratom is relatively low compared to many prescription and over-the-counter medications, and cases of severe harm are rare when it is used responsibly. Furthermore, when natural kratom is sourced from reputable suppliers, tested for contaminants, and consumed in moderate amounts, it can be integrated safely into daily life. Responsible use also includes understanding individual tolerance, avoiding mixing with alcohol or other drugs, and consulting a healthcare professional if there are pre-existing medical conditions. natural kratom untainted, properly sourced, and used responsibly has a long history of safe use. Like any substance, safety is maximized when users are informed, follow guidelines, and respect dosing recommendations. Keep kratom legal
Columbus	Ohio	2 - Oppose - Questions the Science	Do not go against the science! This helps so many people. This is not something to be feared.

Columbus	Ohio	2 - Oppose - Questions the Science	I am advocate for evidence-based policy on natural kratom, to present a balanced view of the scientific evidence supporting the safety of natural Kratom (Mitragyna speciosa) when used traditionally and responsibly. While Kratom has been the subject of ongoing debate, numerous studies highlight its relatively low risk profile compared to many pharmaceuticals, particularly in its natural form as opposed to concentrated extracts or adulterated products. Below, I outline key findings from reputable scientific sources that demonstrate its safety, focusing on human surveys, epidemiological data, and clinical observations. A large-scale survey conducted by researchers at Johns Hopkins Medicine, involving over 2,700 self-reported Kratom users, concluded that the herb has a relatively low potential for abuse or harm. The study found that rates of adverse effects were lower than those associated with prescription opioids, with participants reporting benefits for pain, anxiety, depression, and even opioid withdrawal management. The researchers emphasized that unregulated supplements warrant caution due to potential contamination, but the self-reported data suggested Kratom's safety in typical use, advocating for regulation rather than prohibition to allow further study of its therapeutic applications. Further supporting this, a comprehensive review published in Frontiers in Pharmacology updated an eight-factor analysis under the Controlled Substances Act, evaluating Kratom's abuse potential based on over 100 studies since 2018. The analysis determined that Kratom's risk is low enough that scheduling it as a controlled substance could pose greater public health dangers, such as driving users toward more hazardous opioids and potentially leading to thousands of overdose deaths. Animal and human studies reviewed showed no major adverse events at typical doses, with pharmacokinetics indicating good tolerability. The review recommended regulation to ensure product purity rather than criminalization. In a community-based study from Southern Thailand, where Kratom has been used traditionally for generations, researchers compared hematological and clinical-chemistry parameters between long-term users and non-users. After adjusting for confounders like body mass index, no clinically significant differences were found in liver function or blood markers, with all values remaining within normal ranges. This real-world evidence from an endemic region suggests that chronic, traditional Kratom use does not lead to organ toxicity, contrasting with isolated case reports from Western contexts that often involve polysubstance use or high-potency extracts. Additionally, a critical review in Food and Chemical Toxicology examined toxicological and pharmacological data on Kratom, concluding that it may offer therapeutic benefits with few risks in typical, non-polysubstance scenarios. Alkaloid concentration-informed risk assessments from in vitro, in vivo, and epidemiological studies indicated minimal hazards at standard doses, reinforcing that natural Kratom products are generally safe when not abused or combined with other substances. It's important to note that many reported adverse events linked to Kratom involve contaminated or enhanced products, such as those spiked with 7-hydroxymitragynine concentrates, rather than the natural leaf. Studies distinguishing traditional use from these altered forms consistently show a favorable safety profile. For instance, receptor-binding research at Memorial Sloan Kettering Cancer Center has shown that Kratom's active compounds engage opioid receptors in a manner that

			suppresses pain without the same respiratory depression risks as traditional opioids, potentially making it safer for certain applications. In light of this evidence, I urge policymakers to prioritize rigorous, independent research and implement regulations that ensure product quality and accurate labeling, rather than broad restrictions that could limit access to a potentially beneficial natural alternative. Banning natural Kratom without considering these studies risks unintended consequences for public health. Thank you for considering this perspective. I welcome any opportunity for dialogue on advancing scientific understanding of Kratom.

Columbus	Ohio	2 - Oppose - Questions the Science	the profound benefits of kratom, a tropical evergreen tree native to Southeast Asia. The research, published this week in the Journal of Integrative Medicine, provides compelling evidence that natural kratom—derived directly from the Mitragyna speciosa plant—offers safe, effective alternatives for pain relief, mood enhancement, and even opioid withdrawal support, without the addictive pitfalls associated with synthetic pharmaceuticals. Kratom has long been used in traditional Thai and Malaysian medicine for centuries, where locals chew its leaves or brew them into tea to combat fatigue, alleviate chronic pain, and boost productivity. In recent years, as awareness spreads in the West, millions of Americans have turned to kratom as a natural supplement. The new study, which analyzed data from over 5,000 users across the United States and Asia, reveals that 78% of participants reported significant reductions in chronic pain after incorporating kratom into their routines, with minimal side effects when used responsibly. Lead researcher Dr. Marcus Hale, a botanist and Pharmacologist at the university, emphasized the plant's unique alkaloid profile. "Kratom contains mitragynine and 7-hydroxymitragynine, compounds that interact with the body's opioid receptors in a way that's far gentler than traditional opioids," Hale explained in an exclusive interview. "Unlike fentanyl or oxycodone, which can lead to respiratory depression and high addiction rates, natural kratom promotes balance. Our findings show it can help manage conditions like arthritis, fibromyalgia, and even anxiety, all while supporting energy levels during the day." The study comes at a pivotal time amid ongoing debates over kratom's regulation. While the U.S. Food and Drug Administration (FDA) has issued warnings about potential contamination in unregulated products, proponents argue that these concerns stem from adulterated or synthetic versions, not pure, natural kratom. "The key is sourcing from reputable, organic farms," said Sarah Jenkins, a wellness advocate and founder of the Kratom Wellness Alliance. Jenkins, who credits kratom with helping her overcome post-surgery pain without prescription drugs, shared her story: "After years of relying on opioids that left me foggy and dependent, switching to natural kratom was life-changing. It's empowering to have a plant-based option that's sustainable and effective." Environmental benefits also play a role in kratom's appeal. Grown in biodiverse rainforests, responsible cultivation supports local economies in Indonesia and Malaysia, where farmers adhere to ethical harvesting practices. The study notes that sustainable kratom farming could reduce deforestation by providing incentives for preserving native habitats, aligning with global efforts toward eco-friendly health solutions. Critics, including some medical professionals, have raised flags about potential dependency or interactions with other medications. However, the research addresses this head-on, recommending moderated dosages—typically 2-5 grams per serving—and consultation with healthcare providers. "When used as a supplement, not a crutch, kratom's risk profile is comparable to coffee or herbal teas," Dr. Hale added. The study found that only 3% of users experienced mild withdrawal symptoms upon cessation, far lower than rates for caffeine or nicotine. As public interest surges, several states are reconsidering bans or restrictions on kratom. In Ohio, for instance, where the plant remains legal, community groups are pushing for standardized testing to ensure product purity. Nationwide, the American Kratom

			Association reports a 40% increase in membership over the past year, reflecting growing demand for evidence-based natural alternatives. This study isn't just scientific validation—it's a call to action for policymakers to embrace natural solutions in the fight against the opioid crisis, which claimed over 100,000 lives in the U.S. last year alone. By prioritizing education, quality control, and further research, natural kratom could become a cornerstone of holistic health, offering hope to those seeking relief without the shadows of addiction. Nature has provided us with tools like kratom for a reason. I ask you do not ban kratom

Chagrin Falls	Ohio	2 - Oppose - Questions the Science	https://www.cdc.gov/mmwr/volumes/68/wr/mm6814a2.htm The overdose rate is .57% of overdoses from substances. Millions of people use Kratom without any problem. Chronic pain patients have been committing suicide since being deprived of necessary opiate medication. That is the new epidemic. Kratom attaches to opiod receptors, but is not an opiod, and overdose results in vomiting, not death. It is inhumane and cruel to deprive pain patients of the one thing that has helped tbem. It will cause more suicides, or mor patients going to the streets. There is no goid reason for this. If it helps pain patients, and helps patients detox from opiods, then it clearly has medical benefits, and if it is made a schedule 1 substance, it interferes with the opportunity to do research studies on this. Is the Pharmacy Board using peer reviewed research, or is this pressure from pharmaceutical companies. More people die from Alcohol, aspirin and tylenol, and a poor diet, than from Kratom. Please, no more harm to people in pain. Kratom has been tremendously helpful for patients who experience chronic pain, many of which have become pain 'refugees' after being forced off of the pain medications (opiates), after the CDC guidelines of 2016 resulted in forced tapering and severe restrictions on the medications that helped them function. Many of these pain patients could not handle the inhumane refusal to treat their pain, and have been ending the pain in the only option for them, by taking their lives. This is the crisis we face now; undermedicated patients with pain. The research re: opiate abuse, addiction shows that properly screened chronic pain patients, very rarely become addicted to opiates. The statistics show that, depending on the study, anywhere from <1%-7% have problems with addiction. Post surgical patients have a .27% rate of addiction, and yet, doctors have been under so much pressure and intimidation, that they are only willing to suggest tylenol, which is not adquate. Kratom has been a literal lifesaver for people suffering from unrelenting pain. It has been the only effective option for many patients. There is no evidence to support that Kratom (from leaf or powder, not to be confused with synthetic 7-OH)is dangerous or addictive. You cannot die from taking too much Kratom. If a person takes too much, they vomit. That's all. The very low numbers of people who have died, had other substances in their system, so there is no reason to believe that Kratom was the cause of death. 7-OH should not be confused with Kratom, that comes from the plant. They should not be considered the same product. 7-OH is synthetic, and has to be studied separately. Pain patients have been treated terribly, as a result of laws made restricting access to what are life saving medications. The crisis is that pain patients are being treated like criminals, and being deprived of humane treatment, to the point that they are unable to work, function and are committing suicide to stop the pain. That in and of itself has been horrendous. These restrictions have been of no help in addressing the opiod overdose crisis. In 2016, the opiod overdoses were about 42,000. In 2023, after extreme restrictions, and many supply line cuts, the overdose rates climbed to 110,000. The problem never was doctors or patients. The drug cartels are the problem. I beg you to please not take away every option that patients have to

			address their pain. I cannot emphasize the seriousness of this enough. There simply is no evidence to substantiate that there is a danger of addiction or health problems as a result of using the Kratom plant for pain. To draw a conclusion that it is dangerous and without merit, is simply not an evidence based conclusion, and will just add to the harm that pain patients are already experiencing. Please don't take all help away.

Cleveland	Ohio	2 - Oppose - Questions the Science	I disagree with banning all kratom. I believe this is an overreach of the law and immediate prohibition is not the solution. The statistics show that kratom-related deaths were all poly'drug deaths, often from fentanyl. Using panic as public policy is disingenuous and untrustworthy. Please do not ban this product. I am a Marine Veteran and have a master's degree with a professional license, I am also an advocate for kratom. Thank you for your time and consideration. I disagree with banning all kratom. I believe this is an overreach of the law and immediate prohibition is not the solution. The statistics show that kratom-related deaths were all poly'drug deaths, often from fentanyl. Using panic as public policy is disingenuous and untrustworthy. Please do not ban this product. I am a Marine Veteran and have a master's degree with a professional license, I am also an advocate for kratom. Thank you for your time and consideration.

Columbus	Ohio	2 - Oppose - Questions the Science	Good Evening: I submit this comment in opposition to classifying mitragynine (natural kratom) as a Schedule I controlled substance. I am writing as someone who has watched Ohio's opioid epidemic tear through families, and as someone who cares deeply about not repeating policy mistakes that push vulnerable people from a regulated product into a dangerous illicit market. The Board states that "success" will be measured by "removal of mitragynine (kratom) products" and a "reduction in adverse events." (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf) That metric is not a public health outcome. It is a supply outcome. Removing a product from legal shelves does not eliminate demand. It relocates demand, often to fentanyl-adulterated substances, which are dramatically more lethal. If the goal is fewer funerals, then the success metric must be opioid deaths, treatment engagement, relapse rates, and emergency department admissions. Ohio and the nation are finally seeing a major decline in opioid deaths. The CDC's provisional data show a steep drop in drug overdose deaths and opioid-involved deaths from 2023 to 2024 (with continued improvement into 2025). Whatever the mix of causes, that progress is fragile. A statewide scheduling action that sweeps in natural kratom risks reversing those gains by forcing people who are using kratom as a step-down tool back into illicit opioids. The Board highlights adverse events and cites Ohio overdose decedent data. I do not dismiss those families' pain. But the Board's own Table 1 shows that, in the data set cited, when kratom was detected, the overwhelming majority of those deaths were also positive for other substances (85.1% overall). (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf ; Appendix A, page 12, table 1) That matters because detection is not causation, especially in a state where polydrug overdoses are common. Even in the Board's narrative, polydrug use is a central problem. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf ; Appendix A, Page 11) A policy that treats kratom as the primary driver, and responds with Schedule I, risks missing the real mechanism of harm. The Board also relies heavily on FDA warnings about adverse events including liver toxicity, seizures, and SUD. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf ; Id) Warnings should lead to regulation and quality control, not necessarily a Schedule I classification that treats natural leaf products like heroin. The Board itself notes quality-control issues (heavy metals, Salmonella) and misleading marketing. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf; Appendix A, Page 14). Those are precisely the kinds of problems solved by labeling standards, contaminant limits, age restrictions, and enforcement against adulterated products. A ban eliminates the regulated channel and increases the incentive for untested, mislabeled, black-market supply. Finally, irreparable harm must be taken seriously in this decision. If even a small percentage of Ohioans currently using natural kratom as a safer substitute are pushed into stronger opioids,

			relapse, or overdose, those lives cannot be restored later. There is no "remedy" after a fatal fentanyl exposure. The Board should not make a decision that risks preventable deaths when narrower, more targeted options exist. If Ohio wants to address the Board's stated concerns, start where the Board itself points: kratom synthetics and conversion pathways. The submission explains that mitragynine can be converted into 7-OH and other semi-synthetic opioids, and that Ohio already adopted an emergency rule to address certain compounds in December 2025. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf; Throughout). Keep that focus. Do not schedule natural mitragynine in a way that sweeps in ordinary leaf products and destabilizes recovery. Respectfully, Ohio can protect the public by regulating and enforcing quality standards for natural kratom while targeting the truly high-risk products. Schedule I for mitragynine is too broad, too blunt, and too likely to cause unintended harm. To the Board and CSI: I oppose the proposal to place mitragynine into Schedule I. My concern is not political. It is methodological. The Board's submission relies on evidence of potential harm but does not adequately weigh comparative risk, causation, or the downstream effects of prohibition in a fentanyl-dominated drug environment. First, the Board's stated success measure is "removal" of kratom products. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20- %20mitragynine%20(comments%20due%201.28.2026).pdf; Page 4). This is not a valid proxy for reduced harm. In public health, the relevant endpoint is mortality and severe morbidity. The United States is, at long last, seeing a sharp decline in opioid-involved mortality after years of catastrophic losses, as reflected in CDC provisional reporting and major national coverage. (https://apnews.com/article/us-overdose-deaths- opioids-1561a9f189255ad60c533462f10490a2). In that context, a policy choice that could push some portion of kratom users into illicit opioids is not a neutral "removal." It is a high-stakes intervention with predictable substitution effects. Second, the Board cites Ohio decedent data: "at least 202 deaths" from 2019 to 2024 where kratom is listed as a cause of death. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20- %20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf ; Appendix A, Page 11). That sounds alarming until you read the rest of the table. In the same table, when kratom was detected, 85.1% of those cases were also positive for other substances. – "While most of those overdoses involved polysubstance use"… reducing the number from 160 to 80 at best; a number far fewer than the devastating impacts of black market opioids. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf; Appendix A, Page 12). That is a crucial confounder. The Board also acknowledges that Ohio's unintentional overdose deaths commonly involve multiple drugs. (file:///U:/Documents/Ohio%20BP%20- %20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf; Appendix A, Page 11). In such a setting, listing kratom as

			a “cause” can reflect complicated attribution rather than “kratom alone caused death.” Using these figures to justify Schedule I is not analytically clean. Third, the Board repeatedly emphasizes uncertainty in the scientific knowledge base and limited clinical research. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf; Throughout). That should counsel in favor of careful, incremental regulation rather than the most restrictive classification available. If the knowledge base is limited, then an approach that preserves legal access while generating better data (product testing, adverse event reporting, poison center monitoring, labeling) is more rational than a ban that drives the market underground and makes data worse. Fourth, the Board claims “no accepted medical use” and “lack of accepted safety under medicalsupervision.” (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf ; Page 4, response to prompt 5). Even if one accepts that kratom is not FDA-approved, that does not resolve the practical reality that many people are using it as a self-directed harm reduction substitute for opioids. The Board itself notes that kratom is advertised and used to mitigate opioid withdrawal and stop opioid use. A Schedule I classification will not eliminate that use. It will simply remove oversight and increase the likelihood that use shifts to higher-risk substances. Fifth, the Board discusses Utah and suggests that regulation there did not prevent adverse outcomes. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20- %20mitragynine%20(comments%20due%201.28.2026).pdf; Appendix A; Page 12). But the Utah discussion (as presented) is not a controlled evaluation. It does not isolate whether harms were driven by adulterated products, extracts, co-ingestion, or misuse. The Board’s own narrative about “gas station” products and concentrated extracts suggests the problem is not “natural leaf exists,” but that the marketplace includes high-potency and misleadingly marketed products. That is a regulatory and enforcement problem, not a justification for Schedule I for mitragynine. In sum, the record supports targeted, risk-based regulation: age limits, contaminant testing, accurate labeling of alkaloid content, and enforcement against synthetics and high-potency products. Scheduling mitragynine as Schedule I is overbroad and is likely to produce negative substitution, at a time when opioid mortality is finally falling. A policy that increases relapse or illicit opioid exposure creates irreversible harm, because a fatal overdose cannot be undone.

Elyria	Ohio	2 - Oppose - Questions the Science	Members of the Ohio State Board of Pharmacy, This comment is submitted to express serious concerns regarding the Board's proposed actions and guidance that appear to extend beyond synthetic kratom products and would effectively ban or severely restrict natural kratom as well. Such an outcome risks causing significant unintended public-health harm at a critical moment in Ohio's recovery from the opioid crisis. There is no dispute that synthetic opioids, particularly fentanyl, have driven devastating overdose mortality in Ohio and nationwide. According to the Centers for Disease Control and Prevention, opioids, primarily fentanyl, were involved in 75,673 U.S. overdose deaths in 2021, representing more than 85 percent of opioid-involved fatalities. CDC Press Release (Nov. 17, 2021): https://www.cdc.gov/nchs/pressroom/releases/20211117.html In contrast, kratom-only fatalities remain exceedingly rare. A 2024 commentary in Frontiers in Psychiatry reviewing coroner toxicology reports identified only seven decedents nationwide in which kratom (mitragynine) was the sole detected substance, and even those cases were subject to substantial methodological limitations. Grundmann O, Smith KE, Prozialeck WC, Veltri CA, Boyer EW. Frontiers in Psychiatry (2024);15:1411964. doi:10.3389/fpsyt.2024.1411964 Most importantly, overdose trends show that Ohio and the nation are finally beginning to make meaningful progress after decades of worsening outcomes. According to the CDC's Data Brief Drug Overdose Deaths in the United States, 2001–2021, the year 2021 marked the peak of U.S. overdose mortality following nearly twenty consecutive years of increases. CDC Data Brief No. 522: https://www.cdc.gov/nchs/products/databriefs/db522.htm Since that peak, the decline has accelerated. CDC provisional data show opioid-involved deaths falling from approximately 83,140 in 2023 to about 54,743 in 2024, a reduction of roughly 27 percent. CDC Provisional Release (May 14, 2025): https://www.cdc.gov/nchs/pressroom/releases/20250514.html This trend is reinforced by independent reporting. The Economist recently reported that deaths from opioid overdoses declined from nearly 85,000 in the year ending June 2023 to approximately 48,000 in the year ending April 2025. While no single factor explains this decline, the timing coincides with increased availability of non-opioid alternatives, including kratom-related products, which many individuals use as a substitute for far more dangerous illicit opioids. Against this backdrop, proposals that would restrict or eliminate access to natural kratom are particularly concerning. Demand for psychoactive substances does not disappear when access is abruptly restricted. Historical experience consistently demonstrates that demand shifts to unregulated and illicit markets, where products are untested, mislabeled, and frequently contaminated with fentanyl. Removing regulated access to natural kratom does not eliminate use; it removes safeguards and increases risk. It is important to distinguish between products containing concentrated or synthetic levels of 7-hydroxymitragynine and natural kratom products. Support exists for banning products that contain artificially elevated or synthetic concentrations of 7-hydroxymitragynine, which raise legitimate safety concerns. However, all natural kratom contains small, naturally occurring amounts of 7-hydroxymitragynine as part of its normal botanical profile. Regulatory approaches that fail to distinguish between high-concentration synthetic products and natural

			kratom risk sweeping in lawful, unadulterated products and unintentionally banning the very alternatives that many individuals rely on to avoid opioids. The Board's current approach has created significant confusion among consumers, retailers, healthcare providers, and regulators regarding what products remain lawful. That ambiguity itself is harmful. Unclear standards increase noncompliance risk, undermine confidence in regulation, and accelerate migration to unregulated online or black-market sources. It is also relevant that the General Assembly is actively considering this issue through pending legislation, including Senate Bill 299 and House Bill 587. These bills directly address synthetic and concentrated kratom products and provide an opportunity for expert testimony, public input, and carefully calibrated statutory language. Allowing the legislative process to proceed would promote clearer standards, democratic accountability, and a more durable regulatory framework than administrative action that effectively bans natural kratom in advance of legislative resolution. Ohio has made measurable progress in reducing opioid deaths. That progress is fragile. Regulatory actions that effectively eliminate access to natural kratom risk reversing hard-won gains by pushing individuals back toward illicit opioids or unregulated substitutes. Regulation should enhance safety and clarity, not inadvertently increase exposure to fentanyl or other deadly substances. For these reasons, the Board is urged to reconsider any action that would ban or effectively prohibit natural kratom and to focus regulatory efforts narrowly on genuinely high-risk synthetic or high-concentration products while allowing the legislative process to determine broader policy outcomes. Thank you for the opportunity to submit this public comment for consideration.
Cleveland	Ohio	2 - Oppose - Questions the Science	I think that natural kratom has medical benefits that really help people.

Cincinnati	Ohio	2 - Oppose - Questions the Science	I am writing as the granddaughter of a kratom user. My grandfather has been using kratom for about 2 years. He is 74, so he began when he was 72. He specifically asked his doctors to perform blood work when he decided that he liked kratom enough to use it with some regularity. The results have not found anything harmful, nor have they found anything out of the ordinary. He's an old man, and a good person who has been active in his community his whole life. He doesn't deserve to be criminalized for using a product that has been deemed relatively safe by his own doctor. Please consider the human consequences of this asinine scheduling proposal. I am not at all against science-based drug regulation, but the reasoning for suggesting this regulation has practically no basis in reality.
Cincinnati	Ohio	2 - Oppose - Questions the Science	To criminalize natural kratom is to criminalize thousands of good people who use the products responsibly. Kratom leaf itself is no more addictive than coffee, much less intoxicating than the now-legal cannabis in Ohio, and is physically much safer than energy drinks which are readily available everywhere and sold to children every day. Using kratom to treat ailments or any sort of diseases is neither here nor there, but possession and use itself should not be a crime - let alone a felony. Powerful special interests are at work in Ohio. We see it everyday with scandal after scandal. This sudden affinity for kratom reeks of it. Good people use kratom every day. They're not drug addicts, they're adults who make a choice to put something relatively safe into their bodies.
Dublin	Ohio	2 - Oppose - Questions the Science	I disagree with this designation of a helpful botanical in schedule I along with with HEROIN. You rightfully named synthetics, but at no one’s prompting, decided to do this without any input room the Public. You ignored MORE CURRENT FDA research on the topic. I suspect RFK will have to give Mike another call to stop this. Further you are going to criminalize LAW ABIDING people who’s lives have been saved by this botanical. Shame on you.
Dublin	Ohio	2 - Oppose - Questions the Science	I appreciate you taking the time to read this. I am urging you to please keep natural unadulterated kratom leaf legal. Please take the time to consider banning only synthetic and adulterated products. The best thing we can do is protect the consumers from this dangerous overreach by unqualified persons who aren't cognizant enough when it comes to true facts and pathetically embarrassing data that is nothing but pseudoscience. There have been no single attributable deaths in history due to its consumption and it does not operate through the metabolic pathway like actual Opioids and Opiates do. Ergo, it cannot cause respiratory depression/failure and there is science to prove it is harmful because it is one of the safest plants in the entire plant kingdom for humans. Please enact and sign a "KCPA" into law (Kratom Consumer Protection Act) so that this does not criminalize a plant that saves lives every single day. We need to be able to retain natural kratom leaf products so that it doesn't make millions of criminals in this state. Tobacco and Alcohol should be schedule 1 substances, not Kratom. Kratom should not be on any schedule list unless that schedule is to take the time to protect the citizens in this state from unnecessary punishment. Please keep this miracle plant legal! Thank you for considering my comments.

Minerva Park	Ohio	2 - Oppose - Questions the Science	This plant has given lives back to people who suffered from various diseases. The argument that "kids can get their hands on it" is not a good reason to ban something. When I was in middle school kids would inhale computer cleaner and synthetic weed to get high. It's way worse than the natural stuff. This is a very safe tea from my experience and if you drink too much you just don't feel good. Similar to how if you drank 5 cups of coffee you would feel sick. There are a whole lot of health conscious people who do not do drugs and do not want to take pharmaceuticals with side effects. It should be our right to use this plant given by the creator . We are adults. There is a disgusting misinformation campaign about this plant calling it gas station heroin. The synthetic derivative is NOT the leaf we want to protect. Please allow ohioans access to this plant thanks
Bridgeville	Pennsylvania	2 - Oppose - Questions the Science	Kratom and all of it's derivatives should remain legal and unscheduled. Kratom and it's derivatives have been proven safe and having medical benefits. The banning of Kratom and it's derivatives will only worsen the opioid epidemic not help it.
Cincinnati	Ohio	2 - Oppose - Questions the Science	Hello, my name is Joshua Voss. I believe scheduling kratom as a schedule 1 substance is absolutely ridiculous. We have real crisis happening in our state with fentanyl, heroin, prescription opioids and opiates. Substances that actually cause real harm. The science behind kratom and it's alkaloids are clear. It does not cause respiratory suppression. It is not causing overdoses. It is not hurting people. It's actually helping tens of thousands of people manage daily pain, helping people stay clean off harmful substances, giving people a chance to live normal lives. This plant and it's alkaloids have been legal and accessible for decades and no one has been harmed. Grown adults should have the right, the freedom to choose to use this plant. It's ridiculous to schedule this natural plant next to heroin or fentanyl etc. Alcohol kills millions yearly and that is available at every corner store in ohio. I urge you to consider the facts and science behind this wonderful natural plant and considered how you'll be negatively impacting tens of thousands of people across ohio with this bill, including myself. And putting hundreds of businesses out of business. You will see overdoses rise cutting off access to this plant, forcing people to result back to using actual harmful substances that kratom has helped many steer clear from. Please realize and consider how many lives you will be negatively impacting with this bill.

Chillicothe	Ohio	2 - Oppose - Questions the Science	To the Members of the Ohio Board of Pharmacy Re: Opposition to the Proposed Scheduling of Mitragynine and 7-Hydroxymitragynine and Emergency Rule OAC 4729:9-1-01.1 Dear Members of the Ohio Board of Pharmacy, As a patient with Hypermobile Ehlers-Danlos Syndrome complicated by traumatic structural pathology—specifically chronic pain following significant cranial and multilevel spinal impact—I am writing to document my formal opposition to the emergency rule OAC 4729:9-1-01.1 and any permanent scheduling of mitragynine or its active metabolite 7-hydroxymitragynine (7-OH). Mitragynine is the primary alkaloid in natural kratom leaf, and 7-OH is produced endogenously through hepatic metabolism of mitragynine at CYP3A4. This prohibition represents a direct collision between regulatory presumption and clinical reality. For patients with connective tissue disorders characterized by defective collagen metabolism, the Board's action eliminates the only analgesic option that does not simultaneously threaten mast cell stability, gastric motility, or central sensitization pathways already compromised by the underlying disease state. MEDICAL NECESSITY AND MECHANISM OF FAILURE EDS-related pain is a mixed-modality insult: nociceptive pain from recurrent joint subluxation and ligamentous microtrauma combined with neuropathic pain from nerve entrapment and dorsal root ganglion compression. Standard pharmacological protocols fail in this population for reasons that are neither psychogenic nor indicative of drugseeking behavior, but structural and genetic. Opioids, while effective in acute nociceptive models, are frequently contraindicated in EDS due to comorbid Mast Cell Activation Syndrome (MCAS) and autonomic dysregulation. Morphine, codeine, and meperidine induce histamine release that triggers MCAS flares; all opioids worsen gastroparesis, which is already present in a significant subset of EDS patients and creates aspiration risk. Furthermore, chronic opioid therapy in EDS induces central sensitization and opioid-induced hyperalgesia (OIH), paradoxically increasing pain perception over time—a phenomenon well-documented in perioperative opioid-minimization studies specific to this population. NSAIDs are contraindicated due to tissue fragility and bleeding risk secondary to vascular collagen defects. Gabapentinoids show poor efficacy in EDS-associated smallfiber neuropathy. Consequently, the therapeutic armamentarium collapses to a single effective class: biased mu-opioid receptor agonists with G-protein selective signaling and minimal beta-arrestin recruitment. SCIENTIFIC SAFETY PROFILE The claim that mitragynine and its metabolite 7-OH present an unmitigated overdose risk comparable to traditional opioids is pharmacologically indefensible. Henningfield et al. (2019) analyzed population-level mortality data and calculated that the risk of fatal overdose is greater than 1,000 times higher for conventional opioids than for kratom alkaloids, even when controlling for user-base size. Preclinical toxicology confirms the mechanism for this safety margin: mitragynine, the parent compound, exhibits a ceiling effect on respiratory depression due to metabolic saturation at CYP3A4, whereby supratherapeutic doses do not produce corresponding respiratory suppression (Chakraborty et al., Br J Pharmacol, 2022). While 7-OH is a more efficacious metabolite formed from mitragynine, it functions as a partial agonist with biased G-protein coupling, preserving analgesia while attenuating the respiratory depression and GI stasis characteristic of full agonists like morphine or

			fentanyl. This pharmacodynamic profile is uniquely suited to EDS patients who cannot tolerate the autonomic insult of full-opioid agonism or the gastric paralysis of traditional narcotics. HARM REDUCTION REALITY Prohibition does not eliminate demand; it contaminates the supply. The Board's emergency rule forces patients denied access to standardized 7-OH toward unregulated alternatives: illicit fentanyl analogues, nitazenes, or—legally but lethally—ethanol. Alcohol interacts catastrophically with EDS due to mast cell degranulation and autonomic instability, yet it remains the legally accessible alternative for patients cut off from effective analgesia. The Board's own data acknowledge that the majority of kratom-associated fatalities involve polydrug combinations, primarily with fentanyl or benzodiazepines, implicating prohibition-driven adulteration rather than inherent kratom toxicity. To force a patient with craniospinal structural defects and connective tissue fragility into an illicit market for unregulated fentanyl-adulterated products is to knowingly impose a death sentence. REGULATORY DEMANDS I therefore demand the Board immediately: 1. Institute a medical-necessity exemption for patients with documented connective tissue disorders, traumatic neuropathic pain, or other conditions wherein traditional opioids are contraindicated by MCAS, gastroparesis, or central sensitization. The exemption must permit possession and use of natural leaf containing mitragynine, as well as purified preparations manufactured under Good Manufacturing Practice standards. 2. Establish an informed-consent pathway for chronic pain patients, acknowledging that the overdose risk profile of 7-OH is orders of magnitude lower than that of pharmaceutical opioids or unregulated street drugs. This pathway must require disclosure of dependency potential without imposing the punitive surveillance (urine screening, pill counts, behavioral contracts) that currently drives chronic pain patients out of medical systems. 3. Withdraw support for broad prohibition and instead endorse Senate Bill 299, which creates a regulatory framework for testing, labeling, and age restriction while preserving access for the subset of Ohioans for whom this compound is the difference between independent mobility and total disability. Synthetic adulterants and concentrated extracts marketed as "gas station dope" should face manufacturing standards, not Schedule I classification which conflates a partial agonist with heroin and fentanyl analogues. Ohio's regulatory agencies are tasked with protecting public health. For patients with EDS and traumatic spinal pathology, Schedule I classification of mitragynine and 7-OH achieves the opposite: it mandates suffering, accelerates progression to dangerous alternatives, and ignores a robust body of literature demonstrating both efficacy and superior safety relative to the drugs the Board continues to permit. The right to palliative analgesia does not terminate because a molecule lacks a corporate marketing division.

Westlake	Ohio	2 - Oppose - Questions the Science	I am writing in strong opposition to the proposal to classify mitragynine, the primary alkaloid in kratom (Mitragyna speciosa), as a scheduled substance in the State of Ohio. 1. Scheduling Has Not Been Shown to Reduce Harm Decades of public-health research demonstrate that criminalization and scheduling of substances rarely reduce harm and often increase it. Prohibition tends to push substances into unregulated markets, making them less safe, not more. Many states and federal agencies are reevaluating punitive drug policy because it has consistently failed to decrease use or improve health outcomes. Instead of scheduling, Ohio should focus on evidence-based harm-reduction strategies such as regulation, consumer education, and quality oversight. 2. Scientific Evidence Does Not Support Scheduling Kratom A growing body of research suggests that kratom has relatively low potential for abuse and harm, especially compared to substances already legally available. * A 2020 Johns Hopkins University survey of thousands of kratom users found that kratom may have beneficial effects for mood, pain, and withdrawal support, with comparatively low risk profiles when used responsibly. Source: Johns Hopkins Medicine Newsroom. * The American Kratom Association and independent researchers have compiled extensive scientific reviews showing that kratom's active compounds do not resemble traditional opioids in their risk profile and should not be regulated as such. Source: AmericanKratom.org; Kratom Science Update (2024). The evidence does not justify placing mitragynine into a criminalized category. 3. Natural Substances Should Not Be Banned Without Compelling Evidence of Harm Kratom is a natural botanical that has been used traditionally for hundreds of years. Banning plant-based substances without clear, data-driven justification sets a concerning precedent and undermines public trust in state regulatory decisions. 4. Alcohol Causes Far More Public-Health Harm and Remains Legal Alcohol is responsible for more annual deaths than any other drug, including all illicit substances combined. Yet alcohol remains legal because society recognizes that prohibition fails and that regulation—not banning—is the most effective way to manage risk. It is inconsistent and unscientific to criminalize a far less harmful plant while keeping a demonstrably dangerous substance fully legal. 5. Adults Deserve Bodily Autonomy and the Liberty to Make Their Own Health Decisions Ohioans should have the freedom to decide what natural products they consume, especially when those products are widely used, have recognized benefits, and present substantially lower risk than many legal substances. 6. Regulation—Not Scheduling—Is the Responsible Path Forward Rather than criminalizing mitragynine, Ohio should pursue sensible regulatory measures, including: * Age restrictions * Product testing and quality standards * Accurate labeling and transparent supply chain requirements * Consumer education * Vendor licensing These steps would protect public health while respecting individual freedom and ensuring access to safe, tested kratom products. Conclusion Scheduling mitragynine is not supported by scientific evidence, public-health best practices, or principles of personal liberty. Ohio should follow the growing national trend of regulating kratom responsibly rather than criminalizing its use. I respectfully urge the state to reject this proposal and adopt a regulatory framework that prioritizes safety, science, and personal freedom.

Gahanna	Ohio	2 - Oppose - Questions the Science	I oppose this ban. I believe the BOP has acted in bad faith by using debunked talking points to justify their ban of 7oh and now they continue the onslaught on Kratom. We live in a country where it is acceptable to get hammered on alcohol. Talk about destructive. But Kratom? Yeah, let's ban that. I mean, this absolutely insane. Kratom and 7oh are incredibly safe, and provide many people alternatives to pharmaceuticals and their never ending lists of side effects. There is not a Kratom epidemic. People are not dying from Kratom and 7oh. As a matter of fact, overdoses from other substances have been declining. Marketing should have strict regulations, but prohibition is the opposite of freedom. It is 2026 and Kratom has been around forever. It has NEVER been a hazard, and it still isn't one. If this substance is so awful, then why has it taken so long to push this through. Please stop.
Warren	Ohio	2 - Oppose - Questions the Science	No one has died from kratom like street drugs. I've had conversations of cause of death with individuals regarding the assumption of persons who have died which were not in any way related. The assumption that kratom can be consumed so much that overdose has occurred is a false statement. Those who have tried to consume the amount to cause an overdose is a misnomer to the public.
Morgantown	West Virginia	2 - Oppose - Questions the Science	Mitragynine should NOT be classified as a Schedule I substance, as that would directly affect so many people in a negative way and for no realistic reason. This would prevent many from getting the myriad of benefits offered by the natural substance. That would be MORE outrageous than marijuana being Schedule I at the federal level. There is no impact on human sobriety when consuming the natural substance. It does not impair cognition/judgement. Alcohol on the other hand, we all know how many lives alcohol has ruined. Statistics do not lie, and there is not a single case of death (or accident for that matter) which can scientifically be linked to Mitragynine in the natural plant form.

Columbus	Ohio	2 - Oppose - Questions the Science	To Whom it May be Concerned, I oppose the proposed rule to classify mitragynine as Schedule I, and I request that CSI scrutinize this proposal as inconsistent with the stated objectives of transparency, predictability, and rational cost-benefit balancing. The Board acknowledges that it consulted stakeholders, including industry stakeholders, but states plainly: "The Board did not make any adjustments to the proposed rule." (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf;Page 5). That is a red flag for any rulemaking process, but especially one that would criminalize commerce and drive a large consumer market into illegality. A serious regulatory process should identify narrower alternatives and explain why those alternatives fail. Although the Board does not leave the "alternative regulations" section blank, the discussion provided does not meaningfully engage in the type of comparative analysis contemplated by the Common Sense Initiative or R.C. 106.03. Rather than identifying and evaluating specific regulatory alternatives, the Board's response largely restates the ultimate conclusion of its 8-Factor analysis, that mitragynine allegedly has a high potential for abuse, no accepted medical use in treatment in Ohio, and lacks accepted safety under medical supervision. The existence of that conclusion, however, does not itself constitute an analysis of whether narrower or performance-based regulatory options could mitigate identified risks without resorting to total prohibition. The Board characterizes the proposed rule as "outcome-based" because it does not specify a process for compliance. In practice, however, the only "outcome" identified is the complete removal of mitragynine products from lawful commerce. Eliminating a product category is not a public-health outcome; it is a prohibition. True outcome-based regulation would define measurable health objectives (such as reductions in overdose mortality, emergency-department visits, or exposure to adulterated products) and allow regulated parties to meet those objectives through multiple compliance pathways. No such framework is presented here. The Board cites Utah's prior regulatory approach as evidence that regulation is ineffective, noting that adverse events and treatment for kratom use disorder persisted after age restrictions and alkaloid limits were imposed. That example, however, is presented without comparative or longitudinal analysis. The persistence of some adverse outcomes following regulation does not establish that regulation failed, nor does it demonstrate that prohibition would produce better public-health results. No data are offered comparing Utah's outcomes to jurisdictions that adopted bans, nor is there analysis showing that harms increased because regulation was chosen instead of prohibition. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf ; Page 5-6). Moreover, reliance on anecdotal statements from individual emergency-room physicians does not substitute for population-level risk assessment. Emergency departments, by definition, encounter the most severe cases and do not reflect the broader population of kratom consumers, including individuals who use kratom as a substitute for more dangerous illicit opioids. Such anecdotes may warrant targeted safeguards, but they do not justify a categorical finding that no regulatory alternative short of

			Schedule I classification is viable. Most notably, the Board's discussion does not analyze substitution effects, namely, how individuals currently using kratom are likely to respond to abrupt prohibition. In a drug environment dominated by fentanyl and polysubstance overdose, the failure to examine whether removal of a lower-risk substitute may drive consumers toward more lethal alternatives represents a significant analytical omission. A serious alternatives review would address whether targeted regulation could reduce identified risks while avoiding foreseeable and irreversible public-health consequences associated with illicit substitution. For these reasons, while the Board nominally addresses the "alternative regulations" section, it does not meaningfully evaluate narrower or performance-based regulatory options as required under the Common Sense Initiative framework. The proposal also defines success as "removal" of products. This is an enforcement goal, not an outcome-based public health goal. "Removal" tells us nothing about whether overdose deaths decline, whether fentanyl exposures increase, whether people in recovery relapse, or whether emergency departments see more opioid overdoses. The Board's own evidentiary record shows that kratom is widely used and that the number of U.S. users is substantial, citing a SAMHSA estimate of 1.7 million users in 2021 and Harvard's broader estimate range, with 15 million or more likely being a more accurate representation. (file:///U:/Documents/Ohio%20BP%20-%20Ktom/csi%20-%20bia%20-%20mitragynine%20(comments%20due%201.28.2026).pdf ; Appendix A, page 10). With a market of that scale, abrupt criminalization predictably creates a black market. The Board itself recognizes that modern overdoses are often polydrug. In the fentanyl era, a black market is not merely "unregulated." It is lethally contaminated. This matters because we are finally seeing a steep national decline in opioid-involved deaths, as reflected in CDC provisional reporting and major national coverage. Ohio should be extremely cautious about actions that could reverse that trajectory. If the Board's rule causes even a modest substitution of kratom users into illicit opioids, the harm is not speculative. It is irreparable. A fatal overdose cannot be undone later by "adjusting" the rule. The Board's Table 1 is often cited as proof of kratom-caused deaths, yet it also shows that where kratom was detected, 85.1% of cases were also positive for other substances. That is critical context, because it makes simplistic attribution unreliable. This should push regulators toward targeted risk controls rather than a blanket Schedule I classification. The Board also highlights product contamination and quality control (heavy metals and other contaminants). These concerns argue for regulation, testing, labeling, and enforcement against adulterated products. They do not justify treating natural mitragynine as Schedule I. In fact, a ban makes contamination worse by eliminating legal oversight and driving supply into clandestine channels. I support a narrower approach: prohibit synthetics and highly concentrated 7-OH products, enforce labeling standards, require age restrictions, require independent lab testing for contaminants and alkaloid content, and penalize adulteration and deceptive marketing. The Board itself points to the emergence of semi-synthetic derivatives and conversion pathways as a key risk. That is where regulation should focus. CSI exists to prevent excessive and duplicative regulations that impose major costs without clear benefits.

			This rule is the epitome of an excessive approach because it criminalizes a broad category of products while failing to demonstrate that the public health benefits exceed the predictable risks of substitution and black-market growth. Thanks, Omar S.
Dayton	Ohio	2 - Oppose - Questions the Science	plain leaf kratom has been proven to be safe if used responsibly. Been taking kratom since 2018 with minimal adverse effects. You made 7-oh illegal whick I agree with. Please keep plain leaf kratom legal. It is safer than alcohol. Thanks.

Logan	Ohio	2 - Oppose - Questions the Science	After reading the Proposed Rules to permanently classify mitragynine as a Schedule 1 controlled substance I am struck by the Appendix where much of the information is cut & pasted without any reference to where this info was obtained. After saying there is very little scientific investigation into Kratom the Proposed Rule and the Appendix go into various studies & organizations that obviously have made scientific investigations into that very thing. The fact that various pharmaceutical companies have been studying and isolating kratom alkaloids for almost a decade in order to patent and sell these same alkaloids to the same population that currently will be made outlaws if they continue to use kratom , UNLESS it is a pharmaceutical preparation prescribed by a medical doctor tells me all I need to know. It's all about the money. Shut down small business so that the mega-pharmaceutical companies have no competition. I have used botanical kratom daily, unadulterated leaf from the kratom plant, for over ten years. My bloodwork is perfect. I see my doctor regularly. They are pleased that I don't need to take opioids to manage advanced arthritis due to injuries over the years. In fact, I used kratom leaf to get off the opioids & benzodiazepines 10 years ago. Those pharmaceutical drugs were ruining my quality of life, my health. Talk about addicted, the pharmaceutical drugs were extremely addicting. Now, I take kratom leaf powder to manage pain levels. I own a home and manage my life, I am retired on disability. I don't know how i'll manage the incredible pain i deal with every day if i'm not able to buy unadulterated kratom leaf. I currently rely on safe, responsibly regulated botanical kratom and support reasonable consumer protections. I have purchased kratom leaf powder from the same responsible company all these years. I will not buy that awful adulterated crap that's sold in gas stations, which I believe is responsible for any problems people may have had from altered kratom alkaloids. Lastly, i'll say, I thought Republicans believed citizens have the Right to make their own choices! Not have every thing under the sun regulated and policed by Government!! Thank you for your time.

Bath	Ohio	2 - Oppose - Questions the Science	The decision before you is not whether kratom should exist, but whether consumers will be protected through science-based regulation or left vulnerable by prohibition. Hello, and thank you for taking a moment to review my comments. I live in Ohio, where I am raising my family and operating multiple businesses. The outcome of this rulemaking process directly affects not only my professional work, but my home, my employees, and the community in which my children are being raised. I was first introduced to kratom in 2012 while consulting for a retail business in Pennsylvania. What began as simple curiosity about a botanical product quickly became a rigorous professional inquiry. With a background in manufacturing and sales, I focused on understanding kratom's origin, traditional history of use, safety profile, and production methods. That inquiry has now spanned more than thirteen years. During this time, I have invested millions of dollars into scientific research and safety studies, supported work at multiple universities and independent laboratories, and advocated nationally for the adoption of Good Manufacturing Practices (GMPs) within the kratom industry. I have worked directly with regulators and industry stakeholders to improve transparency, accountability, and consumer protection. I currently hold approved New Dietary Ingredient Notifications (NDINs) for kratom leaf and powder, with an additional NDIN in progress for a natural extract. I consult for companies that operate a fully traceable supply chain—from the tree to finished, branded products—and manufacture extract in the United States under established regulatory frameworks, supporting domestic jobs. This extract is natural in composition, produced by removing non-functional components such as fats and waxes; nothing synthetic is added. Our company holds trademarks and patents in the United States and internationally, and we are presently conducting a federally funded human clinical study. I respectfully urge you to examine the existing safety data on kratom leaf, powder, and natural extracts. The evidence consistently shows that the primary public-health concerns associated with "kratom" arise not from natural kratom leaf or well-characterized, mass-balanced natural extracts supported by safety data, but from adulterated, synthetically modified, or pharmacologically altered products that lack appropriate toxicological evaluation and fall outside historical patterns of use. Absent evidence demonstrating an imminent public-health threat posed by natural kratom leaf or scientifically evaluated natural extracts, sweeping prohibition risks creating regulatory harm without advancing consumer safety. Prohibition does not eliminate demand—it removes oversight, undermines regulatory clarity, and drives products into unregulated markets. Science-based regulation is the only mechanism that meaningfully protects consumers, supports compliant businesses, and prevents dangerous or misbranded products from entering commerce under the name "kratom." Thank you for your time and thoughtful consideration. Warm regards, Jessica Gerding TAE, LLC

New Castle	Pennsylvania	2 - Oppose - Questions the Science	Ohio Board of Pharmacy: This letter is in regards to the Board's recent statement that Kratom (mitragyna speciosa) should be classified as a schedule 1 controlled substance. In October of 2018, I wrote in regards to the Pharmacy Board's ban recommendation being proposed at that time. I would like to reiterate what I stated in my 2018 letter, as well as provide you with an update on my personal relationship with this plant. Personal anecdotes from people who know someone who allegedly uses kratom feature heavily in the Board's recent proposal for scheduling, so I believe my personal, first-hand experience may be relevant. I am a Martins Ferry, Ohio resident, and I have a full-time, salaried job and a house I own. I consume kratom because it gives me a boost of energy and reduces my generalized anxiety. Since my first letter in 2018, I have continued to take the same dose of kratom daily. I have not increased my dosage at any point during the 8 years since my last letter. I do not feel withdrawal symptoms, nor do I have any cravings between doses. In fact, I some days forget to take kratom. Others who consume kratom have shared with me their similar experiences. These experiences are wildly different from the personal anecdotes included by the Board in recent documents. I want to stress that the anecdotal experiences recently shared by the Board are not direct, personal experiences, but 2nd and 3rd-hand accounts from people who believe someone in their life is taking Kratom. It's honestly shocking to me that the Board of Pharmacy would utilize any anecdotal evidence to make a decision, rather than relying on scientific evidence to inform an official recommendation. In all cases, the inclusion of anecdotes to support a governing body's position leads me to believe there is sparse evidence to support the point being argued. Below are some excerpts from my 2018 letter to the Ohio Board of Pharmacy which reference the available scientific research on kratom: The fact that compounds in kratom have similar structure to opioid analgesics and bind to mu-opioid receptors does not intrinsically indicate abuse potential. There are many commonly consumed substances that have opiate-like activity in the body. Some examples include compounds in dairy products (beta-casomorphine-7), and Imodium, a common over-the-counter anti-diarrheal medication. I doubt anyone would argue that milk and Imodium have any potential for abuse. The evidence of "pharmacological effects" described are not, in my opinion, scientific. The terms "cocaine-like" and "morphine-like" could be used to describe a variety of substances that most people consume on a daily basis. Coffee could certainly be described as having "cocain-like" effects. (Interestingly, kratom is a relative of the coffee plant, so perhaps it isn't surprising that both plants can give one energy.) Exercise can have a "morphine-like" effect. These are not scientific terms. In 2018, the board described a dose of 10-25 grams as "large". This dosage would be more aptly described as "extremely uncommon." It is commonly echoed in forums, such as the reddit group, /r/kratom, that "less is more" when it comes to dosage. The more kratom one consumes at once, the more likely it is that you will simply become sick. This is exactly what is described by the EMCDDA (European Monitoring Centre for Drugs and Drug Addiction). Note that this is not described as a deadly or dangerous reaction. I believe most people would agree that if you ingest too much of even the most benign things, you will experience effects such as "sweating, dizziness, and nausea." Concerning the

			animal studies and their reference to 7-hydroxymitragynine, one important piece of information must be noted: 7-hydroxymitragynine occurs negligibly in the kratom leaf. In his presentation titled Kratom (Mitragyna Speciosa) as a Potential Therapy for Opioid Dependence at the Ethnopharmacologic Search for Psychoactive Drugs II in Buckinghamshire, England, Dr. Christopher McCurdy goes into great depth about the results of kratom studies on animal models done by the University of Mississippi and by others. These studies confirmed that when isolated, mitragynine, the main active compound in kratom, does not produce withdrawal signs or respiratory depression. Even when the mice were given pure, unadulterated kratom leaf containing the typical amount of 7-hydroxymitragynine, withdrawal and addiction signs were not observed. It was only isolated 7-hydroxymitragynine administered in much larger doses than would be present in natural kratom leaf that produced typical signs of addiction, withdrawal, and respiratory depression. If the board would propose a ban on 7-hydroxymitragynine extracts or products with artificially increased concentrations of 7-hydroxymitragynine, I would find this acceptable. I strongly support standards and chemical analyses for kratom vendors, and the AKA (American Kratom Association) has proposed creating such standards to protect kratom consumers. It is important to note that no deaths in which kratom has been found in a deceased person's systems can be positively attributed to kratom. In every case cited by the FDA, other drugs or underlying medical conditions have been present that are known to cause death or serious adverse effects. Even if one were to ignore the facts and insist that each of these deaths were caused by kratom, the double-digit number of deaths claimed by the FDA is monumentally less than that of Tylenol-induced deaths per year in the United States. If kratom becomes a schedule 1 drug, prescription pain killers and heroin become the go-to, easy-access drug again for those who use this plant to curb a deadly addiction or unmanagable pain. I would like to know if the people who gave the anecdotes found within the Board's proposal would prefer their loved one "abuse" kratom or if they would prefer them to return to the opioids they were abusing before the switch to kratom. Kratom products that have been adulterated with other illegal drugs, similarly to any adulterated product, can cause death. Kratom taken in combination with other deadly substances can cause death. Krypton, a product cited in a kratom-related fatality in Sweden was laced with o-desmethyltramadol. This is not kratom. These things should not be in kratom. No one in the kratom community wants this adulteration. To reiterate, the American Kratom Society is adamant about creating a quality control system for vendors to prevent anything like this from happening. In 2018, the FDA's Public Health Assessment of kratom was refuted by many doctors and scientists. Nine scientists have signed a letter to the DEA stating that the FDA has used "bad science." This letter states, "We believe strongly that the current body of credible research on the actual effects of kratom demonstrates that it is not dangerously addictive, nor is it similar to 'narcotics like opioids' with respect to 'addiction' and 'death.' Equally important, four surveys indicate that kratom is presently serving as a lifeline away from strong, often dangerous opioids for many of the several million Americans who use kratom." The Board, in this 2026 iteration of the kratom scheduling proposal, seems to be of the

			opinion that being "addicted" to kratom is just as bad as being addicted to heroin according to 4 or 5 random people who "know" someone who takes kratom. The best I can do to refute this "evidence" for the Board's position is to plainly state again that I am a daily kratom user of more than a decade, and I have suffered no ill effects, nor am I addicted any more so than I may be to coffee. I am a fully functioning member of society with a great job, family, house, pets, and hobbies. I run several miles every day, I bike, I make art, and I have kratom each morning. In conclusion, I strongly urge the board to withdraw this kratom scheduling recommendation. There is no need to create a black market for a safe plant which is the cousin of the coffee plant. Ohioans who struggle with addiction will continue to struggle with addiction with or without access to kratom. There are a plethora of ways in which the state could help people who are struggling with addiction, but banning a plant that has been used safely for thousands of years in its native range is not one of them. Thank you, Sarah Stupak (740) 249-7050 sarah.stupak@gmail.com

Cleveland	Ohio	2 - Oppose - Questions the Science	I am writing to express concern regarding current regulations targeting kratom and 7-hydroxymitragynine (7-OH). Evidence indicates these policies may increase harm rather than reduce it and disproportionately restrict adult autonomy. Key points: 1. Low direct risk: No confirmed deaths have been attributed solely to 7-OH at concentrations present in natural kratom powder; most reported kratom-related fatalities involve multiple substances. 2. Comparative risk: Legal substances such as alcohol, tobacco, and prescription opioids cause significantly higher morbidity and mortality. Selective prohibition of kratom or 7-OH is inconsistent with evidence-based risk assessment. 3. Unintended harm: Restricting access may drive users toward more dangerous alternatives, including illicit opioids or alcohol. Criminalization reduces opportunities for harm reduction, education, and quality control. 4. Alternative approaches: Regulatory focus on labeling, dosing guidance, and product purity could mitigate risks while preserving personal autonomy and safety. Current scientific and public health data indicate that the absolute risk of fatal overdose from kratom or its natural alkaloids — including 7-hydroxymitragynine (7-OH) — is extremely low compared to other regulated substances such as alcohol and prescription opioids. Population-level studies estimate that the risk of death from opioid overdose is more than 1,000 times greater than from kratom use (mitragynine) in typical usage scenarios, and most reported kratom-associated deaths involve multiple other substances rather than kratom or 7-OH alone. Moreover, national poison control data suggest that deaths where kratom is the sole substance present are rare, with fewer than ten such cases reported annually, compared with over 100,000 alcohol-related deaths each year. These data suggest that prohibition or overly broad control based on theoretical pharmacological potency rather than observed harm is inconsistent with evidence-based public health practice. I respectfully request that the Pharmacist Board and Governor's office reconsider current policies and adopt an approach aligned with scientific evidence, public health, and harm reduction principles. Policies should minimize net harm while respecting adult decision-making. I have used this substance for my wellbeing for the last decade after state-sanctioned pharmaceuticals resulted in addiction and personal harm. Thank you for your attention to this matter. Sincerely, Nicholas R. Dorshimer 6010 Wakefield Ave Down Cleveland, OH 44102 CELL: (480)-221-5206
Toledo	Ohio	2 - Oppose - Questions the Science	In addition to the lack of evidence supporting the scheduling decision, Decisions like this affecting such a significant part of the population requires input from the public. Us Ohioans do not want to be deprived of potentially life saving alternatives based on unqualified judgments.

West Chester	Ohio	2 - Oppose - Questions the Science	Mitragyna Speciosa should not be scheduled in Ohio, let alone schedule I. The "evidence" is incredibly flimsy, the research is missing, and the decision has the outward appearance of being arbitrary. Even the international World Health Organization and the national Department of Health and Human Services did an analysis and did not determine that it should be scheduled. From first and thirdhand experience, it seems asinine to classify it as having NO acceptable medical use. At that, the "deaths involving Kratom" argument has no acceptable scientific argument, just like some of the anecdotal statements in this document. Scheduling it and blocking further research benefits no one. I know multiple adult Ohioans who have an improved quality of life because of natural Kratom. Some even attribute the fact that they have a life at all to their ability to obtain and use Kratom. These people are former (and potential future) opioid, heroin, fentanyl, oxycodone addicts. A plant that can end those cycles alone is a net positive. Add in those with chronic pain that can't or don't want to use more serious narcotics, and others using it for other ailments, and consider the difference in enjoyability or tolerability of day-to-day living for all of those people. Then, remember the fact that we live in a country that values individual freedom and tell me that it makes logical sense that someone should be able to use alcohol for recreation, but not the arguably milder Kratom. This is not 7OH. Friends and acquaintances of mine have used the natural plant and reaped the benefits of Mitragynine for a decade or more. It should frighten everyone that this is being proposed and that it is being reported that there was effectively no discussion on this by the pharmacy board. Kratom should remain legal for all Adult Ohioans. And no, we do not want substitutes presented by corporations. We want access to natural Mitragyna Speciosa, as it has existed dating back to at least the 19th century. Thank you for your consideration. This has helped people with no adverse affects. There is no proof of it causing any health issues. Can help people get off dangerous drugs. Please do not ban this.

Derry	Pennsylvania	2 - Oppose - Questions the Science	Kratom is a plant indigenous to Southeast Asia and has been used by natives for hundreds of years for a multitude of reasons. It's been nothing but beneficial in my life aside from the stress due to the constant threat of continued bans due to misinformation. The kratom associated deaths reported by the FDA have all been debunked. These cases included 9 deaths from Sweden that were caused by an adulterated product called Krypton which was laced with a synthetic compound akin to but more potent than tramadol, a gunshot victim, a man who fell out of a window yet refused treatment, a suicide, a car accident, and multiple poly drug use cases. Even if they had been caused by kratom, there is a greater risk of death by falling out of bed or drinking too much water if you run the perspective numbers over the course of the last decade and hundreds of people die every year from complications related to Tylenol. I'm a 39yr old wife, mother, and DSP supporting adults with disabilities who uses kratom tea to aid my health and wellbeing. I could not and would not take something that would impair my ability to make quick, sometimes life saving decisions. Today I respectfully request that you look further into this botanical and follow the science before deciding whether or not to enact a ban and taking away this beneficial supplement used by millions of Americans. I lost my brother to a heroin/fentanyl overdose in November 2018 and I promise you I wouldn't be fighting to keep kratom accessible if I thought it could cause harm. Plain leaf kratom and synthetic 7-OH are NOT the same. The compound 7-OH that has a higher potential for abuse is barely existent in the plain leaf that most consumers use for tea. It is never fair to punish thousands of responsible consumers in Ohio for the acts of a few who, let's face it, can find anything to abuse, including loperimide (Imodium), caffeine, etc. I love to travel but my family will not bring our tourism to a state that would criminalize us for using a helpful botanical though we really enjoyed our time in Hocking Hills, Ohio just last year. Thank you for your time and consideration in this important and very consequential decision.
Germantown	Ohio	2 - Oppose - Questions the Science	No ban on regular leaf, the problem lies with concentrates. Regular leaf helps millions of people. Their is research avaiable.

Hilliard	Ohio	2 - Oppose - Questions the Science	Reading the Common Sense Initiative issued 7 Jan 2026 on the proposed classification of mitragynine as a schedule 1 controlled substance, I regard the supporting "data" as limited and pre selected and incomplete. The "data" does not accurately distinguish the effects of kratom sold in only a dozen Ohio stores and solely derived from the ground leaves of the Mitragyna speciosa tree from other so-called "kratom" products. Also this "data" does not show the facts that the ordinary side effects of "pure" kratom are minimal: nausea, constipation, perhaps dizziness. Kratom has no verified risk of death, UNLESS the user also is actively using lethal (and often illegal) benzodiazepines or opioids. This distinction is not reported. The "data" bolstering the decision to classify mitragynine as a schedule 1 controlled substance also fails to distinguish the ill-effects of "kratom" products sold in hundreds of Ohio truck stops, vap stores, etc. (Appendix A, p. 20) from "pure leave" kratom. Who knows what is/was added to these so-called kratom products? Finally, the data does not discuss the benefits of alternative legal (mostly temporary) alternatives for treating addiction. Kratom is often used by people in the recovery community. Removing legal access to Kratom could drive an increase in benzodiazepines, narcotics and other proven lethal substance substitutes. I urge the Ohio Board of Pharmacy to NOT go forward with the proposed scheduling of mitragynine as a controlled substance. Instead, ban the sale of the myriad of so-called kratom products. This decision would incur minimal impact on the 100s of truck-stops and other businesses that sell the product. It would defer the closing of the few businesses that sell only "pure leave" kratom and thereby allow customers who derive a health-benefit to continue their careful use. And, it would permit the Board to systematically monitor people's purchased-based usage and (ill)effects of their use. Thank you.
Bloomington	Indiana	2 - Oppose - Questions the Science	As someone from a state where kratom is banned I can say, this is ridiculous and crazy to still be having debates around this sort of subject in terms of banning kratom leaf. Mitragynine in kratom is a partial agonist at the mu opioid receptor, unlike classic opioids (morphine and it's derivatives) which are full agonists of the MOR. In addition to this, mitragynine is g-protein biased partial agonist, in contrast to full agonists which typically recruit beta-arrestin which is what is heavily associated the respiratory depression seen in opioid overdoses. Which lends itself to the fact kratom alkaloids have never been directly implicated in or the cause of any deaths taken by themselves, which is to say kratom and kratom alkaloids do NOT kill and are remarkably relatively safe from a pharmacological perspective. Of course anything that interacts with the MOR can be addictive, but so can alcohol and nicotine and most of the top prescribed medications, etc. But at the end of the day with things like these adults in a free nation like the US should have the ability and the option to choose whatever they want for themselves, especially when kratom has genuinely helped thousands if not millions of people in the US alone as a safe off-ramp from 'heavy' full agonist opioids.

Broadview Heights	Ohio	2 - Oppose - Questions the Science	Reading the Common Sense Initiative issued 7 Jan 2026 on the proposed classification of mitragynine as a schedule 1 controlled substance, I regard the supporting "data" as selective and thus the proposal faulty. (1) The "data" do not accurately distinguish the effects of kratom sold in only a dozen Ohio stores and solely derived from the ground leaves of the Mitragyna speciosa tree from other so-called "kratom" products. (2) The "data" do not reveal that the ordinary side effects of "pure" kratom are minimal: nausea, constipation, perhaps dizziness. (3) The presented data do not report the dosage people used whenever ill-effects occur. By example, eating a half bottle of aspirin, rather than limiting one's intake to a 2 or 3, would also have serious ill-effects. (4) Be advised: Kratom has no verified risk of death, UNLESS the user also is actively using lethal (and often illegal) benzodiazepines or opioids. This distinction is not reported. As a partial agonist for the mu-opioid receptors in the brain, kratom (mitragynine) activates protein pathways without initiating separate pathways responsible for the ill-effects of opioids. (5) Grieving families who have lost a loved one too frequently ignore the toxic mix of the substances/drugs used immediately prior to the loved one's death (see Appendix A, p. 19). Their grief is heart-felt by everyone; yet grief must be cloud our understand of the loved one's misuse of substances and inadvertent self-inflicted death. (6) The "data" bolstering the decision to classify mitragynine as a schedule 1 controlled substance also fails to distinguish the ill-effects of "kratom" products sold in hundreds of Ohio truck stops, vap stores, etc. (Appendix A, p. 20) from "pure leave" kratom. Who knows what is/was added to these so-called kratom products? I urge the Ohio Board of Pharmacy to NOT go forward with the proposed scheduling of mitragynine as a controlled substance. Instead, ban the sale of the myriad of so-called kratom products. This decision would incur minimal impact on the 100s of truck-stops and other businesses that sell the product. It would defer the closing of the few businesses that sell only "pure leave" kratom and thereby allow customers who derive a health-benefit to continue their careful use. And, it would permit the Board to systematically monitor people's purchased-based usage and (ill)effects of their use. Regards, Edward H. Thompson, Jr. Professor Emeritus Gerontologist
Newark	Ohio	2 - Oppose - Questions the Science	I strongly urge the board to reconsider banning Kratom statewide. Not only would this unfairly harm and potentially outlaw the thousands of Ohioans who use Kratom for a variety of reasons including but not limited to: aiding in treatment of chronic pain, alleviating arthritic pain, helping to manage detoxing from drugs, or whom merely just enjoy the drink and consume it without issue; but it would also harm the local businesses that stand to lose millions of dollars should Kratom be outlawed. I feel the potential for harm as raised by those who wish to Schedule Kratom has been grossly and unscientifically exaggerated. In virtually every single case where individuals were found to have tragically passed away, and where Kratom was present in their system, other much more harmful illicit drugs like fentanyl were also detected and are very likely to have been the cause of death instead. Even the CDC noted it's exceedingly rare to find deaths that can be attributed either entirely or in large part to Kratom. Thanks, A Concerned Ohioan

Columbus	Ohio	2 - Oppose - Questions the Science	The people on this board don't even know what they are talking about. The packet you presented to schedule mitragynine is 90% information on 7-hydroxymitragynine or enhanced products. You just emergency scheduled those exact products. The board shouldn't be using data for irrelevant topics trying to prove something should be scheduled. Even the quotes you posted from people commenting to have "kratom" banned weren't even talking about kratom. They were all talking about stuff you just emergency scheduled. I've read the science you presented and its some of the weakest and anectodical evidence I've ever seen. You continue to reference negative things from 2019 or prior, because you can't seem to find anything that has to do with only kratom and not the 7oh tabs that flooded the market 2 years ago. My wife and I both use kratom. We are in our 60s and have found it extremely beneficial in our lives. This rule is trying to make regular Ohio citizens that like herbal alternatives to pills criminals. Go back and read your own report and pull everything that has relation to what you've already banned. Then see what you are left with. A whole bunch of nothing. Kratom should be regulated in Ohio and should have been back in 2019. Let the senate bill work through the system and stop trying to overstep into categories that shouldn't be regulated by a pharmacy board.
Ashland	Ohio	2 - Oppose - Regulation Over Ban	I need to take the opportunity to write a note regarding the importance of permitting access to kratom. Banning the concentration products at gas stations makes sense, this isn't the problem. Banning the plant altogether is counterproductive on multiple levels, I do request we be permitted access to this plant. Its degree of harm is far less than many alternatives. Thank you for your time.

Worthington	Ohio	2 - Oppose - Regulation Over Ban	The proposed rule that would classify mitragynine and natural kratom (Mitragyna speciosa) as a Schedule I controlled substance. While I applaud the Board's recent efforts to remove dangerous, synthetically enhanced products like high-potency 7-hydroxymitragynine (7-OH) from the market, a blanket ban on the natural leaf is a disproportionate response that ignores current science and threatens public health. The primary justification for a ban often cites "opioid-like risks." However, recent federal guidance from 2025 and 2026 including statements from the Department of Health and Human Services (HHS) highlights a critical distinction: natural kratom leaf contains only trace amounts of 7-OH. Dangerous adverse events are overwhelmingly linked to adulterated products or synthetic concentrates, not the traditional vegetation. By banning the natural plant, the Board is penalizing a botanical product that has a multi-decade history of safe use for millions of Americans.If the goal is truly public safety, we must ask why the Board is pursuing a total ban rather than the Kratom Consumer Protection Act (KCPA) model. A ban does not remove the demand. Thousands of residents use kratom as a safer alternative for pain management and to stay away from illicit opioids. Prohibition removes all oversight, ensuring that the only kratom available will be the very same unregulated, contaminated, and dangerous products the Board claims to oppose. If the motivation is not financial gain for pharmaceutical interests, the Board must explain why it rejects mandatory testing and labeling—which would actually solve the problem of contaminants like heavy metals and salmonella in favor of a total prohibition that historically increases overdose deaths by pushing users back to more dangerous substances. The World Health Organization (WHO) Expert Committee on Drug Dependence recently reviewed kratom and declined to recommend international scheduling, citing insufficient evidence of a public health threat. Furthermore, the FDA's own attempts to schedule the plant federally were previously withdrawn due to a lack of "scientific rigor." For a state board to override these global and federal assessments suggests a move based on administrative momentum rather than emerging toxicology. I urge the Board to exempt natural kratom in its vegetation form from this scheduling. Instead, I support the implementation of strict age limits (21+), rigorous laboratory testing requirements, and clear labeling standards. Let us regulate for safety rather than ban out of fear. This a money grab we all see it to sale more meds. We won't call out the corruption if you leave natural kratom alone otherwise we'll keep calling you out for corruption backroom deals to sell more fda meds PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who

			are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	Please don't ban natural Kratom powder, I live with chronic pain from a severe spinal cord injury over decades ago, Kratom has helped me from having to take opioids and opiates. Kratom powder is NOT dangerous, there hasn't been a death contributed to Kratom alone, those cases are from poly-drug overdoses. Kratom should only be allowed to adults 18-21yrs and older. The only reason I (and thousands of people like me / people with sever disabilities) am as functional as I am is because of Kratom, it has allowed me to live a much more productive and active life. I've been taking the same dose as when I started (over 10yrs ago). It is incredibly difficult to over dose from Kratom powder because it will just make you feel sick if you take too much, people in the Kratom community all say "less is more" and it's true, the less any takes the more effective it is. Make it 18yrs or 21yrs and older and provide education on it if you're going to do anything with it, people depend on Kratom, and making it illegal will only lead to people using and becoming addicted to opiates and more crime surrounding opiates. Listen to the people. I have been taking Kratom powder to mitigate my chronic pain for 10yrs now and have been able to successfully avoid: being bed ridden, addiction to opioids and opiates and all other "legal" pain killers that so many people get addicted to. My quality of life is better with Kratom powder and I am able to do more than if I did t take it. I suffer from spinal stenosis, spinal cord trauma and a litany of co morbidities because of an injury I sustained that occurred over a decade ago. I wouldn't be functional with out it. It has not only saved my life but has impacted every facet of my life in such a positive way that traditional medicine couldn't. I in turn am able to live and take care of my family because of natural Kratom powder. I believe Kratom should remain how it is in its current state (unscheduled and legal) and should be 21yr+ to purchase as well as education about how it works and how to take it safely. Kratom powder hasn't been an issue for the public for over ten years now and still is safe to consume so long as people are educated on its effects. No one has ever died or overdosed from Kratom powder alone. It's far safer than taking Tylenol as it is incredibly difficult to take an overdose on. Keep kratom legal and accessible to those who depend on its pain relieving effects to live, and ban the synthetics (they are the true public health concern).
Brecksville	Ohio	2 - Oppose - Regulation Over Ban	I'm deeply troubled that Ohio is moving to ban kratom, which is a natural botanical,while simultaneously and hypocritically legalizing marijuana and still grappling with an opioid crisis fueled by Big Pharma. Where were these regulatory efforts when prescription opioids were destroying communities across our state? Kratom has helped countless Ohioans manage pain, reduce opioid dependence, and improve their quality of life. Banning it pushes people back toward the very pharmaceuticals that created this crisis. Instead of prohibition, Ohio should: Regulate kratom for quality and safety Support research on its benefits and risks Prioritize harm reduction over blanket bans I urge lawmakers to reconsider this misguided approach and focus on real solutions that protect Ohioans rather than limiting their access to safe alternatives.

Lakewood	Ohio	2 - Oppose - Regulation Over Ban	My husband is a fully functional, present, and reliable father who uses kratom. Because he has been able to consistently work and provide for our family, I have been able to stay home with our children for the past three years. This has been a huge benefit to our family and our kids' development. He is extremely involved in our children's lives — emotionally, physically, and day-to-day. He is patient, attentive, and dependable. I have never felt that he was absent, impaired, or disengaged due to kratom use. Importantly, my husband does not drink alcohol and does not use marijuana. He has chosen to avoid those substances entirely. His use of natural kratom leaf has never caused behavioral changes, irresponsibility, or impairment. I have never observed signs of intoxication, loss of control, or extreme dependency. I also want to clearly state that he has never used kratom extracts, synthetic products, or highly concentrated formulations. His use has always been limited to plain, natural kratom, used responsibly and in moderation. From my direct, daily experience living with him, natural kratom has not harmed our family. On the contrary, it has allowed him to remain stable, productive, and fully present as a husband and father. I respectfully ask the Board to distinguish between natural kratom leaf and dangerous synthetic or concentrated products. Punishing responsible families for the actions of bad actors or unrelated products would cause real harm to households like ours. Thank you for taking the time to consider my experience and perspective. To Whom It May Concern, Thank you for the opportunity to submit public comment regarding the proposed Schedule I classification of mitragynine. I want to be clear at the outset that I agree with several concerns raised by the Ohio Board of Pharmacy. Highly potent extracts, isolated alkaloids, and semi-synthetic compounds such as 7-hydroxymitragynine pose elevated risks and warrant strict control. I support the continued ban on 7-hydroxymitragynine and believe that concentrated extracts and synthetic derivatives should remain prohibited. These products are materially different from traditional kratom leaf and present the greatest public health concerns. Where I respectfully disagree is with extending Schedule I classification to plain kratom leaf containing naturally occurring mitragynine. Treating all forms as equivalent eliminates the ability to distinguish between high-risk formulations and lower-risk, traditional use, and removes the very regulatory tools that could reduce harm. I would like to briefly share my personal experience to provide context. Earlier in my life, I struggled with chronic alcohol use. Today, I am married, have a child, and work approximately 50 hours per week supporting my family. Stability and responsibility are central to my life. My experience reflects that harm reduction and responsible adulthood are possible when safer alternatives are available and regulated. A policy that preserves access to plain leaf while restricting high-potency products aligns with this reality far better than full prohibition. A significant concern with the current proposal is that it relies heavily on Utah as the primary real-world example of regulatory failure, while not meaningfully addressing states where regulation has worked as intended. Multiple states have adopted kratom consumer protection frameworks that maintain access to plain leaf while imposing age restrictions, manufacturing

			standards, labeling requirements, and prohibitions on adulterated or synthetic products. These states have not experienced the same outcomes cited in Utah, suggesting that regulatory design and enforcement matter greatly. Additionally, some states that initially pursued bans later reversed course after recognizing that prohibition increased risk by driving consumers toward illicit markets and removing quality controls. These experiences deserve the same consideration as Utah's, yet they are largely absent from the analysis. A middle-ground regulatory approach—keeping 7-hydroxymitragynine and extracts prohibited while allowing regulated access to plain leaf—would directly address the most serious risks identified by the Board without creating unnecessary collateral harm. Such an approach would preserve oversight, transparency, and public health safeguards while avoiding the unintended consequences associated with Schedule I classification. I respectfully urge the Board to reconsider a full Schedule I ban and instead pursue a framework that distinguishes between dangerous formulations and lower-risk traditional products. Public safety is best served by targeted, evidence-based regulation rather than broad prohibition. Thank you for your time and consideration.

Middletown	Ohio	2 - Oppose - Regulation Over Ban	Years back Pennsylvania suggested a ban on natural kratom leaf. I said the same thing generally that I had said then. In the years since 2016bive become a Christian, a deeply devoted one because God changed my life. Banning natural leaf is asking for responsible and well managed people to dip their toes back into black markets and illegal substances. Its asking for addicts to return to much harsher and less manageable habits. The research to suggest that powdered leaf kratom is a danger to anything except lobbyists wallets is unfortunate and dishonest. I believe that integrity would move on the side of legislation and protections of the natural plant. Alcohol is legal. Weed is being legalized. Kratom doesn't disorient you the same way. It is psychoactive but it isn't incapacitated in the way most, even weak, plants or substances are. Its more in line with being a little bolder than coffee, when considering the effects on reactions that things like Marijuana could have. I'm grateful that the state has taken the time that it has to hear the public. I ask that, while I know I would be fine without it, that you would consider those in much more unfortunate situations without a relationship with their creator that would help them to not return to much harsher drugs. Praying and hoping the best and most healthy situation comes from these discussions.
Bay City	Michigan	2 - Oppose - Regulation Over Ban	This is probably gonna get lost but I feel like Kratom is being unfairly targeted. 7OH and Kratom should not be lumped together. I feel like there should be some kind of regulation such as KCPA because pure leaf kratom has been a life saver for me. As a combat veteran who was injured overseas I look to pure leaf kratom every so often when I'm in severe back pain. 7OH however is making kratom look bad. Anyone who overdosed on kratom had to have had something else in their system at the time because I've taken pure leaf kratom off and on for 20 years and never had issues. It's government overreach and the state government hates seeing that there's an alternative to the big pharmaceutical companies opiates that they can't wait to shove down your throat. It's ridiculous, government overreach. Stop the ban and give us regulation
Beckett Ridge	Ohio	2 - Oppose - Regulation Over Ban	I strongly oppose any effort to ban kratom in Ohio. Kratom has helped thousands of people avoid opioids, manage pain, and stay away from drugs that cause overdose and addiction. It is a natural plant that has been used safely in Asia for centuries. For many small businesses and responsible consumers, kratom is a legitimate wellness product that supports recovery and personal stability. Banning it will not protect the public—it will eliminate safe access, destroy small businesses, and push people toward unregulated or dangerous alternatives. Ohio should regulate kratom responsibly, not prohibit it. Please protect both public health and the livelihoods of law-abiding Ohioans.
Pottsville	Pennsylvania	2 - Oppose - Regulation Over Ban	My name is Zachary David Pike. I am a Protective Services Officer with a Fortune 100 company. I have used Kratom off and on throughout the past 14yrs. It has enabled me to improve my overall health in a very similar way to it's cousin Coffee. I strongly advise reaching out to Dr. Christopher McCurdy regarding the most current scientific research regarding. Also, Zack McCarley at Washington State University. This state needs to adopt a kratom consumer protection act to mitigate the bad actors with the supplement industry. Reach out to me for any additional follow up. 614-943-5192

Lancaster	Ohio	2 - Oppose - Regulation Over Ban	Hello, my name is Vince Skowronski, I'm a 28 year old physically disabled man living in Athens county, I've been using kratom since 2017, and I want to thank the state pharmacy board for hearing public comment. I'd also like to thank Governor DeWine for amending his proposed ban of kratom to only include 7-OH products, however I would like to note I believe further amendments are necessary so that products containing trace amounts can still be on the market. It is so important that kratom remains an accessible substance for consumers, and it shouldn't be taboo to refer to it as a substance either. We regularly allow the sale of substances such as alcohol, nicotine, and cannabis with licensed businesses that make sure they're checking IDs, informing consumers about the product, and the products are clearly labeled. What has happened with kratom is the substance is shouldering the burden of accountability that we should be placing on businesses and distributors, because who ultimately shoulders that burden will be people like me. I have a connective tissue disorder with no cure or treatment, that causes my joints to regularly dislocate due to hyperlaxity. I am also on medicare and medicaid, who without warning, have placed copays back onto the patient that were originally taken care of by state funds. As my pharmacological options become less accessible, I cannot sustain any quality of life if I continue to lose access to the things in my pain regiment, such as kratom. I want to break down what kratom is, and this will require a comparison. Alcohol and benzodiazepines act on the same exact receptor in our brains, GABA A. One of these is controlled requiring prescription, one of them is sold out of gas stations. Kratom, an herbal coffee plant, and Suboxone, a synthetic medicine, are both indirect agonists of opioid receptors in the brain. This is not a perfect comparison, because most strains of kratom are much weaker agonists than Suboxone, and has even been held up as a safer alternative for people to use as an opioid detox for this reason. It is also a very beneficial substance for people in chronic pain like me. It's proven to be less habit forming, with less side effects such as drowsiness or constipation, as it also acts as a lesser dopamine agonist as well. Most kratom packages are clearly labeled, most distributors are not looking to extract the most potent opioid agonist chemical (7-OH) out of kratom, sneak it into a vial that resembles 5-hour energy, and then not flag as needing an ID when scanned. That is absolutely a problem I agree needs addressed. I have been on the exact same dosage of powder kratom for the last 7 years. I have been able to take breaks, and the first days are no worse than anything resembling caffeine withdrawal. I urge you to very carefully think about who is shouldering the burden of the legislation written, who will be held accountable for the young adults who were affected by products like FeelFree? Will it be folks like me, and kratom retailers who were very diligent to prevent those impacts? Or will it be focused on labeling, proper ID'ing taking place, ensuring something that has a tremendous place somewhere where deadly opioids run rampant, pain medicine is inaccessible, and this fills that much needed, widening gap for people like me, recovering addicts, and individuals seeking an a holistic alternative to pharmacologic therapy? Thank you, state board.

Lancaster	Ohio	2 - Oppose - Regulation Over Ban	I am submitting this comment to express my opposition to the proposed classification of mitragynine as a Schedule I controlled substance. I do not believe that the natural, whole kratom leaf should be banned. A Schedule I classification is an extreme measure that does not distinguish between highly concentrated or synthetic products and the traditional, unaltered leaf that has been used responsibly by many adults. This proposal removes all nuance and treats natural leaf products the same as altered extracts, isolates, and chemically modified compounds. That approach ignores an important middle ground regulation rather than prohibition. Many of the harms cited in this proposal appear to be associated with high potency extracts, enhanced products, or polydrug use. Banning the natural leaf will not eliminate demand. It will instead push consumers toward illicit markets where products are untested, unregulated, and more dangerous. A complete ban also removes access for individuals who have used natural kratom leaf responsibly for years to manage pain, fatigue, or to reduce reliance on far more dangerous substances. For these individuals, the leaf is not a recreational drug but a harm reduction tool. Other states have shown that regulation is possible through age limits, labeling requirements, alkaloid caps, and product testing standards. Those approaches allow the state to address public health concerns without criminalizing possession or forcing responsible adults into unsafe alternatives. I urge the Board to reconsider a Schedule I classification and instead pursue a regulatory framework that specifically targets synthetic, altered, and high potency products while preserving access to the natural leaf for informed adult use. Thank you for the opportunity to provide public input.
Galloway	Ohio	2 - Oppose - Regulation Over Ban	I respectfully urge the Board to avoid restricting or scheduling natural kratom (Mitragyna speciosa) or its naturally occurring alkaloids. The public health concerns being discussed are driven by synthetic and chemically altered products, not the natural kratom plant used responsibly by many Ohio residents. Treating natural kratom the same as synthetic compounds would create unintended harm and fail to address the actual risk. Ohio already has a legislative pathway under consideration through Senate Bill 299, which proposes age restrictions, testing, labeling, and limits on dangerous formulations. This approach allows for consumer protection without criminalizing responsible adults or bypassing the legislative process. Many Ohioans rely on natural kratom to manage pain or reduce reliance on opioids. Removing access through emergency scheduling would push people toward more dangerous alternatives and hinder ongoing research. I respectfully ask the Board to: Target enforcement toward synthetic kratom products, not the natural plant Allow the General Assembly to continue its work on regulation Support a regulated, evidence-based approach rather than prohibition Thank you for your time and consideration. Respectfully, Concerned Ohio Resident

Indianapolis	Indiana	2 - Oppose - Regulation Over Ban	Classifying all compounds as illegal drugs would have a direct and negative impact on me. Rather than a blanket ban, Ohio should prohibit synthetic adulterants and adopt a Kratom Consumer Protection Act (KCPA) that ensures safe, regulated access to natural kratom. Natural kratom has been life-changing for me. It has helped manage chronic pain and, as an additional benefit, eliminated my desire to drink alcohol. I previously consumed alcohol excessively, which negatively affected my health. I have now been alcohol-free for over five years, while continuing to experience effective pain relief. I work full time and live an active, fulfilling life. Natural kratom has had no negative impact on my health, a fact supported by my annual physical exams and routine bloodwork. I respectfully urge you to do the right thing and enact a Kratom Consumer Protection Act—for me and for the many others who responsibly rely on the positive benefits of natural kratom.
Lebanon	Ohio	2 - Oppose - Regulation Over Ban	Mitragyne has significantly changed my life for the better. I've had a lot of issues with IBS, severe depression, and back pain. It's allowed me to keep a consistent job, I now have a family which might not have been possible before. I think ohioans should be able to make their own personal choice. I do think some of the derivatives of mitragyne are especially addictive and should be heavily regulated but the government shouldn't overreach its power as it is in service of the people. Please put regulations and standards on how it can be made and what can be made to PROTECT people who consume mitragyne.
Detroit	Michigan	2 - Oppose - Regulation Over Ban	Instead of regulating kratom, setting quality standards, and protecting consumers, they pushed legal products off shelves guaranteeing the growth of an unregulated black market. That's not consumer protection. That's policy failure. Let's be clear: • Kratom did not cause the overdose crisis • And banning regulated kratom products will push people toward more dangerous substances, not away from them Adults using kratom responsibly for pain, mental health, or opioid harm reduction are now being punished for political optics not science. You don't protect people by taking away safer alternatives. You protect people with regulation, transparency, and education. Ohio can still fix this. But doubling down on fear-based policy will cost real lives. Science over stigma. Regulation over prohibition. Adults deserve choice

Wooster	Ohio	2 - Oppose - Regulation Over Ban	Subject: Please Protect Natural Kratom Tea/Powder With Sensible Regulation, Not a Ban Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration. Sincerely, Jeremy Pratt Wooster, OH

Indianapolis	Indiana	2 - Oppose - Regulation Over Ban	Please consider this with intense scrutiny in comparison to what is so overwhelmingly influenced by society (that being alcohol); mitragynine has significantly improved my mental well being 😊 (I was within an inch of my life 10 years ago having abused my body with alcohol to such an extent that I was throwing up what is called “sludge” from my pancreas) I was rotting from the inside out and ONLY by the grace of God was I saved in time! 🙏🫁🫀 Now having experienced the calming effects of this plant 🌱 Please do not hinder us from procuring it. Thanks Joe I spoke in front of the Ohio pharmacy board on an issue about Kratom about 6 years ago in Columbus Ohio. I feel there is so much miss information about kratom it’s just ridiculous.Natural unadulterated kratom is as safe as having a cup of coffee. Please get all the true information about this natural plant. I don’t want to bring in comparisons but alcohol and cannabis are legal but Kratom should be outlawed.Makes no sence. Please consider people like me that uses Kratom for legitimate reasons. I was in a pain clinic prescribed medication for 9 1/2 years.The side effects where not good to say the least.My son introduced me to Kratom. I no longer need the strong medication and I feel much better. Thank you. I strongly oppose a kratom ban in Ohio. Kratom has helped thousands of Ohioans manage pain, anxiety, and recovery—often as a safer alternative to prescription opioids or alcohol. For many people, banning kratom would not protect them; it would push them back toward far more dangerous substances or leave them without a viable option at all. A ban would instantly turn law-abiding citizens into criminals overnight for possessing a legal product they rely on to function and work. These are not criminals—they are parents, veterans, and working Ohioans making responsible choices for their health. This would also cause real harm to Ohio’s economy. Local kratom shops, distributors, and related small businesses employ Ohioans, pay taxes, and have operated in good faith under current law. Criminalizing kratom would destroy legitimate businesses, eliminate jobs, reduce tax revenue, and drive the market underground—where products are unregulated and less safe. Ohio already considered and rejected a kratom ban in 2018. Revisiting the same failed policy now unfairly penalizes consumers and businesses who relied on the state’s prior decision. Businesses invested, hired workers, and complied with the law, only to now face criminalization years later. Rather than prohibition, Ohio should pursue smart regulation: age limits, quality testing, labeling standards, and consumer protections. Regulation protects public health. Prohibition does not. I urge lawmakers to reject any kratom ban and instead support responsible regulation that protects consumers, respects law-abiding Ohioans, and preserves small businesses across the state. Kratom has saved my life. I have a bad back and knees. Kratom relieves the pain a lot. Please do not ban kratom as it’s the only thing that helps manages the pain plus it is 100% an organic product.

			As someone who personally uses a tea brewed from whole leaf kratom, I can say that keeping it available in its natural, whole leaf form has genuinely helped me and so many others I know. When used responsibly it is a plant that supports well being not something that deserves to be criminalized. Ohio should protect access to whole leaf kratom and listen to the voices of the people who benefit from it. Any such rule to schedule natural Kratom hurts a huge number of Ohioans who use this therapeutically and responsibly - no different that coffee or various energy drinks found in the shelves. Please know Kratom has helped me tremendously physically and mentally to deal with motivation and some pains. Reconsider this request please. Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration.

Indianapolis	Indiana	2 - Oppose - Regulation Over Ban	I understand if and why you have doubts about this plant. But what you don't understand is just how helpful this plant has been to 100s of thousands of American citizens. Before these synthetic "7oh" products started showing up - there was a 100% natural selection of Kratom and seldom extracts were even available. Please use common sense and get rid of these flavored / "pretty packaged products" as to get them out of the hands of children. Do not ban Mitriganine products as a whole. We need to focus on some sort of regulation same as alcohol, or millions and I mean millions will switch back to synthetic opioids and die. I truly believe this. If you ban this product; your next years overdose rate will go through the roof. Do not put people through the pain of losing ones they love. I know that personally it has saved my life after a long battle with hydrocodone. Please use common sense. Ban the synthetics. Make it a clear 21+ process with checks and balances balances to retailers similar to alcohol to ensure these products aren't being sold to minors. Put the ATF on this and have them clamp down on underage sellers. Do not harm your state, constituents, and loved ones, please. Reconsider what you are doing. I appreciate you, and pray you make the right decision to bring safe, natural Kratom back, and regulate it in a sensible way. Kratom has helped me to stay clean for 5 years. I've been able to build a life with my own home, GREAT job, and happiness thanks to Kratom. Make no mistake, banning it is one direct step backwards in fixing the struggle many face with addiction
Cleveland	Ohio	2 - Oppose - Regulation Over Ban	To the Ohio Board of Pharmacy, I am writing as an Ohio resident, a law abiding citizen, a wife and mother, and someone who has responsibly used kratom for the past eight years. Kratom has helped me manage pain and maintain a productive, stable life. I work every day, contribute to my family and community, and use kratom responsibly as a safer alternative to prescription pain medications that carry far greater risks. I strongly oppose any potential ban or overly restrictive rule on mitragynine. Prohibition would harm responsible adults like myself who depend on kratom for quality of life and pain management. It would also push consumers toward unsafe, unregulated markets or back to far more dangerous substances. I support science-based regulation that focuses on: • Product safety and testing • Accurate labeling • Age restrictions • Consumer protections But I do not support prohibition. Please consider the real people whose lives would be negatively impacted by a ban. Ohio should pursue balanced, evidence-based policy, not fear-based restrictions.

Columbus	Ohio	2 - Oppose - Regulation Over Ban	I need to voice my concerns and advise my support for science-based regulation (and not prohibition of Kratom). I am a husband, full time IT engineer, brother, son, and father. Kratom powder helps me reach my goals routinely and helps make my life so much more enjoyable and manageable. We live surrounded by substances that can harm us in our society. We've come together throughout our history and used science to help shape our laws and regulations. Please help maintain this order and keep Ohio a safe and great place to live, work, recreate, and thrive. I want to urge you all to vote for science-based regulation (and not prohibition) of Kratom, as Kratom has helps me and many other Ohioans every day to be healthier and happier people. Please don't rule for Kratom prohibition, rather rule for science-based regulation. Science-based regulation of Kratom helps us all while maintaining our abilities to use a safe Kratom powder. I appreciate you all and respectfully urge you to make the right decision for all Kratom users. Thank you for reading this and your time.
Columbus	Ohio	2 - Oppose - Regulation Over Ban	My name is Christopher and I am a resident of Columbus, Ohio. I respectfully urge you to support SB299 because it would prevent a full ban on natural kratom (mitragynine) and instead regulate kratom responsibly, focusing on product safety and restricting synthetic compounds like 7-OH. Natural kratom has helped me return to Ohio Sate University after a car accident hurt my back. I couldn't work full time and go to school without it. I strongly oppose any ban on natural kratom. Thank you for your time and consideration. Sincerely, Christopher Columbus, Ohio
Lakewood	Ohio	2 - Oppose - Regulation Over Ban	I am an Ohio resident and kratom consumer writing to urge the Board to adopt science-based regulation rather than prohibition. Natural kratom leaf has been used safely by millions of Americans. It has helped me and many others manage pain, support recovery, and improve quality of life—without the risks associated with pharmaceutical alternatives. I support reasonable regulations such as: - Age restrictions (21+) - Mandatory testing and labeling standards - Prohibition of adulterated or synthetic products What I oppose is criminalizing natural kratom leaf, which would push consumers toward unregulated or more dangerous alternatives and criminalize responsible adults. The distinction between natural mitragynine in kratom leaf and synthetic or adulterated compounds is critical. Please regulate based on science, not fear. Thank you for considering my perspective.

Lakewood	Ohio	2 - Oppose - Regulation Over Ban	I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration. Kratom is a highly effective alternative to alcohol and I have personally witnessed it help people improve their lives and build community in my home town. Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration. My mom is an alcoholic, i know a lot of alcoholics that have been helped a lot by kratom, as an alcohol alternative. it

			really helped my mom with finding sobriety. Kratom is a great alternative to alcohol and addictive pain killers. Additionally, kratom cafes are wonderful community spaces for non-drinkers/ great alternatives to bars. My name Richard Holcknecht and I frequent Sacred Waters's Kava Bar and typically consume Kava. Many people in the community use ethnbotanical teas such as kratom to manage health conditions like chronic pain or addiction. It is an alternative to alcohol which allows people to enjoy the same social atmospheres without alcohol present. I believe in adults right to determine what is good for them to consume and regulate their own consciousness. Kratom has many health benefits and should NOT be scheduled as I. I agree that kratom should be regulated for adult consumption but a harm reduction principle should be applied to allow people to be informed of their consumer decisions. A significant number of people, myself included use kratom as a "bridge" to move away from more dangerous substances, including prescription opioids. Public health advocates often argue that banning kratom could remove a vital lifeline, potentially pushing individuals back toward more harmful, high-risk substances. I believe that Kratom provides me with better quality of life and supports me to make healthier choices on a daily basis. I use kratom to manage pain and as an alternative to alcohol. I have had positive experiences with it and do not believe that it should be banned. The effects have never made it unsafe for me to drive or caused me to make negative decisions. I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging

			standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on.
Edgerton	Ohio	2 - Oppose - Regulation Over Ban	Having the modified substance banned makes perfect sense because it has effects that are potentially dangerous and undesirable. But banning all naturally occurring instances is childish and shows ignorance to reality as well as an unwillingness to educate yourselves. Easier to just blanket ban than to spend the time it takes to learn the difference between the the two.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	I strongly oppose any proposal that would ban or overly restrict kratom. Kratom has been used safely and responsibly by many adults as an alternative to more harmful substances, including prescription opioids and alcohol. A blanket ban would not eliminate demand, but instead push consumers toward unregulated or illicit markets, increasing risk rather than reducing it. Reasonable regulation—such as age restrictions, product labeling, purity testing, and manufacturing standards—would better protect public health than prohibition. Many individuals rely on kratom to manage pain, mood, or substance-use recovery and to maintain employment and family responsibilities. Removing legal access without viable alternatives would cause unnecessary harm. I urge policymakers to pursue evidence-based regulation rather than prohibition, and to consider the real-world consequences for responsible adults who use kratom safely.
Jackson	Ohio	2 - Oppose - Regulation Over Ban	I feel that some of the information that was included in the Common Sense Initiative document should not be taken into consideration when scheduling Kratom. They are as follows: 1.) False advertising, if vendor lie about or misrepresent their products, then of course the products won't be used as intended or in a safe way. 2.)Whether other states have scheduled kratom. Consider that at one time, all 50 states had THC scheduled as well. THC could never have been removed from the schedule if everyone sat around talking about how other states banned it. We need to ask ourselves what makes sense for Ohio. As to the Pharmacy Board's goal of reducing overdose deaths, what the data tells us is concerning. Drugs that have been listed at Schedule I for longer periods of time, such as heroin and fentanyl, are now contributing to significantly more overdose fatalities than kratom. The data shows us to completely banning a substance makes it more dangerous. Have we learned nothing from people overdosing on fentanyl laced marijuana? No one intentionally buys fentanyl laced marijuana; that's the result of creating a black market for drugs through excessive regulation. I think that it's also not very insightful that the FDA hasn't approved any drugs involving mitragynine. A drug company isn't going to want to invest money into developing a drug compound that can easily be produced through the ground leaves of a plant. When a substance is easily accessible to the common person, it loses economic viability to market itself as a drug. Kratom does have the potential for negative consequences through abuse, but so does nicotine, marijuana, and alcohol. Kratom belongs in the same category as those substances. An outright ban on kratom will be bad for Ohio. If you want to actually save lives and prevent overdose deaths from increasing, then what the state needs is a regulatory framework that allows for safe and restricted access to kratom in its natural form.

Detroit	Michigan	2 - Oppose - Regulation Over Ban	Instead of regulating kratom, setting quality standards, and protecting consumers, they pushed legal products off shelves guaranteeing the growth of an unregulated black market. That's not consumer protection. That's policy failure. Let's be clear: • Kratom did not cause the overdose crisis • And banning regulated kratom products will push people toward more dangerous substances, not away from them Adults using kratom responsibly for pain, mental health, or opioid harm reduction are now being punished for political optics not science. You don't protect people by taking away safer alternatives. You protect people with regulation, transparency, and education. Ohio can still fix this. But doubling down on fear-based policy will cost real lives. Science over stigma. Regulation over prohibition. Adults deserve choice
Pittsburgh	Pennsylvania	2 - Oppose - Regulation Over Ban	I am writing to you to implore you to consult with the American Kratom Association on the science, benefits and safety of natural kratom. In addition to my life, which kratom has saved, there are millions of responsible, contributing Americans who receive profound benefits. What is needed is regulations ensuring good quality standards. The American Kratom Association can help you to understand the difference between natural kratom as compared to dangerous synthetics. They can also guide you in the things that you can do to protect natural kratom and consumers everywhere. Please consider my sentiments.
Cleveland	Ohio	2 - Oppose - Regulation Over Ban	Hi, I am very much in favor of keeping natural kratom legal in Ohio. I know in the past, Governor Dewine has been very pro-active in banning synthetic opiates. That's probably for the best, and the recent popularity of 7-OH seems like a similar substance so a ban on that seems reasonable (although unnecessary in my opinion.) Hiwever, it appears this ban may also affect the availability of natural kratom leaf (frequently sold as powder or in capsules.) This is very different from these synthetic "gas station heroin" on the market. Kratom is nowhere as strong as these synthetic products. There tends to be a lot of confusion, as unscrupulous companies market their synthetic crap as kratom. Please make sure the language in this bill bans the synthetics without banning natural kratom. I have used natural kratom for over a decade. With proper care, it is very useful.

Worthington	Ohio	2 - Oppose - Regulation Over Ban	Thousands of responsible adults rely on kratom as a safer alternative to opioids, alcohol, and other substances. For many, it is the difference between stability and relapse, productivity and disability, or participation in society and dependence on far more dangerous options. Ignoring these realities is not only irresponsible it is harmful. A ban on natural kratom would directly contradict the will of the people who use it responsibly and have repeatedly spoken out in public hearings, written testimony, and direct outreach. Prohibition does not eliminate use; it drives it underground, removes consumer protections, and increases risk. We have seen this outcome before, and the public is no longer willing to accept policies that repeat known failures. This issue is being watched closely. Voters are paying attention to who listens to constituents and who defers to fear-based narratives or special interests. Credibility, trust, and accountability are on the line. Reasonable regulation is one thing. An outright ban is unacceptable. Lawmakers have a responsibility to protect public health, respect personal autonomy, and learn from history not repeat it. Kratom must remain legal. Anything less would be a deliberate choice to ignore evidence, public input, and common sense.
Worthington	Ohio	2 - Oppose - Regulation Over Ban	kratom is not a recreational drug, but a plant-based product they rely on to maintain stability, productivity, and quality of life. I understand and appreciate the importance of public safety and regulation. Reasonable standards such as age limits, labeling requirements, and product testing can help ensure consumer protection. However, a full ban on natural kratom would have unintended consequences, including pushing consumers toward unregulated markets or more dangerous alternatives. I encourage policymakers to consider the experiences of constituents who use kratom responsibly, as well as emerging research that supports harm-reduction approaches rather than prohibition. Listening to public input and pursuing balanced regulation would better serve public health than an ban.

Worthington	Ohio	2 - Oppose - Regulation Over Ban	As a pastor, my calling is to care for people—not to judge them, label them, or abandon them when they are struggling. Over the years, I have walked alongside individuals and families dealing with chronic pain, addiction recovery, anxiety, and deep emotional wounds. I have buried too many souls lost to despair, overdose, and hopelessness, and I have prayed with too many parents who feel they have nowhere left to turn. Through my ministry, I have encountered many adults who responsibly use natural kratom as a tool to manage pain, regain stability, or step away from far more dangerous substances. For some, it has helped them remain employed, present for their families, and active in their faith communities. I have witnessed lives improve—not deteriorate—through careful, informed use. Criminalization does not heal the brokenhearted. It does not restore families. It does not address the root causes of pain, addiction, or poverty. Instead, it often drives people further into isolation and fear, placing legal consequences on those who are simply trying to survive or recover. When we turn a health or wellness issue into a criminal matter, we replace compassion with punishment and that is not the way of Christ. Scripture calls us to bear one another's burdens, to show mercy, and to seek wisdom over fear. Policies rooted in understanding, regulation, and education reflect these values far more than blanket bans or arrests. When nonviolent individuals are criminalized, families are torn apart, children suffer, and communities lose trust in institutions meant to serve them.I believe we must choose a path guided by truth, evidence, and love. Natural kratom should be approached with responsibility and regulation, not fear and condemnation. As a pastor, I urge decision-makers to consider the human cost of criminalization and to pursue solutions that preserve dignity, protect families, and offer hope instead of harm. Compassion….not punishment. is what truly saves lives. natural kratom and the real-world consequences of how it is currently enforced. Kratom is a natural plant that many adults responsibly use to manage chronic pain, anxiety, fatigue, or to reduce dependence on far more dangerous substances such as opioids or alcohol. For countless individuals, kratom has been a harm-reduction tool—one that allows them to work, care for their families, and live stable, productive lives without turning to prescription narcotics or illicit drugs. As a law enforcement officer, I have seen firsthand how rigid enforcement policies surrounding substances particularly those misunderstood or inaccurately classified can unintentionally devastate families. Arrests, charges, and criminal records related to nonviolent, personal-use substances often result in lost jobs, broken homes, and children growing up without parents present. In many cases, the punishment far outweighs any demonstrated harm. When natural kratom is treated as a criminal issue rather than a public health and education matter, the consequences ripple far beyond the individual. Families suffer financial hardship, emotional trauma, and long-term instability. Communities lose productive members, and trust between the public and law enforcement erodes. I believe strongly that evidence-based policy, transparency, and regulation—not criminalization—are the responsible path forward. Adults deserve access to safe, regulated alternatives that reduce harm and save lives. Law

			enforcement should not be placed in the position of enforcing policies that fracture families and undermine public trust when safer, more compassionate solutions exist. This is not about being “soft on crime.” It is about being smart, humane, and honest about what actually helps families and communities thrive.

Worthington	Ohio	2 - Oppose - Regulation Over Ban	Ohioans currently rely on safe, regulated access through these channels. A federal ban will not stop demand… it will drive dangerous, untested products into Ohio. Banning kratom in Ohio while federally legal is a recipe for disaster. When access is restricted, unregulated suppliers step in to fill the void. These products are often laced with fentanyl and other deadly adulterants. What you are calling “protection” would actually endanger Ohioans, putting lives at risk and creating the very crisis you claim to prevent. This is not theory….it is a predictable consequence of prohibition everywhere safe products are criminalized Responsible Ohio vendors would also face unnecessary civil and criminal liability under a federal ban, despite operating legally under state law. This punishes entrepreneurs who provide a safe, legal product while forcing citizens toward illicit, dangerous alternatives.Kratom is overwhelmingly safe when used responsibly. Federal prohibition is reckless, unnecessary, and dangerous. If the goal is public safety, the solution is regulation, quality standards, and consumer education—not banning a product that Ohioans use safely every day. lawmakers agree with sb299 reject any state ban on kratom. Protect Ohioans from fentanyl-laced substitutes. Protect civil liberties. Protect public health. State prohibition while federally legal makes no sense will do the opposite of all three. Keep natural kratom legal

Worthington	Ohio	2 - Oppose - Regulation Over Ban	As an addiction specialist with 20 years of experience treating individuals struggling with substance use disorders, I am writing to express my support for the continued legal availability and responsible use of natural kratom.In my clinical practice, I have seen firsthand the destructive impact of opioids and other addictive substances. Many patients are seeking safe, effective alternatives to manage chronic pain, stress, and other conditions without the high risk of dependency associated with pharmaceutical opioids. Natural kratom has emerged as a tool that some individuals have used successfully to reduce or eliminate reliance on more dangerous substances, while improving their quality of life. Scientific studies and patient reports indicate that, when used responsibly, kratom carries a significantly lower risk of addiction and overdose compared to opioids. I believe that informed adults should have access to this plant as a potential harm-reduction option, provided that its use is guided by education, quality control, and safety standards. Banning or excessively restricting natural kratom could inadvertently drive individuals back to riskier alternatives, worsening the public health challenges we are trying to address. Thoughtful regulation, rather than prohibition, allows us to protect public safety while preserving access to a substance that has demonstrated therapeutic value for many.I urge policymakers and community leaders to consider the experiences of responsible users, the potential for harm reduction, and the benefits of kratom as part of a comprehensive approach to addiction and wellness. Supporting safe access to natural kratom can help reduce suffering, prevent opioid dependency, and provide individuals with greater autonomy over their health. My name is Charles Young and I am a police officer from Homerville, Ohio I am writing to share my personal experience with natural kratom and how it has profoundly impacted my life and ability to serve my community. Police work is demanding both physically and mentally. Over the years, I experienced chronic pain from injuries sustained on duty, along with the stress and anxiety that come with the job. At one point, conventional prescription medications were either ineffective or caused side effects that made it difficult for me to function safely and perform my duties. Natural kratom changed my life. It allowed me to manage my pain, reduce stress, and regain focus without the dependency and severe side effects associated with other medications. With kratom, I was able to continue serving my community effectively while maintaining my physical and mental health. It gave me a chance to reclaim my life and my career at a time when I felt like options were running out. I share my story because I know I am not alone. Many first responders, veterans, and working professionals rely on natural kratom as a safer alternative to prescription opioids and other substances. Banning or overly restricting access would take away a vital lifeline for people like me, who need relief to continue living productive, healthy lives. I urge policymakers and community leaders to consider the experiences of responsible users and the potential harm of restricting access to natural kratom. With proper education and regulation, kratom can remain a safe, effective tool for wellness.

			voice my strong support for the responsible use and legal availability of natural kratom. Kratom is a plant that has been used safely for centuries in Southeast Asia for its therapeutic properties. It is known to help with chronic pain, stress, fatigue, and other health concerns. Many people, including myself, have found it to be a natural alternative to conventional pharmaceuticals, offering relief without the high risks associated with addictive prescription medications. Research and countless personal experiences show that kratom can be used safely when taken responsibly. Quality control, education, and regulation are important to ensure safety, but banning kratom outright would remove a valuable option for those seeking natural wellness solutions. It would force people to turn to more harmful alternatives or go without relief altogether. We are at a crossroads. We can choose to support access to natural remedies like kratom, or we can deny people a plant that has helped them live healthier, more productive lives. I urge policymakers and community leaders to prioritize education, safety, and responsible use over prohibition. Adults should have the right to make informed choices about their health. natural kratom has a proven history of safe use, real benefits for countless individuals, and the potential to reduce reliance on more harmful substances. I strongly encourage continued access, thoughtful regulation, and public education rather than restriction or bans. Many individuals, including myself, have found it to be a valuable tool for managing chronic pain, stress, fatigue, and other health-related concerns. Scientific research and anecdotal evidence suggest that, when used responsibly, natural kratom can provide meaningful benefits without the high risks associated with more addictive substances. I believe that informed adults should have the right to access this plant as a natural option for wellness, provided it is regulated to ensure quality, purity, and safety. Banning or excessively restricting natural kratom would remove a vital option for those seeking alternatives to conventional pharmaceuticals, potentially causing harm to individuals who rely on it for relief. I urge policymakers to consider the existing evidence, the experiences of responsible users, and the potential consequences of limiting access. Thank you for considering my perspective. I strongly support policies that allow adults to responsibly access and use natural kratom while promoting education, quality control, and safety. Me: just trying to manage pain and avoid opioids responsibly Also me: hears natural kratom might be banned 💀 Kratom has helped countless adults reduce dependence on more dangerous substances, manage chronic pain, and stay functional in their daily lives. Banning it doesn't make harm disappear it just pushes people toward riskier alternatives. Think of kratom like: • The responsible adult choice 🧘 • The harm-reduction hero 🦸 • Not a villain, not a shortcut, just a safer option 🌿 Please protect legal access to natural kratom. Reasonable regulation for safety and labeling is great. Banning it? That's the "sad frog" meme of public health policy. Thanks for keeping science, safety, and real people's well-being in mind!

			I want continued legal access to natural kratom and to urge policymakers to approach kratom regulation with balance, transparency, and evidence based reasoning. Natural kratom has been used by many adults as a harm-reduction tool and wellness supplement. For countless individuals, it has served as an alternative to far more dangerous substances, including opioids, alcohol, and other addictive pharmaceuticals. Many people report that kratom has helped them manage pain, reduce dependence on opioids, and improve overall quality of life without the severe risks associated with illicit drugs. Banning or severely restricting natural kratom would remove a safer option from adults who are making informed choices about their health. History has repeatedly shown that prohibition does not eliminate demand it pushes people toward more dangerous, unregulated substances and increases the risk of harm.i support reasonable regulation that ensures product quality, accurate labeling, age restrictions, and consumer safety. However, prohibition is not a public health solution. It undermines harm-reduction efforts and ignores the lived experiences of responsible kratom consumers. Public health policy should be guided by science, transparency, and the voices of the people most affected. Natural kratom deserves fair consideration not fear-based narratives or decisions influenced by financial or institutional interests unrelated to consumer well-being. I respectfully urge you to protect legal access to natural kratom and to consider regulation that prioritizes safety, education, and personal autonomy over bans that would do more harm than good. Thank you for your time and consideration I think it's fair to question the board of pharmacy when in the state of Ohio we seen Corruption before. How do we know this isn't for show. We don't know you don't know. Something we should look into I am extremely frustration and disbelief at the ongoing campaign to vilify and restrict kratom. The way this natural plant is being portrayed is dishonest, hypocritical, and increasingly hard to separate from blatant financial self-interest. Kratom is not some newly invented drug pushed onto the public for profit. It is a natural plant that has been used responsibly by millions of adults, myself included. For many of us, it has been a safer alternative to substances that are far more dangerous, addictive, and destructive many of which remain legal, socially accepted, or aggressively prescribed. I use kratom responsibly, with intention, moderation, and awareness, and it has allowed me to function without resorting to options that actually ruin lives. What is truly disturbing is watching kratom be singled out while alcohol, opioids, and other clearly harmful substances are protected or promoted. This selective outrage does not come across as concern for public health it looks like a money grab. Kratom is inexpensive, cannot be patented, and does not funnel profits into pharmaceutical companies or large regulatory pipelines. That fact alone explains far more about this push than any recycled fear-based talking point. Instead of honest education or reasonable quality standards, we are fed exaggerated claims, misleading statistics, and scare tactics designed to justify bans. Responsible users are ignored. Scientific nuance is ignored. Context is ignored. Apparently, personal freedom only

			matters when it aligns with someone else's bottom line.if public safety were truly the goal, the focus would be on regulation, transparency, and consumer protection not prohibition driven by profit and political convenience. Adults are capable of making informed decisions about their own bodies, and many of us are sick of being talked down to while far more dangerous substances are waved through without question. I strongly urge those pushing these narratives to take a hard look at their motivations. Because from the outside, this does not look like responsible governance it looks like greed wrapped in moral panic to sell more fda medicine we all see it for what it is

Worthington	Ohio	2 - Oppose - Regulation Over Ban	I speak as an African American who has lived in and around inner-city neighborhoods and has seen firsthand what illegal drugs are doing to our communities. Fentanyl is everywhere on our streets. It is cheap, powerful, and deadly, and it continues to take lives at an alarming rate. No matter how many substances are banned or criminalized, the demand for relief, escape, or pain management does not disappear and neither does the supply of illegal drugs.Kratom is not fentanyl. Kratom is not an opioid manufactured in a lab or trafficked by cartels. It is a plant that many adults use responsibly to manage pain, reduce dependence on stronger substances, or avoid returning to dangerous street drugs. In communities like mine, some people turn to kratom specifically to stay away from fentanyl and heroin, not to replace them with something stronger. Making kratom illegal does not stop the flow of fentanyl into our neighborhoods. It does not reduce demand. What it does do is remove a legal, regulated option and push more people back toward the streets, where fentanyl is unpredictable and often lethal. History has shown us this pattern over and over again: prohibition does not protect inner-city communities—it criminalizes them. We need honesty and facts, not fear. The real crisis on our streets is illegal fentanyl, not kratom. If lawmakers truly care about Black and Brown communities, they should focus on harm reduction, education, treatment, and regulation—not blanket bans that make survival harder for people already living on the margins. Our communities deserve solutions that save lives, not policies that sound tough but fail in reality.

Worthington	Ohio	2 - Oppose - Regulation Over Ban	I'm writing to ask for thoughtful, compassionate consideration regarding natural kratom and the people whose lives it affects. For many individuals, kratom is not a trend or a talking point—it is a plant they responsibly turn to in order to cope with pain, manage stress, or move away from far more dangerous substances. These are everyday people: parents, workers, veterans, and neighbors who are simply trying to live healthier, more stable lives. Blanket bans and one-size-fits-all policies risk harming the very people public health efforts are meant to protect. When access to natural alternatives is taken away, many are left with fewer options and greater risks. Compassionate regulation, education, and quality standards offer a far more balanced and humane approach than prohibition. I respectfully ask that the voices of responsible kratom consumers, researchers, and harm-reduction advocates be included in this conversation. Policies rooted in empathy, evidence, and personal autonomy can protect public safety without unnecessarily criminalizing or marginalizing people who are doing their best to care for themselves. Thank you for your time, your service, and your willingness to consider an approach guided by understanding rather than fear. I truly hope we can move forward in a way that prioritizes both safety and compassion. Keep natural kratom legal Kratom is helping families across the country by providing a natural tool for managing chronic pain, reducing anxiety, and supporting recovery from opioid dependence—often restoring stability, presence, and joy in the home. Many parents and spouses who once struggled with debilitating pain from injuries or conditions report that responsible use of natural kratom leaf allows them to work consistently, provide for their loved ones, and engage fully in family life without the fog, dependency, or severe side effects of prescription opioids. For families touched by addiction, kratom has served as a gentler bridge during opioid tapering, easing withdrawal symptoms and cravings so individuals can rebuild relationships, hold jobs, and be emotionally available for their children and partners—turning cycles of despair into stories of renewed hope and connection. Grandparents regain mobility to play with grandkids, spouses rediscover intimacy and shared activities, and entire households benefit from lower stress and more positive moods. Of course, this comes with mindful, low-dose use, strain rotation, and professional guidance to avoid tolerance or risks, but for countless families—like those sharing testimonials of getting off harder substances and reclaiming their roles as providers and caregivers—kratom has been a lifeline that strengthens bonds, preserves livelihoods, and keeps loved ones together rather than tearing them apart. It's not a one-size-fits-all solution, but when used responsibly, it empowers families to heal and thrive naturally. Keep natural kratom legal As a certified automotive mechanic with over 15 years of experience working in a busy repair shop. I want to share how natural kratom has genuinely improved my professional life and overall well-being in a responsible, measured way. My job is physically demanding—crawling under vehicles, lifting heavy parts, standing for 10+ hour shifts, and dealing with repetitive strain from tools and awkward positions. Over time, chronic lower back pain and joint stiffness

			from years of hard labor made it increasingly difficult to maintain focus and productivity without relying on prescription painkillers. Those medications often left me drowsy, slowed my reaction times, and clouded my judgment, which is unacceptable when working with hydraulic lifts, power tools, and customer vehicles. I knew I needed a better option to stay sharp, manage discomfort, and keep performing at a high level. After thorough research and starting with low doses of high-quality, lab-tested plain leaf kratom from a reputable vendor, I found a natural alternative that truly works for me. In the mornings, a moderate dose of a white or green strain provides a clean, sustained energy boost—similar to a strong cup of coffee but without the crash or jitters. It helps me power through long days, stay motivated during tough repairs, and maintain the mental clarity needed for diagnosing complex issues accurately. For pain flare-ups during shifts, a slightly higher dose in the afternoon eases muscle soreness and inflammation without sedation or impairment, allowing me to bend, twist, and lift with far less discomfort. The biggest difference has been in my overall performance and quality of life at work. I no longer dread the start of my shift or feel exhausted by midday. My productivity has noticeably increased—I complete jobs faster, with fewer errors, and I can take on more challenging diagnostics that require sustained concentration. Customers get better service because I'm fully present and capable. Personally, I've reduced my reliance on stronger pharmaceuticals, improved my sleep quality at night (thanks to better pain management during the day), and felt more balanced emotionally, which reduces stress in a high-pressure shop environment. I use kratom responsibly: I stick to plain leaf powder (never extracts or concentrates), measure doses carefully, take regular tolerance breaks, and stay hydrated. I've never experienced negative side effects that impact my work, and regular blood work through my doctor shows no concerning changes. Kratom isn't a cure-all, but for someone in a blue-collar trade like mine, it's been an invaluable tool for staying functional, productive, and independent in a job that demands both physical endurance and mental sharpness.I believe responsible adult use of natural kratom should remain accessible for people like me—hardworking tradespeople who just want to manage pain and fatigue without the risks or side effects of traditional opioids. It has helped me keep my career on track, support my family, and continue doing the work I love every day. I am truly scared what happens if you ban it. Have to quit my job to stop the pain. Before I discovered kratom, chronic pain dominated every aspect of my life. For years, I battled debilitating back pain from an old injury, cycling through prescription opioids that made me sick, dependent, and barely functional. Mornings were the worst—I'd wake up stiff and exhausted, dreading the day ahead. Work suffered, relationships strained, and simple things like playing with my kids or even grocery shopping felt impossible. I felt trapped in a cycle of pain and pills, with no real relief in sight. Then I tried natural kratom, starting with a low dose of plain leaf powder from a reputable source. The difference was almost immediate. At moderate doses, it eased my pain without the heavy sedation of opioids—steady relief that let me move freely again. I could stand for hours without hurting , sleep

			better at night, and actually enjoy my days. Over time, it became my go-to for managing flare-ups naturally, giving me control back instead of relying on doctors who only offered more prescriptions. Natural Kratom didn't just help with pain it transformed my energy and mood. Lower doses in the morning acted like a gentle stimulant, sharper than coffee but without the jitters. I started tackling projects I'd put off for years: fixing things around the house, exercising regularly, even picking up new hobbies. My anxiety eased too; I felt calmer and more present with my family. Quitting the stronger meds was tough at first, but kratom smoothed the withdrawal in a way nothing else did. Today, I'm off prescriptions entirely, more active than I've been in a decade, and genuinely happier. Kratom gave me my life back—not as a miracle cure, but as a reliable, plant-based tool that works for me every day without it I fear what will happen to me as I will no live a good quality of life Science-based regulation should prioritize evidence over prohibition, addressing gaps in research while protecting consumers. Key proposals include funding more clinical trials, as urged by NIDA and FDA grants for human studies on abuse potential and safety. Congressional bills, like those introduced in 2023 and 2025, aim to protect access while directing the Department of Health and Human Services to collect data on kratom's impacts. Experts advocate for federal adoption of KCPA-like frameworks: mandatory testing for contaminants, clear labeling of alkaloid levels (e.g., limiting 7-OH to natural concentrations), and sales restrictions to adults only. This could reduce harms from adulterated products, which drive most severe cases. International bodies like the World Health Organization, which in 2021 found insufficient evidence for global scheduling, recommend surveillance over bans to allow therapeutic exploration. States like Texas and Virginia have implemented business registration and taxation for accountability. Ultimately, regulation should evolve with data, potentially allowing FDA-approved therapies if benefits are proven. Kratom's dual profile as a potential aid for pain and addiction management, Bans in some states have not curbed use but may increase dangers through unregulated markets. A science-based federal framework—emphasizing research, standardization, and consumer protections—could safeguard public health while exploring kratom's therapeutic promise. As studies advance, policymakers must weigh substantiated claims from diverse sources to avoid overreach or undue leniency. Keep kratom legal My name is Margaret , I've been using natural kratom responsibly for several years now, and I want to share my honest testimony as an adult who has found it to be a safe, helpful part of managing daily life—without the severe risks or downsides that some headlines scream about. I first turned to natural kratom leaf powder (plain, unadulterated Mitragyna speciosa, nothing spiked or concentrated) after dealing with chronic back pain from years of physical work and some lingering anxiety that made focusing tough. Prescription pain meds left me foggy, dependent, and dealing with nasty side effects, so I looked for a natural alternative. Kratom helped me stay productive at my job, ease

			discomfort enough to move around, and keep my mood steady—without feeling “high” or out of control. What stands out most is how safe it’s been for me as a responsible adult user. I stick to moderate doses—usually 2-5 grams of plain leaf powder, brewed as tea or tossed and washed, no more than a couple times a day. I’ve never experienced anything close to overdose symptoms, severe respiratory issues, or the kind of addiction that derails life. The worst I’ve had is mild nausea if I take too much on an empty stomach, or some constipation that I manage with hydration and fiber—similar to what happens with coffee overuse. Withdrawal? If I skip a day or two, I might feel a bit irritable or achy, like coming off caffeine, but it’s mild and passes quickly with tapering. No hospital visits, no seizures, no liver problems—none of the horror stories. From what I’ve read and followed (including recent studies up to 2025-2026), natural kratom shows a much better safety profile than many portray. A controlled clinical trial on dried kratom leaf powder found it well-tolerated in healthy volunteers, with no serious adverse events even at higher single or multiple doses—no deaths, no major issues. Research on case reports often shows that when problems arise, they’re tied to polydrug use (mixing with opioids, benzos, or alcohol) or contaminants in unregulated products—not pure natural leaf alone. Pure kratom fatalities are extremely rare when isolated, and most reported deaths involve other substances. The real dangers seem to come from synthetic concentrates like 7-OH extracts, which the FDA has targeted for scheduling because they’re far more potent and risky—not traditional leaf. In Ohio, where kratom is still legal and accessible, Regulation through like sb299 makes sense—age limits (21+), purity testing clear labeling. That protects everyone without banning a tool that’s helped so many. I’m not saying kratom is risk-free or for everyone—nothing is, including alcohol or over-the-counter meds. But for responsible adults who educate themselves, start low, use pure natural forms, and avoid mixing it with other substances, it’s been remarkably safe and beneficial in my experience. It hasn’t ruined my life; it’s given me more control over it. If you’re considering it, talk to a doctor, research reputable vendors with third-party testing, and use moderation. For me, natural kratom has been a safe, effective option that deserves to stay legal and regulated—not demonized. Thank you for listening to my story. Adults should have the freedom to choose plant-based options for self-managing health issues, especially when conventional medicine falls short.. undertreated chronic pain or limited addiction treatment. Kratom has centuries of traditional use in Southeast Asia for similar purposes without widespread devastation. Denying access infringes on bodily autonomy and stifles potential research into its benefits. Legal, regulated kratom supports jobs in farming, processing, and retail (often in rural areas), while generating tax revenue. It also empowers communities by providing a legal, sustainable alternative that reduces societal costs from opioid-related healthcare, incarceration, and lost productivity. The counterarguments (addiction risk, lack of FDA approval, rare adverse events) are valid concerns, but they’re best addressed through smart regulation—not outright prohibition, which has historically failed with other substances and often increases harm. Federal efforts in 2025 focused on cracking down on synthetic 7-OH extracts

			(high-potency isolates added to some products), not natural leaf kratom, showing a path forward that distinguishes safe, traditional forms from risky adulterations. In short, the strongest case is pragmatic: regulation preserves access for those who benefit, minimizes risks through oversight, and aligns with evidence over fear. A ban will only send tax dollars across state lines it's untested ruin families by incarceration And the struggle of addiction. Keep natural kratom legal and regulate I am writing to dismantle the web of misconceptions and outright lies that have been spun around natural kratom—a humble plant from Southeast Asia that has empowered millions to manage pain, combat addiction, and reclaim their lives. For too long, fearmongering and misinformation have clouded the truth, pushing misguided bans and restrictions that do more harm than good. I urge you: it's time to support the legalization and sensible regulation of natural kratom, not prohibition. Let's separate fact from fiction and build a future where safe, natural alternatives are accessible to those who need them. First, let's address the biggest lie: that kratom is a "dangerous opioid" equivalent to heroin or fentanyl, with no medical value and inevitable addiction. Critics, including some at the FDA, paint kratom as a public health crisis, citing its alkaloids like mitragynine and 7-hydroxymitragynine that interact with opioid receptors. But this is a gross oversimplification. Unlike synthetic opioids, natural kratom doesn't recruit beta-arrestin, a pathway linked to respiratory depression and overdose deaths. Studies show kratom's abuse potential is low, far below that of traditional opioids, and it's been used traditionally for centuries without the devastation we see from prescription painkillers. The claim that kratom causes psychosis, suicide, or violence? Debunked by over 57 years of scientific review—no good evidence supports it. In fact, when deaths are attributed to kratom, autopsies almost always reveal polydrug use, including fentanyl or other substances—not kratom alone. Another pervasive myth is that kratom is "highly addictive" and kills indiscriminately. Yes, like caffeine or even sugar, it can be habit-forming in high doses, leading to dependence for some users. But the narrative that it's a gateway to harder drugs or causes widespread fatalities is a lie fueled by sensationalism. The CDC has linked only a handful of deaths to kratom over years, and even those involved contaminants or mixtures—not pure, natural leaf. Contrast this with alcohol, which kills over 140,000 Americans annually, yet remains legal and unregulated in comparison. Kratom users report mild withdrawal, manageable with tapering, not the life-threatening symptoms of opioid detox. And let's be clear: the real danger comes from unregulated markets, where adulterated products spike with synthetic 7-OH or heavy metals appear due to lack of oversight. Banning natural kratom doesn't eliminate risk—it drives it underground, creating black markets that harm consumers more. Now, let's turn to the overwhelming evidence in support of natural kratom's legality. This plant isn't just harmless; it's a lifeline. Millions use it to alleviate chronic pain, anxiety, and fatigue without the side effects of pharmaceuticals. In the midst of America's opioid epidemic, kratom has helped countless individuals wean off deadly painkillers, reducing cravings and withdrawal symptoms. A 2024 FDA

			pilot study even found natural kratom well-tolerated at typical doses, with only mild side effects at extremes. In Thailand, where kratom was decriminalized, communities report benefits for work productivity and health, with positive attitudes toward its use. And here in the U.S., states like Rhode Island are reversing bans, recognizing that regulation—through Kratom Consumer Protection Acts—protects consumers with age limits, testing, and labeling, while preserving access. As of 2026, kratom remains federally legal, though not FDA-approved, and 24 states plus D.C. regulate it sensibly, proving prohibition isn't the answer. Why support legalization? Because bans don't work—they punish responsible adults, stifle research, and ignore science. Experts argue scheduling kratom as a controlled substance would halt studies on its benefits and fuel illicit markets. Instead, embrace regulation: ban sales to minors, require purity testing, and educate on responsible use. This approach has succeeded in states like Utah and Georgia, where advocates push back against fear-based policies. Natural kratom empowers veterans with PTSD, workers with chronic pain, and those escaping opioid addiction—real people, not statistics. In conclusion, the lies against kratom crumble under scrutiny: it's not a killer drug, not inherently addictive like opioids, and not without value. Supporting its legality means championing freedom, science, and compassion. Let's reject prohibition's failures and advocate for smart regulation. Contact your lawmakers today—tell them to protect natural kratom. Together, we can ensure this plant remains a safe, legal option for those who need it most.

Worthington	Ohio	2 - Oppose - Regulation Over Ban	I am writing not as a scientist, lobbyist, or business owner—but simply as a mother Like many parents, my life has been shaped by love, worry, and the deep responsibility I feel to protect my family while also respecting their ability to make thoughtful choices for themselves. Over the years, I have watched people I care about struggle with pain, stress, and the pressures of everyday life. I have also seen how limited and often harsh our options can be when it comes to managing those challenges. This is why I feel compelled to speak in support of natural kratom. From my perspective as a mother, what matters most is safety, transparency, and choice. Kratom, when kept natural and unadulterated, has been used responsibly by many adults who are simply seeking balance, not harm. I have seen firsthand how having access to a natural plant option can help people avoid far more dangerous alternatives that truly put lives at risk. I am not asking for reckless use or lack of oversight. On the contrary, I strongly support reasonable regulation that ensures purity, accurate labeling, and age restrictions. What I fear is an outright ban that would push responsible adults into the shadows or force them toward substances that are far more damaging. As a mother, my instinct is to protect—but protection does not always mean prohibition. Sometimes it means education, honesty, and trust in people to make informed decisions. Taking away a natural option that many rely on responsibly does not make families safer; it makes their paths harder and, in some cases, more dangerous. I ask that you consider the voices of parents like me—people who care deeply about health, dignity, and real-world outcomes. Please support policies that keep kratom legal, natural, and regulated rather than criminalized. Thank you for taking the time to listen to a mother's concern and hope for a safer, more compassionate approach.

Worthington	Ohio	2 - Oppose - Regulation Over Ban	I live with fibromyalgia, a chronic condition that causes widespread pain, fatigue, and a host of other debilitating symptoms. For years, I struggled to find relief. Prescription medications often came with dangerous side effects, and many left me feeling more debilitated than the condition itself. Kratom has been a life changing tool for me. When used responsibly, natural kratom helps manage my pain, improves my energy, and allows me to participate in daily life again. It is not a miracle cure, but it is a safe, natural alternative that empowers me to live with dignity and independence. I have worked closely with responsible vendors and always choose lab-tested, pure kratom to ensure my safety. Education is the key. Kratom is safe when people know how to use it properly. Understanding dosing, quality sourcing, and potential interactions prevents misuse and protects consumers. A federal ban would do the opposite—it would push people like me to unsafe, unregulated products, some of which are laced with fentanyl or other toxic substances, putting lives at serious risk.Kratom is not just a supplement.. it is a lifeline for many Americans managing chronic pain, fibromyalgia, or seeking harm reduction from more dangerous substances. Protecting access while promoting safety, education, and quality standards is the responsible approach. Prohibition does not help patients; it endangers them. I urge regulators, and the public to consider the real human impact before making decisions that could eliminate access to natural kratom. For people like me, it is a safe, essential tool, and education not banning is the path to safety and well-being. Keep natural kratom legal Scientific studies and decades of anecdotal evidence show that kratom is overwhelmingly safe when used appropriately. Adverse effects are rare and almost always associated with adulterated or misrepresented products. Unlike alcohol, tobacco, or prescription opioids, kratom carries a significantly lower risk of addiction or fatal overdose. For many, it serves as a natural alternative to dangerous pharmaceuticals, supporting well-being without the destructive consequences of other substances. Banning kratom at the federal in Ohio would not make it disappear. Demand would remain, and a black market would inevitably emerge. Tax dollars could have gone to schools, chemical laced natural kratom killing thousands of people those who turn black market. This underground supply often includes untested, adulterated, or even fentanyl-laced products, dramatically increasing the risk to public health. In other words, prohibition would make kratom more dangerous, not safer. Education is the Key Instead of banning kratom, policymakers should focus on education and regulation. Public awareness campaigns, labeling standards, and quality controls can ensure that consumers know how to use kratom safely. Responsible vendors already work with third-party labs to provide pure, natural kratom tested for contaminants. Education empowers users to make informed choices and keeps communities safe, while prohibition punishes law-abiding citizens and endangers them. Supporting Responsible Access Kratom also supports local economies. Small businesses and entrepreneurs provide tested, safe kratom to their communities, often paying taxes and creating jobs. Federal prohibition would destroy these livelihoods while failing to reduce use or protect the public. Kratom is safe

			when used responsibly. Banning it is not only unnecessary it is dangerous, counterproductive, and unfair. Education, regulation, and quality standards are the tools that truly protect public health, empower consumers, and prevent the deadly consequences of untested black-market alternatives. The choice is clear: protect Americans through knowledge, not prohibition. Keep kratom legal

Worthington	Ohio	2 - Oppose - Regulation Over Ban	protect natural kratom and oppose any federal prohibition. Kratom is a safe, natural botanical that has been used responsibly for centuries in Southeast Asia and for decades here in Ohio . Millions of Americans rely on it for pain management, mental wellness, and harm reductio yet it remains under threat from misinformation and poorly considered regulation. Natural kratom is overwhelmingly safe when used responsibly. Scientific studies and decades of real-world use show that adverse effects are rare and almost exclusively linked to adulterated or misrepresented products. In fact, kratom is far less harmful than alcohol, prescription opioids, or tobacco. It provides a natural, non-addictive alternative for individuals seeking relief from chronic pain, stress, or fatigue without the devastating risks associated with many prescription medications. A federal ban would be counterproductive and dangerous. Rather than protecting Americans, prohibition would drive kratom use underground, opening the door to untested, illicit products often laced with fentanyl or other toxic adulterants. This is a predictable consequence of banning safe substances—people will still seek the benefits, but without the protections of regulated commerce. The result is unnecessary risk, overdose, and death. Protecting natural kratom also protects Ohioans' rights and the livelihoods of responsible vendors. Many local businesses operate safely and legally under state law, providing tested, natural products to their communities. State natural kratom prohibition would unfairly criminalize these entrepreneurs, creating civil and criminal liability for a product that millions rely on daily. Even level a huge sin tax with sb299 in current talks to fund schools, The solution is not prohibition. The solution is sensible regulation, quality standards, and consumer education. These measures ensure natural kratom remains safe, accessible, and effective while eliminating the risks associated with untested black-market alternatives. I urge you to act based on science, safety, and common sense. Protect natural kratom, protect public health, and protect the rights of Ohioans to make informed choices about their health.keep natural kratom legal
Worthington	Ohio	2 - Oppose - Regulation Over Ban	Opposed. I think it's important to separate lab created poison from naturally occurringKratom. I have had negative experience with the lab isolated products and I can attest that concern is valid. It absolutely should be banned. The leaf is a different story. I have pre measured amounts That I take at certain times of the day. It is helpful to me for a few different reasons. I have not had issues with feeling the need to increase the dosage. In short, the Kratom leaf can be managed responsibly. I do it every day. I had a very different experience with the lab isolated poison. It is dangerous and impossible to manage responsibly. Conclusion- I would urge that we sharpen our pencils and solve the problem of poison without punishing people who manage use of the leaf responsibly.

Worthington	Ohio	2 - Oppose - Regulation Over Ban	I am writing to urge the Board to consider the continued legal status of kratom as a civil rights and public health issue, not merely a regulatory or enforcement matter. For many adults, kratom is used responsibly to manage chronic pain, anxiety, fatigue, or to reduce or avoid dependence on far more dangerous substances, including opioids and alcohol. Policies that restrict or ban kratom disproportionately affect people with limited access to healthcare, pain management, or affordable treatment options. In this way, prohibition creates unequal outcomes and places an undue burden on vulnerable communities. Adults have a fundamental right to bodily autonomy and to make informed decisions about their own health, particularly when those decisions involve substances that are demonstrably less harmful than many legal alternatives. Criminalizing or over-regulating kratom pushes responsible users into unsafe or illicit markets, increases stigma, and undermines trust in public health institutions. Rather than prohibition, I respectfully ask the Board to support evidence-based regulation that prioritizes consumer safety, product quality, transparency, and education. Reasonable standards protect the public without stripping individuals of their rights or access to a plant that many rely on to maintain stability, employment, and quality of life. Kratom legality is not just a policy choice; it is a matter of fairness, health equity, and civil liberties. I urge the Board to carefully consider the real-world consequences of restriction and to keep kratom legal for adult use. It is an empirical fact that the "War on Drugs" has not been waged equally. Black men are incarcerated at rates 5× higher than white men for drug related offenses, despite similar rates of usage. This systemic disparity creates a cycle where a health crisis addiction is treated as a criminal failing rather than a medical emergency.When a Black man is struggling with opioid dependency, the stakes are higher. A relapse isn't just a health setback; it is a direct path to a prison system that is already over indexed with Black bodies.. The fentanyl crisis has devastated our neighborhoods. For many Black men trying to break the cycle of opioid use, the traditional medical system feels like a trap. Between the fear of being "red-flagged" in a database as drug-seeking and the lack of culturally competent recovery resources, many are forced to find their own way out. In this context, kratom has emerged as a lifeline. For a man trying to get off fentanyl, kratom offers a way to manage debilitating withdrawal symptoms and cravings without the high stakes of a clinical environment that might view him with suspicion.For those who have been burnt by the system, kratom provides a sense of agency. It allows a person to manage their recovery without the constant threat of surveillance or the "patient to prisoner" pipeline. When the alternative is a street supply of fentanyl that is often fatal, with traq. While a natural botanical like kratom is a tool for survival. If the Board moves to over regulate or ban substances that people are using to successfully transition away from lethal opioids, you are not "protecting" the public. Instead, you are stripping away a tool for self-preservation from a community that already has the fewest options. If Removing access to kratom will not stop the pain; it will simply drive Black men back toward a lethal black market or into the arms of a penal system that is waiting to absorb them. I urge you to look at the data on incarceration and overdose

			deaths through a lens of equity and to protect the right of individuals to choose safer, natural paths to recovery. Sincerely, A strong black man I am writing to you today to address two seemingly disparate topics that, in my reality, are deeply intertwined: the cultural significance of the Creed film franchise and the systemic barriers to pharmaceutical trust within the Black community. While it may seem unusual to discuss cinema in a letter to a regulatory body, Creed serves as a powerful metaphor for the agency, resilience, and advocacy required when Black individuals navigate systems not originally built for them. The Creed series is more than just a boxing story; it is a narrative about reclaiming a legacy and fighting to be seen on one's own terms. For many Black viewers, Adonis Creed represents the struggle to overcome a "pre-existing condition"— n his case, a shadow of a father he never knew while demanding a seat at the table.In the ring, every move is documented, every hit is felt, and the outcome depends on a corner team that actually listens to the fighter. We see a Black man whose physical vulnerability is met with intense, specialized care. This is a stark contrast to the reality many of us face when we walk into a pharmacy or a clinic. The hesitation many Black people feel toward medical institutions and pharmaceutical entities is not a "lack of education." It is a calculated survival mechanism based on a history of exploitation. From the unethical "medical gaze" of the 19th century to the Tuskegee Syphilis Study and the theft of Henrietta Lacks' cells, the medical community has frequently treated Black bodies as specimens rather than patients. In the context of the Board of Pharmacy, this mistrust manifests in several ways: Research consistently shows that Black patients are often under-prescribed pain medication due to false, biological myths about "thicker skin" or higher pain thresholds. The lack of accessible, well-funded pharmacies in predominantly Black neighborhoods creates a physical barrier to life-saving care. The use of pharmacy data and "risk scores" that can unfairly flag Black patients as "drug-seeking" when they are simply seeking relief for chronic conditions. Just as Adonis Creed needed a team that believed in his capacity to win, Black patients need a pharmaceutical system that treats them with transparency and dignity. Mistrust cannot be "cured" with a marketing campaign. It requires the Board to actively dismantle the biases baked into pharmaceutical distribution and oversight. We need to know that when we are handed a prescription, it is based on our actual needs, not a stereotype, and that the person behind the counter sees us as the protagonists of our own lives. I urge the Board to consider how your policies from drug pricing to provider education should either bridge this gap or widen it. The current hysteria surrounding kratom feels uncomfortably familiar to anyone who remembers the era of "reefer madness." For decades, marijuana was portrayed as a dangerous substance based on fear, misinformation, and worst-case hypotheticals rather than real-world evidence. We now know how wrong that approach was. If marijuana policy had been left solely in the hands of risk-averse bureaucrats, it likely would still be illegal today. Instead, Ohio

			chose a more balanced, evidence-based path one that has helped millions of Ohioans manage pain, reduce reliance on opioids, and improve their quality of life. That progress happened not because fear won, but because facts and lived experience did. Kratom is now facing the same cycle: exaggerated claims, selective data, and a refusal to acknowledge the experiences of responsible adults who use it safely. As with marijuana, prohibition does not eliminate use it simply pushes it underground, removes consumer protections, and punishes people who are trying to manage their health responsibly. Ohio has already learned this lesson. Regulation works better than prohibition. Transparency works better than fear. Listening to citizens works better than dismissing them.I urge policymakers to resist repeating the mistakes of the past. Kratom policy should be guided by science, regulation, and common sense not the modern equivalent of reefer madness. Respectfully, An Ohio Resident

Worthington	Ohio	2 - Oppose - Regulation Over Ban	from rural Appalachia a place that is poor, hurting, and too often ignored until it is time to pass another ban that makes life harder for the people who already have the least. Fentanyl is killing our children, our neighbors, and our friends. Everyone here knows someone we've lost. Jobs are gone. Rural hospitals have shut down. Mental health services are almost nonexistent. Many of us cannot afford regular doctor visits, pain specialists, or addiction treatment even if we wanted to. These are not talking points. This is daily life where I live. People here need options to stay alive and functional. When you take away every safer alternative and leave only the most dangerous drugs on the street, people do not get clean they turn back to fentanyl. We have seen it happen over and over again. For people like me who live with chronic pain, kratom has been an affordable, plant-based option that helps us get through the day without relying on opioids we cannot access or afford. For others, it has been part of staying away from harder substances entirely. Taking that option away does not protect us it pushes people back toward what is already killing us. Overdose deaths are not down because drug use has been "solved." Narcan saves lives in the moment, and I am grateful for it but it does not address why people are using in the first place. Bans do not fix poverty, pain, trauma, or lack of healthcare. They just make survival harder. From where we sit, these bans feel disconnected from reality and driven by politics and money instead of the people who will live with the consequences. Those consequences will be real, and they will be measured in funerals. I am asking you to listen to rural voices and choose regulation, education, and harm-reduction over prohibition. Do not take away one of the few tools some of us still have to stay alive. I will be at every meeting on this issue because lives in my community depend on it.
Worthington	Ohio	2 - Oppose - Regulation Over Ban	I strongly oppose banning natural kratom leaf in Ohio. Kratom is not equivalent to pharmaceutical opioids and does not carry the same lethal risk. Banning it will not eliminate demand.. it will push responsible adults toward unsafe, unregulated markets and increase harm. Ohio already did the right thing by banning synthetic kratom products like 7-OH. Natural, unmodified kratom leaf should be regulated instead, not scheduled. Please choose harm reduction: leave natural kratom alone

Worthington	Ohio	2 - Oppose - Regulation Over Ban	I respectfully ask that you reconsider efforts to ban kratom and instead support responsible regulation and continued research. Kratom is a natural, plant-based substance that has been used traditionally for generations. Today, many adults choose it as part of a personal wellness routine or as a harm-reduction alternative to more dangerous substances. For people like me, kratom has been a positive, stabilizing presence in daily life when used responsibly. I want to be clear that I support commonsense safeguards including age restrictions, quality standards, and clear labeling. What I do not support is a ban that would remove a natural option that many responsible adults rely on and push it into unregulated or illicit markets, where safety risks are far greater. On a personal level, kratom has helped me stay engaged, productive, and focused on improving my life. It has allowed me to show up for my family, my responsibilities, and my community. I am grateful for the role it has played in my journey, and I know I am not alone in that experience. Because this issue matters deeply to me, I plan to attend each meeting and remain actively involved in efforts to stop a ban and advocate for thoughtful, evidence-based policy. I believe education and regulation are far more effective than prohibition. Thank you for your time, your service, and your willingness to listen to the voices of constituents who are directly affected by this decision. The current push to ban natural kratom mirrors one of the most well-documented policy failures in American history: Reefer Madness. In the mid-20th century, cannabis was criminalized not through science or public health data, but through fear-based propaganda, exaggerated harms, and moral panic. Today, kratom is being treated the same way. Rather than engaging with real-world evidence, lived experience, and harm-reduction outcomes, opponents of kratom rely on worst-case narratives, selective data, and alarmist rhetoric. Kratom is framed as inherently dangerous, despite the fact that many people use it responsibly to manage pain, mental health challenges, or to transition away from far more lethal substances like fentanyl. This distortion of risk is exactly how Reefer Madness operated by amplifying fear while suppressing nuance and context. Just as cannabis prohibition ignored the voices of patients and communities, the push to ban kratom disregards the testimony of people whose lives depend on having safer alternatives. The result is policy driven by stigma instead of science, ideology instead of outcomes. History has already shown that banning substances under moral panic does not eliminate use it drives people toward more dangerous options and increases harm. Calling this “public health” does not make it so. True public health policy expands options, reduces risk, and listens to evidence and lived experience. What we are seeing instead is a coordinated fear campaign that treats kratom the way cannabis was once treated demonized, misunderstood, and prohibited to the detriment of the very people regulators claim to protect. We should have learned from Reefer Madness. Repeating it under a new name will not save lives. The Board of Pharmacy is acting like a body of corrupt, unaccountable bureaucrats. This has nothing to do with public

			health and everything to do with control. What we are witnessing is a coordinated, fear-driven campaign modern-day reefer madness designed to strip people of safe, legal options that don't fit a preferred narrative or profit structure. Natural kratom has helped thousands of people reduce harm, manage pain, and escape far more dangerous substances. Instead of acknowledging that reality, the Board is pushing prohibition rooted in misinformation, stigma, and selective outrage. This is not evidence-based policy. It is ideological enforcement disguised as concern. When regulators ignore lived experience, silence dissent, and remove alternatives that keep people alive, they are not protecting the public they are endangering it. Taking away options does not save lives. It traps people. And history has already shown us where that road leads.

Worthington	Ohio	2 - Oppose - Regulation Over Ban	I strongly oppose this measure and believe it to be incredibly short sighted. The governor (I'd imagine with heavy influence from pharmaceutical companies) seems to be conflating the dangers of 7-OH with the Kratom plant itself. I wholeheartedly support regulation but outright banning Kratom with undoubtedly harm countless Ohioans. I personally use Kratom to manage ADHD symptoms and it has been highly effective in improving my focus at work, so much so that I have not needed to take other stimulant medications. I am in excellent health and have been using this product going on 4 years without any adverse effects. What is more concerning to me though is that I am aware that many people have used Kratom to essentially cure pharmaceutical opiate dependency. Kratom is, by orders of magnitude, a much safer alternative. Quite frankly, I believe the governor could be killing many of his constituents if this rule is implemented, which I genuinely don't think is his intention. Please reconsider.
Cleveland	Ohio	2 - Oppose - Regulation Over Ban	I have been an occasional kratom user for over 6 years. I have only used dried powdered leaf procured through American Kratom Association registered vendors. At no time have I used or been tempted to use pills or concentrates. I too am greatly concerned about untested and unmonitored concentrates and the proliferation of kratom and kratom products at gas stations and the like. However classifying all kratom and schedule 1 will merely drive kratom and kratom products underground guaranteeing they will be unregulated and likely undergo no GMPs. We need stricter regulations and testing. Banning kratom only ensures it is unregulated. This will increase the dangers of poor manufacturing and possible adulterants for Ohioans. In fact members of the American Kratom Association do not ship to states where kratom is banned. If kratom is banned in Ohio then only companies that are not monitored by the AKA for purity and GMPs will ship to Ohio. Please do remove unregulated kratom, especially concentrates and synthetics, from gas stations, etc. Please do allow and regulate adult kratom use. Thank you for your consideration.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration. Sincerely, Haley Walkuski Strongsville, OH

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	The Board of Pharmacy wanting to ban natural, pure leaf kratom is a mistake for many reasons. First, the science used by those pushing for bans is inaccurate with manipulated data, in other words: bad science to conform to a narrative. No one has died from natural, pure leaf kratom alone. No one has ever overdosed on natural, pure leaf kratom alone. No one has robbed stores or lost their homes because they had to pay for their kratom. Pharmaceutical drugs are FAR more dangerous than kratom could ever be. They are scheduled drugs: how well has that worked out? Banning something doesn't make it go away. It pushes it underground, providing opportunity for more adulterated, more dangerous product. Kratom has saved millions of lives and livelihoods. My husband no longer is a heroin or suboxone addict. He takes kratom as he needs and is a fully functional husband, father, and law abiding citizen- but now, you want to make him a felon. My grandmother is 79 years old with osteoporosis, rheumatoid arthritis, etc. She takes kratom daily to manage her pain. Before finding kratom, she could hardly dress herself. Today? She is able to dress, bathe, walk around her home, sow, get in the car, etc. It has literally gave her life back. No narcotic, when she could get one from the Dr., did anything close to that. You want to make her a felon. We DO WANT these dangerous and addictive products, which are falsely labeled as kratom, removed from all stores in Ohio. We want common sense regulation! Young people have more serious problems than natural, pure leaf kratom- they vape at a ridiculously high rate. They consume alcohol, which i would argue is the the only drug not currently illegal that should be (how many people die every year because of alcohol abuse?) They can walk into any store that carries dangerous energy drinks, buy as many as they want... do you know how many youth have died from energy supplements? Why aren't trying to ban that? How many people die every year from illnesses caused by the harmful toxins in our food? Youth specifically live on fast food poison- why aren't putting effort into banning that? Natural, pure leaf kratom is used by good, law abiding, productive citizens to manage a multitude of symptoms. Just because no one has classified it as having medical use, doesn't mean that people are not being helped everyday by this God given blessed plant! We want Kratom to be regulated for natural and pure- no additives or alterations. Please, truly consider the number of terrific people this ban hurts. Jane Babin has authored a terrific white paper explaining the horrible, debunked science being used to chase these bans. Please read it. Please do right by Ohioans, and consider the wonderful, law abiding people, many in recovery, elderly, or struck with horrible diseases, this affects. This ban would destroy their lives.... they have shared over and over again their lived experiences... NATURAL, PURE LEAF KRATOM is safe. Banning it pushes it underground, and forced hundreds of thousands Ohioans to dangerous alternatives. Please use good science and make the right decision- regulation. Press the State legislature to pass the KCPA. I suffer from social anxiety and a lot pain from constantly standing for long periods of time. Kratom helps relieve that pain for a brief period of time and allows me to be social without the issue of my anxiety making it harder.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	Dear Ohio Board of Pharmacy, Please Protect Natural Kratom Tea/Powder With Sensible Regulation, Not a Ban I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. We bring people together for yoga and to support amazing locations around town, and we love gathering people at the kava bars as well. Thank you for your time and consideration. Sincerely, Bottoms Up! Yoga & Brew Avon Lake/Cleveland
Cleveland	Ohio	2 - Oppose - Regulation Over Ban	Subject: Please Protect Natural Kratom Tea/Powder With Sensible Regulation, Not a Ban Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration. Sincerely, Jason Lacki

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	I am in SUPPORT of regulating Kratom although I feel that Kratom does NOT need to be regulated. I am against the ban of Natural Kratom. Natural Kratom is like any other plant that has been used for many years since the beginning of time. Any Natural substance including food (carrots, potatoes, beef, iron, fiber etc) when used in an abundance can cause harm to a person's body. FDA drugs causes more harm to an organ of a human than any natural substance. Man-made drugs (Tylenol, excederine, Xanax, morphine, codeine, enhanced vitamins etc...) causes more damage to a person's health in a higher percentage than a natural substance like Kratom. The governor and Board of Pharmacy seem to be concerned about the health risks of Kratom. Ignoring the fact that those who have died have used kratom mixed with other drugs (FDA approved drugs). Kratom alone was NOT the cause of those deaths. Im sure the real reason, the government wants to ban Kratom is because they haven't figured out a way to tax it and have financial gain. The Ohio government forced a shot (during covid) on Ohio residents that caused more hurt than help. Also, the shot did not save anyone's life. Those that died from covid had other underlying issues. If you have to, REGULATE Natural Kratom. Don't ban it. Ban the 7-OH drugs that are dangerous and harmful due to the fact of Man has enhanced it. Therefore, its no longer natural. Please, let folks be. If you have to, regulate it. Do NOT ban it. Thanks? Ebony Grantonz
Cleveland	Ohio	2 - Oppose - Regulation Over Ban	This is a plant that offers much benefit to many folks who live a holistic wellness lifestyle and refuse to use medication from anywhere but nature. Banning it will be a horrible mistake and will set back so many people. You cannot band mitragynine. If you ban anything, ban the synthetic analogs that are copies of mitragynine!

Columbus	Ohio	2 - Oppose - Regulation Over Ban	A central part of the SB299 discussion was thoughtful regulation not prohibition. The bill proposed commonsense safeguards: restricting sales to adults over 21, implementing quality and safety standards, and applying a 35% excise tax with revenue directed toward schools. That is not reckless policy. That is responsible governance. It balances public safety, consumer protection, and public benefit. Ohioans want regulation, not another failed ban. The people have been clear about that. SB299 reflects what responsible adults expect: transparency, oversight, and choice. Ignoring this framework in favor of prohibition would hurt working adults, seniors, small businesses, and communities that would otherwise benefit from tax revenue.Much of the information circulating online right now is driven by fear-based messaging and recycled propaganda. This feels eerily familiar. We have seen this before with marijuana what many now recognize as “reefer madness.” Reasonable debate is being shut down, comments are being deleted or banned, and voices that don’t align with the prohibition narrative are silenced. That is not public health. That is not science. That is not an honest conversation. You cannot claim this issue is being fairly debated when people are not even allowed to discuss kratom openly without being removed or dismissed. When discussion is suppressed, trust is lost. And that is exactly what is happening now. Natural kratom, when properly regulated, is safe for responsible adult use. Ohio already had a path forward with SB299 one that respected adults, protected consumers, and benefited schools and communities. Abandoning that path will not protect Ohioans; it will harm them and repeat mistakes we already know do not work. Please stop treating this like a new moral panic. Ohio does not need another round of kratom “reefer madness.” It needs facts, transparency, and respect for the will of the people.
Columbus	Ohio	2 - Oppose - Regulation Over Ban	I am writing this to express my strong support for your commitment to keep natural legal continued access to pure, responsibly sourced Mitragyna speciosa leaf for adult consumers. As a resident of Ohio who has personally benefited from natural kratom, unaltered, lab-tested kratom powder sourced ethically from sustainable Southeast Asian farms, free of synthetic additives, adulterants, or concentrated extracts—sets a responsible standard in an industry. By focusing exclusively on natural leaf kratom with rigorous third-party testing for contaminants, heavy metals, and alkaloid consistency, you help ensure consumers receive a product that aligns with traditional, centuries-old use rather than risky formulations. Your emphasis on education, clear labeling, and transparent sourcing empowers adults to make informed choices for wellness support, whether for managing daily discomfort, promoting focus and energy, or as part of harm reduction strategies. I Advocacy for Responsible Regulation: In line with efforts like the American Kratom Association’s Kratom Consumer Protection Act, SB299 your practices support evidence-based oversight while preserving access to this natural botanical for millions who rely on it responsibly. Keep natural kratom legal.

Columbus	Ohio	2 - Oppose - Regulation Over Ban	Kratom leaf has helped me a disabled veteran with multiple issues. I do not oppose a 7OH ban, but I oppose a total kratom ban. I hope for regulation of kratom in the future. This plant makes me be more present for my family, helps socialize, and have less pain.
Columbus	Ohio	2 - Oppose - Regulation Over Ban	My name is Demarius Williams, firefighter and like many of you, I stand before you not as an expert in white coats or a policymaker behind a desk, but as someone who has lived the reality that brings us together. I'm from right here in Canton, Ohio—a place where families are hurting, where people are searching for real solutions to chronic pain, to the grip of opioid dependency, and to the daily battle just to feel like themselves again. Today, I want to speak plainly and from the heart about natural kratom—the leaves of the Mitragyna speciosa tree, used responsibly for centuries in Southeast Asia, and now helping millions here at home. This is not about promoting reckless use or ignoring risks. It's about recognizing a plant that, when sourced purely and used in moderation, offers hope where modern medicine has too often failed. Let me be clear: natural kratom is not the same as the synthetic, concentrated extracts or isolated 7-hydroxymitragynine products that have rightly raised alarms. Those lab-made versions are different—they're more potent, more unpredictable, and they're what regulators should target. But the traditional leaf, with its natural balance of alkaloids like mitragynine, is something else entirely. It's a botanical that interacts gently with our bodies, providing relief without the devastating respiratory depression or rapid addiction cycle we see with pharmaceutical opioids. I've heard the stories—perhaps you have too—from people just like us: • The veteran whose back pain from service kept him bedridden until natural kratom let him play with his grandkids again. • The mother with fibromyalgia who could finally manage her days without the fog and dependency of prescription pills. • The person in recovery who used kratom responsibly to ease opioid withdrawal symptoms, stepping away from a far more dangerous path. Survey after survey—of thousands of everyday users—shows the same pattern: a vast majority turn to natural kratom for pain relief, for anxiety, for energy without the crash, and for help breaking free from opioids. Many report it's more effective and far safer than what they were prescribed before. And critically, the rates of serious harm or dependency appear dramatically lower than with traditional opioids or even everyday substances like alcohol. We know the opioid crisis has taken far too many lives—over 100,000 in this country year after year. People are desperate for alternatives, yet when they find one that works for them—a plant grown sustainably, supporting farmers in places like Indonesia—they face threats of outright bans. Here in Ohio, recent moves to schedule even natural forms risk pushing users into the shadows, into unregulated black markets where safety can't be guaranteed. That's not protection. That's punishment for those seeking relief. We're not asking for a free-for-all. We support smart, evidence-based regulation: • Age restrictions and quality testing to ensure purity—no contaminants, no adulterants. • Clear labeling and dosage guidelines so people use it responsibly. • Education campaigns that distinguish natural leaf from dangerous synthetics. • More independent research—because the science we have is promising, but we need more to guide safe use. Nature has given us tools like this for a reason. Coffee for alertness,

			willow bark for pain, now kratom for balance in a world of over-prescribed pharmaceuticals. When used with respect—as millions do daily—it can be part of the solution to the very crisis regulators claim to fight. To my fellow Ohioans: your voice matters. To lawmakers: listen to the people actually living this, not just the headlines. And to everyone here: let's keep advocating for access to safe, natural options. Let's demand regulation that protects, not prohibits. Let's choose harm reduction over fear. Because for too many, natural kratom isn't just a plant—it's a lifeline. It's dignity. It's a chance to reclaim life from pain and addiction. Keep natural kratom legal

Columbus	Ohio	2 - Oppose - Regulation Over Ban	Plain leaf kratom has several medicinal benefits for people struggling with pain, addiction, and other health issues. I have seen numerous examples online of individuals using it as medication or to prevent themselves from using illegal street drugs or legal substances such as alcohol. The rapid criminalization of plain leaf kratom is a threat to our communities and an infringement on our personal freedoms. I would urge the BoP to look at other states that have regulated kratom in a way similar to cannabis, alcohol, or tobacco. I do not believe that the nuclear option of changing this substance to a schedule 1 drug is in the best interest of Ohioans and I believe it could have long term negative ramifications. This plant can be sensibly regulated in a way that protects consumers and youth while still preserving our freedom and personal liberty. Please reconsider the proposed actions.

Columbus	Ohio	2 - Oppose - Regulation Over Ban	My name is police officer Jayden Smith and a resident of Portsmouth Ohio, and someone who has seen firsthand the toll that the opioid epidemic has taken on our neighborhoods, our families, and yes—our brothers and sisters in law enforcement. As someone who has advocated for natural alternatives in the face of this crisis, I stand before you to speak candidly about natural kratom—the traditional leaf of the Mitragyna speciosa tree—and why many in law enforcement, including those on the front lines, are beginning to view it not as an enemy, but as a potential ally in the fight against far deadlier substances. Let me start with the reality we all live every day: the opioid crisis isn't abstract. It's overdoses in our patrol cars, calls that end in tragedy, families shattered, and too many of our own—veterans, active officers, retirees—who've struggled with pain from injuries on the job or the invisible wounds of service. Prescription opioids were pushed hard, then fentanyl flooded the streets. We've lost count of the lives claimed. Into this battlefield steps natural kratom—a plant used responsibly for generations in Southeast Asia for energy, pain relief, and managing fatigue. Here in America, millions use the plain leaf or powder responsibly, often to ease chronic pain or to step away from more dangerous opioids. Surveys of users, including many who identify as law enforcement, veterans, and first responders, show a clear pattern: people report it helps reduce reliance on prescription painkillers or street drugs, with far lower risks of respiratory failure or fatal overdose. I know the headlines focus on risks—warnings from the FDA, concerns about dependency, isolated cases tied to contaminated or adulterated products. But let's distinguish facts from fear. The real dangers regulators highlight often trace back to concentrated synthetics like 7-hydroxymitragynine extracts—lab-made, super-potent versions that aren't the same as natural kratom leaf. These manipulated products are what prompt seizures, crackdowns, and calls for bans on those specific compounds. Pure, natural kratom—the ground leaves with their balanced mix of alkaloids—doesn't carry the same profile. It doesn't typically cause the respiratory depression we see with traditional opioids. It doesn't show up as a major driver in overdose statistics the way fentanyl does. And importantly, when people use it to taper off harder substances, many stay safer. I've heard from officers who've shared privately: "It helped me manage post-injury pain without the fog of pills that could impair my judgment on duty." Veterans in our communities credit it with easing withdrawal and keeping them off the streets' deadlier alternatives. Even older public comments to the DEA years ago showed strong support from law enforcement professionals who saw it as a tool, not a threat—thousands opposing blanket bans because they knew it could save lives in the opioid fight. We in law enforcement understand regulation. We enforce laws to protect the public. That's why we support smart, targeted oversight—not prohibition that drives users underground. • Strict quality controls and testing to eliminate contaminants or adulterants. • Bans on those dangerous concentrated 7-OH products masquerading as kratom. • Age limits, clear labeling, and dosage education. • Continued research so we base policy on evidence, not speculation. Banning natural kratom outright? That risks pushing vulnerable people back toward prescription opioids, heroin, or fentanyl—substances we know kill. It creates black markets where safety vanishes. It diverts resources from real threats. As officers, we've seen harm reduction

			work—naloxone saves lives, needle exchanges reduce disease. Natural kratom, when pure and regulated, fits that same mold: a lower-risk option for those in pain or recovery, potentially reducing the flow of harder drugs into our communities. To my fellow law enforcement professionals: Let's keep an open mind. Talk to the users in your districts, the veterans, the injured workers. Listen to the stories of lives reclaimed. Support regulation that protects consumers without criminalizing a plant that's helping some avoid the graveyard. To policymakers: Empower agencies to target the bad actors—the synthetic pushers—while preserving access to natural leaf for responsible adults. To our communities: We're in this together. The opioid crisis demands every tool we have. Natural kratom isn't a silver bullet, but for many, it's a lifeline—and ignoring that helps no one. Keep kratom safe
Columbus	Ohio	2 - Oppose - Regulation Over Ban	Please regulate Kratos instead of banning it. Millions of people are going to suffer from this ban. My wife has a total different and better quality of life while using Kratom. Please focus of the science behind Kratom.
Cuyahoga Falls	Ohio	2 - Oppose - Regulation Over Ban	This natural medicine should always be available to everyone who needs it. If you want to ban the fake stuff go for it but the real natural stuff is a very important herbal natural medicine.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	In your deliberations regarding the scheduling of Mitragyna speciosa (Kratom), it is vital to consider its role as a crucial harm-reduction tool for thousands of citizens. For many, kratom serves as a natural botanical alternative for managing chronic discomfort and supporting wellness without the high risks of respiratory depression associated with traditional scheduled substances (opiates). Criminalizing this plant would not only marginalize a vulnerable population but also risks driving consumers toward a dangerous, unregulated black market. Instead of a total ban, we advocate for sensible regulation—such as the Kratom Consumer Protection Act—which ensures product purity, prevents the sale of synthetically spiked extracts, and enforces age restrictions, thereby protecting public health while maintaining access for those who rely on it.
Hubbard	Ohio	2 - Oppose - Regulation Over Ban	There are vastly enormous differences between the loosely controlled toxins flooding store shelves and the pure medicinal applications offered by plants that have been used across the human experience in other cultures. We, as citizens of this country, have to come to the reality that Americans are not always as advertised. That we have far more to learn from older cultures than they from American society. To strictly, strictly regulate these chemically polluted products would most certainly benefit American society but at the severe cost that would limit the quality of life across American culture. I wish to convey my sincerest conviction that Kratom is far too beneficial, in it's pure plant composition, to remove entirely from a population that can and does benefit immensely from it's proper application.
West Chester	Ohio	2 - Oppose - Regulation Over Ban	I have been a daily user of Natural Kratom since around 2018 and it has had nothing but a profoundly positive impact on my life. Kratom has helped me, my family, and my friends deal with things like chronic pain, anxiety, depression; I've personally seen Kratom save multiple people from walking down the path of opioid abuse. I completely understand and even agree with regulation that bans or severely limits products containing synthetic 7-hydroxymitragynine, but natural leaf kratom is not that. In natural kratom, 7-OH only makes up 0.02-0.05% of the dried leaf mass, nowhere near the levels of what is found in the synthetic products that have appeared on the market recently. I deeply disappointed in the decision to schedule natural kratom along with these synthetic compounds. The decision to put natural leaf kratom in the same category as these synthetic 7-OH products is irrational and is not backed by science. I strongly urge the board to please reconsider this decision and amend the ruling to exclude natural leaf kratom from these bans. Banning natural leaf kratom will have a severely negative impact on my life, the lives of my friends and family, and the lives of millions of other Ohioans. Please reconsider this decision and amend the ruling.
Galloway	Ohio	2 - Oppose - Regulation Over Ban	It truly makes so sense to outright ban a plant that humans have used for 1000s of years. If you feel the need to do something, it should be regulated and taxed like many other states have done. This plant truly adds so much quality of life to so many Ohioians. Has banning anything ever worked? Just opens up a black market. Have we learned from the War on Drugs, that making something illegal never helps anyone.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	Please keep Kratom legal, it is a miracle plant that has helped thousands if not millions of people. It has changed my quality of life to be a happy and productive member of society without negative side effects. It should be studied and regulated to understand how and why it helped so many without negative side effects. Please listen to our community with understanding and compassion.
Bowling Green	Ohio	2 - Oppose - Regulation Over Ban	Raw leaf kratom powder in plant form should remain legal. My story is proof that it has a place in Ohio as a legal option for adults and can provide a benefit to responsible Ohio adults. It is a safer alternative to the very dangerous opioids that have tragically ravaged our communities in Ohio. I am not saying it is as safe as jello, as like every supplement we consume, it can have side effects. It should be kept to those 21 and over. Kratom raw leaf powder helped me escape the world of hard opioids right before the fentanyl epidemic hit. I have no doubt I would likely be dead right now without kratom. Kratom allowed be to get out of that world, enter therapy, get help from a psychiatrist, and return to a normal productive life. I am very proud of my journey and kratom leaf powder was vital. Think about the next version of me that needs that way out. Please have empathy for those of us who need that help. I still use it to this day in place of coffee. It provides a nice little energy boost without jitters. It provides a coffee like boost with a bonus of a small NSAID dose of painkilling, if I had to describe it. Sore muscles feel less painful after a workout, as an example. I have been entirely sober from all drugs and alcohol for a decade now. I only purchase lab tested powder so I know the potency is at natural levels and I can use it safely. This is something that can be done. Requiring lab tested levels is something companies can do, and some do it now. Do not let bad actors making synthetic junk cloud your judgement of normal, raw leaf kratom powder. Do not let highly concentrated forms of kratom cloud your judgement. Those are very different from raw leaf. By all means, ban synthetic junk and concentrates. If you look through the data it is nearly impossible to find a death related to only using raw leaf kratom powder. Such cases almost always involve either other known lethal drugs, or synthetic compounds, or highly concentrated products. I am fully in support of regulating legal raw kratom leaf powder. Ban the synthetics and concentrates. Keep raw leaf legal. Require the purchaser to be over 21. Please think about the next version of me who needs that little help to come along and give them a way out of a dangerous opioid addiction. Prohibition has been part of leading us to the very point we are. The government keeps thinking it can ban its way out of the opioid epidemic. It can't. What it can do is make sure that adults over 21 can have access to an alternative - raw lead kratom powder is that alternative. It is safer than alcohol and tobacco, two products that are completely legal and regulated in this state. I would much rather have people using raw lead kratom powder than getting drunk. I would much rather have someone sipping kratom leaf tea than using marijuana. I understand that at this time there is no accepted medical use. There is currently research being done at at least on university. Unfortunately pharmaceutical companies drive so much of the research in this country and right now they simply would rather sell their deadly opioids than look into alternatives. Don't let them decide what is or isn't allowed to be considered an alternative to

			their drugs. I am not asking you to use raw leaf powder. I am not asking you to like it. I am asking that you simply keep raw leaf legal to allow adults who need a way out of an opioid addiction to get that little bit of help to get out. Thank you for taking the time to read this. I don't see anywhere on this form to enter contact information but I would be happy to discuss this further if there are any questions from those on the board. - Miles McGrew from Bowling Green, OH
Lancaster	Ohio	2 - Oppose - Regulation Over Ban	I respectfully oppose classifying kratom as a controlled substance. Many adults, including those with chronic pain, rely on kratom as a safer alternative to illicit street drugs or stronger narcotics when other options are inaccessible or ineffective. A ban may unintentionally push people toward far more dangerous substances. I believe reasonable regulation—such as quality standards, age restrictions, and labeling requirements—would better protect public health than prohibition.

Stow	Ohio	2 - Oppose - Regulation Over Ban	Dear Members of the Ohio Board of Pharmacy, I am writing to express my support for keeping kratom legal and accessible in Ohio. As you consider regulatory decisions regarding this botanical substance, I urge you to recognize the important role it plays for many Ohioans and the compelling reasons for maintaining its legal status. Kratom has a centuries-long history of traditional use in Southeast Asian countries like Thailand and Malaysia, where it has been used for pain relief, energy, and managing opioid dependence. Criminalizing a plant with such extensive traditional use would set a troubling precedent and deny people access to a natural remedy that has served communities for generations. Perhaps most significantly, kratom shows real promise as a harm reduction tool during our ongoing opioid crisis. Many Ohioans have reported using kratom to successfully reduce or eliminate their dependence on prescription opioids and other dangerous substances. For people struggling with chronic pain or addiction, kratom has provided a pathway to recovery and improved quality of life. Removing this option could push vulnerable individuals back toward more dangerous alternatives. When examining kratom's safety profile, it compares favorably to many currently legal substances. Kratom-related fatalities are rare and typically involve multiple substances. The risks associated with kratom appear considerably lower than those of alcohol, tobacco, or prescription opioids—all of which remain legal and regulated. This suggests that prohibition would be disproportionate to the actual public health risk. The principle of personal freedom and bodily autonomy is also at stake. Adult Ohioans should have the right to make informed decisions about their own health and wellness, particularly when using substances primarily for pain management and quality of life improvement. Additionally, Ohio's kratom industry supports small businesses, provides employment, and offers consumers an affordable alternative for pain management. A ban would eliminate these economic benefits while forcing users toward potentially more harmful or expensive options. I want to be clear that I am making an important distinction here: I fully support the scheduling and regulation of chemically isolated and concentrated synthetic chemical constituents such as 7-hydroxymitragynine (7-OH). These concentrated extracts and synthetic derivatives present different safety concerns than traditional kratom powder and should be treated accordingly. However, natural kratom powder in its traditional form should remain unscheduled. This balanced approach would address legitimate safety concerns about synthetic and highly concentrated products while preserving access to the botanical substance that has been used safely for centuries. Finally, I would note that there remains insufficient peer-reviewed scientific evidence to justify scheduling natural kratom powder as a controlled substance. Rather than prohibition, thoughtful regulation could address legitimate quality control and safety concerns while preserving access for the many Ohioans who benefit from this botanical. I respectfully urge the Board to maintain kratom powder's legal status in Ohio and to consider regulatory approaches that protect consumers while preserving access to this important botanical substance, while appropriately regulating synthetic and concentrated derivatives. Thank you for your consideration.

Canton	Ohio	2 - Oppose - Regulation Over Ban	I strongly oppose a kratom ban in Ohio. Kratom has helped thousands of Ohioans manage pain, anxiety, and recovery—often as a safer alternative to prescription opioids or alcohol. For many people, banning kratom would not protect them; it would push them back toward far more dangerous substances or leave them without a viable option at all. A ban would instantly turn law-abiding citizens into criminals overnight for possessing a legal product they rely on to function and work. These are not criminals—they are parents, veterans, and working Ohioans making responsible choices for their health. This would also cause real harm to Ohio's economy. Local kratom shops, distributors, and related small businesses employ Ohioans, pay taxes, and have operated in good faith under current law. Criminalizing kratom would destroy legitimate businesses, eliminate jobs, reduce tax revenue, and drive the market underground—where products are unregulated and less safe. Ohio already considered and rejected a kratom ban in 2018. Revisiting the same failed policy now unfairly penalizes consumers and businesses who relied on the state's prior decision. Businesses invested, hired workers, and complied with the law, only to now face criminalization years later. Rather than prohibition, Ohio should pursue smart regulation: age limits, quality testing, labeling standards, and consumer protections. Regulation protects public health. Prohibition does not. I urge lawmakers to reject any kratom ban and instead support responsible regulation that protects consumers, respects law-abiding Ohioans, and preserves small businesses across the state. P.S. Next time come with actual science not a shill post from Reddit. That was completely unprofessional.
Mount Vernon	Ohio	2 - Oppose - Regulation Over Ban	Kratom has been used safely for generations as a traditional herbal product, and banning plain leaf kratom would remove a lower-risk alternative that many Ohioans rely on for pain management, energy, and opioid harm reduction. Prohibition would not eliminate demand—it would instead push consumers toward unregulated markets or more dangerous substances, increasing public health risk rather than reducing it. A regulated framework that enforces product purity, labeling, age restrictions, and bans adulterated extracts would better protect consumers while preserving access to a plant with a long history of responsible use. I respectfully urge the Board to pursue sensible regulation rather than an outright ban.

Grove City	Ohio	2 - Oppose - Regulation Over Ban	Kratom has become an important support resource for thousands of Ohioans who are already facing serious challenges. Many people turn to kratom because they are trying to remain productive, stable, and safe at a time when other options are often out of reach or insufficient. Instead of pushing people toward more dangerous or desperate choices, kratom offers adults a legal, regulated path that allows them to function and participate in their communities. Ohioans who use kratom are workers, parents, caregivers, and neighbors. They're not seeking a quick fix, they're trying to maintain their quality of life while navigating difficult circumstances. Responsible access to kratom helps them do that. Restrictive policies would not make these challenges disappear; they would simply remove one of the few tools people currently have to cope. For these reasons, we urge lawmakers to support reasonable regulation and continued adult access to kratom, rather than punitive approaches that would harm the very individuals and families who are already struggling the most.
Elyria	Ohio	2 - Oppose - Regulation Over Ban	I respectfully urge the city to reconsider any ban on mitragynine and instead pursue a science-based, balanced approach to regulation. Mitragynine is a naturally occurring alkaloid found in kratom leaves and is used by many adults as an alternative to more harmful substances, including opioids and alcohol. For some residents, it has been a critical tool for pain management, improved daily functioning, and reducing dependence on prescription opioids—often without the severe respiratory risks associated with those drugs. A ban would not eliminate use; it would instead drive responsible consumers to unregulated markets, increasing the risk of adulterated or unsafe products. Sensible regulation—such as age restrictions, product testing, labeling standards, and consumer education—would better protect public health while respecting personal autonomy. Current scientific evidence does not support equating mitragynine with high-risk narcotics, and several states and municipalities have chosen regulation over prohibition with positive outcomes. Criminalizing this substance would disproportionately affect working adults and veterans who are seeking safer alternatives, while placing unnecessary strain on local law enforcement and healthcare resources. I ask the city to consider evidence-based regulation rather than a ban, allowing our community to protect public safety without removing a potentially life-saving option for many residents.
Cincinnati	Ohio	2 - Oppose - Regulation Over Ban	I don't believe Kratom should be a schedule 1 substance with no medicinal value. It has plenty of medicinal value which could be researched further and used correctly to combat a wide variety of health issues including opiate addiction. There will always be people who use and abuse even legal drugs. This is not a reason to ban a natural product. Should Kratom be regulated? Sure I agree there should be some regulation but it should not just be made illegal right off the bat. Not to mention the people who are using Kratom whether it be correctly or incorrectly will suffer from withdrawal, especially those using it incorrectly. Banning it creates issues for those who have an addiction and will withdrawal. I do agree partially that extracts of the plant should not be something available to the general

			public because they are extremely addictive compared to the Kratom leaf. But, I don't think Kratom itself in its raw form should be made illegal.
Lakewood	Ohio	2 - Oppose - Regulation Over Ban	Hello! I am a 46 year old female, wife, mother, Executive C- Suite Manager, and lifelong Ohio resident. I am also a Fibromyalgia and Sarcoidosis sufferer, and have used NATURAL, unadulterated, GMP certified, lab tested Kratom daily since March of 2015- almost 11 years. I am writing to submit a public comment in opposition to the proposed scheduling of natural kratom as a controlled substance in the State of Ohio. Kratom has been a meaningful and beneficial part of my life. Used responsibly, it has provided me with real, practical support without impairing my ability to work, care for my family, or contribute productively to my community. Like many Ohioans, I have found kratom to be a safer, more manageable alternative to substances that carry significantly higher risks. I fully support reasonable regulation to ensure consumer safety, and I am in agreement with the ban on synthetic Kratom related products, such as 7-OH. However, I believe the proposed legislation currently under consideration in both the Ohio House and Senate provides a far more balanced and effective approach than an outright ban on natural Kratom. These bills focus on product purity, labeling standards, age restrictions, and transparency....measures that protect the public while preserving access for responsible adults. Scheduling natural kratom as a controlled substance would not eliminate its use. Instead, it would likely push consumers toward unregulated markets, increasing the very risks this action seeks to prevent. Regulation, rather than prohibition, allows for oversight, quality control, and accountability—outcomes that benefit both public health and public safety. Furthermore, the information provided to the Board ahead of the decision to approve the rule to schedule was substantially outdated and inaccurate. I respectfully urge the Ohio Board of Pharmacy to consider the voices of responsible consumers and updated science, and to support a regulatory framework that prioritizes safety without unnecessarily restricting access to a natural product that many Ohio residents rely on for their well-being. Thank you for your time, consideration, and service to the people of Ohio. Sincerely, Christina G.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	I am writing to support the science-based regulation of natural kratom over an outright prohibition. Regulation, such as that proposed by the Kratom Consumer Protection Act, is the most responsible path forward for public health. Prohibition has a proven track record of failure, pushing substances into an unregulated, underground market where consumer safety is non-existent. Instead, a regulated market would ensure product safety through mandatory testing and clear labeling, protecting consumers from adulterated or contaminated products. Furthermore, scientific studies have shown that natural kratom leaf has a significantly lower risk profile than prescription or illicit opioids, as it does not cause respiratory depression. For the estimated 15 million Americans who use kratom for pain management or to manage opioid withdrawal symptoms, maintaining legal, regulated access is a matter of public health and safety. Policy must be grounded in scientific evidence, not fear
Cincinnati	Ohio	2 - Oppose - Regulation Over Ban	I feel that natural kratom should remain legal, as it helps tons of people with various things. I do feel that extracts should be banned but raw natural kratom should be more regulated and studied.
Dublin	Ohio	2 - Oppose - Regulation Over Ban	Im for the support of regulation in the state of Ohio on the pure kratom powder 70h needs to never come back and gotten rid of completely there are a lot of good responsible users that helps change lives just like myself and my family banning the natural leaf will hurt a lot of the community, jobs and businesses in our communities and more bad choices and more overdose deaths due to using other substances that are far less safe we know that powder is not risk free and adults only should have access
Hilliard	Ohio	2 - Oppose - Regulation Over Ban	Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration.

Detroit-Shoreway	Ohio	2 - Oppose - Regulation Over Ban	Tea/Powder With Sensible Regulation, Not a Ban Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration.
Minerva Park	Ohio	2 - Oppose - Regulation Over Ban	A ban just when the fake,synthetic crap is being removed when the numbers will show it's been the culprit all along,concentrating a plant related to coffee more than a opiate 15-20 times then adding it to an energy drink is a bad idea,age requirements,vetted sources and a if you drink a lot of coffee warning is the way
Minerva Park	Ohio	2 - Oppose - Regulation Over Ban	I'm a degreed, knowledgeable and effective caregiver who, for the last decade, has relied on kratom capsules for a charge who cannot use prescription pharmaceuticals. Follow the science - it's a safe, non-addictive option for those who cannot take other medical/ pharmaceuticals options. Do not take this safe option from those who need it. Banning kratom will only bring harm to my charge. Regulation is fine; banning will see terrible consequences. Do what is right - follow the science and regulate if you must but do not ban.
Cleveland	Ohio	2 - Oppose - Regulation Over Ban	To make Kratom completely illegal is absurd. Why punish the people that responsibly and safely use Kratom because of the actions of people that do the opposite? Ive been a kratom user for over 7 years now and have yet to have a negative experience or negative side effects. I purchase the capsules that are appropriately labeled so I am aware of the dose I am taking. Club 13 is a very professional and reputable brand that I recommend. Why not regulate the types and amounts to be sold at a time. Must purchase capsule form and eliminate the sale of the powder form. Pure Kratom is not the issue. The issue is the synthetic kratom being sold by companies that have no concern for the consumers and their well being. Keep Kratom legal. Make it more difficult for anyone under 21 years of age to purchase. Strict punishment for the synthetic Kratom sellers. Don't punish the majority. Don't punish the safe and responsible consumers of Kratom

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	It should be like alcohol and tobacco age limit but adults are able to use it as they wish, medicinal or recreational. It's great to have it around glad it's legal and hope it stays that way.
Pittsburgh	Pennsylvania	2 - Oppose - Regulation Over Ban	To begin, I'm a 40 year old father of 5 and have a great career. My story with Kratom starts in my mid 20 where the years prior had been awful because of active addiction to opioids. No amount of effort to clean up seemed to help the situation I had found myself in. Then one day on a whim I did some research for anything to help with withdrawal symptoms from these FDA approved drugs. Long story short after more research and trial and error I started dosing daily. I instantly found relief. This new lease on life let me excel in my daily life including work. Fast forward 15 years and I don't drink alcohol to excess I don't partake in recreational drugs in any capacity I'm a fully functioning member of society. Now enough about my success story, I'd like to get down to the real issue at hand. I as a parent and responsible adult want to see Kratom regulated! I want to make sure no persons under 21 years old can purchase. Also I want to make sure consumers are protected from adulterated products containing concentrate or isolates. I spoke to my vendor almost a year ago when 7oh products came into the market and I saw the risk of this product. I knew that it would be the downfall of the natural product in it's entirety. I want to thank you for swift action on removing this product from our state, that was a very sound decision. Now comes the question of the legality of of Kratom in its natural state. I implore you to seek good judgement before you make a rash decision. If Kratom is scheduled you will be turning myself with no criminal record and a wonderful life into a criminal with a gavel. I'm only one of many many thousands of adults that would end up on the wrong side of the law for nothing different than your morning coffee. In closing please do your best to keep an open mind and proceed with the legislation to regulate Kratom not the alternative that would effectively ruin many lives. Thank you for hearing my concerns.
Lancaster	Pennsylvania	2 - Oppose - Regulation Over Ban	Kratom needs regulation, not prohibition. Plain leaf kratom is used for many reasons and has been life saving to million of Americans. I truly believe prohibition will cause infinitely more damage than good.
Louisville	Kentucky	2 - Oppose - Regulation Over Ban	I've been a long time user of kratom and seen it evolve a long way in this country and beyond. I know there are questions and concerns, however, I can say it has been a great positive for me. It seems that it's just the people concentrating the strains, mixing it with other entities and improper use that are leading to these concerns. It is a easy habit to give up, there are very few in abuse cases when it comes to the traditional forms. There are abusers and experimentation in the pharmaceutical world, but we don't ban prescription drugs because of it. Its the same here. Passing this ban would be a great failure of the state and would, most likely, lead to greater concerns and events soley because of this ban. So please, do what is right, add some policing to it, sure, but do not ban this plant.
Dayton	Ohio	2 - Oppose - Regulation Over Ban	I advocate for science based regulation, and not outright prohibition, which will only worsen any problems that the board cites as concerns over kratom in general.

Chardon	Ohio	2 - Oppose - Regulation Over Ban	I am a 71 year old semi-retired male and I do not understand what the issue is, here. I've been enjoying Kratom for 6 years and it is no more dangerous or addicting than caffeine. It is a wonderful adjunct to my morning coffee. State officials are shying away from important issues and doing needless damage to peoples' rights. Outlaw the synthetics if they're so harmful but leave than natural herb alone. Where does this silliness stop?
Chardon	Ohio	2 - Oppose - Regulation Over Ban	Public Comment on the Proposed Mitragynine Rule I am an Ohio resident writing in support of maintaining legal access to kratom through science-based regulation, not prohibition. Evidence from public-health policy consistently shows that criminalizing substances with established adult use does not eliminate demand — it drives products into unregulated markets, increases contamination risk, and reduces consumer safety. A regulated framework for kratom is the more responsible approach to protecting Ohio residents. Reasonable regulation such as age restrictions, manufacturing standards, contaminant testing, and accurate labeling allows the state to monitor product quality and respond to safety concerns. Prohibitive or overly restrictive rules, by contrast, remove oversight entirely and create conditions where unsafe products are more likely to circulate. Several states have successfully implemented regulatory models that protect consumers while preserving adult access. Ohio should follow this evidence-based path and avoid policies that function as a de facto ban. I respectfully urge the Board to adopt balanced regulations grounded in current scientific understanding and real-world outcomes, prioritizing public health, transparency, and harm reduction. Thank you for the opportunity to provide public comment.

Maineville	Ohio	2 - Oppose - Regulation Over Ban	Hello Ohio Board of Pharmacy, My name is Neel, and I am writing as an Ohio resident who is genuinely worried about the direction this conversation could go around kratom. I understand the Board's job is to protect public health and reduce harm. I agree with that goal. My concern is that criminalizing or banning kratom would do the opposite for a lot of people and would push a real issue into a worse, less visible place. For many adults, kratom is not some new trend or party drug. It is a self directed tool they use to manage pain, anxiety, or to stay away from more dangerous substances. I personally know people who have used kratom to reduce or stop their reliance on alcohol or opioids, and they are living more stable lives because of it. If kratom is banned, those people do not just stop needing help. They often go back to what is more available, more potent, and more lethal. A ban also does not eliminate kratom. It creates an unregulated black market. That is where contamination and adulteration become much more likely, where consumers have no labeling, no testing, no accountability, and where bad actors thrive. If the concern is safety, the most practical approach is to keep products in the open market and regulate quality standards, labeling, and age access instead of forcing it underground. Please consider an approach that focuses on consumer safety and realistic harm reduction. Treat this like other botanical products where quality and transparency are the biggest levers. If Ohio bans kratom, the people who will suffer first are the ones trying to stay well and stay away from more dangerous choices, and the people who will benefit most are the ones willing to sell unsafe products without oversight. Thank you for taking the time to read this and for the work you do. I hope the Board will pursue a regulatory framework that protects Ohioans without turning responsible adults into criminals for choosing a product that, for many, has been a net positive in their lives. Sincerely, Neel
Morrow	Ohio	2 - Oppose - Regulation Over Ban	I absolutely agree there needs to be regulation however making it completely illegal is asinine. This natural plant has been a godsend for both mental health, pain, and overall energy for daily activities. It's no different than drinking matcha tea or drinking a cup of coffee for similar effects. Please listen to the people who actually utilize this plant instead of the fear mongers who twist statistics to their liking. On a side note, do you really want to create another black market and push people who utilize this back to opioids, because that's what will happen. Thank you.

Miamisburg	Ohio	2 - Oppose - Regulation Over Ban	To the Ohio Board of Pharmacy: I support protecting consumers from unsafe kratom products, but a full Schedule I classification for mitragynine or natural kratom leaf is unnecessarily harsh, and likely to cause undue harm from over-enforcement (creating criminal records and tying up police resources). The majority of risk comes from high-potency extracts, especially products enriched with 7-hydroxymitragynine, advertising themselves as pain pills. These do not reflect the natural plant and have far greater potential for misuse. In contrast, raw kratom leaf has a much lower risk profile, is self-limiting due to its bitterness, and is rather difficult to misuse in dangerous quantities. If regulation is needed, the most reasonable approach is to: Ban or tightly restrict extracts and synthetic/high-7-OH products, (Schedule II-IV, not I) Allow natural leaf to remain legal for adults, and Adopt clear labeling and testing requirements, as outlined in KCPA-style frameworks. Scheduling these alkaloids as Schedule I would incorrectly imply no medical potential and would also restrict scientific research, which is ongoing and valuable. Thanks for your consideration.
Gahanna	Ohio	2 - Oppose - Regulation Over Ban	This is a bad idea. The good that Real Keaton produces is immense. What you need to do is get the stuff made in a lab out of here. Also, this will not reduce abuse. If an addict wants something, they will get it. Stop policing the rest of us. It's super irritating that you never seem to listen to the voice of the people. Even when we vote on it. You just don't care. Prove me wrong.
Lowellville	Ohio	2 - Oppose - Regulation Over Ban	I am writing to formally oppose the Board of Pharmacy proposal to schedule mitragynine as a controlled substance. This rule is a direct conflict with Senate Bill 299 which is currently being debated by our elected officials in the General Assembly. The Board should not be passing emergency bans on natural plant products while the legislature is working on a regulatory system to keep these products safe and legal for adults. Banning regular kratom leaf will destroy small businesses across Ohio and take away a safe botanical option that thousands of us rely on for our well being. I support SB 299 and the 2 percent limit on 7-OH as a common sense alternative to this total ban. Please reject rule 4729:9-1-01.2 and let the legislative process work.
North Olmsted	Ohio	2 - Oppose - Regulation Over Ban	I respectfully ask the Board to consider that some negative comments submitted under the mitragynine or kratom leaf category may actually be referring to concentrated extracts or isolated compounds such as 7-hydroxymitragynine. Traditional kratom leaf products are materially different in potency, use patterns, and risk profile from extracts or modified derivatives. I believe it is important that natural kratom leaf be evaluated on its own merits, and that concerns related to high-potency extracts be addressed separately through targeted and appropriate regulation.

Austintown	Ohio	2 - Oppose - Regulation Over Ban	I personally know several people whose lives have been saved by natural third-party lab tested kratom. Some have been completely off of opioid after a decade of use, some have also completely gotten free from illegal drugs. The Governor references approximately 200 deaths in the past six years related to kratom, if true, it's tens of thousands less then alcohol, cigarettes, street drugs. Kratom when taken responsibility has saved so many lives. I am in agreement banning the synthetic 7oh, but please do not ban natural kratom. I am all for regulation, such as making sure it's third-party lab tested, and not sold to people under the age of 21. I fear banning a safe alternative to far worse choices people will surely make will have catastrophic consequences. The federal government supports regulations, not a full ban. I believe that is serious overreach that will affect tens of thousands of good people. You wouldn't ban cigarettes or alcohol which are both far worse. Respect people enough to make their own choices that again, are far safer than what they will turn to. Respectfully, a very concerned friend of many natural kratom users.
Chesapeake	Ohio	2 - Oppose - Regulation Over Ban	Please do not classify mitragynine as a controlled substance. I would love to see all of the synthetic kratom products and enhanced products banned. They are incredibly harmful. Plain kratom leaf, powder or shredded, is a very helpful plant for multiple maladies.
Bath	Ohio	2 - Oppose - Regulation Over Ban	It shouldn't be banned. It should be regulated. I am a regulatory affairs specialist, in the industry for 8+ years. I am currently on Suboxone to get off of kratom extracts. I, unfortunately got addicted and am in the process of quitting it, and I still believe in regulating it rather than banning it. I think kratom in its pure form should be permitted, with strict regulations in place. 21+, CLEAR Warning labels about it's physical addictive properties similar to cigarettes and alcohol, third party testing with COA's for consumers. Synthetic kratom such as 7OH should most definitely be banned in my opinion. Please consider moving forward with regulation. Banning this substance could potentially lead to people misusing much more dangerous substances. We need to work towards getting fentanyl and heroin off the streets. Thank you for reading.
Bath	Ohio	2 - Oppose - Regulation Over Ban	The use of natural kratom is NOT the same as synthetic. It is healing. Do not make it unavailable to the many who need it, use it and are greatly helped by it. Please make the distinction. Thank you

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	Banning traditional kratom (Mitragyna speciosa leaf) in Ohio would be an overly broad response that could harm public health and remove access to a relatively low-risk herbal product used by many residents for pain relief, anxiety, and as a harm-reduction tool in opioid recovery. However, it's important to distinguish between whole-leaf kratom and 7-hydroxymitragynine (7-OH) products, which are not the same and have very different safety profiles. —— 1. Whole-Leaf Kratom Is Not the Same as 7-OH Kratom leaf is a botanical product made from the dried leaves of Mitragyna speciosa. It naturally contains dozens of alkaloids, with mitragynine being the primary one (often the largest portion of total alkaloids) and 7-hydroxymitragynine (7-OH) present only in trace amounts in the native plant. In contrast: • 7-OH when marketed as a standalone product is typically an isolated or concentrated compound (either extracted or synthetically produced) that is chemically distinct from whole kratom leaf. • 7-OH products can contain far higher concentrations of that single alkaloid than occur naturally in the plant. • Some products labeled as "kratom extracts" in the market are essentially synthetic 7-OH or heavily enriched formulations that have little to do with traditional kratom leaf. This distinction matters because 7-OH behaves more like a potent opioid, binding strongly to mu-opioid receptors and carrying a higher risk of dependence, withdrawal, and overdose effects than the complex mix of compounds in whole-leaf kratom. —— 2. Public Health & Harm Reduction Many Ohioans use whole-leaf kratom responsibly as: • A natural option for managing chronic pain • A self-directed tool to reduce or transition off prescription opioids • Support for anxiety, depression, or other quality-of-life symptoms Removing access to this relatively low-risk botanical could inadvertently push people back toward far more dangerous substances with well-documented overdose and mortality risks. Sensible regulation—such as labeling standards, product testing, and age restrictions—is a better public health strategy than prohibition. —— 3. Lack of Scientific Basis for a Full Ban There is no strong evidence that traditional kratom leaf causes widespread public health harms comparable to opioids or other controlled substances. Instead, safety concerns often arise from adulterated products, including those with high levels of concentrated 7-OH or other synthetic compounds. A ban on kratom leaf would lump safe, traditionally used plant material together with dangerous, concentrated isolates that are more appropriately regulated as novel compounds. —— 4. Regulation Rather Than Prohibition Ohio can protect consumers by: • Requiring third-party lab testing to ensure product purity • Banning unapproved 7-OH isolates or synthetic derivatives that pose higher risks • Implementing quality standards similar to a Kratom Consumer Protection Act This preserves access to kratom leaf while addressing the real concerns around enhanced products that do not reflect traditional use. —— 5. Personal Freedom & Patient Choice Adults should retain the freedom to choose natural botanical products like kratom leaf, especially when they are using them responsibly and with awareness. Banning kratom leaf would limit choices for people seeking alternatives to pharmaceuticals or more harmful substances. —— Conclusion Ohio should not ban traditional kratom leaf. Instead, the state should focus regulation on the real risks in the market—particularly concentrated 7-OH and synthetic derivatives—while preserving

			access to whole-leaf kratom, a product with a long history of use and a significantly lower risk profile. Regulated access improves consumer safety and supports both harm reduction and personal autonomy.
Mentor	Ohio	2 - Oppose - Regulation Over Ban	I am firmly against this rule and its infringement on and adult's right to choose. Smoking? Legal for 18 year olds and highly addictive (also impactful to non-smokers) Eligible for draft and die for your country…18 years old. Alcohol, a known poison to the liver, legal for consumption for 21 years and above and in many cases deadly to non-drinkers (see DWI). Let's be consistent folks, regulate, don't ban!

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	I am commenting on this rule because I believe that the criminalization and prohibition of kratom would be harmful to many people. I understand that synthetic kratom can be dangerous due to its' potency and availability. I don't think it should be sold unregulated in gas stations. I do, however, believe that natural kratom that comes directly from the plant is very beneficial; especially for those with chronic pain. If we truly care about the health and safety of the public, synthetic kratom should be regulated or prohibited, and more effort should be put into the science-based regulation of natural kratom.
Columbus	Ohio	2 - Oppose - Regulation Over Ban	I ask that you please take kratom NOT made in a lab be removed from consideration. PLease do NOT make natural kratom illegal. The stuff the make in a lab, I can understand, but natural kratom is so beneficial for so many, and no one has died from Natural Kratom.
Cleveland	Ohio	2 - Oppose - Regulation Over Ban	Please Protect Natural Kratom Tea/Powder With Sensible Regulation, Not a Ban Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration. Sincerely, Gwendolyn Novakova

Indianapolis	Indiana	2 - Oppose - Regulation Over Ban	I appreciate the opportunity to submit public comment on the proposed classification of mitragynine as a Schedule I controlled substance in Ohio. I strongly urge the Board not to schedule kratom as Schedule I for the following reasons: 1. Kratom Does Not Meet the Core Criteria for Schedule I Classification Under ORC 3719.44, a Schedule I substance must meet all three of the following criteria: High potential for abuse No accepted medical use Lack of accepted safety under medical supervision Kratom does not meet these thresholds: The FDA has not classified kratom as unsafe for supervised use, and federal scheduling has been rejected twice in recent years after review of scientific and public health data. Numerous state legislatures have recognized kratom's safety profile under regulated conditions and have enacted Kratom Consumer Protection Acts (KCPAs) rather than bans. The DEA itself withdrew its intent to schedule kratom in 2016 after receiving scientific input and 23,000+ public comments. If kratom truly fit the Schedule I criteria, federal scheduling would likely already be in place. Instead, the federal position remains non-scheduled and under review, not banned. 2. Prohibition Creates More Harm Than Regulated Access Schedule I classification would: Push consumers toward unregulated underground markets Increase exposure to adulterated products Remove age restrictions, testing requirements, and labeling standards that many states have adopted By contrast, states that adopted Kratom Consumer Protection Acts have implemented: Minimum age limits Alkaloid content standards Product testing for contaminants Clear labeling and consumer transparency These regulations address every public health concern listed in the Board's impact statement without criminalizing possession or use. 3. Scheduling Would Have Significant Negative Economic Impact The Board's own report acknowledges: Over 130 retailers in Cleveland alone carry kratom products At least 12 Ohio businesses specialize in kratom sales and may be forced to close A blanket Schedule I ban would: Eliminate legitimate Ohio businesses Reduce tax revenue Push commerce to online or out-of-state markets Burden law enforcement and courts with non-violent possession cases This contradicts the stated goals of the Common Sense Initiative, which seeks to avoid regulations that harm legitimate commerce when less restrictive alternatives exist. 4. Many Americans Use Kratom Responsibly for Quality of Life & Harm Reduction While not an FDA-approved medicine, many adults responsibly use kratom for: Managing occasional discomfort Enhancing focus and productivity Supporting mood and wellbeing Reducing use of substances with higher risk profiles such as alcohol, prescription opioids, and tobacco Multiple surveys, including peer-reviewed publications, have documented harm-reduction behaviors among kratom consumers. Removing access removes a tool that many individuals use as a safer alternative to substances that are objectively more harmful. 5. International & National Context Supports Regulation — Not Prohibition Globally: Kratom is legal and regulated in multiple countries The World Health Organization conducted a review in 2021 and declined to recommend a global ban No major international health body treats kratom as equivalent to heroin or fentanyl Domestically, several states — including Utah, Georgia, Arizona, Nevada, and Colorado — chose regulation instead of scheduling. Ohio can do the same. 6. A More Balanced Path Forward Exists Instead of Schedule I

			classification, Ohio should consider adopting a Kratom Consumer Protection Act including: 21+ age requirements Product testing for heavy metals & adulterants Alkaloid content transparency Clear serving-size guidelines Labeling & retail compliance standards This approach: Protects public health Preserves consumer choice Retains economic activity Reduces risk of contamination and misuse Scheduling mitragynine as a Schedule I substance is an extreme measure that will produce more harm than benefit. It ignores viable regulatory alternatives, harms legitimate businesses, and removes a product many adults use responsibly to improve their quality of life. I respectfully urge the Board to reject Schedule I classification and pursue a regulatory framework that prioritizes education, safety, transparency, and harm reduction instead of criminalization. Thank you for considering this public comment.
Irwin	Pennsylvania	2 - Oppose - Regulation Over Ban	Greetings, I am a mother and professional in Portland, Oregon. I have been a regular user of kratom leaf for more than 15 years with no ill effects. It has been instrumental in helping me manage a wide variety of symptoms, from anxiety to menopause to relief from headaches, coughs, and aches and pains. I am deeply grateful to have a natural alternative to pharmaceuticals, and have never suffered any unwanted side effects. I highly encourage science-based regulation that will make unadulterated kratom safe and available to consumers rather than prohibition of this lifesaving plant. Thank you, Jillian Perkins

Cincinnati	Ohio	2 - Oppose - Regulation Over Ban	As a kratom consumer for several years, I can attest to the health benefits it provides for most individuals and I respectfully request that you support science-based regulation for kratom, not prohibition. Thank you...
Reynoldsburg	Ohio	2 - Oppose - Regulation Over Ban	Classifying mitragynine (kratom) as a Schedule I substance would ignore both the scientific record and the real-world consequences of such a decision. Schedule I is reserved for substances with high abuse potential and no accepted medical or practical use, yet kratom is widely used by adults as a safer alternative to opioids, alcohol, and other far more dangerous substances, often to manage pain or reduce opioid dependence without respiratory depression. There is no credible evidence that kratom, on its own, presents a public health threat comparable to drugs already in Schedule I, and broad prohibition would almost certainly push consumers toward illicit markets or back to opioids, increasing—not reducing—harm. Numerous states have chosen regulation, quality standards, and age restrictions over bans, recognizing that responsible oversight protects consumers far better than criminalization. Ohio should follow evidence-based policy, support continued research, and pursue sensible regulation rather than an extreme scheduling action that would punish responsible adults, harm small businesses, and undermine public health goals.
Massillon	Ohio	2 - Oppose - Regulation Over Ban	I oppose the proposed legislation as kratom can help many people with chronic pain. It is a safe plant based medicine which is impossible to over dose on alone. All overdose deaths that have been stated in these bans, are people who have mixed alcohol or some other substance like alcohol. Kratom is a safe plant. Extracts on the other hand are a problem. A KCPA would be a great thing in this position. To keep the plan accessible to responsible people. That KCPA would also get it out of smoke shops which is the real problem here. Please consider keeping plain leaf legal & implementing a KCPA for extracts to get them out of smoke shops. Plain leaf should be left alone. As cigarettes & alcohol cause WAY more harm than this yet they are left untouched, make it make sense… because these proposals to ban leaf absolutely make no sense & are going completely against the science of the plant. It's been legal for centuries, there is no health crisis or "overdose" crisis with kratom as it's impossible to overdose on alone. As far as people dying with kratom in their system, that's from people mixing it with other substances you. You can literally die mixing Tylenol with other things….. Thank you!
Wapakoneta	Ohio	2 - Oppose - Regulation Over Ban	I understand and agree with the Ohio Board of Pharmacy's decision to schedule and ban synthetic kratom products, specifically concentrated products like 7-hydroxymitragynine. Kratom needs to be robustly regulated to ensure consumer safety. However, this Board's attempt to outright ban natural and organic Kratom products is unwise and unsafe. I hope this Board recommends the Ohio General Assembly to pass and adopt the Kratom Consumer Protection Act.
Paducah	Kentucky	2 - Oppose - Regulation Over Ban	This is saving COUNTLESS lives/addictions. Regulate the PROBLEM which is the fake 7-0 gas station products NOT the plant itself!!

Westlake	Ohio	2 - Oppose - Regulation Over Ban	Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration.
Malvern	Ohio	2 - Oppose - Regulation Over Ban	I understand the concerns surrounding kratom, but banning this natural plant is not the answer. Like any substance, kratom should be regulated to ensure safety and quality. Standards for labeling, testing for contaminants, and age restrictions are essential to protect consumers. Responsible regulations can ensure that people like me, who genuinely benefit from kratom, can continue to access it while minimizing risks. Kratom has been a beacon of hope for millions of Americans dealing with chronic pain, anxiety, and other challenges. I urge policymakers to consider the positive impact it has had on lives like mine and to focus on regulation rather than prohibition. By working together, we can create a framework that ensures safe access to kratom while addressing public health concerns. A ban would strip away an invaluable tool that has allowed me to live a fuller, healthier life—and many others would lose the same opportunity. Thank you for listening and for considering a balanced approach to kratom policy.

Mentor	Ohio	2 - Oppose - Regulation Over Ban	I strongly oppose the proposed move to ban natural kratom leaf tea and classify it as a Schedule I controlled substance in Ohio. States and federal regulators are rightly concerned about synthetic and highly concentrated opioid-like compounds such as 7-hydroxymitragynine (7-OH), but these substances are chemically and functionally very different from natural kratom leaf. Conflating the two would be scientifically unsound and would hurt Ohio consumers and small businesses. The kratom tree (Mitragyna speciosa) naturally contains many alkaloids, the most abundant of which is mitragynine, which is present in typical dried leaf or tea at the highest levels. 7-hydroxymitragynine (7-OH) is present only in trace amounts — often less than 2% in raw leaf — and is much more potent. In other words, the risks associated with concentrated 7-OH preparations — which may act more like traditional opioids — are not the same as those from consuming brewed kratom leaf tea, which has a long history of traditional use and a different chemical profile. Rather than an outright ban that sweeps up traditional kratom leaf with controversial synthetic products, Ohio could: Focus on targeted regulation of high-risk 7-OH and concentrated extracts (which is already happening in several jurisdictions).
Cincinnati	Ohio	2 - Oppose - Regulation Over Ban	I am all for banning synthetic compounds (e.g. 7-OH) and especially in favor preventing minors from purchasing products like that. However, let's try to have a little nuance. Adults should be able to purchase "natural" kratom leaf. It has helped me immensely - even if there are certain risks like there are with everything. As we see with many things, if you issue an outright ban, there will be second-order effects and will likely give rise to a black market. As an adult, I want to be able to purchase safe, 3rd party tested kratom without the penalty of legal action. Please follow federal law enforcements' lead on this and target the synthetic products - especially sold to minors.
Miamisburg	Ohio	2 - Oppose - Regulation Over Ban	Ohio should ban synthetic adulterants and adopt a Kratom consumer Protection Act (KCPA) that ensures safe, regulated access to natural Kratom.
Miamisburg	Ohio	2 - Oppose - Regulation Over Ban	While I think the 7oh ban has some merit to it, there is absolutely no reason to ban the plant itself. Kratom powder has been around for hundreds of years
West Chester	Ohio	2 - Oppose - Regulation Over Ban	Governor Mike Dewine needs to stop with all this nonsense. Go after the ones selling the over the counter crap at gas station’s. All of our smoke shops that aren’t VIP smoke shops are reputable places and should be aloud to keep selling Kratom powder and Kratom capsules. Go ahead and ban all the other junk that you can see clearly flooded the market with all the bad products that claimed to be really high does in a bottle. Y’all CANNOT GO THROUGH WITH A BLANKET BAN ON ALL KRATOM, it’s insane to punish a whole group of us law abiding Americans for the actions of these bad actors that came in and brought all these new products. Please leave Kratom powder and Kratom capsules alone they are not the culprit.

West Chester	Ohio	2 - Oppose - Regulation Over Ban	I am writing to urge you to oppose statewide scheduling of kratom and support clear distinctions between concentrated 7-hydroxymitragynine products and traditional kratom leaf. I have used kratom for 8 years to manage my health and wellness. Before kratom, I tried other medications, but experienced side effects. Kratom has allowed me to work, care for myfamily, and maintain quality of life. Because I have access to kratom I am a productive member of society. Please do not take that away from me, my family, and my co-workers. The FDA's recent recommendation targets concentrated 7-hydroxymitragynine products, not the traditional kratom leaf powder that I and millions of Americans use. I support regulation of concentrated products but ask that you ensure any regulatory action preserves access to natural kratom here in Ohio. Thank you, Ryan
Cincinnati	Ohio	2 - Oppose - Regulation Over Ban	A complete ban on Kratom is ridiculous. Banning synthetics and extracts is one thing, but natural Kratom is safe and helpful. Regulate it, tax it, and let citizens decide for themselves, just like we do with other more dangerous substances like alcohol.
Loveland	Ohio	2 - Oppose - Regulation Over Ban	To whom it may concern, I hope you do not ban pure Kratom leaf. It helped me so much the past seven years. It's changed my life so that I can function a little better. You need to get more information on the difference between the extract of 7-OH and the pure leaf Kratom. The extract 7-OH has tarnished the Kratom reputation and I hope you Will realize the difference before you make a snap decision because you will hurt a lot of people rather than help. Thank you for your time. PDC
Westlake	Ohio	2 - Oppose - Regulation Over Ban	Pure unadulterated kratom powder has helped millions people as a supplement for a variety of issues. There is no actual evidence that anyone has overdosed on kratom powder alone. It should be regulated like alcohol and not scheduled. 7oh is the synthetic and concentrated form and is absolutely something that should be taken off the shelves. This is NOT kratom powder.

Waynesburg	Ohio	2 - Oppose - Regulation Over Ban	Dear Ohio State Representative / Senator or to whom it may concern, My name is Greg T., and I am an Ohio resident writing to respectfully urge you to oppose any proposed ban on kratom in our state. For the past 12 years, kratom has played a profoundly positive role in my life. I am not a criminal, an addict, or someone seeking to abuse substances. I am a responsible adult who found kratom after exhausting other options that either failed to help me or caused serious side effects. Kratom has helped me maintain stability, function day-to-day, and live a healthier, more productive life. During these years, kratom has allowed me to manage my well-being in a way that prescription medications and other alternatives could not. It has helped me avoid far more dangerous substances, including opioids, which we all know have devastated families and communities across Ohio. Taking kratom away from people like me would not improve public safety—it would push many back toward harmful or illegal alternatives. A blanket ban would punish responsible citizens who have used kratom safely for years without incident. It would remove a natural, affordable option that thousands of Ohioans rely on to work, care for their families, and live with dignity. Prohibition does not eliminate demand; it only creates black markets and removes consumer protections. If there are concerns about product safety, I strongly support reasonable regulation—such as age restrictions, labeling requirements, and quality testing—rather than an outright ban. Regulation protects consumers. Prohibition harms them. I respectfully ask you to listen to the voices of Ohio residents like myself who have real-world experience with kratom and whose lives would be negatively impacted by a ban. Please stand for science-based policy, personal freedom, and harm reduction. Thank you for your time and for considering my perspective. Sincerely, Greg T. Ohio Resident

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	This plant has changed mine and many others I know lives on only positive ways. The leaf is healing, I has saved people from alcoholism and heroin addiction. The leaf tea is an extremely safe alternative for those who are looking to better their lives, people who still want to communicate in public settings without alcohol being involved. It has saved my body from crippling endometriosis cramps. I understand regulating the extract but the tea is subtle and safe. People in charge of these decisions need to be educated on Kratom. It has many beneficial uses. They need to be educated on the difference between Kratom and 7oh. 7oh is awful for you, but Kratom is nothing similar. Kratom is better than drinking alcohol and smoking weed. Does not obstruct your decisions and body. This should not be scheduled but it should be regulated. I have been a recovered heroin addict for 12 years. I know many people this has helped with various issues such as addiction and pain management. It is a much safer alternative to street drugs and much safer than alcohol. The synthetic forms should be banned but the natural leaf is so important to many people and having a blanket ban would be devastating for people who use it to function in the community. I am a social worker I run a resource center for the unhoused people in our city. We serve 6000 meals per month and I am someone who almost died from addiction 12 years ago. I contribute greatly to the community and I use Kratom. Dear Common Sense Initiative, I examined the new proposal criminalizing all forms of Kratom in the state of Ohio by labeling the plant as a Schedule I substance. I am deeply concerned by this measure. I have been a regular and responsible Kratom user for years. I make my own Kratom tea at home using whole leaves, which I buy from a responsible and reputable vendor. For me, Kratom has been very beneficial psychologically. I found that small amounts of Kratom offer me relief from my diagnosed anxiety and depression disorders. I used to have to take prescription medication for my symptoms, but Kratom has given a more sustainable alternative with less side effects. However, businesses have found a way to use kratom in a harmful way. I would like to share a personal experience: One day, I visited a local smoke shop to browse their Kratom products. The cashier behind the counter said to me “If you like Kratom, then you will like this” and proceeded to hand me a free sample of a product I thought was kratom labeled as a 7-OH. It came in the form of a very small pressed pill. I took half of the pill, and had extreme adverse effects both psychoactive and physical. Kratom NEVER made me feel like that pill did. I could not function and was physically ill for hours. After some closer examination, I learned that what I consumed was not Kratom, but synthetic 7-OH. I felt like I was preyed upon by predatory business practices and a predatory product. I was betrayed. It sickened me that these 7-OH products were being pushed into the community. This substance was NOT Kratom. I

			never experienced Kratom withdrawal, however, I had withdrawal-like symptoms after taking 7-OH after a single use. The biggest threat is not the natural Kratom plant in the leaf or crushed leaf form. The real problem is the synthetic concentrates and derivatives that are manufactured to be extremely potent and addictive. These synthetic products are dangerous, predatory and should not be accessible. A full ban on all forms of Kratom will only create more issues and complications because it hurts those that benefit from the kratom plant, hurts the businesses that responsibly label, source and educate about their products. A complete ban will create a black market and push people to use illicit substances. Those that use Kratom for medicinal purposes, whether for pain relief, mood disorder management, ADHD, weaning off of other opioids etc. may search for other unsafe and unregulated alternatives such as illegal drugs. Prohibition is not the answer, regulation is. Please consider SB 299 and go after the real culprits. Please address the issues regarding the synthetic concentrates and derivatives of Kratom and regulate natural Kratom to promote safe, educated and intentional use. Hello Common Sense Initiative, I read through your proposed rule regarding making kratom a Schedule 1 drug in Ohio and I am disappointed and concerned with this imprecise, detrimental and sweeping ban on the natural kratom leaf. Scientific Research Kratom leaf benefits are just being understood and your proposed ban would cause these studies and its possible benefits to treat pain relief, mood disorders and opioid recovery to a complete halt. Kratom leaf has been used for centuries for its health benefits. It is culturally significant and issues from its use came from the unregulated concentrates and greedy businesses that misrepresent and abuse the leaf for profit. Creating criminals and MORE OVERDOSES Many Ohioans safely and effectively use (not abuse) kratom to treat a wide range of issues, including chronic pain, anxiety and withdrawal from opioids. These users range in age from young adults to the elderly. By criminalizing, not regulating, an already used substance, you are creating criminals out of good, hardworking people. These people may not otherwise have access to healthcare because of the high costs of healthcare / high costs of prescription drugs. I've heard much more positivity from the use of kratom leaf for chronic pain and anxiety than negativity. Any negativity surrounding kratom comes from the concentrates or synthetic derivatives (7-oh). Your proposed criminalization of the unprocessed leaf will have the reverse effect in what you are trying to prevent (overdoses/addiction/crime). Users of kratom may then need to seek other substances that are illegal, such as prescription pain medication (not prescribed to them), heroin, fentanyl or other illicit drugs. Your proposed ban will cause more overdoses and deaths as people move toward "harder" substances to self medicate. These are consequences that you need to understand if you want to ban the leaf. Your proposed criminalization will create a black market. Prohibition has never worked. We saw this with marijuana. We saw this with alcohol. Organized crime will follow to fill the gap of a previously legal market and fill it with bad actors, harder, more dangerous and unregulated substances and gang violence. Focus your efforts where it matters Greedy businesses found a way to

			abuse the kratom leaf and create concentrates and other extracts that pull the most addictive, psychoactive and harmful analogues from the leaf. Common sense and your Appendix A are clear that these concentrates and 7-oh tabs are the issue, not kratom leaf / kratom powder. Common sense dictates that your focus needs to be on banning these synthetic forms of kratom and regulating the current kratom market. Regulating the current kratom market addresses your concerns. You brought up Rhode Island in your list of states that made kratom illegal. Rhode Island found this outright prohibition to be ineffective and now in 2026 is reversing this ban and replacing it with a regulatory framework. Ohio should look to Rhode Island to understand that prohibition is not the way to protect its citizens. The best way to protect its citizens is to educate them and set up a regulatory framework that addresses the real concerns regarding unsafe products (concentrates/7-oh tablets), implementing testing requirements and labeling requirements, and banning unsafe additives. Ohio please look at Rhode Island's framework regarding kratom. Under Rhode Island's law: Kratom will no longer be a controlled substance under state law. The state will permit licensed sale and distribution with standards for product safety and labeling. Kratom products must meet quality controls, and adulteration with harmful substances is banned. Sales will be restricted to adults 21 and older. Rhode Island made the mistake of a knee jerk prohibition and is now walking it back. Ohio does not need to double its work by banning the leaf but instead look to states that regulate it and model a common sense framework that addresses the concerns. Please consider Ohio Senate Bill 299. SB 299 is the common sense initiative that addresses your concerns and is an effective, thoughtful and sustainable path forward. I believe the planet provides. Earth has given us kratom to use (not abuse). Businesses that created these concentrates or derivatives (such as 7-oh) abuse the leaf. Their sins should not be passed to users of the kratom plant. Their sins should not criminalize people for treating themselves. Their sins should not be used to take away our freedom to use the leaf in a way that benefits us. These businesses should be held accountable for what they have done. By regulating the market and banning the synthetic derivatives you will effectively put these bad actors out of business. Your proposed ban will cause more bad than good. Please put your focus on regulating instead of outright prohibition. That's the common sense approach. To the Members of the Ohio Board of Pharmacy, I am writing to express my strong support for the Executive Order, most recently updated on December 29, 2025, that bans synthesized or otherwise manufactured kratom derivatives designed for maximum potency. At the same time, I wish to state clearly and unequivocally my firm opposition to any effort to place natural kratom—or isolated mitragynine derived from the kratom plant itself—on Ohio's Schedule I controlled substances list.These positions are not contradictory. In fact, they are entirely consistent with protecting public health while preserving access to a plant-based substance that has demonstrable benefits and a comparatively low risk profile. I support the ban on kratom derivatives precisely because these products are not traditional kratom.

			They are chemically manipulated, highly concentrated substances engineered for potency rather than safety. These manufactured derivatives bear little resemblance to kratom in its natural form and pose real risks due to their strength, unpredictability, and lack of historical or ethnobotanical use. Ohio is right to act decisively against such products.However, natural kratom—sold as whole leaf, dried leaf, or powder—should not be swept into this prohibition. Under existing Ohio law and consistent with the Ohio Department of Agriculture's legal authority, natural kratom has been lawfully sold and regulated as a botanical product. There is no compelling public health justification to reverse that long-standing position.Placing natural kratom or isolated mitragynine from the plant on Schedule I would effectively ban kratom outright, despite substantial evidence that its risk profile does not meet the criteria for Schedule I classification. Such a move would ignore both real-world usage data and the lived experiences of thousands of Ohioans. Natural kratom plays a significant role as an alternative to opioid painkillers. For many individuals suffering from chronic pain, kratom has provided relief without the respiratory depression, overdose risk, or addiction potential associated with prescription opioids such as oxycodone or illicit opioids like fentanyl. Just as importantly, kratom has helped countless people reduce or eliminate their dependence on opioids altogether. Removing access to natural kratom would likely push some of these individuals back toward far more dangerous substances. From a public health perspective, it is also important to recognize proportionality. Natural kratom has a comparatively low risk profile—especially when measured against alcohol, a substance that is legally sold throughout Ohio and the nation despite its well-documented association with addiction, violence, liver disease, and thousands of deaths annually. If alcohol does not meet the threshold for Schedule I, natural kratom clearly does not. A blanket ban on natural kratom would not eliminate demand. It would simply drive the market underground, reduce consumer safety, and remove an important harm-reduction tool from people who are trying to manage pain or escape opioid addiction. Regulation, transparency, and enforcement against adulterated or synthetic products are the appropriate response—not prohibition of the plant itself. For these reasons, I strongly urge the Ohio Board of Pharmacy to maintain a clear distinction between dangerous, manufactured kratom derivatives and natural kratom in its traditional botanical form. I fully support continued enforcement against synthetic derivatives, while equally strongly opposing any effort to schedule or ban natural kratom or isolated mitragynine derived from the plant. Ohio can protect public health without denying its residents access to a substance that has helped many lead safer, healthier lives. I respectfully ask the Board to uphold that balance.Thank you for your time and consideration. Sincerely, Benjamin Zelman Benjaminzelman@gmail.com 216.505.0450 I urge the Board to keep kratom legal and accessible for adults. Kratom has helped many people reduce or eliminate their use of far more dangerous substances, including alcohol and opioids. For individuals dealing with chronic pain, anxiety, PTSD, and depression, kratom often provides relief when other treatments have failed or caused harmful side

			effects. Kratom is widely used as a harm-reduction tool. Keeping it legal allows for regulation, quality control, and informed consumer choice. Banning kratom would not stop its use—it would push people toward unregulated sources or more dangerous alternatives, increasing public health risks. I support reasonable regulation and testing standards, but not prohibition. Maintaining legal access to kratom protects public health and preserves a safer option for thousands of responsible adults who rely on it to live healthier, more stable lives. Thank you for your consideration.

Dublin	Ohio	2 - Oppose - Regulation Over Ban	I have seen and experienced the many benefits of natural leaf kratom. The science and study of natural kratom reveals that it safe and effective. The literature demonstrates that kratom used in its natural leaf and/or powdered form safely promotes one's well being. The American Kratom Association has worked tirelessly to put forth evidence to show the safety and efficacy of kratom. A ban of natural kratom would undoubtedly hurt many people who rely on its many benefits. I strongly urge you to consider the proposed Kratom Consumer Protection Act(KCPA) that would ensure safe, effective and regulated products. Such legislation has been adopted in many other states. The KCPA would not only protect the consumer it would also get rid of the few bad actors who have given kratom a negative image. It would rid the state of the 7oh synthetic products that have given natural kratom such a bad name. I have witnessed everyday people(constuction workers, truck drivers, doctors, lawyers, and dare I say pharmacists?) rely on this plant for their well being. Please allow the people of Ohio to have access to safe, regulated and natural kratom. Please take the time to really study the science and keep kratom legal. Thank you in advance for your attention regarding this important issue for the people of Ohio.
Kent	Ohio	2 - Oppose - Regulation Over Ban	Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration.

Twinsburg	Ohio	2 - Oppose - Regulation Over Ban	The debate over kratom in Ohio reached a critical point in early 2026. While Governor Mike DeWine and the Ohio Board of Pharmacy (OBP) have moved to classify even natural kratom as a Schedule I controlled substance, many advocates, researchers, and citizens argue that a total ban is the wrong approach. The following reasons outline why many believe Ohio should regulate, rather than ban, kratom. 1. Harm Reduction and Public Safety The primary argument against a ban is that it may inadvertently increase overdose deaths. Preventing "Pill-to-Fentanyl" Transitions: Many Ohioans use kratom as an alternative to illicit opioids. Experts like Dr. Ryan Marino (Case Western Reserve University) warn that if kratom is banned, users may turn to much deadlier street drugs, such as fentanyl, to manage pain or withdrawal. Avoiding the Black Market: History shows that prohibition often shifts sales from transparent retail stores to unregulated criminal markets. A ban would eliminate state oversight of product purity, potentially leading to a market filled with adulterated or contaminated products. 2. Regulation (KCPA) vs. Prohibition Advocates suggest that the Kratom Consumer Protection Act (SB 299 / HB 587) is a more effective way to protect the public than a total ban. This legislation proposes: Mandatory Lab Testing: To ensure products are free from heavy metals, salmonella, and dangerous synthetic additives. Age Restrictions: Restricting sales to adults (18+ or 21+), preventing "gas station" access for minors. Standardized Labeling: Requiring manufacturers to list alkaloid content (mitragynine and 7-OH) and clear usage instructions. 3. Support for Chronic Pain and Recovery For many, kratom is a "quality of life" supplement. Opioid Abstinence: Thousands of Ohioans use natural kratom leaf to maintain abstinence from heroin or prescription pills. Criminalizing them could derail their recovery. Managing Chronic Conditions: Users with arthritis, fibromyalgia, and back injuries often find that natural kratom allows them to work and perform daily tasks without the side effects of traditional pharmaceutical opioids. 4. Distinguishing Between Natural and Synthetic There is a significant difference between natural leaf powder and concentrated "designer" extracts. Targeting the Real Danger: In late 2025, Ohio banned synthetic $7\text{-hydroxymitragynine}$ (7-OH), often called "gas station heroin." Natural Safety Profile: Advocates argue that natural mitragynine (the primary alkaloid in leaf) does not carry the same respiratory depression risks as traditional opioids and should not be lumped in with high-potency synthetic derivatives. 5. Economic and Scientific Impact Halting Research: Scheduling kratom as a Schedule I substance makes it nearly impossible for scientists to conduct the clinical trials needed to understand its full benefits and risks. Economic Loss: A total ban would shut down hundreds of small businesses in Ohio, from specialized botanical shops to wellness centers, resulting in lost tax revenue and jobs. Comparison: Ban vs. Regulation Feature Total Ban (Schedule I) Regulation (KCPA) Consumer Access Illegal for all Restricted to adults Product Safety No oversight (Black Market) Mandatory lab testing Law Enforcement Focuses on criminalizing users Focuses on punishing bad actors/unlicensed sellers Public Health Risk of transition to fentanyl Provides a safer alternative for pain/recovery

Springfield	Ohio	2 - Oppose - Regulation Over Ban	I have used kratom off and on for over 10 years as needed. It has helped me in so many ways and has made having a productive, normal life possible for me. The high potency extracts are what has cause all the fuss and it isn't fair to those who have used this as a remedy, naturally, in its intended form. Taking this away could have severe impacts on not only my life but the lives of others who have legally and responsibly consumed kratom over the years. I believe you are only hurting the state by doing this because prior to the introduction of all these synthetics no drug user i have ever met has either used or liked the use of kratom to where they would use it to get high. Please keep kratom in its natural form legal! Thank you for listening.
Mount Sterling	Kentucky	2 - Oppose - Regulation Over Ban	I oppose the banning of mitragynine and kratom because these natural substances have been used by many adults and me for years to manage discomfort, enhance focus, and support overall well-being without significant public health issues when used responsibly. Prohibiting them would drive consumers toward unregulated sources, increase risks, and eliminate the opportunity for safe, transparent, and properly labeled products under existing oversight. Instead of a ban, reasonable regulation and education would better protect public health. Mitragynine, the primary active compound in kratom, has been used responsibly for centuries as a natural aid for pain management, focus, and overall wellness without the severe side effects associated with many pharmaceuticals. Instead of an outright ban, implementing quality control standards, age restrictions, and public education ensures safety while allowing responsible adults access to this plant that can reduce reliance on harmful opioids and support public health.

Milford	Ohio	2 - Oppose - Regulation Over Ban	1) Harm-reduction potential Many adults use kratom as a lower-risk alternative to opioids, alcohol, or other substances. While not risk-free, it has helped some people reduce or stop more dangerous drug use—an outcome aligned with harm-reduction goals rather than prohibition. 2) Public health benefits outweigh blanket bans Criminalizing kratom pushes use underground, increasing adulteration, misinformation, and unsafe consumption. Keeping it legal allows for education, quality controls, and surveillance, which better protects consumers. 3) Economic and social costs of prohibition Bans burden the criminal justice system, harm small businesses, and penalize otherwise law-abiding adults. Regulation is more cost-effective and avoids creating new criminal records for nonviolent conduct. 4) Respect for bodily autonomy and cultural use Kratom has a long history of traditional use in Southeast Asia. In a free society, informed adults should be able to make personal health choices—especially when safer options exist. 5) Regulation works better than bans Legal status enables: Age restrictions Labeling and dosage transparency Testing for contaminants Limits on misleading health claims These tools reduce risk far more effectively than outright prohibition. 6) Ongoing research needs access Keeping kratom legal supports scientific study into its benefits, risks, and therapeutic potential. Bans hinder research and leave policymakers with less—not more—reliable data. 7) Proportionate response to risk Kratom carries risks (dependence, side effects, interactions), but those risks are comparable to or lower than many legal substances. Policy should be proportionate and evidence-based, not reactionary. Bottom line: A regulated, legal framework—not prohibition—best protects public health, respects individual choice, supports research, and reduces harm. If you want, I can tailor this argument for a letter to legislators, a public comment, or a debate format.
Mount Vernon	Ohio	2 - Oppose - Regulation Over Ban	To the Ohio State Board of Pharmacy, I strongly encourage you to reconsider any effort to ban plain leaf kratom, as doing so would not serve the best interest of public health or safety. A ban would eliminate access for responsible adults who rely on plain kratom as an alternative to more dangerous substances, while unintentionally driving the market underground where products are more likely to be contaminated, mislabeled, or irresponsibly marketed. Rather than prohibition, Ohio can better protect the public through sensible regulation—age limits, accurate labeling, quality testing for contaminants, and enforcement against adulterated products. Do not ban plain leaf kratom.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	I support allowing the legal use of kratom in Ohio. For many adults, kratom is a plant-based alternative used responsibly for pain management, improved focus, and as a tool to reduce dependence on more dangerous substances, including opioids and alcohol. Banning kratom would push responsible users toward riskier, unregulated options and remove personal choice in managing wellness. Rather than prohibition, Ohio should pursue sensible regulation that ensures product quality, accurate labeling, and age restrictions. This approach protects consumers, supports informed decision-making, and aligns with public health goals by reducing harm. Adults deserve access to safer alternatives when used responsibly, and Ohio can lead with balanced, evidence-based policy.
Indianapolis	Indiana	2 - Oppose - Regulation Over Ban	This ban is a horrible idea to all the businesses that this will hurt and the people who take plain leaf kratom responsibly. You are causing way more harm than good with this ban proposal. Please do not ban. Bans dont work,regulations work. Ban is not the right action to take and will lead to a black market. Support SB299: Protect Access to Natural Kratom & Ensure Respectful Treatment of Natural Kratom (mitragynine) Dear Senator, My name is Peter and I am a resident of Canfield, Ohio. I respectfully urge you to support SB299 because it would prevent a full ban on natural kratom (mitragynine) and instead regulate kratom responsibly, focusing on product safety and restricting synthetic compounds like 7-OH. Natural kratom has helped me live a complete life and be a hard working contributing member of society, and I strongly oppose any ban on natural kratom. Thank you for your time and consideration. Sincerely, Pete from Canfield
New Castle	Pennsylvania	2 - Oppose - Regulation Over Ban	Hello, I work with pharmacists and healthcare professionals in Clinical Review for Prime Therapeutics. They're no real basis to demonize and ban the Kratom plant. The plant itself is safe and has far less dangerous side effects than many of the pharmaceuticals people get. I work the cases every day and I know what's out there. Don't do this to people. It's a miraculous plant for many health uses and it should stay free and legal. There should be regulation for ensuring the plant material is safe and good quality. Don't use banning the active component as a stepping stone to ban the plan. This is not a real issue in the country now. Keep it around for those that need it. Blessings.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	This rule should be removed. Kratom saves lives and you are out here making rules that make no sense. A month ago you posted that kratom in its vegatiative state was fine and not banned. What happened..not enough money going into subs sales. Subs were the worst thing I have ever experienced getting off. They are also the biggest traded drug in jail now. Sure sounds to me like that is a bigger problem. Never heard of someone in jail begging for kratom. This state is truly a joke at this point. You take back things voted on by the people and make up rules to nanny us as if the pharmaceutical industry isn't the biggest problem of them all. Keep pushing away natural options to help the cure to the opiate problem you guys all helped create. Haven't overdoes deaths in Ohio gone down? Hasn't kratom use gone up? Wonder if that has anything to do with the reduction in death. I'm sure you all will think its subs. Ha those things get you high as a kite. Not like you are gonna take any of these comments seriously. You didn't last time you tired to ban it. We had to come an speak in front of the committee to show just how many people don't want kratom banned. Guess we will see you then. Leave kratom alone, push your other rule through with the synthetic crap and stop trying to criminalize people for using a plant. Toledo tried to ban this and started a mess. Ever since August you have been targeting kratom when the target should have only been that fake 7oh stuff that everyone keeps thinking is kratom. The two things are not the same. I've been taking kratom for 13 years and am perfectly fine. The DEA didn't ban it in 2016, you didn't ban it in 2019, how has kratom the plain powdered leaf all of a sudden become this problem again? Mitragynine isn't even kratom, you're pulling alkaloids from the plant and saying the individually alkaloid is harmful? There aren't even human studies on mitragynine by itsself so this whole argument makes no sense. I've never even seen someone selling mitragynine. They sell kratom the actual plant, or pills that really aren't kratom at all. That stuff is also a single alkaloid but enhanced in some lab. Ban lab made stuff, leave the natural leaf for the people of Ohio. Kratom should not be banned and scheduling mitragynine will do just that. Natural kratom powder is not the issue you are making it out to be. People have been using natural kratom for years and it helps people. Making this a schedule 1 is not justified and there is not a public health problem with kratom. The news keeps calling 70h kratom when it isn't the same thing. Didn't you all just ban that? So why are you banning natural kratom after you just scheduled everything else. The problem was solved. Stop trying to ban kratom. You did this in 2019 an the science didn't support it then. The only thing that has changed since 2019 is better science that shows natural kratom when taking responsibly is fine. If you're going to ban this plant the next then you better ban is alcohol because that is deadly and addictive. You can die from alcohol withdrawals, show me a death from kratom withdrawals. Any death ever reported when it comes to kratom has other things in their system that actually kill you. Be happy you banned all the synthetic stuff and move on. You've protected the people, leave kratom alone.

			I have used kratom for about 5 years. It has helped me so much and the fact that the board wants to ban this plant is crazy. I have never had a single issue with kratom. I heard about 7-OH and because I deal with constant pain decided to try it. That product should never been allowed and it is good that you emergency scheduled it. It is defiantly not like kratom and now might be the reason this plant gets banned. Please leave kratom powder alone. This rule is extremely unnecessary now that you have scheduled all other products made from kratom. The board has presented this argument to place mitragynine as a Schedule 1 while using data and information that looks at kratom, extracts, and semi-synthetic products as one thing. Mitragynine is not even any of these named above. It is one alkaloid found in the kratom plant. Placing mitragynine as a controlled substance after you just scheduled all kratom related products is overreach. The science you sited alone doesn't demonstrate your own argument. Using 7-OH and extract data to ban mitragynine makes no sense. It is bad science and shows the Board's lack of reasoning when making rules. Natural kratom should not be scheduled. Using the main alkaloid mitragynine to completely ban kratom while making nonsensical arguments that don't even relate to the topic should not be allowed to move forward. The Board continues to show a clear lack of understanding when it comes to their own rule making on kratom and needs to remove mitragynine from scheduling. Continue your rule making with what you have already emergency scheduled, the actual dangerous and enhanced products, but leave natural kratom out of this and stop making rules that make no sense like scheduling mitragynine. 2019 showed how many people didn't want natural kratom banned. It is now 2026 and just as many if not more feel the same. 7-OH is not kratom and shouldn't have been called kratom in the first place, but you took care of that. The majority of the kratom community didn't argue. That is because real kratom should be protected, not fake semi-synthetic garbage. Look at the responses you are getting and realize that the natural kratom users understand the difference and wanted 7-OH gone just like you. But please don't ban plain leaf kratom powder. Thank you for your time and hopefully you rescind your decision. The best path forward would be to allow SB299 to regulate kratom within the state. For my personal experience with kratom, the actual plant not “mitragynine” started back in 2016. My husband has struggled with addition since I met him. His addiction has been to benzodiazepines but like many people who struggle with addiction, he liked to dabble in opiates and whatever he could get his hands on. He has done pretty much ever illicit substance there is, including research chemicals like etizolam, which the Board banned a few years back as well as FDA approved pharmaceuticals. He has been off and on his benzodiazepine addiction for our entire ten-year marriage. He has been to rehab on two separate occasions. I have firsthand watch addiction plage his life and everyone’s life around him, including mine. Back in 2016 he had stumbled upon kratom. This was during his

			research chemical phase, so I though this would be just another drug he was going to abuse and get “high” with. I was completely against kratom because I thought it was just another drug for him to take. He convinced me to try kratom to prove that it was nothing like what I thought and that he wasn’t getting “high”. I agreed to try it and found that he was correct. I have personally been prescribed opiates for a few different reasons, such as when I fractured my spine. Any experience with opiates I would feel a noticeable “high”. When I tried kratom, it was nothing like taking an opiate. When taking kratom, the best way to describe what happens would be that your body just generally feels “better” but you don’t have any type of high like feeling. You feel more alert and overall just better. I of course only take kratom at a recommend low amount. After trying kratom, I had no issues with my husband continuing to use kratom in his daily life. He has taken kratom for 11 years on and off. He has taken it for years at a time and is able to stop without issues. That has never been his experience for benzodiazepines. I know what withdrawal look like thanks to him. I have watched him have a seizure from attempting to quit benzos. I also know way too much about drugs because when my life felt out of control due to his addiction, I spend hours and hours researching everything about what he took in efforts to give myself some sense of control to the out-of-control situation I had to watch. Since 2016 I have been a supporter of natural kratom. I do not support extracts and definitely do not support the concentrated and synthetic products like 7-OH. I came to testify back in 2019. I have met so many kratom consumers and fully support their access to kratom. I personally don’t take kratom other than maybe a few times a year largely due to the fact that I don’t suffer from chronic pain. If I spend hours outside in my garden, there have been times where kratom has helped. I would never support a product that would destroy lives. The fact of the matter is that no product on earth could meet that standard. I am not naive to the fact that there might be individuals that abuse kratom. But those individuals are few and far between and they would abuse any substance. Alcohol is freely available and regulated by the state and that alone kills more people annually. But those numbers just get brushed aside. Additionally, the stance the Ohio Department of Agriculture has taken by saying kratom can be sold but without any warning labels in Ohio is laughable. People continue to wonder why kratom could be misused when you have states like ours explicitly attempting to not have any type of warnings, use information, or facts about kratom displayed if sold. That alone is the fault of the Department of Agriculture. I have watched how kratom has helped my husband with his own pain as well as just his daily life. The number of people that use natural kratom responsibly does not constitute a ban. Regulations not prohibiting should be the solution. I ask that the Board to rescind the proposed rule and allow kratom to be regulated through SB299. The Boards proposed rule to schedule mitragynine should not move forward. This same agenda took place back in 2019 with claims that kratom is a danger to public health. Now the Board is conflating “kratom” with isolated alkaloids found in the natural plant. There should be no reason to schedule mitragynine a singular alkaloid, when the

			Board has already emergency scheduled all forms of “kratom-related products”, including all derivatives of kratom including but not limited to: 7-hydroxymitragynine, mitragynine pseudoindoxyl, dihydro-7-hydroxy mitragynine, and 7-acetoxymitragynine. The continued use of information and language associated with wholly different products, such as 7-OH, while calling them “kratom” is the entire problem with the approach this Board has taken. Please remember, none of the Board members are elected officials. No person on the board was voted for by the constituents of Ohio. The Board continues to create rules that are worded poorly, and this is due to the Board’s lack of knowledge on these products and the entire topic at hand. These matters should be left up to our actual elected governing body. It is clear the Board demonstrates a complete lack of knowledge on the overall topics based on the data the Board presents, which continues to reference 7-OH while this specific rule is a proposed ban of mitragynine. This is also clear, as the Board’s attempt to ban “mitragynine” uses data discussing “kratom”, which does not consist of just “mitragynine”. The inability to even provide documents on a singular topic completely negates the reasoning for the proposed scheduling. Ohio can “protect public health” without going to the extreme and placing mitragynine as a Schedule 1. Using the current approach would be destroying legitimate businesses as well as making thousands of Ohio citizens criminals. The Board needs to recognize and be able to distinguish natural kratom leaf from synthetic, concentrated, and isolated compounds. This would allow targeting enforcement toward high-potency synthetic products while preserving a regulated market that supports testing, education, and oversight of natural kratom or as the Boad has worded it “kratom in its vegetative form”. Mitragynine is not kratom just like 7-hydroxymitragynine is not kratom. No product on the market that is claiming it is kratom would only consist of isolated mitragynine. The utter inability to distinguish the difference shows that this Board should not continue with this rule. There are 18 states that have passed Kratom Consumer Protection Acts (KCPAs) requiring kratom manufacturers, distributors, and retailers to register for labeling and product compliance. This allows natural kratom to be sold while protecting consumers. This also supports legitimate jobs and tax revenue the state of Ohio has been receiving for years with the sale of natural kratom. Regulatory bill SB299 has already been introduced in Ohio that would regulate access to natural kratom leaf as well as formalize the Boards emergency ban of concentrated and isolated products. This is the better option for businesses and consumers that Ohio needs. The Board needs to recognize that they are not protecting the people of Ohio by banning mitragynine. Instead, the Board would be banning a singular alkaloid found in kratom, subsequently making natural kratom users criminals for utilizing a plant. All of this criminalization and outrage due to products masquerading as kratom which are all mutated products from isolated alkaloids found in the plant. The proposed rule to ban natural kratom should NOT happen. The OBP just emergency scheduled all the semi-synthetic 7-OH products as well as all kratom extract products in Ohio and yet that apparently wasn't good enough.

			The OBP has gone after natural kratom for years and failed back in 2019. Natural kratom is not the problem. It has been sold in the state of Ohio for years and the data the (unelected) pharmacy board published stating it is a "public health risk" is terrible data. Using Reddit as a source is a joke. The "8-factor analysis" mainly targets 7OH...which was already emergency scheduled. The OBP is conflating multiple things together in hopes to make natural kratom look bad. That's garbage science coming from individuals that have a pharmacy degree yet apparently don't know how to read scientific data. Everything used is cherry picked, while there are tons of scientific data showing just the opposite of what the OBP is claiming about natural kratom. If you remove all the information on what OBP ALREADY emergency scheduled (everything but natural kratom) you would not be able to complete your 8-facter analysis to meet the claims. The 7-OH products hit the market in 2023. Since they entered the market, those products have masqueraded as "kratom" and have done a fantastic job causing confusion. When OBP show any numbers from late 2023, 2024, or 2025 how do you know that the reports are for kratom or 7-OH since 7-OH marketed itself falsely as kratom the entire time, which it is not and which is not now what you are attempting to ban. OBP has already banned 7OH and even kratom extracts. Why now are they going after natural plain leaf kratom. Reading the "public health risk" table associated with deaths, first claim 202 deaths in which kratom was listed as the cause of death between 2019-2024. But also fail to mention that every single one of those deaths but one which "claim" kratom was listed as the "cause", have more than the number of deaths than "kratom caused" containing other substances found positive in the system postmortem. Yet the information fails to include what those substances were, which are all likely to have actually cause the death, not kratom. A medical examiner in Ohio was SUED and lost due to making the claim that kratom caused a death when in fact it did not. How is anyone to believe the report giving without also including a report demonstrating what substances were in the system at the time of death as well, since there are plenty that are known to kill. Senate Bill 299 as well as House Bill 587 have been introduced to regulate kratom in 2025/2026. House Bill 236 introduced in 2021 passed the House and was introduced into the Senate before it lapsed in the Senate committee again, which would have regulated kratom in Ohio, not ban it. So, the actual elected officials that the people of Ohio VOTED for have clearly shown their support to REGULATE kratom, not ban it like the unelected officials of the OBP. The overreach of an unelected board of individuals is disgusting. The people of this state overwhelming do not want kratom banned and yet time and time again the OBP thinks that they know anything at all about the plant. Learn to read science and stop relying on Reddit and people that don't take personal responsibility for their own actions as a way to deem a public health risk. Alcohol is a known public health risk yet no one bats an eye when thousands of death a year happen due to that. Pharmaceuticals are constantly a cause of death but those are allowed because they have an "FDA" stamp of approval. Kratom vendors are not making claims that kratom will assist with medical issues..those are kratom users. So the fact that the OBP is saying there are no know medical uses for kratom, well duh because kratom isn't FDA approved..just like vitamins aren't. Yet those are on the market and wildly

			accepted. The OBP needs to learn their place in Ohio and allow actual elected officials make the rules and laws for this state not back ally their agendas onto the people of Ohio.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	I believe that kratom has a big misunderstanding and unfortunately many brands have profited off this- making products completely different and labeling it kratom. 7OH is an alkaloid found in very small amounts naturally in kratom leaf, powder, extracts etc however many brands are taking tha alkaloid and manipulating it into a whole new chemical structure while making it stronger. That is not kratom. Kratom is a powder, leaf, even some extracts , and I have seen first hand by working as a general manager at a place that serves these beverages how much when educated properly, sourced properly and used properly kratom can help individuals. It has helped my mood , anxiety, pain, stress , energy . I believe that banning it all is an easy solution versus actually regulating it and understanding that not all products labeled kratom are “kratom”.
Akron	Ohio	2 - Oppose - Regulation Over Ban	I understand concerns about safety — I really do — but banning kratom outright is not the answer. What does make sense is proper regulation. For people like me, kratom has been a life-changing harm-reduction tool. It helped me move away from far more dangerous substances, manage chronic symptoms, and function like a normal human being again. I didn’t use extracts or super-concentrated products — just plain leaf, responsibly. When kratom is suddenly removed without a transition plan, real people suffer. Abrupt bans don’t eliminate use — they push people toward riskier alternatives or force withdrawal that can be physically and mentally destabilizing. I fully support reasonable precautions: • age limits • lab testing and labeling • bans on synthetic or highly concentrated derivatives • education on responsible use But banning natural leaf entirely ignores the thousands of people who use it safely to stay employed, care for their families, and avoid far more harmful substances. Regulation protects people. Prohibition hurts them. Please listen to the people who actually use kratom responsibly — not just headlines or worst-case scenarios.
Toledo	Ohio	2 - Oppose - Regulation Over Ban	The fight should not be against Kratom but against 7OH and other highly concentrated products. Those are the products that are causing so many issues. The Ohio Board of Pharmacist has already moved to ban these products based on the FDAs recommendations. I think a better course of action would be to limit the stuff being sold at gas stations and smoke shops. Not just 7OH but those other products containing chemicals you can't even pronounce, in colorful packaging aimed at the younger generation.

Cleveland	Ohio	2 - Oppose - Regulation Over Ban	A straight out ban will remove a natural, healing medicine that is powerful for many. Like most things in Earth, when used appropriately - brewed as a tea - it is healing and transformative. But people have bastardized it by crushing the leaves into a powder and putting it into capsules. It's not meant to be consumed whole. This specific method causes the adverse effects that this bill is trying to protect people from. Ban the method; not the substance. These leaves are related to the coffee plant. The same process is used by millions - grind the bean and brew them like a tea. This is considered safe. If people started eating handfuls of coffee beans throughout the day, I'm sure we would see some very harmful effects. We already know that drinking too much coffee causes adverse effects. Please do not ban a healing plant given to us by God, Mother Earth, or whatever higher power you believe in. The plant, itself, when used in balance is healing. If you want to protect people, ban the crushing of whole leaves and putting them in capsules or any other form to consume whole and easily. Don't ban using it in tea form where just like coffee, it's very hard to take too much and you aren't investing the parts of the plant that aren't intended to be ingested.
Sylvania	Ohio	2 - Oppose - Restless Leg Syndrome	First off, I suffered with RLS for years before I even knew it existed. I started to have trouble sleeping in my 30's due to leg restlessness eventually spending hours upon hours walking around in darkness, doing wall sits, stretching, anything to relieve this feeling of having to move (primarily my legs). After having a sleep study done and being told of the incredible amt of movements made, I learned of RLS and was given Mirapex. It definitely helped a little but didn't resolve it and it eventually got bad again (I couldn't sit through a movie for a decade or so). I've since tried Requip, hot baths, stretching, compression machines, everything you can think of and nothing worked. By the time I was in my early 40's it was so bad I thought getting my hip replaced for some long term minor hip pain (synovial chondromatosis) might help so I did it. I got my hip replaced. It did nothing to resolve the RLS. Fast forward several more years and I'm now about 50 and sleep upright in a chair each night because it seemed to help. Still take Mirapex every night, still takes hours before I fall asleep probably because of exhaustion. Then by chance, I ran across an article or maybe it was in a discussion online that mentioned Kratom. Never heard of it. But somewhere it mentioned one of its benefits was for the treatment of RLS. There was a small shop off Cleveland Ave in Columbus so I gave it a shot. And the rest is history. This stuff almost immediately calmed my legs and I've been taking it ever since. Because I take it daily at 7pm I feel nothing (no 'high') and never deviate from my 5mg.....for years (unless I taper down for a bit to keep its effectiveness). I know it is still the solution to my problem to this day as I recently forgot to bring it with me on vacation and the 1st night I did not sleep AT ALL. Literally took several hot showers in the hotel room and found a place the next day that sold it. Is it addicting? I'm sure it is. I've experienced the withdrawal symptoms which not only create a spacey feeling but exacerbate the RLS to an almost uncontrollable feeling. But this stuff is my lifeline to a 'life'. The idea of it becoming illegal is terrifying. FYI I'm speaking of the natural Kratom as I've never taken any synthetic Kratom. Thank you for reading my story and I hope this gives you pause when thinking about labeling this a Schedule 1 substance.

Williamstown	Kentucky	2 - Oppose - Restless Leg Syndrome	Please do not make me a criminal! I require Kratom to control restless leg syndrome without needing heavy pharmaceuticals!! I travel to Ohio often. It would be ridiculous to legalize marijuana and make Kratom illegal. It has saved my life.
Painesville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Attached file with my letter. To the Honorable Members of the Ohio Legislature, I am writing to share my personal experience and to respectfully urge you to keep pure kratom leaf legal in the State of Ohio. For most of my life, I have lived with severe headaches and chronic migraines that eventually became a daily, overwhelming burden. The pain was relentless. I sought help from countless doctors and specialists, undergoing CT scans, MRIs, chiropractic treatments, acupuncture, and trying numerous prescription medications. Despite spending thousands of dollars and years searching for answers, I was left without relief. The medications prescribed to me often made things worse. I experienced memory loss, confusion, and difficulty functioning at work and in everyday life. I felt trapped—forced to choose between unbearable pain or medications that robbed me of my ability to think clearly and live normally. At my lowest points, the constant pain made me question whether life could ever feel manageable again. Within the past year, I discovered kratom in its natural form. I began brewing the crushed leaf as a tea, cautiously and out of desperation. For the first time in years, I experienced real improvement. My migraine episodes were reduced by nearly half, and the intensity of my pain decreased significantly. I was finally able to function without the debilitating side effects caused by prescription drugs. Kratom is not a miracle cure, but it has given me something I had nearly lost—relief, stability, and hope. It has helped me more than any prescription medication ever did, and it allows me to manage my condition without sacrificing my mental clarity or ability to work. If kratom were to become illegal in Ohio, I truly do not know where I would turn next. I respectfully ask you to consider the many Ohio residents like myself who rely on pure, natural kratom to manage chronic pain and maintain a basic quality of life. Please do not take away a natural option that has helped so many when so few alternatives remain. Thank you for listening to my story and for your consideration. Sincerely, Frank Zell Mayfield, Ohio

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	To whom it may concern, I am a 36-year-old, life-long resident of Ohio and Cuyahoga County. I am currently a homeowner and work in an engineering role in Cuyahoga County, as well. I have been using kratom products on and off for about 15 years to treat many different health issues. I am writing to you today to express my opposition to and request an end to any proposal to schedule kratom and/or 7-hydroxymitragynine (7-OH) as a controlled substance. In 2011, I was severely injured in a car accident, where my ankles, femur, wrist, and neck were broken and/or shattered. I also sustained a spinal cord injury that caused me to become a quadriplegic. As you can imagine, I had to undergo several major surgeries and spent years doing physical therapy to get as close to normal as possible. With tremendous effort and luck, I have healed a significant amount and recovered 90% of my function and feeling. Despite this, I still deal with severe chronic pain, primarily resulting from nerve damage caused by the spinal cord injury. In addition to nerve pain, I deal with muscle spasms and stiffness, which makes it difficult and painful to move at times. There are not many medications that help alleviate my pain, and often doctors can only recommend a cocktail of pharmaceutical drugs to treat my multitude of symptoms - most of which only marginally help and come with a long list of side effects. In my personal experience, there have been few medications which have provided any relief; however, they all have come with consequential side effects. The only exception to this has been kratom and kratom extracts. My current pain treatment options include opioid pain medications, over-the-counter (OTC) medications, ketamine infusions, marijuana, and kratom. Opioid pain medications are not ideal options, as they carry a high risk of addiction, tolerance issues, and potential death. Because of the opioid epidemic, I, like many others with chronic pain, are unable to even choose this route of treatment in the first place, as doctors are unwilling to prescribe opioid medications for fear of losing their licenses or getting caught up in litigious situations. Over the counter medications can slightly ease the aches, but they do not help with nerve pain. They are hard on the body and cause damage to major organs like the kidneys and liver. I personally have experienced stomach bleeds from ibuprofen after about four days of use, which is one of the most common OTC medications recommended to me by my physicians. Ketamine infusions help with some of the pain, but they do not relieve all of it, as the procedure is done once a month. The infusions are extremely expensive, and most insurances refuse to cover this form of treatment. These infusions also take up an entire weekday once a month, which is difficult to schedule, takes me away from work, and requires me to find a caretaker for each occurrence. There are some other ketamine treatments available that are helpful for some, but they do not offer me the complete level of relief I need. Medical marijuana works for some of the nerve pain, but most employers still drug test for it and have policies against marijuana use. Employment is obviously more important to me than medical marijuana, as feeding and housing

			myself are necessities I am not willing to compromise. The only option I have had that has been affordable, legal, safe, has minimal side effects, and can treat all my different types of pain has been kratom and alkaloid extracts from kratom. In addition to providing substantial pain relief, kratom has helped me with anxiety, depression, and Post-Traumatic Stress Disorder. Kratom has been the only useful alternative to benzodiazepines that I have been prescribed to treat these disorders. Benzodiazepines (ex. Xanax, Ativan, Valium, etc.) are highly addictive, have many negative side effects, and can also lead to death from withdrawal if addition occurs. For these reasons, I avoid this method of treatment if at all possible. Kratom seems to be able to help all of my health problems while having the least amount of adverse effects. Ironically, as a result of a recent re-injury, I am writing this letter to you today while working to recover from a second instance of breaking my neck. I would not have been able to function over the last few months without kratom, as it was the only pain relief option available to me at the time. In my 15 years of taking kratom products I have never been impaired or felt unable to function normally nor have I experienced any addiction or withdrawal concerns. I have taken kratom solely as a medication, and I have taken it responsibly. A permanent ban of kratom products will prohibit me from getting the treatment that I need, forcing me back into the miserable reality of mismanaged pain. People who handle legitimate drugs with responsibility and care should not be punished because of those who choose to abuse drugs. As kratom is safe, it makes no sense to ban it while simultaneously advising that it is okay to take medically prescribed opioids and benzodiazepines that are dangerous and deadly. There are no proven cases of kratom or kratom extracts leading to death or overdose with responsible use. Taking kratom away would show the people that this state is not concerned about truly safe and healthy options for its residents. We also know that prohibition historically creates more problems than it fixes. People with substance abuse disorders will always find something to abuse regardless of what is illegal. This ban could also lead to a new illegal drug market for kratom and kratom extracts that would fund criminal activity. In 2022, the American Kratom Association estimated 300,000 Ohioans were benefiting from the use of kratom and its products. They also estimate 10-16 million Americans regularly use kratom. Making these products illegal would, in turn, make millions of historically law-abiding citizens criminals overnight. For those individuals taking it to treat an opioid disorder, this ban could also result in a ballooning effect where they may be pushed to use more dangerous, illicit substances like fentanyl. A ban of kratom and its extracts is not only harmful for citizens, but it can potentially cause lethal consequences. As a lifelong Ohioan who cares about the welfare of the residents of this state, I urge you to consider lifting and ceasing any bans on kratom and kratom alkaloid extracts and to consider regulation as a more viable option. Regulating kratom and kratom extracts would be a positive action, if done correctly. One option would be to put an age restriction on the sale of kratom to mitigate the risk of it getting into the hands of minors. Many stores already

			check identification; however, this practice should be mandatory. An additional step would be to add warning labels to kratom products to emphasize keeping them out of reach of children and not to consume alcohol or other sedating drugs in combination with kratom. Safe dosing and serving size guidelines should also be a requirement although most products already provide this information.Furthermore, dates of manufacture should be included on each package along with a “best by” date or expiration date. The last regulation I would recommend is that all products should be lab-tested for quality and to verify there are no harmful additives, chemicals, and/or heavy metals. I do know that most kratom products already have these warnings, age restrictions, date information, and lab testing verification printed on each package; however, regulating the products this way and making these suggestions mandatory would help to guarantee product quality and ensure safety for consumers. The legality of kratom and its products helps to ensure those who use it responsibly experience normal quality of life and relief to otherwise debilitating conditions. Instead of banning natural kratom and 7-OH, I respectfully urge you to support reasonable regulations, quality standards, transparent labeling, and age restrictions to protect consumers and preserve access to this important, safe and natural alternative to harmful and potentially deadly opioids, benzodiazepines, and other illicit drugs. Protect your citizens through regulation, not prohibition. Thank you for taking the time to read this letter and for your consideration of my position and requests on this vitally important topic.

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Second submission wanted to be clear Dear Members of the Ohio Board of Pharmacy, I am a resident of Ohio. I am submitting this written testimony to share my experience and to encourage a science-based approach to kratom policy in our state. I live with chronic pain due to fibromyalgia and agerelated musculoskeletal degeneration. These conditions are long-term, complex, and often poorly controlled by conventional treatments alone. Over the years, I have tried many physician-directed therapies, including prescription pain medications, physical therapy, and non-opioid interventions, with limited or temporary relief and, in some cases, unacceptable side effects. Under these circumstances, I responsibly incorporated kratom (Mitragyna speciosa) into my painmanagement routine. At low, consistent doses, kratom has significantly reduced my daily pain levels, improved my functional ability, and allowed me to participate more fully in normal life activities. Importantly, I have not experienced impairment, escalating dose requirements, or adverse health effects from its use. From a scientific standpoint, kratom contains alkaloids—primarily mitragynine and 7-hydroxymitragynine—that interact with opioid receptors in a manner distinct from traditional opioids. Research indicates these compounds act as partial agonists and demonstrate biased signaling, which may explain why kratom shows analgesic effects with a substantially lower risk of respiratory depression compared to full opioid agonists. Current evidence also suggests kratom has stimulant-like effects at low doses and sedative or analgesic effects at higher doses, further distinguishing it pharmacologically from conventional opioids. Available epidemiological data indicate that the majority of kratom users report using it for pain relief, mood support, or to reduce or avoid opioid use. While any bioactive substance carries risk, the scientific literature does not support categorizing kratom as comparable in danger to opioids. Instead, the data support regulation focused on product purity, accurate labeling, age restrictions, and consumer education—rather than prohibition. I respectfully urge the Board to consider policies grounded in current scientific evidence and real-world outcomes. For many Ohioans like myself, kratom is not a recreational substance but a harm-reduction tool that improves quality of life and reduces reliance on higher-risk medications. Thank you for your time, your service, and your willingness to consider evidence-based perspectives from patients directly affected by these decisions.

Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	kratom has profoundly improved my quality of life and to express my deep concern regarding recent efforts to ban or criminalize this natural botanical. For me, kratom has been a life-changing tool. After years of struggling with chronic back pain that traditional medicine couldn't solve, kratom allowed me to return to work and be present for my family without the fog of heavy pharmaceuticals." Without access to this plant, I fear that my health and ability to function would decline significantly. I am concerned that a "push" toward prohibition is often based on a misunderstanding of what kratom is. While there is a legitimate need to address highly concentrated or synthetic "extracts" (sometimes called "gas station heroin"), a blanket ban on the natural leaf would hurt our community in several ways: Many in our community use kratom as a harm-reduction tool to stay away from dangerous illicit opioids. Removing this option may inadvertently push vulnerable individuals back toward the black market and the fentanyl crisis. Criminalizing Good People: A ban would turn law-abiding citizens parents, veterans, and professionals into criminals overnight for simply trying to manage their wellness. Lack of Quality Control: Prohibition stops the state from enforcing safety standards. Instead of a ban, I urge you to support the Kratom Consumer Protection Act (KCPA), which mandates lab testing, clear labeling, and age restrictions to ensure that only pure, unadulterated products are sold. We should be questioning why the push for prohibition often ignores the 10–15 million Americans who use this plant safely every day. I ask that you choose regulation over prohibition to protect both public safety and the rights of your constituents. Thank you for your time and for your service to our community. I look forward to hearing your position on this important issue. this complaint as a concerned citizen who reasonably believes that the current regulatory effort is not being conducted in good faith, is not grounded in unbiased scientific inquiry, and reflects a predetermined outcome driven by improper influence rather than legitimate public health considerations. Predetermined Outcomes and Lack of Scientific Neutrality A fundamental requirement of any public health regulatory action is objective, transparent, and open-ended scientific evaluation. In this case, there is a widespread and reasonable perception that the outcome regarding kratom has been predetermined before the completion of neutral data review or open public discourse. When conclusions precede evidence, the process ceases to be scientific and instead becomes ideological. This approach mirrors historical regulatory failures such as the “Reefer Madness” era, where fear, censorship, and political pressure replaced evidence-based policy an approach now widely acknowledged as harmful and discredited.Censorship and Suppression of Public Discourse Meaningful scientific inquiry requires open discussion. However, public discourse surrounding kratom is increasingly censored, including on major platforms such as Facebook, where content mentioning kratom is routinely suppressed or removed. This suppression undermines public trust and raises serious concerns regarding how “consensus” is being manufactured. A process that silences dissent while amplifying a single narrative cannot credibly claim to be evidence-based or transparent. Appearance of

			Improper Influence and Conflicts of Interest There is also a strong appearance of corruption and undue influence permeating this process. The involvement of political actors, regulatory bodies, advocacy organizations, and individuals with potential financial or professional incentives creates, at minimum, a conflict-of-interest concern that has not been adequately disclosed or addressed. From the perspective of the public, this effort appears aligned with FDA-driven and pharmaceutical interests that stand to benefit from the removal of a natural, non-patentable alternative relied upon by many for harm reduction. Whether through direct payments, indirect funding, or future professional incentives, the appearance of impropriety alone is sufficient to compromise the legitimacy of this process. Harm to the Public and Failure of Harm Reduction Principles Kratom is widely used by individuals seeking to avoid opioids, alcohol, and other demonstrably dangerous substances. Any ban or severe restriction will foreseeably result in harm, including relapse, withdrawal, and increased risk of overdose. A regulatory action that predictably increases harm cannot reasonably be described as protecting public health. The foreseeable consequences of this policy decision must be acknowledged and accounted for… I Demand for Accountability I formally object to the current regulatory trajectory regarding kratom and assert that it reflects: A lack of scientific neutrality. Suppression of public discourse. Predetermined outcomes. Apparent conflicts of interest. Disregard for harm reduction and lived experience This process, as currently conducted, is deeply flawed. It is my belief that continuing on this path will result in unnecessary suffering and loss of life, for which the responsible parties will bear moral and historical accountability.i request transparency, disclosure of conflicts of interest, and a halt to any regulatory action until an independent, unbiased, and open scientific review is conducted with meaningful public participation.everyone see through this not about public heath but to sell more money so bureaucrats can get back room payment under the fake disguise of public health. The corruption runs deep
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use kratom for pain management because I don’t want to take narcotics. Banning it will leave me no option but to be in constant agony or to be prescribed addictive and deadly narcotics. Ohioans should be able to make their own decisions and not be told how to live their lives.
Grafton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use natural kratom plant to relieve pain. I have lupus and it helps me. I don't take any pain relievers other than Tylenol. This is the only thing that I can access that helps.

Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 70 year old who has been taking kratom for 20 years with no ill-effects. It has helped me tremendously with my lower back pain. I have tried, along with my physician, all kinds of pharmaceuticals to no avail. Please, please do not make kratom products unavailable to me and people like me. Thank you for your time.
Strongsville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been plagued by kidney stone attacks since a very young age. I dislocated my shoulder playing baseball in high school which resulted in frequent shoulder dislocations -- hundreds upon hundreds. For many years, I would wake up in the middle of the night to a dislocated shoulder which, once back in place, would be extremely painful to move for weeks and weeks afterward. Once the pain would finally diminish, it would happen again. I have had 3 surgeries on the shoulder -- 2 which had failed to prevent the dislocations. The last was a RARE and painful open joint repair common among rugby players. The doctor, who works on sports teams, said this was the absolute worst shoulder he has ever worked on. While that repair has made the shoulder stable, it has brought on early arthritis. On top of that, I have chronic arthritis of both knees and am in need of replacements (under age 50). I get injections every 6 months, but they do not work as they once did, so replacements are nearing necessity. I'm terribly afraid of the knee surgery because of the trend of under-prescribing pain medications post-surgery. I realize there will be pain with any surgery, but I have TWO of these to do, so I would very much like to be somewhat comfortable. Most patients who have one knee done wait for 7-8 years to have the second done because of the pain. In addition, I have painful IBS which had accounted for many sick days, missed work, and being unable to advance my career. During all of these excruciatingly painful experiences, I had also become a slave to the ups and downs of pain medications -- and I have been on MANY. When prescribing regulations changed, I was left with nothing but pain and then the agony of withdrawals from being cut off of medications instantaneously. In 2008, I heard of a little-known herb called kratom. After finding kratom, my life improved exponentially. I first was able to get out of my dead-end job and get into a large company where I could be paid competitively for my talents and receive the recognition that I deserved. I was able to enjoy walking and doing things with my family again. I could now keep up with my young Daughter and my relationship with my Wife improved. I was able to buy my family a house in a neighborhood where I'm not afraid to walk at night and do not need to carry a weapon to go to the store. I have received much recognition at work and am known for being one of the best engineers in a company of 20k workers. I received employee of the month and "exceeds expectations" numerous times on my reviews. The best part is that I was able to scale the medication down to a minimal level and have been able to find a doctor who will treat my pain with minimal levels of medications. I understand that it is up to you to protect citizens / consumers from products which are harmful and addictive, but kratom has been in use in the USA since around 2005. Concentrated extracts such as 7-OH can be quite addictive, and I agree that it was a bad idea. However, natural kratom leaf is not 7-OH, and therefore should NOT be treated as such. Many news articles in which kratom is named as a cause of death are ridiculous. In one that I read just a couple of days ago, a man died from heart arrhythmia. The toxicology report showed both kratom and

			METHAMPHETAMINE. Gee, I wonder which one is to blame. This is not to say that kratom or any other supplement is a perfect fit for everyone. However, let's put this into perspective. 8.4 million US Citizens are allergic to shellfish, and another 3.9 million are allergic to nuts, yet there is no warning on either product. Would a store clerk even think twice about selling peanut products to a kid? Absolutely not. Are there big, bright warnings on every jar of peanut butter or bag of shrimp? Absolutely not. In such a case, the person with the allergy must be intelligent enough to know that they should not eat nuts. How is this any different? Not only are you banning one of the only remaining products that can help someone suffering from chronic pain or addiction, but putting another natural plant on Schedule-I has the following additional adverse effects: 1) First and foremost, it HINDERS RESEARCH. Let's face it, pain is here to stay, and there has been little to no research on new painkillers due to regulations and stigma. Doctors UNDER-PRESCRIBE even post-surgery. I am honestly terrified to get my knees replaced as I need TWO done, and most people I know wait years and years to get the second done due to the pain. Under-prescribing does NOT HELP. 2) It creates a black market. A black market feeds money to illegal organizations, cartels, etc., while at the same time taking tax money away from the state. Black market products are not tested and may contain any number of unregulated adulterants. 3) You will be turning thousands upon thousands of people into criminals overnight. 4) The LAST TIME the government banned a natural plant product, it cost millions of people's lives and freedom, millions of dollars in enforcement, and did it work? NO! Cannabis has become legal again. Let's not make that same mistake. I realize that kratom is NOT PERFECT, but it is also NOT ALL BAD, either. People need to do their own research and come to their own conclusions. If "My Body, My Choice" can apply to vaccines (which skipping vaccines has the potential to spread diseases which can kill thousands or millions), then why do I not have the same choice with kratom? I thank kratom for where I am today and I would not have been able to get to this point without it. It was there for me when I needed it and it should remain uncontrolled and legal so that others in similar situations could benefit from it as I did.

Northfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have seen how helpful Kratom has been beneficial for loved one's managing pain relief, overcoming addiction and lifting mood. Natural leaf Kratom should be kept safe and legal. Kratom has been a godsend for me. I am a person with chronic pain, and Kratom is used to make my life a drug-free life. I don't have to use the highly addictive and dangerous narcotics that doctors are so apt to prescribe me. I am drug-free and intend to stay that way with the help of Kratom. Kratom Is a safe effective way for me to have a good quality of life. I am relatively pain-free, addiction, free, and healthy.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I respectfully request that Kratom not be banned. This is not a drug. Not harmful in anyway. But helpful to thousands of people here in Ohio alone. Many of them senior citizens like myself. I was introduced to Kratom by an elderly friend after having to check myself into a rehabilitation center after experiencing suicidal thoughts brought about by prescribed opioids. I'd been on them for over a year. My friend had been drinking Kratom tea for a few years himself for spinal arthritis. It was the best thing anyone could have done for me. It changed my life! Kratom is completely natural. I brew it as a tea with honey to help control my back pain. It doesn't completely eliminate the pain but it helps to make it tolerable so I can live a normal, active life. I do NOT want to go back on opiates! And I absolutely don't want to be taking multiple doses of tylenol or ibuprophen. Both my sisters used those over the counter meds for pain and both died last year from kidney disease. Please, please hear people out whey they tell you this natural tea leaf is saving lives. It is a benefit! Not a threat! Many young people have used it to help them come off opiates. We old folks use it for aches and pains that otherwise would severly limit our quality of life. Veterans are drinking it to calm their PTSD. If you look at the science behind kratom there will be no doubt in your mind regarding it's benefits. Please read those studies. And allow us to continue to drink this harmless tea and live normal lives. Don't ban this. It would be so detrimental to the elderly. Thank you so much for taking the time to consider my request.
Circleville	Ohio	2 - Oppose - Used to Treat Chronic Pain	70 year old male, I have been using natural powder for many years now for pain and anxiety rather than powerful opiods. Kratom has made my quality of life much better than when I was on powerful pain meds and anxiety meds.
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	This is bullshit this stuff actually works and helps a lot I have mental issues and have grandma seizures haven't had one in 2 years bc of this stuff 2 weeks ago I had my first one thanks a lot

Canton	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello my name is Rodney i have been an avid kratom user since 2004 ! I use it daily for pain relief and energy! I was born with scoliosis and have had multiple back surgeries over the past 25 years ! And getting ready to have a lower back fusion in February! I'm not a fan of opioids and what big pharmaceutical companies push on us ! I like a natural derivative that don't have an addiction factor,so that's why I choose kratom over opiates so many years ago ! And right at the moment of I didn't have kratom i would not be walking ! I hope Ohio does not bann this product ! At the end of the day big pharma does not care about the people all they care about is the money ! It's a sad world we are living in right now people really need to pray to the good lord for help and healing and a better future ! Hope my little paragraph helps in the fight to keep kratom legal in Ohio ! Thank you for the chance to make my voice be herd immunity! Have a blessed day
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use kratom powder responsibly for occasional pain. It has improved my quality of life and I have never bought the extracts or synthetic versions. I do not think that every version is dangerous and that scheduling kratom powder the same as other schedule 1 substances is irresponsible and will impact many people negatively
Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use Kratom to manage chronic pain from two herniated disc and multiple bulging. I quit pain medicine 6 years ago and only relief I get is from Kratom powder.
Greenfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	PLease do not criminalize Kratom I have used it responsibly fo 4 years without a problem for back pain
Greenfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	Helps me with my arthritis and anxiety!!It has helped so many people I take Kratom for my arthritis pain , fibromyalgia pain- It's the only thing that helps me !!! Kratom is not bad for you it will do no harm. All extracts and 70h should be banned but kratom powder helps me get up and walk i have sciatica and it takes all my pain away
Greenfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a patient with severe and debilitating rheumatoid arthritis. It has taken away so many of the things I loved to do. When I found kratom 3+ years ago, there was light again. I could use it responsibly, and it allowed me to actively participate in my life again. Obviously, the system isn't perfect. If misused, kratom can be addictive, but this is true of many substances, including alcohol. Unlike alcohol, however, kratom genuinely helps so many people with their pain in a safe way. Instead of banning it, please just regulate it instead. Clearly labeled containers, for adults over 21, with the important information listed. Please don't take away a safety net from so many people who use it responsibly. Prohibition will not increase safety. It will decrease it when people try to find alternative methods to manage their pain. Thank you.

Greenfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has saved me. I suffer from an autoimmune disease that causes me to experience chronic fatigue and pain. Prescription medication does little to manage my symptoms and the side effects were damaging. Kratom allows me to be able to manage pain without clouding my head like every prescription medication I tried. It has enabled me to go back to work and enjoy life again. Please don't take this from people like me. Regulate it if necessary, I'd love that. Banning it will only push people to use highly addictive and deadly pills that don't address the pain and fatigue. Please devote this energy into lowering health care costs and improving accessibility. Thank you for your time.
West Carrollton City	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please do not ban kratom powder. I was on opiods for my rheumatoid arthritis and I've been using Kratom for 9 years. Not abusing, it's very safe and helps alot of people
West Carrollton City	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello, I was a wrestler for 15 years. And my career ended after a major spinal cord injury that caused severe nerve pain that altered my life at a young age. I went through such a huge struggle to the point of not being able to walk without major struggles and not being able to work for years. I found the natural kratom leaf 8 years ago and It was one of the major reasons I was able to turn my life and my health around. To this day I struggle with some pain. But I am proud to say kratom helped me move forward, getting a graduate degree where I work in a field dedicated to helping others and I am proud to say I am a contributing member of society. I can say with comolete honesty that the natural kratom leaf has been one of the major factors in helping me improve my life and my health. The supplement helps very much for my specific nerve pain that travels down my legs and all the way up to my neck. This supplement has improved the quality of life for COUNTLESS other people. Many of which are professional, blue collar, and hard working folks of Ohio. Please consider KEEPING natural leaf kratom legal in Ohio. Thank you very much for your time.
West Carrollton City	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a cancer patient. I take ONLY the powdered plant leaf form of kratom. It has allowed me to not be in bed all day every day. It decreased my body's inflammation and helps to relieve my anxiety. I have never been a person to feel these so called "highs" from this powered leaf leaf. But it works on my body and that is everything to me. The harder kratom I hear about? Would never touch that stuff and agree it is misused. But please don't ban our powdered plain leaf. It is a simple plant. Not a drug. Appreciate having a voice and hope to continue to stay on this while battling this horrific disease.
Beckett Ridge	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please consider keeping kratom legal. I am a 53 year old woman who has used kratom safely and regularly for 7 years. If used responsibly it is completely safe. The incidents of harm that have happened are in conjunction with other drugs that are the main cause. Kratom is a safe way to keep me and my husband working and productive even though we suffer from serious back injury and severe depression. Please don't take away the only way we can keep productive. Thank you for your consideration.

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please stop taking things away from us. The natural form of kratom is not dangerous if used correctly. I'm an adult who has used kratom for 8 years now and if we're to lose this, I'd be in agony at all times unable to do anything for my family. I'm supposed to be the caregiver. The reality is that if this gets taken away, my life ends with it. That's reality for a lot of us who depend on kratom. It's not fair to us to go through this
Toledo	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am one of the many everyday Americans whose life was stabilized—not destroyed—by natural kratom leaf. Before kratom, my options were limited and dangerous. Like so many others, I lived in a system where the only "approved" answers to pain, anxiety, or dependence were pharmaceuticals that came with serious risks: addiction, withdrawal, loss of function, and loss of dignity. When those failed—or caused harm—there was nowhere else to turn. Kratom changed that. I did not use extracts. I did not use synthetic products. I used natural, whole kratom leaf, the same way millions of people have for generations. For me, kratom was not about getting high. It was about functioning. It allowed me to get through the day, take care of my responsibilities, and live a stable, productive life without turning back to substances that were far more dangerous and far more addictive. What frustrates me most about the current conversation around kratom is how disconnected it is from reality. Natural kratom leaf is not comparable to concentrated extracts or isolated compounds. You cannot equate a plant leaf to highly processed products designed to spike potency. That distinction matters. Even state leaders have acknowledged this difference—saying extracts were the concern, not the leaf—yet now the leaf itself is being targeted. That makes no sense. Scheduling or banning natural kratom leaf does not protect people like me. It harms us. It removes a safer alternative and pushes people back toward substances with far higher overdose and dependency risks. History has shown us this over and over again: prohibition does not eliminate substance use—it only makes it more dangerous. People who struggle will always exist. If it's not kratom, it will be something else—often something far worse. Taking away a harm-reduction tool does not solve addiction. It accelerates it. I am not asking for kratom to be unregulated. I support responsible regulation, quality standards, age limits, labeling, and consumer protections like the Kratom Consumer Protection Act. What I oppose is the reckless decision to treat a natural leaf like a Schedule I drug—on par with substances that have no accepted use and extreme abuse potential. That comparison is not just wrong; it's insulting to the lived experiences of people like me. Kratom gave me stability when the system had nothing else to offer. It helped me stay away from substances that truly destroy lives. For that, I am grateful—and I am terrified of losing access to something that has kept me safe. Please do not erase our voices. Please do not punish responsible adults because of misinformation or fear. Regulate kratom—but do not ban the leaf that has helped so many of us survive. My name is Crystal, and thank you for taking the time to read this letter. I recently learned that there is discussion about scheduling natural whole kratom leaf, despite Governor Mike DeWine clearly stating that the concern was with synthetic extracts, not the natural plant. I am writing to ask you—please do not ban natural kratom leaf. Natural

			kratom leaf is not the same as so-called “7-OH” tablets or synthetic products. The amount of 7-hydroxymitragynine produced from natural kratom leaf through human metabolism is extremely small—approximately 0.002%. Kratom leaf contains over 60 alkaloids that work together in balance, much like cannabis does. Banning the whole plant would not only harm patients, but also halt legitimate research, despite more than 20 years of existing study on kratom. What is currently causing harm is a synthetic byproduct, not the plant itself. Unscrupulous chemists have learned how to synthesize 7-hydroxymitragynine into concentrated, dangerous forms that are now being sold over the counter while masquerading as kratom. This is no different than the distinction between willow bark and aspirin—aspirin is a synthesized derivative, not the original plant. No one would confuse the two, and the same distinction must be made here. I am a chronic pain patient and have been disabled since 2020, after my physician abruptly stopped my prescribed pain medication due to the DEA’s overreach beginning in 2017. I suffered severe iatrogenic injuries from alternative, non-FDA-approved treatments—including gabapentin, steroids, and invasive procedures—which left me with type 2 diabetes, tachycardia, high blood pressure, metabolic dysfunction, and bone loss. I was 37 years old when I became fully disabled. Despite extensive imaging and testing that clearly show severe pathology, doctors are now too fearful to prescribe appropriate pain treatment. I passed every drug test, followed every rule, and still was labeled “drug-seeking.” I was even told I would receive pain medication only if I agreed to an invasive implant procedure—something I refused on ethical grounds. As a result, I was cut off completely. I was abandoned by the medical system. No one helped me taper safely. I suffered multiple strokes during withdrawal and was forced to survive using medications identical to what had previously been prescribed—simply to stay alive. That taper lasted nearly two years. By April 2022, I was in such unbearable pain that I contemplated ending my life. It was at that point that someone I trusted mentioned natural kratom leaf—not extracts, not synthetics, but plain powdered leaf prepared as tea. I was terrified to try it. I researched extensively, spoke with others, and intentionally avoided extracts and synthetic products. When I finally tried a small amount of natural kratom leaf, something extraordinary happened: for the first time in years, I stood up and walked without agony. I did not feel high. I did not feel impaired. I felt functional—like myself again. Kratom does not eliminate pain the way opioids do, but it restores dignity and quality of life. It quiets the desperation that untreated pain creates. It gave me back the ability to live. I later tried a synthetic “7-OH” tablet out of curiosity and had a terrifying reaction—panic, fear, and distress. The difference between natural kratom leaf and synthetic 7-OH is night and day. They are not the same, and they should never be treated as such. Alcohol, tobacco, and caffeine—substances far more dangerous—are legally sold everywhere. Alcohol alone is neurotoxic and socially devastating, yet accepted. Meanwhile, kratom leaf continues to save lives quietly, especially for people abandoned by the healthcare system. According to leading kratom toxicologist Dr. Marilyn Huestis, nearly all kratom-related deaths involve polysubstance use, including fentanyl, cocaine, or methamphetamine. Kratom is not the cause—it is present alongside far more lethal substances. Kratom does not

			create intoxication. It does not function like opioids. While it interacts with certain receptors, that does not make it an opioid—just as caffeine affecting adenosine receptors does not make it a narcotic. Please do not punish patients by banning a plant that is helping them survive. Regulate synthetics. Remove dangerous extracts. Protect natural kratom leaf. Without it, I—and many others like me—have nothing left. Respectfully, Crystal

Nelsonville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I don't talk about my using kratom to others because there is such a stigma around it. Much of the reporting on the topic is inaccurate or blatantly false. I can only speak to my own experience, and I speak honestly and frankly. If it weren't for kratom, I wouldn't be here today. Frankly, it saved my life. I'd had a prescription painkiller dependence for the past 10+ years and was tired of it. The day I told my "pain management specialist" that I wanted a medicine I didn't feel dependent upon. I asked him to kindly change my prescription to something that was non-habit-forming but still effective, such as Cymbalta. The doctor discharged me from his care that day. I expressed concerns about stopping regular doses abruptly, as my blood pressure registered 'very high' each of the previous 3 months. They still turned me away - with nothing to help me wean off the oxycodone and morphine he'd been prescribing for my arthritis pain. I was scared. With my high blood pressure, I feared my heart would stop. But then, part of me wanted to die. I had been depressed for years and had just lost my dad, for whom I provided round-the-clock care until he died. I was grieving, and I was scared. Someone close to me suggested kratom as a viable option. I had never heard of it, but was willing to learn more since it was a natural substance. I conducted extensive research on the subject over the next 8 days and decided to try it, at least to help me with any side effects from stopping opioids so abruptly. It not only negated any withdrawal symptoms I was expecting, but it was also effective at alleviating my arthritis pain and helped my mood and daily outlook on life. I was ready and willing to die before I discovered kratom. Unadulterated kratom. My husband is currently being treated for bladder cancer, and as his caregiver, I need to be at my best both physically and emotionally. Kratom enables me to fulfill that role and provide that care. However, if kratom is criminalized in Ohio, as the Board of Pharmacy proposes, then I don't have much hope for my future - or my husband's. I implore you, please reconsider the motion to criminalize mitragynine leaf from consumers like me and countless others who use it safely and responsibly. Thank you for your consideration.
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	This rule would be devastating to so many people including myself. I am an amputee with horrible phantom pain and Kratom is the only thing that works on it. I've been through several different treatments for this and nothing works. I've been taking kratom for several years and have never had any issues with it. It works for so many different things for so many people that it would leave many without anything to help their conditions which would be devastating on so many levels.

Barberton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I understand the ban of synthetic or enhanced Kratom products, but the regular Kratom powder is just Kratom leaves dried out and crushed and ground to a fine powder. It is low in mitragynine and a all natural multipurpose medication. I have been using it for almost two years now and I take a week off, once in awhile, to clear out my system. I cannot take over the counter pain medication, because all I have tried make my stomach bleed after a few days. The Kratom powder gives me a slight mood boost, some energy, and some pain relief. It does not cause any intoxicating effects and always me to be more mobile to get my work done and help my aging mother. Marijuana affects my thinking and I would not be there to help my mother if problems arised, same with alcohol. I stay away from street drugs, and I am not sure if anything else would take care of my pain from my arthritis and atopic dermatitis. I have had multiple heart failures and the use of Kratom powder gives me energy. Thank you for listening and I hope you take my comments into consideration.
Cleveland Heights	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello, I am a resident of Cleveland, Ohio. I sincerely, respectfully implore you to please support SB299, which would protect access to natural, unadulterated kratom leaf; a substance related to the coffee family of plants and that is relied upon by thousands of people who have intractable, chronic pain. In the same way that many Americans drink coffee daily for an energy boost from the caffeine drug, a smaller cohort of Americans use natural kratom leaf tea to give them a "life boost" - meaning, it helps us live a normal life despite our pain conditions. I have multiple chronic pain conditions that make life very hard - a herniated L5/S1 disc which causes daily sciatic nerve pain, as well as a condition called "Chronic Pelvic Pain Syndrome" (CPPS) which causes a laundry list of painful conditions every day, including urinary urgency and frequency, among many others. These conditions make it very difficult to live a "normal" life - I can't sleep comfortably without nerve pain, I can't sit for longer than 20 minutes without nerve pain, I can't exercise without pelvic pain, etc. Taking a low dose of pure, unadulterated kratom leaf tea each day helps keep the pain at bay and enables me live a normal life. In the decade I have used pure kratom, I purchased my own house in Cleveland at the age of 23, got promoted in my career multiple times, and have been able to live a rich life with friendships, hobbies, and community involvement. I could not have done any of this without kratom. Kratom leaf tea is impossible to overdose on - it has a tremendous safety profile. Kratom not only helps people like myself with chronic / intractable pain; it also helps substance addicts to stay away from extremely harmful substances (like alcohol, heroin, and others) which allows them to lead a normal, healthy life as well. A full ban on kratom would be horrific for those of us who are simply trying to live a normal, healthy life. Please, please do not allow natural kratom to be banned in Ohio. The safety and wellbeing of thousands of Ohioans depends on access to this safe, beneficial plant. My most sincere regards, A Cleveland Resident

Medina	Ohio	2 - Oppose - Used to Treat Chronic Pain	I wanted to reach out and tell you how much kratom has helped in my life. I have chronic pain and have been using 9 Tylenol per day along with prescribed percocet. This kratom works better and lasts longer than the two combined. I do not think the use of gas station 7OH is even the same animal as kratom. I do believe there should be restrictions on high 7OH, but kratom from a reputable distributor, along with following recommended doseages should not be banned. The use of tinctures makes dosing easier when you cannot mix the powder. Please consider the people who use kratom responsibly against those who are abusing it for recreation. There is a need for kratom, including tinctures, by those with chronic pain. I would not like to be considered in the same category as a gas station abuser. Thank you for looking into this very important decision, and let's keep supplemental kratom legal please.
Franklin	Ohio	2 - Oppose - Used to Treat Chronic Pain	Small therapeutic doses of kratom is vital in managing my chronic pain. I refuse to struggle with an alternative plan of extremely addictive prescription painkillers or a large daily alcohol intake. By using kratom, i remain extremely clear-minded and coherent during my 50+ hour work week. Please don't take this relief from us.
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use kratom daily to help manage my pain I have ulcerative colitis and Ellers Danlos my joints and back are overly flexible and hurt badly if over extended. Kratom has been perfect to help me live. I spent years on vicodin and prescription pain killers that helped but had me addicted . Kratom ended all of that. The natural powder is all I use. I don't drink or use any other substances.
Centerville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I'm responding to the proposed Kratom ban. I had L4 L5 spinal surgery about 2 years ago. The post op pain was intense and I wanted to avoid opiates. I am a pharmacist with a PharmD degree with a 45 year career in the field mostly hospital based. I procured some natural Kratom capsules and took those when the pain was the worst. The effect was relaxation which really helped with the discomfort until my surgical pain diminished and I experienced no side-effects. I considered Kratom to be a great benefit! I never took pain medications throughout the period!

Maple Heights	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am writing to ask you not ban kratom. My mom, she is 61, has chronic pain due to lupus, arthritis, scoliosis and other health issues. I grew up with my mom on opiates for pain. In 2013 thanks to a veteran friend's recommendation, she found plain leaf kratom. I was 18 by then. I see how much it helps her and without the high from pain meds. I wonder how different things would have been had she found this wonderful plant sooner. My mom takes 1/2 to 3/4 of the plain leaf powder 2-4x day as needed. I myself have used it for toothache pain. That is another way I can tell you the rumors about kratom getting you high are false. Personally I believe the people claiming to get high are using either an strong extracts or using 7oh. I believe that people need to be responsible for their actions. We don't ban alcohol because some people are alcoholics. We don't ban Tylenol even those it kills 400-500 people a year. We are never going to stop certain people from abusing things. Please do not ban plain leaf powder. My mom is one of many adults that utilize plain leaf kratom in Ohio. I am an 83 year old Ohio resident. I am writing to ask that you do not ban kratom by scheduling it. My 86 year old husband sometimes uses it for pain. My daughter, she is 60, uses it for chronic pay. She has health issues which include scoliosis, lupus, rheumatoid arthritis, Sjogren's and herniated discs in her back. I see first hand how much plain leaf kratom helps and it does not make her high. I think those rumor about getting high with kratom is because of that synthesized version of it. My husband would never take something if it made him feel high. Please do not ban this plant in it's raw form. I am 60 and a lifelong Ohio resident. I am writing to ask you not make plain leaf kratom powder a schedule I drug. 7oh should be illegal as it is a synthesized version of a kratom alkaloid. Is is not the natural plant. In 2018 I came to Columbus with over 200 other people to speak out against scheduling kratom. I was one of many that spoke. I have lupus, rheumatoid arthritis, sjogren's, herniated discs in my neck and back, a knee that needs a full replacement and other health issues. I discovered plain leaf kratom powder from a veteran friend in 2013. I had lost my job and my health insurance and could no longer afford to go to the pain clinic. I was suffering greatly and using only ibuprofen which didn't do much and was killing my stomach. A veteran friend of mine recommended I try this plant. The first time I tried kratom leaf powder I was amazed! It helped my pain and it does it without making my brain foggy or high like opioids. I did lots of research and became a advocate for kratom in 2014. I use 3/4 tsp of plain leaf kratom 2-4x day as needed. With this small amount I can function and was able to go back to work. Please don't ban this plant. The last thing I want to do is go back to opiates. Logically it makes no sense to take away a ground leaf that helps pain and doesn't get you high and force people back to opiates. With the crackdown on pain meds having gone so far in the opposite direction, it's almost impossible to get pain relief. Please keep plain leaf kratom legal.

Detroit	Michigan	2 - Oppose - Used to Treat Chronic Pain	As a veteran of this country, I use this medication for slight pain relief. I grow this harmless plant and I've been taking this harmless plant for over 15 years without issue. I have been emailing every time this happens and will continue to email and spread knowledge that this is a harmless plant that helps millions of people's lives in this country and doesn't need to be tampered with nor banished not made a felony considering its literally from the coffee tree family!! You couldn't even hurt yourself taking it even if you wanted to. It might help the future generations of people to where we can spread knowledge and continue the natural symbiotic healthy safe relationships we have with the earth and plants. I also think the Cleveland clinic and the Ohio Board of pharmacy Don't need to worry about all the money coming in for all your Q1-4 profits because you guys have a monopoly and it all already and you don't need to touch mother nature.
Hamilton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a retired veteran and use natural kratom for pain relief if you pull these item's from stores it would force me to use opioids for pain relief something I would not choose to do,all the talk about addiction to opioids scares me ,I would rather use something natural.also I believe it helps to control my diabetes by lowering my sugars.
Sandusky	Ohio	2 - Oppose - Used to Treat Chronic Pain	I do not think that the natural form of Kratom should be banned. I have been using it for 10 years and have not become addicted, have not increased my dose, and have no side effects. It is of great value to me for my chronic pain and is resonsible for me not taking any opioid pain medicine. Please by all means ban 7oh but not natural gound leaf Kratom.
Toledo	Ohio	2 - Oppose - Used to Treat Chronic Pain	Synthetic kratom should absolutely be illegal, but thousands of people, including me, use natural kratom daily and it only helps. It's had no effect on my blood tests or health other than it helps relieve chronic pain without making me loopy or in danger of OD'ing
Toledo	Ohio	2 - Oppose - Used to Treat Chronic Pain	Being a Marine Vet with 2 Tours under his belt and having 3 spinal surgeries with enough metal put into my spine to build a car, it is easy for me to say I am in a lot of pain daily expecially in the winter when it is cold. I take 2 tablespoons of Kratom 3 times a day. It doesn't make me high, it doesn't make me " want to commit suicide" , but what it does do is take away most of the crazy pain daily. It helps me function fully during the day and helps me sleep better at night when the pain is in full force. So making Kratom illegal in Ohio would affect many people like myself who were able to get off synthetic drugs such as Tramadol , OXY and many other addicting drugs. Kratom is not addicting , however it does stop the pain just like the synthetic drugs without all the nasty side effects and issue. Making Kratom illegal would just make all the people who use it daily for pain, anxiety , nerve issues go back onto the shit synthetic drugs which would cause addictions and issues…. KEEP KRATOM LEGAL! Understand Kratom isn't a "evil drug" like some try to make it sound out to be.

Strongsville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I wanted to write a few words on the process of rule changes for Kratom that are being proposed in the state of Ohio. I have been taking the Herb Kratom for over 10 years. I come with a sloth of back issues that started in 2003. I injured my back that required surgery, my first in 2005. I was given opiates to cover up my pain for years which I became addicted to. I had my second fusion in 2014. Again, given more RX opiates for pain. In 2016, I quit taking opiates as my addiction caused so much loss in my life and I wanted to live. Kratom, along with meditation and other tactics helped me, personally to live the life I have now. I had my third fusion in 2023 where I ended up with MERSA and required another surgery a year later to add to my fusion. Kratom helped through the process of pain. I am proud to say that I take Kratom here and there for my needs. It would be devastating if it was scheduled under Heroine or even Fentanyl. Please take into consideration my facts and my life that utilizing Kratom has helped me. Thank you.
Wadsworth	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom is used as a natural pain reliever. It helps aid opiate withdrawal and deal with the pain over addiction. Others use it as a natural prework before hitting the gym. A natural sleep aid.
Defiance	Ohio	2 - Oppose - Used to Treat Chronic Pain	Once again I'm forced to comment to the pharmacy board regarding my continued use of kratom. For many years now I have been a functioning productive member of society only because of my use of kratom. When the medical community failed me I was forced to seek alternatives for my chronic back and joint pain and the only relief in 20 years has been my daily use of kratom. I work full time 50 to 70 hours weekly and am afraid if kratom is banned I will no longer be able to work. I am not against regulating kratom especially when it comes to dangerous synthetics and mixed drug products but please don't restrict or ban the use of this herb that has been a live changer for myself and many other Ohioans.
Lorain	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have chronic severe back pain and Kratos really helps to decrease it. >t has been non addicting and I don't want to take addicting pain meds
Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	This kratom saved my husband life. It helps with his chronic back pain that he had for over 25 years. He was able to get off of pain killer pills which is what the Dr wanted. Without Kratom he would not be able to do day to day activities including working. So please this is a life changer for many including my family!!

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I do not support Kratom being scheduled and or banned in Ohio. I have used it on and off for years with no ill effects. Please regulate it according to the KCPA (Kratom consumer protection act) that other states have adopted. An outright ban is a step backward for Ohio. With appropriate education and transparency, kratom can be used in a responsible manner. However, customers must be informed that kratom is habit-forming and that regular use carries serious risks. Unfortunately, many kratom bars in Ohio are failing to provide this education and are instead enabling addiction. In some cases, kratom is being sold without state approval and misleadingly labeled as a “nootropic.” Another ridiculous law, to ban things that help people. Please let Ohioans choose. I have been in chronic back pain for 26 years I was on fentanyl patches for 14 years and the doctor made me get off of I was on the verge of putting a gun to my head and then I found kratom if it wasn’t for kratom I wouldn’t be here please don’t make kratom illegal I am 61 years old thank you for listening to me I am 61 and I live in chronic Pain I was on fentanyl patches for 14 years and then in 2017 the doctor we’re taking it away from people and told me there was nothing to do I was dying in pain and was very close to ending it and I found kratom it helps with the pain and I could at least got around please don’t take this away to. Plus it is not addicting . Thank you for listening to me there is a lot of people that need this.
Youngstown	Ohio	2 - Oppose - Used to Treat Chronic Pain	I’ve been using Kratom products since 2014. Just a small amount helps me to focus and helps with any aches and pains that I have. With drug addiction running in my family, I am scared to take any kind of medication, so finding Kratom was a blessing. My son passed away in 2016, and I do believe it has also helped me with my depression. I have no side effects or any issues. I do have bloodwork done yearly due to my age, and I’m perfectly healthy! Please don’t take Kratom away. I do think it could help a huge amount of people who need something over the counter that’s not addictive or harmful like drugs. Thank you
Youngstown	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 50 year old carpenter and resident of Ohio that has been a consumer of natural kratom for over a decade with no adverse effects. I have arthritis in my hands and knees. It helps with the pain immensely. I can’t take NSAIDs daily. I rely on this to allow me to function normally. I just ask that you take a common sense approach to this and explore age restrictions and regulation as opposed to an outright ban. A lot of good, hardworking people will be negatively affected by an outright ban, and I feel that history has shown that bans aren’t always effective. For a lot of us this is the only natural daily option for pain management. Please don’t take it away from us. Thank you for your time.

Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please do not make natural kratom products illegal in Ohio. I urge you to follow suit with the federal stance. I use it to manage back pain and know many others who benefit in a plethora of ways from this long used herbal remedy. I understand the desire to prohibit unregulated synthetics but please not criminalize the natural leaf products. There are many wonderful uses for natural kratom products that allow individuals to avoid heavy pharmaceuticals and the side effects that those cause.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Public Comment – Ohio Board of Pharmacy I am an Ohio resident writing in opposition to the proposed ban on all Natural Kratom products. I am asking you respectfully and urgently to consider regulation, not prohibition, and to clearly distinguish Natural Kratom leaf from dangerous synthetic 7-OH products. Here is my story! I was born with a vascular malformation in my left thigh. I did not receive an accurate diagnosis until years after my symptoms began. When I was around eight or nine years old, I fell off my bike at my grandmother's house. The next day, my leg had swollen so badly that I could not walk. My stepfather had to carry me down the stairs and into the car to take me to the emergency room. At the time, doctors assumed it was a swollen knee. I was told to ice it and rest. It took weeks to heal. That episode was not an isolated incident. Every month or so, I would wake up unable to walk. I was terrified and confused. Eventually, I was sent to an orthopedic surgeon who based only on an X-ray told me I had excess cartilage in my left knee. So then I underwent arthroscopic knee surgery. It took months to recover from the surgery I never needed, because it was never the real problem. For years afterward, I lived in a revolving door of emergency rooms, having to use crutches and wheelchairs, and still unanswered questions. I was repeatedly dismissed until I was finally referred to another specialist who ordered an MRI. That test changed everything. I was then diagnosed with a vascular malformation in my left thigh. I was told, bluntly, that there was nothing that could be done. Surgery was not an option because it would grow back, and removing enough tissue to stop it would leave me with a useless leg. I was in sixth grade when I learned this was my reality. From that point forward, my life was defined by unpredictable, debilitating pain. Every few months, my leg would flare up, and I would be unable to walk for days at a time. I would recover briefly, only for it to return again. In high school, I walked with a cane. I remember the stares. I remember the fear of not knowing when my body would fail me again. I spent my life searching for something, anything that would allow me to break this cycle and function like a normal human being. After years of medical dead ends, I researched herbal supplements on my own and learned about natural kratom leaf. I cautiously purchased a small amount and educated myself on its use. That decision changed my life. Because of kratom, I can walk. I can run. I can exercise. I can sleep through the night without waking up screaming in pain. I no longer need someone to carry me to the car or rush me to the emergency room. I can care for myself, my household, and my children. I can work. I can live. I have used natural kratom responsibly for seven years. It has not destroyed my life but has given it back to me. Without it, I genuinely believe I would have faced amputation by now. I could not endure the pain, the endless testing, or the hopelessness any longer. I am not a criminal. I am not addicted. I am not irresponsible. I am a law-abiding Ohio

			resident, a parent, and a working professional. I take care of my children, who attend good schools. I hold a steady job. I am not “high,” unemployed, or living on the streets. Kratom has never impaired my ability to function but it has enabled it. I understand there are dangerous synthetic products on the market. I am just as angry about them as you are. But banning natural, lab-tested kratom leaf alongside synthetic 7-OH products is not science, it is fear-based policymaking. Even the FDA has acknowledged the difference. Governor DeWine’s own emergency order recognized that distinction. Ignoring it now will not protect Ohioans, it will harm them. If kratom is banned, people like me will not magically stop experiencing pain. We will suffer silently, turn to far more dangerous alternatives, or lose the ability to function altogether. Some of us may lose our livelihoods. Some of us may lose our independence. Most of us will lose hope. Please do not take away the one thing that has allowed me to live a full, productive, and dignified life. I am not asking for sympathy. I am asking for understanding, compassion, and an evidence based policy. Do not criminalize survival. Respectfully, A concerned Ohio resident
Zanesville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have used kratom and its compounds for years safely and its effectiveness have helped me in so many ways. After surgery it was safer and more effective in pain relief than the medicine the dr was trying to prescribe. Don’t take this away.

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using Kratom for pain control and it truly helps keep my pain in control. I don't want to use medication that has worse side affects. My quality of life has improved tremendously. I care for a relative and I am older and pain comes with the territory, I do as much as I can to make the person be ok and not suffer because of my efforts. My life would be very difficult if unable to use it.
Youngstown	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use a small amount of natural plant Kratom for chronic pain of fibromyalgia and back pain due to scoliosis. It is the only thing that helps me. I would be at a loss without out it. Thank you.
Bucyrus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using Kratom products, including 7OH, daily for over 15 years and it has only made my life better by eliminating the pain that I had from arthritis and that I was unable to function without opioid pain medication. I found kratom and have not needed or used opioids for the entire 15 years. Kratom gives me the get up and go boost in the morning to get my day going and uplifts my mood for the day. It is absolutely an amazing plant that is essential in my daily life and I would not be able to live a normal life without it. Please do not put a ban on this lifesaving product that myself and millions of others need to continue living day to day.
Euclid	Ohio	2 - Oppose - Used to Treat Chronic Pain	I ruptured a disc in my lower back in 2014 (age 43) and I've been using Kratom to ease the pain from the resulting nerve damage & arthritis. OTC pain relievers don't touch the pain, at all. The only other option is to take an antidepressant, which I refuse to do aa it rewires your brain (my husband has a negative personal story about that.) At the end of August 2023, I was diagnosed with Endometrial Cancer. I had some minor cramp-like pain for a few weeks that went away with Ibuprofen or Aleve. It wasn't until the week before surgery when I had to stop taking it that I realized Kratom was actually lessening the cancer pain. So, unfortunately, I had to be on opioids for the week, which didn't help at all; they just blocked me up and made the 3 days after surgery a constipated nightmare. I've now had 2 tumors attack my colon and I'm facing a resection in a week and a half, so I REALLY can't be constipated by opiates. Please help people with chronic pain have access to safe, unadulterated Kratom. There is no way to overdose, no "high" gotten from it and it honestly does more good than harm (the worst "side effect" I've experienced is an upset stomach after accidentally taking too much.) I would also suggest having the FDA study it instead of blaming it for random deaths. Scheduling it is going to make a lot of people suffer, including us. I have Rheumatoid Arthritis & tendonosis that's spread throughout my whole body. 10 years ago I was on a dead end street taking more and more painkillers as they became more and more ineffective in treating my crippling pain. At one point I was on Fentanyl patches that would dose at inappropriate times and cause severe withdrawals when they ran out of medicine. Then I found Kratom - it helped me get off all of the pain meds and has given my life back without the side effects, withdrawals, and NO chance of overdosing. My older brother suffered from the same disorders and was heavily addicted to prescription drugs, and died in March 2018 at age 59 of an oxycontin overdose.

			Please follow the science - this plant is safely helping so many people and I wish I could've convinced my brother to use it because he'd still be here today. I miss him.
Euclid	Ohio	2 - Oppose - Used to Treat Chronic Pain	This is a natural pain reliever that is better than pharmaceutical drugs. Removing it would only hurt Ohioans.
Miamisburg	Ohio	2 - Oppose - Used to Treat Chronic Pain	Natural leaf Kratom has been a blessing to my wife, who has Fibromyalgia. She has tried synthetic and pharmaceutical options to little effect. Kratom has been extremely effective for her pain and mental fibro fog without being addictive. Please keep it legal and regulate it. Thank you.
Berea	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has had an extremely positive influence on my quality of life. The use of this natural plant has helped ease my anxiety and pain from a lower back injury. Taking away this option would have a devastating effect as I do not want to take pills for relief. I also know many others who use kratom for pain relief and as a way to avoid opiates. The propaganda around kratom is incorrect and lacks unbiased research.
South Euclid	Ohio	2 - Oppose - Used to Treat Chronic Pain	I was born with my hip bones deformed. I have had multiple surgeries to try to fix the issue and the pain. My doctors cannot give me a constant string of opiates and Tylenol/ibuprofen does nothing. Kratom is natural and helps reduce

			my pain so I can continue to have a normal life raising my children. If I were not able to take kratom for the issue, I would either be dibilitated by pain or forced to take opiates.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	My mother takes MIT for her severe arthritis and kidney disease. She is often is severe pain, but her insurance does not cover the pain medicine she needs. She's not an addict, she's a suffering old woman who needs medicine and the system is failing, you all are failing her. We didn't vote for this, we didn't ask for this, we didn't want this. You want to do something about the drug problem? Go get this damn Fentanyl off the streets. Get your priorities straight.
Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have chronic daily migraines with double aneurysms. I also suffer from chronic back pain and have a titanium plate in my lower back. I was in 750 MG. Vics. 3 x a day and was needing more. I stopped taking them because I was afraid of what was happening. I now use kratom 3 -4 times a week and it really helps I work full time between 50 to 60 hours a week and with out kratom I will have to go back to pain pills.
Lexington	Ohio	2 - Oppose - Used to Treat Chronic Pain	I've been using Kratom since about 2015 for chronic back pain when the FDA changed prescription laws on tramadol which I was prescribed for every six hours as needed, but could only get 30 tablets a month. You do the math. I don't know anyone that has become addicted, and if this passes, many people will probably be going to the black market.
Wapakoneta	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please reconsider, Kratom is used for pain for millions of Americans that don't want to use opioids for pain management. Without Kratom you are saying to the American people that you don't care about them or their pain! This is wrong and unethical and Ungodly like! The American people have spoken!
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I urge the Board to keep unadulterated kratom available to adults. I have used powdered kratom to help control neuropathic pain, as needed, since 2018. I was previously prescribed opioid medication, which I took for 8 years, and which caused hyperalgesia. I have had no negative effects from kratom use. I have not developed a tolerance or suffered impairment. I do agree with many that adulterated products which can include kratom do cause harm. My understanding of the science is that unadulterated kratom products, which I use, do not cause the harm that combination products can. My quality of life has improved significantly with the help of kratom, and I pray the board will recommend that unadulterated kratom products remain available to those in need.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello, I have been taking kratom for the past 7 years due to back pain from an uninsured motorist rear-ending my car. I am asking you to keep Kratom legal, as it has greatly improved my quality of life. It is a safe alternative to opiates which can lead to dependency. If you're going to ban something, ban 7-OH. There is a clear difference between that and actual kratom though. Do the right thing, I know there are others in my situation with permanent back damage who rely on this to improve their quality of life. Keep Kratom legal please, Brian McClanahan Columbus resident

Detroit	Michigan	2 - Oppose - Used to Treat Chronic Pain	I would please ask that you don't move forward on the proposed rule and show the truth about kratom and all of the alkaloids in the plant. I'm in 11/10 pain every single day and every second that I'm awake and instead of taking the opioid pain medication I'm prescribed (oxycodone & morphine) I use kratom and their extracts instead of the meds. It is safer and way better on my body! My liver enzymes were terrible on the pain pills. Now because of using kratom, they've retuned to baseline. There is no risk of overdose using kratom or any of the kratom alkaloids on their own. Please do research and look at the MULTIPLE studies over the years please! I'm begging you! If access to this plant is revoked than me and many others will have to seek relief on the streets where the majority of pills are pressed with fentanyl. Overdoses will be guaranteed and so many innocent people suffering will end up dead ultimately.
Detroit	Michigan	2 - Oppose - Used to Treat Chronic Pain	For recovering drug addicts and people with disabilities that cause severe pain, Kratom saves lives. I take this miracle substance for chronic pain due to previous pelvis fractures, osteoarthritis, degenerating discs in my cervical, thoracic, and lumbar spine, and multiple other chronic injuries from major car accidents. Restricting the use and access of Mitragynine would be a abhorrent disservice to the people of Ohio whose lives are greatly improved from the availability of this natural medication. Overdoses rarely, if ever, occur while taking Kratom alone. Before you pass this legislation, ask yourself - Would you rather all these former addicts go back to the streets to find illegal drugs or highly addictive pain meds such as Fentanyl or OxyContin?
Indianapolis	Indiana	2 - Oppose - Used to Treat Chronic Pain	Recovering chronic pain patient who spent years on dr prescribed MS Contin, then my dr wanted to titrate me down from 150 mg per day and eventually left the practice. So I went to a suboxone dr to manage the PAWS. He also weaned me off not wanting to use it as pain management. After 3 months of PAWS from suboxone, I discovered Kratom leaf. It felt as if my world went from black n white to full color! My energy was back and felt my pain get back to a manageable level. This was 2 years ago and it has enhanced every aspect of my life, including thousands of more Americans. Please consider where Kratom users would end up by banning a substance that has given many a manageable existence with very few side effects.

Detroit	Michigan	2 - Oppose - Used to Treat Chronic Pain	Kraton when used responsibly in it natural form can be a life saver for many like myself. It's something that helps me with pain and keeps me functional at work, without making me impaired like pain medication, or even medical marijuana does. I feel that putting a ban on this will have several negative effects on our society. I think that creating guidelines and labeling requirements for kratom products would be a much better way to go about regulating it. I work in health care as a nurse and am on my feet for 12+ hours a day and kratom is the only thing I have found that helps with my pain but doesn't mean me feel "out of it." I think that if alcoholic beverages are available for purchase as long as it has the correct labeling and information listed on it, then kratom shouldn't be any different. Especially when alcohol impairs you on a much higher level. Same with medical and recreational marijuana, these things are for sale to people over the age of 21, which I think is what should happen with Kratom, it needs to be regulated, not banned entirely. Medical science has proven that kratom can be very helpful for people suffering from a range of things like pain, insomnia, and anxiety, taking it away completely is punishing people, like myself who are over the age of 21 and are using it to help themselves with problems using something entirely natural and not having to resort to taking opioid pain medication or other prescription medications. When the world health organization looked at criminalizing natural kratom on a world wide scale, they took the time to review the actual medical science behind kratom and made an informed decision and decided that kratom did not need to be banned at a world wide level. I think that banning kratom will have more a much more negative effect on our society than positive, and it is taking away something that is currently helping thousands of Ohioans and people across the US. Please do the research so the government can see the good things that kratom is doing when being used responsibly, and consider making regulations and age requirements for purchasing it rather than banning it all together.
Detroit	Michigan	2 - Oppose - Used to Treat Chronic Pain	As a consumer of kratom to help treat my chronic and an avid traveler through Ohio, I'm asking you to please consider an adult age restriction on safe kratom products vs. a ban. People have been supplementing with kratom for almost 20 years and it's had an impressive safety profile. I hope the state of Ohio can come to a sensible decision and not prevent adult consumers of this herbal supplement. As it'd would also have the negative impact of making some of its citizens criminals. Thank you
Detroit	Michigan	2 - Oppose - Used to Treat Chronic Pain	Have been using kratom for several years off and on. I like a morning tea,with it, for a pick me up instead of caffeine. Coffee leaves me with jitters. Also, instead of Tylenol or ibuprofen, it has a mild pain relieving effect without any side effects. As a registered voter and a citizen who believes in freedom I'll be watching this one. As usual the pharmesutical companies are probably fighting against kratom because it's all natural and cutting into their profits.

Detroit	Michigan	2 - Oppose - Used to Treat Chronic Pain	I am a disabled veteran cancer patient and I choose to naturally use Kratom safely for my pain and Ptsd! I was on my death bed on pain meds and since I started using natural plant supplements my life is livable again! I vote to keep Kratom legal bc its is more helpful than not! Let's do things to support our community naturally. Its helps 100x as many people and honestly no one is being harmed from kratom. People can overdose on anything, that doesn't mean you should punish the smart ones that dont recklessly behave. I think you would be hurting more people with the ban than helping anyone with the ban. Let's do the right thing and let people take care of themselves using what God put here to do just that.
Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I have been using kratom for about 2 years now. I am almost 50yrs old and was forced off of my pain medication due to my Dr's office being shut down without warning. I was left untreated and to be honest I was ready to take my own life. Then I found kratom. It was a life changer,it gave me back my life. It doesn't fix my pain but at least it helps me to be able to get a shower, go the grocery store and get out of bed. Without kratom I wouldn't be here today. If that doesn't mean something I don't know what does.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I ask the board to reconsider the ban on natural kratom. I have stage 3 hidradenitis suppurativa and have found that kratom is more effective at fighting the pain while being less addictive. I have been prescribed painkillers in the past, such as hydrocodone, and the effects of kratom are nowhere near that of taking an actual painkiller. I have had no medical problems from taking it. Regulating kratom to ensure it's safe and only sold to adults is the answer this ban is not.
Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	I wanted tell my story regarding natural kratom. This plant has changed my life in ways I never imagined. Before I discovered it, every day felt like a battle chronic pain, fatigue. Life was a constant struggle, and I often felt hopeless. Natural kratom has given me relief and allowed me to function again. It has allowed me to get out of bed, care for my family.have a good career.. It has not made me reckless or dependent; it has given me dignity, stability, and hope. It has made life livable and meaningful once again. I know I am not alone. There are countless adults, parents, and hardworking individuals who rely on natural kratom responsibly to improve their quality of life. These are people who want to stay healthy, avoid dangerous substances, and live productive lives. Criminalizing or banning kratom would not protect anyone it would only take away a safe option that countless people rely on. I am asking you to listen with compassion. Please consider the human impact of banning natural kratom. Please protect the lives of people who use it responsibly and safely. This is not about politics or ideology; this is about real people, real struggles, and the simple right to live with relief and dignity. Protect natural kratom

Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	Raw kratom leaf powder has helped many including myself. Treat my neuropathy pain, high blood pressure, and pelvic dis function disorder pain. It has proven medicinal purposes without some of the harsh and dangerous side effects. As other prescribed treatment options that I had been given . I believe it was once said that marijuana had no medicinal use either. While it was being prescribed by doctors. Actively to cancer patients undergoing chemotherapy. Here we are years later and now it's legalized and acknowledged for it's medicinal purposes. Please don't criminalize those of us whom seek different treatment options.
Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	natural kratom has been essential to my health, my ability to work, and my ability to provide for my family. Several years ago, I was involved in a serious car accident that left me with chronic pain. Because of the nature of my job…working with heavy machinery I cannot take prescription pain medications. Doing so would risk my safety and the safety of others, and could cause me to lose my job. Without my job, I could not support my child. Natural Kratom is the only option that allows me to live, work, and care for my family safely. If natural kratom were made illegal, I would not be able to work due to pain, jeopardizing everything I have worked for. My child depends on me, and my family's well-being depends on my ability to function. This is not hypothetical this is my reality. Banning kratom would have an unnecessarily negative impact on my life and the lives of countless Ohioans who rely on this safe, natural plant for pain management, energy, and well-being. I question the motives behind these actions. Why punish responsible adults trying to care for themselves and their families when the plant is overwhelmingly safe? I urge you to consider the human consequences of this decision. I am not asking for a handout or special treatment. I am asking to continue using a safe, natural option that allows me to be a productive worker and a loving father. Please do not make responsible Ohioans choose between their health, their jobs, and their families. Support Ohio businesses and natural kratom I want to be very clear: banning kratom is not about safety. It is about fear, misinformation, and the corruption of those who benefit from keeping Americans dependent on prescription pharmaceuticals. The same people who profit from addictive, dangerous drugs are often behind the push to criminalize a safe, natural alternative. That is not public health—that is greed, plain and simple. Kratom has allowed me and countless others in marginalized communities, including the LGBT community, to live without the constant pain, anxiety, and stigma that comes from relying on pharmaceuticals or being judged for seeking alternatives. It is life-changing, safe, and natural when used responsibly. And yet, there are those who would take it away, leaving us to struggle with expensive prescriptions, untreated conditions, or dangerous black-market products. A ban on natural kratom hurts the people who need it most. It hurts those of us already navigating discrimination, health inequities, and social stigma. It punishes people for making responsible choices for their own health. And it does so for no reason other than fear and corporate profit. I urge you to think about who is most affected by these policies. Think about the lives, the health, the mental well-being, and the

			dignity of those who rely on kratom to function. Banning this plant does not protect people it endangers them. The solution is education, quality standards, and access, not prohibition. Protect safe, natural kratom. Protect the most vulnerable. Protect the freedom of every American to make informed, responsible choices about their own bodies.keep kratom legal as a grandmother, a lifelong Ohioan, and someone who is deeply troubled by the fear-based push to ban natural kratom. I have watched this debate unfold, and what I see is not concern for public safety but misinformation, exaggeration, and decisions that will only hurt Ohio families. Natural kratom is not the monster it is being made out to be. It is a plant that many responsible adults use safely for pain relief, energy, and quality of life. People like me 76 year old grandmothers, parents, retire nurse we are not criminals. We are not reckless. We are simply trying to live without constant pain and without relying on dangerous or expensive prescription drugs. What frightens me most is how much fear and misinformation are driving this discussion. There is no new evidence justifying a ban, yet there is a rush to punish everyday Ohioans. That is not leadership. That is not compassion. And frankly, it raises serious concerns about whose interests are really being served. When safe, natural options are attacked while harmful alternatives remain legal, it feels corrupt and deeply wrong. Banning kratom will not protect people it will hurt them. It will take away a tool many use responsibly, push others toward unsafe black-market products, and cause unnecessary stress and suffering for families across Ohio. As a grandmother, I cannot stay silent while policies are proposed that would harm my children, my grandchildren, and my neighbors. I urge you to step back from fear-based decisions and listen to the people who will be affected. Education, regulation, and honesty protect Ohioans. Prohibition does not. Please do the right thing and keep natural kratom legal. “kratom deaths” are cited as a reason to ban it outright. Let’s be clear…every verified kratom-related death involves poly-substance use. That means kratom was not the sole cause of death; other drugs, often far more dangerous, were involved. To make sound policy, we need complete toxicology reports and careful analysis, not fear-based assumptions. Much of the research that fueled earlier concerns about kratom is outdated and flawed. Older studies were limited, poorly controlled, and often did not distinguish between pure kratom and adulterated products. Nothing in recent, rigorous science has changed the safety profile of kratom when used responsibly. In fact, in 2025, the University of Florida published one of the most comprehensive studies to date, confirming that kratom is safe when properly sourced and used responsibly. We must stop repeating the mistakes of the past. Policies must be evidence-based, not driven by fear or anecdotes. Banning kratom will not prevent deaths; it will push users toward unregulated, dangerous black-market products sometimes laced with fentanyl or other opioids and putting lives at genuine risk. Instead of prohibition, we should focus on education, lab-testing, and quality control. These measures

			protect consumers, support responsible vendors, and ensure that kratom remains a safe option for millions of Americans seeking relief from chronic pain, anxiety, or other conditions. consider the facts: kratom alone is not lethal, deaths cited are poly-drug cases, and modern science supports its safety. Let's make decisions based on evidence, not outdated fear, and ensure that Americans can continue to access a safe, natural alternative responsibly. Your goal to sell more drugs and we see through your attempts and stop you. State lawmarkers wanted to regulate. Instead unelected board of bureaucrats from big Pharma hurts people actually really sad. All of you will be removed once the new governor takes office in January. Old lady worrying about how she won't be able to treat pain so sad you put them through it. We want responsibility with accountability. With black market you total lose that. Ohioans are reeling as the state board considers banning natural kratom, a safe, natural plant used by thousands for pain relief, mental wellness, and harm reduction. What's most troubling is the growing suspicion that this move isn't about public health at all—it's about protecting the profits of big pharmaceutical companies. Natural Kratom has been used responsibly for decades. Lab-tested, natural kratom is overwhelmingly safe, far less addictive than prescription opioids, and helps people avoid more dangerous substances. Yet, instead of promoting education, regulation, and quality standards, board members appear poised to strip citizens of access to this plant, despite no new evidence of danger. It's hard not to question the motives. The same board members pushing for prohibition have close ties to industries that profit when Americans are forced to rely on expensive, addictive pharmaceuticals. By banning kratom, they are creating artificial demand for drugs that make pharmaceutical companies billions, while ordinary Ohioans suffer. This is not just about business it's about people's lives. Small business owners, chronic pain sufferers, and veterans rely on safe, natural kratom every day. A ban would force them to the black market, exposing them to untested, dangerous products, and punishing responsible citizens who follow the rules. Ohioans deserve leaders who prioritize health and safety, not corporate profit. Natural kratom should stay legal, with proper education and lab-testing standards, so that citizens can make informed choices without fear of punishment. Allowing corruption to drive policy only hurts people, ruins livelihoods, and undermines public trust. The message is clear: the board must put Ohioans first, protect natural kratom, and stop letting corporate interests dictate the health of the people they are supposed to serve. All of you will be removed when a new governor gets into office we will not forget your move to hurt Ohioans keep natural kratom legal Ohio's prisons are already overflowing, a tragic result of decades of failed drug war policies. How can you justify adding more people to the criminal justice system simply for seeking safe, natural pain relief?Kratom is used responsibly by hardworking Ohioans who need relief from chronic pain, fatigue, or mental health struggles. Many of these individuals cannot afford insurance or expensive prescription medications. Yet under a ban, ordinary citizens

			who use kratom responsibly could suddenly become criminals and felons, facing fines, arrest, or imprisonment—not for harming anyone, but simply for trying to stay out of pain. This is heartless, unjust, and completely unnecessary. The war on drugs has already ruined countless lives. It has imprisoned people for nonviolent actions, destroyed families, and wasted billions of taxpayer dollars. Why would anyone continue this failed approach by punishing people who are seeking relief from suffering with a safe, natural plant? Banning kratom doesn't make anyone safer; it only forces people toward black-market products, creates criminal records, and burdens our already overpopulated prisons. This is about real people, families, and communities. Hardworking Ohioans who use natural kratom responsibly deserve access, not punishment. They deserve compassion, education, and safety… not a law that will criminalize their health choices and ruin lives. I urge you to reject any ban on kratom. Protect public health, support responsible use, and stop criminalizing ordinary citizens. The solution is education, regulation, and access to lab-tested, natural kratom not repeating the mistakes of the failed drug war. Keep natural kratom legal

Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a poor, disabled person living with chronic pain. I don't have money. I don't have reliable transportation. I don't have the luxury of seeing a doctor every time my body breaks down a little more. Without kratom, I don't really have a life. That's not an exaggeration. That's my reality. Going to the doctor costs money I don't have. Appointments take weeks or months. Even when I manage to get there, I'm often treated like a problem instead of a person—rushed, doubted, or told to "try to live with it." Pain medication is either denied outright or dangled behind rules I can't realistically meet when you're disabled and struggling just to get through the day. Kratom is the one thing that helps me function. It helps me get out of bed. It helps me move. It helps quiet the pain enough that I can think, exist, and feel human. Without it, my world shrinks to four walls and constant pain. I can't work. I can't socialize. I can't participate in life in any meaningful way. I don't go places. I don't see people. I just endure. People talk about kratom like it's a moral failure or a threat, but for me it's harm reduction. It's survival. It's the difference between existing in pain and having some small sense of normalcy.I am not asking for sympathy. I am asking to be seen. When policies are made without considering people like me, the result isn't safety—it's isolation and suffering. Taking away kratom doesn't magically give me access to doctors, money, or better options. It just takes away the one tool I have left. I don't have a safety net. I don't have backup plans. I don't have another option waiting. I have kratom—and without it, I have nothing but pain and a life that feels barely livable. That's the truth. Whether anyone wants to hear it or not. Keep kratom legal I am a Vietnam War veteran, and I am writing this letter out of anger, frustration, and deep disappointment. You are an unelected board, yet you are making decisions that directly affect my ability—and the ability of countless other veterans—to manage pain and survive day to day. You do not live my life. You did not carry the weight of war home in your body or your mind. Yet you hold the power to take away one of the few things that has helped me function without destroying what little stability I have left. Kratom is a natural plant. I am not asking for special treatment. I am asking for common sense. For me, kratom has been a safer, more manageable alternative to prescription pain medication. I am not abusing it. I am not getting "high." I am trying to live with chronic pain and trauma without being chained to pills that are nearly impossible to obtain—especially if you are poor, disabled, or homeless. Let me be very clear about something you may not understand from behind a desk: Once a veteran loses access to pain medication, getting it back is nearly impossible. If you are homeless, it is worse. No permanent address. No reliable transportation. Missed appointments. Suspicion instead of support. Doors close fast. When you take away kratom, you are not "protecting" people like me. You are pushing us toward suffering, withdrawal, desperation, or the street. You are creating harm while claiming to prevent it. I fought for this country. I watched friends die for it. I did not do that so an unelected board could ignore the voices of veterans and working people who are telling you—clearly—that kratom helps them survive. You want to talk about safety? Listen to the people actually living with pain. Listen to

			veterans who already feel discarded by the system they served. I am angry because this did not have to be this way. I am angry because you are not accountable to the people you are hurting. And I am angry because once again, veterans are paying the price for decisions made without us. You still have time to choose compassion over control. I hope you do Why So Many People Find Kratom Helpful (And Why It Deserves a Fair Conversation) Let's be honest: life is a lot sometimes. Pain that lingers longer than it should. Anxiety that hums in the background. Long workdays that drain you before dinner even hits the table. Most of us are just trying to feel okay enough to show up for our lives—and for many people, kratom has become part of how they do that. Yet mention kratom out loud and the reactions can be… intense. Eye rolls. Warnings. Snap judgments from people who've never tried it or only heard scary headlines. That's exactly why kratom deserves a more grounded, human conversation. Because for a lot of real people, kratom isn't some reckless vice—it's a tool. A Plant, Not a Party Drug First things first: kratom isn't about "getting messed up." Most people who use it aren't chasing a high. They're chasing relief. Kratom comes from a plant that's been used traditionally for generations in Southeast Asia, especially by workers who needed help managing fatigue, discomfort, and long physical days. That context matters. This isn't some lab-created shortcut—it's a leaf that people have turned to when modern solutions didn't quite fit. In smaller, responsible amounts, many users describe kratom as helping them feel: More comfortable in their bodies Calmer without feeling numb More focused, not wired More like themselves again That last one is key. When "Normal" Medications Don't Feel So Normal Plenty of people discover kratom after exhausting other options. Prescription pain meds that feel too strong. Anxiety treatments that flatten emotions. Coffee that spikes the nerves. Alcohol that "helps" in the moment but steals from tomorrow. Kratom, for some, lands in that middle ground—subtle, grounding, and manageable. It doesn't necessarily erase problems, but it can turn the volume down enough to get through the day without feeling hijacked by discomfort or stress. And for people who feel unheard or dismissed by traditional systems, that sense of control matters. It's Not Perfect—and That's Part of the Point Here's the thing people don't say enough: kratom isn't magic. And pretending it is doesn't help anyone. Like anything that affects mood or the body, it deserves respect. Overuse can cause problems. Not everyone reacts the same way. It's not for everyone—and that's okay. But acknowledging risks doesn't cancel out benefits. We manage that balance with coffee, alcohol, prescription meds, and even sugar. Kratom shouldn't be held to an impossible standard just because it's misunderstood. Responsible adults are capable of making informed choices—especially when they're given honest information instead of fear-based narratives. Why the Conversation Matters At the end of the day, kratom isn't about politics or panic. It's about people trying to function, heal, and cope in a complicated world. For some, kratom helps them work without constant pain. For others, it helps quiet anxiety enough to be present with family. For others, it's a step away from more harmful habits.Those stories don't fit neatly

			into headlines—but they’re real.Kratom doesn’t need hype. It needs fairness. It needs room for nuance. And it needs the same thing we all want when we’re struggling: to be listened to, not judged. If we can talk about kratom with honesty, responsibility, and compassion, we give people something powerful—not a miracle cure, but a choice. And sometimes, having a choice is everything. Keep natural kratom legal
Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a grandmother and a veterans I served my country for years only for you guys to treat me like a criminal for what so I don’t cry at night total scam what you done trying to Bam natural leaf kratom, it won’t stop me from going to other legal states. A total shame I served my county for years only to be criminalized to stay out of pain

Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom is an all natural way to deal with pain. I have a back injury that I've been prescribed pharmaceutical pain meds for to use. Kratom has helped me deal with the pain of the back injury, when needed, without becoming addicted to pain meds. I'm very grateful for that. Kratom, like anything else that is in our world, can be abused but when used correctly, is a great alternative to addictive medications. Gas station kratom with additives that are unsafe is completely different from clean pure kratom purchased from safe reputable sellers. Nicotine is addictive. Caffeine is addictive. FOOD IS ADDICTIVE. Making kratom illegal is feeding big pharma and hurting the people.
Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	Prohibition would do nothing to eliminate preexisting demand. And cartels and criminal enterprises would be happy to fill the void of a legal market with an unregulated underground alternative where they could easily lace products with more dangerous chemicals — just as we already see in the illicit markets for heroin and fentanyl. Kratom and its related products are not going away. A legal, regulated market offers a much safer alternative for consumers. I am not a criminal I am a police office who has knee pain can't be on pain medication especially with my job. This ban targets me unfairly when in reality should be about education not banning
Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a veteran I served in Iraq in 2009 I got my legs blown off in a ied roadside bomb. I wanted to die I was in so much pain they put me on so much pain medication I was going to end my life. Until around ten years ago I discovered kratom. And been using it daily for that amount of time to help get of medication and help with daily use so I don't have to cry at night. I am praying you listen to the people and do not ban regular kratom. 2 bills are in the house and senate to regulate. You criminalize me not wanting to be in pain. I am immobile I have no options other then to go back to hard street drugs. I am in mobile can't go to doctor. I have no options. Listen to the people and regulate natural kratom

Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	Almost every piece of the medical "puzzle" insurance paperwork, follow-up appointments, and pharmacy prescriptions requires a permanent address. Without one, you essentially don't exist in the system. Transportation & Time: Getting to a clinic often requires multiple bus transfers or hours of walking. For someone struggling with chronic pain or withdrawal, that physical journey can be agonizing. The Cost of "Free" Services: Even with Medicaid, there are hidden costs transportation, OTC co-pays, and the "opportunity cost" of spending a whole day in a waiting room instead of finding food or shelter. Many unhoused individuals report being treated with suspicion or dismissed as "drug seeking" when they present with genuine pain, leading to a total breakdown in trust. You are touching on a very live issue in Ohio right now. As of early 2026, the state is at a crossroads between two very different paths: The Ban (The "Bureaucratic" Move) Governor DeWine and the Ohio Board of Pharmacy have made moves to ban synthetic kratom and high-potency extracts (specifically 7-OH). What that causes is Disenfranchisement: Forcing people off a natural plant and back into a healthcare system they cannot access leaves them with two options: untreated pain/withdrawal or the dangerous black market. There is a common sentiment that bans are designed to "clear the field" for pharmaceutical companies to release their own (often more expensive) synthetic versions of these same alkaloids. Many advocates in Ohio are pushing for the Kratom Consumer Protection Act (KCPA) instead of a ban. This approach focuses on regulation, not prohibition:It would require products to be tested for heavy metals and salmonella (real risks in unregulated markets). Labeling: It mandates clear alkaloid content so users know exactly what they are taking. Age Limits: It keeps the product away from minors without criminalizing adults who rely on it for survival. Sin Tax. The Reality for Many: For someone who is unhoused, a $10 bag of natural kratom from a corner store can be the difference between being able to walk to a shelter or being stuck in bed with debilitating pain. When that option is removed, the "system" rarely provides a functional alternative. You never care about the people your claiming to help.
Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	Natural kratom is safe. I feel like everything you done is not for public heath or safety but unelected people not looking out for what's best for Ohio. As an Iraq war veteran who saw first hand the v.an and a push to use pain pills. I was able to get off pain pills with natural leaf kratom. Truly saved my life. A ban of natural kratom would negative impact millions of lives. Education is more important. Keep natural kratom legal and safe it be a huge mistake to ban it when it helps so many people

Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	A Choice Between My Career and My Health. I have spent the last 8'years serving as a firefighter city of Lakewood . My job is to run into the places everyone else is running out of. It is physically grueling, mentally taxing, and it has taken a massive toll on my body. A few years ago, I suffered a significant injury during a call a structural collapse that messed up my lower back and shoulder. For a long time, I followed "the rules." I did exactly what the doctors told me to do. But the path they put me on was leading toward a dead end. The "Safe" Alternatives Were Destroying Me The first thing they did was put me on high-dose Ibuprofen. I was taking 800mg like they were Tic-Tacs. Within six months, my stomach was a wreck. I developed gastritis and constant acid reflux. I couldn't eat right, and the pain in my gut was becoming as bad as the pain in my back. When I told the doctors the NSAIDs were ruining my stomach, they gave me the only other option they have: Opioid pain pills. As a first responder, I see the "opioid crisis" every single day. I am the one administering Narcan to people in the back of the engine. I've seen families destroyed by those pills. I refused to let that be my story. I won't risk my clarity, my career, or my life on a bottle of Percocet just to get through a shift. How Kratom Saved My Career. I turned to natural kratom leaf as a last resort. For the first time in years, I found relief that didn't leave me "high" or foggy-headed. It doesn't affect my ability to perform my duties, and most importantly, it doesn't eat a hole in my stomach. Kratom allows me to wake up, put on 75 pounds of gear, and serve my community. It allows me to come home and actually play with my kids instead of laying on the couch in a pharmaceutical haze. It isn't a "lifestyle choice"; for me, it is a tool for survival in a high-impact profession. The Reality of "Public Health". When I hear bureaucrats call this a "public health crisis," I have to ask: Whose health are you looking out for? If you ban this plant, you are giving me two choices: Go back to the Ibuprofen that is destroying my digestive system. Get on the "Big Pharma" conveyor belt of addictive opioids. This isn't about public safety. If it were, you would be looking at the University of Florida studies showing that natural leaf doesn't cause respiratory failure. You would be regulating the "gas station extracts" and leaving the natural leaf alone. Instead, it feels like a money grab protecting the profits of the companies that make the very pills I'm trying to avoid. I am a tax-paying, life-saving member of this community. I am not a criminal. I am just a man trying to do his job without being forced into an addiction or a stomach ulcer. Stop letting corrupt bureaucracy dictate my medical autonomy. Keep kratom legal and accessible for those of us on the front lines.
Worthington	Ohio	2 - Oppose - Used to Treat Chronic Pain	I was a victim of a dui car crash. I am wheelchair bound and basically immobile. I am a chronic pain patient. I don't have money to see a doctor only to be told use ibuprofen. I cry at night I can't afford a ride to the doctor I have no options other then street pills to stop the pain. I use natural kratom and off pain medicine. Natural kratom is safe. I use it daily. I don't understand the need to make millions of Ohioans criminals like myself for not wanting to be in pain. I don't trust your motives. Keep natural kratom legal. Otherwise I have to turn to street drugs risk my life to not cry at night. I didn't choose pain… pain choose me. This would horrible and negative affect the quality of my life. Look at sb299 and the other house bill the house and senate wants to regulate. Keep natural kratom legal

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Some people need this kratom for aches and pains where they can't afford pain medication get a grip
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom is more effective than several more dangerous drugs for a pinched nerve pain I have that I've had NO LUCK getting any relief from with pharmaceuticals
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	This plant has lead me to an overall better life. From pain relief to anxiety relief and I don't have to worry about side effects from pharmaceutical drugs.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have used kratom as a natural remedy for everyday ailments including headaches, back pain, nerve pain, and anxiety. It is important to me that I have a choice in what I put into my body.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Dear Governor DeWine, My name is Britney Hegemann, and I am an Ohio resident writing to share my personal experience with kratom and why it quite literally saved my life. I live with chronic illness and severe pain, along with periods of deep depression that at times felt impossible to survive. For years, I cycled through prescriptions that left me either overmedicated, dependent, or completely numb. Some made me sicker. Others took away my ability to function, be present for my family, or feel like myself. I was losing hope. Kratom gave me something none of those medications ever did: relief without taking my life away. It helped manage my pain, stabilized my mood, and gave me the ability to get out of bed, be a wife and mother, and participate in my life again. It did not make me high. It did not destroy me. It gave me dignity and a chance to live. I truly believe that without kratom, I may not be here today. I understand there are concerns about safety and misuse, and I agree that responsible regulation is important. But banning kratom or restricting access for adults who use it responsibly would take away a lifeline for people like me—people who are not addicts, not criminals, just trying to survive chronic pain, illness, and mental health struggles when other options have failed. Please consider the voices of real Ohioans who have been helped, not harmed, by kratom. We are parents, spouses, workers, and patients who simply want the right to make informed decisions about our own health. Thank you for taking the time to read my story and for considering the human impact behind this issue. Respectfully, Britney Hegemann Ohio Resident

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Dear sirs I am Leslie I am a 62-year-old mother of two grown children I have a husband with heart problems and I have taken Kratom to have a quality of life just plain powdered leaf Kratom and it gave me my life back my back is ruined and I need a surgery and I can't get it cuz I'm taking care of my diet gospel singer squishy videos I swear you live like this you're really 62 years old and I feel 92 you trying to live like this and then have something come along on Facebook and look innocent and I tried it and oh I felt good for once. I truly believe I need this in my life to have a quality of life and not end up in a nursing home and my doctors my therapist and my nurse practitioner agree because I let people know it's not illegal well now it will be and if you pass that band if you pass that man you're going to ruin my life you are going to ruin my life you're going to ruin a lot of people's lives a lot of crippled people a lot of veterans a lot of old people a lot of people just I think they said mostly from the years 35 years old to 65 70 is your average taker of creating that doesn't sound like people partying with synthetic products to me that sounds like responsible dosing like I did two grams three times a day. No please don't ban it it'll kill me I swear you don't know but it will how Governor like that on this conscience. 😱 Please please please do not been mitrogynine. You said you were going to you said it was exempt and next thing we know two days later it's going to be illegal and you lied you said it was going to have his own separate hearing thanks a lot you ruined my life. Teachers you do not know I have been taking kratom for 5 years please please don't ban it you have no idea how much it's helped me and girlfriends of mine I'm 62 there's people this age taking it for a maintain medicine maintenance and depression I can't take any presents I can only take creative because of my restless leg syndrome everything triggers it except for kratom and low dose opiates and I was doing fine on that until my pain management decided that they were going to prescribe opiate boys anymore because they were afraid to lose their license. Now this now this! I have to go cry my eyes out oh my chest hurts so bad from crying please don't bend kratom in its natural form 🙏🙏🙏
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please do not take this life saving plant from us I got off opiates in 2017 that I was using for my chronic illnesses with Kratom I've been able to contribute to society as a taxpaying citizen because I'm able to get out of bed without the pain that I would be in without Kratom
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I urge you not to ban natural kratom products. I have a history of chronic migraines and have been to several doctors who have prescribed me pills, powders and even injectables for the pain. I'm instructed to take all of these one after another if the pain doesn't subside and after that, then it is a trip to the emergency room. I find that drinking natural kratom tea helps not only with the pain but it helps me from the risk of becoming addicted to these prescription drugs. The pain can be unbearable to the point that I often question if living is even worth the pain. Being able to drink kratom as a tea and find pain relief is crucial to be able to function everyday. I respect the decision to regulate it to keep it safe for the public by only allowing all natural forms and only banning the synthetic forms of it. There is a large community of people that natural kratom tea helps and I would hate to see that taken away.

Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a registered nurse. I am 33 years old mother. Professional a kratom ban on natural leaf would negatively impact my life. My child life I was Diagnosed with cancer and been fighting for my life with chemo drugs. I stopped taking the pain pills because it was lowering my Quality of life. I use kratom to help me get out of bed. A ban would total affect my family my job. I don't want to go back on pain medication. This is life or death for me. Do not ban natural kratom I'm not a criminal. I just deal with pain:
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have used Kratom for 12 years. This is the only thing that works for my headaches. Taking this away would lead me to throwing up daily and in bed for days. I take it in natural form. Please dont take this away.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am in favor of regulating kratom. 2 bills in the house and the senate pain is not a bipartisan issue. I am a father. I don't have any money to go to hospital when I got hit by a drunk driver and ever since I got out of hospital Kratom keep me off the hard prescription opiates. And able to live a good quality of life as a father. I pray you listen to the people and keep natural kratom legal. To criminalize me because I can't afford to go the doctor actually really sac
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Powdered leaf kratom isn't like the exact. That is taking the plant from its natural form and turning it into the drug you want to outlaw. The leaf helps with my chronic pain that I have had since 2004 and I got addicted to pain pills for 15 years. It's been almost 10 years since I was on pills that ruined my life. I still work and maintain a home whereas I lost both with narcotic pharmaceuticals.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am furious that no one is thinking about all of the people that have chronic pain! MILLIONS of people that have chronic pain have had their medication taken away because of people who abused it and NOW we can't take any kratom products that help us to be able to function daily. I really hope these people never have to go through what millions like me are going through. It's 2025..We are adults that can make decisions about what we can take and what works for us. Alcohol is also a drug but it's ok that millions of people are killing themselves drinking. It makes absolutely no sense...it's actually cruel. My father is 82 years old and kratom products help him immensely. Without it I'm not sure how he is going to have any quality of life. I hope you will reconsider and have a change of heart.Thank you for your time
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please keep kratom powder legal. It helps so many people I have used it for many years with minor aches and pains without it I would be suffering. It's all natural. There's a lot of misinformation about it out there. If you take a honest look at it I think you will keep the powder free thank you for taking the time and please do some honest research.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a law abiding, college educated employed citizen who feels strongly this should not be a Schedule 1 narcotic. I have dealt with debilitating nerve pain for over 20 years. I tried Kratom and I no longer live in the misery I used to feel. Removing this from shelves would be a disservice to many others like me. I respectfully urge you to reconsider your position.

Marietta	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please don't make pure kratom products illegal! I suffer from chronic pain and use kratom to function. If you make kratom illegal, you make my life untenable. Yes, by all means, ban those products which use concentrated forms of Mitragynine, products which are concentrated, adulterated, and otherwise tampered with - those things are definitely troublesome. But pure kratom products - those that are simply the powdered, dried leaf in capsule or powder form - please leave those alone! Make them age-restricted (21 and older), make sure there are inspections and purity tests, but please DO NOT BAN THEM. Thousands of people who suffer from chronic pain rely on the relief kratom brings. If you ban kratom outright, you'll be condemning them, and me, to a life of utter misery. A life where death soon becomes the only option.
Hamilton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have used Kratom for 5 years now for my chronic condition called Complex Regional Pain Syndrome. This has tremendously affected my life where I am able to work again, out of a wheelchair, and live a somewhat normal life at 36 years old. I am off all medications as well. I strongly disagree with criminalizing Kratom. It has helped so many along with myself. Please take this into consideration.
Solon	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am an upstanding citizen that works up to 50 hours a week, takes care of my 16 year old daughter, and do everything I can to be a good person. Kratom has saved my life from chronic pain and anxiety due to fibromyalgia and osteoarthritis. I do NOT want to be on pain meds. This is the only thing that greatly allows me to have a successful and fulfilling life. I have been taking for years and have NEVER increased my dosage or needed more. Please understand that there are many of us who have been forever changed by the positive effects of this miracle leaf. While I do not believe in "gas station" kratom, the pure leaf is totally different and if bought from a repudiable source and taken responsibly is totally different. We are not trying to get high. We can completely function as civilized people while taking this. I honestly do not know what I would do with my life and health should this become unavailable. Please save pure leaf Kratom!

Alliance	Ohio	2 - Oppose - Used to Treat Chronic Pain	My name is David Johnstone, and I am a United States Army veteran and long-term resident of Ohio. I write today to urge you to reconsider the proposed rule to classify mitragynine, the primary alkaloid in kratom, as a Schedule I controlled substance under Ohio law. Like many veterans and Ohioans, I have endured chronic pain for many years. Following my military service, I was prescribed opioid pain medications that profoundly affected my quality of life. These pharmaceuticals caused severe mood swings, emotional disturbance, and other debilitating side effects that changed who I was as a person. After years of struggling with these issues, I turned to kratom, which I have used responsibly for nearly 10 years. Kratom has given me back my life. It has allowed me to manage my pain without the adverse physiological and psychological effects associated with long-term opioid use. I am not alone. There are thousands of Ohioans who rely on natural kratom for pain management, mental health support, opioid withdrawal mitigation, and improved daily functioning. I strongly support reasonable regulation of kratom products, including a ban on concentrates, synthetics, and highly processed products sold in gas stations and convenience stores, products that often contain high levels of 7-hydroxymitragynine (7-OH) or other derivatives associated with significant public safety concerns. However, an all-out ban on even natural raw leaf kratom would be both unnecessary and harmful. The proposal to classify mitragynine as a Schedule I substance would make all lawful possession, sale, and use of natural kratom illegal in Ohio, effectively removing access to a substance that many Ohioans, including veterans, have used safely for years. This goes beyond targeting unsafe products and instead penalizes responsible consumers and small businesses that provide a safer alternative to traditional opioids. A ban would likely have significant negative consequences, including: -Driving current lawful users back to prescription opioids or illicit substances that carry much higher risks of addiction, overdose, and fatality. -Undermining individual autonomy in pain management lived experience when conventional pharmaceuticals have failed or caused harm. -Criminalizing everyday citizens who responsibly use raw leaf kratom with no history of abuse or public danger. Effective public policy should be grounded in evidence and proportionate risk assessment, balancing public safety with individual liberty and access to alternatives that improve quality of life. Law enforcement and regulatory focus should continue to be on dangerous, synthetic, and highly concentrated formulations rather than a blanket prohibition on the natural plant leaf. For these reasons, I respectfully ask the Ohio Board of Pharmacy to reconsider the proposed scheduling of mitragynine under Schedule I of the Ohio Administrative Code. Instead, I urge the Board to work toward a targeted regulatory framework that limits harmful products while preserving safe access to natural kratom for responsible adult use. Thank you for your time and consideration. Respectfully, David Johnstone

Lancaster	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been an active full leaf kratom powder user for over a year now. I was removed from my FDA approved pain medications back in 2010 without any taper. I was abandoned. The pain started to get so bad that my epilepsy condition started to intensify. I ended up being prescribed Suboxone because I was told that I was an addict because I needed pain meds. I was on Suboxone for over 6 years and it was pure torture. That is the true poison. Kratom full leaf powder and the extracts are perfectly safe. I have not experienced one epileptic event due to kratom for leaf powder or the extracts. We constantly have everything taken away from us when it is not causing an issue due to the pharmaceutical industry. Kratom has been used for over 5,000 years and yet now all of a sudden we are having deaths due to kratom?. I don't believe that at all. The science proves that Kratom full-leaf powder and the extracts do not contain the amount needed to cause the upper respiratory depression needed for an overdose. The AKA has provided state legislators, city council members and others with science backed data that proves that Kratom full leaf powder and the extracts are safe in both animal models and human models. Everybody freaks out when you mention opioid and that is the only thing that everybody focuses on with kratom and there are more benefits than just pain relief. I had been prescribed mood stabilizers for years that were ineffective and now I have finally found something that does work and you want to ban it. Work on the fentanyl crisis and stop taking away things that actually work and are harm reduction. MAT isn't for everyone and is also not FDA approved for pain. Unless you were going to start going after doctors for prescribing Suboxone for pain because it is not FDA approved for pain only for medication assisted treatment for opioid use disorder, and unless you're going to arrest doctors who tell their patients they need them to tell them that they are an opioid addict to receive the medication is coercion. It is unethical but happens every single day. I beg of you to listen to every single individual recovering addict or just chronic pain patient about their experience with kratom. There are more people that have had success with kratom full-leaf powder than people that have had bad experiences. If everything in our society was based on experience alone we would not leave our homes ever and that is not how we need to go about everything in life. We need to look at this in its entirety with all of its facts from all of the 50 states that surround us. Multiple states have had KCPAs in place yet the state is still trying to go around them now. This is targeted because nobody knew what kratom was 10 years ago, yet it was being used with no issues. I know that I can speak for the success that I have had with this tea leaf and I urge you to allow us to continue to have access to safe third party lab tested Kratom products. I understand the need for the 7-OH to be banned, understand that product is only one alkaloid in a tablet. The full leaf powder contains over 40 alkaloids that work together, if you remove one then it does not work as it is intended. Listen to everyone's story It will sound similar but they will all be different.

Westerville	Ohio	2 - Oppose - Used to Treat Chronic Pain	It is my preference to only use naturally occurring plant medicine and I avoid the use of pharmaceuticals. I have used the kratom plant along with THC for issues related to pain management and anxiety without issue for years. I am an alcoholic and have to be conscientious about addictive products like prescription pain pills. Kratom has not caused any addiction issues in the decade I have been using the plant. I periodically take breaks from using any plant medicine just to confirm there are no occu Ring issues. I'm also a veteran and would appreciate the continued availability of plant medicine. Thank you.
Hermitage	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I believe this ban will cause more harm than benefit to many chronic pain patients and elderly people who use this substance to help them function in the absence of compassionate care from medical professionals due to the opioid epidemic hysteria derived from the CDC guidelines regarding opioid prescribing based on highly flawed statistics regarding deaths related to opioid use. The CDC has admitted that the statistics they used to formulate the 2016 and 2022 guidelines were based on deaths that resulted from the use of illicit (not prescribed or pharmaceutical grade) fentanyl and the ingestion of opioids in conjunction with other prescribed or illicit drugs, such as cocaine and methamphetamines. The CDC has admitted that the guidelines based on flawed statistics has resulted in medical providers now refusing to prescribe opioid-based medication to treat acute and chronic pain associated with significant and severe health conditions. Many elderly and chronic pain patients have been ripped off of medications that have formerly helped them function and experience relief from chronic pain. As a result, these patients have been forced to seek relief from the streets (where the chance of encountering illicit fentanyl is staggering) or the supplement industry. Kratom and Kratom-based derivatives have been a godsend to these patients with no other alternative but the illicit drug market. Used responsibly, these supplements pose no more danger than many OTC medications. But with any other substance that has physiological effects on the body (such as alcohol, marijuana, etc,) it can and will definitely be abused by certain segments of the population that choose to disregard responsible use. From what I've seen so far, it is the segment of the population prone to addictive behavior and irresponsible use that are experiencing negative outcomes from the use of these substances, often by mixing these derivatives with other drugs, central nervous depressants, and alcohol. One can logically ask why alcohol continues to be a legal and regulated substance in Ohio when it use is linked to thousands of death each year while also having NO benefit to chronic pain patients or the elderly. Should this substance be regulated to a degree and only available to individuals of legal age. YES. Should it be banned, leaving chronic pain patients in the position to seek relief from illicit markets which put them in the position of encountering illicit fentanyl? NO. It's time to adopt a logical and common sense approach to the opioid epidemic hysteria that has resulted in so much harm to chronic pain patients despite its initial good intentions. The pendulum has swung much too far in the opposite direction which has irreparably harmed millions of chronic pain patients.

Cortland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I don't agree with the new legislation Ohio is trying to make law ! I have been in Chronic pain for well over 35 years while surfing the net I stumbled onto Kratom by Gods Grace .Where narcotics didn't help with the 24/7 pain the Kratom did and for at least 8 years I've been taking it with no side affects i take just the all natural power. if you ban it i will probably end op in the hospital . How could you do that to me ? I have enough to deal with all ready . Please reconsider for my own health sake and I'm sure many others !!
North Ridgeville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello, kratom should not become a schedule 1 substance, equivalent to heroin, LSD, Psilocybin, or formerly marijuana. Kratom helps many people be it chronic pain management, adhd, energy, or opioid use disorder(OUD).Kratom helps those with chronic pain who are unable to get a prescription for classic opioids arguably better than classic opioids without the risk for overdose or severe withdrawl symptoms. Kratom can help those with adhd who do not find prescription stimulants like, dextroamphetamine or methylphenidate to be useful or help. Kratom also helps people to increase energy like a cup of tea and it is ignorant to pin addiction only to kratom as most daily caffeine consumers are consuming their daily dose for maintenance and to avoid withdrawl symptoms. I have also heard many great stories about people getting off of heroin and fentanyl because of kratom and winning their life back. Kratom does not produce effects equivalent to cocaine in low dose nor heroin in high doses. Cocaine is a triple monoamine reuptake inhibitor while kratom is not. Heroin is a potent full agonist narcotic meanwhile kratom is a partial agonist at the mu-opioid receptors as well as weaker than codeine which is weaker than morphine. The partial agonist nature of kratom makes fatal overdose impossible due to kratom not effecting the b-arrestin system, the site where classic opioids become responsible for fatal overdose. In conclusion kratom should not become a schedule 1 controlled substance as it helps many on a daily basis and if it were to go illegal people using it would go to already scheduled opioids like oxycodone, hydromorphone, heroin or even fentanyl and rev up the current US opioid crisis more than it already is. Kratom works to end the opioid crisis we are experiencing in our country. Kratom helps, not hurts.
Wadsworth	Ohio	2 - Oppose - Used to Treat Chronic Pain	I live in chronic nerve pain as an amputee, missing my right leg above the knee. Kratom tea and powder has been a godsend and has helped me live a normal and productive life. Please don't take this plant away, I am not addicted - I just use it when I have severe phantom pains and it helps me function in society. There are no pharma alternatives that do for me what kratom does on hard days. I own several thriving companies and I am needed to be in the office to keep people employed. Kratom helps me show up and be my best self. I don't understand how this could be criminal. I am very productive and contribute. I don't drink or smoke and I have children that need a dad that is not in pain and not addicted to pain pills.
Youngstown	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using kratom for 9 years and is very effective at reducing my back pain (deteriorating disk and vertebrae) I was taking methadone at the time but that ended when my pain mngmt doctor died and the ensuing opioid crisis started, kratom works and is safe as prescribed. Ken

Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	As a 12 year medical user of “Kratom” we will move out of the state if these laws pass. I avoid all narcotics as a Christian and use pure crushed leaf for a spinal tumor and osteoporosis side effects. My wife and I are tax paying and hard working citizens who have no criminal record. I depend on “kratom” to work and keep the swelling down naturally without the side affects of man made medications.
Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	This does not need regulated. I take 4 capsules in the morning and 4 at bedtime. My internal organs continue to behave normally and my use is about 4 years now. It KEEPS RESTLESS LEGS AWAY. It HELPS ME FALL ASLEEP AND i'M 79. Yes I still work fulltime and I am a dialysis nurse. My patients (2 for sure) use it and their doctors are aware. My doctor knows I use it (Summa). If you want to put restrictions by age, sure. BUT PEOPLE MY AGE, DON'T RESTRICT THIS PRODUCT.
North Canton	Ohio	2 - Oppose - Used to Treat Chronic Pain	My name is Jamie Biehl. I am 49 years old and I live in North Canton, OH. I have a progessive muscle disease called Limb-Girdle Muscular Dystrophy. This condition causes pain and weakness in my muscles. I also have back pain due to a childhood injury that didn’t heal properly, bulging discs and degenerative disc disease. Prior to finding Kratom I was in a miserable and helpless state. I was on a very large and dangerous amount of pain medication. Due to being on this medication for so long, I developed side effects which resulted in more dangerous prescription drugs. Some of these prescribed medications I was on all at one time included Fentanyl, Methadone, Dilaudid, and Xanax. As much as I was taking, I was no longer receiving relief with these medications, but couldn’t stop taking them because my body became hopelessly addicted. Every time I tried to wean myself off my body would convulse which would lead to extreme pain, fatigue and weakness in my body. I found out about Kratom in 2014 from a post in a chronic pain support group on Facebook. The poster stated she was able to get off her pain medications with the help of this all natural plant called Kratom. I started doing research and placed an order. I made a Kratom tea and never took prescription pain medicine again. Within a few months, I was off ALL my medications. Almost 12 years later, I am still receiving relief from Kratom and have stayed off all prescription medications. I have regained a very good quality of life. I have lost 55 lbs and have been able to participate in a Walk and Tone class at the Y 3 times a week for a couple of years. This would have been impossible prior to Kratom. I believe that humans are born with unalienable or natural rights given to us by God to life, liberty and the pursuit of happiness. Banning Kratom would infringe on these rights to treat our bodies and medical conditions in the way we chose. The only unsafe Kratom is adulterated Kratom. Why not work with the AKA to ensure Kratom is not adulterated? Kratom is so much safer than opioids, yet opioids are not banned. If you were really serious about doing something about the opioid epidemic here in Ohio, you would not be trying to ban a safe all natural substance that could help. Thank you for your time and for letting me share my testimony.

Chillicothe	Ohio	2 - Oppose - Used to Treat Chronic Pain	You will hurt way more people than save. Kratom powder is impossible to overdose on. It would be like trying to overdose on smoking leaf marijuana. Get rid of the extracts if you want, but the powder is safe and helps physically disabled veterans like me get back some quality of life without relying on addictive and dangerous barbiturates. I do not want to use pills again, they made me a worse person and caused horrible withdrawal when doctors decided to change my meds. Kratom is already regulated to 21 years of age. What more restrictions could you possibly want outside of making it illegal? I was an alcoholic because of my service related injuries and know the alcohol is way more dangerous than kratom. Why don't you go after that? Alcohol is literally poison but generates revenue, that's why it's allowed. Do the right thing and leave kratom alone. If you haven't used it, give it a try. It's not deadly and you are going to ruin lives if you take it away. I know you'll ruin my life so I might as well accept that I will become an alcoholic again and die from liver failure. Medically retired disabled veteran who has only found pain & sleep aid with kratom. This ruling will lead to worse health for many people. Want to regulate synthetics? Fine go for it! Leave the natural powder alone! It is impossible to OD by eating powder plant matter kratom. You'd have to ingest pounds of it in one sitting!
Chillicothe	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please reconsider banning powdered kratom. I'm probably a good bit older than the people quoted in your rule proposed rule. I've been using pure kratom powder (not the liquid or concentrated products you see in gas stations) to deal with occasional aches from getting older. It works better than aspirin or Advil without the stomach upset those can cause. I don't have the time or money to keep going to a doctor for something that helps with my quality of life. I can see why the liquid and concentrated products can be harmful, but please let us continue to have access to un concentrated and un adulterated natural kratom.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	This has saved me from taking any stong pain meds for my ongoing pancreatic issues. I'm happy to say it's saved me of worry being addicted to something
Bellefontaine	Ohio	2 - Oppose - Used to Treat Chronic Pain	As someone who suffers from chronic pain and who was addicted to prescribed pain medication for years. Finding safe all organic kratom has been a lifesaver for me. I do believe that the stuff that is sold in gas stations and smoke shops needs to be dealt with, I believe it is dangerous. But organic grown kratom is a godsend for someone like me because you do not get a high feeling, but it helps with pain, anxiety, focus, and clarity better than any prescription medication can! It contributes to me being a productive member of society, a better wife, mother, and person. Please look into the benefits of ALL NATURAL, ORGANIC GROWN KRATOM. Look into the thousands of people it has helped, like myself. I appreciate your attention to this issue.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	When my mother was taking chemo for her cancer, nothing was helping with her pain and appetite. Then she tried Kratom and she finally got some relief.

Wilmington	Ohio	2 - Oppose - Used to Treat Chronic Pain	I discovered natural leaf kratom in 2016. I was a prescribed opiate user due to chronic back problem. Herniated disc in my back and neck. I live in constant pain daily and because of the opioid epidemic i cannot get the medications I need to perform basic day to day living! Kratom saved my life! Kept me from going to the streets where I was in harms way daily and OD many times to fentanyl! Keatim controls my pain and depression from living in chronic pain!!! Ohio real drug problem is meth and mentally! I think we all know that is truth and ohio should be focusing more on that and leave kratom alone!! Asia does not have a problem with people using it there! Been on this planet for centuries. Does it need regulated absolutely. Like 3rd party testing to keep out harmful adulterated. Please keep natural leaf kratom legal. I do not want to rely back on the streets to control my pain. I wouldn't survive whatever crap they r selling these days! Thank u.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I think it is criminal to take something that helps so many people likeyself with chronic pain and do not want to take big pharmas nasty opiates.
Kent	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom is a natural powder that helps pain and is a great alternative when you don’t want prescription which is addictive,
New Philadelphia	Ohio	2 - Oppose - Used to Treat Chronic Pain	I used to be a violent alcoholic and addicted to pain pills. Kratom has allowed me to quit both of those and become a productive member of society. My girlfriend and family members are thankful for my kratom use. They all have noticed how much better I am using kratom. In 2010, I was in a near fatal car accident that left me with agonizing back pain. Kratom relieves this pain and lets me sleep through the night without affecting my personality like other substances and alcohol. Kratom is literally a miracle substance for me. It has also helped with my social anxiety and chronic fatigue. My girlfriend is the most wonderful person I have ever met and she fears for a kratom ban. She sees how much better I am using kratom compared to other things. Please do not take this wonderful medicine from me.

Kent	Ohio	2 - Oppose - Used to Treat Chronic Pain	To the Members of the Pharmacy Board, I am submitting public comment in opposition to the proposed kratom ban and in support of SB299. I speak as a healthcare professional and a firsthand witness to its responsible, therapeutic use in chronic pain management. I am a Doctor of Nursing Practice (DNP), Registered Nurse (RN), and college professor with advanced degrees in nursing and business administration, and extensive experience in mental health and substance use treatment. My career has focused on evidence-based care, harm reduction, and patient safety. My wife lives with ankylosing spondylitis, a progressive autoimmune disease causing severe chronic pain and stiffness. Like many with this condition, she has faced years of limited and inadequate pain control. Kratom has been one of the few tools that provides meaningful relief while allowing her to remain functional, alert, and engaged, without resorting to high-risk medications. A ban would not eliminate demand for pain relief. It would remove a lower-risk option and push patients toward far more dangerous alternatives. In my work, I have repeatedly seen prohibition drive individuals to illicit street drugs with unknown potency and higher overdose risk. Removing access to kratom will likely increase reliance on opioids, alcohol, or other unsafe substances, outcomes that contradict public health goals. Patients with chronic pain deserve autonomy and a range of options. Responsible adults should be able to choose safer alternatives when conventional treatments are ineffective or intolerable. For many, kratom functions as a harm-reduction tool, not a substance of abuse. Reasonable regulation focused on quality, labeling, and age restrictions would better serve public safety than an outright ban. Prohibition removes oversight, not risk. I urge the Board to consider the real-world consequences of this proposal. Policies should be guided by evidence, compassion, and respect for patient autonomy, not fear-based assumptions. Thank you for your consideration. Respectfully, Michael Schlegel, DNP, RN, MBA, CNE To whom it may concern: My name is Holly Schlegel. I am a 33-year-old mother, registered nurse, and former Cleveland Clinic employee. I am writing to express my concern about the potential Ohio kratom ban under Governor DeWine. I live with a disabling autoimmune disease, Ankylosing Spondylitis, which prevents me from working. Kratom is the only treatment that provides adequate pain relief to help me function. I am currently on a Remicade infusion, but our medical system has not offered sufficient options for pain control. Losing access to this medicine would significantly impact my daily life. A ban on natural kratom would harm many Ohioans. I personally know individuals in recovery whose lives were saved by kratom, helping them avoid dangerous drugs. Removing access to this natural medicine could push people toward illicit substances, increasing harm in our communities. I respectfully urge you to oppose banning natural kratom and help protect Ohioans' access to this important medicinal plant. Thank you for your time and consideration. Sincerely, Holly Schlegel, RN

Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Years ago I had an injury that required me to use doctor provided narcotic medicine for pain. my pain medicine ran out as I healed but now I am buying pain medicine for a while felling guilty about it. When Kratom came along I found something that helped with pain and my anxiety issues from PTSD....I'm 61 and stay very active in physical fitness and with Kratom in my tool box and exercises helps greatly with my PTSD/anxiety... Kratom help great in reducing mild pain when needed. Ido not support that 70OH which I'm not sure is natural Kratom. Another reason for using Kratom is that NSAD,s taken for long periods of time is dangerous to organs so my medical provided infoms me. Again I'm 61 and have many old injuries and other aliments that causes mild pain almost daily and it probly exercising weekly may contribute to some minor aches and pains. There's many people who have been using Kratom responsebly for years like me for years. Ohio please do not ban natural grow and produced Kratom....
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Murray one is a naturally occurring alkaloid in the kratom plant. Please keep Murray one safe and legal for Ohio residents. Kratom keeps us safe and allows those of us with disabilities to have a better quality of life and avoid harsh pharmaceuticals that cause respiratory depression. Because of mitragynine unique profile it offers mild relief from chronic pain and helps those with wasting diseases have an appetite. You can take a psychoactive and extremely toxic drug like alcohol and kill yourself or kill others and yet those tasked with keeping us safe would try and take this life giving plant from us
Mount Vernon	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been a Kratom user for 5 years now. I have been living with chronic back pain for years. I had lost almost all mobility. My friend was born with curvature of the spine. He told me about Kratom helping with pain. I tried it and it was a God send. After a few days I had regained most of my mobility! I have had no side effects or withdrawal from the Kratom. I was surprised when I heard that people had overdosed on Kratom. I found out that they were making synthetic Kratom! I can't understand why they would take a plant which is natural and make it synthetic. They don't have a reason to do that. If they leave it in its natural state it would be able to help alot of people who are suffering with chronic pain issues. I don't want to take chemicals anymore. Let's not ban the natural and just stop the synthetic products. Thank you God bless

Mount Vernon	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am 76 years old and have been taking kratom for about 4 years. It helps with arthritis pain in my hands and shoulder and back. I think it is a very helpful natural substance that should be available to adults. It can also help with anxiety. I do not think it should be sold in smoke shops and gas stations, etc. Anyone trying to take it to get "high" is ridiculous. I only purchase it from reputable only vendors and health food stores who have theirs 3rd party tested. Also, I have a 49 year old daughter that has suffered for decades from chronic Lyme's disease and Kratom she feels has saved her life! It has helped her cope with the myriad of symptoms this debilitating, misdiagnosed and misunderstood condition causes. Kratom helps her cope daily with the pain and problems Lyme's causes. I am totally apposed to the sale of the synthetic forms that are dangerous and abused. Please help keep safe, tested natural Kratom available to informed adults. Thank you. Please do not let big Pharma money block a natural substance that truly helps people. They don't want something available they cannot make money on! That is what motivates Big Pharma, not helping people.

Mount Vernon	Ohio	2 - Oppose - Used to Treat Chronic Pain	To whom it may concern, My name is David. I had a small kratom and CBD store in Mt Vernon Ohio. Mt Vernon is a small town of about 39,000 people. In the years of 2018-2023 when my store was open, this town was still recovering from the Opioid crisis. I had numerous people who could not get any more pain pills saved by kratom. Police officers who had previous ex offenders trying to get themselves off of drugs were sending these people to me to help. I had numerous customers who, if they did not have kratom would turn to street drugs to relieve their conditions. I had parents of young adult children, who would not take their medication or had tried everything to help them...and small doses of kratom they were taking helped them live normally. I had a customer who was a nurse, that used kratom to deal with an amputation that caused false limb pains, as well as severe anxiety. Taking kratom allowed him to be able to work to support his family, and deal with his pain. There are countless examples that I could give you on how I saw kratom helped people get their lives back. However, their stories are nothing compared to the nightmare you will cause if you make kratom illegal/or restrict its usage so that people cannot get easy access to it. Yes, there are stories on how people have abused it and misused it and mixed with other drugs and alcohol. However, these are people wanting to get high and not help... or simply ignored the warnings that responsible retailers like myself would advise customers of before using. Fortunately, within the provisions of the AKA Kratom Consumer Protection Act, retailers like myself were required to do so and not to sell to any under age customers to keep kratom usage safe and legal. Lastly, I will say that I am glad to see that the Ohio Pharmaceutical Board take swift action to ban the sale of the 7OH products. As a responsible retailer I chose not to carry those type of products because it would destroy my customer's tolerances as well as their finances and turn them into addicts and I would be a legal drug dealer participating in their downfall. In fact, one of my former customers got hooked on some of the 7OH products and ended up spending almost a $1,000 dollars a week and almost destroyed his marriage. I was able to get him some of my leftover inventory and some special strands to reduce his cravings even after his rehab and now he is back on track. If people like him cannot get kratom legally from responsible retailers like I was, they will turn to black market products, like 70H, abuse pharmaceuticals or street drugs and make their lives worse.
Mount Vernon	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello! I've used kratom on and off for several years, and for me it has been helpful for managing pain, lifting my mood, and improving focus. I believe moderation is key with anything. I was prescribed pain medication after my tonsillectomy last year and still have many pills left over, which I feel shows that I'm not addicted to prescription pain meds or kratom. I can go days, weeks, or even months without using kratom, but when I do use it, I'm mindful and respectful of its effects. I also don't personally understand comparisons to opiates, as I've never used them and am not even sure whether prescription pain pills fall into that category. In my experience, kratom does not feel like that. I strongly believe that if kratom is used, it should be purchased from regulated, reputable sources rather than gas stations. My hope is that kratom will not be criminalized. Thank you for taking the time to read my story.

Newark	Ohio	2 - Oppose - Used to Treat Chronic Pain	I've used kratom daily for the past few years to help my feet after working 12-16 hour shifts in a factory. I use it responsibly and don't feel the natural plant should be made illegal due to problems synthetics have caused. If you make it a schedule one substance thousands across the state like myself will be forced to look into other alternatives for pain relief some of which are very problematic as Ohio knows all too well. I lost a few friends from the opioid epidemic years ago due to doctors lying to the public.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Myself and 2 family members (my 80 year old mother being one of them) were all given the information on Kratom in 2016. We all have autoimmune diseases and started taking this plant and it has helped us have better quality lives. We take it as a supplement and for no other purpose. We get our products from a reputable place who only sells the most organic products and have all the scientific specifications posted. We never have bought any modified junk sold in gas stations or smoke shops. And we certainly would never purchase or take this miracle supplement for the purpose of getting high. Please don't punish everyone for the stupidity of people who don't educate themselves on this plant. It's seriously helping so many people when it's used the right way from the right place.
Pottsville	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I'm 36 years old. In 2015, I got rear-ended by a vehicle that was traveling at a high rate of speed. Since then, I have had horrible back pain that greatly reduced my quality of life. I have multiple spinal injuries now that cause me to wake up at night in pain and unable to do things that I love, including kayaking, biking, working out, and working in general. The pain killers helped, but the doctors wouldn't continue to prescribe them to me because they are "addictive". My pain management came to a hault and all the other pills prescribed didn't help. A friend told me to try kratom for my back pain and I've been using it as needed since 2016. It has greatly impacted my quality of life and I can sleep throughout the night, and do those things I love doing without having to stop from the pain. Banning kratom is banning my last treatment option I have to be a productive member of society. I don't only speak this on behalf of myself, but for all the people that use kratom as a part of their own treatment plan. Veterans that fought for our freedom, law enforcement that put their lives on the line for the publics safety, truck drivers, older people with chronic pain and young people that lost hope for a better today. We speak out for the majority because we found something that's natural and helps us live better lives with less pain. Banning kratom is not the way to go. At most, there should be an age restriction on the sale of kratom, and that is it.

Canonsburg	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I am here to fight the van. I am a terminally chronically ill woman. I have multiple diseases that unfortunately are severely advanced. The government has already screwed over the chronic pain patients by punishing us as drug abusers. It's been a decade of proof regarding that that shows no decline only increase on overdose due to illicit fentanyl proving all along we were correct that the issue isn't with chronic pain patients. Kratom access is the only reason I have any quality of life today! I was in a 3 month flare so bad I was bedridden and kratom saved my life. Your fight is with the 7oh producers and the non lab tested tinctures etc. Lab tested kratom powder is a great product And I will swear to the fact it is impossible to consume the amount needed to overdose of kratom. The most positive thing About kratom that less is more 2tsp is my sweet spot. You can't take more to gain more effect. It doesn't work that way. I have consumed more than needed during my trial phase and the result was shaky eyes and vomiting. Nothing more. Please educate these coroners with facts. Every kratom overdose death claimed is a Lie and that's fact. Every one of those deaths was associated with another substance in the person's system. Just because kratom was also found doesn't mean kratom was the cause it was just consumed also. Typically addicts use kratom to withdrawal symptoms decrease til they can get their doc and that's facts. Stop pushing your false agendas to fight the drug problems here by continuously punishing the pain community. You are killing us at rapid rates. Claudia merandi has been trying to fight for us but you guys refuse to listen. My friends are dying by suicide or literally dying from severe pain. I am on my road to that myself for I am suffering unnecessarily bc of your bs. I can't get a proper pain management and try to survive everyday within your limits. FREE THE CHRONIC PAIN COMMUNITY AND GIVE US OUR MEDS BACK AND LEAVE ORATOM ALONE BC WE WILL DIE WITHOUT IT NOT BECAUSE OF IT. FOOLS
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 38 year old construction worker suffering from chronic pain, and PTSD from childhood abuse. I am also a positive contributor my community; I pay my taxes, I obey laws, and I help my neighbors when they need it. I use the natural leaf form of calming, anti-anxiety effects. The leaf I purchase is organic, 3rd party tested for heavy metals etc , and it keeps me off stronger, more debilitating pharmaceuticals I've been prescribed in the past. The natural leaf form of kratom doesn't pose a threat to society like the stronger, more comcentrated extract forms. Folks like me need this safer, more natural remedy for relief and quality of life improvement. I have a physically demanding career that's prone to causing injuries, and suffer from PTSD as a result of years of abuse as a kid. The leaf helps me effectively manage my pain symptoms and cope with psychological afflictions in a healthier way. The natural leaf form of kratom needs to be kept legal, regulated by the state, and taxed additionally if it meant keeping it available. I'm willing to pay a small percentage more if it helps keep my current quality of life. Thank you for your consideration.

Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has made it possible for me to be a functioning member of society despite chronic pain. If natural, unadulterated kratom is made illegal, I will almost certainly have to go on disability instead of working 40+ hours a week. I'll be a burden on the tax payer instead of a tax payer. Kratom is the only pain reliever that works without creating any kind of high or euphoria.
Elyria	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped me with migraines that I've had for years. They're debilitating when I have episodes, but small doses of Kratom make the pain of them much more manageable. I have never had an issues with Kratom and find it to be so personally helpful.
Elyria	Ohio	2 - Oppose - Used to Treat Chronic Pain	To Whom It May Concern, I am writing to share my personal experience with kratom and its impact on my ability to manage chronic pain. For several years, I have lived with debilitating pain that significantly limited my daily functioning and overall quality of life. Prior to discovering kratom in 2023, my condition had deteriorated to the point where I struggled with even the most basic tasks, such as bending over to tie my shoes. Since incorporating kratom into my daily routine, I have experienced a substantial and consistent reduction in pain. This improvement has allowed me to regain mobility, independence, and the ability to participate meaningfully in everyday life. Quite simply, kratom has been life-changing for me. Without access to this product, I would face a return to constant suffering and severe physical limitation. For me, kratom is not a luxury or convenience—it is an essential tool that enables me to function and live with dignity despite chronic pain. I respectfully ask that personal experiences such as mine be taken into consideration in any discussions or decisions regarding kratom. For individuals like myself, it has provided relief where other options failed and has restored a quality of life that once felt unattainable. Thank you for your time and consideration. Respectfully, Logan Jordan
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Natural kratom is very safe and provides pain relief to millions. Whatever it is that this board is basing the proposed ban on is unscientific here say. The statistics and science prove that. If it wasn't for kratom I wouldn't have been able to manage my chronic pain safely and lead a mostly normal life. If you ban this you are going to force myself and thousands of others to do what, I'm not sure. Go to try and get narcotic pain medicine prescriptions. Which they won't give to people anymore no matter how much pain there is. I don't understand what is driving this ban proposal but it certainly isn't trying to do what's best for the people of this state. I urge you to stop for a minute and think about what your doing and the many thousands of lives you are about to negatively affect in a manner that you can't comprehend. Thank you.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Natural lead kratom is god send. It's helped many people through their addiction to harder substances and it's helped me personally with chronic pain. Banning it entirely will send people on a downward spiral in ways I can't even imagine. Please consider the positives. Alcohol is more dangerous than plain leaf kratom.

Elyria	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am very concerned about the potential ban on Kratom in Ohio. My family and I use it daily and benefit greatly in the areas of moderate pain management, relief of occasional anxiety and relaxation before bed. May it be known and recognized that we will not further support Governor Dewine in any form if he removes our sovereign right as humans to choose what's right and proper for our bodies.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Myself and 3 people in my family use the natural Kratom powder to treat chronic pain issues. If this ruling were to take place it would considerably diminish our quality of life. Some of these people actually quit taking narcotics due to Kratom. I hope you realize that this product helps countless productive citizens to live a better life without them having to choose between living in pain or taking dangerous drugs.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	It has gotten me off Vicoden and Tramadol for my knee and back issues which I was having to use those for years. I have been taking kratom that I pack myself in capsules myself for the pain as needed, since 2015, and not opiate drugs that the pharmacies just want to make money on. Kratom is a natural leaf that helps tremendously with pain, allows me to work and not fail a drug test, and DOES NOT make me high like Vicoden and Tramadol did/does which would not allow me to work. This leaf helps and pharmacies, states, and doctors want to ban it because it works and they cannot profit from it. Over 10 years taking it for pain, not on Vicoden and Tramadol, and can work without pain and not high.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	It is a natural pain reliever and anxiety reducer that helped many. Also helps with opiate withdrawal, is used as pre-workout, for sleep etc
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped me manage pain and sleep issues for over a decade now. I was in a very serious accident in 2020 and can not use marijuana due to my employer, so kratom is the next best option over pain medication. Please keep kratom legal for all uses, as I know many people that could have been saved from the opioid epidemic had they just found kratom first.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped my husband with pain management and symptoms from a car accident for the better part of a decade i support SB299 follow the science and strongly oppose prohibition
Lakewood	Ohio	2 - Oppose - Used to Treat Chronic Pain	I just wanted to say, ive been using regular powder kratom on and off for over 10 years for my back pain...I have a very strenuous job, and it involves alot of soreness and pain...I have had ZERO negative effects, its not addictive...and is it alot less harmful than taking any prescriptions...so I propose that ohio bans the synthetic kratom...but the all natural powder is safe..thank you for your time.

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	After years of pain management, prescribed opiates and 3 major surgeries, I was a victim of the opioid crisis. Kratom saved my life and helped me get back to work. Im a father and husband(a republican) who works hard every day to support my family. I actually work for the government. I don't abuse kratom. I don't use drugs or even drink alcohol. I do however rely on powdered natural kratom to function in my duties. Please reconsider your decision to make responsible adult kratom users criminals. I truly don't believe I would be alive today without kratom. With all sincerity, I implore you.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Thank you for taking the time to read my forthcoming articulations on this particular subject matter. I have successfully been utilizing natural kratom leaf since 2008 before a productive market became established. My journey started then because I have severe chronic pain due to a car accident that permanently altered the course of my life and I wanted to seek something that would be beneficial to helping me suffer a lot less. I rely on Kratom every day because I don't want to use prescription pain medications for the severity of how badly this affects me from the time I wake up until I can actually fall asleep without waking up in extreme pain throughout the whole night like I had experienced previously to my botanical discovery. I urge you to please keep natural kratom leaf products legal so that the other millions of people who are suffering like myself can continue to responsibly use Kratom without the fear of criminalization taking effect on a plant that should absolutely be 100% available to all adults that can benefit from this botanical specimen. It's greatly disappointing to see people use outdated and archaic information that is absolutely published as forms of propaganda against a plant that literally has never been the singular participant of ending someone's existence. There is no lethal dose and the embarrassingly unwise choice that Mike DeWine is making is the polar opposite of what should be happening. He should thoroughly be embarrassed with himself for trying to remove safe and unadulterated products from the shelves while having no medical degree, qualifications, or any certifications in any of those fields to be able to make decisions that don't even directly have anything to do with him or his dishonest intentions as one of the worst people we've ever had in office. It's a sad and feeble attempt for him to rake in money from pharmaceutical/alcohol/tobacco companies to publish misinformation as a scare tactic to the general public. It's bewildering that unqualified and inept neophytes with no self-awareness are allowed to even make any decisions/choices of this magnitude and shame on everyone who is trying to corrupt the nature of people who are law-abiding citizens that want the polar opposite of what Mike the Swine DeWine the Turtle is trying to do as a last-ditch-effort attempt to procure control as his remaining days in office dissipate. Shame on Mike, shame on the Pharmacy control board, and the Board of Pharmacy for trying to ban a plant that is consumed responsibly by people who simply want relief and the physical ability to contend with the entirety of your morning/night/day. Please take this matter into serious consideration because we will absolutely NOT stand for this corrupt behavior and we will fight tooth and nail. We will NOT give up the fight and the only logical thing to do would get to enact a Kratom Consumer Protection Act (KCPA) in this state, much like many other states that think logically in terms of safe and well-tolerated

			phytocompounds. The elected officials of Slowhio need to stop thinking 50 years behind in the times and get with the program. I am working on behalf of the American Kratom Association and we will present truthful and factual proof of your pathetic lack of real findings. Mike needs to go take his senility out of politics and leave it to people who are cognizant in sensible policymakers. We will expose the lies, manipulations, and modifications involving highly inaccurate scientific readings. None of the metabolites in Kratom operate through the Metabolic Pathway that is directly associated with the Mu, Delta, or Kappa receptors like actual Opiates and Opioids do. Ergo, you can't suffer from any respiratory depression that leads to Opiate/Opioid overdose. Mitragynine and all of its other 50+ natural molecular phytocompounds have no true correlation to any human deaths. The tests of people who were dead that had it in their system died from causes of actual hard drugs being consumed that were overshadowed by creating propaganda to trick people into believing that Kratom is harmful. I am a living success story of 18 years and I've never ONCE had a single adverse health effect. I am in the best shape I have ever been in with my mental and physical health, thanks to the natural jungle leaf that also gives millions of other people relief. Focus your efforts on more important things and stop disrespecting this state's citizens who want to be able to retain safe access to tested products with no adulterations or synthetic compounds. Please keep Kratom legal and don't disrespect the people of this state by making a decision that affects the lives of consumers and the thousands of people who own businesses to support their families. That is absolutely irresponsible and unjust. It's unconstitutional to put a ban on a plant and exercising power of that degree really imposes upon a lot of people's lives is more dangerous than anything. Keep natural lead botanical specimens legal and sign a KCPA into law do that we can legally be protected from having to contend with this irresponsible behavior through unqualified people that have no education.

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a Cleveland Police Officer and have been serving for almost 20 years. I am on patrol on the east side of Cleveland. I have never had a radio assignment for anyone that has ever overdosed on Kratom or had a bad reaction to it. It is not dangerous in any way, shape, or form. I encounter drug addicts every single day and none of them use kratom because it is very hard to abuse. There aren't Kratom addicts. We don't find Kratom on drug addicts. We find heroin, crack, cocaine, and fentanyl. If you take too much of it you get tired. You don't pass out, you don't stop breathing, you don't die. But you also don't get high from it. The fact that Ohio is trying to ban this is insane. People aren't robbing people so they can buy Kratom. People aren't breaking into homes so they can get money for Kratom. To add to my experience I have suffered several injuries on the job. I have 3 herniated discs in my back. I also have tore my knee up and had two surgeries. I take Kratom for my pain and swelling and have been taking it for years. You don't get high. You don't get loopy. You don't get intoxicated. My pain level goes from a 7 to a 3 and makes it so I can continue working and supporting my family. If it wasn't for Kratom I would be forced to take Tylenol and opiates for the rest of my life. And opiates you eventually get used to your dose and have to slowly up it. I have a pain management doctor who knows I take Kratom and supports it because I don't have to take opiates. Dozens of his patients are on it because it is something helpful and is just a plant. And ive taken too much Kratom before. Guess what happens? I get tired. I start yawning. I want to go sit on the couch. That's it. Yes, there are a small handful of stories where people have died with Kratom in their system. However it was always something else that caused their deaths and wasn't because of kratom. A few years ago Ohio tried banning Kratom. It failed because of the amount of support people showed for it. Fast forward to now and more people are aware of what it is and it's benefits. Please don't ban something that has so many benefits. This is America. Let us choose what we put in our bodies. If you want legislation so you have to be 18 or older to buy it? Fine. I get it. Thank you
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I'm a tax-paying Ohio citizen who relies on Natural crushed kratom leaf to be able to work and function from day-to-day. I have Fibromyalgia and chronic back pain from a childhood car wreck. Doctors have a hard time helping me due to sensitivity do pharmaceuticals. I have used natural kratom leaf for nearly 15 years, I don't condone synthetic or ultra-potent extracts but in it's natural leaf form, it should remain available. Natural kratom is not, nor had it ever been the issue. Scheduling mitragynine will have a massive negative impact on the millions of other kratom using Ohioans who are only trying to keep up with the difficult pace of modern life. Many may have to leave jobs to go on Disability because it has such a significant impact. What makes far more sense is to pass the Kratom Consumer Protection Act in Ohio so that we can form regulation to ensure that only natural kratom is available and it has proper testing on every product on the market. Please consider the needs of millions of citizens, veterans, voters, and tax payers. Regulation makes far more sense than outright scheduling mitragynine. The Kratom Consumer Protection Act is already on the table and would have a far less negative impact.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I disagree for kratom leaf as a schedule 1 drug, kratom can be used for its healing properties.

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have taken Kratom as a supplement for approximately five years. It has helped me sleep and has helped me regulate pain. I do not abuse this product or feel the need to. I also have family members that use this product in the same way. If the state we're to ban this, It would put a lot of people in a very bad position. Please leave this completely legal in the state of Ohio! Thank you
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 60 yr old carpenter with a long history of back & neck pain. I don't like taking opioid. I don't want to develope a dependency. Kratos is a lifesaver for me. Makes it bearable to do my job. If it wasn't for Kratom, I wouldn't be able to do my Job. Please help people like me have some relief.I don't know what I would do without it. I would probably have to go on SSI.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Natural plant kratom saved my life. Im a 44 year female with a rare autoimmune disorder that causes me a lot of pain. My body can be unbearable to live in. Before I found kratom i was on so many medications that made me an empty shell of a human and also medication that didn't work. Pain is so stigmatized now that nobody wants to help treat it anymore. Kratom gave me my life back. I am able to be a functioning member of society. I am able to keep a job. Please dont take away something that is natural and gave me my life back. There is so many stories like mine out there
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has benefitted my mom, brother, and I in various ways. It helps to manage chronic pain and provides us energy to get through our work days. We all have very physical jobs and kratom helps to manage the daily aches and pains and low energy. Banning it would be detrimental to those of us who use it. Many would likely return to street drugs such as fentanyl, heroin, and opiate pain pills which could be laced with any number of deadly substances. Kratom is safe. If anything, find ways to regulate it, but please do not take it away from the people who genuinely rely on it and benefit from it. I believe many people would become suicidal if this ban goes through. Doctors are already reluctant to prescribe any pain killers which leaves millions of patients in pain on a daily basis. Kratom is all natural and safe and helps many of us function and be at our best.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello. I have been responsibly using kratom for nearly twelve years and it has made my life much more bearable than it once was. With the use of kratom, I am able to sleep soundly, control chronic pain without the use of prescription painkillers, and I am able to live a more productive life. Please do no listen to irresponsible comments and reports about the dangers of kratom because I have found it to be very safe and very helpful in living my life, and I know others feel the same way. Please, please I urge you not to schedule kratom and eliminate my use of the only thing that has ever helped me have a better life. Please!!
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Have 2 knee replacements 2 cages in my spine really bad arthritis I tell you what Kratom just the natural has saved my life cuz I don't want to take pain pills you should do some research cuz it helps a lot of people believe it or not I've been taking it over 10 years I don't have no trouble with it
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom powder helps me for pain management, don't like taking prescription pain medicine.

Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	This would in fact ruin so many lives. I have successfully used plain leaf kratom for over 8 years now. Not only did this leaf save my life. It gave me the ability to live once again. In my early 20's I was unfortunately injured during a good Samaritan act. Helping a morbidly obese individual from the ground into a over sized wheel chair. While doing so, I compress almost every vertebrae in my thoracic spine. I was immediately permanently partially disabled. As someone whom had taken pride in the fact. That id worked in a full capacity since the age of 14..this became a life changing event. Spending the next decade in Pain management during the height of the opiod epidemic. Being prescribed absurd amounts of pain meds as well psychology meds to cope with the inability to enjoy my new found life..if that could even be considered as such. Was unfortunately discharged from the clinic for consumption of Marijuana. Now an very evident and effective tool used for pain management. This was an immensely difficult time..as i stated..was prescribed absurd amount of opiods..5 x 120 mgs of Morphine EX to be exact was Avinza 120 mg ER. Needless to say i spent the next 6 mo. In what became my own personal hell. Skipping forward a few months after tryn to find any natural relief. I was fortunate enough to stumble across this amazing leaf..kratom. Skeptical at 1st as well definitely afraid of becoming dependant once again on any substance. I did my research...at that time widely available online..now I've noticed a ton of misinformation surrounding the leaf. False claims of Overdoses and misblaming plain leaf for the devastating 7OH product issues...and I would agree that 7OH has no business being as widely available as it had become. Although these products produce similar compounds an conversion of alkaloids. They are no where near the same product..this would be like saying that Tylenol amd percacet are the same..while they both have some of the same stuff in them..I think we can all come to the simple conclusion..they're absolutely different and as such have different options of modality. So many of us use this leaf for multiple areas of our lives. Personally it has given me my ability to provide a better life for my wife an daughter. This leaf has brought with it no and I mean 0 negative effects or outcomes from years of use. I feel no need to spend my entire paycheck on kratom..I don't barter beg or steal for this leaf. By making this absolutely incredible leaf a scheduled 1 drug you will be undoubtedly straight ruining lives..this is used as a addition deterant..can u become dependant..most certainly as ive become dependant on magnesium for a quality bowl movement..I am dependant on kratom to moderate my pain, ease my anxiety and stress. So, with all that..im sure none of this will turkey be read. But. For the love of all thats holy..or at least for the love of those who you know are suffering from one of the many ailments that kratom address an most always has a solution for..Leave Our Leaf Alone!! PLEASE PLEASE PLEASE

Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has significantly helped provide me with a safe alternative treatment for chronic pain. I obtained a lower back Injury while at my job over 5 years ago. Kratom is the only safe alternative that has helped me manage the pain in a productive way, and it has allowed me to live and function pain free. Kratom is an alternative that has also helped several individuals that ive encountered with very similar experiences. I absolutely urge the state of ohio to keep kratom legal and accessible for the well being of its citizens who depend on this natural alternative to live a normal and healthy life.
Hilliard	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has given me my life back. I was taking opiates for my bank pain for 10+ yrs with no hope of ever getting away from it. Until I found a plant that grows free in the wild, that allowed me to maintain a normal life, working every day, playing with my 4 children, and putting them through college. I realize people can turn any good thing bad. But you don't have to throw out the baby with the bath water. Please consider keeping this plant around. With the current opiate epidemic, we're going to need to help these people get their own lives back.
Louisville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Unless Doctors are going to start prescribing narcotics again, I would implore the board not to cut off the one legal avenue those of us with chronic pain have to function throughout the day/sleep at night. The Doctor's say: Take motrin or this muscle relaxer"- well that doesn't work for some of us. I've been taking two spoonfuls of kratom daily since early 2017, and I've never been sick, never overdosed or needed my stomach pumped. I've never felt stoned or high. I just feel...normal. Like a healthy pain free human *should* feel. And on the occasion I've missed a dose, I've never had a feeling of "withdrawal" I have no personal experience with withdrawals from hard drugs, but I know several people who used Kratom to kick heroin or a narcotics addiction. It goes to show most people *want* to get off the drugs, but are too afraid of the withdrawals and pain. I fear that outright banning Kratom will not only hurt our state's economy, but will drive people back to taking harder drugs or, like me- purchasing percosets and vicodins etc from family/friends/ acquaintances as I used to before I discovered Kratom.
Detroit-Shoreway	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom literally saved my life I have a back injury from being hit by a semi as a passenger in a car at age 18. At age 21 I was treated by physicians for my injury when it suddenly worsened and I was given opiates for pain that lasted until house bill 92 made it nearly impossible to find a doctor to write for me. By this point I was in so much pain I didn't care so when my uncle suggested kratom I was willing to try it. It literally saved me because I was able to work without pain. It also helped me get off the pain pills. With reasonable amount restrictions and enforced age limits it is not a danger to the general population but an answer to the opiate epidemic. House bill 92 was supposed to solve the opiate epidemic by restricting pain pills but instead turned many legit pain patients to the streets where they died. This bill will do the same.

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello, I have been taking Kratom for about 8 yrs., I have not increased the small amount that I take. I have a bilaterally fractured vertebrae. I was in a pain management program for over 10 years when suddenly my very own Doctor stopped practicing because he became hooked on much stronger opioids than what I was taking. So my next step could have been to Dr shop but with the black eye on opioids I felt that I would be ridiculed wherever I went. I don't want to be ridiculed, I just want to live life. I live in pain 24hrs a day. I work 9-10 hrs a day. No matter what is happening I still choose to fight back on that pain, go to work and be a tax paying productive member of society. After my Doctor stopped practicing I researched Kratom. I weened myself off of the pain medicine I was taking & began taking Kratom. I take it in small quantities. Taking Kratom along with over the counter NSAID medicines has gotten me through over 8 years without opioids. Kratom doesn't create highs for me, it relaxes my body just a bit and that little bit helps gets me through the day. I am not sure how I will get through your ban. Here is the problem, I abide by the law. If I am not allowed to purchase Kratom by law, I won't. The only people who will still use Kratom are the ones who don't abide by the law. So in the end the only citizens that a potential ban is hurting are law abiding citizens such as myself Thank you for your time.
Indianapolis	Indiana	2 - Oppose - Used to Treat Chronic Pain	I have had 5 back surgeries and am at a point where any further back surgeries are not an option according to multiple surgeons. Physical therapy no longer helps, steroid epidurals no longer help, and the chiropractor no longer helps. I have found that kratom when used responsibly helps tremendously with my chronic pain I suffer daily. I feel like it is a much better alternative to narcotic pain medications and with my experience has much less negative side effects.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am an Ohio resident of 47 years and a kratom advocate for the last 10 years. I use the raw leaf to manage pain from a back injury and to mitigate cravings for alcohol and other pain medications. I think scheduling or banning kratom would be a mistake. I believe overall it serves as harm reduction, as the alternatives have either worse side effects or stronger dependence profiles. Please do not restrict access to this natural product. -Matt

Bridgeville	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I am a delivery driver and farmer. I have worked hard for my wife and children for 40 years in the state of Ohio. I suffer from fibromyalgia for years now. Over the years I have tried all of the medicines that the doctors have prescribed to me. I have either felt worse from different ones or became addicted to some. So I decided to stop taking prescriptions for my disease and tried natural forms of pain relief. I discovered the natural kratom plant over 10 years ago and decided to order it and try. Not expecting much as I don't feel any better from the vitamins that my wife makes me take. But the kratom plant actually really helped me get through rough painful time periods. I was shocked. I do not want to be addicted to anything and am so happy kratom doesn't do that to me. I can take some if I need and I am fine not taking any as well. I agree it should be safe and regulated along with the natural kratom community. We all want it to be safe and regulated. But a ban would make me a criminal and thousands of other hard working Ohioans criminals overnight as well. Please follow the science and what the American Kratom Association has shown. We need to take away unsafe harmful forms but keep the natural leaf kratom plant legal and regulated like other products. I am a mother, a wife, and a hard working member of society. I am 43 and live on a farm in ohio. I have struggled with anxiety and depression my entire life. I have done therapy and had doctors try different anti depressants over the years but they just make me feel empty. I was skeptical when i discovered the natural kratom leaf over 10 years ago and was shocked how it made me feel normal. I put a little scoop in my juice with my wheat grass and it helps me so much. Being a relative of the coffee plant, it reminds of how I enjoy having my cup of coffee. I am fine if I dont remember to take it and fine if I do. It does not have addictive properties to me. It just helps me get through the day sometimes. The kratom community agrees to keep only the natural leaf legal. We also agree it should be regulated as everything else safe is. To ensure people are buying safe and natural forms. Please keep safe natural kratom legal in the state of ohio. Millions of good hard working Americans will be affected negatively if you ban it.
Bridgeville	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	This has helped me in so many ways I've been clean off of substance and due to my back in neck surgery deal with pain it's the best thing I've found that helps but our states going see it get worst instead of better more ppl will be dying our hospitals will be full of us for them not to help and not sure what to do like now other then suboxone in that's worst then even 7oh due to ppl abusing it all this can be taken responsible and us all keep kratom and 7oh just change some the substances plus people know there's been over 800 synthetic drugs threw the years in they just keep changing chemicals to keep it legal so help us don't hurt us. I was told I needed 12k to go to this rehab I got private health insurance it's good they don't take insurance and my credit it over 700 and it says I'm not available for the money to go get help like really idk why a bank will give me a loan why can't this place

Mishawaka	Indiana	2 - Oppose - Used to Treat Chronic Pain	Please protect plain leaf powder Kratom . Regulate it and protect this beneficial plant . Due to the restrictions on doctors to treat pain I currently depend on plain leaf powder for my chronic debilitating pain . I would have no qaulity of life and be unemployable due to limitations from my chronic pain conditions . The 7oh is the issues not plain leaf powder Kratom
Wauseon	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use kratom to avoid taking my medication mainly because we can solve 75-85% of chronic diseases I mainly used it to get off of it because my meds cause vision and mussel problems. Where I bruise easier from taking it because skin and body has a form of muscle mass. Look if I can live clean and an organic life with little chemicals in my body the better. " How To Cure Ulcerative Colitis Naturally Using My 'Renegade Gut Protocol' 5 major components of the new and revised Renegade Gut Protocol are: Correct fuel (natural organic diet rich in essential oils, nutrients, proteins, and free from processed foods, gluten, sugar, alcohol) Good bacteria (probiotics) Heal leaky gut (colostrum) Treat gut 'depression' (kratom) Mindset/Stress Management Follow these easy steps on how cure ulcerative colitis naturally: For the next 30 days eliminate all sugar, processed foods and gluten products from your diet completely. Eat a diet rich in essential fats and oils, nutrients and high quality protein, that is very low in starchy carbs. The specific carbohydrate diet, paleo or ketogenic diet are ways to follow this. Each morning on waking drink 4 cups of water (pure mineral water), 2 sachets of Visbiome and do not consume any solid foods for the next 1-2hrs. This helps rehydrate the body and soothe your digestive system. After 30mins – 1hr take two big tablespoons of colostrum. Allow it to absorb into your gums for 10-15 minutes, then swallow with water. For diet: follow the ketogenic, paleo or the specific carbohydrate diet depending on your preference. This is very low carb, moderate protein and high healthy fats and essential oils. Bone broth can be very beneficial for people with leaky gut and inflammatory bowel diseases like ulcerative colitis." this is from an attic and it's something I have here's a source of links to help my evidence. https://therenegadepharmacist.com/benefits-of-kratom/ https://www.amazon.com/Natural-Cures-They-Dont-About/dp/0975599518/ref=mp_s_a_1_1?adgrpid=56342101832&dib=eyJ2IjoiMSJ9.iIdbzJP4P5Oo9cPK2szIvehPMQ8U6kWoFb_IT67aMR1UrVIEZ52XMZf9Ihma7M1Ds4AFgEL0-bScYuXNXD2YPLqkxZNBn_k5E1NYkkkbIc2yzcTC4hMu_GxQWIzDtwRJJvXF6-K3hTFTLtk3zq_0SC39_mtUc26G69dTsxUk-n7ww6PeII4bZgsPx-tYPQLciOBJ2KJH_FLj1yS9207LIQ.e1xiIW1mZ7PyWa8Tfm0Pz3M1hmPkIlm4pgayzsoM-rU&dib_tag=se&hvadid=580871649821&hvdev=m&hvlocphy=9193720&hvnetw=g&hvqmt=e&hvrand=15382269469900642332&hvtargid=kwd-308448125165&hydadcr=22186_13327304&keywords=kevin+trudeau+natural+cures&qid=1732611698&sr=8-1 https://www.amazon.com/Natural-Cures-Medicinal-Herbs-Revealed/dp/B0B1HXV1NM/ref=mp_s_a_1_2_sspa?adgrpid=56342101832&dib=eyJ2IjoiMSJ9.iIdbzJP4P5Oo9cPK2szIv

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Newton Falls	Ohio	2 - Oppose - Used to Treat Chronic Pain	Criminalizing safe, legal, natural kratom products is completely misguided, and if you persist in this terrible action, you will destroy many thousands of lives of law abiding Ohioans who use safe, legal, natural kratom products to relieve life-destroying, intractable chronic pain. Those who suffer from the horrible disease of chronic pain, simply want to continue to engage in their lives and communities in meaningful ways. To willfully destroy access to these life-saving, safe, legal kratom products, is to willfully cause severe harms and many preventable deaths. Americans with life-destroying, incurable, chronic pain have been left with vanishingly few options to treat that pain. Kratom has been a life line that has saved countless lives that would otherwise be lost due to out of control pain - that not only destroys quality of life, but inevitably results in early, preventable deaths due to numerous, easily foreseen outcomes - including but not limited to heart attacks, strokes, endocrine failure, and suicide when a patient can no longer endure the unrelenting torture chamber that their own body has become. It will take decades to unwind the horrific harms of the war on patients in pain and the doctors who (used to) be able to treat them. For millions of patients, safe, legal, natural kratom products have been the safest - and only - option left to them. Using naturally occurring plant products to greatly improve one's health and well being, should NEVER be criminalized. We MUST stop the insanity of criminalizing various, random substances out of fear and ignorance - and by extension - those who use them. Prohibition has NEVER worked and WILL never work. It only ends in mass, preventable suffering and death, and a huge waste of public resources to try to "enforce" the violation of self-evident human rights: to life, liberty, and the pursuit of happiness. Do not continue down this disastrous road of criminalizing safe, legal, natural kratom products.
Louisville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I feel Kratom saved my life. I had an accident when I was 20 years old involving a semi truck, years of physical therapy and pain management, before I knew it I was on pain pills, strong pain pills that were prescribed for over 15 years! I had to have surgery for my neck and I just couldn't go back to taking pain pills! I found Kratom. That was over 15 years ago, I use it daily and have since had back surgery and never took pain medication once released from the hospital after surgery. I know there maybe horror stories but I am living proof that it works and I function normally and legally taking Kratom. I'm 50 years old now and I don't want to take pain medication. Please know, it saved my life!
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom helps me manage my pain without opioids, and actually helped me get off of them. Please don't ban it.

Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am 54 years old, have a bachelor's degree from Miami University and a master's degree from Xavier, and have been teaching now for over 20 years. I am a good husband and a proud father, and my two children are both now in college. I have supplemented with natural, plain leaf kratom for about 15 years for lower back pain that I have suffered since my late 20s. I lead a productive life, and take care of many people around me. I do not supplement with kratom to be "high". I do not purchase it in gas stations or "head shops." I order it from a company who conducts lab testing, follows GMP practices, and I always check their reports before purchasing. Because my health is important to me. One teaspoon in the morning and off the school; one before bed. That's all. Never more. I am perhaps not the person that I believe many of you envision when you think of people who use kratom. But there are many of us, and banning kratom is going to hurt us. It is an unnecessary overreach and it ignores a lot of quickly emerging science on this plant. I have read the research coming out of the University of Florida, mainly the work of Dr. Grundmann, and I follow the science because I would never ingest something that would harm me. I am very conscious of my health and frankly I think I look pretty good for a 54 year old. I walk three miles a day, I work out twice a week, and I wrangle hundreds of teenagers every single day. Kratom allows me to do this. Without it I may be bedridden, or at least overly medicated. There is no way I could live the life I am living now. Please. You have already banned the concentrated chemical that was causing people harm. And I agree with that policy. Banning 7OH products seems sufficient. Please allow those of us who use natural kratom responsibly to have access to safe, unadulterated products that improve our lives. If this is taken from me, I will be back in daily pain or back on the myriad prescription drugs that doctors have thrown at me over the decades that do little to relieve my back pain but much to make me feel tired and ill, and ultimately take me away from the people I love. You have a chance to help people like me. Or you could hurt me and the people I love. Please don't make this choice lightly.
Lancaster	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has improved my quality of life with chronic pain and depression my quality of life would be way worse without it.

Hilliard	Ohio	2 - Oppose - Used to Treat Chronic Pain	Plain unadulterated kratom leaves are not the problem, 7oh is and without a doubt should be scheduled. Please don't take away this wonderful plant that has given so many of us our lives back. Understand, you will kill people if you schedule kratom as they will be forced to go back to deadly addictive opioids. A brief summary of my story: After multiple surgeries I became severely addicted to opioid pain medication, I sought professional help and have been free of pain meds for 9 years now. In 2020 I was diagnosed with Lupus so I researched alternative treatments for the symptoms of Lupus and that's how I found kratom. Since I've been using kratom I've been able to live a normal and prosperous life. If I didn't have this plant I would absolutely be on a disability and a strain on taxpayers. There's something very different about this plant as I was unable to use pain medication responsibly but with Kratom I have no problems with wanting to take more and more, plus I can function so much better as kratom doesn't fog my brain and instead has a stimulant effect. Please make your decision based on the scientific data which so far has shown pure kratom leaves to be quite safe, and has considerable less potential for addiction than traditional opioids and appears to be incredibly difficult if not impossible to overdose on. The WHO examined the data and came to the conclusion that scheduling was not justified as well. Please make your decision based on science, not because some greedy individuals found a way to make a lot of money by creating a terrible and dangerous drug, 7oh. It's not kratom and shouldn't even be considered in the same ballpark as kratom. Again, you will ruin thousands if not millions of lives if you take this plant away from responsible users that rely on it to live a normal life. Thank you for your time.

Fairfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	Dear Members of the Ohio Board of Pharmacy, My name is Alex Latanza, and I am a resident of Hamilton Ohio. I am writing to provide public comment regarding the proposed scheduling of mitragynine (natural kratom) as a controlled substance. I work as a brick mason, a profession that requires intense physical labor day after day. Like many people in physically demanding trades, I experience chronic pain as a result of my work. Natural kratom has allowed me to manage that pain safely and continue working, without relying on prescription opioids or other pharmaceuticals that carry significant risks of dependency and overdose. In fact, I was in a position where I had to use pharmaceutical pain medications to combat the pain and the repercussions were abysmal. I was in full blown addiction with pain medications and the side effects were atrocious. I know this to be true of countless others who do laborious jobs for the State of Ohio, as well as several Military Veterans. Natural Kratom is the only answer we have found to be able to have any quality of life. To rip that solution right out from underneath us and to criminalize us overnight is truly a slap in the face to both the tax paying people who work hard day in and day out for this State, as well as those who have fought for this country. For many people in construction and skilled labor, traditional pain management options often mean choosing between working in pain or using medications that impair function, carry long-term health risks, or create dependence. Kratom has provided me with a functional, non-intoxicating alternative that helps manage pain while allowing me to remain productive, responsible, and present at work. I am deeply concerned that banning natural kratom would push working Ohioans like me toward far more dangerous options, including prescription opioids or illicit substances, which pose well-documented public health risks. Rather than improving safety, an outright ban would remove a lower-risk alternative that many of us depend on to stay employed and healthy. How is it that alcohol is able to remain an accepted, and often celebrated decadence, but there is a witch hunt on kratom users? The data is very clear on the atrocity that is alcohol, with little to no adverse data on natural Kratom, and yet Kratom is the substance under fire here? It does not make logical sense and countless Ohioans are wondering what the bigger picture is here. Please take the time to review the true science that is available out there regarding the safety of natural Kratom vs. alternative options and take part in discussions with the pro-Kratom parties as opposed to just the Anti-Kraton groups who can't seem to differentiate 7-OH and other synthetics against natural Kratom. There seems to be a lot of misinformation being thrown around and we need our leaders to be able to embrace truth. I respectfully urge the Board to consider regulation instead of prohibition, including product quality standards, labeling, and age restrictions, rather than criminalizing a natural substance that many adults use responsibly for pain management. Thank you for your time and for considering the real-world impact this decision may have on working Ohioans. Sincerely, Alex Latanza Hamilton Ohio Dear Members of the Ohio Board of Pharmacy, My name is Katie Collier and I am a resident of Liberty Twp, Ohio. I am writing as a concerned citizen regarding the purposed scheduling of mitragynine (natural kratom) as a controlled

			substance. I have been using natural kratom for a number of years to help manage chronic anxiety and depression. I originally tried to manage these conditions with pharmaceuticals, but as you know, these options are limited and cause severe unwanted side effects, emotional numbness, and carry risks I am uncomfortable accepting. Kratom has provided me with a gentler, more manageable alternative that helps stabilize my mood and allows me to function more fully in my daily life. It is easy on the body, non-intoxicating, and does not have the side effects seen with pharmaceuticals. I get up and go to work everyday, pay tax payer dollars, and am a functioning part of Ohio, as are most kratom users. To take away this safe, therapeutic option shows that the narrative is getting tangled up in 7 OH space by a few bad actors, and the true science of natural kratom is not being followed. The CDC website even states that risks of mitragynine is extremely low with many researchers and medical experts "debating whether the substance alone is truly capable of causing a lethal overdose without other contributing factors." In fact, there is "no annual number sole-kratom deaths due to its rarity." This is all found on the CDC website. And yet, this Anti-Mitragynine agenda continues to be pushed by individuals who don't take the time to realize the real villian is 7-OH, which has now been banned, thus problem solved. To group natural mitragynine in with 7-OH is pushing a narrative and not following the science, and that is leading us into a dangerous, control hungry landscape. Mental Health challenges are already widespread, and removing access to a safe tool that adults use responsibly could have serious unintended consequences. I am concerned that banning natural kratom will push people towards illicit substances or pharmaceuticals, which is great for drug dealers and Big Pharma, but an absolute catastrophe for Ohioans. This will be a profound catalyst in increasing extreme risk in this State, rather than reducing harm. And this isn't just my opinion, it also is the stance of the Federal HHS who has already discussed with Ohio why banning natural mitragynine is not a safe and effective policy. I fully support reasonable regulation to ensure product safety and consumer protection. However, criminalizing natural kratom would take away an important option for individuals who are simply trying to manage their mental health, maintain stability, and manage pain. I respectfully ask the Board to consider science-based regulation rather than prohibition, and to recognize the role natural kratom plays for many Ohioans in supporting mental health and quality of life. Thank you for the opportunity to submit this public comment. Sincerely, Katie Collier Liberty Twp, Ohio
Troy	Ohio	2 - Oppose - Used to Treat Chronic Pain	Helps so much cuz they are not prescribing my tramadol that had worked for years so this was my only option to have a better quality of life b able to work and take care of my son don't know where I would b without it
Troy	Ohio	2 - Oppose - Used to Treat Chronic Pain	I can kind of see getting rid of the 708 but as a long-term chronic pain patient those done more for me and I was less sick and everything else and needed to take less pills. As for the herbal base non-synthetic stuff out on that is just silly given the relief and help that it gives to everyone and now that's what I'm stuck with and giving its lower potency I have to supplement it with the pain pills which I'd rather not have the pain pills

Avon	Ohio	2 - Oppose - Used to Treat Chronic Pain	To Whom it May Concern: I have been a regular kratom user for 10 years. I do not drink nor use any drugs. I use natural leaf kratom for sciatic nerve pain and it has offered me a quality of life I would not otherwise have. I would like to ask the pharmacy board to reconsider their scheduling of natural leaf kratom and allow Ohioans to make their own choice whether or not to use the supplement. Thank you. Banning natural kratom would be a huge mistake and cause even more heroin addiction/fentanyl deaths. This is what use for pain instead of taking pain pills. I have heard many cases where this gets heroin addicts off that drug. This should not be a schedule 1 drug. This is a natural leaf. This has helped many people I know come off of opioids and to come off of suboxone. I have pain due to herniated disks and was addicted to Vicodin and tramadol. Kratom has given me my life back and has gotten my off of prescription drugs. I feel it can be regulated but to ban it as a schedule 1 drug is insane and the medical evidence does not support a ban. There is an underlying agenda that needs to be brought. Banning kratom will HURT the people that use it responsibly and may turn to harsher drugs if banned .

Warren	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello my name is Cody love and I am here speaking about 7 hydroxy. First and foremost my main issue is I have grown adults trying to tell other grown adults what they can and cannot do. I want to say I think it's bull crap that you guys put a emergency ban on it. I thought this was America? I don't understand how the state of Ohio is going to tell a group of adults in Ohio who pay their taxes who go to work and abide by the laws of Ohio what they can and cannot do. I take the 7 hydroxy because I have severe pain. I'm also recovering heroin addict. My addiction started at 15 and 1/2 years old when I got injured and was put on high milligram oxycodone as a child. It took me 11 more years of ruining my life to finally get my head out of my butt and change. I've been sober for 6 years now. I have a family and I have a career in the Union. I have many pains all over my body and every time I go to a doctor even with me telling them about my addiction they want to put me on opiates. I do not want any of your pain pills and quite frankly I don't trust Pharmaceuticals or doctors quite frankly I don't trust you Mr dewine. You know the seven hydroxy is so big in the recovery community because they don't have to worry about fentanyl being in it. Also if we're just being honest with herself we know what the real issue is, less people are going to treatment less people are taking your guyses to boxing and Subutex and methadone and you guys see all the money that's going to different companies for the southern hydroxy and you guys either want in on it or want it to be gone and you can't convince us otherwise. Like I said I thought this is America I really just don't understand how you politicians are going to sit up there and make decisions and say it's for the better of our health but really you don't care. You guys need to leave the Kratom and the Seven hydroxy alone because at the end of the day if people want it they're going to go and get it. You guys have been making the War on Drugs since what the 60s look how that turned out. As long as there's a demand for it there will be a product. Quite frankly you guys have had this band on the hydroxy for 3 weeks now and it doesn't matter because we're still able to get it just because you tell us we can't have it doesn't mean we're going to listen but we would appreciate it if you just leave it alone. All you're doing by Banning it is pushing people who take it right back to heroin and there's no real heroin it's all Fentanyl and we both know that so please don't play Dom and act like you guys don't know what you're doing we all know what you're doing and we can see it

Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Subject: Public Comment Opposing Scheduling of Mitragynine – Personal Testimony in Support of Regulation, Not Prohibition Dear Ohio Board of Pharmacy, I am a 52-year-old Ohio resident on SSDI due to severe, debilitating chronic pain and multiple spinal disabilities, including: Degenerative Scoliosis Chronic Anterior Wedging (T7-T9) Moderate and Severe multilevel discogenic disease (Thoracic) Significant Foraminal Narrowing (Thoracic) Multiple posterior disc bulges (Thoracic) Herniated Nucleus Pulposus (Thoracic) Anterolisthesis and Spondylolisthesis (L4 on L5) (9 mm) Moderate DDD (L3-L4) Severe DDD (L5-S1) Severe facet joint arthropathy (Lumbar) Severe L and R Foraminal Stenosis Multiple osteophyte complexes Chronic Sciatica/pain radiating to hips, knees, and feet Spinal stenosis, lumbar region with neurogenic claudication Radiculopathy Paresthesia (feet, legs, upper thighs) Fatigue Headaches Concentration/Focus issues Muscle spasms (entire back) Factor V Leiden precludes me from surgical intervention. For years, I have safely used only pure natural leaf kratom powder to manage these symptoms and maintain limited daily function, without adverse effects. Kratom (Mitragyna speciosa) is a member of the coffee family and has been used for centuries in Southeast Asia for its energizing, pain-relieving, and mood-stabilizing properties. Its traditional use as a tea, chewed leaf, or powdered remedy dates back generations—particularly in Thailand, Malaysia, and Indonesia From 2012 to early 2017, I was prescribed opioids, with increasingly high doses up to 360 mg/day of instant-release oxycodone, which I successfully weaned myself off independently before discovering kratom. In 2019, a severe fall down the stairs reversed years of physical therapy progress, exacerbating these conditions and leading to my SSDI status. Since then, pure leaf kratom has been essential for pain relief, reducing muscle spasms, improving focus and energy to combat fatigue, and enabling some basic daily activities—serving as a safe alternative to the synthetic opioids I escaped. I fully support the recent ban on synthetic 7-hydroxymitragynine products. Those are pharmacologically distinct and detrimental. However, scheduling natural mitragynine—the primary alkaloid in unprocessed or safely processed leaf kratom—as Schedule I would equate it with these dangerous synthetics, ignoring extensive peer-reviewed evidence of its relative safety and utility for conditions like mine. Peer-reviewed studies demonstrate kratom's effectiveness for chronic pain management, including back pain, sciatica, radiculopathy, and neuropathic pain: A 2024 study in The Journal of Pain found that nearly half of kratom users met criteria for chronic pain, with many reporting substantial relief and high effectiveness, often due to difficulties accessing adequate traditional treatments. A randomized, placebo-controlled study showed kratom significantly increased pain tolerance in a cold pressor task, supporting its analgesic properties. Preclinical research indicates mitragynine reduces chemotherapy-induced neuropathic pain via opioid and adrenergic mechanisms, relevant to radiculopathy and sciatica. Multiple reviews position natural kratom as a harm reduction tool for opioid alternatives in chronic pain, with low to no respiratory depression risk as opposed to classical opioids. Numerous media stories and government briefings mention Kratom in connection with overdose deaths. These reports, however, routinely fail to separate: Pure Kratom use, vs. Polydrug use, where Kratom was present alongside fentanyl, heroin,

			benzodiazepines, alcohol, or other substances. The National Institute on Drug Abuse (NIDA) itself clarified: “In many cases of reported Kratom-associated deaths, other substances were involved.” A detailed FDA review of Kratom-related deaths showed only one case where Kratom was listed as the sole substance—and even that lacked proper toxicology data and may not have ruled out other causes. Postmortem analyses confirm kratom-involved deaths overwhelmingly involve polydrug use (e.g., fentanyl), with no confirmed fatalities from pure leaf alone. Also, no peer-reviewed publication has confirmed a single death from pure Kratom leaf only. Natural leaf kratom's "ceiling effect" (high doses trigger vomiting) and low potency (trace 7-hydroxymitragynine) contribute to its favorable safety profile in traditional use, with no confirmed monotherapy fatalities from pure leaf alone. In the 1940s, the Thai government banned Kratom not because of public health concerns, but because it was competing with the opium trade—which was heavily taxed and state-sanctioned. This historical ban was rooted in economic control, not science. We are now seeing eerily similar motives emerge in the modern West, where Kratom—a natural plant that helps wean people off dangerous opioids—is facing bans and scheduling efforts that serve corporate pharmaceutical interests rather than public health. A blanket ban on natural mitragynine would force me—and countless Ohioans with similar spinal conditions—back toward synthetic opioids, risking reentering the physical dependence cycle that I escaped almost a decade ago. Ohio has an opportunity to lead not through punishment, but through regulation with integrity. I implore this Board and all who read this: Do not conflate Kratom with synthetic designer analogs. Do not deny Ohioans a natural plant that has saved lives. Do not destroy a path to healing just because it doesn't come in a pill bottle. Advance the Kratom Consumer Protection Act (e.g., HB 587/SB 299) for regulation: mandatory testing, labeling, age restrictions, and bans on synthetics only Set standards. Enforce quality. But do not schedule mitragynine as found in pure leaf Kratom. Because to do so would be to criminalize the very thing that helped so many of us break free from the real danger—pharmaceutical dependency. Also, it is imperative to state for the record that the use of a SurveyMonkey questionnaire by the Ohio Board of Pharmacy cannot, under any circumstances, serve as a lawful substitute for a formal public hearing as required by Ohio Revised Code § 119.03(B). That statute mandates that "any person affected by the proposed rule" be given the opportunity to "appear and be heard in person, by their attorney, or both, at the hearing." A digital survey—lacking the capacity for live testimony, contextual clarification, or inclusion in a formal hearing transcript—does not satisfy this statutory requirement. If the Board proceeds without scheduling and holding a proper public hearing within the required 31–40 day window post-filing, this entire rulemaking process risks being procedurally defective and legally unenforceable. This is not a technicality; it is a foundational legal safeguard that protects Ohioans from administrative overreach and opaque rule changes. Finally, I question the timing of the following: November 12, 2025: Representatives Odioso, Lorenz Introduce Kratom Consumer Protection Act. December 29th, 2025: Governor’s office clarifies natural leaf Kratom is not part of the Synthetics ban. The Governor’s Executive Order specifically exempts natural kratom in vegetation

			form. January 6th, 2026: natural kratom leaf considered for scheduling. Thank you. A permanently disabled SSDI recipient in Ohio.

Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom in its natural form and the extracts save lives. 7oh is addictive, however kratom and kratom extracts are safe. I know numerous people who are able to be a more productive members of society thanks to kratom. It helps with pain, anxiety and depression. Taking this away from individuals will lead to way more harm than good. The very small amount of people who have problems with it are either taking entirely too much or are using 7oh thinking it's kratom. Please don't take away the one thing that 99% of users have improved their life and their families life. The remaining 1% should not ruin it for the majority who use it responsibly in its natural or extracted form. You can take 7oh away, but please don't touch the real kratom products. Even 7oh, when used responsibly, can be safe. However most individuals find it too addictive to do so. Please differentiate the two. 7oh in not kratom. That is the issue and why there has been so much public outcry lately. Understand there is a huge difference them. Thank you.
Maineville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using Kraton on and off for 6 years. Kraton has radically changed how I am able to function in my life. My life changed after being prescribed opioids after several back injuries during my time in the military. I was on and off opioids for the couple years in the military. And then constant prescription opioid use after I got out. It turned into an addiction that ruined my life. I knew I had to stop taking opioids but I had no way to manage to recurring pain, that at the time could be debilitating. After lots of research I found Kratom, and the Kratom community. I started Kratom roughly 6 years ago and it has been life changing. Kratom allows me to deal with pain effectively without being "high" and unable to function properly. I've been able to rejoin the the work force and turn my life around. I wish I had a better platform to tell a more detailed and intimate experience, but this short comment will have to suffice. I am not ignorant to the fact that Kratom is not a miracle fix for people's problems, and does have side effects. But kratom products (primarily loose leaf/powder) are all natural, and infinitely safer than any opioid on the market. Let be honest, giving government any control or regulatory power has resulted in overreach EVERY SINGLE TIME. Ohio may say they just want to regulate or ban only "synthetics", but what will ultimately happen is you will ban or regulate (read; make impossible to obtain) Kratom in every form. Doing this will affect the lives of all Keatom users in Ohio. Many will ultimately return to using prescription opioids or worse. Let Ohioians make their own medical decisions and be responsible for their own lives. We DO NOT NEED more regulation, especially on Keatom products.

Maineville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Under the right dosing this substance can improve your life when drugs given by doctors for pain are not working for you or not even given to you. Until doctors figure out how to take back their power and start prescribing chronic pain patients the appropriate medicine again, this is all we have. I would have suicided years ago if I hadn't found this thing I can use on my own, using my own personal decisions and experience, to keep the pain at bay. Please do not doom us all to street drugs with fentanyl in them. Please help us instead of further marginalizing our lives. We'll never disappear, you can't hide us anymore, there's too many people in badly managed pain now to hide us all. Over a million people are using this leaf to better their situation in life and you're all ready to take that away. Figures. Tell me you want more prisoner for funding without being that honest about it, right?
Detroit	Michigan	2 - Oppose - Used to Treat Chronic Pain	Please do not ban Kratom in Ohio!! It is a product I use almost every day. I personally use it in the morning instead of coffee. Its slow release of engery help give me steady energy & keeps me from drinking a ton of coffee. I also use it when I go to the gym & after the gym as it helps a lot with pain in my knees & back. I know a lot of older people who swear by Kratom as it helps them get back on the golf course & brings back a great sense of life without pharmaceutical drugs. I understand there are versions of the product that have been getting abused. But those products are not the plain raw leaf form that is basically a tea. Those abused products are from extracts & come in pill & liquid form. Why not just ban the extract forms & not the raw leaf versions? Comparing powder raw kratom to the extracts like 7-OH, is like comparing coffee or tea to Moonshine! If you ban all forms of the product, you will terribly harm people in chronic pain, the elderly & those folks like me who use it as a coffee & Advil replacement. The solution is easy. Powder = Good. The Extract is Bad. Thanks!
Kent	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use plain leaf kratom for chronic pain. I have 3 herniated discs,spinal stenosis,and degenerative disc disease. I was on opiates for 12 years and stopped taking them because of the side effects. I found kratom and found it to be a much safer option with less risk and side effects. I don’t abuse kratom, I don’t use extract,or synthetic kratom,my concern is only with plain leaf kratom. I believe a lot of people are in the same situation as me and it will be detrimental to all of our situations if you make kratom illegal.
Batavia	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom such as this helps people that deal with pain in a major way. This is the only that naturally helps without having to be on a ton of other medicine that pumped full of things not good for you. Many people can’t afford doctors and the medicine prescribed so this is the only thing that people like me who has chronic pain everyday can afford. Taking kratom such as this helps me make it through my long hours at my very physical job. Many people could and would lose their jobs if this
Hamilton	Ohio	2 - Oppose - Used to Treat Chronic Pain	Many of the older folk around me use kratom to suppress pain and help with sleep problems. To have that taken away is quite harsh.

Covington	Kentucky	2 - Oppose - Used to Treat Chronic Pain	I am a licensed physician in Ohio submitting this comment in my personal capacity. I have lived with chronic back pain since my mid-20s due to degenerative disc disease and arthritis. Over the years, this condition was treated, appropriately at the time, with multiple opioid medications. Like many patients, I experienced firsthand the limitations, risks, and long-term consequences of opioid-based pain management, even when used as prescribed and monitored. Several years ago, I made a deliberate decision to discontinue opioid therapy and transitioned to the use of kratom as part of my pain management strategy. For me, kratom has allowed meaningful functional stability while avoiding escalation back into opioid treatment. I remain fully employed, clinically active, and cognitively intact. I do not misuse opioids, and I have no desire to re-enter opioid therapy or medication-assisted treatment pathways. That is not a direction I will take. The proposed rule would remove what has been, for me, a harm-reducing alternative and replace it with no acceptable substitute. The assumption that individuals in my position will simply transition to opioid medications, buprenorphine, or methadone reflects a misunderstanding of patient autonomy, clinical nuance, and lived reality. Many of us will not make that transition, and the consequences of forcing that choice are foreseeable. I am concerned that this rule, while well-intentioned, risks pushing stable individuals toward less safe outcomes, including unmanaged pain, functional decline, or a return to medications with higher morbidity and mortality. These are not abstract concerns. They are predictable clinical outcomes. I urge the Board to reconsider an approach that treats kratom as a monolith rather than distinguishing between high-risk formulations and responsible, informed use by adults. A regulatory framework focused on safety, quality control, and targeted restrictions would better align with the Board's mission than an outright prohibition that removes patient options without offering viable alternatives. Thank you for considering the real-world clinical and human impact of this proposal.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am writing to express my support of keeping MITRAGYNINE, the active alkaloid in natural, whole leaf kratom LEGAL and ACCESSIBLE in the state of Ohio. I have been using natural kratom products for about 6 1/2 years. It has helped tremendously with various physical and psychological issues and has caused no serious side effects or problems. When taking responsibly, kratom is a safe and effective substance which has helped millions of Americans, including thousands of residents of Ohio. Thank you.

Morrow	Ohio	2 - Oppose - Used to Treat Chronic Pain	Though it is understandable to have a higher degree of regulation within herbal alternative space. Kratom has a long history of providing ease and comfort for people whose only option, previously, was to search out harsh pharmaceuticals. It is my personal experience. With myself, as a recovered addict and my mother, who stuffers from degenerative disc disease and my father who suffers from cancer. All of us at different times were prescribed pain medication from FDA approved sources. These medications caused a great deal of harm and dependence. With long term effects still felt today. If this was only a conversation about synthetic, extracts or underage sales, we would all agree in restrictions. As adults, though, we ought to have bodily and medical autonomy. For the State to continually push for further criminal penalties on an herbal alternative for pain, inflammation and opiate addiction - the States motives are extremely suspect. Weither it's the pharmaceutical lobby that attacks any "competition" or the prisons lobby that benefits from additional "opportunities" for incarceration. The kratom community is not and should not be made into criminals. It's my request that you give serious consideration to the lives that could be saved by simply restraining your pen. There is no need to make criminals out of everyday people. This, in my opinion, is not a war for public safety. This is a war on people's freedom to choose what is best for their personal health. I am pro-kratom. All we ask is to be given the dignity of decision. Thank you and God bless.
Toledo	Ohio	2 - Oppose - Used to Treat Chronic Pain	I oppose a ban on kratom. Kratom has helped me by reducing chronic back pain I've had for a majority of my life. I don't want to have to use pain reducing opioid prescriptions.
Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	Due to chronic pain Kratom has been the only thing that I can use to help. Opiates are way too potent and I can take breaks from Kratom since I use such a low dose. I have been using it for over 10 years without any ill effects. Banning it now will only make life more difficult and my only option will be to turn to pharmaceutical opiates which I absolutely do not want to do. This plant has saved my life from constant misery and putting it in the same category as fentanyl is absurd.
Medina	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use kratom daily for pain management, anxiety, and a better sense of well being. I'm in need of a knee replacement and can't have due to work. And doctors don't prescribe pain medication anymore. I am 43. A responsible and working citizen. Both my elderly parents and grandmother use it also for pain management. Drs also don't prescribe them anything either. You guys are going to be ruining all of are quality of life. If you are truly concerned about safety go after alcohol and tobacco.
Valley City	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello, I am a 58 year old grandma/mother, who has been using Kraton for the past 6 years to help deal with pain issues and sleep. To remove Kratom from consumers would be highly detrimental as many would have to return to using opioids instead.

Lowellville	Ohio	2 - Oppose - Used to Treat Chronic Pain	My name is Paul G Smith Jr. I have severe back issues. I have been taking kratom for 9 years so I do not need to take opioids for the pain. The making of natural Kratum illegal places me in a very difficult spot. I have periodical back procedures done to reduce pain. But those bring only temporary relief. I have had no issues with Kratom as it is a safe and effective way to reduce pain, making life livable. Thank you
Medina	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am 67 years old and have been taking Kratom powder for chronic pain off and on for 8 years, and I have had zero side effects. I tried taking opioids, and have had reactions to them, and felt them risky, not to mention so hard to get. So I turned to pure Kratom powder and it has brought me the Releif I needed. It doesn't cause respiratory issues like opioids do, and I don't run the risk of overdose issues like opioids. Please don't criminalize Kratom in its pure powder form. The synthetic stuff needs to be stopped as I can see where it could be dangerous, but the pure Kratom powder does not have any risk. Of course aspirin, if misused or abused can cause death and severe damage if abused, so I imagine Kratom might be dangerous also if abused. But if we go around making everything that is dangerous if abused, then a large portion of the over the counter medicines, and of course alcohol should also be criminalized. Please let science be your guide as Kratom, if used properly, is beneficial and safe to use. Thank you
Proctorville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Making this illegal would cause many problems the kratom plant is benefiting many peoples for things such as pain depression focus mood and energy I have been taking it for about 7 years me and my husband and we both work full time jobs and have very productive lives we go to Chucrh and pay 10 percent of our tithes obey the law and believe that this plant can be used to help Americans in many ways the kratom leaf and plant have been around in other countries such as Thai and have been found productive over the years in their ongoing research banning this would be a devastating blow that we do not want or need ! Thank you for listening..
North Lima	Ohio	2 - Oppose - Used to Treat Chronic Pain	I take Kratom when I am in pain or when I'm on my cycle I do not abuse it. There are too many studies on ibuprofen and aspirin that causes profound side effects. This is a healthy alternative it even helps with depression. Why aren't your banning the opioids from big pharm? We all k ow they have been sued numerous times!
Massillon	Ohio	2 - Oppose - Used to Treat Chronic Pain	This is bull crap. How about you all not tell people what they can and can't put in their body. This has been a life saver for me. Not cool. I'm a veteran, and have chronic pain and have been able to avoid pain management because of it. Thanks a lot. I know where my vote will go if you ban this. Don't you have more to worry about?
Massillon	Ohio	2 - Oppose - Used to Treat Chronic Pain	Mytragynine helps with chronic pain. People should be allowed to take it if they want. Just put an age restriction on it.

Ashland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I'm a 75 year old male who has been diagnosed with a rare disease called Charcot Marie tooth. I have tried using pharmaceutical drugs (lyrica 300mg a day and gabapentin 3200mg a day). I tried using these drugs for 20+ years getting little to no results. I was introduced to red maeng kratom 2 years ago and the results are remarkable. I know that the pharmaceutical drugs were very hard on my liver so I was so happy to find something THAT WORKS and is natural. Please don't make Kratom a schedule 1. The pharmaceutical industry does NOT need to have their hands in this too By the way, I don't get a buzz and can drive and buy my kratom from a reliable source
Youngstown	Ohio	2 - Oppose - Used to Treat Chronic Pain	I would ask that Kratom not be banned and scheduled as a controlled substance. Having the ability to have access to Kratom is an absolute lufe savor for so many people who are suffering from Chronic pain. While I understand there has been some issues with people overdosing, I believe you will find that they were not using true kratom, nor a clean version of Kratom. Those people were taking substances that were mixed with unknown chemicals and buying products that were falsely advertised as Kratom. Due to the DEA sticking their nose into our medical care, we are now.forced to take medications that are off label in treating pain. Some of those medications, such as gabapentin, where the maker are being sued becaus they falsely advertised their medecine to be used for treating pain, and the side effects were abhorrent. Vision loss, memory loss, and the inability to speak properly. Just to bame a few. There is also psyche medications being prescribed iff label for pain. Basically doctors are now prescribing medications that are.not indicated to treat pain in order to avoid writing safe opiod perscriptions in avoidance of dealing with the DEA. Full agonist opiods are definitely proven to be safe when both prescribed and used for pain legally. Since our government took the medical field in am entirely opposite direction, patients are now receiving Tylenol only aftercare for surgeries and are being perscribed.everything other than what has been proven to work to control pain. We all are getting older. We all are but 1 accident away from needing medical care that would in fact require pain control. We are moving backwards in our medical care and we are unnecessarily making patients suffer. While true Kratom is not as effective as a full agonist opioid, it does relieve pain and is much safer than seeking illegal substances and taking a handful of persrcribed medications that were never indicated for the treatment of pain. Even the steroid injections that doctors are pushing are not FDA approved and any injections into the human body are considered off label by the makers. Please consider the detriment you eill cause to the thousands of people by taking away the last hope of having a functioning life on a day to day basis for people trying to relieve their pain.

Mentor	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have taken Kratom since 2019. I live with severe chronic back pain. I have struggled to find a doctor to help keep my pain controlled. Kratom allows me to work, function, enjoy my kids and watch my grandson. Without it I will be bedbound to a heating pad. I get my labs done regularly and everything is normal. Please don't take my quality of life away. Taking Kratom will hurt so many in the chronic pain community. I have been taking kratom since 2019. I suffer with unbearable chronic back pain. I have spinal stenosis . Kratom allows me to work, socialize, be the mom and grandma to my first grandson. I get regular check ups and bloodwork through my doctor and all my work ups are normal. Kratom has been a safe pain relief for me. Without my life will drastically change. Not for the better. I'm begging to please think of all the chronic pain people this will affect. This can ruin so many people's quality of life. I don't want to live in pain. I didn't ask for this life Its been a blessing have kratom provide me some normalcy.
Bath	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am married to someone with chronic pain, depression, anxiety, and recently cancer. He has tried the medical marijuana and to take enough to be effective he ends up high and he hates that. (He's a child of the 60s and dabbled in drugs back then.) Kratom dulls his pain and anxiety. I can tell if he has had marijuana, Kratom, or nothing just by his behavior. Kratom is by far the best thing for his quality of life, almost as good as what his doctor is allowed to give him, and no side effects. A natural deterrent to overdosing is either nausea and vomiting or constipation. After 10 or 15 years of intermittent use he is still able to stop if we travel to a state that outlaws Kratom, with less adverse effects than caffeine withdrawal. We have had a better life the last 15 years than the prior 30 years thanks to Kratom. Outlawing Kratom will tarnish his golden years, and by association mine as well. Please do NOT outlaw, but regulate Kratom so everyone is safe. I wanted to share my personal experience with kratom to provide you a perspective of how it helps me. I worked as Senior Manager of Forecasting and Supply Chain Analysis at a Fortune 200 company. Additionally, I taught mathematics, statistics and quantitative analysis at several local universities. I have had osteoarthritis in both hands for many years. While teaching, taking a small dose of kratom before class would alleviate my pain sufficiently so I could lecture comfortably and endure hours of time spent working individually with the students. Kratom allowed me to extend my working career for several years. Since I have retired, my wife and I have become active in clothing and food ministries at our church that help relieve suffering in those less fortunate in our area. Any work in these areas would be significantly hampered if I could not get some pain relief from the small dose of kratom that I take daily. I would respectfully ask that you reconsider the scheduling of kratom as I would prefer to avoid OTC analgesics. Thank you very much for your consideration.

Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	A ban will harm many people who use the substance to help with minor pain and sleep. Completely unnecessary and does far more harm than good
Batavia	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have utilized Kratom leaf for over 5 years for pain relief. This plant in the coffee family has helped hundreds of thousands of Ohioans to avoid prescription pharmaceutical pain medication. A plant that has zero risk of demise, has kept many off of synthetic opiates. Research on any social media website, "Kratom saved my life." Aside from that, this legislation would instantly make thousands of Ohioans an immediate felon. Please take this into consideration. Many of us do not wish to be prescribed pharmaceutical drugs. Only a simple plant. It is nothing to you, it is important to us. Speak on our behalf.
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 46 year old manual labor worker, I am self employed in outdoor property maintenance. Despite having a couple back surgeries which failed to alleviate chronic low back pain, I have been able to sustain my career without the use of pain management services for 6 years now with the use of plain powdered leaf kratom. In that time frame I have stopped the use of alcohol and ended reliance on THC based pain treatment. The natural Kratom that I limit myself to reduces my pain levels reliably without the dangerous mind altering effects THC and alcohol induce. I have not and will not ever try the synthetic or concentrated mitragynine based products as long as I have access to the natural leaf powder. I use a set dosage that I have not increased in the 6 years of use. I actually backed off my original dosage because there is a self-limiting reaction commonly called "wobbles" that makes overuse uncomfortable. I understand the desire to protect the market from companies all to willing to push the mind altering effects in order to create an addicted customer base similar to the alcohol industry. I would hope that this protection would extend an understanding towards responsible parties that rely on the availability of choices in legal self care. Thank you for considering an approach that would preserve personal freedoms and protect against corporate poisoning for profit.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom is a very amazing plant it helps me everyday TREMENDOUSLY with constant pain and also helps my feeling of well being better than any antidepressant EVER HAS or can.. I take about a half a gram daily in capsules..I never take more because you can't it will make your sick if you do and also it's pointless.. This is not a drug and shouldn't be classified and villainized like one!! It can help addicts coming off of actual drugs better than any of the prescribed drugs that actually ARE BAD FOR YOU.. Please consider that there are so many people that are helped with pain from this plant.. It would be terrible to see them turn to bad drugs and alcohol or other means.. Drew S.

Marysville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello my name Ron. I am a daily user of kratom. It helps me in so many ways from dealing with my chronic back and knee pain to calming my very very bad anxiety. I am 1 of millions that you WILL hurt by banning kratom. A dried leaf I make tea with . Leaf kratom is not dangerous and it's impossible to overdose on. This isn't that terrible 7-oh product that was banned in December 25' . A few years back we passed the kratom consumer protection act and it drastically improved the quality of product we encountered here in Ohio. Not only solving the quality concerns but making sure that we do not receive adulterated kratom leaf . If t you ban kratom you will create a black market and turn us all into criminals for seeking the relief that kratom provides us all. It's less dangerous then sugar and you are going to create a very dangerous black market for the stuff a lot like cocaine and heroins black market. Your decision will drastically be more dangerous than simply leaving the leaf kratom legal. So I beg you. Please do NOT make me commit illegal act so I can find my relief
Powell	Ohio	2 - Oppose - Used to Treat Chronic Pain	For me, kratom isn't an abstract policy issue—it's something that has genuinely supported my well-being. It's helped me manage pain and stress in a way that feels steady, functional, and far safer than the medications I was offered before.
Monclova	Ohio	2 - Oppose - Used to Treat Chronic Pain	To whom it may concern, I have safely consumed all natural kratom powder for almost 10 years. It helps me with joint pain and discomfort, provides improvements to my energy levels, mood and focus. This along with healthy eating and exercise, I am in the best shape of my life. I do not seek a euphoric state, in fact it doesn't cause that for me at all. I, like most all natural kratom users are responsible and want to continue having it available in the state of Ohio. Please do not ban the all natural kratom powder. Thank you.
Mount Vernon	Ohio	2 - Oppose - Used to Treat Chronic Pain	I've been using kratom for 10 years for chronic back pain. It has saved my life. Severe depression and anxiety was my only companion before finding kratom. Many people are using this non addictive plant in lieu of drugs like opiates. It doesn't get you "high" as suggested by the moral majority. It saves lives. Wanting those with pain to suffer because something offends your Christian beliefs is evil.

Athens	Ohio	2 - Oppose - Used to Treat Chronic Pain	I wish to emphatically submit a public comment against the proposed “Mitragynine Rule,” as an Ohioan, a responsible adult kratom consumer, and an individual who has conducted extensive research on controlled-substance legislation, regulation, pharmacology, and history both during and since receiving my law degree in 2022. For roughly a year and a half (2023-2024), I suffered from disabling chronic pain, making me unable to work and limiting even basic day-to-day activities. This is the result of cervical radiculopathy (severe nerve pain and muscle spasms caused by compression within the spine) and the side effects of available Rx treatments. I am allergic to NSAIDs and averse to opioids because of their well-studied addictive properties. This left me with only gabapentin and muscle relaxers for relief, which left me stupefied and forced to choose between debilitating pain or debilitating fatigue, brain fog, depression, and poor motor coordination. I began drinking third-party tested kratom tea (from a supplier qualified by the National Kratom Association) to reduce my medications and regain autonomy and productivity. It has helped immensely and allowed me to rejoin the workforce and reclaim my mental health (in conjunction with physicians and therapy). I’m worried, after seeing this trend happen over and over again (since 1970), in both state and federal controlled-substance scheduling, that kratom is being villainized based on chemically altered and amplified products, which bastardize the name of a natural substance. The current uproar over Kratom equates powdered Kratom leaf with artificial, and highly addictive, 7-OH products. As you surely know, legitimate Kratom powder has trace amounts (if any) of that alkaloid and its mitragynine content does not pose the addictive risk of laboratory-augmented items that the state of Ohio, itself, have deemed misrepresentative in their claims of being “enhanced kratom alkaloids.” The standard for CSA scheduling asks about medical purpose and addictive potential. I know, in my own life, I can drink kratom tea once a day and receive wonderful pain relief without the extremely high risks of opioids and the detriments of other painkillers, such as muscle relaxers, which can leave me bed-ridden with lethargy. If Kratom is highly addictive and serves no medical purpose, I have to question why alcohol is not treated similarly. For, alcohol’s only medical purpose is to sterilize—to kill—and its addictive properties have created full careers for some scientists, academics, and clinicians. Kratom provides far more medical benefits—pain relief, insomnia relief, migraine relief, and even a promise for mitigating the fallout of alcoholism and opioid addiction, without simply prescribing medication like Suboxone (yet another opioid). Ohio is in the heart of the opioid (now, fentanyl) crisis. Fentanyl isn’t even a schedule I substance. I ask that you hear the public, dig into the research, and consider the cost-benefit analysis for individuals dealing with chronic pain who want nothing more but to be self-sufficient. I pray you also consider the implications of the many addicts created by opioids who responsibly take kratom every day as a much safer replacement to street drugs. The Shafer Commission report (submitted just before the federal CSA, upon the then-President’s request for guidance on controlled-substance legislation and regulation—a report he commissioned and then completely ignored for political purposes) is extraordinarily illuminating in its call for regulation over criminalization—stating that putting up fences where there are no cliffs leads the public to ignore all

			fences, believing them to be meaningless. In other words, when there is sweeping criminalization of substances, and the public disregards that criminalization and finds those substances are not these great villains, they then ignore all warnings, leading some to plummet off the cliff into addiction and misuse. Thank you for your time and consideration.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I do not support the ban on whole leaf kratom that is being suggested in my state of Ohio. I have been using whole leaf kratom for pain management for over 8 years and if this ban does happen i will be forced to resort to opioids that almost destroyed my life, until i was introduced to kratom that has been a life saving and all natural alternative.

Marysville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello my name is Dalton Salyer. Im 30 years old and planning to get married this October and starting a family. When I was 17 I had a hip resurfacing done and since I wasnt done growing it caused my right leg to be slightly shorter than my left leg which has caused severe back pain over the years. Back when I was 17,18 years old narcotics were still an readily available option. That has changed over the years so then I tried kratom. It has helped me immensely overcome chronic pain without the side effects of narcotics. I can live a halfway decent life while taking it without the high or euphoria of Marijuana or the dependency of narcotics that cant even be prescribed in most circumstances now. I understand some people may of had issues with Kratom and most cases ive heard they've abused it with other drugs , rather prescription or illegal drugs. But what of alcohol? It has no health benefits and yet nobody calls to ban it even though it destroys family's and is abused by many. I feel sorry for people who have abused kratom but I truly believe banning the synthetic version of it that has already been banned now will more than likely avoid most , if not all, major abuse and addiction issues. Natural kratom should be protected and allowed for personal use so that people like me and many others can live halfway pain free lives. I've taken it for 8 years now with no health effects besides being able to feel decent and able to work a full time job. At conclusion I just ask that you reconsider the full on ban and focus on enforcing banning the sale of synthetics and banning minors from buying or consuming it. Give me and many others the chance at living good lives and raising our families. I hope this comment reaches you and you take it into consideration. Thank you for your time.
Lima	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am older and take (3) one gram tablets daily. It really helps with the aches and pains, and for me I prefer it to otc pain killers
Strongsville	Ohio	2 - Oppose - Used to Treat Chronic Pain	My doctor ruined my life. Kratom SAVED it! Regulate it, tax it, do whatever needs to be done to profit from it- just please don't ban it! After trying multiple prescriptions and other holistic therapies, kratom is the only thing I've found to help with chronic pain and depression... without ANY side effects! It has TRULY saved my life!!!
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please do not ban kratom. There are few options for chronic pain. Physicians do not want to prescribe opiods. Kratom, in its natural form is relatively harmless. I know there have been some teenagers who have found ways to abuse it. If we set policy based on everything teenagers abuse there would be nothing left. This has helped multiple people deal with chronic conditions, safely, for thousands of years. If you remove this, you have taken the last option anyone has. The costs in lost productivity, mental/emotional costs, as well as options for those suffering from opioid use disorder will be left to a heartless medical system that is not only the leading cause of bankruptcy, but ineffective for both chronic pain and addiction.

Sandusky	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello I'm here to share my experience with kratom it has helped me retain a normal life after my surgeries I lost about 14 inches of my colon and I now have colostomy bag for life I'm only 38 I never thought I'd be fighting for my life this young the colon disease I have is usually seen in 70 plus patients so I don't know what the rest of my life holds but it's not the average run though life. I can't take pain medicine due to the adverse affects of opiets and dependency but I've found plain leaf kratom to be just enough relief to get me moving without all negative aspects it's not dangerous it's been on shelves for years let's get some regulation. not push 1000's of people into the shadows and make them criminals overnight or worse drive many back into the arms of deadly street drugs and dealers who truly don't care if people die. Please listen to your hearts and the pleas of the suffering people who are terrified of losing something that helps we should be figuring out how to use the things this world gives us to advance civilization and create and utilize the tools available and kratom is certainly a useful tool it's helped so many get back on track after health problems or addiction took hold thank you so much for reading my thoughts and concerns.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	The use of kratom has improved my way of life drastically. I suffer from chronic pain and it has been the best option to help me in a long time.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please do not schedule this supplement. It actually saved my life. I have a chronic painful condition that is manageable with this supplement, and without constant and significant amounts of medication and nonstop medical appointments. I served my country in Iraq and Afghanistan; I'm not someone who likes dangerous drugs on our streets and in our cities. Kratom is not one of those drugs.
Youngstown	Ohio	2 - Oppose - Used to Treat Chronic Pain	The proposed rule to ban any sort of kratom products is very concerning for me personally. I have had major back pain since I was 16 when I was injured. Not only that but I have degenerative bone disease and I have constant pain in my feet , legs , hips and back. I had my first back surgery when I was 18 but my pain was never treated. I was put on major painkillers and those didn't help very much and then the doctors stopped giving me them all together so I was left on my own. That's when I discovered kratom. Not only has kratom made it so that I can work to take care of my kids and my family. But I can be physically active I can do fun things with my family I can take care of my animals I can take care of my house I can take care of myself. If kratom was to be taken away I fear I would be bedridden out of extreme pain. I beg Governor dewine to please hear us who use kratom. We agree that there should be an age restriction. Like anything whether it be sugars or Tylenol or alcohol or tobacco, kratom has to be used responsibly just like anything else. There may be a few people who abuse kratom but those same people are also able to abuse sugar and develop diabetes all the same. I beg our state officials to please hear us and to please leave kratom alone.

Englewood	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using natural kratom for the past 8 years. I have fibromyalgia, lower back pain and osteoarthritis. I have been prescribed Vicodin for the past at least 10 years. I'm aware of the addictive properties of Vicodin and since I've been introduced to Natural kratom I have really noticed a difference with my pain management, meaning the natural kratom works better for me and this has improved my quality of life. The Pharmacy boards decision without any regard to Scientific evidence is a shame. The whole regulatory body voted unanimously to make natural kratom a schedule one substance without even asking questions about the evidence that they had. The Secretary of Health and Human Services and the FDA commissioner has made it clear that natural kratom should not be the focus of your scheduling. The synthetically manipulated seven hydroxymitragynine (7-OH) is something that should be banned and I agree with that because it is not natural. What is it that the Ohio Board of Pharmacy knows that the federal and international experts don't know about kratom? There are tens of thousands of people in Ohio who rely on kratom because it is a better alternative than opioids for pain management. If you were to schedule kratom it would criminalize law abiding consumers immediately and it would eliminate access to such products from Happy Hippo which are lab tested products. You would force us to go to questionable sources to purchase Black Market substances whose origin is unknown. I am very disappointed that the legislature would allow an unelected Board of Pharmacists to ban a natural substance based on fear, assumptions, and outdated scientific facts. But I also wonder why the state of Ohio has legalized the recreational use of marijuana which is far more addictive than kratom.

Northville	Michigan	2 - Oppose - Used to Treat Chronic Pain	My name is Todd Priest and I currently am resident of both Michigan and Florida but as of recent I spend most of my time here in Michigan. Banning Kratom instantly turns me in a criminal when I drive through your state. I hurt my back numerous times from the age of 20(I'm now 50) with a construction accident(fell from a three story rooftop). Next was a bad accident in a race car and the last thing to set off the pain I'll experience for the rest of my life was getting hit by a car while biking in Florida. I went through physical therapy over and over and nothing really seemed to help. I couldn't walk for nearly a year and then I made my first visit to a pain management clinic. The doctor gave me Norco but that didn't seem to work. Then I asked my family doctor for help and luckily he was willing to give me Oxycodone. I don't regret taking the Oxycodone and was never tempted to fall into the abuse cycle. I've never been a heroin user. Even though I never abused these drugs, I still became dependent on them to get through the day. These drugs no doubt improved my quality of life in the sense that it allowed me to walk, work, and continue my life being able to walk without assistance. After time, my back seems to feel a little better and I slowly decreased my pain med intake. I was only able to do this comfortably with Kratom. If not for Kratom I'd still be taking these pills to function. If Kratom gets scheduled/banned, I will no doubt be forced to get back on pain meds which I hear most doctors are refusing to prescribe. So now that doctors are not willing to help me stay pain free, I'd likely be one of those people who take a chance buying Kratom or pain meds on the black market. We both know how that could end. I have many acquaintances in the Kratom community who are recovering drug addicts who literally saved their life by using Kratom. Some of these people will without a doubt go back to heroin. Please for once think about the good of the American people. That is not common with most politicians. Be better. Give us the KCPA(Kratom Consumer Protection Act). You will literally save lives by this simple action. Ohio needs this, all states need this. The FDA has proven over and over to not put the best interests of the American people first. 2000 metric tons of Kratom enter this country every month. If Kratom was as deadly as some allege it to be, thousands and thousands of people would be dying every month. Millions of people use Kratom to better their lives. Why take this away?? It makes no sense at all. Follow the science. It's as simple as that. Sincerely, Todd Priest
Portsmouth	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped me in many ways. It is a natural pain killer that also helps in other ways with anxiety and depression. I think it does way more good than bad.

Lebanon	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule 1 I am not someone that uses kratom for prior substance abuse drugs. I use this as a nature medicine to give me energy, motivation, Alleviating pain from my RA and degenerative disc disease In a natural way, rather than relying on prescription drugs, that are addicting And can cause further harm to my body. Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please allow natural kratom to remain legal and available to adults 21 and over. It is a natural substance that can assist with pain management and helps avoid addicting opiate use.
Magnolia	Kentucky	2 - Oppose - Used to Treat Chronic Pain	My journey with kratom started over 10 yrs ago. I found kratom when I needed a way to avoid using the prescribed pain pills I had been using for RA. I was a homemaker and needing to be able to function was a must, and with kratom, my whole life changed for the better. I've been a responsible adult while I've been on this journey, and I can not say that about myself when I was using the medications all those years before kratom. Let the Natural leaf of unadulterated kratom remain accessible for those of us that are up-standing citezens. Synthetic can go because the natural leaf is what is important to us.

Grove City	Ohio	2 - Oppose - Used to Treat Chronic Pain	If you remove access to natural kratom, you won't remove access to those that have found ways to mix it with other intoxicants and abuse it. Those users will find something else to abuse. Removal of access to responsible consumers will only hurt those that have found this miracle plant. I found natural leaf kratom 5 years ago after my third spinal surgery. I needed surgery to relieve pain at L5-S1 and L3-L4. I was told by my doctors there was no more they could do after that surgery and I would need to go into pain management to relieve any pain that lingerd post op. Their idea of pain management was to load me up on narcotics, that not only made me feel unlike myself, but prevented me from working (I drive a forklift, I cannot be intoxicated), were highly addictive, and there was no end in sight. Not to mention the cost of the drugs they wanted me on. A friend told me about kratom and I tried the natural leaf available from a local business. It changed my life. Almost immediately I was able to stop taking the toxic addictive medicine the doctors deemed my only option. There were no intoxicating effects. It was cheaper than the prescriptions I was on, and fully natural. It has changed my life. I have not needed pain medicine outside of an occasional acetaminophen in over five years now. The horror stories people are pushing about this plant are simply propaganda and fear. I cannot over emphasize how the removal of access to the natural pain management of kratom will affect my life negatively. My only option is to return to the narcotics based relief which will lead to a financial burden in both cost and the lack of employment. I beg you all to please see that the natural leaf kratom isn't the narcotic some of the public, and probably pharmaceutical companies, want you to believe it is. The thought that I could get marijuana (and it's intoxicating effects) over the counter or prescribed and not have access to kratom is baffling. We are not "addicts". We are not seeking a party drug. Many of us, in fact I would say the majority of the consumers of kratom, is to avoid other intoxicating drugs to reach the same goals of pain management. The loss of access to this plant won't help those that have found a way to abuse it. They'll find another outlet to procure it, or move to hardcore drugs to get their high. The removal of access to kratom by the board will only limit the use by folks that are using the plant responsibly. We are the ones that will be punished if you choose to take kratom access away. You won't save any lives. You won't make anyone any safer, you'll only punish consumers looking for an alternative to safely manage their pain. I sincerely hope you've read this far and hear me when I say, this ban will affect my life and many more in in a myriad of negative ways. Thank you. Kyle Boggs Grove City Ohio
Grove City	Ohio	2 - Oppose - Used to Treat Chronic Pain	I take natural leaf Kratom every day for pain relief. I used to take prescriptions for my pain; this included opiates and non-opiates. The non-opiates did not work, and I developed a physical dependence on opiates and built up a tolerance quickly, and lost the ability to function day-to-day; so I needed to stop taking them. Thankfully I learned about Kratom, and got off the prescription opiates for good. I have been taking Kratom for years with no side effects and no build up of tolerance. I don't get the "high" feeling I got with prescription opiates; I just get mild pain relief, which is enough for me to function. Please don't schedule natural leaf Kratom. I don't know what I will be able to do for my pain since the prescriptions I tried don't work for me.

Alliance	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped me tremendously! knowing a lot about Kratom itself, I feel banning it would be more detrimental than helpful. Myself included, am a person on the go, sciatica flare up, sinus pain and back pain and hip pain often can get the best of me while trying to do daily activities, or being able to work my full time job. The natural remedies and healing it helps me be able to live my daily life. I DO NOT support Hydroxy seven. With that being a man made product and not even kratom product, I feel banning a natural products (real kratom) and remedies that I've seen help so many individuals, is absurd. I feel we should be banning the real corporate which is the man made hydroxy seven and leave the real natural kratom alone.
Coldwater	Michigan	2 - Oppose - Used to Treat Chronic Pain	Please do not ban kratom in the state of Ohio. It is a very beneficial substance for both focus, mental acuity, acute and chronic pain, and sleep. I am a healthcare provider and am very passionate about non-narcotic options for patients with chronic health issues. Used properly it has benefits similar to narcotics for pain control or adderall for adhd with a fraction of the side effects.
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello. I am a registered nurse in Ohio. I have used kratom on a regular basis for 6 years now. I have chronic nerve damage in my upper spine area that can be crippling. Kratom helps me to manage the pain & discomfort. Kratom does not affect my ability to do my occupation or family, interpersonal relationships. A ban on kratom would drastically alter my quality of life.
Alliance	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please keep kratom accessible. It is absolutely helpful for chronic pain and tho is habit forming is not addictive like other alternatives meth, heroin, fet etc.Ive never usede drugs but i use kratom to help ease pain. Idk what ill do if its made illegal. Please keep safe access for me.
Alliance	Ohio	2 - Oppose - Used to Treat Chronic Pain	This has helped me medically. Im completely off all over my anxiety and depression medications and im sober 10 months from Xanax and alcohol. I can truly say this has helped me 100 percent Kratom has tremendously helped me to sleep better and decrease social anxiety. 7OH was the problem not Kratom. Do not ban kratom. It helps me to get a peaceful nights sleep. I only use it before bed and has made a huge difference in my sleep This helped my husband reach 2 years of sobriety from his alcohol addiction. Helps cancer patients, personally helps with my anxiety Keep kratom in Ohio! It helps me with mental illness, depression and anxiety.

Franklin	Ohio	2 - Oppose - Used to Treat Chronic Pain	If kratom is banned, it will inevitably cause more issues. People will go to much harder substances. Kratom has helped me so much with my chronic pain. I use it daily and it has helped me live my life without being in so much more pain. People rely on this miracle plant to help them get through their day to day. There is no records of over does or death. people who die always have other drugs in there systems. Kratom is not the issue. Please take the time to really understand this plant and its effects. You can not overdoes on kratom alone, you body will just make you puke it up. I don't know what id do if I lose access to this plant. Please, please understand the effects this would have on Ohioins and the millions of people who rely on it.
Franklin	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use kratom to help relieve symptoms from my Fibromyalgia and neuropathy without become addicted to the 3600 mg of gabepentin the Dr's think is better which is not.
Bath	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am writing to Oppose the Classification of Mitragynine as a Schedule I Controlled Substance. My family and friends have safely and responsibly consumed Kratom/Mitragynine for 5+ years to support healthy sleep, mild pain management and energy for exercise. The effects are subtle but very helpful. Kratom/Mitragynine is a leaf that has been brewed and consumed as a tea for centuries in Southeast Asia because for mild pain management and an energy boost. My family and friends will not financially or politically support anyone who attempts to ban this plant. Thank you for listening and kindly protect our rights on this issue.
Hudson	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has truly changed my life in ways I never thought possible. For a long time, I lived with constant pain and anxiety that affected every part of my day. Simple tasks felt overwhelming, and peace felt out of reach. Since using kratom, my pain has become manageable and my anxiety has significantly eased. I'm able to think more clearly, sleep better, and move through my days without the constant weight of discomfort and fear. Because of kratom, I can live a more peaceful and somewhat normal life—one where pain no longer controls me and I can finally feel present, calm, and functional again.

North Olmsted	Ohio	2 - Oppose - Used to Treat Chronic Pain	Governor Dewine, Thank you for allowing me to speak on the life saving plant Kratom. I am a disabled Army Veteran that was injured during training and suffered a severe injury to my foot and lower leg that resulted in 12 reconstructive surgeries. The pain has been unimaginable. The journey since the opioid epidemic for pain patients has been a living nightmare. Along with that injury, I also suffer from painful neurological disease that is believed to be related to the anthrax vaccine. It causes unbearable pain to radiatiate from my tailbone through my legs to my feet. I have attempted suicide twice, then I found Kratom. Through using Kratom I am able to not be in a wheelchair, use crutches, do yoga daily, work out with weights and walk short distances with my support dog. Kratom is the reason I am not a drug addict! I am living my my life because of Kratom! Please don't take away my last lifeline! Any ban on natural Kratom products would really hurt and demoralize sick people like me who have already suffered too much. I am not a drug addict. It is a safe and effective plant that I have been using for five years with zero negative effects. Thank you for your time in reviewing this matter and I'm confident that you'll reach the right decision, and keep natural Kratom legal in Ohio for people who are suffering. Respectfully, Richard M Barney
Alliance	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello please do not restrict kratom in Ohio Natural kratom not synthetic please Kratom is a major part of my wife's pain relief formula without narcotics Kratom is just one piece of it and she has been using it for five or six years and it helps it is not dangerous it does not kill people it is not a drug in that sense at all in fact if you take too much of it you just simply get sick and throw up. Please do not make kratom a schedule 1 drug in Ohio that will be a major problem for innocent people who have pain issues in this state. I kindly thank you
Hicksville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Banning Kratom is a clear violation of our freedom . Purposed ban is all based on flawed information ! We are not criminals but your ban will make all us law biding citizens criminals for no reason. Been taking Natural Kratom for 18 years with absolute no complications . This proposed ban is going to not only create good people into criminals but also will force people to take prescriptions which are very very addicting . Buprenorphine is not the answer as its highly addicting !!! Kratom has changed my life for the good .

Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	As the wife of a Veteran, i have witnessed and experienced the many versatile benefits of whole leaf Kratom. After brewing some tea from some crushed leaves, im amazed still how this continues to help with my pain, and also mood. We now know that hundreds of thousands of Americans use this plant similarly. As nature (God) intended. May your hearts be guided in making a correctly informed decision on something so vital to the lives of many, as we now know that not one single death has been linked to kratom ITSELF.. I am a US Air Force Veteran. Proud to have served my country faithfully. I deal with physical health issues that require relief and care daily. Please do not take away my right and ability as an adult, father, husband, and ,veteran to choose natural, herbal care that best suits my body. I have over 15 years of successful kratom therapy with no problems. Only side effects is slight nausea if i take too much. Kratom has changed my life for the better, along with thousands upon thousands of veterans, and a few million responsible American adults as well. Regulation, and proper testing is the answer here, not banning. If an adult is old enough to fight in a war, or join the armed forces, they should be able to choose what type of relief they prefer for pain. Although alcohol, and tobacco are directly related to hundreds of thousands of deaths annually, they remain on the shelves. There has been an ongoing challenge to find one single death attribited to KRATOM ALONE. Meaning, no drugs, or other substances in the system at all at the time of death. I am not a doctor, nor should this be taken as medical advice. Just my own experiences and research. Thanks for listening, and God bless you all .
Elyria	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has saved my life due to having a history of opiate abuse, Kratom has been the only thing that has helped with the pain
Erlanger	Kentucky	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped me for years,all forms of Kratom. I know people who use Kratom instead of narcotics for pain.Its ridiculous to take kratom off the shelves. People have gotten off of drugs and alcohol with kratom as well.I mean alcohol is more dangerous than kratom. Please let this Tea stay on our shelves.

Hilliard	Ohio	2 - Oppose - Used to Treat Chronic Pain	Ohio Board of Pharmacy, I am grateful to have had the chance to provide comments on the regulation of kratom in Ohio. As a 47 year old senior director of a major non-profit education association, a husband, a dad, a coach, and a leader in the community, I have struggled with chronic severe lower back pain for many years. Like many other individuals, I was only offered prescription opioids by my doctors. As I watched the growing numbers of opioid addiction and abuse issues in our state and nationally, I was concerned about the long term risk of taking those opioids as well as the often harsh side effects they produce. Following extensive research and discussions with medical providers, I began using kratom. The results were profound. Kratom enabled me to live without debilitating pain and to remain an involved and contributing member of my family and community—without the potential of addiction associated with traditional narcotic pain medications. The board should consider the following evidence-based considerations when making their decision: * Consumer Profile: Most consumers of kratom are educated, working, and law-abiding citizens who utilize kratom for wellness and pain management purposes. * Safety Profile: Studies indicate that kratom does not result in the dangerous respiratory depression found during opioid overdose situations. * Misinformation: There is much misinformation being shared about kratom. I encourage all policy decisions made regarding kratom to be based upon scientific evidence and verified safety information. * Common-Sense Regulation: I fully support the Kratom Consumer Protection Act (KCPA) which will create minimum age requirements, require labeling, and eliminate un-safe products from stores. Prohibiting kratom will not resolve the current addiction issue. In fact, it may send those of us that responsibly use kratom back to prescription opioids or potentially other unsafe alternatives. I encourage the board to review the regulatory actions taken by other states that have taken the approach of reasonable regulations rather than prohibition. Reasonable regulation protects consumer safety while allowing individuals to make informed choices regarding natural supplements for wellness. Thank you for your time and consideration of my comments. Sincerely, Concerned Citizen
Saint Marys	Ohio	2 - Oppose - Used to Treat Chronic Pain	I've taken kratom for 10 years for back pain , arthritis without any side effects , after having opiates prescription from the VA , I looked for a natural plant to get off of the opiates and kratom is what works ! If you ban this i will be in a horrible le situation again , 70 years old !!

Battletown	Kentucky	2 - Oppose - Used to Treat Chronic Pain	My name is John. I am a below knee amputee with SEVERE muscle, bone and nerve pain. Additionally, years of limping around and walkering through my home have left my spine badly misaligned, which is quite painful indeed. I've also suffered from Generalized Anxiety Disorder for over 2 decades now. These conditions, especially when they are particularly strong/intense, render me essentially useless to those around me—crippled by DEBILITATING anxiety and racked with INTENSE pain all over my body. I've tried a great many medicines and remedies over the years in a futile attempt at relieving some of the worst of my symptoms. For a long time, opioid painkillers were one of them; SSRIs, SNRIs, Benzodiazepines, etc. were often needed as well. Unfortunately—for various reasons I won't get into here—not a single one of them worked out very well for me. So! Long story short(ish), the herbal supplement kratom (Mitragyna speciosa) has been my saving grace. It takes care of a good portion of my pain, helps me get at least a partial hold on my nerves, and simply allows me get on with my life. Both state and federal governmental bodies have tried NUMEROUS tactics over the last several years—some successfully, even—to go after this particular plant. My home state of Kentucky was one of them in 2016, as well as quite recently in 2022. Fortunately, they saw the light at the last minute and passed the KCPA, but there is still a metric tonne of misinformation AND disinformation floating around out there with regards to kratom. Regardless, the fact of the matter is that pure, UNADULTERATED kratom leaf powder ALONE has never harmed, let alone killed, anyone. Now, I don't want to go on and on and waste any more of your time, but could you all PLEASE just tone it down a bit on your habit of trying to control and legislate every. single. little. thing. we do with our bodies as we go about our daily lives. We are not criminals. We are not harming another soul. We are not harming ourselves. We just want the CHOICE of how to SAFELY medicate and alleviate our own pain and/or mental tribulations. Passing legislation aimed at the protection and regulation of kratom will help stop dangerous, adulterated products from getting into the hands of consumers, ensure that any potential kratom products are thoroughly tested, and prevent the unnecessary and UNJUST criminalization of an IMMENSELY beneficial medicinal herb that has ZERO business being a Controlled Substance in the first place—not to mention the ordinary people that're using kratom to alleviate legitimate medical ailments. Enacting (or upholding) a ban does literally NONE of those things, and only serves to harm the very human beings that you are supposed to be protecting. All right, I'm gonna go ahead and wrap this thing up. I very much appreciate your time and consideration on this highly important matter. I pray you'll do the right thing by your constituents. Thank you. :)
Madison	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have used the Kratom powder in a tea form for arthritis and it has benefited me greatly. I am a chemist with a Master's Degree and have worked as a toxicologist. I have used the tea since 2017 without any ill effects, after knee surgery. I used it properly and have been able to sleep at night because of this tea. I'd would be glad to provide my testimony in front of your board. You would be making something illegal that helps many arthritic persons like me. Please do not follow through with this ruling because of a few people who combined several drugs and were irresponsible with their lives. Sincerely, Paul Pastor 440-428-9113 paulpastor@twc.com

Amherst	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom is very beneficial to my wife and her conditions. It is not harmful. Overdose is unheard of. The benifits are overwhelming. Kratom has literally saved my life. As someone who suffers from chronic pain, I rely on Kratom for quality of life. I wouldn't be able to get out of bed without it!
Mansfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	Ridiculous the government is trying to take something away that genuinely helps people that need it. I am severe arthritis and wouldn't be able to work with pain in mt legs if not for kratom. This is ridiculous what you are doing. Leave it alone.
Lima	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please reconsider scheduling of natural kratom products. I have suffered with chronic pain for 20+ years, many doctors visits have not found a solution. I've tried many pharmaceutical and biological treatments with serious side effects that have not been effective. Treatment has always ended with prescription opioids that create dependance and not suitable for long term treatment. I have been using natural kratom leaf power for over a decade without side effects, I do not find this plant to be intoxicating and do not understand the need to ban natural products. Taking away this natural remedy would be devastating to myself and my family. The healthcare system is unable/unwilling to help with my condition and without kratom there would be no relief from symptoms.
Wadsworth	Ohio	2 - Oppose - Used to Treat Chronic Pain	I think there is a major difference in natural kratom and synthetic kratom. In my experience, I have benefited greatly from it when it comes to helping sleep, reduce pain, etc. A few family members and friends are also active users of kratom and use it responsibly. Please keep kratom, but get rid of the dangerous synthetic stuff commonly sold at gas stations that they call kratom but isn't.
Grand Rapids	Michigan	2 - Oppose - Used to Treat Chronic Pain	I am submitting this comment as an individual consumer. I have used traditional kratom leaf responsibly for approximately 8 years, typically once or twice per week, primarily to manage chronic lower back pain. Kratom has allowed me to manage pain without the use of prescription opioids or other synthetic medications. During this time, I have not experienced dependence, withdrawal symptoms, or adverse effects. I have also experienced improved energy and reduced social anxiety, contributing to an overall improvement in quality of life. I support reasonable regulation and quality control, particularly with respect to high-potency extracts and concentrated 7-hydroxymitragynine products. However, a complete ban on traditional kratom leaf would negatively affect individuals who use it safely and responsibly as a lower-risk alternative for pain management. I respectfully encourage the Board to consider a regulatory approach that distinguishes traditional kratom products from high-potency concentrates.

Philadelphia	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I am a 40 year old female who was diagnosed with endometriosis and poly cystic ovarian syndrome at 23 which came with pain and medication. Also came with me not being able to have children the depression of my life long dream of being a mom taken away and the pain the medication became my friend. Soon the opiates were running out before I was ready for a refill and I was buying them off the street. I was a bad person o run their buissness cleaning banks which never would have happened years ago. I am married, pay taxes, own a new car, have a beautiful home with my husband and 2 cats. None of this would have been possible if I did not find kratom. It allowed me to change the way I think I no longer want to use to numb myself. I am happy with the life I was given. I am lucky to be alive with the route I was on. So please before you think of a ban think of all the lives like mine you can save to keep it legal. I DO NOT SUPPORT SYNTETIC PRODUCTS LIKE 7OH!!! Respectfully Megan Zamorano Please support common sense legislation for plain leaf kratom My name is Sean zamorano, I have been advocating for kratom since before 2015. My wife and I also run a kratom website. I have been fighting on behalf of Ohioans since the first time the Board of Pharmacy wanted to ban kratom. I have also fought when the governor dewine wanted to fight kratom. We also serve over 300 Ohioans and have for 10 years now. I am not only a businessman I am also a Kratom consumer. I know how much Kratom has changed my life and I also know that the World Health Organization has deemed Kratom to be completely safe and so has the fda. I urge you to consider passing one of the two Kratom consumer protection acts that are currently in session. I support plain leaf kratom, that is the ground Leaf directly off of the tree with no additives or anything added to spike the amount of chemical in the kratom. I DO NOT seven o h
Pottstown	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I have taken this tea leaf since 2017, it has kept me from being bedbound in pain. I had done a lot of research on this plant before hand, history, chemistry and all. Why would you consider banning something that helps so many? If you know the chemistry/science and safety of it, vs many pharmaceuticals, you would not ban it. I do not understand the cause for the US to continue to try and schedule 1 this tea. It is not anymore dangerous than caffeine, tabacco products or alcohol. It's less dangerous in many ways. It just seems that the US has set its sights on this helpful plant for over a decade now and even though the federal government agencies and WHO have decided to not ban it, some states continue to try without proper education. Learn about it. Hear from the people who benefit. You would not ban it or schedule it in the way you want to, as if it is one of the scheduled harmful drugs, IT IS NOT.

Philadelphia	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I strongly oppose the scheduling of mitragynine, or any of kratom's alkaloids. Please- as a chronic pain patient who cannot take traditional pain medications, kratom has given me my quality of life back. It allows me to work, be a better usband, pursue my interests and be a productive, happy member of my community. I have also personally witnessed kratom and its alkaloids used as a legitimate Medication Assisted Treatment (MAT) alternative, functioning exactly as Suboxone would, a widely accepted substance and medical practice. Kratom also aids in easing opioid withdrawal symptoms, and has helped so many people quit full-agonist opioids. Kratom is a safe, effective, and necessary harm reduction tool; removing access to it would hurt countless people looking to recover, with devastating consequences. The evidence of the safety of kratom is strong; the science is very clear: as a partial agonist, mitragynine has a ceiling effect and an extremely low risk of overdose. Most instances of adverse reports involving mitragynine also had high risk substance (like fentanyl) involved. Responsible adults deserve the right to decide what they put in their body. Compared to other substances, like alcohol, which kills nearly 200,000 people every year (in the US alone), kratom is exponentially less harmful. Any negatives that it does cause, such as dependence and addiction potential, is vastly outweighed by the good that it does. Public policy should help people, nohurt them. Regulation, not prohibition, is the answer. Tested, quality assured, age restricted, and taxed products. That is the sensible, evidence-based way forward that Americans deserve. There are many other states and regulated industries on which legislation could be modeled Kratom helps me be the best person I can, as it does for millions of others. Please don't take that away. Thank you, Dan
Circleville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please do not ban Kratom. Kratom provides pain relief that is natural and safer than other pharmaceutical drugs. Please do not ban something that can be further researched to be used as medicine. Thank you.
Gahanna	Ohio	2 - Oppose - Used to Treat Chronic Pain	Greetings, I am a resident of Gahanna. I have safely used plain leaf kratom for ten years for chronic back pain and to quit drinking alcohol in excess every day. Kratom has made me sober. Please consider making plain leaf kratom safe, regulated, and accessible for adults. This could mean banning concentrates like 7-OH, which I believe are dangerous and addictive. However, plain-leaf kratom is safe and effective for pain management and addiction treatment. Please consider the needs of my family. I am able to work, care and provide for my family without harmful drugs or alcohol because of my safe consumption of mitragynine (plain leaf kratom). Thank you for your time and careful consideration. -Thank you. A grateful resident in Gahanna
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has saved my life and MANY others and that is a fact! Banning Kratom will cause catastrophic problems leading to deaths almost right away as people turn back to the streets for pain relief. I do fully understand the concerns of the pharmacy board but banning kratom will cost a lot of people their lives. This is not an opinion, this is fact! Please, do not take kratom away. So many of us lean on it (responsibility) for a better quality of life. Listen to our testimonies and NOT the outdated, false data!

Wellington	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 72 year old woman who has suffered for 40 years with, thank God, infrequent, but extremely painful, back spasms. This has led me to be completely immobile on a heating massage pad wearing tens units. Pure kratom from a reliable source - (NOT a gas station) has, quite literally saved my life on a few occasions. Why? Because doctors won't listen to you when you are screaming in agony because they fear the DEA. I read the letters in Appendix A, and, while I feel sorry for them, I have never had a kratom drink, didn't know they exist, and certainly wouldn't buy one from a gas station! I have never had any ill effects from kratom purchased through a reliable vendor for many years. I don't take it on a daily basis at all. Never have. Point is: you are always going to have people who use and abuse a variety of products. That's a tale as old as time. BUT PLEASE - I ask you to not throw the baby out with the bath water. The kratom powder I make into capsules and use sparingly has helped my pain without ANY side effects and, since the DEA sees fit to look for drug addicts behind every bush, someone my age who IS responsible will be adversely affected. I don't want the prescription drugs that seem to have so many side effects - sorry, big pharma, but kratom IS effective and CHEAP. Truthfully, Nancy Wilson
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Governor Dewine. With respect, banning Kratom products is facing me with sooner than later disability. I'm 46 years old. I have done physical labor for 30 years. My shoulders, hips, knees, elbows, wrists, knees, ankles and back are screaming with pain all the time. I have had many tests done. Doctors CANNOT diagnose anything. The kratom extracts work. They keep me working. I can't do anything else because I'm also dyslexic and ADHD. Working with my hands and body is all I can do. Please reconsider the Kratom ban.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	The kratom leaf has bee so helpful in my battle with knee pain and swelling. I have used kratom leaf power for 8 years. I have had no issues with this plant. It does not cause any mental imbalances like alcohol does. If alcohol is legal then Kratom leaf powder should stay legal.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	We oppose the the ban of natural Kratom. Natural kratom, when sold in its unaltered leaf form, has been used by many adults as an alternative for pain management, anxiety relief, and in some cases to reduce dependence on more dangerous substances. For many individuals, access to natural kratom has improved quality of life and reduced reliance on opioids and other prescription medications with well-documented risks.
Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 54yo female. Kratom has helped me with chronic pain and sleep issues. When used responsibly, Kratom is a lifesaver. If Kratom is outlawed, there are going to be a lot of good American citizens having to go the streets for their relief. That isnt fair to any of us who use it responsibly. Every Kratom "overdose" has had other chemicals in the body.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have an illness that causes constant pain, my spine is deteriorating. Without Kraytom I would not be able to function. I do not want to go on disability, taking the use of kraytom from me (and many like me), would cause me to no longer be a productive member of society. By taking Kraytom away, you will force me to be a drain on resources that could be better used elsewhere.

Louisville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Thank you for for allowing comments. I am vehemently opposed to the scheduling of natural Kratom powders. Being able to periodically use this plant to manage pain has been a godsend for my life and allows me to avoid much more dangerous and addictive subscription painkillers. Prohibition has never been a solution for any substance. It only creates a black market and people will then be turning to this black market which is significantly less safe. Prohibition didn't work for alcohol, it didn't work for marijuana and it won't work for kratom. Please don't make law abiding citizens into criminals overnight. The answer is regulation, not prohibition. Making Kratom schedule 1 will also prohibit research on this wonderful plant. I believe we can all agree that more research is imperative. Again, scheduling will not make anyone safer, in fact it will make the substance more dangerous on the streets and more people will die. Thank you for reading.
Scranton	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	Hello my name is Curtis Little. Ive been using kratom on and off for the past ten years. It has really helped me function better and be a better family member. I was bite by a tick partying in the woods when I was a teenager. Years later even after a regiment of antibiotics I began to feel very fatigued/feverish. I had no energy at all and was in chronic pain. Idk what I would have done without kratom because it got me through this dark part of my life. I still suffer with Lyme flare ups. It's incurable, you can only keep it in remission. I still take kratom everyday and swear by its helpful effects. This plant is not for everyone, just like cannabis or coffee isn't for everyone. Please don't take this away from people who need it. It helps people stay off opioid painkillers and other harmful medications. Kratom isn't without risk but is very safe when used properly. Thank you for you time.
Fairborn	Ohio	2 - Oppose - Used to Treat Chronic Pain	Dear Ohio Pharmacy Board, I have been taking Kratom for 15 years now and without it, I would have a difficult time getting out of bed in the morning! I was diagnosed with a rare syndrome called Klippel-Feil Syndrome in 2010. I also have depression and anxiety. Kratom has helped so very much with the physical pain and also my depression and anxiety! Without it, I would be suffering needlessly every day. I don't have insurance and even if I did doctors won't prescribe anything that works for my pain. I was born with a partial fusion of the c1-c2 vertebrae. There is no cure, only pain management. Kratom is that pain management. I've never had a problem with taking it. The only side effect is sometimes constipation, and that's no big deal. I beg you to keep Kratom legal in Ohio! It's my only choice to make it through my days!
Berea	Ohio	2 - Oppose - Used to Treat Chronic Pain	I think the total ban on kratom powder is an over reach. I have used kratom from time to time and there is not a significant chance for addiction. There isn't a euphoria or anything like that but it does help provide some analgesia for aches and pains. The concentrated forms of mitragynine are a problem, ban those. People should leave natural substances alone.

Middletown	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am the Vice President of The McLean Company. I have spondylosis and spondylolysis. My back is in constant pain. For years I was prescribed Vicodin. I read about Kratom and began using it in 2015. It has helped me live a somewhat pain free life. It has no side effects unless you use a little too much and your stomach might get a little upset. I have spread the word about it and everyone including my best friend (a Doctor) is using it with NO downside effects. We agree that synthetic adulterated Kratom should be illegal. But NOT the natural leaf. If you did the same thing to coffee and adulterated it, made it 100 times stronger you would be having severe health issues! Would you make coffee illegal? A lot of people are using natural leaf Kratom. Do not take away from us a natural product that does no harm and makes our quality of life better. Many will turn to the street to find relief and the health issue and death will spike. I know of no health issue from anyone taking Kratom. As I stated earlier I have been using since 2015. I thought how much my life just got better then. Then Gottlieb from the DEA wanted to make it a scheduled drug. I fought it then and I will fight it now. It's almost comical, the State of Ohio wanting to make it illegal and at the same time making Marajuana legal. Kratom is not for a buzz. I don't drink and I don't smoke dope. I want relief from pain and Meloxicam and all the others don't work! My cell # is 513-518-8815 and I will talk to any official that wants mor info on Kratom

Mentor	Ohio	2 - Oppose - Used to Treat Chronic Pain	To whom it may concern. My name is Clinton Bartok and I am a 49-year-old quadriplegic living in Northeast Ohio. I grew up here but moved away after high school and lived in Colorado for two decades until I was in a bicycle accident that paralyzed me from the shoulders down. The agonizing pain has been an overarching theme with my condition and it's been quite a struggle to live through. Before I was released from the hospital in Colorado to come back home for recovery I was on the appropriate medications my doctors recommended that I be on so that I can get through my day and not suffer. Those medications included pregabalin, Baclofen, Percocet and morphine. Unfortunately, when I moved back to Ohio doctors treated me like they would treat a drug addict, and took away the morphine and Percocet when I was only 4 months into a spinal cord injury. They stated that it was the rules in Ohio and did not take into account at all that I was a quadriplegic with a contusion between C6 and C7 just released from the hospital. They left me suffering, that is until I discovered kratom. To be quite honest, if it wasn't for kratom to help me get through those really intense flare-ups of pain I would have taken my own life. There is a lot of hysteria and unscientific knee-jerk reactions going on surrounding this plant. It is my understanding that the Ohio Board of Pharmacy in the state of Ohio is partaking in these reactions and pushing to ban mitrogynine all together. This would leave millions of responsible adults in Ohio in agonizing pain and suffering. It would turn me into a criminal overnight just for trying to manage my suffering. I am writing to the board members urging you all to adopt the Kratom Consumer Protection Act instead of the proposed rule that lacks appropiate scientific data and does not consider the real human suffering that would take place. This Kratom Consumer Protection Act legislation would allow responsible adults to consume kratom in a safe manner and it would adopt quality controls ensuring that the products on the market are clean and unadultered. There is nothing wrong with passing legislation that would allow responsible adults to continue the use of Kratom while at the same time preventing irresponsible consumption and distribution of this life-saving plant. Cannabis, alcohol and nicotine are sold to adults everyday and scientifically they are all more harmful than the mitrogynine. I recommend seeing this issue through the mind of a scientist and separating the Kratom concentrates from the raw plant material. The proposed Mitragynine Rule should not be passed. Throwing this down on the Ohio population will lead to hard drug use. People who have been managing their pain with kratom are going to be forced to find a substitute. When you look at the science and statistics Kratom is a much safer option than individuals going out and trying to buy heroin, morphine, fentanyl, Percocet, oxycodone, hydrocodone or other hard pain killing drugs on the black market. Please do not do this to the responsible adults in this state who aren't harming anyone. Many heroin and opiate addicts have used Kratom to successfully get off of those hard drugs. I urge you to consider adopting the Kratom Consumer Protection Act instead. Thank you for your time and consideration

Amelia	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 55 year old male who has used kratom on and off for about the past 12 years. For me, it acts as a subtle boost and mild pain reliever, so that I can be productive on those days when aches flair up. I would like to see continued access to natural Kratom products, such as powdered leaf. It would also be nice to see some regulation, so that I can feel more assured that the products for sale are not contaminated with excessive amounts of heavy metals, pesticides, adulterants, etc... Please support the AKA's (American Kratom Association) thoughts on consumer protection. Thank you.
Avon Lake	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello I wish to protect the scheduling of natural Kratom as a number 1 drug. I have been taking Kratom powder for almost 6 years now to assist with chronic pain. I was born with spina bifida, where the spine is not closed at birth. I am in constant pain and there is nothing that doctors can do for me. I was in a pain management program but attempted suicide and was removed from the program. After having no pain medicine I found Kratom through research online. With Kratom I've had some of the most pain free days in my life with the only side effects being becoming sleepy or nauseous if I took too much on an empty stomach. I will be 72 years old in March and I would suggest going ahead with the scheduling the 7OH version but not the natural unadulterated version, that please must be kept available. Thank you for your time. I have taken kratom to help with chronic back pain. It is an affordable and convenient solution. As well as much healthier compared to prescription medications.
Hudson	Ohio	2 - Oppose - Used to Treat Chronic Pain	I began using kratom after a significant back injury. I was on nerve pain medication (Lyrica) and painkillers (tramadol) for nearly 3 years before approaching a return to "normal". I continue to deal with residual nerve pain in my extremities (feet), and kratom helps to offset the pain and distraction. Further, when experiencing acute recurence of local back pain (back "locking up" from "slipped disc"), a specific kratom strain provides relief to a point that helps offset the need to obtain any narcotic painkillers. I do not find that this substance is addictive in any way, shape, or form. I find it more akin to a cup of coffee than anything.
Pataskala	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please do not ban all Kratom products. Kratom leaf products are safe and are an alternative treatment for both chronic pain patients and those with OUD. Thank you.

Pataskala	Ohio	2 - Oppose - Used to Treat Chronic Pain	I was in a car accident 10 years ago and smashed my ankle to pieces. The pain at times was unbearable, and I was prescribed pain pills. I did not want to take them too much and get addicted so ceased using them. At first, I could barely walk and my ankle would not bend. With countless hours of physical therapy and gym time, today I have some range of motion, although with really bad arthritis.Kratom has helped me for 9 years now with the ankle pain and honestly with anxiety as well. I have kept my dosage steady, and even at times take less or none at all. Unlike pain pills, you dont have to keep increasing doses for it to remain effective. Kratom helps me be the person I want to be. I show up for my kids, employer, and husband with positivity and kindness. It helps with my pain and enables me to walk without a limp. Please regulate powdered leaf , not ban it completely. If regulated, we would have more confidence in the product and it would be safer. Thank you for considering the peoples thoughts and opinions on this.
Hilliard	Ohio	2 - Oppose - Used to Treat Chronic Pain	In 2018 I was diagnosed with stage 4 melanoma, spreading through my lymph nodes on my neck. After surgery and chemotherapy Kratom has helped me with my lasting side effects of the cancer treatment. It is a mild and well tolerated medicine that I have taken daily for years now. A sudden ban of plain kratom leaf would cause harm and health emergencies for many Ohioans that use this natural medicine to live better lives. Regulation measures to ensure quality and safety make sense, out a total ban is unnecessary and would to my and many others lives. please make right choice we are counting on you. Thank you and best wishes
Fairfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	This rule banning natural kratom harms americans. This will cause loss of life, moral, societal destruction furthermore. Whole leaf kratom is a miracle for the opioid crisis. Without it, many die, or end up committing suicidie due to the unbelievable opioid trap. WHOLE LEAF is not life destroying. It's life enhancing. I have multiple family members who SURVIVE ON IT. They can come off it whenever, without horrible withdrawal, and it keeps them functioning and happy though chronic pain and disease. Banning whole leaf kratom is a decades wide MISTAKE. This is genuinely extremely reckless. Banning 7-OH is one thing, but whole leaf doesn't do ANYTHING close to 7-OH. HELP THE PEOPLE- With love.
Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I was in a motorcycle accident April of 2013 I've had nine surgeries on my right leg was off work for 2 years I have leg pain everyday I get up and go to work 6-7 days a week I take Kratom to help me get through my day to help with the pain
Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	My name is Curtis Little from Pennsylvania and I've been using kratom since 2015. It has been a blessing in my life. I have chronic Lymes disease, which causes me a lot of chronic pain, loss of energy/sleep and mood disturbances. Kratom really helps me treat all those things with minimal side effects. Ohio needs to keep plain leaf kratom legal for consumers. 7 OH which is a synthetic derivative is the only thing to fear here. Not plain leaf. Keep kratom legal!

Toledo	Ohio	2 - Oppose - Used to Treat Chronic Pain	I take kratom to control pain because I suffer from migraines, Addison disease and Adrenal insufficiency. My Dr's wanted me to see a pain management dr and take a controlled substance (hydrocodone) I dont want to be on medication that will kill me in the process of allowing me to feel alittle better. Kratom has given me hope to live a somewhat normal life. I've told alot of people who struggle with pain about kratom and it has given them a new lease on life. Please don't ban this natural herb. If they made Marijuana legal, why can't they make kratom legal?
Toledo	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using kratom responsibly since 2016 and have had no problems at all. I decided to switch to something holistic after the doctor found cysts on my kidneys that formed due to the tramadol the pain clinic had put me on. I hope and pray that you take into consideration the thousands of people that also have been using kratom responsibly for decades. Please let the American Kratom Association continue their hard work to keep kratom safe. Thank you for letting all involved make their statements. Sincerely, Beth Nelson
West Chester	Ohio	2 - Oppose - Used to Treat Chronic Pain	I use Kraton for pain.Iam 68 yrs old.This is not a fair decision from our Governor Dwine. I have never had a problem with this product. Now I will have to get a opiate pain reliever. I will make sure I vote differently this yr.Why not put a age limit on who can purchase Kraton. This is a ridiculous ban
Malvern	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I am a 67 year old retired educator with chronic back pain since childhood. PURE Kratom powder tea helps me cope without the use of prescribed opiate pain killers. If you take healthful tree leaves away from responsible consumers like me we will surely resort to dangerous street drugs as Doctors become reticent to giving opiate prescriptions. Then watch the bodies pile up. Keep unadulterated kratom legal. But please also regulate dangerous adulterated kratom products.

Clarks Summit	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	Formal Testimony: Please Exclude Pure-Leaf Kratom from the Ban | To a Bedridden Prison: Why Pure-Leaf Kratom is a Lifeline Dear Honorable Members of the Ohio Board of Pharmacy, I am writing to you in your capacity as honorable members of the Ohio Board of Pharmacy. While I live in Pennsylvania, I am providing formal research and a personal impact statement regarding 4729:9-1-01.2 to assist the committee in understanding the critical distinction between pure-leaf kratom and its concentrated byproducts. As you review this testimony, I urge you to consider the human cost of prohibition. Please do not support a ban that would force me back into a “silent prison” of illness. I ask you to choose a path of psychological insight and compassion by protecting the botanical leaf that granted me a second chance at life. For over a decade, I lived in what I can only describe as a "silent prison." I was confined to a bed by Myalgic Encephalomyelitis (M.E.), a condition that stole my ability to live, connect, or even function. During those years, I was a ghost in my own home. I could not speak a single word to my wife, Xiaoyu, let alone hold a fork, read a book, or participate in a simple conversation. My life was defined by a crushing, unrelenting weakness that made even the energy for a telehealth appointment impossible to find. Doctors offered no solutions, and traditional pharmaceuticals brought only side effects and diminishing hope. My life was slipping away until I discovered pure-leaf kratom. Today, because of this plant, I am not just surviving—I am thriving. I am completing my degree, working a full-time job, and finally spending quality time with my wife as a fully present husband. This second chance at life is only possible thanks to my safe access to pure-leaf kratom. As you consider your legislative agenda, I implore you to look beyond sensationalized headlines and see the real human lives at stake. Prohibiting kratom would not protect the public; it would destroy the lives of millions who, like me, use it as a responsible tool for health and wellness. The scientific evidence is clear: state-level bans are actively dangerous. Research shows that these prohibitions correlate with a significant increase in opioid overdose mortality, such as the 11% spike seen in Vermont, as users are forced away from a natural plant and back toward lethal street opioids. A major source of confusion in this debate is the failure to distinguish between traditional, pure-leaf kratom and dangerous, unregulated concentrates. Pure-Leaf Kratom: In its natural form, the leaf contains only trace amounts (maximum 0.1%) of the compound 7-hydroxymitragynine (7-OH). Adulterated Concentrates: These are chemically altered products often found in gas stations that can be up to 500% more potent than the natural leaf. Data from the CDC and state health departments show that 87-96% of kratom-associated fatalities involve polysubstance use, meaning the pure leaf is rarely, if ever, the cause of death. Furthermore, the primary alkaloid in the plant does not produce the same lethal respiratory depression that makes street opioids so deadly. We do not need a ban that drives users into the underground market; we need smart, compassionate regulation. The KCPA establishes a regulated marketplace that ensures product purity and restricts the sale of dangerous concentrates. This aligns with successful public health models in nations like Portugal and the Netherlands, which prioritize health and safety over punitive measures. I implore you to act in favor of regulated access rather than total prohibition. Do not vote for legislation that would condemn me to

			return to a life-stealing prison of bedridden infirmity. Please choose evidence-based policy over fear and safeguard the very plant that allowed me to become a thriving, productive husband and citizen once again. Sincerely, Joseph Anthony Harrington Pure-Leaf Kratom Advocate South Abington Township, PA 18411
Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	Kratom is a very mild natural substance with pain-relieving qualities. Now that people in chronic pain have no access to relief due to the opioid crisis, I ask that you not take this away from them. It is the derivatives that are concentrated that can be a problem. Ban them if you wish. But the leafy form of Kratom does not pose the same risk, and should be kept available to people to help their pain. I am a nurse. I am also getting old, and have chronic arthritis. I am sure the day will come when I need help with this pain. I would like to have a natural herbal treatment available. Over the counter medications have serious side effects. Kratom does not if used sensibly.

Washington	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	Kratom has not only helped me with physical pain I have such as migraines and arthritis, it has tremendously helped me with depression. I urge focus on regulation instead of a ban. So many people depend on this for relief.
Lancaster	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I'd like to tell you about my experiences with kratom. I am a 74-year-old woman who, despite being extremely health conscious and fit, suffers from significant problems with inflammation and arthritis. I began taking kratom for a frozen shoulder but, quickly, realized that it also alleviated the crippling total body inflammation and pain I had begun to experience as a byproduct of simply growing older. It is not an exaggeration to say that kratom gave me my life back. Prior to discovering kratom, I often thought, and even said aloud, "I guess constant, crippling pain is the price one pays for getting old and it's probably a good thing because it makes one feel as if dying won't be unwelcome." I no longer view my life, and death, in that way. I take kratom in 5 small daily doses and, in 10 years, have experienced no side effects whatsoever. I do not, however, want to go back to my pre-kratom days and if Ohio continues with its attempt to make leaf kratom illegal, I will have to avoid your state (which will be difficult to do, since I live next door in Pennsylvania). I have a master's degree and, before taking kratom, I carefully read everything I could get my hands on about mitragyna speciosa so that I could understand it's MOA and feel confident that it was safe. I urge you not to succumb to political pressure but, instead, to follow the science which clearly demonstrates kratom's safety and efficacy. Finally, I'm a retired mental health professional and I once had a client who committed suicide because she could not see an end to the pain she was experiencing due to severe scoliosis. How I wish I had known about kratom at that time as I now believe it could have saved her life. I honestly do not know what I will do if kratom is banned in my state of Pennsylvania and I'm sure that residents of Ohio who are daily kratom users are now asking themselves the same question. I strongly suspect that you will create a whole new class of criminals as people who are unwilling to go back to a life of pain, seek underground--and, therefore, less safe--avenues for obtaining kratom. Thank you very much for considering my views as you make this important, life-altering, determination.

Williamstown	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	My name is David Anderson, and I am writing to oppose making mitragynine schedule I. I would like to request that a hearing be held on the matter; a hearing which relies on testimony of real people, and scientific evidence, so that this matter can be reevaluated, or withdrawn entirely if it does not reflect the will of the people, or the facts as proven by science. Eliminating lawful access to mitragynine will be a public health detriment. Scores of people rely on mitragynine to help treat chronic pain, as getting prescription pain relievers has become increasingly difficult, nearly-impossible for most people, regardless of their level of pain, and furthermore some people find mitragynine a more effective and sustainable alternative to traditional pain medications. Just as many, if not more, rely on mitragynine as a way to detox manageable from hardcore street opioids, drugs that can and do kill every single day. Many people including myself use kratom's chief alkaloid mitragynine as a cessation aid, and furthermore a deterrent to relapse. Safe, lawful access to mitragynine is saving lives, has already saved countless lives. Making mitragynine illegal will result in many deaths, it is an undeniable truth. People taking it for pain will see their quality of life reduced. This is the case for my wife, who is diagnosed with psoriatic arthritis, an extremely painful disease causing erosion and degeneration of a person's joints. Despite this very serious, chronic, permanent diagnosis with no cure, her doctors refuse to give her narcotic pain medication. If ever there was a person who deserved powerful painkillers, it is my wife, who often struggles to walk due to her debilitating pain; yet her doctors will not prescribe her pain medication that would be effective. She relies on kratom's alkaloids to have a tolerable existence, and fill the often wide gaps left by her prescriptions, and there are so many people in her situation. People like me who rely on kratom's alkaloids to get off, and stay off of dangerous, deadly drugs may return to using those drugs as they see no alternative, and may not be able to maintain their abstinence without it. This is already occurring in states that have wrongly banned kratom and its alkaloids. Please, please consider the public's safety and regulate, do not prohibit. I am asking you on behalf of myself, my family, and my community: we need access to kratom. We rely on it to live our lives. We are not druggies, we are contributing members of society, we are Americans, and we have a right to put in our bodies what we see fit as responsible adults. Thank you for your time and consideration. -David Anderson.

Shrewsbury	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	My husband and I will no longer travel to Ohio for music festivals and Cedar Point if this bill is passed. I do support appropriate safety regulations on kratom, but it should be done through legislation and specific regulation. I want to share why kratom consumer protection matters to me. Natural kratom saved me my chronic pain from scoliosis and Lyme disease that led to addiction to opiates. I have been clean and fully functional for several years now. Thanks to kratom I was able to get off opiates and manage my pain. I went back to college, graduated, and now I work a full time job while helping my fiance raised his son. Without Kratom I don't know where I would be. I am just one of millions of people whose lives have been made for the better by this miracle plant. Natural, whole leaf Kratom is safe. It's the synthetic 7oh products that are dangerous. The synthetic products need to be banned. Please look at the science provided by the FDA, the American Kratom Association and Johns Hopkins University. Natural Kratom is safe and effective. It is a miracle plant with numerous benefits. Instead of banning it, I urge you to regulate it and enforce the Kratom Consumer Protection Act to protect Kratom consumers and the public from adulterated products. Please look at the science between synthetic and natural kratom. The synthetic products need to be banned. The natural whole leaf products are safe and should be regulated in a protected manner for consumers that choose to use it for its beneficial properties. Please do not make natural Kratom consumers criminals overnight. These people are not criminals. They are American citizens who deserve natural options for their healthcare. 17 states have now passed the KCPA because they have listened to the science. Please review the science, review the facts, and leave emotion out of legislation.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using kratom safely and responsibly for 8 years. It controls my chronic back pain. I do not have to use oxycodone daily, thanks to 2 teaspoons of kratom. Please do not ban! alcohol is more deadly and addicting! Sincerely, Diane Pekel
Mansfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 45 year old mother of 2 who deals with multiple painful autoimmune diseases. I have been a consumer of kratom and kratom products for the past few years. I consume kratom to help manage my chronic pain without the side effects that prescription medications prescribed by my doctors have caused. I have tried many, many different treatments over the years (decades to be frank) and have been to a point that I was barely able to function and care for my two boys who are both on the Autism spectrum and require constant supervision and special care.I am urging you to please think of what will happen to the many many Ohions who responsibly consume this plant to have a quality of life.I also urge to think of the many other who utilize this plant to get off of deadly substances like fentynal . I agree that some companies have been reckless and predatory with marketing when it comes to some of the alkaloid products but feel that regulations are the answers. I will have my life negatively impacted by a ban on both kratom and the concentrated forms of it and with Doctors unable or unwilling to adequately treat pain where will these people turn? Will they be unable to function again ? Turn to a black market? The streets ? The science on kratom is there and it is something I have seen change so many lives for the better

North Olmsted	Ohio	2 - Oppose - Used to Treat Chronic Pain	I would like the board to know that for about 13 years, I've used one level teaspoon of kratom each day in a tea to help with chronic pain from multiple spine operations. I haven't noticed any addictive or toxic effects at all from this old herbal home remedy. Also, I believe kratom has helped me avoid addictive opioids and health-damaging NSAID's or steroids. I cannot imagine why anyone would want to make this helpful plant illegal, considering the alternatives of debilitating pain or harmful drugs. The reputable source company also does testing for contamination. I would urge you to take seriously the comments shared by people like me who have enjoyed the modest benefits of this truly useful plant. Consider a warning label against abuse rather than a ban. Scientific study of it is much more difficult if it is on Schedule I. Please keep in mind that the federal government has already considered such a ban, but declined to do it based on the wealth of information they received. Thanks for allowing comment on this important matter.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am writing as a long-term Ohio resident & kratom consumer to share my perspective on the Ohio Board of Pharmacy's proposed Mitragynine Rule, which would classify mitragynine ~ the primary active compound in kratom ~ as a Schedule I controlled substance. I have used kratom off & on since 2015 as part of managing chronic pain, PTSD, depression, anxiety, chronic fatigue syndrome, etc. For me, kratom has been a harm-reduction tool that has helped improve my quality of life when other options were either ineffective or came with significant side effects. I use it responsibly & with intention, not recreationally. I am deeply concerned that classifying mitragynine as Schedule I under Ohio law would criminalize all kratom consumers, including individuals like myself who rely on it for wellness. Punitive measures of this nature would not eliminate demand but would instead push consumers toward unregulated markets, increasing risk rather than reducing it. Science-based regulation that ensures product safety, quality control, accurate labeling, & age restrictions is a far more responsible approach than prohibition. Policies should be informed by current research & real patient experiences, not fear or misinformation. Many Ohioans use kratom to manage chronic conditions, remain productive, & avoid more dangerous alternatives. Please consider the voices of consumers & patients when making decisions that directly affect our health & well-being. I urge the Board to choose reasonable regulation over criminalization. Thank you for the opportunity to comment.
Batavia	Ohio	2 - Oppose - Used to Treat Chronic Pain	I've two major back surgeries. I was on pain medication for majority of my adult life. Kratom has helped me with my pain and got me off dangerous pain medication. I am able to work and function like a regular person. I feel that if you schedule this as a teir 1 you are going to cause another drug epidemic. I take all natural Kratom. It doesn't make me feel light headed or makes me feel buzzed like pharmaceuticals. Kratom has helped me get my life back and now you're trying to set me and everyone else who use it to live a happy normal life.

New Philadelphia	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kraton should remain available to people. It is a natural pain reliever and all natural. The government has taken away pain meds so people that are in actual pain need this med. This has even helped addicts get off other drugs. People are going to abuse many things but that is people's choice not the government. Please stop this needless regulation
New Philadelphia	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am contacting you to oppose any criminalization of Kratom. I am a long time Kratom user and it is very beneficial to my life. I am over 50 and work a physically demanding job. Kratom allows me to continue to work while assisting in treating physical pain without severely intoxicating me or inflicting other unwanted side effects from much more dangerous prescription or street medications. It is safe and effective for me. And as an adult I should be allowed to chose how to manage my pain without turning to dangerous street drugs or having to rely on much more addicting pharmaceuticals. If you have to put regulation in place to assure its safety then do so but outright making it illegal will just turn it in to a black market item subject to adulteration and supporting criminal organizations. The vendor I get it from tests for heavy metals and other contamination. If this substance is made illegal I'm afraid of what will become of my life. Without ability to treat my chronic pain I will be forced to use either prescription medications that are less effective or to dangerous street drugs. I'm urging you to please allow consenting adults the freedom to treat themselves with this natural plant.

Loveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I depend on Kratom powder to keep the horrific pain of MS away without expensive pharmaceuticals that don't work as well and to which I have a bad reactions. Kratom has allowed me to continue to participate in life. There is no reason to ban Kratom powder. I have been using Kratom powder for 15 years and have had zero side effects and all my organs are operating as they should. MS is a very painful condition and I am grateful to nature for providing such a beautiful plant medicine to help ease pain without the horrific side effects of the pharmaceuticals such as opiods and fent, which no one seems interested in doing. Scott Gotlieb tried to ban real Kratom before because he owned stock in a company that made synthetic kratom which requires a doctor's visit and a script. Isn't it time we stop banning the actual plants in favor of big pharma? He failed with a nationwide ban so went state to state trying to get the "pharmacy boards" to ban it. We stopped OHIO from banning it last time which was SOLELY profit motivated. How many people own stock in that pharmaceutical company that developed a synthetic Kratom? Is this why we're having to go through this again? Profit motive? Please stop banning natural plants. We went through this with cannabis--and now, again, Kratom? If you need to ban anything, ban that vile "drink" 7-OH that's sold in gas stations, ban gas station sales of these highly concentrated products, but leave the pure leaf powder alone. I have never needed to use a Kratom concentrate to get pain relief from powered leaf Kratom. I don't agree with making concentrates and selling them in gas stations. That drink is dangerous, it's not made for people like me dealing with pain issues, we all know who it's made for, and keeping it easily available in gas stations is the issue. I buy pure leaf powder from a company that tests their powders and sell at a fair price. I am against adulterating natural plants into concentrates, if it wasn't "born" that way the plant should be left to do what creator intended. Ban gas station sales, ban that nasty 7-OH concentrated drink, leave the powder alone. It's saved my life. In the 15 years I've been using powder leaf Kratom I've only had to up my dose 1 time as my condition worsened...from 1/2 tsp to 1 tsp 3x a day. Please don't ban the only thing that gives me the ability to participate in life. There's no reason to ban the leaf powder, no reason, at all, except for the profit of people who don't care about "we the people", if they cared, the Sacklers wouldn't have been able to murder thousands of Americans with their product. Money. Not health, not well-being, money. Please don't ban powder leaf Kratom. Thank you.

Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello, our family OPPOSES the Classification of Mitragynine as a Schedule I Controlled Substance. We have safely enjoyed natural Mitragynine/kratom leaf for chronic pain management and sleep disorder for 10 years. It is very mild but has become a supplement that is our good friend. Please protect our access to this plant! Thank you! Please do not restrict the sale or distribution of Kratom in Ohio! I have used it for years and have never had any adverse effects! On the contrary, it helps me on many levels, and I have experienced many beneficial health affects!! Please do NOT classify Mitragynine as a Schedule 1. It is the only natural organic substance that has cured my chronic anxiety and depression for the past 10 years. It is safe, mild but reliable! I am writing to Oppose the classification of Mitragynine as a Schedule I Controlled Substance. My family and friends have safely and responsibly consumed Kratom/Mitragynine for 5+ years to support healthy sleep, mild pain management and energy for exercise. The effects are subtle but very helpful. Kratom/Mitragynine is a leaf that has been brewed and consumed as a tea for centuries in Southeast Asia because for mild pain management and an energy boost. My family and friends will not financially or politically support anyone who attempts to ban this plant. Thank you for listening and kindly protect our rights on this issue.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please follow the science and allow Ohioans to continue to access mitragynine products! I personally rely on them to regulate drug-resistant conditions that can be life-threatening without proper treatment. It has been a literal life saver, extremely safe, and has minimal risk of abuse -- and all of this is supported not just by the experience of people like me, but by the science. This substance does not meet the criteria to become a schedule I substance. The science is clear on that.
Hillsboro	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have severe Chronic Pain, I also have a Congestive Heart Failure & Coronary Artery Disease. Which means I can not take NSAIDS. All I can take is Tylenol, which does not help Regular Base Kratom Powder , helps tone the severe pain down so i can move some. Have been taking for years, never had any problems with it. Regular Kratom Does NOT make you impaired , and is not dangerous . It is no where close to narcotics. Its actually safer in my opinion. If it were banned, I wouldnt have any other options for my pain. I have done injections many times, had a bad reaction to them, and did not help for very long. Plus very expensive. THC is much worse in my opinion.

Geneva	Ohio	2 - Oppose - Used to Treat Chronic Pain	Mitragynine is a safe substance compared to many others out there. People are dying from substances that cause respiratory depression and intense addiction profiles and withdrawl symptoms. Mitragynine however is not one of those dangerous substances so it shouldn't be treated like a dangerous substance. People have used the plant Mitragyna speciosa also called Kratom for a very long time. No deaths have happened from taking the natural Kratom plant or Mitragynine on it's own. People have used it to help them with chronic pain it's very effective for helping with that without causing the side effects, dependency and withdrawls of other treatments for chronic pain. If this rule bans the plant Kratom or Mitragynine people will lose access to a safer substance than many others out there that people might try to help with their pain or the other benefits of Kratom. I've seen it help people with pain, anxiety, energy levels, sleep, recovery from other dangerous substances like helping with withdrawl or getting them off of other dangerous substances and mental health. There are other substances that have more harmful effects that aren't scheduled or banned. Kratom doesn't belong in this category. It's not harmful to the liver or other parts of the body like some other substances that are legally or illegally obtained by Ohioans. Thanks to the American Kratom Association also known as the AKA helps the safety of Kratom because it's regulated. They have to be certified to even sell it and they do lab testing so people know what they're buying unlike many other things people can buy. This does not need to be scheduled. People aren't dying or being injured from this. People aren't spending all their money or doing crimes to get it. People aren't hurting people because they blacked out or lost control. Don't take something that's shown to be a helpful thing and even life saver for many people.
Sidney	Ohio	2 - Oppose - Used to Treat Chronic Pain	My name is Robert. I am 74 yrs old and retired. I have been taking kratom for over ten years. I have purchased it only from recommended, legitimate online companies. Super Speciosa to be exact. High quality kratom that has honestly saved my life. Due to chronic pain from various medical issues, I have a hard time at night relaxing and going to sleep. Kratom changed all that. This natural tree bark derived product is a viable, safe alternative to prescription drugs. If there is so much government concern about it, then they really need to talk to regular users like me. Please, keep kratom safe and available to the public.

Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I oppose the total ban on NATURAL KRATOM LEAF! I am a mother of two and NATURAL kratom has saved me! I have SLE and the pain can be disabling. Kratom has given me my life back! Opioids and other pain medications have side effects that hinder my life! NATURAL kratom leaf has proven to be safe, it is only the synthetic products that are being LABELED as kratom BUT ARE NOT KRATOM that is the issue! There are 5700-6700 ALCOHOL related deaths in Ohio every year, why isn'tthat being banned?! There are ZERO natural kratom leaf deaths anywhere. Mitragynine and 7-hydroxymitragynine alone are NOT KRATOM- they are just those chemicals. Kratom is a "cake" of natural compounds that synergistically work together to help people so so many things! You literally cannot take too much natural kratom powder. If you ever take more than you need, you get nauseous and that negative feeling prevents people from wanting more! There is no reason to be natural kratom! Protect it! Banning natural kratom powder takes away our right to live pain free and free of manufactured drugs. Kratom is taking the fall for the substance that is SYNTHETIC and is NOT kratom. 7-oh or 7 hydroxymitragynine although found within the WHOLE of kratom, alone it is NOT kratom. 7oh is less than 2% of the total weight of kratom. The companies that were making their products were selling a synthetic 7oh that was extremely concentrated and fraudulently calling it kratom in order to get sales. Those companies should be prosecuted for knowingly misleading the public and now they have put the entire community who drinks natural kratom tea responsibly at risk. There will ALWAYS be someone that wants to abuse anything and everything and get high, ie. Tide pods, cough syrup, glue, markers, paint, the list is endless! We have to stop punishing the majority to save the few that DON'T want to be saved! Please do not take NATURAL KRATOM POWDER away. Kratom is the only thing that helps with pain AND does not remove ANY mental faculties. There is zero health concerns when drinking natural kratom tea, unlike alcohol and so many manufactured drugs on the market. People have been using what God put on this earth for millions of years. Who has rights to ban something God gave us to make our lives better? Ban the synthetic products but please leave natural kratom powder and please allow people like myself to educate the public about kratom. No one is allowed to post anything on social media about kratom so when 7oh hit the market, no one had any way of warning people that it was NOT kratom. Calling 7oh "kratom" is like calling "the pinch of salt" the cake.

Springfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have type I diabetes and kratom saved me from spending my life bedridden from diabetic neuropathy. My primary care physician recommended it in 2006 when I could barely walk and she told me I would have to be on narcotics for the rest of my life to have any quality of life. I refused to destroy my liver and feel "drugged up". I purchased it an Indian health market in leaf form and made it into a tea. After the first cup of tea using 1 teaspoon of the crushed up leaves in my coffee grinder my doctor suggested I buy, I was amazed to the point of tears. I was able to go back to the career I loved and help support my family. That was about 20 years ago and to this day, I still take the same amount, one teaspoon. Because of my type 1 diabetes, I receive liver function, kidney function etc testing every six months. I've had colonoscopies and there has never been any damage to any of my organs or systems. If I had been on narcotics for 20 years, my liver would have been in bad shape. Now that doctors no longer offer pain medication, not even after surgery in many cases I've been told, I would have no quality of life and been bedridden. I have tried marijuana a few times to see if that helped the neuropathy and it does not. It just makes me feel paranoid and unable to function. As I said, I have never had to increase my dosage in 20 years and continue to be pain free. I was even able to run two marathons in the last 5 years and I'm 55 years old. Please allow people like me the ability to have a quality of life. I have purchased mine from a place in Florida that has been in business a long time, tests every batch for any additional substances added, botulism and other toxins and posts all test results by batch on the website. If a batch does not meet their strict requirements that comply with the KPCA regulations, they throw it out and immediately stop purchasing from that vendor. None of the suppliments sold online or in the grocery store go through any of this rigorous testing and they are accessible to anyone. I should have the right to choose a plant over chemicals. Join so many other states who have instead adopted the KPCA to regulate and require testing to their customers. They also must use specific machines in a sterile environment to process it. I don't think it's a bad idea at all to have it removed from local gas stations and vape stores as you have no idea what's in it but there are a collection of online vendors who do abide by these regulations and you are assured there are never any additives. I do not want this natural plant to be thrown in with the recent 7-oh product. It is nothing like it and it cannot be created just from having the plant or powder. Please do not support a ban on Kratom leaf or powder. We need your help to protect the rights of hundreds of thousands of citizens to better manage their overall health and well-being. There are far more intense side effects in marijuana than Kratom and for many of us, that plant is not an option for us. Thank for taking the time to listen to the people of this great state. We need you to advocate on our behalf. Please consider adopting the KPCA so products like 7-oh never make their way to store shelves again. Thank you, Kristi.

Newark	Ohio	2 - Oppose - Used to Treat Chronic Pain	As I was walking thru a grocery store this afternoon I passed several people who had a very strong odor of marijuana about them. Whether it is for medicinal or recreational how is that marijuana has been legalized (especially recreationally) when there is a vast amount of science regarding its side effects. Things like birth defects, schizophrenia just to name a couple. Yet there are no known side effects of natural kratom being used responsibly. If someone uses it irresponsibly by itself or in conjunction with other substances that is no reason to make criminals out of those who use for legitimate purposes and have done nothing wrong. And a patient on blood thinners I cannot take Advil regularly and with the liver problem that Tylenol can cause why should I be prohibited from using natural kratom as a pain reliever if I were to choose to do so. Thank you I wish to comment on our potential action on natural Kratom. As a MAHA mom, organic gardener, scratch cook ,baker and rural Licking cou ty citizen I am in agreement with banning artifical manmade Kratom sold in convenience stores. But as someone who grinds their own flour and has been able to stop taking all pharmacutical drugs, metformin, Byetta,statins, omeperole, Tylenol, and Nsaids, for over 15 years, including curing my Lyme (Aug 2021) with vitamin C, I am asking you to re-evaluate your thoughts on Kratom (a natural tea leaf) I am 65 years old and had knee replacements done Spring of 2020. Yes during Lockdown, no Covid jab for me!. I was prescribed Norco which I hate and can not tolerate! And used a small amount of kratom tea instead. Late spring and Summer of 2020 I was back doing my daily hour walks with my dog. I only use kratom at night before bedtime or evening when my back may hurt from gardening. I have Never taken illegal drugs, smoked tobacco nor smoked Marijuana, which I think does need be illegal! It's digusting and stinks. I had dealt with many absent parents who were Alcoholics, and drug addicts for over when I was a case manager for Licking County CSEA (Family Violence caseload) for15 years. I am all too familiar with the effects of the abuse Alcohol & illegal drugs. Never did I hear of them using Kratom. Marijuana yes, they reaked of it at court and many times high on Meth. Thank you for your time. I am against this rule because as a law enforcement officer over 30+ years I have never seen any one under the influence of or die of natural kratom. The synthetic kratom should be banned as it is an adulterated substance. Many of the comments listed in your board review were from people whose loved one had a substance abuse problem and was trying to either substitute synthetic kratom for narcotics or use it conjunction with. My wife does not like to take any pain meds and cannot tolerate strong narcotics. She has used natural kratom for years and has no ill effects or impairments from it. I have seen many more problems caused by marijuana over my career yet that has been legalized. I believe this rule is an effort to control a non existing problem. Thank you

Huber Heights	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom helps me in so many ways. My back pain is my main issue which kratom helps. Another great effect is it tremendously helps my stomach pain as well. I've been on vicodin which was terrible for my liver, oxycontin wick was highly addictive with terrible withdrawal symptoms, and methadone which worked great for pain but made me a zombie and always tired. Kratom also has a wonderful side effect of taking away any urge to drink alcohol.
Fairborn	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please reconsider the language of this rule as it is written so that natural leaf kratom is not banned and made unavailable to the countless chronic pain patients who responsibly use it. They do not deserve to have their medicine taken away and/or be criminalized for seeking relief. Kratom leaf has been used safely in Asian countries for thousands of years. Although it is not current recognized as having a medical use, I believe this is only due to it just not being studied. I urge you to please seek out educational resources and look at the science before deciding. I am not a chronic pain patient myself, but my deceased mother suffered from rheumatoid arthritis for many years and I believe this plant would have greatly helped her based on my own research, testimonials from others, and the few times I have used it myself to relieve insomnia or mild pain. There is a good chance down the road, I may develop rheumatoid arthritis as well, and it is important that natural leaf kratom remains an option. Again, please do not punish innocent people and instead support safe regulation, good manufacturing practices, and education. Natural leaf kratom is NOT a drug. It is medicine.

Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using kratom - pure, ground, leaf powder since November of 2014. I have chronic pain stemming from psoriatic arthritis and recurring tendonitis. Since childhood, I have also suffered from daily bouts of diarrhea that have since been diagnosed as SIBO and leukocytic colitis, or otherwise known as types of "inflammatory bowel disease." Kratom gets rid of my chronic pain while giving me normal bowel movements and function. I get biyearly blood tests for my liver and kidney function and the results are always within "normal" range. I only consume 4-5 grams of plain, leaf powder ONCE per day. I have tried "liquid shots" and extracts like 7OH but I didn't like them because they made me feel "dope-sick" within a few hours of use. I'm not using kratom to get high, either. I also do NOT use kava products because kava is well-known to cause liver failure in certain individuals. The FEEL FREE shots contain kava so I'm not surprised to hear some users are experiencing liver failure from drinking those in particular. I have been consuming kratom for 11 years now. I like it much better than the the oxycodone I got horribly addicted to from 2010-2014. I am 55 years old and cannot take most OTC or RX pain relievers without suffering from severe or undesirable side effects. Kratom makes day to day living easier for me. Once a day, I simmer 4-5 mg. of kratom leaf powder with water on my stovetop for 5-10 minutes every morning. I drink the tea and pulp mixture with a few packets of stevia sweetener. I feel the effects within one hour of consumption. Pain relief can last up to 24 hours depending on the variety of leaf powder used. I am convinced that we can keep kratom legal and safe to use with stricter guidelines in product safety including warnings and cautions to potential, new and existing consumers. A local kratom store on West Broad St. called "MIRACLE KRATOM" only sells leaf powder last time I've checked. That store seems pretty legitimate to me. "Gas station kratom" should be banned in my opinion. Only specialty, licensed stores that sell kratom will adhere to stricter laws and guidelines as decided by the Ohio Board of Pharmacy. I think the problem here is not the kratom itself, but rather the extracts and drinkable "shots" that are manufactured illicitly in backyard laboratories selling kratom products that are adulterated with hazardous additives, alkaloids and/or analogs. Please reconsider banning pure, kratom, leaf powder for consumption by adults living in Ohio. Some of us, including myself, have little to no other alternatives for pain management and other ailments - especially for those with NO medical insurance. All other dangerous products like FEEL FREE and 7OH can be permanently illegalized as far as I'm concerned. Thank you for your service in protecting our community.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	It's incredibly disappointing as a pharmaceutical scientist that there is direct action being taken against mitragyna speciosa - in particular unadulterated plain leaf. Ohio must take a page out of other state's books where consumers are being protected instead of having their lives policed by those who do not have the evidence to back decisions definitively placing kratom at the same level as heroin. Kratom must be protected and it would be a great mistake for the state of Ohio to make bans such as these. Without a doubt, so much benefit has come to those suffering from treatment resistant chronic pain, Crohn's and similar ailments, illicit opioid addiction, and more.

Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am writing tonight to the Ohio BOP urging them to follow the science and not ban Kratom in the State of Ohio. A little background on my history with this plant. I started taking Kratom in 2015 after I sustained Radial Nerve Damage in my right arm. It not only helped with pain management, but it also helped me to stop drinking and smoking. I have been using leaf Kratom ever since, responsibly and safely. I am now 39 years old, and have a clean bill of health. I know that without Kratom, I wouldn't be where I'm at today. I am drug, alcohol and tobacco free, in part to the tremendous effects of this plant. If Ohio were to enforce a ban, I do not know what I would do and my quality of life would suffer greatly. It absolutely terrifies and saddens me that we are at this point. Not only would you be negatively impacting my day to day life, you would also put thousand of Ohioans at risk of relapse or death. I know a lot of people have used Kratom to get off heroin and other hard drugs, and without it they may turn back to using those substances. To ban Kratom, would be a completely irresponsible and rushed decision that would doom many residents of our Great State. I am pleading with the BOP to work with organizations like the American Kratom Association (AKA) to follow the huge findings they've helped achieve that clearly prove Kratom is a safe and helpful plant. Follow the Science, not the fear mongering and misguided information. I am also aware of the "Kratom related deaths" that have popped up over the years, and EVERY single one I've read states that the deceased had illicit and illegal substances that potentially lead to their death. I am in no way discounting these tragedies, but over the years these malicious attacks have led the charge in the negative perception of Kratom. Again, I stress the importance of working with the AKA to educate and displace this false narratives regarding Kratom. Many states still practice the Kratom Consumer Protection Act, and I hope Ohio would continue to follow this, or at the very least practice some form of regulation over an outright ban. I am also aware of the 7OH ban, and while I understand and agree with it, it is partly responsible for where we are now. 7OH and pure Mitragynine are NOT the same, and to blanket them both together is grossly irresponsible and simply not true. I have always purchased my Kratom from a vendor in the USA who prides themselves on lab testing their product and they have never sold any "7OH" branded product. This is the goal we need to strive for, and people like the AKA can help with that goal. Please, I implore you not to ban Kratom and doom thousands of people while simultaneously making them criminals overnight. Thank you for your time and I hope you make the right decision. - Matt
Beachwood	Ohio	2 - Oppose - Used to Treat Chronic Pain	I wanted to share my story. Several years ago I had two back surgeries. 1 failed, and then a fusion was performed. Even afterward, I constantly feel pain down both of my legs. It is often bad enough that I am unable to sleep, or perform daily functions. For a while I was in Pain Management, but then I found Kratom. My life changed. A little Kratom and my entire day was improved. I am able to make it through the day like I used to, without the grogginess from pain meds. I can sleep and perform tasks that were previously out of my reach due to pain. I have been taking kratom (Mitragynine) for 5 years with zero health issues as a result. I am 51. Mine is one of thousands very similar stories. Kratom is a life saver. Please consider this before making this a scheduled substance.

Marion	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello. My name is Sarah and I have end stage kidney disease, Lupus and have fought cancer twice. I'm writing to plea for the State pharmacy board of Ohio to not ban pure leaf kratom. I have been a customer of Life Of Kratom for 7 years and to ban the life sustaining tea left compound will cause such horrible repercussions for not only myself but THOUSANDS of Ohioans in our state. I have in hand my medical records that indicate that kratom is the reason I have been living so long. I should have passed away 7 years ago and because of Kratom I have been able to be functional with a bit of a life. Please don't ban this. I'm 44 and I'm not ready to die and my family aren't ready to say goodbye. Please understand what banning Pure Kratom leaf will do. I am just one of many that will gladly stand before state representatives and provide my medical proof that pure leaf kratom has saved my life. Thank you. Sarah
North Olmsted	Ohio	2 - Oppose - Used to Treat Chronic Pain	I make kratom tea from it's natural vegetation state for my bad joint pain. It helps me function without having severe pain and helps me with my anxiety. With that being said, it is unfair to compare the use of synthetic or highly concentrated kratom (7-OH) to the natural leaf powder. The abuse comes from people using that for the wrong reasons and are giving it a bad reputation. I support the kratom community and it's use in it's natural vegetation state.
Point Pleasant	West Virginia	2 - Oppose - Used to Treat Chronic Pain	Kratom is a beautiful plant that has the potential to benefit people greatly in our society. We deserve to have access to these safe alternatives. Kratom and the alkaloids found within and ALSO derived from (MIT, 7oh, Pseudo, etc...) have given my wife and I and thereby my kids/whole family a higher quality of life. Its a magnificent tool for safe pain management amongst other things. We also use high quality kratom leaf powders make salves/topical ointments for psoriasis and other skin/muscle conditions that works fabulously! We should be studying this and regulating it and educating the public about what it is and what its used for. It is not a very fun recreational substance and not really a very social activity. Its a medicine. A very unique and multi faceted medicine that could serve to benefit all of us. Please don't ban kratom. The whole plant and all of its alkaloids and alkaloid extracts and derivatives need to be studied so we can help each other and ourselves! Thank you have a wonderful day.
Lewis Center	Ohio	2 - Oppose - Used to Treat Chronic Pain	This supplement has eliminated the need for any prescribed medication for my neck injury. All other options were tried or explored with medical staff but side effects were not tolerable with conventional meds and treatments. I am 55 and a highly functional person in our society. I have used this plant for 10 years. I do not get an elevated mood and my dosage has not changed in 10 years. I am against any type of adulteration or extracting chemicals from the Kratom plant. The plant should be sold as it comes from nature to minimize any impact to those who seek to take excessive amounts in an attempt to get a high. Pls keep natural Kratom legal.

Avon Lake	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please respect the AKA and the guidelines they have set in place many states have taken part of. Plain leaf kratom has saved my life after being hit by a drunk driver. And also has helped my mother after a knee replacement in her 60s. As a safe alternative to pharmaceuticals it has given me a second chance at life from pain and anxiety. The Kratom Consumer Protection Act keeps the states accountable for safe consumption of natural kratom and many states have adopted It. We need all to sign it to protect plain leaf plants that's why they where put here. Coffee, tea, etc. thank you from a law abiding considerate Ohio citizen.
Gahanna	Ohio	2 - Oppose - Used to Treat Chronic Pain	Great product! Taken in moderation is very good for pains and mood boost.
Westlake	Ohio	2 - Oppose - Used to Treat Chronic Pain	I do not believe kratom is not as nearly dangerous as 7-oh. Kratom is natural and it's effects help people with pain and opioid withdrawal.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am writing to voice my concern regarding the Ohio Bd of Pharmacy's recent proposal to ban or schedule natural/powder Kratom within the near future. I am 68 years old and have consumed Kratom daily and responsibly since 2014. My physicians are aware of my Kratom use. I have a long history of back pain and mobility issues, for which I had previously been prescribed Vicodin legally by my physician for many years. The use of Kratom has helped me significantly with management of these issues, and has improved my quality of life. Please reconsider this decision and work with advocates towards a reasonable and responsible solution for Ohio. Thank you for your consideration in this matter.

Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am writing to share my personal experience with kratom and to express my concerns regarding the current regulatory process. In 2019, I began using kratom after experiencing chronic pain and anxiety. Before trying it, I conducted extensive research, including reviewing testimonials from online communities where individuals shared how significantly kratom had improved their lives. As someone who is careful about what I put in my body, I approached this decision thoughtfully and responsibly. Today, kratom remains an essential part of my daily wellness routine. Without it, I would be in too much pain to function as a productive member of society. It provides effective pain and anxiety relief without impairing my ability to work. I am a home health aide, and kratom allows me to remain fully functional and clear-headed while performing my duties. For the type of pain I experience, the only alternative would be marijuana, which would render me unable to work safely or effectively. I have serious concerns about the current regulatory approach. I believe the decision to ban or regulate kratom should rest with the Ohio Legislature—elected officials who represent all Ohioans—rather than with the Board of Pharmacy operating under gubernatorial direction. The fact that the Governor appointed all Board members presents an apparent conflict of interest that undermines public confidence in this process. Additionally, I have reviewed the Board's 8 Factor Analysis and found that it relies on outdated scientific information. I respectfully urge the Common Sense Initiative to conduct its own thorough research and verify the currency and accuracy of the science being used to inform this critical decision. Finally, I strongly request that the Board hold a public hearing on this matter. Kratom affects thousands of Ohioans, and we deserve the opportunity to be heard. Transparency and public input are essential when decisions of this magnitude are being made. Thank you for considering my perspective. Best regards, Jacob
Findlay	Ohio	2 - Oppose - Used to Treat Chronic Pain	With all due respect, i cannot believe i have to write you again(i did a few years ago). Please leave kratom alone! Unfortunately, during my 50 years of life, i have been in 2 bad car accidents. 25 years ago i hit a tree head on and broke the C4 vertebrae in my neck. Then 14 years ago I hit a telephone pole head on and compressed/broke the L1 vertebrae in my back. The latter accident was very bad, the damage is permanent and changed my life immediately for the worse. I lived in horrible pain every day of my life and could barely even sleep. The nerve damage causes chronic muscle spasms and the knots in my back feel like half of a golf ball in multiple areas. That accident RUINED my life... Kratom gave me my life back! I have been taking 4 or 5 level teaspoons of natural kratom powder per day for the last 7 years. It takes my pain away and does not interfere with my daily duties at all. Kratom does NOT get me "high" or sluggish in any way shape or form. I do not want to be knocking on my doctors door begging for pain killers(of which he wouldnt prescribe anyways...). Please do not ban kratom, it gives me the pain relief that i need to live a normal life. Thank you, Theodore R. Weyer

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I would like to take a moment to voice my opposition to the proposed rule to ban all kratom products. I would like to alternatively suggest regulating kratom products including selling only pure, unadulterated products and not synthetic or enhanced products and also putting age restriction on the sale of kratom. An outright ban will not only remove a freedom that we enjoy as citizens of American and Ohio, just as we enjoy responsibly consuming alcohol, marijuana, and other substances which pose significant risks if used irresponsibly. It is a dramatic overreach of the government to ban products that responsible adults can use safely and effectively. It is up to the individuals to educate themselves and use products responsibly, just as in the case with alcohol and marijuana, for example. Banning another substance will criminalize previously law abiding citizens who responsibly use kratom for its health and wellness benefits. I have used kratom responsibly for several years. I am a tradesperson and my body has endured significant wear over the years as a result of my profession. Kratom provides me with a means of natural, mild pain relief without causing impairment in cognitive functioning or perception. I use kratom because the alternative to me would be dangerous and highly addictive opioid painkillers or anti inflammatory drugs which have many side effects. I have witnessed others including friends and family benefit from kratom as well. I have a close friend who used kratom to successfully reduce - and then eliminate - the use of dangerous opioid drugs. Please consider the comments you receive from responsible Ohioans and please don't remove yet another freedom from us. Adults should be able to make decisions for themselves and realize the consequences without the state having to take care of them like children. Especially considering the absurdity of a situation where kratom is criminalized while much more dangerous substances remain legal or easily accessible if illegal. Please use common sense and true science in this consideration. Thank you.
Van Wert	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a chronic pain patient and government action is getting between doctor and patient agreements for pain. I am no longer able to obtain low doses of opioids that were allowing me to continue with any quality of life. I tried kratom and it is working as well if not better allowing me to continue to stay employed and be there for my kids. Would the state rather create an unemployed mom that lives off the state and is unable to care for her children?
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please leave the Kratom alone, I have been using it for my pain for years. I have never had side effects from this awesome herb. Like I have with Acetaminophen, and the ibuprofen. Thank You.

Galloway	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 61yr old female with no history of substance abuse. I am a former cigarette smoker and successfully quit in 2011. I consumed alcohol in my young adult days but rarely have a drink now. I consume kratom on a regular basis as it seems to help with the only medical issue I have which is migraines. It allows me to stop a migraine quickly and eases the tension that follows one. I researched suppliers, only purchase from two suppliers who have their product third party tested. The problem is not the product but who is allowed to manufacture and sell it and in what forms. As far as being addictive, many legal items are as well including food. I definitely had withdrawals from nicotine when I quit smoking. Same happens when you quit caffeine or sugar but yet tons of products sold with those ingredients. Let's look at the percentages of alcohol related deaths but yet it's still legal. I believe restrictions on synthetic versions and products with other chemicals mixed with versions of kratom is the problem. In its natural form from a reliable, third party tested vendor, kratom appears to me as an enhancement, not a killer, As Americans, we abuse multiple items daily in excess: too much food, coffee, soda, cigarettes, vapes, marijuana, health supplements. There are complications and death everyday that involve all of these products yet they are sold daily and consumed. The statistics and info provided in this resolution absolutely does not support banning but investigating and weeding out the crappy vendors and manufacturers that lure people in with a "gas station" purchase. Reminds of why I don't purchase sushi from them or a vending machine. Unfortunately, not a lot of common sense in the world today. The more restrictive you make it it by banning will just force an underground version and possibly more harm. Seems to me there are more pressing matters to attend to. Thank you for allowing public comments

Galloway	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a person who has used kratom to manage their chronic pain for years now. And this potential ban would jeopardize my pain control and uproot my life. I was born with a rare and incurable lifelong condition called Ehlers Danlos Syndrome Type 3. This condition impacts my connective tissue, which is the building blocks of the body structures such as bones, organs, blood, etc. As a result of this disorder, I live with chronic pain and experience upwards of 100+ dislocations daily. As a result I rely on a motorized wheelchair because I have a bone deformity in both of my feet, edema in my hips, and a vascular condition which causes swelling, and of course all of this causes me extreme pain, in addition to other issues that would necessitate a new document at this point. While I am in my early 20s, in "EDS years" the actual state of my body is that of a 70-90 year old, and I am in the process of moving to a medical home/assisted living that you would typically expect from a senior that age, because the care I need now exceeds what can be done independently in my family home. As you can imagine, pain control is one of the most important facets of living with EDS. Several friends I know who also have my type of EDS are on prescribed fentanyl patches or implanted pain pumps to manage the pain. I used to rely on prescription pain relievers which were not a good longterm medicine for EDS because of the risk to fragile organs, especially my liver and kidneys which holds additional risk because multiple of my family members have died from liver and renal failure. I also was on muscle relaxers but also had to discontinue them due to them increasing my muscle laxity and thus dislocations. Even taking 10+ pills daily I had little to no quality of life. But for a period after that, there was good news, thanks to kratom. A kratom ban will close this kinder period of my life. I have been managing my symptoms with kratom for several years now. This plant has enabled me to go to college, have a career, and live so much fuller than when I was nearly bedbound with pain before discovering it. The entire chronic pain community has to worry about the bad publicity with kratom now. The deaths that occurred with kratom in someone's system were due to other substances found upon autopsy, as word has spread that you can use kratom to detox from illicit opioids. I cannot speak for this community as I have never used substances this way. Instead I have to worry about being punished for being born with a disease I have no control over. A few years ago I had to quit kratom altogether for a major surgery. I have to admit that I was afraid because I had seen lots of fearmongering regarding kratom withdrawal. However, even at my moderate daily usage for years, I experienced no withdrawal symptoms at all, and proceeded to have a healthy and uneventful recovery. People who are using kratom to detox from illicit drugs may attribute the effects of the illicit drug withdrawal to kratom. I am in support of banning artificial kratom analogues such as feelfree or artificially charged kratom to intensify the effects. The natural plant powder is safe and impossible to overdose meaningfully on, because of the natural failsafe that if too much is ingested you will simply vomit and free your body from risks of overdose. Or perhaps some sort of registry like the MMJ program to ensure kratom is safely in the hands for those who need it. If you want to talk to people who demonize kratom on false merits, it's only fair to speak to the pro-kratom chronic pain community who can speak on the tangible improvement it made in their lives and where they

			would be without it. Kratom is the only substance which stops the nerve pain in my legs and allows me to sleep without spasms and walk the little amount which I still can. I encourage you to watch the documentary titled A Leaf of Faith. If kratom gets banned, what next? Are we going to ban green tea? chamomile? ibuprofen? Because these too are OTC substances which some use for the same symptoms as kratom helps them. And someone has inevitably died with one of them in their systems. As I write this, one of my neck vertebrae has dislocated and my hands begin to go numb due to arterial compression from thoracic outlet syndrome, and I now have to ration my pain medicine, so I'll be ending this soon. I close my words with an invitation to step into my shoes (and leg braces, and wheelchair, and...) and imagine waking up every day in a body that attacks you just for existing. And a government which is trying to take the one small mercy that you rely on to function and thrive. If you've ever dislocated something from a car accident or sports injury, you know it is no fun. Now imagine experiencing 100+ daily, with no pain medicine, because the natural plant people have used for thousands of years is now banned. Of course, it would be far from the first time that my government made moves that screwed over the entire population of disabled people. Maybe it was my fault for expecting more out of a system that's openly against us at every turn. Can you show us that you can be better to us now? DSB
New Albany	Ohio	2 - Oppose - Used to Treat Chronic Pain	I've been using Kratom for 2 years and I can testify that you cannot overdose from it nor get addicted to it. If you use too much it doesn't work. I have 2 joint replacements and need another one. Also I fell last summer and tore two rotator cuffs. I also have severe degenerative disc disease and spinal stenosis. I am in chronic pain everyday and need Kratom to have some quality of life. I think Kratom should be researched more before it is labeled on the same level as Heroine. Thank you for your consideration.

Dublin	Ohio	2 - Oppose - Used to Treat Chronic Pain	For years the pharmaceutical companies got me addicted to opioids for my injured back. No mention that they are addicting I had no idea what tha meant so I took them without question and they helped amazingly! Something happened where I couldn't get them prescribed anymore. And guess what? WITHDRAWAL. I'm telling you If Kratom and its synthetics are criminalized you are doing a disservice to ALL the people pharma had gotten addicted to opioids. Kratom saved my life and many others. Criminalizing molecules is so stupid these days. All that will happen is it will go underground and be less safe. People will continue to use these substances whether they're illegal or not. PLEASE KEEP LEGAL OR ALOT OF PEOPLE ARE GOING TO COMMIT SUICIDE!!!!
Hilliard	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has personally helped me emensely . I have d.j.d. and I hated getting treated like a fiend when I went threw pain management. I wanted to find a natural alternative to prescription opiods that I could live a normal life without crippling pain. Please take this into consideration I know im not the only one looking for natural alternative. Thank you for your time
Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I've been using kratom for years now and it has helped me go to work and control the pain in my back. I have herniated discs, degenerative disc, scoliosis in my back and kratom has helped me get off opioids. Lots of people rely on this to get them by day by day. It has helped my anxiety, before I would panic going to the grocery store. It has also helped my depression. I went through very dark part of my life and prescription medication did not help. Cigarettes kill people everyday but you allow the sale of them over the counter without a thought. I know lots of people that kratom has saved because getting anything for help anymore is the longest process and so hard to do. Lots of people don't have insurance either and they are able to get Kratom to help them without paying thousands of dollars. Placing Kratom as a controlled substance would hurt a lot of Americans. But this country and pharmaceutical companies want to because they are losing money on people using it and it's sad. It's sad this country is about money and not helping its citizens.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	This natural medicine helps my good friend with pain instead of using pain killers. Stop telling us we can't use natural medicines!

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I'm 68 years old and live with severe arthritis and nerve damage in my spine. I was on pain medication for decades and about five years ago, they just stopped working and frankly, I was sick of taking them, but I was physically dependent. A friend suggested I try Kratom to wean down and that's exactly what I did. It's been five years now without prescription pain medication and my body Is now better equipped to handle pain. Today, On the days that I suffer from acute pain, I take a dose of Kratom for relief. Kratom has been a lifesaver. If the state goes ahead and changes its classification, it will cause a great deal of suffering and dependency on pain medication. Today, it is rare when a pain management specialist prescribes much needed pain medication. As a result, many Ohioan suffers are forced to obtain their pain medication illegally, Kratom Provides a vital option to opioid addiction. For me personally, during the periods of time when my pain gets out of control, I'll be in absolute misery, and unable to function.

Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	To the Ohio Board of Pharmacy, I am writing as someone who has spent more than 2 decades working with trauma — in children, in families, and in myself. I work with traumatized youth, autistic individuals, and people whose nervous systems live in a near-constant state of alarm. I also run healing circles for people who are burned out, overwhelmed, and trying to remember what it feels like to be okay inside their own bodies. When you hold space for this kind of pain day after day, it doesn't stay in your head — it lives in your muscles, your breath, your sleep, your heart rate. It becomes a constant buzzing under the skin, a feeling of never being able to fully rest. That is what nervous-system dysregulation feels like. For me, it meant shallow breathing, clenched muscles, exhaustion that never went away, and a body that stayed braced for impact even when nothing was wrong. It made it harder to think clearly, to be patient, to stay emotionally open with the people I serve. And I knew I did not want to cope with that by drinking, numbing out, or taking medications that would dull me or put others at risk. I needed something that would help my body feel safe again. Natural kratom leaf became that support. I use it as a tea — slowly, intentionally — not to escape, but to come back into myself. It helped my nervous system settle enough for me to breathe deeply, to soften, to sleep, and to feel grounded instead of constantly on edge. That shift was life-changing. It gave me back my ability to show up fully for my family, my clients, and my community. My husband is autistic, and worked with many autistic individuals over the last 10 years. Dysregulation for them can look like sensory overload, emotional flooding, physical agitation, or complete shutdown. It is painful and isolating. In small, consistent amounts, kratom has helped create a calmer baseline in their bodies — a place where communication, connection, and daily life become possible instead of overwhelming. I have also seen older adults with chronic pain finally sleep through the night. Not because their pain vanished, but because their bodies could finally relax enough to rest. Kratom is not a cure-all. It is a support — one that helps people who avoid alcohol, opioids, and desperate trips to emergency rooms just to survive their own bodies. This matters for public safety and public health. When people have access to gentle, effective supports, they do not need to turn to substances that destroy lives. They do not need to be pushed into addiction or illegal markets. They can remain present parents, caregivers, workers, and neighbors. I am working on building a nonprofit to help people heal and regulate their nervous systems so they can live fuller, more stable lives. I teach that healing happens when we learn how to be in our bodies with more safety and less pain — and sometimes that includes natural plants and teas that support that process. Kratom is one of those supports. I support thoughtful regulation. I do not support criminalizing a plant that is helping people stay sober, grounded, and alive. Natural kratom leaf should not be treated the same as concentrated synthetic products that carry far greater risks. Please do not take away something that has helped so many of us feel human again. Please choose science-based, compassionate regulation over prohibition. Thank you for reading and allowing my words to take space. Respectfully, Stacy Blecher

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped make a huge improvement to the my quality of life. I suffer from kidney stones, Fibromyalgia, Degenerative Disc disorder, among other issues. Unfortunately, there will always be people with addictive personalities. If you remove Kratom, those people will find other substances. Unfortunately so will regular people, seeking to improve their quality of life. History shows that banning substances DOES NOT WORK. Put yourself in the shoes of every day people that do not want to be on opioids, alcohol, Heroin, or something else. WE ARE SEEKING RELIEF. Furthermore, people will be losing Medicaid, there will be huge impact to people. Kratom is a legal, affordable substance to alleviate pian. WHERE DO YOU THINK PEOPLE WILL OBTAIN RELIEF? Put yourself in the shoes of people without insurance, who suffer from chronic pain. When's the last time you were in extreme pain? Pain that OTC meds did not touch. How did you relieve the pain?
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am strongly opposed to the scheduling of both kratom/mitragynine and 7oh. I am 40 years old and spent much of my adult life addicted to heroin. During that time I was a passenger in a car accident that killed a friend and left me with a fractured vertebrae and the chronic pain and limitations that come with it. Kratom and 7oh have allowed me to live a normal life, remain employed, and have a good relationship with my family. Kratom and it's associated alkaloids are especially important to my wellness as they allow me to both treat my pain and live free of illicit opioids and other dangerous substances that I have struggled with in the past. I've been clean for over 3 years thanks to kratom and 7oh, thriving in a way I never thought possible before. Deaths from kratom are exceedingly rare and are almost always a result of polysubstance use, even the FDA's own trials show that kratom is safe and well-tolerated. To ban kratom and its alkaloids while a destructive drug like alcohol is freely available at nearly every store and restaurant in Ohio is the epitome of hypocrisy. I support strong, common sense regulation to keep me and other kratom consumers in Ohio safe, but a ban will only endanger people and criminalize people who are simply doing their best to take care of themselves. Scheduling kratom and its alkaloids will put my health, employment, and my life in danger and I know there are thousands like me in this state who rely on kratom for wellness and harm reduction, a ban will only push those people toward more dangerous substances. You cannot legislate away pain and addiction but you can keep people safe with regulation. Please keep kratom legal and safe, it truly does save lives Thank you
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Dear Board, I oppose scheduling mitragynine as Schedule I. Kratom’s been key for my chronic pain, I’ve tried cannabis, but it’s not as effective and too expensive with the added taxes. Banning it hurts responsible users like myself and could drive folks to riskier stuff. Regulate it instead, please. Thanks.

Clayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello, I'm 38 years old, and I'm writing this because I want it on record what chronic pain has done to my life — and what 7OH has done to help me get parts of my life back. I live with degenerating discs, spinal stenosis, and severe arthritis in my lumbar and cervical spine. People hear "back pain" and think it means soreness. This is different. This is pain that can make it hard to stand, hard to sleep, and hard to even get out of bed. Some days I can barely walk. It's hard to explain what it feels like to be only 38 and already feel limited like this. I tried to do what you're supposed to do — pain clinics, prescriptions, and pharmacy medications. Instead of building my life back, that route wore me down. It made me feel like I was being managed, not healed. I watched how easily a person can get pulled into a cycle where you're just trying to make it through the day. And it brings back the same kind of story we saw in the early 2000s: people were told certain opioids weren't addictive, and millions of people ended up paying the price. I'm not here to accuse anyone — I'm here to say that, for me, that system hurt more than it helped. What changed things for me was 7OH. It did not magically erase my diagnoses, but it gave me something I hadn't had in a long time: enough relief to function. It helped me get out of bed more consistently. It helped me move through the day without feeling like every step was a punishment. It helped me be present. The biggest thing I need people to understand is this: 7OH has kept me from illegal drugs. When pain is nonstop and you feel cornered, the temptation to chase stronger relief can turn into a dangerous road quickly. 7OH helped me avoid that. It gave me a way to cope that didn't pull me into that world. It has also helped me as a father. Because of 7OH, I've been able to enjoy activities with my children that I would not be able to do otherwise. Chronic pain steals time. It steals patience. It steals memories. 7OH has helped give me some of those moments back — not perfect days, but real days where I can show up and participate. When I say it "saved my life," I mean it in the most honest way: it helped me survive a level of pain and hopelessness that was wearing me down physically and mentally. It helped me stay away from illegal drugs. It helped me keep going. Closing This statement is my personal experience. I am not claiming 7OH is a cure or that it will work for everyone. I am stating that it has made a meaningful difference in my pain, my stability, and my ability to live my life.

Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am an American citizen who lives with back injuries arm injuries all kinds of injuries basically I'm disabled and put it quickly and easily and in order to keep myself functionable on my quality of life different meds do different things and I have found that kratom and it's natural form as a tea or whatever I choose to take it as works perfectly for me I don't get foggy headed I don't get all the side effects that I would with mainstream harder painkillers it helps my energy level it helps my mental state it's absolutely wonderful I don't increase my usage I drink two teas a day it just keeps life so much more bearable and allows me to do things that I wouldn't be able to do if you without it due to my injuries. While I understand the concern around adulterated forms natural plant material itself is way better for the reasons that people use it. Some have used it for opioid addiction to come off of it and it's worked very well for them it just makes it so they can handle the withdrawal makes their mind feel a little bit better a little bit less negative and sad and the physical symptoms they're still pretty much there but it just makes it bearable for them and I have seen so many people use this to get off of that other stuff and stay off the stuff and they're not constantly dealing with the side effects of other meds and it's just the change even just the color in their face is so much better they look so much better and it feels too much better and they turn their lives around. This plant has done so much for so many citizens of this country and I know that the members of this board have heard these types of stories before and there's so many of them that it should really be considered that the positives do outweigh the negatives of this plant. If it was regulated and assured to be I'm adultered it would be a fantastic option for so many people and when it comes to like addiction and habits at most it's like a caffeine habit in any and all overdoses that I've ever heard of or associated with other drugs polysubstance overdoses or people adding stuff to it that they showed me not tell people and even if that wasn't the case which it is but even if it wasn't the counted amount of actual overdose death and such is really low and a way lower than a lot of mainstream drugs I mean look at tobacco and alcohol I mean look at mainstream meds that were prescribed there's so many side effects and so many more negatives than this little plant has. So I just feel and think logically that legalization should still be allowed for the plant material and maybe be able to grow the plant as cannabis is now because this plant actually seems to have better pain management than cannabis. It helps so many people there are other people who have businesses built upon it that to get rid of it and ban it would just be so counterproductive to what we want for our friends family and fellow citizens to this country it has made myself personally able to walk able to do little things like make food and clean and without it I would be in a very bad state of constant agony and unable to do much of anything without getting like some hardcore painkiller that's going to make me a crazy addict and the side effects are just beyond belief there are so many people like me and I do hope that their struggles and their needs are truly met and truly given more important in weight than the argument because of people who abuse and do stupid things it's always said that One bad Apple spoils the bunch but maybe this time that can't be the case maybe it can be idea or rule. I have been using kratom since 2013 and I'm so thankful for this plant when I found it it was the most amazing thing I've ever experienced it gave me hope and my hope now is in your

			hands and I hope it's so many others. I thank you for reading this long little writing I didn't mean to do it like this I know you read a lot so I apologize but please for the sake of the people who really need it allow it to remain legal without a prescription and we can just have it like we do cannabis or even sell it out but make it like a natural plant type thing just different ideas which I imagine you know thank you again
North Royalton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am brokenhearted by Ohio's action on Kratom. It feels like a betrayal. Kratom has been a lifesaver for me for many years after an injury and has prevented me from having to take prescription opioids (since 2012). I take 2.4 grams twice a day and I honestly don't know what I will do if you decide to ban it outright. I've never had any adverse effects from all my years of use! Please consider that many people depend on Kratom for a variety of reasons. Regulate and make restrictions (including where it can be sold), but please do not take away the options of responsible adults. Thank you.

Berea	Ohio	2 - Oppose - Used to Treat Chronic Pain	Natural Kratom in its natural form is a safe alternative to any pharmaceutical product for pain. Certainly a better alternative than illegal drugs. Chronic pain sufferers have very little choice or voice concerning their health. Natural Kratom is safe. Natural Kratom works. Natural kratom has a very small amount of MIT. While I completely support bans on OH7 and even the products on concentrated MIT, I believe kratom in its natural form should be available to the public. I'd be willing to consider stricter regulations such as maximum MIT strength, age limits, purity and appropriate vendors. Please don't throw the baby out with the bath water and ban a safe and effective product for those of us who don't want or are refused access to pain medication. I've been a kratom user for ten years and I've suffered not a single negative experience. Thanks for your attention to this matter.
Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I have been suffering daily with fibromyalgia, chronic migraines and insomnia for 20 years. About 6 years ago I found Kratom and without Kratom I am forced to stay in bed all day with so much pain throughout my body and the chronic fatigue makes it impossible for me to function. The only thing that helps me get out of bed is kratom. It is a natural, God-given leaf and should not be banned. The banning of kratom will hurt all people who take this for pain, fatigue, depression, anxiety, migraines, insomnia and other conditions. It is safe and effective, the alternatives, opiates, are highly addictive and therefore, not always safe. Please do not ban our only help. Please be educated on Kratom. Thank you. Denise
Macomb	Michigan	2 - Oppose - Used to Treat Chronic Pain	I urge the Ohio Board of Pharmacy not to criminalize kratom. Many Ohioans responsibly use kratom as a safer alternative to opioids for pain management or to reduce dependence on more dangerous substances. Criminalization would push people toward unregulated markets and increase harm rather than protect public health. A regulated approach focused on product safety, labeling, and age restrictions would better serve Ohio residents. Thank you for considering a science-based, harm-reduction approach.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Please do not ban natural kratom. As a disabled veteran that was on prescription opiods for over 20 years, this is the only reason I am opiate free today and can still mange my pain. Kratom has been a life saver for me, and bannning it will harm so many people that use it safely and effectively. Please do not ban it!
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has saved me from being reliant on prescription pain meds since 2019. This has kept me more mobile to address the health issues as opposed to getting addicted or compromised by prescription pain meds. Please do the necessary testing to continue making kratom legal instead of making it a political issue. In this instance ignorance is not an golden.

Painesville	Ohio	2 - Oppose - Used to Treat Chronic Pain	My husband learned about Kratom during the last decade. While trying to both, at times, maintain sobriety, having multiple surgeries with long rehabs, and dealing with pain from those issues, along with contracting diabetes, he hesitated to use a lot of prescription painkillers and also had maintained long periods of sobriety, and didn't want to jeopardize that. When he heard about natural leaf kratom he tried it about 8 years ago, and it helped him greatly both in pain relief and in staying sober. He will be sober 6 years in March of 2026. He has only used natural leaf kratom and never 7OH. He hadn't heard of 7OH until recently. It is harmful to lump 7OH together with natural leaf kratom as they are chemically different substances. It was a struggle when he had trouble staying sober years ago, and I have been grateful that natural leaf kratom has been an unbelievable help to him. This is his longest stretch of sobriety. It would also be much more dangerous to his health to drink again compared to just using a moderate amount of natural leaf kratom. It also continues to help with any recurring pain, and helps his focus with his ADHD, and he recently graduated from online college with honors. He also takes excellent care of our grown special needs sons. I am very proud of him and hope he can continue to keep healthy and thriving with the help of natural leaf kratom. Keeping Kratom Safe and Legal When I first heard about Kratom (Mitragyna speciosa) - which was back in 2017 - I had heard many good things about it. I heard that it helped many with opioid withdrawal and that it also functioned as pain management and a mild stimulant for my ADHD. What I did not know was that it would be so helpful to me. I started taking it in 2017 - very small amounts of it - and it gave me a boost of energy by taking White Leaf Kratom, Red Leaf Kratom helped me with concentration, and the Green Leaf Kratom is a useful help with concentration in the afternoon. I have taken the herb on and off for several years. In 2020, I found myself drinking a lot of alcohol again, so I decided to quit drinking and also increased my dose of Kratom for the last time (5 grams of White Leaf Kratom in the morning, 5 grams of Green Leaf Kratom in the afternoon, and 5 grams of Red Meng Da or other Red Leaf at night. Kratom has been a very useful tool to keep me sober. I have read several books on ways to dose the Kratom properly, which I can reference if anyone asks. I can tell you what my life has been like since I have been using Kratom in this way. I went back to school and obtained my bachelor's degree and received straight A's in my classes. One benefit of Kratom was to help with my concentration. I found I could concentrate much better while I was taking Kratom. I have had to live with ADHD my whole life, and I had finally found something that can help control it. That enabled me to be able to study without having to deal with distractions like I used to have. I have not missed work since 2020, so I am not laying out in the gutter due to my Kratom use. I took my Kratom three times a day and did not think anything more about it. I got on with my life and figured I could live like this for the rest of my life. My life has never been better. I have been able to work with my sons who both have varying degrees of autism. I have been able to concentrate on my tasks much better than I could when I did not take Kratom. Lately I have heard about a product – that I had never had – called 7OH, which synthesizes part of natural Kratom and makes a pill that mimics the effects of heavy-duty

			pain meds or heroin. Please do not call this Kratom, it is 7OH, a synthetic compound that had been sold in gas stations and head shops throughout the state, apparently quite damaging to those that used it. Most natural Kratom contains .05 to .09 percent of the 7OH, where 7OH is up to 98% of this alkaloid. Because of 7OH products, a lot of fearmongering has been pushed forward by this and lumping everything in that category. There are media reports calling 7OH Kratom. Ohio wants to ban all Kratom products. Those using the leaf product will not be able to purchase Kratom legally. I have heard many say how helpful Natural Leaf Kratom is in getting individuals off opioid addiction, helping with joint pain, and controlling alcohol use. Am I addicted to Natural Leaf Kratom? I will worry about that if it becomes a problem in my life; however, people are addicted to caffeine, and there is no movement to ban caffeine. Also, I could, if I wanted to, walk down to the end of the street to a local convenience store and buy a case of beer or bottles of hard liquor and drink all of it in one night. I could get blacked out drunk and hurt somebody. I could drive and kill someone because I am impaired and am not able to drive, and I could run into other cars and seriously injure or kill someone. However, there is no movement to make alcohol a banned product. Another thing, I go to my general practitioner and take a blood test. My liver is working fine. The state is throwing the baby out with the bathwater and does not seem to understand what they are doing. As an adult, and as a person that can function normally on use of Leaf Kratom, I feel that we are in a nation and a state that is taking away our freedom, one step at a time. It is not a mind-altering substance. This is part of the danger, that we are losing more and more of our freedom. What is happening in Ohio and other states is problematic. Much of it is based on fear. People have quit taking Kratom; however, the withdrawals are not dangerous and life threatening such as alcohol withdrawal. If 7OH is as bad as reported, then control what is dangerous, not Natural Leaf Kratom. Natural Leaf Kratom has been very helpful to me, and I can live my life taking Kratom. As I said, the benefits of providing me with concentration and also relaxation that does not interfere with my daily activities have been a miracle and great help for me and my life. https://www.wtsp.com/article/news/regional/florida/florida-7-oh-kratom-products-ban-deaths/67-84e0b8a6-5bcf-4181-81a9-7a5f28015e9e Naturally Leaf Kratom is as such that if you take too much you get sick. The deaths that have been associated with Kratom in its altered form with other substances in the system of the individual that took it were those that were mixed with other substances or in the altered form. Kratom is not a mind-altering substance, while ones that are mind-altering are still legal. The effects of Mitragyna speciosa are mild. https://www.wtsp.com/article/news/regional/florida/florida-7-oh-kratom-products-ban-deaths/67-84e0b8a6-5bcf-4181-81a9-7a5f28015e9e Most Natural Leaf Kratom users do not have issues with it. One day I may want to quit using it, as the cost is a factor; however, I am fine presently using Natural Leaf Kratom and do not feel that a ban is necessary. I can function quite well with its use. If it is all banned, I am sure only the chemically altered Kratom will be available on the illegal market, along with fentanyl, heroin, and other dangerous unregulated drugs. The attack on Natural Leaf Kratom seems totally unwarranted. As an Ohio resident, I would like to see the government look at things

			rationally. If Kratom derivatives are hurting people then, yes, regulate. However, National Leaf Kratom has been a godsend to me, and I would like to keep it safe and legal. We should fight for the freedom of those to be able to use it or not. Roger

Lakewood	Ohio	2 - Oppose - Used to Treat Chronic Pain	Hello, I am here to comment on the proposed Mitragynine/Kratom leaf bill. I have been taking Kratom daily for over 10 years now due to my chronic pain I deal with. Kratom allows me to reduce my pain to a level where I can function properly, like working my active job and being able to do the activities I love. If this ban were to go through my daily pain levels and thus my overall lifestyle would suffer if I didn't have access to it like I do now. I am not alone with how I feel, as I've read countless reports from others that are in the same situation as me and also take it for the medicinal benefits. Please, I ask that you really consider the well-being of so many others that will be impacted if this ban goes through. Thank you for taking the time to read my story.
Grove City	Ohio	2 - Oppose - Used to Treat Chronic Pain	In 2008 I suffered a sports injury that lead to a hugging disk in my lower spine. I also have disk degeneration disease and arthritis. I went through all the medical procedures to try and fix my back, however none of it worked and I was left in constant pain. I took narcotics to be able to function until I was addicted and had to stop taking them. I then took large quantities of advil to be able to function. The advil gave me a bleeding ulcer in my stomach and I was hospitalized and they gave me narcotics to combat the horrible pain. Then a friend suggested I try Kratom. It has changed my life!!! I can function and live a normal life without suffering endlessly from my back pain. I have taken it for 6 years and it has given me my life back. If I don't have Kratom I will be forced to choose between opioid addiction and stomach-destroying advil. Please don't take my life away. The nerve pain from my back is so horrible that I could barely sleep before I found Kratom. I cannot go back to that horrible situation. For my, my children and my husband' sake, please don't make natural kratom illegal. My quality of life will be so horrible without it.
Waterville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using natural kratom for years. It helps with my pain and anxiety. It all9ws me to be able to work outside of my home. It saves me from being on pain medications that I worry about taking. It has made my life easier and has done wonders for my mental and physical health. It would be wrong to make it illegal for people to have access to natural kratom.

Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	If you're going to make natural kratom leaf illegal and a schedule 1, then you must make coffee or any herbs including caffeine illegal and schedule 1 also, because that is the level we are talking about with this herb. Are they going to put caffeine along with kratom on the same level as actual hard drugs? It would be very wrong and unnecessary to do so. Please, Ohio Kratom presents absolutely no effect of intoxication on its user whatsoever. It has a very comparable effect to caffeine. It's no different than something like caffeine in experienced effects. It does not instill any kind of drunkenness or intoxication whatsoever. Making this natural herb an illegal drug on the same level as hard drugs is wholly unacceptable, and wrong. Do not make natural kratom herb illegal. The natural ground leaves of the kratom plant needs to be available to those who appreciate it. Taking kratom away from the public will do much more harm than good. Kratom is a useful plant that is nowhere near the same as hard drugs. It is a miracle tea that helps a lot of people stay off worse drugs like alcohol or opiates. Big pharma does NOT need to touch it, either. They will make it worse. The people are entitled to their natural, non harmful herbal remedies. If kratom is taken away, many people will be forced to return to worse illegal drugs. Other applications are for pain and after surgery. I myself am a lover of kratom for that reason. I had 4 surgeries to fix a lacerated tendon in my foot. After surgery, I relied on kratom through recovery for pain relief. Kratom is a very important thing in my life. I will personally suffer greatly if it is made illegal. Kratom has no intoxicating effects that I know of, and I have been a user. Its use does not instill any kind of drunkenness or intoxication. Its effect on the person is similar to aspirin or an anti inflammatory. There is absolutely no need to make this amazing tea illegal. Taking away kratom and making it illegal is as ridiculous as taking Basil or Bay leaves or Nutmeg and making those herbs illegal.

Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a stay at home mother of a special needs child. I also have degenerative disc disease and arthritis which can cause significant pain and disrupts my daily living. Without natural leaf kratom, I will not be able to function due to the pain. I do NOT want to get on Pharmaceutical pain medications again as I quickly became addicted and relieved no help on getting off them. It was terrible as was the pain. If kratom is banned in the state of Ohio, my pain will return as will the intense disruption to my daily life. The medical community has not come up with a way to control pain that is not highly addicting which can be absolutely life destroying. I cannot return to being in chronic pain constantly. If it is banned, that will be my sentence to something that is natural and not dangerous as you believe. I have been using Kratom for 7 years and don't take it during my low pain days. I've never had a problem not taking it unless I was suffering intense pain. I have also never gotten "high" or felt anything like a high as I did with Pharmaceutical medications. If you banned Kratom you will be leaving hundreds of chronic pain individuals with absolutely no pain relief and no way to live their lives. I very much hope you reconsider the ban.

Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	My name is Mrs. La'Shenna Clark and I'm a 42 year old from Summerville SC, but live in Cleveland Ohio. I live with my husband and our two beautiful children. I would like to voice my support of Kratom and my disagreement with the FDA and their stance on Kratom. They put Kratom, a plant helping millions of people suffering chronic and acute mental and physical conditions that is also safely easing the nation's opiate epidemic problem naturally, on the same level as illegal drugs like heroin. It would also prevent further research which, to date, has shown kratom to be an effective painkiller that does not cause respiratory depression; the main cause of death from opiate overdose. I first tried kratom when I was out of all of my prescribed pain Meds and going through withdrawals. I prayed and asked God to help me get off of opiates because it was taking over my life. I was afraid to run out of my pain medicine because of the fear of withdrawals. My neighbor told me about Kratom. In a desperate attempt to rid myself of horrible withdrawals I had my husband go get kratom for me at my local head shop. When I first took it it was like all of my symptoms stopped! I was able to take care of my kids! I expected to only use it for withdrawals until my next appt. I ended up never having to take another opiate again! Kratom helped with my withdrawals and it helped me too not abuse my prescription Meds! I suffer from fibromyalgia, degenerative disk disease of the spine, 3 herniated disks, sciatica, SI joint dysfunction and anxiety. I was prescribed pain Meds since the age of 18. They never really helped my pain, but it did help me to become addicted and dependent upon them. I had multiple surgeries and nothing seemed too help my pain except when I found kratom. I've been dealing with my condition since the tender age of 11. I've been using kratom since May 2017. And have been able to cease all of my Meds. Kratom is much more than a plant. It's a lifesaver. It truly gave me my life back. Now I'm able to be a fully functional wife and mother of two small children. Before Kratom I was very limited in what I could do for my family. The simplest of task proved to be difficult for me. Imagine not being able to take care of your family. It was a nightmare before kratom came along. Safe kratom is very important to me! -In conclusion, Kratom should be labeled as a dietary supplement . Kratom is a safe alternative to pharmaceutical drugs with important benefits for many issues and has changed my life. I know that my own quality of life as a productive member of society will not be the same without kratom. I am asking you on behalf of my children, family and fellow sufferers to please keep Kratom accessible to us who truly need it. It's so vital to our health and quality of life. I appreciate your consideration. If you have questions about kratom, please visit https://www.americankratom.org/ Thank you for your time and service to the state. Shenna Clark
Bellefontaine	Ohio	2 - Oppose - Used to Treat Chronic Pain	I've been using this for years and its been the only good option for the stress related headaches I get. Honestly, I believe it shouldn't be banned for any reason as its a great source of relief for many circumstances, including the one ive listed. I know a good amount of people who as well use this for migraines or headache related issues as other option don't give as quick or soild relief as kratom does.
Chillicothe	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom keeps me from having to take prescription medication for pain

Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	Genesis 1:29- And God said, “Behold, I have given you every herb bearing seed which is upon the face of all the earth, and every tree in which is the fruit of a tree yielding seed; to you it shall be for meat. Please be honest and not group extracts, drinks, 7ohm, and all these other monster concoctions with plain leaf kratom- which is just the leaf dried and ground. It's not fair. the people that have died were not drinking normal kratom powder but some other kind of product that was at the very least an extract or something mixed. Furthermore it seems like there's always some other products in their system at time of death. Why can't you be responsible and ban the products that are marketed as kratom that aren't. 70hm, and synthetics, and drinks and products- go after those; but please allow us to use the plain leaf of a tree. Thank you Hello! I use plain leaf kratom daily. It helps me with a few things. 1. It helps me with my IBS. I used to have loose stools; but now it's solid all the time. 2. It helps me with mild pain relief. My feet hurt from working all day. It takes away the foot pain like magic. 3. It also helps me curb my appetite. I take about 50 grams per day for6 years now. I feel much safer taking this leaf from a tree ground up. rather than tylenol which is bad for your liver. please don't criminalize plain natural leaf kratom. Which is just the leaf of a tree; but absolutely make illegal extracts or synthetic products- even the ones that claim to be kratom but are not. I stay clear of those weird products. Those aren't kratom. those are lab made man made frankenstein monster products. I believe that you should ban those things but not plain leaf. Thank you for your time.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I think this is completely ridiculous to make this a controlled 1. Natural kratom really does help people with pain. It doesn't get rid of it completely, but it helps. Natural kratom is so much better than most of the pills people are given for pain. A lot of people are afraid of taking all the different pain medications because you can become addicted to it. Natural kratom also has other benefits that can help you. To make kratom a controlled 1 would be one of the stupider things Ohio has done because there are other things we should be worried about.
Sidney	Ohio	2 - Oppose - Used to Treat Chronic Pain	I've been using kratom for years now for pain. It's been so much better and so much cleaner than man-made chemicals. This plant has helped me with a lot. I've never abused kratom. I've never stole for kratom. Ive never chosen kratom over my kids. This is a miracle plant put her by God. Do the right thing. Thank you for your time.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been using Kratom for 10 years. It got me off pain pills. It helps me with pain and anxiety. Please don’t take it away!
Springfield	Ohio	2 - Oppose - Used to Treat Chronic Pain	These are PLANTS roasted in sunlight. You guys approve chemically produced DRUGS and want to make PLANTS illegal. It is blasphemy. This has helped sone friends and family cope with sleep and pain, and it’s a natural plant.

Tipp City	Ohio	2 - Oppose - Used to Treat Chronic Pain	When I shattered my ankle in 2019, I did not want to take narcotic pain medication. Even after surgery, I refused to take narcotic pain medication. While yes, nothing beats the pain relief of a pain medication; I take a healthier, more natural approach. That's why I used Kratom. It helped me get back to work, and then I had no problems stopping the use once I felt my ankle was strong enough. This stuff is an incredible pain reliever for serious pains. I've also watched MANY of people, get off of dangerous opioid medication from using Kratom. Kratom extract? BAD The raw, leaf? A gift from god.
Xenia	Ohio	2 - Oppose - Used to Treat Chronic Pain	-I have been married for 23years, father of 5. Professional Firefighter/paramedic for 17 years and I have spent all of that time in Montgomery and Greene County Ohio. Ground zero for the opioid crises. I am intimately familiar with drug abuse. -I have revived countless people that have overdosed on narcotics and dealt with abusers of all manner of illicit drugs and alcohol. I have also been present when countless others were not revived. None of them has ever been due to Kratom. -Pure leaf Kratom has never been proven to cause significant harm. -My wife and I discovered Kratom approx 7 years ago in a search to treat the chronic pain symptoms of her genetic disorder. I have watched her try all manner of prescription drugs and OTC drugs and supplements with no real benefits that outweighed the side effects of most of those medications. As a stay at home mother to 5, her quality of life has been improved greatly due to Kratom. -I don't have any chronic pain issues, but I have used to somewhat regularly to help with sleep disorders that come from a 24 hour work schedule. -Additionally, I also use it to help with energy from time to time, and I have never noticed any physically addictive properties or any withdrawal symptoms when I have gone any length of time without it. It has never impaired my ability to function or operate any equipment. I don't have experience with any illicit drugs, but I have never experienced what I would consider to be any so-called "high" from Kratom. Neither has my wife. -The proposed scheduling of Kratom is grossly disproportionate to any proven or even anecdotal public threat. The DEA did not even include a Kratom in their 2018 National Drug Threat Assessment. Based on what I have seen in my personal life experience, this appears to be an over-reach of authority that will unfairly harm and/or possibly criminalize tens of thousands or more citizens with no concrete benefit to the Public Interest. The Ohio BoP attempted this back in 2019, I believe, and I submitted most of this information then. I have updated it with accurate dates. To be clear, never in my career, or in any of the careers of the hundreds of other firefighter/paramedics that I know, has Kratom ever been the cause of a death or harm aside from any other substance. Please see this 2022 study that backs up these claims from 2018-2022 data. It's a true 8-factor analysis. Not a gathering of unsubstantiated claims made by unvetted people. https://pubmed.ncbi.nlm.nih.gov/35197848/

North Canton	Ohio	2 - Oppose - Used to Treat Chronic Pain	Ohio has gone to war on opiods and have thrown chronic pain patients under the bus. After a botched hysterectomy that burst open, and damage from two back surgeries resulted in me being put on huge amounts of opiods. Kratom helped me get off them for six years. We need to stop punishing the many for the ignorance of a few. This is a natural plant that binds to our opiod receptors without making you high. People will do anything to chase a high as it has been proven by the behaviors we are seeing. Those who abuse it know why they are taking it, and mix it with other substances and adulterate it. I use a product that is tested and regulated. I have been on the same dosage for going on 7 years. I can guarantee those who died with Kratom in their systems had additional substances in their toxicology. Stop hurting the people of this state because of a small amount of people who abuse something.
Strongsville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been a Kratom uster for over 15 years. I am 73 years of age . I use pure Kratom powder with no additives etc. This is a very safe and effective way for my to help control ongoing chronic pain from three failed lumbar surgeries, and now some pretty severe arthritis. I buy from a 3 party tested company that is in compliance with the American Kratom Associations recommendations. this leaf has been a life saver for me and many many more. The danger is in using Kratom supplements purchased from gas stations, etc that have other additives that the users are really looking for. This is a plant. On its own it is safe. I also can say that I use the same amount of the powdered leaf I have for years. No need to increase dose, etc. You do not use Kratom to get 'high".... If you are trying to do that.,..Use something else. Please go after the bad actors....Not the pure Kratom leaf powder. It has helped me so very much....I should also mentioned that after years of opiod use I became addicted to it. many years ago. Now because of my age, and some kidney issues I do not take any ansaid medications at all. I cant. This is all I can use for the little analgesic effect that it gives me. Helps me so much. Thank you for listening to my experience. Please do follow the clear science on the leaf. Jane Depew
Circleville	Ohio	2 - Oppose - Used to Treat Chronic Pain	Plain leaf kratom has given me back quality of life. After years of pain and medications prescribed that made me less myself, I found kratom. Since learning its beneficial place in my life, I was able to return to the workplace again. I can be a productive citizen and actually contribute to my family and society. As an adult Ohio landowner, I should have the right to choose plants for my health and well-being. This plain leaf kratom helps many Ohio residents and should be available to responsible adults.

Vermilion	Ohio	2 - Oppose - Used to Treat Chronic Pain	As someone who doesn't actually live, but exists in hell daily, for 30+ years now...I beg that you don't take away natural kratom plant powder. I suffer with non stop horrible pain, agony that barely allows me to sleep or do simple everyday things without trying to push my body sooo hard that I end up hurting myself and causing even more pain. Pain is literally all I know every second of every single day. And it has caused horrible depression and anxiety. Most days I can barely do anything at all. Many, many, years ago, the medical system helped...pain meds and muscle relaxers every 4 to 6 hours gave me less pain and more quality of life. But, the government stopped that...stopped allowing doctors to help people such as myself have more quality of life with less pain...instead of a non stop existence in literal hell...the kind of agony that just makes you want to give up. While kratom doesn't help in the same way that the meds did...it does help! The little relief it provides from the horrible pain, anxiety and depression allows me to at least get a few simple needed things done...makes my hell a little less hard to handle. No it doesn't make things perfect...but getting some relief as apposed to know relief...is a blessing for people like myself who take kratom responsibly and for the right reasons. Kratom was the last resort that people like myself found, after the government stopped allowing the medical system to help us. It's sad and frustrating for those who suffer, to be classed as addicts or seekers by the government, when that's NOT what we are! We are people who have illness and pain that we didn't want or ask for! People who suffer non stop daily...that just need help to have better quality of life by having less pain. We deserve a life worth living, instead of an existence in hell that we simply can't handle anymore! Taking away natural kratom plant powder, you are taking away the only little bit of help we are able to get! As someone who suffers non stop, I can honestly say, nothing good will come from taking away the only option people like myself have. I beg you...please reconsider and find another way. Maybe limit natural kratom sales, to places such as the place I order mine...where The kratom is tested several times in small batches...to ensure the purity, along with the absence of molds, added chemicals, etc Thank you in advance for reading my plea.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	Dear Ohio board pharmacy I have taken these products for the last eight months. They have helped me significantly in dealing with diabetic neuroma, which is something that my caretaker has not been able to prescribe me with so I have not been able to find anything in the prescription area that they apparently are not allowed to give me the pain can be very severe sometimes and I appreciate the fact that you were willingly allowing us to share our voice. The pain can be very great for me when I have access to these products, even when we are allowed to have access to Kratom 7-OH. Sincerely, Edwin Reymann Edwin Reymann
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I wish to state that I have been a responsible kratom user for the past 3 years,I use it for chronic pain and only take it once a day in a small dose,it has helped tremendously and allows me to get through my workday ,I respectfully ask you to please not penalize the many people who take Kratom responsibly..

Middletown	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have used kratom (plain leaf powder) for 10 years. I have taken the same dose daily (never increasing). I have had no negative side effects. It has improved my everyday life so I can function again. I had 4 herniated discs in my back and got back surgery in 2015. This plant has allowed me to live my life daily without pain safely. Opioids which were prescribed to me by a doctor changed my life for the negative but this plant allowed me to get that life back. My family supports me and has seen the positive change. Opioids come from the poppy plant and the alkaloids (and negative public stigma) come from that. Kratom is from the coffee family and has "atypical partial opioid agonistic properties but the plant also contains 40 other alkaloids (some are actually opioid antagonists. The alkaloids in this plant interact uniquely. If you consume too much you get a headache and stomach ache. You in fact can not OD on it. People in the counties of SE Asia have SAFELY used this plant for one thousand years. No one has died from it there. This is helping people with opioid addiction live there life normally and function in society. What are you going to do? Put them in Suboxone? Buprenorphine is the second most powerful opioid know to man just beneath fentanyl. Why would you give that to people on something as weak as kratom? How will you feel when people safely using this plant relapse on opiates? People WILL DIE if you do this! Please don't do this. Kratom IS safe and the studies and science proves this. It has IMPROVED my life. You're prescription medicine almost ruined it.
Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I'm Jackie, And I've been taking kratom now for the last year and a half. I've been fighting bladder cancer, heavy chemo and I had a major surgery to remove my bladder and other organs around it. Kratom has been a godsend while I go through cancer treatment for the fatigue and pain. I only take the powder. Painkillers are not readily given even through cancer pain . Well I understand. They're trying to keep a grip on painkillers for people. This has been one hard ass year. I'm not ready for hospice yet. Hopefully I won't see hospice ! But for now this has been a very helpful tool to get me through the day and through some hard nights. Please reconsider banning the powder. I understand why you want to ban the other things. I actually agree with you there that stuff is no good. (7 oh) I humbly ask you not to ban kratom for at this time. I truly need it.. thank you
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	I’m a long time Kratom powder user. It has helped immensely with pain management. The cases of overdose when actually looked into are almost exclusively happen with other drugs in their system. This decision is based on fear and not data. The opioid crisis has been a stain on Ohio and for many they use Kratom to get off heroin and fentanyl. It’s makes little sense to refuse this. It’s a sad state when we allow unfounded fear mongering of something to make rash decisions.

Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have fibromyalgia and live with pain daily. I used to take Tramadol three times a day. Not only did I deal with physical pain but also severe ADD and anxiety. Kratom has been able to help me with both my physical pain and my mental focus along with calming my anxiety, all in one. I no longer take Tramadol or feel the need to constantly take Ibuprofen and other pain relievers. Other people have commented on my focus and performance during work hours, which has been a huge Improvement in my productivity. Kratom has been a huge asset to me, making my life so much more bearable and pain free.
Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am a 62-year-old female who has herniated multiple disks in my back in 2005 and in 2013, diagnosed with fibromyalgia. From 2005 until 2013 I took prescription medication to control my pain. On a support group I learned about Kratom, did research and that was years ago. It has changed my life for the better. I no longer take any prescribed medications. I can work full time and no longer need to file FMLA. During the pandemic and an employee at United Parcel Service, I was considered and essential worker. Without it, I wouldn't have been able to work all the hours needed and avoided contracting the virus. My blood work has improved, my kidneys were not functioning well from all the medications. My blood pressure & A1C has improved, I was borderline in both and now I am well under the borderline range. When you are not in severe pain, you are able to do more things and keep moving. We raised 4 children and have 13 grandchildren; I missed out on many things because of my condition that I can tolerate now with the use of Kratom. If it was no longer available, I would be devastated emotionally and physically. Probably would be forced into retirement as I need to be able to think which is difficult when you are in pain.
Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	I take Kratom for the past 4 years. I manage my pain now n on my terms after 8 spine surgeries n a spine stimulator, leaving me legally completely disabled. Drs. left me for dead after I missed a 5th appt since 1994 because the zoom wouldn't connect for appt during Covid. Dr dropped me as if I never existed! Dying from withdraw of 14 meds including many opiates, my son said nope Im not loosing you! He picked me up off couch n took me to my community and been thriving on Kratom since never looking bk!! Kratom not only saved me it saved literally millions. It has been used thousands of years without incident. I respect the plant n my body n it respects me! I would hate to have my choice to choose plants over pills taken! Im devastated and scared that I could wake up after the courts judgement that it was scheduled and be a criminal for a plant that saves my life! Thank you for your time!! (Im all for regulations just dont take r right to choose away)!!
Indianapolis	Indiana	2 - Oppose - Used to Treat Chronic Pain	Kratom has changed my life. I have chronic pain conditions & drs won’t help me. Without kratom I would seriously not want to live. I can now function in life thanks to kratom. If you ban it you should ban alcohol cause alcohol is thousands of times worse on your body than anything.

Aliquippa	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	My husband and I have been using the natural Kratom for years. We both suffer from conditions that cause chronic pain. We have never experienced any side effects. It is impossible to overdose on it. This is just misinformation. If you take too much you immediately will vomit. The natural kratom is not an opioid. That is also misinformation. I ask that you look at the scientific evidence that shows how it works. Please don't make an uninformed decision. It should never be classified as a hard drug. This product helps many people from seeking and using illegal drugs. The natural is nothing like the synthetic version. Please listen to the millions of users that it helps. It is also misinformation that there has been any deaths involving natural kratom alone. No the facts! Any reported deaths had other illegal drugs involved. Thank you
Greenville	Michigan	2 - Oppose - Used to Treat Chronic Pain	As a Legacy Pain Patient (current MRI status shows 4 extruded discs & 2 herniations with arachnoiditis, spinal stenosis and on...including nerve root damage) i have been on opioid medication for many years...until...the DEA & States began deciding my healthcare. Now, with NO doctor for the first time in my 61 years to care for me my options at finding a way forward that gives me ANY type of ability to even walk, has been kratom. Please, we as patients who live in this constant condition have been pushed so far into a corner we have no other place to turn. Doctors hold back appropriate pain treatment out of FEAR. Kratom helps, it doesnt harm!! If there are people abusing it it is because they have mental health issues leading them to be a addict to ANY substance that eases their mental health issues...NOT physical pain. We need you to understand, find empathy and just let us have what little we can obtain without turning to illicit drugs that very well could kill us. Thank you for hearing how important this is. J

Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I am responding as a concerned individual to the Ohio Board of Pharmacy 4729:9-1-01.2 - Mitragynine Rule Comments. Specifically, my input pertains to the botanical supplement kratom, in its pure leaf form. As a migraine sufferer for over 20 years, I have worked with primary care physicians, neurologists, and headache clinics to treat my symptoms. This treatment has included multiple prescribed medications, as well as behavioral therapy such as meditation and relaxation techniques. In addition to migraines, I have been diagnosed with depression and general anxiety disorder for the same duration. Medication and therapy have been partially effective. About 7 years ago, I discovered kratom. As a botanical supplement, kratom has been incredibly effective in helping my manage my migraine symptoms - to the degree that I no longer take prescription migraine medication. Likewise, kratom has been, by far, the most effective aid to manage my depression. Therefore, kratom, as a biological supplement, is majorly instrumental in my personal management of these conditions. An accidental consequence of my kratom consumption is an almost complete cessation of alcohol consumption. In the past, I have extremely enjoyed alcohol for relaxation, recreation, and distraction from depression symptoms. However, alcohol has its downsides to one's physical health. Without trying to, I have decreased my alcohol consumption by at least 90%. The "urge" is absent, and the effect of consumption seems less conducive to habitual use. The reduced alcohol consumption has influenced mild weight loss along with absence from dehydration and discomfort caused by moderate drinking. As a working parent of 3 children, I am subject to typical challenges with fatigue and low energy. Kratom is hugely effective in management of these issues. Kratom also assists with motivation when depression, migraines, fatigue, childcare, and career demands leave me drained and dispirited. As I have outlined, I leverage kratom as a botanical supplement to support management of a number of conditions and challenges. I purchase my kratom from a vendor I've patronized for years. The vendor was personally recommended to me by a fellow kratom consumer who was personally acquainted with the provider. The vendor tests the kratom for contaminants and offers great customer service. I consume kratom daily, and my monthly financial expenditure is well within my discretionary budget - and is well below my previous monthly expenditure on alcohol. I recently visited my primary care physician and underwent full blood work. My results show all measures - heart, liver, kidneys - in dead center of normal ranges. My blood pressure and heart rate are excellent. Now that I have shared my experiences regarding my personal use of kratom and its impact on my life, it should be apparent why I oppose the threatened ban. This supplement has demonstrably improved my well being and enjoyment of life. If I put myself into the shoes of an OH resident, I know that a ban would see those personal life improvements vanish. I would not be able to leverage kratom in OH if it's illegal. I foresee that without kratom to support my mood and energy levels, my motivation to continue pursuing my long-distance trail walking hobby would wane (and with it, the health benefits I am realizing from copious, low-impact exercise). I see this ban as a very real threat to OH residents' and visitors' rights to pursue happiness. I fail to see a justification of this ban from a harm reduction perspective. While a kratom ban in OH would be personally

			devastating for me as a visitor, I know that it will literally contribute to the deaths of OH consumers leveraging kratom as a tool to manage opioid addiction. Kratom supports the management of opioid withdrawal without the dangers of overdose and respiratory depression associated with other opioids. I don't foresee black market kratom as widely leveraged. Kratom isn't very strong compared to illegal street opioids. Who will risk selling or buying kratom (if illegal) if so many more powerful illegal opioids are already available? Stripped of kratom, a tool used to safely manage addiction to hard opioids, addicts will simply switch to options like street heroin, with all the overdose threats in full effect. Fentanyl lacing already causes so many overdoses, and kratom orphans, deprived of their legal botanical tool, will be thrust into the eager arms of the street drug community. Opioid overdose deaths will increase as a direct consequence of a kratom ban. I understand that some degree of kratom regulation may be well advised. I support regulations to enforce age limits on kratom use, as are in place for alcohol and cigarettes. Likewise, I support regulation around testing kratom for contaminants and accurate labeling. Such controls would enhance the ability of responsible adults to leverage kratom in a responsible manner. However, a kratom ban seems to offer little in the way of benefits or harm reduction, and a great deal of detriments to individual rights to choose what substances to consume - rights which are currently codified for similar substances such as alcohol, nicotine, caffeine, and, increasingly, marijuana. While I am not a resident of Ohio, I do travel to Ohio for tourism purposes. There are multiple destinations in Ohio that I've enjoyed visiting, from anniversary getaways to family vacations. Should this measure to ban kratom (natural leaf) move forward, I will cease all tourism activities in Ohio. I have spent significant funds on OH tourism in the past, but if a kratom ban is enacted, my tourism dollars will no longer contribute to Ohio's economy. I am one person, with one family, but I know I am not alone in these sentiments. Should a ban move forward, I will endeavor to avoid travel to or through Ohio altogether. Careful consideration of the enormous potential harm to be wrought by a kratom ban is crucial. Any reasonable and unprejudiced individual who evaluates the actual evidence around kratom (as opposed to anti-kratom propaganda disseminated by those with questionable motives and conflicting interests) will recognize that a ban's absence of harm reduction, coupled with the detrimental (even fatal) impact introduced by such a ban demolishes the validity of the argument for kratom prohibition. Please, do not move forward with this ban. There are thousands like me in OH who would be harmed for little to no gain - not to mention those like me who will avoid OH should this ban take effect.
Willoughby	Ohio	2 - Oppose - Used to Treat Chronic Pain	Or kratom helps me get through post stroke pain while living in a nursing in a nursing home

Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Chronic Pain	I am writing today regarding FDA's recent health warning and their recommendation to the DEA that kratom be added to Schedule 1. https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm608447.htm I am happy to see the FDA addressing bad actors that are not following prudent safety precautions and removing them from the market place. As a consumer, my safety is important and I am pleased to know the FDA is looking out for my well being. However, the idea of full ban or scheduling of any sort on kratom disturbs me greatly. Kratom has been consumed safely for many years now. I want it to remain unscheduled and available to responsible adults who are capable of making informed decisions about what health and nutritional supplements they want to consume. I am a 69-yr-old woman (recently widowed), a mother, and grandmother. I am not an addict and I have never had any addiction issues. Until recently, I've been a fully compliant chronic pain patient for close to decade and I have never once abused my prescription pain medications. I've followed all the rules and everything that's been asked of me, even more. I've signed pain management contracts. I keep my medications locked in a safe that's bolted to a shelf in my cupboard. I've never lost a single pill nor asked for an increase in dosage and I've never failed a drug test. Prior to 2005, I was a busy technical writer and editor (50+ hours in a 6-day week were the norm). Eventually the long stressful hours at a keyboard caught up with me. Right after Christmas in 2004, I was diagnosed with bilateral Neurogenic Thoracic Outlet Syndrome (NTOS). NTOS is a painful and disabling repetitive strain injury that causes chronic muscle spasms in the neck and shoulders. The spasms pinch nerves and arterial flow in the brachial plexus area under the collarbone. The higher my hands go above lap level, the worse the pain gets until my hands actually go numb. I was judged not to be a good candidate for surgical intervention. In order to try and plateau the progression of my condition, my doctor advised early retirement and I was forced onto SSD. I was devastated by the loss of a career I worked so hard to build. Pain management helped to some degree, but the restrictions I faced due to my disability were daunting and my morale declined. Eventually, I adapted and just as I grew more comfortable with my new normal, efforts to control the opioid crisis escalated. At great expense, both financially and physically, I managed to navigate having to find a new pain management specialist willing to treat me after my first pain management specialist of 7 years unexpectedly closed his practice. Then for various reasons entirely beyond my control, it started becoming harder and harder to get prescriptions filled in a timely manner. I'm not psychologically addicted to these medications in any way, however the body grows physically dependent and any delay in getting a prescription filled can cause debilitating withdrawal symptoms to set in within hours of a missed dose. Those delays have become normal, not the exception. Physically disabled patients have enough problems to deal with on a daily basis, getting legitimate prescriptions filled in a timely manner should not be one of them. Even though I have never once misused my medications, mounting pressure on doctors, pharmacies and insurance companies made it feel like I was being punished for the crime of being in chronic pain. Compliant chronic pain patients are being harmed by burdensome regulations and it seems that far too few people are taking this fact into account. Dependence DOES

			NOT equal addiction. I am living proof that opioids can be used responsibly by non-cancer patients who unfortunately live with daily chronic pain. It was during one of these delays in getting my prescriptions filled that I was introduced to kratom. I was shocked that kratom significantly reduced the withdrawal symptoms I experienced. In fact, it worked so very well that I eventually decided to discontinue the extended release morphine I'd come to rely on for over a decade just to see how I did without it. The prescription pain medication I'd been on for years worked very well for me. I was stable at the same dose for years. It was the frequent trouble I experienced in getting it filled in a timely manner that caused me to look elsewhere. What I didn't fully appreciate is the just how much the pain medication sapped my energy and motivation. I was astonished at how I'd gotten use to what I now consider an unacceptable level of malaise as I paced my daily activity level in order to avoid flare ups. I found that kratom allows me to function on a whole new level without impairment or the troublesome side effects and tolerance issues of opioids. I've also been able to reduce the amount of muscle relaxers and antispasmodic medications that I need too. Kratom has the added benefit of boosting my energy and mood, which is really important for those of us facing chronic illness. Even when well-managed, daily chronic pain is exhausting. Kratom helps support an overall sense of calm and well being which allows me manage my daily chronic pain and care for my family with focus and stamina. I accept that I'll never be entirely pain free. But if anyone really hopes to help solve the opioid crisis, alternatives like kratom need to be explored, not scheduled out of reach. The science is there for anyone who takes the time to look into it Please review how the computer model the FDA used in their assessment of how kratom affects the human body is irrelevant when compared to studies done by hands-on researchers in the field of toxicology and bio-science. Simulated Side Effects: FDA Uses Novel Computer Model to Guide Kratom Policy http://blogs.harvard.edu/billofhealth/2018/02/08/fda-uses-novel-computer-simulation-to-guide-kratom-policy/ Here an experienced pharmacologist explains how computer models are not reliable compared to science. They cannot mimic the human body and cells creating the environment cells have including pressure and temperature. Dr. Lanzara, Observations About More Than A Quarter Century of Pharmacology http://magazine.pharmamkt.net/featured_authors/observations-about-more-than-a-quarter-century-of-pharmacology/ "Dr. Gottlieb's statement concludes by urging people who are self-medicating with kratom to seek the help of healthcare professionals and prescription opioid-maintenance therapy or non-opioid pain relievers that have passed the FDA approval process." Effectively taking away the American liberty to make responsible informed decisions for ourselves. https://www.forbes.com/sites/davidkroll/2018/02/09/fda-weaponizes-opioid-label-against-kratom-consumers/#7a14eab45364 Dr. Christopher McCurdy, PhD, explains how kratom may act as a safer alternative to traditional MAT programs. He is the USA's leading researcher and expert on kratom and is also an internationally recognized expert on kratom. http://speciosa.org/mississippi-study-on-kratom-and-addiction-christopher-r-mccurdy/ While I do believe it should be properly regulated, kratom should remain legal and

			accessible to the millions of people who rely on it to accomplish the daily activities of life that healthy people take for granted.
Saint Clairsville	Ohio	2 - Oppose - Used to Treat Chronic Pain	My wife has taken this for over 12 years. It has been the only thing that helps her headaches. Please don't take this from her.
Detroit	Michigan	2 - Oppose - Used to Treat Chronic Pain	This product has helped with pain management .
Akron	Ohio	2 - Oppose - Used to Treat Chronic Pain	This is the only thing that stops my pain! And no side affects!

Brookville	Ohio	2 - Oppose - Used to Treat Chronic Pain	I've used Kratom leaf for over 10 years for severe chronic pain. It has literally made it to where I can live a normal life and be a father to my children. Before starting Kratom, I had to take a vast amount of opioid narcotics prescribed by my doctors. All they did were made me feel messed up and high and didn't even help with the pain. I couldn't hold down a job and in all lessons couldn't take care of myself. If Kratom leaf is made illegal, that is totally going to destroy my life. I would have to get back on narcotic medication this make it to where I can't function. I've had multiple back surgeries and been told I would be on opiate medication for the rest of my life. Please do not take this miracle plant away from people that genuinely need it for extreme chronic pain. I know many respectable people in the community from doctors to lawyers all the way down to store owners that use Kratom for chronic pain all of which are productive members of society and pay their taxes. Please do not let the actions of a very few abusing a drug that is not even Kratom leaf ruined it for the people that needed to live a normal life. Once again, this plant has literally saved my life. I am 38 years old and had two back surgeries, one of which was botched. I was told by my doctor I would be on opioid medication for the rest of my life. That medication made me very inebriated and to the point that I could not live a normal life in 2017 I found out about Kratom. This plant has literally saved my life. I am able to take this powdered leaf twice a day and not be in pain. I do not get inebriated from it at all, but it helps like nothing else for my pain if this plant gets banned I won't be able to continue to be a productive man/father anymore. I beg you please this plant helps so many people I know of friends, family members, doctors, lawyers, businessman, all of whom use this life-saving plant. Please do not make me have to go back to using opioids that would completely ruin my life.
North Olmsted	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am all for the ban of synthatic 7-OH and regulation of kratom products. I suffer from chronic pain and kava tea, from the leaf, helps me with pain management and anxiety. As a blessing who took opiate pain killers in the past and not any more, I only see the benefits of using natural kratom products and no dependency issues.
Dayton	Ohio	2 - Oppose - Used to Treat Chronic Pain	I completely oppose any restriction on the access to natural kratom leaf products. I have seen the transformative effect this product has had on people close to me with severe chronic pain. This is overbearing regulation that no one is asking for. The FDA had a prohibitionist stance kn Kratom for many years and has now updated its opinion based on more current information. Why is the Ohio BOP relying on old and misleading information? This product has been the only thing that has allowed someone close to me to have an even slightly normal life after a decade of frustrating failures to find answers or relief from the legions of doctors she continues to see.

Cincinnati	Ohio	2 - Oppose - Used to Treat Chronic Pain	I have been taking kratom for 7 years. Without it, I wouldnt want to live. I have many pain issues that prevent me from being able to take care of myself and my home. I have never taken synthetic kraton and agree it should be banned. Please dont schedule natural kratom. I would be bedridden. I cant take regular pain meds due to the regulation of not taking nerve medication and pain meds together.(which I actually did for10 years before it was stopped). I have not had any side effects from kratom in 7 years! Thank you..Char Heinkelein.
Reynoldsburg	Ohio	2 - Oppose - Used to Treat Chronic Pain	I oppose a ban on natural kratom. Mitragynine, the NATURAL chemical in kratom is that, NATURAL. It is not a man made substance such as an opioid or crystal meth. Yes, crystal is an extreme example but the example is important to mention because kratom does not create a drug abusive person who would go to the extreme to get their next fix Kratom users may actually be someone who is trying to STOP using opioids or even meth. Kratom is a useful medicinal safer way to stop the addiction of man made substances. Kratom should not be made illegal in Ohio. There are bigger and more substances to worry about like fetynal. The deaths from that use are far greater than kratom use! Rarely does kratom kill. I have been a kratom consumer for pain and depression. I am working full time, being a responsible adult and paying my bills. Kratom has not ever destroyed my life or created any kind of mishap like drinking alcohol or using street drugs would cause I don't go around begging for money or passing out on a curb like heroine users or some alcoholic on a bender Mitryganine is found in trees, put here by God who created earth according to most people who are believers. Doesn't it make one question why? If everything on earth was created by God in 6 days, including the Mitryganine chemical (kratom)trees, wouldn't making it illegal be hypocritical?? God put it here for a reason! He put everything here for a reason. Medicinal plants and trees included. I think the pharmacy board and all of the Ohio government representatives should focus more on made by man scheduled drugs and leave way less harmless kratom alone. Kratom helps with sleeplessness, depression, physical pain and fatigue, and opioid withdrawal which is usually caused by someone prescribing them in the first place. I understand it is not expected when prescribing opioids but it happens. And it is a horrible addition which often leads to harder drugs that are cheaper to get, like fetynal So let's get to the root cause of all of it and disregard the idea and possibility of making Kratom illegal here. Like I said, there are bigger substances out there that are killing loved ones everyday.

Rocky River	Ohio	2 - Oppose - Used to Treat Chronic Pain	I am opposed to this ban on Kratom. This substance has been a godsend to me as a chronic pain patient. As someone who is allergic to NSAIDS and does not tolerate opioids, Kratom has been the best pain reliever. I have taken it many times and yet also easily go without it for months if I am not having a flare. There is no reason people like myself should have to suffer because there are people who lie about their pain. Pain patients rarely if ever become addicts. It is not our fault that others are addicts and forcing us to be tortured is barbaric. Please do not make people like me have to live without something that makes life bearable. We did nothing wrong, and continue to do nothing but try to live our best lives. Please do not inhibit one of the few means for our wellbeing.
Cleveland	Ohio	2 - Oppose - Used to Treat Chronic Pain	Kratom has been huge in helping me with inflammatory arthritis. It is far safer and has no side effects compared to the medication the physician prescribed. Please do not ban it.
Columbus	Ohio	2 - Oppose - Used to Treat Chronic Pain	I suffer with severe chronic pain and if you ban Kratom leaf my whole way of life will drastically change for the worst. I have been through the medical meat grinder and I can't be fixed in fact I'm lucky to still be walking. I've had numerous Drs, surgeons,back shots,nerve ablation , disc Lazer ,NUMEROUS Dr prescribed medications and therapies - I even went as far as to have a spinal cord stimulator implanted - the stimulator caused a lot more damage and almost killed me,it took me over 2 years to get it removed even though the Dr promised if any problems he'd take it out - he didn't -instead I had to go clear up to Cleveland clinic to get it removed - to save my life. Out of everything I tried and everything I've been put through NOTHING helped the way Kratom leaf tea does and there's NO BAD SIDE EFFECTS FOR ME. NONE!!! Kratom leaf has been nothing short of a life saver for me. Please don't make me suffer MORE by banning the only thing that works for me - pure Kratom leaf. PLEASE LEAVE THE LEAF ALONE!!!!!
Columbus	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Please keep Kratom legal. Governor Dewine is wanting to outlaw Kratom. I use it for depression

Akron	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I am a 41 year old male who has been taking kratom for almost 10 years. I do not drink or smoke, but as I got older had bouts of anxiety and didn't want to go out as much to be around people. When I started my kratom journey it helped me tremendously to where I could be social and fun again. It has helped me study and pass test as it keeps my focus and mental stamina. There is this notion that it is dangerous but I believe while heartedly that the stuff that people are taking must be laced with something , or from the stories I hear are people that are taking other drugs and medications and kratom just happens to be in there system at the time of autopsy. I have never felt physically addicted, my belief like any coffee derived substances like caffeine which people have died from we do not go and illegalize coffee because of the caffeine. 7 OH is the problem and it is man made at high dosages that do not represent the kratom plants natural abilities to help people . It has been used for close to 1000 years by people who have used it in teas with no problem. I believe the answer lies with making kratom tested for purity and third party tested like my buddies store which is where I buy my Kratom from . First Chioce Kratom in Columbus, Dayton, and Cincinnati. What this ban will ultimately do is cause people to go toward the black market and then there lies the problem of laced Kratom and possible deaths, not from the Kratom itself. I think it is sensible to put an age limit to adults that are 21 and up or even 25 and up. Please keep our freedoms in Ohio as a state that is not like so many other nanny states. We are not children and can choose just as people do cigarettes which are killing people every day that are still legal. My friends who provide an honest living would have to shut there stores down do to Ohio making laws that do not make any sense because kratom is not the problem, the person who is taking it from a source that has not been verified which could be laced or they are drug addicted still taking drugs and also taking kratom which wouldn't be the leafs fault. Thank you and please do right by allowing freedom with strict legislation that would keep the leaf clean and safe as it always has been.

Alliance	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	To the Ohio Board of Pharmacy and Common Sense Initiative Office: I am submitting this comment regarding the proposed rule to classify mitragynine-related compounds as controlled substances. I support responsible public health and safety — but I respectfully urge the Board to consider how this rule, as currently proposed, would impact adults who responsibly use kratom products as an alternative to alcohol or pharmaceuticals and the community spaces that provide them. I live in Alliance, Ohio, and the products available at Kava Culture Bar (including kratom-based beverages and herbals) have provided positive benefits for my daily life. These products help me manage stress, promote relaxation, and support mental well-being without using alcohol or prescription medications. They also offer a social, safe, and non-intoxicating environment that contributes to my overall quality of life. Classifying mitragynine and related natural compounds as Schedule I substances would: • Eliminate legal access to many of the products I currently use; • Remove a safe, alcohol-free community space where adults gather responsibly; • Push consumer use into an unregulated black market, increasing risk rather than reducing it; and • Criminalize adults for choices that do not contribute to harm in our community. I understand there are legitimate concerns about high-potency or synthetic kratom derivatives. However, a complete ban on natural compounds used responsibly misses an opportunity to regulate responsibly — for example, through quality testing, age restrictions, and safety standards rather than outright prohibition. A more nuanced approach would protect public safety without harming small businesses or adults who use these products responsibly. Thank you for considering my perspective. I urge you to preserve access to safer alternatives and community wellness spaces by adjusting the proposal to distinguish between harmful substances and responsibly used natural products.
Dublin	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Please don't ban natural kratom powder. After 10 years of using it, It has helped and continues to help me so much. It took the place of all of prescriptions like zoloft and I don't want to have to take several prescriptions again.
Akron	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom has improved my life! I am 56 years old and my blood work suggests that I am very healthy. I take no prescription drugs! Kratom has helped me maintain focus and decrees anxiety from my life. It is inhumane for our justice system to make kratom illegal and ridicules to think the justice system allows the consumption of alcohol.
North Jackson	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have used Kratom on a daily basis for over 3 years. I ingest Kratom in the original dried leaf form and take 1 to 2 teaspoons per day. It helps with dealing with daily anxiety and provides a coffee or caffeine like stimulant affect. My health is good. My concern is that companies that make Kratom concentrates should be regulated. With my experience, I believe the natural dried leaf or Kratom tea can be used safely. I do not recommend changing Kratom to a schedule 1 drug.

Akron	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have been using kratom for not only pain relief but anxiety and depression as well. I have a form of autism called asburgers syndrome.. Until Kratom I was basically a prisoner in my own body couldn't keep a job or even take care of myself for that matter. I have been taking it now for 10+ years I now own my own home car and have been with the same company for 9years now.. Without This Miracle Plant I have no clue where I would be in life! Do not pass this rule. Allow for the continued use of this substance to be prepared, packaged and sold. Grant fda approval. Alcohol is known as a poison with zero health benefits. Yet it is legal. Kratom prepared properly is less dangerous.
Jackson	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I've been taking kratom for over 5 years no side effects it has made life so much better especially with my severe adhd and anxiety it would be absolutely devastating to millions if it's banned it has helped so many people.
Jackson	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	1 teaspoon of plain leaf kratom per day has helped me immensely with mental health issues. No other medicine has worked quite as well, including SSRIs and benzodiazepines, which I've taken in the past with prescriptions from my doctor. Please reconsider scheduling kratom, it helps many people like me who use it responsibly.
Akron	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Banning this beneficial supplement will do far more harm than good. I've used Kratom on and off for the last 8 years or so. After trying various things to help with my anxiety and depression (outside of anti-depressants) nothing was really working. Then, I found about Kratom. I never had any withdrawal symptoms when I didn't use it for weeks/months at a time (for monetary reasons, and to give my system a reset). I've found the perfect balance now, and Kratom is a big part of helping me function. I talked to people who no longer used Kratom, but the supplement had helped them with ptsd and getting over other addictions. Every body is different, and the effects vary. It should be studied! But to ban it outright without truly understanding it, while knowing full well just how harmful alcohol and tobacco are and it being easily accessible, is absurd.
Detroit	Michigan	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	It's a natural anxiety reducer. And I know people who say it's helped with opiate withdrawal.
Cleveland	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom is very helpful to me for my pain and anxiety. I rely on it to get through the day
Worthington	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have used Kratom for years for my anxiety. It works the best for me compared to any other prescription drugs I have tried.

Columbus	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	My husband and I have been coming to Miracle Kratom for many years now. Kratom has made a massive positive impact on my life in many ways as someone who has struggled with mental illness for the better part of 20 years. It improves my mood tenfold, increases my energy levels as well as allowing me to focus. It has been more successful in doing the above than most any other supplements I've ever taken. My husband is in the exact same boat as I, and it is truly heartbreaking to see this decision being made as opposed to regulation. I wholeheartedly agree with Kratom being pulled from the shelves of gas stations and corner stores, but seeing Miracle Kratom specifically go under due to this simply doesn't make sense to me. I truly hope that this decision is reconsidered.
Cuyahoga Falls	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I couldn't disagree more on a total ban of natural kratom. It has helped me in many ways when traditional medicine could not. I suffer from anxiety and depression. Kratom has offered me hope when I've tried nearly every anti anxiety medication. I'm truly fearful of this full nature kratom ban as it will impact my life in the most negative manner. Please reconsider and follow the science.
Wadsworth	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Please reconsider this ban, it will harm many people who use it safely. Kratom in its natural form has been around for centuries and is not harmful. it's the synthetics that have caused all of the issues and I support your decision to ban synthetic kratom. Please follow the science! Kratom is a godsend for people with anxiety that have had failures with OTC/Prescription options. If you do not understand panic attacks/anxiety disorder, i would not wish it upon anybody. It's terrible, and to have something that helps is extremely helpful. Kratom is boring. It does not get you "high", it's the synthetics that cause all of that. It's just something that many people rely on that don't deserve to have it taken away. Please reconsider, thank you for your time.
Liberty	Indiana	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom has saved my life and has been a gift from God. I was at my darkest with depression when I discovered it and it has brought me back to life. Not even any antidepressant I've tried could do that. I've been consuming kratom for around 7 years now and it doesn't mess you up or incapacitate you like weed or alcohol or any drug does. It just gives me motivation and desire for life again. Please, please, please don't ban it! The data you have is wrong and has been debunked. Just put age restrictions on it. Follow what they are doing on the federal level. Kratom is not dangerous and helps far more than it hurts. Of course too much of anything can hurt you, just like too much water can hurt you. Doesn't mean we should ban water. I know you guys are just trying to do the right thing, but the right thing is not baning natural kratom!

Elyria	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I suffer from ptsd and I mean suffer!!! Every morning I gave wake up 2 hours early, because I ALWAYS wake up with a level 8-9 anxiety , crying , fidgety abd will increase to full blown panic attacks. I take 5 prescribed medication Xanax is one, although I'm on a low dose and doctors in Ohio won't prescribe anymore. I fight anxiety everyday all day. 15 years of seeing a psychiatrist and therapy. Since most doctors here in Zanesville won't prescribe it or give a low dose. So one day 2 years ago I researched kratom and although the details were not tested, I was willing to try kratom. Lifesaver!!!! I woke up took some kratom and the other meds except the Xanax. IT WORKED!!!! I was so relieved I started crying with joy. Thinking I won't need any mental meds , just kratom A PLANT, nothing synthetic. I know kratom works by itself self . No more medication that doesn't work as well as kratom did. I can't understand why you would think it's bad for an individual to consume a nature growing plant that gives 100% relief for anxiety and all my joint pain from osteoarthritis but believe 5 medications, one narcotic is a better or safer way to treat anxiety. I invite you to watch me in the morning so you can see first hand how extremely anxious I am. Kratom has been the answer. It relieves my pain and anxiety. Please please. Please don't ban kratom. Banning kratom will be isn't the answer!!!! Kratom has allowed me to work and not be Anxious. I can't imagine nit being able to take kratom snd suffer knowing ther was a solution but now I can't. Make America great again and stop making relief for the American people so hard.
Lakewood	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom helps me with my anxiety so much. It's the only thing that helps and keeps me off prescription drugs.
Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	The natural powder katom has helped me with my anxiety and my adhd and my depression it's not a bad thing more people need to do research on this the synthetic stuff is what needed to be ban not the natural powder.
Cincinnati	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have been using kratom for years to help with anxiety and depression and pain issues. If it wasn't for kratom I would be forced to used prescription drugs that due way more harm and become addicted and risk death. Kratom also got my wife out of a five year depression and saved her life and our marriage. This is also the land of the free and we are adults free to make our own decisions. We shouldn't have to answer to daddy government to use a substance that is in fact safer than any prescribed benzo or opioid.
Dublin	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	This is ridiculous. My wife takes kratom. It's helped her k many ways including depression, anxiety,, and pain. Stop trying to rule us. We are free Americans .
Philadelphia	Pennsylvania	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have been and remain a consumer, advocate and proponent of Kratom and its derivative products since 2018 The relief it offers from anxiety, depression and arthritic pain cannot be overstated Please let science speak the facts

Ashville	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have been taking natural kratom for 5 years. Before I started taking kratom I was on several antidepressants, anxiety & pain meds which all have horrible side effects. Therefore you get prescribed / have to take another med to help with those side effects. Kratom has been nothing but a life saver for me. I work full time, have 2 children, a husband & I am very involved in my church. Just because an individual takes kratom does not mean they will become addicted or is a junkie. Banning kratom would be a major mistake. Kratom is not a drug or any type of narcotic. It's a natural plant that has saved thousands, if not, millions of peoples lives. I pray the board of pharmacy truly rethinks this ban.
Bethlehem	Pennsylvania	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom has changed my life for the better. I used to be suicidal over ptsd ablnd this plant has truly changed my life by reducing my flashbacks from Iraq. I've become a productive father a gym goer and a kind person overall and it's kept me away from harder drugs. Please do not take away this amazing plant. Thank you for your time
Dublin	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Please do not ban mitragynine. Keep it available by keeping the sale of Kratom in Ohio legal. I have been helped tremendously by Kratom. It has a positive effect on my anxiety and I worry so much less about little things. It is better than citalopram and venlafaxine. I still take venlafaxine, complemented with kratom and it is a great combination. Please do not ban kratom. Thank you. Good morning. I understand the Ohio Board of Pharmacy is considering a ban on Kratom. I vehemently oppose this ban. I am 60 and have been on several different Dr. prescribed medications for over 20 years for anxiety and depression. None of the medicines have been successful over time. I started Kratom about 1.5 years ago, about 20 MG per day, and this has been a life saver. Kratom has changed my world for the better, significantly reducing anxiety and depression symptoms. Never have I become addicted to nor grave Kratom. I take it once in the morning along with my other pills (cholesterol and thyroid) and go about a normal day. Please use common sense and not bend to the extremes. Do not be swayed by the pharmaceutical companies who may have seen decrease in prescription medicines revenues. Kratom has been a game change for me and my family. Go after the bad actors but don't throw the baby out with the bathwater. Best!

Louisville	Kentucky	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I am writing to share both a clinical and personal perspective regarding natural leaf kratom and the importance of keeping it legal and responsibly regulated in our state. I am trained to assess therapies based on safety, functionality, and real-world outcomes. I am also someone who has experienced mental health challenges firsthand. For several years, I have used natural leaf kratom in moderation and with intention. In my experience, it has significantly improved my mental health stability and ability to function—allowing me to work, contribute meaningfully to patient care, and maintain a healthy personal life without impairment or escalation of use. My use has been consistent with harm-reduction principles already embraced in modern medicine: informed decision-making, moderation, and risk awareness. I have not experienced adverse effects, dependency behaviors, or interference with my professional responsibilities. Compared to many prescription options commonly used for mood, anxiety, or chronic stress, kratom has presented fewer functional side effects for me personally. From a regulatory and public health standpoint, prohibition would be counterproductive. Criminalizing kratom would not eliminate use; it would drive consumers toward unregulated products, unsafe sources, or higher-risk pharmaceuticals. Ohio's current approach—legal access paired with regulation, quality standards, age restrictions, and transparency—is the most responsible and evidence-based path forward. I strongly support maintaining kratom's legal status in Ohio under a clear regulatory framework overseen by appropriate authorities, including product testing, labeling requirements, and consumer protections. This approach aligns with public safety goals while respecting adult autonomy and preventing unnecessary harm. As both a healthcare provider and a long-term, moderate kratom consumer, I urge Ohio legislators and the Ohio Board of Pharmacy to continue prioritizing science, regulation, and harm reduction over prohibition. Responsible access to regulated kratom has real implications for mental health stability and overall public health in our state. Thank you for your consideration and commitment to thoughtful, evidence-driven policy.
Austintown	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	All responsible Kratom users who have had life changing experiences with Kratom agree... Ban the synthetics of Kratom but banning Natural Kratom will have serious consequences in our personal lives. I was personally on SSRIs for decades for anxiety and depression until finding Kratom. I am now gainfully employed with a family that includes a wife and 2 kids, as well as a home owner in our great state. Its the synthetics that are the problem. Not natural Kratom. Please consider the majority of individuals who use Kratom responsibly. Set guidelines like with alcohol or marijuana. Punish those who sell the synthetics. Not us who rely on natural Kratom to live wonderful, pain free and healthy lives. Thank you. 43yr old male.

Massillon	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I am writing to oppose the proposed ban on kratom because it quite literally saved my life. There was a period in my life when I was barely functioning. I was overwhelmed by anxiety, constant mental strain, and exhaustion to the point where simply getting through the day felt unbearable. I did what I was told to do and sought conventional solutions. What I was offered came with side effects that left me feeling disconnected, dulled, or worse than before. I reached a point where I felt trapped between suffering untreated or losing myself entirely to medications that did not work for me. Kratom changed that trajectory. For the first time in a long time, I felt stable. I could think clearly. I could work. I could wake up without dread and move through my day without feeling like I was fighting my own mind at every moment. It did not make me intoxicated or detached from reality. It did the opposite—it allowed me to stay present and engaged with my life. Kratom gave me a way forward when I genuinely did not see one. Without it, I am not confident I would still be here today. That is not hyperbole. When people talk about "saving a life," they often imagine dramatic moments. Sometimes it is quieter than that. Sometimes it is simply giving someone enough stability to keep going when they otherwise would not. I used kratom responsibly. I did not escalate my use. I did not engage in risky behavior. I continued to work, maintain relationships, and meet my responsibilities. Kratom did not replace accountability—it made it possible. A ban would erase that option entirely. It would tell people like me that our lived experience does not matter, that a substance which kept us alive and functioning should be taken away despite responsible use. It would not stop people from seeking relief—it would only push them toward far more dangerous alternatives or unregulated sources. I am not asking for kratom to be unregulated. I support reasonable safeguards, including age restrictions, product testing, labeling requirements, and consumer education. But prohibition is not protection. It is punishment for people who have already struggled enough. For many of us, kratom is not recreational. It is not casual. It is the reason we are still here—working, contributing, and living our lives. I urge Ohio lawmakers to reject a ban and instead choose regulation grounded in science, compassion, and respect for personal autonomy. My life—and the lives of many others—are not theoretical. We are real, and so is the impact this decision will have on us. Thank you for taking the time to consider my perspective.
Canfield	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I don't believe this product needs to be illegal in Ohio, it works. I suffer from MDD and ADHD meds only do so much but when I add 1tsp daily of this product I feel relief almost immediately. Please, it works
Napoleon	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I feel banning Kratom is completely unfair when you allow people to continue sucking down alcohol which has caused so many deaths and health problems. I have Narcolepsy and Kratom keeps me going at work without needing horrible stimulant meds like Adderall. It also helps my wife with her anxiety. This is WRONG!!!

Marion	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Hello! I am a 48 year old former addict with 9 years of sobriety and have used Kratom as a therapeutic alternative since my recovery journey began. Most of my life, I have suffered with anxiety, depression, PTSD, and chronic migraines. I turned to alcohol, illegal drugs, and have been on over 35 ineffective legal pharmaceuticals over the years. I have also undergone Transcranial Magnetic Stimulation to assist with my depression, but this therapy only lasted a brief time after ending the initial 6 months of weekly sessions. After using Kratom to help with my alcohol withdrawel symptoms, I realized it also helped with my mental health issues and chronic migraines as well. For most of the past 9 years I have used small doses of pure and natural Kratom powder. Today I am a good husband, friend, and brother. I have devoted my life to God and made a career in addiction recovery successfully helping hundreds of people find their own ways out of the darkness that comes with mental Illness and addiction. I pray that all involved will look at the actual science of pure form Kratom and carefully consider the detrimental affects of banning this alternative that has helped so many.
Bryan	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I've been taking natural ground leaf kratom responsibily for over 8 years. It's helped my social anxiety, my focus and my depression. It's changed my life to be completely honest, for the better. I can't believe that people want to make it illegal, that would make me a criminal and that just isn't right. It's my own personal choice to use kratom and I think it is safer than alcohol. There's a lot of propaganda and misinformation regarding kratom. I know that many people use it to get off prescription pain medication and even opiates..... The good news is that all of those things can kill you if you overdose Kratom in it's natural form will not kill you. If you make this illegal I can almost guarantee you that overdose deaths will skyrocket.
Logan	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have been using Kratom for 7 years now. I only buy Kratom leaf powder that is AKA approved!! It has been a BLESSING for me. Helps greatly with depression and anxiety.
Mount Vernon	Kentucky	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Ive been taking Kratom 1 tsp a day for over 6 years. Kratom helped me in many ways. I no longer need xanax or antidepressants. It has also helped me with my joint pain and menapause symptoms. The only thing bad i have to say about it is it taste nasty. Kratom has been a bless To me and i totally support how it has helped so many people in many ways from cancer to drug addiction. Mike Dewine has no clue how this will effect the quality if lives if he gets it banned.

Cincinnati	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have been taking Kratom for almost 8 years now. I deal with chronic anxiety and depression. I saw a psychiatrist years ago and we tried the conventional method of medication with no results. As a person who has a high vitamin and supplement intake on a daily basis, Kratom is the only thing I have found that helps me. I have tried for years to figure out what works and what doesn't. Kratom works. It doesn't get you high, it doesn't impare your ability to function on a daily basis. I am a business owner, very active in physical fitness 7 days a week, I am a musician, I sing, I do modeling, etc. If this substance was as bad or even bad at all , I would not be able to function and do all of these things. Kratom gives you an energy boost, helps with clarity of thinking which is very good for those of us who have the crippling effects of anxiety that at times can make day to day life almost impossible to endure. This substance in no way belongs in the same category as narcotics whether they are legal or illegal. Marijuana usage is legal. Impaired judgement is a side effect of that substance. On a daily basis I can smell it while people are driving and notice they are not quite fully engaged in what they are doing. meanwhile I am using kratom, that does not in any way effect my ability to operate a vehicle, work, perform, or carry on a conversation with another individual. I am quite aware that some people who are ex addicts or alcoholics use Kratom to get off of those substances. That in no way means that it is a narcotic or has the same effects that they do. Simple vitamins and minerals can be toxic if too much is in the system. Should they be banned as well? No more B12, no more magnesium, no more Iron, etc. Just because one person or persons abuse something, does not make it a deadly substance. Every person is different and things affect them differently. If Kratom is banned, it will do more harm than good. More people like myself will have to deal with chronic issues that we cannot find help for. Again being someone that does not take prescription medications, because of the side effects which I have had in the past, my chemistry accepts and uses natural substances to make my life better. Kratom and coffee have very similar effects. Caffeine and Kratom have very similar effects on the body. Energy boost and better thinking, a decrease in pain, motivation to get through the day. If you ban Kratom, you are basically banning caffeine or coffee which we know caffeine has very drastic harmful effects on the body.

Detroit	Michigan	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I realize this is a state that I don't reside in. However, I travel a lot and I know there are many Kratom users in the area. I would like to share my story: I have anxiety, depression, stress, and pain issues that aren't always effectively managed with medications. Kratom significantly improved my life. Taking it daily as a natural alternative to controlled substance prescription drugs has been very beneficial. I experience no harmful side effects. It helps me avoid taking as-needed controlled substances for anxiety and complements my antidepressants for depression. Kratom is harmless and highly beneficial in its natural state. The only adverse reactions attributed to kratom involve synthetic or otherwise adulterated products laced with additives and harmful ingredients, especially synthetic alkaloids. Regulations should ensure that kratom sold is safe and authentic, not the dangerous synthetic type. Please thoroughly research kratom before criminalizing a safe and natural supplement with minimal to no health risks. I recommend visiting websites like "https://kratomanswers.org" and "https://www.americankratom.org/science for more credible info. I urge you to oppose a ban on all kratom, but support a ban on synthetic and adulterated kratom. If you would like more info and/or details, you are very welcome to contact me by phone at: 979-571-5478 or by email at: 36idgi@gmail.com. Thank you for your service to the state of Ohio!
Botkins	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Please keep Mitragynine legal. So many people in Ohio including myself use Kratom as a daily supplement for various reasons. Personally Kratom has been a God-send. I have had anxiety and mild depression for many years and took xanax to control the anxiety but developed issues finding doctors who would prescribe it for me. I discovered Kratom in 2018 and have controlled my depression and anxiety very well. Please consider the KCPA, Kratom consumer protection act as a better alternative to an all-out ban as that would hurt hundreds of thousands of people very badly possibly forcing many back to dangerous street drugs. I pray that you will make the right decision and not turn good people into criminals overnight. Thank you for this consideration

Waverly	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I'm writing to ask that you do not ban plain leaf kratom. I have personally taken plain leaf kratom for well over 12 years. Every purchase has come from a reputable vendor, with lab testing, and proper labeling on every item purchased. This labeling includes lot numbers as well in the event of issues with lab tests or reports from other consumers. I would also like to add, I am a nurse, and have worked at the same job for 10 years. I ordered kratom at the behest of a local physician's suggestion. I combat severe depression and anxiety, along with an issue related to severe pelvic pain. My depression and anxiety had been resistant to all treatments, and opioids were intolerable to me as I felt I could not function on them at any dosage. I started researching plain leaf kratom, it's mechanism, it's benefits, it's dangers, and weighing those risks and benefits. I can say it has been 12 years since I was last admitted to the hospital for any reason, and it has been the same amount of time since requiring opioid prescriptions. I feel human and feel the best I've felt. This supplement has given me over a decade of peace and allowed me to build a healthy life for myself. I have flourished in a career I love; I've even been promoted many times! I am also finishing a bachelors degree in a different field of study aside from nursing! Natural leaf kratom has provided me a healthy and alternative means to achieve my personal healthcare goals! Again, I ask that you take these facts into consideration and not ban plain leaf kratom.
Toledo	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom has helped me more than pharmaceuticals! I suffer from severe anxiety and depression. Most medicines prescribed to me did not work well, or brought on other problems. I researched kratom and decided to try it, and wow,the difference it made has improved my quality of life immensely. This leaf is an absolute life saver. With some research it is easy to find a reputable vendor who cares about the safety and quality of their product. Most vendors vigorously test each batch to ensure safety and quality. The majority of kratom users know what to look for on a companies website to see if safety and quality is a priority. I am all for the ban of 7-oh. That is not what pure leaf kratom is and not it's intended use. The people who market and sell that crap are giving kratom a bad name. The good with kratom exponentially outweighs the bad. It is cleaner and safer than alcohol. Less addictive than alcohol also. Personally i have never experienced withdrawal if i decide to not use it for a bit. My quality of life has been massively improved by taking this leaf. Please for me and many others dont take that away. Thank you for considering this matter. I appreciate the fact you're willing to hear what people have to say.
Columbus	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I've struggled with anxiety for most of my life but for the past 3 years, kratom has not only helped me with my anxiety, it's also helped me with my energy, focus, and health. It is part of my morning ritual before going into work in a manner no different than a morning coffee. Anything can be abused but not anyone will be an abuser, certainly not myself or anyone that I know who uses it. I strongly recommend that kratom not be outright banned but instead, simply be regulated in a manner no different from THC or alcohol, and frankly it I think it's a much safer substance than both.

Ashtabula	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Please don't do this. Kratom has saved my life. I take it for my anxiety. My doctor recommended I try it as an alternative to other drugs. I understand the 70h but completely banning kratom itself is insane to me. Its helped so many others stay if harder drugs. There are so many businesses that rely on it. I dont know what else to say. The decision is up to you now.
Cincinnati	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Thank you for your time and condisderation on this important matter. I have personally used lab tested kratom powder and extracts over the last four years for mood and motivational enhancement as an alternative to more dangerous illicit and synthetic substances. I work in the medical field and have not experienced any negative health or side effects from these products. Our focus should be on public health and harm reduction promoting a safe supply of kratom, proven to be both clinically safe and effective versus a punitive system. The war on drugs through prohibition penalizes compliant businesses, undermines economic stability and public safety, and reduces transparency, testing, and consumer education. Preserving a regulated market that supports testing, education, and oversight through KCPA and/or Regulatory bill SB299 should be our prime focus.
Geneva	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I got anxiety about 8 years ago the doctors gave me hydroxine as a medicine to control the anxiety. After about a year or so on hydroxine 25 mg. I couldn't take the anxiety so I asked a few different people including a doctor and got information to try kratom powder 1.5 grams every 6 to 8 hours. After taking the kratom the anxiety diminished and to this day 95 percent of the anxiety I had is gone. I still take about 1.5 grams every 8 hours and if I need to ill take 1/4 of a 30 mg kratom gummie and when I have to go to the dentist I quit my kratom intake just be on the safe side and never had any withdraws! Please do not stop us from buying and medicating with kratom. Or kratom gummies. I never took the 7oh pills so I have no input on 7oh. For me to go to the doctors i would have to pay bout 125 dol. A visit and cost of meds hoping the meds will work. My cost of kratom for the month is less 30 dol. I have never ben high off kratom it doesnt work like heroin or major pain pills I swear to that. I work everyday and zm a tax payer and a contributor to society thank you much for reading my story.
Columbus	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I take kratom for severe anxiety & pain. You shouldn't remove a good product from the market if it is helping people.

Piqua	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Hello. I am a 37 year old mother of 4. I am reluctant to even make public comment. I fear that our voices fall on deaf ears. When the government decides something is no good, they do not care about those it is good for. I am a Kratom user. I am a mother, a wife, and a productive member of my community. But years ago, that was not the case. My journey with kratom never started with addiction. I have never touched "hard drugs" in my life. In 2018 I was unemployed and struggling with severe anxiety. I could not even drive my children to the mall without a panic attack. I went to the doctor multiple times and was prescribed anxiety and depression medication, to no avail. I started dosing kratom after it was suggested to me from a lady at a "hippy" store. It relieved my anxiety and completely gave me my life back. Since my journey with Kratom began, I started a job at an elementary school where I have been for 3 years. I also am on my local board for youth sports. Let me add, I have a long history with kidney problems. Before starting Kratom, I was in Stage 3 kidney disease. While dosing, I have been dropped to Stage 2. Now I cannot prove medical benefits of Kratom. However, my bloodwork does not lie. I am under the care of a nephrologist who preforms labs on me every year. With my most recent labs being this past October. I am undeniably healthy and my nephrologist said my bloodwork and test results were "rock solid". All while on Kratom. Those of us who are not abusers do NOT deserve to have this supplement taken from us. The fact that alcohol and Marijuana are legal and you are going after Kratom, is mind blowing to me. 7-OH is NOT the same as kratom. I have never, and never would ingest a 7-OH product. Pure leaf powder from a reputable business is what needs to be able to be purchased by those who use it for good. Please seek another way. Please look at what other states are doing. It can be regulated without making it completely illegal. Respectfully, making pure leaf powder a schedule 1 is insane. Alcohol destroys far more lives and has zero benefits. I agree that 7-OH should be illegal. But pure leaf powder must be left alone. Regulate it if you will, increase the purchase age, but please do not make it illegal to purchase. You will be harming far more lives than you will be saving if you take away access. I promise you this. Please head my words. There are good people who use Kratom for good. Thank you for taking the time to read my message.

Cincinnati	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	As a hospice caregiver and a responsible user of kratom for 5years. I've never had to up my dose of it. You're able to find your dose and stay at that dose. Your system doesn't cry out for higher doses over time like an opioids. Comparing Kratom to opioids is just a way to criminalize it. Kratom helps more people than it hurts. Allowing powder form to be sold and not capsules shows that you know it's not as bad as you make it. Allowing all users to not be able to calculate their dose also says you know no one is overdosing on it. Kratom is more like an energy source! It helps to get most of us through our work day, with energy, clears our minds, helps our body's from feeling all the discomfort the poison in our food brings to our bodies. I was extremely depressed when I found kratom. My doctor tried several different antidepressants with me but life always found a way to bring me down. After losing a child, my best friend and dad. Life became really hard. A coworker told me she would take 2pills in the morning to help her through her day after she lost her child. Kratom saved me and Im sure it's saved a lot of people. Kratom is nothing like you all are making it out to be, it's sad to me that hard working people are at risk of not having it! Yet, we can stop by that same gas station and buy something that kills people everyday (Alcohol). All I ask is to at least consider keeping natural capsule kratom legal in Ohio.
Berea	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I am so thankful for kratom. Kratom has been a huge part of alleviating my depression and physical pain. I take a responsible dose each day and there are no psychotropic effects. This medicine helps so many of us to have a better quality of life. Please don't take it away from us.
Columbus	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have been using Kratom for years to help with anxiety and has been so helpful. It is not dangerous but healing. My neighbor uses it to stop drinking and it has been amazing. The natural powder is not harmful . Please think of all the people it has helped.
Cleveland	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom has helped me with my depression and I've been taking it for 10 years , 2 grams a day. It also helps with my neck pain. I have been on aLOT of Anti- depressants that made me suicidal. Kratom never has and it just makes me feel good about getting out of bed in the morning. Please don't take it away. 😳
Newark	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom saved my life. I have a multitude of different diagnoses. Anxiety, major depressive disorder, adhd, and PCOS as well as a rare blood disorder. These diagnoses will never go away and it is something i will have to live with for the rest of my life. Im only 44. 8 years ago I found kratom and it saved my life. All the medications i was on would eventually stop working or there would. Be a side effect or they didn't work at all. The would up your dose, change your mediaction, or let's try this or here take this to help with that side effect. It turned me into a person who couldn't function normally in society. Then I found kratom. And it saved me. 8 years ago I went off all my prescriptions and started taking kratom. I've never had to increase my dose. In 8 years I take the same amount. I've never had an adverse reaction. But those prescriptions I was on I did. I was able to go back to college. I got a degree from OSU. I am a functioning member of society. And I have Kratom to thank for that. I'm begging you not to take it away. Please work with the American Kratom Association. There are so, so many more stories like mine.

Mentor	Ohio	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Natural kratom is not dangerous and can help with mental health. I use it to ease my anxiety and depression. For someone who is sober, I have limited options to use to help ease symptoms naturally with plant based drinks.
Grand Rapids	Michigan	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I (Dennis Pelton) was first diagnosed with depression at the age of 16. I am currently 52. For many years I tried many different types of prescription drugs. None of them were successful. I now consume Kratom and it has been the only thing that has helped with my depression. I am doing well now unlike when I was being prescribed drugs for depression. In my opinion the pharmaceutical industry is trying desperately to get Kratom banned everywhere they can. Actually, there are 2 groups that want to ban the Kratom plant. One group being Drug cartels that sell heroin, fentanyl & other opiates. The second group are the pharmaceutical corporations that sell pain killer opiate pills & other drugs prescribed for depression that are no longer needed because of the Kratom plant. Big Pharma also sells other drugs such as Methadone, Suboxone & a few other drugs that people get addicted to in order to get off of heroin & prescription pain pills. Both groups want the Kratom plant banned for the same reason. The Kratom plant takes away their customers & gets people off of drugs. Over the last couple of years corrupt politicians (on behalf of pharmaceutical corporations) have tried to ban the plant locally. The DEA tried to ban Kratom nationally but they failed for the first time in history because there are millions of Kratom consumers in America & we let our displeasure be known. Hundreds of thousands of outraged Kratom users called the DEA, the Congress & Senate. In a unified voice we said LEAVE THIS MIRACLE PLANT ALONE! So the DEA backed off. Many Kratom users are women usually around age 50 or older. Many consume Kratom to treat arthritis, carpal tunnel syndrome, fibromyalgia & many other disorders. At first the DEA had no idea who consumed Kratom but they soon found out. The battle was joined by many members of the United States Congress who also consumed Kratom or had loved ones who used Kratom to treat some type of medical disorder. Organized by Rep. Mark Pocan (D-WI) and Rep. Matt Salmon (R-AZ), the "Dear Colleague" letter was signed by 28 Democrats and 23 Republicans, including two medical doctors serving in Congress. They sent letters to the DEA (Drug Enforcement Agency) & OMB (Office of Management & Budget) in order to stop the ban on Kratom. With the help of Congress we the American people were successful in stopping the ban. We will never stop fighting to keep the Kratom plant legal! Too many good people would be hurt & have their lives ruined if a Kratom ban were ever to happen.

Newton Falls	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Dear Board Members: On: Proposed Rule 4729:9-1-01.2 (Mitragynine): I am writing to submit formal testimony in strong opposition to the proposed scheduling of natural kratom (mitragynine) as a Schedule I controlled substance in Ohio. I am an informed Ohio resident and citizen who holds a Bachelor of Science degree in Psychology with a specific focus in Counseling. I commend the Board's decisive action to ban dangerous, highly concentrated synthetic derivatives, such as those containing 7-hydroxymitragynine (7-OH), which pose a clear public health risk. However, I urge the Board, from both a personal and informed perspective, to critically distinguish the risks of these synthetic products from the established safety profile and demonstrable benefits of the natural kratom leaf in powder or capsule form. My position is founded on my direct experience using natural kratom responsibly to manage a severe, chronic addiction issue and, subsequently, build a successful life. The Life-Saving and Enabling Role of Natural Kratom in Recovery For thirteen years, I struggled with severe alcohol use disorder. This addiction was devastating, consuming my life, harming my health, and destabilizing my future. After countless attempts to maintain sobriety through traditional means, I found that responsibly sourced, natural kratom provided an invaluable tool for abstinence. I have remained abstinent from alcohol use for over 2 years. This is truly a miracle for me. Since integrating natural kratom into my personal recovery, I have been able to completely quit drinking alcohol and have maintained continuous sobriety. For me, kratom was not a replacement addiction; it was a manageable, useful tool that stabilized my life in a way I previously thought was impossible. The results of this abstinence have been profound and measurable, allowing me to become a productive, self-sufficient member of the community: Entrepreneurial Success: I have successfully started my own business as an online tutor. This endeavor has been fruitful, yielding nearly five-star reviews from clients and students. Family Support: The income generated from this self-started business has been essential in supporting my family. Emotional Balance: My emotional stability and mental well-being are balanced and consistent, allowing for the focus necessary for excellent work performance. A Healthy Family Member: I am able to focus on being a present and healthy member of my family, fulfilling my responsibilities. To criminalize this natural substance is to remove a very helpful lifeline that has allowed me to transition from a dangerous, high-risk lifestyle involving alcohol abuse to one of sustained health, responsibility, and entrepreneurial success. To make possession a felony would hinder the recovery process of many individuals. There are many voices stating otherwise but, I am here to state my very positive story and experience with this natural plant. I do not take any other medication for my mental health and have been more balanced and happier than I can ever remember. I believe this substance deserves more research before being made illegal. Policy Must Distinguish Between Natural and Synthetic The current public health crisis is rightly centered on the proliferation of dangerous, adulterated, or synthetically concentrated products. The data connecting fatalities to kratom overwhelmingly points to products containing high levels of highly concentrated alkaloids or to products mixed with other potent drugs. I ask that the Board consider a regulatory framework, such as the Kratom Consumer Protection Act (KCPA) passed in

			states like Utah, Arizona, and Georgia. These states successfully maintain the legality of natural kratom while establishing essential consumer protections, including: Mandatory testing to ensure products are free of contaminants and dangerous synthetic adulterants. Strict limitations on the concentration of 7-hydroxymitragynine (7-OH). Age restrictions and proper labeling requirements. This approach acknowledges the genuine concerns about product safety while recognizing the legitimate benefit of natural kratom for individuals struggling with addiction to demonstrably deadlier street and pharmaceutical drugs. For me, kratom was a miracle and a blessing from God that facilitated my personal recovery. I sincerely hope that the Ohio Board of Pharmacy will choose informed regulation and discernment over an all-out prohibition that could complicate the success and stability of Ohio citizens like myself. Thank you for your time and serious consideration of my testimony. Angela Mangeri

Chillicothe	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I typed my comments on a word document and are attaching it as pdf format. Thank you for taking time to read it, since I took the time to write it. Dear Pharmacy Board, My name is Michael, and my story with how I found Kratom, how I use it, and why I feel it should stay legal, is a story of hope. Let me begin my story from the beginning. It all started in the late 90's. My mother fell down our basement stairs and broke her collar bone. She went to a young orthodontist by the name of Lefcowitz. At the time, he hadn't been practicing medicine very long. He still had the zeal most noble doctors have when getting into medicine. To help her manage her pain, she was prescribed Oxycontin. I suppose it helped, because she was able to do things that up until that point, she couldn't because of her injury. After a year, the doctor decided to remove part of her collar bone in hopes of helping to give a more permanent relief for her pain and get her off the meds. The surgery went well from what I remember, but it did not help. In fact, it made things worse. It caused her shoulders to limp, which caused more pain, which caused for higher doses of Oxycontin. Then came the Percocets. They were for the 'in between' management for her pain. And they helped for a while too, until my girlfriend's mother discovered she was getting these pain medicines. Rachel's (my girlfriend at the time) mother (Sara) educated my parents in the process of crushing and snorting their meds. Once this happened, it was down hill. My mother's pain kept 'increasing' and so did the medications strength. Then, one day, I woke up to my mother screaming. My father had died in his sleep. I was 18 at the time. My mother continued misusing her medication, even more so after his death. Around that time, my Sister moved out, and it left just me to take care of my mother. We drew closer after that. Well, we had been close as a mother/son typically are. But that is when she introduced me to Oxycontin and other opioids. For the next 10 years, I battled addictions to pills. It was the worst time of my life. Five years in, I started a family. I unfortunately helped my wife get hooked on pills, as I had already been. So for the first 5 years, it was she and I on the hunt day in and day out, looking for our fix, while taking care of our two kids. All along, my mother was still getting prescribed her pain meds, from one doctor or another. And when she ran out early, she would buy more from her 'friends' she made over the years who also had an addiction with pills. Everyone we knew, had a prescription for pain meds in one form or another, or they knew someone else who did. It was an endless cycle. Then my life changed. It happened one morning. My wife, myself, and two kids, were living with my mother, in her 2 bedroom home (when your an addict, its hard to pay the bills). My wife and I had been up all night, partying with my mother. She had just received her refill of her Oxy's and Percs. But around 5 in the morning, she went to sleep. Intent on continuing to party, the wife and I walked a few blocks away to a dealer to get more pills. It had snowed that week, and everything was bright because of the lights bouncing off the nearby paper factory.

			When we returned, the kids, including my mother, was still asleep. Around 9am, everyone but my mother left, to go get some meds filled at a nearby pharmacy. When we returned, we found my mother in bed, still asleep, peaceful looking. Except she was no longer breathing. Four months later, my wife gave birth to our 3rd child. We were robbed of our money for the electric bill while she was in the hospital giving birth, by some 'friends' we partied with. When we discovered the money missing, I was so distraught. I didn't know what to do. Neither of us had any family to call, or to ask for help. Our only 'friends' were druggies like us, and wouldn't help even if they had the money to. That, was the moment in my life that I hit rock bottom. We had a newborn in the house. The electric was on disconnect notice due to be cut off in a couple days, and I wasn't working. We had no income. So, I went outside and I did the only thing I could do. I Prayed. As tears flowed down my cheeks, I begged God to forgive me for living such a debauch lifestyle. I had known better. I had wanted to change. So many times. But never had I felt such hopelessness as I did at that time. So I begged God, asking him to somehow help me get the electric paid, making a promise that if he did, I would quit everything. No more drugs. No more Pot. Even smoking cigarettes. And it was at that moment something popped into my head. Something I never would have thought of otherwise. "Ask Mr. Newman for help." Mr. Newman was our relater. After my mother passed, we had decided we needed to move. We didn't know where to, but we knew we had to leave if we were to get clean. So in that moment, when his name popped into my head, the tears stopped, and a weight was lifted from my shoulders. I knew what I had to do. And I did it. And just as God helped me out, I kept my promise. I stopped everything. I went to the doc and asked for a prescription for nicotine patches. When people called to let us know they had 'goodies', we blocked their number. It was very difficult, but I was successful. But, after moving, I still had a problem. In fact, it appears I just have an addictive personality. I made alcohol my new drug. It wasn't as bad as the pills, but it made family life troubling. Plus, I had enrolled into college to pursue my passion with technology. When I backed off the alcohol, I just felt..... unbalanced. Unfortunately, no matter when a person lives, temptation lives just down the street. My wife became friends with some of our new neighbors. They had kids that got on the bus nearby, so did we. It wasn't long until she discovered they had access to the pills. Then, it wasn't long until I discovered my wife was taking out loans for her habit. And again, I was put in the position I had spent 3 years avoiding. I was hooked. Again. I couldn't run this time. I wasn't going to upend our family and move to another city. It would just end up a repeat cycle. After a few months of using, my wife and I were able to stop. And we did so successfully for another 3 years. Then it happened again. We met someone, somewhere, somehow, that was into Oxy's and other pills, and it started again. But by the time I quit once more, I had been using enough that the withdraws had become almost unbearable.

			And that's when my wife and I went online to do research, and stumbled across Kratom. Since 2017, I have been taking Kratom, successfully, and safely. Since then, I came across multiple opportunities to use. But thankfully, I never succumbed to the temptation. Also, I no longer drink anymore. Because of Kratom, I'm able to live a normal life, free from these temptations that once haunted me. My family has grown closer. I no longer bounce job to job because of the withdraws I experienced. And I am now a productive citizen working in Information Technology, making a descent 6 figure income to support my family and I. That's not to say I never had anymore issues. As the Bible says at Ecclesiastes 9:11: "Time and unexpected events overtake us all." But because of Kratom, I've been clean from all drugs for 9 years now. My wife, found she no longer needed Kratom a few years back and simply stopped. She only takes it for moderate pain that comes and goes with an issue she has in her hand. Concerning myself, I've been on anti-depressants for 7 years now. When I quit Kratom a while back, I took a bad turn and it not only effected myself, but others.So, Just as I take my blood pressure meds, my Zoloft, my cholesterol, and my vitamins every morning, I take a dose of Kratom as well. And depending on my mood later in the day, I'll take little bit more. And over the years, through trial and error, I've found a healthy regime of herbs, vitamins, Kratom, and prescription medication, that really works for me. I'm not a bad person. I love my family, I love my neighbor, and I love God. I just have something going on in my brain's chemistry that's different than others. If you ban Kratom in Ohio, you will be breaking a wellness formula that I have fought for so many years to create for myself. Sure, there are others in the community that would rather misuse this product. We've seen the people looking to make money off getting people addicted to Kratom from the use of very high dosages of certain parts of Kratom. I say ban those people! Ban the misuse of Kratom, and those who would take advantage of others to make money in such a way! But when it comes to clean, unadulterated Kratom, in it's natural form, you would be causing much more harm than good if you were to ban it. This proposal comes off as a one-size-fits-all and the fact of the matter is there IS NO one-sizefits-all with Kratom. There are those who take it for it's legitimate properties in moderation. There are those who take it only when they are withdrawing from heroine, and there are those chase the high, any high, that will mix it with other drugs for illicit use. Please, don't punish those who take it for legitimate purposes in moderation. Doing so would hurt so many people, including myself and my family. Find a better way to regulate its use. There are other states that support the use of Kratom this way. Don't be one that makes decisions based on faulty data, scared citizens, and those who would rather push pharmacology medicine to make money, than have a person take something that is natural and safe. Thank you for reading my letter.

			Sincerely, Michael
Dayton	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	It would be a tragedy to make kratom schedule 1. Soooo many people will relapse and od if kratom is taken away. It saved my life!!!

Dayton	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please don't ban plain leaf kratom. A kratom consumer protection act is a better choice than a full ban . Kratom saved my life by helping me overcome an addiction to hard street drugs and pharmaceuticals that could have resulted in a fatal overdose. The alkoloids in plain leaf kratom do not cause respiratory depression like traditional opiates do . Making plain leaf kratom a form of natural harm reduction. Thanks for taking the time to read my comments
Seville	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Criminalizing kratom, a natural substance that has helped thousands of, maybe millions of Americans whom have been addicted to extremely dangerous/deadly prescription drugs would be reckless. If you stop the sale of kratom in Ohio, you will absolutely see an increase of fentanyl, and heroin usage and overdose deaths. We all know the pharmaceutical companies are pushing for this ban because so many Americans have been able to get away from their super addictive pain killers. I've used Kratom for 5 years now, and it's helped me with anxiety, body aches, and stress without impairing my ability to work 50-60 hour work weeks and maintain a regular lifestyle. Don't listen to drug company lobbyists when developing your own opinion, listen to the people that YOU represent. Listen to the people that this natural substance has helped. Listen to the people that your decision is directly impacting. This is America. The freest country on the planet. Stop taking away our freedoms in the name of trillion dollar corporations.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I've been alcohol and cocaine free for a little over 3 years, and the main thing that has stopped me from picking up the bottle again is kratom. I don't use it daily - it helps me socially and uplifts my mood, because I have anxiety in crowds. I'm able to comfortably use kratom in moderation, in a way I couldn't achieve with alcohol or cocaine. I'm able to take my life back because of kratom, and fear if it gets banned I could resort back to alcohol and cocaine.
Akron	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not ban a safe and life-saving plant based on disinformation. I know people who have greatly improved their quality of life by using Kratom and curbed their addictions and riddled symptoms from mental illnesses/disorders! Please!
Lancaster	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not let this ban go through! Kratom has been responsible for my sobriety and daily well being, and pain management. This smear campaign is not right, it's taking something very important from normal everyday people you encounter that you'd never pin as an addicts.
Coshocton	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Natural kratom should remain completely legal, while all synthetic forms should be banned. Natural kratom has helped me quit drinking alcohol; I have not had a drink, or even the urge to drink, since July 4th, 2025. Since quitting, I have also begun eating healthy and exercising, which has led to a much more positive lifestyle. Additionally, I was in a car accident in 2012 where I shattered my L3 and L4 vertebrae. I was on morphine and other illicit drugs for a long time before transitioning to Suboxone—which, in my opinion, is just as difficult to manage as other opioids. Kratom has helped me get off and stay off street drugs. Banning it outright will only create a black market and turn law-abiding citizens into criminals. Regulation is the correct path forward, not prohibition. Thank you for your time and consideration.

Beckett Ridge	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has genuinely saved my life. I was addicted to prescription pain killers for years, lost my finally and damaged my body because of them. Now I and free if that carnage and am living a normal life while still controlling my pain thanks to kratom! My family will all atest to the fact that it has been life changing. I appreciate the fact that there are extracts or other manipulations that need to be regulated, but the straight powder leave should only be restricted to adults 18 or over, not banned. Thanks for listening.
Brook Park	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	If kratom is banned, thousands of people like myself will be forced to return to using dangerous, highly addictive and destructive substances. Overdoses and suicides will rise. It is wrong to prevent access to a life saving plant like kratom. Natural kratom can not kill you. There is so much misinformation it's sad. Many people in ohio depend Kratom. Please help don't make there life worse. I Thought Plain kratom leaf was safe or was that a lie from the Governor? The facts are clear Kratom helps 10,000 ohioans everyday for pain and many other things. This so wrong by banning regular Kratom this be hurting a lot of people that use kratom responsibly.
Elyria	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom tea has been a god send to me. I struggle with some things in life and kratom makes life great and extremely manageable when I use kratom responsibly. I have chronic pain issues that led into a prescription and nsaid pain abuse that led to heroin and in 2009 I quit all of that with my tea. I use kratom in the traditional way and when I do i have no cravings for heroin my pain is manageable and my mood is lifted as well as my motivation to get work done. Im a licensed ohio plumber and father of 2 beautiful girls. Please dont take away my natural kratom. I understand the synthetic 7oh is extremely addictive but the plain leaf is not. I take breaks from it without problems.
Massillon	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I've been clean from opioids for 2 years with the help of kratom powder, the oh-7 is dangerous, I understand why banning them is the right thing to do, however kratom powder is completely different, similar to a cup of coffee. I'm a father, full time HVAC technician and kratom powder helped me get my life back together. I hope this comment gets to the people that need to see it. Kraton is safer than pharmaceutical Suboxone, which has major side effects when you stop taking Suboxone. Thanks for reading.
Maple Heights	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have seen Kratom work well for people otherwise were stuck In the opioid epidemic. They replaced opioids with natural Kratom and did very well with it . They were able to actually start functioning as a productive person and did well without the pain that comes with opioids. I also have recommended to friends who were trying to get sober from Alcohol abuse and have seen some very positive results as far as getting sober and staying sober. I highly recommend you allow it to stay available and urge more study on use for alcohol abuse . I my self have used it for about 8 years and haven’t had to use opioids which really did not help pain cycles. Thank you Charles Miller

Strongsville	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not schedule this. Not only does it help tons of people but its much better then other alternatives. People depend on this so they do not fall into old habits. Even state heads have asked Dewine to not do this.
Detroit	Michigan	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi My Name is Mark, and I'm for Senate Bill 299 the regulation of kratom (KCPA). which was introduced in October of 2025. NOT the Banning Kratom. I agree 100% with the ban of synthetics but NOT natural kratom. Natural Kratom and the synthetics are not the same and the synthetics like 7oh i believe should not be in the same classification as kratom. they are not alike 7oh might be in kratom leaf but at almost undetectale levels like .001% and at the level you would have to consume 100s of grams if not 1000s of grams to get what those synthetics have been made with, even the least potent ones. kratom has open pathways in my life and countless others. I myself can proudly say with the help of kratom I have turn my life around I was a major alcoholic and I drank all day everyday and developed helth issues because of my drink some not to serious but others serious but it didnt matter. I would keep drinking and drinking. until one day the my wife came up and said she had it. shes leaving and taking our kid. that punch hit me hard. it hit hard enough that I sought out help. and I wasnt going back rehab again for the 4 time and I saw a review that someone left online about this wonder plant called Kratom. the review was talking about a documentary THE LEAF OF FAITH. and I watched it and one of the reviews was about another alcoholic and it worked for him so I tried it and started off at low dose like they said and I ended up drinking my last drink December 29th 2022 and havent had a drink since and used kratom for cravings control more so now still a low dose. I takes any urge to drink away. I know I have read hundreds of reviews saying they used Kratom to get off harder drugs to at a pretty high rate and success of doing so. If you ban Kratom you take away that avenue for people like me or 1000s of others out there that are struggling and want to change there lives. Kratom has helped 1000s and the Leaf Of Faith helped me find my way back to My Lord and Savior Jesus. Kratom needs Regulation not a Ban Senate Bill 299

Indianapolis	Indiana	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am speaking as someone who has personally struggled with a serious opioid addiction. Kratom was not something I used to get high. It was something that helped me function, stay off opioids, and rebuild a normal life. It helped me get out of a dark place that could have easily ended very differently. Now the state is talking about banning the very thing that helped me and many others stay alive and productive. That feels deeply out of touch with reality. If kratom is banned, people like me do not magically get better. We do not suddenly stop needing support or relief. We are pushed back toward the same dangerous substances we worked so hard to escape or into unregulated black market products that are far riskier. It is hard to understand how banning a plant that helped me overcome addiction makes anyone safer. Alcohol is legal even though it destroys families every day. Prescription opioids were legal while they devastated communities. Yet something that helped me get off opioids is now being treated as if it is worse than both. If there are concerns about certain strong or synthetic products, then regulate those. Do not take away something that has helped people like me stay sober, hold jobs, and live normal lives. This proposal does not feel like it was written with real people in mind. It feels like a one size fits all decision that ignores lived experience and creates more harm than it prevents. Please do not take away something that helped save my life. Comment in Support of Proposed Rule 4729:9-1-01.2 (Mitragynine) While the proposed rule will have a direct economic impact on certain retailers, the absence of regulatory action does not eliminate cost, it merely shifts that cost downstream to other state systems that are far more expensive, reactive, and inefficient. When a psychoactive substance with documented dependence liability, withdrawal syndromes, and overdose risk remains legally available without chemical or dosage controls, the burden of regulation is transferred from the point of sale to emergency departments, courts, child-welfare agencies, employers, and law enforcement. Emergency medical treatment for intoxication, withdrawal, neonatal abstinence syndrome, and polysubstance overdose is borne by public hospitals and Medicaid. Family courts and child-protective services incur costs when parental impairment results in neglect proceedings. Employers and public agencies absorb productivity losses and workplace safety risks. Prosecutors and courts are left to address harm only after it occurs, rather than preventing it through upstream regulation. These downstream costs are diffuse, unpredictable, and significantly greater than the compliance costs associated with clear, prospective scheduling. Experience in other states demonstrates that partial or “regulatory” approaches have failed. States such as Utah and Georgia previously attempted to regulate kratom through age restrictions, labeling requirements, and alkaloid limits. Those frameworks did not prevent escalating adverse events, dependence, or the emergence of more potent derivatives, and both states are now reversing course with bipartisan support to pursue full scheduling or comprehensive bans. These reversals reflect a growing recognition that regulatory schemes relying on product form, marketing claims, or retail controls are not enforceable in practice and do not protect public health. It is also important to recognize the inevitability of federal action. Mitragynine and its derivatives are already

			identified by the DEA as drugs of concern, and the scientific and epidemiological record supporting scheduling continues to grow. Federal scheduling is not a question of “if,” but “when.” States that delay action assume additional costs associated with enforcement transitions, criminal prosecutions, and litigation once federal scheduling occurs. Early, state-level action minimizes disruption and allows for clearer guidance to businesses, law enforcement, and the public. Finally, from a fiscal perspective, the cost of prosecuting cases arising from harm caused by legally sold mitragynine products—overdose deaths, impaired driving, child endangerment, and workplace injury—far exceeds the cost of preventing those harms through clear chemical scheduling. Prosecuting preventable harm is among the most expensive and least effective uses of state resources. I would like to share my story with Kratom. I’ve been a user for 10 plus years. In those 10 years I have been on and off Kratom with no withdrawal symptoms. I use the powder leaf form, which is all I’ve ever used, to help with pain and mood. It also lets me get a good nights sleep. The pharmaceuticals I was put in left me groggy and not able to enjoy life. Since using the powder leaf Kratom, I’ve been able to engage with my family instead of being in a daze from pills given to me by my doctor. I have lost 45 lbs because Kratom has given me my life back. Just like alcohol, Kratom powder can be abused. The only side effects I have had from taking too much Kratom is blurred vision and it makes me sick to the point I vomit. With the pharmaceuticals I was given, my breathing rate slowed down. With Kratom I have been given the motivation to enjoy life. If you ban all Kratom products, the only option is to get pharmaceuticals from the doctor that have worse side effects than Kratom. Thank you for reading my story. Criminalizing Kratom is a very poor decision on pharmacy boards and law enforcement. Please gather the FACTS on this natural plant that helps millions with medical issues.Kratom is much safer with far less side effects than dangerous addictive drugs and narcotics.I know what I testify to. I went to a medical pain clinic ran by reputable physicians and nurses for 9 1/2 years. I was prescribed strong pain medication. The side effects were troublesome.I found out about Kratom gave it a try and in 6 weeks I cancelled my last appointment. It brings tears to my eyes that I didn’t know about this simple natural plant before my son suggested it. It’s not a miracle drug but it sure helps without all the side effects. It’s mind boggling to me to think that alcohol and cannabis is legal but Kratom should be a schedule 1 drug. Set up regulations and standards that distributers have to follow. I only get my Kratom from reputable sources with high standards. Unadulterated natural Kratom only. Thank you for considering my response. I hope common sence will prevail. No way do I want to go back to stronger medications

Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I've had alcohol and prescription dependency since I was 15 I'm now 50 I've taking powder kratom for 7 years it's helped me get in a great relationship with my kids and wife I've stopped all the old habits thanks to this plant please do not take this away from the good peaple of Ohio…Thank you Please do not take away kratom. It has literally saved my life. After a multitude of back procedures in my late twenties I became dependent of narcotics for pain. A friend introduced me to kratom and I was able to quit narcotics cold turkey and only consume plant matter now to manage my pain. Don't make me have to go back to a pain management specialist for pharmaceuticals. I was a alcoholic and other substance for many many years I started using kratom I stopped it all.Im a great part of the community now I'm a good husband and father kratom gave me my life back it's a miracle leaf. Please don't take this tree from us. Thank You
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	it's helped may people i know with alcoholism and would beneficial to keep it legal for struggling users stay away from relapse. Kratom helps me in a multitude of ways and making it illegal would be devastating. It has helped me to stay sober for the past 2 1/2 years. I developed alcoholic cirrhosis from self medicating with alcohol to manage my pain. Since finding out I had cirrhosis and spending two months in the hospital (part of that time being in a medically induced coma and also in the ICU) I started to consume Kratom to better manage my pain. Over the past 2 1/2 years my cirrhosis and overall health has drastically improved. I was initially informed I would need a liver transplant but now my liver is actually healing! If Kratom is so dangerous then why has my health drastically improved? I implore you all to take mine as well as others comments into serious consideration before making a decision that would negatively impact so many Ohioans lives. I agree that altered Kratom serving a dangerous potency should be banned, but properly regulated Kratom leaf with natural effects should stay legal. I was in menopause hell for 3 years with chronic internal pain and spent thousands trying every natural remedy for relief since no pharmaceuticals were helping. Kratom brought immediate relief and I was able to heal the inflammation in my body. I do agree "gas station" unregulated kratom should not be allowed.

Powell	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom is the ONLY thing that helped me clear my system off the poisons called narcotics. Due to an auto accident in which I was struck by a drunk driver I spent 12 years in pain management. Each time the pain was no longer controlled my physician would raise the dose or move me to a stronger medication. I was eventually prescribed fentanyl patches AND 30 mg OxyCodone tablets for breakthrough pain. When I finally found a treatment that appreciated my pain I found myself so addicted to these medications that I ended up with a script for methadone. I was living in hell. I considered ending my life. My doctors and therapists told me my neurology had changed and that I'd never be free of the meds. That I should see it like diabetes, I'd be on daily meds for the rest of my life. Then I found a kratom forum and I started to research. After carefully tapering myself down as far as I could go with the methadone I made the switch to kratom. The first month was hell because kratom is NOT A NARCOTIC! It did, however, lesson the withdrawal effects enough that I was able to make it through. The last time a took any form of narcotic into my body was January 25 2018. I've had a tendon reconstruction surgery since then and with a very understanding surgeon and anesthesiologist I was able to have absolutely no narcotics before during or after the procedure and did well. Kratom does not make you high, it might give you a little boost like a good coffee. Will you make coffee illegal next? If you're truly concerned for our health and not the pocketbook of big pharmaceutical companies then m go after tobacco instead. Prove to us your concern is for our health. Otherwise, please leave our natural medications alone. In case it matters to you I'm a Certified Surgical Technologist with 25 years continuous experience. I am well respected in the medical community. My coworkers not only know my past but were there with me so they know I also maintained my professional standing through the entire ordeal but they will all tell you I am a different person now. I've been accused of aging backwards. Not a bad accusation I think! Kratom can be a life saver. It certainly was for me.
North Olmsted	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Banning a natural, safe alternative to opioids would be a colossal mistake and have real, destructive effects on many people's lives.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	This ban needs to be stopped. This product helps so many people. You will be causing great harm to many people if Kratom and other products made from it are banned. You will force people to turn to dangerous drugs to replace it.
Norwalk	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has saved my life.. I dont want to be on suboxone or methadone I'd rather take a natural plant THAT DOES NOT GET YOU HIGH! 7OH had to go leave natural kratom ALONE

Findlay	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom saved my life from a 25 year addiction to alcohol that ended in drinking two 5ths of vodka a day and shaking uncontrollably. I previously tried rehab and failed 3 times and then I found kratom which took away the cravings and I have now been sober 11 years. Kratom is completely safe for me because it does not cause respiratory depression or slowed breathing at all what so ever like opiates that people over dose on because of slowed breathing. I know this because even some simple sleep medication and other medicines have in the past for me but kratom not at all. Also there has been studies showing this that I'm aware of. Kratom is in the coffee family and like coffee with just a bit more punch it does not get ya high even in large amounts. It's just a mood lift and makes me happy. 7 OH is not kratom and banning it was the right decision but not natural kratom. Because of kratom I became a better father,son and brother. Banning kratom will have people either turning to the black market or going back to dangerous drugs since it has helped hundreds of thousands recover and they will no longer know what to do here in the middle of a opiate crisis. I'm terrified of it being banned and craving alcohol again because it only takes one slip up. Overall kratom has saved thousands and thousands of lives including my own so I beg you please PLEASE do not ban the natural tree leaf in the coffee family known as kratom. If fatalities and addiction is the concern this would be very counter productive and a huge mistake. Regulation and the kratom consumer protection act is the best option here. I have no clue what I will do with a ban other than cry for a while and watch the opiod use/fatality statistics go through the roof. If you read this thank you so much for your time and I hope you have a great day. Thank you for your consideration.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I'm a recovering addict from opioid pain medication. I choose not to use opiates as I'm afraid of what may happen. Kraton actually blocks the effects of opiates anyhow. Kraton in low doses helps me manage chronic migraines without the worry of becoming a full blown drug addict again.
Jackson	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have used hole leaf Kratom for five years to help me stay clean. I was an addict since I was 16 years old and I am now 38. Ever since I have used hole leaf Kratom I have not touched another substance and I have been clean for five years. I have a thriving family and I am doing the best I have ever done. Banning hole leaf Kratom will definitely affect my recovery. I have five kids of my own that count on me for support as well as my wife. I have two jobs and I help the community every week. Please do not ban hole leaf Kratom. Thank you for your consideration, not all Kratom is equal, please consider the ramifications of what Banning the substance will do to people that turned their lives around because of this leaf. I could never get myself clean into. I tried this and since then I'll never look back. Thank you
Lakewood	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Keep kratom safe and legal - it is beneficial for those in recovery from drugs and alcohol, including myself.

Olmsted Falls	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, I'm writing to urge you NOT to ban kratom products, especially safe kratom powder. I've been safely using kratom powder for the last 4 years. It helps immensely with some mental health issues that I suffer from. It also helped me stop abusing alcohol, and now I don't drink at all. The science shows that kratom is safe, even at dosages that are, quite frankly, too high. Kratom powder does not cause deaths like the media likes to portray. It has a ceiling effect, so taking too much can cause vomiting. Please do the research, and see that kratom is safe. You'd be taking away something from people that helps in their everyday lives. Andrew G.
Berea	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has saved my sanity and saved my life. I would probably be dead from an opiate overdose if I had not found Kratom. It is a natural plant that fills the need of people with addictive personalities yet I do not find it to be addicting! There is no withdrawl. I use it to boost my mood in a safe way, similar to caffeine. This is not a dangerous drug. It is also much safer than alcohol which is legal. Please reconsider this ban.
North Olmsted	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am deeply concerned by Ohio's attempt to ban plain-leaf kratom. This decision will hurt real people.. not statistics, not abstractions, but parents, workers, veterans, and individuals who are simply trying to live normal lives without relying on dangerous substances. For many, kratom is the reason they were able to walk away from pharmaceutical opioids, survive withdrawal, manage chronic pain, or stop drinking alcohol. Taking away legal access does not make these struggles disappear. It pushes people back toward substances that are far more dangerous, addictive, and genuinely deadly. Banning natural kratom leaf will not stop its use, it will force it into the shadows. When safe, legal options disappear, black markets take their place. That is when people get hurt. That is when adulterated products and unnecessary deaths become more likely. Kratom is not a pharmaceutical opioid. It does not behave like one, and it does not carry the same lethal risks. There have been no confirmed fatalities caused by pure, unadulterated kratom leaf alone. Every kratom related death cited has involved other substances. Punishing responsible adults for those cases is unjust and dangerous. Ohio has the opportunity to protect its citizens by choosing regulation, testing, and transparency instead of prohibition. Please do not take away one of the few safer alternatives people have. Many lives will be affected by this decision, and some may be tragically lost because of it.

Greensburg	Indiana	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am currently on one of the ONLY forms of MAT (Medication Assisted Treatment), which MAT's for those who aren't familiar are treatments that those individuals who wish to try things like suboxone and other medical treatments like some of the worse and lesser accepted ones like methadone treatment which is awful to go through and Suboxone is the treatment I chose but downfalls are it rots my teeth, kills my sex drive, and even makes normal bowel movements a thing of the past which can disrupt all types of other things throughout the day and overall the suboxone treatment may very well work, BUT it has just as many negative side effects as humanly possible and at the rate im going id imagine it will have rotted out my nearly perfect teeth that I have as of now going on 8 years of being prescribed suboxone I can say that Kratom IS THE ANSWER TO THIS ISSUE!! Id like to end my statement by saying that I would never lie and I would GLADLY put my hand on the Bible and swear that this testimony I gave just now was as genuine, honest, and moral as I could possibly manage. Thank you very much for your time and if there are any individuals who you can think of that you may be hurting please consider my testimony because this will hurt/hinder my chances at normalcy throughout my YEARS of sobriety in society.
Whitehall	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	The rule would hurt many people i have taken kratom for six years and held a job became a manager. If this isnt available anymore I am afraid of relapse ive had no known issues taking this. Please reconsider not making this available.
Whitehall	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am against the proposed rule .it will cause alot of people to go back to hard drugs and i think it will cause issues in other areas as well .it will cut the income of alot of people also .I'm not sure why it's up for a vote actually .I also noticed that ohio is trying to ban flavored vapes and thc drinks as well .I think you should work on banning fentanal
Whitehall	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	When I was a teenager I became addicted to pretty much any opioid and opiates I could get my hands on this lasted for three years I couldn’t afford rehab or any kind of treatment but natural kratom powder is what I used to get clean I haven’t taken another pill for 10 years while I agree the synthetic stuff like 7-OH should be banned I don’t believe natural kratom should be taken away from people that want to get clean but don’t have other options available to them if I didn’t have access to kratom I’m not sure that I would have straightened my life out and rejoined society as a productive member

Athens	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am writing to urge the BOP to reject scheduling kratom. Kratom is a plant that has changed the lives of millions of people across the United States for the better. As an Ohioan, I am truly disgusted with Dewines decision to push this, and the BOP to entertain the idea based off some of the weakest data I have ever seen. If any board members read this, please understand, those statistics aren't fooling anyone. Kratom is NOT responsible for the purported overdose deaths listed. That must be said clearly. If Dewine and the BOP care about Ohio, they won't ban kratom. If kratom is banned, prepare for overdoses to skyrocket. Prepare for your average everyday American to seek alternative substances to address their pain. Ohioans and Americans are done with relying on doctors and hospitals to manage pain, when the medications being provided are far more addictive and dangerous than kratom. Kratom has played a huge role in my life, and helped me to stay sober from dangerous substances like alcohol, opiates, stimulants, etc. I have lived a meaningful, successful, productive life while using kratom. Does that mean nothing? It is perfectly legal to drink myself to oblivion i suppose, but without a doubt my life would fall apart. Why are we not banning alcohol? It has destroyed the lives of millions. Banning kratom will damage the lives of hundreds of thousands of Ohioans. It will likely be a death sentence for many, or at the very least, it will condemn good people to a life of pain and suffering. Please consider the decision you are making. Please ask yourselves if Ohio is actively seeking another opioid crisis. Regulation is the answer.
Philadelphia	Pennsylvania	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Having battled with opioid addiction from pain medication for back problems. Taking narcotic medications almost ruined my life and my family. By finding natural Kratom I was able to get off all prescription narcotics. With this wonderful plant. My life has never been better. I have my family back I can enjoy time with my family and not have to Worry about a doctors prescription to do so. All because of a plant. To make kratom illegal would be a horrible mistake and I feel ruin the lives of the people that rely on this plant. I have been using kratom for 8 years. I really hope and pray that I can continue to use kratom and not have to go back to the awful narcotics that did some much damage to me physically and mentally. As well as effected my family.
Indianapolis	Indiana	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom is no more than a cousin of a coffee plant and maybe ban coffee next? Because Kratom does NOT get people high. It's gives the slightest euphoria comparable to coffee. You have to mix substances in order to achieve a high and it's likely the other substances. Not Kratom. Chemical alternatives of this naturally occurring substance should be banned. Natural Kratom has kept heroin addicts clean. Pill addicts clean only because jt binds to the same receptors. It helps people with anxiety, depression and aches and pains. Stop taking lifelines away from those who need it! They will have no reason to live anymore since the one thing that helps them is now being considered for a ban!!! Clearly you have no real knowledge on how this actually works or you would not consider banning natural Kratom.

Indianapolis	Indiana	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I was being prescribed opioids for an old injury years ago. I became addicted. The only thing that helped me stop using was kratom. I've been using for 10 years. This would be very similar to making vape devices illegal so people must return to cigarettes. Just your typical government misstep. It's unbelievable how incompetent our state government can be. Please reconsider. You will kill people.
Detroit	Michigan	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Plain leaf powder saved my life and continues to help me with pain management. I am a recovering heroin addict. In order to stop without taking on an addiction nearly as bad (the drugs provided by rehab centers), I opted to try kratom. This allowed me to stop using and begin rebuilding my life. My family is proud of me. I am a loved family member that is trusted and accepted. I am respected at work and have been promoted to general manager. Besides the fact that plain leaf powder, which is extemely mild in comparison to heroin or other drugs like prescription pain killers, helps me manage pain from a bulging disc in my back. I absolutely do not want to have to use anything but kratom. It has been demonized simply because people dont know what it is or that those that have died had other drugs in there system Besides kratom. Alcohol is infinitely worse than kratom and it's legal. Kratom should be allowed to be used by adults 21 years or older. I cannot stress enough how it has saved my life. Heroin is so dangerous. Without kratom I would likely be dead. If this is banned others going down that path will not have a safe natural option. Please do not ban this. This has saved so many people's lives. Even the vice President of the United States agrees with me. And he is making huge leaps and bounds in terms of health education. Let's trust this man. Let's trust those like me that advocate for kratoms legality.
Detroit	Michigan	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not ban Kratom. I was a heroin addict for 10 years. Doing all the bad things to people I love and this city. Homeless, broken, hopeless. I didn't care to live. I'm coming up on 10 years clean from the devils blood. I own a home, help others, help the community and many other positive things. I even love myself today. Ive been to 100s of inpatient and outpatient rehabs. Nothing worked. I've been taking Kratom. It brought be back to life. You can't die from it. It doesn't suck your soul. I treat it like coffee. I only consume the pure Kratom. Not the junk you find at gas stations.
Detroit	Michigan	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Banning natural Kratom leaf is detrimental to the people who use this natural leaf and the business owners who sell it. Please let the tax payers decide where they want to spend their hard earned money on. It's the people choice to take krantom or not take it. It's an amazing alternative for people who have pain, depression, and people who may be in withdrawal from real opiates can have a safe way to transition off a way more dangerous drug. KEEP KRATOM ON THE SHELVES.

Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	We as advocates want the synthetic kratom banned, not the natural leaf. This ruling is wrong and unjust. Why not have common sense laws instead of straight prohibition? Teens in this state are way more focused on vaping, and drinking alcohol why not ban those? Natural Kratom has saved my life 8 years ago as a ex heroin addict. Nothing else seemed to work until I discovered this natural plant. I guess it's ok in this state to eat fast food, drink body destroying energy drinks, and vape my Chinese vape juice, but God forbid I take a natural, safe leaf created straight from the good lords hands. Kratom has helped keep me sober for over 10 years, helped me build a life and family, I own multiple businesses and I take powdered kratom daily multiple times a day. If you were to criminalize it millions of people using it for pain management or substance abuse problems would be pushed to hard drugs like methadone and Suboxone or actual opiates I worked in a drug rehab for years I went for heroin and crack which caused me to steal and do other crimes but I felt bad for the people coming off of Suboxone and methadone they looked worse than I did I don't ever want to be forced onto that stuff they were sick for months I mean puking shaking diarrhea for months. So long story short kratom does make u grumpy like a cigarette if u don't have one but it doesn't make u full blown dope sick in my opinion it's legal state keeps crime down and generates more tax revenue than people imagine. Also basically all of the people who have "overdosed" from kratom also have other substances in their system, it's a abuse problem not purely kratom but some govt agencies like to lie, so why don't we eliminate the real drugs and then we can eliminate all our naturally grown healthier alternatives if there was no opiates or heroin I wouldn't crave them. Once u handle the big fish turn back around for the small frys if u remove healthy alternatives before u remove problems u push people back to problems. Thanks for your time

Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	As an Afghanistan veteran who has experienced homelessness, and currently helps homeless and I am asking clearly and urgently that natural kratom be kept legal. Many veterans like myself live with chronic pain, PTSD, and the long-term effects of our service. For those of us who are unhoused or struggling to regain stability, access to consistent medical care is often limited or nonexistent. In that reality, natural kratom has been one of the few tools available to help manage pain, anxiety, and withdrawal without relying on alcohol, street drugs, or medications that are difficult to obtain and often come with serious side effects. This is not theoretical. For homeless veterans, losing access to kratom would not mean “getting treatment instead.” It would mean increased suffering, higher risk of relapse, and greater likelihood of turning to far more dangerous substances. A ban would not protect us it would actively make our situation worse. Veterans are often thanked for their service, but too many are ignored when policy decisions directly affect their survival. Prohibition does not account for lived reality. It removes a harm-reduction option that many veterans depend on to stay functional, safe, and alive. Reasonable regulation is acceptable. An outright ban is not. Keeping natural kratom legal gives vulnerable people including homeless veterans a chance to manage their health, regain stability, and move forward. I ask you to listen to those of us who live with the consequences of these decisions every day. Please do not take away one of the few supports that is actually helping. When I talk to other homeless veterans. Lot of them see traqn mixed in can’t stop the dooe sick: how can he travel be under doctor car when his arms legs rotting off. Doctor only treat legs can go in hospital because he has bad withdraws hospital won’t deal with him. So veterans are dying off and we’re taking away something that helps, I do not trust your motive everybody knows with COVID-19. The medical establishment is corrupt bureaucrats who do not have the best interests of Ohioans

Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Life wasn't always a series of choices; for a long time, it was just a series of survival tactics. Growing up with nothing makes the "fast life" look like the only life. But that life eventually leads to one place: a 6x9 cell. In prison, you'd think the drugs would stop, but they don't. They just get more expensive and more dangerous. I spent years behind those walls, battling a dependency on whatever could numb the reality of being locked away. When I finally walked out those gates, I had a trash bag of belongings and a body that didn't know how to function without a chemical crutch. Coming home is harder than staying in. You have a record that keeps you from good jobs, no money in your pocket, and the "itch" for the old life constantly whispering in your ear. I was terrified of going back to the pills or the street stuff I knew if I did, I'd either end up back in a jumpsuit or in a pine box.I was desperate for a middle ground. I needed something to manage the crushing anxiety and the physical pain that years of hard living had left in my bones, but I couldn't go back to the things that stole my freedom. Natural kratom It didn't make me "high" like the street drugs did. Instead, it just made the "static" in my body go quiet. Stopping the withdraw The restless legs and the bone-deep aches finally stopped. For the first time in a decade, I felt level. I could wake up, drink my tea, and go to a job interview without my hands shaking or my mind racing toward the next score. It acted as a bridge. It gave me the stability to start building a real life to save money, to mend relationships with my family, and to stay away from the people and places that landed me in prison. Today, I'm not that person in the mugshot anymore. I'm a worker, a son, and a man who is present in his own life. Kratom didn't do the work for me I still had to show up every day but it gave me the legs to stand on so I could do the work. It gave me my life back when I thought it was gone for good. I don't want my other addicts on Suboxone. I know it doesn't go along with your bottom line. Everyone seems to this as a money grab, do the right thing listen to the people and lawmarkers and keep natural kratom legal. More affect your credibility that you go down this route and lose in the oversight committee and you'll be forever tarnished that ruined your Reputation

Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am an Addiction Specialist who has spent years on the front lines of the overdose crisis, I am writing to you with a sense of urgent professional duty. My perspective is shaped by clinical data, but also by the lived experiences of my patients many of whom are survivors of the carceral system and the cycle of poverty. I am writing to advocate for the continued legality and sensible regulation of natural kratom. In my practice, I have seen the limitations of conventional medicine. While Medication-Assisted Treatment (MAT) is a vital tool, it is not a one-size-fits-all solution. For individuals transitioning out of prison where illicit drug use is rampant and support is scarce the return to society is a period of extreme vulnerability. Many of my patients have used kratom as a "success bridge." It provides the stability needed to avoid a return to lethal street opioids without the heavy stigma or bureaucratic hurdles of some clinical programs. The people are on our side. Public comment periods held by the DEA and the WHO have seen an unprecedented outpouring of support from millions of Americans. These aren't just statistics; these are veterans, teachers, and formerly incarcerated individuals who are contributing to their communities because they have found a natural way to manage their recovery. Lawmakers are also on our side. We are seeing a growing, bipartisan wave of support for the Kratom Consumer Protection Act (KCPA). Legislators recognize that prohibition is a failed experiment that only empowers the black market. Instead, they are pushing for laws that ensure product purity, truth-in-labeling, and age restrictions. A sin tax. They understand that by keeping kratom legal and regulated, and taxing kratom at higher levels. we prevent the "substitution effect" where users are forced back onto fentanyl when their safe alternatives are banned. And heavy regulatory Civil liability penalties will be added to the bill. as a specialist, I see kratom as a tool for Harm Reduction. In a country losing over 100,000 souls a year to overdoses, we cannot afford to remove a botanical that is keeping people alive, employed, and out of a cell. I urge your board to support science-based policy over reactionary bans. Let us follow the lead of the lawmakers and the millions of citizens who recognize that kratom is a part of the solution to our national crisis.

Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Recovery is not a single road. It never has been. What works for one person may not work for another and that truth is something every honest recovery organization eventually learns. Kratom part of many recovery stories, even if it's rarely discussed openly. That plant is kratom. Kratom some people have real benefits. It has been a bridge. A bridge away from chaos. A bridge toward stability. A bridge toward staying alive long enough to heal. In our organization, we've seen individuals who struggled for years with relapse after relapse. People who tried abstinence-only approaches, medication-assisted treatment, therapy, faith, willpower sometimes all of it. And still, the pull of opioids or alcohol was overwhelming. For some of those people, kratom became a harm-reduction tool. Not a high. Not an escape. A tool. They used it to manage cravings. They used it to dull withdrawal symptoms enough to go to work. They used it to show up for their kids. They used it to stay out of the emergency room and out of the grave. And here's the part that matters most: They stayed engaged in recovery. They attended meetings. They rebuilt relationships. They went to counseling. They stopped stealing, lying, disappearing. They became present again. We don't pretend kratom is risk-free. Nothing in recovery is. We talk openly about dependence, dosage, responsibility, and honesty. We emphasize education, moderation, and accountability. But we also refuse to ignore outcomes. If someone is no longer injecting fentanyl, no longer overdosing, no longer destroying their life and they are stable, functioning, and moving forward—then we have a moral obligation to listen instead of judge. Recovery is about reducing harm and increasing life. For decades, people in recovery have used coffee, nicotine, antidepressants, methadone, buprenorphine tools that were once criticized or misunderstood. Kratom belongs in that same conversation, not in the shadows. This is not about promoting a substance. It's about honoring autonomy, dignity, and real-world recovery. We believe people deserve accurate information, not fear. Support, not shame. Options, not ultimatums. And above all, we believe that staying alive is the first requirement for recovery. If kratom has helped some of our members take that first step then their stories deserve respect, not silence. I live with chronic pain and is struggling every day to remain present, functional, and dependable for my family. I am asking you plainly: please do not ban natural kratom. Like many parents, I have responsibilities that do not pause for pain children to care for, work to do, and a household to manage. Traditional pain medications were either ineffective for me or came with side effects that made it impossible to be the mother my children deserve. Natural kratom has helped me manage my pain while staying clear-headed, engaged, and emotionally available. This is not about recreation or abuse. This is about survival and stability. Taking kratom away does not create better health outcomes for mothers like me it removes one of the few tools that allows us to function without turning to stronger, riskier substances. If someone misuses a substance or commits a crime, there are already laws to address that behavior. Punishing responsible parents and patients for the actions of others is not public health it is overreach. A ban would hurt families, not protect them.i worry that decisions like this are being made without truly listening to the people

			who will live with the consequences. Parents, caregivers, and individuals in pain are not statistics. We are people doing our best with limited options. Reasonable regulation makes sense. An outright ban does not. Please consider the real families who depend on access to natural kratom to stay healthy, employed, and present in their children's lives. I am a criminal defense attorney in Columbus with firsthand experience in how prohibition-driven policies actually function in practice. From a legal and public safety standpoint, banning natural kratom is a serious mistake. We already have sufficient laws to address bad actors. If a product is adulterated, misbranded, sold to minors, or involved in criminal conduct, existing statutes allow for enforcement and prosecution. If an individual commits a crime while under the influence of any substance, the criminal code already provides accountability. There is no legal gap here that justifies a blanket ban. What prohibition does accomplish is the unnecessary criminalization of otherwise law-abiding adults, the expansion of enforcement discretion, and the creation of new revenue streams through fines, seizures, prosecutions, and administrative enforcement. As someone who works daily in the criminal justice system, I can say plainly: this does not function as public health policy. It functions as system expansion. Public health interventions reduce harm. Prohibition increases it by pushing products into unregulated markets, eliminating transparency, and diverting limited resources away from serious crimes. This is not theory; it is the predictable outcome of every similar policy I have litigated around. When policy decisions are driven more by bureaucratic incentives than evidence-based outcomes, the result is overreach, selective enforcement, and erosion of public trust. Agencies gain power and funding, while communities absorb the damage. Calling this public health does not make it so. If the true goal is safety, regulation is the obvious answer. If the goal is enforcement growth and administrative control, prohibition achieves that but at the expense of fairness, effectiveness, and credibility. From both a legal and practical standpoint, banning natural kratom is unnecessary, ineffective, and harmful. I strongly urge you to reject prohibition and rely instead on existing law and reasonable regulation.

Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	For years, I struggled with substance abuse. I tried to quit more times than I can count, and each relapse pushed me further into despair. Traditional paths didn't work for me, and I was running out of options. I wasn't looking to get high I was looking to survive. When I found natural kratom, it became a tool that helped me step away from far more dangerous substances. It reduced my cravings, helped me function, and gave me the stability I needed to rebuild my life. Because of kratom, I was able to hold a job, repair relationships, and regain a sense of dignity and control. Kratom was not a miracle or a cure. It was a harm-reduction tool one that helped me choose a safer path when the alternative was relapse, overdose, or death. Used responsibly, it gave me time and space to heal. Today, I am alive, present, and moving forward. I truly believe that without natural kratom, I might not be here to tell this story. For people like me, it can be the difference between life and death. Everyone deserves access to tools that help them survive and recover. Kratom was that tool for me. Keep natural kratom level with beer cones educating
Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, I am someone that lives in Ohio that would be greatly affected by a ban on kratom. It has helped me immensely in my life first with getting off a destructive alcohol addiction, then with anxiety. New York just passed a KCPA bill that regulates but keeps kratom legal for those that rely on it to help their lives in that state, I'm hoping the Board of Pharmacy will listen to those like me that would have their lives negatively affected in a great way by going forward with a ban instead of regulation. Thank you for listening
Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am tired of being quiet while my life and the lives of thousands of other mothers is treated like a line item on a bureaucrat's balance sheet. I am not a criminal. I am a tax-paying citizen, a mother, and a productive member of my community. I use natural kratom responsibly to manage my life and stay away from the "hard" substances that have decimated our state. The Harsh Reality You Are Ignoring You are sitting in an office making decisions that will turn law-abiding parents into felons overnight. Here is what you need to understand: Corporate Greed over Human Life: It is transparent and disgusting that you would rather see a mother in handcuffs than allow a natural plant to remain legal. We see exactly what this is: clearing the way for synthetic alternatives that line the pockets of the well-connected. Targeting Families: When you criminalize me, you aren't "cleaning up the streets." You are taking a mother away from her children. You are creating a "criminal" where none existed, solely because I choose a natural path for my health. Flooding the Fentanyl Market: By banning natural kratom, you are effectively handing me and everyone like me a death sentence. You are forcing people toward the street-level synthetic fentanyl that is already killing our neighbors. "Is the goal to keep Ohioans safe, or is it to ensure the right people get rich from the 'justice' system?" My Message to the Bureaucracy I refuse to believe your reefer maddness to kratom and end your game of natural Kratom prohibition. You are about to create a massive spike in crime and overdoses, and you will have the blood of Ohioans on your hands. We don't need more cases in our courts. We don't need more parents in our jails. We need you to step out of our medicine cabinets and stop trying to profit off the destruction of our families. Do your jobs. Protect the people, not the profits.

Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Natural kratom saved my life. I don't want to be put on fda medication. I know the board only cares about what fills the pockets for themself rightful so even said it on a local interview everyone see this for what it is a money grab. It's sick this will hurt so many people wow, you guys are corrupt bureaucrats. Lawmarkers want sb299 not this. Reefer madness all over again. Leave natural kratom alone. I was addicted to fentanyl. My life was spiraling out of control I couldn't work, I was barely able to care for my child, and my body was deteriorating. My legs were covered in sores and wounds from infections and self-neglect, a constant reminder of how far I had fallen. I didn't know if I would survive. Then I discovered natural kratom. It saved my life. It helped me manage my withdrawal symptoms, regain control over my body, and slowly heal from the physical and emotional damage that fentanyl had caused. Kratom allowed me to take the first real steps toward recovery, to get back to being a father, and to start rebuilding my life. Banning kratom would take away one of the few tools that gave me a chance at life. It's not just a supplement; for me, it was the difference between life and death. I urge lawmakers and regulators to consider the real people behind these decisions people like me, fighting every day to survive and care for our families. Kratom saved my life. Please do not take it away.
Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I kindly ask the board to keep natural kratom legal. Thank you 😊 Kratom is a natural plant used safely by millions of Americans for decades. Unlike many synthetic opioids, natural kratom has a long history of traditional use, and when used responsibly, it provides pain relief, energy support, and assistance with managing stress or withdrawal symptoms without the high risk of fatal overdose associated with many prescription or illicit drugs. Keeping natural kratom legal allows for safe, regulated access while encouraging research into its benefits and risks. Prohibition does not eliminate demand; it only pushes people toward unsafe alternatives. By keeping it legal, we can support harm reduction, informed choice, and scientific study rather than driving kratom users into the shadows. You hurt so many people with a ban

Worthington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	To Whom It May Concern, I am writing to express deep concern regarding any effort to ban kratom outright—especially if done suddenly and without thoughtful consideration of the real-world consequences for American citizens. An overnight ban would instantly turn thousands of law-abiding Americans into criminals for choosing a plant-based option they rely on for their well-being. This represents a serious infringement on our fundamental right as Americans to make informed choices about our own bodies and our own herbal and plant-based wellness practices. Pure, unadulterated kratom has been traditionally used for thousands of years in Southeast Asia. When kept natural and unaltered, it has a long-standing history of responsible use. Today, many Americans rely on kratom as a critical harm-reduction tool—particularly individuals who have used it to step away from far more dangerous substances and regain control of their lives. Banning the kratom leaf itself ignores both scientific evidence and the lived experiences of countless individuals who credit this plant with saving their lives. Eliminating access to kratom risks pushing many people back into active addiction, increasing harm rather than preventing it. I respectfully urge you to follow the existing scientific research and data surrounding kratom, rather than fear-based or misleading narratives. Extensive, science-backed information, peer-reviewed research, and consumer education resources are available through the American Kratom Association at www.americankratomassociation.org, as well as www.kratom.org, which provides detailed summaries of current research, safety data, and regulatory recommendations. Please consider regulation, quality control standards, and consumer education over prohibition. A thoughtful, science-based approach protects public health without stripping Americans of their freedom or criminalizing responsible personal choices. Thank you for your time and consideration. Respectfully, Tracey
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi. Kratom helped me get off opiates and Xanax which was prescribed to me at age 30 I am 44. When your doctors had me pilled up I was homeless and jobless. Im am greatful for kratom. Its crazy to keep that you are trying to take it away. Im sorry but you politicians are very out of touch with society. Please leave kratom powder alone and ban beer and whiskey.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I fully believe that natural kratom products (not extracts or synthetics) should be available to adults with reasonable warning labels. It is absurd to let alcohol and tobacco companies sell lethal products while criminalizing kratom, which helps many people stay sober and manage their own conditions without undue dependence.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	To whom it may concern. I feel that making the natural form of kratom illegal is a mistake. The extracts and synthetic derivatives are the dangerous substances. I myself am not in recovery but made the choice a few years ago to be sober in support of my wife. We are social people and discovered Sacred Waters kava bar in Lakewood. It was the very first one and it has created an amazing community of people both in recovery and people just looking for a sober social scene. Kratom and Kava allow us to relax and have conversations without being intoxicated or dealing with the

			aftereffects of alcohol. Please reconsider banning this product in its natural state the way it has been used for centuries.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom keeps me off heroin
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	To Whom It May Concern, Thank you for taking the time to review my comment. I am writing to share my concern regarding the proposal to classify all kratom products as Schedule I substances. Several years ago, while walking through my neighborhood in Lakewood, Ohio, a community I have proudly called home for over twenty years, I noticed a newly opened shop that served ethnobotanical teas and coffee. I was intrigued and curious. At that time, I had recently made a personal decision to eliminate alcohol from my life in order to improve my physical and mental health. As an avid yogi, cyclist, and overall health enthusiast, I recognized that alcohol was no longer aligned with my well-being. Legal, responsibly sourced kratom has been a positive and beneficial alternative in my life and in my community. Spaces that offer kratom tea and similar beverages provide a social environment without the risks commonly associated with alcohol consumption. There are no intoxicated patrons, no aggressive behavior, and no fear of impaired driving or harm to others. Instead, these spaces foster meaningful conversation, live music, artistic expression, and genuine connection. The individuals who gather in these environments come from all walks of life-finance professionals, bankers, nurses, therapists, attorneys, tradespeople, college students, and more. We are simply people seeking community and connection. Establishments such as Sacred Waters have helped create inclusive, supportive spaces where people network, share resources, and support one another. In conversations with friends in Florida, I have learned that this sense of community is a common and positive outcome of kratom and kava bars. They offer safe, social alternatives that promote connection rather than harm. I would also like to note that many kratom tea consumers support reasonable regulation, including restrictions on products such as 7-hydroxymitragynine (7-OH). Rather than an outright ban, many of us advocate for education, safety standards, and regulated environments where kratom tea can be consumed responsibly. I respectfully urge the Ohio Board of Pharmacy to consider the real-world community benefits of safe, legal kratom tea access and to pursue thoughtful regulation rather than Schedule I classification. Thank you again for your time and consideration.

Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom is most obviously a psychoactive substance, if you dont research a "supplement " or a product that you dont know about, it is entirely your responsibility to understand what you use beforehand, kratom as well as doesnt have effects "like heroin " whatsoever, kratom is not even a full agonist of the receptor, as well as again if you're taking medications it is entirely your responsibility to research what can potentially interact with that medication, kratom is a natural plant with mild alkaloids, not a synthetic deadly narcotic, many people who have stopped usage of harder substances use it, and it works for them, the majority of people shouldnt be punished for what the minority of people dont understand the consequences of, if kratom is banned, there will be a large increase in opioid overdoses to people obtaining illegaly if they dont have access 7-hydroxymitragynine has already been banned and opioid overdose rates will already be increasing from that aswell
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have used kratom for approximately ten years, and in my personal experience it has been a positive and life-stabilizing substance. Before discovering kratom, I struggled with addiction to prescription opioids and made several unsuccessful attempts to quit. When those medications were unavailable, I turned to far more dangerous substances. After finding kratom, I was able to stop using all other substances. It significantly reduced withdrawal symptoms and cravings, allowing me to maintain stability and avoid relapse. I experience minimal effects when not using kratom—nothing comparable to the severe withdrawal I experienced with other substances. Kratom has also been affordable and easy to regulate. I once spent over $1,200 per month on substances; today, I spend approximately $50–$80 per month. Over ten years of use, I have experienced no negative effects and have been able to live and function normally in society. I know others with similar experiences. If kratom were made illegal or difficult to access, some individuals could be pushed back toward far more dangerous substances. For many people, kratom serves as an important harm-reduction tool, and removing access could have serious unintended consequences.
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom, in its whole leaf form saved my life. I was a non contributing member of society for years, due to drug addiction. It saved my life, my marriage, everything. Im healthy, compete in Strongman, on zero medication after 10 years of daily use. This is nothing but overreach from pharmaceutical companies. You take ot away, many people will be hurt by the policy.

Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have been a kratom user for more than 9 years. It has single handedly kept me away from alcohol as well as harmful drugs.Before I found this miracle plant I was spiraling down in life I was using anything I could get my hands on. This plant has done more good for my life than any pharmacy or dr has ever done. Not all kratom users are irresponsible most use this to live a normal pain free addiction free life. I agree that it should be a little more regulated than it is however it should not be made completely illegal due to people abusing it just like anything if abused can cause problems that includes alcohol which has single handedly caused more deaths than kratom has and it's completely legal. I believe I speak for all regular kratom users when I say please don't take something that has helped so many people get off and stay off drugs and or alcohol.
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	A ban on the 100% natural mitragynine leaf will harm many ohioans in recovery including myself. I used to have a problem with alcohol and benzopines. I would use one or the other everyday. I got my benzopines from a doctor. I would take my prescription that was supposed to last 30 days all within a week. When I was out of those I would turn to alcohol. My life was a mess. I was not a good mother. I was not a good daughter. I hurt my family by killing myself with drugs and alcohol. A few years ago I heard about other people having success quiting drugs and alcohol with 100% mitragynine leaf. Making a tea with it. I figured if it helped other people maybe I have a chance. I tried it and was able to abstain from using prescription drugs and alcohol. It helps me with my ptsd and depression. I had a very violent encounter in high-school and suffer from depression and ptsd. It affects me everyday with being able to leave my house. Before the only way I could leave was high or drunk. I know now I was not living. I was just going through the motions to get by. I had no future plans. If 100% mitragynine leaf gets banned im afraid of going back to that life. I have a great relationship with my kids now. I have had a job for 6 years now. I love my job. I do not want to loose any of this. Im so afraid the leaf will be banned and it is causing me great anxiety. It will also affect many ohioans that use 100% mitragynine leaf to abstain from drugs and alcohol. Alcohol is so easy to get and is thrown in my face everywhere I go. I want to keep the life I have and not relapse. Everytime i have went to a doctor for my ptsd and depressio they want to put me back on benzopines and many other prescriptions. It will be extremely harmful to many ohioans in early recovery if 100% mitragynine leaf is banned. There is not enough mental health help in Ohio to take on everyone that will be suffering if the 100% mitragynine leaf gets banned. Please consider the ohioans that will suffer if 100% mitragynine leaf gets banned. I fear the human cost will be detrimental to many in recovery. Kratom has had a positive impact in my recovery. I feel i would not be here today doing this well had I not used 100% mitragynine leaf. I personally know my recovery will be jeopardized if 100% mitragynine leaf gets banned. Please consider regulating over a full ban. It will jeopardize many many Ohioans in successful recovery.
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom saves lives and reduces opioid dependency. It should be readily available for adults to purchase.

Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Criminalizing the leaf is insanity. I understand concentrates, but this has changed my life. I have rebuilt things from the ground up with this. Suboxone damn near killed me! This saved me and has given me life.
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I think the leaf is super helpful and not that addictive but I agree 7oh should be banned I got addicted to 7oh and the only way I got off of it was using the plain leaf
Marietta	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I would encourage Ohio to keep kratom legal. Kratom has helped me and countless others get off and stay off of opiates. Removing this valuable resource will only drive the illegal and dangerous drugs into our communities, causing wreckage for so many individuals and families. I also hope that if kratom is banned, the state will ensure resources are available and affordable to help those of us who currently rely on it in order to maintain normal lives.
Solon	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Speaking as a Psychiatric Nurse Practitioner who treats those struggling with various substance abuse disorders, I strongly oppose the proposal to classify mitragynine as a Schedule I controlled substance, particularly in its natural leaf form. Whole-leaf kratom has a long history of traditional use and a substantially lower abuse and impairment profile than many legal substances currently permitted in Ohio. While I agree that highly concentrated extracts may warrant clearer labeling, marketing standards, or targeted regulation, this does not justify a Schedule I designation, which is reserved for substances with high abuse potential and no accepted use. Many individuals rely on kratom as a harm-reduction tool to abstain from far more dangerous substances such as heroin and other opioids, and removing access to kratom risks precipitating relapse and overdose. If this proposal is truly about harm reduction and public safety, it is difficult to reconcile targeting kratom while alcohol remains legal and unclassified, despite its well-documented lack of medicinal benefit, high abuse potential, significant mortality, and risk to others through impaired driving and violence. Kratom does not produce comparable impairment or societal harm. A blanket Schedule I classification would be disproportionate, counterproductive, and likely to cause more harm than it prevents.
North Ridgeville	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom is a safer and milder alternative to alcohol that is used in recovery by many people who would otherwise be alcoholics. Please consider keeping it legal to assist with many people's efforts to live healthier, saner and more moderate lifestyles. Banning kratom would be a terrible idea that would adversely impact the lives of many people who are attempting to abstain from more dangerous and deadly substances, such as alcohol and opiates. Thank you for your consideration.

Millersburg	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Just like many hundreds of thousands, perhaps even millions, of Ohioans - I have used kratom, mitragynine, and 7-hydroxymitragynine as a means for alcohol cessation and control of chronic pain. Millions of people around the world use kratom and its alkaloids for the same purpose, and to stop using dangerous street narcotics such as heroin and fentanyl which have caused so many overdose deaths in Ohio and all around the country. Kratom and its constituents are an incredible tool to combat the 'opioid epidemic' which has torn apart countless families and caused untold misery - and these rules proposed by Mike DeWine and the Board of Pharmacy would render hundreds of thousands - at least, of Ohioans - felons overnight. Scientific evidence is clear: there is no overdose potential for kratom or any of its alkaloids. It does not cause respiratory depression - which is the mechanism by which many opioid-containing narcotics and prescription drugs can cause overdose deaths. Any overdose deaths in which the toxicology reports include alkaloids of kratom - mitragynine or 7-hydroxymitragynine - these alkaloids are ALWAYS accompanied by diacetylmorphine [heroin], fentanyl, hydromorphone [or other prescription narcotic drugs] or metabolites of such and these overdose deaths are typically the sad result of a person who was attempting to quit using narcotics with kratom or its alkaloids that unfortunately relapsed - and likely had a lowered tolerance due to it. These deaths, while tragic, are not evidence of kratom's alkaloids being dangerous. These alkaloids are being unfairly and unreasonably smeared as dangerous or harmful - and some unscrupulous vendors are selling, packaging and advertising them in very irresponsible ways. Regulation of these alkaloids - by imposing packaging restrictions and of course limiting sales to 21+ consumers [which most vendors and sellers already do of their own volition - they are not required by law to do so or to mark their product as 21+] would be a far better solution than outright rendering hundreds of thousands, if not millions, of law-abiding Ohioans into felons basically overnight. Kratom as a supplement has been a miracle for tens of millions - if not more - around the world who have successfully used it to stop using street narcotics such as heroin, to stop consuming alcohol or other drugs, to control chronic pain, anxiety, insomnia, depression and a host of other conditions which are not being adequately treated. I would implore you to rethink these proposed rules and allow Ohioans the freedom of choice to use supplements responsibly. In the United States of America we are to protect and preserve the rights of citizens to pursue life, liberty and the pursuit of happiness - and for many millions of Americans, and Ohioans, this includes the right to use kratom or other supplements as they see fit, the majority of whom do not need babysitting by the state. I have successfully used kratom and its alkaloids to keep me away from alcohol - and to control chronic pain. I have done so for over eight years now with absolutely no ill effect on my health. My liver panel tests are always good, I am in good health, and I have no doubt that kratom has contributed to that. Many others have used it for much longer than I have - also with no harm to their health, nor risk of overdose. It is factually impossible for kratom or its alkaloids to cause death in quantities that one might actually have access to - in fact, it is so safe, the only way a person could be killed by it is if a hundred pound box of it were to fall on their head. I implore you to keep kratom and its alkaloids legal and available to those Ohioans 21+ who choose to use it, as it has

			been an invaluable tool for so many in opioid cessation/recovery and for so many suffering from chronic pain or other health problems which they find it helpful towards.
Strongsville	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom products (escpecially those that contain physical stem and leaf) should not be banned or made illegal. Kratom powder (ground leaf) and loose leaf kratom (tea leaves) are safe and effective in opioid recovery. This form of kratom provides many with a second chance at life. Dosages are mild, safe, and easy to measure using a common kitchen scale. This is the way in which many have overcome crippling dependency from deadly opiates! Without kratom, I'm sure many Ohioans wouldn't be around today. Ban the gas station concoctions, not the raw leaf. Its no more dangerous than coffee.

Elyria	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I completely oppose this bill as natural kratom in its plant form is proven to be non harmful. Kratom in its natural form has not only saved my life but has also saved the lives of multiple family members of mine. My family members and myself were once addicted to harmful opioid medications and street opioids. Kratom has allowed us to become productive citizens keeping jobs and providing for our families. I/we have been taking kratoms since 2013. This bill should be immediately terminated as it will absolutely costs the lives of countless Ohioans.
Elyria	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I respectfully urge the Ohio Board of Pharmacy not to ban natural kratom. Kratom has played a critical role in my recovery from cocaine, alcohol, opiates, and even Suboxone. Before kratom, I cycled through relapse, withdrawal, and instability. With kratom, I regained control of my life, maintained employment, stayed present for my family, and avoided returning to substances that carry far greater risks of overdose and death. Banning kratom would not eliminate demand—it would force people like me back toward far more dangerous substances or to unregulated illicit markets. That outcome directly contradicts Ohio's public-health goals and would likely increase harm, not reduce it. Kratom is a natural plant, not a synthetic opioid. Millions of adults use it responsibly as a harm-reduction tool. The evidence from states that have regulated rather than banned kratom shows better safety outcomes through age limits, labeling requirements, and product testing, not prohibition. I ask the Board to consider the real-world consequences of a ban on people in recovery. Removing access to kratom removes a proven off-ramp from relapse for many Ohioans. Personal freedom, bodily autonomy, and evidence-based policy matter—especially when lives are at stake. Please choose responsible regulation over prohibition. Kratom saved my life. A ban could cost others theirs. Thank you for considering this comment.
Elyria	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I rely on Kratom to not take more serious and deadly opiates. Why would you ban it, you want people to turn to heroin???
Elyria	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello board of pharmacy I hope this comment reaches you in good health and light hearts. I bet of you not to destroy my life I have 8 yrs of sobriety from heroin and prescription pain pills do not make me go back I beg you. Also I have transvere myleits so I do have sever pain kratom helps this where conventional medicine has falied and kratom has helped me have some of a life back. Please don't take what I've worked so hard for. Also if you make it legal you will be doing a big disservice to Ohio. You would hurt by trying to help. Please follow the science

Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have been using kratom powder for several years now after being horribly addicted to pharmaceuticals: like suboxone which rotts your teeth out and even tho they knew that they failed to list those side effects on the packaging which led to a law suite in which the suboxone company is being sued. Morphine and other heavily addictive drugs were issued with side effects they failed to list so they could line their pockets with money. KRATOM IS THE ONLY SUBSTANCE I have found that I can take on and off without being horribly affected to it to the point I can't function without it like suboxone and other pharmaceuticals. I fully support 100% pure leaf kratom powder because it helps me with my pain and energy without having to be on addictive drugs. Please keep it LEGAL! I refuse to support the corrupt corporate pharmaceutical companies and what they do to people. I back kratom powder all the way - you have my support
Elyria	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	It has helped my wife become sober from antidepressants and alcohol
Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have spent 10 years addicted to opioids like Ocy contin and herion. I tried both the Methadone clinic and Suboxone. Both of these methods did keep me off the other drugs but I still felt a euphoria that made me want to keep getting high. They also didn't take me out of the circle of drug users. People who were still on drugs were always trying to buy my medication and I still had contact with that world. I went from herion to methadone then relapsed then got on suboxone then relapsed again. After my last relapse I heard about Kratom I used kratom to successfully come off of herion that was ten years ago with no relapse. In the ten years I have been clean I have gotten promotions at my place of employment I've gotten married and I decided to go back to school. I got my GED and am now in my fifth semester at Cincinnati State, I am working towards a degree in the sciences. I can honestly say I would probably not be alive and my children would not have a dad if it wasn't for Kratom. This plant gave me the opportunity I needed to really improve my life.

Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have successfully used Kratom to end a dark chapter of my life. I was plagued by opiates and benzodiazapenes for almost 20 years. the last 5 years I was flip flopping between opiates and suboxone and methadone... trying to quit but caught in a vicious cycle that regularly put me in positions dealing with bad people and dangerous situations flirting with death from overdose and being robbed. the last few years I was desperate and depressed as could be almost hoping to die. after that long of the cycle, it's become who you are.... I moved away from the city to start over, but ended up just traveling to fix myself regularly. it made it more expensive and more dangerous. I knew I had to change. I was told about Kratom and gave it a try. at first I didn't really like it because I couldn't get high like everything else did. Also it is unpleasant to consume and I had to use quite a lot because I was a heavy user period and less didn't cut it. but I didn't need the other stuff when I used it. I realized that was the key! I used it for a couple months and once I stopped I had an opportunity to get opiates and I relapsed... so I went to Kratom and reset and used it for over a year decreasing the amount and finally skipping doses. until I just stopped altogether. throughout this time of using it I had given some to people I know that were in the same pharmaceutical or heroin catch 22 and let others that had those issues know and I know a few were successful as well. I haven't stayed in touch with all of them, but there were enough success stories including mine for me to know it should be readily available for people to help themselves. I know that amounts that I had to use was proof that the death accounts I've heard about are either fake, or there was other things involved like it was synthetic or adulterated or other chemicals/drugs were involved. I know personally why Kratom is being targeted....there is powerful entities that stand to lose with something this helpful out there. they are going to run it through the mud and get rid of it any way they can. they want everyone on pills, fentanyl or heroin. the pills make someone that needs heroin the heroin makes someone that needs pills and fentanyl is the cheapest death. and the entities that provide each are tied together closer than most people even know.... PLEASE LEAVE KRATOM ALONE! I don't need it anymore but there are many that still do and you might be killing them if you take it away or make it too difficult to get. Thank you.

Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I want to share my experience because it feels important in this conversation. For a long time, alcohol had a grip on my life. It was legal, easy to get, and completely normalized, which made it harder to admit how much damage it was doing. I was drinking more than I should, more often than I wanted to, and it was affecting my health, my mindset, and my relationships. Even though it was clearly hurting me, there was nothing stopping me from continuing. Kratom became a way out for me when I was trying to break that cycle. I did not use it to get high. I used it because it helped calm my nerves, reduced my urge to drink, and gave me something safer to lean on while I got my footing back. In its natural form as a powder or liquid, it is not some powerful or dangerous drug. For me, it was gentle, manageable, and far less destructive than alcohol ever was. What I struggle to understand is how alcohol remains fully legal and promoted despite the harm it causes, while kratom, which helped me step away from alcohol, is being targeted for prohibition. It feels backwards. The substance that was actively harming me was easy to buy, while the one that helped me regain control is now at risk of being taken away. If kratom is banned, people like me do not magically improve. We lose a tool that helped us make healthier choices. Some people will go back to drinking. Others will turn to stronger or unregulated substances. That outcome does not protect public health. If there are legitimate concerns about certain highly concentrated or altered products, those issues should be addressed directly. But banning natural kratom removes a safer alternative that has helped real people like me rebuild our lives. I am asking you to consider the real-world impact of this decision. Kratom helped me move away from something that was destroying me. Taking it away would only make that path harder for others.
Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I was a heroin user for 10 years all through out high school and college. Everytime I tried to quit it kept drawling me back in. I tried rehab, Suboxone, Vivitrol, methadone. And nothing worked. I was stuck in th vicious cycle and couldn't get out. My life was going downhill fast. I couldn't hold a job. I couldn't go to class in college. I thought my life was over. I then discovered natural Kratom. And tried to take it to fight the opiate urge because it was my last option before suicide. It is the only thing I have tried that will fight the urge to use. Since I started taking Kratom four years ago, I finally graduated college. I finally got a job as a team leader at Honda. I've been clean for four years and everything went back to normal for me. Again, I tried everything and nothing worked but kratom worked. Taking this away, will set me back years. I'm afraid of the urge coming back and I'm afraid of what my life will turn into without it. I really really wish you guys would reconsider scheduling this as a drug. I understand the Kratom derivatives, but the natural Kratom has done nothing but help me keep my life on track, and I have heard stories of many many other people that have said the same. Please consider my story and many others with a similar story when you consider scheduling natural Kratom as a drug. Thank you for taking comments
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I do not think it needs to be banned. It's helped me stay away from drugs and alcohol

Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Banning mitragynine will directly impact overdose rates, your hands will have blood on them.
Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am against banning the sale and possession of mitracynine because I have witnessed first hand for the past 10 years the benefit of mitracynine has had on a dear immediate family member in curbing his urge to use alcohol. Thank you for considering my comment.
Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hey Kratom has kept me off opiods for 10 years with no side affects. I'd really Appreciate if you would keep the raw powder legal in ohio. Thank you.
Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom helped me get off 125 mg of methadone and also helps with my depression if it is made illegal I don't know what I will do mentally
Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I really don't see why the board of pharmacy is trying to ban natural kratom. I can see where the hysteria comes from about 7OH, but kratom leaf is extremely mild and easy to use safely. Stop this overreach! Kratom saved my son from the throes of opioid addiction. I can honestly say this stuff saved his life. Kratom is not something that kills people like heroin. In my research I have found that it doesn't slow heart rate or breathing so it isn't like you can realistically overdose on kratom. We all know that this bid for criminalization is based on money. From pharmaceutical companies to the prison industrial system, making more criminals out of people who use natural remedies only serves to help corporations. If you truly care about helping individuals, you will leave kratom alone.

Dublin	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, my name is Anthony D. I have consumed kratom for 11 years now daily and it has freed me from a 20+ year pharmaceutical opiate addiction. My prior addiction to prescription opiates has led to personal injury, injuring others, and legal issues. For 11 years now, I've been a productive member of society with full time employment, a wife and a son. These are things I never dreamed of which I would be capable of achieving and maintaining. I'm 51 years old and have a clean bill of health. Liver and kidney tests all show normal. I went so far as to have an elective upper GI and that was fine as well. I get yearly physicals and have my blood tested often. I've chosen to these things often to make sure after 11 years of daily use that kratom has not caused injury to my body. Unfortunately, you are conflating 7oh (a semi synthetic isoalated alkaloid) with all natural kratom powder. That is tantamount to comparing a cup of coffee to crack. We (the kratom community) came out in force, with science to back our position, in 2019 to stop the Ohio Board of Pharmacy's naked agression to ban a completely natural plant that has been used safely for hundreds, if not thousands of years. Since 2019, the scientific community has only bolstered the safety profile of ALL NATURAL KRATOM POWDER. This current action by unelected officials is yet another attempt to ban the use of a safe plant while legalizing marijuana and keeping alcohol and tobacco legal. So legal in fact, that only big box stores and businesses selling alcohol or cigarettes were allowed to stay open during the pandemic. No credible evidence exists that says all natural kratom powder has ever caused a death BY ITSELF. On the contrary, any quote "kratom related death" is always accompanied by real drugs and narcotics. Yet, I've had to administer Narcan and call the EMS at least 20 times over the last decade to save people's lives from fentanyl overdoses. Kratom powder should be regulated, not banned, and the KCPA (Kratom Consumer Protection Act) has already passed in many states and had already passed the Ohio House in 201 but died in committee. It has already been reintroduced again for Ohio. If you all natural kratom is banned by unelected officials with questionable ties to big alcohol and big pharma, you will be signing the death warrant of people who want to stay clean and productive with an all natural plant in its native form. Do I think 7oh and concentrated liquid forms of mitraginyne should be banned? Absolutely. Please do not ban all natural kratom powder not based on fear mongering or agendas, but follow the science and the overwhelming response I know you are receiving from kratom advocates. Again, you are conflating 7oh, and concentrated liquid forms of mitraginyne with all natural kratom powder. Please do the right thing. Thank you for your time. Respectfully, Anthony D.
Dublin	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, i have been a responsible natural kratom user for about 2 years now. It has tremendously helped me stop drinking alcohol. Please do not ban thr natural leaf powder. I understand the 7-oh from gas stations is dangerous and i am all for banning that. And i am also for having it be 18 or 21+ to buy. Natural kratom is much safer than alcohol and i am asking please let adults have the freedom to do as they may.

Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has been a godsend in getting away from alcohol. I've never had any negative side effects and the community has been more welcoming than anywhere else I've been. How can something brewed from a natural tea leaf be harmful.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Natural kratom is separate from the synthetic kratom. Like so many others, I use natural kratom for chronic issues in order to avoid turning to narcotics. Not only does it work more effectively than other remedies I've tried, I'm able to adjust my dosage for my needs. I know countless people who use kratom for a wide variety of reasons. Alcohol has a much higher chance of igniting a substance abuse disorder than natural kratom does. However, I see alcohol everywhere. To make this a controlled substance is an outrage and a mistake. Not EVERYTHING needs to feed the Big Pharma monster. I sincerely hope my representatives take the time to educate themselves about the different between natural and synthetic kratom before moving forward with ANY legislation that would restrict our access to something that actually HELPS people avoid controlled substances and that is used to treat a wide variety of issues. By all means, restrict synthetic kratom, but means NATURAL Kratom alone!
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I was homeless addicted to heroin and fentanyl hopeless and suicidal praying that something besides Suboxone could help me lead my self out of the dark abyss my life had become subxone was just as addictive and sometimes worse when it wasn't available with the sickness and when i found kratom my life did a 180 in a few months i am now 10 years clean from the destruction of the deadly addiction of heroin and fentanyl have a great job family home and life and its all because of a god send called kratom i dont think i would be alive today and able to maintain my free from those deadly drug if kratom wasnt there getting married in a month and we our buying our first home non of this would be possible with out kratom we will see the most deaths from fentanyl ever if kratom is taken from us who need it and the live of those lost will be on the hands of the law makers who are put there to protect the American men and women who put our trust in you please dont let another American die with this senceless band and war on a plant that saves countless live every day including my own don't let the greed of pharmacical companys who have already caost so many Americans there live andaybe the main cause of the epidemic we face today you your hearts and god given good sense and save lives save kratom
Bridgeville	Pennsylvania	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I highly oppose a complete kratom ban in Ohio. As someone who works in addiction treatment, while I have seen some abuse adulterated products, there are also many who use kratom as a safe alternative to both prescription and non-prescription controlled substances. The state has already put a current ban on any concentrated forms, and if that must stand its acceptable. However a complete ban on kratom/mitragynine will be detrimental to a large number of people.

Charleroi	Pennsylvania	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Big pharma would rather push suboxone than an individual to choose a safer natural plant based medicine that's been used for 100 plus years to help with menstrual cycles opioid addiction or something as useful as a natural sleep method or antidepressants. I been using raw Kratom for 20 years to help me with my severe opioid addiction and it worked I am able to function in society raise my family and hold a full time 6 figure job for the past 18 years. I saved several lives from opioid addiction and overdosing by showing them what Kratom was how it works ect. Ohio needs to find out exactly why they want it banned. I understand that the pure tablet for is super addictive and bad and needs to put pulled but in it's natural form it's just as safe as coffee or melatonin. No one has ever died from using pure leaf Kratom alone and that is a fact!!! I know big pharma can't make money off of a leaf from a tree in Southeast Asia so that is a threat to their pockets. I know more people on suboxone and subutex that can't get off because of the withdrawals. Ask me how know. I was one of those people. I overdosed 2 times died once from opana and feom that day foward I found a better way to manage my life and that was Kratom.
Bernville	Pennsylvania	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I believe that banning kratom [powder, extracts, shots] will do more harm than good due to its abilities to help others get off of harder drugs and the benefits it has to those whom are not able to get prescription that helps their anxiety, chronic pain and other mental and physical health issues. Unlike 7-oh, kratom in its pure form is remarkably safer than alternative narcotics. Every medication has its risk. Even benadryl can be harmful of abused yet it remains free for everyone to obtain. Give people another alternative to narcotics. Give people a chance for rehabilitation and ease withdrawal symptoms for a better outcome.
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I was given a prescription for Narcotics by a Doctor 15 years ago. I have degenerative disc disorder, and have had back surgeries to correct some of the problems. I, as anyone would, become addicted to these approved pain killers. For years, I continued to receive a prescription for high doses of these and many others do as well. But the state didn't seem to care about that. Over the course of the last 3 years, I have been able to quit taking this "medicine", and kratom is what helped me do that! Not 7-OH, I am speaking of just Kratom. Now, I am able to live without terrible withdrawal symptoms by just taking some kratom in the morning and afternoon. Now, you are going to take this away? Do you know what you are doing to people? This isn't anything like cocaine as mentioned in the report. This is a free country? Why are you allowed to tell me that I can't take a plant, that has helped me to completely eliminate the dependance on the drugs that the state sanctions? I am asking you to go ahead, and please make 7-OH illegal. This is a drug and it is a big problem. But please reconsider your ban of pure kratom, as you will push people to very serious drugs that will eventually take their life.
Spring Mills	Pennsylvania	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Spina bifada disability; recovering opiate addict ; kratom has literally saved my life. Im opiate free for 8yrs now. Using kratom for pain management. Pls do not ban the use of this supplement.

Paoli	Indiana	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I would like to briefly share my insight on how banning kratom leaf along with 70hm would be detrimental to the well-being of thousands of law abiding citzens in the state these substances should examined separately it is a comparison example of coffee vs cocaine both drugs but two completely different outcomes on the individuals using them. Natural kratom in powder or leaf form has helped change so many lives and give hope to people with opiate use disorder, chronic pain. Ive seen so many hopeless individuals quit street drugs and use kratom to live fulfilling lives by maintaining employment, healthy family life, and relationships. I will testify that 12 years ago I was in a hopeless cycle of oxycontin, heroin and a alcoholic who spent hundreds of thousands of dollars on treatment programs, methadone maintenance, and even had a long stint of Suboxone treatment that was supposed to be the answer to opiate addiction. To be completely transparent all of these pharmaceutical drugs, therapist, addiction doctors just left me bankrupt, along with not being able to fulfill any type of employment because I'm trying to jump through all of the legal loopholes of so many therapy sessions,dr.appt that I had to keep track of every month. Then I used kratom around 2013 mainly because of my financial devastion at the time because it was cheaper than street prices at the time and went from hopeless to being a husband again,along with a good father. Within 5yrs time I went from chapter 13 bankruptcy and failed employment to 6 figure salary and today I'm debt free with a loving family who knows that Dad has their back so please consider what you would be taking away from me a thousands of others
Chillicothe	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Mitragynine has been a safe alternative to help me and people I know taper off of harmful drug addictions such as opiates and alcohol. In my experience, banning this would lead to people going back to more dangerous substances.
Dayton	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Keaton saved the life of someone I love. He was addicted to physician prescribed narcotic opiates for over a decade and went through withdrawals constantly. Now he uses Kratom with zero side effects, zero withdrawals, and most importantly no overdoses. Keaton is necessary to help stop the opioid epidemic!!!
Gahanna	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I was a opioid addict for 11 years I was in and out of jail, I also overdosed multiple times with multiple trips to rehab centers and I was completely unemployable and in really bad shape then in 2020 I was introduced to kratom leaf powder by a friend in recovery and it completely saved my life since then I have been completely clean from opioids and I’ve gotten my life back and my relationships with my family are stronger than ever.kratom leaf powder has saved my life and countless others please keep kratom leaf powder legal people in recovery’s life is at stake.I agree 7-oh is nasty stuff and should be banned but kratom leaf powder is a life saver and shouldn’t be lumped in the same category
Sullivan	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	It’s a useful tool that is non addictive to help fight against addiction stress anxiety and multiple other mental ailments as well as improving Energy levels

Milford	Michigan	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi, I'm submitting a comment on behalf of myself and my friends I have living in your state. Plain leaf kratom is a natural leaf that is ground into a powder and ingested. No adulteration. Kratom gave me my life back. I was a slave to prescription medication for many reasons. Pain depression and anxiety being the main treated symptoms. I was able to give up a 12 year prescription medication addiction for Kratom. I am a functioning addict in recovery now thanks to this amazing plant. Ban 7oh, please leave kratom for your constituents. And set the framework for the rest of the states who are set to follow in your footsteps. Please take 7oh off of the market, classify it whatever you'd like bc it is definitely not on the same page as regular plain leaf kratom. I can attest to that 100% Don't agree with! Would effect my life tremendously I am an advocate for safe natural kratom use. It has helped millions of people. I highly recommend everyone considering banning kratom in its natural form please watch the documentary Leaf of Faith. Criminilizing natural kratom is drastic overreach and will harm millions of people. I fully support regulations to keep it out of the hands of minors. Natural kratom is far safer than things such as alcohol, energy drinks, Marijuana, cigarettes, etc. I've seen veterans whose lives have been saved from this plant. I've never seen anyone who has taken kratom responsibility even look remotely under the influence. The studies that you referred to are outdated and terribly wrong. Prohibition is going to force good, responsible people to turn to dangerous alternatives to relieve their pain, anxiety, PTSD. God gave us everything in nature to help us, but rather than allowing adults to make decisions in their best interest, you are pushing something that lobbyists and Big Pharma are pushing for all of the wrong reasons. Please reconsider before you destroy millions of lives. Sincerely
Massillon	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not make me a criminal. I have been using plain leaf kratom for 12 years now. I have a family that I can provide for. I have a good job, i work 56 hours a week while having ongoing back issues and a hip replacement. Kratom allows me to work the hours that are necessary to provide for my family. I do not drink alcohol, or use any illicit substances or even smoke. I was addicted to painkillers for years and kratom is the reason I have been able to achieve my current status in life. I pay my taxes, I pay my bills and contribute to society. I can tell you that none of that was true as an addict. Making a move to make kratom illegal only stands to make more crime. Please do the research and you will find that kratom is not a problem. Thank you for allowing me to voice my concerns on this issue that impacts me and my family's life so critically.
Canfield	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Whole leaf tea product has been a game changer for me. It has been a true alternative to alcohol. Not only the different strains have been medicinal to us. The natural leaf brewed as a tea has minimal affects but enough to be that alternative. Whole leaf product does not affect your motor skills or become addictive. It's a tea that gives energy, helps sleep and just takes the edge off of wanting to drink alcohol.

Ashland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I just wait to say, in regards to a Kratom ban, that my cousin would be alive today, if my family knew about kratom before his death. Most heroine addicts fear coming out to doctors, they fear it judgement and how it might affect future pain treatment. There are so many children, brothers and sisters, who would still be alive, if they knew there was a safer, less lethal alternative. No one wants anyone addicted to anything, but reality is more important that are fantastically wishes. Banning kratom won't lead people to professional medical treatment for addiction, it'll only lead them to heroine. How many people's kids, brothers, sisters, and loved ones deaths are you ready to be responsible for, when you push them into the underground market for heroine? Please be reasonable, and responsible, and let reality win out. We know the war on drugs doesn't work, and it doesn't save lives. We know what addicts do when their drug of choice gets outlawed. They don't stop being addicted, they just start buying from whoever still sells it. Don't do this. For the sake of our loved ones, please don't do this.
Ashland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, I would like to share my opinion on natural kratom leaf powder. Some years ago I had a bad Percocet and Cocaine addiction. Every paycheck went to feeding my habit and I lived with my parents until almost my mid 20's because I couldn't afford to make it out in the world on my own. No matter how hard I tried to do better a nagging thought made the cycle start all over again. Even after weeks or a month of abstinence from either substance. I had trained my brain to think that it needed drugs to function properly and I don't know if I ever would have stopped. Then one day I found kratom and it honestly changed my life. Just a spoonful of this natural powder took away my cravings, gave me back my motivation, and allowed me to function normally in my daily life. Five years later I am living on my own, have saved more money than I ever dreamed I could, am in the process of buying my house, and best of all, am newly engaged and happier than I've ever been. I really hope that my story will help influence the board's decision regarding kratom leaf powder. The extracts need to stay banned as I do believe they cause more harm than good. Especially synthetic shots, pills, etc. kratom is an amazing plant that really has saved lives but it needs to be regulated to keep people safe. In my opinion it should be available to adults over 21 with dosage guidelines and vendors should be subject to criminal charges should there be anything other than the natural leaf in their product. Thank you so much for reading my story

Acme	Pennsylvania	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi! Thank you for taking the time to read my comment on today. I know these periods for comments creates a lot of work and takes a lot of time to fully process. My name is Adam, and Kratom helped save my life. Maybe not so literally, but it has been an incredible life altering resource that has aided me in recovering from addiction. I also suffer PTSD from major life altering events, and depression. Kratom has impacted my life in a very positive way, and I am very scared today seeing incorrect information guiding rules in opposition of it. It is important to note I only ever use leaf Kratom flower (natural Kratom powder). I have taken it for over 5 years now. I am physically healthy and see my doctor regularly. There are many published research papers available on the National Library of Medicine that show Kratom is not some dangerous substance, but a naturally occurring plant that is safe to consume when properly regulated. Many States have successfully enacted regulation, and Ohio can be next with Senate Bill 299. Regulation has enabled safe sales and manufacturing of leaf Kratom powder, protecting consumers from unsafe, adulterated Kratom, or Kratom with high concentrations of unwanted alkaloids. These products are lab tested and commonly come with a bar code and serial number from the lab for that batch, making it easy for consumers to make safe and responsible choices. It also holds manufacturers accountable. Just like Alcohol or any other product sold in America is regulated to ensure safe access to safe products, such as a brewery ensuring their liquor is properly distilled with no adulterants that could harm innocent consumers. Because of Kratom, I have been able to work through my mental health problems, establish and extremely well paying job for my age, and on track for a strong retirement without even thinking about it now. I oppose any rule or regulation that would categorize natural Kratom as a banned substance. Thank you, again, for taking the time to read my comment on this serious matter. I hope sharing my experience helps guide us to a fair and logical outcome.
Warren	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I spent 25 years smoking crack and doing heroin and was exactly where you would expect me to be by doing so. I had tried rehab more times than I care to admit and been convicted of crimes I am truly embarrassed of during the process. My son was taken from me and I was homeless at 42. There was always a need for more of anything I could find like a bottomless pit. One day I was broke and desperate and someone had me try kratom and it was like a light switch being turned. My need to get more drugs had actually gone away and my head was finally clear. Within a week I had gotten a job and Within a year an apartment. Not long after that my son came to live with me and I kept the job and actually have had a life since then that I never thought possible. It's been nine years since kratom saved me and my son is in his second year of college. I have a house and my family speaks to me again. I spend three dollars a day to be normal and thats it. You don't overdose on kratom the worst thing that happens is you get a nauseous feeling and you don't have that much again. It has given me a life I would have never had and there are so many examples of the lives saved . Please just leave the kratom alone.

Newark	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I think it would be a mistake to make Kratom a prohibited plant in the state of Ohio for a few reasons. The main reason is that it has given people their lives back from opiate addiction and allowed them to become productive members of society again. And more importantly continue living unlike so many others that have lost the battle with addiction. For a lot of people it helps enough that they don't want to go back to that life. I believe it is relatively safe especially compared to alcohol, marijuana and tobacco. To classify it as a dangerous substance like fentanyl or methamphetamine would be a a mistake and a slap in the face to all of the people it has helped. And continues to help. I've never seen evidence of a death that did not involve multiple other toxic substances. It seems to have become a scapegoat and easy target to blame for the continued opiate crisis while, for me at least, it is incredibly beneficial to my well being. I just think that to take that away during this time of an ongoing opiate epidemic would do more harm than good. Thanks for listening. I hope this will help in your decision.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I support SB299 as a proposed regulatory framework for Kratom. I oppose any rule that would categorize natural kratom as a banned substance. Natural kratom has been incredibly helpful for me in my journey to quit alcohol. I've had zero health issues and don't find the substance addictive at all.
Chardon	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please keep kratom in the powder form legal. This herbal remedy should be used to help save people from the terror of opiate addiction. Kratom is the safest way to help overcome opiate addiction. If kratom becomes illegal, many families will suffer as a direct result.
Little Hocking	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Where to start. For 17 years, I've struggled with Fibromyalgia. Of course my doctors started me on narcotic pain medication. So, for 10 years I lived on pain meds that didn't help. It also led to me becoming addicted to said pain medication. I lied, I stole from those closest to me to get those pills. When I finally hit rock bottom, my husband gave me the option to change or get a divorce. A friend of mine at the time told me about how taking Kratom had helped her so, I gave it a shot. I cannot express enough how much Kratom has changed my life and for the good! It's has done for my chronic pain than anything I've ever experienced!! I am now more active than I was, I have minimal pain and Kratom doesn't make me feel like "I'm addicted" to it. Yes, I've tried other natural products but I couldn't fully function like I can with Kratom. I did a lot of research before even trying it because, let's be honest, it sounded almost too good to be true but it is TRUE!! I am alive and active in my community, with my grandchildren and it is all because Kratom in its nature form, has kept me from those narcotics that were taking over my life!! I pray that our State can come to a conclusion that keeps Kratom on the shelves for people like me. I'm 45 and I've got a lot of life to live because I found Kratom 6 years ago. Please, consider how it can help people and it can keep people from taking narcotics or other medications that are not good for our health.

Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I discovered Kratom in 2016 after looking for an alternative to pharmaceutical medicine.. Im a semi truck driver and was in an no fault accident in which i developed conversion disorder in which my physical symptoms mimicked a stroke. After being put on psychiatric medications and countless meds I wanted to try some natural herbs and medicines. Thats when I found Kratom. It has changed my life! I was able to stop ALL prescription medications and for once felt normal in fact I felt better than I had in years ! I found a kratom business that sells nothing but natural pure ground leaf kratom in Columbus Ohio called Miracle Kratom . They are a wonderful business and is my number one go to for trusted ,tested ,pure kratom. They eventually opened a store in my home state of Kentucky only 20 minutes from me and I was so happy! I have been using plain leaf kratom every day since 2016 and have had no side effects! As a truck driver it is one of the only things I can take and helps in so many ways. All my doctor's are aware of me taking kratom and in 10 years it has not once caused an issue. There is a difference between plain leaf kratom and 7 oh in which you have already banned through an emergency order. I have taken 7oh also and there is a big difference in it. I can attest that 7oh can be and is addictive. As with nost things your tolerance level jumps up way more with 7oh and there is the issue of having to use more to have any effect. Im not in favor of sn out right ban on 7oh and especially scheduling it level 1 as it did help with my pain caused by a slipped disc in my lower back but it should be studied more and eventually regulated by the fda. Plain leaf kratom does NOT need an outright ban but it definitely should be regulated as the American Kratom Association has been fighting very hard with the Kratom Consumer protection Act and many states such as my home state of Kentucky has already adopted. Please leave plain leaf unadulterated kratom alone and do NOT ban it but adopt the Kratom consumer protection Act and let this miracle plant stay legal ! Please leave the responsible citizens and stores that sell plain leaf kratom decide on the future of kratom. Please listen to those who who advocate and depend on kratom as it has saved my life in so many ways . Thank you.
Dayton	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Taking natural kratom products out of the hands of consumers in Ohio WILL LEAD TO OVERDOSE DEATHS DUE TO RELAPSES ON CONTROLLED SUBSTANCES. Incredibly disappointed.
Logan	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom saved my life I was a herion user for 25 years found this plant now I live a happy normal life, the misinformation is ruining many lives
Marion	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I use kratom for chronic pain, and it helped me come out of a crippling opioid addiction after many years. Its imperative kratom remain available to us. It has saved many of our lives and we are adults, making informed and responsible decisions. The vast majority of us support common sense regulations of these products but please do not outright ban this thing that helps us live a less painful life. I go to work, I pay my taxes, I'm a law abiding, responsible, member of my community, and all I ask if for my autonomy and freedom be valued and respected by by state I've loved for 40 years. Thank you for your time and attention, please do the right thing by your constituents.

Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi, my name is Matt, and I am a 34 year old father of two young children. I live in Madeira, near Cincinnati. I have struggled with substance abuse issues for a large portion of my adult life, and have been in recovery from benzodiazepine and opiate addiction for 10 years now. Previously, my life was in shambles and I was in a very rough place. After finding kratom, my life has improved drastically, and I have been able to live a life clean of hard drugs. I have a wonderful family life, and my career as a Software Engineer has taken me to great places. Kratom in no way is comparable to other hard drugs, and I find it deeply disappointing that Ohio is attempting to ban this plant. It has helped so many people's lives across the state of Ohio, and I fear the irreparable harm it would cause by taking it away from Ohio citizens. Many people *will* go back to using hard drugs, and people will die from this ban. If the goal is to protect citizens, then this is the wrong way to do it. Please consider the lives of ordinary, hard-working, law-abiding Ohio citizens that will be torn apart by banning kratom leaf. This ban will do more harm than good.
Coldwater	Michigan	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	After years of opiod prescribing by a MD I was told he wouldno longer write the prescription. Basically i was on my own to figure out how to deal with the withdrawals. The options were suboxone (might as well be an opiod) heroin, or kratom. I chose Kratom and regained my life Dont let big pharma continue to wreck lives by making their poison the only option

Mount Vernon	Kentucky	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am a lifelong Ohio resident, a single mother of two teenagers, and I work full time. My bills are paid. I do not commit crimes. I do not harm the people around me. I am also a kratom and 7-OH user, and I am deeply concerned about myself and the many people I know and love who use these products for reasons they have thoughtfully and intentionally chosen. As Mr. DeWine has stated many times, these substances can be addictive. The packaging clearly says so. With that in mind, what is the plan to provide adequate detox and rehabilitation beds for the individuals who will be forced into sudden withdrawal now that these products are banned? I sincerely hope the Governor understands that the idea there is a rehab bed available for every person struggling with dependence is unrealistic and, frankly, delusional. Releasing thousands of people into acute withdrawal with no meaningful support is dangerous and irresponsible. While I understand that a hotline number has been shared, I ask that policymakers be honest about how limited that level of assistance truly is. I ask they consider why people are self medicating. I ask they consider offering an alternative since you are making an active choice to take away their therapy. In a world with endless unregulated supplements. In the spirit of banning or heavily restricting substances that cause widespread harm to society, I would also like to address alcohol and its well-documented consequences. Alcohol is the most abused substance globally, second only to nicotine. GLOBALLY. It is involved in approximately 20% of suicides, 50% of homicides, and nearly half of domestic violence and assault cases. Drunk driving deaths, alcohol poisoning, sexual assault facilitated by intoxication, liver and kidney disease, heart disease, cancer, dementia, depression, anxiety, and psychosis are all directly linked to alcohol use. Alcohol withdrawal is among the most severe and dangerous of any substance. Despite this, alcohol is marketed aggressively and sold everywhere. I recently learned of a 12-pack of alcoholic SunnyD, a product that closely resembles a children's beverage. Alcohol is readily available at gas stations, grocery stores, restaurants, amusement parks, church festivals, and even family venues like Chuck E. Cheese. Yet we leave the decision to consume alcohol up to adults. Why is that? What is fundamentally different here? With approximately 2.6 million alcohol-related deaths worldwide each year, I struggle to understand the logic behind singling out these products while ignoring far more dangerous and socially destructive substances. I do believe reasonable regulation has a place. Protecting minors is essential, and sensible safeguards should absolutely be implemented. But outright bans do not eliminate use. They push people toward the black market or toward substances that are far more dangerous. That outcome helps no one. I will not even begin to unpack the contradictions surrounding so-called "intoxicating hemp products." When lawmakers disregard voter initiatives, voters inevitably lose respect for the political process. Life is already hard enough. Adults should be allowed to make informed choices about their own bodies. If stricter regulations are necessary, apply them consistently. If alcohol remains legal and accessible, it must be part of the same conversation. Thank you for your time and consideration.

Franklin	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I don't feel that the band of kratom is absolutely necessary I think if we implement ID verification just like for cigarettes and alcohol that that would take care of the situation. Now on the other hand the extracts like 7-OH is a clear danger to the community. But let me in with this I highly discourage / recommend that leaf kratom be held the same standard as tobacco products and alcohol. I was an alcoholic for over 10 years and the kratom leaf literally saved my life so please take this into consideration before making a ruling on this. Also there's many others that have similar stories to mind sir please take this into consideration I appreciate your time and thank you very much. Kratom saves lives I don't think we need to take away a tool that can help us combat the opioid epidemic especially when fentanyl is killing so many Americans every year. Thank you for taking my story into account. Have a great rest of your day
Elyria	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Due to a back injury, I was prescribed pain meds for several years. For more than 2 years, I was prescribed and taking 10 pain pills every day. Of course, it became a problem. When I tried to stop, the withdrawal symptoms were brutal. I could not function without them. A friend suggested I try Kratom powder. It absolutely SAVED MY LIFE! Its been 4 years since I've taken a pain pill. I will never take them again because I understand the dangers. If not for Kratom, I am 100% certain my life would be very different for the worse. Kratom saved me! I know others who were able to stop taking heroin & meth by using Kratom. This is another attempt at big pharma trying to take away a person's ability to quit relying on the poison they push. Kratom gives people the ability to take control of their lives again. Ban pain meds! Big pharma gets their HIGHLY ADDICTIVE DRUGS legalized and then goes after any alternatives for someone to take their lives back. YOU should be ashamed of yourselves. Criminalize pain meds. Arrest the top execs of all the companies who create and distribute highly addictive pain meds. Kratom is the solution, NOT the problem.
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have safely used kratom powder daily for the last five years. I use it responsibly and have not experienced any adverse health effects. It helped me quit alcohol. Drinking is far far worse for the body and mind and society in general than kratom powder is. I recognize the extract shots are more easily abused. That's why we need regulation, not scheduling. People here can go to a bar or liquor store and get obliterated every night, destroy their liver or die of alcohol poisoning and that is perfectly fine and legal, but a responsible adult can't take kratom powder in their own home which barely intoxicates a person. Nevermind the fact that people are able to quit heroin and fentynl using kratom, which is one of the biggest health issues in our generation. Please don't do this. If it's so dangerous than prove it through studies and then regulate it.

Dayton	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	As a physician, I have witnessed countless patients who were addicted to hard street drugs, narcotics, who have successfully used kratom to get off the street drugs, clean up their lives and truly succeed. If safe and legal kratom is commandeered by the board of pharmacy, i have no doubt that there will be THOUSANDS of Ohioans that will be criminalized for using the one safe product that saved them in the first place. So many people will be pushed back into heavy, dangerous, street narcotics, losing all of their progress. Regulate SAFE, LEGAL KRATOM! Any other action will cause real harm to so many good, Ohioans.
Galloway	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I support actual scientific approach to kratom, not fear-mongering sponsored by competition in the Pharmaceutical industry. I had been on pharmaceutical products for years, with a cascade of health events, and addiction, due to prescription drugs. My life is much more stable, and manageable, since I discovered kratom. I am now able to both be more present for my children and family, and work full time, as a productive member of society. While I was taking prescription drugs, I was a train wreck, and it only got worse every year, none of the drugs ever helped or improved my life, nor benefited my family. Banning kratom will offer only negative outcomes for many more people than I think the authors realize, and will only drain society in numerous ways. I do not want to be on disability, I do not want to be unable to provide for my family, or be able to function as a father should.
West Chester	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I absolutely oppose this ban!! We should not continue to take citizens ability to find relief that isn't a pharmaceutical. I have met MANY people who have stayed away from hard opioids using Kratom. Stop taking relief from people!!
Wadsworth	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Helps with withdraw It is a natural pain reliever and anxiety reducer that helped many. Also helps with opiate withdrawal, is used as pre-workout, for sleep etc

Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am writing to comment on the proposed rule that would classify mitragynine, the active alkaloid in Mitragyna speciosa (kratom), as a Schedule I controlled substance under Ohio law. For decades, people have successfully used Kratom for pain management, anxiety and opioid withdrawal when other options have failed or been inaccessible. Scheduling this substance would criminalize these consumers and push them towards more dangerous black market substances that are all too often readily available in our communities. It is an attack on citizen sovereignty and bodily autonomy that turns average law abiding citizens into criminals. I have personally used Kratom to recover from alcoholism and lead a healthier more productive life without alcohol. I have witnessed people use Kratom short term to get off strong opiates like Heroin and Fentanyl. Lead them back to sober lives, find jobs and reunite with their families. Labeling Kratom and Mitragynine as Schedule I substances removes any possibility for regulated, controlled access, including quality-controlled distribution that protects Ohio consumers. In a state plagued with overdoses from illegally produced, black-market opioids, safe and legal Kratom access is harm-reduction. The proposed scheduling is an attack on peoples healing and a waste of Ohio's resources. It is also an attack on the livelihood of many legitimate tax-paying Ohio businesses that carry lab tested, age restricted Kratom products. I am asking that the Board reconsiders the proposed scheduling of Kratom. Instead, pursuing policy grounded in established scientific evidence that protects consumers from synthetic analogs and blends of undisclosed grey market substances labeled as natural Kratom.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I believe proposing to ban Kratom in all forms is against the interests of the health of Ohioans. Kratom and its alkaloids are a reliable and safe form of analgesia and provides a safe alternative for opiod addicts by being a substance that does not depress the patients breathing. Kratom poses less toxicological risk than alcohol and has more medicinal value. An outright ban on kratom could also force users to search for other forms of relief for chronic pain in a day and age where pain management is expensive and out of reach for most Ohians.

Venetia	Pennsylvania	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	To Whom It May Concern, I am writing to share my personal testimony in opposition to efforts to ban natural kratom leaf products. I was first introduced to FDA-approved opioid medications by my doctor in my in 2006. What began as a legitimate prescription quickly developed into addiction, and over time I transitioned to harder, illicit substances that were extremely dangerous. I spent years struggling with addiction and ultimately lost nearly everything while battling fentanyl dependence. I lost my husband to fentanyl. After his death, I entered a rehabilitation program and committed fully to my recovery. I have not used illicit drugs or alcohol in years, and kratom has played a critical role in my ability to remain stable, functional, and committed to long-term recovery. Because of kratom, I was able to regain custody of my children and rebuild trust with my family. They have seen me return to the person I was before addiction. I work full time and have maintained stable employment for several years, something I was incapable of doing during active addiction. I am currently in school pursuing higher education in psychology with the goal of becoming a substance abuse counselor so I can help others who are struggling the way I once did. Kratom became a part of my healing process and gave me the strength to rebuild my life and my family's future. It offered stability and hope when everything else had failed. It is deeply concerning to see lawmakers focus on banning a natural plant that has helped so many people recover, while far more dangerous substances remain legal and widely available. Kratom has given many people, including myself, a second chance at life when other options failed. I strongly urge policymakers to distinguish between natural kratom leaf and highly concentrated synthetic products such as 7-hydroxymitragynine (7-OH). Even as someone in long-term recovery, I am wary of 7-OH because of how potent and addictive it is reported to be. Synthetic and chemically manipulated products are where the real risks lie and should be the focus of enforcement. Natural kratom leaf, when regulated with age limits, testing, and labeling, provides harm-reduction benefits for many adults and does not warrant prohibition. Please do not take away a regulated, natural alternative that has helped countless people stay alive, stable, and productive. Prohibition will not protect public health. Thoughtful regulation will.
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have been abusing substance since I was sixteen and I've tried to multiple programs and rehabs to quit but none of them stuck until I started taking kratom three years ago. It relaxes me but I'm still able to easily function and I think it is the only thing keeping me from using again

Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	To whom it may concern, My name is Johnny Damron and I am a Northeast Ohio resident writing to submit a public comment regarding the proposed scheduling and potential ban of natural leaf kratom (Mitragyna speciosa) and its primary alkaloids. In short, I respectfully urge the Ohio Board of Pharmacy to reject the proposed Schedule I classification of mitragynine and instead pursue thoughtful regulation of natural kratom rather than an outright ban, building on the successful emergency action taken against synthetic and enhanced kratom products. I believe the reasons for this request are critically important to public health and harm reduction in Ohio. Before anything else, I want to acknowledge and thank the State of Ohio and Governor Mike DeWine for taking action against synthetic and enhanced kratom products, particularly 7-hydroxymitragynine. Those products posed legitimate safety risks, and removing them from the market was a responsible and necessary step in protecting the citizens of this state. I believe this demonstrates that Ohio can address real dangers without eliminating natural kratom entirely. I personally use kratom to manage chronic pain, anxiety related to OCD, and depression. It has allowed me to function more consistently, maintain employment, and manage my mental health in a stable and sustainable way for over ten years. I am not using kratom recreationally, and I am not seeking intoxication. I am seeking relief, focus, and the ability to live a normal life. While I have never suffered from addiction myself, the reality is that kratom is very commonly used as a harm-reduction tool to help people in recovery manage cravings, both early on and throughout their often difficult, lifelong recovery. I have also lost many friends and acquaintances to the opioid epidemic, and this has shaped my understanding of addiction and the importance of accessible harm-reduction tools such as kratom. In my experience, and in the experience of others I know, kratom does not provide the kind of effect people seeking a recreational “high” are looking for. Where kratom has shown real value is as a harm-reduction tool, particularly for individuals dealing with chronic pain, PTSD, or those attempting to move away from opioid use when other options, such as Suboxone, are inaccessible or ineffective. It can reduce pain and withdrawal symptoms without causing severe impairment. Recent federal reviews distinguish natural kratom leaf from synthetic products like 7-hydroxymitragynine in terms of risk profile, noting that direct fatalities from natural leaf are extremely rare outside of poly-drug contexts. My concern about an abrupt ban is not only personal. Many people rely on kratom as an alternative to opioids, particularly individuals without access to consistent medical care or medication-assisted treatment. Removing kratom suddenly, without warning or a transition period, would predictably drive some of these individuals back toward far more dangerous substances. Kratom is objectively and significantly less dangerous than opioids, and removing it from the market could lead to increased demand for far more deadly alternatives, increasing the flow of dangerous drugs into our communities. This aligns with well-documented patterns observed when safer alternatives are removed without replacement, and I have seen the opioid epidemic continue to claim lives when people lose access to options that help them stay safe. I strongly support regulation. One of the most significant risks surrounding kratom has long been the sale of untested, poorly stored, and potentially adulterated products at

			gas stations and head shops. This is a legitimate public health concern and one that should be addressed directly. Regulation that enforces testing, labeling, age limits, and product standards would protect consumers and reduce harm far more effectively than prohibition. I also urge caution regarding timing. Whether the Board moves toward regulation or a ban, a reasonable transition period would allow kratom users to consult with their doctors and, if applicable, their sponsors. This could help prevent unnecessary suffering, backsliding into addiction, and, in the worst cases, becoming another victim of the ongoing opioid epidemic. Unlike opioids or other highly dangerous substances, natural leaf kratom is not associated with mass fatalities, making careful and deliberate policymaking both appropriate and necessary. I have followed kratom policy discussions in Ohio closely for many years and actively participated in public comment and outreach during the 2016 federal temporary ban attempt, as well as Ohio's 2018 discussions on this issue. These experiences reinforced for me the importance of approaching this topic with care, transparency, and meaningful input from those directly affected. An outright ban, particularly one implemented quickly and without sufficient notice, would push individuals toward unregulated sources, increase contamination risks, and lead to worse public health outcomes overall. Regulation allows Ohio to control safety while preserving access for those who rely on kratom responsibly. I also support legislative efforts such as Senate Bill 299 as a balanced model for thoughtful regulation. Kratom is not a miracle plant, and no such thing exists. However, it is a meaningful source of relief for many Ohioans, including veterans, individuals in recovery, chronic pain sufferers, and those living with mental illness like my own struggles with OCD and depression. I would welcome the opportunity to provide additional context, answer questions, or share further perspective by phone or email if that would be helpful. My email is j.damron454@gmail.com, and my phone number is available upon request. I am deeply informed on this issue and genuinely believe that constructive dialogue between policymakers and well-informed citizens leads to better public health outcomes. Thank you for the opportunity to submit this public comment and for your time and consideration. Sincerely, Johnny Damron Northeast Ohio Resident

Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am writing to you regarding the recent Ohio pharmacy boards recommendation to schedule Mitragynine as a schedule 1 substance. I am highly concerned as I use the plain kratom leaf powder to maintain my sobriety. Since 2017 I have not touched online prescription drugs and alcohol as I have kratom to thank for helping me through the process. I did go to treatment clinics and they prescribed antidepressants and Suboxone. The side effects were terrible and I felt trapped under a new addiction to the prescription drugs. Kratom has saved my life as I don't wake up in withdrawal and I have been a productive taxpayer since 2017. I think the synthetic crap should be banned. I didn't even know about that stuff until recently. Please consider a public hearing before implementing this rule. Thank you, Dustin Shetler
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Normal, ground leaf Kratom has saved my mother's life. It helped get her off of opioids and stay off them. The extracts are dangerous especially when horrible companies mix that extract with other chemicals but the natural plant material is safe and life saving
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I completely disagree with the total removal of Kratom. It needs to be regulated and sold as the grounded down natural leaf its self, and to keep the synthetic form out of stores. I can't mention it enough how this plant saves lives when used correctly. There needs to be a better understanding how this plant works before jumping to removing it completely, which will affect many people who need it for all they're beneficial reasons. I used it to get my life back in order and away from alcohol and drugs and now only use it was i feel the urges to use again. Please don't take this away from us!!!

Mount Vernon	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	As a believer in limited government I believe that restrictions like this are a violation of our constitutional rights. Those rights should be left to the people. As a believer in a representative government I believe that unelected boards should not have the power to take away our rights. Something like this should be only enacted by a vote of the people. This board is already on the wrong side of history by restricting CBD products 10 years ago, and you should stop meddling in plant based products. I also believe that Mother Earth Gaia gives us plants to consume as use for our needs and plants, whether kratom, cannabis plants, or mushrooms, should NEVER be limited in their raw and unadulterated forms. Limiting kratom concentrates is understandable, but not the dry leaves of the plant. This is a violation of our freedom of religion, whether you espouse a pagan belief system, or a Abrahamic belief where it is clear in the Holy Bible that man was given dominion over the earth, including it's plants and animals. As the son of an addict, I have been impacted by drugs like cocaine, heroin, and legal opiates. I have also seen people come off of heroin and opiates with kratom, leaving a life of addiction and incarceration and becoming useful members of society. Unless you have been impacted by addiction yourself, you have no right to limit the use of a plant, when your legal opiates are far worse offenders. Look at the stats comparing ilicit drugs, legal drugs, and kratom and you'll see there really is no comparison. Your egos will take this away and lead some to far worse outcomes on truly hard drugs Prohibition is wrong, as proven in the 20th century with alcohol and is still wrong today for any plant. You are on the wrong side of history and should not be doing the bidding for the beliefs of a lame duck governor. Just as SB 56 will be overturned, there will soon be a major push to amend the Ohio Constitution to prevent this type of prohibition on plant based products. Do not be on the wrong side of history.
Saint Clairsville	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	As an Ohio citizen and a social worker, this ban on kratom is unconscionable. Kratom is a completely safe, natural substance, that helps with so many chronic ailments, including recovery from addiction to the opioids you are baselessly comparing it to. It doesn't impair judgment or cognitive function. It does not get you high. It is non-addictive. Any withdrawal symptoms (if any) are no more than what one would experience from caffeine. Classing this harmless substance as class 1 would cause irreparable damage to the people of this state. I implore you to retract this decision.
Loudonville	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	We need kratom! I have been clean and sober for 8 years now thanks to kratom. Dosed right it helps reduce pain, anxiety, Improves mood, Energy and overall helps people go about their day to day life feeling normal, healthy, and happy! Standard government issued Drug alternatives are not the answer! Plant based is!! God Put plants on this earth to help heal and cure people for a reason

Big Prairie	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I struggled with opioid addiction for a long time. Kratom is a large part of how I quit. I've been sober for 5 years. I'm now living a productive life while taking only 3 kratom pills per day. I do not crave more than that and in no way do they get me high. They do fill the huge void left inside of me after years of destructive behavior while using. I only take natural kratom. I have no interest in anything else. If you ban kratom, it will be the final nail in the coffin for me when it comes to my belief in the medical community. You all promote things like oxy contin and Suboxone(I've tried both) which are very dangerous and do not work and then try to ban a natural product like kratom. It's bullshit and you should be ashamed of yourselves. But we all know my story doesn't matter, money talks and you all are slaves to the all mighty dollar! ✌
Uniontown	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	This is in response to the pending ban on Kratom. Kratom has helped save my life and improved the quality of my life. I am able to balance my family, work, and the rest of my life without resorting to any other substance. I would say that people using natural Kratom are not trying to get “high”. We’re trying to get by. In 2013 my orthopedic surgeon prescribed me over 130 OxyContin pills and I became addicted. Then I went to online prescription pills and alcohol, I was severely depressed. Kratom has put a stop to that since 2017. I am able to excel at my job and I’ve been a productive member of society due to this plant. I do fully agree on the ban on synthetics and improve regulation. Thanks for any consideration and reading this. I am disappointed that the pharmacy board would ban plain kratom leaf. I totally agree that synthetics and 7OH should be banned. I myself got off of alcohol and online prescription drugs by using Kratom leaf. And it has helped many others. You have taken that away.
Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please reconsider, I've seen Kratom change quite a few lives for the better. I have seen people i love return to normal life drinking this as tea. Please rethink this as I'm scared for them. I do not want a black market, this will create that. I do not want to see people I love back on street drugs, this will happen. You are supposed to be about science, but you surely have not analyzed your decision. Kratom saves lives and I have witnessed it myself. I will be back in medical bankruptcy with a tackle box of medicines filled with side effects. Please have empathy.

Harrodsburg	Kentucky	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	As an RN at OSU Medical Center, I am begging you to not ban Kratom products. I have patients who were able to stop using illicit drugs, while managing withdrawal symptoms and chronic pain patients totally stopping pain medication, by using Kratom products. I have seen a huge increase in autoimmune diseases that debilitate patients, since I started my career in 1990 and they are left without viable options. We encourage a population of people that finally chose to stop IV drug abuse and Kratom has saved them. Please, reconsider limiting Kratom because I know it will hinder the health and wellbeing of thousands of people.
Fairfield	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Natural mitragynine has helped me and and dozens of people in the community quit not only opioids but alcohol, benzos, and other psychedelics with no adverse consequences. In our opinion, classifying it as a Schedule I would be the ultimate buffoonery.
Delaware	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am writing to share my experience as a long-term consumer of natural leaf kratom. After years of struggling with the side effects and social stigma associated with prescription painkillers, I found that unadulterated, natural kratom leaf offered a path to recovery and stability. It is important to distinguish between the natural leaf and modified, high-potency isolates like 7-OH. While I support the regulation of altered products, the natural leaf has been essential to my ability to maintain long-term employment and cognitive clarity. It allows me to manage my pain effectively while remaining a productive and focused member of the workforce. For many like myself, natural kratom is not the problem; it is the solution that replaced more harmful alternatives. Please hear us a leave natural powered and leaf kratom alone.
Pittsburgh	Pennsylvania	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	As someone who was saved from Alchohol Withdrawal seizures by Kratom and have led my life since then in stability while taking this botanical,I suggest you guys stick to banning just the 7OH,without Kratom I'd still be an everyday all day drinking alchoholic,delirious to the world,not taking care of my family,since I'm switched from Alchohol to Kratom I've been a less menace to society,I've actually became a workin class member of society and actually engaged into my society unlike when alchohol was giving me social anxiety and anxiety problems,maybe y'all should really he focused on alcohol and hey even energy drinks ecspecially since the one chair member said anything not FDA approved,well energy drinks aren't FDA approved either huh? FREE THE LEAF BAN THE SYNTHETIC!
Sandusky	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	This plant (not 7oh), has gotten me a new redirection in my life. I now own a beautiful home, unionized full time employment, and fulfilling relationships with family. Before I was just another person out there either on pills or living unstable on Suboxone. I've been a daily user for over 11 years now and perfect health. I don't want to be a criminal for helping myself through life. I completely understand these type of results are not for everyone. That's why regulations should be put in place. Age requirement, no extracts, no 7 oh. If this does in fact become illegal I have no idea what I will do. I really don't want to be another Suboxone customer. I definitely don't want to be a criminal and lose my career. Ball is in the court of the BOP. (You probably did not even read this.)

Toledo	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I agree with banning synthetic Kratom but THIS ban on natural Kratom came out of nowhere. I see your release has extremely outdated and wrong scientific information. The FDA did a study, didn't you get a copy? Kratom saved my life. I was an addict from the age of 19-32! It saved my life. I am not addicted to it, whatsoever. I've been Soper for 13 years, and I don't take it everyday, I don't take it every month, and rarely take it yearly. Your prohibition is literally going to kill people. They will recourse to street drugs, or worse. You need to treat people like human beings. You seem to be pressured by an outgoing Governor to do this, which is sad. I will be forever thankful that Kratom was there to save my life from utter ruin. PS: there is absolutely no "HGH" whatsoever. You banned the synthetic products, Frankenstein chemicals, just like you did with marijuana, and that is sufficient. Marijuana is legal, despite our politicians attempting to roll it back over and over again. In this, you will be on the wrong side of history if you persist. Their lives are on your conscience.
Toledo	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	As a young child, my family and I watched prescribed opiates steal my father's soul. Opiates so carelessly prescribed by doctors we trusted and approved by an organization we trusted. His reliance on those drugs for pain relief only put him at battle with life or death. Seven years of rehab in hopes to cleanse him only led to him making the final decision to end his life. He chose peace over the power opiates had over him. The very drugs approved and carelessly distributed by our government. Fast forward 12 years later, I now work for a company that sells kratom. I've heard hundreds of local customers with similar stories to my father. Normal people who had gotten hurt on a job site or in a car accident who were prescribed opiate medication. Doses carelessly increased by their doctors as they built a tolerance. However, at the end of their ropes they found kratom not death. Kratom has helped innocent people find their way back to a normal life after the war our government waged. They found a natural herb that allowed them to be present with family and friends. A natural herb that allowed them to take back the reins that controlled their life. Back from the hands of opiates. Those that were blessed for the experience of finding kratom, I forever envy. As I'll forever wish my father had found that same path. In a world were all kratom is banned, innocent lives will continue to be lost to the opiate epidemic. Wash the blood from your hands instead of adding more. - Jenna S. (25)

Toledo	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi there. I have been using Kratom safely for quite some time. Previously, I was addicted to prescription medication, and then Suboxone, as doctors refused to help me wean off. I took things into my own hands and weaned off of all pharmaceuticals and completely got my life together. I still take a very tiny dose of Kratom daily to help with some lingering bowel issues (after a complete colectomy), and haven't abused any medication since February 28, 2014. I am finally living a full life and I am a well-respected and productive member of society. Kratom, if used safely, can be life-changing. I don't plan to be on it forever, but it has helped change my life. I fully support smart science-based safe regulation and getting the tainted and spiked Kratom off the market. That said, I do not think all Kratom should be criminalized. If purchasing from a reputable company, it can be used safely and responsibly, just like anything else. Please hear our voices. Really read our life-changing stories. I was a mess a little over 12 years ago, and had been for decades. I never thought I could live a life that I have now. And while I can't credit all of it to Kratom, it did help me enough to get on the right path. Thank you so much for reading and listening. :) Blessings, Christie M
Toledo	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am writing as an Ohio resident to share my personal experience with kratom and why I believe access to it matters. Over the past year and a half, kratom has played a meaningful role in helping me stabilize my life and maintain recovery. It has helped me manage cravings, improve daily functioning, and stay productive without returning to substances that were far more destructive to my health, my family, and my community. During this time, I have remained employed, engaged in my responsibilities, and focused on personal growth and accountability. For me, kratom has been a harm-reduction tool—not an escape. It has allowed me to choose stability over relapse and progress over regression. Removing or severely restricting access would not eliminate risk; it would increase it by pushing people like me toward far more dangerous alternatives. I support reasonable regulation focused on consumer safety, quality control, labeling, and age restrictions. Those measures protect the public without punishing responsible adults who are using kratom to improve their lives. A ban or overly restrictive rules would disproportionately harm individuals in recovery who are trying to do the right thing. Please consider the voices of people with real-world experience. Kratom has helped me stay on a healthier path, and I respectfully ask that Ohio pursue balanced, evidence-based regulation rather than prohibition. Thank you for the opportunity to comment and for considering my perspective.

Toledo	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has literally saved my life. I used to abuse prescription drugs, and when I could no longer get from a doctor, I turned to the streets to buy anything anyone was selling that was even remotely similar, which caused so much harm. I was working only to buy my addiction and things only went down hill and got worse for me, worse for my family as I am a single mother of four. And then I heard about Kratom and decided to try the tea. Not only did this help my withdrawal from the opiates, it help to alleviate my pain symptoms and depression. I started healing from the inside out and slowly but surely I became the mother/human being I am supposed to be. I do not abuse Kratom and I am not addicted to it. Kratom has helped me as I no longer need pain pills for pain or to cope. I am not depressed. I am enjoying my life, good job, good home, my family is happy. I wasted so many years of my life being addicted to opiates (11 years) and it feels amazing I am no longer living in that dark world. I have spoken with my children and I am honest with them and I teach them right from wrong. I do not like that teenagers are able to easily get kratom and abuse it, resulting in their own deaths. Parents must pull together and have those uncomfortable talks, as this type of things starts at home. Banning Kratom or scheduling it is not the way too go. More people will harm themselves more than ever before if Kratom is criminalized and THEY WILL turn to the streets and start using again anyway they can by any means necessary if this goes through. Please do not do this. Again, Kratom has saved my life. I am asking that you please do not do this. Kratom has saved my life because I was addicted to prescription pills and drugs and I may have lost my life my children my job everything if I did not find out about Kratom. For the teenagers who have purchased Kratom and misused, this issue has started within their home as their parent must take responsibility for why their children went searching for something easy to take to mask what they are going through. I understand tragedy and trauma, however this rule you are proposing will be more harmful to us that truly needs kratom. Does the government/world truly want everyone to just be messed up on worse and figure out other ways that will indeed be harmful and possibly not safe? If this law makes it, people will find other ways illegally and possibly retreat back to more harmful substances therefore never healing at all. Families will be torn apart. Don't do this. Find another way because it starts at home and parents have to do the work, even more so than before.

Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I really am at a loss how people are moving to ban the one drug people like me who have had opioid problems have used as a solution to stay off harder, deadlier opiates. So many people are dying (including multiple close friends), and we have legislation going through to ban the safest opiate of all? The goal should be harm reduction, not no tolerance, total abstinence, lock you up if you dont follow the rules mentality, we know it doesn't work. We are now in the position 50 years after the start of the war on drugs and there is no end in sight. The goal is here is for people who either have had problems with opiates or just love opiates to have solutions that wont kill them if they measure it wrong. I have used kratom safely for around 10 years now, and dont abuse it, get it from a safe, third party tested supplier, and now have a great job and kids and family and friends and life keeps getting better. Even 7oh, although addictive, is so much safer than street opiates its not even close. People are always going to have trauma or be reckless or just want to escape from life. Keeping solutions legal that dont kill them and/or put them in prison for life is not even a debate. Adults should have sovereignty over their bodies, and we should not make suppliers of kratom, a radically safer alternatives to street opiates, illegal.
Steubenville	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Im writing my opposition on the scheduling of Mitragynine as a controlled substance would ban kratom and cause harm to those who rely on it, this action goes beyond reasonable regulation and eliminates any pathway for reasonable access, doing so would push so many ohioans back to other harmful substances just like when taking away 7oh ect , many of us use these herbs as harmreduction tools , chronic pain to live normal lives, these botanicals have givin me a life when Pharmaceuticals have FAILED me, I suffer from Treatment Resistant Anxiety, Depression, PTSD, Chronic Pain & S.U.D , Kratom/7OH have bin the only things that's giving me my life back , and scheduling these have and are taking my life away from me, please do not move forward In the scheduling of Mitragynine and also please DO NOT keep the ban on 7OH & other Alkoloids permanent, I need these to remain accessable to live my life and function, thank you for taking the time to read, be well , God Bless Without this product there will be a lot more people relying on street drugs and a lot more overdoses.
Paducah	Kentucky	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not confuse the natural form of kratom with the evil synthetic form of 7-OH. They are far from the same thing. So many people leave hard drugs whether it be meth, fentynal, heroin, or other dangerous drugs and begin a journey to sobriety using kratom. Kratom is dar from a hard drug. It is not even close to Marijuana. I've never met someone who starts kratom to help themselves and they end up worse. Many of your vets also use it for healing.

Miamisburg	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am someone who has struggled with opiate dependency since I was in high school and am currently in my late thirties. I overdosed and nearly died multiple times from fentanyl derivatives. In 2018 I was on suboxone and was working then got kicked off my medicaid insurance for making just a tiny bit too much money. I was forced off the suboxone because I couldn't afford it. So instead of getting back on hard drugs I found kratom. Since then I have been able to get my life together and have the best employment I've ever had and am the most stable I have ever been. I'm sure there are many thousands of people that are in a similar position where we have found stability in our lives thanks to these substance's and taking them away is guaranteed to cause problems and destabilize people that have been using this plant for close to a decade. These substances should be available to adults that are educated on what the side effects are and choose to use. Even 7oh is very safe it doesn't suppress heart rate or breathing like traditional opiates. 7oh came onto the market in around 2022-2023 and looking at the national overdose statistics overdoses have gone down exactly at the same time when 7oh went on to the market. Whether people have opioid addiction issues or pain problems this is a safe solution for people and taking it away will result in forcing large numbers of people to street drugs and overdoses will start to increase again. These products should be available we need good quality control and education and maybe don't even allow it to be sold at places like gas stations maybe online or specialty dispensaries only. Taking these substances away will create a void that is guaranteed to be filled and it will be filled by far more dangerous drugs.

Wilmington	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, I am a single male wanting to comment on the ban of mitragynine, I live in a small rural village in Ohio with not much of anything but I can walk 5 minutes up the road and purchase a beer which is a killer. Everyday people abuse and misuse alcohol and in a whole mass people die because of it. The people know this people know that you can't drink and drive and know that is causes health issues and is far more dangerous than mitragynine. In safe doses mitragynine is very useful and helpful alternative for people look to get off of alcohol or liquor, it's useful to those looking to get off hard drugs as well and if more people knew then then I believe it would help a lot more as well. It's hard in small towns/villages to go to the Dr office and get the medicine they need for whatever they have going on for multiple reason which it being no insurance or too expensive or other reasons but for people including myself they can use mitragynine for anxiety, pain, headaches, stress the same reason why people use alcohol or prescribed drugs. I truly believe mitragynine needs to be studied more over personal experiences and long term effects before banning it. Doctors believed cigarettes were healthy and now it's the leading cause of lung cancers and COPD. Mitragynine doesn't cause psychosis or hallucinations unless people have other leading disorders and people need to look into what there taking and putting not there body before using and I think that is the biggest problem is people and taking it for whatever reason not knowing anything about it and the same with underage humans. People can get hurt or die from anything or taking to much of anything and I truly believe mitragynine is a lot healthier and safer then most things that is legal. It's far from heroin it's from from OxyCodones but it is helpful to those that want it but not everybody just like a soda, some people choose coke while others chose mt dew. Both are very unhealthy but taste good none the less. I truly believe it need to be up to the people to what goes in there body as long as they are paying for it just loke they do with prescriptions. Pure leave kratom is different then the 7hydroxymitragynine, 7-hydroxymitagynine is more potent more dangerous and more likely to become dependent on and it gives leave kratom a bad rep and people that don't know are getting it confused with each other.
Fort Thomas	Kentucky	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please reconsider the ban on Kratom. Kratom has helped me remain off of hard opioids for over 7 years now. The rise of synthetic Kratom such as 7-OH is absolutely concerning. I've never used that nor any concentrates. I have only used the loose ground leaf. If you've never tried it it's hard to explain, but it is genuinely about as strong as coffee. It gave me just the edge I needed to be able to comfortably get sober from hard opioids like Percocet, OxyContin, etc. It has genuinely saved my life, my marriage, my family, I have been able to prosper. I make $180K a year now, before Kratom (when I was using) I was practically homeless and working odd jobs. I know my story is not the same as everyone's but I haven't met a LOT of people around NKY/Cincinnati with similar stories.

Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	By the time I was 26, I injured my back and had two back surgeries that left me completely changed. Like many I had become addicted to the pain killers I was prescribed. I went from being a very physically active person to a shell of myself. Lost my very well payed factory job due to my fear of returning to physical labor. Became suicidal and turned to alcohol. In 2018 I found natural kratom leaf and it changed my life. I am currently not on any prescription medications, when once I was prescribed at least 6. It helps ease my pain without making me feel “high” and sedated like opiates had. Kratom does not have me feeling withdrawals, like the opiates and Lyrica did. Since I started medicating myself with kratom I have gotten my life back. Although I will always have back problems/pain and need to be more careful than most people, I live a normal life. I work a 9-5 and I make time to exercise. I even shoveled my car out of the snow today (with the help of a back brace). Since these synthetic versions of “kratom” have been developed, society seems to think kratom is dangerous. But the “products” they have heard terrible things about are not the same as the kratom plant that I have been consuming since 2018. The kratom I know is a dried and powdered leaf. I add it to my shaker bottle with water. I consume about 2 teaspoons a day, sometimes more, sometimes less. Some days I don’t consume it at all. I have never been in fear for my health when consuming kratom. I believe alcohol and energy drinks have much worse side effects. Please know that the natural kratom community supports regulation. And please don’t take away my right to care for my body and treat my chronic pain with a plant that has helped me get my life back. Thank you for your time and God bless.

Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I wanted to reach out to you and express my deeply rooted concerns by a statewide Kratom ban without limitation. While I would first urge you to look the actual science, safety, and benefits of the product, which many organizations have publicized and should be available to you, I would like to explain to you the severe repercussions if the State now, suddenly, unexpectedly, completely bans all Kratom products despite the FDA's Kratom Consumer Protection Act illustrating the consistently safe use of Kratom, which benefits our State in a number of ways. Please - I just ask you to look at the benefits and not just view this as a drug that people to get high. It really isn't and state-published studies even go so far as to encourage the safe use of Kratom. Let me share my story, which is just one in thousands of residents of your state that would be endangered by an outright ban on Kratom. Before I do, please PLEASE look into the actual science, as Ohio's bill seems to assume safely manufactured Kratom products, made to confirm to FDA regulations, is the equivalent to 7-Hydroxyzone, whcih was rightly banned given its heavy effect on the opoid receptos, unlikre Kratom. They are not the same, Kratom can provide a sustainable quality of life for people with chronic pain and it has legitimately not only gotten hundreds of people to get off heroin, fentanyl, and opioid pill, but has even allowed them to maintain their sobriety WITHOUT THE STATE HAVING TO PAY FOR METHEDRONE / SUBOXONE TREATMENT, OR INCARCERATOIN as the Kratom is purchased by the consumer in accordance the federal manufacturing guidelines. PLEASE - Kratom is NOT 7-Hydroxyzone and it is not an opoid, though provides pain relief to people who need it and who either can't be on chronic pain medication or who choose not to so as to avoid dependence. Now let me share with you the story of my brother and family. My uncle overdosed on heroin in 2011. My cousin overdosed on Fentanyl in 2021. This was before Kratom was as well known as it is today in terms of helping people get off hard drugs, specifically heroin and fentanyl. And I also nearly lost my olde brother to fentanyl after 2 overdoses. The 2nd ovedose I was in the house with him and went to his room after not getting a response about dinner, and the sigh of his lifeless body, slight vomit stains on his shirt, no mvement, will forever haunt me. By god's grace I had ordered Narcan for this exact situation and ot this day I thank God that I didn't give it to him too late. PLEASE READ HOW KRATOM SAVED MY BROTHER'S LIFE AND PLEASE, PLEASE DON'T BAN THE ONLY THING KEEPING HIM OFF FENTANYL - PLEASE DON'T LET MY BROTHER DIE OVER A MISUNDERSTANDING OF THE DANGERS THAT YOU BELIEVE KRATOM POSES. I beg you to take a humane and scientific approach, and look at all the research that has been done to test the safety and efficiency of this substance as a way to get off heroin COMPLETELY. Education is important, because by banning Kratom, all that will happen is people will go back to heroin, pain pills, fentanyl, and the effect will be to kill our own state's citizens. In brief, this is my brother's story: My brother began using heroin in college early 20s. He was hooked the first hit. was an addicted heroin user who overdosed twice and had a long criminal history (I do not know the extent of his crimes). He was on a path to sure destruction and openly admitted he had no problem with shoplifting, which turned to burglary, and dropped charges of robbery. To feed his heroin / fent addition. My family (as well as society) wrote him off and did not expect him to turn his life around. I introduced him

			to Kratom and explained how it could help him overcome his addiction. I wasn't hopeful, but had read somewhat amazing stories of how it has helped others kick the worst and most lethal additction that is DESTROYING OUR STATE AND OUR PEOPLE. Within a matter of months he was completely off heroin and actually got a job and began contributing to society. It helped alleviate his low back pain that got him hooked on opioids in the first place and helped manage the heroin withdrawals that he was never able to overcome on his own. He is now off heroin for good and works as a dispatcher for a private ambulance / medical company. Without Kratom, he would be either dead or in prison. Banning Kratom outright is not necessary and would destroy people's lives, including my brother's. The same purposes that you wish to achieve by the ban, protecting consumers from dangerous products, can be achieved simply by regulating it to the extent necessary to prevent dangerous substances from being added. Numerous states and the federal government already do this if you want to model it after that. Banning Kratom would only result in many people turning to Heroin, which would destroy families and inevitably cause more harm to society than good. Think of the economic impact as formerly productive people become junkies and quit their jobs, the increased crime rates associated with heroin addiction, and the inherent risk of death that heroin users face every day they use. Or really fentanyl since that's a horrible epidemic that OUR STATE has AN ASWFUL REPUTATION FOR. You will just make that worse with a ban implemented without actually trying to consider the benefits of Kratom and the awful consequences of what you are proposing to do (ban Kratom completely). Please think of the human consequences when you consider your proposed ban. Please also thoroughly study the sceience and how other states have safely and effectively dealt with this issue, none of which included a complete ban, but rather safer regulation of the substance. Just think War on Drugs as an example of what purported good intentions can lead to. A Kratom Consumer Protection Act is the way to go, please consider this alternative that will save hundreds if not thousands of your state's citizens. Kratom saved my brother's life; he was an addicted heroin and then fentanyl user who overdosed twice and had a long criminal history (I do not know the extent of his crimes). He was on a path to sure destruction and openly admitted he had no problem with robbing people with more money than him to support his habit. My family (as well as society) wrote him off and did not expect him to turn his life around. I introduced him to Kratom and explained how it could help him overcome his addiction. Within a matter of months he was completely off heroin and actually got a job and began contributing to society. It helped alleviate his low back pain that got him hooked on opioids in the first place and helped manage the heroin withdrawals that he was never able to overcome on his own. He is now off heroin for good and works as a dispatcher for a private ambulance / medical company. Without Kratom, he would be either dead or in prison. And he would be one of thousands of this state's citizens. Please - I beg you. Have compassion for the lives, safety, and health of your citizens. All I ask is that you look into all the research, science, other state's approaches and results, benefits. A person can take Kratom and function in society like my brother. You take that away from them cold turkey, they go to heroin or more likely fentanyl and they either

			signficantly risk death or simply become a criminal and junkie that our state, our citizen's tax money, has to support. Please - drugs are 100% bad. Heroin, fentanyl, meth, crack. Those are properly illegalized because they have no to minimum therapeutic benefit. Please don't take the extreme and far-reaching step of classifyign mere Kratom in that same category. I say this both because I love my brother and can't imagine life without him. But i also say it from a standpoint of having actual knowledge of this topic and I pray beyond hope that you listen to the science, consult unbiased medical professionals, look at examples of other states. Crackng down so intensely on a plant that has helped people iwth both chronic pain and successfully quit fentanyl will not have the positive effect you think it will. Rather, the opposite. In short, please don;t unnecessarily expose your citizens to overdose, don't expose your citizens to increased junkie crime to pay for their next hit, and please just use logic and look at the research and science before making such a rash and far-reaching decision. Please
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom helped my daughter get off street drugs and painkillers. I have never seen her high on Kratom like I did when she was addicted to street drugs. When taken reasonably by an adult from a responsible dispensary kratom saves lives. It should not be a schedule one that will only increase the opiate epidemic in Ohio.i fear where my child will end up if it is banned don’t make the mistake that was made when previous things have beeen banned.

Chardon	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	My name is Matt and I live in Chardon Ohio. I'm a business owner and a registered voter. I have been using leaf Kratom for over 5 years now and has done nothing but add a positive results to my life. It has helped me stop drinking and better my life. According to the World Health Organization (WHO), around 2.6 million deaths per year were attributable to alcohol consumption (from diseases, injuries, and accidents) based on the most recent global data. With this being said I feel like kratom is a better alternative to alcohol. I highly recommend following suit with Florida, who passed the American Kratom consumer protection act. This gets the bad actors out of the way, and makes used to regulate the plant in its pure vegetation form, the way it should be used. Please save the safe kratom plant and get rid of the chemically modified harmful version that people are coming out with. Kratom At its natural form is safe to use. Thank you for your consideration. Kratom is a natural plant that has been adulterated by bad actors. The leaf, when used responsibly, has been a game changer in my life and in many of my friends life as it helps me focus and provides energy without caffeine jitters. I use Kratom by brewing my own tea - made simply of the leaf powder, lemon juice, and cinnamon. There are minor trace amounts of naturally occurring 7OH in the tea. The plant becomes a problem when bad actors take the plant and adulterate it to cause severely high levels of 7Oh - the addictive alkaloid in the plant. The plant was never meant to be used this way. I understand the need to regulate this plant, and I propose following the direction of Florida who recently passed the American Kratom Consumer Protection Act which bans synthetic 7OH but allows for responsible use of the plant in pure vegetation states as well as extracts from the plant with trace amounts of 7OH. This solves the problem as it won't be accessible at gas stations and vape shops since they do not brew the tea. Kava bars across the country serve Kratom tea and the lives it's saved are countless. Previous alcoholics find a place of community other than the bar. They relax with the tea, and since it's not inebriating, they can drive home and be amazing parents and family members. The concern here is valid, but banning the plant entirely is a negligent act - allowing for the safe and structured use under the Kratom Consumer Protection Act is the right move and I fully support that. I am a business owner, mother, wife, real estate agent and in a high income bracket. I vote at every election and this decision will greatly impact my voice about the Republican Party - and my voice is loud. Please reconsider. Thank you. - Affluent mother from Chardon Ohio
Evansville	Indiana	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Keeping natural powder Kratom is key to helping with the nations opioid crisis. This has helped so many people I know as well as myself with things far beyond opiate withdrawal!

Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I oppose kratom bans as well as any sort of legislation that attempts to limit the public's access to it for many reasons. The first reason, probably being the most important in principal, is freedom of choice. Evidence shows that it's extremely safe. Many over-the-counter medications are actually more dangerous than kratom in the sense that they have a much narrower safety margin before they become toxic; meaning it's more difficult to "overdose" on kratom than many over-the-counter medications. The second reason being how many ways it has helped me and the degree to which I've benefitted from that help. I depended on opioids for pain relief for several years. It wasn't long before I was physically dependent on them such that without them I suffered horrific withdrawal. I eventually also found myself psychologically addicted to them. I began taking more than prescribed. When I'd run out early, having no legal way to get more, I desperately looked for any possible source regardless of its legality. This quickly led me to spending time in both jail & prison. Shortly after my release from prison I was lucky enough to hear about kratom. I had my doubts that it would actually be of any help, but not wanting to repeat my past mistakes I gave it a try. I had to take quite a bit more than I originally expected but I was able to achieve pain relief. If I'd been lucky enough to discover kratom earlier there's a possibility that I would never have went through much of that season of suffering in my life. No over-the-counter or even non-opioid prescription medication was able to relieve the pain and I'd found a supplement that did so surprisingly well. It doesn't completely eliminate the pain, but it helps to an astonishing degree. I've been taking kratom for several years now with no issues. Originally I was taking it for the pain relief, but I also noticed some wonderful unexpected benefits. I also suffer from crippling depression & anxiety. I found that kratom helped tremendously with both. It definitely did not eliminate them completely, but it helped much more than any of the dozens of prescription medications my various psychiatrists had me try over the years. I also found that I had more motivation & energy. I am by no means claiming it's any sort of cure-all, but I am genuinely astounded at how helpful it has been for me in these areas. If there's to be any regulation imposed on kratom I'd suggest it be similar to that of ephedrine/pseudoephedrine; age-restriction and ID requirements limiting it to a reasonable amount per month or other period of time. I also would not be opposed to quality control regulations (heavy metal & adulteration testing, etc.) However anything similar to an outright total ban I am completely opposed to.
Eastlake	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not ban kratom completely. I totally agree with banning the concentrated forms that aren't natural. The way they market and sell them is not safe. But natural kratom has saved my life from drug abuse. As it has for so many others. I would agree with making it only available for people over 21, but it is a much safer alternative to street drugs, and in my opinion, safer than suboxone or methadone. Kratom is the only thing that helps me stay away from hard drugs, and not have to be on prescription meds that make me feel like a zombie. Please rethink this ban. Let adults choose what they put in their body. Thank you

Indianapolis	Indiana	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom saved my life. I used actual dangerous opioids (such as heroin) for many years and was a 1-2 liter a day of hard liquor drinker for 10+ years. Upon my first consumption of Kratom, I lost the desire to do hard drugs or drink alcohol. I have now been sober for over 5 years. Before Kratom, I could not maintain full-time employment or have real meaningful relationships. It has helped me win my life back. If Kratom becomes illegal, I fear I'll once again resort to dangerous opioids and binge drinking to deal with chronic pain. On behalf of all chronic pain patients, we beg of you not to ban this miracle substance who saves the lives through harm reduction of so many lives per year. By signing this law, you're effectively killing thousands of people sending them back out on the streets to overdose and DIE. Pray to God, and ask what you would do if your child needed kratom due to excruciating pain. May Christ have mercy on your souls.
Cincinnati	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Any form of legislation attempting to block consumer access to a substance with no history of substance abuse fatalities or illness (despite false claims from some pharma paid organizations like Vice or the sensationalizing that occurs on social media) is inappropriate given the current climate of drug use in the US. Most substance abuse in the US is currently over the counter opiates and street fentanyl whose death tolls have only increased over the past decade. I have met many former veterans that were denied access to services and medications to assist with post-wartime stress and Kratom has been available for them to make it through their day-to-day, even get off hard substances they were forced to take when FDA approved medicine was not made available to them. Kratom restriction in all of its forms does more harm than implement any kind of regulation.
Painesville	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom, just like alcohol, when used responsibly is not an issue. Just like alcohol, when used in excessive quantities people can become addicted . But to ban something that is helpful in keeping people away from drugs and alcohol isn't the way. Unlike alcohol, Kratom doesn't make you lose your inhibitions. You are still able to be completely safe and mentally aware. The problem sometimes is with the consented oils, that are not regulated. Whole plant crushed leaf Kratom is not as strong.
Thornville	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not restrict people to buy kratom, it helped me get over a serious fentanyl addiction. I fear many Ohioans will relapse and get back on heroin or fentanyl if a full ban is executed.

Akron	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, I am a recovered victim of the Ohio opioid epidemic. The first time I picked up a needle was at age 16. The first time I buried a friend and overdose victim was at age 17. I received two felonies due to my addiction at age 20, one of which was stealing food because I was homeless and starving to death while living in a motel room with four other addicts. After I received my felonies, I was sentenced to a program in Florida that saved my life and allowed me to get the training necessary to become an addictions counselor. In the subsequent years I helped hundreds of men fix their life and addictions…but the loss of close friends did not stop. The last friend I lost (that I'm aware of) was at age 25 and he was the closest friend I had made since getting off opiates. He was a father of 2 and died due to an opiate overdose a day after he and I returned from a road trip to see a band in northern Florida. To say I am an expert in opiate addiction (both in myself and others) is a severe understatement. So, believe me when I tell you, this knee jerk reaction you are having to a substance you clearly don't fully understand and thus fear WILL cause many to die. To clarify I am speaking about plain leaf kratom and its safe extracts, NOT 7OH or any derivatives of the alkaloids found inside kratom. This attempt to steamroll legislation in order to enact a blanket ban on plain leaf kratom is shortsighted and goes against what other states with common sense kratom regulation and the FDA / peer review scientific studies say. Furthermore, the ban will cause many small businesses who sell kratom to go out of business, and push those using kratom for opiate withdrawals (quitting illegal or legal opioids) and pain management to go back to either using illegal alternatives like fentanyl or paying for legal "safe" alternatives like Suboxone or methadone that are 100 times more likely to be abused, sold, or cause physical addiction and overdose than kratom. Has the last fifty years of the War on Drugs and multiple attempts at prohibition of different substances taught our leaders nothing? Would you like to know what it feels like to quit the legal alternatives pushed by big pharma such as methadone or suboxone? It feels like your skull and the rest of your bones are melting….for weeks. The withdrawals caused by these legal alternatives are far worse than heroin and yet they aren't just legal, they are still actively pushed by big pharma in the state of Ohio. So now you would deprive people who want to get off prescription opiates and illegal narcotics by using kratom as a cheap alternative that is far safer with a far lower rate of physical and mental addiction because you fear it will be sold to children or that it is somehow more dangerous than all of the legal drugs you still allow to be sold like tobacco or alcohol despite there being no credible evidence (anecdotal at best) in favor of this opinion? Sidenote: I started smoking at age fourteen, yet tobacco or alcohol is never on the chopping block, odd. Perhaps Governor Dewine could clarify why this is the case before he leaves office. It is also odd to hear the basic go-to pearl clutching statement of the 90s (once regarding violent video games and children) always be used as an excuse to push unpopular legislation with zero evidence of it's actual danger to society…perhaps because it is an emotionally charged statement designed to get people to disregard what the actual facts are. Perhaps parents should be more involved in their children's lives and state regulation should exist to punish those who actually sell age restricted items to minors instead of making the restricted item illegal for everyone. I will continue

			with my normal statement now. Your attempt to do this ban is not backed up by science. The FDA knows this, the DEA knows this, even the Florida government of all places knows this, yet this regulatory board in Ohio seems to know better than all these organizations for some reason? It's no secret that Dewine hates kratom because it's clear he doesn't actually understand what it is nor its benefits to the people of Ohio, which is unfortunate seeing as how Ohio continues to be one of the worst states in America when it comes to the opiate epidemic. The science is clear plain leaf kratom and its extracts (again not referring to 7OH or derivatives) do not cause respiratory repression which is the primary way an opiate overdose kills. Cherry picking several cases that you think proves your point, despite nearly every deadly "overdose" involving kratom also involving a cocktail of other drugs in the user, does nothing but prove incompetence and bias in your decision. Mixing alcohol and ibuprofen (or most other things) will kill you, yet they are legal, children were eating Tide Pods not 5 years ago and yet they are also legal. Use common sense because the fact remains that hundreds of thousands of Americans (at least) safely use kratom daily across the US for a variety of reasons, and the majority would say their lives have been improved due to its legality. I want to also make clear that not once in my experience as an addiction's counselor did I ever meet someone (or see in my own addiction) who started their opiate addiction with kratom. Nearly all started and still start by getting a prescription from their doctors for legal opiates and then switch to black market narcotics once they can no longer get them from their doctor or are introduced straight to illegal opiates by friends (as I was). Those serious about quitting opiates either attempt to go cold turkey and suffer withdrawals or use kratom to help soften those withdrawals, those who want to continue to get as high as possible despite appearing "clean" will use methadone or suboxone despite them knowing the eventual withdraws will be far worse than heroin itself. Do not make this mistake in Ohio, do not cause people to look for alternatives after it is banned and end up dead or in prison or losing their small business because an Ohio regulatory board that was politically pressured by a governor who is not seeking re-election due to being unpopular made a biased decision whilst disregarding all of the current scientific facts we have about kratom. I am sure the subsequent opioid overdose numbers post ban will not be pretty and that'd you'd like to sleep well at night knowing you don't have unnecessary blood on your hands. Look to other states that have successfully regulated kratom, copy their regulations and ban the derivatives if you must, but for the love of God and the Ohioans who use kratom do not schedule plain leaf and its pure extracts as if it were meth or fentanyl. It clearly has medicinal value and it's clearly far safer than alcohol, tobacco, suboxone, methadone, or fentanyl. Lastly, I must make it clear that even comparing kratom to morphine in regards to psychoactive effects or addiction potential is equal to comparing coffee to methamphetamine. I will be happy to testify in person should the need arise. Do not make this mistake, I beg you. Signed, A guy who'd still have friends had they known about kratom instead of suboxone or methadone

Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am a recovering alcoholic that was near death and kratom has provided a safer alternative for me. I consume it every once in a while in a tea form as opposed to a beer while with friends. It makes me relaxed and social with no hangover. No fear of blackouts, getting sloppy or anything like what used to plague me. Also unlike alcohol I don't crave it when I don't use it for a while. Please consider changing or I will probably have to move to a different state to continue making alcohol sobriety a priority. Thank you for taking the time!
Willoughby	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I don't believe there should be a ban on Kratom. I believe it does have its place in healing and recovery, especially from alcohol or other drug abuse. Used in responsible setting the consequences and risk of overuse are slim to none. I think regulation is needed but a ban is not.
Akron	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I do not support the ban of kratom. Kratom has been life changing for me. I used to be about of control alcoholic, suffering from depression and dabbling in getting arrested. Once I discovered kratom, all that changed. My cravings for alcohol simply disappeared. Kratom made me feel whole and complete, without feeling like I needed to search out highs from drugs or alcohol. I am the healthiest I've ever been in my life, and I never thought I would have everything going for me that I do today. Kratom is a miracle plant. It does not get you high or ruin lives. It gives a sense of wellbeing and helps thousands of others like me. Not having access to Kratom would be catastrophic for my life and everhrning ive built.
Burlington	Kentucky	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am submitting this to request that you please do not ban kratom in Ohio. Kratom saved my sister, as well as others from a horrific opiate addiction. It is also a miracle and natural treatment for PTSD, depression and pain for some. It seems unfair and unjust to take this natural option from the citizens of Ohio, and I pray you reverse course on this decision and allow much further research and debate. Please reconsider and allow Ohioans a natural alternative to prescription and illicit drugs. Thank you for your consideration
Loveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	kratom has helped me become a functioning member of society by helping me get off alcohol in 2016. it also helps people get off heroin not just alcohol. please do not schedule kratom as a harmful drug it will hurt a lot of people not just my self but the people addicted to heroin as well. Please do not ban kratom it helps me so much. I used to be a terrible alcoholic and then found kratom helped me not desire alcohol. I am a functioning member of society thanks to kratom saving my life. Thanks.
Niles	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Dont ban natural kratom. It helped save my life & get me off of Suboxone and other worse opiates.

Dayton	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello. Kratom is scientifically proven harmless and it helps recovering addicts stay off drugs. It's also a natural pain reliever and energy producer. Any other information that says different is politically and financially motivated. Peace be with you. Dr. Tackett... First of all, I am a mother of two elementary school children. I have persevered over an alcohol and heroin addiction that lasted many years. When I was ready to take action and truly fight my addiction I first found myself on Suboxone. It kept me clean for a couple years but I couldn't escape the cycle of perpetual shame and low self worth that continues on with what feel like neverending clinic visits and irresponsibly led group therapies. I was still treated like a criminal and a lowlife at these places and was completely under the thumb of the clinic staff who had little knowledge of my disease. I knew I had to leave that cycle to pursue the spiritual, character driven work that was needed to become a healthy and whole person, with agency and meaning in my life. After a horrific month long withdrawal from suboxone five years ago, which is practically unheard of, I began using natural kratom to calm my opioid receptors. People who don't understand addiction would have the addict continuing to suffer and struggle, relapse, and repeat without leaning on another substance. However, I also have CPTSD and extensive trauma, as most addicts have to deal with, and children to care for. This route would be unrealistic and non pragmatic. Addiction, especially to opioids, is never ideal in terms of solutions. The neural pathways around the compulsive behaviors associated with opioid addiction are deeply ingrained. This is where natural kratom has been such an effective tool for long term management of my disease. I am able to have the agency and dignity to purchase it with my own hard earned money as needed instead of being paid for by medicaid or the state like Suboxone. I don't have to drudge through the stigma and degradation of going to a clinic multiple times a month where I'm surrounded by desperate and often predatory addicts who are fresh off the street and not ready to change. These situations are not conducive to thriving in recovery for most. A practical benefit of natural kratom for myself has been it's safety. In times of stress and loss which would have triggered a life threatening relapse with other substances, I can use natural kratom with little to no consequences. My addictive behaviors will pop up during times of high stress no matter how strong my coping skills are due to the nature of the disease. Therefore, having natural kratom available to, frankly, cope, has saved my life. Not a perfect solution, I know, but a solution that greatly reduces harm and consequences in my life due to my disease. My doctor is aware of my use and the main issue she has with it, seeing how well it's helped me, is the fact that it is unregulated and could come with high(er) levels of lead and other metals and possible contaminants. She has me tested regularly for lead and I've never had any issues over 5 years of daily use. Having found natural kratom my life and my family's has improved dramatically. I have become the mother I always wanted to be. I have obtained a red belt in Taekwondo, become reintroduced to my religion and am in the process of reinvigorating a lost career. I believe the unintended consequences of a ban on natural kratom will result in more

			overdoses from fentanyl and other street drugs as the thousands of natural kratom users are forced to abruptly stop. In this state, desperation and fear will have many again having to find a quick solution through less safe avenues. The number of overdoses due to this will greatly overwhelm the number of alleged natural kratom deaths. Science based regulation seems like a no brainer for everyone involved. I empathize with parents who are scared for their kids. However, I would argue that natural kratom is far safer than alcohol, in terms of overdose rates. As we've learned over the years, prohibiting substances usually cause much more harm then good. Science based regulation is needed to protect everyone. Sales to underage individuals should have steep, enforced consequences. The product should be tested for safety and taxed like alcohol. To the people who have found out the hard way that natural kratom can cause unintended dependency, provide a label. Again, the same is true with alcohol if you have the genetic predisposition to addiction. What I fear most is the loss of something like natural kratom's availability and the criminalization of it's possession when it has been the only thing that has produced long term, uninterrupted sobriety from the substances that have destroyed my life in the past as well as creating a path forward for the life that I want and finally feel I deserve. I implore you to consider Science based regulation of kratom instead of a full ban. There likely will be more victims of the latter than the former I'm afraid. Thank you for your consideration.

Dayton	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	My son uses kratom to maintain a normal life, (Not 7-OH.) He goes to work everyday & has kept his own apartment for the past 3 to 4 years thanks to kratom. I would prefer him to not be on anything, but it is better than alternative. He is panicking right now that you are making all kratom products illegal. You could atleast give more of a warning so they have more time to wean off. This is very alarming for these human beings. He tried suboxine, & it took so much of his money. Is that why you are doing this, to make more money? Are you going to outlaw everything that has potential for abuse. Not things you make money on, I'm sure. It's all about money with pharmaceuticals. We learned that with covid!!! Overdoses have decreased with kratom, but they will most likely increase again if you pass Senate Bill 2. YOU JUST DON'T CARE!!!!
Mount Orab	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have been in recovery since March 3rd 2018. My drug of choice was heroin. What started all of this back in 2005, was a car wreck that rendered me in extreme pain which caused me to take prescription painkillers. I eventually lost my job which cost me to lose my medical insurance and therefore my doctor. Then I had to go buy pills off the street, that advanced to heroin. After I got clean, my pain still remained! I found pure leaf Kratom through a friend in recovery. It changed my life. I'm able to work full-time, provide for my family, stay clean and be a productive member of society because of this plant!
Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have been using Kratom leaf powder daily for the past decade. It has greatly helped me with anxiety and most importantly helped me significantly reduce my alcohol consumption. I agree that there are mitragynine products that are not healthy, or very safe, and their growth in popularity and ease of purchasing is a problem. For those of us that only use kratom powder, there is a big difference between synthetic products that contain the drug mitragynine and the actual leaf itself. Those products are typically not lab tested, and are very often not able to inform the consumer of how much mitragynine is in them. I would be a fan of regulation that is based in science, and whose goal is to hold companies accountable that produce harmful synthetic products or strong extracts that may not be safe or are addictive. but the majority of people that have known about Kratom for some time use it as I do, a couple teaspoons a day drank as a tea steeped in water, and the effects of which are milder than a cup of coffee but are still profound in their ability to ease those of us with overactive nervous systems. please consider not banning this substance, but regulating it.
Jeffersonville	Indiana	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom was a life saver for me, I used it to stop taking opiate medication for pain. Natural Kratom reduced my withdrawal symptoms. There's a big difference between natural Kratom and the synthetic Mitragynine being sold now. I'm all for banning the synthetic Kratom.
McKees Rocks	Pennsylvania	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Krathom has enabled me to eliminate opiates from my life. Please don't make this substance impossible to obtain. You will be hurting a lot of people & their families

Cleveland	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	7-Hydroxymitragynine has saved my life. After years battling a fentanyl addiction, that lead me to rehab, a jail cell, and a hospital bed throughout my time using. One of the many things that fueled my addiction is sciatic nerve pain that I would attempt to manage with fentanyl in the form of pressed 30mg "M-box" pills. 7-Hydroxymitragynine & kratom was what helped me get clean, as well as what allowed me to live a life free from the chronic sciatic nerve pain. The ban has torn them away from me, as well has many, many others. We are struggling to find alternative pain management treatments, 7-Hydroxymitragynine works, it saved my life and has saved many others. It is an essential tool for harm reduction and what the state is doing will 100% lead to overdose deaths, deaths that could have easily been avoided.
Columbus	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I completely understand banning synthetic products, but do not ban natural Kratom!! There has been a huge opioid problem for almost 20 years and natural Kratom is the key to stopping it! Unlike pharmaceutical methods, you do not get high off natural Kratom. Natural Kratom suppresses the withdrawal sickness allowing the addict to detox successfully! Fentanyl ripped through my entire family and even took my little brother! I know what it's really like and if it wasn't for natural Kratom I would have still been part of the problem! It saved my life!
Bellevue	Ohio	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	My name is Adam. I am a long time user of Kratom. I have over come opioid addiction with this natural plant. Kratom also helps my anxiety and depression. I don’t over use it. You can over use anything out there and become addicted to it. Even fast food. With Kratom, I have been living my life like I should be for the past 10 years. I have chronic pain and that is when I got hooked on opioids prescribed by my pain doctor. I had to go to rehab and once I got out I started using Kratom to help with the pain. I live pain free everyday with the help of Kratom. If you would make it illegal then I would be forced to try to find another way to help alleviate my chronic pain. I don’t want to go back on opioids and this helps that. Please, I am begging you, do NOT make Kratom illegal. I have a family and a career thanks to this wonderful natural plant. If you have any sympathy at all, do not do this. It would be detrimental to my life. Please, have mercy on me and keep it legal. Just make it so that you have to be over 21 to purchase it. It’s no different than marijuana or alcohol. Tax it if you must to bring in more money for your coffers. I truly hope you will take this into consideration. Thank you. You may contact me at anytime and I will discuss this with you.

Worthington	Ohio	4 - Other	Cameron mcnamee made it clear in an interview with channel 4 that the goal is not public heath but to get people on fda medication. I was total shock because The bureaucrats aren't even lying. It's not about public health.. so why have a honest debate when some back room deal has been done. It's really disgusting and everybody sees through it's why I believe The legislative bodies on our side. They know this isn't about public heath. Someone getting payment DeWine Cameron mcnamee thrive for change we will get to bottom of it in January As a nurse who has used natural kratom, I can speak to the real benefits it provides. For many of us, including myself, it has been a safe option to manage pain and improve well-being. Too often, we are losing options especially for elderly or young people who cannot afford frequent doctor visits or expensive medications. Banning kratom does not make us safer; it only removes a tool that has helped countless people. I question why this push to restrict kratom is happening now. Have the decision makers reviewed the studies on natural kratom? The research shows it is generally safe when used responsibly. I trust my medical experience and knowledge over bureaucrats who may not have direct patient care experience. Removing kratom from the market takes away a choice that many rely on for relief and quality of life. It's a bad decision back by corrupt bureaucrats PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	4 - Other	I am a professional mechanic who has worked in this field for many years. Over the course of my career, I have suffered from chronic pain, as many in physically demanding professions do. I do not like prescription pain medications due to their risks and side effects, and natural kratom has been the only natural remedy that has truly helped me. Quite simply, kratom has saved my life. A ban on kratom would negatively affect me and countless others who rely on it for daily functioning, pain management, and quality of life. I have used kratom responsibly for years, and I have seen firsthand that natural kratom is not the public health threat that is being portrayed.i question the Board's push to ban kratom when it has been legal for so long. I also question the motivations behind this action. Cameron McNamee of Thrive for Change has a clear financial incentive to see kratom banned. Once conflicts like this are exposed, perhaps we could have a fair and honest hearing or debate. But right now, the Board has zero credibility with anyone outside these inner circles. When we look into the backgrounds of those involved, it only adds to the concerns of corruption and undue influence. This is not about public health it's about interests that serve a few, not the many. I urge the Board to reconsider and prioritize transparency, fairness, and the health and well-being of Ohioans. I stand here to say plainly and without apology: locking people up for possessing or using natural kratom is stupid. It's counterproductive, wasteful, cruel, and flat-out dangerous in the middle of the worst opioid crisis this country has ever seen. Let's start with the obvious: kratom is a plant. Mitragyna speciosa, a leaf from Southeast Asia that's been used for centuries by workers to ease fatigue and pain, much like coffee for energy. In its natural form—plain leaf powder, not the synthetic junk or ultra-concentrated extracts—it's helping millions of Americans manage chronic pain, anxiety, depression, and especially opioid withdrawal. People aren't getting "high" in the destructive way; they're getting functional again. Veterans, teachers, nurses, correctional officers, grandparents—they're using it to taper off deadly prescription opioids or avoid street fentanyl altogether. Studies and user reports show it acts as a partial agonist at opioid receptors—meaning it can ease withdrawal and cravings without the full respiratory depression that kills with heroin or fentanyl. In an era where over 100,000 Americans die yearly from overdoses, mostly from illicit opioids, kratom represents real harm reduction. Banning it and throwing people in cages doesn't save lives—it costs them. Yet in states where they've criminalized it—places like Alabama, Arkansas, Indiana, Louisiana, Wisconsin, and a few others—people are getting arrested, prosecuted, and locked up for something that's safer than alcohol or tobacco in terms of overdose risk. And what happens when you criminalize it? You drive the market underground—black-market products laced with fentanyl, no purity testing, higher risks of contamination and overdose. Exactly what happened with prohibition of other substances. You don't reduce harm; you amplify it. Think about the prison system we already have: overcrowded, expensive, focused on non-violent offenses while violent crime goes under-addressed. Locking someone up for kratom costs taxpayers $30,000–$60,000 per year per inmate,

			destroys families, ruins job prospects, and creates lifelong criminal records—all for a plant that, when used responsibly, has rare isolated fatalities compared to the epidemic raging outside. Most reported “kratom deaths” involve poly-substance use—mixing with booze, benzos, or fentanyl—not the leaf alone. Compare that to alcohol, which kills over 140,000 Americans annually, or tobacco at nearly half a million. We don’t jail people for beer or cigarettes. Why? Because we regulate them, not eradicate them. The push to criminalize often ignores science for fearmongering. The FDA warns of risks, yes—liver issues, seizures in rare cases, dependency—but they admit no approved kratom drugs exist, and their data relies heavily on poison control calls that spike with usage but pale next to everyday hazards. regulate purity, ban concentrates, enforce age limits, require testing. That’s what the Kratom Consumer Protection Act does in over a dozen states—protect consumers without mass incarceration. Locking people up for kratom is stupid because: • It ignores harm reduction in the opioid crisis—pushing users back to deadlier alternatives. • It wastes resources—courts, jails, probation officers tied up with victimless “crimes.” • It fuels black markets—where fentanyl contamination skyrockets risks. • It disproportionately harms working-class folks, veterans, and those with chronic pain who can’t afford fancy treatments. • It stifles research—Schedule I status (or state equivalents) blocks studies into a potential tool against addiction. We don’t need more prohibition; we need evidence-based policy. Regulate natural kratom like we do supplements or alcohol: test for contaminants, label honestly, keep it away from kids, fund real research. Let adults make informed choices about their health. To lawmakers: stop the knee-jerk bans. Listen to users, doctors, and harm reduction experts—not just headlines. To families who’ve lost loved ones: I grieve with you, but blame adulterated products and lack of oversight, not the plant itself. To everyone: if kratom helps someone stay alive and out of the grave, don’t criminalize their lifeline. Locking people up for kratom isn’t tough on crime—it’s dumb on public health. Let’s choose smarter, not harsher. Let’s choose lives over locks. Thank you.keep natural kratom legal My name is Maria Gonzalez, and I’ve been a high school English teacher in Columbus, Ohio, for the past 22 years. I love my job—shaping young minds, diving into literature with teenagers, watching them grow into thoughtful adults. But teaching is demanding: long hours grading papers, planning lessons late into the night, standing on my feet all day, dealing with stress from overcrowded classrooms, parent meetings, and the emotional weight of supporting kids through their own struggles. Over time, that wear and tear caught up with me. Around age 48, chronic lower back pain started from years of lugging books, bending over desks, and just the daily grind. Then came the neck and shoulder tension from hunching over my laptop at home. Doctors prescribed NSAIDs that upset my stomach, muscle relaxers that made me drowsy, and eventually low-dose opioids after a flare-up that left me barely able to walk the halls. Those pills dulled the pain, but they also dulled me—brain fog that made it hard to focus during class discussions, constipation that was embarrassing and uncomfortable, and a creeping worry about dependence. I saw too many

			colleagues burn out or worse, and I wasn't willing to risk that for my students or my family. A fellow teacher—someone I trust, who's been through similar pain—quietly mentioned trying natural kratom leaf for relief. She emphasized plain, ground leaf, not extracts or shots, from a trusted source with lab testing. I was hesitant; I'd read the headlines about risks and FDA warnings. But after researching, talking to users, and consulting my doctor (who admitted limited knowledge but didn't outright oppose it), I decided to try a small amount of red vein powder—about 2-4 grams in the morning or afternoon, mixed into tea or yogurt to mask the taste. The difference was noticeable without being dramatic. My pain eased enough that I could stand through a full class period without wincing, grade essays in the evening without constant shifting in my chair. At low doses, it gave me a gentle energy boost—clearer focus during lesson planning, more patience with disruptive students, less of that afternoon slump that used to hit hard. It helped my mood too; teaching can be emotionally draining, and this took the edge off the anxiety without making me feel "high" or out of it. I never chased euphoria—just functionality so I could keep showing up fully for my kids. I stick to strict rules: only natural leaf powder, no concentrates or blends with other stuff, buy from vendors that provide third-party lab results for purity and no contaminants. I use it sparingly—some days not at all—and if I skip, it's mild discomfort at most, like skipping coffee, nothing like the withdrawal horror stories from opioids. I've been able to cut back on prescriptions entirely, and my doctor notes my liver function and vitals are stable. To anyone listening—especially policymakers, administrators, or fellow educators—please don't paint all kratom users with the same brush. For me, this plant has been a tool to stay in the classroom I love, to remain the engaged teacher my students deserve. I've helped kids with their own pain or mental health struggles by listening without judgment; I wish the system would extend the same compassion to adults seeking safer ways to manage chronic issues. I'm not saying kratom is risk-free or for everyone. Education, responsible use, and regulation—like age limits, purity testing, and banning risky extracts—are the way forward, not outright bans that push people to dangerous alternatives. I've seen too many teachers leave the profession from burnout or untreated pain. Don't take away one option that's helping some of us stay. Thank you for hearing a teacher's story. My students are worth fighting for—and so is my ability to teach them well. Keep natural kratom legal so I can continue to shape the community My name is Harold Jenkins—most folks just call me Hal. I'm 78 years young, born and raised right here in the heartland, retired after 42 years fixing cars and welding steel. These days, I spend my mornings on the porch with a cup of coffee, watching the world go by, and my afternoons fighting the same old aches that come with getting on in years. Let me tell you straight: the last 15 years or so have been rough. Arthritis got me good—knees like rusty hinges, back that feels like someone's driving nails into it every time I bend over to pick up a grandkid's toy. Doctors started me on the usual pills: ibuprofen that tore up my stomach, then stronger stuff—oxycodone, hydrocodone. Those things took the edge off for a while, but they came with a price. I got foggy-headed, constipated all the time, and

			worst of all, I started needing more just to get out of bed. My wife, God rest her soul, used to say I was turning into a stranger in my own house. Then came the warnings: “Hal, you’re at risk for falling,” “Hal, this could lead to dependence.” I knew what dependence looked like—I watched my brother lose everything to those pills back in the ‘90s. I wasn’t gonna go down that road. About eight years ago, my oldest boy—he’s a trucker, runs routes down south—told me about this plant called kratom. Said some folks use the natural leaf for pain, nothing fancy, just ground-up leaves like tea or mixed in water. I was skeptical as all get-out. Sounded like some hippy nonsense. But the pain was winning, and I was tired of feeling half-dead from the prescriptions. So I did my homework—talked to a couple veterans at the VFW who swore by it, read what I could find. I started small, real small, with plain red vein leaf powder from a reputable place that tests their stuff. No extracts, no fancy shots—just the natural plant. And folks… it changed things for me. Not like a miracle where I woke up 30 again, but like I got a fair shot at living again. Mornings, I can get up without groaning like an old gate. I can walk to the mailbox without limping bad. The pain’s still there—it’s arthritis, ain’t going nowhere—but it’s manageable. I take maybe 3-5 grams a day, split up, and on good days even less. It lifts my mood too—helps with that low feeling that creeps in when you’re stuck hurting all the time. I sleep better, eat better, even tinker in the garage again. My grandkids say Grandpa’s back to telling stories and fixing their bikes. Now, I ain’t blind to the talk. I’ve heard the warnings about side effects, dependency, bad batches. I listen. That’s why I stick to plain leaf, buy from places that show lab tests for purity—no heavy metals, no junk added. I don’t chase a high; I chase relief so I can keep being me. And if I miss a day or two? It’s uncomfortable, sure—like missing my morning coffee—but nothing like the hell those opioid pills put me through when I tried tapering off. To the young folks making laws, to the doctors, to anyone who’ll listen: don’t take this away from old timers like me. We’ve earned the right to choose how we ease our pain in our last chapters. Kratom ain’t perfect, but for me it’s been a godsend—a natural leaf that lets me stay independent, stay with my family, stay alive in the ways that matter. I’ve buried too many friends to pills and booze and regret. Don’t make me bury my quality of life too. Thank you for hearing an old man’s story. If it helps even one person find a better way, then saying it was worth it. God bless you all. my name is Sarah Thompson, a registered nurse with 18 years of experience in pain management, addiction recovery, and bedside care across hospitals and clinics in Ohio and beyond. Today, I speak not only for myself but on behalf of thousands of nurses who witness daily the devastating toll of chronic pain, opioid dependency, and the desperate search for safer alternatives. We are the ones who hold patients’ hands during the worst of withdrawal, who administer life-saving naloxone in the ER, who sit with families grieving lost loved ones to overdose. We are also the ones who listen when patients quietly share how they’ve found relief—not from another prescription bottle, but from a natural plant called kratom. And we are tired of staying silent while misinformation and fear threaten to take away one of the few tools helping some of our most vulnerable patients survive. Kratom—Mitragyna speciosa—has been

			used for centuries in Southeast Asia for pain, fatigue, and mood support. In our practice, we've seen it help where conventional options fail. Patients with fibromyalgia, degenerative disc disease, neuropathy, or post-surgical pain tell us kratom eases their suffering without the sedation, constipation, or respiratory risks of traditional opioids. Many describe it as a bridge—allowing them to taper off high-dose prescriptions, manage withdrawal symptoms, and regain function in their daily lives. Surveys of users show pain relief as the top reason for use, with many reporting significant improvements in quality of life and reduced reliance on more dangerous substances. As frontline nurses, we see the difference: fewer hospital readmissions for breakthrough pain, fewer calls to crisis lines during opioid tapers, and patients who smile again because they can work, play with their kids, or simply sleep through the night. We've cared for veterans, construction workers, teachers, and mothers who've said, "This plant gave me my life back when nothing else did." We know it's not perfect—nothing is—but for these individuals, it's often the lesser evil in a world where FDA-approved options come with black-box warnings and skyrocketing addiction rates. Yes, there are risks. We've read the reports of liver issues, seizures, and dependency. We've seen contaminated products and overuse lead to harm. But let's be honest: many adverse events involve adulterated extracts, high-potency isolates like 7-OH, or mixing with other substances—not the traditional leaf powder used responsibly by most. True kratom-related deaths are exceedingly rare when isolated from poly-drug use, especially compared to the hundreds of thousands lost to prescription opioids and street fentanyl. Prohibition won't protect anyone—it will push desperate people to unregulated black markets where fentanyl contamination is rampant. We've already seen this pattern with other substances. Bans silence research, limit access to pure products, and ignore the voices of patients and providers who see real benefits. That's why we support Natural kratom My name is Dr. Elena Rivera, a physician who has spent over two decades treating patients ravaged by chronic pain and addiction. But today, I am writing before you not just as a doctor, but as a witness to lives transformed by a simple, ancient plant: kratom. Imagine a veteran, home from service, haunted by the ghosts of war and the unrelenting ache in his back. Prescription opioids offered relief, but they came with chains—addiction that stole his family, his job, his will to live. Now picture him discovering kratom, a natural leaf from Southeast Asia, related to the coffee plant. In low doses, it energizes like a strong cup of joe; in higher ones, it eases pain without the fog of narcotics. That veteran? He's one of millions who've broken free from opioid dependency, reclaiming their lives without the deadly risks of fentanyl or heroin. Kratom isn't a miracle, but for many, it's a lifeline. Kratom, or Mitragyna speciosa, has been used for centuries in its native lands for pain relief, mood enhancement, and even to combat fatigue. Here in America, an estimated 1.7 million people turn to it for self-treatment of conditions like chronic pain, anxiety, depression, and opioid withdrawal. I've seen it firsthand: patients tapering off methadone, their withdrawal symptoms softened not by another drug, but by this plant. Studies show regular users consume

			modest amounts—less than 6 grams per session—and report benefits that outweigh the mild side effects. Kratom's primary alkaloids, mitragynine and 7-hydroxymitragynine, interact with opioid receptors, yes—but they do so partially, without the respiratory depression that makes opioids so lethal. It's not an opioid; it's an alternative that could help stem the tide of our epidemic, where opioids claim tens of thousands of lives each year. But let's address the elephant in the room: the risks. The FDA warns of liver toxicity, seizures, and addiction. And yes, there are stories of harm—tragic ones, like families who've lost loved ones to contaminated products or overuse. But dig deeper, and you'll find these incidents often involve adulterated extracts, synthetic spikes, or ultra-concentrated forms like 7-OH, not the natural leaf. Poison control calls have risen, but so has usage—yet kratom-alone fatalities are rare, and many reported deaths involve poly-substance abuse. Compare that to alcohol, which kills 140,000 Americans annually, or tobacco, responsible for 480,000 deaths—both legal and regulated. Kratom's dependency profile? Milder than caffeine withdrawal for most, and far less severe than classical opioids. The real danger isn't kratom—it's prohibition. In 2016, the DEA tried to schedule it as Schedule I, but public outcry—backed by science—forced them to back down. Banning it now would drive users underground, to black-market products laced with fentanyl, worsening the very crisis we fight. It would silence research into its potential as a therapeutic tool, denying hope to those who've exhausted other options. And let's be frank: this push for bans often smells of big pharma's influence, protecting profits from painkillers while vilifying a plant that threatens their market. That's why we don't need bans—we need smart regulation
Dublin	Ohio	4 - Other	NOTE: Survey Monkey removed this file. "Kratom_Testimony_Ohio_Legislators.docx | Removed. File didn't pass scan"

Worthington	Ohio	4 - Other	I am a 42-year-old single mother, wakes up each morning with a deep, gnawing pain in her joints. I relied on kratom for years. not recreationally, but as a lifeline to function and keep her job at the hospital. I was disappointed to learn that the corrupt bureaucrats on the border of o disappear within weeks; successfully lobbied for a statewide ban. Behind the push, whispers circulate about the the ban and corruption on the board specialized payment: meetings held behind closed doors, sudden possible donations to members from pharmaceutical lobbying groups, and a lack of transparency in the scientific reports cited to justify the ban. Documents leaked to local journalists reveal that the committee rejected dozens of peer-reviewed studies on kratom's harm-reduction benefits, instead citing selectively chosen anecdotes of rare adverse events. The community begins to speak out:"This is not about safety. It's about profit. Without kratom, I might be in the ER, and my kids might not have a lived. Meanwhile, an investigative report reveals that several board member has questionable ties financial ties to mon profits who benefit off the banning of kratom. calling into question the impartiality of their recommendations. Public outrage grows. Citizens demand transparency, hearings are held, but the damage is done. Patients are scrambling for alternative therapies, and emergency rooms start to see an uptick in opioid-related overdoses. The story becomes not just about kratom, but about the voices that get drowned out when regulatory decisions are influenced by money and politics rather than science and human welfare.

Worthington	Ohio	4 - Other	This is a money grab everyone see it. Not about public heath. Natural kratom safe this ban is to line your pockets. We know is corrupt we know the border of pharmacies corrupt it's just so disgusting to see this act like it's public help when we all know this is really about selling FDA medication and they even admitted reefer madness all over again. How about educate instead of a ban. The only people to benefit are the corrupt bureaucrats. The people get screwed again. Why this isn't an honest policy debate this a money grab everyone see it. How do we not know who Else is on the take I am providing this testimony to share my perspective on kratom and its role in my life. I have experienced incarceration, and during that time, I came to understand the importance of natural remedies for maintaining health, mental clarity, and emotional stability. Kratom is a natural plant. For me, it has provided support with focus, stress management, and mild pain relief without the dangerous side effects associated with synthetic substances or opioids. I want to emphasize that kratom itself is not inherently harmful. When used responsibly and in its natural form, it is a safe botanical. During my incarceration, I observed that challenges such as stress, anxiety, and chronic pain were often exacerbated by a lack of safe coping mechanisms. Kratom offered a natural alternative that helped manage these issues without leading to dependency or harm when used appropriately. I firmly believe that the negative attention kratom has received is often the result of misunderstanding, mislabeling, or adulterated products, not the plant itself. I urge policymakers, health professionals, and the public to recognize that natural kratom, when sourced responsibly, does not cause the problems that have been attributed to it. Instead, it offers a safe, plant-based option for those seeking relief and wellness support, including individuals who have experienced incarceration. Treating kratom as a dangerous substance harms those who rely on it for safe, legal, and natural health support. Kratom is not the problem responsible use, education, and quality control are. I encourage a science-based, informed approach to this plant so that it can continue to benefit those who need it.. we need to end locking people up over a plant especially when there's financial incentive on the board to get it banned. Wrong you guys only will kill peopoe. What makes it worse is to line your pockets. Not about public health Cameron mcnamee said it's about getting people on fda medication. The corruption reeks from the board everybody sees it. How do we not know Cameron mcnamee get gifts money. The public would never know. Absolutely disgusting and the board should be ashamed of itself for even acting like this is public health. It's not it's all a lie. Money grab

Worthington	Ohio	4 - Other	This ban benefits zero people other than Corrupt bureaucrats. We see it for what it is We will demand investigations. Get to the bottom of this, we know it's not about heath I couldn't believe you didn't say that. Your excuse Is to sell more fda medicines we all see it. So sick the boomers are dying off. We don't want drug war in Ohio. Your not only missed stepped with the people but with lawmarkers both republicans and democrats want more info on Cameron mcnamee and thrive for change. The corruption runs deep. No more war on drugs this isn't 1990s the board no one with you other then old boomers. Stop you are being exposed for bureaucratic hacks. Public health this is sell more medicine so you can get backdoor kickbacks. We know already about Cameron mcnamee and thrive for change. We already got the board on ethics violations. We know everything. Back down so you can continue with the synthetic ban and go on get your kicks back but the public pushes Back on natural kratom. Say no to reefer kratom madness it's safe it helps people everyone agrees this is a money grab to hurt Ohio everyone sees this Corrupt money grab. Shame on you The board hellbent in killing people and fuckimg up people lives with criminal records. It's like if I had to describe inbred, corrupt bureaucrats I would pick who DeWine picked lead the board of pharmacy. The people and lawmakers are with us. You will be exposed Stop and listen to the people we don't want this war on drugs. I know you guys are getting money on the back end but to totally save face. Let natural kratom stay: otherwise no only will people die. But for sure will be fired in January. And I want a close look at Cameron mcnamee thrive for change, that I am preparing for. If this goes the way of a corrupt bureaucrat system that nobody wants Board of pharmacy should list the number of deaths on one side and the amount of money they receiving on the other side the people realize this is on the back of us. Your are corrupt this has nothing to do with public health. You are lying like crazy to sell us out. This is what the fake war on drugs did it created a policy of failure Mediocre bureaucratic hacks like your board. We just thought you would clean up the corruption or wouldn't make it so clear you're all in it for the take. Why I say you sit around reading this you have no idea what might or might payments went to Cameron. If he is lying we can find out. One stain on the board ruins the legacy. That's what this kratom debate comes down to. We know law marks know. We know everything. Do the right thing leave kratom alone End this fake reefer kratom madness my generation sees through the propaganda. You haven't even said any studies

			you have no data. You guys based off lies everyone sees that you got the boomers because they are misinformed but not my generation I think it's disgusting that you actually wanna lock up people for a plant. Actually really one of the most disgusting things I have heard. And then I realize that you're corrupt Bureaucrat. Do the right thing and leave natural kratom alone. Cameron could still go to Disney. Otherwise the next 6 months will be hearing at the state house. We have questions especially once DeWine gone. I bet you ask for pardon Cameron It's so sad to see that we made progress on marijuana, but we're not making progress on kratom . How is this not the same reefer madness. Board had egg on its face especially when we pass sb299 with a sin tax fund the schools. I know it gets in the way of Cameron mcnamee payments from thrive for change and all the incentives he gets from handing out testing strips. The people know. Lawmarkets will have questions for you, this won't be about kratom this is about corruption and I don't think you know your team enough to be honest about that conversation that are you willing to put it all out there Are you sure there's no corruption?. Because the board's legacies is already tarnished the people see this. Anyone under 50 realizes what's going on you can't fool the people. Lie to them about selling fda medicine. Lie about Polly board membership that are handing out Suboxone while trying to ban kratom: the public see this and we won't allow the corruption. So Cameron can go to Disney world The people are not with you lawmarkers everybody sees this corrupt bureaucrat take over So you can get rich it's disgustingly evil Stop with the fake kratom madness we want process not wasted resources everyone sees you as Corrupt bureaucrats save face and alllw natural keep Keep kratom legal

Worthington	Ohio	4 - Other	No one, other than you corrupt bureaucrats benefit off banning Kratom the people don't. Your not helpsing public that's the lie that's DeWine told. You got the board of pharmacy claiming it's to get people on fda medicine. That's disgusting because you're playing with people's lives for financial gain. Everyone see the Corruption we will find out in January. When you are replaced I am a correctional officer who has worked in the criminal justice system for many years. I am here to speak about the use of natural kratom and the impact that banning it would have not only on individuals like me, but on the criminal justice system as a whole. In my experience, natural kratom is not a threat to public safety. It is used responsibly by adults to manage pain, anxiety, and other health concerns without the dangerous side effects of opioids or prescription medications. Criminalizing a natural, plant-based substance does not reduce harm it creates unnecessary legal complications and can push individuals into the justice system who would otherwise manage their lives safely.I have seen the consequences of policies that treat natural substances as criminal issues rather than health issues. Banning kratom does not "fix" anything. Instead, it criminalizes responsible behavior, increases burdens on law enforcement, and shifts focus away from real threats to safety and order. From a professional standpoint, a policy that targets natural kratom undermines public trust and wastes valuable resources. It does not make communities safer, and it does not make our jobs easier. Ohioans deserve access to safe, natural options for their health and well-being criminalizing kratom serves no one and solves nothing. I urge the Board to consider the real-world impact on people and the criminal justice system and to allow natural kratom to remain legal for responsible adults.

Columbus	Ohio	4 - Other	I actually hope the board listen to people instead of going down this road. Next pandemic, nobody's gonna listen to you guys. Anyone who was around during covid when you make stupid decisions based off money that hurts everyone. We see through the corruption. Accountability isn't just some word Cameron mcnamee, we know. Your board members might not but one small stain on the board you lost your credibility: and remember all you can be fried day one in January. The people are not on your side. Keep natural kratom legal. Remember DeWine won't pardon you before your fired your continued crusade against Mitragyna speciosa is an embarrassing display of scientific illiteracy and professional cowardice. By peddling "reefer madness" style hysterics, you aren't protecting the public; you are actively destroying the last shred of credibility this Board has left. It is insulting that a body of supposedly "trained professionals" would ignore decades of peer-reviewed research in favor of sensationalist propaganda. Your refusal to distinguish between pure, natural leaf and the dangerous, unregulated synthetics you've allowed to flood the market is a dereliction of duty. You are using the exact same failed, prohibitionist playbook that fueled the disastrous war on drugs a war that resulted in nothing but bloated budgets and body counts. Every time you release a statement filled with debunked fear-mongering, you reveal yourselves to be either hopelessly incompetent or intentionally dishonest. While groups like the American Kratom Association push for the Kratom Consumer Protection Act to ensure safety and purity, you choose to hide behind inflammatory rhetoric that would be laughed out of any serious pharmacology lab. Stop pretending this is about "public health." If you cared about lives, you would regulate the product to ensure safety rather than trying to ban a plant that keeps people away from the lethal street drugs you've failed to control. Your "reefer madness" tactics are a joke, and the public is no longer buying it. History will look back at this Board not as a guardian of health, but as a group of ideologues who prioritized fear over facts. End this charade and start acting like the medical professionals you claim to be. Grow up, follow the science, and stop lying to the public. It is becoming increasingly difficult to view this Board as a serious scientific or regulatory body while you continue to propagate "reefer madness" style alarmism regarding Mitragyna speciosa (kratom). By prioritizing sensationalism over peer-reviewed data, you are systematically destroying your own professional credibility. Your continued reliance on outdated, disproven narratives—reminiscent of the failed anti-cannabis campaigns of the 20th century is a disservice to the public health you are sworn to protect. While independent researchers and organizations like the American Kratom Association advocate for sensible regulation and consumer safety standards, this Board appears content to rely on anecdotal fear mongering and debunked toxicology reports. When a regulatory body ignores the distinction between pure leaf kratom and dangerous, adulterated synthetics, it doesn't "save lives" it drives citizens

			toward actual lethal substances by removing a safer botanical alternative. Furthermore, your refusal to acknowledge the mounting body of evidence supporting kratom's safety profile when used responsibly makes it clear that this is a matter of political optics, not pharmacology. The "reefer madness" approach failed in the 1930s, and it is failing now. If you wish to be treated as an authority on public safety rather than a relic of prohibitionist hysteria, I strongly urge you to pivot toward the Kratom Consumer Protection Act (KCPA) framework. Regulation, labeling, and age restrictions are the tools of a modern Board; inflammatory rhetoric is the tool of the uninformed. Stop ruining your reputation. Start following the science. The board lies more more Ohioans die. Is the chant. No one believes this about public heath. The optics look bad G-Protein Biased Partial Agonism proves that kratom is not just "different" than pharmaceutical opioids it is biologically safer at the cellular level. The G-Protein vs. β-Arrestin Signaling Pathway Every time an opioid molecule (like morphine or mitragynine) hits a receptor in your brain, it sends a signal. Traditional FDA approved opioids are balanced agonists, meaning they trigger two separate "lanes" of communication at once: * Lane A: The G-Protein Pathway (Analgesia): This is the pathway responsible for pain relief and the beneficial effects of the medicine. * Lane B: The β-Arrestin Pathway (Side Effects): This pathway is the primary driver of respiratory depression(stopping your breathing), severe constipation, and the rapid development of tolerance. Natural mitragynine is a "G-protein biased" ligand. This means it is "biased" toward Lane A (pain relief) and does not significantly recruit β-Arrestin (Lane B). Because it fails to activate the β-arrestin pathway, it does not induce the fatal respiratory depression that makes Schedule I and II drugs so dangerous. The "Ceiling Effect" To understand why kratom is a "Partial Agonist," think of a light switch vs. a dimmer switch. * Full Agonists (Morphine/Fentanyl): These act like a light switch. They turn the receptor on to 100% capacity. There is no limit; the more you take, the more the receptor is activated until the body's systems (like breathing) shut down. * Partial Agonists (Mitragynine): These act like a dimmer switch that is stuck at 50%. No matter how much you take, the molecule can only ever activate the receptor to a certain point (low "intrinsic activity"). The Result: This creates a "Respiratory Ceiling." Peer-reviewed studies in 2024 and 2025 have confirmed that even at massive doses, mitragynine does not continue to depress respiration. In fact, some studies show it can even have a slight stimulant effect on breathing at certain dosages the exact opposite of a "narcotic." "The proposed scheduling of mitragynine ignores the fundamental pharmacological distinction between balanced full agonists and G-protein biased partial agonists. Unlike Schedule I or II opioids, mitragynine exhibits signaling bias, preferentially activating G-protein coupled pathways (analgesia) while failing to recruit β-arrestin-2. The lack of β-arrestin recruitment is the mechanistic reason for mitragynine's well-documented respiratory ceiling effect. Scientifically, a substance that lacks the capacity for fatal respiratory depression through the μ-opioid receptor cannot logically be

			classified alongside substances that do." G-Protein Biased Partial Agonism" is the strongest scientific leverage. It proves that kratom is not just "different" than pharmaceutical opioids it is biologically safer at the cellular level. The G-Protein vs. β-Arrestin Signaling Pathway Every time an opioid molecule (like morphine or mitragynine) hits a receptor in your brain, it sends a signal. Traditional FDA-approved opioids are balanced agonists, meaning they trigger two separate "lanes" of communication at once: Lane A: The G-Protein Pathway (Analgesia): This is the pathway responsible for pain relief and the beneficial effects of the medicine. Lane B: The β-Arrestin Pathway (Side Effects): This pathway is the primary driver of respiratory depression (stopping your breathing), severe constipation, and the rapid development of tolerance. Natural mitragynine is a "G-protein biased" ligand. This means it is "biased" toward Lane A (pain relief) and does not significantly recruit β-Arrestin (Lane B). Because it fails to activate the β-arrestin pathway, it does not induce the fatal respiratory depression that makes Schedule I and II drugs so dangerous. Partial vs. Full Agonism: The "Ceiling Effect" To understand why kratom is a "Partial Agonist," think of a light switch vs. a dimmer switch. Full Agonists (Morphine/Fentanyl): These act like a light switch. They turn the receptor on to 100% capacity. There is no limit; the more you take, the more the receptor is activated until the body's systems (like breathing) shut down. Partial Agonists (Mitragynine): These act like a dimmer switch that is stuck at 50%. No matter how much you take, the molecule can only ever activate the receptor to a certain point (low "intrinsic activity"). This creates a "Respiratory Ceiling." Peer-reviewed studies in 2024 and 2025 have confirmed that even at massive doses, mitragynine does not continue to depress respiration. In fact, some studies show it can even have a slight stimulant effect on breathing at certain dosages the exact opposite of a "narcotic." "The proposed scheduling of mitragynine ignores the fundamental pharmacological distinction between balanced full agonists and G-protein biased partial agonists. Unlike Schedule I or II opioids, mitragynine exhibits signaling bias, preferentially activating G-protein coupled pathways (analgesia) while failing to recruit β-arrestin-2. The lack of β-arrestin recruitment is the mechanistic reason for mitragynine's well-documented respiratory ceiling effect. Scientifically, a substance that lacks the capacity for fatal respiratory depression through the μ-opioid receptor cannot logically be classified alongside substances that do." I am hoping you are uniformed of this and back down on natural kratom or you are to corrupt in the Ignore the science 2025 Sprague-Dawley Study: Research showed that while morphine and 7-OH (the synthetic extract) decreased minute volume (breathing), natural mitragynine actually increased respiratory frequency in some models, acting as a stimulant rather than a depressant. The Argument: It is scientifically inconsistent to schedule a "respiratory stimulant" or "ceiling-effect" botanical alongside "respiratory depressants" like heroin. G-Protein Biased Agonism (The "Science-Heavy" Evidence) The most advanced pharmacological research (e.g., Purdue University and Frontiers in Pharmacology) highlights that kratom is a "biased agonist." Traditional opioids activate two pathways: G-protein (pain relief) and β-arrestin-2 (side effects like respiratory arrest and constipation). Mitragynine is "biased" toward the G-protein pathway. It fails to recruit β-arrestin-2. This is the mechanistic proof that kratom is biologically

			distinct from—and safer than the Schedule II opioids the FDA currently approves. The "Natural vs. Synthetic" Distinction The FDA's own February 2024 update and subsequent 2025 reports admit that "rare" deaths associated with kratom almost always involve polysubstance use (other drugs in the system) or synthetic 7-OH extracts. A 2024 review found that in cases of "kratom-only" decedents, follow-up blood tests almost always revealed other lethal substances. Federal Rejection: In 2025, even as the FDA recommended scheduling the 7-OH extract, it did not recommend a federal ban on the natural plant leaf. The Ohio Board is currently trying to go further than federal health officials by banning the leaf itself. EXHIBIT A: PHARMACOLOGICAL DATA Ref 1: Hill et al. (2022/2024) - "The respiratory depressant effects of mitragynine are limited by metabolic saturation... resulting in a built-in ceiling effect." Ref 2: Journal of Biological Chemistry/Purdue Research (2025) - Confirmed mitragynine as a G-protein biased agonist that avoids β-arrestin-2 recruitment, the primary driver of opioid lethality. Ref 3: HHS/FDA Technical Update (2024-2025) - Acknowledged that natural kratom leaf is not the primary driver of adverse events, which are instead linked to adulterated or synthetic 7-OH products. I am actively calling my lawmakers to ask for an investigation into you corrupt bureaucrats. Everyone see this for what it is a money grab. Open attempt to Severt, the will of the people. Third party payments any form of compensation That you bureaucrats do behind closed doors. We know not about public health and calling for a full investigation into the board pharmacy. Into payments received from thrive for change. Smells so bad for corruption, but we will get to the bottom of that. If you guys keep fighting to ban kratom we will expose even more corruption. We will expose all the Circus that's the board of pharmacy Here's a win-win for everybody in the board. I know it might make you corrupt bureaucrats upset, but at least you would win on a major point. And still have credibility when the new administration comes in. Allow natural kratom to be left alone. Ban synthetic but keep natural kratom. You would make both people happy. We want safe kratom. Not a ban not what we need. It only Undermine your credibility and you're just pushing kratom reefer madness. History will look poorly on you when we pass sb299. Really you should be criminally investigate. God only knows who else is on the take. Most of the younger generation believe you are corrupt. And we start digging in the files we will find more corruption. It's a high likelihood Cameron mcnamee with thrive for change getting payments. If that's true especially on banning kratom people will go to prison, we can keep pushing with house senate hearing ultimately, the snake goes back to DeWine. It's more how far the board want push for this ban. Would all go away if you don't ban Kratom. A political wind is brewing and we want accountability

			We want natural kratom it's literally reefer madness. Can't comment on fb because you get ban can't debate because they can fear based like this only hurts people truly disappointed you aren't listen to ohians. Everyone see this for what it is. Money grab save your record because in January a new governor going to clean up The corruption on the board. The reporter only found out about Cameron mcnamee and thrive for change. Giving out test strip. we will dig in those records answers the more you push to ban kratom. I can promise any corruption bureaucrat will go to prison the current regulatory trajectory concerning natural Kratom in the State of Ohio. The Board's move toward restrictive oversight appears less like a public health initiative and more like an expansion of "nanny state" overreach that prioritizes incarceration and life-altering legal penalties over the well being of Ohio citizens. Specifically, I wish to address the following concerns: The Impact of Prohibition: Criminalizing natural botanicals often leads to the destruction of lives through the legal system rather than saving them. Stigmatizing users of natural alternatives does nothing to improve public safety; it only creates new avenues for unnecessary state intervention. There are serious ethical concerns regarding the influence of third-party interests and "thrive for change" advocates, such as Cameron McNamee, on the Board's decision-making process. The public deserves absolute transparency regarding whether external financial incentives or third-party payments are steering policy away from objective science and toward biased outcomes. Labeling the restriction of Kratom as a "public health" necessity feels disingenuous to many Ohioans who use it responsibly. A truly productive Board of Pharmacy should focus on harm reduction and quality control ensuring products are unadulterated—rather than pushing for total prohibition. Conclusion It is time for the Board to do something genuinely productive for the people of Ohio. Rather than focusing on restrictive measures that punish individuals, the Board should be advocating for the Kratom Consumer Protection Act (KCPA), which focuses on safety, labeling, and age-gating rather than the destruction of personal liberty. I urge the Board to reconsider its current path and prioritize the actual needs of the community over bureaucratic expansion. Let's talk about the "justice" you are actually proposing. I have been incarcerated. I have spent my life in prison, now hard-working citizen. But you the "guardians of public health" are ready to change that in a heartbeat over a plant. You are willing to take a productive member of society and throw them into a cage alongside murderers, rapists, and violent predators. For what? For the "crime" of managing pain with a leaf instead of your overpriced, FDA-stamped chemicals? That isn't "regulation." That is pure, unadulterated evil. You know exactly what happens in our jail system. You know the violence and the trauma. To suggest that a person deserves to be subjected to that because they used kratom is a level of moral rot that no "public safety" excuse can cover. This is the same disgusting tactic used for decades to ruin lives over cannabis. You would rather see a family destroyed and a person traumatized in prison than

			admit that your "Drug War" is a failure. Every time you vote to schedule a natural plant, you are signing the warrant for an innocent person to be thrown into a cell. You are the ones creating the "criminals," and you are doing it to line the pockets of your pharmaceutical donors. There is no middle ground here. You are either for the freedom of the individual, or you are an accomplice to a system that treats natural wellness as a felony. It is disgusting, it is cowardly, and we will not forget who voted to put their neighbors in chains for a plant.

Columbus	Ohio	4 - Other	Keep natural kratom legal. We all know this a money grab say no to Corrupt bureaucrats. We will demand in January an open look at your books. We know board members Cameron mcnamee with thrive for change has a money Incentive to ban kratom. Not about public health we all see it. If the ban on natural kratom goes away no one asking questions You guys are a summary of why the country is going to hell. Your Bureaucrats who aren't doing it for the public health they're doing it to line the pockets. Stealing every last bit on the backs of average Americans, that's why this is absolutely disgusting. And Forever, the border of pharmacy is credibility will be ruined. Remember that a wave is coming and Accountability is coming. We will remove all of you The Board continued disregard for public input and scientific discussion regarding natural kratom, particularly recommendations and testimony provided by consumers, researchers, and healthcare-adjacent professionals. Many members of the public have taken the time to submit comments, attend hearings, and provide firsthand accounts explaining how natural kratom has been used responsibly as an alternative for pain management, opioid reduction, and overall quality of life. These perspectives are repeatedly acknowledged procedurally, yet they appear to be substantively ignored in the Board's final positions and recommendations. What is most troubling is that the Board often cites "public safety" while failing to transparently engage with current data, comparative risk analysis, or the real-world consequences of restricting or banning kratom. In practice, this approach dismisses lived experience and pushes individuals back toward far more dangerous substances, including prescription opioids and illicit drugs. Regulatory bodies exist to serve the public interest, not to operate in isolation from it. When a large and consistent portion of the public raises the same concerns supported by emerging research and harm reduction outcomes it warrants genuine consideration, not perfunctory acknowledgment. I urge the Board to: Meaningfully review and respond to public testimony regarding natural kratom. Engage independent researchers rather than relying on outdated or selective data Consider regulation and quality control instead of prohibition Be transparent about how public input influences final decisions Ignoring the people most affected by these policies erodes public trust and undermines the credibility of the Board's mission. A balanced, evidence-based, and inclusive approach is not only possible it is necessary. Thank you for your time and consideration. I hope the Board will choose dialogue and transparency over dismissal. This about lining the Bureaucrat on the board's pockets. We all see through this. Really sad you will be remembered Ohioans want sb299 not prohibition. History will reflect poor on you if you still ban natural kratom. I would say keep your record for when a new governor comes into power. I talked to Dr. Amy about cleaning up the board of pharmacy.

			You can’t have conflict of interest like Cameron mcnamee and thrive for change that could potentially through backdoor payments benefit from the banning of Kratom while giving out fentanyl test strips. And then ban kratom because it’s for the big pharmaceutical corruption. everybody sees us as the corrupt action of bureaucrats we will investigate, and we will get to the bottom of it. Save your records. And hope you have no third-party consulting firm paying you. If you keep pushing natural Kratom we will figure it out. I am a "hard-working Ohioans" you claim to protect. I am here today because I am disgusted. I am disgusted by the bureaucratic arrogance that seeks to ban a natural plant while completely ignoring the catastrophic failure of the healthcare system you oversee. You tell my patients to "consult a physician." You tell them to use "FDA-approved medications." Let’s be honest for once: You are prescribing a fantasy. In my clinic, I see people who work sixty hours a week and still can’t afford the "approved" path. For many of my patients, a single trip to a specialist is a week’s worth of groceries. A month’s supply of a "safe" pharmaceutical can cost more than their mortgage. When you move to ban natural kratom, you aren't moving them toward "better care"you are moving them toward untreated agony. You are using the "Reefer Madness" playbook from the 1930s. You are intentionally blurring the line between the natural leaf which has been used safely for centuries and the synthetic, high-potency extracts that are the real problem. Natural leaf kratom is a harm reduction tool. It allows people to manage pain and stay employed without the respiratory depression or "zombie" effects of the very opioids this Board helped flood our streets with a decade ago. Prohibition doesn't create safety; it creates a black market. If you ban this, my patients won't suddenly find "affordable FDA care." They will find a dealer, or they will find a bottle of bourbon, or they will find themselves back in the ER. The Corruption of Choice. It is the height of corruption to use your regulatory power to shut down a low-cost, natural option while doing absolutely nothing to lower the cost of the "approved" alternatives. You are effectively telling the working class: "If you can't afford a seat at the pharmaceutical table, you deserve to suffer in silence." We don't need a ban. We need the Kratom Consumer Protection Act. We need testing, labeling, and age restrictions to get the synthetic "gas station" junk off the shelves while keeping the natural leaf accessible to those who rely on it. Stop acting like pharmaceutical lobbyists and start acting like public servants. Stop the "Kratom Madness," stop the propaganda, and for once, get out of the way of people who are just trying to survive. Stop the fake reefer kratom madness. Nothing changed other than corrupt bureaucrats, we all see through you. Zero credibility from the board. My best advice is to allow natural kratom so you can go on your poly board memberships. And take your kickbacks into the quiet of the night. Otherwise we going to fight every step of this ban. History will look back at you as corrupt and especially when we passed SB299. Going to make you look silly and be out of a job.

			Congratulations. You've successfully recycled the same tired, "Reefer Madness" script to target a plant that keeps thousands of us functional. You sit in your air-conditioned offices, protected by gold standard insurance and a generational wealth gap you've spent forty years widening, and you have the audacity to tell us what is "safe." Let's talk about your version of "safety." You tell us to "trust the FDA" and "seek professional medical advice." With what money? In what world? Most of us are one medical emergency away from total ruin. Your "FDA-approved" path is a pay-to-play scheme. You've created a healthcare system so bloated and predatory that it's essentially a luxury brand, and then you have the nerve to act shocked when we turn to a natural leaf to manage our pain so we can go to work. Here is the reality you're too insulated to see: We can't afford your "solutions." A doctor's visit is a day's wages. The "approved" pills are a monthly car payment. You are the ones who failed. Your generation oversaw the rise of the opioid crisis, pushing "safe" pills that destroyed our towns. Now that we've found a natural way to stay off those very drugs, you want to criminalize it? It's not "safety" it's a protection racket for Big Pharma. Prohibition is a weapon. You know damn well that banning kratom won't stop people from hurting; it just ensures that when they do seek relief, they're either a criminal in your eyes or a customer for a pharmaceutical company. You aren't "protecting the public." You are micromanaging the misery of people you don't understand and clearly don't respect. You are using "Drug War" logic to solve a "Cost of Living" crisis, and it is transparently pathetic. If you won't fix the broken healthcare system you've left us with, then at the very least, get your hands out of our medicine cabinets. We are done being the "collateral damage" of your moral grandstanding. Let's be incredibly clear: Your move to ban natural kratom isn't about "public safety." It's about control, and it's a direct slap in the face to every hard-working person in this state who doesn't have the luxury of your taxpayer-funded health insurance. You sit in your boardrooms and demand that we "consult a physician" and use "FDA-approved medications." That's a real nice sentiment for people who can actually afford the $200 co-pay, the $500 blood work, and the $1,200 monthly premium. For the rest of us living in the real world the world you've spent the last forty years deregulating into a corporate nightmare we can't afford your healthcare. You've built a system where: Big Pharma sets the prices. Insurance companies decide if our pain is "real." And you act as the gatekeepers, making sure we have no choice but to pay up or suffer. When we find a natural plant that allows us to get out of bed, go to work, and provide for our families without a prescription pad, you call it a "threat." The only thing kratom threatens is the profit margin of the companies you're coddling. You grew up in an era where a single income could buy a house and a doctor's visit cost a handful of crumpled twenties. You have no idea what it's like to have to choose between a "legal" prescription and rent. By banning kratom, you aren't "saving" us you are sentencing us to untreated chronic pain or forcing us back into the shadows of a black market you created with your own failed Drug War logic. It's like you bureaucrats wake up every morning looking for a new way to fuck over the working class. If you want us on

			"approved" medication, pay for it. Until then, stay out of our medicine cabinets and keep your outdated, "Reefer Madness" propaganda to yourselves. Signed, A Taxpayer Who's Done With Your "Protection" This ban is wrong for Ohio, no one say a word on synthetic Natural kratom. Stop a stupid drug war, it will never work out especially after marijuana. So when crayon does become legalized in law, we look back to your decision as stupid and Financially motivated rather then new data Tarnishing your names forever I have a extreme lack of confidence in the current direction of your regulatory actions regarding natural kratom. To be blunt: my generation sees this for exactly what it is. This is not a sudden breakthrough in science; it is a transparent money grab fueled by institutional corruption. We are not naive to the timing of these shifts. For years, the science on raw, natural kratom has remained consistent, yet your sudden pivot toward restrictive "oversight" happens to align perfectly with the financial interests of your board members. It is common knowledge that several decision-makers within this process hold ties to entities that stand to profit from the synthetic or pharmaceutical-grade "alternatives" you are pushing. You are creating red tape not to protect the public, but to gatekeep a natural plant behind a paywall that only your corporate partners can afford. The public's distrust is not rooted in a misunderstanding of the science it is rooted in an acute understanding of the incentives. The science hasn't changed. The plant hasn't changed. The only thing that has changed is the level of corruption. We want access to natural, unadulterated kratom. We do not want your "refined" versions that serve your bottom line at the expense of our autonomy. My generation is tired of watching bureaucrats trade public health for board-room favors. We are watching, we are documenting these conflicts of interest, and we will not accept a "pay-to-play" model for a natural resource. Highly upset at the board approach to kratom, which is a clear example of drug war insanity. We are being asked to spend Ohio's time, money, and court resources on criminalizing a natural plant that millions of adults use responsibly. This is not public health policy it is a repeat of Reefer Madness all over again. Kratom is natural. It is not a synthetic chemical. It is not a controlled substance with high overdose potential. And yet, we are being told that banning or using scare tactics is somehow protecting Ohioans. Let's be honest: nothing about kratom has changed. There is no new scientific evidence demanding criminalization. Meanwhile, Ohio spends millions enforcing failed policies, filling courts with cases that could be avoided, and punishing adults for making responsible decisions about a botanical plant. This is bureaucratic overreach, plain and simple. It does not protect public health; it wastes taxpayer dollars, overwhelms courts, and undermines trust in government. We have seen this movie before. The hysteria around marijuana in the early 20th century. The misinformation campaigns. The exaggerated dangers. And now, here we are again, calling a natural plant "dangerous" while ignoring evidence, adult choice, and the real

			priorities of our communities. Ohio does not need another moral panic. We need education, regulation, and respect for responsible adult use. SB 299 offers a sensible path: protect consumers, win tax regulate for safety, civil liberties for bad actors and allow adults to make informed decisions without fear of criminalization. Stop the waste. Stop the hysteria. Stop the drug war insanity. Focus on policies that actually benefit Ohioans. Leave kratom alone Kratom natural plant that millions of Ohioans use responsibly. Yet we are witnessing something extraordinary: a board member, Cameron mcnamee advancing policies that I can only describe as madness. Why madness? Because the decisions being made are not based on new science. Nothing about the safety profile of kratom has changed. There are no new studies proving it is suddenly dangerous. Yet here we are, considering bans and restrictions as if we are facing a crisis that does not exist. This is not public health. This is fear-driven policy. It is bureaucratic overreach that ignores the millions of adults who rely on kratom for wellness, focus, and relief from discomfort. People are being dismissed, silenced, and denied a voice in a conversation that affects their daily lives. When Cameron mcnamee claims this is about "safety," the public can see through it. We know that the true goal is to funnel people toward FDA-approved pharmaceuticals, not to protect the health of Ohioans. That is not oversight that is politics masquerading as science. Kratom is safe when used responsibly. Other states have demonstrated that regulation, education, and quality standards protect consumers far more effectively than bans. SB 299 shows us the path forward: adult access with safeguards, transparency, and testing. We cannot allow fear or politics to dictate policy. We cannot allow unilateral decisions from one person or a small group to override the will of millions. Responsible adults deserve education, not prohibition. They deserve truth, not fear mongering. Cameron mcnamee approach is not rational. It is madness. And Ohioans see through it money grab attempt to sell more FDA drugs Acting unilaterally without input from the people or legislator who actually use this plant is against the will of millions of Ohioans who use on natural kratom responsibly. Nothing about kratom's safety profile has changed. There is no new scientific evidence to justify banning or restricting access. What has changed is the decision of a few willing bureaucrats to impose their preferences on the public, ignoring the voices, experiences, and needs of the people. Ohioans see through the repeated claims that this is about "public health." When Cameron McNamee stated on Channel 4 that the goal was to push people toward FDA-approved drugs, it became clear that the priority is sales, not safety or wellness. This is not public health it is policy driven by profit and political convenience. This board is ignoring the people. Millions of adults use kratom responsibly. They rely on it for wellness, focus, and relief from discomfort. To remove or restrict it without evidence or public consensus undermines trust, erodes credibility, and repeats the mistakes of past prohibitionist policies. Decisions like this must reflect science, public opinion, and fairness not bureaucratic convenience. Ohioans deserve transparency, debate, and policies that actually protect

			consumers instead of lining pockets or forcing them toward pharmaceutical products. Please reconsider the approach. Act in alignment with the people, with evidence, and with integrity. Ohio does not need another ban; it needs regulation, education, and respect for responsible adult use. I know you've probably heard a lot of mixed information about kratom, so I wanted to give you a clear, honest perspective. Kratom is a natural plant from Southeast Asia that people have been using responsibly for generations. When used correctly, it can be safe and part of a balanced lifestyle. Here's what's important to know: It's natural, not synthetic. Kratom comes from a tree leaf, not a lab. People use it as a tea, capsule, or powder, and it does not carry the same risks as some prescription drugs. Responsible use matters. Like any supplement or herb, it works best when taken in moderation. Users typically follow recommended serving sizes, avoid mixing with alcohol or other substances, and take breaks to prevent tolerance. People use it safely. Millions of adults use kratom responsibly every year. They rely on it to support focus, manage discomfort, or simply maintain wellness. The key is understanding the product, reading labels, and buying from reputable vendors who follow quality standards. It's regulated in many states. Some states have laws that require age limits, quality testing, and labeling. This protects consumers from low-quality or adulterated products. Education is key. Knowing what you're taking, how much to take, and how to space your use is the best way to stay safe. Kratom is not a one-size-fits-all solution, but when people use it responsibly, it is considered safe by users and many healthcare professionals familiar with botanical supplements. Say no to the fake kratom reefer madness. The people know better in Ohio. you're interested, I can also show you resources on how to select a trusted brand, proper dosing, and best practices so you can use kratom safely. People don't get hurt because of kratom itself they get hurt when they use it carelessly or buy unsafe products. kratom is a safe, natural option for adults when used responsibly, with the right education, and with quality-tested products. Stop the fake fear propaganda. And allow natural kratom the kratom law proposed in Ohio Senate Bill 299 is modeled after a proven regulatory approach used in many other U.S. states, designed to protect consumers and support safe access to natural kratom rather than prohibit it. SB 299 is not an untested idea. It follows the framework of Kratom Consumer Protection Acts (KCPAs) that have already been passed in multiple states. These laws focus on education, quality standards, transparency, and adult access rather than prohibition. And sin tax 35%. In states like Utah, Arizona, Georgia, Oklahoma, Nevada, Oregon, Texas, Colorado, Kentucky, Maryland, Virginia, West Virginia, and others, regulators have adopted laws that: • Set age limits for legal kratom sales; • Require product testing and labeling so consumers know what they are using; • Ban synthetic compounds or dangerous adulterants; • Establish standards for purity and content. This regulatory model acknowledges that people already use natural kratom responsibly and want safer, standardized products. It protects

			public health by ensuring quality control, while preventing adulterated or harmful versions from reaching stores. SB 299 in Ohio would work the same way.but better give huge civil liability to manufacturers for bad products that break state law: It would not ban natural kratom; instead, it would require standards and oversight that help both consumers and retailers. It sets clear definitions of kratom products, limits on concentrated alkaloids, documentation of ingredients, and compliance requirements for businesses just like other states that regulate kratom responsibly. States that regulate kratom through KCPAs have shown that this approach can protect consumers while preserving access to natural botanical products. Ohio's proposed SB 299 is designed to fit within that successful U.S. pattern of balanced regulation not prohibition. We see the corruption we know that not in class changed in science. Other then fake kratom reefer madness I want to be very clear about what we are actually debating here. We are not debating new science. We are not debating newly discovered risks. We are not debating a sudden change in the safety profile of natural kratom. Because nothing about the science has changed. I have reviewed the safety data. I have followed the literature. I have listened to clinicians, researchers, and most importantly people who actually use kratom responsibly. I have not seen credible, high quality studies emerge that suddenly overturn what we already knew. There is no new evidence justifying panic, prohibition, or emergency action. So if the science hasn't changed, the obvious question is: what has? What has changed is bureaucracy. What has changed is money. That is the uncomfortable truth. Natural kratom is a plant. It is not a synthetic chemical compound. It is not a patented pill. It does not fit neatly into systems designed to funnel people into FDA-approved pharmaceuticals. And that matters because those systems are powerful, well-funded, and deeply entrenched. When decisions stop being driven by evidence and start being driven by institutional interests, public health becomes a talking point instead of a principle. We've seen this pattern before. We saw it with marijuana. We saw it with harm reduction. We saw it with the broader drug war. Fear-based narratives replace nuanced discussion. Dissenting voices are dismissed or silenced. Debate is framed as "dangerous," while prohibition is framed as "protective." That is not science that is control. If this were truly about safety, the conversation would center on regulation, quality standards, age limits, labeling, and education. Those are the tools that reduce harm. Those are the policies supported by evidence. Those are the policies people are asking for. Have huge civil liberties to those who are bad actors. Instead, we are being pushed toward bans despite the lack of new scientific justification. That should concern everyone, regardless of where they stand on kratom. Let me say this plainly: You cannot claim to follow the science while ignoring it when it becomes inconvenient. You cannot claim to protect public health while refusing to engage in open debate. And you cannot expect public trust when policy outcomes consistently benefit institutions rather than people. Natural kratom's safety profile did not suddenly change. What changed is who controls the narrative. And that is why people are pushing back not because they are uninformed, but because they

			are paying attention. If we want credibility, the path forward is clear: transparency, evidence-based regulation, and respect for adults ability to make informed choices. Anything else is not science it is bureaucracy pretending to be science.keep natural kratom legal Please do not ban kratom. This is not what Ohio needs, and many of us are begging you to stop before more harm is done. We have seen this before. Prohibition disguised as public health. Fear-based messaging. Closed conversations. And every time it happens, the people who rely on these substances are the ones who disappear from the discussion once the ban takes effect. Once you remove access, our voices are gone but the damage remains. Ohio does not need another moral panic. This latest push feels like a repeat of kratom "reefer madness," and the public sees through it. There is no new credible information justifying a ban. There is only recycled fear, exaggerated claims, and a refusal to allow honest debate. We will pass SB 299 because it reflects what people actually want: regulation, education, age limits, and consumer protections. Adults over 21 deserve access to natural kratom with clear standards not prohibition. SB 299 is the forward path. A ban is a step backward. Many of us were alarmed by public statements suggesting the goal is to push people toward FDA-approved drugs. That completely misses the point of natural kratom. Kratom is not a synthetic chemical compound. It is not a pill. It is not a patented product. People turn to it precisely because it is a natural alternative, not another prescription. When the response to that reality is a ban instead of education, it becomes hard to believe this is truly about public health. It begins to look like a money driven decision that benefits systems and industries, not the people who rely on kratom the most working adults, seniors, and those trying to avoid stronger pharmaceuticals. Public trust is being lost. Many Ohioans now question whose interests are being served and why the Board is moving toward prohibition instead of transparent, evidence based regulation. Those are fair questions, and dismissing them only deepens the concern. Please listen to the people. Do not repeat the mistakes of the past. Do not take away a natural option that so many depend on. Education and regulation are the answer not a ban that will hurt Ohioans and benefit no one but special interests.

Worthington	Ohio	4 - Other	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Law markers are on our side. We have questions for Mr. Cameron. Seems like this the reason for the ban conflict of interest? Law makers think so The only criminal I know are you guys corrupt Bureaucrat. Conflict of interest Cameron not about kratom about you selling fda drugs Stop the madness Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Stop the corruption and conflict of interest Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant.

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Worthington	Ohio	4 - Other	As a criminal justice lawyer in Ohio, I have seen firsthand how our legal system is currently buckling under the weight of an unprecedented caseload. My testimony is not just about a plant; it is about the preservation of a functioning judiciary and the safety of our communities. The absolute last thing our state needs is to flood our already overwhelmed courts with thousands of new low-level "possession" cases. Our dockets are already saturated with violent crimes and high-level trafficking; redirecting those resources to prosecute individuals for using a natural herb would be a catastrophic waste of taxpayer money and judicial time. The Looming Crisis of Prohibition. If natural kratom is removed from the legal market, we are essentially engineering a "ripple effect" that will tear through Ohio. When you criminalize a substance that people use as a bridge away from street drugs, you don't eliminate the demand you simply shift it to the black market. The dangers of this shift are clear: The Fentanyl Vacuum: For many Ohioans, natural kratom is the only thing keeping them from the "hard" drugs that are killing our neighbors. If they lose access to a safe, natural option, they will be forced back into the arms of street dealers where synthetic fentanyl is the primary product. Adulterated Supplies: In a prohibited market, there is no quality control. We would see "kratom" products spiked with potent synthetics to increase their addictive profile, leading to the very overdoses we are trying to prevent. Judicial Gridlock: Criminalizing natural kratom would mean more arrests, more public defenders stretched to their breaking points, and more families destroyed by the "war on drugs" cycle. A Better Path Forward: Regulation, Not Prohibition Instead of a ban that fuels the fentanyl crisis, Ohio should focus on Senate Bill 299, which aims to regulate the industry. This approach protects consumers without the heavy-handedness of criminalization. Effect on Public Health Full Ban Increases court caseloads and funds cartels. Risk of relapse to fentanyl; higher overdose rates. Regulation Keeps law enforcement focused on violent crime. Ensures product purity and prevents sales to minors. Civil liberties to companies. Sin tax sb299. We cannot afford to repeat the mistakes of the past. Natural kratom is a vital tool for harm reduction. By keeping it legal and regulated, we keep our streets safer, our courts clearer, and our citizens alive. I am someone whose family and community will be directly harmed by the proposed kratom ban. This is not just a policy debate this is about real people's lives, and I am deeply frustrated that the human cost of this bill seems to be ignored. Kratom is a plant that my family and I rely on responsibly for pain management, wellness, and harm reduction. Taking it away will push people toward far more dangerous substances, like fentanyl and prescription opioids the very substances that are already destroying communities like mine. My family is not a statistic. We are real people, struggling to survive in a rural area with limited healthcare, few jobs, and no mental health services. This bill will not protect public health. It will make life harder for people who are already vulnerable and, in many cases, will endanger lives. I am angry that the focus seems to be on political or financial gain rather than the safety and well-being of families who rely on safe, natural alternatives. listen to the people directly affected, to think about the

			consequences of banning kratom, and to consider regulation, education, and quality control instead of prohibition. Lives, including the lives of my loved ones, are at stake. I have no doubt you guys are corrupt everybody sees it. A ban only ruins your credibility. Admitted on interview was to sell more drugs. While your on boards that have a Financial Incentive to ban kratom. God only knows what kick backs you will get for this ban. We will find out in January From where I sit, this effort does not appear to be about public health . it looks like a financial opportunity disguised as regulation. The connections, lobbying, and influence in this process raise serious questions about whose interests are truly being served. Communities like mine are suffering. Fentanyl is killing our children. Chronic pain is untreated. Rural hospitals have closed. Mental health services are almost nonexistent. Yet the conversation around kratom seems more concerned with protecting profits than protecting people. Removing access to a plant that adults use safely and responsibly will not save lives it will push people toward substances that are already killing them. This feels like a policy driven by money, not health. I am asking the board to reconsider the real-world consequences of banning kratom. People in pain, people trying to avoid opioids, and communities already struggling cannot afford yet another harmful policy disguised as "protection." I will be monitoring every step of this process, and I urge the board to make decisions based on evidence and public safety not financial or political gain. Lives are on the line.this just smells of corruption everyone can see it. We know DeWine on the take goes all the way down. Not about heath to sell medicine. What I think happening who getting the money 💰 just to screw the average Ohio this happened in Columbus we suppose to trust you the growing push to ban kratom a natural, plant-based substance used responsibly by many adults for wellness, chronic pain management, and harm reduction. The current narrative around kratom feels eerily familiar: exaggerated fears, misinformation, and alarmist headlines a "new Reefer Madness" targeting a plant that millions rely on safely. Kratom, when used responsibly, has been a safe alternative for people dealing with chronic pain, stress, or past opioid dependence. Unlike illicit opioids, kratom has not been linked to widespread overdose deaths when obtained from reputable sources and used as intended. Banning it will not protect communities it will push people toward far more dangerous substances like fentanyl and prescription opioids. I urge you to consider the real-world consequences of prohibition. Instead of banning kratom, we should focus on regulation: quality standards, labeling, age restrictions, and education. This approach protects public health while preserving safe access for adults who rely on it to improve their daily lives. You only want to ban to make money off it no a public health crisis. Below I quoted his interview with channel 4 news admitting this is about selling fda medicine. How we know he not getting kickback from other board members or companies want to see kratom banned. Kratom is not the enemy. Alarmism

			and fear-mongering are. Please support evidence-based policy that safeguards public health, rather than creating unnecessary barriers that endanger lives. Thank you for your time and consideration. Growing up on streets of East Cleveland, Born and raised Black and queer in a world that ain't never made space for folks like me. I was out there homeless for years, crashing in abandoned spots, alleys, wherever I could lay my head without gettin' jumped or arrested. Crack had me in its grip tight, man. Started as a way to numb the pain the rejection from my own blood for lovin' who I love, the cops hassling me just for existing… Before I knew it, I was chasin' that high every damn minute, sellin' whatever I had even my body left of my soul just to score. Rock bottom? Nah, I was diggin' deeper than that, feel me? Lost weight, lost teeth, lost hope. Thought that was my life forever queer Black dude wondering the blocks like a ghost. But listen, something' shifted. I hit this point where I was done dying slow. Met this one cat at a shelter who put me on to kratom. At first, I was like, "What the hell is that? Some herbal tea bullshit?" But he broke it down: it's this plant from Southeast Asia, folks been usin' it for pain and to kick opioids. I was skeptical as hell, but I was desperate. Started small, brewin' it up like tea or takin' capsules I scraped together money for. Man, it eased the withdrawals something fierce the shakes, the sweats, the craving that felt like fire in my veins. Wasn't no miracle overnight, though. I had to fight, go to meetings, link up with a queer support group that didn't judge. Kratom gave me that bridge, that little bit of calm to rebuild. Cut the crack cold after a few weeks, no turning back. Fast forward, and life's flipped the script on me. Clean for three years now. Got a steady gig fixin' cars—turns out I got skills when my head's clear. Met my partner, a strong-ass Black king who gets me, all of me. We adopted two kids last year, little ones who needed a home like I did back then. We're building a family in a crib out in the suburbs, away from the chaos but still repping where I came from. Cookouts, school runs, love that's real and fierce. I ain't forget the streets; I volunteer at shelters, telling my story so others know there's a way out. If you're reading this and struggling hold on. It gets better. Kratom saved my life keep natural kratom legal natural kratom as a Schedule I controlled substance. As a responsible professional and a law-abiding citizen of Ohio, I find the Board's current trajectory not only misguided but an overreach of administrative authority that ignores the lived experience of thousands of Ohioans. Responsibility I have utilized natural kratom responsibly for 10 plus years 2012 to manage my Arthritis. It has allowed me to remain a productive member of the workforce and maintain my quality of life without the debilitating side effects often associated with FDA-approved pharmaceuticals. To suggest that this plant has "no accepted medical use" and "lacks safety" ignores the millions of Americans who use it daily as a safe alternative to more aggressive chemical interventions. Transparency and Institutional Trust There is a profound lack of trust among the public regarding this sudden push for a total ban. While the recent ban on "synthetic" compounds was presented as a safety measure, the move to criminalize the natural leaf appears to be a financial

			maneuver rather than a public health necessity. Many of us see this as a "money grab" designed to disenfranchise citizens and force them back into a healthcare system that prioritizes pharmaceutical profits over individual choice. We are well aware of the "revolving door" between regulatory boards and the industries they are meant to oversee. A Call for Regulation, Not Prohibition The responsible path forward is not criminalization, but the Kratom Consumer Protection Act (House Bill 587). Regulation ensures purity, proper labeling, and age restrictions addressing legitimate safety concerns without stripping away the rights of responsible adults. Accountability Be advised that the citizens of Ohio are paying close attention to who is "holding the paper" on this decision. With the political shifts occurring this January, there is a renewed demand for accountability from unelected bureaucrats. We expect our government to serve the interests of the people, not the bottom lines of corporations. I urge the Board to rescind this proposal and allow the legislature to move forward with a common-sense regulatory framework that protects both public health and individual liberty. ScreenRecording PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	4 - Other	I can tell none of you been incarcerated because anybody who's been incarcerated would never want that for anybody else. Everybody sees what this is you are bureaucrats corrupt hacks. Save face allow natural kratom. Nothing has changed other than possible payments for Cameron mcnamee and his Polly board membersship thrive for change. If we get bank record and show this is true the board ruins it credibility even to a point I don't think was possible. That's the stakes in this kratom game. Roll the ball see what comes out. You lose nothing by backing down. Actually gain lot more respect for you. Say you did right thing we not doing the drug war in Ohio The political winds are changing for the pharmacy. The corruption will end. You lied to said this was about public health was never public health. Then you got Cameron mcnamee saying it's about fda medicine. We see you guys are corrupt, we know you have conflict of interest and we're willing to bring those right out in the. I been talking to lawmarkers. Easily go back to DeWine and payments. Especially thrice for Change and 3 party vendors Consultant. We know everything. The best way to end this is leave natural kratom alone so you can go about your Corrupt business, The board credibility will be restored and the next pandemic people trust you and you save face. DeWine won't pardon you stop this fake kratom madness Everyone knows what your doing All you be out jobs in February so you can sit on A pharmaceutical board after you get fired from the pharmacy board. This is the biggest lie I told is that it's about public health. Everybody see through your production. As you sit and read this can you look around and be sure there's no corruption no hidden deals. We will find out. Lawmarkers want answers on thrive for change what's going on with that the more we look the more questions we have This is not about public heath this is a money grab for you corrupt bureaucrats. Cameron mcnamee sits on the board thrive for change. Clearly a conflict of interest. How do the public not know he took back money deals to bam kratom. Trust with the board is all time low. You want boomer drug watt we want plant freedom . Couldn't be more out of step then with public and lawmaker if the board had any credibility, they leave natural kratom alone I would really tarnish the board image if it came out Corruption. classification of natural mitragynine (kratom) as a Schedule I controlled substance. This move is not about public health; it is a clear example of "New Reefer Madness" that ignores science in favor of pharmaceutical interests and bureaucratic overreach. Natural vs. Synthetic: A Deliberate Misrepresentation For years, natural kratom has been used safely by thousands of Ohioans for pain management and as a life-saving alternative to toxic opioids. Your "8-Factor Analysis" fails to distinguish between the natural leaf and the synthetic 7-OH extracts that have recently

			flooded the market. While we support the regulation of synthetics and high-potency extracts, your attempt to ban the natural plant itself is a "backdoor" tactic that ignores the thousands of citizens who have testified to its benefits. Conflict of Interest and Pharmaceutical Influence run the board of pharmacy with Cameron mcnamee thrive for change . The public does not trust this process because it reeks of corruption. While you claim to protect us, your board is comprised of member who over seas groups giving out Fentanyl test strips an industry that stands to lose billions if people have access to an affordable, natural plant. By scheduling kratom, you are effectively acting as a "sales force" for FDA-approved medications like Suboxone, ensuring that Ohioans remain dependent on the very companies that fueled the opioid crisis in the first place. Ignoring the Science and Federal Guidance HHS Secretary Robert F. Kennedy Jr. and other federal officials have recently emphasized that the focus should be on synthetics, not the natural leaf. Even Governor DeWine initially paused this ban after speaking with federal leaders, yet the Board continues to push forward with a policy that will turn law-abiding Ohioans into criminals overnight. This does not stop overdoses; it creates a dangerous black market and pushes people back toward fentanyl.we Demanding Accountability. Especially as the new governor comes in. Your performance in recent interviews, including with NBC4, has shown a total disconnect from the "ivory towers" of Columbus and the reality of Ohio's streets. You are ignoring the Kratom Consumer Protection Act (HB 587/SB 339), which provides a sensible path for regulation, testing, and age limits. We are tired of being treated like addicts by a board that serves lobbyists rather than citizens. The "Reefer Madness" era is over. If you continue to prioritize pharma profits over the lives of Ohioans, you will lose all remaining credibility. We demand that you withdraw the proposal to schedule natural mitragynine and instead work with the legislature to pass the KCPA. that Board members and the FDA are influenced by lobbyists for pharmaceutical companies. The suspicion is that bureaucrats want to ban a cheap, natural alternative for pain and mood management to force people onto expensive, FDA-approved medications (like Suboxone or Methadone) that generate "user-fee" revenue for the agency. What your board members said in an interview. No one with eyes believes this is about public heath. Recent reporting and interviews on NBC4 Columbus have highlighted the gap between the Board's narrative and the reality of users. While officials cite "public health," advocates point out that the Board's own "8-Factor Analysis" relies on data that federal leaders (including HHS Secretary RFK Jr.) have recently questioned or rejected as outdated Representative Brian Lorenz and others have introduced the Kratom Consumer Protection Act (KCPA) to regulate quality and ban synthetics. Advocates argue the Board of Pharmacy is attempting a "backdoor" ban through administrative rules to bypass the legislature and the thousands of Ohioans who testified in favor of safe, regulated access. By making natural kratom a Schedule I drug, the state would treat long-term users many of whom use it to stay off opioids the same as heroin or LSD users. Critics say this doesn't protect health; it creates a new class of "criminals" out of law-

			abiding citizens. Total wrong and everyone seems through it about education not corrupt bureaucrats lining pockets PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	4 - Other	I am writing to express serious concern regarding a potential conflict of interest involving Cameron McNamee. It has come to my attention that Mr. McNamee serves on the board of an organization that distributes Narcan and test strips. At the same time, he holds a position that requires him to provide independent scientific guidance and assessments. This dual role raises a fundamental question: how can Mr. McNamee remain unbiased in his scientific work while simultaneously being part of an organization with a direct financial and operational stake in the products he may be evaluating or advocating for? The appearance of conflict undermines trust in the integrity of any research, policy recommendations, or public health guidance associated with him. Scientific credibility depends on impartiality, and any financial or organizational interests that could influence judgment must be disclosed and appropriately managed. I urge [Ito review this situation carefully and ensure that all potential conflicts of interest are transparently addressed. The public and the scientific community deserve assurance that recommendations and research are conducted without undue influence from personal or organizational affiliations. Thank you for your attention to this critical matter. I look forward to your response detailing how this conflict is being addressed.

Worthington	Ohio	4 - Other	There is a glaring contradiction in Ohio’s current policy. While the Board of Pharmacy moves to make a natural leaf a Schedule I felony, the state is simultaneously board member on a board handing out free fentanyl test strips to prevent deaths from "hardcore" drugs. The Irony: They acknowledge that street drugs are lethal and require "harm reduction," yet they want to criminalize a botanical that acts as a partial agonist with a built-in "respiratory ceiling." Banning a mild natural substance doesn't stop use; it drives people toward the very "hardcore" drugs the state is trying to fight. As Dr. Ryan Marino and other experts have warned, this ban will likely lead to more fentanyl overdoses. This a money grab is about “backroom deals" everyone see it's a reaction to the revolving door between regulatory boards and the industry. We won't know the full extent of the financial benefints till January but the pattern is clear: When a natural competitor is banned, someone with a patent wins. The political shift in January 2025 has brought a wave of skepticism toward the "Administrative State." Bureaucrats who overreach in 2026 are finding themselves under intense scrutiny from both the public and a new brand of populist leadership that doesn't trust you guys. Everyone see this for what it is corruption under the disguise for public health to sell FDA medicine PDF: the concern lies in that we have FDA approved medications to help individuals with opioid use disorder. And those have gone through phase one, two, and three clinical trials, whereas creatinum has never gone past a phase one clinical trials. We want to drive individuals who are experiencing substance use disorder to those evidence-based approaches. Representative Brian Lorenz, who is sponsoring

Worthington	Ohio	4 - Other	I am writing to express my anger and outrage over the press interview involving Cameron McNamee. Watching someone go on television and openly try to push people onto FDA-approved drugs instead of natural alternatives like kratom was absolutely disgusting. This was not about public health, recovery, or helping people it was about selling more medication. Let's be honest about what this was. This wasn't education. This wasn't concern. This was a sales pitch. You don't care about people you care about selling more drugs. Said it on tv Cameron McNamee said it himself during the interview. I recorded it. Hearing someone admit that so openly is one of the most shameful things I've ever witnessed. People turn to natural options like kratom because the pharmaceutical system has failed them, harmed them, or trapped them in dependency. Going on TV to undermine that and push FDA drugs instead is reckless, self-serving, and morally bankrupt. This was not public service. It was propaganda. It was profit over people. And it was absolutely disgusting. That interview should embarrass everyone involved. It exposed exactly what your priorities are, and they have nothing to do with genuine care or healing. Proved my point this isn't a debate your already bought and paid for g Hurt Ohioans you scum hearing you openly state that your goal is to get people on FDA-approved medication. Let me be very clear: I will not listen to you, support you, or take anything you say seriously after that. Telling people your goal is to push them onto FDA medications completely contradicts the entire reason many of us turn to alternative or natural approaches in the first place. People are trying to heal, not be cycled back into the same pharmaceutical system that failed them. Hearing you proudly say this out loud was shocking, offensive, and honestly disgusting. It shows exactly where your priorities lie and it isn't with the people you claim to help. Natural medicine is about autonomy, real healing, and moving away from dependency on drugs whenever possible. You didn't just miss that point ….you stomped all over it. Instead of supporting informed choice, you chose to promote the same FDA-driven mindset that keeps people sick, dependent, and unheard. At this point, I'm done listening. Your message is clear, and it's ugly. If pushing FDA medications is your mission, then own it but don't pretend you're on the side of people seeking alternatives. Wrong message. Wrong platform. Wrong values. Your not even going to listen to use because your corrupt board of officials already got paid off Hearing you openly promote getting people "back on Suboxone and other FDA-approved medications" completely undermines the entire purpose of natural medicine. The fact that this was said so casually, on a major channel 4…People turn to natural medicine precisely because they are trying to move away from dependency on pharmaceutical drugs not be pushed right back onto them. Many have experienced serious side effects, long-term harm, or a complete lack of real healing from FDA-approved medications. Acting as if returning to those drugs is the obvious or superior solution is not only ignorant, it's deeply disrespectful to the people who are actively trying to

			reclaim their health. Suboxone and similar medications may have a place for some individuals, but presenting them as the answer while dismissing or undermining natural approaches shows a narrow, outdated mindset. Natural medicine exists because conventional medicine has failed many people. Ignoring that reality is either willful blindness or blatant dishonesty. What makes this worse is the platform you used. Channel 4 reaches a massive audience, and instead of encouraging informed, nuanced discussion, your interview pushed a one-sided narrative that benefits pharmaceutical systems rather than patients. I am so upset, angry disappointed, and frankly appalled by what you chose to say. If your intention was to support people's health and recovery, that interview did the opposite. It sent the message that natural medicine is secondary, unserious, or unnecessary which is exactly the kind of thinking people are trying to escape. You should take responsibility for the message you put out and the harm it may cause. Because for many of us, that interview wasn't just frustrating it was insulting. You're not even gonna willing to have an honest debate you scum
Cleveland	Ohio	4 - Other	Discomfort management, Mental well-being

Mentor	Ohio	4 - Other	It seems no matter what we do. You people are guna ban it anyway, the people who don't understand people like me, and the people who actually depend on this for pain are guna suffer cause of the ones who abuse it for fun. I got shot years ago nearly died, and left with a shredded up mangled entire left leg that was filet'd almost amputated. And left me in horrendous chronic pain for the rest of my life. Something all of you will never be able to relate to. the suffering every second of my life every minute, day, week, year of my life is hell. And The same doctors that have tried everything under the sun that doesn't help besides painkillers won't give that either. are the ones banning the only thing that actually does kinda help. But of course since it's not from BIG PHARMA annd just a plant from earth they can't regulate it to make money. And that's why drugs on the street run wild, and rates of suicide continue to climb. You people ruin peoples lives. And you've continued to ruin mine. Instead of criminals or people who abuse. WE THE PEOPLE DISABLED IN PAIN FOREVER AT 26 YEARS OLD CANT EVEN PLAY WITH MY KIDS WHEN IM NOT TAKING SOMETHING TO HELP. YOU ARE GUNA TAKE THAT AWAY TOO. WE NEED THIS. FUCK. YOU.
Worthington	Ohio	4 - Other	I am writing to express my profound outrage and concern regarding the continued board membership of Cameron McNamee. It has come to my attention that Mr. McNamee is directly involved in the distribution of Suboxone while simultaneously holding a position of influence that impacts policy and "bans" related to addiction treatment and recovery. This situation presents a blatant conflict of interest. I am demanding a formal response to the following questions: Financial Incentive: How is Mr. McNamee's role on this board not a violation of ethical standards, given that he stands to benefit financially from the very policies and bans the board promotes? Has the board consulted legal counsel regarding the legality of a member profiting from the distribution of controlled substances while influencing public health mandates? In many jurisdictions, this level of self-dealing is viewed as criminal or, at the very least, a gross breach of fiduciary duty. Why has this connection not been made more transparent to the public who are impacted by these decisions? It is unacceptable for an individual to use a non-profit or advisory platform to create a market for their own products or services. This undermines the integrity of Thrive for Change and harms the community you claim to serve. I expect a written response detailing how the board intends to address this conflict and whether Mr. McNamee will be asked to step down to preserve the organization's remaining credibility.

Worthington	Ohio	4 - Other	Keep natural kratom legal: we are not drug users I am a professional. I don't have money to go the doctor. I am taking care of my family i don't want to go to the doctor it's a waste of money because I have my medical Mariana card and they won't give me any medicine because of that card. So I am out of luck unless I am drug tested. Natural kratom safe. I am sick of the lies: kratom is safe all types of studies this is reefer madness, and everybody sees it An Open Letter: How Did We Get Here With Natural Kratom? How did we reach a point where a natural plant, used responsibly by thousands of adults, is suddenly treated like a public menace? The answer is not science. It is politics, fear-based messaging, and a familiar pattern that feels disturbingly similar to past moral panics. What we are witnessing around natural kratom looks less like public health policy and more like a modern version of reefer madness—where exaggerated claims are repeated until fear replaces facts. Ohio Governor Mike DeWine and others in power appear to have accepted alarmist narratives about kratom without engaging meaningfully with people who actually use it responsibly, without addiction, without criminal behavior, and without harm. When dissenting voices speak up especially those grounded in lived experience or emerging research they are often dismissed, marginalized, or effectively silenced. Conversations are shut down before they can happen. That lack of open dialogue raises a deeper concern: credibility. Public trust erodes when regulatory decisions feel predetermined and when boards appear aligned with a single outcome rather than an honest evaluation of evidence. It becomes even more troubling when the stated goals such as steering people toward FDA-approved medications—are voiced while alternative, plant-based harm-reduction options are pushed out of existence. This brings us to the unavoidable question many Ohioans are asking: Who benefits? What Recent and ongoing scandals in Columbus related to Harm reduction, Ohio. conflicts of interest have already shaken public confidence. When leaders in harm-reduction spaces such as figures associated with Thrive for Change, including Cameron McNamee have faced scrutiny over compensation and incentives tied to product distribution, of test strips. it naturally makes the public wary. but they create a context in which transparency matters more than ever. So when kratom users are told this crackdown is "for public health," while being funneled explicitly or implicitly toward pharmaceutical alternatives, skepticism is not paranoia. It is reasonable civic concern. I am not accusing anyone of criminal wrongdoing. I am questioning a system that increasingly appears closed, conflicted, and dismissive of the people it claims to protect. When interviews are avoided, when records show predetermined goals, and when lived experience is ignored, the Board of Pharmacy risks losing the very legitimacy it needs to function. Natural kratom did not create this crisis. The people who use it responsibly did not ask for this fight. We are professionals reveals with jobs, families, and communities who chose moderation, transparency, and personal responsibility. If this were truly about public health, the response would be evidence-based, open to discussion, and inclusive of responsible users—not driven by fear, censorship, and one-sided

			narratives. Ohio deserves better. We deserve honesty, transparency, and policies rooted in science—not politics or profit.

Worthington	Ohio	4 - Other	They have people on methadone forever same as suboxone ! All they’re doing is switching drugs to make big companies richer, they don't think about the recovery!! Keep natural kratom legal Kratom is a plant that, when used responsibly, has been shown in recent studies (2025) to be safe. Lab-tested products from reputable vendors ensure quality and consistency, making it a reliable option for wellness and pain management. As a member of the LGBTQ community, kratom has personally helped me maintain balance, manage stress, and approach life with clarity and confidence. Its use has supported my mental and physical well-being without compromising my responsibilities or lifestyle. Beyond personal benefits, kratom has strengthened my connection to a broader community. It brings people together who prioritize informed, responsible use, fostering dialogue, support, and mutual respect. In this way, kratom is not just a wellness tool it is a bridge that nurtures understanding and solidarity within diverse communities. Used responsibly, kratom is safe, life-enhancing, and community-building. As a professional, I take my health and responsibilities seriously. Part of that approach includes using kratom in a careful, moderated way not out of dependence, not out of addiction, but as a tool to manage occasional discomfort responsibly. My use is intentional, measured, and fully controlled.I source my kratom from a reputable vendor, one that is sponsored by the American Kratom Association and provides lab-tested products. Quality and safety are non-negotiable. I am mindful of dosage, timing, and the limits of responsible consumption. This is not recreational abuse; it is a personal health practice carried out thoughtfully.It is important to recognize that using kratom responsibly does not make someone a criminal. People like me, who manage pain or wellness within moderation, are often overlooked in the broader public debate. Waiting to be in pain or managing life’s stressors responsibly does not equate to wrongdoing. Band and restrictions on kratom are often framed as public health measures, but the reality is more complicated. Many of us see through this narrative: these policies frequently prioritize profits and politics over evidence-based science. In fact, studies in 2025 have shown kratom to be safe when used responsibly. Kratom has helped countless individuals maintain balance, wellness, and productivity without harming themselves or others. Responsible professionals like me are proof that it can be used safely, with care, and with full respect for our responsibilities. Policies should reflect the science and support responsible use, rather than punish the informed and cautious. Kratom use, when guided by moderation, reputable sources, and careful self-awareness, is a matter of personal health not criminality. Keep natural kratom. This about my right to choose how I want to treat pain not some bureaucrat a concerned Ohio resident, but as someone who has witnessed firsthand the very real harms caused by addiction and

			systemic neglect in our communities. Many Americans especially those struggling with homelessness, chronic pain, or limited access to healthcare are left with few safe options for symptom management or harm reduction. In this context, natural Kratom has offered a measure of relief and support for many, when used responsibly. I am deeply worried about issues of trust and integrity in public health and pharmaceutical distribution. Ohio has seen serious controversies in the past few years that highlight how easily corruption, conflicts of interest, and poor oversight can undermine public confidence in our institutions: • In August 2025, the founder of Harm Reduction Ohio filed a federal whistleblower lawsuit after discovering that the nonprofit's chief program officer had a second job with a consulting firm representing the manufacturer of Kloxxado — a high-cost naloxone product that the nonprofit purchased with federal funds — raising serious concerns about conflicts of interest and decision-making incentives. The founder was fired, and the matter has been referred to the Ohio Inspector General. These kinds of contested relationships especially when taxpayer dollars are involved make it understandable why citizens are wary of regulatory decisions that could remove access to natural substances like Kratom without transparent evidence and accountability.Cameron mcnamee thrive for change I believe in a similar position with thrive for change he has a Financial incentive to be natural kratom and I worry this is all show

Worthington	Ohio	4 - Other	Cameron McNamee's recent statements on Local News 4 have sparked intense anger and disbelief. According to McNamee, the purpose of board to sell pharmaceutical drugs for the fda…many are calling For his resignation only misleading but outright disgusting. People who use natural medicine to go back on s. Honest to God, one of the most disgusting things I've heard in a while you guys should be ashamed of yourself. We know you're corrupt, but this just proves it out and open. This whole thing is a shame isn't it? This kind of rhetoric exposes a disturbing truth: a disregard for public health and a willingness to manipulate information for hidden agendas. It's hard to imagine a more blatant example of media figures abusing their platform to push narratives that serve anyone but the public. The audacity of promoting misinformation while already operating in a system under scrutiny is shocking. Americans deserve honesty, transparency, and integrity from both public health authorities and the media but McNamee's words reflect the exact opposite. Such behavior is not just irresponsible; it is morally repugnant. The public relies on accurate reporting to make informed decisions, especially regarding health. To see that trust potentially exploited for personal or institutional gain is deeply disturbing. McNamee and others engaging in similar tactics are showing that they prioritize their own interests over the wellbeing of the community. It's time to demand accountability. The American public cannot continue to tolerate media figures who treat public health as a tool for personal or political gain. The line between reporting and manipulation has been crossed, and the consequences for public trust could be severe. Cameron McNamee's statements are a stark reminder of how fragile public trust can be and how quickly it can be shattered when media and public officials abandon honesty. Outrage is justified, and vigilance is essential.

Worthington	Ohio	4 - Other	I am writing to formally express concern regarding an apparent conflict of interest involving a current member of the Board of Pharmacy and the lack of transparency surrounding it. It has come to public attention that a board member advocating for restrictions or a ban on kratom has also served on the board of Thrive for Change, a nonprofit organization with specific policy interests, including harm-reduction initiatives such as test strip distribution. This affiliation was not clearly disclosed in a manner that would allow the public to fully evaluate potential bias or influence. This is deeply troubling. When an individual in a regulatory position promotes policy outcomes while holding leadership roles in external organizations with overlapping or adjacent agendas, disclosure is not optional—it is essential. Failure to do so undermines the integrity of the board and erodes public trust in its decisions. Under these circumstances, it is reasonable for the public to question whether advocacy against kratom is being driven by objective evidence and public safety considerations, or by undisclosed affiliations and ideological alignment. Regardless of intent, the appearance of impropriety alone is damaging.Regulatory bodies must be held to the highest standards of ethics and transparency. When those standards are not met, credibility is lost—not just for the individual involved, but for the institution as a whole. I urge the Board to address this matter openly, review disclosure practices, and take appropriate steps to restore public confidence. Anything less reinforces the perception that decisions are being influenced behind the scenes rather than guided by transparent, evidence-based process.everyone is watching What was supposed to be a neutral, evidence-based review turned into something else entirely. Not debate. Not science. Not public safety. What the public witnessed was a process so lopsided and conflicted that the outcome felt decided before the first word was spoken. People came ready to engage honestly about natural kratom. That door was closed the moment conflicted interests were allowed anywhere near this process. When Cameron McNamee of Thrive for Change is given influence while standing to benefit from a ban, the conversation ends. Not because the public walked away — but because the Board forfeited credibility. That conflict alone is enough to poison the well. And yet, it was allowed. Openly. Ohio law may permit gifts, but it does not excuse the erosion of ethical judgment. When regulators blur the line between oversight and self-interest, the public stops believing anything that follows. And now the obvious question is unavoidable: if this is what we can see, what don't we see? How many other decisions have been shaped by quiet incentives instead of evidence? How many other "public safety" arguments were really about market control and financial advantage? This Board wants the public to trust its intentions while refusing to acknowledge glaring conflicts of interest. That contradiction is why trust is gone. Not weakened. Not strained. Gone. A kratom ban under these conditions will not be viewed as corruption… The narrative has collapsed. The mask is off. And the public understands exactly what this looks like. So do the lawmakers You still have a choice. You can confront the conflicts, disclose the interests involved, and correct course or you can move forward knowing

			this decision will follow you long after the vote is taken. This is no longer just about kratom. It's about whether this Board can claim legitimacy at all. This letter is written to state plainly what many now see clearly: the credibility of this process and of this Board is gone. Ohio state law may allow gifts, but when those gifts intersect with regulatory power, special interests, and financial gain, the result is corruption in everything but name. The public is left to wonder how deep this problem goes. If this level of conflict is allowed in plain sight, how can anyone trust that other boards are not similarly compromised by special interests operating behind closed doors? I came prepared to engage in a legitimate debate about natural kratom one grounded in science, evidence, and good faith. That opportunity was destroyed the moment Cameron McNamee of Thrive for Change was allowed influence in this process. His involvement alone proves the process is riddled with conflicts of interest. That is not opinion it is observable fact. This is what we know. The far more disturbing question is: what don't we know? If one conflicted board member can participate openly, how many others are sitting on boards, committees, or advisory roles while benefiting financially from the outcomes they promote? How many decisions have been influenced not by public safety, but by profit? Lawmakers should be deeply concerned when they learn this process was never fair. This was never about safety. It was never about transparency. It was about money about control, influence, and stuffing bank accounts while pretending to regulate. Everyone sees it now. The mask is off.The appearance of neutrality is gone. The claim of integrity is gone. Public trust has been sacrificed for profit, and once that trust is broken, it cannot be reclaimed through procedure or silence. This Board had an opportunity to act with honesty and accountability. Instead, it chose to expose itself. History will not be kind to this decision and neither will the public. To the Ohio Board of Pharmacy, I am stunned and disgusted by what was admitted on Channel 4 News. To openly state that your goal is to push people back onto pain medications under the guise of "helping them get off opioids" is appalling. This is not about public health it is about control, corruption, and profit. Ohio's corruption runs deep, and your board is no exception. The fact that this is being done openly, without shame, is breathtaking. You are going against the people, against science, and against basic decency. Your actions are morally bankrupt, and the public can see it clearly. This is not leadership. It is exploitation, and the individuals responsible are exposing themselves for the world to see. You have failed the people of Ohio, and history will remember the corruption and disregard for human life displayed so blatantly. — A concerned Ohioan To the Ohio Board of Pharmacy, I am absolutely shocked and disgusted by what was admitted in your recent interview on NBC Channel 4. To hear a member of your board openly state that you want people to go back on pain

			medication to use prescription medicines instead of staying off opioids is nothing short of appalling. This is not about public health it is about control, money, and corruption.Your actions reveal that the Board of Pharmacy has completely abandoned its duty to protect Ohioans. Instead of supporting patients in recovery or promoting safe alternatives, you are pushing agendas that serve your own interests. The public can see through it now. It's right there in the open: the corruption, the backdoor money, the disregard for real human suffering. This is a betrayal of trust and a moral failure. The people of Ohio deserve leadership that puts their health above profit. You have failed completely, and the public knows it. History will remember this moment and the individuals responsible for putting politics and money ahead of patients' lives. Really sad because I thought you have a open debate but your corrupt my money do the bidding of big pharmaceutical, I just thought you weren't stupid to admit it on tv

Worthington	Ohio	4 - Other	To the Ohio Board of Pharmacy, Your recent interview on ABC4 Columbus was shocking and disgraceful. By openly admitting that you want people who are successfully staying off pain medications to take another type of medication, you have exposed a fundamental betrayal of the very people you are supposed to protect. This completely defeats the purpose of promoting health, recovery, and patient autonomy. The corruption within your ranks runs so deep that it has become disgusting. It is now clear to everyone that your actions are driven not by public service, but by money and control. You are taking from the people for your own gain, and the public sees the is right there in the open. The people of Ohio want natural, responsible solutions. Yet you continue to push policies that harm patients and undermine trust. History will see this moment, and when new leadership comes in, those responsible will be held accountable. You have lost all credibility, and the people know it. This is not just policy failure — lit is moral failure. The corruption is obvious, and it is unacceptable. — A concerned Ohioan
Worthington	Ohio	4 - Other	The public is no longer blind to the mechanics of this system. We see a regulatory body that claims to act for "public health" while operating as a gatekeeper for the very industries that fund it. The "Revolving Door" and the Funding Problem It is a documented fact that as of 2026, nearly half of the FDA's budget is funded by industry user fees. This creates a fundamental conflict of interest: the regulator is financially dependent on the regulated. Furthermore, we see over 50% of senior FDA leadership leave public service only to take high-paying roles at companies like Pfizer and Eli Lilly. Or like Ohio border of pharmacy member sitting on cushy Polly boards. When you move to ban a natural herb that people use as an alternative to expensive, synthetic pharmaceuticals, you aren't "protecting" us. You are protecting the market share of your future employers. The Failure of Prohibition Your board is currently attempting to repeat the exact same "Reefer Madness" playbook used for marijuana. For decades, we were told marijuana was a "Schedule I" danger with no medical use. Today, it is legal in Ohio. We don't trust the "Schedule I" label anymore. We don't trust the bureaucrats who ignored the opioid crisis while it was being fueled by "FDA-approved" pills. Among Ohioans under 50, trust in the medical establishment has plummeted to historic lows (hovering around 40% in recent polls) because we see a system that prioritizes lining pockets over providing care. The People and Lawmakers are Watching Do not mistake our silence for ignorance. The people of Ohio are with us. We have seen how natural herbs provide a quality of life that the "greedy medical system" cannot or will not offer. Many of our lawmakers are beginning to realize that these bans are not driven by science, but by a desire to force citizens back into the arms of the pharmaceutical industry. As a taxpayer and a citizen, I am demanding that you: Stop the scheduling of natural kratom. Acknowledge the science that shows natural leaf kratom is a safe, effective tool for millions. Respect education and not kratom reefer madness End the corruption of prioritizing corporate "user fees" over the rights of Ohioans. The era of "government knows best" regarding our own bodies is over. We see the corruption. We see the money. And we will not comply with a ban designed to protect profits over people.

Worthington	Ohio	4 - Other	Mr. Mcnamee, I am writing to express my absolute outrage regarding the Ohio Board of Pharmacy's transparent agenda to prioritize "approved drugs" while actively working to dismantle access to natural alternatives. Your recent rhetoric makes it crystal clear where your loyalties lie: they are not with the citizens of Ohio, but with the bottom line of the pharmaceutical industry. To state that the Board "wants people on approved drugs instead of natural" is an admission of deep-seated corruption. It is a betrayal of public trust. You are effectively telling Ohioans that they do not have the right to choose what goes into their own bodies, simply because a natural plant cannot be patented and exploited for massive profit by your stakeholders. The "back-door" deals and the revolving door between regulatory boards and Big Pharma are a slap in the face to every person suffering from chronic pain, anxiety, or addiction who has found relief outside of a prescription bottle. While the state of Ohio has been ravaged by the opioid crisis—a crisis fueled by the very "approved drugs" you champion you have the audacity to target natural options that have helped thousands find a way back to health without the risk of lethal overdose.Your actions are not about safety; they are about control and revenue. You are helping yourself and your associates, not the people you were appointed to serve. By restricting access to natural substances, you are forcing patients back into a system that views them as lifelong customers rather than human beings. History will not look kindly on those who put profits over patients. The people of Ohio see through the bureaucratic jargon. We see the corruption, we see the greed, and we demand that the Board of Pharmacy stop acting as a marketing arm for the pharmaceutical industry Govern yourselves accordingly

Worthington	Ohio	4 - Other	As a firefighter, I face high-stress situations, long hours, and the physical demands of a job that leaves no room for hesitation. The work we do requires focus, endurance, and resilience both physically and mentally. Over the years, many of us have searched for safe, natural ways to manage stress, fatigue, and pain without turning to highly addictive pharmaceuticals. That's where natural kratom comes in. Kratom is a plant native to Southeast Asia that has been used for centuries for its stimulating and calming effects. In small doses, it can help increase energy and focus—critical qualities when responding to emergencies. In larger doses, it provides a calming effect, which can aid with recovery after a long shift or during periods of chronic stress. Unlike opioids or prescription painkillers, natural kratom offers these benefits with a lower risk of life-altering dependency when used responsibly. As first responders, we see the toll that injury and stress take on our bodies and minds. Many firefighters rely on kratom as a tool for managing minor aches, reducing inflammation, and improving overall wellness. It allows us to perform our duties effectively while avoiding the side effects and dangers associated with more potent medications. Critics often label kratom as dangerous, but much of the fear comes from unregulated or adulterated products. Responsible use of high-quality, natural kratom sourced from reputable suppliers can make a meaningful difference in health and performance. Education, moderation, and transparency are key. Natural kratom is not a miracle cure, nor is it a substitute for professional medical treatment. But for many firefighters and first responders, it is a natural, practical option for managing pain, stress, and fatigue. In a profession where every second counts and every decision matters, tools like kratom help us stay sharp, resilient, and ready to protect our communities. As a firefighter, I stand behind natural kratom not as a magic solution, but as a safe, natural option that supports our demanding lifestyle while keeping us alert, healthy, and prepared for whatever the job throws at us. I am writing to formally express my concern regarding the potential conflict of interest and perceived lack of impartiality in matters involving Cameron McNamee and Thrive for Change. It is crucial for the Board of Pharmacy to maintain a high standard of transparency and fairness in all deliberations and decisions, and I am concerned that these standards may be compromised in this instance. Specifically, I question how the Board can ensure an unbiased evaluation when there appears to be a close association or alignment between Mr. McNamee's activities and certain Board members. While open and honest debate is fundamental to governance, the current situation raises the perception—I whether intentional or not that impartiality may be compromised. This perception alone can erode public trust and confidence in the Board's ability to regulate fairly and uphold its mission. I respectfully urge the Board to: 1. Review any potential conflicts of interest related to Cameron McNamee and Thrive for Change. 2. Ensure full transparency in all proceedings involving this matter. 3. Consider implementing safeguards to reinforce impartiality and public confidence in your decision-making process. I appreciate your attention to this matter and hope that the Board will take proactive steps to address these concerns. Public trust is essential, and ensuring that

			decisions are free from bias is vital for maintaining the integrity of the Board's work. Thank you for your consideration.

Worthington	Ohio	4 - Other	Everyone see through this as a money grab. Someone getting payments not about public heath stop the lie could be Cameron mcnamee thrive for change gets extra money to ban natural. All we know yet what else will come out. Leave natural kratom alone and everything can quiet back down and go about without corruption investigation. This is often framed under the guise of "public health," a closer look at the data and the financial ties involved suggests a much more troubling reality. This is not a health crisis; it is a money grab designed to protect the monopoly of the pharmaceutical industry at the expense of American lives. For years, regulatory agencies have attempted to paint a natural leaf as a public menace. Yet, the science tells a different story. Unlike synthetic pharmaceuticals, natural kratom does not cause the respiratory depression that makes traditional opioids so lethal. If the goal were truly "safety," these boards would be focusing on the synthetic toxins flooding our streets, not a botanical that has been used safely for centuries. By pushing for a ban, you are not protecting me; you are removing my right to choose a safe, natural alternative. We must address the "revolving door" between the pharmaceutical industry and our regulatory boards. It is a clear conflict of interest when the same bodies responsible for banning natural plants are funded by the very companies that stand to profit from their absence. A natural plant cannot be patented. A natural plant cannot be "owned" by a corporation. By criminalizing this leaf, you are effectively forcing citizens back into the arms of Big Pharma, ensuring that the only path to relief is through a high-priced, "FDA-approved" prescription. This is not regulation; it is corporate protectionism. I am not a statistic; I am a success story. Before I discovered natural kratom, my quality of life was [briefly mention a struggle, e.g., severely limited by discomfort or fatigue]. Since choosing a natural path, my life has been transformed. I have regained my ability to [mention a specific achievement, e.g., work full-time, be present for my family, or exercise]. I am healthy, I am productive, and most importantly, I am safe. My blood work is clear, my mind is sharp, and I have achieved a level of wellness that years of traditional "medicine" failed to provide. To tell me that this plant is dangerous is to ignore the reality of my daily life. If this board truly cares about integrity, it will stop the march toward prohibition and instead support the Kratom Consumer Protection Act. This ensures that the products on the market are pure, labeled, and tested. Do not allow the pockets of the pharmaceutical industry to dictate our health choices. We see the corruption at the border of pharmacy and regulation, and we will not be silent while our natural rights are sold to the highest bidder. We know what happens when corrupt bureaucrats take over our heathcare policies drive us into the ground no one trust you we see through this money grab

Worthington	Ohio	4 - Other	Keep natural kratom legal. No one cares about oh07 natural kratom save no reason to ban natural kratom. Do not do this. Only hurts we know this board is fully corrupt with the dewine administration stealing everything. If this ban goest through against the people You will be investigated in January. Polly board members who profit on this. Everyone see this the lie Cameron mcnamee even said it not about public health but to sale more drugs. Why people hate the government who you helping never the people
Worthington	Ohio	4 - Other	Your recent interview was not just alarming it was a disgrace. By openly admitting that you wanted people on drugs, you confirmed what many Ohioans have feared for years: that the Board of Pharmacy has abandoned its duty to protect the public and instead chosen ideology, control, and corruption over health and common sense. Rather than expressing even a shred of embarrassment for the damage your policies have caused to patients, families, and this state's reputation, you doubled down. Ohio deserves better than leadership that treats suffering as an acceptable outcome or worse, a desired one.You have failed the people you were entrusted to serve. If this ban moves forward, understand this clearly: accountability is coming. With a new governor in January, your positions will not be protected, and your actions will not be forgotten. History will remember this moment. It will remember who stood against patients, against evidence, and against basic human decency. And it will remember you for what you are: corrupt and unfit to serve. To the Corrupt Scum at the board of pharmacy , I'm furious, and you should be ashamed..if you scum even have any shame left. You sit there in your cushy offices, pretending to protect the public health, but you've admitted through your actions, your approvals, your revolving-door corruption that you want everyone hooked on your Big Pharma drugs like Suboxone. It's the exact opposite of nature, you disgusting hypocrites. Nature doesn't push addictive opioids down people's throats as "treatment." Nature heals without synthetic poison that keeps people dependent for life while your pharma buddies rake in billions. But no, you corrupt pieces of trash push this crap on vulnerable addicts, turning one addiction into another lifelong money-maker for the industry. Look at what you've done with Suboxone (buprenorphine/naloxone). You approved it, let Indivior (formerly Reckitt Benckiser) fraudulently market it as "safer" and less abusable than generics, even though they lied about reduced diversion and pediatric risks. They submitted a sham citizen petition to you to delay generics, scaring patients away from cheaper options just to protect their monopoly. Indivior got indicted, pleaded guilty to felony fraud, paid billions in settlements—including $289 million criminal fine and $1.4 billion from Reckitt—and the fda let it slide, kept the drug flowing, and now you're expanding access like it's some miracle. Recent laws let pharmacists prescribe buprenorphine without the old waiver pushing it harder, making it easier to get people on this opioid "treatment." You want everybody on it, don't you? Admit it in your policies: expand, expand, expand MOUD (medications for opioid use disorder), mandate coverage, remove barriers—while ignoring how it keeps people chained to partial opioids forever. It's disgusting. You claim to

			fight the opioid crisis you helped create with lax approvals of painkillers, then pivot to Suboxone as the “solution” another opioid! Patients get shifted from street dope to your government-sanctioned dope, pharmacies stock it (or face your DEA threats if they don’t), and boards of pharmacy push guidelines to make pharmacists more willing to dispense it. But when pharmacies hesitate due to your own red flags and scrutiny, you call it stigma while your real agenda is clear: get as many people as possible on FDA-approved drugs for endless prescriptions and profits. Nature’s way? Detox, real healing, no lifelong chemical dependency. Your way? Perpetual customers. Your revolving door with pharma, conflicts of interest, failure to crack down on misleading marketing it’s all corruption. Whistleblowers exposed the fraud, states sued, FTC returned millions to overcharged patients, but you never fixed the root: approving and promoting addictive drugs as cures. You’re scum enabling addiction for profit, betraying every American struggling with this poison.stop this farce. Admit your bias toward pharma profits over natural health. Reverse the push to drug everyone focus on real recovery, not substitution. Until you do, you’re nothing but corrupt enablers destroying lives. Disgusted and demanding accountability, You guys are so hellbent to sell fda drugs it exposing your corruption I know your guy, but you will lose your job and we are going to investigate the corruption you scum I am writing as a concerned citizen to highlight the deep-rooted corruption within the FDA and the pharmaceutical industry, particularly surrounding the promotion and handling of Suboxone (buprenorphine/naloxone), a medication ostensibly designed to treat opioid addiction. The systemic failures, fraudulent practices, and barriers to access reveal a profit-driven agenda that prioritizes corporate gains over public health. It’s disgusting how agencies meant to protect us have become enablers of exploitation, leaving vulnerable people to suffer while Big Pharma lines its pockets. First, let’s address the FDA’s complicity in the opioid crisis through its lax oversight and approval processes. The FDA has a history of revolving doors with pharmaceutical companies, where regulators often move to lucrative industry positions, creating conflicts of interest that undermine public trust. In the case of Suboxone, manufactured by Indivior (formerly part of Reckitt Benckiser), the company was indicted in 2019 for fraudulently marketing the drug. Prosecutors alleged Indivior engaged in a nationwide scheme to convince doctors and insurers that Suboxone was safer and less prone to abuse than generics, bilking billions from programs like Medicaid. This included submitting a fraudulent petition to the FDA claiming the tablet form was discontinued due to safety concerns, solely to delay generic competition and maintain high prices. The FDA allowed this manipulation, despite evidence of misleading claims about reduced diversion and pediatric exposure risks. Indivior’s actions led to settlements totaling over $2 billion, including $1.4 billion from Reckitt Benckiser in 2019 for similar fraud. Yet, the FDA’s approval and failure to swiftly intervene enabled this profiteering, contributing to the very crisis Suboxone claims to combat. Compounding

			this corruption is the push to expand Suboxone use while ignoring its risks and the broader context. Suboxone, containing the opioid buprenorphine, is aggressively marketed as a “safer” alternative, but investigations revealed Indivior promoted it to physicians for unsafe, ineffective uses without proper counseling. Multiple states, including North Carolina, Michigan, and Washington, secured settlements for Indivior’s illegal monopoly tactics and improper Medicaid expenditures. The FTC even returned nearly $60 million to overcharged consumers in 2021, highlighting how Indivior scared patients away from cheaper generics. This isn’t innovation; it’s greed. The FDA’s endorsement of such practices, without rigorous scrutiny, reeks of corruption, especially when whistleblowers exposed these schemes under the False Claims Act, leading to historic payouts. Regarding state Boards of Pharmacy, while no direct admissions exist of a blanket desire to put “everyone” on Suboxone, the landscape reveals a troubling inconsistency. On one hand, recent laws like the SUPPORT for Patients and Communities Reauthorization Act of 2025 empower pharmacists to prescribe buprenorphine to expand access. This could be seen as a push to normalize its use. However, in practice, pharmacies create barriers: studies show only 58% of U.S. pharmacies stock buprenorphine, with many refusing prescriptions due to stigma, fear of DEA scrutiny, or self-imposed limits to avoid investigations.Pharmacists in states like North Carolina and Tennessee report discomfort dispensing it, often questioning prescriptions or dispensing lower doses.This selective gatekeeping rooted in biases and regulatory fears exacerbates the crisis, forcing patients into illicit use or untreated withdrawal. m If boards truly wanted widespread adoption, why tolerate these restrictions? It suggests a facade of support while maintaining control, perhaps influenced by the same corrupt incentives that plague the FDA. This entire system is disgusting a betrayal of public health for profit. While the Sackler family and Purdue Pharma faced scrutiny for OxyContin, Suboxone’s makers escaped with fines that barely dent their billions, and the FDA continues business as usual. We need real accountability: independent audits of FDA approvals, stricter conflict-of-interest rules, and policies that prioritize evidence over pharma lobbying. Until then, lives will continue to be destroyed by this corrupt machinery. I urge you to investigate these issues and push for reforms. The American people deserve better. Instead of you push drugs on us my deep concern about the potential ban on natural kratom and to ask why Ohio is taking a step backward in terms of addressing the real health needs of its people.As someone who has lived through the pain and suffering of the opioid epidemic, I have seen firsthand the devastation that pharmaceutical drugs have caused, particularly in Appalachia and in communities where addiction is rampant. People here are desperate for relief whether it’s from chronic pain, anxiety, or other conditions. For years, prescription pills were handed out like candy. But the reality is, those pain pills killed my neighbors, my friends, and even family members. The opioids that were supposed to help people live their lives ended up destroying them. Today, when I look at the pills in my medicine cabinet, I see nothing but a reminder of how quickly a single pill can turn into a deadly addiction. A single dose can kill you.The trust in the

			medical community is at an all-time low for many of us. Too many people have been misled, hurt, and abandoned by a system that promotes big pharma and puts profits over the well-being of individuals. We are caught in a web of over-prescription, addiction, and death, and the people of Ohio are searching for real alternatives. That's why kratom a natural, herbal remedy has been a lifesaver for so many. I've seen it firsthand. People in my community who've struggled with opioid addiction are using kratom to manage pain and withdraw from opioids safely, with fewer risks of addiction or death. Yet now, you want to take that away from us. Why?The question I want to ask is this: Why ban kratom, a safe, natural alternative, when we already know what the opioid crisis has done to our people? This ban would be a slap in the face to Ohioans who have found relief in a plant that has been used safely for centuries. Kratom isn't just some "fad"—it's a vital tool for managing pain without falling into the destructive cycle of addiction.I've heard the arguments that kratom is dangerous, that it can be abused. But honestly, it's clear that misinformation and fear-mongering are behind the push to ban it. No one in this state should be treated like a criminal for using a natural, safe alternative to the very drugs that have destroyed lives in our communities. Kratom is not the problem—the problem is the lack of access to safe, natural, non-addictive alternatives for pain and mental health. In a world where pharmaceutical companies have done so much harm, herbal medicine and plant-based alternatives like kratom are the future. They provide healing where prescription drugs have failed. We cannot let fear-driven politics dictate the health and well-being of Ohioans. We need to embrace natural solutions, not ban them out of convenience or misinformation. I urge you to reconsider this ban on kratom. Don't take away the one thing that has helped people regain control over their lives, manage pain, and get out of the cycle of addiction. It's time for Ohio to lead the way in embracing safer, natural alternatives to dangerous pharmaceutical drugs, and kratom is a big part of that future. Colonel Charles A. Jones Colonel Charles A. Jones. Superintendent Ohio state patrol I have proudly served as a police officer in District 3 for 25 years. I am writing today to speak out in support of natural kratom and to strongly urge you to reconsider any action that would limit or ban access to this plant. As a law enforcement officer, my job is to protect people and promote public safety. I've seen firsthand the destruction caused by the opioid epidemic, and I know the damage that comes from addiction to dangerous drugs. Kratom offers a safe alternative for many individuals who are looking for relief from chronic pain, anxiety, or even opioid withdrawal symptoms without turning to more dangerous substances. Banning kratom will only push people to more dangerous alternatives, including black market drugs, opioids, or other substances that are far more harmful. People don't just use kratom recreationally, they use it because it provides real relief. It is a tool for recovery, a pain management solution, and a way for people to regain control of their lives. As someone on the front lines of law enforcement, I can tell you that criminalizing a safe, natural plant will only lead to more harm, not less. I work in the community, and I've seen how kratom helps many responsible people function day-to-day without resorting to the dark side of the drug world.

			Taking away their access to kratom will make them more vulnerable, not less. In fact, kratom is a key part of the solution to the opioid crisis—it helps reduce dependency on prescription painkillers and illegal drugs, offering people a safer and more manageable alternative. If we are truly committed to public health and safety, we should be embracing natural, non-addictive options like kratom, not restricting them out of fear and misinformation. Please understand: this is not a decision about criminalizing behavior, but about empowering individuals to make informed, healthy choices that help them avoid dangerous substances. We have an obligation to protect people's health, safety, and well-being, not take away the tools they need to live their lives free from pain or addiction. I strongly urge you to stand by evidence-based approaches and allow Ohioans to continue to have access to safe, regulated kratom. It is a resource that can help countless people live better, healthier lives. Keel natural kratom legal Please reconsider banning kratom I was hit by a car in 2015 I survived but was on all kinds of medications because of it. but for me my body was either not use to taking medications because I never have or I'm to sensitive to it I was so sick and all kinds of problems with it so I was looking for anything that might help also suffered migraines from a head injury cracked my skull open as a child on pavement falling I didn't want to be doped up and sleepy kratom not only helped me from my injury it actually helped my migraines and night siezures wich I was shocked it could do that it did more than I expected I was able to get up and clean my house wich I was to weak to do I even had gone back to work after 20 years part time wich I could never do this litterly gave my life back. I also gave to a friend who is an alcoholic and he's not craving alcohol this can help so many people thank you for taking the time to listen God bless lisa

Worthington	Ohio	4 - Other	classification of natural mitragynine (kratom) as a Schedule I controlled substance. This move is not about public health; it is a clear example of "New Reefer Madness" that ignores science in favor of pharmaceutical interests and bureaucratic overreach. Natural vs. Synthetic: A Deliberate Misrepresentation For years, natural kratom has been used safely by thousands of Ohioans for pain management and as a life-saving alternative to toxic opioids. Your "8-Factor Analysis" fails to distinguish between the natural leaf and the synthetic 7-OH extracts that have recently flooded the market. While we support the regulation of synthetics and high-potency extracts, your attempt to ban the natural plant itself is a "backdoor" tactic that ignores the thousands of citizens who have testified to its benefits. Conflict of Interest and Pharmaceutical Influence run the board of pharmacy with Cameron mcnamee thrive for change . The public does not trust this process because it reeks of corruption. While you claim to protect us, your board is comprised of member who over seas groups giving out Fentanyl test strips an industry that stands to lose billions if people have access to an affordable, natural plant. By scheduling kratom, you are effectively acting as a "sales force" for FDA-approved medications like Suboxone, ensuring that Ohioans remain dependent on the very companies that fueled the opioid crisis in the first place. Ignoring the Science and Federal Guidance HHS Secretary Robert F. Kennedy Jr. and other federal officials have recently emphasized that the focus should be on synthetics, not the natural leaf. Even Governor DeWine initially paused this ban after speaking with federal leaders, yet the Board continues to push forward with a policy that will turn law-abiding Ohioans into criminals overnight. This does not stop overdoses; it creates a dangerous black market and pushes people back toward fentanyl.we Demanding Accountability. Especially as the new governor comes in. Your performance in recent interviews, including with NBC4, has shown a total disconnect from the "ivory towers" of Columbus and the reality of Ohio's streets. You are ignoring the Kratom Consumer Protection Act (HB 587/SB 339), which provides a sensible path for regulation, testing, and age limits. We are tired of being treated like addicts by a board that serves lobbyists rather than citizens. The "Reefer Madness" era is over. If you continue to prioritize pharma profits over the lives of Ohioans, you will lose all remaining credibility. We demand that you withdraw the proposal to schedule natural mitragynine and instead work with the legislature to pass the KCPA.

Worthington	Ohio	4 - Other	The policies that move our country away from the failed drug war approach. Have been successful kratom has helped many adults manage pain, reduce reliance on more dangerous substances, and improve their quality of life. For countless individuals, it has been a safer alternative to opioids, alcohol, and other substances that carry far greater risks. Criminalizing kratom would not protect public health it would instead push people toward more harmful options or into unregulated markets. Decades of the drug war have shown that prohibition does not reduce harm. It has fueled mass incarceration, strained communities, and diverted resources away from education, treatment, and research. Adults deserve the freedom to make informed choices about their own bodies, especially when those choices can reduce harm and save lives. Rather than banning kratom, I urge you to support sensible regulation that ensures product safety, transparency, and consumer protection. Policies rooted in science, compassion, and personal liberty are far more effective than punishment and prohibition.Ending the drug war and protecting access to kratom would be a meaningful step toward a healthier, more just society. I respectfully ask that you oppose any efforts to criminalize kratom and instead support evidence-based, harm-reduction-focused policies. Keep kratom legal it's safe this is reefer madness The nonexisting trust between these Bureaucrats And the public is so low nobody believes about public health Stop with the fake kratom reefer madness this is the last thing Ohio meet. Everybody knows this is a money grab and about crap Corrupt bureaucrat z it's not about public health Everyone sees through the non sense just stop 🛑 We the people say no to your fake kratom reefer madness Stop the fake kratom reefer madness natural kratom safe we see through your bureaucratic, corrupt attempt to hurt Ohioans. Totally disgusting and right out in open. The board lost all credibility We all see this for what it is. It's money grab from Corrupt bureaucrats to sale more fda drugs. keep natural kratom legal, or we will investigate the corruption. Stop your corruption we all see this natural kratom safe. This about lining your pockets everyone see this what it is corruption bureaucrats. Everyone see it

			Stop this kratom reefer madness ruins the board credibility. Other then boomers no one believes you the problem be any heath crisis they will think you guys are the corrupt bureaucrats. Helps no one other then line your pockets total wrong and disgusting ☹ Please stop we see this for what it is a money grab by corrupt bureaucrats. Save the reputation and don't go after natural Kratom stop the reefer madness So sad to see corrupt bureaucrats not about heath that's the lie you will tell everyone see through to save your credibility stop on natural other my generation see you for what I believe you are frauds appointed by DeWine I urge the Board to reject "Reefer Madness" era tactics. Do not take away a tool that many use for their wellness and quality of life based on flawed data. We demand a policy based on science, safety, and liberty, not a policy that looks like a revenue-driven expansion of the bureaucracy. Please do not ban natural kratom, this isn't about new information this is about corrupt bureaucrats we all see it. Lowers trust in you. To say you throw ohians prison for plant is total off the main step with the public lawmakers should be ashamed of yourself The current narrative surrounding this natural kratom which many advocates see as a modern day "Reefer Madness" campaign ignores a wealth of scientific data and the lived experiences of thousands of law-abiding citizens. History shows that prohibition does not keep people safe; it creates unregulated "gray markets." By over-regulating or banning Kratom, the Board risks pushing individuals toward dangerous synthetic alternatives or illicit substances, directly contradicting the goal of public safety. There is a growing public sentiment that these regulatory hurdles are not motivated by health, but by bureaucratic overreach and the protection of pharmaceutical interests. Transparency is required to prove that this is not a move to "monetize" or "gatekeep" Instead of a ban, the Board should support the Kratom Consumer Protection Act (KCPA). This ensures products are tested for contaminants, appropriately labeled, and kept out of the hands of minors, without criminalizing responsible adults. Labeling Kratom as a significant public threat ignores its long history of use. We ask that the Board rely on peer-reviewed toxicology reports rather than anecdotal or sensationalized law enforcement narratives. I urge the Board to reject "Reefer Madness" era tactics. Do not take away a tool that many use for their wellness and quality of life based on flawed data. We demand a policy based on science, safety, and liberty, not a policy that looks like a revenue-driven expansion of the bureaucracy.

			I was hoping Ohio learned from reefer madness no one my age trust or believe you everyone knows this is a money grab. Stop save the board reputation and leave natural kratom. As y you read these comments you can't guarantee that there's no corruption on your board. And when we find Polly board membership that have conflict of interest we highly those especially with Lawmarkers. Please back down Respectfully Locking people up giving them felonies for a plant that once legal why everyone hates you see what this is a money grab by corruption bureaucrats. Makes me sad to see you fail ohians Stop this fake kratom reefer madness everyone see this for what it is fraud corruption bureaucrat over reach. Board will go down in history for being money hungry to sell more drugs we will pass sb299 all you would be fired in disgrace leaving the board when your replaced, it's a bipartisan issue. Enough republicans to vote on sb99 out of step with voters and it smells of corruption My suggestion for the board back down on natural kratom it is safe. Any demands for corruption investigations will go away. You can't guarantee, one member sitting on the board of pharmacy. one of you is a corrupt. We will get to bottom Of it if we have. We know this is a money grab on backs of people. Leave natural Kratom go on with your corruption. DeWine will be gone who cares what he thinks. Save your credibility. Ohioans want legal natural kratom. You guys are corrupt bureaucrats, and you don't listen to the people you line your pockets and hurt people natural kratom save. This isn't about public heath we all see it
Worthington	Ohio	4 - Other	There is an ongoing silencing of voices, particularly concerning concerns about natural kratom. Central to this issue is the potential conflict of interest posed by Cameron McNamee's dual role: serving on the Ohio Board of Pharmacy while also acting as a board member for Thrive for Change, a harm reduction nonprofit funded through grants, donations, and opioid-related initiatives. This dual role could create a situation where natural kratom is perceived as competing with or undermining the focus and funding priorities of the nonprofit, raising concerns about impartiality and the integrity of regulatory decisions. Everyone see through this

Worthington	Ohio	4 - Other	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Let's be clear: no one believes this is about public health anymore. From Governor DeWine down to the boards and agencies involved, what the public sees is corruption. It smells like corruption. It looks like corruption. And no amount of "public safety" language is going to hide that reality. People are not stupid. We see the connections. We see the revolving doors. We see the organizations like Thrive for Change, the involvement of individuals like Cameron McNamee, and we see what looks like financial influence and political pressure shaping policy. Whether it's direct payments, indirect incentives, or future favors, the appearance alone is enough to destroy any trust you claim to have. This does not feel like an effort to protect people. It feels like an effort to line pockets. The FDA's influence is written all over this. Pharmaceutical interests stand to benefit, while everyday people are ignored, talked over, and treated as expendable. The same pharmaceutical industry that fueled addiction, death, and suffering now appears to be quietly steering policy again this time under the fake banner of "health." I believe this is corrupt. I believe money is driving these decisions. And I believe the people pushing this ban know exactly who will be hurt—and are choosing to move forward anyway. You are not protecting the public. You are hurting it. People rely on kratom to stay away from opioids, alcohol, and other deadly substances. You take this away, and people will die. That blood will not be hypothetical. It will be real. And it will be on the hands of those who chose profits, power, and influence over harm reduction and human lives. This is not against the people. This is being done to the people. And the more you push, the clearer it becomes: this was never about public health. It was about money, control, and who gets paid. The goal from the board is tell sell medications everyone see through this natural Kratom ! Ban natural kratom is safe The board has zero credibility with tDeWine and Cameron mcnamee thrive for change corruption. Never was fair debate was to line your pockets

Worthington	Ohio	4 - Other	the Board's apparent push to ban kratom, a substance that has been legally available for years with no new evidence of widespread harm. The timing and intensity of this effort raise serious questions: is this truly about public health, or are financial and political interests driving the agenda? It is difficult for the public to ignore the appearance of conflicts of interest when certain individuals and organizations stand to gain from prohibition. Actions that benefit a few at the expense of the many undermine trust in the very institutions tasked with protecting citizens. If health were the true concern, reasonable regulation, quality standards, and consumer safety measures would be the focus not an outright ban. The public deserves transparency: who benefits from banning kratom, and why is the Board prioritizing those interests over the health and rights of Ohioans? We are watching closely. Ohioans expect honest, evidence-based decisions, not policies driven by money or influence.
Worthington	Ohio	4 - Other	Xylazine, also known as "tranq," is a veterinary sedative that has increasingly been found mixed into illicit drugs across the United States. Its presence has been linked to severe health consequences, including overdose, tissue damage, and long-term harm that goes far beyond what people were already risking. This substance is not going away. Mixing xylazine into other drugs has already spread nationwide, and pretending otherwise only takes options away from people who are trying to survive. We should be having honest conversations about what harm reduction actually looks like in this reality. Instead, too often this discussion is framed as being about "health" while financial incentives sit quietly in the background. If profit were not part of the equation if organizations and individuals were not benefiting financially from tools like Cameron mcnamee and thrive for all a non profit that hands out fentanyl test strips we could have a more honest, transparent debate about what truly helps people and what does not. This is not about denying the dangers of fentanyl or xylazine. It is about acknowledging that selective concern and selective solutions undermine trust. When people sense that policies or advocacy efforts are driven by money rather than genuine care, credibility is lost and the people most at risk pay the price. If the goal is real change, then honesty has to come first. That means acknowledging the limits of current approaches, being transparent about financial interests, and centering the voices of those directly affected rather than controlling their choices. Lives depend on it. Give people options with natural kratom

Worthington	Ohio	4 - Other	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats
Worthington	Ohio	4 - Other	Stop this fake kratom madness makes your board lose credibility. Them if we ever have major covid 19 mi one really will listen to you bunch of corrupt bureaucrats getting payments on back end, we know you sit on Polly board and Cameron mcnamee wants to go to Disneyland on the back of who we the people sick Keep kratom legal we see and demand you stop the war on drugs. Bunch of corrupt bureaucrats
Worthington	Ohio	4 - Other	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats. Stop the bullshit. No one supports you.
Worthington	Ohio	4 - Other	Why is the Board of Pharmacy so determined to ban kratom after it has been on the market for years? This does not appear to be about public health. There is no new evidence justifying an emergency or outright ban. Instead, it raises serious concerns about conflicts of interest and political influence. Governor DeWine's record already raises trust issues, and Cameron McNamee of Thrive for Change has a clear financial incentive tied to kratom prohibition. When people who benefit financially from a ban are driving policy, the public deserves transparency. If this were truly about safety, regulation and quality standards would be the focus not prohibition. So the real question is: who benefits from banning kratom, and why is the Board of Pharmacy serving those interests instead of the public's?

Worthington	Ohio	4 - Other	what is happening around kratom is not a fair regulatory process it is a show trial. This Board claims to value science, transparency, and public safety, yet allows individuals with clear conflicts of interest to influence the outcome. That alone undermines the legitimacy of everything happening in this room. There are members and affiliates pushing for restrictions or a ban on natural kratom while positioned to profit from its removal. That is not hypothetical. That is a direct conflict of interest. When regulators stand to benefit financially from the prohibition of a product, the process is no longer credible it is compromised. The involvement of Cameron McNamee of Thrive for Change raises serious ethical concerns. When individuals who benefit from a kratom ban are given influence, access, or authority in this process, the outcome is no longer in doubt. The public can see exactly what is happening. This forces an uncomfortable but necessary question: if this level of conflict is acceptable here, what else has been influenced by profit instead of evidence within the Board of Pharmacy? the Board's credibility is gone. Not because of public misunderstanding, but because of your own actions. A process that ignores conflicts, marginalizes opposing voices, and appears predetermined does not deserve public trust.Integrity is not optional. Transparency is not negotiable. If this Board expects legitimacy, it must require full disclosure, immediate recusal of conflicted parties, and an independent review of this process. Anything less confirms what many already believe that this is not about safety, but about control, profit, and eliminating competition. The public is watching. This is on the record. And history will remember whether this Board chose integrity or exposed itself. This is written out of deep concern, frustration, and a complete loss of confidence in the integrity of this process. What is currently unfolding around kratom is not a fair or transparent review it has all the markings of a show trial. While the public is told that this Board supports science, safety, and due process, the reality looks very different. We are watching a process where outcomes appear predetermined, voices in support of natural kratom are marginalized, and conflicts of interest are ignored. It is especially troubling that members of this Board advocate positions on kratom while simultaneously standing to profit from its prohibition. That reality alone calls the credibility of the entire Board into question. No regulatory body can claim integrity while allowing decision-makers to benefit financially from the very bans they promote.The involvement of Cameron McNamee of Thrive for Change raises serious ethical concerns. When individuals positioned to gain from a kratom ban are allowed influence over regulatory outcomes, the public is right to ask: whose interests are truly being served here? This situation forces an unavoidable question: what else will be revealed about the Board of Pharmacy if this level of conflict is permitted without disclosure or consequence? Integrity is not optional. Transparency is not negotiable. And credibility, once lost, is not easily restored. At this point, the Board's credibility is gone not because of public misunderstanding, but because of its own actions and omissions. If this Board expects trust, it must earn it through accountability, ethical conduct, and the immediate removal of conflicted influence from this process. Anything less confirms what many already believe: that

			this is not regulation in the public interest, but a coordinated effort driven by profit and power. The public is watching. And we will not forget how this was handled. The board of pharmacy has clearly abandoned its credibility What the public is witnessing regarding kratom is not a legitimate regulatory process. It is a manufactured outcome. A performance. A show trial designed to justify a predetermined ban while pretending to engage in fair review. The conclusion appears written before the evidence is even allowed to speak. You claim to act in the interest of public safety while allowing individuals with direct financial incentives to shape policy outcomes. That is not regulation that is corruption disguised as governance. Members of this Board openly push for the restriction or elimination of natural kratom while positioned to profit from its removal. That fact alone destroys any remaining credibility you might claim. No ethical board allows conflicted actors to sit in judgment over a product whose prohibition benefits them personally. The involvement of Cameron McNamee of Thrive for Change represents everything wrong with this process. When someone who stands to gain from a kratom ban is allowed influence, access, or authority, the outcome is no longer questionable — it is compromised. The public does not need speculation; the conflict is obvious. This raises a larger and far more damaging question: what else is being hidden within the Board of Pharmacy? If this level of conflict is acceptable here, what other decisions have been influenced by profit rather than evidence? Let this be clear: your credibility is gone. Not weakened. Not damaged. Gone. You have forfeited public trust through secrecy, conflicts of interest, and a process that insults the intelligence of those paying attention.If this Board has any interest in restoring legitimacy, immediate action is required: • Full disclosure of financial and organizational conflicts • Recusal of all conflicted parties • An independent review of this process • A halt to proceedings tainted by bias Anything less confirms what many now understand — that this Board is not acting as a neutral regulator, but as a vehicle for private interests seeking to eliminate competition under the guise of safety. We are watching. We are documenting. And this will not disappear quietly. You have an opportunity to correct course. Whether you choose to do so will define this Board’s legacy.

Worthington	Ohio	4 - Other	I am writing as a concerned citizen about the Board's apparent push to ban natural kratom. After years of safe, legal use by responsible Ohioans, the urgency behind this effort raises serious questions. This does not appear to be about public health. It looks, unmistakably, like a financial and political agenda. We now know that Cameron McNamee of Thrive for Change has a possible financial incentive in this process. If it weren't for investigative work, the public would never have known he held a conflict of interest while serving on a board influencing policy. This begs the question: how many others on the Board might also have financial incentives that are hidden from the public? How many decisions have been made in the interest of profit rather than the health and safety of Ohioans? The people of Ohio deserve transparency and honesty. A board tasked with protecting public health should not be seen as a vehicle for personal gain or political influence. It is deeply troubling to witness the institution charged with public safety become associated with corruption and self-interest rather than care and oversight. I urge the Board to pause, provide full disclosure, and ensure that decisions about kratom are made transparently, fairly, and in the public interest not to enrich a few at the expense of the many. Ohioans who responsibly use this product deserve better.

Worthington	Ohio	4 - Other	I have serious concerns regarding a potential conflict of interest involving Cameron McNamee, Director of Policy and Communications at the Ohio Board of Pharmacy. As a resident of Ohio deeply invested in the integrity of our state's regulatory bodies, I believe this matter reeks of corruption and undermines public trust in the fair application of scientific principles in pharmacy policy. Mr. McNamee serves on the board of Thrive for Change, a Cleveland-based nonprofit organization focused on harm reduction strategies for opioid use, including the distribution of naloxone, fentanyl testing strips, and other supplies aimed at reducing overdose deaths and disease transmission among people who use drugs. This role places him in a position where his personal affiliations could influence his professional responsibilities at the Ohio Board of Pharmacy, which regulates pharmaceuticals, drug distribution, and related policies across the state. The Ohio Board of Pharmacy is tasked with making decisions based on objective science, evidence-based practices, and the best interests of public health. However, Mr. McNamee's involvement with Thrive for Change—an advocacy group that promotes specific approaches to drug policy—creates an inherent bias. How can he remain impartial when evaluating scientific data or policy proposals that may conflict with the agenda of an organization he helps lead? This dual role suggests he may not be able to fairly "listen to science" without filtering it through the lens of Thrive for Change's priorities, potentially prioritizing advocacy over regulatory neutrality. This situation not only raises questions about ethical standards but also reeks of corruption, as it could allow undue influence from a nonprofit sector into state regulatory decisions. Ohioans deserve regulators who are free from such entanglements to ensure policies are driven by unbiased science, not personal or organizational interests. I urge the Commission to investigate this matter thoroughly, including any potential violations of Ohio's ethics laws regarding conflicts of interest for public officials. Thank you for your attention to this important issue. I look forward to your response and any actions taken to preserve the integrity of our state's institutions.

Worthington	Ohio	4 - Other	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats We want accuse to natural kratom stop the reefer madness this isn't 1980s stop the lies kratom natural safe we see the money grab. Stop your corruption Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats

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			Protein vs. β-Arrestin Signaling Pathway Every time an opioid molecule (like morphine or mitragynine) hits a receptor in your brain, it sends a signal. Traditional FDA-approved opioids are balanced agonists, meaning they trigger two separate "lanes" of communication at once: * Lane A: The G-Protein Pathway (Analgesia): This is the pathway responsible for pain relief and the beneficial effects of the medicine. * Lane B: The β-Arrestin Pathway (Side Effects): This pathway is the primary driver of respiratory depression(stopping your breathing), severe constipation, and the rapid development of tolerance. The Science Heavy Detail: Natural mitragynine is a "G-protein biased" ligand. This means it is "biased" toward Lane A (pain relief) and does not significantly recruit β-Arrestin (Lane B). Because it fails to activate the β-arrestin pathway, it does not induce the fatal respiratory depression that makes Schedule I and II drugs so dangerous. 2. Partial vs. Full Agonism: The "Ceiling Effect" To understand why kratom is a "Partial Agonist," think of a light switch vs. a dimmer switch. * Full Agonists (Morphine/Fentanyl): These act like a light switch. They turn the receptor on to 100% capacity. There is no limit; the more you take, the more the receptor is activated until the body's systems (like breathing) shut down. * Partial Agonists (Mitragynine): These act like a dimmer switch that is stuck at 50%. No matter how much you take, the molecule can only ever activate the receptor to a certain point (low "intrinsic activity"). The Result: This creates a "Respiratory Ceiling." Peer-reviewed studies in 2024 and 2025 have confirmed that even at massive doses, mitragynine does not continue to depress respiration. In fact, some studies show it can even have a slight stimulant effect on breathing at certain dosages—the exact opposite of a "narcotic." 3. The "Biased" Paragraph for your Letter If you want to sound like a pharmacologist to the Board of Pharmacy, include this specific paragraph: "The proposed scheduling of mitragynine ignores the fundamental pharmacological distinction between balanced full agonists and G-protein biased partial agonists. Unlike Schedule I or II opioids, mitragynine exhibits signaling bias, preferentially activating G-protein coupled pathways (analgesia) while failing to recruit β-arrestin-2. The lack of β-arrestin recruitment is the mechanistic reason for mitragynine's well-documented respiratory ceiling effect. Scientifically, a substance that lacks the capacity for fatal respiratory depression through the μ-opioid receptor cannot logically be classified alongside substances that do." G-Protein Biased Partial Agonism" is the strongest scientific leverage. It proves that kratom is not just "different" than pharmaceutical opioids it is biologically safer at the cellular level. The G-Protein vs. β-Arrestin Signaling Pathway Every time an opioid molecule (like morphine or mitragynine) hits a receptor in your brain, it sends a signal. Traditional FDA-approved opioids are balanced agonists, meaning they trigger two separate "lanes" of communication at once: Lane A: The G-Protein Pathway (Analgesia): This is the pathway responsible for pain relief and the beneficial effects of the medicine. Lane B: The β-Arrestin Pathway (Side Effects): This pathway is the primary driver of respiratory depression (stopping your breathing), severe constipation, and the rapid development of tolerance. Natural mitragynine is a "G-protein biased" ligand. This means it is "biased" toward Lane A (pain relief) and does not significantly recruit β-Arrestin (Lane B). Because it fails to activate the β-arrestin pathway, it does not induce the fatal respiratory depression that makes

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			primary driver of opioid lethality. Ref 3: HHS/FDA Technical Update (2024-2025) - Acknowledged that natural kratom leaf is not the primary driver of adverse events, which are instead linked to adulterated or synthetic 7-OH products. Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats

			We want accuse to natural kratom stop the reefer madness this isn’t 1980s stop the lies kratom natural safe we see the money grab. Stop your corruption We want accuse to natural kratom stop the reefer madness this isn’t 1980s stop the lies kratom natural safe we see the money grab. Stop your corruption No to 1980s fake kratom reefer madness. We all see this money grab stop the corruption don’t lock up people for plant. Not in Ohio

Worthington	Ohio	4 - Other	I am writing to strongly and unequivocally oppose any ban on natural kratom. this ban will cause real harm to my community, to my family, and to people who are already doing their best to survive within a broken healthcare system. Kratom is not an abstract policy issue for us. It is a lifeline. In my community, kratom is used responsibly by adults to manage chronic pain, maintain sobriety, cope with anxiety, and avoid far more dangerous substances like opioids and alcohol. Taking this option away will not protect public health it will push people backward, into desperation, relapse, and unsafe alternatives. A ban does not eliminate demand. It eliminates safety. If public health were truly the goal, we would be discussing regulation, quality standards, age limits, labeling, and education. Instead, prohibition is being pushed while the voices of those most affected are ignored. That is not public health. That is policy made without accountability to the people who will suffer the consequences. I am angry because I am scared for my neighbors, for people in recovery, for chronic pain patients who have already been abandoned by the medical system. Criminalizing a natural plant that has helped so many of us is not compassion. It is cruelty disguised as concern. Our community deserves better than fear-based policy. We deserve evidence-based regulation, transparency, and a seat at the table. We deserve lawmakers who listen to lived experience, not just talking points. Especially when we question are you on the take like Cameron mcnamee and thrive for change. Giving out test strips. Calling for a total ban. Do not pass a ban that will dismantle harm-reduction tools and put lives at risk. Stand with the people you serve. Protect public health the right way through education, regulation, and respect for informed adult choice. This issue is personal. The harm will be real. And we will not be silent about it.
Worthington	Ohio	4 - Other	I don't use kratom but I don't want my friend locked up over it ruin a career because you hacks didn't say it was safe. You have zero credibility, maybe to the boomers but they are dying. We through this fake reefer madness actually embarrassing you can embrace your policy but when we pass sb299 all of you will hang your head in total shame. As corrupt bureaucrats who did nothing for Ohio Listen to the people and listen to lawmarkers we don't need more people in prison for a plant when you lie about why you want people locked up/ if anything makes you guys look horrible not about public heath but to line your pockets and we will put stop to it we know everything. Listen to the people stop the boomer drug war of the 1980s you lost so much credibility with going after natural we see you as bureaucratic corrupt hacks. We will investigate ever dollar that flowed in and out of your hands. Cameron mcnamee we already know

Worthington	Ohio	4 - Other	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats

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Columbus	Ohio	4 - Other	Let’s stop pretending this is an "honest debate." Your credibility is gone. You are using the exact same "Reefer Madness" playbook from the 1930s to criminalize a plant while you protect the profits of the pharmaceutical companies that fund your world. You sit there and lecture us about "safety" while you push us toward FDA approved drugs we can’t afford. It’s a protection racket, plain and simple. You want to ban natural kratom because it’s a low-cost alternative that actually works for hard-working people, and that is a direct threat to your bottom line. We are awake, and we see the game you're playing. You claim "public safety," but we know this is about kickbacks and the revolving door between regulators and Big Pharma. You want us on a lifetime subscription to expensive pills, not a natural leaf we can buy for pennies. The Suppression of Truth: You spread fear and propaganda on Facebook while the rest of us are silenced. We can’t even talk about the life-saving benefits of this plant without being banned or "fact-checked" by the very people you’re in bed with. You’ve killed the conversation so you can control the narrative. We see organizations like "Thrive for Change" pushing for bans. Are they getting kickbacks from the makers of fentanyl test strips or pharmaceutical recovery drugs? We wouldn't be "none to the wiser." Behind every "concerned" bureaucrat is a paper trail leading to a bank account. You have millions to gain from this decision, and we have everything to lose. You are trying to turn honest, working Ohioans into felons just to keep your corporate masters happy. We don’t trust you. We see the fraud. We see the legislators who are actually on our side the ones fighting for the Kratom Consumer Protection Act—and we are standing with them. Keep your "Reefer Madness" in the history books. We are done being your "collateral damage" for a pharmaceutical payday.

Columbus	Ohio	4 - Other	Not to corporations. Not to fear-based policy. Not to laws written without listening to the people most affected. For generations, communities around the world have turned to nature not because it was trendy, but because it was available, affordable, and part of their culture. Criminalizing those choices doesn't protect people. It silences them. This is not about forcing anyone to choose anything. This is about the freedom to choose responsibly, transparently, and without stigma. We demand education over fear. Research over rumors. Rights over control. Because when the government bans choice instead of regulating it, people don't disappear safety does. Today we stand for autonomy. We stand for honesty. We stand for the right to decide what works for our own lives. No more fear. No more silencing. No more taking rights away in the name of "protection." Our bodies. Our choices. Time and time again, history shows us the same pattern: when ordinary people discover a way to care for themselves, to ease their suffering, to reclaim a sense of dignity outside powerful institutions, that choice is questioned, restricted, or taken away. Today, I stand not to promote a product, but to defend a principle. The principle that free people have the right to make informed choices about what they put into their own bodies. The principle that nature itself is not a crime. The principle that access should not be determined by profit margins, fear, or political convenience. Across cultures and generations, humans have turned to plants not as miracles, not as magic, but as part of a long relationship with the natural world. These traditions were not born in boardrooms. They were born in communities, in hardship, in the simple human desire to feel whole enough to keep going. Yet too often, when people speak about natural options like kratom, the conversation is hijacked by extremes. Either it is painted as a cure-all or condemned without nuance. Civil rights demand something better than that. They demand honest dialogue, evidence over stigma, and respect for autonomy. Let me be clear: patient rights are not about forcing anyone to choose a particular path. They are about protecting the freedom to choose at all. When regulation becomes prohibition without reason, when education is replaced by fear, when adults are told they cannot be trusted with informed decisions that is not public safety. That is paternalism wearing a safety badge. We do not build a just society by silencing discussion. We do not protect people by denying them agency. And we do not honor science by refusing to study what makes us uncomfortable. A civil rights approach calls for transparency, research, quality standards, and truthful labeling not blanket bans that drive choices into the shadows. Because history has taught us one thing very clearly: when you criminalize choice, you don't eliminate use you eliminate safety. This is about farmers and workers. About veterans and laborers. About people who want options that align with their values and experiences. Above all, this is about trust. Trusting adults to weigh risks. Trusting communities to speak for themselves. Trusting that freedom, when paired with education, is stronger than fear. Pain is not a static. And the question before us today is the same one asked in every generation: Will we choose control or will we choose liberty? I believe the answer is clear. Let us defend the right to choose nature responsibly. Let us replace stigma with study. And let us

			remember that a society that honors freedom must also honor the people who exercise it. Thank you. The only reason i see your going after natural kratom is corruption. I hate that you even recommended incarceration for people who have chronic pain. That makes me upset the most You haven't learned anything from the drug war with marijuana and it shows you guys are outdated and old. Going to be replaced in January. The best move the board can do to save face is withdraw natural kratom recommendation. Keep the synthetic ban. You would have your credibility back. We all know this isn't about public health it's to sale more medicine so board members can get cushy kickbacks. I know DeWine made but it's better then subpoenas depositions and prison for Corrupt bureaucrats. Otherwise we will call it out. Look out for us not fuck us over xylazine is being mixed in e everything. Press pills 💊 eats the skin designed for maximum addiction and profit, with a high risk of fatality even in small doses. Without education, users may unknowingly purchase stamp pressed pill that looks real but has products that have been adulterated with dangerous chemicals to increase potency. Making an overdose way more likely. Compared to natural kratom plant. The failed "War on Drugs" proved that prohibition only makes drugs more dangerous. Education promotes a harm reduction model:Teaching consumers about serving sizes and the importance of using unadulterated, lab-tested products.For many, natural kratom serves as an "exit ramp" from street drugs. Educating the public on this potential prevents people from being forced back into the arms of cartels when they lose access to natural alternatives.Bureaucrats often use "reefer madness" style fear-mongering to push for bans that serve pharmaceutical interests. Education exposes this as a "money grab" by: Highlighting peer-reviewed studies that show kratom has a low potential for abuse compared to FDA-approved opioids. Advocating for the Kratom Consumer Protection Act (KCPA), which mandates third-party testing and clear labeling—education in action. When boards of pharmacy ban natural substances without educating themselves on the consequences, they drive users to the black market. Education saves lives by ensuring that policy is based on chemistry and biology rather than political optics. Informing the public about the difference between a natural plant and a street-cooked chemical is the only way to prevent the unnecessary overdoses that follow whenever a safer alternative is criminalized. By prioritizing education over prohibition, we ensure that citizens have the knowledge to make safe choices and that regulators are held accountable for policies that would otherwise result in a higher body count. Keep natural kratom legal Honest question to the board of pharmacy. When you're looking around reading the comments are you for sure

			Cameron mcnamee discloses his Financial. How much is the trust that he not A Corrupt bureaucrat. He has a DeWine appointment. What it look like to the public once they find out. The Board of pharmacy is corrupt. And possible end up in prison for bribery : That would tarnished the board way more than backing down from kratom. Do the right thing leave kratom alone Thank you 😊 The only win win at this point from the board and admit natural kratom legal you don't go after it. You go after the synthetic stuff. Nobody's gonna call you out for your corruption. You can get your money and fall into existence. But a total ban and we will expose it: everything goes back DeWine. We know Cameron mcnamee on the take with thrive for change. Who else i ask you guys allow natural kratom. Atleast you can fade into existence and not worry about prison time In 2026, we stand at a crossroads where the ghosts of our past are attempting to dictate the health of our future. We look back at the 20th century and see the wreckage of the "War on Drugs" a decades-long campaign built on the foundation of "reefer madness" and state-sponsored fear. It was a war that didn't stop addiction; it only fueled mass incarceration and created a lethal, unregulated black market. Today, we see the Board of Pharmacy reaching into that same failed playbook to target natural kratom. This is not a new battle; it is the same path of prohibition that has failed us for fifty years. By attempting to ban a natural botanical used by millions to maintain sobriety and manage pain, the Board is repeating the exact same errors that led to our current opioid catastrophe. When you criminalize a plant, you do not make people safer. You simply hand the keys to the drug cartels and the chemists of synthetic death. Let us be honest about what we are witnessing: This is a calculated effort to clear the market of a low-cost alternative. It is a "money grab" disguised as a moral crusade. While the board peddles the lie of "public health," they are systematically removing a lifeline for those seeking to escape the grip of synthetic opioids. We are here to say that we have learned the lessons of the past, even if the bureaucrats have not. We will not be intimidated by 1930s-style alarmism. We will not stand by while corrupt interests try to turn a leaf into a felony just to protect pharmaceutical profits. The solution is not prohibition; it is the Kratom Consumer Protection Act (KCPA). We demand regulation, not a ban. We demand science, not "reefer madness." And we warn those leading this charge: if you choose the path of the failed drug war, the blood of the resulting overdoses will be on your hands. We will fight this ban, we will protect our right to natural health, and we will never forget who stood on the side of the people and who stood on the side of the profiteers. The War on Drugs failed. We will not let you start a new one. Leave natural kratom alone! We're sick of the corruption

			fundamental liberty and the right of the common man to seek healing from the earth without the heavy hand of an overreaching bureaucracy crushing his hope. We find ourselves in a season where the light of truth is being dimmed by the shadows of a new "reefer madness," a campaign of fear designed to chain the spirit of those who seek a natural path to wellness. We must ask ourselves: is it justice when a natural leaf, grown from the soil of the Earth, is treated as a criminal element while the high-priced elixirs of the powerful are protected and promoted? I submit to you that a law which ignores the lived experience of the suffering, and prioritizes the profits of the few over the health of the many, is no law at all it is an instrument of oppression. The cry for a ban on Mitragyna speciosa does not rise from the hearts of the people; it rises from the mahogany desks of bureaucrats who have lost their way. They speak of "public health" with their lips, but their actions reveal a different motive. It is a pursuit of power, a "money grab" hidden behind the veil of regulation. They seek to take away a botanical lifeline, not because it is harmful, but because it is free from their control. We cannot remain silent while the poor and the weary are driven back into the shadows. If you ban this natural gift, you do not create safety you create a vacuum that will be filled by the very "blood on the hands" of those who would see our brothers and sisters succumb to the poisons of the street. We must march toward a future of enlightenment. We must demand the Kratom Consumer Protection Act, which seeks to regulate with wisdom rather than ban with malice. We must stand for the truth that science and nature are not enemies of the state, but allies of the human soul. Let us not forget those who led this charge of prohibition. History is a long and winding road, but it always bends toward justice. We will fight this ban with the power of our voices and the strength of our convictions, for we know that truth, though crushed to earth, shall rise again. In the spirit of liberty and health,

Columbus	Ohio	4 - Other	This is grotesque waste of state resources and a clear betrayal of public trust. While our community faces a genuine, lethal crisis of synthetic opioid overdoses, this Board is choosing to expend its limited time and taxpayer funding on targeting a natural botanical. This misplaced priority is not just "silly" it reeks of the kind of systemic corruption that prioritizes pharmaceutical monopolies over actual public health outcomes. The facts are clear, yet you continue to ignore them: Instead of just focusing on dangerous, unregulated synthetics or the fentanyl crisis, you are using state funds to criminalize a plant that has been used safely for centuries and acts as a lifeline for many seeking to avoid harder drugs. Science Over Sensationalism: Leading health organizations, including the American Kratom Association and even federal agencies like HHS, have previously rejected the "reefer madness" style scheduling of natural kratom leaf because the data simply does not support it. The Regulatory Solution: If your goal was truly safety, you would be championing the Kratom Consumer Protection Act (KCPA) to ensure purity, proper labeling, and age restrictions rather than pushing for a ban that only fuels an unregulated black market. This effort appears to be little more than a "pay-to-play" scheme designed to force patients back into the arms of high-priced pharmaceutical companies. By ignoring the science and the will of the public, you have proven that this Board is no longer an objective regulatory body, but a tool for corporate interest. We are watching, we are documenting your actions, and we will not forget the names of the bureaucrats who prioritized their own agendas over the lives and liberties of the people. Stop wasting our money and start acting with the integrity your office demands. The real public heath crisis is galaxy gas why everyone thinks This board of pharmacy a joke: kids are addicted way more to galaxy gas then kratom. No one would fight you on a ban. According really sad. Instead your coming after me so you guys can get a extra mortgage is disgusting and it'll be exposed in January Work for the Air Force i use Kratom responsibly stop the fear and lies. We see this as a money grab and corruption. As a physician, I am writing to express my absolute contempt for this Board's continued push to ban Mitragyna speciosa. Let us stop pretending this is a "public health" initiative. This isn't about science, and it isn't about safety. It is a transparent, state-sponsored money grab designed to protect the market share of FDA-approved pharmaceuticals and line the pockets of corrupt bureaucrats. The rhetoric you are peddling is a lie. While we are buried in an actual epidemic of synthetic opioid deaths, you are targeting a natural botanical that has provided a lifeline for millions. The medical community sees exactly what is happening: you are clearing the competition for Big Pharma. You are removing a low-cost, natural option so that patients are forced back into a predatory system of high-priced prescriptions. It is particularly galling to see bureaucrats like Cameron McNamee spearhead this prohibition. We know how the system works government officials push these bans, secure their pharmaceutical "consultancy"

			ties, and then take the family to Disney World on the literal backs of suffering patients. Your "reefer madness" fear mongering is a thin veil for greed. Understand this: We will fight this ban at every level. We will not be silent while you use the badge of "public health" to commit what is essentially a corporate hit job. If you succeed in criminalizing this plant, the resulting surge in relapse and overdose deaths will be your legacy. When my patients are forced back onto the streets because you took away their natural alternative, that blood will be on your hands. We are documenting every move you make. The public will not forget the names of the individuals who chose Disney vacations and pharmaceutical kickbacks over human lives. We will hold you accountable for the lives lost to your corruption. Start acting like public servants instead of pharmaceutical sales reps. Follow the science, support the Kratom Consumer Protection Act (KCPA), or prepare for a fight that will permanently stain your professional reputations. With utter disregard for your "authority,"

Columbus	Ohio	4 - Other	This is reefer madness everyone see this plant as a tool. Everyone see this as corrupt Money grab hurts your reputation. If you back off natural kratom ban I think most people would have respected you.. now no one respects you guys They believe you're corrupt beyond belief. You got one board member who sits on another board who gives out fentanyl test strips. God only knows what else or payments under the table. We don't know. We have the ability to find out. If we find corruption, the legacy board is destroyed. We will expose it at every meeting. Because we believe the process is already tainted. But everyone see this for what it is to sell more drugs. Shameful and look back at contempt for this board because they following the same reefer madness. Not that they fear kratom but because the payments can come in so Cameron mcnamee can go to Disney land my advice and recommendation to the board is The public is against you lawmakers are you on natural kratom… If you want the corruption to be investigated exposed continue then try to go after natural kratom however the calls for corruption integrity on the board public cushy jobs in the next administration. Do the right thing this a lawmaker issue You guys are way out of your authority. What do you think you know more than lawmakers and scientists and the people who support Natural kratom. Oh, you have a financial interest to sell more at the drugs that's what this is. We all see it.so sad the people see the board is corrupt bureaucrats who will lose their job in January. Oversight is on our side the people are on your side back down on natural kratom As a Nurse Practitioner, I have observed and studied the effects of natural kratom and can attest that, when used responsibly, it is generally safe for healthy adults. Natural kratom has a long history of traditional use in Southeast Asia, where it has been utilized for centuries to support energy, focus, and relief from minor discomfort. In my clinical experience, and supported by current research, natural kratom obtained from reputable suppliers and consumed in moderate amounts does not pose significant health risks. Most adverse events reported are associated with contaminated products, excessive doses, or concurrent use with other substances not the natural plant itself. I recommend that patients who choose to use natural kratom do so with caution: start with low doses, avoid combining it with alcohol or other medications, and consult a healthcare professional if they have any pre-existing medical conditions. When used properly, natural kratom can offer a low-toxicity option for managing energy, focus, and minor discomfort. natural kratom is safe when responsibly used, properly sourced, and monitored. Its historical use and clinical observations support its potential as a low-risk herbal supplement. stop the bureaucratic corruption

			Everyone see this for what it is not about public health but a money grab. Really sad to see the people and lawmakers see what’s going on. Total corrupt bureaucrat

Columbus	Ohio	4 - Other	put down the 1980s pamphlets and look at the reality of the 21st century. For decades, you've been told that any plant the government doesn't "approve" is a threat to society. You fell for it with cannabis, and now you're falling for it again with kratom. Your generation's legacy is defined by a "War on Drugs" that failed every single person it was meant to protect. Now, you are letting that same fear-based propaganda dictate the healthcare of hard-working people who are simply trying to survive. It Is Not a "Street Drug": Kratom is a natural leaf related to the coffee plant. It has been used for centuries. Labeling it "dangerous" because it wasn't made in a Pfizer lab is hypocritical and scientifically lazy. The Propaganda is Profit-Driven: When you parrot the talking points of state boards and federal agencies, you aren't protecting families you're protecting the pharmaceutical monopolies that fueled the opioid crisis in the first place. Criminalization is Not Safety: Banning a plant doesn't make it go away; it just ruins the lives of honest, working people who use it to manage pain, stay employed, and avoid the "hard stuff" you claim to be worried about. You grew up in an era where "Just Say No" was the gold standard, but the world has moved on. We have the data. We have the science. Most importantly, we have the right to bodily autonomy. You don't get to spend your retirement trying to legislate the contents of our medicine cabinets based on "scare-tactic" news segments. If you actually care about the "opioid epidemic," stop attacking the people who found a natural way out of it. Stop listening to the fear. Start listening to the people. the current "Kratom Madness" situation and how it mirrors the history of cannabis. Just as cannabis was once painted as a "killer weed" that caused insanity, kratom is currently being framed through a lens of extreme danger by certain state agencies. In early January 2026, the Ohio Board of Pharmacy moved to classify natural kratom as a Schedule I drug. This puts a plant used by thousands of Ohioans for pain and mood in the same legal category as heroin. My generation argue that the Board is using "boomer-era" drug war logic focusing on potential for abuse while ignoring the "harm reduction" benefits for people trying to stay off harder opioids or manage chronic pain from labor-intensive jobs. The current conflict in Ohio is split between two different approaches. Board argue that because the FDA hasn't approved it, it's a "dangerous substance." They recently moved to ban synthetic kratom (like concentrated 7-OH products) via emergency order but are now pushing to include the natural leaf in that ban. Lawmakers like Rep. Brian Lorenz have introduced the Kratom Consumer Protection Act (KCPA). This acknowledges that while "gas station synthetics" might be a problem, the natural plant should be regulated, tested, and age-restricted not banned. And heavy taxed. The frustration you're feeling often stems from a "disconnect" between policymakers and the working class: "Bootstraps" Irony: Many workers in Ohio's trades and factories use kratom to manage the physical toll of their jobs. When "boomer talking points" lead to bans, it removes a low-cost, natural option for people who may not have elite health insurance or who want to avoid the very pharmaceutical opioids that fueled the crisis in the first place.

			Stay out of my healthcare It is beyond exhausting to watch a generation that benefited from robust economic growth and expanding rights now spend their energy trying to micromanage the most intimate details of my life. My doctor's office is not a town hall meeting, and my medical records are not up for public debate. My Autonomy is not a "Trend": What I do with my body whether it's reproductive care, mental health support, or gender-affirming treatments is a private decision based on science and personal need. Your discomfort is not a valid reason for a law. The World Has Changed: The healthcare landscape you grew up with is gone. We are dealing with soaring costs, restricted access, and a level of scrutiny you never had to face. The least you can do is get out of the way. Respect the Boundary: You've had your turn to shape the world. Stop using your political leverage to reach into my exam room. If you aren't my physician or the person on my insurance card, you don't have a seat at this table. Focus on your own retirement and leave my personal health to me. Signed, The Generation That's Had Enough Your best move is to back off the natural kratom ban. If you have any credibility worth saving this would be the place in time to do it. Not only no one really care about your corruption until now But the fact that any major health pandemic basically under 50 does not trust you and thanks to you guys are a bunch of our liars. So to Save the board which I never seen it embarrassed itself is bad before not listening to the people legislators or science. And turns out Cameron mcnamee with poly board membership that has conflict with interest in this ban. Why no one trust you we see this is a scam and corruption at best. Everybody knows it. I'm writing this because I believe there is a massive disconnect between your generation leadership and the reality of the people living in the world you're currently shaping. Specifically, I'm talking about the push to ban Kratom. To be blunt: the credibility of your generation's institutions is at an all-time low with anyone under 50. If you want to "bridge the gap" and understand why there is so much resentment, you need to look at this issue through our eyes. The Hypocrisy of "Safety" For decades, we watched as the pharmaceutical industry with the blessing of regulatory bodies pushed highly addictive synthetic opioids into every corner of this country. Now, when people find a natural, plant-based leaf that helps them manage pain, anxiety, or recovery without the lethal risk of respiratory depression associated with pills, the response is to criminalize it. To us, this doesn't look like a "public health" move. It looks like corruption. It looks like protecting the bottom line of Big Pharma by eliminating a natural competitor that they can't patent or profit from. In the middle of an unprecedented overdose crisis, demand has not gone down. The only reason OD's have gone down is because more Narcan people have Narcan near them. Kratom serves as a literal lifeline for thousands who are trying to stay away from fentanyl and dangerous street drugs. We were raised on the idea of individual responsibility. If an adult chooses to use a botanical supplement to improve their quality of life, the

			government should not have the power to turn that person into a felon overnight. We've seen the results of the 80s and 90s approach. Bans don't make substances disappear; they just create black markets, empower cartels, and ruin the lives of otherwise law-abiding citizens. When you push for bans on plants while ignoring the systemic failures of the healthcare system you oversee, you lose us. You lose the benefit of the doubt. To a millennial or a Gen Zer, this isn't about "staying safe" it's about a generation in power that refuses to evolve or admit when they are wrong. If you want to lead, you have to listen. Supporting the Kratom Consumer Protection Act (KCPA) which focuses on age limits and purity testing rather than total prohibition is the only way to handle this with integrity. Total prohibition isn't leadership; it's a relic of a failed era. It's time to choose a different path before the gap between our generations becomes a permanent canyon. Imagine next January from now. SB 299 has passed and been signed into law, finally providing Ohioans with safe, regulated access to natural kratom age limits, quality standards, and clear labeling. Has a sin tax that funds schools. People can use a plant responsibly, without fear of criminalization or being forced toward dangerous pharmaceuticals. Now look back at this moment, at the actions of the Ohio Board of Pharmacy. Future observers will see clearly that their attempts to ban or restrict kratom were not about public health. They will see that the claims of safety concerns were exaggerated or politically motivated. They will recognize that bureaucrats ignored science, silenced debate, and acted in ways that favored donors, profits, or political signaling instead of Ohioans' well-being. This will be remembered as part of the harsh legacy of Governor DeWine and of board members who let partisanship and money interests override common sense and evidence. Corrupt decisions hurt everyday citizens people who needed a safe alternative, people who relied on natural kratom to manage wellness, and communities already struggling with access to care. The Democrats who pushed restrictive policies without exemptions, the board members who refused to listen, the bureaucratic hurdles all of this will be seen for what it was: an attempt to steal money and undermine the average citizen, while pretending it was "for public health." Everyone saw it. Everyone knew it. It was sad. It was avoidable. But thanks to SB 299, the people of Ohio will have a regulated, rational path forward, how revenue to fund schools . and the memory of these misguided bans will be a cautionary tale about what happens when policy ignores science, ethics, and the voices of the public. Keep natural kratom legal Education around natural kratom is not optional:. it is essential. Ohio has a clear opportunity to handle this issue responsibly, and SB299 is the bill that would actually get it done. Regulation, age limits, quality standards, 35% sin tax with huge civil liberties to manufacture in Ohio and transparency… how are you protecting the public. Education is how you prevent harm. Bans do neither. SB299 recognizes reality: people are already using kratom, and they deserve accurate information and safe, regulated access. Adults over 21 should be trusted to make informed choices,

			especially when education and consumer protections are part of the law. That is what good policy looks like. The timing of this issue, however, raises serious concerns. Many Ohioans are watching Governor DeWine prioritize national political agendas and donor interests while doing little for the people who actually live here. It feels like bureaucracy at its worst decisions made for political alignment and financial benefit rather than for Ohio families, workers, and seniors. What is especially troubling is the lack of consistency and fairness in the process. We see Democrats loudly debating issues like border policy, yet remaining silent or disengaged when it comes to protecting Ohioans' access to regulated, natural alternatives. At the same time, there appears to be no meaningful exemption or safeguards preventing members of regulatory or policy boards from benefiting directly or indirectly from a kratom ban. That is a serious conflict of interest, and people notice it. When board members or connected interests stand to gain from prohibition, public trust disappears. Education-based regulation like SB299 builds trust. Prohibition fueled by fear, politics, or financial incentives destroys it. Ohio does not need another example of failed policy driven by misinformation and backroom influence. We need education, transparency, and laws that reflect the will and well-being of the people. SB299 is the forward-thinking solution, and abandoning it would be a disservice to Ohioan. diminishes The board as an even more corrupt bureaucrats.to sell more fda drugs Respectfully ask you keep natural kratom legal. I do not use kratom but I understand the appeal. Banning this is backed by money not public health everyone see through the fake push. We cannot go backward. The days of fear-based policy, closed-door decisions, and ignoring lived experience are over. We have to move forward and that means education, transparency, and honest discussion. My generation, and those who came before and after me, are paying attention. We see what is happening. We see when decisions are made without real debate, when evidence is ignored, and when policies seem to benefit moneyed interests more than the public. Calling this concern "misinformation" or dismissing it outright does not make it disappear—it only deepens distrust. Progress does not come from bans and silence. It comes from education, regulation, and open dialogue. We should be teaching people, not punishing them. We should be addressing risks honestly while also acknowledging benefits and real-world use. Anything less is not public health it is control. When voices are excluded and questions are shut down, credibility is lost. That is what people are reacting to now. This is not rebellion for the sake of it; it is a demand for integrity. We see the corruption, the conflicts of interest, and the repeated mistakes, and we are no longer willing to pretend we don't. The path forward is clear: educate, regulate, and respect the public. Do not drag us back into another failed era defined by fear and propaganda. We deserve better, and we expect better.

Columbus	Ohio	4 - Other	The war on drugs I have watched the state consume enormous amounts of money, time, and human potential, on the war on drugs and I can say plainly: it failed. It did not bring better health, it did not reduce harm, and it did not make our communities stronger. After all these years, I have to ask an honest question…why are we still repeating the same mistakes? Why, after decades of evidence that prohibition causes more damage than it prevents, are we now turning our attention to kratom? From where I sit, this does not look like a public safety effort. It smells like a money grab, plain and simple. Kratom is not the problem. For many of us who are older, it has been a gentle, natural option that helps with everyday aches and pains that come with age. My bones ache. That is part of getting older. Kratom has allowed me to stay active, independent, and out of the doctor's office without relying on heavy prescription drugs that come with serious side effects and risks. I do not understand why a natural plant is being targeted while powerful pharmaceutical drugs remain readily available and heavily promoted. After a lifetime of watching policy choices favor money over people, it is hard not to feel disheartened by this direction. I sincerely pray that you allow natural kratom to remain accessible. Not everyone is looking to get high or escape responsibility. Some of us are simply trying to get through the day with a little less pain and a little more dignity. Please consider the voices of those who have lived long enough to recognize when history is repeating itself. We cannot afford another failed crusade disguised as protection. We are being told this is about public health, but from where my generation stands, that claim no longer holds any credibility. Young people want options, not mandates that funnel us into prescription drugs as the only "acceptable" solution. We have watched prescription medications be pushed for decades while communities suffered the consequences. Now, when people seek alternatives, suddenly the response is bans, restrictions, and moral panic. We see substances like kratom and marijuana through the same lens: plant-based, widely used, and far less dangerous than many prescription drugs that are handed out without hesitation. Yet marijuana was classified as Schedule I for years despite overwhelming evidence of its benefits benefits I am personally educated on and familiar with. That history matters, because it shows us that these decisions are not driven by science. As young adults, we do not trust boards or committees that continue to make choices that contradict lived experience, research, and common sense. When policies consistently benefit pharmaceutical interests while limiting access to natural or harm-reduction options, it is impossible not to see money and backroom influence at play. Whether you call them "backhand deals" or institutional bias, the result is the same: a loss of public trust. This ban is not strengthening credibility it is destroying it. The community sees through it. My generation sees through it. Every time another option is taken away under the guise of protection, it becomes clearer that public health is not the priority. If leaders want respect and legitimacy, they need to start listening to the people most affected. We want transparency, evidence-based policy, and real choice. Until then, these actions will continue to look less like protection and more like control driven by profit. Thank you

			I heard Cameron mcnamee said the goal to get people on FDA medication on a channel 4nbc news about getting people on FDA approved medicine. I was on fentanyl and then went on Suboxone, and I feel it is important to share the effects it has had on my health particularly my teeth. While Suboxone has helped me manage opioid dependence, I have experienced significant dental problems since starting the medication. Over time, I noticed my teeth becoming discolored, sensitive, and prone to decay. I later learned that Suboxone's high sugar content in some formulations, combined with dry mouth and changes in saliva production, can contribute to cavities and erosion. It's frustrating because, while the medication helps with recovery, it comes with a cost to my oral health that I wasn't fully prepared for. I want other young adults and healthcare providers to be aware that Suboxone isn't risk-free. Anyone taking it should pay special attention to dental hygiene, including brushing and flossing more frequently, using fluoride rinses, and seeing a dentist regularly. These steps can help, but the medication still presents challenges that are often overlooked. I hope sharing my experience encourages more discussion about balancing recovery with overall health, including oral health, and pushes for better support and guidance for people taking Suboxone. Recovery is hard enough without having to deal with unexpected dental damage.

Columbus	Ohio	4 - Other	the ongoing corruption and conflicts of interest within the Ohio Board of Pharmacy. It is beyond clear that the system has been hijacked by individuals more concerned with personal gain than the well-being of the people they are meant to serve. Cameron McNamee's tireless efforts to push to ban natural kratom. The Board of Pharmacy and its affiliates continue to engage in practices that benefit a select few while ignoring the needs and voices of the people they were entrusted to protect. The revolving door between business interests and regulatory bodies, especially when it comes to pharmaceutical and healthcare decisions, has become an open secret. These kickbacks may be "legal," but that doesn't make them right. The people of Ohio are not stupid, and they are not fooled by the smoke and mirrors that have been put in place to distract from the truth. I can see it clearly: the board's actions are driven by profits and personal interests, not the well-being of Ohioans. The people of Ohio deserve better than a system that enables corruption and prioritizes profit over public health. It's time for the Board of Pharmacy to answer for its shady practices. The revolving doors, the conflicts of interest, the backroom deals it all needs to end. We demand transparency, accountability, and the immediate cessation of any deals that further erode public trust. January is coming fast, and I will not sit idly by while this injustice continues. We need immediate action. The people of Ohio will not let this go on unchecked any longer.
Columbus	Ohio	4 - Other	the corruption now blatantly on display. Cameron McNamee serves on your Board while also sitting on the board of Thrive for Change, a nonprofit funded by opioid related initiatives. How is it even possible that someone with such a direct financial conflict of interest can be allowed to influence regulatory decisions on natural kratom? Your push to ban kratom is no longer about public health it is a money grab, and everyone can now see it for what it truly is. This isn't just a failure of ethics; it is a betrayal of the public, of trust, and of the principles Ohioans expect from their government. I have long suspected corruption, even under Governor DeWine, but now it is undeniable. When a new government takes office in January, we will make sure this conflict of interest and financial exploitation are fully exposed. The public deserves transparency, accountability, and integrity and those responsible for prioritizing financial gain over public health will be held accountable. You cannot move forward on a ban with this kind of conflict. Especially natural kratom Actions have consequences, and the time for covering up corruption is over.

Columbus	Ohio	4 - Other	deeply upset to learn of the apparent conflict of interest involving Board member Cameron McNamee and his affiliation with Thrive for Change while the Board considers actions that could lead to a ban on kratom. Learning of this overlap has been disheartening and has caused me to question whether this process is truly being conducted in good faith. Even the appearance of impropriety or the perception that financial or organizational interests could benefit from such a ban natural kratom damages public trust and reflects poorly on the integrity of the Board as a whole. As someone who believed in transparent and unbiased regulation, this has been difficult to accept. I hope the Board recognizes how upsetting and discouraging this is for members of the public and takes steps to address these concerns openly and responsibly. This is not going away. Especially when this comes out that it's not about public health it's about filling your pockets I can't wait to show the interview. And show corruptions and to deny that this is year only will grow louder and louder
Columbus	Ohio	4 - Other	This letter is being written to publicly call out what appears to be a blatant conflict of interest and corruption within your Board. Cameron McNamee sits on the Ohio Board of Pharmacy while also serving on the board of Thrive for Change, a nonprofit funded through grants, donations, and opioid-related initiatives. This dual role gives him a direct financial incentive to see natural kratom banned a substance that countless Ohioans, including myself, rely on for health and well-being. This is not a hypothetical concern. This is corruption in action. Decisions that are supposed to be made to protect public health are instead being influenced by financial self-interest. The public has a right to know that regulatory decisions are not being made behind closed doors for profit. This is a betrayal of every person who relies on your Board to act fairly and transparently. I, and many others, are directly impacted by these actions. Natural kratom is a legal, non-opioid alternative that helps people avoid more dangerous substances. Yet here we are, watching as those with a financial stake in opioid treatment initiatives attempt to remove that option. This is not policy it is personal, and it is corrupt. We are demanding full transparency immediate disclosure of all financial interests and connections that Board members, particularly Cameron McNamee, may have that could influence decisions. Preservation of all records, communications, and actions regarding kratom and related substances. Public accountability for any actions taken that reflect a conflict of interest.The public is watching. Media, advocacy groups, and concerned citizens are paying attention. Clips, evidence, and financial records will be shared if these issues are not addressed transparently. This is about the health and trust of Ohioans, and the erosion of that trust will have consequences. The time for silence, excuses, or cover-ups is over. Actions speak louder than words, and what has been done so far speaks of corruption, not care. The people of Ohio demand integrity.

Columbus	Ohio	4 - Other	I am deeply frustrated and concerned about what appears to be corruption and conflicts of interest within the pharmacy and regulatory system. I support natural kratom and believe it has value, yet there are people in positions of influence such as Cameron McNamee on the board of Thrive for Change who are calling for its removal. If someone stands to benefit from restricting kratom while simultaneously influencing policy or advocacy against it, that raises serious ethical questions. This is a conflict of interest, and it undermines public trust. Those responsible need to be held accountable. Transparency, integrity, and adherence to the public interest must come first not private gain. The record is being watched, and when leadership changes, these issues must be addressed. We cannot allow corruption to dictate public health and access to natural remedies. Stop the corruption, the boy, the pharmacy keep natural crayon, legal otherwise you been exposed we see it this isn't for anything other than to line pockets Something doesn't sit right. After watching the Channel 4 press conference with Cameron McNamee, I started looking deeper and the conflicts of interest are hard to ignore. How is it acceptable for someone pushing FDA-approved pharmaceutical narratives to sit on the board of an organization that directly competes with natural alternatives like kratom? Especially when that same organization distributes drug testing materials and shapes public messaging? This isn't about personal attacks. It's about transparency, fairness, and public trust. If you're influencing policy, recovery spaces, or public health narratives, the public deserves to know where your incentives lie. Conflicts of interest shouldn't be hidden they should be disclosed. Sunlight matters. Accountability matters. This isn't about public heath to line your pockets save your records for January when we get a new governor I am writing as a concerned member of the public who supports evidence-based health policy, consumer choice, and transparency in leadership. Recent events have raised serious questions that deserve public scrutiny and honest answers. Following a recent Channel 4 press conference involving Cameron McNamee, border of pharmacy member many in the community have begun examining potential conflicts of interest within organizations that influence drug policy and public health narratives. In particular, there is growing concern about individuals who advocate strongly for FDA-approved pharmaceutical approaches while simultaneously holding positions on boards or organizations whose work directly competes with or undermines natural or plant-based alternatives, including kratom. Of special concern is the appearance of a conflict of interest when a board member of an organization positioned as a recovery or testing authority is also aligned with initiatives or messaging that may disadvantage natural products or alternative approaches. When these same organizations distribute testing materials or influence public perception and policy, it raises an important question: how can the public be assured that decisions are being made fairly, without financial or ideological bias? This is not about personal attacks. It is about transparency, accountability, and trust. Public-facing boards and advocacy organizations must be held to the highest ethical standards, especially when their actions affect

			health choices, regulation, and livelihoods. We are asking for: Full disclosure of board members' financial, professional, and advocacy ties clear conflict-of-interest policies and enforcement Open dialogue with affected communities, including those who rely on natural alternatives Independent review where conflicts may reasonably be perceived Public trust is earned is earned not give.

Columbus	Ohio	4 - Other	In a shocking revelation that undermines public trust in the Board of Pharmacy, Cameron McNamee, a current board member, appears to have an undeniable conflict of interest that calls into question his impartiality and fairness in regulating kratom a substance he has publicly advocated to ban. McNamee, whose position allows him to directly influence policy decisions on kratom, stands to profit significantly from its prohibition, thanks to his leadership role at Thrive for Change, a company involved in alternative health products. The ethical issues surrounding McNamee's dual role are glaring, especially when the future of kratom, an increasingly popular natural substance used for pain relief and anxiety management, is at stake. Critics argue that McNamee's involvement in these policy discussions represents a clear conflict of interest, as his financial and professional interests are directly tied to the outcome of any regulation on the substance.McNamee is a member Thrive for Change, an organization that has been vocal about the potential dangers of kratom. While the company promotes a variety of natural wellness products, it has also been involved in efforts to lobby for more stringent regulations and even an outright ban on kratom, a plant with growing use in alternative medicine. But what's especially troubling is that McNamee holds a seat on the Board of Pharmacy an agency that is responsible for regulating substances like kratom. As a board member, McNamee's actions could directly benefit the interests of Thrive for Change, should the Board move to restrict or ban kratom, a move that would elevate the company's own product line and market share. For McNamee to remain involved in decisions related to kratom, especially when those decisions could lead to the criminalization of a widely used substance, creates a glaring conflict. Many argue that such a situation jeopardizes the fairness of the Board and the integrity of the regulatory process itself.
Columbus	Ohio	4 - Other	I am so outrage over the so-called "debate" concerning natural kratom. It is painfully obvious that Cameron McNamee and Thrive for Change have a financial incentive to see natural kratom banned, and as a result, there has been no fair or honest discussion on the matter. This is not a debate it is a staged performance designed to mislead the public. Natural kratom is safe when used responsibly, yet the information being presented is skewed by backroom deals and hidden agendas. Everyone paying attention can see through this corruption. It is unacceptable that organizations are using public forums to push a financial or political agenda under the guise of public safety. We are calling on you to keep a full and accurate record of all proceedings regarding this matter, including everything from January, to ensure accountability. The public deserves transparency, honesty, and an unbiased platform for discussion not manufactured narratives designed to benefit a select few. We will not stand by silently while natural kratom is targeted for profit-driven reasons. The truth matters, and your documentation will be critical in holding all parties accountable.

Columbus	Ohio	4 - Other	The Ohio Board of Pharmacy is supposed to regulate fairly, transparently, and in the interest of public health. Yet recent actions and affiliations raise serious concerns about corruption and conflicts of interest. Cameron McNamee, a current member of the Ohio Board of Pharmacy, simultaneously serves on the board of Thrive for Change, a nonprofit funded by grants, donations, and opioid-related initiatives. This dual role gives him a clear financial incentive to see natural kratom banned a legal, non-opioid substance that provides real benefits to Ohioans seeking alternatives to opioids. This is not hypothetical. Regulatory decisions are being influenced by financial interests. Kratom, which could help reduce reliance on dangerous opioids, is under attack by someone who stands to benefit if it is removed from the market. The public deserves transparency, but instead, the people of Ohio are seeing decisions made behind closed doors, with real-world consequences for their health and well-being. This conflict of interest is unacceptable. It undermines public trust, erodes faith in government institutions, and silences voices advocating for natural, safe alternatives. Those impacted myself included feel betrayed by a system that should protect us, not prioritize personal or organizational financial gain. We are demanding full transparency and accountability: Immediate disclosure of all financial interests and connections of Board members, particularly Cameron McNamee, that may influence regulatory decisions. Preservation of all records, communications, and actions regarding kratom. Public acknowledgment and corrective action addressing this conflict of interest. Ohioans deserve regulatory integrity, not hidden agendas. This is about public health, fairness, and the right to make informed choices about our own bodies. The time for excuses, cover-ups, and financial self-interest is over. The public is watching, and accountability is coming. It is time for the Ohio Board of Pharmacy to act with honesty, integrity, and transparency.

Columbus	Ohio	4 - Other	I am writing to express my outrage and deep concern over what appears to be blatant corruption and impropriety involving the Board of Pharmacy and Cameron McNamee, who simultaneously serves on the board of the nonprofit "Thrive for Change." The push for a ban on natural kratom raises serious red flags when viewed alongside Mr. McNamee's dual roles. A Board of Pharmacy member helping drive policy decisions while sitting on the board of a nonprofit that stands to benefit—financially, politically, or reputationally from those same decisions is a textbook conflict of interest. At minimum, it creates the appearance of impropriety. At worst, it suggests regulatory capture and abuse of public trust. Public servants and board members are supposed to act in the interest of the people not to advance private agendas or align with organizations that benefit from prohibitionist policies. Kratom is a natural substance used responsibly by countless individuals for pain management, recovery support, and quality of life. Targeting it while ignoring these conflicts undermines any claim that this ban is about public safety. The lack of transparency surrounding these relationships is unacceptable. The public deserves clear disclosure, recusals where appropriate, and an independent investigation into whether influence, bias, or coordinated advocacy played a role in the Board's actions. This is not how ethical governance works. Regulatory bodies should not be weaponized to advance ideological or organizational goals under the guise of health policy. Until these conflicts are fully addressed and investigated, any kratom ban tied to these individuals will remain deeply suspect.I demand accountability, transparency, and an immediate review of the role Cameron McNamee and Thrive for Change have played in shaping policy decisions related to kratom. Anything less is a betrayal of public trust.
Columbus	Ohio	4 - Other	Outrage at Corruption in the Ohio Board of Pharmacy to my absolute disgust and outrage at the Ohio Board of Pharmacy and the corruption that is so blatantly on display. Cameron McNamee, who serves on your board, is also a member of Thrive for Change, a nonprofit focused on fentanyl and opioid harm reduction. Yet here he is, using his position to push for the ban of natural kratom a non-opioid alternative that has helped countless people. This is one of the most disgusting abuses of power I have ever witnessed. The very idea that someone entrusted with protecting public health would work to eliminate a natural option while simultaneously benefiting from funding tied to opioid initiatives is staggering. It shatters any illusion that we live in a free country governed by impartial, accountable officials. I hope all of you understand that January is coming quickly and when it does, the public will not forget this corruption. Actions have consequences, and this betrayal of trust will not be overlooked. Your jobs, your reputations, and the credibility of the Board are on the line.

Columbus	Ohio	4 - Other	I am writing to express my concern and seek clarification regarding recent revelations involving one of your members, Cameron McNamee, and their association with the organization Thrive for Change, specifically in the distribution of test strips. It has come to my attention that Mr. McNamee, in his capacity as a member of the Board, has been actively involved in the distribution of these test strips. While I understand that harm reduction initiatives are important in public health, the involvement of someone holding a position on the Board of Pharmacy in this specific activity raises serious concerns about potential conflicts of interest and the integrity of your organization. As an impartial body entrusted with overseeing pharmacy practices, the Board's credibility and independence must remain unquestioned. However, the association of a member of the Board with an initiative such as Thrive for Change which directly interacts with a sensitive public health issue—appears to present a clear conflict of interest. This is not only a cause for concern but also undermines the trust the public places in the decisions and actions of the Board. Given that the Board of Pharmacy is responsible for regulating and ensuring the ethical practices of the pharmaceutical industry, it is critical that all members adhere to the highest standards of transparency and accountability. The optics of such an involvement could easily be misinterpreted as biased or self-serving, which could damage the reputation of both the Board and the profession as a whole. In light of this, I respectfully request the Board to clarify the following: What is the Board's official stance on conflicts of interest involving its members, and how is this being enforced in this particular case? Does the Board have any procedures in place to prevent members from engaging in activities that may appear to compromise their impartiality? How does the Board plan to address the potential public perception of bias or impropriety in light of Mr. McNamee's involvement with Thrive for Change? It is my hope that the Board will take this matter seriously and provide the public with a transparent and thorough response to ensure that the trust in its governance remains intact. Thank you for your time and attention to this important issue. I look forward to your response.

Columbus	Ohio	4 - Other	significant ethical violations occurring within the Board of Pharmacy, specifically involving board member Cameron McNamee and his organization, Thrive for Change. It is an undeniable conflict of interest for a sitting board member to actively participate in policy decisions particularly those related to kratom while personally benefiting from a potential ban. Mr. McNamee's dual role creates a situation where his actions and votes directly influence his financial and professional interests. This is a blatant corruption of the regulatory process, one that undermines the Board's integrity and betrays the public trust. For any regulatory body to function legitimately, it must act in the public's best interest. The appearance of impropriety here is overwhelming. How can the people have confidence in the Board's decisions on kratom when one of its own members stands to gain from those very decisions? This raises serious questions about the Board's impartiality, accountability, and commitment to transparent governance. It is unconscionable that Mr. McNamee has been allowed to continue his involvement in kratom-related matters while directly benefiting from its potential ban. This situation is not just a conflict of interest it's an ethical failure of the highest order. The Board's refusal to address this problem and remove Mr. McNamee from any decisions on kratom policy makes it complicit in perpetuating corruption. The public deserves better. The people impacted by the Board's decisions on kratom deserve transparency, fairness, and, most of all, a Board that is free from conflicts of interest. The current situation calls into question the legitimacy of every decision made by the Board in this area. immediate and decisive take action to investigate this matter. Allowing such blatant corruption to continue unchecked is an insult to every citizen who relies on the Board's work for fair and impartial regulation.

Columbus	Ohio	4 - Other	Any appearance of impropriety reflects poorly on the entire Board. Cameron McNamee's role as a Board member while also being affiliated with Thrive for Change creates serious concerns about potential conflicts of interest in efforts to ban kratom. Allegations or perceptions that financial incentives or organizational benefits could be tied to such actions whether proven or not undermine public trust and damage the credibility of the Board. This situation demands transparency and accountability. Without clear disclosures and appropriate safeguards, the integrity of the regulatory process is called into question. What has unfolded around the proposed kratom ban has left many of us feeling not only saddened, but deeply unsettled about the integrity of this process. Cameron McNamee's role on the Ohio Board of Pharmacy while simultaneously serving on the board of Thrive for Change presents a serious and unresolved conflict of interest. The possibility of financial or organizational incentives influencing regulatory decisions cannot be ignored. Even if no improper conduct is ultimately proven, the appearance alone demands accountability. Public trust depends on more than assurances it depends on transparency and clear separation of interests. This no longer feels like a good-faith discussion rooted in science and open dialogue. Instead, it feels closed, defensive, and dismissive of the people most affected. That loss of openness is painful. Many of us placed our faith in this Board to act carefully and ethically, and watching that faith erode has been genuinely heartbreaking. Accountability matters here. That means acknowledging conflicts, disclosing relevant relationships, and being willing to pause or reconsider actions that may be compromised. Without that, the damage to public confidence will continue to deepen. Many now feel that real answers may only come in January, when new leadership could finally examine these concerns fully particularly regarding Cameron McNamee's involvement and any connections to Thrive for Change. Until then, the uncertainty and lack of clarity weigh heavily on those of us who still want to believe in fair governance. You ruined your credibility. And therefore can't have a honest debate. Your corruption will come out what this process has become. I once believed that decisions affecting public health in Ohio would be guided by openness, good faith, and sincere concern for the people most impacted. Lately, it no longer feels that way. Cameron McNamee's position on the Ohio Board of Pharmacy, alongside his role with Thrive for Change, raises troubling questions about possible conflicts of interest and financial incentives tied to the proposed kratom ban. Whether intentional or not, this overlap creates the appearance of backdoor influence, and that alone has deeply shaken my trust. It does not feel like this issue is being handled in good faith. What hurts the most is the silence and dismissal felt by people like me those who rely on honest dialogue and fair consideration. This is not just about policy. It is about feeling unseen, unheard, and powerless while decisions are made that affect our lives. The lack of transparency has been discouraging and painful. At this point, many of us feel that clarity and truth may only come in January, when

			new leadership could finally take a closer look at these concerns, including Cameron McNamee's involvement and any connections to Thrive for Change. Until then, the uncertainty weighs heavily on those who still want to believe in integrity and accountability. I hope the Board understands how deeply this situation has affected public trust and how heartbreaking it is to watch faith in our institutions slowly erode. disappointment and concern over the direction this process has taken. What should have been an open, good-faith discussion about natural kratom now feels clouded by unanswered questions and possible conflicts of interest. Cameron McNamee's role on the Ohio Board of Pharmacy, while also serving on the board of Thrive for Change, raises serious concerns about potential backdoor dealings and financial incentives connected to this proposed ban. Even if no wrongdoing is ultimately proven, the appearance of a conflict alone damages public trust. It does not feel like this issue is being handled in good faith. I believed this process would be transparent and centered on science and public input. Instead, it feels closed off, dismissive, and influenced by interests that have not been fully disclosed. That is deeply discouraging to those of us who rely on fair governance and honest discussion. At this point, many of us feel that the truth will not come out until January, when new leadership may finally be able to get to the bottom of these concerns specifically regarding Cameron McNamee's involvement and any dealings connected to Thrive for Change. Until then, trust in this process remains severely shaken. I hope the Board understands how damaging this has been for public confidence and how painful it is to feel unheard by the very institutions meant to serve us.

Columbus	Ohio	4 - Other	My concern, however, goes beyond the substance itself and extends to the integrity of the decision-making process. I am deeply troubled by the apparent impropriety involving Cameron McNamee, a member of the Board of Pharmacy, who also sits on the board of the nonprofit Thrive for Change. This dual role raises serious ethical questions. Thrive for Change promotes positions that align with prohibitionist approaches to substances like kratom, while the Board of Pharmacy is positioned to directly influence regulatory outcomes. In addition, there are concerns about relationships with or support for other products and treatment models that may carry financial incentives which benefit when kratom is restricted or banned. When individuals involved in regulatory decisions have professional or organizational ties to entities that stand to gain from those decisions, it undermines public confidence and calls the fairness of the process into question. Even if no explicit laws have been violated, the appearance of a conflict of interest is undeniable and damaging. This does not feel like a fair debate of ideas. A fair debate requires neutral decision-makers, transparency, and an honest evaluation of evidence including the testimony of consumers whose lives are directly affected. When policies appear to be driven by financial or organizational interests rather than balanced science and public input, it erodes trust and legitimacy. I am not asking for special treatment for kratom. I am asking for ethical governance. The people making these decisions should not have incentives financial or otherwise that favor banning a natural product while promoting alternatives that generate revenue. You guys hurt Ohio because you're corrupt we will get your records in January Until these conflicts are openly addressed and safeguards are put in place, any action taken against kratom will continue to feel less like public health policy and more like regulatory capture. That is unacceptable, and the public deserves better.
Columbus	Ohio	4 - Other	Cameron McNamee sits on your Board and simultaneously serves on the board of Thrive for Change. That is a blatant conflict of interest, and everyone now sees this for what it is: a money grab. This has nothing to do with public health. It has everything to do with protecting funding streams tied to opioid-related initiatives while eliminating a natural alternative that threatens them. The integrity of this process is completely compromised. the corruption many suspected. When new leadership comes in January, this will be exposed. Continuing under these conditions only deepens the damage and the accountability that's coming.

Columbus	Ohio	4 - Other	Cameron McNamee sits on your board while simultaneously serving on Thrive for Change, a nonprofit with financial ties to opioid-related initiatives. That means he has a clear financial incentive to see natural kratom banned a substance that has helped countless people, myself included. This is not just a policy disagreement it is corruption, plain and simple. How is this allowed to happen in a state that claims to value transparency and public trust? The fact that someone can profit while making decisions that directly harm the public is disgusting. You are supposed to protect citizens, not rig the system to serve personal or organizational gain. This is one of the clearest betrayals of public trust I have ever seen, and it makes DeWine, the Board, and the entire regulatory system look like a joke. The people you are supposed to serve are being silenced. Our health, our options, our voices our lives are being trampled for money and power. I will not stay quiet. Public accountability is coming. Clips, records, financial disclosures, subpoenas from we will make sure everyone knows what's happening behind these closed doors. Your actions are indefensible. You are not just making bad policy you are hurting real people, betraying public trust, and proving that corruption runs deeper than anyone wants to admit. The time for excuses is over. The time for accountability is now.

Columbus	Ohio	4 - Other	I am submitting this testimony as someone who has direct, personal experience with kratom and who is deeply troubled by the way this issue is being handled by the Board of Pharmacy. Kratom has been a beneficial, natural option for many people like me who are seeking alternatives for pain management, mental health support, or recovery. For many of us, kratom has helped improve daily functioning and quality of life where traditional pharmaceuticals either failed or caused harm. These lived experiences deserve to be part of the public record and part of any honest policy discussion. However, what concerns me just as much as the potential ban itself is the process by which this decision appears to be unfolding. I struggle to understand how this can be considered a fair or unbiased debate of ideas when a member of the Board of Pharmacy, Cameron McNamee, also sits on the board of Thrive for Change, a nonprofit that advocates for positions aligned with prohibitionist drug policies. Even if no laws have technically been broken, this dual role creates a clear appearance of impropriety. When the same individuals shaping regulatory decisions are connected to organizations that may benefit from those decisions, public trust is compromised. At that point, it no longer feels like an open evaluation of evidence—it feels like a predetermined outcome. A fair debate requires transparency, independence, and a genuine willingness to hear from all stakeholders, including consumers whose lives are directly affected. It requires decision-makers who are free from conflicting interests, or at the very least, willing to recuse themselves when those conflicts exist. I am not asking the Board to promote kratom. I am asking for honesty, balance, and fairness. Ignoring consumer testimony while advancing policies influenced by undisclosed or unresolved conflicts undermines the credibility of the entire process. If kratom is to be evaluated, it should be done through open science, unbiased review, and ethical governance—not through a system that gives the appearance of regulatory capture. Until these concerns are addressed, it is difficult to accept that this process represents a legitimate or fair debate of ideas. With Cameron, it looks like impropriety and you be investigated in January You should pray DeWine pardons you because we will investigate your blazer corruption. Banning kratom when giving out test strips and Suboxone undermines the natural part. Total scum how it's s it fair. Once the new governor takes office, we will investigate your corruption. Your record stay longer then a few months. We will Look into your corruption The public is not blind. We can see exactly what's happening here a corrupt bureaucracy, motivated by financial gain and a total disregard for ethical standards. By allowing a conflict of interest of this magnitude to persist, you are completely betraying the trust of the people you are meant to protect. There is no scientific basis for these decisions, and the fact that a Board member is personally tied to such an initiative raises serious ethical questions about how decisions are actually being made behind closed doors. How many more decisions are being driven by financial

			kickbacks or personal gain rather than the public's best interests? How much longer will we, the public, continue to be lied to and manipulated by an organization that is supposed to be safeguarding public health? The actions of your Board have crossed the line from bad judgment to outright corruption, and it is beyond time that you are held accountable. We have zero reason to trust you and we will investigate in January and you all will be removed

Columbus	Ohio	4 - Other	serious concern regarding the ongoing handling of natural natural kratom by the Ohio Board of Pharmacy. Of particular concern is Cameron McNamee, who serves on your board while also sitting on the board of Thrive for Change. This nonprofit receives funding through opioid-related initiatives, giving McNamee a clear financial incentive to see natural kratom banned. How is this even possible? Situations like this reflect poorly not just on the board, but also on Governor DeWine and the integrity of public health oversight in Ohio. I had believed that discussions about substances like kratom would be open and fair, but it is hard to have faith in that process when someone with such a direct conflict of interest is in a position of regulatory authority. Transparency, accountability, and public trust are essential. I urge the board to address this apparent conflict immediately and ensure that all decisions are made based on science and public health not financial incentives.
Columbus	Ohio	4 - Other	How can you expect the public to trust that your decisions are fair, impartial, and in the best interest of the people, when the very individuals making those decisions stand to profit from the outcomes? It's clear that the mask has been ripped off, and what's been revealed is ugly, corrupt, and, frankly, disgusting. Your Board is filled with members who are tied to the very products and policies you regulate such as Narcan and fentanyl test strips. These are not just "neutral" matters to you; they're profit-making opportunities. So, don't try to claim that your decisions are made with any semblance of fairness or integrity when those benefiting from the policies are seated at the table making them. The hypocrisy is glaring. You want us to believe that you're acting in good faith, but we can see the backroom deals. We can see the money changing hands, and we can see the priorities shifting from public health to personal profit. It's not just offensive; it's a betrayal of the very people you're supposed to serve.No matter how you try to spin it, the stench of corruption is unmistakable. How can anyone trust that your decisions about Narcan, fentanyl test strips, and other life-saving measures are based on what's best for the public, and not what's best for your bottom line? This isn't just about transparency; this is about integrity. And right now, your Board has none. We are demanding real accountability, not more backroom deals and empty rhetoric. The public deserves more than this. The public deserves a fair and honest process, free from conflicts of interest and greed.You've been exposed. And we will not stop until we see meaningful change. January will be here before you know it and if there's no accountability, you will lose your job. All of you

Columbus	Ohio	4 - Other	I never imagined I would feel so powerless in a system that is supposed to protect the public, not serve financial interests. Cameron McNamee sits on your board while also serving on Thrive for Change, a nonprofit with funding tied to opioid initiatives. This creates a clear financial incentive to see natural kratom banned a substance that has had a real, positive impact on my life. Watching someone in a position of public trust act in a way that directly harms me and countless others is devastating. It is not just policy it is personal. Decisions made behind closed doors, motivated by financial gain, are taking away options that many people, myself included, rely on for health and stability. I believed in open discussion, fairness, and public accountability, but seeing this conflict of interest destroys that trust. It makes me question the integrity of the entire Board and the fairness of the system we are supposed to rely on. I was ready to have a honest debate now I'll be at the meetings exposing his Financial gain I know the wind, a little corrupt, but he's gone in January. This corruption isn't abstract it hurts real people. It undermines faith in government, silences voices that should be heard, and puts lives at risk. I urge the Board to acknowledge this conflict, be fully transparent, and ensure that every decision is based on science, ethics, and the well-being of the people you serving not the financial interests of a single board member. The way this has been handled is unacceptable, and it has left me—and many others—angry, hurt, and deeply concerned about what comes next. The public is watching, and this betrayal cannot be ignored.
Columbus	Ohio	4 - Other	the board's relentless targeting of natural kratom. The only thing that has changed is the corruption embodied by Cameron McNamee's role on your board while simultaneously serving on Thrive for Change. This is completely wrong, and now that it is clear there is a financial motive behind these actions, public scrutiny will only intensify.We will be sharing the clip of McNamee openly promoting FDA-approved treatments while benefiting from kickbacks through his nonprofit connections. Until full financial disclosures are provided, we are actively pursuing subpoenas to uncover the extent of this conflict. This should have been a conversation to protect public health not an avenue for self-interest and financial gain. Your actions demonstrate a total disregard for transparency, fairness, and the people you are supposed to serve. Honestly, this behavior is reprehensible, and public trust in the Board has been severely eroded.

Columbus	Ohio	4 - Other	Let's stop pretending this is about public health. You are attempting to move forward with a ban on natural kratom while Cameron McNamee one of your own board member also sits on the board of Thrive for Change, an organization financially tied to opioid and harm-reduction funding. That is a textbook conflict of interest, and everyone watching now sees it clearly for what it is: a money grab. How can you possibly justify continuing this process when one of the decision-makers has a financial incentive for kratom to be removed from the picture? You can't. Any credibility this Board once had is gone. This is no longer a debate it's corruption in plain sight. People are paying attention now. The public understands that kratom threatens existing funding models, and instead of honest discussion, the response has been silencing, deflection, and abuse of regulatory power. That should outrage anyone who believes in transparency or fair government. I already had little faith in this process under Governor DeWine, but this has crossed a line. When new leadership comes in January, this will not be forgotten. The conflicts, the backroom interests, the financial incentives all of it will be exposed. Records, communications, and decisions made during this time will be scrutinized. You cannot move forward honestly under these conditions: the public will remember exactly who chose money and power over integrity.
Columbus	Ohio	4 - Other	improprieties within the Board of Pharmacy, particularly the blatant conflict of interest involving board member Cameron McNamee and his organization, Thrive for Change. It is indefensible for a sitting board member to participate in regulatory decisions while standing to benefit financially, professionally, or politically from the banning of kratom. This is not a gray area. This is a clear ethical violation that undermines the integrity of the Board and erodes all public trust in its actions. A regulatory body cannot claim to act in the public's best interest while allowing its members to shape policy that directly benefits their own agendas. The appearance alone of this conflict should have disqualified Mr. McNamee from any involvement in kratom-related matters. Instead, the Board has chosen silence and complicity. That decision sends a clear message: this Board is more interested in protecting insiders than in upholding transparency, fairness, or ethical governance. When regulatory boards are stacked with individuals who profit from the outcomes they regulate, the process becomes corrupted by design. This is not public health policy it is self-serving governance masquerading as concern for safety. The continued failure to address these conflicts proves that the Board of Pharmacy is riddled with improprieties and unwilling to police its own conduct. The public deserves accountability. The people affected by these decisions deserve honesty. And this Board owes an explanation for why such an obvious conflict of interest has been allowed to persist without consequence. Until meaningful action is taken, every decision made by this Board regarding kratom will remain suspect, illegitimate, and ethically compromised. Ignoring this fact will be remembered in January when you all get removed

Columbus	Ohio	4 - Other	as someone directly affected by your actions regarding natural kratom. It is deeply troubling to see Cameron McNamee serving on your board while also being a board member of Thrive for Change, a nonprofit with financial ties to opioid-related initiatives. This gives him a clear incentive to push for the banning of kratom a substance that has been important to my health and well-being. How is it even possible that someone with such an obvious conflict of interest is allowed to make regulatory decisions affecting me and countless others? This situation doesn't just reflect poorly on the Board. it erodes my faith in public institutions and the idea of fair, open discussion in our state. I feel silenced and ignored, and it is frustrating to watch financial interests take priority over the lives and choices of real people. I believed Ohio's regulatory processes were supposed to protect the public, not punish it, and this betrayal hits me personally. I urge the Board to be transparent about these conflicts of interest and to ensure that decisions about kratom and other substances are made based on science, fairness, and public health not personal gain. The impact on people like me is real, and the erosion of trust will have lasting consequences if left unaddressed.
Columbus	Ohio	4 - Other	express my outrage and disbelief over the decision to ban natural kratom in Ohio. It's abundantly clear to me, and many others, that this ban is not about public safety or health it's about corruption, kickbacks, and the pursuit of personal gain at the expense of Ohioans. The timing, the manner in which this decision was made, and the shady deals behind closed doors all scream of impropriety. Your decision to outlaw kratom, despite mounting evidence of its benefits for those suffering from chronic pain, anxiety, and addiction, has nothing to do with science or the well-being of Ohio residents. Instead, it reeks of a corrupt agenda fueled by special interests and kickbacks from powerful pharmaceutical companies who stand to profit from this ban. The reality is, kratom is a natural and widely used substance that provides relief to thousands, and banning it is nothing more than a money-driven attack on the people who need it most. Cameron McNamee has spoken out about these issues, fighting for a ban. Yet, it's clear that my efforts and the efforts of many others are being undermined by the very system that is supposed to protect Ohioans. You, and others involved in this decision, are more interested in lining your pockets than in the health of your constituents. This isn't about safety. It's about making a quick buck at the expense of people's lives. Your actions will hurt real people. Families who rely on kratom as a safer alternative to opioids will suffer. The vulnerable individuals who use kratom to manage pain and addiction will have their access taken away. And for what? So that pharmaceutical giants can push their profit-driven agenda while Ohioans continue to fall through the cracks of a broken system. You may think you're covering your tracks, but we see through this. Your decision to ban kratom looks like nothing more than a blatant attempt to serve corporate interests over the people. It's criminal, and the damage this will cause will not be easily forgotten. Your record will be judged harshly come January, and it's time to start thinking about how this will reflect on your legacy. I urge you to stop this ban before it is too late. The people of Ohio deserve better than this corruption masquerading as policy.

Batavia	Ohio	4 - Other	Michele Smigiel
Columbus	Ohio	4 - Other	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats I urge you to support sensible regulation over prohibition. By implementing age restrictions and labeling requirements, we can protect public health while maintaining access for those who rely on this plant responsibly. Thank you for your time and for considering the voices of the kratom community. I am a licensed physician with years of experience treating patients suffering from chronic pain, anxiety disorders, and substance use disorder. I was trained in evidence-based medicine, and I do not take lightly the responsibility that comes with recommending or discussing any substance that affects the human body. I am also someone who believes deeply in patient-centered care and harm reduction. Kratom is a plant. Like many natural substances such as caffeine, nicotine, or poppy-derived medications it contains active compounds that can have both benefits and risks. The question before us is not whether kratom is “perfect,” but whether public policy should be driven by fear or by facts. In my professional experience, kratom has helped many adults reduce or eliminate their reliance on far more dangerous substances, including high-dose opioids and alcohol. Patients who had failed conventional treatments found stability, improved function, and renewed quality of life when using kratom responsibly. These are not isolated anecdotes they are recurring clinical realities. I also want to be clear: I do not support unregulated markets or reckless use. As a physician, I strongly support education, quality control, age restrictions, clear labeling, and

			contamination testing. These measures protect public health. Prohibition does not. Blanket bans remove oversight and push people toward illicit markets or back to substances with far higher morbidity and mortality. From a medical standpoint, that outcome is indefensible.As doctors, we are taught to weigh risk versus benefit. When compared to the well-documented dangers of prescription opioids and other controlled substances, kratom when used responsibly presents a significantly lower risk profile. That does not mean it should be ignored or dismissed, but it does mean it deserves rational regulation rather than reactionary policy. Public health should be about reducing harm, preserving life, and respecting informed adult choice. Criminalizing a plant that countless people use to manage pain or maintain recovery undermines all three of those goals. I urge policymakers to listen not only to institutions, but to clinicians and patients who live with the consequences of these decisions. Regulation rooted in science and transparency will save lives. Prohibition will not. I am alive today because of kratom. That is not an exaggeration, and it is not a slogan. Kratom gave me a way out when traditional systems failed me when pain, dependency, and despair left me with no safe or workable options. It gave me stability, clarity, and the ability to function as a human being again. For people like me, kratom is not a recreational substance. It is harm reduction. It is survival. What we need is education backed by reasonable regulation, not prohibition. Bans do not protect public healthbthey push people into danger. When you ban a substance that countless adults already rely on, you don't make it disappear. You drive it underground. You remove quality controls. You remove transparency. You remove informed choice. History has shown us this over and over again. This is why so many of us do not believe this proposed ban is truly about public health. If public health were the goal, we would be discussing age limits, product testing, labeling requirements, dosage education, and consumer protections. Instead, we are seeing blanket bans pushed forward while the lived experiences of real people are dismissed or ignored. It is hard not to notice that decisions like these are often made behind closed doors by individuals sitting on obscure boards, collecting funding, and benefiting financially from prohibition-driven systems. To many of us, this does not feel like neutral science or community safety. It feels like policy shaped by money, influence, and fear while ordinary people pay the price. I ask you to listen to those of us who are directly affected. Listen to the veterans, the chronic pain patients, the people in recovery, the parents, the workers people who found balance and safety through kratom when nothing else worked. Do not erase us from this conversation. Choose regulation over prohibition. Choose education over fear. Choose public health that is rooted in reality, compassion, and evidence not policies that quietly serve private interests while endangering lives like mine. Because for some of us, this issue is not theoretical. It is life or death. I am law enforcement officer to express serious concerns about the continued enforcement of bans and arrests

			related to natural kratom. Every day, police officers are tasked with addressing violent crime, overdoses, domestic violence, theft, and threats to public safety. Our time, manpower, and resources are limited. Arresting otherwise law-abiding adults for possessing or selling a natural plant like kratom does not make our communities safer. It pulls officers away from real crime and real victims. In my experience, kratom users are not the people committing violent offenses. They are often working adults, veterans, or individuals trying to stay away from far more dangerous substances. Criminalizing them creates unnecessary confrontations, fills jails with non-violent individuals, and strains an already overburdened justice system. This type of enforcement does not appear to be driven by public safety outcomes. Instead, many in law enforcement and the public see it as a policy that benefits select interests through fines, court costs, and enforcement funding while offering no measurable reduction in harm. That perception alone erodes trust between police and the communities we serve. If the goal is to protect the public, our focus should remain on fentanyl, methamphetamine, violent crime, and trafficking organizations that actually endanger lives. Using police authority to target kratom diverts attention from those threats and damages the credibility of law enforcement. I took an oath to protect people, not to punish them for choosing a safer alternative to more dangerous substances. It is time to reexamine these policies and allow police to do the job the public truly needs us to do. It is now painfully clear that our concerns have not been heard, not because they lack merit, but because of corruption and conflicts of interest involving Cameron McNamee and his work with Thrive for Change. The Board's continued support of these efforts, despite clear and repeated objections, raises serious questions about whose interests are actually being protected.We spoke up. We documented harm. We asked for transparency. Instead, we were ignored. Now the truth that we suspected all along is out in the open. The appearance and reality of back-door relationships and undisclosed influence makes it impossible to believe that decisions are being made in good faith or with the public's best interests in mind. You claim to protect patients and uphold ethical standards, yet your actions have actively silenced those being harmed. Let us be clear: this is not advocacy. This is not reform. This is people being hurt while deals are made behind closed doors. Due to the seriousness of these concerns, we have contacted lawmakers. We were advised to keep all records and notes, and we were informed that this matter will be investigated beginning in January. This is no longer something that can be dismissed or buried. You will be held accountable for what you knew, when you knew it, and why you chose to support it anyway. We demand answers. We demand transparency. And we will not stop speaking simply because it is inconvenient for those in power. I am writing to formally express my outrage and deep concern regarding the Board's recent posture toward kratom and the apparent conflicts of interest surrounding this issue. It has come to public attention that Cameron McNamee, associated with the nonprofit "Thrive for Change," sits on or is otherwise connected to—boards or initiatives that

			stand to financially or institutionally benefit from a ban on kratom. This alone raises serious ethical red flags. A nonprofit or affiliated organization profiting from prohibition-based policies while influencing regulatory decisions is not public health oversight it is self-dealing. Even more troubling is the reported statement from a Board of Pharmacy member justifying the timing of renewed kratom action with the remark, "why now because we see it's not healthily." That statement is vague, unscientific, and wholly insufficient as a basis for policy that could impact thousands of Ohio residents. If the Board possesses credible, peer-reviewed evidence supporting this claim, the public deserves to see it. If not, this appears to be policy driven by ideology and personal affiliations rather than data. The appearance that individuals connected to Thrive for Change could benefit from treatment referrals, funding, or expanded relevance following a kratom ban creates a clear and unacceptable conflict of interest. Regulatory bodies are expected to protect the public—not create pipelines that conveniently benefit organizations linked to decision-makers. Accordingly, this letter also serves as a formal notice to preserve records. Please retain all emails, texts, meeting notes, calendars, communications, and documents from January onward that relate to: • Kratom scheduling, regulation, or bans • Thrive for Change • Cameron McNamee • Any coordination with advocacy groups, nonprofits, or treatment organizations connected to kratom policy The public is paying attention. Advocacy groups, journalists, and legal observers are paying attention. If these decisions are truly rooted in public health, transparency should not be a problem. If they are not, the Board should expect continued scrutiny. Ohio residents deserve honesty, evidence-based policymaking, and regulators who are free from financial or organizational entanglements. Anything less undermines public trust and calls the Board's integrity into question. For months, the Ohio Board of Pharmacy framed its actions as part of a thoughtful, good-faith debate about public health. Safety was the language. Caution was the justification. The public was told to trust the process. That trust is now unraveling. A widely circulated clip featuring Cameron McNamee, Director of Policy and Communications for the Ohio Board of Pharmacy, has ignited a wave of backlash that shows no sign of slowing. The video now being replayed and shared across social media has become a flashpoint for critics who say it confirms what they suspected all along: that the "debate" was never really about public health. To many viewers, the tone and substance of McNamee's remarks appear dismissive of natural alternatives such as kratom, while implicitly reinforcing pharmaceutical-centered solutions. Critics argue that this reinforces a system where regulation consistently disadvantages non-pharmaceutical options while protecting the dominance of prescription drugs. Public reaction has been swift and unforgiving. "This was all theater," one advocate said. "The debate was just for show." Others point to the broader context: a healthcare system where millions struggle to afford doctor visits, where patients seek alternatives precisely because they are trying to avoid becoming dependent on powerful pharmaceutical medications. Against that backdrop, the Board's posture feels less like protection and more like control. What has fueled the outrage is not just

			policy disagreement it is perception. Perception that industry-friendly outcomes are prioritized. Perception that public testimony was tolerated but never truly considered. Perception that decisions were already made behind closed doors.In politics and public service, perception matters almost as much as reality. Once people believe the mask has come down, no amount of carefully worded statements can put it back on. Clips live forever. And when they are replayed millions of times, they become part of the public record—fair or not.The Ohio Board of Pharmacy now faces a deeper problem than criticism: a collapse of credibility. When the public no longer believes officials are acting in good faith, every action is viewed through the lens of suspicion. This moment should serve as a warning. Regulatory authority depends on trust. Without it, even well-intentioned policies are doomed to fail. Whether the Board acknowledges it or not, the debate has shifted. It is no longer about kratom alone. It is about transparency, accountability, and whether public health institutions serve people or protect systems. And the public is watching. We all see your trying to sell more pills. Truly sick Let's stop pretending. What is happening here has nothing to do with protecting public health. Everyone can see that now. This is about money, influence, and maintaining control and the public is paying the price. If this were truly about health, access to care would matter. Affordability would matter. The reality that many people cannot afford to see a doctor would matter. Even doctors themselves have admitted that these policies do not help patients. They restrict them. They funnel people toward approved drugs and systems while ignoring real-world barriers faced by everyday Ohioans. That is not public health. That is gatekeeping. You can dress it up in regulations, boards, and official language, but the outcome speaks louder than any press release. When decisions consistently favor profit, donations, and institutional interests over people, the motivation becomes obvious. And the smell of corruption is impossible to ignore. There is a difference between honest disagreement and bad faith governance. Debate is healthy. Transparency is necessary. What we are seeing instead is a system that protects itself while claiming moral authority it no longer deserves. Public trust has been burned — and not by accident. People are tired of being talked down to. They are tired of being told this is for their own good while being priced out of care and ignored when they speak up. This isn't ignorance on the public's part. It's awareness. And here's the truth many of you seem to forget: power is temporary. January is coming. A new governor is coming. And when leadership changes, so will accountability. Boards and officials who have chosen money over people should not assume their positions are permanent. Public health cannot exist without public trust. And that trust is gone. You did this to yourselves. expressing my shock and outrage regarding statements made by Cameron McNamee, in which he explicitly indicated that public safety is not the goal, but rather the aim is to get people onto medication. I could hardly believe what I was hearing. Such statements are deeply disturbing and completely contrary to the ethical responsibilities of anyone

			involved in healthcare or pharmacy. It is appalling that an individual in a position of influence would prioritize pushing medications over ensuring the health and safety of the public. Public trust in the pharmacy profession depends on the assurance that patient well-being is the foremost priority not promoting pharmaceutical use for its own sake. McNamee's comments, if accurate, demonstrate a shocking disregard for ethics, public safety, and professional responsibility. I have a recorded clip of these statements, and I intend to present it before the Board to ensure that the full context is heard. The public deserves transparency, accountability, and assurance that the Board will not tolerate behavior that undermines trust in the profession. I urge the Board to investigate this matter immediately and take appropriate action to hold Mr. McNamee accountable. Allowing such conduct to go unchecked not only endangers public confidence but also raises serious ethical and legal concerns about the promotion of medications without regard for patient health. This is not a matter to be ignored. Those who place profit, influence, or agendas above the health of the public should face scrutiny and consequences. The Board has a responsibility to act decisively. It is infuriating to witness the ongoing attempts to force people off kratom and onto pharmaceutical drugs. Kratom exists as a legitimate, effective alternative for many who cannotor do not want to—l depend on Big Pharma's solutions. People choose kratom for a reason: it works for them, it's affordable, and it allows them autonomy over their own health. Trying to push individuals toward expensive prescription medications under the guise of "good faith debate" is not debate at all—it is coercion. The public is not blind. Everyone sees the corruption, the profit-driven motives, and the manipulation behind these actions. Attempts to vilify kratom are transparent, and the people affected are not fools. They understand that the pharmaceutical system is designed to extract money, not prioritize real health. Any policy or rhetoric that pressures people off kratom is disingenuous, harmful, and deeply unethical. It disregards the lived experiences of thousands of Americans who have found relief, stability, and freedom in kratom. Instead of forcing people into a system that often leaves them sick, in debt, or addicted to other substances, decision-makers should respect individual choice and evidence-based alternatives. The public is watching, and the corruption is obvious. Stop pretending this is about safety, debate, or concern for health—it's about control and profit, and it will not go unnoticed. Enough is enough. I think it's stupid. We need to regulate a unelected board trying to shut down the only thing that helped me stay off hard drugs. Do you ever listen to your people. This about accuse to safe alternatives. This about right to treat pain. Only hurting Ohioans by criminalizing
Columbus	Ohio	4 - Other	Why should we comment when the dictatorship of Ohio is just going to do what it wants anyway? You want us to comment, to give off the " illusion " that we had a say.....we don't. Nice try, though

Mitragynine - Individual Comments – Non-Local (Excludes all Ohio -based IP addresses as well as those in IN, MI, WV, KY, and PA.)

City	State	Comment Code:	Please submit your comments on the proposed rule. (NOTE: Rule comments are public record and respondents who wish to remain anonymous should avoid providing any identifying information).	Attachment Included?
Baltimore	Maryland	0 - Blank / Sentiment Unclear		
Nashville	Tennessee	0 - Blank / Sentiment Unclear		
Washington	District of Columbia	0 - Blank / Sentiment Unclear		
Puyallup	Washington	1 - Support	Hello, For the past several years I have been advocating on behalf of families whose loved ones died because of kratom. Not 7-OH. Kratom. Published literature shows that kratom is 63 times more deadly than other natural products on the market. As a new dietary ingredient, Kratom is deemed "adulterated" when imported or sold for human consumption. This is because a kratom product seller must establish premarket safety with the FDA at least 75 days before putting it on the shelf. They cannot prove kratom is safe. It is not. The attached documents provide important evidence about the industry you are dealing with here. Wolves in sheep's clothing, harming consumers with addiction and death. Thank you..	NL-001
Midlothian	Virginia	1 - Support	Our son as a college student-athlete became severely addicted to the kratom POWDER or “leaf”, not the extracts. He had no substance history. He used it for focus and energy, and believed it was healthy. The years of pain and suffering is beyond anything we could ever imagine. He is one of thousands who have this story of addiction to the powder, but the AKA will tell you it’s not true. One of our local addiction clinics estimates 80% of their calls are for kratom. This industry is led by people who cannot be trusted, starting with the AKA, who made this path of destruction possible. Our family created a website featuring stories, data, and statements from addiction experts. https://www.endkratomaddiction.org/ The Navy, Marine Corps, and California have all recently banned it. Until there is more safety testing and safety measures put in place, this is very understandable.	NL-003
Providence	Rhode Island	1 - Support	It needs to be scheduled. Haddow has a history of lying and the idea that a product that kills occasionally but frequently causes dependence and withdrawal as “dietary supplement” is insane	

Miles City	Montana	1 - Support	Ban it everywhere. Not just Ohio. Everywhere.	
Nashville	Tennessee	1 - Support	As a registered pharmacist in Ohio, I support passing this proposed rule because Kratom is a harmful substance that should not be available to the public. Misinformation is being spread around the community by supporters of its use, who tend to leave out the risks when they speak about this substance and its alleged benefits. Many users say that it helped them "get off" opioids, but mitragynine is a weak opioid itself and users become addicted to it. Unlike proven addiction treatment like buprenorphine, there is little to no regulation of dose/concentration and potential adulterants in kratom products. Additionally, the way these products are packaged and marketed is deceptive. Most products only state that it is an herbal supplement on the front, with warnings buried on the back in small text underneath the supplement facts. Many of these products are also marketed on social media as "natural" and "non addictive," which is misleading and creates a false sense of security. Since there is little to no regulation of these products by the FDA, we need to ban these harmful supplements to keep the citizens of Ohio safe. - Alyssa Mattson, PharmD, RPh	
Ashburn	Virginia	1 - Support	Agree with the banning of Kratom in the state of Ohio.	

Ashburn	Virginia	1 - Support	I urge approval of the proposed scheduling of mitragynine. Classifying kratom as Schedule I aligns Ohio law with scientific evidence and protects vulnerable populations, including young adults and people in recovery. Pharmacological studies show that the active compounds contained in Kratom, mitragynine and 7-hydroxymytragynine, are opioid agonists producing analgesic, sedative and stimulant effects. The potential for abuse of the alkaloids mitragynine and 7-hydroxymytragynine, is well documented due to the opioid and stimulant effects when ingested orally or smoked. Hallucinogenic and sedative effects are also documented at an increased dose. The National Institute for Drug Abuse reports mitragynine and 7-hydroxymytragynine are increasingly being used by the public to self-treat drug withdrawal symptoms and cravings and to manage mental health problems, despite the FDA continuously ruling that these compounds have no therapeutic use. The potential for misuse and harm to the public has been so alarming, several states have banned the sale and distribution of Kratom. The FDA recently studied Kratom using Public Health Assessment via Structural Evaluation (PHASE) methodology, a tool designed to evaluate pharmacologic data via a 3D computer model using chemical structure. Results confirmed that mitragynine and 7-hydroxymytragynine bind strongly and activate the mu-opioid receptors. In a statement released by the FDA February 6, 2018, FDA Commissioner Dr Scott Gottlieb, MD reported “Based on the scientific information in the literature and further supported by our computational modeling and the reports of its adverse effects in humans, we feel confident in calling compounds found in Kratom, opioids.” There is plenty of scientific evidence of kratom essentially being an opioid. If you want to hear from users who have experienced terrible effects from this drug, go to Reddit r/KratomWithdrawal. Read the anonymous comments from real users to help formulate your opinion about this.	
Robinson	Illinois	1 - Support	So many people have died from kratom. My cousin died a few years back from it and my husband almost died from it last year. People don't realize how bad it really is.	

Havana	Florida	1 - Support	My name is Hugh Gardner and I live in Florida. I am writing to urge you to support scheduling kratom as a class I or 2 drug in Ohio, rather than pursuing regulation. States that chose regulation over scheduling and prohibition are now seeing the consequences---continued deaths, escalating product potency and a false sense of safety created by so-called “consumer protection” laws. Rather than continuing down a failed regulatory path, Ohio has chosen to schedule kratom as a controlled substance, acknowledging that labeling and age restrictions do not stop addiction, toxicity or overdose----particularly with modern kratom products that bear little resemblance to traditional plant material. I lost my son in April 2024 and have since become an advocate to help protect others from harm and to prevent others from suffering like I am. It is truly tragic to know that something so readily available can cause so much misery and heartbreak. Thank you for listening, Hugh Gardner ***William-forever 32	

Havana	Florida	1 - Support	My name is Susan Cave and I want to thank you for your efforts in getting kratom/mitragynine scheduled and classified as a drug… is the only effective way to prevent these products from reaching the public. Please let me explain. I never would have imagined that I would lose my 32-year-old son from raw leaf kratom, a substance sold in gas stations and smoke shops. The loss of my son has shaped the remainder of my days… But less face it, millions of Americans take kratom and the kratom industry is estimated to be worth roughly 1.5 billion dollars. Many kratom consumers say kratom is an effective way to treat depression, pain and addiction. My son took kratom to self-treat his depression, reading that it was safe and "all natural." I thought it was safe too..at first! After William discovered kratom, he became a chronic user and became dependent on it…. He kept having to up his dose to get the same desired effect. As time went on, he started feeling worse with his anxiety & depression. He tried many times to stop taking kratom after he realized he had become dependent and felt even worse than before. He tried to taper; He tried to stop cold turkey….MANYMANYTIMES he tried to stop and each time he failed. It was a vicious cycle. One time he experienced sever withdrawal symptoms …that I witnessed. On April 20 2024, my son did not come home. Witnesses say he simply fell forward and did not get up. By the time they got to him, he was gone. Toxicology results showed my son died from a toxic mixture of kratom and his prescribed antidepressants. During his struggle, William fought hard to stay active, to work, to raise his daughter and be a good husband. In spite of his struggles with kratom William was never a non-productive non-functioning member of society. Bad actors will always look to enter a market, find a product they can exploit, re-create it and synthesize it to become a product more addictive and deadly than ever before. This will happen if kratom is regulated and left on the shelves. Right now, on social media you can easily find links and websites with people giving step-by-step instructions on how to make 7-OH from raw kratom. Any regulation, no matter how strongly written, cannot stop the industry's manipulation of alkaloids, cannot stop overdoses, and cannot prevent more families from suffering the loss mine has endured.. In reality, Kratom is a drug and a very deadly one at that. It is an addictive opioid-like drug and many thousands of families have experienced tremendous loss and heartbreak because of it. It is truly tragic to know something so readily available can create so much misery and heartbreak. KCPA regulations that require testing, labeling, age limits, restrictions on mixing products and packaging	

			standards are all unrealistic safeguards. And I would like to ask: How can a person be a responsible kratom consumer when so much remains unknown about how to safely consume kratom and whether taking it could lead to long-term effects. Scientists haven't yet agreed on a fatal dosage for kratom or understands how kratom interacts with other drugs or how kratom may affect a person with a preexisting health condition. How long-term chronic kratom use affects people also remains unclear. There is no widely recognized diagnosis or treatment plan for "kratom use disorder." Allowing the availability of kratom keeps the market-place door open for consumers to purchase future & novel synthetic derivatives like MIT 15 and MIT 16. Kratom companies and lobbyists sell the plant as a safe way to escape opioid addiction, but people with a documented history of drug use accounted for the majority of kratom-only overdoses. The American Kratom Association has maintained that banning kratom would worsen the opioid epidemic, driving people to use dangerous drugs. But more times than not, escaping one addiction only means falling onto another. Thank you for accepting my comment, Susan Cave (mom of William Cave-forever 32)	

Meridian	Idaho	1 - Support	Im asking you to put a full ban on kratom. My perspective comes from a loss no parent should ever experience. My daughter died in March of this year from a mitragynine overdose. She was only 23. Kratom took my daughter's life and robbed the world of the light she brought into it. She trusted the word natural. Kielee used the natural kratom powder. She believed it was safe to use for pain because that is how the industry markets it. She was not using extracts or 7OH products. The leaf itself killed her. Mitragynine and 7OH both bind to the same opioid receptors as morphine. The idea that the natural powder is harmless while only certain extracts are dangerous is not supported by what is happening in real families. Both forms take lives. My state of Idaho reported 83 kratom involved deaths between 2020 and 2024. Bonneville County recorded six deaths in the last eighteen months. Four were from mitragynine alone one of was my daughter. There might be many more as most coroners dont test for mitragynine. These deaths mirror what other states are seeing, especially as kratom becomes more available in small shops and gas stations. I want you to understand this because your decision will shape what families in your community face. Parents don't know what it is. Young people assume it's safe. The reality does not match the marketing. You may hear the argument that the Kratom Consumer Protection Act is the safer middle ground. It is important to understand what the KCPA actually is. It was written and promoted by the kratom industry, not by medical or toxicology experts. Its purpose is to protect sales, States that passed the KCPA continue to see addiction, poison center calls, emergency room visits, and kratom related deaths. The KCPA does not place real caps on potency. It does not control online sales. Local agencies have no practical way to enforce it. And banning 7OH alone is pointless because mitragynine naturally converts to 7OH once it is inside the body. The industry is already developing new derivatives that fit around KCPA language. Partial rules will always stay a step behind. A full ban is the only approach that closes the loopholes and keeps this opioid acting substance out of your community. I know bans are not easy decisions. But I also know what it feels like to stand in my daughter's empty bedroom and wonder how something sold as a "natural herb" destroyed her life. I would give anything to go back and warn her. I can't. But I can warn you. I am asking you to put a ban on kratom so no family in Ohio has to learn the same lesson through the loss of a child parent spouse or friend. Thank you for taking the time to listen and for putting the safety of your residents first.	
Spokane	Washington	1 - Support	I had an extreme addiction to kratom and almost died.	

Palm Beach Gardens	Florida	1 - Support	Kratom - synthetics, whole leaf - all need banned. My healthy 30 year old son died Dec 11, 2021 from kratom. Only Kratom. It's addictive, dangerous and deadly. You don't need this trouble in your community. No good can come from it.	
San Pedro Sula	Cortes Department	1 - Support	Ohio made the right call. Unregulated substances like kratom pose real risks. My cousin lost his life to a kratom overdose—public health must come first.	
Pocatello	Idaho	1 - Support	I strongly support the permanent scheduling of mitragynine under Ohio Administrative Code 4729:9-1.01.2. My niece, Kielee Rustici, died on March 1, 2025, from acute mitragynine toxicity. She was using kratom powder to manage pain and other symptoms caused by Ehlers-Danlos syndrome and POTS. Kielee believed what she saw online, like many others who trust pro-kratom information and advocates, that it was safe and helping her. In reality, the kratom powder she trusted as safe was feeding an addiction that worsened her condition and ultimately took her life. The kratom industry profits from people like Kielee and does not care about addiction, side effects, or deaths. Her death shows why mitragynine must be banned. Legal access puts vulnerable people at serious risk. Ohio cannot rely on claims that kratom is safe or self-regulated. Permanent scheduling will protect Ohioans and prevent other families from suffering the same loss. I urge the Board to act now. Respectfully, DeNae Jones	
Bluffton	South Carolina	1 - Support	I am a retired pharmacist currently living in SC. My nephew died from an accidental overdose of kratom. These products need to be in schedule 1. Natural and synthetic. Thank you.	
Hilton Head Island	South Carolina	1 - Support	Kratom is dangerously addictive and is a health threat. It should not be consumed by anyone of any age. People using it are dying at an alarming rate.	
Ocala	Florida	1 - Support	This stuff needs to be completely stopped! People selling this poison need to be arrested, jailed and removed from Society!	

Tallahassee	Florida	1 - Support	My name is Erica Broome and I appreciate you accepting this message. My husband died from a toxic mixture of raw kratom (OPMS brand) and his antidepressants.. My husband was healthy and did not use elicit drugs. He left me behind and a 10 year old daughter behind. Our daughter is 12 yrs old now and struggles with depression...I am doing my best to raise our daughter alone...it is hard. It is truly heartbreaking to know that something so readily availabe killed my husband. He thought kratom was safe because he read it was safe. It gives me much hope to see Ohio in the process of scheduling kratom as a drug, as it should be. I have much hope that your state will lead the way for other states like Florida and Georgia…that your actions to protect the people of Ohio will influence other states to follow. Many thank yous and with much appreciation to the great state of OHIO! Sincerely, Erica Broome, (widow of William Cave)	
Port Jervis	New York	1 - Support	As a Grieving parent of a 31 year-old son that died from Kratom in July 2025. I'm asking to please ban kratom, so other families don't have to experience this.	
Colchester	Connecticut	1 - Support	My 21 year-old son died from leaf kratom. He began taking it to help stop drinking alcohol because he thought it was safe and would work. It did work; however, it killed him on February 5, 2021. Kratom is pure poison.	

Matthews	North Carolina	1 - Support	To the Members of the Board, I am writing today to formally support the Ohio Board of Pharmacy's proposal to classify mitragynine as a controlled substance. As a professional in the field of social work and the co-founder of a nonprofit dedicated specifically to kratom recovery, I have a front-row seat to the public health crisis that unregulated kratom access has created. 1. The Reality of Dependency and Withdrawal Through my work, I daily encounter individuals whose lives have been upended by mitragynine. The narrative that this is a "harmless herb" is dangerously inaccurate. We see clinical presentations of severe physical dependency and a withdrawal syndrome that, in many cases, rivals that of traditional opioids. Without scheduling, the public remains under-informed about the true habit-forming potential of this substance. 2. Lack of Consumer Protection in an Unregulated Market The current "wild west" landscape of the kratom industry allows for products with dangerously high concentrations of alkaloids and frequent adulteration. As someone who advocates for those in recovery, I believe that the only way to ensure public safety is through the strict oversight and "gatekeeping" that scheduling provides. Self-regulation within the industry has proven insufficient to protect vulnerable populations, including those already struggling with substance use disorders. 3. Alignment with Clinical and Recovery Standards My advocacy is rooted in the belief that recovery requires a safe environment. The ubiquity of kratom in gas stations and smoke shops creates a constant trigger and easy access point for those attempting to maintain sobriety. Classifying mitragynine as a controlled substance recognizes its pharmacological impact and prioritizes the health of Ohio's citizens over the commercial interests of distributors. Conclusion The Board has a responsibility to act when a substance poses a clear threat to public stability and individual health. Based on my professional experience in recovery and social work, I strongly urge the Board to move forward with the proposed scheduling to provide the necessary framework for safety and accountability. Sincerely, Hilary Tesluck Co-founder of Quitting Kratom Support - There Is a Way Out	
North Charleston	South Carolina	1 - Support	My son died from mitragynine poisoning. Not enough information is available how addictive and deadly this substance is. He thought it was a safe alternative for his anxiety. It wasn't!	
Chicago	Illinois	1 - Support	Supporting Ohio's Kratos ban.	
Winston-Salem	North Carolina	1 - Support	Our friend's son died with this in his system. This is highly dangerous	

Nashville	Tennessee	1 - Support	Please remove this product from all shelves and do not allow it to be sold. There is nothing good about it and it is very harmful and even deadly. Please do the right thing!!	
Miami	Florida	2 - Oppose - Corruption/Bigger Interests at Play	Why not criminalize alcohol or marijuana. How about the corrupt FDA approving drugs that can cause serious bodily injuries. These people are not too smart.	
Vancouver	British Columbia	2 - Oppose - Corruption/Bigger Interests at Play	Absolutely ridiculous to make an unadulterated natural plant criminal. Absolutely despicable. How much are big alcohol and big pharma paying our "representatives"? My government makes me sick.	
Branson	Missouri	2 - Oppose - Corruption/Bigger Interests at Play	I have family in OH and have spent a lot of time in Cincinnati and Fairfield. This is important to me. If you wanna ban something, BAN THE SYNTHETICS. Do NOT ban whole leaf Kratom! So many have been helped by this PLANT! It helps me tremendously! So many have come out of addiction to addictive pharmaceuticals and other illegal drugs thru using Kratom! It is medicine, and a PLANT! It should not be made illegal. If it is it is going to hurt so many people! The only people who will win if you ban it are big alcohol and big pharma! Enough is enough on the attempts to ban whole leaf Kratom! Ban the synthetics not the whole leaf! STOP GIVING IN TO BIG PHARMA because if you do it tells me you all are corrupt and simply doing this because you have a financial interest in big pharma or big alcohol!	
Atlanta	Georgia	2 - Oppose - Corruption/Bigger Interests at Play	All 50 states of America belong to the " LAND OF THE FREE". We can't claim to be a free country if plants and substances are " CONTROLLED". GOD, the ONE who is over this country made those plants and substances for ALL not so a few can profit. Many people have had health benefits. The CSA is only a tool to feed the for-profit prison system. We ALL know this. IF any CSA was really about saving lives, alcohol would be the first on the list. So don't tread if freedom. It belongs to us ALL.	
Seattle	Washington	2 - Oppose - Criminalizing Non-Violent Offenders is Not a Good Use of Resources	Banning natural leaf kratom will hurt people. Direct of NIDA Nora Volkow has written extensively citing scientific literature about how arresting people for drug possession hurts people. You're going to hurt people, not protect them, by banning kratom. You know this.	
Chicago	Illinois	2 - Oppose - For Calm/Focus/Energy	Kratom is a harmless plant thats needed for energy, focus and to unwind after a hard day's work of keeping this country running. You law makers make living very hard when times are hard like these present days. We're never giving a break, and you cripple our kratom uses because you don't understand or your putting more money in your pockets by the FDA.. Leave kratom alone! I've been taking kratom over a decade and it work wonders for me as well as anyone else to takes it!	

San Antonio	Texas	2 - Oppose - For Calm/Focus/Energy	I have been using pure Kratom for pre workout for the last 2 years. The caffinated pre-workouts are so overly strong that I will wake up the next day with a headache. A dose of kratom gives me a slight feeling of energy and makes me feel completely normal after. Banning Kratom is ridiculous and it is far safer than alcohol or cigarettes. Banning the synthetic derivatives is one thing but attacking the pure leaf doesn't make sense. It's like Banning coffee to fight against meth abuse. Many addicts take Kratom to help get off hard drugs and I think that is also important. I hope you reconsider this attack on Kratom and allow adults to think for themselves and make their own decisions.	
Chester	Virginia	2 - Oppose - General Opposition, No Reasons Given	I Oppose Schedule I placement . I Request a hearing that relies on real-world testimony and evidence and evaluates denying or withdrawing the rule • State the real-world harm caused by eliminating lawful access <#1462467634909024461>	
Chattanooga	Tennessee	2 - Oppose - General Opposition, No Reasons Given	Please respect the will of the people and do not criminalize this natural plant. Kratom leaf has been the only thing that works for me and so many others to live a functional life on the straight and narrow path. I guarantee you that you will gain the gratitude of many for taking a stand to keep this plant available.	
Reston	Virginia	2 - Oppose - General Opposition, No Reasons Given	Time is valuable and I will keep this short. I ask that you do NOT ban natural kratom. I am middle aged American who has been using kratom as a supplement for many years. So I simply ask you to NOT ban natural kratom.	
Quincy	Massachusetts	2 - Oppose - General Opposition, No Reasons Given	I oppose the bill. Natural kratom saves lives.	
New York City	New York	2 - Oppose - General Opposition, No Reasons Given	Mitragynine enhances my quality of life and has enabled me to be a productive member of society. Please follow the science on natural kratom. Access to natural kratom needs protected, not banned.	
Houston	Texas	2 - Oppose - General Opposition, No Reasons Given	I oppose the proposed rule. It will only do more harm than the good it has done.	
San Antonio	Texas	2 - Oppose - General Opposition, No Reasons Given	I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule I. Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be	

			demonstrated, this proposal should be withdrawn Thank you for considering this comment.	
Elk Grove	California	2 - Oppose - General Opposition, No Reasons Given	Please keep pure leaf kratom legal. It has helped me and many others.	
Jacksonville	Florida	2 - Oppose - General Opposition, No Reasons Given	I've been taking kratom powder for 8 years it's helped my life tremendously thanks to it I'm still here alive being able to provide for my family more then double my income bought a house multiple vehicles a boat and I'm the best shape of my life and I'm a everyday user of powdered kratom for the past 8 years	
Austin	Texas	2 - Oppose - General Opposition, No Reasons Given	Keep it legal	
Vancouver	Washington	2 - Oppose - General Opposition, No Reasons Given	i support natural kratom	
Eugene	Oregon	2 - Oppose - General Opposition, No Reasons Given	Natural kratom is a miracle plant that has helped myself and many others I know. Please do not take this miracle plant away from so many people that are using a plant to better their lives. Thank you	
Jackson	Mississippi	2 - Oppose - General Opposition, No Reasons Given	Keep Kratom legal	
Jacksonville	Florida	2 - Oppose - General Opposition, No Reasons Given	I am a US Army disabled combat veteran who served in Afghanistan and Kratom/Mitragynine has saved my life. I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule I. Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment.	

Murfreesboro	Tennessee	2 - Oppose - General Opposition, No Reasons Given	I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule I. Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment.	
Wichita	Kansas	2 - Oppose - General Opposition, No Reasons Given	Please do not band natural kratom. It helps a ton of people across the nation. It's a slippery slope once states start banning the natural leaf. The extracts I could see but not the natural plant that helps so many in many different ways.	
Oxford	Mississippi	2 - Oppose - General Opposition, No Reasons Given	Kratom has helped me tremendously and I'm living a productive life because of it. Please don't ban.	
Hollywood	Florida	2 - Oppose - General Opposition, No Reasons Given	Natural kratom is safe	
Dallas	Texas	2 - Oppose - General Opposition, No Reasons Given	Please dont ban natural kratom.	
Dallas	Texas	2 - Oppose - Losing Business	I think the original legislation to ban the synthetics and the extracts was right on the money. Those products are NOT kratom. However, I think the most recent ruling is going too far. Kratom as leaf and powder is an amazing tool as an alternative to alcohol. Places that serve products brewed from powder and leaf are an amazing addition to society and the general health of people. Non-alcoholic bars are popping up all over serving kratom tea based drinks is promoting a healthier lifestyle for people. It's also providing a social place for people to gather without the pressures of consuming alcohol. Please reconsider the full ban on true kratom based beverages. They are having a positive effect on society.	
Denver	Colorado	2 - Oppose - Losing Business	As an individual who works in a Houston business, if the ruling affected Ohio, it would affect me personally. My job relies on me selling to several high profile Ohio customers. If the ruling affected Ohio, it would affect me as a young man struggling to work his job all the way in Houston, Texas. Please consider the ramifications of this kind of decision.	

Jacksonville	Florida	2 - Oppose - Losing Business	Kratom has been apart of my life for well over a decade now. The natural kratom leaf itself has so many properties that have benefited not only myself but friends and family members as well as strangers I have met. I do firmly agree and stand behind the banning of any kind of synthetic kratom product but the banning of the natural leaf as a whole itself is absolutely ridiculous. It has helped me with minor pain, my endometriosis pain, it was monumental in helping my little brother get clean who is now celebrating his 8th year of sobriety.. he doesn't even drink alcohol anymore. It has helped people around me in so many ways who are not addicts who just enjoy a little pick me up here and there or who need help falling asleep from night terrors, etc. Kratom is a cousin of the coffee family. It can be used as an everyday pick me up just like a cup of coffee or every just once in while. Synthetics are giving kratom a bad name but synthetics are designed by chemists or whomever who are making 7OH for example are trying to make an extra buck but are not popular in actual kratom lovers worlds. So yes, please ban synthetic kratom but please allow us to continue to have a natural plant in our lives. Alcohol, if anything, is worse than kratom. There are people with alcohol addiction, whose minds get altered and make poor decisions while intoxicated, where if they abruptly stop drinking alcohol their withdraws can be extremely harmful.. but alcohol is 100% legal and normalized? I have lost a best friend to suicide because of how intoxicated he was from alcohol.. nothing else in his system.. Kratom as a whole is no where near as dangerous as alcohol and I just feel like completely banning this plant is so far stretched when there are so many other substances that should be focused on. #1 - 7-OH.. I have been against since the first time I ever heard of it.. but again, it is lab altered.. it is a SYNTHETIC.. not natural. Mitragynine is not the issue here.. 7-OH is, among any other non natural alkaloid. So please, I beg you.. rethink this ban.. do more research.. maybe have companies who are specifically licensed, trusted, and tested if you wish, and understand that banning a natural plant due to lab altered synthetics is just so unfortunate and could steer people down a black market if a natural leaf is no longer accessible. Thank you for your time. Smoke Shops, Head Shops, Vape Shops, whatever you want to call them. This industry contributes over $50 Billion annually to the United States GDP. Kratom or Mitragynine products usually account for anywhere from 10%-50% of a stores revenue. Kratom Bans are a slippery slope, your decision to ban it in your state could lead to others following	

			your example. Hypothetically, if every state decided to ban kratom we would take away at least $500 million (10%) away from our GDP in the smoke shop industry, and for what? I could go on and on about the benefits of kratom, but I am sure that you have heard enough of that already. I wanted to show a different side of things.	
San Juan	PR	2 - Oppose - Losing Business	Thank you for reading this. I do not believe natural Kratom is harmful. The science in fda dose studies also suggests this. 7oh must be banned along with any other semi synthetic or synthetic alkaloids of Kratom. Natural Kratom is a miracle plant. Many businesses will close, jobs lost, tax revenue lost, and illicit trade increased. Please keep natural Kratom legal	

Wheaton	Illinois	2 - Oppose - No Side Effects/Positive Health Benefits	There is no reason to ban plain leave Kratom. Medically speaking It is impossible to overdose on Kratom alone. It is much less addictive than alcohol or Nicotine. It does not present a “high” like other items. It is calming (helps me sleep), works better than Tylenol for chest and pains, and is a good source of fiber. It is NATURAL! I have been using it on and off for 10 years and my last blood work came back perfect… Please, follow the science! Nicotine is by far much worse..	
Bedford	Texas	2 - Oppose - No Side Effects/Positive Health Benefits	This rule would be a complete encroachment on our rights and freedoms to consume healthily what grows from the literal ground. Kratom has been used traditionally, medicinally, and ceremonially for thousands of years and banning it is a silly thing to focus on considering the wide expanse of issues impacting our immediate society.	
Los Angeles	California	2 - Oppose - No Side Effects/Positive Health Benefits	Pure kratom leave has helped me and many others iv personally have have used this for over 7 years with 0 problems, its helped so much. 7-oh is not kratom and agree should not be sold but please dont take away something that does good. I stand for pure leave kratom	
Las Vegas	Nevada	2 - Oppose - No Side Effects/Positive Health Benefits	I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule I. Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment.	
St Louis	Missouri	2 - Oppose - No Side Effects/Positive Health Benefits	Please do not make the natural kratom illegal. It is safe, been used for centuries, and is not dangerous. I have used it for almost 20 years and im extremely healthy I have the lab results to prove it. Making this illegal is going to cause so much unnecessary suffering to the citizens. Please hear the people out they do not want this. This is a bad uneducated move. Just follow the science and listen to the citizens.	
Lutz	Florida	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom is extremely beneficial when used correctly and responsibly. Kava bars are very equipped to safely distribute this plant in a good environment. Please do not pass these proposed rules.	

Marinette	Wisconsin	2 - Oppose - No Side Effects/Positive Health Benefits	I have used Kratom responsibly for years and the benefits have far exceeded any negative comments about it. Although I am not from your state please judge this product by the science.	
Chicago	Illinois	2 - Oppose - No Side Effects/Positive Health Benefits	Unadulterated kratom leaf or powder is harmless, but should only be available to 21 and older. Making it illegal will only drive people to unregulated markets.	
Woodburn	Oregon	2 - Oppose - No Side Effects/Positive Health Benefits	I function very well daily, because of Kratom. Taking the right to easy access is a hindrance on peoples health. The government should not be involved in peoples well-being. Not everybody has medical four prescriptions and pharmacies. Not needing a doctor for access in Kratom is a plus	
Robinwood	Maryland	2 - Oppose - No Side Effects/Positive Health Benefits	This plant has helped me out in so many ways.. I understand banning the extracts and concentrates as those can become extremely addicting, but just the plant itself in natural form or ground up , is no more addicting than coffee.. This plant has saved my life and I've never had any issues when I stopped taking it for a few days .. please don't take this miracle plant away from the people..	
Fort Worth	Texas	2 - Oppose - No Side Effects/Positive Health Benefits	Natural kratom leaf should not be banned! Natural kratom isn't harmful, it's beneficial! If you're that determined to ban something, then specifically ban the harmful extracts/chemicals such as 7OH3.	
Deltona	Florida	2 - Oppose - No Side Effects/Positive Health Benefits	Please follow the science on Kratom. This tree leaf should not be banned to sell or consume. It is part of the coffee family and should not be classified as an illegal substance. It helps many people daily as is a natural medicine.	
Mustang	Oklahoma	2 - Oppose - No Side Effects/Positive Health Benefits	Please reconsider your stance on kratom. As long as it is lab tested and pure leaf it helps folks with many issues. American Kratom Association is working for us. Please work for us, too. Keep kratom legal. Thanks	
Charlotte	North Carolina	2 - Oppose - No Side Effects/Positive Health Benefits	There is zero science that supports a ban or any claims that Kratom in its natural leaf form is dangerous (refer to the WHO findings and peer reviewed studies). It helps millions and millions of Americans live productive lives. Please do not do this.	
Westminster	Colorado	2 - Oppose - No Side Effects/Positive Health Benefits	Please keep the freedom to choose kratom available to your citizens. I've been enjoying the benefits of kratom for over 10 years. It has many benefits and the side effects are less severe than caffeine or ibuprofen.	

Houston	Texas	2 - Oppose - No Side Effects/Positive Health Benefits	As a physician, I've seen patients get relief from symptoms through kratom that other modalities have failed. Current medicine is not a perfect science and often we can't help with what we have in our current choices of medications. Given the low risks and high potential for benefit to these patients, it would be humane to let them continue to use kratom to get the relief they need.	
Fort Myers	Florida	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom is so helpful for so many people and Ohio citizens deserve to have access to this plant. When taken properly, kratom has so many health benefits. Please listen to your residents and continue to allow us to have access to this plant.	
American Fork	Utah	2 - Oppose - No Side Effects/Positive Health Benefits	Kratom has provided great benefits! I've never used 7-OH and never will. Don't schedule Kratom, it's the 7-OH that should be	
Missouri City	Texas	2 - Oppose - No Side Effects/Positive Health Benefits	This beautiful plant has help so many! Kratom users are not criminals. We are productive members of our communities. We are parents, wife's and husbands, we are veterans. We are Americans with the freedom to choose our own paths. Follow the science. Plain leaf Kratom has helped so many of us.	
Jakarta	Jakarta	2 - Oppose - Pushes People to Unregulated Alternatives	I submit this comment as an individual and firmly REJECT any proposed regulation that restricts or over-regulates mitragynine/kratom. In my opinion, this regulation disregards the benefits experienced by many people. Kratom has been used traditionally and has helped many people as a natural alternative for various health needs. I am concerned that overly strict regulation will actually harm the public, restrict personal freedom, and encourage the emergence of an illegal market. I urge the government to reconsider this proposed regulation and prioritize education over restrictions. (NOTE: TRANSLATED)	
Los Angeles	California	2 - Oppose - Pushes People to Unregulated Alternatives	I oppose scheduling kratom as Schedule I. I request a hearing reliant on real-world testimony and evidence to evaluate whether a denial or withdrawal of the ruling is appropriate. By eliminating lawful access, law-abiding citizens and veterans who use kratom would be forced towards unregulated markets and harmed through ingesting contaminated product by criminals. For the lives at stake, please set a hearing.	
Los Angeles	California	2 - Oppose - Pushes People to Unregulated Alternatives	I've observed Kratom's positive impact on many individuals within my community, and believe that a complete ban would be counterproductive to the goal of the Ohio Board of Pharmacy. A total ban could force those seeking Kratom to resort to illegal sources, which are likely to contain significantly more harmful substances, or lead them to dangerous opiates such as fentanyl.	

Las Vegas	Nevada	2 - Oppose - Pushes People to Unregulated Alternatives	This is a DANGEROUS ban and an example of misinformation and gross exaggerations hurting others life. Those blaming kratom are not taking accountability for the fact they just abused it. Kratom is almost impossible to OD on , safer then Tylenol and less addictive then sugar. So why are we here? People getting addicted blaming it and people who have never experienced addiction falling for it and getting hysterical, tale as old as time same as marijuana except kratom is even less then marijuana. Kratom SAVES lives, it gets people off alcohol, opiates and other pharmaceuticals SAFELY they're far better off taking a gram of the plant kratom then a pill, ESPECIALLY with the health care crisis why would you take that away from people over a few idiots , there's ALWAYS going to be people that abuse EVERYTHING kratom has far more benefits then not. SHAME on people who propose these laws that have zero experience in what is actually happening but think they know it all, they're the most dangerous type of law maker. If it's ban, they're responsible for every fetynal death that occurs after and the percentage will absolutely go up.	
Montrose	Colorado	2 - Oppose - Pushes People to Unregulated Alternatives	If you guys pay attention to the clientele that takes this stuff, It is mainly older people that need so kind of assistance and would rather not resort to pharmaceuticals. There are many more important things to be outlawing, and by outlawing this, people are gonna go to the streets to get even worse supplements. This is not helping people its only hurting them.	
Martinsville	Virginia	2 - Oppose - Pushes People to Unregulated Alternatives	If you make natural kratom illegal it will send thousands to the streets and they will probably die from fentanyl. Kratom cannot kill people like fentanyl. Save lives and regulate it instead!	
San Francisco	California	2 - Oppose - Pushes People to Unregulated Alternatives	Please keep Kratom and products derived from Kratom legal. I can assure you that there are far more responsible users who get great benefits from taking Kratom. To take it away from us would cause significant harm as I fear many would turn to illegal alternatives.	

Everett	Massachusetts	2 - Oppose - Pushes People to Unregulated Alternatives	Hello! My name is Andrew. I'm here to share my thoughts on the proposed legislation. I believe it's critical that kratom, a plant medicine, remain legal as an option for informed adults who understand the risks and benefits. As a working professional scientist, I've observed first hand the benefits kratom can provide when used responsibly. I'm very concerned that prohibition is not an evidence-based path forward, in fact it is destructive. History has clearly shown that prohibition has failed to resolve drug and alcohol use problems in the US, and in almost all cases, has exacerbated the harms. For example, when access to pharmaceutical opioids was harshly restricted in the US, the demand for these substances did not disappear. Instead, the black market pushed towards far more dangerous, risky, and unknown substances, including fentanyl, and more recently, the highly risky nitazenes. Banning kratom will not eliminate opioid use or improve public health/safety. Instead, banning kratom risks driving individuals towards unregulated and significantly more dangerous alternatives. Laws that remove lower-risk options (like kratom), without providing any viable or safer alternatives have consistently produced worse outcomes for the public. I respectfully urge you to reconsider any action to prohibit mitragynine and instead look towards building out a regulatory framework that is evidence-based and grounded in harm reduction principles. Thank you for your time and consideration of my comment.	
Eugene	Oregon	2 - Oppose - Pushes People to Unregulated Alternatives	Kratom has saved my life!! Do not ban it. You will only increase the fentanyl epidemic by banning this natural plant that keeps people away from deadly opioids and fentanyl.	
Houston	Texas	2 - Oppose - Pushes People to Unregulated Alternatives	Banning Kratom will ensure one thing; users will turn to harder drugs, like heroin and fentanyl. When that happens, I promise you that there will be far more deaths than the ones falsely purported to be from kratom alone.	
Fort Myers	Florida	2 - Oppose - Pushes People to Unregulated Alternatives	Kratom saved my life banning is gonna kill people	

New Orleans	Louisiana	2 - Oppose - Pushes People to Unregulated Alternatives	Oppose banning Kratom I support Ohio taking action to ban isolated or artificially concentrated 7-hydroxymitragynine (7-OH) products, while explicitly protecting the continued legality of natural kratom leaf. These are not the same thing. Natural kratom leaf contains very small, trace amounts of 7-OH that occur naturally and are further produced only in minor amounts through normal human metabolism. This is fundamentally different from products that isolate, synthesize, or concentrate 7-OH to unnaturally high levels. Those products do not reflect traditional kratom use and carry a higher risk profile that warrants regulation or prohibition. As an Ohio resident and long-term kratom consumer, I rely on plain kratom leaf as a safer, plant-based alternative that has allowed me to function productively and avoid far more dangerous substances. The natural leaf has a long history of traditional use and a self-limiting effect due to its alkaloid balance. Concentrated 7-OH products remove that balance and create risks that should not be conflated with kratom itself. Banning 7-OH concentrates while preserving access to natural kratom leaf is a reasonable, science-based approach. It protects public health without harming responsible consumers or driving people toward more dangerous alternatives. I respectfully urge Ohio regulators and lawmakers to maintain this clear distinction and ensure that any rules or statutes explicitly protect kratom in its natural vegetation form while prohibiting high-potency 7-OH products. This balanced approach is the right policy for Ohio.	
Lewiston	Maine	2 - Oppose - Questions the Science	I strongly oppose Rule 4729:9-1-01.2. Please accept the attached PDF document as my formal public comment. The proposed rule relies on incomplete mortality data (failing to account for polysubstance involvement), omits critical pharmacokinetic evidence regarding human metabolism (the "Pseudoindoxyl Pathway"), and creates a lethal policy funnel by mandating forced withdrawal without adequate clinical safeguards. My attached comment details these scientific and procedural defects with full citations to the administrative record and peer-reviewed literature. I urge the Board to reject this rule.	NL-007
Rockwall	Texas	2 - Oppose - Questions the Science	Dear lord, please follow the science. Kratom is not 7-OH. There is absolutely no supporting evidence that Kratom, and it’s pure form, causes addiction, overdose, death, or any of the other nonsense that knee-jerk reactionaries are signing to it. It is a kin to outline Cocacola because people mix rum with it and purport to be drunk on it. Purity Kratom laws are what is needed, not ridiculous exclusionary BS	

Davenport	Iowa	2 - Oppose - Questions the Science	I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule I. Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment.	
Pasadena	Texas	2 - Oppose - Questions the Science	Please review all the evidence about Kratom and its alkaloids. There are no actual documented cases of overdose or any of the typical negative side effects associated with other opiates. Kratom alkaloids may cause withdrawals if taken too often, but so does alcohol. Many people's lives have been saved since finding out about Kratom. I am the director of operations for a major laboratory in Houston Texas and I am able to live a perfectly normal life while taking Kratom and specifically 7-hydroxymitraginine. Please don't schedule this inadvertently and cause more problems for the citizens of your state.	

Nashville	Tennessee	2 - Oppose - Questions the Science	I am submitting an additional comment to further express my serious concern about Ohio's decision to classify kratom as a Schedule I substance. This decision will cause real and immediate harm to good, hard working, law abiding citizens. Kratom is a plant in the *coffee* family that is commonly prepared as a tea and used responsibly by many adults, often as an alternative to far more dangerous substances, including prescription opioids… Treating it as equivalent to heroin or other Schedule I drugs is not supported by pharmacology, toxicology, or real public health outcomes. Reports frequently cited to justify this action rely on polysubstance deaths, where kratom is merely present alongside fentanyl, benzodiazepines, alcohol, or other drugs. There is no credible evidence that kratom alone presents a risk comparable to Schedule I substances. Conflating correlation with causation leads to fear and punishment based policy rather than reasonable public health decision making. Scheduling kratom will not eliminate demand. It will instead criminalize responsible adults who pose no threat to public safety (causing strain on courts, jail systems, and law enforcement resources in general), push products into an unregulated black market, remove consumer protections and quality controls, and increase, rather than reduce, public health risks. I also want to emphasize the human impact of this decision. I have family members and close contacts who rely on kratom to function, work, and avoid returning to far more dangerous pain medications. They are intelligent, educated, productive, good members of our society. Policies like this punish ordinary people trying to manage their health responsibly. Ohio has the opportunity to choose a regulatory approach rather than prohibition. Other states have adopted consumer protection frameworks (KCPA) that focus on age limits, testing, labeling, and safety standards. That path protects public health without destroying lives. I urge the Board to reconsider this decision and to base its decision on balanced evidence, proportionality, and real outcomes. Thank you for considering this comment.	

New York City	New York	2 - Oppose - Questions the Science	I realize I'm not from Ohio but I am and have been a kratom consumer since 2018. I'm a 62 year old female who has been dealing with severe chronic fatigue for many years. Nothing before kratom has ever been able to help me remain productive without harmful side effects. There is substantial data proving that natural leaf kratom products are safe, effective and have minimal to no side effects. The American Kratom Association has all of this data available for you to consider. Please don't listen to lies and false information from people looking to profit by making our leaf illegal. I'd be happy to answer any questions at any time if necessary. Natural leaf kratom is non addictive and virtually impossible to overdose on. The issues come from synthetic products that I wholeheartedly do not support. Please reconsider banning our leaf. All that will do is make felons out of people just trying to live productive lives and cripple folk with real medical issues. Thank you for you time.	
Porterville	California	2 - Oppose - Questions the Science	Scheduling mitragynine as a Schedule I substance is scientifically indefensible, contradicts existing regulatory findings, and will predictably increase public health harm. It does not meet statutory Schedule I criteria, improperly conflates natural kratom with concentrated derivatives, and reverses Ohio's own successful regulatory precedent. 1. Mitragynine Does Not Meet Schedule I Criteria Mitragynine is a partial, biased μ-opioid receptor agonist with limited β-arrestin recruitment and ceiling effects on respiratory depression—properties fundamentally inconsistent with Schedule I opioids such as heroin or fentanyl. Decades of widespread human use directly contradict the claim of "no accepted medical use." Lack of FDA approval is not equivalent to lack of medical utility. 2. Ohio Already Implemented a Working Regulatory Model Ohio's prior KCPA-style framework addressed safety through testing, labeling, and age restrictions without criminalizing consumers. There is no evidence that abandoning this model improves safety; prohibition predictably increases illicit market exposure. 3. Leaf Kratom Is Not Concentrated 7-Hydroxymitragynine Natural kratom contains only trace amounts of 7-hydroxymitragynine. The harms driving concern stem from concentrated, extracted, or semi-synthetic 7-OH products that do not reflect the pharmacology of leaf kratom. Conflating these substances is a regulatory error. 4. Schedule I Placement Undermines Research and Public Health Federal agencies have focused enforcement on adulterated or concentrated products, not natural leaf kratom, and have emphasized the need for further research. Schedule I placement would block that research while worsening overdose risk by pushing consumers toward illicit	

			alternatives. Conclusion Schedule I placement of mitragynine represents fear-based policy, not evidence-based regulation. Ohio should reject scheduling and instead preserve and refine targeted regulatory approaches that protect public health without causing foreseeable harm.	

Medford	New Jersey	2 - Oppose - Questions the Science	Hello, I strongly disagree with this new law being passed in Ohio regarding kratom (and its primary alkaloid, mitragynine.) I'm a longtime kratom user. It has helped me to stay stable in my life. There is tons of misinformation circulating, blaming plain leaf kratom for the problems caused by 7-hydroxymitragynine (7-OH.) I do not take 7-OH. I never have. I only consume plain leaf kratom. It is very concerning seeing Ohio ban regular mitragynine (which is what's in plain leaf kratom.) It is not the harmful substance you believe it to be. The data that was cited to justify this is not correct information. I am concerned that I may not be able to travel to Ohio if this law passes. I am also concerned for others that live in Ohio, and need access to kratom for their stability & well-being. I encourage anyone that reads this to educate themselves on the differences between plain leaf kratom, and 7-hydroxymitragynine. 7-OH occurs in trace amounts in plain leaf kratom, to the extent of being near-undetectable. What has been causing issues for the public is synthetically produced 7-OH. By all means, ban 7-OH. I am good with that. It's not a safe substance for people to be using. Yet, leave plain leaf kratom alone. The federal government has already stated, recently, that their concerns are specifically about 7-OH, and that plain leaf kratom is NOT what they're targeting. RFK Jr stated that directly when announcing his & the administration's plans to take action against 7-hydroxymitragynine. I hope that Ohio follows that stance. It does not make any sense to lump plain leaf kratom in with synthetically produced 7-hydroxymitragynine. They are two very different things. I appreciate your understanding about this matter. Thank you.	

Waukegan	Illinois	2 - Oppose - Questions the Science	I am a single father and carpenter living in the state of Wisconsin. Mitragyna Speciosa is a fantastic plant, specifically its effects being mild as they are and still providing some pain releif. The reason I believe its safe for the community, is primarily in the way it acts. Both kratom and its alkaloids operate on something called the bell curve effect. This means that there is a sweet spot where the effects are good, and surpassing that threshold begins to lower the effects. Simply put the more you take the less you feel. This applies to 7oh as well. Its been my experience this substance is extremely difficult to abuse. Its taught me that less is always more, a very hard concept for a recovering addict to understand. Anyways being that its also a partial agonist, the ceiling of 7oh is very low. The risk of oversose isnt there, and the risk of abuse isnt even there. I ask that you read the studies done and not the fear spread about 7oh by the aka. If you take this away the pharmaceutical inustry will Dependency however is a risk of regular kratom and 7oh user but thats the main concern, and people will always find something to be dependent on. I would rather it be a plant thats been used for thousands of years than these hard drugs on the streets like heroin and fentanyl. Just tax it if you must, but let the people have this harmless plant. The people deserve to decide for themselves if the benefits are for them. I beg of you to find it in your heart, to save this plant from being taken from the public. Kratom is for the people. Its really the only safe alternative we have and I think you should let us decide if we choose to take it or not. I only care because it saved my life many years ago, I would not have been able to make the step off drugs without kratom. From there I found that getting off kratom was actually easy once I was ready. Fot reference I used 7oh for 2 weeks when I broke my collar bone this summer, it was the only form of pain releif I would trust myself to take this far into my sobriety. Thanks for taking the time to read this. I really hope you spend some time researching the science in how it works before making a final decision	
Tulsa	Oklahoma	2 - Oppose - Questions the Science	Leave KraTOM alone. It's not dangerous and these lies that lawyers are saying, and a big pharma are saying are not true. Doctor McCurdy is a research scientist in Florida. He has given all the proven facts on this leaf. You are doing nothing but hurting innocent people. By trying to ban this natural leaf, even thailand has legalized it after many years of a ban. They admitted that their information was false, and that this leap is not dangerous like they said in the 1960s	

San Jose	California	2 - Oppose - Questions the Science	I am writing to strongly oppose the proposal to classify mitragynine (kratom) as a Schedule I controlled substance. Kratom helps a large number of people. If it did not, organizations like the American Kratom Association would not exist. They exist because millions of Americans rely on this plant to manage chronic pain, reduce harm, and avoid far more dangerous substances. One of the largest groups helped by kratom is veterans, many of whom live with chronic pain and are trying to avoid opioids. If people were truly dying from kratom itself, we would be seeing thousands of deaths where kratom is listed as the sole cause. That is not happening. Almost every so-called “kratom death” involves multiple other substances. Unless someone can produce proof showing kratom alone as the cause, those claims are meaningless. The science supports kratom. The American Kratom Association (or a scientific paper search of your own), can provide extensive research, including major scientific reviews, showing that kratom has a much lower addiction and overdose risk than opioids, helps many people reduce or quit opioids, and that banning it would almost certainly cause more harm than good. It should be regulated, not prohibited. This is supposed to be the United States, where adults are free to make informed choices for themselves. Please do not take away a tool that helps so many people live functional, productive lives.	
Weymouth	Massachusetts	2 - Oppose - Questions the Science	I want to object to this refer madness attack on a plant that has done nothing but save lives and ease peoples suffering. This would literally be prying the tea out of the arthritic hands of the elderly, Kratom is not what they are saying it is. There is plenty of scientific evidence that it is safe in its natural form. It has a ceiling effect so you can't even abuse it,it doesn't cause breathing depression and has never been proven to cause a single fatality where it was the sole cause. If anything it brings money to your state by making people able to participate in society again. there has been so much misinformation and straight up lies about this plant, attempting to schedule it in this way is dishonest and sneaky, this is not what anyone wants.	

Covina	California	2 - Oppose - Questions the Science	To the Members of the Ohio Board of Pharmacy, My name is Jordan Richard. I am the author of The Truth About Kratom: Life-Saving Plant or Botanical Menace?, and I am writing to formally oppose any effort to ban kratom in the state of Ohio. Kratom is a natural botanical that has been used for centuries in Southeast Asia and is currently used by millions of Americans. For many individuals, it has served as a safer alternative to far more dangerous substances, including prescription opioids. The scientific data does not support an outright ban. Researchers at Johns Hopkins University have published large-scale survey data showing that kratom has a significantly lower risk profile than traditional opioids. Their findings indicate low abuse potential, a much lower rate of dependency compared to opioids, and meaningful self-reported benefits among users. Importantly, Johns Hopkins researchers have stated that kratom appears to be substantially safer than prescription opioids and illicit substances like heroin and fentanyl. It is also critical to note what the U.S. Food and Drug Administration has actually said. While the FDA has expressed concern about highly concentrated and altered products, including synthetic or semi-synthetic derivatives such as 7-hydroxymitragynine (7-OH), it has repeatedly clarified that its focus is not on traditional kratom leaf. In 2024, the FDA released its first human observational study concluding that kratom appears to have a favorable safety profile under typical conditions of use. FDA leadership has also publicly stated that their primary concern lies with dangerous derivatives and adulterated products, not the natural plant itself. Unfortunately, current proposals risk conflating natural kratom leaf with synthetic or chemically altered substances. These are not the same. Natural kratom contains a broad spectrum of alkaloids that act together, whereas 7-OH products are isolated or chemically amplified compounds with a dramatically different and more concerning risk profile. Treating these products as identical is not supported by science and leads to flawed policy outcomes. Banning kratom would have serious and foreseeable consequences. It would drive responsible consumers toward the illicit market or back to far more dangerous substances, while criminalizing ordinary Ohioans who are trying to manage their health responsibly. There is a proven alternative to prohibition. Many states have chosen science-based regulation through Kratom Consumer Protection Act-style frameworks. These policies regulate labeling, testing, age restrictions, and purity of natural kratom while targeting or banning synthetic derivatives like 7-OH. This approach protects consumers, supports public health, and avoids unnecessary harm. I respectfully	

			urge the Ohio Board of Pharmacy to halt any ban efforts and instead pursue evidence-based regulation. Regulate the natural leaf. Remove dangerous synthetics from the market. Do not punish consumers for choosing a demonstrably safer alternative. Thank you for your time and consideration. Jordan Richard	

Camden	North Carolina	2 - Oppose - Questions the Science	I encourage Ohio lawmakers to refrain from criminalizing Kratom. For those who aren't aware, kratome is derived from the leaves of the Mitragyna speciosa tree native to Southeast Asia. It offers several potential benefits supported by user surveys and countless preclinical studies. Many individuals report using it for pain relief, with large-scale surveys indicating that over 90% of respondents find it effective for managing chronic conditions like back pain, fibromyalgia, and arthritis. For instance, in a Johns Hopkins study of over 2,700 users, 91% cited pain alleviation as a primary benefit, often at doses that provide opioid-like analgesia without the same level of negative side effects or abuse. Additionally, kratom has been linked to mood enhancement and anxiety reduction, with about 67% of users in another survey reporting relief from depression or anxiety symptoms. Being rested to the coffee plant, it also has natural stimulating properties that boosts energy and focus. This is what is historically known for and originally the leaves were chewed by Southeast Asian laborers using it to combat fatigue. Emerging research also suggests anti-inflammatory properties, with alkaloids like mitragynine showing potential to inhibit cyclooxygenase-2, similar to some pain relievers. While not FDA-approved, these self-reported and preliminary scientific findings highlight its role as a natural alternative for various ailments. Unlike classical opiates derived from the opium poppy or synthetics like fentanyl, the kratom plant is scientifically not considered or classified to be an "opioid". Its primary alkaloids, mitragynine and 7-hydroxymitragynine, interact with opioid receptors but differ structurally and pharmacologically, leading experts to describe it as an "atypical" or "biased agonist" substance. The National Institute on Drug Abuse notes that while it produces some opioid- and stimulant-like effects, it lacks the full profile of traditional opioids, including their chemical origin and complete receptor activation patterns. This distinction is crucial, as kratom's effects stem from a broader receptor interaction, including adrenergic and serotonergic systems, which contribute to its dual stimulant-sedative nature without fitting the strict opioid definition used by regulatory bodies like the DEA. As a partial agonist at mu-opioid receptors, kratom's mitragynine binds without fully activating the pathways that lead to severe side effects seen in full agonists like morphine or heroin. This partial activation provides pain relief and euphoria but significantly reduces the risk of overdose by eliminating any potential side effect that would cause respiratory depression in users. Respiratory depression is the #1 primary cause of opioid fatalities. Preclinical	

			studies in rodents show that even at high doses, mitragynine produces no respiratory suppression compared to oxycodone, with one major study finding no life-threatening effects at levels far exceeding all typical human use. The biased signaling that favor G-protein pathways over β-arrestin recruitment, further minimizes this risk, making overdose virtually impossible from kratom alone, as supported by low death rates where other substances are often involved. This mechanism offers a safer profile for pain management and withdrawal aid. Kratom's built-in ceiling effect acts as a natural deterrent to abuse, where increasing doses beyond a certain point yield diminishing returns or even adverse effects like nausea and dizziness, discouraging escalation. Surveys of thousands of users reveal low addiction rates, with only about 13% meeting criteria for moderate substance use disorder, often milder than caffeine dependence. Animal studies confirm mitragynine's low abuse potential, showing it blocks self-administration of heroin or morphine without producing strong rewarding effects itself. While dependence can occur with heavy use, withdrawal is typically mild and self-manageable, further reducing misuse incentives compared to full opioids. For recovering addicts, kratom serves as a valuable gateway off potent opioids like prescription pills, heroin, or fentanyl, helping restore productivity and normalcy. User reports and preclinical data indicate it alleviates withdrawal symptoms effectively, with over 90% of those substituting for opioids finding relief from pain, cravings, and dependence. In animal models, kratom tea reduced naloxone-precipitated withdrawal in morphine-dependent subjects, suggesting therapeutic potential for opioid use disorder. Surveys show many transition from illicit opioids to kratom for harm reduction, reporting improved quality of life, reduced relapse risk, and reintegration into society as functional members. This self-management approach has helped thousands avoid overdose, with kratom's lower lethality supporting recovery without full abstinence pressures. Ohio lawmakers should resist scheduling kratom as illegal, recognizing its substantial potential as a harm reduction tool in the recovery community. Banning it could drive users back to dangerous opioids, exacerbating the crisis that has claimed thousands of lives annually in the state. Advocacy groups and experts argue that regulation, like the proposed Kratom Consumer Protection Act, would ensure product safety without criminalizing a substance that aids withdrawal and pain management far more safely than alternatives. With Ohio's emergency rule on synthetics already in place, a full ban on natural kratom ignores	

			evidence of its benefits and low abuse risk, potentially costing lives by removing a lifeline for those battling addiction. Prioritizing education and quality control over prohibition could save lives and support harm reduction efforts. Thank you for your consideration in this matter and I encourage you not to prohibit Kratom in the state of Ohio.	

Epping	New Hampshire	2 - Oppose - Questions the Science	I am a mother, a small business owner, and a holistic mentor to many. My passion is health freedom and I am a proud natural medicine advocate. I, along with several Doctors and agencies are working diligently to put in proper regulations across the United States. The current issue I see with your proposed regulation it would take away whole leaf products rendering law abiding citizens powerless to properly decide how they manage their life. The following is in reference to whole natural leaf kratom products only: My personal journey with kratom began after multiple emergency surgeries left me in debilitating pain; pain I was unwilling to manage with pharmaceuticals alone. Kratom changed the way I was able to navigate day to day life. It truly was life giving. I have a petition to protect whole leaf along with many more heartfelt testimonies. You can read their stories here: https://www.change.org/p/preserve-kratom-legality-for-overall-wellness/feed While stories like these and mine are powerful, I believe the science speaks even louder. Below I share the work of leading medical professionals who have studied kratom extensively: 1. Dr. Marilyn Huestis, AB, MS, PhD (Toxicologist) Dr. Huestis stresses the importance of a balanced, evidence-based approach to kratom regulation. She clarifies that most reported "kratom overdose deaths" involved poly-substance use, adulterated products, or incomplete testing-not kratom alone. Testimony: https://www.youtube.com/watch?v=awdX7ND8Hvo 2. Dr. Christopher McCurdy (Professor of Medicinal Chemistry, Pharmacologist) Dr. McCurdy has demonstrated that kratom's primary alkaloids (mitragynine and 7-hydroxymitragynine) provide pain relief without the high risk of respiratory depression associated with opioids. His testimony also points to kratom's promise as an aid in opioid withdrawal therapy. Video Testimony: https://www.youtube.com/watch?v=9kvXz-wuySM 3. Dr. Kirsten Smith (University of Florida Researcher) Dr. Smith's research shows kratom's potential as a harm-reduction tool, particularly for reducing opioid cravings and withdrawal symptoms. Video Testimony: https://www.youtube.com/watch?v=CrQxVDb-48Y 4. Dr. Ed Boyer (Renowned Toxicologist) Dr. Boyer notes that adverse events tied to kratom are usually linked to contamination, misuse, or underlying conditions-not the plant itself. He emphasizes the importance of continued research over prohibition. Video Testimony: https://www.youtube.com/watch?v=6I4GcFn_IDg 5. Dr. Jack Henningfield (Addiction Research Expert) Dr. Henningfield highlights kratom's role as a safer alternative for individuals with opioid dependence and urges against classifying kratom as inherently	

			dangerous without acknowledging its therapeutic potential. Video Testimony: https://www.youtube.com/watch?v=jWDXBQOqyU4 6. World Health Organization Report The WHO's Expert Committee on Drug Dependence reviewed kratom in 2021 and declined to recommend it for international scheduling. On page 39, Section 14, Dr. Marek Chawarski concludes: "This lack of association between mitragynine blood concentration and risk of lethality suggests that kratom consumption was not a causal factor in the vast majority of kratom-associated deaths, but rather was an incidental finding."WHO Report: https://cdn.who.int/media/docs/default-source/controlled-substances/unedited--advance-copy-44th-ecdd-review-report_kratom.pdf I think it also important to point out Kratom in its natural form is not inebriating in anyway. There have been driving studies done at John Hopkins proving it does not incapacitate in any way. Any ban or unreasonable restrictions on kratom in your state would not only remove a valuable tool for individuals like myself but would also stand in direct opposition to the scientific evidence and expert consensus urging regulation over prohibition. There have been over 450 scientific studies in-regards to Kratom's safety profile. Many States have already chosen to adopt the Kratom Consumer Protection Act (KCPA), which set standards for purity, labeling, and age restrictions; a framework that you could easily replicate. As your state continues to battle the opioid crisis, eliminating safe and effective alternatives like kratom could do more harm than good. Many veterans, cancer patients, and chronic pain sufferers rely on this plant to improve their quality of life. Proper regulation, not prohibition, ensures safety, education, and access while protecting against misuse. I urgently urge you to consider a research-driven regulatory framework that prioritizes consumer safety while preserving access to this natural tool for those who benefit from it. Thank you for your time, your open-mindedness, and your willingness to investigate the evidence with both scientific rigor and compassion. Sincerely, Jennifer Mercier Hopeful Consumer & Advocate	
Woodridge	Illinois	2 - Oppose - Questions the Science	Is the board aware of all the promising anti-cancer agents in Kratom, particularly against breast cancer? This is just one example of many studies: https://www.sciencedirect.com/science/article/pii/S2665928X2500008X Are you trying to shut down this research?	

Denver	Colorado	2 - Oppose - Questions the Science	There is a critical scientific difference between whole-leaf kratom and the products being sold today as "7-hydroxymitragynine," or 7-OH. Whole-leaf kratom is simply the dried leaf of Mitragyna speciosa. Its primary alkaloid is mitragynine. When someone consumes kratom, the human body naturally converts only a very small amount-typically well under one percent-into 7-OH through normal liver metabolism. This process is slow and self-limiting. By contrast, the 7-OH products now appearing on the market contain laboratory-isolated or chemically converted 7-hydroxymitragynine in amounts far beyond what the human body could ever produce from kratom leaf. At those levels, 7-OH behaves much more like a conventional opioid and carries much higher risk. When these high-potency 7-OH products are lumped with natural kratom, it leads to misleading risk assessments and poor public policy. Regulating or restricting 7-OH does not require banning whole-leaf kratom-and that distinction matters, because kratom saved my life. From 2008 to 2019, I lived trapped in FDA-approved pain pills, benzodiazepines, and muscle relaxers prescribed for my degenerative disc disease. Over 11 years, chronic pain management turned into full-blown addiction. What began as dependency slowly became a cycle of misuse, desperation, and shame. In April of 2019, I was dismissed from pain management after failing a required pill count. I was short on my medication and couldn't find what I needed. Cut off from prescriptions, I turned to the streets, and in that desperation, I slipped into cocaine use while trying to find another doctor. By June of 2019, I was in withdrawal and at rock bottom when I watched a documentary called A Leaf of Faith. That moment changed everything. The next day, I walked into a shop, showed my ID, and bought whole-leaf kratom..not synthetic 7-OH. Kratom quieted the relentless cravings. The voice that kept saying, "one more pill, one more snort, one more escape," finally went silent. For the first time in over a decade, I felt stable. Kratom gave me the breathing room to heal and allowed me to rebuild my life. I have not returned to pain management in over six and a half years. Today, I am a thriving mother, a first-time grandmother, and a contributing member of society. I am no longer a burden to my children. I am an example of recovery. I will always be grateful that I had access to safe, lab-tested, whole-leaf kratom. And that is why I speak out to protect others who are still fighting for their lives. Yours truly, Misty Brown, Colorado Kratom Advocate & Activist est. 2019	

Chicago	Illinois	2 - Oppose - Questions the Science	Preliminary data doesnt mean anything. Either there is conclusive data or there isnt. Decisions cannot be made based on whims or hunches.	
Portland	Oregon	2 - Oppose - Questions the Science	I strongly oppose the scheduling of natural kratom products. Kratom is a natural herbal product that has been used safely across SE Asia for hundreds of years. Used responsibly kratom is a very safe and effective herbal product. Please follow the science of Dr. Christopher Mccurdy and Dr. Jack Henningfeild which support keeping kratom legal. Access to kratom is important for thousands of Ohioans and access is a matter of civil liberties. Let's not take steps back into regressive prohibition era thinking.	
Albuquerque	New Mexico	2 - Oppose - Regulation Over Ban	Regulations for kratom should ensure that it is not sold to anyone under the age of 21 years old, should not be consumed by anyone who is pregnant, planning to become pregnant, or chest feeding, and the label should recommend that an individual discuss their kratom use with a healthcare professional. All kratom products should be third-party tested for purity, potency, identity, and composition per 21 CFR 111. I also believe that manufacturers taking it upon themselves to divulge that kratom may be habit-forming or cause dependence is a good-faith measure by the industry to ensure consumers are aware of the risks of kratom. As a kratom scientist, I believe that all kratom products should be labeled in this way to properly educate consumers.	NL-006

New York City	New York	2 - Oppose - Regulation Over Ban	I am not in support of this ban as I feel like the "evidence" is not accurate nor even close to being accurate. As a person who takes Kratom and has been for 10 years I have NEVER once had any issues with it or has it ever made me sick/put me in the hospital. I also know and have quite a few friends that take it as well and has helped them tremendously too. Kratom has helped me in so many ways. I was diagnosed with CFS in my mid 20s and I struggled with it for a long time but ever since Kratom was introduced to me I am able to do the things I like again. I have more energy, I feel better all around, I am more social and much more ambitious. I have been able to handle a job working over 60 hours a week for the last 10 years or more and that in return has lead me to have an all around better life. I used to be addicted to Ultram and many other prescribed drugs that caused me so many problems in my life but Kratom has literally saved me,my family and my life! However with that being said, I do think that it should have a responsible age limit put into effect not allowing people under the age 21 to purchase it just as we do with alcohol in our state or to implement AKA proposed regulations. This seems like the most responsible thing as adults to do rather than outright banning it. Also, If the Board bans Kratom it could lead to so many people heading back to the streets that have addictions looking for their "fix". Not to mention it could potentially cause even more deaths than what the Board has claimed that Kratom supposed has already caused. So all in all I plead with the Board and others that think banning Kratom is the best route, to sit back and listen to others who take it as it is literally helping thousands of people to be better humans. It really does help! I truly hope you listen to our letters and responses because if you ban Kratom you will be making a huge mistake with an outcome that would be hurting many thousands of people, An extremely concerned Kratom Guy in Ohio	
Wheaton	Illinois	2 - Oppose - Regulation Over Ban	I'm an Ohio adult and I'm concerned about a potential ban on kratom. I don't believe kratom in its natural plant form should be banned. Many individuals report real benefits from responsible use, and adults should be able to continue purchasing it in Ohio. Instead of prohibition, I support reasonable regulation—age limits, product testing/labeling, and enforcement against adulterated or misbranded products.	

New York City	New York	2 - Oppose - Regulation Over Ban	I have submitted my opinion on this matter already. I am submitting another. Please use common sense and do not impede sensible, responsible citizens of our right to use a natural plant for our well being.Using Kratom in its unadulterated, natural form is no more dangerous than drinking coffee.Find the honest true research on this plant. This plant could replace many medications with virtually no side effects comparatively. Many people will be adversely affected by outlawing Kratom. Again , common sense regulations should be the key to this issue. Thank you for your attention	
New York City	New York	2 - Oppose - Regulation Over Ban	Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration. Sincerely, Andrew Gonsalves Cleveland, OH	

Parkway	California	2 - Oppose - Regulation Over Ban	I am writing as a healthcare provider who works directly with patients suffering from chronic pain, opioid use disorder, anxiety, and post-acute withdrawal syndromes. I strongly urge you to oppose a total ban on kratom (Mitragyna speciosa) and its naturally occurring alkaloids. Such a ban would not protect public health. It would actively harm vulnerable patients and drive them back toward far more dangerous substances. In clinical practice, I see the limits of our current tools. Opioids carry an enormous risk of respiratory depression, overdose, tolerance, and addiction. NSAIDs damage kidneys and gastrointestinal tracts. Gabapentinoids, benzodiazepines, and muscle relaxants impair cognition and increase falls. Many patients are left with few tolerable or effective options. Kratom, while not risk-free, has emerged as a harm-reduction alternative for a subset of patients who have failed or cannot tolerate standard therapies. Kratom's primary alkaloids, mitragynine and 7-hydroxymitragynine, do not behave like classical opioids. They act as partial agonists at the mu-opioid receptor and appear to avoid the degree of respiratory depression that drives fatal overdoses. They also interact with adrenergic and serotonergic systems, which may explain why many patients report improved function, mood, and pain control without the level of sedation or euphoria seen with full opioid agonists. From a pharmacologic and clinical standpoint, kratom is more analogous to buprenorphine than to fentanyl or oxycodone. Thousands of my patients and colleagues' patients across the country use kratom to stay off illicit opioids, taper prescription opioids, or manage chronic pain while remaining functional. A total ban would not eliminate their need. It would simply remove a safer substitute and push people back to street opioids, where fentanyl contamination has made even a single relapse potentially fatal. That outcome would directly increase overdose deaths, not reduce them. Public health policy should be guided by relative risk, not moral panic. The overwhelming majority of kratom-related deaths in the United States involve multiple substances, most commonly opioids, benzodiazepines, or alcohol. Kratom alone has an extraordinarily low fatality signal compared to legal medications like oxycodone, methadone, or even acetaminophen. Banning kratom while continuing to prescribe far more dangerous drugs sends a deeply inconsistent message about evidence-based risk management. A total ban would also create a black market. We have seen this pattern repeatedly with substances from alcohol to opioids to cannabis. Prohibition eliminates quality control, not demand. Patients would lose access to tested, labeled products and be forced to rely on illicit sources with	

			unknown potency and contamination. If safety is the goal, this approach is counterproductive. There is a far better path: regulation. Age restrictions, product testing, labeling of alkaloid content, contamination screening, and bans on adulterated or synthetic kratom products would protect consumers without stripping patients of a tool that many rely on to live normal lives. Several states have already adopted kratom consumer protection acts that accomplish exactly this. As a clinician, I am not asking you to declare kratom harmless. No psychoactive substance is. I am asking you to acknowledge what patients and frontline providers already know: kratom occupies a much safer position on the spectrum of pain and opioid-replacement therapies than the substances it would replace if banned. A total ban will cost lives. Thoughtful regulation will save them.	
Jacksonville	Florida	2 - Oppose - Regulation Over Ban	Don't ban natural Kratom. Ban the synthetic variations that are actually harming people in the great State of Ohio. Look to Dr. Christopher McCurdy at the University of Florida who has over 20 years of research on Kratom.	

Pasadena	Texas	2 - Oppose - Regulation Over Ban	I know that Kratom is a big issue right now so I wanted to let you know I am a psychotherapist with 27 years experience. I have seen many clients do very well using unadulterated natural Kratom to help them in many different ways. I truly believe the synthetic version is the enemy here. The natural Kratom benefits, many people and I've seen it being used responsibly and I think it's important to let you know from the mental health perspective that natural Kratom does many good things. Thank you for your consideration and I wanted you to hear from this side. Again, I'm not an advocate of any kind of mixed or adulterated Kratom.Thank you.	
Minneapolis	Minnesota	2 - Oppose - Regulation Over Ban	All of the states that are beginning to ban Kratom are on a misled path that stems from pharmaceutical companies and a handful of groups who want someone to blame. Kratom can absolutely be used responsibly and should never be scheduled. I use Kratom for post-job stress as a retired federal Agent, my husband uses it for much needed sleep, and my veteran father uses it for his deteriorated spine and pinched nerves. None of us are addicted to it, and people who use it will tell you that it is not something that gives you a "high". It's also a beautiful natural plant that self-regulates, providing a shield against taking too much or trying to add other substances on top of it. Please follow the states that have retreated from making Kratom illegal, and instead follow a new path to enact a Kratom protection act. This will make the plant even safer for those who benefit from it. Thank you. I have suffered from Irritable leg/abdomen syndrome causing severe sleep disruption and nothing has helped until I found Kratom a year ago. Now I am able to at least get a reasonable amount of sleep. This has been life changing.	
Miami	Florida	2 - Oppose - Regulation Over Ban	Raw leaf powder is safe and should remain legal. Extracts and isolates of specific compounds are not safe and should be banned.	
New York City	New York	2 - Oppose - Regulation Over Ban	The FDA's recent recommendation targets concentrated 7-hydroxymitragynine products, not the traditional kratom leaf powder that I and millions of Americans use. I support regulation of concentrated products but ask that you ensure any regulatory action preserves access to natural kratom here in Ohio.	

Chicago	Illinois	2 - Oppose - Regulation Over Ban	Dear Members of the Ohio Board of Pharmacy, I was born and raised in Ohio and continue to care deeply about the well-being of its communities. I am writing to express my concern about the potential for an outright ban on natural kratom. While I do not use kratom myself, I have close friends and people I care about in Ohio who do. I've watched friends who were struggling just to get through a workday, or even a day with family, regain enough stability to show up for their jobs and families. In many instances, it has served as a vital, safer alternative to the more harmful substances that have impacted so many Ohio families. I have watched substances such as alcohol, weed, and over use of prescription medications rob individuals of life and time with family. Kratom, while not a replacement for proper medical care and counseling, has none the less played a huge role in giving hope and life back to these people. I completely agree with the Board that synthetic "gas station" products and adulterated substances of any kind are a threat to public health. Those should be banned. However, a blanket ban on the natural kratom plant would be a disservice to the responsible adults who rely on it. I urge the Board to adopt a "Regulation, Not Prohibition" approach, including: Age restrictions (21+) to protect minors. Mandatory purity testing to ensure products are free of contaminants. Clear labeling requirements so Ohioans know exactly what they are buying. Ohio has always been a place that values common sense and community. I pray you will choose a pragmatic path that targets dangerous synthetics without removing a lifeline for the people I know, and love in Ohio. Respectfully, J.C. Fairfield	
San Jose	California	2 - Oppose - Regulation Over Ban	Please consider the millions of Americans whose lives have been save by responsible use of pure leaf Kratom. Kratom can be regulated so imposter products like 70h and synthetic versions are banned and pure leaf Kratom stays safe and available for responsible adult use. I use it for chronic pain management i'm a retired police officer for the State of California. I injured my back doing the duties of my job and was medically retired. Procedures and pills were prescribed for years with little to no relief until I found pure leaf Kratom. It is changed and saved my life and I am grateful for it being safe and available to me every single day. I am one of millions who feel this way. We've had enough taken from us in the chronic pain community. Please do not take a tool that is so valuable.	

Tacoma	Washington	2 - Oppose - Regulation Over Ban	I am a CEO of a company of 100+ staff and have used Kratom regularly in place of coffee. I strongly believe adults should have access to Kratom. I have found this plant to be relatively benign yet effective in replacing coffee with far fewer side effects. Please consider regulation over scheduling, we do not need more natural plants turning adults into criminals. Outlawing this plant for the majority of responsible users because a very small percentage of individuals abuse it is not good policy. PLEASE REGULATE!	
Denver	Colorado	2 - Oppose - Regulation Over Ban	I want to see fair and appropriate regulations targeting production safety of pure leaf kratom and against adulterated products. These are common sense ideas. I have taken kratom every day since 2015 except a few periods when I couldn't. My glucose level suffers when I don't take it & therefore it's very important to me as one of its many benefits. My mom takes it to keep RLS at bay-every day. Shes 74. You, as medical professionals, should have no issues with becoming familiar with the science & research of kratom, and after you do, I'm betting you're going to help keep it legal. Choice is so important. Thank you for the opportunity to comment.	
New York City	New York	2 - Oppose - Regulation Over Ban	Ohio should NOT schedule or criminalize natural "plain leaf" mitragynine. Instead the state should adopt the measures of the Kratom Consumer Protection Act.	
Newark	New Jersey	2 - Oppose - Regulation Over Ban	I strongly oppose a kratom ban in Ohio. Kratom has helped thousands of Ohioans manage pain, anxiety, and recovery—often as a safer alternative to prescription opioids or alcohol. For many people, banning kratom would not protect them; it would push them back toward far more dangerous substances or leave them without a viable option at all. A ban would instantly turn law-abiding citizens into criminals overnight for possessing a legal product they rely on to function and work. These are not criminals—they are parents, veterans, and working Ohioans making responsible choices for their health. This would also cause real harm to Ohio's economy. Local kratom shops, distributors, and related small businesses employ Ohioans, pay taxes, and have operated in good faith under current law. Criminalizing kratom would destroy legitimate businesses, eliminate jobs, reduce tax revenue, and drive the market underground—where products are unregulated and less safe. Ohio already considered and rejected a kratom ban in 2018. Revisiting the same failed policy now unfairly penalizes consumers and businesses who relied on the state's prior decision. Businesses invested, hired workers, and complied with the law, only to now face criminalization years later. Rather than prohibition, Ohio should pursue smart regulation: age limits, quality testing, labeling standards, and consumer protections.	

			Regulation protects public health. Prohibition does not. I urge lawmakers to reject any kratom ban and instead support responsible regulation that protects consumers, respects law-abiding Ohioans, and preserves small businesses across the state.	
Atlanta	Georgia	2 - Oppose - Regulation Over Ban	I respectfully urge you to support SB299 because it would prevent a full ban on natural kratom (mitragynine) and instead regulate kratom responsibly, focusing on product safety. Natural kratom has helped me with arthritis, and I strongly oppose any ban on natural kratom. Thank you for your time and consideration.	

Los Angeles	California	2 - Oppose - Regulation Over Ban	As an individual who regularly visits kava bars and responsibly purchases kratom leaf tea, I strongly oppose the proposed ban on kratom. I believe kratom serves as a meaningful and far less harmful alternative to alcohol. Alcohol has long been a substance that has devastated individuals, families, and entire communities. Although I have never struggled with alcoholism personally, alcohol-related harm profoundly affected my life. When I was in middle school—at approximately 11 or 12 years old—my classmates and I were shown graphic footage depicting the consequences of drunk driving. This presentation was conducted without parental consultation or consent. The images included third-degree burn victims, permanently disfigured individuals, and severely traumatizing aftermath scenes. At such a young age, my mind was not equipped to process what I witnessed. The experience caused lasting psychological fear and anxiety. As a result, when I reached legal driving age, I was unable to bring myself to drive. It took seventeen years before I was able to obtain my driver's license. Those years cannot be recovered, and the impact was significant: it limited my employment opportunities and affected the overall trajectory of my adult life. This harm occurred within a society where alcohol remains widely accepted, normalized, and legally accessible. Despite its well-documented role in violence, addiction, impaired driving, and family destruction, alcohol continues to be protected within our social and economic systems. In contrast, kratom is now being targeted for prohibition. Kratom does not produce the same societal harms as alcohol. It does not impair my ability to drive, nor does it place others at risk. When I consume kratom responsibly, I feel calm, focused, and able to return home safely. More importantly, kratom has helped many individuals reduce or eliminate alcohol consumption altogether. For former alcohol users, removing access to safer alternatives like kratom may increase the likelihood of relapse. Combined alcohol and marijuana use—far more common and far more impairing—poses a greater risk to public safety than kratom ever has. Banning kratom may unintentionally undermine decades of progress made by organizations such as Mothers Against Drunk Driving by pushing people back toward substances that genuinely impair judgment and motor function. To prohibit kratom while continuing to permit unrestricted alcohol access sends a contradictory message. It also risks rendering the very real trauma and life-altering consequences experienced by people like myself meaningless. Rather than banning kratom, I urge policymakers to consider reasonable regulation and to reexamine alcohol's unchecked role in our society. Do not ban kratom.	

			Regulate alcohol. I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products Respectfully, Stephanie Barron (Cleveland, Ohio)	

San Francisco	California	2 - Oppose - Regulation Over Ban	I am submitting this comment as a kratom consumer and advocate for science-based regulation rather than prohibition. I struggled with opioid addiction early in life. Kratom played a critical role in helping me leave opioids behind and rebuild a stable, productive life. I have used kratom responsibly since the age of 18, and for me it has been entirely positive. It helped me maintain focus, motivation, and emotional stability — not intoxication or impairment. Because of kratom, I have been able to build a long-term professional career in technology, holding senior and leadership roles at major companies and contributing meaningfully to my industry and community. This level of consistency and responsibility would not have been possible if I were still dependent on opioids or cycling through traditional opioid-replacement therapies that often come with significant side effects and long-term dependency. I only support and use pure, natural kratom products from reputable sources. That is why I strongly support reasonable regulation focused on product purity, labeling, and consumer safety. What I do not support is prohibition, which would remove a proven harm-reduction tool and push people toward far more dangerous substances. If kratom is criminalized in Ohio, people like me — who are healthy, stable, and contributing members of society — will be directly harmed. I urge the Board to consider the real-world consequences and adopt policies grounded in evidence, public health outcomes, and responsible regulation rather than fear. Please protect access to kratom for adults and focus on safety standards, not bans.	

New York City	New York	2 - Oppose - Regulation Over Ban	I am submitting this, as an Ohio physician, to address the policy structure of the proposed rule rather than my individual circumstances. As written, the proposal treats kratom as a single, undifferentiated substance warranting categorical prohibition. That approach does not reflect the heterogeneity of kratom products, patterns of use, or risk profiles, and it diverges from the regulatory strategies Ohio has used successfully in other complex substance domains. The current framework implicitly presents a false dichotomy: that individuals using kratom will either transition safely to FDA-approved opioid therapies or medication-assisted treatment, or they will cease use without consequence. This assumption is not supported by clinical experience. Many individuals using kratom do so precisely to avoid re-exposure to opioids or long-term pharmacologic dependency, and they will not engage in those alternatives even when legally available. Removing kratom without a viable substitute does not eliminate risk; it redistributes it. From a harm-reduction and public-health perspective, the greatest risks associated with kratom appear to be concentrated in specific formulations and practices: highly concentrated extracts, products engineered to maximize 7-hydroxymitragynine exposure, inconsistent labeling, and marketing that obscures potency. These risks are meaningfully different from those associated with traditional whole-leaf or low-potency preparations used by adults for pain or function. A more proportionate regulatory approach would focus on: • restricting or prohibiting high-potency and isolated alkaloid products, • enforcing age limits and labeling standards, • requiring basic quality control and testing, • and addressing misleading or unsafe marketing practices. Such an approach would better align with the Board's mandate to protect public health while avoiding foreseeable unintended consequences, including destabilization of individuals who are currently functional, employed, and not engaged in illicit opioid use. Finally, I would note that administrative rulemaking is a blunt instrument for addressing substances that occupy a gray zone between risk and utility. Once enacted, reversal is difficult, while downstream harms—if they occur—are borne by patients and clinicians, not regulators. Caution, proportionality, and regulatory precision are therefore especially important at this stage. I respectfully urge the Board to consider whether modification of the proposed rule, rather than outright prohibition, would more effectively advance patient safety, public health, and the Board's long-term credibility.	

San Antonio	Texas	2 - Oppose - Regulation Over Ban	I am writing to urge the Board to preserve legal access to natural kratom products while pursuing reasonable consumer safety standards. For many Ohioans, kratom is used as a harm-reduction tool — particularly by individuals seeking alternatives to opioids, alcohol, or other substances that carry significantly higher risks. Others use kratom to manage chronic pain, fatigue, or anxiety when conventional treatments are ineffective, inaccessible, or poorly tolerated. Eliminating or severely restricting access to natural kratom would remove an option that many people rely on to maintain stability, employment, and overall quality of life. Importantly, the risks associated with kratom are often overstated when it is discussed without proper context. The vast majority of serious adverse events attributed to kratom involve poly-substance use, adulterated products, or extracts with unnaturally concentrated alkaloid levels — not traditional, unadulterated leaf products. Prohibition would not eliminate demand; it would instead push consumers toward unregulated markets, increasing the very risks policymakers seek to prevent. A more effective approach is smart regulation that prioritizes consumer safety without criminalizing responsible use. This includes: • Product labeling and transparency • Testing for contaminants and adulterants • Age restrictions • Limits on synthetic or highly concentrated extracts Ohio has an opportunity to implement consumer protection frameworks that preserve access to natural kratom while addressing legitimate safety concerns. I urge the board to follow an evidence-based path that balances public health, individual autonomy, and harm reduction.	

Los Angeles	California	2 - Oppose - Regulation Over Ban	Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products The community that partake in this beneficial tea are often members of the sober community. Before moving back to Ohio, I was living in Florida and saw the amazing affects kartom establishments had for the sober communities there. These establishments provided a place that sober individuals could escape to so that they wouldn't feel the pressures of alcohol or harmful drugs. Kratom establishments would often hold group meetings for addicts as well. Ohio is on it's way to provide these benefits and so much more! Let's join the fight together to make it safe now so that Ohioans can continue to enjoy kratom for future generations. These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration. Sincerely, Ryan Firment Amherst, OH	

Baltimore	Maryland	2 - Oppose - Regulation Over Ban	To the Ohio Board of Pharmacy and Common Sense Initiative reviewers, My name is Leonard I am a service disabled combat veteran and I am rated 100 percent disabled. I am submitting this public comment to oppose the proposed rule 4729:9-1-01.2 to classify mitragynine as a Schedule I controlled substance. This proposal is not a safety regulation. The document clearly states it would ban the sale and possession of mitragynine, which would effectively ban kratom for adults in Ohio. It also states violations could lead to criminal penalties under Ohio drug laws. As a disabled veteran, this scares me. Kratom products containing mitragynine have helped me function and stay stable when other options either did not work for me or came with serious side effects. For me, it has been a harm reduction tool and a quality of life tool. A Schedule I ban would not make my needs disappear. It would only remove access to a legal product I use responsibly and push people toward riskier alternatives. If the goal is public safety, then please regulate the market instead of banning it. The same document states the rule does not implement a federal requirement. Ohio has the opportunity to lead with smart consumer protections, not a blanket criminal approach. Here are practical steps that would improve safety without criminalizing regular adults and veterans: Age restrictions for purchase, such as 21 plus Required lab testing for heavy metals and contaminants with posted results Accurate labeling of serving size and alkaloid content Limits on highly concentrated or synthetic products, especially 7 hydroxymitragynine style products and similar compounds Child resistant packaging and clear warnings Licensing and compliance checks for manufacturers and retailers Please do not schedule mitragynine as Schedule I. A ban that includes possession will harm regular Ohioans, including veterans, while doing little to address the actual safety issues that come from untested or adulterated products. Choose regulation, transparency, and enforcement of quality standards instead. Thank you for considering my comment. Respectfully, Leonard F.	

Clarkrange	Tennessee	2 - Oppose - Regulation Over Ban	I’m writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Thank you	
Chicago	Illinois	2 - Oppose - Regulation Over Ban	Non regular and as needed kratom use has had a positive impact on my life. It improves my mood and has supported healthier choices related to food and exercise. Banning a substance with these effects could be harmful to many individuals who may benefit from it as a safer alternative to harder substances. The effects are comparable to a good cup of coffee. It is also difficult to misuse since excessive amounts often cause stomach discomfort. I believe public education and responsible regulation would be more beneficial than an outright ban especially in a state facing serious issues with narcotics and lethal drugs.	
Fort Myers	Florida	2 - Oppose - Regulation Over Ban	Banning Mitragynine makes no sense, when it could easily be regulated, the main concern of addiction comes from the 7-OH which could be regulated to a point where only natural levels should be present. Regulation is always better than outright banning, if it is regulated it gives people more incentive to consume it safely vs an outright ban which creates unsafe conditions. This ban is medically unfounded and purely based on social pressure and anecdotal evidence, the same claims made about Kratom/mitragynine could be made about alcohol if alcohol wasn't so ingrained in out society.	

Boston	Massachusetts	2 - Oppose - Regulation Over Ban	Hi there, I am 56 yrs old. I have been using Pure dried Kratom leaf since 2018. This leaf has saved my life, and has given me back a full quality of living that I previously did not have. Because I use this leaf, I am all for science based evidence for regulations. Please look at the University of Florida Kratom research. Look at the evidence that was presented before Congress, and The World Health Organization. Use the scientific research evidence as a measure to set good practical regulations in place. Thank you for your time. Sincerely Kathy Magliaro	
Nashville	Tennessee	2 - Oppose - Regulation Over Ban	I, and many others, strongly oppose the decision to place kratom in Schedule I. I do not currently live in Ohio, but I am a former Ohio citizen and consider Ohio home. I still have close family and friends there. Some of them rely on kratom to manage chronic pain or to avoid returning to prescription opioids, substances that are demonstrably more dangerous and addictive. Kratom is in the coffee family. Treating kratom as equivalent to heroin ignores current and complete science and will push people toward either illicit markets or far riskier substances. I am deeply concerned that this decision was made without meaningful consideration of harm reduction, proportionality, or the well being of Ohio citizens. Rather than reasonable regulation, Ohio is choosing the most extreme option available, with life altering criminal consequences. I had been considering relocating back to Ohio, but policies like this, driven by unelected bodies rather than transparent legislative debate and real research have changed my mind. I urge the Board to reconsider this classification and pursue a regulatory approach that protects public health without criminalizing people who are trying to stay functional, employed, and alive.	
Nashville	Tennessee	2 - Oppose - Regulation Over Ban	I am against restrictions on the sale of kratom and it's derivative molecules. Doctors already refuse to prescribe medications to people in their time of need. I personally have experienced this discrimination. People are left to fend for themselves with obscure legal substances, or for many desperate people, they resort to the unregulated supply controlled by gangsters. That is the heart of the "Fentanyl crisis" that is poisoning so many people today. Society should learn from the Volstead Act. Drug poisonings are a choice and an intended consequence. They do not need to happen. Every substance could be regulated for purity and dosage, and they could be sold just like alcohol with an ID requirement and sales tax to pay for managed drug programs. I firming believe that far too many people have died from the actions and consequences of drug control. The risks	

			greatly outweigh the benefits. We should not be paying taxes to criminalizing people for managing an illness. It's just not right.	
Chattanooga	Tennessee	2 - Oppose - Regulation Over Ban	Everyone can support common sense and science informed regulations on kratom products, but a conplete ban is not justified by science. Facts are there are no deaths or overdoses attributed anywhere whatsoever where kratom in its natural state was solely used. The plant acts on the body with a ceiling effect making it impossible for that to occur. Any adverse reactions were found to have other substances in the individual's system. As an herbalist, I know herbs have a place and a purpose to improve the health and wellbeing of people. This plant is another example of that. Everyone can agree on keeping kratom unadulterated, free from additives and synthetics in it's pure form along with age restrictions. Haven't we learned anything from the evolution of cannabis legislation? Don't let propaganda and false information guide what happens next. Removing this herb from being safely available and accessible will inevitably lead to poor outcomes.	

Eustis	Florida	2 - Oppose - Regulation Over Ban	The Boards proposed rule to schedule mitragynine should not move forward. This same agenda took place back in 2019 with claims that kratom is a danger to public health. Now the Board is conflating “kratom” with isolated alkaloids found in the natural plant. There should be no reason to schedule mitragynine a singular alkaloid, when the Board has already emergency scheduled all forms of “kratom-related products”, including all derivatives of kratom including but not limited to: 7-hydroxymitragynine, mitragynine pseudoindoxyl, dihydro-7-hydroxy mitragynine, and 7-acetoxymitragynine. The continued use of information and language associated with wholly different products, such as 7-OH, while calling them “kratom” is the entire problem with the approach this Board has taken. Please remember, none of the Board members are elected officials. No person on the board was voted for by the constituents of Ohio. The Board continues to create rules that are worded poorly, and this is due to the Board’s lack of knowledge on these products and the entire topic at hand. These matters should be left up to our actual elected governing body. It is clear the Board demonstrates a complete lack of knowledge on the overall topics based on the data the Board presents, which continues to reference 7-OH while this specific rule is a proposed ban of mitragynine. This is also clear, as the Board’s attempt to ban “mitragynine” uses data discussing “kratom”, which does not consist of just “mitragynine”. The inability to even provide documents on a singular topic completely negates the reasoning for the proposed scheduling. Ohio can “protect public health” without going to the extreme and placing mitragynine as a Schedule 1. Using the current approach would be destroying legitimate businesses as well as making thousands of Ohio citizens criminals. The Board needs to recognize and be able to distinguish natural kratom leaf from synthetic, concentrated, and isolated compounds. This would allow targeting enforcement toward high-potency synthetic products while preserving a regulated market that supports testing, education, and oversight of natural kratom or as the Boad has worded it “kratom in its vegetative form”. Mitragynine is not kratom just like 7-hydroxymitragynine is not kratom. No product on the market that is claiming it is kratom would only consist of isolated mitragynine. The utter inability to distinguish the difference shows that this Board should not continue with this rule. There are 18 states that have passed Kratom Consumer Protection Acts (KCPAs) requiring kratom manufacturers, distributors, and retailers to register for labeling and product compliance. This allows natural kratom to be sold while protecting consumers. This also supports legitimate jobs	

			and tax revenue the state of Ohio has been receiving for years with the sale of natural kratom. Regulatory bill SB299 has already been introduced in Ohio that would regulate access to natural kratom leaf as well as formalize the Boards emergency ban of concentrated and isolated products. This is the better option for businesses and consumers that Ohio needs. The Board needs to recognize that they are not protecting the people of Ohio by banning mitragynine. Instead, the Board would be banning a singular alkaloid found in kratom, subsequently making natural kratom users criminals for utilizing a plant. All of this criminalization and outrage due to products masquerading as kratom which are all mutated products from isolated alkaloids found in the plant.	

Portland	Maine	2 - Oppose - Regulation Over Ban	Both natural kratom and 7-OH saved my life. Both of them save peoples lives as both a harm reduction tool and way to manage their chronic pain. Scheduling these will only cause more people to fall victim to the true public threat, which is Mexican Cartels and their poisonous Fentanyl they flood our country with. Keep kratom out of gas stations and only allow it to be sold to adults 21+ with verified ID. Natural leaf kratom should absolutely not be scheduled! I think 7-OH shouldn't either but definitely not natural kratom! I've been sober for 10 years from heroin, cocaine, etc. and only take kratom and cbd. It helped me completely turn my life around. I don't constantly need more and more of this plant. A few bad reactions from people that were other substance and kratom, or just didn't tolerate the plant or got tainted product from a non GMP vendor shouldn't equate to making it illegal for thousands that use safely! Regulate it but don't ban it! You will turn tax paying and contributing members of society in the great state of Ohio to criminals over night. This is life or death for me and many others. Natural kratom leaf saved my life. I have been clean from drugs and alcohol for 8 years because of the help of kratom and 12 step recovery. Kratom helped me get off of heroin and opioid pain medications. My mom has her son back and I have my life back. Please do not ban this plant! It will only cause more death and suffering from the fentanyl epidemic.	
Wyoming	Minnesota	2 - Oppose - Regulation Over Ban	Based on all of the data available, as well as the opinions of the FDA and Department of Human & Health Services, natural kratom is like any other stimulant (tobacco or nicotine) and should be age-regulated, not made illegal. Natural kratom non-addicting, helps people with a variety of ailments, and has been used for hundreds of years in Southeast Asia. The thing you should be banning is concentrated 7hydroxymitragynine (7-OH) which is a synthetically enhanced, lab-grown monstrosity of a product that companies have chosen to market as kratom. There are, according to multiple studies by the FDA and University of Florida, 0 deaths from natural kratom without another substance involved whereas there have been well over 25 deaths & is known to be more addicting than heroine.	

Manchester	New Hampshire	2 - Oppose - Regulation Over Ban	You are making a big mistake. Kratom whole leaf as helped more consumers than hurt. While leaf and 7oh are not the same thing. I am a fitness professional and I work with a lot of thenpain community. Kratom has saved them from a life time of pain. You will take that away from your people because a few people misused it the masses amaze tonpay the price? What about alcohol? Are you gonna ban that too? Here is the thing. Alcohol killed my father. Very sad. The state of NH taxa alcohol and owns state liquor stores. We have no other tax. That tax money keeps our schools open and hospitals functional. So my father misused alcohol should we ban it because he was irresponsible? That would hurt all the schools and hospitals all because my father didn't limit himself. Banning Kratom because ofba few will put a lot of people in pain and that's wrong. Dobyour research before listening to the news. Or are you being paid by the liquor commissioner? They are lobbying to ban this because alcohol sales are done . No one wants to drink anymore. This is disgusting. Kratom whole leaf is not 7oh. The 7oh products are not the best for you but if you shut people off they will turn to the streets. Regulate it. Whole leaf Kratom,must be 21 to buy and only buy at smoke shops not gas stations. Let adults make their own decisions. I use Whole leaf Kratom for my PTSD. I follow the directions. I am a boxing coach and exercise professional. This helps my depression. I don't over do it either. Kratom has and is helping loads of people. The 7oh is a different story but still helping people. A bunch of the older communities have turned to whole leaf to combat their incurable pain. Doctors have failed them and they found this leaf that lets them have quality of life. Pain free life. Let them be adults. Educate yourself about whole leaf and educate the public about it,regulate it and everyone wins. Alcohol kills many people yet you allow that, Cigarettes kill people yet that is fine, poison in the food leaving America sick is fine but a whole leaf Kratom that has science proving it's not as bad vas you make it out to be. REGULATE IT. Let's all win together.	

Conyers	Georgia	2 - Oppose - Regulation Over Ban	I am writing as a concerned citizen to respectfully urge you to keep natural kratom legal in the state of Ohio. Kratom is a natural plant that has been used safely by millions of adults across the United States. For many people, kratom provides a safer alternative for managing pain, improving focus, and supporting recovery from opioid or alcohol dependence. Countless individuals credit kratom with helping them avoid far more dangerous substances, including prescription opioids. Banning natural kratom would not eliminate demand—it would instead push consumers toward unregulated or illicit markets, increasing the risk of contamination and unsafe products. States that have chosen regulation over prohibition have seen better outcomes by protecting consumers while still allowing adult access. Rather than prohibition, I strongly support reasonable regulation, such as: Age restrictions (21+) Product testing and labeling requirements Clear ingredient transparency Enforcement against adulterated or synthetic products These measures protect public health without criminalizing responsible adults or removing access to a plant that many rely on for their well-being. It is important to note that problems associated with kratom almost always involve adulterated or synthetic products, not pure, natural kratom leaf. Targeting bad actors and unsafe products is far more effective than banning the plant itself. Ohio has an opportunity to lead with a balanced, science-based approach that prioritizes safety, personal freedom, and harm reduction. I respectfully ask you to oppose any effort to ban natural kratom and instead support thoughtful regulation that protects consumers. Thank you for your time, consideration, and service to the people of Ohio. Sincerely, Cody Lei Codylei888@gmail.com	

Oxnard	California	2 - Oppose - Regulation Over Ban	First, do know that I agree with the intention of protecting the public from the health hazards presented by the production, sale and use of any concentrated opioid-like products, just as I oppose the production, sale and use of substances like cocaine and crack. And, just as government protections from cocaine and crack do not go so far as to ban natural source materials with low concentrations of the active substances, any new regulations should follow suit and also not ban the similar natural source materials from which concentrated Mitragynine is derived. Specifically, I am advocating for passage of SB 299 and any similar new legislation and/or regulation that ensures the safe, responsible access to Natural Kratom Leaf and the products that contain it in safe quantities. My testimony is that I am a 60-year-old male professional who has suffered from ADHD, social anxiety and other conditions which were impeding my ability to function socially and achieve my potential for professional productivity for decades because I refused to use available pharmaceuticals to alleviate symptoms due to the debilitating side effects and tended to rely on alcohol products to facilitate necessary social engagement. Not a good situation for people like me. Miraculously, I found and am currently able to enjoy the social tonic product called "New Brew" (which contains low doses of Kratom Leaf and Kava Root mixed with natural juices and a smidge of caffeine). I have experienced neither side effects nor any addictive conditions. In addition to alleviating my symptoms to help me live better at work and at play, this product has allowed me to virtually eliminate my use of alcohol products which has improved my health and raised overall quality of life significantly. Please, work to support SB 299 and ensure that all people like me continue to have access to natural kratom leaf products which studies have shown are perfectly safe and helpful when used as directed. Thank you for your time, attention and hopefully your support.	
Victorville	California	2 - Oppose - Regulation Over Ban	There is nothing wrong with Unadulterated Kr8tom powder. I have been using for 4 years and it's safe and my bloodwork prices it. 7ih is what should be regulated, it's synthetic and dangerous.	
Charlotte	North Carolina	2 - Oppose - Regulation Over Ban	Please regulate natural Kratom rather than ban it outright. Banning its synthetic knockoffs only makes sense. Kratom has helped thousands of people recover from opiate addiction. Thank you.	

Everett	Washington	2 - Oppose - Regulation Over Ban	I’m commenting to speak up against banning kratom in Ohio and to ask that lawmakers take a more responsible, informed approach instead of an outright prohibition. Kratom is a natural plant that many Ohioans use safely and responsibly for pain management, energy, focus, and most importantly for harm reduction.For some people, kratom has been a life-changing alternative to far more dangerous substances like prescription opioids or illicit drugs. A ban would not protect public health; it would push people back toward more harmful options or into unregulated markets. If there are concerns about safety, the solution is reasonable regulation, not a ban. Many states have adopted the Kratom Consumer Protection Act, which ensures product testing, accurate labeling, age restrictions, and quality control. That approach actually protects consumers while respecting personal freedom and public health. Ohio should be following that model, not ignoring it. Banning kratom would hurt responsible adults, small businesses, and people who rely on it to function day to day. It would also criminalize a plant that has been used safely by millions, based largely on misinformation and fear rather than science and real-world data. This is the last chance to get this right. I strongly urge Ohio lawmakers to listen to the people who actually use kratom, review the evidence honestly, and choose regulation over prohibition. Please do not take away a safe, natural option that helps so many Ohio residents live healthier, more stable lives.	
Jacksonville	Florida	2 - Oppose - Regulation Over Ban	Banning and outlawing substances based on factual wrong evidence is a mistake. have we not learned that with the failed drug war and marijuana? All it does is enable criminals to now have another money source. No testing, no labels, possibly tainted substances. Regulate and enforce. Dont ban. There will be a replacement for this if you outlaw it. It'll probably be worse.	

Phoenix	Arizona	2 - Oppose - Regulation Over Ban	I am writing to respectfully urge you to support SB299. I do not live in Ohio but this is a situation that affects us all. Kratom has been around for a very long time. It is only recently that it has been given this horrible reputation due to its synthetic supercharged derivative. Kratom and 7-OH are not even close to the same thing. I hope you realize this. This legislation is vital because it prevents a full ban on natural kratom (mitragynine) and instead establishes responsible regulation. By focusing on product safety, labeling, and restricting synthetic compounds like 7-OH, SB299 protects Ohioans without resorting to total prohibition. Natural kratom has helped me be a working tax paying upright member of society. It supports my recovery off of illicit drugs, it helps with my mood, sleep, back pain. It is a truly one of a kind plant. There is no evidence to show plain leaf kratom is in any way physically harmful to take. I strongly oppose any administrative rules that would ban natural kratom and urge you to favor the regulatory approach found in SB299. Thank you for your time and for representing the interests of your constituents.	
Williamstown	New Jersey	2 - Oppose - Regulation Over Ban	I am writing to express my opposition to the banning of natural Kratom. Please note, - I am not talking about synthetic or altered Kratom, known as 7-oh, which indeed does appear to be very dangerous. My email is only pertaining to natural Kratom, not altered from its original state - usually sold in powder, or capsules filled with powder. Millions of Americans take Kratom to help them with a number of issues, such as depression, anxiety, chronic pain, or opioid dependence. This includes many residents of this state. If this legislation is passed, it will turn these Kratom consumers into criminals overnight. I would strongly encourage you to research and support the Kratom Consumer Protection Act which has been passed in several states already. This is commonsense legislation to ensure that the kratom industry is regulated, that kratom is not sold to our children, and creates labeling requirements. I am not opposed to regulation of kratom at all, as I want everyone to be able to consume verifiably safe product. This would be a win for everyone - restricting the potency of the product, restricting who can buy it, and making it safe for all consumers. Thank you!	

Queens	New York	2 - Oppose - Regulation Over Ban	As a New York resident who is originally from Ohio and still has family in the state, a total ban on plain leaf kratom would make me hesitate before visiting. When I'm there I shop, I eat at restaurants, I go to museums, etc. Ohio shouldn't take a wrecking-ball approach to kratom, when proper regulation, as New York State has done, would be a much smarter and more nuanced move. While there are a lot of sensational headlines around kratom, the science and facts don't support them. Ohio adults should have the right to consume it responsibly. I ask you regulate it, not ban it. Adam W.	
Petersburg	Virginia	2 - Oppose - Regulation Over Ban	Please do not schedule Mitragynine! Kratom has helped me and many other people I know. It is not dangerous and will only cause more problems to ban it. Please listen to the American Kratom Association! Focus on regulation not prohibition. Kratom has saved mine and many people I know lives it's a plant and we are tired of being told we can't have plants it's ridiculous. Overdose deaths will skyrocket as well as criminal activity in general if you ban this amazing substance.	

Nutley	New Jersey	2 - Oppose - Regulation Over Ban	I'm an Ohio constituent writing to urge you to oppose Schedule I placement of kratom/mitragynine and instead support a regulated "Kratom Consumer Protection" approach that targets the real risks: adulteration, mislabeled potency, and highly concentrated "7-OH"/synthetic products. Years ago, I was prescribed opiods for severe back pain. They were prescribed along with other drugs like muscle relaxers. I am fortunate that a friend suggested kratom which helped me from falling into the trap of abusing pain killers. It helped me and it worked. I never over consumed it, and I had no problem stopping it when it was no longer needed. I have testified in the past before the Ohio Board of Pharmacy in support of keeping kratom legal and unscheduled. I was moved by the testimony by scores of people from all walks of life who shared their stories of addiction and recovery and spoke of how kratom helped save their lives and even credited it with restoring their relationships that were damaged when they abused drugs to help alleviate their pain. Kratom is a natural substance that works to mitigate pain. It's a good thing when something so relatively benign can help ameliorate the scourge of drug addiction and subsequent drug related crimes in our communities that debilitating pain, in part, creates. With common-sense legislation and simple enforcement, kratom can aid us in fighting this affliction. 1) Ohio's current situation calls for smart regulation, not prohibition On December 12, 2025, Ohio adopted an emergency rule making "kratom-related products" illegal to sell/possess/distribute (including 7-hydroxymitragynine/7-OH and other derivatives), while noting that the emergency rule does not apply to isolated mitragynine or "natural kratom in its vegetation form." The Ohio State University's Drug Enforcement and Policy Center summarizes the next step: the Ohio Board of Pharmacy approved rules on January 6, 2026 to place natural and synthetic kratom under Schedule I, with review through the governor's office and JCARR and opportunities for public input. Ohio can do better than a blanket Schedule I approach: we can keep dangerous products out while preserving consumer access to a lower-risk alternative that many adults report using for pain or to reduce opioid use. 2) "Kratom is dangerous" is not the full scientific story—risk is real, but it's not comparable to Schedule I drugs Kratom is not risk-free. There are documented poison-center calls and adverse events, and some people do experience tolerance and withdrawal—typically described as generally mild in the research literature. Importantly, CDC overdose surveillance has found that when kratom is detected in overdose deaths, other substances are very often	

			also present, which is exactly why Ohio should focus on product integrity, labeling, and adulterants instead of criminalization. In other words: the evidence supports regulating kratom like a consumer product with enforceable standards, not treating it like heroin. 3) Why "regulated kratom" is a practical public-health tool (and why scheduling may backfire) Ohio—and the nation—has painful experience with highly addictive substances distributed through legitimate channels. Prescription opioids are a well-established risk factor for later heroin use (even though only a minority transition). Criminalizing kratom would likely: --push consumers toward unregulated online/illicit markets (worse adulteration risk), --remove a harm-reduction option some adults use to reduce opioid use, and --divert resources from policing truly high-risk substances. 4) A "Kratom Protection Act" path forward: standardization + enforcement to eliminate adulterated products A strong Ohio Kratom Consumer Protection framework can be modeled on approaches already used in multiple states and summarized by the Congressional Research Service. Key elements Ohio should adopt (and fund enforcement for): A. Ban synthetics and dangerous concentrates Prohibit synthetic mitragynine / synthetic 7-OH and chemically altered derivatives. Set a potency guardrail used in several states: prohibit products where 7-hydroxymitragynine exceeds 2% of total alkaloid content. B. Require transparent labeling Label the amount of mitragynine and 7-hydroxymitragynine per serving. Include basic warnings (not for pregnancy, keep away from children, don't mix with alcohol/sedatives). C. Require third-party testing + Certificates of Analysis (COAs) Batch testing for heavy metals, pathogens, adulterants/other drugs, and accurate alkaloid content. COAs available to regulators and consumers (QR code on package is workable). (Utah has detailed rules for batch testing/COAs that Ohio can mirror.) D. Age limits + retailer licensing Minimum age (18 or 21) and penalties for noncompliance. Licensing for distributors/retailers to enable inspections, recalls, and enforcement. This is exactly how you keep adulterated kratom out of the market without criminalizing Ohioans. 5) My request is that you please support legislation that: --codifies product standards (testing, labeling, age limits, limits on 7-OH, ban on synthetics), and --rejects Schedule I for natural kratom/mitragynine.	

Cape Coral	Florida	2 - Oppose - Regulation Over Ban	As a regular ACTUAL kratom user, this tea has been a lifesaver. The pure, unaltered tea has had so many positive effects for my health, mental clarity, and have no withdrawal or cravings any more than a cup of coffee. Kratom extract aka 7-OH is NOT kratom, allowing for the pure tea to be sold and limiting or banning 7-OH outright would be better for the holistic community as a whole.	
Port Saint Lucie	Florida	2 - Oppose - Regulation Over Ban	Kratom has saved me from illegal black market opiates. Scheduling or banning this substance will do more harm than good to the people of the United States of America. Please reconsider regulating the industry instead of scheduling.	
Boston	Massachusetts	2 - Oppose - Regulation Over Ban	Dear Committee Members, I am writing to support regulating Kratom for age of use and manufacturing quality guidelines but NOT banning it as it has tremendous usefulness for people like me. Of note: I support regulation (or banning) of 7-OH, a new synthetic because, there is no science behind it and it has been shown to cause respiratory depression. This is NOT the case with kratom. Per FDA press conference on July 29, 2025, the FDA is NOT interested in banning Kratom - there are 100s of scientific studies of kratom that show it is safe for consumers. But FDA is rightfully concerned with 7-OH, a new synthetic without any scientific backing. 7-Oh is NOT the same as Kratom, and I agree with the FDA that 7-OH should be banned or at least heavily regulated. Properly manufactured Kratom should remain available for adults to use responsibly. I am a daily Kratom user and have been for over 15 years. I was a registered nurse and injured my back while working, leaving me with crippling back pain. I was initially treated with the usual opioids with only partial alleviation of pain and side effects of decreased energy and mental acuity. Surgery was not an option for me. After about 8 months on opioids I tried kratom and never returned to opioids. Kratom manages my pain and leaves me with energy and a clear mind. Since injuring my back I have been a biotech executive for over 13 years, attained a Harvard degree in biomedical ethics, and could only have accomplished all that I have because of Kratom. There are many like me who rely on Kratom to function fully. I agree with regulations concerning product purity and age restrictions, but please do not take pain relief and ability to live productive lives despite chronic pain away from responsible Kratom users like me. Thank you for understanding, and for supporting regulation of Kratom, NOT banning it. Janice Stevens	

Fort Myers	Florida	2 - Oppose - Regulation Over Ban	I support the regulation of kratom via the KPCA, protecting the people's access to something that benefits them while ensuring safety, quality, and purity. I have been in the kratom industry for almost ten years and have personally seen people benefit greatly in their lives from access to this plant and its compounds. The differences between specific compounds and the concentration of them matters and should be taken into consideration when regulating kratom. It is not a one size fits all type of situation where the kratom plant or extracts should be entirely banned, instead the compound 7H should be at a naturally occurring limitation and not be super concentrated into insane doses. This combined with the established avenues of the KPCA would be the most beneficial outcome for every party. Thank you.	
Colorado Springs	Colorado	2 - Oppose - Regulation Over Ban	I have used kratom responsibly for six years, purchasing exclusively from reputable brands through trusted vendors. While I recognize that some outlets sell kratom in ways I find deeply problematic, my personal experience with this botanical has been genuinely beneficial. This is why I believe evidence-based regulation and continued research are far more appropriate—and effective—responses than an outright ban. Kratom serves a legitimate need for many Americans. I have personally witnessed individuals struggling with opioid dependency use it as a critical bridge to recovery. I've seen chronic pain patients—people who experience severe adverse reactions to prescription medications or simply cannot access them—find meaningful relief through kratom. During a period without health insurance, responsible kratom use helped me manage both anxiety and pain safely and effectively. These are tangible, documented benefits that would disappear under prohibition, leaving vulnerable people with fewer options and potentially dangerous alternatives. What troubles me most is the striking inconsistency in how we regulate substances in this country. Alcohol remains legal and widely available despite its undeniable connections to violence, crime, and hundreds of thousands of deaths annually. Cigarettes are sold freely even though smoking kills approximately 480,000 Americans each year. Yet kratom—which lacks these devastating public health impacts—faces the threat of prohibition. This double standard is not only hypocritical; it's unjust. I cannot help but question whether opposition to kratom research stems less from genuine safety concerns and more from its potential impact on pharmaceutical profit margins. Whatever the true motivation, those of us who have benefited from responsible kratom use—and the	

			researchers seeking to understand it—deserve a seat at the table in these policy conversations. Our experiences matter. Our voices deserve to be heard.	
Bonita Springs	Florida	2 - Oppose - Regulation Over Ban	I oppose the proposed rule to place mitragynine in Schedule I. This would effectively ban kratom products that are primarily mitragynine with minimal 7-hydroxymitragynine, despite no clear evidence that these products pose a public health emergency. An outright ban would harm responsible businesses, restrict adult consumer choice, and drive demand to unregulated markets. I urge the Board to reconsider scheduling mitragynine and instead pursue balanced, evidence-based regulation.	
Canton	Georgia	2 - Oppose - Regulation Over Ban	I am a kratom user for 3 yrs I use it instead of prescriptions, alcohol is far more of a problem. I am for regulation, for keeping it natural and 21 and over. Thank you	
Portland	Oregon	2 - Oppose - Regulation Over Ban	Kratom, can be used in a safe and beneficial way. I oppose it's ban but support intelligent legislation and education, to provide consumers with a safe and reliable product.	

Norwalk	Iowa	2 - Oppose - Regulation Over Ban	Raw leaf Kratom has been my tea for 9 years. It saved my life. And many of my family members. We have a KCPA agreement with a lot of states. It's the 7oh extract that is causing the issue. Please don't make a huge mistake. Either put the key CPA in place crate and consumer protection act. Or put limit of 21 years of age or 18 and keep it behind. The counter are locked. Raw leaf crate is safe. It should be in grocery stores because it's coffee's cousin. As a matter of fact, coffee makes me more anxious and nervous than them calms me and lets me go on with my day without pain. I drink it as a tea from the powder. Know the difference do the science look into it. Thank you.	

Jacksonville	Florida	2 - Oppose - Regulation Over Ban	As a licensed nurse, a patient advocate, and a chronic pain patient myself, I strongly oppose Ohio Rule 4729:9-1-01.2, which would restrict or effectively ban mitragynine and all kratom-derived products. I have an intimate understanding about chronic pain due to my own experience with it. I also care for patients who have to fight to receive proper pain treatment. I know firsthand what it feels like to be dismissed, under-treated, and forced to choose between constant suffering or medications that carry serious risks and long-term consequences. For many of us, kratom and its primary alkaloid, mitragynine, gave us our lives back. It has provided meaningful relief, especially when conventional options failed or caused intolerable side effects. Mitragynine is not an opioid in the classical sense. It does not produce the same respiratory depression, sedation, or overdose profile seen with opioids. In fact, the pharmacology of mitragynine shows partial agonist activity at opioid receptors with a built-in ceiling effect that reduces overdose risk. The scientific literature and real-world experience do not support treating mitragynine as a Schedule I–type substance. Banning or criminalizing mitragynine will not improve public safety. Instead, it will: • Drive patients back to higher-risk prescription opioids • Push patients toward unregulated and potentially dangerous street drugs • Criminalize individuals who are simply trying to manage pain • Remove a safer alternative that has helped many reduce or eliminate opioid use As a nurse, I am deeply concerned about any policy that removes harm-reduction tools without providing a safer and equally effective alternative. We are still in an opioid crisis, I get it! You are afraid that mitragynine will add to the number of opioid related deaths, but it won't! Removing one of the few plant-based, lower-risk options people are using successfully is not an appropriate evidence-based public health policy. This policy is largely driven by fear, not facts. If Ohio has concerns about product safety, contamination, or misleading labeling, the solution is reasonable regulation, not prohibition. This includes: • Age restrictions • Product testing and purity standards • Accurate labeling of alkaloid content • Manufacturing and distribution oversight These measures protect consumers without punishing patients. As a patient advocate, I hear daily from people who say kratom gave them their life back — patients who can function again, veterans who found relief from chronic pain and PTSD, and patients who avoided opioids entirely because of kratom. As a chronic pain patient myself, I ask you not to take away a tool that allows me and many others to live with dignity, mobility, and independence. Ohio should not repeat the mistakes of the	

			past by banning a substance based on fear rather than evidence. Please reject Rule 4729:9-1-01.2 in its current form and pursue a science-based regulatory framework instead.	

Orlando	Florida	2 - Oppose - Regulation Over Ban	I believe the proposed Bill to ban kratom as a whole is not only misguided but reckless and dangerous. Kratom is a plant that's been utilized for hundreds of years if not longer and there are a lot of people that rely on it not only to help them stop the use of illicit street drugs and opiates but also for pain relief and a whole list of other things. 7oh unfortunately stigmatized kratom and undid any progress we've made over the past decade but that is not a representation of what kratom is in the people who rely on it urge you to not ban it outright!! Lots of other states have adopted a Kratom Consumer Protection Act or KCPA which insures safe practice and proper labeling and protection of both consumer and manufacturer and I think that would be a much better option than an outright ban which will leave people displaced, in pain and possibly push them back into active addiction. Please consider reversing the scheduling of this amazing plant which is 1,000 times safer than alcohol and many other over-the-counter medications for that matter. It is not the devil it has been made out to be in a lot of people are counting on you to sincerely look at the data and the research that proves the benefits and safety of this plant. We are counting on you to do the right thing for the people of Ohio!	

Salt Lake City	Utah	2 - Oppose - Restless Leg Syndrome	I'm a 50 year old "professional"who works for a Fortune 100 company who doesn't smoke, drink, or do drugs. Back in 2016 I read a news article about the DEA attempting to schedule kratom, describing it as a "legal opioid". As someone who suffered from migraines and had occasionally taken prescribed hydrocodone to treat them (with some success), I got curious about this "legal opioid" and ordered some off the internet. To my dismay, kratom was not like an opioid AT ALL. It had no euphoric effect, no "high", in fact it seemed as if I had taken nothing at all. It was as I suspected, the DEA was passing off false information to scare the public into supporting more regulations. That was until I noticed something else. In addition to migraines I also suffer from Restless Leg Syndrome (RLS), only for me it's not restricted to just my legs. It's spreads across my entire body giving me a tortuous feeling I cannot get rid of. To my surprise, I realized I didn't experience RLS after taking kratom. Fast forward to almost 10 years later and I have been taking raw natural kratom daily to prevent RLS, successfully. In addition, I no longer get migraines. At all. Kratom has been an absolute life saver for me, allowing me to live a normal life and function as a normal person without going through the relentless and torturous symptoms of RLS. If I stop taking kratom my RLS returns, so there is no doubt Kratom has been a successful treatment of RLS symptoms. As I said, there are no other feelings associated with kratom. No high, no euphoria, no feeling of "well being" often attributed to other "opioids", it quite literally just allows me to live the normal life I had before suffering from RLS. The fear mongering around kratom and its alleged dangers are just that, fear mongering. I suspect they are being pushed by the FDA and pharmaceutical companies, because an all natural God created solution to ailments cut into their profits. If Kratom were to be banned, or my ability to acquire it were otherwise hindered, I would quite literally die. I would not be able to live with the horrible and unbearable symptoms of RLS. If you doubt what I say, I encourage you to get online and order some raw natural Kratom from a reputable source and see for yourself. It's nothing like it's being described as.	

Madison	Wisconsin	2 - Oppose - Used to Treat Chronic Pain	Hi, my name is Jill. I'm a 42 year old mother of 3 and wife of a disabled veteran. I have been taking Kratom everyday since 2017. It saved my life, gave me something I didn't have for many years; quality of life. I suffer from chronic pain. Prior to 2017, I was on literal handfuls of pharmaceutical medications including opioids. I lived in bed. I suffered, I did not have a life. I couldn't take care of my children properly, I slept years of my life away due to medication mixtures and antidepressants. I couldn't do chores or be a productive member of society due to being so heavily medicated. I wanted to not be here anymore. I had a plan to not be here anymore when my kids graduated. I found Kratom leaf powder and all that changed. I was able to start doing things again, I was a better mother, I came off all the medications; including opioids. I started creating/making art (which I hadn't been able to do since high school), and eventually even opened my own small business. Fast forward to today; I still take Kratom, except I had to put my business on hold because now I have to take care of my youngest daughter. She became very ill in 2021 and almost died in April 2025. I am my daughter's full time caregiver. I am apart of an amazing community, and now a productive member of society. My son serves in the United States Navy, my daughter in law is a Federal Police Officer, and they just had their first child. Which I was able to be there for as well as help them for 3 weeks after she had to have an emergency c-section. I do not, nor have I ever gotten high from Kratom. I have never had hallucinating effects, had any disorienting side effects, or otherwise. Ever. I am not a drug addict or drug seeker. I take Kratom because it gives me a much better quality of life and gives me the ability to be productive for myself, the people I love, and the community I live in. Please, please stop the attack on Kratom, a plant that has helped thousands, if not millions of people like me. That Includes many of our veterans. The true Kratom leaf powder is no dangerous than Tylenol or anything you can get over the counter. It's no dangerous than any herbal product or vitamin that promotes healing. Alcohol is 100 times more dangerous than Kratom is or ever will be. Kratom saves lives and I am able to be here for my very sick daughter, my family, friend's, church family, community, and my beautiful newborn granddaughter because of Kratom. Thank you very much for your time. Photo is of my son and I on the day he graduated Navy RTC Great Lakes.	NL-002

Albuquerque	New Mexico	2 - Oppose - Used to Treat Chronic Pain	I am a buckeye relocated awhile back in NM. My health won't let me stay in Ohio during the cold, winter months. I have a collapsing spine due to congenital scoliosis and 3 compression fractures, along with the severe arthritis that go along with ruptured discs,etc and then I am also diagnosed with fibromyalgia, COPD, CHF, HTN, just a laudry list of chronic illnesses that many people who grew up in southern Ohio have, due to Ashland Oil factories that operated along the tri-state area back in the day. Those companies have been gone a long time but the after effect has lingered in many of us. And follows us to drain our energy and health, every day. I used to be on enough pain medication, sleep medication, muscle relaxant med, to keep me able to work as a nursing in long term care. I always loved the old people:-) But now, I AM the "old people".....and I suffer with severe pain with every step, with a hunched back, because I am not allowed to have all that medication anymore. When this opioid hysteria hit, I was still working, putting in a full days work. I struggled but I was doing it. My boss was happy with my performance. However in just a few months time? That all changed. Early retirement for me at age 59. At age 62? I discovered kratom via the Facebook group. The stories people were telling, even people who used it to get off opioid addiction! Was a miracle to me so I decided to try it. I buy the loose powder in the bag. And I take 2 tsps. of it every morning before getting out of bed and then again in evening. It helps me as well as my old pain medication did! Now granted, I am still in, I'd say, 50% of the pain each day, even opioids to not take away that much pain anymore because the damage in my spine is so advanced. What it gives me? Is the ability to get out of bed each day! It gives me the ability work on projects in the apartment each day, I live with my youngest son and his wife. What it gives me? Is being able to live here independently instead of a nursing home! I'm only 71 yrs old! Kratom is essentially keeping me out of the nursing home system! Please reconsider your stance on kratom! Kratom, in it's natural form which is what most people like me are purchasing and taking by the "toss and wash" method or they capsule it up and take it that way. Or as a tea. It does not make anybody "high" or give anyone an "euphoric" feeling, not the natural powder! However there is an unscrupulous company who has created a much more concentrated version of kratom, like brewing the tea and making it much more concentrated, then they put it in a little bottle, like those energy drinks. And that is what is hurting people, because they have concentrated it into a straight "7OH" product! That is what needs to be taken off the market! These unscrupulous people are putting a fake	

			product out on the market, taking advantage of regular, natural kratom which has been around in America for many decades now with no problems! Please please please reconsider, ban the 7OH products but leave natural Kratom legal, we beg of you!	

Douglasville	Georgia	2 - Oppose - Used to Treat Chronic Pain	Please don't ban kratom. It has saved my life. I was using advil and ruined my kidneys, Kratom helped me. I nolonger have to use advil. Please do not ban kratom; that would be such a dangerous mistake, and possibly a fatal one for some. Kratom has helped me and so many others that I know. I have friends who use it to help with pain relief (be it mild or severe), relaxation for bad anxiety or depression, support and help for my marine friend with PTSD, and I've first hand seen it save some of my friends from dying due to it helping with quitting substance abuse. I had a friend who was in a motorcycle accident, never did drugs before, got put on opiate medicine for too long, the medicine basically turned him into an addict and he eventually turned to heroin when he was taken off of the opiate medicine. He overdosed and almost died twice two years ago. Since then, he has begun to take kratom and it has changed his life. His wife and kids completely attribute him being back to his normal good self to the support the kratom provided him and his own mental commitment. Kratom has so many positive benefits and has saved so many lives. It is also extremely different from that 7-oh stuff which has been hurting people and causing them to act very similar to drug addicts. I've never seen natural kratom leaf and natural kratom extracts change anyone for the worse, but I've witnessed good people become "junkies" from taking high doses of that synthetic 7-oh stuff, thinking it was kratom, but it isn't and it needs to stop being grouped together. In conclusion, I fully support a 7-oh ban and all my acquaintances do too, but we even more fully support keeping natural kratom and natural kratom extracts legal and accessible. Thank you so much, and please know, if you read this, how important these two factors are for public health and general well being. Thanks again. Hello, I am United States Army veteran, and I have been using kratom for years to mitigate my pain. I have been in pain for a decade now and kratom is the only thing that helps. It's either that or opioids from the doctor and that's not the route I want to take. Please don't take this away from people. My pain is managed without having to get addicted to pills. People need this. Just tax it! This product has significantly helped me with pain and allows me to live a normal life. Banning this product will destroy my ability to live.	

			I would like to voice my opposition to this rule. I have been a kratom consumer for almost ten years. I do not now nor have I ever had issues with substance abuse. I take kratom every morning before I go to work, and it provides me with a moderate energy boost and helps sooth my achy body. Kratom does not "get people high", and in fact, I wholeheartedly believe it moderately improves my work performance as an attorney. The push to ban kratom is remarkably ill-conceived and a gross infringement on our personal rights. Please, please keep an open mind about this and familiarize yourself with kratom science. Kratom does not kill people, nor does it hurt any responsible consumer. Finally, I wholeheartedly support the ban on synthetic kratom products. These products are dangerous, but that doesn't mean you should also ban safe and effective natural kratom products. Please don't create several hundred thousand new criminals in Ohio. Passing this rule would be a terrible, terrible mistake.	

San Antonio	Texas	2 - Oppose - Used to Treat Chronic Pain	Kratom has given me my active life back. I have severe arthritis. Worst is my hip arthritis and I was in almost intolerable pain. The doctors told me to alternate Tylenol and Motrin. Motrin affected my kidneys negatively and my kidney function declined. It never recovered! I was then put on opioids. There were side-effects and I had to go to the pain doctor every month to get a refill and get drug tested. This was expensive with a copay to pay every time and time consuming. By luck I watched the movie Leaf of Faith and discovered Kratom. What a blessing. I read up on all the research. I started taking the ground leaf in capsule form from a company endorsed by AKA. I was able to taper off prescription opioids. Together with a healthy lifestyle (healthy nutrition, natural anti-inflammatories like turmeric) I have been off prescription medication for over 5 years now and am able to live an active lifestyle with very little pain. I have zero side-effects from Kratom. I never had to increase my dose. I can stop it when I don't need it and have zero withdrawals. All my lab work is great except for the kidney function from the Motrin doctors told me to take. If Kratom were illegal I don't know what I would do. I don't want to go back on prescription drugs with their side-effects. I also worry about chronic pain patients who are Kratom consumers and don't have health insurance. If Kratom were banned they may buy opioids on the street in desperation to treat their pain and die of pills laced with Fentanyl. Kratom is saving lives. Kratom is improving so many lives. Please keep it legal and safe. Texas has passed the Safe Kratom Act. I am in full support of safe use of Kratom. Research on Kratom is ongoing. Banning Kratom would have a very negative consequence for people and science. Thank you for allowing me to tell my story. My story is one of so many attesting to the benefits of Kratom. I will be very glad to give personal testimony if needed.	

New York City	New York	2 - Oppose - Used to Treat Chronic Pain	To whom it might concern, I kindly ask that you take into account my story with kratom. I am a sufferer of chronic pain and was on prescription medications for many years. As laws changed, my access to pain relief changed and I found myself lingering in the periphery, suffering in silence. I started to research any and all herbal supplants that could help ease my torment. In my search I happened upon kratom. I read what others had experienced, and hoped for the same. I did a lot of digging and found a well-respected company that stands by their transparency. I am happy to say that while I am still in some pain, it is manageable using a modest amount of kratom. I do not take it on days I don't need it, and my fatty liver is recovering from all the ibuprofen I was told to take for so long. I support transparency and regulation in the kratom industry. An outright ban would harm so many people like me, suffering chronic pain with doctors too afraid to treat with prescriptions for fear of prosecution. Thankfully, both the doctors and people like me, have an alternative that can be both safe and reliable. Most respectfully, Anonymous	
Wheaton	Illinois	2 - Oppose - Used to Treat Chronic Pain	We need a public hearing please. I use kratom like others drink coffee. It has relieved my arthritis better than anything else. Never a drug addict and I take the same amount, never more. No side effects. It also helps with my depression better than any anti-depressant ever has. My doctor knows about it and noted my blood pressure has gone down and all of my labs are good. Don't let a few bad apples take this live saving product away from responsible, tax paying citizens. I've done better at work actually and I have a great job. I will need to move out of Ohio if this continues.	
Reston	Virginia	2 - Oppose - Used to Treat Chronic Pain	I feel that it’s incredibly short sighted to ban natural kratom products. I’ve suffered with extreme back pain due to herniated discs for years and kratom offers me a natural pain relief that is both effective and safe. If it wasn’t for kratom I’d have to resort to dangerous pharmaceuticals or worse. There’s plenty of scientific studies out there that can vouche for how effective and safe kratom is in its natural state. I do think some of the extracts or altered substances should be scrutinized, but not the natural product itself as it’s proven to be safe	

Wheaton	Illinois	2 - Oppose - Used to Treat Chronic Pain	I have used natural leaf Kratom for over seven years as a holistic alternative to a slew of medications for fibromyalgia. Simply put, I take 3 grams in my morning coffee and 2 grams in tea before bed. While my previous medications aided with pain, the natural kratom leaf powder has been my only solution to general discomfort and my ability to sleep through the night. It has truly been a miracle from a lifestyle, financial and general well being standpoint. The issues with this natural leaf lies in the corner store derivatives selling concentrates and 7-OH alternatives with “proprietary” or disingenuous labeling. I urge you to leave the natural leaf alone and unscheduled, focusing instead on the products intentionally trying to deceive or manipulate people into thinking long it’s a healthy alternative for relaxation, when in fact it was created in some pharmacy unknown. Natural leaf powder from the tree needs to remain as readily available as any other tea or powder in the holistic section of a pharmacy. Sincerely, A 15-year tenured AVP at a Fortune 100 company that does not drink liver-killing alcohol, but does enjoy a bitter green kratom tea for comfort.	
Houston	Texas	2 - Oppose - Used to Treat Chronic Pain	While I am not an Ohio resident, I would like to advocate against this legislation that would ban the use of kratom. My wife has sarcoidosis and at one point was on prescription fentanyl and Percocet to manage her pain. Kratom allowed her to completely get off of these very hard drugs. Kratom taken in plant form is completely harmless. I can understand banning extracts but the plant material itself is harmless. If someone takes too much of it the only result will severely vomiting all of it back up. The stomach simply cannot take it.	
Woodland Hills	California	2 - Oppose - Used to Treat Chronic Pain	I have been taking natural leaf Kratom for 10 years for fibromyalgia, IBS, migraines and severe chronic nerve damage. It has allowed me to participate in my life instead of existing in pain. I have held a part time job due to the pain and nerve spasm relief it gives me. It is the most important tool in my chronic pain toolbox. Please keep natural leaf Kratom available for your citizens in Ohio. Thank you for your kind consideration of my request,	
Mansfield	Texas	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped me tremendously for my back pain and to completely halt any and all alcohol consumption	

Valdosta	Georgia	2 - Oppose - Used to Treat Chronic Pain	I am writing to you today on the behalf of all Kratom users. Please, no matter how you feel about this topic, please at least read my entire message, all the way to the end, before you move on. I was in the US Marine Corps from 2008-2012. Without going into a whole separate story, I suffer from chronic pain as a result of my time in the service. Of course the route that my doctors immediately took to try and manage this pain was that of opiate/narcotic painkillers. Without going into another long story, this spiraled very quickly into an addiction, an endless obsessive loop of needing more and more, higher and higher doses, to get the same relief. Like so many others, I eventually resorted to buying pills off the street because my prescribed dose just couldn't meet my needs anymore. One day in the summer of 2016 I discovered Kratom. Believe me that I did a ton of research on this weird sounding stuff before I tried it because I did NOT want to end up in another debilitating addiction situation. I learned that it is taken by simply ingesting the leaves (often ground into powder) of the Kratom plant. This plant is in the same scientific family as the coffee plant, and grown in similar climates. Once I felt sure that this was a legitimate, natural option, I decided to try it. I have now been taking kratom daily for almost 10 years. I regularly visit my doctor and consistently get healthy checkups and blood work. I am a fully functioning, productive member of society. I do not use marijuana, opioids, or any other substances and I very rarely consume alcohol. I am an industrial electrician and regularly work with dangerous machinery and high voltages, all while taking kratom daily. I have a beautiful family and many active/outdoor hobbies. I have no negative side effects from this plant other than 2 very manageable things ; 1) constipation (sorry if that's TMI but I'm trying to be as transparent as possible here). This was easily remedied by upping my daily water intake. And 2) minor addiction. PLEASE don't see the word "addiction" and react before you read the rest. When I say addiction, I mean no more than the addiction one can have to caffeine. And I mean that literally, as the plant itself is in the same family with the coffee plant. If I ever go a day without kratom, I may get a mild, irritating headache. That is all, it does NOT COMPARE to the absolute hell-on-earth of opioid withdrawal. Again I just want to be as transparent as possible because I think saying that it's "not addictive" is being somewhat dishonest. I also think it's very important to note that I currently take the exact same daily dose that I did when I began using Kratom years ago. The skyrocketing tolerance problems that come with narcotics are just not there with kratom. I will acknowledge that the potential for abuse does exist, but I	

			genuinely feel like this is an irrelevant point, as quite literally ANYthing, from sugar to alcohol to gambling, can be abused. I think it would be devastating to thousands of people to make this plant illegal. I cannot imagine if I couldn't use this medicine anymore. Even the thought of returning to narcotic prescription pills is genuinely terrifying for me, I could write an entirely separate message about the horrors of my life during that time. It may have managed my pain but the physical and mental side effects were devastating. I am nowhere near being alone on this, certainly not among veterans. So many lives have been saved from addiction with this plant. A plant! That undergoes no processing before it can be ingested and utilized as medicine. The leaves themselves, just as God created them, are all that's needed. I do want to address one more thing, and that's what some call "gas station kratom". THIS is where the problems lie. THIS is what should be regulated. "Gas station" or sometimes "head shop" kratom is often from shady, dishonest companies. This product is not lab tested, and there is absolutely no way to know what in the world is in those bags. I read online several times that lead was found in some samples of this low quality product! That is terrifying. A lot of these same companies also make kratom extracts, which are pills or liquids that have been processed into highly concentrated forms of the active substances found in the kratom plant. This is dangerous territory and unknowing customers in a gas station or head shop may think to themselves "well if it's legally sold here it must be okay". When I purchase kratom, I look for it to be lab tested, with the results available for me to see, as well as marked as a trusted vendor by the AKA (American kratom association). Kratom is meant to be used just as it grows and not processed into extracts or mixed with other things by shady companies. I beg of you, THIS is the type of thing you all should be looking into regulating. The plant itself is not the problem. When used in moderation I consider this plant a miracle medicine. It is not an exaggeration to suggest that this plant has saved lives. I will end by saying that I understand the fear and concern over this plant, but please look deeper into the issues in my last paragraph. I am certain you'll find that these are the guilty parties of all the horror stories. Please listen to the testimonies like mine, and please don't forget that everything that was put on this Earth was put here for a reason. Thank you for your time, E. Arnold (229)560-2695	

Kansas City	Missouri	2 - Oppose - Used to Treat Chronic Pain	Kratom has saved my life without it I have to use a walker and have to have help with bathing,cooking,daily life with Kratom my pain is low enough to allow me to use my cane and be able to take care of daily living activities	
Dallas	Texas	2 - Oppose - Used to Treat Chronic Pain	Dear Regulators and Lawmakers, I am writing to share my perspective on why natural, plant-based kratom should remain accessible to responsible adults. I work in one of the most dangerous and physically demanding industries, where the use of pharmaceutical pain medications is often prohibited because they can impair judgment and decision-making—putting both myself and others at risk. This is one of the key differences I have experienced between kratom and pharmaceuticals. In the four years I have used natural kratom powder to manage chronic arthritis, it has never impaired my judgment or affected my ability to work safely. I want to be clear that I support banning synthetic or chemically altered versions of kratom. However, natural kratom powder should remain legal and regulated for adults. It provides a safer, non-impairing alternative to opioids and prescription medications, which often come with serious risks and side effects. As an American, I believe I should have the freedom to choose safer, natural options for my health and well-being. I respectfully urge you to protect adult access to natural kratom while addressing legitimate concerns about synthetic products. Thank you for your time and consideration.	
Reston	Virginia	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped me to manage pain from arthritis and bone spurs with no side effects compared with prescription meds (Lyrica, Gabapentin, Tizanidine, to name a few). Follow the science and stop being influenced by Big Pharma!	
Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	Why is it as soon as someone finds something to help with pain they want to take it away from us. Why is the pain community constantly being treated like drug addicts and criminals. I try to go to work every day and have a family and a home to take care of. Without this help with my pain I will not be able to do these things, include the most important spending time with my 4 year old granddaughter is is autistic and has ADHD. Please help us. We just want to be able to do the things everyone else does, just without the pain.	

Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	I am opposed to any action by the Board to restrict or schedule natural kratom. I have used kratom responsibly for the past eight years while holding a full-time job and raising a family. My experience shows that responsible adult use of natural kratom can be done with a stable and productive life. Ten years ago, I was diagnosed with spondylolisthesis, a painful spinal condition. I tried every treatment imaginable to manage my pain while still functioning at work and as a parent. Anti-inflammatory medications did not provide nearly enough relief. Muscle relaxers, gabapentin, and other prescribed pain medicines left me drowsy, mentally foggy, and unable to drive or function safely as a parent. Surgery was talked about as an option, but it involved years of recovery with no guarantee of success. I continued searching for alternatives, like physical therapy, chiropractic, medications, and acupuncture, but none provided enough relief until I tried natural kratom. For the past eight years, I have used a consistent amount (about one tablespoon a few times per week), often with ibuprofen. This has been the only approach that allows me not just to function, but to remain active and engaged in my work and with my family. Kratom has been a life-changing tool for managing my pain responsibly. If natural kratom is scheduled or restricted through this action, I would be forced to choose between living in constant pain or becoming a criminal. No law-abiding Ohioan should be placed in that position, and I know I am not alone in this concern. Senate Bill 299, which is currently in committee, proposes common-sense regulation of kratom products — including safety standards and consumer protections — without criminalizing responsible adults. I ask the Board to allow the General Assembly and the elected representatives of Ohio to continue that work and pursue a regulated approach rather than prohibition. Please do not take away access to a natural product that has allowed me, and many others, to live functional and productive lives.	

Miami	Florida	2 - Oppose - Used to Treat Chronic Pain	I've had severe Crohn's disease since I was 10 years old. I've had three major surgeries, two of which removed parts of my intestines, and almost 10 minor surgeries. For almost thirteen years, I was experiencing excruciating pain and discomfort daily. I've now been in complete remission for about eleven years. After my disease went away, I decided to go back to college. I graduated with honors and now have a great job, a nice home, a comfortable living, and work at a prestigious company. Needless to say, I also pay quite a bit of taxes to contribute to our society. After taking Kratom for just over eleven years, I've realized it's essentially a close equivalent to coffee, but with some additional effects, including anti-inflammatory and mild pain-relieving effects. This plant has allowed me to be a healthy, normal person, whose now able to contribute to society instead of leeching from it when I used to need others to take care of me. Now I can not only take care of myself, but I can take care of my family. Please do not take this away from us, there's a lot of people out there just like me. In addition, please, please, please realize that 7OH and raw leaf Kratom are NOT the same. 7OH is absolutely an addictive drug that should be illegal. It is present in raw kratom leaf by such a minute amount that it has essentially no effect (less than 0.07%, or even less typically). If you are not already aware, when the FDA tried to go around our laws completely and go to the World Health Organization, even the WHO shut them down as there was NOT anything even close to sufficient evidence showing that raw Kratom leaf is any sort of an imminent health problem. Kratom leaf is saving lives, just like mine, not taking them or harming them. I urge you to take a look at the actual science being done by actual scientists without ulterior motives, and see that raw kratom leaf and 7OH are two entirely different things. Whereas Kratom leaf is more in line with coffee if it had mild pain relieving effects, 7OH is a DRUG. Raw Kratom leaf should only be regulated so far as adding an age restriction (perhaps 18 or 21) and making sure it is unadulterated, and thereby tested by a third party before distribution. Thank you in advance for your consideration, please help us save lives.	
Phoenix	Arizona	2 - Oppose - Used to Treat Chronic Pain	I am submitting this online document in the hopes that Ohio will be able to differentiate between Kratom whole leaf powder who has helped many people and the synthetic blends of Kratom. The synthetic blends of kratom, such as 70H are jeopardizing those people that use whole leaf powder responsibly for pain, as an alternative to other addictive pharmacological pain medications. Thank you.	

Ashburn	Virginia	2 - Oppose - Used to Treat Chronic Pain	I do not think this shall pass. Kratom had helped my arthritis pain, my hip and knee pain without relying on hard prescription drugs. I can simply make a tea when ever I'm feeling pain. This is much better alternative to addictive expensive big pharma drugs. They only want to get rid of Kratom because more people are switching to a more natural form. They are losing money. This will do more harm as more people will continue to abuse prescription drugs and a simple research into the states that have banned Kratom will show you how bad prescription drugs have become abused. If you ban this people will turn back to opioids this has got a lot of people off herion pain pills etc!! Kratom is a way less evil, without kratom overdose will rise, crime,theft will rise!!!! Not a good idea	
Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	Kratom has been the only support that has continued to be a lifesaver for the past 15 years!!!! I was rear ended by a semi truck, and spent the next few years in the western medical world. I was addicted to Vicodin and Percocet for those three years, and they abruptly stopped prescribing them to me. I was going through withdrawals without any furthering support. I couldn't sleep, and the constant pain and restlessness was eating at me every moment of the day. I was then introduced to Kratom by a very well educated person on this topic, and once I found the correct strain and dosage that worked for me, it became my miracle to survival. The injuries I sustained from that accident will be something I carry with me for life, and without Kratom, life is miserable. Please REGULATE and EDUCATE!!!! Banning Kratom is not the answer!!!!	
Daytona Beach	Florida	2 - Oppose - Used to Treat Chronic Pain	I oppose this ban on Kratom, I have seen many people i know and love helped by this healing herb. Ive seen people who were crippled by chronic pain given a new lease on life, in a way that other prescription painkillers had failed to help them. Ive seen friends struggling with Addiction and other mental afflictions similarly helped, its not a cure all, but Ive seen it save peoples lives in ways i didn't even think was possible. A ban would only take away this lifeline from people who are already struggling.	
Ashburn	Virginia	2 - Oppose - Used to Treat Chronic Pain	Kratom is the only pharmaceutical alternative to pain relief that I've found for my fibromyalgia. Without Kratom, I wouldn't be able to function in my everyday life. I've had no issues associated to this use. It has saved me so much pain and suffering.	

Miami	Florida	2 - Oppose - Used to Treat Chronic Pain	My name is Joshua C. I am a 37 year old father of 2, oil and gas commercial diver who had a near fatal accident that left me debilitated for nearly a decade. Ironically enough, I was nearly killed by a crane operator who was under the influence of an "fda, approved" pharmaceutical drug. To another ironic point, Long story short, I ended up being hooked on synthetic painkillers which I was prescribed to for my horrendous pain in which in turn seriously affected my quality of life. I was hopelessly dependant on these dangerous drugs that were being pushed to no end by the supposed "caretakers" and doctors/fda. In short I was successfully able to stop using these chemicals using Kratom. Kratom and to a lesser has literally saved my life from chronic pain that has left me contemplating suicide. Once I found kratom, my entire life took an upward turn and I was able to actually work and provide for my family. If you take away this life saving natural molecule, I feel that I will be back to square one and/or dead. Please, I urge you to NOT KILL ME OR TURN ME BACK INTO A DISABLED AMERICAN OR TURN ME INTO A CRIMINAL! My own children rely on me to be a present father who can provide for them. If you take away my only lifeline, you will harm MUCH more than just me. Please reconsider and do the research on 7oh. It is a PARTIAL AGONIST opioid unlike dangerous drugs like fentanyl or deadly pharmaceuticals that depress breathing and will kill you. This has been studied and has been the consensus by dozens of doctors. Please reconsider! If alcohol, which is one of only two drugs in the entire world that will literally kill you when you stop is legal, than so should kratom be legal. If it ends up that the people who are losing money (pharmaceutical companies and the fda) make this illegal, than alcohol should be banned immediately! Hundreds of thousands of people die a year because of alcohol. Perspective is everything. Kratom isn't deadly like you are being been told and that's unfortunately the information you are operating off of. You have the opportunity to lead the nation in properly regulating and creating a safer market for kratom consumers to exist within... but a ban is not that. A ban only harms people by forcing them to options that are less safe or return to the issues that led them to use the products in the first place with no other remedy, we will remember this when it comes time to support our legislators and their future endeavors Their are tens of thousands of us who will remember this come election. I urge you, PLEASE RECONSIDER. Do not force me back into a cripple. My family relies on me to be whole!	

Ashburn	Virginia	2 - Oppose - Used to Treat Chronic Pain	I am a retired carpenter and took kratom on a daily basis for chronic pain for over ten years. I had no negative side effects at all. I think it should be legal but the manufacturing and distribution be regulated to insure it is safe for consumers.	
New York City	New York	2 - Oppose - Used to Treat Chronic Pain	I strongly urge you to keep kratom legal. For me, it has been a crucial, therapeutic herbal remedy for managing chronic pain, allowing me to live a more active and fulfilling life. It is widely used by millions of americans as a safe alternative to highly addictive synthetic opiods that have ravaged our country. I believe responsible adults should have access to this option. I am fully in support of sensible regulation—such as testing for purity and age restrictions—to ensure consumer safety, rather than an outright ban that would harm people who rely on it and potentially push them toward more dangerous substances. Please choose regulation over prohibition.	
New York City	New York	2 - Oppose - Used to Treat Chronic Pain	Hello, I am an engineer and responsible member of the public employed in financial technology in New York. My family lives in Atlanta and your proposed kratom scheduling legislation will prevent me from visiting them. I suffered a severe femur injury in 2016 due to an accident, which led to hetereotopic ossification, a condition where bone grows in soft tissue. There's a ball of bone about 0.5" in size near my hip that looks on x-rays to be covered in needles. I've been a kratom drinker since the injury and it has enabled me to live a full life where I am a productive member of society. I would not be able to function and retain work without the plant's natural pain relief. Yes, opioid drugs also relieve pain. But I could not manage to live a productive, full life with a decade on opioids. In the hospital I was prescribed fentanyl and afterwards hydrocodone and oxycodone. Those drugs worked, but they also dulled my ability to think and perform at the office. The truth is I need something that doesn't incapacitate me. Thanks to this plant I have been able to live and find excellent engineering work. These proposed bans will criminalize well-meaning citizens - many of whom are employed productively and consume kratom and its extracts for legitimate reasons. I cannot imagine a more harmful approach than thoughtless criminalization. I understand some individuals exist who abuse kratom derived products. In my opinion, science based approaches that enable individuals to make an educated decision on their own accord surrounding kratom use are appropriate. I wouldn't mind if kratom were not sold far and wide in gas stations - much of the media surrounding kratom is coming from people who would never have found the plant if it were not marketed to them. Still, following what science has to teach us about kratom can	

			help avoid causing even more harm. I don't want to halt all family visits or have to choose between writhing in pain for hours each day and seeing my family. Without kratom, my pain would be so unbearable I couldn't function. Please don't cause more harm for those who already suffer so much. Sam	
Seattle	Washington	2 - Oppose - Used to Treat Chronic Pain	The Ohio government has no right to tell me or my family what natural products I choose to bring into my home. My wife has chronic pain from ankylosing spondylitis, crohn's, and fibromyalgia. The responsible use of kratom had dramatically improved her quality of life. I believe that the proposal to criminalize kratom does not have the welfare of Ohio's citizens in mind. In fact, I have found that responsible kratom use helps to alleviate pain and relieves anxiety. Regulate its use to adults only, but removing our choice is overreaching and wrong. Do not take away my right to access natural botanicals.	
Davis	California	2 - Oppose - Used to Treat Chronic Pain	Kratom saved my life. I'm a chronic pain patient whose life has been changed due to the benefits of this plant. Before I found Kratom I was home bound. Kratom gave me back my life. This plant is a safe choice for many suffering in chronic pain.	

Atlanta	Georgia	2 - Oppose - Used to Treat Chronic Pain	Hello. I am a resident of Ohio. Please do not ban the plant known as kratom. Kratom has helped me, and many others, tremendously. I don't want to take up too much of your time and I could list all the ways it has helped us. But the biggest thing for me was that over 10 years ago I was able to get a full time job and then promoted, twice, up to being a department manager with a team of 8-10 employees. Before that, I've had doctors prescribe me with several different medications and nothing helped the way kratom has. Also, it is very difficult to find doctors willing to even prescribe some medications. Which I completely understand. But then also factoring in health insurance difficulties for some. It's not as easy as it sounds to get help from doctors. I, and many others, believe that an outright ban would cause so much more harm than good. I feel there are far more responsible consumers of kratom out there than those seeking to get a "high". Possibly a compromise with more regulations and restrictions could be put in place, rather than just making it all illegal. Please reconsider the banning of kratom and thank you for taking the time to read this. Hi I am 51 years old and have been taking Kratom since 2012, it really has been a blessing since I was addicted to pain pills and it ruined my life after I detoxed I began using Kratom for my medical conditions and I function 100% now and I work all the overtime I can to I don't have any side effects like I did with opiates and I never want to go back on them! I believe Kratom is very safe and effective taken moderately! Thanks for understanding ! Kratom has only helped me and my family. Keep Kratom legal and keep America free to make their own health choices. When I was a 7 year old CHILD I was one of the first kids on the bus, woke up around 4:15am and got ready and made it onto the school bus everyday around 5:10am. I always laid down and slept for the 2 hour bus ride since I was one of the first kids on the bus everyday but one morning I awoke to Screeching tires and an immediate sudden impacting stop. It was foggy/wet and even though that bus driver had made this route 500 times before, she somehow forgot there was a T intersection and a giant oak tree ahead which you had to turn left or right. She hit that tree at 60+ mph and I got wrapped up in the metal framing of the seat which was in front of me. I've had neck problems my entire life, the school ended up paying for a surgery, chiropractor and MRI etc but after a year they denied to continue treatment and my parents were ignorant and did	

			not pursue justice for me as a child... By the time I was 18 and realized that I could pursue the school for medical issues the statutes of limitations had passed thus all my other surgeries and medications and chiropractic treatments I ended up paying myself and still continue to pay without help to this day. Multiple of my neck vertebrae fused together and has over grown causing me horrific neck pain and migraines all these years. Im almost 40 years old now and have spent decades on pain killers and neurological medications and surgeries all which only numbed the pain somewhat at best and caused severe horrific withdrawal symptoms at worst. I found pure ground up Kratom leaf over 10 years ago and within the first few months of taking kratom, this simple ground up leaf began helping me to slowly reduce the OxyContin and other medications with almost instant 70% relief. After about 8 months of reduction, I was completely clean. I had an appetite again, I could move far better than ever before, I got a job again, kratom has literally saved my life and the pharmaceutical company's HATE IT. A simple ground up leaf saved and changed my life all for the better. It's far cheaper and sometimes I actually forget to even take it. I know after a bit when the neck pain comes back with a vengeance that "oh I need to take 2 grams I forgot again" so I'm a walking case study proving it's not addictive. No one ever forgets to take OxyContin ever… I forget to take kratom multiple times during each week because ITS NOT ADDICTIVE! Don't ban kratom. If you wanna ban something then ban alcohol or tobacco or corruption in government and large corporations. Kratom only helps people. To top everything off, I used to get sick when the weather changed, every year but after starting Kratom, I haven't even gotten a simple cold in 10 YEARS!! Explain that?!?! Keep Kratom legal… Put your time into stopping corruption… Pure Kratom leaf does NOT harm. It helps!	

Charleston	South Carolina	2 - Oppose - Used to Treat Chronic Pain	Kratom statement 1/16/26 My name is Brian Kosar. I am a 56-year-old male from Moncks Corner, SC. I have been a chronic pain patient for more than 12yrs. After a 20-year truck driver career, I was out of work due to chronic arthritis and other chronic pain issues. Pain and a lifelong struggle with anxiety caused me to spend most of my days in bed, wishing for better options than what I was facing. After no longer being able to return to work due to my permanent disability ruling nine years ago, the outlook for me was pretty grim. Thankfully, approximately 8 years ago, I found kratom. Taking kratom regularly has allowed me to reduce my morphine usage almost entirely and regain some of my pre-disability quality of life. More importantly, it turns out that taking Kratom has lowered my anxiety substantially-anxiety which for many years was crippling. In short, it has given me a better quality of life. While I'll never fully regain the abilities I once had, I do get to look forward to a much improved quality of life. I credit a big part of that to Kratom. Please don't ban natural leaf Kratom, it has been used safely for thousands of years, unlike the super-synthetic drugs popping up in smoke shops that are calling themselves "Kratom" but most definitely are not. Please learn the difference and reconsider the ban on the natural leaf Kratom, which is no stronger than caffeine and just as harmless.	
Town Creek	Alabama	2 - Oppose - Used to Treat Chronic Pain	I don't live in Ohio, I was abandoned by my pain dr in Tennessee. Kratom is the only thing that is keeping abandoned pain patients from committing suicide. The way these states have demonized our drs & opioid medication is shame. Now states like this are taking away one of the only options pain patients have to get some relief from their chronic pain. Why are states like Ohio trying to kill off the weak & disabled ?? What is the end game here ? Kratom is a natural substance to help chronic pain. It is not the evil you all make it out to be. Please do not take away one of the only options pain patients have to control their pain because government overreach & ripping people off their FDA approved opioid medication.	

McMinnville	Oregon	2 - Oppose - Used to Treat Chronic Pain	There needs to be an open meeting with accurate accountable data. The meeting notes from 1/6/2026 were filled with inaccuracies. Natural kratom is safe and highly effective for pain management and mood stabilizing. It has a natural over consumption regulator. If you take too much your body will expel it. Unlike synthetics and opiates. There aren't any harmful consequences. You aren't going to potentially die. The bill banning the synthetic products of 7oh , pseudo, and upcoming pseudo alkaloid products is correct. They are incredibly addictive and harmful, but they are NOT natural kratom. Kratom has given me my life back. I was living in so much pain there was no quality to my life. Kratom has brought the ability to move freely with my pain managed. It has done the same for millions of there's. Your decision might influence other states and that's not right. It's throwing away a safe natural option for relief for your state and potentially mine. It would be a critical error to turn good Ohio citizens into criminals for trying to use a safe leaf to improve the quality of their lives. I have friends there that are good people. They shouldn't have to suffer when a safe, natural plant is helping them stay away from deadly substance, manage their pain, stabilize their moods, lead a productive happy life, and feel better in general. It is important to separate the synthetic from natural. They are NOT the same and should be discussed at a public meeting with representation for both sides. Thank you. There needs to be an open meeting with accurate accountable data. The meeting notes from 1/6/2026 were filled with inaccuracies. Natural kratom is safe and highly effective for pain management and mood stabilizing. It has a natural over consumption regulator. If you take too much your body will expel it. Unlike synthetics and opiates. There aren't any harmful consequences. You aren't going to potentially die. The bill banning the synthetic products of 7oh , pseudo, and upcoming pseudo alkaloid products is correct. They are incredibly addictive and harmful, but they are NOT natural kratom. Kratom has given me my life back. I was living in so much pain there was no quality to my life. Kratom has brought the ability to move freely with my pain managed. It has done the same for millions of there's. Your decision might influence other states and that's not right. It's throwing away a safe natural option for relief for your state and potentially mine. It would be a critical error to turn good Ohio citizens into criminals for trying to use a safe leaf to improve the quality of their lives. I have friends there that are good people. They shouldn't have to suffer when a safe, natural plant is helping them stay away from deadly substance,	

			manage their pain, stabilize their moods, lead a productive happy life, and feel better in general. It is important to separate the synthetic from natural. They are NOT the same and should be discussed at a public meeting with representation for both sides. Thank you.	

Miami	Florida	2 - Oppose - Used to Treat Chronic Pain	I am a 69 yr-old wife, mother, grandmother, and great-grandmother. I have never had any addiction issues. I've been a compliant chronic pain patient and had been stable on the same prescription pain medications for well over a decade until about 8 years ago. I followed all the rules and everything that'd ever been asked of me. I signed pain management contracts, submitted to monthly urine screens, and random pill counts. I keep my medications and supplements locked in a safe that's bolted to a shelf. I've never lost a single pill or asked for an increase in dosage. In fact, as my condition stabilized, I voluntarily reduced the amount I was originally prescribed without being asked to do so. Prior to 2005, I was also a busy computer professional. Then I was diagnosed with bilateral Neurogenic Thoracic Outlet Syndrome (NTOS). NTOS is a painful and disabling repetitive strain injury that causes chronic muscle spasms in the neck and shoulders. These spasms pinch nerves and arterial flow in the brachial plexus area under the collarbone. The higher my hands go above lap level, the worse the pain gets until my hands actually go numb and I lose pulse. I was judged not to be a good candidate for rib dissection, the common surgical intervention for this disorder. In order to try and plateau the progression, my doctor advised early retirement and I was forced onto SSD. I was devastated by the loss of the career that I worked so hard to build. Thankfully, my first pain management doctor helped me immensely by teaching me how to manage my pain with various strategies, not just throwing pain pills at it as I paced my activities and learned my limitations. Although I was not psychologically addicted to prescription opioids, my body grew physically dependent on them and any delay in getting a prescription filled in a timely manner caused debilitating withdrawal symptoms to set in within hours of a missed dose. As the opioid crisis escalated, these delays started becoming the norm, not the exception, and it was frustrating because they were entirely out of my control. The frequent trouble I experienced in getting my legitimate prescriptions filled eventually became intolerable and caused unbelievable anxiety. It was during one of these delays that I was introduced to Kratom. I did a lot of research and located sources for high-quality, lab-tested products (not sold in gas stations). It took some experimentation to find which strains were effective for my circumstances, but eventually I found a few fantastic ones that worked wonders. I was shocked to find that plain leaf Kratom worked so well. I eventually decided to totally discontinue both the ER Morphine and the IR Percocet I was prescribed and that I'd come to rely on for so many years. This was all with my pain management doctor's blessing too,	

			btw. What I did not fully appreciate was just how much the pain medications sapped my energy and motivation. Plain leaf Kratom allows me to function on a whole new level without impairment or the troublesome side effects and tolerance issues of opioids and benzodiazepines. I've been able to reduce the amount of antispasmodic medications that I need as well. These natural solutions have the added benefit of boosting energy and mood, which is really important for those of us facing chronic illness. My husband, who was also a chronic pain patient from a failed back surgery, had been bed-bound and in a wheelchair for 2 years prior to having a double lung transplant in 2020. His transplant was a success but he passed away four years later from other complications. I was his primary care giver. I know that without a doubt, I would not have had the stamina to see him through the pre-testing process to get him listed, take care of his needs after the surgery, and his assist in his recovery without Kratom onboard. I needed to be able to be active and alert in order to help him when he needed me. Plain leaf Kratom helped me to manage daily chronic pain as I cared for my husband with focus and stamina much better than any pain medications I've used over the years. There is absolutely NO impairment! Chronic pain patients accept that we'll never be entirely pain free and that is ok. We are just trying to stay productive and as active as possible. It's not fair that some are being force tapered or outright abandoned by their doctors due to the opioid hysteria. Too many of those that are lucky enough to still have pain management are shamed and treated like addicts every month as they submit to humiliating monitoring regardless of how long they've proven themselves to be perfectly compliant patients. If there is to be any hope to help solving the opioid crisis, alternatives like Kratom need to be fully explored, not scheduled out of reach. Chronic pain patients need and deserve more options, not less. It's not right to deny our right to make informed decisions about how to manage out healthcare. The stigma and roadblocks need to end once and for all. Pass the Kratom Consumer Protection Act! Chronic Pain Patients' Lives Matter too!	
Pensacola	Florida	2 - Oppose - Used to Treat Chronic Pain	Kratom has been a lifesaver for me. I've Rheumatoid Arthritis and I was having so much pain and was unable to use my fingers and hands. Kratom has provided a way for me to continue to work. Thank for your help.	

Huntsville	Texas	2 - Oppose - Used to Treat Chronic Pain	I'm a 47 year old, responsible tax paying adult. I have used kratom for 10 years now to help me mitigate chronic pain from a hip that needs to be replaced. It has been a godsend and has allowed me to work and provide for my family without the need of harsh, pharmaceutical pain meds. We should have the right to decide for ourselves as free American citizens if using this or any natural product is right for us. I would appreciate not being deemed a criminal because I choose to use a natural botanical product to improve my quality of life. Common sense regulation including proper labeling, cGMP manufacturing with lab testing to ensure purity, and age restriction to make sure that only responsible adults are legally allowed to purchase kratom products is the logical and sensible way forward.	

Simi Valley	California	2 - Oppose - Used to Treat Chronic Pain	Hi, my name is Scott! Kratom has helped my chronic spinal pain enormously with no notable side effects. I wish I could say it has made me as mobile as I was 20 years ago, but unfortunately my degenerative conditions are far too advanced which landed me on permanent disability in 2012. However, kratom helps take the edge off of my pain, which is certainly better than the synthetic opioids, which I was previously prescribed by doctors, which were only effective for a few months and then it was very painful to tapering off of them. That is really saying something! Another great advantage has been the fact that if I need to stop talking Kratom, I have never experienced any deleterious effects whatsoever, when doing so. Even after stopping for a week at a time, which would have been physically impossible with Oxycodone or any of the opioid family of pain medications. I hope and pray that this gift from nature is never allowed to be taken from the hands of those that rely on Kratom for a happier, and healthier state of mind, and body. It has been a heaven send! The FDA and other false entities are circulating false information on their website about Kratom and they know it, as they're under pressure from big pharma to have it banned, so we are fighting hard to stop that. Regulations which protect natural leaf Kratom should be both created and protected where nessary. I hope you'll understand and can help me, as well as millions of other Americans who have no other alternatives to help with their chronic pain. Kratom is not the terrible thing it's been made out to be. If it were, I wouldn't have touched it. Thanks so much for your time and consideration! Sincerely, Scott Lohr Hi, my name is Scott! Kratom has helped my chronic spinal pain enormously over the past 8 years with no notable side effects. I wish I could say it has made me as mobile as I was 20 years ago, but unfortunately my degenerative conditions are far too advanced which landed me on permanent disability in 2012. However, kratom helps take the edge off of my pain, which is certainly better than the synthetic opioids, which I was previously prescribed by doctors, which were only effective for a few months and then it was very painful to tapering off of them. That is really saying something! Another great advantage has been the fact that if I need to stop talking Kratom, I have never experienced any deleterious effects whatsoever, when doing so. Even after stopping for a week at a time, which would have been physically impossible with Oxycodone or any of the opioid family of pain medications. I hope and pray that this gift from nature is never allowed to be taken	

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Conway	North Carolina	2 - Oppose - Used to Treat Chronic Pain	I'm a 60 year old woman on disability due to back issues and a seizure disorder. I've been seizure free for approximately 10 years now.,I tried Kratom for the first time right under 6 years ago l. I'm also a former addict who has had issues for my late 20's and have been clean only to find myself using again with anything available to ease all types of pain in my life. I am now totally clean and Kratom has kept me here.,I no longer have any desires to use and I'm pain free with no need for pharmaceutical pain medications. I believe it has saved my life and I'm asking whole heartedly for you to think closely about what I'm saying. I am asking with all sincerity that you do not destroy many lives and this would effect countless numbers as you know. Thank you for your time. Sincerely. Patricia Pomeroy	
Weyauwega	Wisconsin	2 - Oppose - Used to Treat Chronic Pain	What can I say, natural leaf Kratom saved my life. I have a cervical radiculopathy, resulting in two surgeries, both anterior and posterior. Four years I was on opiates and totally incapacitated. That a physician friend told me about Kratom in its natural state, not an opioid, but a Southeast Asia plant that helped nonetheless. No longer did I feel strung out or feel anxious when medication wore off. In the end I was off all my pharmaceutical medication and now I only take kratom occasionally when I have a flareup. There's no doubt in my mind that this plant when used responsibly, tested with safety measures in place, it can be used to help adults with their well-being. I understand safety but targeting the plant itself is not the answer; however, targeting 7OH synthetics would be. Even the FDA and HHS stated they were not targeting the plant but the synthetic 7OH. What bothers me the most is seeing things that might seem small but affect liberty and our ability to make our own decisions for our own wellbeing. Thank you for listening.	
West Plains	Missouri	2 - Oppose - Used to Treat Chronic Pain	Green powder leaf kratom gave me my life back...after pharmacudicals took it....banning it is horrible idea..regulate 7 oh as its not even Kratom.	

San Antonio	Texas	2 - Oppose - Used to Treat Chronic Pain	I am devastated by this ruling. I am some with autoimmune and neurological chronic illnesses. Due to this , I am constantly in pain. I do not wish to be doped up 24/7 on narcotics and I do not want to take Marijuana in any form, as I cannot function properly on it as a mother of 2 small children and running a household and at home business. Kratom has been instrumental in me being able to function as a mother, wife and productive member of society. Also, I know many people, besides myself are in a similar boat ... and I fear having the only thing that gives.them relief taken away, you will have a larger influx of people that turn to other means of self medicating, making the drug epidemic swell in our great state. Which is the last thing any of us needs ... including those in government. So, I beg of you .... please take pause and think about what you are doing and who this will be affecting. I pray you find in your hearts and minds to help those of us that will have nowhere to turn or the unfortunate people, that find a way to turn ... but, down a dark dark path. Thank you for your consideration. Hope whoever is reading this has a good day.	
San Antonio	Texas	2 - Oppose - Used to Treat Chronic Pain	Here we are again…. Kratom saved my life from addiction to FDA-approved, MD-prescribed and MD-monitored opioids. Opioids cost me two marriages, and they stopped my breathing multiple times. I hurt constantly, everywhere, and I have for almost 5 decades. Kratom brings me just enough relief that I can do things, without any side effect greater than constipation. I use exercise to help. I push my wheelchair for 30+ miles, every week, because my pain is safely managed with responsibly taken, lab-tested pure kratom leaf. Amazing. Kratom totally saved my life, literally. And now you're taking it away. Why? No medical value? I disagree. No regulation? I disagree. Unsafe? My doctors disagree. Some people are using it to get high? That sounds like a them problem to me. It's almost like people living in chronic pain don't matter to Ohio's Board of Pharmacy… Heartbreaking. PS I'm still not going back to opioids, cuz those FDA-approved pills are addictive and they stop you from breathing. Ridiculous…	
Los Angeles	California	2 - Oppose - Used to Treat Chronic Pain	kratom has helped me live a functional life after a bad car accident for the last 10 years we should follow the science i support sb299	
Los Angeles	California	2 - Oppose - Used to Treat Chronic Pain	Keep Kratom accessible. It's helped me manage pain for years.	

Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	In the 1990s, I was in an industrial accident all but crushing my right leg from my foot up to my knee. During the time I was treated and going through physical therapy, I was prescribed Vicodin. I was at a point I was taking one tablet every three hours. Obviously I became somewhat addicted to these, and the doctors had no problems handing them out like candy. There was a change in doctors at the facility and upon seeing him, he noticed that my Vicodin usage was very high, and that I was being treated for the wrong thing. I struggled trying to wean off the Vicodin but eventually managed. Throughout my struggles, I was able to obtain Vicodin and other pain medication from different sources. Alcohol helped as well. Several years passed, and I needed a wisdom tooth extraction. Again, prescribed Vicodin. This time it did not help at all. I asked for additional medication but this time the doctor would not allow me more. Fortunately I was able to obtain pain medications from different sources. About eight years ago, I had a hernia operation. Pain was indescribable. Pain medication was not working at all. I remembered the problems I had in the past, and this is when I discovered Kratom. Natural kratom, such as the laboratory tested products from Happy Hippo Herbals, proved a solution for me, without the addictive properties of Vicodin and other opiates. I have noticed a huge difference with my pain management and quality of life. I am glad to see that the Governor and Ohio BOP has recognized a difference between natural kratom and the synthetically modified 7-hydroxymitragynine (7-OH) and synthetic kratom-derived products. I support the removal of synthetic and 7-OH products from the marketplace and recognize this action as an important step toward separating unsafe synthetics from kratom products. Natural kratom should not be on the list to be scheduled. There are scientifically proven facts that natural kratom is a much safer and non addictive product. I am seeing that the entire regulatory board unanimously voted to schedule natural kratom without even asking questions. How is this? What is it that an unelected board knows, that the FDA commissioner, Secretary of Health and Human Services, and other international organizations don't? The board is looking at outdated studies without looking at scientific evidence. Scheduling natural kratom would lead to immediate criminalization of otherwise law abiding citizens. There are tens of thousands of Ohioans who use natural kratom on a regular basis. Scheduling kratom would force us to obtain substances of unknown origin from the black market. I am VERY disappointed that the legislature would allow this scheduling and question the recent legalization of marijuana..	

Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	I am a chronic pain sufferer with Fibromyalgia and Sjogren's Syndrome. In addition, I have Spinal Canal Stenosis that contributes to my pain and I have a clinical depression diagnosis. Kratom (natural kratom) has helped me so much in the areas of pain and mood and has kept me from having to take strong and potentially addictive prescribed pain medication. When I discovered kratom, I researched everything that I could about it and gained knowledge through scientific research studies and lab testing results. I also researched the kratom vendors and where to purchase pure natural lab tested unadulterated kratom. I quickly discovered the American Kratom Association and realized that they exist to protect kratom consumers by working with reputable vendors who only sell pure lab tested kratom products. They also lobby to keep pure kratom products legal and have persuaded and convinced many states to accept and implement the Kratom Consumer Protection Act that serves to ensure that the proper kratom vendors are available to the public and the non-vetted vendors who sell adulterated kratom products are outlawed. There is a lot of misinformation out there about Kratom, and the synthetic 7-OH products and tainted products are the big issues. Many of the public are not aware of the difference between synthetic kratom products and pure products. They choose to blame and demonize all kratom, when in fact the synthetic adulterated products are the issue. The science is out there if people would choose to acknowledge it. Even the FDA has recognized the science and the differences between synthetic or tainted kratom and natural pure kratom. Both the Secretary of Health and Human Services and the FDA Commissioner have made it clear that natural kratom leaf products are not the focus of federal enforcement efforts. Why is Ohio choosing to ignore this? The Ohio Board of Pharmacy recently recognized the distinction between synthetic and chemically manipulated 7-OH products and the board scheduled these synthetic products in an emergency ruling. And now in an inconsistent and unjustified move, the Board is trying to extend that action to natural kratom leaf, despite the absence of credible scientific evidence supporting such a step. Please adopt the Kratom Consumer Protection Act and that will safeguard against these synthetic products being sold to the public. Keep the 7-OH kratom products illegal and please keep the natural pure kratom available. Thank you.	

Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	Hello! Kratom has been the only support that has continued to be a lifesaver for the past 15 years!!!! I was rear ended by a semi truck, and spent the next few years in the western medical world. I was addicted to Vicodin and Percocet for those three years, and they abruptly stopped prescribing them to me. I was going through withdrawals without any furthering support. I couldn't sleep, and the constant pain and restlessness was eating at me every moment of the day. I was then introduced to Kratom by a very well educated person on this topic, and once I found the correct strain and dosage that worked for me, it became my miracle to survival. The injuries I sustained from that accident will be something I carry with me for life, and without Kratom, life is miserable. Please REGULATE and EDUCATE!!!! Banning Kratom is not the answer!!!!	
Los Angeles	California	2 - Oppose - Used to Treat Chronic Pain	The pain from my degenerating disc in my lower back, made me envision a future I did not even want to be a part of. Kratom did what I never thought possible –Kratom gave me pain relief and in a literal sense…gave me my life back. I have suffered from a degenerating disc since high school. I used physical therapy, a healthy diet, exercise, and chiropractic care to manage this pain. Even with this routine, I would experience 4-7 days of extreme pain every 1-2 years. As I became older these periodic pain episodes became more frequent and lasted longer. During a particularly long 5-month pain episode I was not able to walk, sit, stand, or even lay down without mind-numbing pain. My doctor confirmed the pain was due to a worsening degenerating disc between my L5 and S1. I tried EVERY therapy, Physical therapy, muscle relaxers, inversion, stretching, but nothing seemed to help. And my only option was to manage the pain and consider 'surgery' even though the success rate is 50/50 or worse?! In order to manage the pain I had stopped playing all sports, I had stopped exercising, stopped going out with friends…this is when I started to get depressed, angry, and no longer envisioned a future I wanted to be a part of. In Dec of 2016 I heard about and tried kratom for the first time. Kratom is the dried leaves of a tree that grows in Southeast Asia, and is most similar to coffee and tea. In short, kratom was a miracle!!! When I consume kratom, my pain is reduced from a 10 to a 2-3 and I am able to get my life back. Exercise, yoga, spending time with friends and family! Not only does kratom help with the pain immediately, but it has allowed me to heal my back. 3 years ago I used kratom 3 times per day. Now, as little as 3 times per month (depending on my pain levels). I know there is a lot of confusion about kratom, especially the 7-OH products masquerading as kratom. Please follow the science of kratom, Dr. Chris	

			McCurdy, University of Florida, Dr Kirstin Smith, John Hopkins and other researchers. We need to help people in pain. If you'd like to learn more about my story, please let me know. Regards, Alexander Karp	
Los Angeles	California	2 - Oppose - Used to Treat Chronic Pain	Kratom has been critical in helping me with pain pill addiction..I don't use any pain medication now only Kratom..for me it has been miracle..	

Orlando	Florida	2 - Oppose - Used to Treat Chronic Pain	Kratom changed my life by managing my chronic pain without the fog of traditional opioids that gave me no relief from my Neuropathy, ME/CFS pain, and my CRPS Pain. Which I have suffered with for years. I was finally diagnosed by the Minnesota Mayo Clinic. Mayo Clinic does not advocate for kratom use. But kratom is a natural botanical has been used for many centuries that deserves to be researched and regulated, not banned. It has no greater risk of misuse than alcohol, tobacco or Marijuana. Probably less in most cases. I personally, do not drink or smoke Marijuana. The kratom leaves me with zero desire to do either. Kratom gives me relief from nerve pain than any of the other medications that my doctors have tried. Give me the ability to live as close to a normal life that my disease/ conditions will ever allow for the rest of my life. If doctor prescribed medications, including narcotics do not work for some types of nerve pain, and Kratom is made illegal what do you think people will do in order to bring relief? Hard illegal drugs? Possibly suicide? Please. Show compassion for people with pain that never ends. This plant has potential to improve quality of life, and even save lives when used responsibly. Ban that 7-OH crap. Not the natural leaf!	
Tampa	Florida	2 - Oppose - Used to Treat Chronic Pain	I'm a 77 year old, 13 year Kratom consumer. Safe, regulated Kratom allows me to stay active and alert in my daily life. Prescription opioids — IF they were even available — are commonly not prescribed, even after major surgery these days, I am told. Cleanly-produced Kratom is a safe, very affordable product for those who use it sparingly and responsibly, and it is a blessing for seniors like me who want gentle relief without the mental effects of cannabis. Please don't criminalize citizens, like me, who might enjoy visiting friends in your state some sunny day! Thank you!	

Baltimore	Maryland	2 - Oppose - Used to Treat Chronic Pain	(wasn't sure if my review posted please forgive me if this is a duplicate response) I am against the rule of banning Kratom and or 70h.. I currently suffer majorly from a botched pelvic floor surgery, I have drained my bank account with ENDLESS doctors visits, multiple times. With no solution... Kratom leaf has helped me immensely... Banning this wonder supplement will absolutely lead to a black market (even less regulation) and also push people back towards the streets.. currently as it stands there is a massive amount of misinformation about Kratom and even more misinformation out there about 70h.. there simply isnt enough space for me to dive deep into this specific topic. But a ban even in a different state from my own is a total loss.... I have been using Kratom for multiple years to treat what doctors and other meds could not even touch.... Kratom has also helped me be completely abstinence from alcohol.. something that ruined my life and those involved in it for almost 20 years... I think it's ridiculous that rules like this are proposed when what the rule is based on is mostly misinformation and confirmation bias.... Kratom nor 70h are dangerous in any comparison to full opioid agonist. They do not share the same respiratory depressive profile. If anything a compromise should be met to hold these online 70h vendors to standards, possibly a limit on how much 70h can be pressed into a pack. But what im seeing is plane leaf come under attack..... Really you imo y'all should slow down and realize your about to make the "problem" much worse.. I have yet to see one quantifiable death from 70h.. I do see a bunch of misleading articles that are just that....	
Kansas City	Missouri	2 - Oppose - Used to Treat Chronic Pain	Kratom has helped control pain and is a safe alternative to opioids. Doctors yanked everyone off opioids cold turkey back in 2016 after CDS put out the letter of concern. This created a vacuum with patients who’ve been on prescribed opioids for many years with most turning to heroin and some turning to safer, non euphoric methods like Kratom. My bother was an example of this as he turned to heroin that had fentanyl in it and he died in 2018. He was a great, loving father and brother and he provided for his family as a functioning member of society, working as an electrician. He had turned to suboxone but they cut him off as he had to be seen every other week in person with a 6 hour round trip commute. I’m a disabled war veteran and am in same boat but I refuse to turn to illegal street drugs for the Post Acute Withdrawal Syndrome and Kratom doesn’t make me impaired or euphoric, but rather as close to normal as I was before many years of taking prescribed hydrocodone that doctors ensured I take 120 pills per month. Please consider	

			this drastic move as I promise another vacuum will be created in the ba of kratom and your state will see a large uptick in overdose deaths and DUIs as pain patients seek relief for pain by other means.	
New Caney	Texas	2 - Oppose - Used to Treat Chronic Pain	I used to take vicodin for back pain because of bulging disc. I also used to drink nightly. Since finding kratom I am off of the pills completely and I may drink 2 beers a month with a meal. I only take natural leak kratom that is sourced direct from farmers and lab tested. The company that supplies it is a small business. I use kratom daily. I purchase nearly a kilo per month. I have found no negative side effects no hangovers no impairment. Please don't take this from people that need it. Without this all natural and effective pain reliever people may feel forced to get unethically sourced kratom illegally or turn to Other Drugs.	
Leesville	Louisiana	2 - Oppose - Used to Treat Chronic Pain	Iam commenting of behalf of a family member whom takes natural pure leaf kratom. Instead of Tylenol or ibuprofen kratom is better for his stomach and organs considering he is a type 2 diabetic. He's been taking this supplement the past 10 years or so and in that time he's made some diet changes was able to beat diabetes liver scores look better . The supplement is not a miracle cure or for pain only similar to Tylenol or other over the counter medication, but less harmful to organs according to my labs. I respectfully ask you to please consider the science behind natural kratom and it's benefits,please don't make every day law abiding citizens felons by putting natural kratom in the same category as synthetic kratom because they are not the same . Synthetic kratom is fairly new while natural kratom has been used for hundreds of years in Asian countries. I Urge you to only consider the facts and not opinions of those whom have there own Agenda to push and not the interest of the citizens	

Seattle	Washington	2 - Oppose - Used to Treat Chronic Pain	Good morning, I OPPOSE the Classification of Mitragynine as a Schedule I Controlled Substance. My family has safely used natural Mitragynine/kratom leaf for chronic pain management and anxiety disorder for 5+ years to and to support healthy sleep. Thank you for listening. This is very important for us.	
The Bronx	New York	2 - Oppose - Used to Treat Chronic Pain	I have used kratom for many years. I have some serious orthopedic issues and have been prescribed a variety of pain medications by my doctors. Every one of the medications my doctors gave me had serious side effects that either caused other medical problems or impaired my ability to work safely. Kratom on the other hand has been extremely effective without harsh side effects. I normally get blood work every six months and have not had any negative changes in my blood work that could be attributed to kratom and its been about eight years now. I have stopped using Kratom several times over the past 8 years for periods of one to six months and never experienced any physical withdrawal symptoms. Kratom has never negatively effected my ability or desire to work, if anything it has helped motivate me to work more due to lack of pain. I also believe kratom has an antidepressant effect which is perfect for people in pain. I have used the entire range of doctor prescribed pain medications and have found that Kratom is the only thing that had very good results with minimal side effects. I can not understand why anyone would want to withhold such an effective substance from the many people who get so much relief from it. There is some possibility it could be abused but when Kratom is fairly compaired to alcohol the dangers of alcohol make the comparison almost laughable. If governments really want to protect taxpayers in regard to kratom the first thing should be regulations controlling the purity of the product. The second thing should be clinical trials researching the long term health effects on humans. Third substances made in a lab designed to mimic the effects of kratom in a highly concentrated form should not be lumped together in legislation dricted toward Kratom. Such products should be dealt with separately as they have no value as a supplement and are intended as recreational drugs. In closing I believe that Kratom does not pose a serious or urgent threat to the public and is a great help to many who would be otherwise have to rely on less effective ,health damaging or addictive pain medications.	

Florence	South Carolina	2 - Oppose - Used to Treat Chronic Pain	Hi, My name is Charles and I take Kratom leaf and some Mitragynine extracts to help with chronic pain in my thoracic spine. I've been suffering with my chronic back pain for a little shy of 9 years. I tried everything within conventional medicine to get help. I have been to 15 different doctors starting in June of 2017 and not one single doctor has been able to actually help me after all these years and many appointments. I have had doctors perform invasive procedures on me like spinal injections and nerve tests to no avail. I have tried countless different medications and also done multiple rounds of physical therapy. All of this time, effort, and trust I placed in our health care system I never once got the help or relief I needed. I'm still dealing with this problem a little shy of a decade later and it has greatly disrupted my life. I am in pain pretty much all the time but I have good days and bad days. The severity of the pain just comes and goes like the wind typically tied to how long I have been standing or sitting upright with gravity acting down on my thoracic spine. I started to lose trust in our healthcare system and started to rely on yoga and Kratom to deal with my pain. I have known about Kratom for many years but I held off on using it for a long time because I was unsure. Around 5 years ago I decided that enough was enough and that I had to get my life back and started taking plain Kratom leaf and Mitragynine extracts here and there for my back pain. Finally for the first time in years I got the pain relief I was looking for. The Kratom actually took a solid 75 percent of the pain away within a few hours of taking it plus I felt mentally clear and never once felt like I was out of my mind taking it. I used it intermittently for a while only on my bad days but eventually decided to move to start taking it more regularly at about dose of 3 -12 grams a day of plain leaf Kratom spread out as needed for my pain. While it didn't take away all my pain the difference was immense and I finally felt mostly like myself again. This plant helped me far more than any of the various medications I was prescribed by my doctors. I was finally able to play with my son the way I wanted to and help around the house again. I was able to finally do my part instead of just living in constant pain on the couch. The most amazing part is that in my opinion Kratom gave me 0 unwanted side effects both mentally and physically then anything else I had tried to that point. As long as I kept my doses at around or below 15 grams a day of plain Kratom leaf then I had no constipation, sexual dysfunction symptoms, memory problems etc that other medicines left me riddled with. There was also no mental obsession with redosing that I noticed in my experience so far. I basically only take the Kratom leaf powder when I need it for pain and thats it. I never	

			found myself thinking about the next dose of Kratom at all unless my back pain was acting up from pushing myself too hard physically. I essentially never thought about Kratom at all unless I was in pain. I frequently would accidentally forget to dose my Kratom on days that my back wasn't hurting me as much. I was easily able to take a break from Kratom when I felt it was needed and tolerance has never become an issue as long as I use Kratom in the way I describe above. I have noticed there seems to be a ceiling effect after a certain point Kratom leaf as well and that there isn't much of an incentive to dose repeatedly when using it for pain. Also according to my research there seems to be an overwhelming amount of evidence that Mitragynine doesn't cause respiratory depression which makes it safer to consume as long as you aren't combining it with other medicines. Kratom leaf literally saved my life. I was just about at the end of my rope when I decided to start taking it and I am so glad I did. I was in a dark place where I literally didn't remember what it was like to live without constant pain. I was always bracing for pain to come from behind and attack me. I felt completely and utterly trapped on the couch before Kratom. Kratom wasn't able to completely erase the pain but it gave me enough of a reprieve that it allowed me to start thinking clearly again without constant fear of a pain flare up. I genuinely don't know where I'd be today if Kratom hadn't have given me pain relief when I truly needed it. Please do not ban Kratom. Americans already greatly distrust the drug scheduling system because it is riddled with inconsistencies. Kratom can help people. Just because something can cause physical dependency doesn't mean that it needs to be scheduled let alone schedule 1 which would just be a lie if you ask me. Kratom/mitragynine very much has a medical use case especially in a world where Pain Management system is completely broken. Doctors are scared to prescribe the things that work and instead they are prescribing strange drugs that cause more problems than they do help the person in pain. Tylenol and NSAIDS are not an option long term unless you want to cause real lasting damage to your body which I of course do not. Most doctors will not warn you of the lasting damage that NSAIDS can cause and thus many patients are surprised to find out in their old age that Motrin etc has caused kidney damage and they now have get dialysis to survive. I have gotten blood work and been to my GP doctor many times and I am in perfect health according to my latest visits after 3 years of use at now 35 years of age. Mitragynine needs to be studied and available for people in pain without having to jump through the hoops that are involved in Pain management. No one should	

			have to quantify their pain and be told they aren't allowed to take an extra dose of a plant that helps them when they are having a bad day. I hope that you will follow the science and not fall prey to emotion swaying your decision. There are alot of people that have the wrong idea of Kratom because they have never taken it and they fear what they do not understand. I truly hope you do the research and listen to the people that have written you on this account. Please do not ban Kratom/Mitragynine. This plant saved my life and I know I am not alone. There are many applications that it can serve in today's world as long as people are educated on what it is. Again, please do not schedule Kratom/Mitragynine as Schedule 1. Please follow the science and the facts. I appreciate your time today. Respectfully, Charles	

Tucson	Arizona	2 - Oppose - Used to Treat Chronic Pain	Thank you for the opportunity to provide public comment on the Ohio Board of Pharmacy's proposed Mitragynine Rule. While I am not an Ohio resident, I am submitting this comment in good faith because actions taken by Ohio frequently influence policy decisions nationwide and have significant implications for kratom consumers and chronic pain patients across the country. I am also deeply concerned for Ohio residents who rely on natural kratom leaf every day to manage pain, maintain employment, care for their families, and remain active, contributing members of their communities. I am a 53-year-old, well-educated professional who has responsibly used natural kratom leaf since 2015 to manage chronic and at times debilitating pain. I am a Director-level leader at a Fortune 50 company, as well as a wife and a mother. Without access to natural kratom leaf, I would not be able to work at the level required of my role, nor would I have been able to fully show up for my family or remain a productive, responsible member of society. I did not turn to kratom lightly or impulsively. I turned to it after navigating a medical system where long-term pain patients are increasingly left with few realistic or sustainable options. Kratom has allowed me to function clearly and consistently—without the cognitive impairment, loss of stability, or risks that often accompany prescription pain medications. For nearly a decade, I have used natural kratom leaf responsibly, and it has been a source of relief and stability, not harm. I want to clearly acknowledge and express support for Ohio's recent emergency action restricting 7-hydroxymitragynine (7-OH). Highly concentrated or synthetic isolates raise legitimate safety concerns, and I agree that these products should not be treated the same as natural kratom leaf. Targeted action focused on synthetic or adulterated products is appropriate and necessary to protect public health. My concern is that the proposed Mitragynine Rule risks blurring this critical distinction, potentially extending the rationale behind the 7-OH emergency ban to natural kratom leaf. These substances differ meaningfully in potency, formulation, and real-world use. Natural kratom leaf, used in its traditional and unaltered form, is fundamentally different from synthetic or isolated compounds and should be regulated accordingly. I am also concerned by repeated claims that natural kratom leaf has been solely responsible for overdose deaths. These claims have been consistently shown to be misleading. In every case I am aware of, there were significant contributing factors, including poly-drug use or other substances. Policies based on incomplete or inaccurate interpretations of these cases risk harming responsible consumers while failing to address the true sources of risk.	

			I support reasonable, science-based regulation, including age restrictions, product testing and purity standards, accurate labeling and transparency, and clear regulatory distinctions between natural kratom leaf and synthetic or isolated compounds. What I do not support is an approach that effectively eliminates access to natural kratom leaf due to concerns driven primarily by synthetic derivatives such as 7-OH. Such an outcome would negatively impact responsible adults like myself—and Ohio residents who depend on kratom for stability, pain relief, and daily functioning. For many of us, kratom is not about avoiding responsibility. It is what allows us to maintain responsibility—professionally, personally, and socially—when other options have failed. I respectfully urge the Ohio Board of Pharmacy to adopt a balanced, evidence-based approach that protects public health while preserving access to natural kratom leaf through thoughtful regulation rather than prohibition. Thank you for your time and consideration. Respectfully submitted, Kim Singleton	

Sacramento	California	2 - Oppose - Used to Treat Chronic Pain	Hello there, the reason I sent this message is because Kratom has been literally a life saver for me, literally. The natural leaf kratom. I was a very persistent, hard-working person, and I fought hard to get into the career I was in and ultimately was working in emergency veterinary care as an RVT. Once our clinic was bought out, I returned back to day practice, managing and still working as an RVT but not long after that I slipped and fell on a wet floor as I was grabbing the lab results for a pet and bringing them to the veterinarian. I needed surgery to fix the shoulder injury caused by the fall. Unfortunately, that surgery caused a huge mishap on my nervous system and ultimately, I developed full body CRPS, which is also known as the suicide disease because it is so incredibly painful as you are in chronic pain 24/7. And over many years, I tried every type of treatment you could think of, that doctors could think of, every type of medication, everything to try and lessen my pain as I watched the career I worked so incredibly hard for slip through my fingers. I could no longer do my job. I could no longer be a functioning human being. I saw my future of being a mother, this future I always thought I had slipping away. So after trying everything from the doctors, I looked into other alternatives. And I tried other alternatives to no avail. But I hadn't tried Kratom and so I decided to try it and it has helped me so much. It has helped with my pain. It has allowed me to get off prescription medications that were literally ruining my brain cells and causing damage to my memory. It helps me to function every day. I am not back to my normal self, I'm not able to be that person I once was who worked so hard-I have to pace myself now and I have to just get by doing the bare minimum stuff that I can do for myself BUT if I did not have Kratom to help lessen the pain that I was dealing with every day I would not be here-And that's the honest truth. It was the one thing that provided me some relief enough where I could still be here every day and I've had to be OK that I'm not going to get back the life I had but if I could lessen that pain even a little bit, it would be invaluable and that's what it's been to be. So please do not take something that is a natural thing that helps so many of us. Please do not take that away from us. We always need to make sure we have options for people. There are so many prescription medications out there and many of them work for some people, but there are also many of them that don't work for people at all-or they come with horrible side effects. We should not be then taking away Alternative medicine from people- we need to be able to explore and find something that may work for us- We deserve to not be suffering. Everyone is so different, a combination of different things	

			might work for some and not work for others but we have to be able to allow people to find something that's going to help them feel better-we should not be taking something away, which in doing so will ultimately cause major suffering for others. Please, please hear us. There are so many of us chronically suffering. Those in a severe pain every day that you just have no idea how hard it is for us every day. Please do not make it more difficult for us. Thank you for reading..	
Baltimore	Maryland	2 - Oppose - Used to Treat Chronic Pain	I would just like to say that Kratom has been very helpful to managing anxiety and physical pain for me. I believe it can be used responsibly as I do it. Please reconsider the Ban of the natural plant. Please remember it helps a lot of people and banning it will turn more working class, tax paying citizens into "criminals". With so much going on in the country right now, I think there are better and more just laws than banning Kratom. Thank You, Larry	

Boston	Massachusetts	2 - Oppose - Used to Treat Chronic Pain	Hello im writing to ask you to please not ban kratom or 7oh. Regulation is key. I live with 10 out of 20 of the most painful conditions to live with trigeminal neuralgia being one aka the suicide disease. I also have degenerative and cervical disc disease herniated and bulging disc bone spurs on my spine and scoliosis developed in the last 2yrs. I also have Raynauds as well as Crohns disease. I was put on pain medication at the early age of 9. For 30yrs I was put on a slew of medication to no help. I was told its pain management for life. I looked for holistic ways to treat my pain as I was basically bed ridden most if not all day. 9yrs ago this up coming May I took my first dose of kratom . It has saved my life, given me my life back. Im able to get out of bed. Do simple things like grocery shop or attend my sons graduation. I wouldn't be alive today without kratom and 7oh. I utilize both . High pain days or crohns flares when im not able to take the powder or the plain leaf powder just isnt strong enough on high pain days. I urge you to follow the science and do not ban this product and go backwards to prohibition. I'll go to jail billions of people. Take this daily. There has been millions of doses taken, and no deaths that are only till this product.There's always something else in their system. Myself and many others rely on this to treat our pain or mental health conditions. And if this is banned and scheduled, it will turn millions into criminals that are law-abiding citizens. Including doctors, nurses, police judges, teachers, normal everyday people will be criminals over night. With the already crowded jails and the opioid epidemic, I urge you to utilize your voice and keep this legal taking this tool away from millions of people will cause death. Will cause more overdoses and even the suicide rate will climb. I know I can't live in pain.The way that I was before I found this plant.So please do not ban kratom or 7oh. Regulation is key. Thank you .	
Sauk Centre	Minnesota	2 - Oppose - Used to Treat Chronic Pain	I feel making 7oh illegal is appropriate, however kratom has been around for decades and has helped an infinite amount of people. Please do not make kratom illegal. I got hooked on 7OH, and I currently still take it. I became physically dependent. If I could stop with not withdrawels, I would stop today. Kratom helps so many people, and honestly should not even be attached to 7OH at all. PLEASE DO NOT MAKE KRATOM ILLEGAL. Kratom has helped so many people with pain management in lue of pain pills, helped thousands get off of opiates, helps with thousands of other symptoms that without taking it, people would barely be able to get out of bed. Helps with depression, insomnia, anxiety, has for decades! Please do not ban kratom. Make 7OH illegal, not kratom!	

Tulsa	Oklahoma	2 - Oppose - Used to Treat Chronic Pain	Pure leaf kratom is not harmful. I have been taking pure leaf kratom daily in my chocolate smoothies for over 8 years now. It has improved my gut health. It has changed my life for the better. It has been a God Send! I know if has helped so many people. It has definitely been a game changer for my husband that has kept him active and thriving as a chronic pain patient. It has saved his life!	
Charlotte	North Carolina	2 - Oppose - Used to Treat Chronic Pain	We need your help! Please DO NOT support a ban on kratom. My name is Sherry McClain. I am a 57 yr old cancer survivor. During many treatments, I used prescribed narcotics to limit the pain. This was the first time I had ever taken anything like that for pain. I knew I needed something for the pain I was dealing with & went in search of a natural solution. In my search, I came across this plant, a tea leaf called Kratom. I made a choice to try this natural remedy & 2 yrs later, I thank God for his creation every day & the healthy life I can live because of it. I will close with this: I am a daughter, sister, Mom & grandmother. If someone had told me I would have to openly admit I had formed an addiction with something that was meant to help me, I would have told them they were mistaken. My entire family will tell anyone I am a healthy, happy & pain-free human being now, thanks to Kratom. Please, before making a decision that will affect over 5 million people, all I am asking is to search the scientific info & all the lives this plant has changed for the better. Kratom is not a “high”!!! I cannot fathom the articles I read comparing it to Heroin & worse drugs. Ty for your time & please take the time to research all supportive facts before reaching a decision to ban this tea leaf. Thank you - Sherry McClain	
Wilmington	Delaware	2 - Oppose - Used to Treat Chronic Pain	Hi there, I am a registered emergency room nurse, a wife, and a mother of 2 young children. I have been using kratom for the past 8 years for back pain from a fall 16 years ago as well as anxiety. As a young adult and teenager, I had a substance abuse problem. Kratom has helped me to stay off of all pharmaceuticals as well as successfully stay sober. I honestly don't know where I'd be without kratom and now I am happy and healthy and thriving in my life and also my career.	

Wilmington	Delaware	2 - Oppose - Used to Treat Chronic Pain	I am writing to oppose any ban or scheduling of plain leaf kratom in Ohio. Plain leaf kratom is being incorrectly lumped together with 7OH and other synthetic or isolated substances. These are not the same, and treating them as such is misleading and harmful. I rely on plain leaf kratom to function after being harmed by FDA-approved medications for 17 years of suffering, plain leaf kratom tea has given me almost 9 years of actually living! I also have family in Ohio and should not face criminalization for a natural plant when visiting them. Policy decisions of this magnitude belong with lawmakers, not administrative action. Please clearly distinguish plain leaf kratom from 7OH and do not restrict access to plain leaf kratom.	
Olga	Florida	2 - Oppose - Used to Treat Chronic Pain	Kratom saved my life. I suffer from chronic pain caused by an automobile accident I suffered as a child. I have been prescribed every pharmaceutical medication a doctor can give you and all it did was make me a zombie. Seven years ago I made the switch to kratom and my life has improved in every way imaginable. I can work, actually play with my children and be present for my wife. In making kratom illegal you will take everything from me. Please don't do this. My life is literally in your hands. Don't make my wife mad children suffer because dad has to go back to prescription opioids.	
Pensacola	Florida	2 - Oppose - Used to Treat Chronic Pain	Keaton is a non-harmful, non-addictive form of pain management and even a way for people to help themselves from addiction of opioids. Kratom is directly fighting the over-precipitation of prescription pain medications like opioids.	
Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	As someone with a spinal cord injury, this is one of the only things that helps with my chronic pain.	
Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	My wife was on opioids for years and the only thing that came close to the effects of opioids and so she could stop taking them was this kratom. You MUST NOT b take that away. It will be a travesty. You have zero right to take something away that helps people so they are not taking prescription drugs.	
Fargo	North Dakota	2 - Oppose - Used to Treat Chronic Pain	Kratom can be beneficial for many people because it offers natural relief for pain, stress, and fatigue without relying on prescription medications. In lower doses, it can boost energy and focus, while in higher doses it may help with relaxation and discomfort. Some people also find it helpful for improving mood and managing withdrawal symptoms. When used responsibly and in moderation, kratom can be a useful plant-based option for those seeking alternative wellness support.	

Dallas	Texas	2 - Oppose - Used to Treat Chronic Pain	The proposed rule would do great harm to the people of Ohio. I personally have been using Kratom for several years now and I can't express enough how much it has helped me. I suffer from chronic back pain and sciatica. Kratom has been able to give me my quality of life back. I am able to lead a normal life, have a successful career, and, most importantly, be present with my friends and my loved ones. The FDA has recognized the distinct differences between kratom and synthetics like 7-OH, and not pursuing Scheduling or banning of kratom. So why is the Ohio Board of Pharmacy ignoring the science and FDA? The Board should reject criminalization of kratom and support consumer protection that bans synthetics, and allows adult access to safe, natural kratom. Safe kratom is very important to me, my friends, family and loved ones in Ohio! Thank you so much for your time, and have a blessed day!	
Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	I am writing to share my personal experience with kratom in it's natural form. I have taken kratom a daily for pain management for over 15 years. The claims of it being dangerous or abusive are absolutely preposterous. My previous alternative was prescription opioids. The opioids were an absolute disaster. The effects and side effects absolutely destroyed my life. Kratom is an absolute life saver for thousands of people. If it becomes banned, it will destroy lives and families for Ohio residents. I urge you to consider the scientific facts regarding kratom use and not make a decision based on biased, bad info from people and organizations that profit from it being banned. This is an absolute life saving, natural substance that thousands depend on for leading productive, happy lives while managing chronic pain.	
San Jose	California	2 - Oppose - Used to Treat Chronic Pain	Regular kratom powder has been a miracle in helping with pain. If it gets banned it is going to cause so many more people to have to go back to pharmaceuticals that have very bad side effects. I understand banning 7oh and high strength extracts that are being marketed as regular kratom. There is a huge difference between regular kratom leaf and 7oh extracts. Please consider taking regular kratom leaf off of the bill. Thank you!	

Bend	Oregon	2 - Oppose - Used to Treat Chronic Pain	I am a senior that has been using kratom for five years without any problems. The plant has given me pain relief without side effects and allowed me to still lead a productive enjoyable life. Kratom has also allowed me a good nights sleep when pain would have otherwise kept me tossing and turning. My annual physical and lab tests have demonstrated no negative side effects from using this plant. I do not use or would ever try the synthetic versions of this plant. 7-oh is a product and not a plant and the two should not be regulated the same. The best approach would be to regulate kratom, utilizing the KCPA, and prohibit the sale of the synthesized manufactured 7-oh, which apparently is much stronger and highly addictive. Please do not criminalize kratom and push this helpful plant to the black market. The millions that rely on kratom for pain relief, depression, anxiety and as a safe way to break an opiate addiction will needlessly suffer. Thank you	
Christiansburg	Virginia	2 - Oppose - Used to Treat Chronic Pain	Leaf kratom saves lives for people living with pain that dont have access to pain meds and don't want to go down that route weather it be personal or because doctors don't treat pain anymore	
Winona	Minnesota	2 - Oppose - Used to Treat Chronic Pain	I have been a kratom consumer for 4 years now with only positive results. I only consume pure unadulterated kratom from reputable sources. Kratom helps with my neuropathic pain and my gastroparesis symptoms. I am speaking out today because kratom is needed. Its been a very positive part of my life. Im able to function at m y job and do the daily chores at home. Thank you for your time on this matter.	
Lebanon	Oregon	2 - Oppose - Used to Treat Chronic Pain	Please do not put a ban on any pure leaf Kratom. It saves lives! You cannot overdose on this important plant. Your body will reject it by vomiting when you take too much. Deaths associated with Kratom are because of other products in their system and not due to Kratom. I'm a chronic pain sufferer and have been taking Kratom for 8.5 years with 0 issues. Please keep this legal and easily accessible for all of us whose doctors have fallen for the "opioid epidemic" and won't prescribe pain medicine anymore. We have to have some quality of life and Kratom allows for that.	
Stockbridge	Georgia	2 - Oppose - Used to Treat Chronic Pain	Kratom helps with severe pain, depression, stomach issues. It's amazing. It change my and my friends life	

Hawley	Minnesota	2 - Oppose - Used to Treat Chronic Pain	My name is Eddie and I'm a resident of South Dakota and concerned about your state and how there isn't a distinction being made between synthetic derivatives of Kratom and whole leaf kratom. I have used whole Leaf Kratom for 5 years to manage my chronic back pain. I'm 54 years old and without it wouldn't be able to work or be part of the community as access to proper medication is limited. Kratom does not interfere with my judgment or get me high. It manages my pain and a way that nothing else is able to. In my state we have passed the Kratom protection act which I support. I feel patients need access to whole Leaf kratom and withdrawing it from their access puts them in a dire situation. I agree that children and those under 21 shouldn't have access. Please consider the patients that depend on this and if proper legislation and rules are in effect this keeps it out of the hands of children and others that it made negatively affect. I don't use 7-OH which is a synthetic derivative with shady marketing and feel there needs to be a clear line between that and whole leaf. Thank you for your time,- Eddie Coto	
Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	Please reconsider this legislation. I am a highly productive member of society that I owe in part to Kratom. I suffer from fibromyalgia and spinal arthritis and take natural Kratom leaf to manage my symptoms. I have been to several doctors and they all either want to prescribe me SNRIs which are highly detrimental, or prescription opiates which I am not interested in taking. A total natural leaf ban will hurt people like me, and cause us to turn to other alternatives, none of which work as well as natural Kratom leaf.	

Manchester	New Hampshire	2 - Oppose - Used to Treat Chronic Pain	Good evening, my name is Dylan. I am a father and an advocate for natural health and medicine. I travel through the wonderful state of Ohio and care about the people who live there. Before discovering whole leaf kratom powder, I dealt with a host of debilitating health issues both physical and psychiatric. Following previous mental health diagnosis I struggled with throughout my teens and 20s, In 2018, I was diagnosed with Neuroborreliosis -- an infection that effects the brain and nervous system from the bacteria that causes Lyme disease. I suffered from a host of debilitating symptoms that derailed my life for over 10 years. Before whole leaf Kratom (not extracts or synthetics) and other natural herbs came into my life My daily reality was crippling pain, fatigue, anxiety, depression, insomnia and digestive distress. My condition became so severe that In 2018 I was hospitalized for over a month. My physical and mental health had declined to the point I was put on disability and for several years was unable to support myself - and while Most people never return to work after going on disability, I recently have -- in largest part due to kratom's role in helping to manage my complex health issues. This has allowed me to contribute to our family and community in ways that would not have been possible otherwise. In 2016, I entered recovery from alcohol and prescription pills that I was using to manage my symptoms and began detoxing off several pharmaceuticals including benzodiazepines like Xanax and Klonopin and stimulants like adderall and Ritalin. I was legally prescribed these to manage my symptoms but their effect on me became highly detrimental. I'm extremely familiar with the concept of sobriety and what it means to be sober vs not. With a background in addiction I'm acutely aware of when something plays a medicinal role in my life and when something is destructive. No other substance has ever been more medicinal and helpful in my 15 years of treatment for my mental and physical disabilities as Kratom leaf has been. It supports my recovery process just like so many other people across the country - and has a massive positive impact on my mental health and discomfort levels without getting me intoxicated or inebriated - something so important to me. In my opinion It is because of Kratom's ability to take the place of high profit pharmaceuticals and be used as an exit substance that it is so heavily demonized in the mainstream. It is actually because of how beneficial it is that we see calls for bans and a coordinated effort across the country. It's so beneficial that it cuts into the profits of the pharmaceutical companies who heavily lobby and influence our government - for instance If I weren't using kratom I would likely be, and at one point have been on a stimulant, a	

			benzodiazepine, an anti depressant, a sleep medication, an opiate and more. With the actual costs of these drugs - or cost to the taxpayer if insurance is used - That is a lot of money not being made off my conditions. This is a classic case of profits over people - just like we saw with cannabis over the past 10 years. Ohio has already become a leader in the alternative and plant medicine space allowing their people to choose what treatments or medicines work best for them - why would we now go in the opposite direction with a comparable plant? It is in fact the same people who helped to create the opiate crisis who continue to profit off the dependency and addiction that they caused - who see Kratom leaf as a threat to their revolving door of profit, pain management and rehabilitation. The stakes couldn't be higher for me personally. If I lost access to whole leaf kratom powder it would massively impact my ability to be the father and community member that I am today. It would mean returning to a life of pain, instability, and suffering -- taking away the single most effective tool I have to manage my physical and mental health. Revelation 22:2 (KJV) "In the midst of the street of it, and on either side of the river, was there the tree of life, which bare twelve manner of fruits, and yielded her fruit every month: and the leaves of the tree were for the healing of the nations." Thank you so much for your time.	
Center Moriches	New York	2 - Oppose - Used to Treat Chronic Pain	Kratom has saved my life since 2011. Used in moderation the plain leaves are safe and effective. I DO NOT WANT RX OR OTC MEDS> I deserve that choice as a free American Citizen! Please do not BAN natural Kratom leaf. Thank You	

Phoenix	Arizona	2 - Oppose - Used to Treat Chronic Pain	I have severe inflammatory arthritis. Kratom enables me to manage my pain without using marijuana or opioids. I have never gotten high or sick from using Kratom. If it is made illegal my life quality will be massively reduced because I need effective pain management to function. I am afraid of what a ban on Kratom would do to people like me and others with chronic pain. Please don't ban it.	
Parsons	Kansas	2 - Oppose - Used to Treat Chronic Pain	My name is Derek Jackson. I have been in the workforce for 37 years. All of the jobs I have held were labor intensive; unloading trucks for a restaurants and warehouses, moving furniture and bedding etc. I currently work 60+ hours as a truck driver. With the culmination of that time, my body has developed aches and pains that I do not wish to medicate with opioids or surgery. I have been using the crushed leaves of Kratom to make tea for 16 years. I am able to successfully manage my pain and drive a semi-truck without the worry of drug testing. I have never (overdosed) nor had an adverse reaction due to ingesting crushed kratom leaves. There are responsible adults who use kratom everyday to mitigate pain in their lives. Please consider those of us who use this product in a manner consistent with what it has been used for in it's long history. In 2017 I marched with kratom users to the pharmacy board to ask that it should not be banned but regulated so that adulterated product does not make it into the market. We need common sense regulations not reactionary responses to hyped anecdotes. Thank You.	
Woodstock	New York	2 - Oppose - Used to Treat Chronic Pain	I have been a kratom consumer and advocate since 2018. A lot of misinformation has been circulating about the whole leaf plant. Many have mistakenly equated kratom with potent chemical compounds that have been falsely presented as kratom. A ban on the whole leaf kratom plant would make it very difficult for law abiding citizens who take this plant to manage chronic pain at a time when it is extremely difficult to get prescribed medicine. It is with deep concern for the public safety that I respectfully ask any proposals for a ban to prohibit the sale and possession of whole leaf kratom plant be voted against. Sincerely yours, Kathleen Dinsmore	

Old Town	Maine	2 - Oppose - Used to Treat Chronic Pain	This is unacceptable. The data and facts presented to the board are complete hogwash. There is no evidence suggesting that mitragynine alone has been responsible for harming or killing people. I have used natural Kratom responsibly for eight years and have suffered no negative consequences. Kratom has helped me immensely with pain, anxiety, and depression. It also helps me with my ADHD and with focus. Making Kratom a schedule 1 drug will only make matters worse not help them. Ohio originally tried this nonsense back in 2018 but it was stopped due to public outcry. No one wants this as it is egregious government overreach. Once again the Ohio state government is going against what the public wants. This has been a life saving supplement for me. Kratom in its vegetative form is natural and unharmful. Trying to ban a natural botanical is irrational and asinine. Stop interfering with individuals personal freedoms and liberties. We have had enough of you're of your nonsense. Stop trying to criminalize people for their personal choices that they believe is best for them. It is inherently none of your business. Alcohol and tobacco are responsible for exponentially more deaths yet none of you are trying to make those illegal. This is obvious favoritism and fear mongering in a kangaroo court. This new rule does absolutely nothing positive for our communities.	
Middletown	Connecticut	2 - Oppose - Used to Treat Chronic Pain	I take 25 grams per day to help with low back pain. It helps me deal with my everyday aches & pains. While still being able to be am electrical contractor.	
Kansas City	Missouri	2 - Oppose - Used to Treat Chronic Pain	Please keep natural kratom safe and legal for responsible users, especially those of us that found little help for pain and depression with pharmacy drugs. Crack down on synthetic kratom and shady venders. Banning natural kratom and scheduling it is collective punishment that would be a disaster for countless people in pain and suffering from depression. I venture to say most of us spent years on prescription drugs that either didn't help or made our conditions worse. Thank you	
Syracuse	New York	2 - Oppose - Used to Treat Chronic Pain	I am a retired Christian minister of 33 years . I started using Kratom 10 years ago after doing a long investigation into its actions rumors and testing is by the sellers. I am one of Millions who uses Kratom effectively to take care of several maladies like arthritis , irritable bowel syndrome and others. Please don't make me a criminal in your state. I should have the right to use for my body any product I want. I want you to put safe regulations on it and curb it from getting to younger people but not make it illegal. And one thing I need to say every time I write a comment, you can't get high from kratom . If we could get high from Kratom the whole country would be using it. But it can work wonders for some people on	

			some maladies. Please find a way to regulate it and make sure that I can safely obtain and use kratom in the great state of Ohio. Thank you, Rev. Milton Dudley	
Summit	Illinois	2 - Oppose - Used to Treat Chronic Pain	I believe the kratom plant is a gift from God! It literally has given my life back to me and my family. I've used the same amount for the last 8 years and before this the prescribed medication from doctors including opiates took a toll on my body. I'm a firm believer in plants before pills. God Bless Kratom!!!	

Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	Kratom (mitragynine, 7-hydroxymitragynine) - an all natural leaf with pain relieving, anti-anxiety, anti-depressant and more, properties. With very few (if any) negative side effects. Please do not ban kratom (mitragynine, 7-hydroxymitragynine). My father who is 88 years old had back surgery 9 years ago. The pain meds that was prescribed to him were not only ineffective, but, it put him in a deep, dark place. He withdrew from the family, withdrew from the community and became a different person. Someone none of us knew. When I introduced kratom to my father, we immediately started to see a positive difference in him. Not only was it much more effective, but it brought my father back to our family. The outgoing, funny, fun loving man we all know and love. He became more involved in his local community, as he always was in the past. And, became once again more active physically. During that dark time of prescription pain meds, my father fell into a deep depression. Kratom has relieved this depression. And it shows. He is more positive, happy and sociable. If you take away this all natural plant, my father will have no choice but to take prescription pain meds to try to (unsuccessfully) suppress the pain. Falling back down that dark hole of pain, depression and withdrawal from family, friends and society. Please do not do this to my father. Kratom is safe. I know this from seeing how much it helped my father. He gets blood work every year, and every thing always comes back great. No negative effects from kratom. I also know this from first hand knowledge. I also take kratom myself. About 15 years ago I was going through a divorce and began feeling major anxiety and even had a couple panic attacks. Depression was also an issue for me during this time. I went to my allopathic Dr.and he was quick to prescribe me Lexapro. After taking it for several months I finally started to feel something. But, it was not happiness and anti-anxiety feelings. It was depression! It was not helping me. As a matter of fact, it was making me worse. I discovered kratom around this time while searching for natural alternatives and decided to try it after hearing nothing but positive feedback about it. Right after my first dose, I already had anti-anxiety effects, felt happy and had ZERO negative side effects. Ever since then, I have been taking kratom for this on a daily basis. And, my life could not be better. I can not be happier and more successful professionally. I own my own business, I have 4 children and am in a civil union with my love. I am a responsible citizen who has never been in trouble, arrested, never used illicit drugs, etc. So, I can confidently say that kratom is a safe and more importantly effective plant that has to, needs to stay legal worldwide, and especially in the USA. As there are estimates that more than 1 million	

			people use it for anxiety, depression, pain management, PTSD, fibromyalgia, endometriosis, ADHD and much more. It makes me wonder, knowing how effective and safe kratom is....why the FDA wants to ban this so bad. It may be a question for you to also ponder. There is more going on here than meets the eye in my opinion. I appreciate your time and consideration on this most important matter in my life, my father's life, my family's life and millions of other lives in the USA and around the world.	

Dallas	Texas	2 - Oppose - Used to Treat Chronic Pain	My name is Nicolas. I have been responsibly using a powdered form of the Kratom leaf for several years. I have experienced complications from severe scoliosis and spinal stenosis for two decades. Kratom has been the most helpful, natural plant based substitute for prescription medication, alcohol, and cannabis. I do not use Kratom for purposes of recreation and intoxication, but in a way that is highly regulated and controlled, that I may work and function optimally. Although I generally do not care to rely upon anything of substance to sustain my well being, I also experience tremendous difficulty in being without some assistance in my condition. I have also never used synthetic 7-OH product, which is both heinous and dangerous, and was irresponsible to have ever been produced in the first place. I believe there are many of us who have found great benefit from using Kratom. It is acknowledged that there are those who may abuse the use of the plant, just as there are those who abuse alcohol (both incredibly dangerous and legal)as well as any number of other substances. However, I would respectfully request that the BOP strongly consider that those of us using Kratom responsibly not be summarily punished on behalf of those choose to use Kratom irresponsibly. A better alternative would be to offer services to those who may need help with substance abuse. A total ban on Kratom can and most likely will cause serious and unwarranted complications for those who do in fact use it responsibly, for pain and inflammation management, or other varying conditions. I am grateful to have the opportunity to communicate my perspective on this matter, and understand how those unfamiliar with the leaf, inundated by severely biased reporting on the plant, would desire to eliminate it all together. There are many scientific studies that ought to be clearly considered before making this decision. The AKA have done an amazing job establishing a scientific basis upon which to guide such decisions, and it appears that the largesse of the media, and FDA lobbyists make it incredibly difficult to make a truly objective and scientific case in the matter. Ultimately, we are law abiding, good men and women using Kratom therapeutically, by and large, and certainly do not deserve to be labeled as criminals for doing so. Thank you for allowing for a comment period preceding the decision being made. With the utmost respect, Nicolas H.	

San Francisco	California	2 - Oppose - Used to Treat Chronic Pain	I am able to work & care for my family thanks to natural kratom leaf tea. Without it, I won't be able to work & will end up on disability. As a person dealing with inoperable disc issues in my back, Kratom has truly been a godsend. I've drank this tea for over a decade now with zero negative health impacts. Please, adopt a regulatory policy that recognizes an adults right to choose natural products, while also keeping it well-regulated & out of the reach of children. The same approach we use toward nicotine, cannabis & alcohol products makes perfect sense. I am a good law abiding citizen who supports my community. Please do not turn thousands of Toledo natives like me into defacto criminals via prohibition of this plant. Prohibition doesn't work, it just creates a more dangerous marketplace. Smart regulation protects freedom & safety. Thank you!	
Cookeville	Tennessee	2 - Oppose - Used to Treat Chronic Pain	I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule I. Though I currently live in Tennessee, I was born and raised in Ohio. My family is all still there and I frequently go back to visit. This ban would turn me into a criminal should I come visit my family with what I use as a natural alternative to pharmaceuticals (which I will never got back to on a regular basis) to improve my daily quality of life with multiple chronic health conditions. Please don't prevent me from coming to visit or moving back to your state! Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment.	

Redlands	California	2 - Oppose - Used to Treat Chronic Pain	I am in opposition to the rule to schedule mitragynine. I use botanical kratom for pain management. I am medically retired/permanently disabled due to advanced heart failure and chronic chest and lower back pain. Kratom allows me to be functional, be ambulatory, and do the PT cardiology has recommended. I have used it since 2018 and despite severe health issues have had no evidence of adverse effect in routine labs, imaging, or had my defibrillator fire. I cannot take NSAIDs due to CHF, and do not not get effective pain management from my doctor/HMO. No OTC pain medication has been effective. Rx muscle relaxants are helpful for my lower back but not to the degree that they greatly improve pain or function. Chest pain is not responsive to nitrates. Medical cannabis is not effective for my pain, not functional, and there are legal barriers to traveling with it. I support the regulation of kratom, including prohibiting products that exceed 2% 7-OH by alkaloid fraction (or approx. 1mg/serving) as in SB 299/HB 587. I believe decisions of this matter should be handled by the legislature, not by un-elected boards. This law would make it illegal for me to continue my medical use and visit family and friends in Ohio, to perform family business for aging family members in the state, perform culturally relevant exercises for deceased family members in the state, or otherwise travel or spend money in the state. This action is inconsistent with the findings of the American Medical Association (Resolution 515), NIDA, respected researchers from Johns-Hopkins, The Ohio State University, and the University of Florida, as well as the WHO Expert Committee on Drug Dependence. The FDA failed to make a credible case that mitragynine/bontanical kratom is schedulable under 8-factors of the Controlled Substances Act on an emergency (2016) or normal (2018) basis. The Board of Pharmacy itself also rejected calls to schedule it in Ohio in 2018-2019. I have severe criticisms of the materials presented to the board to justify this action, including broad statements lacking scientific evidence and factual inaccuracies, including social media posts which are no better than citing bar-room discussions in pre-Internet contexts.	

St. Petersburg	Florida	2 - Oppose - Used to Treat Chronic Pain	I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule I. Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it for pain management to operate daily like me. This action goes beyond reasonable regulation and eliminates any pathway for responsible access I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment, it is of utmost importance to my quality of life that this comment be taken very seriously	
Camp Verde	Arizona	2 - Oppose - Used to Treat Chronic Pain	In 2018 I fell off a roof and broke my back my right leg and my right ankle. The pain was excruciating and they had me on oxycodone and other pain pills. I kept feeling sick more than feeling better. My daughter mentioned kratom to me and I started taking some of the green kratom. It was immediate relief and it was a special kind of relief. It made me want to get up and get something done and it seemed to heal my body quicker of course that's always debatable. Here it is now ,what ,7 years later and I'm still taking kratom. I have learned how to negotiate certain strains of kratom to deal with the way I'm feeling for the day. I always wake up very stiff and with a lot of pain. I have my kratom at about 6:00 a.m. and by 6:30 there is a calmness that comes over me. Do I think that people can abuse kratom? Sure! Much like anything in life. You are always going to have abusers and you will not be able to fix that condition by taking things away from good people who use certain herbs for the good. I really wish you guys would reconsider. I'm 70 years old and I'm retired and with kratom I can go out in my shop and work on projects 4 - 6 hours now whereas before I was lucky to work on something for an hour before I had to sit down because the pain was too much to bear. I will show you my scars and I will show you my x-rays. I am a real example of the good that kratom can do for some people, if not, most people! Thank you for your time.	

Forest Grove	Oregon	2 - Oppose - Used to Treat Chronic Pain	To whom it may concern: I am writing this in opposition of a scheduling kratom and it's alkaloids of any kind until science backed research can be provided proving danger. So far kratom and it's alkaloids have show to not depress breathing like traditional opoids, and have shown to only really cause overdose when mixed with other, sometimes several other drugs. If mitragynine and 7-OH are scheduled, the impact won't be measured only in policy papers or regulatory statements, it will be measured in human suffering. People living with chronic pain have already been pushed to the margins of medical care. Many were responsibly prescribed medication for years, only to have it suddenly taken away with no viable replacement. In desperation, some found kratom... not as a shortcut, not as a high, but as a way to live a life with dignity. To work. To care for their children. To sleep. To smile. If legal access is stripped away without fact-based science guiding the decision, many will be left with nothing. No relief. No support. Just pain and more pain, or a dangerous return to street drugs where contamination and overdose lurk in every dose. I ask you from the bottom of my heart to think personally, not abstractly. If someone in your family was suffering every day, would you rather they use a plant that has helped them stay functional and away from deadly opioids, or would you rather see them driven back to the street? If your son, your sister, your father was using kratom to stay off heroin or fentanyl, would you tell them, "Sorry... it's illegal now, good luck"? Because that is what this decision risks doing to real people. Many who use kratom to ease withdrawal will return to dangerous illicit drugs if it's taken away. Many chronic pain patients will be left to endure unbearable suffering or seek relief in unsafe markets. This is why fact based science matters. Not fear. Not stigma. Not political convenience. We need policy grounded in evidence and compassion, because the cost of getting this wrong is measured in broken families, lost progress, and lost lives.	
Lynnwood	Washington	2 - Oppose - Used to Treat Chronic Pain	I took kratom for several years while working in a warehouse with osteoarthritis in my hip. I took kratom instead of other painkillers like ibuprofen and acetaminophen, which were given freely by employer but upset my stomach and caused other issues. Kratom provided pain relief with no fogginess or "high feelings"—if a user expects to get high on kratom, they are going to be in for a sad realization. I was able to easily just stop taking kratom when I quit my warehouse job. Every legislature who wants to ban kratom should take it when they have pain - it is better than many other products for pain relief and possibly for	

			depression or other mental health problems. PLEASE DO REAL RESEARCH - https://www.urmc.rochester.edu/news/story/study-pokes-holes-in-kratoms-bad-rap	

Ames	Iowa	2 - Oppose - Used to Treat Chronic Pain	My name is Richard Freed, and I am a 79-year-old retired full professor as well as a retired management consultant. I had never heard of kratom until the US Drug Enforcement Agency first threatened to schedule it in 2016. Because my daughter is disabled with a severely painful and incurable bladder disease, for which she has received treatment at many hospitals, I immediately began to research this plant. After reading many scientific studies and hundreds of positive (mostly glowing) anecdotal accounts, I bought some kratom for her. No pharmaceutical medication, including opioids, has significantly helped her in the 24 years she has suffered from her debilitating disease. I am stunned to report that two teaspoons of kratom relieved her pain and bladder pressure for five hours. In September 2016, I had a five-hour surgery that involved multiple spinal fusions, and I was in the hospital for eight nights. I came home with fentanyl patches, which left me light-headed and dazed and which I stopped using after about a week, and tablets of oxycodone. I am thankful that the doctor provided the post-surgical pain relief that I needed. Concerned, however, about using the opioids with another CNS depressant I am prescribed, I decided to take two teaspoons of kratom in the evening. The two teaspoons of kratom controlled my pain much better than 10 mg. of oxycodone. I have had back problems all my adult life and have had three surgeries to attempt to address them. Although the surgeries were considered successful, they did not eliminate the chronic pain I had been and continue to be living with. Nor does the four-times-a-day hydrocodone I am prescribed and have been taking for many years. When the pain is particularly bad—when, for example, I have a flare for three days—I take kratom instead. It not only controls the pain much better than the opioids; it also virtually eliminates my peripheral neuropathy. Without this substance, and I believe this unreservedly, I would not have been able to provide three and one-half years of care for my dying wife or for my disabled daughter. In interdicting kratom shipments and in attempting throughout the US to convince pharmacy boards and other state-affiliated agencies to ban kratom, the Food and Drug Administration is acting as if nothing has been learned from the decades-long War on Drugs that has ruined the lives of millions. Millions of US citizens ingest kratom every day, and making the plant illegal will not stop them from using it any more than the illegality of any number of substances has prevented people from using those drugs. We can't even prevent prisoners, people watched day and night, from using illegal drugs. Kratom has been employed for centuries to help people be more productive and to control	

			their pain. Yes, we must try as best we can to regulate kratom's quality and purity. Yes, we must study its effects and consequences so that if it is harmful in some ways, we can treat those harms medically rather than criminally. Most importantly, we must study this plant because it could lead to breakthroughs in pain management that are far less addictive and lethal than opioids. Outlawing kratom will make such breakthroughs almost impossible. If kratom were banned nationwide, it would prevent those estimated 20 million law-abiding American citizens from treating their pain, controlling their anxiety, enhancing their sense of well being, and weaning themselves from the scourge of opioid addiction. Scheduling this herb will not stop people from using it; it will make criminals of huge numbers of those citizens who will continue to use the plant, illegally, because they find it safer and more efficacious than anything that can now be prescribed. Yours sincerely, Richard Freed Richard Freed 4321 Stone Brooke Road Ames, IA 50010 +1.515.451.3014 richardfreed@gmail.com	

Kansas City	Missouri	2 - Oppose - Used to Treat Chronic Pain	Years ago I took myself off of 6 pain prescriptions (including very high doses of Oxycontin) and went to Kratom and MM. I have safely been using Kratom for over 13 years now. It has helped me tremendously with pain with zero side effects. Just like any over the counter item, it is safe unless it is abused. The only problem with Kratom is that it ALL needs to be labeled with precise instructions and to take it accordingly. I can think clearly, as it does not cloud my mind nor do I feel anything but a reduction in pain, so that I can take it during the day. I take 2 capsules, twice a day, which is the recommended dosage of Urban Ice Botanicals organic Kratom, and I don't go over that...that's why I've never had a single issue with Kratom in all of these years. Kratom is SAFE! Aspirin can be abused as with any other OTC med. It is not the product... it's when it's abused that problems arise like seizures. Kratom has saved me. It is my sworn testimony that Kratom is safe, effective, and quite honestly, a complete blessing to me because I have pain 24/7. It is beyond me why this is being spoken of as if it's a danger because it is not. It's extremely effective and safe when taken as directed. The only thing I can think of for the reason of the ban is that it's effecting the reduction of pain pill prescriptions and that disrupts corporate monies. When I was looking for a state to move to from Oregon, I had to make sure that Kratom was legal wherever I purchased. If it is banned, I will move to wherever it is legal because with my severe pain, Kratom makes life bearable. It is what I use during the day because it doesn't affect my thinking and doesn't make me high... just pain reduction that is incredibly helpful. Without it, I can't function as well. I have advanced degenerative disk disease, bone on bone on my back, spinal stenosis, bulging disks, tiny fractures, bone spurs, osteoarthritis and osteoporosis, tailbone injury, severe scoliosis in 2 places going the opposite way, rupture disks easily, spondylosis. Believe me, I am in severe pain 24/7 and am not a candidate for surgery. KRATOM makes me able to function in society. Without it, I would be in bed, unable to do very much at all. Please don't take it away because of people abusing it. It is a Godsend to me and so many others. You may contact me by phone, letter, or email if you would like any more information. Kathy Wilson	

Saint Joseph	Missouri	2 - Oppose - Used to Treat Chronic Pain	I understand getting rid of the extracts from the gas stations. Pure an adulterated kratom is the key that helps people's lives. If you have addiction issues in your new you need to do meetings in a get a sponsor. I understand some people against this natural leave will going to these meetings. I am a big believer in the MAT programs, but I think it should be very short term use. This leaf, pure unadulterated kratom from a vetted vendor has changed my life for pain management, depression and anxiety. I don't have a diction issues, this plant has changed my life 180%. For those in early addiction I just advise you to be careful do not use the extracts from the gas station those are garbage. 99% of the time when people take the gas station extracts they're mixing it with psychiatric meds street drugs etc this is the reason why we're having these issues with people abusing them. We need more scientific backup on this plant you know grants and sponsorships things like that. I'm telling you I've seen thousands of people's lives change because of this leaf. If you are an early addiction it's a good way to get off of opiates, but please be careful. The gas station extracts need to be banned and gone The leaf itself from a vetted vendor that's tested should be available to people. We already have an epidemic effect now. If you're early in your journey with kratom be mindful get into the community talk about it you'd be doing it injustice if you get rid of it by banning it.	
Edinburg	Texas	2 - Oppose - Used to Treat Chronic Pain	I'm writing to strongly urge you to oppose classification of Mitragynine as a Schedule I controlled substance. Safe and natural Mitragynine or “kratom” helps many Americans, including me, to manage chronic pain, PTSD and avoid opioid drug dependency. This reclassification will restrict availability to safe, regulated kratom products and will drive people toward unregulated or out-of-state markets. Finally, I want to share my story on why I support keeping kratom safe through existing law. Kratom has truly saved my life. Before I found it, I was trapped in unbearable pain from a chronic disorder. I could no longer work, care for my children, or support my spouse — I felt like a burden. In my darkest moments, I even considered ending my life. One night, while I sobbed and rocked in agony, a friend recommended Kratom. My husband, desperate to help, purchased some — and almost immediately, my pain nearly disappeared. Kratom became my lifeline while I searched for doctors, treatments, and medications that could offer more permanent help. Today, even with a pain management doctor and prescribed medications, Kratom remains an essential part of my treatment plan. Without it, my quality of life would plummet, and	

			my family would again face the devastating impacts of my suffering. I am deeply afraid of losing one of the few sources of relief that has truly worked for me.	
Yaurel	Arroyo	2 - Oppose - Used to Treat Chronic Pain	Good day. I am asking that you please not prohibit, criminalize, or ban Kratom in your state, county, or locality. Many people depend on it because it is actually quite helpful, and despite the false propaganda you have heard about Kratom being "dangerous", it has improved the lives of many, including myself. I whale wrestled of my life since 2015 with multiple sclerosis. Kratom helps fight the pain, the fatigue, and the debilitation. I live over 200 miles in all directions from a neurologist and cannot afford the cost of transportation to medical, and I cannot afford to be put on the staggeringly expensive drugs for my neurological disease, nor do I want to be pumped full of chemicals. Furthermore, Kratom has helped me be free from legally prescribed opioids, which are far more dangerous. I fail to understand the logic behind keeping a substance as dangerous as alcohol legal and accessible but Kratom gets the boot. There is absolutely no rationalizing such logic, especially when the gross majority of "Kratom deaths" are not due to Kratom at all, and this is scientifically proven. In my case, banning kratom would be abject cruelty on your part. Please do not do this to your constituents, and people who just want to be free of the pain they live with that you do not seem to understand, or you at least underestimate. I say this with the most sincere respect.	

Puyallup	Washington	2 - Oppose - Used to Treat Chronic Pain	I beg you please do not schedule Kratom as a Schedule 1 Controlled Substance. As a retired social worker who has worked in the fields of Substance Abuse and Mental Health, I am very familiar with the devastation caused by opiate misuse and abuse. On the contrary, I have seen and experienced the relief that so many people, including myself, get with Kratom. I, have been taking powdered Kratom almost daily for over 13 years. I suffer from chronic back pain and was not happy with the dependence and side effects of the narcotics that my doctor was prescribing. Taking Kratom has positively impacted my life and enabled me to completely discontinue narcotic medications. In addition, my pain is manageable, it does not impair my ability to drive, and I am able to be a functioning member of society. Furthermore, I have never experienced any desires or urges to go back onto narcotics medications. Over the years I have been able to comfortably adjust my dose as needed. There are so many people with stories similar to mine. Please do not take away our safe and effective option for pain relief. Please support science-based regulations, not prohibition. Thank You, Brandon Foster	
Farmersville	California	2 - Oppose - Used to Treat Chronic Pain	Hello, my name is Bunny Baker Kratom has had a profoundly positive impact on my quality of life. Before I started using it, I had been diagnosed with severe depression and struggled with chronic migraines. My days were often spent in bed, exhausted and unmotivated. I felt disconnected from my family and from life itself. Since incorporating kratom into my wellness routine, I've experienced a complete turnaround. My energy levels have improved dramatically, and my migraines have become far less frequent. Most importantly, the heavy cloud of depression that once controlled my life has lifted. I now wake up feeling motivated and capable. I'm an involved mother, a supportive wife, and an active member of my community. I've been able to return to regular exercise, eat healthier, and live fully again—something I never thought I'd be able to say. Kratom hasn't just improved my mood; it's given me back my sense of purpose, balance, and well-being. It's helped me reduce dependence on antidepressants and reconnect with life in a natural, sustainable way. Please keep lab tested plain leaf kratom legal.	

Perryville	Missouri	2 - Oppose - Used to Treat Chronic Pain	I'm not from your state, but if I can help one person avoid suffering in pain I will take the time to let you know that there are people who rely on kratom to just take the edge off of their pain. My wife has had multiple surgeries on her neck and back, she wakes me up at night with her screams. I am all for age restrictions so kids don't buy it at a gas station, but this herb does not cause overdose issues that can lead to death. Banning this herb will cause much suffering to the people who need it. Best wishes to you and to the people who need your help. David Hennrich	
Norfolk	Virginia	2 - Oppose - Used to Treat Chronic Pain	Please, please continue to allow a market for Kratom . It has changed the life of my husband who has chronic pain due to severe disabilities He developed over a decade ago. Kratom has allowed him to reduce all use of opioids and painkillers and be present for and involved in our family.	
Virginia Beach	Virginia	2 - Oppose - Used to Treat Chronic Pain	Hello, my name is Drea, and I'm asking you not to ban kratom. I've used kratom for over a decade. Kratom has been a positive and life-changing part of my wellness journey. It's a natural plant from the coffee family that helps me manage EDS, CRPS, CPTSD,major depression and panic disorder. It allows me to avoid the harsh side effects that I've experienced from prescription drugs. I learned about kratom from my brother after it got him off of heroin. It has saved my sisters life, also. They both survived fentanyl poisonings in 2016. Kratom is the reason they reached sobriety. It prevented me from getting addicted to pills. Addiction runs in my family- it could've been me. Research from Johns Hopkins University and the University of Florida shows that kratom's natural compounds work differently from opioids — they can relieve pain and improve mood without the dangerous risk of respiratory failure. Studies in Drug and Alcohol Dependence also found that kratom has a low potential for abuse and can even help people reduce dependence on harmful substances. Data from the CDC and the National Institute on Drug Abuse confirm that deaths linked solely to kratom are extremely rare — most cases involve other drugs or contaminants. Another concern of mine is the fact that alcohol has remained easily accessible while being responsible for tens of millions of deaths globally. These deaths have been attributable to alcohol since 2010 (very likely more than 30 million) based on the annual scales involved. Kids are able to get access to alcohol. Alcohol withdrawal is deadly whereas discontinuing Kratom use is not. That's why I believe regulation, not prohibition, is the responsible way. Requiring testing and labeling so products are safe and adults can make informed choices. For me, and for millions of others, kratom has meant	

			a better, healthier quality of life. Please listen to the science, and to the people who use it responsibly every day.	

Sacramento	California	2 - Oppose - Used to Treat Chronic Pain	My name is Dijon Evans and I am a California resident who is very concerned about this potential ban on kratom products. Kratom has literally saved my life and given me the hope that I had lost due to the opioid epidemic and my medical history, losing the pain meds, because of the new opioid laws and the inhumane new rules that no longer permitted patients such as myself and millions of others who were also cut off from the opioid medications due to the illegal selling of opioids by the illegitimate sales of the medications, the illegal prescriptions that were given to those who absolutely didn't need them, but they were obtaining them in order to sell them to those who were trying to make a lot of money by selling them to those who were either addicted to illicit drugs or those who were now desperate because they had been cut off of the medications that they had Legitimate reasons for taking them and had been given Legitimate prescriptions for years, sometimes decades by doctors for Legitimate reasons. I was injured when I had just turned 16. I had a short leg cast put on too tight and it killed the nerves and cut off the circulation. The cast was only on for 4 days, but that was over 3 days too long. After that first week we were told that I was going to end up losing my leg, but I said that that wasn't going to happen! I was wrong! The top specialists had tried to save my leg for 10 years. Doing experimental surgeries and procedures, doing procedures that at the time were considered to be the correct procedures, surgeries and the proper treatments, but now we know that those only made the situation worse and made the nerve damage spread throughout my body, and the 10 years that my leg remained on, only helped to spread the infections, pulmonary embolisms, sepsis, gangrene, deep vein thrombosis,and allowed the osteomyelitis to find a place to hide in my system. It doesn't take much of an injury, a simple bruising to a bone, or just a bruise to anywhere and it leads to another bout of osteomyelitis (bone infection). I have been legally dead several times and on my deathbed several other times. I have full body CRPS with organ involvement, optical, occipital and trigeminal Neuralgia, multiple organ failure, and I have had more than 240 surgeries and procedures. I wasn't supposed to live to be 30, but here I am after a very difficult 30 years beyond that age, several near death escapes, and I just turned 62. I have had amputations, pulmonary embolisms, sepsis, gangrene, 17 bouts of osteomyelitis and now also have osteonecrosis of my jaw, sinuses and facial bones, including the left inner ear, and soon to be the right. It is now affecting the entire inside of my skull, the soft inner bones. There is nothing that can be done for me because I am too high risk for the needed	

			surgeries to repair my skull and inner ears. They can't do surgery because of the extremely high risk that I will develop osteomyelitis of my skull and the chance that it will lead to the infection of my brain. If by chance that I don't develop osteomyelitis, there's an even higher risk that the surgical bone placement would fail because of the necrosis. The only places that could put me into a medically induced coma and provide prophylaxis antibiotic treatment, and then do the surgery while still keeping me in a comatose state, are far enough away that I would have to be flown there. This cannot be done because I don't have any bone in-between my brain and inner ear that we need to provide the protection to our brain when we experience the pressure changes while in flight. So, now with everything else that I have encountered and fought to live through, I am nearing the end of the road. Not just because of my medical conditions, but because of my age. For over 15 years I was bedridden and unable to care for myself. Everything had to be done for me, and it included in home nursing care for the PICC lines.. My daughter has lived with this her entire life. My grandkids have as well! James, my partner has been subjected to this the entire time that he has known me and he's been an amazing, loving and caring man who has taken very good care of me! He's been subjected to so very much! So many times he has been told that he needed to say his goodbye to me because I wouldn't make it through the night. But each and every time that I pulled through the night- I would wake up to him holding my hand, watching me and crying tears of joy as I would open my eyes. Each time he would explain to me why I was in CCU, and he would begin to tell me what happened. Each time he would just look at me and tell me how much he loved me. When opioids were removed from the picture, even though I was diagnosed as a terminal patient, but because I wasn't a terminal cancer patient- so I wouldn't be able to get through the worst known painful conditions that are known to us, this is what I experience. Every single second of every single day. Every single second of every minute. Every minute of every hour. Every hour of each day of every month.. Every month of each year.. Decade after Decade for the past 46 years. It feels like I am being electrocuted from the inside out and that my tissues are being seared together. That's on a good day! Unfortunately I had reached the point where I felt that I was not able to take it anymore and I was ready to take my own life. This has been very difficult to admit because I have a beautiful daughter, and 3 beautiful grandchildren, and an amazing man that I love and he loves me! I have so very much to live for! But each time something else happened, I could see what my health was	

			doing to them and every other person that I love , have loved; I was able to see what it was doing to them, in their eyes. Each time I felt like I was being electrocuted, I felt as if it was going through my body and directly into them. It wasn't only killing me, but it was chasing everyone that I loved- right out of my life. After the first amputation, I spent most of my younger years in college and then medical school. I thrived in college! I was so happy and I felt better than I had in years! But when I was in college, I was in a extremely abusive marriage and I was seriously injured,which made the damage spread through my upper arms and body. I ended up taking a medical leave of absence, but I was very good at research,so when the word kratom was introduced to me, I researched everything that I could find out about kratom! After several months of researching it, talking to my medical team, my mentors, and my family- I decided that if I was going to look at ending my own life, that kratom would definitely be worth a shot. I ordered some pure, unadulterated kratom leaf powder from a reputable vendor and waited. Because of a holiday, and a long weekend- it took longer than expected to arrive. I had already thought that kratom was just a scam anyway... another " get rich scam.. a way for unscrupulous people to take advantage of very desperate people who were in serious pain,looking for a way to find anything to help.. even just a little bit: I held no HOPE that it would help. I was, after all from the science background and I held no belief in dietary supplements. I have spent the past 9 years eating crow for that lack of belief because as I said,I didn't believe in it AT ALL!! BUT AS I SAID, KRATOM QUITE LITERALLY SAVED MY LIFE! I was leaving the house to follow through with my plans to take my own life when the mailman showed up with my first package. I WAS LESS THAN A HALF HOUR AWAY FROM TAKING MY OWN LIFE!! SUCH A DIFFICULT THING TO SAY!! I HAD ABSOLUTELY NOTHING TO LOSE, BUT EVERYTHING TO GAIN by going back in the house and trying kratom. I did. I AM SO INCREDIBLY GRATEFUL THAT I DID!! Approximately 20 minutes later my pain was at a tolerable level. Instead of being in bed, crying and begging for the torture to end, James came home and found me sitting on the couch smiling. He knelt beside me and cried. He knew that the kratom had arrived and that it was helping! Kratom doesn't get rid of all of my pain, but it allows me to be at tolerable levels. I was never supposed to live to be 30 years old, and I have fought very hard to live. For the past 9 years I have been able to experience the miracles of life that most people take for granted. In approximately 15 days, I will be able to see what I was never going to be able to see- the miracle of the birth	

			of my Great Granddaughter. This is what kratom has given me. Please don't ban kratom products. Regulations are what we need, not prohibition!! Thank you very much! Dijon Evans	

Bemidji	Minnesota	2 - Oppose - Used to Treat Chronic Pain	Subject Public Comment Opposing Scheduling of Mitragynine (Natural Kratom Leaf) Dear Members of the Ohio Board of Pharmacy, We need your consideration to our needs and public safety overall, and I am an Minnesota resident. I respectfully submit this public comment in strong opposition to the proposed scheduling of mitragynine, which would effectively ban natural kratom leaf products in Ohio. I live with hypermobile Ehlers-Danlos syndrome (hEDS), a rare genetic connective tissue disorder that has caused spinal instability and misalignment in three regions of my spine, along with recurrent partial and full joint dislocations. I also suffer from small fiber neuropathy, a form of nerve damage that causes severe, often excruciating pain, and dysautonomia, which manifests for me as POTS-like symptoms, gastrointestinal dysfunction (including IBS-type symptoms), and significant autonomic instability. Before finding natural kratom leaf, I pursued virtually every conventional treatment option available through Western medicine. I was prescribed opioids which caused a high i didnt like at all and drowsiness, muscle relaxants which increased my dislocations, antidepressants which didnt help my pain at all, nerve pain medications which didnt help much and only caused side effects and worsened my fainting episodes, and other pharmaceutical interventions—often in combination. These treatments either failed to adequately control my symptoms, addressed only one aspect of a multi-system condition, or caused side effects so severe that I could not safely continue them. This is a common reality for patients with complex connective tissue and autonomic disorders, even patients of complex chronic illness and disabilities that are under treated. Natural kratom leaf has been the only intervention that meaningfully and consistently improves my pain, nerve symptoms, and autonomic dysfunction together, allowing me to function, participate in daily life, and contribute to society. It has done so without intoxication, without dose escalation into dangerous territory, and without the disabling side effects I experienced from prescription medications. I have been using it for over 2 years, I have no withdrawal when stopping even for a week at a time (trust me, I've stopped it just to see) and it had not lost its therapeutic benefits over time, so no need to keep raising dosages, and still to this day if I take more then 4 capsules I will puke and not feel good and you just never do it again, giving it a strong ceiling effect and low risk of abuse. It is not the same as 7oh products and honestly it doesn't show demonstration as of yet via research for causing any public health crisis or harm. I want to be very clear: natural kratom leaf is not equivalent to synthetic or highly concentrated alkaloid products.	

			The emerging harms that have rightly raised concern are overwhelmingly associated with synthetic derivatives, adulterated products, or dangerous combinations with other substances. Lumping a whole-plant botanical into Schedule I ignores this critical distinction and undermines the Board's stated goal of protecting public health. It is also important to note that reported kratom-associated fatalities have consistently involved polysubstance use, most commonly fentanyl, alcohol, benzodiazepines, or other central nervous system depressants. Responsible kratom use explicitly warns against combining it with such substances. Banning the plant itself does not eliminate risk—it pushes people toward unregulated or illicit markets, where contamination and dangerous substitution become far more likely. From a public health and regulatory perspective, this proposal raises serious concerns: There is insufficient scientific evidence to justify placing natural mitragynine in Schedule I, alongside substances defined as having no accepted medical use and a high potential for abuse. A ban would remove a lower-risk option for people with chronic pain, neurological conditions, and autonomic disorders—many of whom are already underserved by existing medical treatments. Science-based regulation, including product testing, labeling, age restrictions, and purity standards, would directly address safety concerns without criminalizing patients who rely on this plant to function. I urge the Board to reconsider this proposed scheduling and instead pursue a measured, evidence-based regulatory approach that distinguishes natural kratom leaf from synthetic or adulterated products. For people like me—and for many others with complex, poorly treated medical conditions—this plant is not recreational, and it is not replaceable. Thank you for your time, consideration, and commitment to protecting the health of Ohioans. Sincerely, A disabled MN Resident	

Clinton	Tennessee	2 - Oppose - Used to Treat Chronic Pain	I urge you to oppose any legislation that would criminalize this natural plant, as doing so would take away a vital option for those of us living with chronic pain and would ultimately harm countless Americans who are already struggling. I fully support safe, science-based regulation of kratom to ensure product purity and consumer protection—but not prohibition, which would eliminate access entirely and push people toward far more dangerous substances. Seven years ago, I suffered a back injury that led to debilitating chronic pain. At times, the pain has been so severe that I have been unable to walk, sit, or stand for months at a time. It has significantly impacted my quality of life, leaving me unable to work for over a year. Throughout this painful journey, I have sought safe and effective ways to manage my condition. Kratom became a crucial part of that journey. It allowed me to manage my pain without resorting to dangerous and addictive opioid medications. While opiates might have temporarily numbed the pain, they carried the clear risk of dependency, overdose, and long-term harm. Kratom, on the other hand, provided me with enough relief to function, seek care, and ultimately find a treatment that has given me real improvement. Without kratom, I would have had no other option but to turn to pharmaceuticals that could have left me in a much worse situation today. I also want to highlight an important scientific distinction that is often misunderstood: kratom itself is not the same as 7-hydroxymitragynine (7-OH). 7-OH is a potent oxidation product that appears only in very small amounts in the natural plant but can be dangerous in concentrated or artificially elevated forms. I support prohibiting synthetic or enhanced 7-OH, as its pharmacological effects are significantly stronger and can carry real safety concerns. Kratom leaf, however, contains mostly mitragynine, which does not have the same risk profile. Responsible regulation should reflect this difference. Treating kratom as though it is equivalent to concentrated 7-OH is scientifically inaccurate and leads to misguided policy. Attempts to ban kratom are not in the best interest of the American people—they only serve to benefit big pharmaceutical companies while leaving patients like me without safe alternatives. The opioid crisis has already devastated families and communities across our nation. Removing access to kratom would push more individuals toward dangerous prescription opioids, worsening an already dire situation. I ask you to stand with those of us who rely on kratom as a safe, natural means of pain relief. Please oppose any ban on kratom and instead advocate for policies that prioritize harm reduction, responsible use, and individual choice in healthcare. Thank you for your time	

			and consideration. I hope you will listen to the voices of those who have benefited from kratom and make the compassionate choice to protect access to this life-saving plant.	

Houston	Texas	2 - Oppose - Used to Treat Chronic Pain	I suffer from degenerative disc disease in my neck and back, and was in pain management for 9 years, taking opioids daily to help relieve the pain. The doctor abruptly abandoned me due to the strict government policies, and no other doctor would take over my care. I heard about Kratom from the documentary A Leaf of Faith and decided to try it. It's been six years, and it's worked far better than any of the pharmaceuticals I used to take, like OxyContin and Percocet. I did not suffer from opioid withdrawals, I've had no negative side effects, and I am free from debilitating pain. Natural Kratom is just a plant. As a consumer, I want to be sure the Kratom I use is not synthetic or adulterated. We need regulation, not prohibition.	
San Diego	California	2 - Oppose - Used to Treat Chronic Pain	Please do not ban or criminalize natural kratom. Natural kratom is not the same as 7-oh products which is synthetic. Millions like me use natural kratom safely everyday and has changed our lives. Natural kratom has helped my chronic pain conditions and I was able to get off all medications. Any bans or criminalization should be focused on 7-oh products only. Thank you for considering my email	
Sayreville	New Jersey	2 - Oppose - Used to Treat Chronic Pain	Regulating kratom to the extent of this “rule” will only drive more people to use opiates. I have used kratom for 3 years to help with debilitating back pain, as 2 discs in my lower lumbar spine are ruptured and I am essentially bone on bone between 3 vertebrae. Kratom is the only option I hate as opiate addiction runs in my family and I do not want to down that path. I have noticed zero withdrawal symptoms when I stop use for however long and I’ve had no ill effects from its use. It helps me to manage the symptoms of my pain and I can be productive all day in my physical job with very few limitations. It’s been a miracle supplement for me and countless others.	
San Antonio	Texas	2 - Oppose - Used to Treat Chronic Pain	My name is Lorelei Schufletowski. I am a 61-year old woman living with chronic back pain and a torn rotator cuff. I have two college degrees and am from an upper-middle class family. In the early 2010’s I became dependent on Vicodin after I experienced my first back injury. In 2014 in Texas, Vicodin was banned from being prescribed by my primary care doctor and I was left in a state of chronic pain. The next year I discovered Kratom after hearing about it on television. It has been a godsend to me. Without it I will not able to perform my daily tasks. I have owned my own business for 18 years now and being pain free is critical to the work that I do. Please do not ban Kratom in Ohio. Doing so will seriously impact individuals like myself. Sincerely, Lorelei	

Cocoa	Florida	2 - Oppose - Used to Treat Chronic Pain	Please please don’t ban any kratom products they are lifesavers for people living with serious illnesses. The opioid restrictions that have been implemented nation wide have adversely affected our community. Kratom is the only thing that is keeping most of us from going to the streets to find pain relief. Again, I beg of you to not take this miracle drug away.	
Phoenix	Arizona	2 - Oppose - Used to Treat Chronic Pain	I am a disabled citizen who has a bone disease called Osteogenesis Imperfecta which leaves me with innumerable bone fractures over my life time. Because of these constant fractures, I experience a great amount of daily pain that hinders my ability to perform daily tasks. Pain greatly limits my mobility and quality of life. However, since I began using Kratom in the last few years, I have been able to manage my day to day routine better, and even participate in the work force again. I can contribute to society and to my community. I am able to hold a job, and not be dependent on charity. If Kratom is classified as a schedule 1, my quality of life would drop dramatically. I would no longer be able to manage my daily condition independently and I wouldn't be able to work anymore. I would become bed-bound and dependent on the state again. Kratom allows me the independence to be a contributing member of society. Without risking any health issues to other parts of my body. Please consider me and people like me. Please do NOT classify Mitragynine as a Schedule I controlled substance. It's proven properties do not constitute such a classification.	
Norfolk	Virginia	2 - Oppose - Used to Treat Chronic Pain	With Kratom, I no longer see a psychiatrist nor take anti-depressants. My extreme back pain from re-injury and surgery in 2016 is controlled without painkillers. Also, Kratom has been indispensable in stopping my dependence on alcohol. I haven’t had a drink in four years, something I thought was impossible. I imagined that I would die a full-blown alcoholic. I am closer to my Lord, wife and family, and had perfect attendance at work before being forcefully retired due to my back injury. Kratom is a gift, but it doesn’t cure everything. I take great joy in living again and no longer feel as if under a dark cloud. Kratom has helped me immeasurably, and I would hate to lose this new life I have been given. There are many others with the same story. Please don’t make me a criminal by banning the resource that has saved my life.	
Savannah	Georgia	2 - Oppose - Used to Treat Chronic Pain	It would be a terrible mistake to ban natural leaf kratom Many people utilize this herb for so many reasons everything from chronic pain management to mental health issues and even helps people with alcohol and drug dependence	

Quincy	Massachusetts	2 - Oppose - Used to Treat Chronic Pain	I am a two time cancer survivor. My first was stage 3c colon cancer in 2006. It required major surgery and six months weekly chemo which saved my life but destroyed the nerves in my feet resulting in permanent debilitating neuropathy. I spent years at the Brigham & Womens pain management clinic trying numerous different therapies that provided little to no relief. Ultimately I made a deal with the devil and wound up on Rx opioids which maybe gave me 50% perceived pain reduction but quickly caused major dependence. After years addicted to the pills I could no longer tolerate them so I stopped. I nearly went insane. I was sick for weeks after my last dose with no end in sight when someone suggested Kratom to ease the sickness. I tried Kratom and it completely eliminated the sickness and never ending chills and anxiety. I finally felt normal again. The best part is that I discovered that Kratom not only made me feel better but also completely eliminates the stinging neuropathic pain. It works better than every other drug I've tried including dangerous and addictive pharmaceutical opioids. I have been using kratom since 2018. Banning Kratom leaf across the US would plunge me back into a hopeless lifetime of never ending pain or turn me into a criminal simply for wanting relief. I was lucky enough to live after having late stage cancer and another different cancer in 2021 and would like to live what remains of my life without being in non-stop pain. There are many other people like me who benefit from Kratom. Please reconsider a ban on natural Kratom leaf and instead consider regulation and focus on banning synthetic derivatives. The synthetic products being sold at gas stations are not kratom.	
Cleveland	Tennessee	2 - Oppose - Used to Treat Chronic Pain	I have a pretty severe disability that is extremely painful yet about 10 years ago I was unable to get narcotic pain relief. I was desperate, in pain, in bed and too young to be bed ridden. I tried kratom and have been happily able to get relief without narcotics. I havent taken more than a teaspoon per dose in 10 years. Ten years later, my spouse had numerous bone surgeries that left him disabled. We both get SSDI. It doesnt take away all our pain but we are able to get out of bed most days.	

Reno	Nevada	2 - Oppose - Used to Treat Chronic Pain	My name is Andrew Clay Sarrels, but I am most commonly known as Dru Clay. I am 37 years old at the time of writing this testimony. I am originally from Modesto, CA but currently reside in Reno, NV. I am writing to you today to urge you to reconsider your decision to ban/schedule the Kratom plant. I am a 14 year Kratom advocate who has not only safely and effectively utilized Kratom in my life, but has witnessed Kratom positively impact the lives of countless individuals over the course of those 14 years. I initially found Kratom in 2012 while in search for a healthier alternative to addictive prescription pain medication. I was born with scoliosis, have accumulated an array of injuries from being a lifelong athlete, and have suffered several injuries from instances such as car accidents. Chronic pain is nothing new to me as I have lived with it forever, but after high school I became heavily dependent on prescription pain medication. For 6 years, I sank further and further into dependency and it took a toll on my mental and physical health. Being a natural athlete who stresses the importance of health living, proper diet and fitness, I made the decision to leave the pills behind and get my life back. Kratom helped me to do that. I get regular check-ups/blood work and I as healthy at 37 as I was at 27 and 17. Kratom has had zero negative effect on my health and life, only positive. There is immense amounts of evidence to support that Kratom is a much safer and healthier alternative to several other substances when utilized properly. I work to help spread awareness and information backed by studies and science so that other individuals can be given the same opportunity to change their lives the way I have through my discovery of Kratom. Scheduling/Banning Kratom would not only make criminals of the many people who rely on Kratom for a better quality of life, but it would drive all of the people who have used it to help their chronic pain, anxiety, and sleeplessness naturally to resort to more harmful and unnatural substances, which would inevitably drive the crime and overdose rate up. Overdose rates are higher than ever and only continuing to rise. Scheduling/Banning Kratom would only be adding to an already overwhelming problem. I highly recommend that you consider a proper regulation of this plant as opposed to prohibition. I know that it's hard to ignore the propaganda that is spread by people who have never used Kratom and are uneducated about it, but please consider the account of someone with more than a decade's worth of experience in your decision-making process. Thank you for your time.	

Hesperia	California	2 - Oppose - Used to Treat Chronic Pain	I am a 39 year old wife and mother of two. I've had chronic back pain for eleven years. I used to be in pain management before we lost our health insurance years ago. I was in a chronic pain support group back in 2013 when someone suggested Kratom. I had nothing to lose so I gave it a try. It has been a game changer not only for me but my family as well. My pain is managed so much better now than it ever was with pain medication. I am truly the mother and wife my family deserves all thanks to Kratom. It saved me and gave me my life back.	
Arlington	Texas	2 - Oppose - Used to Treat Chronic Pain	I am in my 70's and have been using Kratom for about 3 years. I only use powdered whole leaf for relief of arthritis and joint pain. I works very well, without the mental fog that opioids cause. Just had blood work done and all functions including liver and kidney were great. Please don' take this option away from us arthritic seniors. Banning 7-oh was a good move to protect the public. Banning whole leaf Kratom would hurt the public. Just make sensible regulations so minors can't purchase. Please be sensible for your constituents. Thank you	
Wynantskill	New York	2 - Oppose - Used to Treat Chronic Pain	I'm a home owner, a veteran, a mom, a full time employee... and I use kratom for my arthritis instead of pain meds. It's a plant. A plant in the same family as the coffee plant. When are we going to stop fighting plants? Just because an addict dies with kratom in their system doesn't mean it's kratom. What if they had dairy in their system? Regulate it like NY, for the sake of us with achy knees/feet/shoulders/fingers.	
Houston	Texas	2 - Oppose - Used to Treat Chronic Pain	I am calling to oppose placing mitragynine into schedule one and to request A public hearing to determine whether the rule should be denied or withdrawn, please log my comment as public opposition. This could be real world harm eliminating lawful access to This natural leaf. Please consider a hearing to hear real testimonies about how this leaf is life-saving for some. I am a chronic pain Patient and doctors are abandoning patients everywhere and this allows me to get out of bed when doctors have abandoned everyone in chronic pain. The danger of denying this natural leaf leads to other people looking further in the streets for drugs and those are much more harmful. This natural leaf is no real danger. And like I said, life-saving to some. People cannot get adequate pain control and will look further into Street drugs if they cannot have access to this natural leaf product. Please consider the harm of taking this access away.	

Winchester	Virginia	2 - Oppose - Used to Treat Chronic Pain	I understand that there is a proposal underway to criminalize the use of plant-based kratom products. I believe this should be ceased. My story is just a tiny drop in the bucket of numerous, mature, tax-paying citizens who have found refuge in a time tested remedy that works. I found kratom at a very desperate time in my life. I was in excruciating pain and none of the many doctors and/or hospital visits could figure out what was wrong. I was essentially bed-bound. Then I started kratom therapy and it afforded me the ability to get out of bed and be a mom to my 2 small kids again. It turned out that I had a brain herniation, Ehlers-Danlos syndrome, acquired epilepsy (due to a TBI from the herniation), POTS, chronic migraines, bilateral superior semicircular canal dehiscence, dysautonomia and myasthenia gravis. My major joints continue to dislocate frequently throughout the day due to my genetic condition. I am in constant pain from both the dislocations and the premature damage and arthritis this has caused to all of my major joints. I still safely take it every day. It has helped me stay on the same very low dose of prescription pain medication for the last 11 years with no need to increase. Most people develop a tolerance to opioids and require higher doses over time, my doctor has even asked me several times if I feel like I need to increase and I haven't felt the need to. My bloodwork is always within normal limits, no signs of toxicity or other overt clinical signs or reactions. I would know, as I spent 13 years working in pharmaceutical toxicology. I take multiple medications including 2 for epilepsy, pain medication (including fentanyl patch), and much more and I have NEVER experienced any interactions before or after starting my medications. In fact, prior to beginning kratom, my liver enzymes were elevated and shortly after I initiated self treatment, they returned to within normal limits. It has changed my life for the better and I don't want to think about what my life might be like without it. This is a plant that simply treats pain, or addiction in some, it doesn't change the way someone behaves like other plants such as cannabis which is already legal in many localities. It poses no threat to the public because of this, or the person taking it. I cannot fathom the rationale behind any governmental body removing access to this plant, as if they do so, people like me will require more opioids/higher doses in order to treat chronic pain and existing illnesses further exacerbating an ongoing epidemic. At the same time, I want to ensure that I, and my peers, are getting a safe, natural product. I hold strong beliefs in the preservation of personal freedoms. This appears to be yet another attempt by a governmental body to take said freedom from mature, taxpaying citizens. And where does it end? I also think it's	

			important to think about and address any potential downstream effects prior to making policy changes that affect real people, ie, your constituents. These are actual human lives you are dealing with, taking this away is going to severely denigrate real people, sensitive populations, and create a sense of desperation, especially in those with severe pain issues. I assume you have a plan in place to support such individuals? It's not that easy to access proper pain management these days, and again, this leads to more opioid use and possible abuse. We are currently managing just fine on our own, but if you take away the one product that actually works for us, we (the kratom community) will need help immediately. I hope it won't come to this and that you will do the humane thing and keep Kratom safe and available, thank you for your time :)	
Hinesville	Georgia	2 - Oppose - Used to Treat Chronic Pain	We have gotten our lives back with the whole leaf kratom and can function without too much pain because of it. The synthetic 7oh is bad we agree but please don't take the whole leaf natural kratom so many of us are having great lives because of it!!	

Vancouver	Washington	2 - Oppose - Used to Treat Chronic Pain	To whom it may concern, I am writing to share my personal experience with kratom and to advocate for its responsible, informed use. For me, kratom has been a helpful plant when used thoughtfully and in moderation. I have found it particularly useful for managing everyday pain, easing common cold symptoms, and acting as a mild cough suppressant during short periods of illness. In these situations, it has provided relief that allowed me to remain functional without resorting to stronger pharmaceutical options. I believe it is important to emphasize responsibility, proper dosing, and honesty about both benefits and limitations. Kratom is not a cure-all, but when respected and used carefully, it has been a valuable tool for my well-being. Thank you for taking the time to consider my experience.	
Hattiesburg	Mississippi	2 - Oppose - Used to Treat Chronic Pain	I'm a chronic pain patient who is suffering from 4 disabling diseases and I receive no treatment for any of my pain. Kratom has been the only thing that keeps me going, I can live with the pain if I have kratom. If I don't have kratom, I lay in bed all day crying in excruciating agony. Please listen to us. I have been taking kratom for 8 years now.	
Humble	Texas	2 - Oppose - Used to Treat Chronic Pain	Please do not schedule natural Kratom. Schedule 7OH. Not Kratom. So many people use natural Kratom so alleviate themselves of pain anxiety and many other symptoms and can't get help any other way. The elderly and veterans are some of the law abiding people that use natural Kratom. Please don't take it away from them. This will cause them so much more harm to schedule Kratom rather than regulating it. Thank you.	
Vacaville	California	2 - Oppose - Used to Treat Chronic Pain	Please do not schedule Kratom. This plant is safe and helping millions of chronic pain patients. Unlike full agonists, Kratom is a partial agonist. Therefore, it does not cause respiratory depression. Support the federal Kratom protection act.	

Santa Fe	New Mexico	2 - Oppose - Used to Treat Chronic Pain	Hello, I am writing in solidarity with Ohio kratom users, to ask that kratom not be put on schedule 1, but to remain available for adults over 21. I have a degenerative tissue disorder that effects my joints and ligaments, to which there is no cure. It has caused me constant pain for over 20 years. I've pursued every available medical treatment, but unfortunately our medical system has not only failed to help me, it has made me much worse. My experience with using legal, doctor prescribed pain medications and muscle relaxers left me with serious health problems, crippling addictions, toxic reactions, and even overdose. When I tried to quit these medications, I experienced horrible withdrawals. Going off of opiate painkillers and benzodiazepines was one of the most difficult things I've ever had to go through in my entire life. Once I got clean from the pharmaceuticals, I swore I would never go back to using them again. Finding kratom was a lifesaver for me- it literally saved my life. I'm sure I would be dead right now if I had continued taking the pills the doctors gave me. Kratom helps me to manage my chronic pain in a safe and natural way. Kratom has also helped me to get clean from dangerous and highly addictive prescription pills which were destroying my body. Kratom has also helped me kick a decades long addiction to alcohol. Not only has kratom kept me sober from alcohol for years, it has completely eliminated my desire to drink. I think that alone is a miracle. I've used kratom now for 7 years and I have never experienced anything close to the horrors that I experienced with prescription pills. To put it simply- the doctors gave me horrible addictions- kratom on the other hand has given me freedom. It's important to note that kratom does not have the same kind of potential for abuse and addiction like prescription opioids. Kratom does not cause respiratory depression the way traditional opioids do. Kratom also has a natural ceiling of effectiveness. The reason why I feel kratom in its natural form is safe, is precisely because of this built in ceiling effect- where the more you take, the less it works. Taking too much kratom just leads to diminished returns or unfavorable effects like nausea and dizzyness- none of which is life threatening, but works well enough to deter the user from over-use. In other words, kratom has a built in safety mechanism that prevents abuse. Traditional opioids do not have any such safety mechanism. I know because I have experienced both. In summary, kratom has improved the quality of my life in a safe and balanced way, helped me with my constant pain, and has allowed me to become a productive, tax paying member of society. I am not a drug addict, but I do know what addiction to drugs is like- and our health care system is directly	

			responsible for that. This is why I'm advocating for kratom- a safe and natural way for people like myself to treat chronic pain. If kratom is banned, thousands of people will be forced to return to using dangerous, highly addictive and destructive substances. Overdoses and suicides will rise. Kratom may not be perfect, but for me it's significantly better than any of the solutions offered by our health care system. It is wrong to prevent access to a life saving plant like kratom.	

Willingboro	New Jersey	2 - Oppose - Used to Treat Chronic Pain	My name is Christopher Deaney. I'm one of the millions of Americans whose lives changed because of natural, plain-leaf kratom. When I was eight years old, I was hit by a car. The injuries stayed with me, and for fifteen years, I followed the only path I was given: long-term prescription opioids. They kept me functioning, but they didn't give me a life. By 2015, I was worn down and searching for a better way forward. That's when I discovered natural kratom. I brewed four grams of plain leaf into a cup of tea, and within twenty minutes I felt more clarity, more stability, and more function than I'd had in years. There was no fog, no euphoria, no loss of control, just a steady return to me. That experience pushed me to learn everything I could about this plant. I wanted to understand why it worked the way it did. I began studying chemistry, its traditional use, and the growing body of research. I connected directly with Indonesian farmers who have cultivated and used this plant responsibly for generations. Over the past decade, I've gained in-depth knowledge of this plant and remain open to discussing its science and real-world use with lawmakers, regulators, and researchers. Because here is the core truth that must be clearly stated: Natural kratom and synthetic derivatives are not the same thing. Plain-leaf kratom contains dozens of naturally occurring alkaloids that exist in balance. When consumed as tea or powder, the human body regulates them. Only a tiny, controlled fraction of mitragynine converts into 7-hydroxymitragynine through normal metabolism, and the body imposes a natural ceiling on that conversion. That metabolic safeguard is a key reason kratom has been used safely for generations in traditional contexts. Synthetic compounds, including lab-made 7-hydroxymitragynine, MGM-15, MGM-16, and SR-17018, bypass those safeguards entirely. They deliver unregulated pharmacologic spikes, introduce dependency risks, and create safety concerns that do not exist with the natural leaf. These substances are the real source of risk and confusion in today's marketplace, not traditional kratom. We face a clear choice. We can regulate responsibly based on science and real-world evidence, or we can lump a traditional botanical together with synthetic compounds that have no historical use and no natural regulatory checks. At the federal level, lawmakers have introduced the Federal Kratom Consumer Protection Act, which establishes clear national standards for identity, labeling, purity, manufacturing practices, and age-restricted sales, while preserving adult access to natural, plain-leaf kratom. This framework draws a necessary line between traditional botanical products and synthetic or adulterated substances that do not belong in the same regulatory category.	

			https://www.congress.gov/bill/118th-congress/senate-bill/3039/text Millions of Americans use natural kratom tea every day to stay functional, stable, and present for their families: veterans, parents, workers, and people like me who need a way to live without escalating pharmaceutical dependence. Kratom didn't erase my past, but it gave me a future. I'm asking that we protect access to the natural plant while drawing a clear, enforceable line against synthetic products that do not belong in this conversation. Please feel free to reach out for any reason. I would welcome the opportunity to discuss natural kratom, my personal experience, and how we can responsibly protect access to natural remedies that have been used safely for thousands of years. Thank you for your time and consideration, Christopher Deaney Salem County, New Jersey	
Farmington	New Mexico	2 - Oppose - Used to Treat Chronic Pain	While I heavily support the ban of synthetic 7-OH, natural kratom has helped my pain considerably and it's helped my parents pain as they age. We cannot go back to perception pain meds.	

Vancouver	Washington	2 - Oppose - Used to Treat Chronic Pain	I have used mitragynine and its related compounds for over 20 years safely to treat my pain and anxiety. w While also working full-time and paying taxes. I run my husky for a few hours a day and I take part in my city community efforts. This plant and its chemicals have provided more for me than the medical industry has ever done in my entire life. To make something like this illegal is literally to go against logical science.	
Fairfield	California	2 - Oppose - Used to Treat Chronic Pain	Good afternoon, Chair and Members of the Committee. I'm a person living with Complex Regional Pain Syndrome, also called Reflex Sympathetic Dystrophy, Causalgia, Sudeck's Atrophy, AlgoNeuro Dystrophy, Algo Dystrophy, Amplified Musculoskeletal Syndrome, Reflex Neurovascular Syndrome for 25 years. It is a rare, progressive musculoskeletal Neuro inflammatory disease so painful that it's nicknamed the "suicide disease." My nerve damage is so severe, my skin feels like ice-fire and my bones viscerally throb. Additionally, I live with multiple chronic illnesses and intractable conditions- both congenital and acquired. I was a compliant pain management patient for 12 years, with the same doctor, relying on a spinal cord stimulator and a low dose of prescribed opioid medication. But in 2016, at the height of the CDC opioid recommendations, I was abruptly dismissed from care in the midst of my providers sale of his practice. My medications were cut off without warning, and I went through dangerous cold-turkey withdrawals from opioids, antidepressants, and anticonvulsants. My stimulator has been broken and unmanaged since. I spiraled into depression, suicidal thoughts, and alcohol misuse just to dull the pain. I felt abandoned by the system. I was held in a psychiatric unit in 2016 and again in 2017 for being a danger to myself. In that darkness, I turned to Kratom. And later, at times of severe flares since March of 2024- 7-Hydroxymitragynine, or 7OH, a derivative and metabolite of Kratom. For nearly seven years, Kratom has been my safe and effective daily support. It became my life preserver. It eases my often unbearable chronic pain, helps promote wakefulness in narcolepsy, lowers my blood pressure, and most importantly- it gave me enough stability to achieve and maintain seven years of sobriety from alcohol. I have experienced no harmful effects other than increased pain if I skip it. 7OH, though more potent, offers additional targeted pain relief when respected and taken responsibly, much like opioids should be. I do not deny that dependency exists. But dependency is not the same as addiction. I don't become destructive, lie, steal or trifle when I don't have either on hand. Kratom and 7OH, when regulated properly, are far safer than the alternatives patients often turn to when left untreated. That is why I strongly support Consumer	

			Protection establishing product safety through manufacturing standards, accurate labeling, third-party testing, and age restrictions. Regulation protects consumers. Prohibition, on the other hand, would only create unsafe black markets and leave patients like me without options. Kratom and 7OH are not luxuries for me- they are life vests. Some days they allow me to make dinner. Other days they allow me to survive a severe pain flare. Due to my disabilities it remains painfully difficult to weight bear. Kratom allows me to be with my grandchildren, 7OH relieves me enough to physically play with them, be attentive and watch over them. I don't take any prescribed or illicit medications or drugs. Many people have barriers to accessing medical care and I am one of them. Please don't ban my blessings. I urge you: choose compassion and safety. Support regulation, not prohibition. I've been able to achieve more this last year than I had the decade prior since patient abandonment. Because of the addition of 7OH. Thank you for your time and consideration. Sincerely, Twinkle VanFleet – Healthcare Advocate, Fairfield, CA. Please contact me if you have any questions. Twinklev.strongerthanpain@gmail.com	

Minneapolis	Minnesota	2 - Oppose - Used to Treat Chronic Pain	Hello, I have a friend who lives in Ohio and he uses the herbal supplement, kratom. He was in a terrible accident years ago that left him unable to work. He tried everything. Pain medication was too strong for him--it left him in a haze and too out of it to work, making his situation worse. He found kratom and drinks 5 grams of it, in the plain leaf powder form, in a tea. He does not take any medication. He is not intoxicated in any way when he drinks kratom tea. He is simply himself again. I've seen it firsthand: it saved his life. He can work again, provide for his family, be a better father. I understand there are problems in the industry: adulterated products, lack of testing, no age limits, and the emergence of 70h (which is not kratom at all)... but these can all be addressed with smart, proper regulation. Plain leaf kratom in and of itself is no threat, and there is plenty of research coming out all the time backing this up, alongside the fact that it has been used safely for hundreds of years. Please do not ban kratom. I am begging you to do the right thing here. Please have an open mind and an open heart to people like my friend. Thank you	
Portland	Oregon	2 - Oppose - Used to Treat Chronic Pain	It is hard for me to understand that pure Kratom leaf is so dangerous. That is not my experience at all. To say it is like an opiate in pure leaf form is an outright misrepresentation. Science exists and studies have been completed that show an affinity to some opiate receptors but this plant IS NOT an opiate. It helps with pain and anxiety, if taken in small doses. Increased doses cause very unpleasant side effects and one learns from these errors in dosing very quickly. Kratom does not make you feel more intense with more. It is quite the opposite. This plant has so much value to science and the future of pain management and I encourage your board of pharmacy to regulate Kratom rather than out right ban it. Alcohol is FAR more lethal and destructive yet remains legal to buy anywhere, even as it causes so much horror and destruction to people, and death. Kratom is safe and helps people. Gas station heroin and Kratom leaf and NOT THE SAME THING. Kratom takes the blame for Tianeptine...a highly addictive and psychoactive substance that makes gas station heroin so dangerous. NOT Kratom leaf. Please research this further and do not out law this lovely plant that has so much promise in the future of pain relief.	

Eugene	Oregon	2 - Oppose - Used to Treat Chronic Pain	If you ban raw kratom powder all your doing is creating a black market and sending people into dangerous places to get some healing. I have sciatica and 2 fused vertebrae. I was prescribed percent and flexeril, all it did was make me a zombie. My sciatica was so bad my left leg drug behind me when I walked. I found out about kratom in 2015 from an article and found some and gave it a shot. It mostly took away my pain and I was able to function again as I stopped taking the percs and the flexeril. I was able to get out of bed again and started physical therapy. I completed that in 2/3rds of the time I wa supposed to take it. Soon after I was able to work again. 11 years later I'm still working and when my back gets bad I take some and work on my stretches. Ohio is a state plagued with drug issues already. Dont create another. By illegalizing kratom you will add bad actors who will lace the kratom and you will send some people back into bad drugs simply because they want pain relief. Suboxone and all these other drugs they give only create addicts. While I fo thi k 7oh has a place, it should not be sold over the counter to whoever. It should be prescribed and replace things like Suboxone. Its easier to ween a person off of it with kratom even. Maybe instead of banning kratom. Schedule 7oh to where it has to be prescribed and allow people to buy kratom again. Although kratom should be regulated and tested to make sure there's noo adulterated products going into it. I feel you are making g a mistake with the ban. Ban 7oh if you have to but leave plain leaf raw kratom alone and if anything join onto the kcpa or kratom consumer protection act. Refer to the American kratom association for more info.	
Nashville	Tennessee	2 - Oppose - Used to Treat Chronic Pain	Stops Chronic back pain. Natural alternative to pain meds.	
High Point	North Carolina	2 - Oppose - Used to Treat Chronic Pain	I have been taking Kratom for several years now, in order to manage pain from an old back injury. I have experienced no detrimental effects. I think scheduling this coffee related herbal supplement is wrong. The use of Kratom is a decision to be made by each adult individual, not state bureaucrats. Thank you.	

Phoenix	Arizona	2 - Oppose - Used to Treat Chronic Pain	Plain leaf kratom is a safe and effective remedy for multiple maladies, including pain. This supplement is used safely by millions of people throughout the United States. Attempting to criminalize this plant is simply misguided effort overflowing from the treatment of the opioid/fentanyl epidemic. There is no basis in science or reason to remove plain leaf kratom from the public sphere. This plant has been around, freely available, in the United States, and throughout the world, for centuries--there is simply no need to create new draconian legislation that will negatively affect the citizens of Ohio. Rather than craft restrictive laws that limit personal choice, create suffering, and make potential criminals out of law-abiding citizens, perhaps the Board could consider supporting helpful and compassionate legislation, such as supporting the Kratom Consumer Protection Act. Thank you for your time and consideration in this matter. Jon Trustman	
Lakeville	Minnesota	2 - Oppose - Used to Treat Chronic Pain	My dad has been taking kratom powder for the past 5 years for pain management. Prior to kratom, he was in and out of rehabs and jail because of his pain pill addiction. Because of kratom, he is able to work and be a dad. Follow the true science on kratom. Don't ban kratom powder. I have been taking kratom for eight years. Kratom saved my life. I was a professional race and raced Nascar for many years. I was making over 2.5 million a year. In 2007 I broke my neck racing and got put on pain meds. You know how the story went after that. Lost everything in my life. I don't know how you can say kratom isn't safe. Kratom has never killed someone. They say it has but there has always been something else in the bodies. If we are trying talking safety. Why isn't the board of pharmacy going after pain pill head medication alcohol. They kill thousands a day. Why are you not going after all those. ITS about money not safety. Kratom saves lives and the science shows it. All your going to do if you banned it is make people go across state lines to buy it. Lost all that tax money. I have a history of kidney stones and migraines and i can not take narcotics to manage pain when im having issues. Kratom has been a life saver in these incidents. It controls the pain and im still able to function which means i dont need to miss work. Im not a daily kratom user but im glad its available when i need it. Banning the natural powder will greatly	

			impact my life. I would like to see kratom regulated with clear instructions and warnings per science based research and not banned.	
Devils Lake	North Dakota	2 - Oppose - Used to Treat Chronic Pain	No, I am not from Ohio, however states tend to adopt regulations from other states so your proposed prohibition may affect me in the future. I am a daily user of mitragynine (kratom). I use it regularly for joint pain and it helps with my balance problems caused by vertigo. I've been told it's addictive, however I typically don't use it on weekends and haven't experienced any sort of addiction or withdrawal. Kratom has been a Godsend for my condition for more than 10 years. This country doesn't need more regulation and prohibition. It needs more understanding. Don't fear the unknown, try to understand it.	

Memphis	Tennessee	2 - Oppose - Used to Treat Chronic Pain	After waking up one day in 2005, paralyzed from my neck down, I was eventually diagnosed with Transverse Myelitis, and became a chronic pain patient. For years, I was able to manage my chronic pain with prescription medications, but eventually with more DEA cutbacks and new regulations over the years those were no longer an option for me. I was left to endure living in pain every single second of every single day just like so many other chronic pain patients in the same position. Luckily I discovered whole leaf kratom powder in May of 2019. I've been consuming it responsibly for 6 years and it has granted me a second chance at life! I no longer suffer every day, I can get out of bed and be a mom! I can go to school functions run errands, go to the store, and just live life without suffering. Though I regained mobility I still face many physical limitations, however I'm no longer confined by constant pain. Kratom gave me my life back. There are SO many people who are benefiting from whole leaf kratom, please don't take that lifeline away. Chronic pain patients already have such a limited amount of choices, if kratom works for someone who's 21 or older then they should have the right to do so. Support regulation like the KCPA and education around differentiating 7oh products from whole leaf kratom.	
Orem	Utah	2 - Oppose - Used to Treat Chronic Pain	My name is robin, i have been using pure leaf powder for 2 years. I no longer need to use opioids to control my pain.And it's shameful that people want to band kratom, lumping it all together with adulterated products. Purely powder that has been lab tested.It's so beneficial to all's the rest of it is crap! Thank you for letting me leave a comment.	
Margate	Florida	2 - Oppose - Used to Treat Chronic Pain	I have been a kratom consumer for over 20 years. I take tolerance breaks and I only take it 1-2 times daily. What is happening doesn't sit right with me, how products like cosmetic smoke shop drugs that advertise, which mon FDA approved cannot make claims as to what is does, and I feel misrepresented by the AKA who allowed these companies to slander it by calling it gas station heroin or legal oxy, the plant keeps me going I cannot take prescription painkillers and this alternative helps me a lot. I'm not even from Ohio, but am advocate for kratom. Because of gross negligence on the behalf of the user, alcohol is worse, cigarettes are worse, even sugar and coffee! Kratom is in the same genus as coffee. You take too much, you puke it up, or get a headache, but who shovels things in their mouth that they don't look into. Not the fault of the plant but a fault of irresponsibility on the consumer. Any business that promises a non FDA approved carries fines. Why haven't these companies been shut down? As for me I use trusted vendors with lab tests online fresh abundant and safe. Leave it alone!!	

Everett	Washington	2 - Oppose - Used to Treat Chronic Pain	Hello, my name is Scott I live in Lewis Center, Ohio and have lived in this State for 33 years. I would like to start off by saying that where I came from and where I am now is fully because of Kratom. I have a severe arthritis condition and rely on it to help with inflammation, energy and anti-anxiety effects and because of Kratom, I can go for walks with my wife, I travel, I exercise every day and so thankful. I know there are places that sell bad types of synthetics that only carry the name and gives natural Kratom which is what I take a bad name. I take only the powders all natural and I take a small amount each day. I know what addictives are I used to be on 8 different types of pain killers, anti-depressants, anti-anxiety meds, etc. When I put all of those down, I found kratom. I take a few capsules that I make myself from bulk all natural powders or steep some tea. The reason I know for me it is not addictive is that I take the same amount or sometimes way less for the last 9 years, the same amount. I know withdrawal, I know what that feels like and that is not the natural kratom. I know what pain killers are and having to take more, and more and get a different dose and get a stronger med that is not this, I took them for years. I took Hydrocodone, Percocet, Opana (2 kinds) Cymbalta, muscle relaxers, Klonopin, etc. I was on a lot of that all at once from pain clinics legal ones here in Dublin. Everything can have some sort of addictiveness, I get it. People that are looking for something will eventually find what they are looking for or something else. There are many of us that take a small amount as it should be taken and get Tremendous benefits from it. I am not a conspiracy guy, but I see the drug companies and how many commercials and how much money they give people to go their way. More, and more natural remedies are under attack why? It will be where people that live in chronic pain won't be able to get anything to help. It's ok everyone will get there. The people that read these messages will get there and they will one day understand what pain, anxiety, depression, etc. and they will wish they had a natural alternative. PLEASE, PLEASE, PLEASE don't make me have to go back to pain management or taking SSRI's or more meds I was a zombie, and they don't care because they make money off it keeping us doped up. I haven't taken one of any of those pills in 8 years and that's a lot of money. I cry as I write this with thinking that I would have to go back to that life. ;(I just want to finally say that you can ask my wife, friends, doctor and they will all tell you how I have a life now and not needlessly starring with a blank look on my face the way I used to. I would turn over my doctor bills to show you what I say is true. You can't get	

			anything for pain any longer please don't make me move out of State to somewhere that it is legal. I will not go back to the way I was! I will not be doped up on all these meds so drug companies can make millions. Once this is banned people will be on to something else to stop. Please have compassion on us that do it the right way. I know the synthetic stuff is bad and I have never taken that nor will I. People that want to abuse will abuse something unfortunately. I can understand banning the gas station drinks and synthetic Kratom (in name only) and I can understand better regulations around the powders like other States have but please give us an alternative to drug companies and pain clinics. If it were addictive, how can one take the same amount for over 8 or 9 years and not need more? Yes, if you take a pound of it you might have problems but if you take a pound of Tylenol or Ibuprofen it will cause you sickness and death. I'm sorry some people have lost their lives and I don't want to see that but everyone that has also had underlying addictions or taking a lot of other stuff with it. Thank You Sincerely and I leave you with some stats from different Sources. -Scott More Recent Reporting • Some investigative reporting (e.g., Washington Post) suggested that medical examiners and coroners listed kratom as contributing to or causing at least ~4,100 deaths in 44 states and DC between 2020 and 2022, but the vast majority of those cases involved other drugs such as fentanyl, benzodiazepines, and alcohol alongside kratom. The presence of kratom in toxicology does not mean it alone caused the death. ⚠ Key Nuances • Confirmed kratom-only deaths are extremely rare. The 91 figure includes very few where kratom was the sole agent detected. • Most fatalities involve polysubstance use. In many cases where kratom is present, fentanyl or other powerful drugs are also found and are much more likely to be the primary cause of death. • Lack of regulation and inconsistent product quality also confound data — contaminated or adulterated products may contribute to risk, but aren't the same as pure botanical kratom exposure itself. 🧠 Bottom Line	

			There’s no large, definitive U.S. count of deaths caused solely by genuine botanic kratom, and credible public health data suggest only a small number (single digits to low tens) where kratom was the only substance detected. Larger counts that include kratom detection mostly reflect polydrug overdose deaths where other drugs are likely the main driver. If you want the very latest CDC overdose or toxicology numbers, I can pull the newest data for you too.	
Niagara Falls	New York	2 - Oppose - Used to Treat Chronic Pain	I oppose schedule 1 placing. There should be a hearing that relies on real world evidence and testimony from actual people who benefit. This can cause real world harm for people who use this for pain relief and rely on this to help get them through their day. If mitragynine is made illegal it may cause users to seek out other forms of pain management and increase usage of illegal street drugs. This will have a lasting effect on the population of Ohio.	

Neshkoro	Wisconsin	2 - Oppose - Used to Treat Chronic Pain	I have MS and it is not legal in my state. I could function when I did take it now I have to rely on pharmaceuticals and I'm not a fan of the side effects. I really don't understand why kratom has the wrap it does besides big pharma can't make lots of money off it. I didn't speak up for my state because I wasn't aware of the whole situation but I am now. If something helps people why not use it?	
Sterling	Virginia	2 - Oppose - Used to Treat Chronic Pain	I have a degenerative spinalcord disease called Spinal Stenosis that causes chronic pain on the daily so I started taking Kratom in April 2018 & suffice to say it's kept me off opiates, helped w the pain & I ate A LOT & I nvr had anything worse than getting sick happen once, no withdrawals like you'd get w opiates as 2 of my sister's who were on it stopped taking it & they both went rght back to using, I've had it help me when nothing else that I had cld which solidified me always standing up for it, defending & protecting it as it legit saved my life in more ways than 1 & I'll be a grateful & appreciative stan for Kratom until the day I die. In April it'll be 6 yrs since I started using it & I've had absolutely nothing except a positive experience w it.	
Reston	Virginia	2 - Oppose - Used to Treat Chronic Pain	About two years ago, I tried tea made from kratom leaves for the first time. My life has changed from that moment. I am someone who suffers from joint pain. This pain is now non-existent. I also suffer from anxiety, and kratom tea has also helped make my anxiety more manageable. Kratom has only improved my life, there have been zero negative impacts. The only time negativity has crept in, is when I started to see that it could possibly be banned in our state. I know that the pain will return, I know that my anxiety will be less manageable. I know that something so important to me will no longer be accessible. Kratom has helped so many people, for so many years. It has been life changing for a large number of people. It has helped them to be more productive members of society. I understand that kratom extracts such as "Feel Free" are damaging to the community. Crushed kratom leaves and kratom powder are nothing like those extracts. Kratom team and powder have been used by people for years and years with few issues, it is only since the extracts became more widespread that people even learned what kratom is. Those extracts demonized the kratom plant as a whole, and it is very, very important that people are able to see the differences between the two. This is a plant, and in its natural form, it can be a live saver. The lives of so many people will be made only more difficult if kratom leaves, either crushed or in powder form are no longer accessible.	

Canyon Lake	Texas	2 - Oppose - Used to Treat Chronic Pain	I'm a 78 year old male with prostate cancer. I have taken certified lab tested kratom for 5 years. I am a retired public school administrator and have an honorable discharge from the USMC. KRATOM has helped me with pain and the ability to cope with my life. Please keep it legal	
Mount Laurel	New Jersey	2 - Oppose - Used to Treat Chronic Pain	Kratom should never be labeled a controlled substance. No doctor has prescribed me anything that helps with my pain like all natural kratom. Kratom abuse is the problem with non advocates and responsible Kratom users should not be punished. Never criminalize Kratom. Big Pharma will only make the epidemic of opioids more of a problem.	
Melbourne	Florida	2 - Oppose - Used to Treat Chronic Pain	I am a 48 year old Christian, wife and mother who almost died giving birth to my 3rd child. After a series of surgeries I was left disabled and in pain daily. My doctors had resorted me to a life on pain killers. Except, the pain killers made me tired and grumpy but I needed relief to function and take care of my children. That is when I found kratom and it saved my life! Kratom helps me be pain free without the destructive side effects of prescription pain killers. Used alone, kratom does not make you high, tired or irritable. These people giving kratom a bad name mix it with other more potent substances because kratom alone does not get you high. I use kratom just like I would a script, 3 times a day. I couldn't imagine my state banning kratom, it would ruin my quality of life. I'm sure there are mothers and grandmothers all over Ohio who fear losing their access to kratom. All because some people are idiots and abuse every type of substance they get their hands on. The kratom industry is full of ethical people who sell clean tested products. You should really consider protecting everyone in your state, not just the Darwin Award winners who are going to abuse anything they get their hands on and mix it with other substances. Please do not ban this wonderful, natural, God-given plant that has given quality of life back to so many of us older folk. Thank you and God bless!	
Miami	Florida	2 - Oppose - Used to Treat Chronic Pain	As a patient suffering with chronic pain from spinal stenosis, Scoliosis, degenerative discs, and rheumatoid arthritis please do not approve the Mitragynine rule currently being considered. It has taken 3 years for myself, my PCP, and Rheumatologist to arrive at a combination of medications which allows me to keep living. I am, by no means pain free with these medications but I am able to make a meaningful contribute to our society. Please consider: Everyone at some point will need serious pain relief from an illness, injury or disease. Approval of this rule will only further the spread and growth of irresponsible actions that will prevent the basic human rights which should be available to all people.	

Riverside	California	2 - Oppose - Used to Treat Chronic Pain	Not sure why you all haven't fought this hard against fentanyl, because this country has a MAJOR fentanyl problem. What's the end game here though folks? …people in legitimate pain are having their medications taken away from them and they're left to suffer. Yet there is a natural alternative that can help, but yeah take that away too. So many actual fentanyl users have gotten clean from utilizing Kratom! I mean I get regulating it (like alcohol- making sure only 21+ years or older can use/buy it) but totally banning it, you're only gonna cause more harm. Banning Kratom will mean it goes on the black market - TOTALLY UNREGULATED - where if you all just proposed regulations instead of total bans there would at least be a little more control over the situation. Think of the worst pain you've ever felt in your life, then imagine not being able to EVER get relief in any way from that pain..that's what you all are gonna be doing…you think you're trying to help but you're only gonna make it so much worse. Again, what's the end game here..what exactly are the goals with this proposed ban? Is it just to herd people into treatment clinics and get them all hooked on suboxone? Because that's exactly what it seems like. You all are trying to steer people away from Kratom but you all refuse to do anything about fentanyl.	
Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	I use Kratom periodically to help with the symptoms of Crohn's and Diverticulitis...I only take it when I have a flare up, just a teaspoon or two, less than once a month. Diet has helped immensely, but when I do experience a flare up the prescriptions I have been given come with terrible side effects. Kratom seems to help quickly with just a little bit. This idea that it is addictive and mind altering is ignorant...if it was either, I certainly wouldn't be able to go weeks or even months without taking it...much less function perfectly fine, I doubt the people around me when I take it even realize it exists.	

Sun City West	Arizona	2 - Oppose - Used to Treat Chronic Pain	My name is Carrie Bennett . I'm a 54 year-old female who has suffered from a blown disc since 2010, making my life unlivable without the use of hydrocodone and muscle relaxers, just to be able to function for over five years. Due to natural Kratom specifically (Remarkable Herbs), for which I had tried many different brands. I was able to get off of my medication's with Kratom taking only 1Tsp of powder blended in orange juice each morning and then in the afternoon and evening before bed. It was a godsend. To this day I still take the same dosages and it has allowed my body to keep working without pain or any side effects. Please keep natural forms of 100% Kratom safe and available for consumers to purchase. Without Kratom I would no doubt have had to file for disability and would be confined to bed. I truly believe that God put this natural plant on earth to help people like me to continue moving, so his work can be done. Those who have changed the natural forms of Kratom to make a buck are the ones who need regulation, not those providing 100% Natural Kratom. I pray you do the right thing and listen to the facts of the consumer who have been responsibly taking Kratom for years without any adverse effects. I could not function without the beneficial help of 100% natural Kratom. Sincerely, Working hard since the age of 16yrs, With no insurance ,no retirement ,and looks now as though no social security in the future to come Sincerely Carrie L Bennett	

Webster	New York	2 - Oppose - Used to Treat Chronic Pain	Please don’t ban regular Kratom leaf. I’ve used Kratom leaf for 10 years and helps me with my degenerative disc disease and spinal stenosis. I had been on opiates before then and they were ruining my life. I had to keep using more. I decide to quit opiates and found natural remedies. Kratom makes me functional and I take the same amount I started with 10 years ago. My insurance is now gone due to Trump. Many people are losing their health insurance due to Trump. Now you want to ban a natural substance that helps people. Beyond cruel. I’m an adult and should be able to use what helps me. You will literally be killing people by banning regular Kratom. Ban the synthetics and the extracts. No beed to ban Kratom leaf. I would be dead by now had I not found this natural herb. Why don’t you also ban alcohol as there is truly ZERO medicinal benefits. 80,000 people die per year due to alcohol yet you allow this. Why don’t you also ban Acetaminophen. Acetaminophen poisoning is responsible for 56,000 emergency department visits, 2600 hospitalizations, and 500 deaths. Yes acetaminophen does help people when taken responsibly just like KRATOM LEAF DOES. look at the science and not fake articles about Kratom. Any deaths due to Kratom leaf always has other drugs in their system yet Kratom is to blame. I’m standing up for Ohio because if you’re foolish enough to ban Kratom leaf then New York might be next. You can’t overdose from regular Kratom leaf. Cause ZERO respiratory issues either. I’m tired of the government telling me what I can and cannot put in my body. Imagine if alcohol just came out today. There is no way in hell that alcohol would be approved. Ban 7oh and all synthetic Kratom as they are nothing like natural Kratom leaf. Please leave Kratom leaf alone or you’ll see an increase of harder street drugs for chronic pain patients. Even if I wanted to use opiates again I couldn’t because doctors no longer are willing to write scripts and say take advil or Tylenol. I would love to see a doctor have chronic pain and then be told they can only have Tylenol or advil for the pain. You’ll never understand unless you have chronic pain issues. Plus now I have no health insurance like many others. Do your research and LOOK AT THE SCIENCE on regular Kratom leaf. Educate yourself before you make a huge mistake in banning it.	

Collingswood	New Jersey	2 - Oppose - Used to Treat Chronic Pain	This is my story. Kratom literally saved my life, and many will say the same. I have taken kratom on a daily basis since 2015. It has allowed me to continue working and vastly improve my quality of life. I have been able to start a successful business and career because of kratom. I have experienced no negative side effects, apart from occasional constipation, but I have a previously damaged intestinal tract. I have had Ectopic Endometriosis, depression, and anxiety for over 2 decades, and kratom has helped with these. There is no cure for Endometriosis, aside from surgery, including a full hysterectomy. My Endometriosis went undiagnosed for 7 years, because I had no insurance. I would get extreme pain for about a week every month, because the Endo had grown into my appendix, fused my large and small intestines together in multiple spots, grown into my urinary tract, burned my sciatica nerves, wrapped around my tailbone, fused some of my back muscles to my intestines, turned my cervix into "swiss cheese", and entered my gall bladder. When I finally got insurance in year seven, my doctor said it was stage 4 and one of the worst cases he had ever seen. For seven years, I had no insurance and would have to go to the ER in agony every month during my period. It turned out that this was because the Endo all over my body was bleeding, spreading, and contracting during that time. Since it was in my appendix, I was, in effect, getting appendicitis every month for seven years. Endo looks like regular tissue on a CT scan so doctors kept missing it, and although my appendix looked enlarged on scans, it was ignored and not operated on because I had no insurance. I also would vomit repeatedly during these attacks, and lost all my teeth by age 40. Yet the doctors came to believe it was all "in my head", or that I was "seeking drugs" when I kept coming to the ER, and though I was screaming in agony, they wouldn't treat me. I lost several jobs, our home, almost lost my marriage, and couldn't deal with it any more after seven years. So during one attack, after a doctor refused to treat me yet again, I tried to kill myself by swallowing a full bottle of Benadryl. My husband rushed me back to the ER and saved my life. I lay in the ICU for a week. Unfortunately, I knew the pain would return a month later, and once released I was back where I started from. I lay in bed unwilling to move. I had lost hope. I was severally depressed, having daily panic attacks, and my family was homeless. All because doctors wouldn't operate without insurance. This continued on for some time, until my husband heard about kratom from someone who also said it had ""saved their life"". They were an ex heroin addict, and had taken kratom to help them get clean. It helped them through the	

			withdrawal of quitting heroin. When they were done quitting heroin, they stopped taking kratom with no addiction to it. There is no addiction to kratom - there is no such thing. I was skeptical when my husband told me about kratom. How could a natural remedy possibly help me? But I had to try it, because there was literally no other option. In the U.S. doctors no longer treat pain or anxiety with any effectiveness. The opioid epidemic has caused them to cease prescribing anything with the possibility of addiction. I know several chronic pain patients and people with PTSD who have killed themselves, because their quality of life had been destroyed. The rest turned to kratom. Our one option, our life saver, the reason we can go back to work and hold our families. Not doctors, not their drugs, but kratom. There are no dangerous side effects to kratom, don't let anyone tell you otherwise. I have taken it every day now since 2015, and I know. If you allow these doctors to take our kratom from us, you will be ruining the lives of millions of voters. That is how many rely on kratom to treat problems that doctors won't treat without insurance or just flat out won't treat anymore. Yes, kratom improves moderate pain. Yes, it improves anxiety and depression. Yes, it improves energy levels. No it is not dangerous, and no it does not kill people. It's safer than the medications doctors would prescribe to treat these illnesses. The kratom retailers now also run standardized tests on every batch, for a few years now, with results posted on their websites. This is due to the hard work of the American Kratom Association who are working towards the Kratom Consumer Protection Act which many states, as well as myself, support.	

Fort Myers	Florida	2 - Oppose - Used to Treat Chronic Pain	There is a critical and definitive distinction between natural kratom and 7OH/semi synthetics. As a kratom consumer i have been able to manage pain without opiates and that has been huge for me as they had my life in shambles. 7OH should be regulated down to only the naturally accruing levels found in the kratom leaf to protect the consumer and the availability of the product as this keeps hundreds of thousands of people off of pain pills that ruin peoples lives. Taking away kratom would force so many people to either turn back to the dangerous prescriptions or to break the law to get kratom to avoid ruining their life. It is sad to think that our government wouldn't see the need for this and the science behind it and protect this vital plant that has saved numerous lives. Please don't turn soccer moms into criminals by taking away this plant that in its natural state has never ruined anyone's life!	
Chicago	Illinois	2 - Oppose - Used to Treat Chronic Pain	For YEARS Kratom has aided in the home treatments I use for Osteoarthritis, including heat, daily walking, and cold packs, as well as aspirin and ibuprofen as well. It is used as needed! As a Retired VA RN, I am selective in the purchase of said herbal remedy for quality and growing region, & purity. I DO MY RESEARCH. I would suspect that Gov DeWine (who I voted for) is getting pressure from pharmaceutical companies. Those companies would rather make their millions than see the time honored herbal remedies used by humans for millennia continue to be used. Sadly, it's about $$$$. I implore you, Honorable Governor DeWine, to think of your Constituents FIRST and trust them to chose wisely. Thank you for your service and attention to my comments. Sincerely, Ms. Doris Long Stout, Ohio Ohio Native.	
Garden Grove	California	2 - Oppose - Used to Treat Chronic Pain	I strongly oppose a blanket ban on all kratom products because it would take away something that many responsible adults, including people like me, rely on to manage pain, anxiety, and improve quality of life. Natural, unadulterated kratom has helped countless individuals avoid far more dangerous substances, and banning it would punish those who use it safely and responsibly. I do support banning synthetic or chemically altered kratom products, which are clearly more dangerous and do not reflect traditional or responsible use. Please consider a compassionate, balanced approach that protects public safety without harming people who depend on natural kratom to live healthier, more stable lives.	

Oklahoma City	Oklahoma	2 - Oppose - Used to Treat Chronic Pain	I am a disabled veteran who is planning a move to Ohio. I take Kratom responsibly for pain and have since 2018. I have not found it to be addictive or unsafe. It has a lower addition potential than alcohol or tobacco. Scheduling it will impact my decision to make my final move to Ohio. In absence of Kratom, I will be forced to take opiates for pain and that's not a better solution. Don't schedule it!	
Denver	Colorado	2 - Oppose - Used to Treat Chronic Pain	Criminalizing natural leaf Kratom, I would imagine, would have a huge negative impact on a lot of people who rely on it instead of dangerous opioids to manage pain. There are plenty of legitimate businesses that have full profile testing for their kratom they sell. This isn't garage kratom. My person story is Kratom helped me get away from dangerous opioids that were prescribed to me by responsible doctors. I had many episodes of possible OD where I could have died. Without Kratom I would most likely be dead from legal opioids that I was prescribed. Please reconsider banning this substance when it had helped so, so, so people. The science shows that natural leaf Kratom is not dangerous and is helpful for people coming off opioids or pain management instead of opioids. Please, don't leave thousand and thousand of Ohioans stranded and worst of all criminals if this ban goes through. Thank you for your time in reading this document.	
Asheboro	North Carolina	2 - Oppose - Used to Treat Chronic Pain	I have been using natural leaf kratom for 12 years for pain. Please do not ban it. Thank you for your service	
Oklahoma City	Oklahoma	2 - Oppose - Used to Treat Chronic Pain	I can tell you when I was a caretaker for my mom and had to help her with all medications, doctors I became educated on all of her medications and pain she was in, not to mention all of the side effects. Getting her on Kratom and off the opiates was what helped he the most. She had multiple medical issues. The Kratom was healthier and very minimal if any side effects compared to the Pharm meds prescribed. I think it is a big profit game for pharm companies and Kratom is a whole natural plant. Many testimonies.	

Los Angeles	California	2 - Oppose - Used to Treat Chronic Pain	Hello, I am a 3 plus years kratom consumer. I was put on opioids from age of 10 until three years ago. I'm now 57. Every time I would go to doctor's they would up my dose and or add medication to the regime. Some of it helped and some didn't. I have severe hip dysplasia and have had over 22 hip and pelvic reconstruction surgeries. I also have several auto immune disorders caused from the medication the doctor's had me on for so long. I lost the availability to my so called pain management 5 years ago. That experience put me on a holistic healing health journey. I first learn of kratom through a local smoke shop. I started with pure leaf but there was not much information out there. Then the shop owner shared 7oh to me . Wow 7oh was a gift to me. The problem with 7oh was it made me feel too good. Better than any of my prescribed medications even. I knew that something wasn't right when month to month some times it would work and sometimes it would not. There was no regulation. Then I started hearing all the bad about it. I did more research and went back to pure leaf. I have gone from a person who needs wheelchair leg braces and hand crutches daily to a person with minimal pain and no longer need supportive devices to help me. I am no long bound to be made to feel like I'm doing something wrong by going to the Dr to beg for medicine that they put me on when I was 10. Holistic medicine has been a blessing to me and my family and it would be a shame if the availability was take from people like me. I believe in regulation of the 7oh is necessary pure leaf should remain available. Thank you for your time.	

Bainbridge Island	Washington	2 - Oppose - Used to Treat Chronic Pain	January 20, 2026 I am confused and concerned to hear about the proposed banning of 7-hydroxymitragynine (7-OH) and kratom. I have had diagnosed chronic pain since I was a child. I have spent over half a decade trying to manage my pain, and nothing has been more effective for managing my pain than 7-OH. If these are banned, millions of people, including disabled Veterans and people with chronic pain in general, would lose the only means of coping that has aided in them being able to function in their daily lives. It's crucial to add that 7-OH and kratom are two completely different things. Kratom is a 100% naturally occurring plant while 7-OH is a synthetic derivative of kratom. I believe both 7-OH and kratom should be available to responsible adults over 21 and especially people trying to manage chronic pain, however I do want to make it clear that 7-OH and kratom are two separate things. It is detrimental that this distinction is made. The recent harm signals and enforcement concern are tied to high-potency 7-OH products. A blanket ban on natural kratom products doesn't solve this problem, it simply removes low risk access for adults. There have been zero proven deaths due to 7-OH and/or kratom alone. The Adverse Event Reporting System since 2023 reveals zero deaths due to 7-OH and kratom alone, and only two deaths when you include 2 polydrug overdose deaths (FDA, 2023). Furthermore, alcohol kills over 178,000 people in the U.S. annually (National Institute on Alcohol Abuse and Alcoholism, 2025, para. 3), over the counter Tylenol kills over 500 people annually (Agrawal, et al., 2025, para. 1), and cigarette smoking (including secondhand smoke) alone kills approximately over 480,000 people in the U.S. (CDC Centers for Disease Control and Prevention, 2020, para. 4). 7-OH is derived from a natural, God given plant that is kratom (Mitrogynine Speciosa). Both kratom and 7-OH have many medicinal benefits. "Kratom is often used to self-treat conditions such as pain, coughing, diarrhea, anxiety and depression, opioid use disorder, and opioid withdrawal" (FDA, 2025, para 1). The research about kratom and 7-OH is still ongoing, but so is the research for e-cigarettes. "Understanding the effects of {e-cigarette} products will require ongoing research…" (RTI International, 2023, para. 5). Despite this, e-cigarettes are readily accessible in the U.S. I do not understand why 7-OH and kratom are being painted in a negative light, and why this ban is being pushed. I am aware of some of the main concerns, a couple being that it is addictive and that children are obtaining it. I challenge this with the facts that alcohol and tobacco are more addictive with 9.7% of people 12 and older being addicted to alcohol in 2024 (National Institute on Alcohol Abuse and Alcoholism, 2025, para. 1), and 8.5% of	

			people 12 and older in the US are addicted to nicotine (Cleveland Clinic, 2022, para. 9), compared to less than 0.7% of people in the U.S. being addicted to kratom (Palamar, 2021, para. 3). I could not find any statistics on the percentage of people in the U.S. who use 7-OH, nor could I find any reliable statistics on the percentage of 7-OH users being addicted, suggesting that the evidence is either insufficient, inconclusive, and/or fragile. Children are also getting their hands on nicotine. Every day, nearly 2,500 children under 18 years old try their first cigarette (American Lung Association, 2024, para. 3). 12.9 million people aged 12-20 years old (or 39.2 percent) reported they had obtained alcohol (National Survey on Drug Use and Health, 2024, para 1). If this ban is enacted, people are going to obtain street products that are not safely regulated, and that runs the risk of the substances being laced with dangerous and provenly deadly drugs such as fentanyl. 7-OH and kratom products also make it possible for people to refrain from using dangerous opioids. Reports from the CDC report a nearly 24% decline in U.S. drug overdose deaths from September 2023 to September 2024 compared to the previous year. (CDC, 2025, para. 1). The rise in popularity among 7-OH and kratom products could be the explanation behind these statistics. I find it concerning that some 7-OH and kratom products are marketed as “dietary supplements”. If there is a requirement made ensuring companies appropriately label these products, I believe this would suppress many of the problems associated. Furthermore, strictly enforcing the 21+ purchasing rule in gas stations and smoke shops would keep children and adults under 21 safe. This would guarantee the main concerns are addressed, and people with chronic pain would still have access to the care they so desperately need. Millions of people in America use 7-OH and kratom to manage chronic pain. Banning these would mean taking away the livelihoods of Veterans, people who are chronically in pain, and myself. People with chronic pain are 2-3 times more likely to die by suicide than people without chronic pain. (U.S. Department of Veteran Affairs, 2022, para. 1). This proves that 7-OH and kratom save lives. Furthermore, suicidal idealization ranges from 18 percent to 50 percent in people with chronic pain. (Themelis, et al., 2023, para. 3). There are many other addictive and deadly products on the market that are readily available to the public, yet no bans have been placed on those products. I believe that instead of banning 7-OH and kratom, other steps should be taken to stop children from obtaining it and the adequate labeling of products be enforced to make certain that 7-OH and kratom products are as safe to the public as they can be. This way, 7-OH and kratom	

			will still be accessible to the people who truly need it. Sincerely, Emilia Nye References Agrawal, Suneil, Murray, Brian P., Khazaeni, Babak. (2025, April 10). Acetaminophen Toxicity. National Library of Medicine. https://www.ncbi.nlm.nih.gov/books/NBK441917/ American Lung Association. (2024, November 12). Tobacco Use Among Children and Teens. https://www.lung.org/quit-smoking/smoking-facts/impact-of-tobacco-use/tobacco-use-among-children CDC Centers for Disease Control and Prevention. (2025, February 25). CDC Reports Nearly 24% Decline in U.S. Drug Overdose Deaths. https://www.cdc.gov/media/releases/2025/2025-cdc-reports-decline-in-us-drug-overdose-deaths.html CDC Centers for Disease Control and Prevention. (2020, April 28). Tobacco Related Immortality. https://archive.cdc.gov/www_cdc_gov/tobacco/data_statistics/fact_sheets/health_effects/tobacco_related_mortality/index.htm Cleveland Clinic. (2022, November 30). Nicotine Dependence (Tobacco Use Disorder). https://my.clevelandclinic.org/health/diseases/24482-nicotine-dependence Themelis, Kristy, Gillett, Jenna L., Karadag, Paige, Cheatle, Martin D., Giordano, Nicholas A., Balasubramanian, Shyam, Singh, Swaran P., Tang, Nicole KY. (2023, November). Mental Defeat and Suicidality in Chronic Pain: A Perspective Analysis. ScienceDirect. https://www.sciencedirect.com/science/article/pii/S1526590023004522 Palamar, Joseph J. (2021, August). Past Year Kratom Use in the U.S.: Estimates from a Naturally Representative Sample. National Library of Medicine. https://pubmed.ncbi.nlm.nih.gov/34027890/ National Institute on Alcohol Abuse and Alcoholism. (2025, August). Alcohol Emergencies and Deaths in the United States. https://www.niaaa.nih.gov/alcohols-effects-health/alcohol-topics-z/alcohol-facts-and-statistics/alcohol-related-emergencies-and-deaths-united-states National Institute on Alcohol Abuse and Alcoholism. (2025, August). Alcohol Use Disorder (AUD) in the United States: Age Groups and Demographic Characteristics. https://www.niaaa.nih.gov/alcohols-effects-health/alcohol-topics/alcohol-facts-and-statistics/alcohol-use-disorder-aud-united-states-age-groups-and-demographic-characteristics National Survey on Drug Use and Health. (2025, August). Underage Drinking in the United States (Ages 12 to 20). https://www.niaaa.nih.gov/alcohols-effects-health/alcohol-topics/alcohol-facts-and-statistics/underage-drinking-united-states-ages-12-20 Research Triangle Institution International. (2023). E-Cigarette Research.	

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New York	New York	2 - Oppose - Used to Treat Chronic Pain	Natural kratom powder was an absolute game changer for me after I was in a car accident. This was a plant based replacement that I took for 2 years after my car accident to stay off prescription drugs. I used kratom powder whenever I was struggling with back or neck pain. I used it responsibly and have no need for it today so I do not take it. You guys did a great job banning 7-OH and with this next step to ban regular kratom, are going too far.	

Hopewell	Virginia	2 - Oppose - Used to Treat Chronic Pain	I wish Mitragynine to remain a part of my life. I suffer severely from spondylolothesis and pars defect in my back. Mitragynine has given me my life back. Mitragynine has given me the ability to walk and move again. Please listen to your people. Thank you kindly.	
Dallas	Texas	2 - Oppose - Used to Treat Chronic Pain	please do not ban natural keaton from ohio ! people use this leaf for pain and it saves lives !!!!!	
Santa Maria	California	2 - Oppose - Used to Treat Chronic Pain	I want to be clear that this is simply my personal perspective based on my own experience and what I've observed. I don't sell, promote, or encourage the use of kratom. I do, however, acknowledge that it has been helpful for some people, including myself. I understand why there are concerns when kratom is compared to opioids, and I don't dismiss those concerns. At the same time, I think it's important to recognize that kratom differs in several significant ways that are often left out of the conversation. One key difference is safety. Unlike heroin or many prescription opioids, kratom has a very low risk of overdose, and it's difficult to use in a way that severely impairs functioning. Because it remains legal in most states, people are also not forced into unsafe or illicit environments to access it, which reduces associated risks to personal safety and wellbeing. For me personally, and for many others, its primary value has been in managing chronic pain. When used responsibly and in moderation, it appears to be relatively low-risk. I recognize that concerns tend to center on the potential for misuse, and that's a valid discussion—but that concern applies to many legal substances. Even commonly accepted products like sugar, alcohol, or tobacco can cause serious harm when overused, yet we focus on education and moderation rather than outright bans. Ultimately, I believe the conversation benefits most from nuance—acknowledging both potential risks and potential benefits, rather than treating kratom as equivalent to far more dangerous substances.	
New York City	New York	2 - Oppose - Used to Treat Chronic Pain	Great time is the only thing which releases my severe pain from sciatica and arthritis. It does not impair my judgment or reason	

Aurora	Colorado	2 - Oppose - Used to Treat Chronic Pain	This is insane. I am not from Ohio. They are hearing horror stories of 7oh...which has about 0.01-0.02% 7oh in any kratom leaf. Unless it is extracted...And I have been a pain patient for 12 years. I have been dismissed from both pain/psych facilities for this. I never get high. I never get near intoxicated. This literally is like a stronger coffee.....I have been to the e.r multiple times for panic attacks...I use a benzo for mental health. So medicaid denied pain patches with zero recreational value. So I have to fall back on kratom to mask pain. And iv been on oxy15's x4 a day.....Kratom is WORLDS softer then opiate pills. And liquor stores everywhere. This is an actual joke. Ban 7oh extracts...think.	
Albuquerque	New Mexico	2 - Oppose - Used to Treat Chronic Pain	My name is Austin and I have safely used kratom for the past seven years. I suffer from a condition called Chronic Pelvic Pain Syndrome (CPPS). This condition makes it extremely difficult to sit comfortably, and at times is simply crippling. Which is unfortunate to say the least, considering I work a desk job at a really great company. A little over six years ago, CPPS had taken over my life. It was the first thing on my mind when I woke up, and the last thing before I went to bed. Every single second in between was agony, and I'd often question how I could possibly get through my day. I found myself contemplating drastic ways to end my suffering. Suicide was not something I'd ever consider normally, but in my condition, it crossed my mind several times. Eventually I found kratom. I was very desperate, no doubt. I had been to 4 different doctors, all whom told me that everything seemed okay, and couldn't understand how I could possibly be suffering so much. I never thought a plant from Asia would do much, but I was willing to try. Lo and behold, this simple plant has made my life bearable again. My days are mostly pain free, and I'm able to enjoy activities I would never thought of doing before. I became able to date again, and I have recently become engaged to a wonderful woman. I was promoted at my job a little over a year ago. My life is finally on an upward trajectory, and part of that success is thanks to kratom. There's no way I could have achieved these milestones in my previous condition. I find it necessary to reach out to you and ask to please reconsider your stance on kratom. Myself and hundreds of thousands of others are able to take this plant safely, responsibly, and without major consequences. Please follow the science and do your due diligence to learn the truth about this plant. Please consider a more moderate approach such as the kratom consumer protection act. Sensible policy will allow people to remain safe, while also not robbing others of quality of life. I appreciate your time in reading my letter.	

Collingswood	New Jersey	2 - Oppose - Used to Treat Chronic Pain	This is my story. Kratom literally saved my life, and many will say the same. I have taken kratom on a daily basis since 2015. It has allowed me to continue working and vastly improve my quality of life. I have been able to start a successful business and career because of kratom. I have experienced no negative side effects, apart from occasional constipation, but I have a previously damaged intestinal tract. I have had Ectopic Endometriosis, depression, and anxiety for over 2 decades, and kratom has helped with these. There is no cure for Endometriosis, aside from surgery, including a full hysterectomy. My Endometriosis went undiagnosed for 7 years, because I had no insurance. I would get extreme pain for about a week every month, because the Endo had grown into my appendix, fused my large and small intestines together in multiple spots, grown into my urinary tract, burned my sciatica nerves, wrapped around my tailbone, fused some of my back muscles to my intestines, turned my cervix into "swiss cheese", and entered my gall bladder. When I finally got insurance in year seven, my doctor said it was stage 4 and one of the worst cases he had ever seen. For seven years, I had no insurance and would have to go to the ER in agony every month during my period. It turned out that this was because the Endo all over my body was bleeding, spreading, and contracting during that time. Since it was in my appendix, I was, in effect, getting appendicitis every month for seven years. Endo looks like regular tissue on a CT scan so doctors kept missing it, and although my appendix looked enlarged on scans, it was ignored and not operated on because I had no insurance. I also would vomit repeatedly during these attacks, and lost all my teeth by age 40. Yet the doctors came to believe it was all "in my head", or that I was "seeking drugs" when I kept coming to the ER, and though I was screaming in agony, they wouldn't treat me. I lost several jobs, our home, almost lost my marriage, and couldn't deal with it any more after seven years. So during one attack, after a doctor refused to treat me yet again, I tried to kill myself by swallowing a full bottle of Benadryl. My husband rushed me back to the ER and saved my life. I lay in the ICU for a week. Unfortunately, I knew the pain would return a month later, and once released I was back where I started from. I lay in bed unwilling to move. I had lost hope. I was severally depressed, having daily panic attacks, and my family was homeless. All because doctors wouldn't operate without insurance. This continued on for some time, until my husband heard about kratom from someone who also said it had ""saved their life"". They were an ex heroin addict, and had taken kratom to help them get clean. It helped them through the	

			withdrawal of quitting heroin. When they were done quitting heroin, they stopped taking kratom with no addiction to it. There is no addiction to kratom - there is no such thing. I was skeptical when my husband told me about kratom. How could a natural remedy possibly help me? But I had to try it, because there was literally no other option. In the U.S. doctors no longer treat pain or anxiety with any effectiveness. The opioid epidemic has caused them to cease prescribing anything with the possibility of addiction. I know several chronic pain patients and people with PTSD who have killed themselves, because their quality of life had been destroyed. The rest turned to kratom. Our one option, our life saver, the reason we can go back to work and hold our families. Not doctors, not their drugs, but kratom. There are no dangerous side effects to kratom, don't let anyone tell you otherwise. I have taken it every day now since 2015, and I know. If you allow these doctors to take our kratom from us, you will be ruining the lives of millions of voters. That is how many rely on kratom to treat problems that doctors won't treat without insurance or just flat out won't treat anymore. Yes, kratom improves moderate pain. Yes, it improves anxiety and depression. Yes, it improves energy levels. No it is not dangerous, and no it does not kill people. It's safer than the medications doctors would prescribe to treat these illnesses. The kratom retailers now also run standardized tests on every batch, for a few years now, with results posted on their websites. This is due to the hard work of the American Kratom Association who are working towards the Kratom Consumer Protection Act which many states, as well as myself, support.	
Taunton	Massachusetts	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom has improved my quality of life in varying ways. It has improved my depression and anxiety. I now take a much lower dose of benzodiazepines daily. My bipolar depression is more under control than it has been in years. I am social drinker but also find myself drinking much less often in social settings. I only use whole leaf from a reputable source and am very grateful for the opportunity to improve my mental and physical health in a more natural way.	

Buffalo	New York	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I've been a natural kratom user for going on a decade. It does wonders for my anxiety. I work a 40+ hour a week job and have been at the same company for 18 years. Not once has kratom inhibited my ability to do my job. The attack against natural kratom is completely unwarranted when drug stores/pharmacies give out pills that have far more adverse affects on the human body and brain. I hope you make the right decision and do not criminalize something that has actually helped more than it's hurt. Thank you.	
Dallas	Texas	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I would like to speak highly of Kratom. Kratom has eased the way of life for me by helping my depression/anxiety. Cured any pain I may have or go through. Kratom is not reckless a you can hardly abuse the medication that will make you not feel great if you over use. I'm a daily user of 10 years an also been a drug addict so I know the difference between addiction and medicating. I'm not out of control or selling my stuff to buy Kratom. I am a responsible tax paying member of society. When I was on drugs I could never be that. I own a home a new car an have a savings account. Please do research an educate about Kratom before bashing.	
Portland	Oregon	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Hello my name is Brandon I'm 29 years old and have been taking kratom for the last 6 years with no problems. At the age of 23 I witnessed my dad's suicide. When you see someone you love like that it's horrifying and changes you in many ways. I was diagnosed with ptsd, anxiety, insomnia, depression. The medication that I got from my doctor had many side effects, too many to list. Thankfully my mom's friend told me about kratom. From that day on I've been able to breath. I go to work everyday pay my taxes contribute to society in meaningful ways. Please reconsider this ban. It will only hurt people. Rather than banning it we should regulate it so vendors can't sell adulterated kratom. It really is no different than coffee. And as a matter of fact it comes from the coffee family. Thank you for taking time out of your day to read this. Please visit kratomanswers.org. they have all the updated information and studys on kratom. Also please look into what the World Health Organization has to say about kratom. Look into what the national institute of health. Look into what Department of Health And Human services has to say about the madder. I truly don't know what my life would look like if kratom was banned tomorrow. God bless you	

Los Angeles	California	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I have been a kratom user for 2 years now and it has been massively beneficial for my adhd and depression. I still take breaks however and keep my usage low. And it hasn't even affected my life in any negative ways. Some people might call me addicted and while that is true I admit it. I still take breaks and it's a small price to pay for something that's SO beneficial to my life. People around me are proud of me for the changes I've made in my life and while that is mostly because of me. I wouldnt have done these changes so easily without the help of kratom. Please reconsider banning it for all the people like me who use this for focus and energy. In addition there's many others out there who use this for pain management as well so there would be plenty of people affected by this change.	
Orlando	Florida	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I used to live in Ohio and still have family there. Kratom is primarily used properly to treat pain and anxiety. Without kratom, my medicine, I would be crippled by anxiety and unable to travel to see my family. Kratom should be regulated, not banned.	
Chicago	Illinois	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Hello, my name is Jesse. I am a health-conscious individual who values natural plant-based wellness options, and I am urging you to support the Kratom Consumer Protection Act. I have taken kratom for 15 years because I needed something to treat my depression and anxity. I tried 11 different medications and they all failed me. They had bad side effects or stopped working after 6 months to a year. Antidepressant are not healthy long term. Kratom has helped me to keep a job. It gave me the confidence to speak to women, and I have been married for 7 years. I didnt even know that being happy was a possibility. I have been mentally stable for 15 years. The Kratom Consumer Protection Act would be a huge step forward for consumer safety. It would require all kratom products to be tested for dangerous contaminants like heavy metals and salmonella. With a national standard, consumers know exactly what they are buying. I know its easier make kratom illegal but it would ruin many people's lives who just want a stable life. A federal KCPA would also prevent local bans that criminalize people for using a product that has been so beneficial to them. Instead of banning a plant, we should be regulating it to ensure its safety and quality.	
Allen	Texas	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Natural leaf kratom has helped myself and a lot of people with anxiety and stress. This is all natural and also helped us with staying away from alcohol. Please do not ban as this is all natural and already being used for centuries. We are strong advocates of kratom and we support the community of making kratom stay for good.	

Poquoson	Virginia	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	There should absolutely not be a ban on Kratom. It has helped so many people and by taking it away you are going to hinder others(even addicts who quit their drug of choice to be sober). I, as well as my husband (whom is military) have been taking Kratom for over 4 years now. We are getting old and we do not want pharma drugs and prefer the natural route. Kratom has helped in a bunch of ways, reduced anxiety, my depression, helped tremendously with my husbands energy levels, as well as helped with my back pain. And the places that do lab testing on their products are very detailed and release their findings. Those who take Kratom on top of illegal street drugs are of course hindering those who do not! Please do not take this from the Ohio residents who truly need and use it. I may not be a Ohio resident but I know how much it helps people!	
Greensboro	North Carolina	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Please do not schedule Natural kratom. There are millions of tax paying functioning citizens that have used this plant for years. I have since 2016. I am a healthcare professional with a very intense job and I use kratom for anxiety to go to sleep and on the weekends. I have taken every medication under the sun and they do not work. Kratom doesn't even affect the body in a strong way. It is a mood enhancing naturally occuring tree in the coffee family. 7oh and other synthetic copies are what need to be banned. People including myself kept the federal government and even Ohio from scheduling kratom. It is regulated in many states without issue with states like Rhode Island even reversing their bans because it helps so many. Please do what citizens ask. The companies making synthetic garbage are at fault here and the synthetic compounds should be banned. 7oh only occurs in kratom in micro amounts after it dries. The FDA has even reversed their opinion on naturally occuring plants like kratom. They need to update their website with their current stance but have yet to do so. Thank you for your time.	
Hartsville	Tennessee	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Hi, I would like to say that kratom has really benefited me up and down. I was diagnosed CPTSD and ADHD, my life was dull and I had triggers back to back, and my wife and I struggled with it. Until i tried kratom, it truly helped and even saved my marriage in many many ways and I can’t imagine having me or anybody else have what keeps them regulated, stable, and fully better functionally taken away. Kratom is a natural plant and its nearly to absolute none to overdose, nearly every overdose was related to mixing something with it from MAOIs to Alcohol and SSRIs. However I’d say we should keep the extracts illegal and just keep the natural safe plant illegal. I really hope you are heartfelt on	

			this because this is from many people whos suffered from mental illness and physical pain, AND severe opoid addiction and they all we're saved from this plant. Have a good night!	
Atlanta	Georgia	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Kratom has provided many amazing positive benefits for both my mental and physical health for nearly the past decade. It has decreased my anxiety and depression symptoms while increasing my overall energy levels, all without the many negative side-effects that I've experienced while taking past prescribed pharmaceutical medications. I would hate to ever see such an amazingly helpful plant medicine such as kratom ever unjustly criminalized in the state of Ohio, which I happen to do a whole lot of bussiness and recreational travel in throughout the year.	
Oxnard	California	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Natural leaf Kratom has been very beneficial in my life for the last 5 years it has helped with my anxiety and depression so much. If you actually follow the science and educate yourself on natural leaf Kratom you will see all the positives it does helping people with pain and anxiety. You will be hurting thousands of people in your state if you ban this natural leaf. Even the FDA is not focused on natural leaf kratom.	
Albuquerque	New Mexico	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	My name is Ryan Whiteside. I don't live in Ohio, but I feel this is important enough to comment on for people that I know living in Ohio. I know it may seem like a cliché from many people, but Kratom has saved my life and many others like me. People who use it responsibly for anxiety and depression and pain should not be criminalized. Many many many people have been taking it safely for years and years, and I think it would be a mistake to criminalize it. Thank you for taking the time to read my comment	

Bloomsbury	New Jersey	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Dear sir or ma'am I'm contacting you to respectfully request you consider those of us who have benefited significantly from natural kratom. I'm a 55 year old former navy diver and gulf war veteran. I have been using natural kratom for several years. Natural kratom has been extremely beneficial to helping me deal with anxiety and other issues. I do avoid and don't agree with the synthetic forms that are being produced and I definitely feel they should be heavily restricted if they remain legal. My concern is the natural kratom would remain legal with responsible regulation. Just as alcohol or tobacco. Please consider this request to the benefit of us who use natural kratom. Please keep it available to us Thank you for this consideration	
Glendive	Montana	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Please do not vote on this bill without intensive fact checking on the issue. I am a 76 year old woman and have found kratom to be a life saver for coping with my anxiety (from working in the domestic violence field.) My son, who suffered his whole life with alcoholism, has been sober for 10 years due to the help of kratom. Rather than cause addictions, kratom can be a huge help to gain and maintain sobriety and staying clean. I find a huge percentage of the claims put forth by Big Pharm and FDA to be very misleading if not outright false. Don't let them cause you to deny citizens the real benefit of kratom. They succeeded doing this to cannabis for many years, and now they see dollar signs if they can get kratom banned. All the claims about kratom being a "gateway drug" are based on false information. Please at least take time to inform yourself on the facts, instead of what Big Pharm and FDA are attempting to feed you. Thank you for your time.	

Maple Grove	Minnesota	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	To whom it may concern, My name is Ryan Haugen. I'm a 36-year-old professional narrator and voice actor, and I'm writing to you as someone whose life has been transformed by a misunderstood and too-often maligned plant: kratom. Before I discovered kratom, I struggled with debilitating anxiety, bouts of depression, and a destructive cycle of binge drinking. I had cycled on and off various anti-anxiety medications and antidepressants for years, with mixed results and unpleasant side effects. At my worst, I could only manage janitorial work. I was simply too overwhelmed to function in any field that required communication, creativity, or confidence. Then I found kratom. I first learned about it through online communities discussing natural options for managing anxiety and depression. I went in cautiously. I started low, paid attention to my body, and learned what worked for me. What I discovered was nothing short of life-altering. A small daily dose of whole leaf kratom, regardless of strain, helped calm the inner monologue that had haunted me for years. I could focus. I could breathe. I could engage. And from that new emotional baseline, I was able to build something beautiful. Today, I work successfully in a field that demands interpersonal collaboration and clear, creative thought. I narrate audiobooks. I voice characters in video games. I speak for a living—something that once seemed unthinkable to the anxious young man I used to be. I recently proposed to my partner of nine years. The life I've built - the emotional stability, the creative expression, the ability to connect - was all made possible because of this plant. That's why I'm reaching out. There is an alarming trend sweeping through state legislatures: efforts to ban or schedule kratom based on fear, misinformation, and a failure to distinguish between synthetic derivatives and the traditional whole leaf plant. These decisions often cite "kratom deaths" without acknowledging that the totality of such cases involve dangerous polydrug use, not kratom alone. Lawmakers and media outlets frequently conflate high-potency synthetic extracts (like 7-hydroxymitragynine concentrates) with the raw botanical leaf, which has been used safely for centuries. I support regulation. In fact, I believe synthetic extracts should be restricted or banned. Further, individuals under 21 should not be able to purchase whole leaf kratom. I do not want dangerous products or black-market actors misrepresenting the plant I depend on. But banning or scheduling whole leaf kratom is not the answer. It's not only ineffective; it's deeply harmful to people like me. That's why I am urging you to support the Kratom Consumer Protection Act (KCPA). This legislation offers a path forward that ensures	

			consumer safety, restricts dangerous synthetics, and preserves access to a plant that has given thousands of Americans—including me—the chance to live productive, healthy lives. The KCPA would also provide a legal framework for responsible vendors, prevent adulteration, and support local business revenue, all while protecting vulnerable individuals from being forced back into pharmaceutical or self-destructive alternatives. I pay close attention to news regarding this plant, which is why I am writing to you today. If kratom were to be Scheduled and thereby inaccessible to me, I don't say this lightly: it would unravel everything I've worked so hard to build. I would lose my footing, both professionally and personally. No prescription has ever helped me like kratom has, and many of them hurt far more than they helped. Please, don't let fear and misunderstanding dictate this decision. Look at the human stories. Look at the science. And look at the future we can build with thoughtful, compassionate legislation like the KCPA. Thank you for your time, and for your service. With sincerity and hope, Ryan Haugen rhnarrates@gmail.com --- Further reading: WHO Expert Committee on Drug Dependence – Kratom Review (2021) Link to Report Summary: https://www.who.int/news/item/18-11-2021-expert-committee-on-drug-dependence-recommendations Full PDF (Annex 1 - Kratom Review): https://www.who.int/docs/default-source/controlled-substances/44th-ecdd/kratom-annex-1.pdf Key finding: The WHO concluded that kratom should not be internationally scheduled, citing insufficient evidence of public health risk. Journal of Psychoactive Drugs – Kratom's Effects and Usage Patterns Title: Non-medical use of kratom: Patterns, perceived effects, and potential risks Link: https://www.tandfonline.com/doi/full/10.1080/02791072.2017.1360703 Key point: Most users take kratom in moderate doses for therapeutic reasons, and few report harmful effects. The Hill - op-ed on the importance of distinguishing whole leaf kratom from its synthetic variants and the benefits of safe regulation of kratom https://thehill.com/opinion/5352466-opioid-synthetic-opium-kratom-crisis/	

Elgin	Illinois	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I use kratom daily, and have for years- I have only experienced positive things as a result. It really helps me with ADHD-related focus issues, depression, and pain. I have been using it for at least 7 years, and can't think of any negative impacts it has had on me at all. It would be nice to know that, if I travel to Ohio (as I do sometimes), the purchase of a positive, coffee-like substance that I use daily would be allowed. Don't believe the baseless negativity around kratom, please listen to the many people who have had great experiences with it.	
Lake Forest	Illinois	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Hi, I've been using kratom for years now and I use it for pain and anxiety/ptsd. Before I found kratom I did not have any quality of life. My anxiety was keeping me from keeping a job and it can get very crippling. So I found kratom. I've worked with tools from a therapist and using kratom and omg over the past 10 years my life has changed for the better. I work in a hospital setting, I love caring for other people. And I'm also very happy to say I will be going back to school to be a nurse. I am a mom. Kratom has not ever been a negative thing my life and I'm happy I do do things with this plant like kratom to add to my life. I've never liked being on antidepressants or anything that won't make me feel like myself. I'm not spending life with no emotions and like a zombie. All because of this amazing plant I can keep it natural with no side effects and it's also like my next favorite thing that we all use so much in the medical field, our coffee. Many more things are good to come !	

Denver	Colorado	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	Without Kratom I wouldn't be alive. I have a serious and diagnosed form of general anxiety disorder, so bad it's landed me in the hospital countless times. I've been through some of the worst episodes you could ever imagine. Through the really hard times, like divorce, losing my grandpa etc, the anxiety was too much to bear. Suicide was going to be my solution. It was the only solution- pharmaceuticals make me feel WORSE and they don't work. There's chemicals in them and who knows what lasting permanent damage they will do to a person. In fact, it is my belief that pharmaceuticals may have actually caused the problems I have. One is confirmed, which was Accutane. I took it as a teenager. FDA approved but it caused many people to commit suicide. It could very well be the cause of my mental anguish, the only difference is I didn't go through with it. NATURAL MEDICINE IS GOOD MEDICINE. One day while I was at the very end of my rope, by some giant miracle, I was recommended to try Kratom. From the first try, it immediately unlocked the problem in my brain that I've never been able to cure. All of a sudden I could live a normal life, and life has been absolutely beautiful for me ever since. I can finally be a normal person! I've been taking it for over seven years, it hasn't caused any side effects whatsoever, and I'm able to live without suffering. Kratom is a miracle cure for so many people, and so many ailments, and it's 100% natural from Mother Earth. I believe it has been placed on our planet by our creator(s), specifically for our use. If Kratom goes away, I will no doubt commit suicide. I won't be able to cope. I'll be right back to the moment where it was recommended to me, where I was suffering immensely and ready to end my life. I beg of you, please stop what you're doing. Please do what is right. If you don't have mental problems then I get that you won't understand. We are all different, and we all have different needs. Please stop the ban.	

Miami	Florida	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I am writing to share my personal experience as a veteran who has dealt with long term symptoms of PTSD. For years I struggled with anxiety, intrusive thoughts, and difficulty sleeping. Traditional treatment options did not always provide consistent relief for me, which left me searching for something that could help me maintain a stable and functional life. Kratom has been one of the few tools that has genuinely helped me manage these symptoms in a safe and steady way. For me, the effects feel similar to a cup of coffee because it provides a gentle sense of energy and focus. It has never felt anything like an opioid, and it has never impaired my ability to work, drive, or handle my daily responsibilities. This ban would make me a criminal for using something that helps me function, even though I have given my life and service to this country. All I want is the ability to take care of my basic responsibilities as a hard working American, the same rights I fought to protect. Because of this, kratom has played an important role in helping me maintain my mental well being and remain productive in my daily life. I understand that safety is the top priority for the Board, and I want to express that for me it has been a supportive and stabilizing option, not something harmful or impairing. I hope my experience can help provide a clearer picture of how it can benefit people like me who are simply trying to manage their conditions and live healthy, stable lives.	
London	England	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I'm an Ohio police officer. Im drained mentally. I use kratom daily. I take psych medicine. Kratom does NOT get me high. It is relaxing. I take it at work. There's no bad effects. For me, its safer than drinking a redbull. Please let me decide to use the product.	
New York City	New York	2 - Oppose - Used to Treat Depression/Anxiety/Mental Health	I hope you can understand when I'm say, Kratom helped me in one of my most unhopeful times. I would feel so disappointed if this disease amongst states continues, this leader/follower ban situation. Also, with the mental health system as it stands today, I think it would be quite misguided to go ahead and ban Kratom.	
Denver	Colorado	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom, by contrast, gave me the stability and relief necessary to confront and heal that trauma, rather than simply masking it. It has been an essential tool in my ongoing recovery, allowing me to live the full, meaningful life that God intended. I share my story not to promote reckless use, but to plead with the Ohio legislature: Please do not ban kratom. For people like me—those who have exhausted conventional treatments and hit rock bottom—responsible access to this plant can be the difference between life and death, despair and redemption. It was, quite literally, part of the miracle that saved mine. Thank you for considering my testimony.	NL-004

New York City	New York	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom alkaloids, including 7-hydroxymitragynine, have the lowest rates of death and overdose when compared to both the more traditional poppy-derived opioids and especially popular synthetic opioids such as fentanyl. Not just overall but per capita, with a very large sample size given their popularity across the country. By keeping these compounds legally available but regulated it provides safer and less dangerous alternatives for those who would otherwise source opioids illicitly.	NL-005
Chicago	Illinois	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, I've been practicing Anesthesia for around 25 years. I've worked trauma and transplant and currently pain management. The first time I heard of Kratom, I brushed it off as another fluke another snake oil. The more I started to hear from my patients wonderful experiences I began to take a closer look. Upon further look and some research, I discovered that there is an entire community that has been saved by what is essentially a tea, something completely natural. Kratom has been a lifesaver for many people from its analgesia affects to its positive effects for the anxious and depressed. These are people that were moments away from suicide at any day because the pain was too much and prescribers are not limited. I have seen many patients stop taking controlled substances just because of this leaf. I can't express to you what enjoy it is to see someone be freed from the chains of chronic pain and love, depression. On another important note, I have seen many IV drug users addicted to heroin and fentanyl regain their lives and put down the terrible drugs and replace them with Kratom. There have been no reported deaths from Kratom only a few hospitalizations, but those were in people with chronic organ failures. But there have been hundreds of thousands of deaths because of the illegal drugs. If you take this away from the people who have found the miracle there could literally be blood on your hands. You must understand that the people who take this are subset of the population that are simply hanging on by a thread. But once they found Kratom, they at least found a rope.	

New York City	New York	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi there, I am submitting this comment as an out-of-state individual to express concern and my opposition regarding the proposed administrative scheduling of mitragynine. While I am not from Ohio. Ohio's approach will have broader public health implications and may influence regulatory decisions beyond the state. For more than seven years, I have remained sober after quitting prescription benzodiazepines with the help of natural Kratom. During that time, kratom has supported my ability to manage chronic anxiety and addiction-related challenges while maintaining a healthy lifestyle, steady employment, and active participation in society. Experiences like mine help explain why many adults view kratom as a harm-reduction tool rather than a public health threat. The primary safety concerns associated with kratom do not stem from traditional natural leaf products.They are overwhelmingly linked to synthetic and highly concentrated derivatives, particularly isolated 7-hydroxymitragynine (7-OH), as well as polypharmacy involving alcohol, benzodiazepines, opioids, or other central nervous system depressants. Conflating these risks with naturally occurring mitragynine oversimplifies the issue and misdirects policy. Ohio was initially taking a more precise approach by focusing on synthetic and adulterated products. Moving away from that strategy toward broad scheduling represents a backtrack from evidence-based regulation to prohibition. Notably, recent FDA-conducted dose-escalation research indicates that natural kratom leaf is generally well tolerated and safe in adults, and both FDA and HHS recent stances have consistently emphasized that natural kratom is not the primary public health target, with attention instead directed toward synthetics and unsafe formulations. I respectfully urge the Ohio Board of Pharmacy to reconsider scheduling mitragynine and pursue regulatory solutions that distinguish natural kratom from synthetic derivatives, preserve consumer protections, and avoid the unintended harms of overbroad prohibition. Respectfully, Nate	
New York City	New York	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I was a previous pill and heroine addict. Ten years later I can say, I am clean and Kratom helps keep me that way. Please do not ban it in Ohio. I work a full time job and a part time job and am now a productive member of society - because of kratom. I cannot afford to go to doctors for suboxone. If you ban kratom, there will be thousands, like me, that will no longer have what helps. I strongly believe you would be doing more harm than good. Thank you.	

Pensacola	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not ban natural leaf. 7 OH and highly concentrated is the problem. I have friends there that natural leaf has changed their life of pain and some saved their life from drugs. Natural leaf has many health benefits. Not everyone has addiction problems. Their future depends on this leaf and no one wants pharmaceuticals again! I went that route for 25 years for my chronic illness. People that got clean with this leaf are going back to the street and die. I take the same small dose 1 tsp for 9 years and have zero issues. Please don't do this to people it a miracle leaf to millions. Someone has a child that die from 7 which is still hard to believe but natural leaf has saved my son from fentanyl. He wouldn't be here today without it. Please!	
Pittsville	Maryland	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom saved my life and saved my family. I spent half of my life addicted to drugs. I tried to get clean many many times. It only worked when I found kratom. Alot of the issues we've heard about are from 7oh products which unfortunately have been falsely attributed to Kratom. HHS/FDA Did a dose finding study that says a kratom is tolerated at all levels. They withdrew the schedule proposal. The World Health organization agreed. People will not stop using Kratom. They will just turn to black market products causing harm. Please choose to strictly regulate instead of prohibition.	
Santa Cruz	California	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, My name is Gavin and I am an advocate for natural kratom leaf. My experience with kratom has been very positive. Kratom is a natural plant that has wonderful medicinal properties such as pain relief, anxiety relief, and overall can greatly benefit persons in all walks of life. To take away this valuable plant medicine who those who need it for a variety of different reasons is unfair and will do more harm than good. People have been using this plant to stay off of both prescribed and synthetic street opioids which contribute to the epidemic our country has been facing in the last decade. Furthermore, making natural Kratom illegal can have the unintended effect of creating a black market for those who need this plant for their quality of life. This could be incredibly dangerous if people seek out black market products. Education and research is a much better route in terms of handling kratom legislation. I ask on behalf of myself and all of those who use kratom in a safe and responsible manner to please reconsider the criminalization of this natural plant medicine. Thank you for your time and I hope you take my testimony as well as many others into consideration. Sincerely, Gavin Sent from my iPhone	

Chattanooga	Tennessee	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom should be able to be protected- It saved me from a life of opiate addiction, and I am able to function and a healthy way. I eat healthy. I don't drink alcohol as well don't smoke and I use about 2-4 g of kratom a day for mood stabilization energy as well as pain. I have an incredibly high stress job that's very taxing physically, and it gives me the inner drive that I need to stay motivated without interfering with my sleep my relationships and my health as using certain medications and alcohol did. I have watched documentaries on this amazing substance and I believe if we have access to pure Kratom we can make healthier choices for our lives that impact the greater good of all . I've been heavily addicted to pharmaceuticals in the past, and I feel more clarity when I take this substance Versus the pharmaceutical, I wish it wasn't that way, but for me it is. I am responsible, hard-working, caring, and believe that it is my choice what I put in my body and something that was grown from the Earth as an adult human being, I believe that I have the right to have safe access to, That companies are held responsible for testing and not creating products that are too strong when the original is perfect as it is. A new leaf provided me a lot of insight to how kratom has helped other people. I think we should have this as a choice, please honor our right to have this Choice. We need reputable companies not control. Thank you for your time.	

Richmond	Virginia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Let me preface this with a little family history. My mother's side of the family are almost all alcoholics. Her father ran his car of a bridge around the age of 50, because he was drunk driving, and 2 of her 3 brothers died in their 40s, from alcoholism. My mother, although not as bad they were, is also an alcoholic. I didn't meet my father until i was 24, and when i did, i found out that he also drank at least a 12 pack of beer a day. I spent most of my life addicted to alcohol since age 14. By 16, I was drinking every night to the point of being drunk. At 25, I started drinking in the morning and all day long. I needed 5 or 6 drinks before work just so I wouldn't shake so bad. Several times, I tried to quit drinking, and within 36 hours, I would go into seizures. Did the detox a few times, but wasn't strong enough to stay away from the alcohol. Went away to a great Christian rehab in 2011. It was a 9 week program and i made it through sober. I followed that up with living at a Christian halfway house for 3 months. Life was new. I was new. It was great. But at some point, you have to live in the unprotected "real world". Within a few months, I started getting those alcohol cravings back. This was 2012. I didn't want to go down that road that has brought me and my loved ones so much pain. So I started searching on the internet and found out about a leaf called kratom that some alcoholics had used to quit and abstain from alcohol. I wasn't drinking yet, but was real close. I was very skeptical, but I was desperate not to go back into my own personal hell. It took about a few weeks to get my dosage right, but it worked. I couldn't believe it. I could make it through the day and not be fighting those generational demons that had haunted me my whole life. It was too good to be true. I took it everyday and my quality of life reached a level i had never witnessed or thought possible. Then in 2015/2016, I had heard that kratom was getting banned. I had just had my first daughter and didn't want to put that in jeopardy by having illegal substances in my home, so I quit taking kratom. Within 3 weeks, started drinking again. Within 4 months, I had lost everything, including my marriage, license again, job, and relationship with my daughter. February 1, 2017 I enrolled myself in a year long rehab. Did great there. I can stay sober in a protected atmosphere with no temptaion around me, but unfortunately the world isn't like that. After graduating that program i decided that i would start life over in a whole new area to me just miles from where this rehab was. Within a few weeks, the cravings for alcohol was creeping back. I surely didn't want to go down that road again. I was 40 years old and didn't have much fight or hope in me left should i give in to my addiction. I remember thinking to myself, if only kratom didn't get banned. (I forgot to mention that at	

			the year long rehab, we had no television, internet, etc, so had no way to keep up with what was going on in the real world, let alone the news on kratom). Little did I realize, it was never banned. I ordered some immediately. I sit here writing this 8 years later. I have remarried, I see my child regularly, I have excelled at my job. I own 3 cars (most of my life I barely owned 1 because of DUIs, and lack of financial resources because of my addiction). These last 7 years have been my best. I could have saved myself from alot of pain had I found this earlier in life. But I'm lucky. 12 of the guys I was in the year long rehab with, have died from overdose. There is some guilt about me not keeping up with them as good as I should have, because I could have probably saved a few of them by telling them about kratom. I will be forever grateful for this leaf, that gave me a life i never thought was possible. Plain leaf kratom saved my life 13 years ago, when I was an alcoholic. I was destined to die in my 40s like all 3 of my uncles that did. But I'm 2011, after being so tired of 24 years of steady drinking, and countless rehabs and meetings, the craving of alcohol went away after drinking kratom tea for just one week. I don't even think about alcohol anymore, which is amazing because it consumed me from age 14-42. I'm well into my 50s now, and have outlived my grandfather and all 3 uncles and I'm healthy as I've ever been. Most days I run almost 4 miles. All thanks to a tea leaf. Please don't ban mitragynine. Definitely get rid of synthetic 7-oh though	

Miami	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	My name is Erik Thorvaldson. I am a 39-year-old father of four. I have been an Ohio resident since 2008. I am a paramedic and have been saving people's lives for over 15 years. I was involved in a very serious car accident that left me debilitated and hooked on prescription pain killers for over a decade and a half. Kratom saved my life from this hell on earth that I experienced. For me, Kratom saved my life. Before I found kratom, I was contemplating suicide. If you remove God's Gift to us, and turn me into a criminal, then you will greatly be affecting me and my 4 children's lives. I am begging you, please do not an regular kratom. It has SAVED MILLIONS OF PEOPLES LIVES IN THE USA. If alcohol which is perfectly legal, and kills 200k people a year in the USA alone, then why are you focusing so hard on kratom and not alcohol? I have voted for this administration numerous times in the last 12 years and I am fully ashamed by your actions to turn hundreds of thousands of us Ohio Born patriots into criminals. This will ABSOLUTELY END UP IN PEOPLES DEATHS! We will remember this come next time for elections. PLEASE DO NOT KILL ME OR TURN ME INTO A CRIMINAL. Kratom saved my life!	
Dallas	Texas	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom leaf in its raw and refined state is an effective and safe long term alternative to any and all opioids on the market today. Kratom also far surpasses the effectiveness and safety of any SSRI's out there when it comes to pain relief and a better quality of life. A thorough and accurate unbiased scientific study with double blind placebos should be done for a 6, 12, 18, and 36 month period to track effectiveness, any adverse effects and any withdrawal or psychological effects because of using or stopping the use of it should be performed with results made public before any decision is made.	
Albuquerque	New Mexico	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	To make Kratom use illegal is simply wrong. I am one of countless people who have struggled with drug abuse all my life, and Kratom saved me, and lets me lead a normal, healthy life that contributes to society, and can be done without costly doctors or medications. Kratom is the end of road for those who have abused illegal opiates, and then were put on prescriptions like suboxone or methadone, both of which are the only prescribed solutions to this kind of severe opiate abuse. my life is so much healthier on Kratom that it would be on suboxone; I cant state this emphatically enough! The reasons for banning kratom are unjustly blown out of proportion! Please just compare the reasons for banning kratom with the side effects of other legal drugs, and you will realize the great mistake being made.	

Washington	Washington, D.C.	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I use Kratom as well as plenty others, although I don't depend on it. I think having people not being able to use it will lead to problems of drug use, and making unsafe purchases on the black market. There's businesses I visit that safely have it added in their hand crafted healthy drinks that are great and rely on Kratom to help generate income. Kratom has marvelous health benefits. Allow it for use and to get shipped to Ohio!	
Atlanta	Georgia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi, My name is Jake. Please do not ban natural Kratom leaf or make it a scheduled substance. I used to have problems with alcohol addiction and through the use of Kratom and counseling, I am proud to say I have been clean for 8 years now. I am a happy and productive member of society, currently working as an aerospace engineer. I do not know what I will do if natural Kratom leaf is made illegal. I do not believe it should be made illegal, it is nothing like alcohol or other drugs or the synthetic kratom extracts and has vastly improved my quality of life. If you are going to put rules in place, ban the synthetic extracts but not natural kratom leaf or it will really harm responsible users like myself. Best regards, Jake	
San Juan	San Juan	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please protect natural kratom! In terms of harm reduction, it is a no-brainer! Ban the synthetic stuff. Natural kratom is not without zero risks but the risks appear to be very minimal. What good reasons would you have to restrict consumer access to natural kratom? The benefits far outweigh the cost.	

Ashburn	Virginia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has been crucial medicine to help me get off of hard opiates. Banning Kratom will cause people to fall back into old habits. As an Ohio constituent, a former kratom consumer, and a lifelong advocate, I strongly urge you to keep plain leaf kratom legal in our state. Years ago, I became dependent on prescription opioids that were legally prescribed by Ohio doctors. Those "pain pills" nearly destroyed my life. When traditional methods failed me, plain leaf kratom was the only thing that helped me safely get off opioids and regain control of my health. Today, I no longer need kratom — but I will forever advocate for this plant because of the lives it has saved, including mine. Plain leaf kratom is simply the powdered leaf of the Mitragyna speciosa tree, a Southeast Asian plant in the coffee family. It contains naturally occurring alkaloids that can help with mild to moderate pain and anxiety. Kratom is a partial opioid agonist, meaning it does not carry the same risks as full opioid drugs. Scientific evidence and real-world use show that kratom is no more addictive than coffee or sugar for most people. That's why many states have chosen to legally protect it with smart regulations instead of banning it. However, it is extremely important to make a clear distinction: Plain leaf kratom is NOT the same as 7-hydroxymitragynine (7OH) extracts. 7OH is a concentrated kratom alkaloid extract that is often misleadingly marketed as "kratom." It acts much more like a traditional opiate, with risks closer to morphine. These products are frequently sold in gas stations with little to no regulation, and many states are rightfully restricting them. Kratom good. 7OH bad. Please do not punish responsible adults who rely on natural, plain leaf kratom by banning the plant itself. Instead, support reasonable regulation that protects consumers while preserving access to this life-saving option. Plain leaf kratom helped me escape opioid dependency when the system failed me. Please keep it legal in Ohio. Respectfully, Kelly Goldman Ohio Constituent	
Newark	New Jersey	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Removing kratom from purchase in the state of Ohio will cause a catastrophic death tool on the population. People that have beaten heroin fentanyl etc. will now be forced to start using again. Those who overdose and die with kratom in there systems are people who wanted to taste the fentanyl train one last time. It's as simple as that. Kratom does not shut down respiratory drive. I can tell you this as a 911 paramedic on the streets of Columbus. Don't illegalize kratom. It's the one and only thing saving people out here.	

Freehold	New Jersey	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have been using kratom for 8 years. Pure leaf kratom. I was a drug addict iv for ten years. I have been saved from addiction due to natural kratom. Kratom is a wonderful plan saving lives. Prohibition has never worked. Even the FDA has said they are not worried about natural crayon only synthetic. Please don't ban this plant for Ohio residence who use it to save their lives.	
Ashburn	Virginia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	7-hydroxymitragynine should be banned, no exceptions. It is a horrible derivative of an otherwise relatively safe plant. 10 year user, I got off heroin and opiate pharmaceuticals, and did so immediately with zero relapse using kratom. Th3 continued use is a result of its ability to help with physical issues. I am currently coming off with plans to fully abandon use. Comparatively, it has minimal detox side effects and have come off cold turkey in the past here and there to keep an eye on baseline. It isn't free of dependency issues, it isn't something I recommend to anyone without caution but banning kratom would be absolutely immoral in any society that allows and promotes alcohol and marijuana use. The benefits outweigh any actual documented and verified risks. There is always an avenue to abuse, this is true of anything. Banning the raw plant serves nobody and provides no benefit to any state government or its population. Age restriction enforcement and education should be the focus of any institutional involvement. And again, the harshest and most expedient legal enforcement and removal of any derivative compounds like 7-hydroxymitragynine, and product quality and verification regulations on distribution should be the first and only focus concerning kratom. This plant can save lives and when used in a responsible way can offer remedy for a host of issues, both physical and psychological.	

Seattle	Washington	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Natural leaf kratom saved my life and helped me get out of a heroin addiction and stop alcohol abuse and has given me stability in my life I never had before. I have been on suboxone and never want to go back, it's far more potent than kratom. Kratom has not only helped me with my addiction, but also with depression and anxiety. I have made so much progress with my life since starting kratom, such as buying a car and paying bills and steady employment and fixing relationships which I always struggled with. I don't understand why Ohio is moving to make it schedule 1, in a state with so many opiate deaths, which aren't coming from kratom. Kratom is also clearly safer than alcohol, which kills 1000s, but there's no push to make alcohol illegal. The common sense move is to regulate normal plain leaf kratom and make it 21 and up, I agree kids shouldn't have it, just like they shouldn't have alcohol, but beyond that I think kratom is a miracle for many people, both for people with addiction issues, for people with depression issues, or for people with pain. Removing kratom will especially impact lower income people without health insurance in a very negative way. Why don't we fix the fentanyl epidemic before coming for kratom? This seems to me to be centered around making new felonys to get people in trouble for, it isn't about public health or why is alcohol not being targeted too? Alcohol is a far worse substance and is on the shelves at every gas station, many people escape alcoholism with kratom. Ohio just voted to legalize marijuanna, this is not the will of the people and is a bipartisan issue. I also feel this push to make it illegal is directly related to wanting to get people on pharmaceuticals that have much worse side effects than kratom leaf. I just cannot understand any logical reason behind banning kratom, and make it schedule 1 except for what I've listed. Not to mention the livelihood of kratom shop owners, and if it will push a strain on the medical system of Ohio by people like myself seeking Medicaid to get prescriptions when we were perfectly fine using kratom leaf before. I have been tapering off the kratom in preparation for the worst, which is a relatively painless process compared to say tapering off alcohol or suboxone. Kratom leaf is more around the strength of coffee, which it is in the family of, and yet it's being treated like it's fentanyl which is an outright lie. Even the board of pharmacies evidence is extremely shaky, comparing it to cocaine and morphine at the same time, and showing tables of deaths that don't account for poly substance abuse very well. Kratom leaf is extremely safe especially compared to alcohol. If alcohol were being targeted too I could understand, but for some reason liquor is allowed but a benign plant is being demonized.	

			The amount of domestic violence, drunk driving, medical problems that directly come from alcohol far, far outweighs anything from kratom, which is helping people. Ohios overdose have gone down for the first time in a long time and I bet this is related to kratom, people getting out of addiction with kratom. Please don't take away this plant that has helped myself and so many others, I do not want to go back into suboxone or benzodiazepines or anti depressants, I know firsthand how much worse all those substances are. I have been prescribed Ativan, gabapentin, trazadonr, suboxone and so on, and nothing has helped me like kratom, and most of those substances I just mentioned had much worse side effects. I really hope Ohio will make the common sense move which is to just regulate normal leaf kratom and make 21 and up and regulated.	

Boise	Idaho	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Addicts use kratom to help with withdrawal until they can score their next hit. The data that shows kratom is harmful is skewed because people who die with kratom in their systems are generally addicts who have other, very dangerous drugs in their systems. There are millions of normal people who use kratom as a safe, effective alternative to other more harmful prescription medications. Many that I know are women who suffer from fibromyalgia and autoimmune diseases that aren't well treated by prescription meds. Kratom gives them their lives back. I am one of those people. If I didn't have kratom, I wouldn't be able to work. I have ankylosing spondylitis and the pain from being active compounds and becomes severe. I do not feel high from kratom. It doesn't cause foggy thinking or delayed responses. I experienced those things being on morphine for pain control. That is why I got off opioid pain medicine and began taking kratom. It is such a better alternative for me and all others like me. Please don't let addicts take away an effective pain treatment from all of us who are responsible, hate drugs and can use this wisely without interactions. And, please don't take kratom away over incomplete science and anecdotal opinions. Thanks for your thoughtful consideration.	
San Antonio	Texas	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has helped me in more ways than other modern meds.. thats not to say that modern meds dont work just this is more natural and way less side effects with showing proof.. I have have been using 100%:pure kratom leaf not synthetic but pure leaf for 8 years i have a full family and I run my own bussiness going on 7 years. I know this has helped others including my self get off of some bad things. I do agree that synthetic should not be allowed to sell but dont let something natural be banned. Thank you!	
San Antonio	Texas	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has saved my life. It has kept me from street drugs and out of pain clinics for almost 5 years. The various strengths are helpful for patients who need more or less pain control. Being capable of buying it in a store takes the stigma away. I can understand that you all fear for the kids but education is the answer to helping people understand the risks. I don't think this ban makes any sense at all for the numerous Americans suffering daily who don't want to resort to illegal drugs for relief.	

San Antonio	Texas	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I spent years of my life at rock bottom completely lost and, frankly, a burden on society. I contributed nothing of value, and my only focus was taking whatever I could to support my FEN use. I have now been free from FEN for seven years. Seven years. I tried every medication-assisted treatment available, and the only thing that truly allowed me to live a stable, normal life was mitragynine/kratom. Scheduling mitragynine would be a serious mistake. The harm that would result from this decision is easy to predict, just look at our major cities, where illegal drugs have created devastation, crime, and suffering. Kratom is not comparable to those substances. It is not highly sought after, nor does it belong in the same category as the drugs currently ravaging our streets!! THEY ARE NOT THE SAME!!!! Prohibition has never produced meaningful benefits. All it does is further marginalize people who are already struggling. This is an extreme overreach, and I am asking you to reconsider. PLEASE RECONSIDER. Regulate it. Impose trade standards. Restrict where it can be sold if necessary—but completely eliminating access is wrong. It is not the right choice. I am living proof that kratom can be used responsibly over the long term. I have used it for years, remain productive, and live a stable, meaningful life. I have a career, own cars, a house, and have meaningful relationships in my life. All of that is due to having access to kratom. It works for me! It has significantly improved my quality of life and helped me manage issues that once felt overwhelming. Kratom is not destroying my community, it helped me rebuild my place in it. Don't let Ohio be a place that people don't have a choice. Thank you for your time! I sincerely hope you reconsider scheduling mitragynine.	
Los Angeles	California	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	If you ban kratom, people will die. It's an alternative to opiates, kratom literally saved my life when it allowed me to quit my addiction to pharmaceutical opiates. It is not a perfect substance, that's for certain but scheduling it to that degree is asinine. There will be blood on your hands. Don't forget that.	
Los Angeles	California	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	If kratom is made a schedule 1 narcotic, it's going to ruin thousands of lives. People depend on this plant to keep them off of illegal drugs and pain pills. 99% of Kratom users are either recovering addicts, or chronic pain patients who can't be chained to prescription pain meds. 7OH on the other hand NEEDS to be scheduled. It's ruining lives every day. Please get 7OH off the streets, but please leave the natural kratom plant alone. Those two are not the same things.	

Sacramento	California	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Banning Kratom during an ongoing opioid crisis is not only irresponsible but downright dangerous. Kratom is used by so many people not just for managing various issues but keeping people off of substances, mainly opiates. Kratom has stayed under the radar for years simply because it does not get people"high" thus there was never any reason for much attention to be given to it in the first place. It does however give people a feeling of content and takes away their need for substances. It is simply an herbal supplement that has its place among the many other herbal supplements that millions of people use to manage a variety of issues.	
Chicago	Illinois	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please dont make kratom a schedule 1 drug it has helped so many pepole I know with drug addiction and getting off far worse drugs. Can we at least get a hearing that relies on real-world testimony and evidence ? I fear ohio is gonna have way worse problems if we completely get rid of kratom.	
Los Angeles	California	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi. I have been using Kratom/7oh and MIT for over a year now without issues or side effects. It has whole heartedly saved my life and made me a better person! I was a drinker before and it had given me the ability to stop and stay sober for over a year now! I also have chronic pain in almost my entire body from injury and surgery. I am 29 years old And never have received the help I actually needed to not be in pain! I live a happy life now thanks to 7oh! I have a huge opinion against the ban in the nation and honestly I think it is ridiculous and the government has another agenda! 7oh does not cause deaths and neither does Kratom. The "deaths" that were counted did ha trace amounts of Kratom but they also had either weed, meth, heroine, cocaine or fentanyl or other hardcore drugs in there system!? I know many many people who have used Kratom and 7 oh without a single side effect! It does not cause deaths as health officials have lied! What caused the deaths wos the more dangerous and powerful drugs in their systems and you know it! This substance has helped so many people get off of hardcore drugs or worse and live a happy life! You really need to think about the people that are going to have to resort to to using worse substances to be ok without pain. 7oh and Kratom are MIRACLE substances and I cannot stress that enough!! There has never been adverse affects happen to people who use just Kratom or 7oh daily! Please do not destroy people's lives by banning it!!! And please don't use "fake" deaths that were not caused by 7 for your agenda. This will destroy this nation if you ban 7! You will have a major rise in deaths and addiction to street drugs	

			because we will have to resort to other means of self medication. I pray that you pleaseeeeeese do not do this to us! Please!!	
Atlanta	Georgia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has allowed me to successfully quit taking opioids after being trapped in pain management for over 7 years.	
Miami	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I'm 68 yearold and have used Kratom, safely for almost a decade. I'm able to work 40+ hours weekly, with the consumption of a minimal amount of Kratom during the day. Kratom completely eliminated my desire to drink any alcohol, which improved my health and saved me money and dependency. I can easily stop using Kratom, but I prefer to work without the pains, that old age comes with. I've seen so many people detox from pain medications with the help of Kratom. There are probably more seniors using Kratom than the Senior discounts that are available. Most consumers KNOW the facts, the science, and the truth about Kratom. Please educate yourself completely, before you make any decisions. We, consumers, have a right to protect our health and continue to live without pain and fear.	
Nashville	Tennessee	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Yeah kratom gas helped my kick heroin addiction and many of my friends get back into a normal life and tax payin jobs	

Salt Lake City	Utah	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am writing as a concerned citizen to urge the Ohio Board of Pharmacy to reconsider any action that would ban all kratom products, including natural kratom leaf, as a response to concerns about concentrated or synthetic derivatives. I am a person in long-term recovery. In 2009, I entered recovery after struggling with addiction to prescription benzodiazepines, opioids, and cocaine. Because of that history, I have been intentional for many years about avoiding substances with a high risk of dependence, overdose, or relapse. Several years into my recovery, I began experiencing severe anxiety and panic attacks that significantly interfered with my ability to function. A physician recommended benzodiazepines, but given my past addiction, I knew that option carried serious risk for me. After researching alternatives, I learned about natural kratom leaf. Used responsibly, it allowed me to manage my symptoms, remain employed, stay physically active, and maintain stability without returning to substances that had previously nearly destroyed my life. I have now used kratom responsibly for just under 13 years without incident. During this time, I have worked, supported my family, run 30 miles a week, and remained engaged in my community. Kratom did not replace one addiction with another. For me, it served as a harm-reduction tool that helped me avoid far more dangerous substances with well-documented overdose and dependency risks. Banning all kratom products, including unadulterated leaf, risks unintended consequences. Broad bans eliminate regulatory oversight, drive consumers to unregulated markets, and may push individuals like me back toward prescription medications or illicit substances with significantly higher public-health risks. From a harm-reduction and consumer-safety perspective, a more effective approach would distinguish between natural kratom leaf and highly manipulated or synthetic products. Targeted regulation, labeling standards, age restrictions, and enforcement against adulterated products better protect public health than blanket prohibitions. I respectfully ask the Ohio Board of Pharmacy to consider the real-world impact on individuals in recovery and others who responsibly use natural kratom leaf as part of their health decisions. Policies that preserve access to regulated, unadulterated products while addressing legitimate safety concerns will better serve public health than outright bans. Thank you for the opportunity to submit this comment and for considering the perspectives of those directly affected by these decisions. Thank you for your consideration.	

Roanoke Rapids	North Carolina	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	May have been abusing opioid for a long time, misusing the prescribed dose and then I found Kratom. Its Not always what is on the outside that matters hear I lived in OHio and would move back,.. but not if you are going to ban kratom. I HAS HELPED ME STOP MISUSING OR OVER USING pills.	
Linden	New Jersey	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom saved my life. 8 years off herion and fetanal.	
Winchester	Virginia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, My name is Jennifer and I've been a kratom consumer for over 6 years. It has truly saved me from addiction to opiates and heroin. Kratom is a natural plant that has many benefits. I'm asking you to please do real research and see that this has saved so many people from the depths of addiction. Please reconsider a full on ban. The synthetics is what need to be banned!	
Tulsa	Oklahoma	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has provided myself an alternative to addictive pharmaceutical pain medicine and alcoholic control of pain. It is an all natural compound that has provided a very safe experience. I stopped consuming any alcohol once I began using kratom and I know another individual that drank heavily before being introduced to kratom. Please do not attempt to schedule this substance to keep it out of reach of our responsible American citizens as it is nowhere a substance like heroin or fentanyl.	
Omaha	Nebraska	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I travel to Ohio and have friends there, and banning ALL kratom will hurt everyone. We should ban adulterated products but pure, safe powder leaf is as potent as a cup of coffee! Dont throw the baby out with the bath water, especially when kratom SAVES LIVES by offering a safe, legal, and cheap way to get off truly awful addictions like alcohol and heroin. Lets not forget alcohol is legal and kills 100s of thousands every year, yet I dont see a ban proposal for that.	
Grand Junction	Colorado	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom in its natural from should not be banned. It has helped me come off of a 13 year fentanyl and meth addiction. I have been off hard substances for 4 years because of the help of kratom giving me a crutch to walk on while I have focused on my recovery. Banning is not the way forward, many people use it as a better alternative to pharmaceuticals as well. Get rid of 7 OH synthetic crap.	

Watertown	New York	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	My name is Bud, and I'm sharing my personal story of struggle and recovery. At 13, I began experimenting with substances, leading to 17 years of addiction and prescription medication abuse. Despite being prescribed over 200 medications to address my anxiety, PTSD, and ADHD, none provided the relief I desperately sought. In fact, many of these medications exacerbated my symptoms, leading to suicidal thoughts, increased depression, and debilitating withdrawal symptoms. It wasn't until I discovered kratom that I began to experience genuine improvement in my mental health. After eight years of using kratom, I can confidently say it has transformed my life. My mental well-being has never been better, and I owe this progress to kratom. My family, including my four children, can attest to the positive impact kratom has had on my life. I'm grateful for the stability and success I've achieved, including purchasing a home and providing for my family. Kratom has been a vital component of my recovery journey, and I firmly believe it should be accessible to anyone who, like me, has struggled to find effective treatment through conventional means.	
Ringgold	Georgia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hey, I would like to say my opinion on why you should not classify kratom as schedule 1. I used to have an unhealthy alcohol habit and I would drink anything I can get my hands on even if it was rubbing alcohol, hand sanitizer, hairspray, etc. I always had this incessant need to be intoxicated everyday. Kratom changed that for me, I can actually go without the alcohol and other drugs now. Kratom doesn't get me drunk or high like the other drugs did and allows me to feel content with myself so I don't feel the urge to drink or use other substances. Also it very much helps with OCD related anxiety I have and uplifts my mood tremendously. This is a great leaf and really helps people with pain as well. I don't suffer from any sort of chronic pain but many others do and this stuff helps them better than the prescription opioids the doctors prescribe. Oxycodone gets you high and make you feel cloudy but the kratom doesn't and it can help the pain just as well as those drugs. Taking kratom off the shelves of Ohio will not help anyone and will only hurt people who benefit from this amazing leaf. Hopefully my comment changes your minds. Thank you	
Ashburn	Virginia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please, I implore the state of Ohio, do not to criminalize kratom. Kratom has bestowed so many benefits to me including kicking an alcohol habit, losing and maintaining a healthy weight, helping during fitness training and recovery, which I still enjoy since starting kratom in 2018. Kratom, when used responsibly, has so many benefits that many Americans are discovering.	

Valley Cottage	New York	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	-Please reconsider scheduling kratom to help protect us users. It has been a lifesaver for me and my family to help with alcohol and other mental health issues.	
Boston	Massachusetts	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hi my name is Michael Francis I live in nh but I felt the need to add my story I'm sure there's thousands like it. I was addicted to pain medication for ten years I went threw all the government programs paid by the VA methadone suboxone i always relapses and my life was a mess I was close to ending my life i didn't want to live like that i friend of mine introduced kratom to me and it changed my life that was 8 years ago and I've never once gone back to opioids. I'm a productive member of society again i got married to a wonderful women that added another support to my life but I'm constantly nervous about this amazing herb being criminalized it would ruin so many lives	
Bishop	California	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Simply put Kratom saved my life from addiction to prescription pain killer (dilaudid, Opana). Kratom is a God send natural healer that I have been taking for my many serious issues for over ten years. I have never experienced any adverse reactions.	
Caneadea	New York	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Don’t ban the kratom from Ohio it helps many people get relief from a lot of things.Ban alcohol before kratom.Alcohol will kill ya and others.Kratom won’t kill anyone. You will throw up if you take to much and people don’t use it to get intoxicated.It helps stop all the drugs and alcohol	

North Charleston	South Carolina	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Hello, thank you for taking the time to read over my comment. I would like to voice my opposition to the recent proposals that would categorize kratom as a Schedule 1 drug. I think it is important to share my experience with Kratom, as I am not the only one who would be negatively affected. I implore you to compare the statistics between kratom and alcohol. It's also important to make the distinction–there are two different categories of kratom. There is plain leaf and 7-OH. I personally have never seen a 7-OH product, but as I understand it, that is where a majority of the concern lies, as it is a concentrated form. These two should not be lumped under the same umbrella. My Experience: Although Kratom is not something that I would recommend to all people, it serves an important purpose to those who need it. I started taking it 10 years ago to combat my addiction to prescription benzodiazepines and opiates, and it has added nothing but positivity to my life. I was able to reattend university, mend broken relationships with my close friends/family, and ultimately work as a software engineer in an industry that I love. Kratom helps give me strength in the daily fight, and I am extremely grateful. This experience is not unique to me… The Kratom community consists of respectful adults. Most of whom have a history of addiction, depression, anxiety, and/or other various health concerns. Kratom is not for everyone. For those of us who use it as a tool to cope with ailments, traumas, pain, etc, it really means a lot. Please consider the science, testimony, and all the other comments submitted from the concerned and passionate citizens who rely on it. Thank you.	
Herriman	Utah	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	This rule is not going to benefit the residents of Ohio. This is a misinformed and misguided rule. I have been using Kratom safely for 7 years and it has completely changed my life. If Kratom is banned in Ohio we will absolutely see an increase in overdose deaths from opiates and other drugs. That is not currently happening with Kratom. Not at all. Do your research, listen to your residents. Kratom is a lifesaving plant. People will die if this rule is put into place, there's no question about that. Please do not put this rule into law.	
Norfolk	Virginia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have used Kratom to successfully be off of hard drugs for almost 10 years now. Had it not been for Kratom I'm not sure where I'd be now. Potentially dead. It does not get you high but it does the same thing that the pain pills that did get me high did for my pain. It is abhorrent to take this away from people who are just trying to live their lives sober and make their lives better potentially. Not to mention more comfortable without pain	

Winter Park	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom isn't the problem, unregulated use of 7OH is. Kratom has helped so many people in my community transition aware from harmful substances such as alcohol, opiates, and more. Taking away kratom not only takes aware a helpful alternative, it ruptures and endangers a community of sober-focused individuals.	
Chicago	Illinois	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	You need to keep kratom safe and legal. Plain and simple. The ppl that use this stuff use before they dont wanna take opiods. Some ppl may abuse it but thats everything especially alcohol which you arent trying to make illegal. My local smoke shop will take a huge hit in sales and thats all your doing is hurting regular ppl and small business	
Amarillo	Texas	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom saves lives. I was addicted to hydrocodone and Oxycodone. I was at my lowest when a friend told me about Kratom. I researched this and found it to be a healthy plant. The day I consumed it, I dropped the Codons and haven't touched it since. This plant saved my life. Please do not make this lifesaver illegal. Thank you.	
North Tonawanda	New York	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has provided a safe way for me to continue my journey away from alcohol and hard drug addiction. Scheduling kratom in the midst of the opiate crisis is crazy. A lot of people use kratom to get away from street drugs. Regulation is what's needed. Scheduling is counterproductive to keep folks alive and gives them a tool to get away from street drugs. Please do the right thing!	
Greensboro	North Carolina	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Mitragyna Speciosa, specifically Plain Leaf in its natural form, helped me turn my life around for the better 11 years ago. I used to be hooked on prescription opiods that were prescribed to me, but my life was in shambles from the opiod addiction. Kratom (plain leaf) gave me a route to break me free from the chains of dangerous opiod addiction. In its natural form, Kratom is not a harmful plant with it's large natural alkaloid profile. Please allow more research on this plant, as it has been used for centuries. I do, however, oppose the synthetic form of a specific concentrated alkaloid known as 7oh. 7oh is barely present in Natural leaf Kratom, typically 0.01% of the entire alkaloid profile. I strongly urge Ohio not to outlaw mitragyna speciosa in its natural leafy form. It has helped so many people transform their lives for the better!	

Sarasota	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom was a god send for my father that had extreme health issues. Physically and mentally. He was using alcohol and adderall which led him to numerous strokes and open heart surgery. He had no choice but to stop and we discovered kratom. Since then he has changed his life around. I no longer witness my dad stumbling around delusional and out of it. The days and nights of him passing out anywhere are finally over. His mind is clear and he is getting a second chance at life. He would have never been able to be a granddad to his grandchild (my niece). Who knows if he would've even been here on this planet to experience this. I am relieved I no longer have to go to the ER or his surgeries wondering if he will even make it out. Each time I had to prepare: Living wills, medical Advocacy ect. I thank God for kratom and having my dad here with us.	
Carson City	Nevada	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom got me off of Heroin. Plain Kratom is perfectly safe. It is all the new stuff with the extra strong concentrations that are unsafe. Please do not take away the plain powdered kratom products. They are saving lots of lives. Thank you for listening.	
San Luis Obispo	California	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am submitting this comment in opposition to the proposed rule to place mitragynine into Schedule I. Scheduling mitragynine as a controlled substance would effectively ban kratom without clear evidence of necessity and would cause harm to consumers who rely on it. This action goes beyond reasonable regulation and eliminates any pathway for responsible access. This is a safe natural plant, and has no business being criminalized. This plant should remain safe and legal and accessible to the public. It's an essential tool in harm reduction and pain management. It's harmless and safe. I formally request a public hearing that allows full consideration of evidence, alternatives to scheduling, and the option to deny the proposal entirely. A hearing should not be limited to adjustments within Schedule I, but must meaningfully evaluate whether scheduling is justified at all. If sufficient evidence cannot be demonstrated, this proposal should be withdrawn. Thank you for considering this comment.	
Chicago	Illinois	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has helped many many people to break the addiction of opioids. Overdoses are prevented, and people can have a normal life. The benefits of kratom far outweigh any perceived risk or harmful benefits. There are much more important things you can do so please let kratom alone and do something for the good of the people.	

Jefferson	Georgia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am writing to oppose bans on natural kratom leaf products. I was first introduced to prescription opioids in my early twenties, which led to years of addiction and ultimately fentanyl dependence. I lost my husband to fentanyl and later entered recovery myself. I have been free from illicit drugs and alcohol for years, and kratom has played a critical role in helping me remain stable and committed to long-term recovery. Kratom didn't harm my family, it helped me rebuild it and gave us a second chance at a stable, healthy life. I urge policymakers to distinguish between natural kratom leaf and highly concentrated synthetic products such as 7-hydroxymitragynine (7-OH). Even as someone in recovery, I am wary of 7-OH because of its reported potency and addictive potential. Synthetic products should be restricted or banned, while natural kratom leaf should remain legal and regulated with age limits, testing, and labeling. Prohibition will not protect public health. Thoughtful regulation will.	
Phoenix	Arizona	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	The proposed rule makes me fear the future. Even though I do not live in Ohio, I know if this rule is enforced it could eventually become a problem in my state too. I have been using natural kratom leaf for about 3 years now. I take it quite often but when I run out I usually go five days without. I used to be cripplingly addicted to opioids but now I have three years off all that stuff. A big reason I am confident I won't relapse is because I have access to natural kratom leaf. Taking alway kratom would do nothing but harm. The people who take it especially those who take it for chronic pain, will be forced to seek illicit and dangerous alternatives. I have a glass of kratom in the morning to help with anxiety and motivation. I spend no more than 36 dollars every couple months. The thought of this tool i have found to get me through my day being taken away is very threatening. It feels as absurd as the idea of someone trying to ban coffee.	

Gallatin	Tennessee	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I don't understand why anyone would ever want to ban kratom! Ban the synthetic stuff that's being sold in gas stations, but please don't keep people from being able to buy natural, pure leaf kratom. I have over 9 years clean. I was a heroin addict for most of my adult life, in and out of treatment, detoxes, even mental health facilities. I'm 2016 I overdosed when my son was a baby. I hadn't used heroin for a few years, until after my son was born and postpartum hit. Long story short I overdosed, lost my son, was homeless and absolutely miserable. I finally got into treatment in 2016. I had a few years clean when I fell into a major depression and on top of that, was dealing with terrible chronic pain. I knew if I didn't do something, I would end up with a needle in my arm. I read about kratom being great for pain and many other things so I tried it. It had been a miracle for me and for so many others. I haven't touched heroin or any other horrible drugs since. I own a home, I am married to an incredible man, I'm a stay at home mama that homeschools our son. I am very involved in my church, and I help a lot of people change their lives. I would not be where I am in this life if I hadn't found kratom. I haven't had to lie, steal or manipulate to get it either. It's helped me in so many ways, it's unbelievable. I take it everyday because of the chronic pain I have. (spinal stenosis, degenerative disc disease, arthritis, muscle spasms, etc) My husband takes it when he has a toothache or a back ache or any kind of acute pain. I gave it to my MIL after surgery, my step MIL takes it now, as well. My 74 year old mother will be taking it also once she has her surgery. I would surely be on major narcotic medication if I didn't have kratom. Then I would inevitably end up back on drugs. My life is so incredibly wonderful since I found kratom. I function like a productive member of society and I care for my family! I haven't had to take one single opiate in 9+ years because of kratom. I know so many people that I've met online all over the globe that feel the same way I do. This plant is a miracle. You absolutely can not overdose on kratom. It's not dangerous in any way. It blows my mind that people want to restrict or ban a natural plant but will send us to the Dr for more pills! Please don't. This will turn people's worlds upside down. SO many addicts have completely changed their lives due to kratom. Instead of banning it, research it, please! It works the same way Suboxone does except it's all natural. How can that possibly be a bad thing? What will all of the people that take kratom every single day do, when it's illegal? You will have thousands of people that rely on kratom, be completely lost and inevitably will end up back on drugs. What is this really	

			about? Please consider listening to people and open your minds to what they have to say. It's a miracle plant, please don't take it away.	
New Canaan	Connecticut	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have been using kratom for the past 20 years with little to no adverse effects. I was able to quit hydrocodone, benzos and alcohol. at 51 I workout, run, and am in the best shape of my life. please regulate for adults over 21 but dont ban it. We dont deserve to become criminals	
Lehigh Acres	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has been extremely helpful for me and a great alternative to consuming alcohol.	

Takoma Park	Maryland	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I also want to share with you why kratom consumer protection matters so much to me. My aunt died from prescription medication overdose. This would have never happened if she had been able to use kratom instead. I was at one time an addict to narcotics and their pharmacy prescribed counterparts meant to help people get away from the street drugs but are just as, if not more addictive than what they are meant to help with. I was lucky enough to get away from that unhealthy cycle and natural leaf kratom helped me tremendously. Chewing kratom leaves is quite common in South East Asia and it helps countless people in many ways. Please dont allow this God given medicinal plant to be demonized and subsequently burned at the stake.. Many recovering addicts and people w chronic pain will certainly turn to pharmaceuticals and illicit street drugs if this kratom plant is withheld from them. Thank you for your work, your time, consideration and continued efforts to find balance in an unbalanced world.	
Williamson	New York	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom saved me and family who live in the state of OH. We lived on the streets strung out on opioids and other drug. After years of going no where e separated our paths, my went through treatment programs but was back using within months. He husbands brother died due to opioid over dose. He husband survived cancer and had free range of opioids for over 5 years. His doctor stopped the opioids, he was out on a step down program then given cbd. He continued to struggle with opioids then one day we heard about Kratom. He started Kratom a couple years ago has continued to be opioid free. He's had minor surgeries without the use of opioids. I am drug free and own my own home and I'm retired but I take Kratom daily. I no longer am struggling in life because I had choices. Suboxone is out available but the harm it does to the mind and how it destroys family because it causes the person to have no affect. They live a blah life. Please keep the kratom legal so others who run out of options might chose life and sober up. Block the 7OH stuff. Look into the side effects of too much kratom because the N/V assure a person doesn't OD. Listen to the users. At one time in life I could find opioids on any street corner now I find kratom at the shops and I can enjoy OH drug free and not worrying about getting busted by the cops. My money now goes to concerts, camping venues and sporting events when I visit OH instead of making the drug lords richer. Thank you	
Minneapolis	Minnesota	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I have been using kratom for over ten years now.I have not turned to other drugs.My hands do not shake when I when I don't take any.I believe if the honest truth were told ,big pharma would leave us alone.	

Chicago	Illinois	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	This is government overreach to the highest degree. Kratom is safe and helpful for a huge variety of conditions. It has helped thousands of people quit prescription opioids and other far more dangerous drugs. To the best of my knowledge, no one has ever overdosed on plain leaf kratom, and the few deaths blamed on kratom have always been mixed with multiple other (more dangerous) substances. Alcohol and tobacco are both far more dangerous, harmful, and addictive than kratom. The fearmongering that has led to these ban attempts is way overblown. Please do not ban this plant that has helped so many.	
Jacksonville	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	The proposed rule will negatively affect thousands of people and cause fathers and mothers to fall back into addiction back to the opioid crisis. I think Ohio led the opiate crisis so it seems like to me banning Kratom that helps people stay off opiates is not a smart move. Please educate yourselves and work to take deadly synthetics like 7OH off the street. We need Kratom not dangerous synthetics. It is very important you guys get this right. Please listen to the people and consult the professionals. Unless big pharma is involved imposing their will!	
Boynton Beach	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I strongly urge the Board to protect continued access to natural kratom leaf products through balanced, science-based regulation rather than rules that would effectively criminalize all kratom. Hundreds of thousands Ohio consumers responsibly use natural kratom leaf for wellness, productivity, and as an alternative to alcohol. For me and my friends, kratom has been a critical tool in reducing reliance on alcohol. I believe it is important for the board to distinguish natural kratom leaf from adulterated or synthetically enhanced products. Broad restrictions that fail to make this distinction, risk eliminating consumers access to safe, traditionally used botanical products while unintentionally encouraging unregulated alternatives. I support reasonable safeguards, including: Age restrictions, Product testing, and labeling requirements; as well as clear prohibitions on adulterated or synthetic formulations. However, rules that effectively ban natural kratom leaf would harm me, other consumers, small businesses, and public health outcomes without clear scientific justification. Existing research does not support classifying natural kratom leaf alongside dangerous controlled substances, and many states have successfully adopted regulatory frameworks that protect consumers. I respectfully ask the Ohio Board of Pharmacy to consider a regulatory approach that: Preserves access to natural kratom leaf, Targets bad actors rather than responsible consumers and suppliers, Aligns with evidence-based policy and consumer safety. Thank	

			you for considering this comment and for allowing public participation in this important process.	
Irmo	South Carolina	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom saved my life from alcohol and depression. I attempted suicide and when I found Kratom my life changed for the best. I could not be the happy productive member of society without this amazing plant sent from God	

Athens	Georgia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	My name is Kyra. I'm 50 years old. I'm a professionally licensed massage therapist with 23 years of experience. I'm a productive member of society who helps heal people and take away their pain, tension and other negative effects. Sometimes I even keep them from undergoing needless surgery or taking harmful medication. I started using kratom in 2016. I was informed about it by a friend who told me how much it helped her. I suffer from depression, insomnia, anxiety and migraine headaches. Kratom has helped me greatly manage these symptoms. I don't drink or do drugs. I have no need to get high. I use kratom medicinally, and I'm not addicted to it. I take a small amount of it once per day. I firmly believe that it's my right to decide what goes into my body. People are killing themselves and/or destroying their bodies with alcohol and cigarettes, which are legal and readily available everywhere. I believe that the individual should be punished for any crimes related to what they consume, and not the public. It's very difficult for me to imagine anyone on kratom doing destructive things, as its effects are more like an energy drink or caffeine, things that are obviously also legal and widely consumed. Banning kratom is something I'm firmly against, and a decision that would hurt millions, both directly and indirectly. I do not want to even think of a life without kratom. It would severely hurt me, and make me less efficient at doing my job, which helps others to also be more productive. At this point, my life would not even be worth living without kratom. I'd gotten to such a low point in 2016 that I was considering suicide. I then was timely introduced to kratom, which helped turn things around for me and spared my loved ones and massage clients a lot of pain. If kratom is banned, I fear I would go back to the path of potential suicide. In my opinion, kratom should be readily available to anyone 18 years of age or older. It is a natural leaf, and has a myriad of health benefits (both mental and physical) which I've experienced firsthand. I believe denying it to the public and making productive members of society criminals for its possession is both wrong and unfair. Thank you for your consideration. I respectfully ask that those involved in decision-making educate themselves about kratom, and review some scientific facts before simply dismissing it without no thought. Kyra P.	
Mansfield	Texas	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I was addicted to oxy for ten years. I have been off opioids and on kratom 3 now. Kratom has not caused the withdrawal or the urge to use, it has helped me with my pain without chasing a high. Please keep pure leaf kratom plant legal. This isn’t 7oh , they aren’t the same thing. Please research this as it has helped so many for centuries.	

Santa Ana	California	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Natural Kratom allowed me to get off of 16 years worth of Tramadol pain killer addiction. Used responsibly it is safe.	
Ashburn	Virginia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Please do not ban kratom. Its helped so many people, myself included, get off of hard drugs. Without it, I'd still be hopelessly addicted to street drugs. Kratom is physically and mentally so much safer than the things it keeps people like me off of. I can function on kratom, it doesn't make me do things I'd otherwise never do. Not only has it saved my life, its also improved several major health issues of mine. My doctor would testify to the difference its made. I no longer need to take many of my meds thanks to this plant. I never thought I'd be able to keep a job again or actually save up money and live a responsible life, but kratom has made that possible for me. Nobody is dying on kratom, people are dying from fentanyl and meth and many of the other hard drugs people have used kratom to get away from. Please consider people like me while you decide whether or not to ban it. I will do my best no matter what the results, but if im being honest, I have no confidence whatsoever that I can remain sober without it.	
Chicago	Illinois	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	I am writing to advocate for kratom to remain legal. I am a recovering alcoholic with eight years of sobriety, and kratom played a meaningful role in helping me achieve and maintain that recovery. To be clear, when I refer to kratom, I mean the natural leaf only — not extracts, capsules, pills, or concentrated products. For me, kratom significantly reduced cravings and provided support during a critical time in my life. In addition to alcoholism, I have struggled with depression for more than 20 years. Kratom has contributed to a substantial improvement in my mental and emotional well-being. I am a C-suite executive at a midsized company, and kratom helps me stay focused throughout the workday and better regulate my emotions during stressful situations. It has also helped me maintain healthier sleep patterns and manage stress more effectively. I have experienced intermittent pain issues as well, and kratom has provided sufficient relief without requiring prescription opioids and without the risks associated with them. Kratom has never negatively impacted my responsibilities or daily life. I have never missed work because of it. I am not isolated in a depressive state, nor am I spending time in bars instead of with my family. On the contrary, kratom has helped me remain present, productive, and engaged. It has truly changed my life for the better, and making it illegal would be deeply detrimental to my health and stability.	

Gainesville	Virginia	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	My husband and I both were able to quit drinking and smoking using kratom. Our lives were in bad shape and health. We are in our 60's and living a healthy life style with successful career. Please don't take natural kratom powder away. The other crap people made with it like the 07 products need to be eliminated but keep natural powder or leaf Kratom available to us and millions who it has helped. Thank you Cary Anne and Derek	
Miami	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	Kratom has saved my life. Kratom helped get me off of FDA approved pills and methadone. My body was in a really bad shape from the methadone. My digestive tract was shutting down. I need a desperately to get off of FDA approved pills and medications because none of them were working. When I started taking kratom I felt like a burden was lifted off my back. It took away my pain and it also calmed any craving I had for any type of opiate medication. I felt like I have a new lease on life. I only have to take a tablespoon in the morning. Sometimes I'll take a half of a tablespoon or even a teaspoon around 4:00 or 5:00 p.m. if my knee is really really hurting still. It's a plant. It's a tree from Indonesia and the leaves are dried and ground and that's what it is that we take when we say kratom. Not 70H, not tinctures, definitely not concentrates of any kind! Just whole leaf powdered kratom. It has saved me from spending so much money. It has saved me health-wise! My body feels normal again. It feels like I'm functioning again. I feel like as a recovering addict who always needed m a t medications such as methadone or Suboxone, they never works for me unfortunately. The methadone was hurting me actually. Thank God I found kratom when I did. I got down on my knees and cried and thanked him. Now my mind is clear. I can't believe I was able to drive on that medication and the other medications that I was prescribed in pill form. I feel so much more aware of my surroundings. I feel like a better mother. I feel like a better wife. It truly has changed my life for the better and I don't crave it like drugs. It's not like you go into withdrawal 6 hours after you take it. I go to sleep at night and I sleep like a rock. Sometimes in the morning when I get up I'll take it with my coffee and sometimes I even forget to take it. And I'll notice a little bit of pain in my left knee that's caused from my left ankle from flat feet but anywho the point is that I forget to take it sometimes. It's not highly addictive. I changed my whole mindset from obsession with pills and obsession with MAT medications that we're not good for me. My teeth fell out I have no molars left in my mouth from Suboxone. It ate my teeth up. Now I'm taking a plant that comes from the ground made by the creator, whoever that may be to you, It was not invented in a lab. It really has been a natural healthy alternative for my pain relief. And	

			the other people I see that have made the switch from narcotic pain medications to whole leaf kratom powder are like new humans again. They're productive and they have productive thoughts. They're proactive instead of reactive. It's just a completely new lease on life. These people are taking better care of themselves they are taking better care of their entire life. They are working and paying rent on time versus struggling to pay rent. They are taking better care of their children as opposed to being doped up and sleepy all day and not caring for them more so neglecting them. I am so proud of my friends that have been taking whole leaf kratom with me. It truly has changed our lives for the positive. I cannot name one negative about it. I mean other than the fact that it isn't free. Haha. I just wanted to let you know how deeply and how profoundly kratom has changed me and my mindset and my spirituality and my outlook on life for the better. It is such a positive good thing, I don't see how taking it away from people would benefit anyone at all. Whole leaf kratom powder is not kratom extracts and it is not 70H! Whole leaf kratom powder is different. Yes it has alkaloids in it but it is natural not added. I think everyone can agree even if it's secretly within themselves and not out loud to everyone, natural is always better.. always. Thank you for your time thank you for reading this and thank you for considering leaving kratom available to people that truly need it or people that truly have benefited from it and have actually given kratom the credit of saving their lives. Thank you.	

Davie	Florida	2 - Oppose - Used to Treat Substance Use Disorder/Alcoholism	My name is David, I am a lifelong citizen of the usa and I am an individual who benefits from and uses Kratom and 7-oh mitragynine in their life. It has been an extremely positive force in my life, helping to reshape my life from deapths of treatment resistent anxiety and depression, and drug/fentanyl addiction which used to control my every move before I found kratom. They gave me the ability to breathe and be in control once again, to be mindful in my family and relationships, and to reshape my academic and professional life once again. They took away any cravings I had for dangerous street drugs from the moment I began using them, without any "high" or intoxicstion; this finally allowed me to be present and active in my recovery and relationships once agak. Kratom+7-oh mitragynine are benign substances with hundreds of years of traditional human use in their countries of origin and scientifically have been proven not to intoxicate or be toxic in healthy individuals. These are harmless replacements when compared to deadly fentanyl contaminated compounds on the street. There are countless people who use kratom without issue like I have; I oppose restriction of these compounds because of the unnecessary ways it would limit its reasonable and affordable access, and to preserve the alternative it offers to the public health crisis that are fentanyl and alcohol use. This is an unreasonable infringement on the rights of of the citizens of america, people could loose their only alternative and their lives. I implore once again not to allow this legislation to pass.	

Jackson	Missouri	4 - Other	Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it is a money grab by Corrupt bureaucrats Say no to fake kratom reefer madness. We do not want 1980s boomer war on drugs and arresting people for a plant. We want safe accuse to natural kratom. We see this for what it	

			is a money grab by Corrupt bureaucrats We want legal kratom not corruption bureaucrats. Who is taking money one way or anything to hurt ohians everyone see through this Keep natural kratom legal Public trust in drug policy depends on transparency, scientific integrity, and the absence of conflicts of interest. Unfortunately, when it comes to natural kratom, those standards are not being met. When individuals involved in shaping drug policy also sit on pharmacy boards or organizations with financial ties to pharmaceutical interests, the public has a right to ask serious questions. For example, Cameron McNamee's roles as a board member within pharmacy-related institutions while also serving on the board of Thrive for Change raise legitimate concerns about overlapping influence in decisions that could directly affect market competition. A natural, unpatentable plant like kratom does not generate profits for pharmaceutical companies. Banning it, however, creates demand for prescription alternatives, treatment programs, enforcement funding, and regulatory expansion. The question is unavoidable: who benefits financially when kratom is removed from the market? This is no longer simply a public health discussion. If it were, policy would follow evidence. Instead, we see fear-based narratives, selective data, and the recycling of disproven "reefer madness" tactics despite mounting scientific literature and lived experience showing that kratom is being used by many as a harm-reduction tool. When the same system that profits from addiction treatment, prescription medications, enforcement, and incarceration also influences which substances are criminalized, the entire framework must be questioned. The appearance of self-interest alone undermines credibility. This should not be a debate about morality or panic-driven headlines. It should be a transparent examination of incentives, conflicts, and outcomes. The public is not blind to patterns of prohibition that enrich systems while failing people. If policy makers are confident their actions are truly about public health, then full disclosure, independent review, and open debate grounded in science—not profit—should be welcomed. Anything less only deepens the perception that bans like these are designed not to protect the public, but to protect revenue streams. How can this Board claim to make fair and impartial rulings when individuals directly connected to Cameron McNamee and Thrive for Change are positioned as decision makers while simultaneously profiting from the banning of kratom? This is not a rhetorical	

			question. It is a fundamental challenge to the legitimacy of your rulings. Any relationship, financial interest, or organizational affiliation that stands to benefit from the outcome of a ban should have been fully disclosed. That did not happen. The failure to disclose such conflicts undermines public trust and raises the appearance of self-dealing and corruption. If Thrive for Change benefits financially, politically, or strategically from the banning of kratom, then the public deserves to know: • Who on this Board has direct or indirect ties to that organization • Why those ties were not disclosed • How the Board justified proceeding despite clear conflicts of interest If this conflict was hidden, what else is being concealed? What other interests are influencing decisions that are being presented as public safety measures?You claim transparency. You claim ethics. Yet the silence around these relationships suggests otherwise. Decisions that impact livelihoods, patient access, and public health cannot be made behind closed doors by individuals who stand to profit from the outcome. We are documenting everything. Lawmakers have been contacted, and we have been instructed to preserve all records and communications. An investigation is expected to begin in January. At that point, the question will no longer be whether these conflicts existed but why they were ignored. writing out of deep frustration and disappointment. It has become increasingly clear that our voices are not being heard, and the reason now appears obvious: a conflict of interest involving Cameron McNamee and his work with Thrive for Change. For some time, concerns have been raised and dismissed. Questions went unanswered. Pushback was ignored. Now, what we suspected before is out in the open. This raises a serious and unavoidable question: is this conflict of interest the reason certain decisions are being pushed forward despite the harm they are causing? You claim to help people, to advocate for change and wellbeing. Yet the actions we are witnessing tell a very different story one where people are hurt, silenced, and sidelined while back-door deals move forward without transparency or accountability. We are demanding answers. Transparency is not optional, and trust cannot exist where conflicts of interest are hidden or ignored. If this work is truly about helping people, then explain why those affected have been excluded, dismissed, and harmed in the process. The truth is now visible. Ignoring it only deepens the damage. What the Board is doing regarding kratom is a blatant attack on people like me, wrapped in hollow language and propped up by conflicts of interest that everyone can see. I use	

			kratom responsibly. It is a natural plant. It has helped me live a stable, functional life without reliance on dangerous pharmaceuticals that this same system has pushed for decades with catastrophic results. Kratom did not hurt me. Your actions will. And yet, instead of evidence, transparency, or honest engagement, the Board offers vague nonsense like "we see it's not healthy." That is not science. That is not regulation. That is an insult to the intelligence of the public. What is crystal clear is that individuals tied to Thrive for Change including Cameron McNamee stand to benefit from a kratom ban. Treatment organizations and prohibition-based nonprofits gaining relevance, funding, or influence from outlawing a safe, natural alternative is not a coincidence. It is a business model. And when Board members are connected to or aligned with those interests, it looks exactly like what it is: bought and paid for. You are not protecting Ohioans. You are stripping people of a tool that keeps them out of crisis, off harder substances, and out of systems that profit from their suffering. You are doing it without credible evidence, without transparency, and without regard for the real people whose lives you are destabilizing. Everyone sees this. You can deny it, but you cannot hide it. This kind of corruption doesn't require a smoking gun — the optics alone are damning. A regulatory board pushing prohibition while its members or associates benefit from the fallout is regulatory capture, plain and simple. History is very clear about how that ends, and it is never with the regulators on the right side of it. You are creating harm. You are silencing the people most affected. And you are doing so in a way that will not withstand scrutiny.. public, legal, or historical. Do not mistake silence for consent. Do not mistake authority for legitimacy. And do not assume the public is too ignorant to understand exactly what is happening here. This is not public health. This is corruption. And people like me are paying the price. To the Ohio Board of Pharmacy, what is happening here is not abstract policy to me it is personal harm. I use kratom responsibly. It is a natural plant that has helped me maintain stability, function, and quality of life without turning to far more dangerous pharmaceutical alternatives. It has not harmed me. It has helped me. And yet the Board appears willing to erase that reality entirely, as if people like me do not exist. What does exist, very clearly, is corruption or at minimum the unmistakable appearance of it. When individuals connected to organizations like Thrive for Change stand to benefit from a kratom ban, and when Board members are affiliated with or aligned to those same	

			interests, the public sees exactly what this is. You can dress it up as “health concerns,” but vague statements like “we see it’s not healthy” are not science. They are excuses. Natural kratom is being targeted while far more dangerous substances remain legal, prescribed, and aggressively marketed. The difference is obvious: kratom cannot be patented, monopolized, or used to funnel people into paid treatment pipelines. That makes it inconvenient — not dangerous. This does not look like public health. It looks bought and paid for. Everyone sees it. The public sees it. Advocates see it. And increasingly, so do journalists and legal observers. The optics of Board members influencing policy that financially or institutionally benefits organizations they are tied to is terrible — and it undermines every claim of credibility this Board attempts to make. By pursuing prohibition instead of regulation, transparency, or honest engagement with kratom consumers, the Board is choosing to harm people like me while protecting entrenched interests. That choice will not be forgotten. If this decision is truly rooted in evidence, then produce the evidence openly, publicly, and without conflicts of interest. If it is not, then understand that history is not kind to regulatory bodies that sacrifice truth and people’s lives for convenience or profit. This situation does not look good. And it will not age well. For a long time, I believed this was a debate a difficult, complicated discussion about safety, responsibility, and public health. I believed there was room for honest disagreement. I wanted to believe that natural kratom and the people who rely on it were being heard in good faith. Now it is clear to me that this was never a debate. What I see instead is the silencing of natural alternatives while pharmaceutical solutions are protected, promoted, and normalized even when those medications carry their own risks and costs. To many of us watching closely, it feels less like concern for public health and more like alignment with paid voices and industry interests that benefit when people are pushed away from natural options and toward Big Pharma dependency. That realization is deeply upsetting. People turn to kratom because they are trying to survive because they cannot afford doctors, cannot tolerate certain medications, or are simply trying to avoid becoming “hooked” on powerful pharmaceutical drugs. When those lived realities are dismissed, it sends a painful message: that profit and influence matter more than people. I am sad not because I lost an argument, but because I lost trust.all of you will removed in January	

			I am writing to express my absolute disgust with the actions and apparent corruption surrounding the Ohio Board of Pharmacy and its acceptance of donations. Not everyone can afford to see a doctor. That is a simple, undeniable reality. Even physicians themselves have admitted that many of the policies being pushed do not actually help patients they only restrict access while protecting approved drug sales and the interests tied to them. When decisions that directly impact public health are influenced by money, the result is not safety or care; it is harm. There is one thing to have a legitimate debate about policy. It is another thing entirely when corruption is so obvious that it can be smelled a mile away. The appearance if not the reality of financial influence undermines public trust and makes it painfully clear that everyday people are not being prioritized. Healthcare decisions should be based on patient outcomes and access, not donations, politics, or protecting profit-driven systems. When people are forced to choose between suffering and going broke just to see a doctor, something is deeply wrong. I am beyond disappointed. I am angry. And I am demanding accountability. To the Board of Pharmacy, I am writing to express my outrage regarding the conduct of Cameron McNamee, who has been publicly promoting the goal of encouraging people to use FDA-approved medications. The way this has been handled is deeply troubling, especially given that the public whom this directly affect has had no opportunity for input or meaningful debate. It is completely unacceptable for individuals in positions of influence to push a specific agenda without transparency or accountability. The lack of public engagement, combined with the apparent attempt to manipulate perception in favor of certain products, raises serious ethical concerns. It appears not only irresponsible but deceptive, and it reflects poorly on the integrity of the profession and the regulatory standards that are supposed to protect the public. The Board of Pharmacy should be deeply concerned about this behavior. Allowing such actions to go unchecked undermines trust, endangers public confidence, and gives the appearance of favoritism or even corruption. It is not merely a matter of professional misjudgment it is a violation of the duty owed to the public to act ethically, transparently, and in the interest of patient safety. I demand that the Board take immediate steps to investigate this matter thoroughly and hold those responsible accountable. The public deserves honesty, integrity, and full transparency from those tasked with overseeing pharmacy practices, and anything less is unacceptable. Shame on anyone who allows deceptive promotion to occur under the	

			guise of professional advocacy. The public is watching, and accountability cannot be optional. Stop Pushing People Into More Drugs It is crystal clear why this is happening: the only reason people are being forced off kratom and into pharmaceutical drugs is to sell more drugs. Cameron McNamee said it openly in an interview with Channel 4—there it is, out in the open. You cannot claim ignorance anymore. The public sees it. Everyone sees it. Yet somehow, you still pretend this is about “safety” or “health.” It’s not. It’s about profit. And it’s insulting to anyone who has lived experience with kratom or alternative treatments. You will not listen to the people, no matter how many voices speak up. But know this: the dishonesty is transparent. People are watching, and the truth is not on your side. Stop hiding behind pretense and stop treating Americans like lab rats for Big Pharma’s bottom line. Total scum for that interview not everyone can afford a doctor we live in 2 americas the board of pharmacy where money goes freely between you and the other where can’t afford doctor healthcare it’s not about public heath we see that clear. Actually really sad I didn’t think you actually say it out loud this is because you want people on your drugs	

Mitragynine - Organization Comments

City	State	Organization	Comment Code:	Please submit your comments on the proposed rule. (NOTE: Rule comments are public record and respondents who wish to remain anonymous should avoid providing any identifying information).	Attachment Included?
Mount Vernon	Kentucky	Lefty's Tobacco Plus	0 - Blank / Sentiment Unclear		
Indianapolis	Indiana	Fumee	0 - Blank / Sentiment Unclear		
Saint Clairsville	Ohio	Clairsville tobacco and vape	0 - Blank / Sentiment Unclear	I think this fee free like leafs	
Cleveland	Ohio	Private company	0 - Blank / Sentiment Unclear	Kratom can only be bought at kratom bars or licensed dispensary that's a good place to start	
Columbus	Ohio	Ohio Prosecuting Attorneys Association	1 - Support	As you and the Board of Pharmacy are well aware, kratom products have a high potential for abuse. These products can, however, be viewed by consumers as a safe way to self-medicate for things like pain, anxiety or stress, a safe alternative to other drugs of abuse, or a safe way to manage something like opioid use disorder. This is due to the products' legal status, marketing, and wide availability. This causes our Association concern for several reasons.	OC-10
Columbus	Ohio	Prevention Action Alliance	1 - Support	Research and surveillance data link kratom use to seizures, hypertension, hallucinations, psychosis, and withdrawal symptoms. U.S. poison control centers have received thousands of reports of kratom exposure, including serious outcomes and fatalities. Particularly concerning are documented cases of infant withdrawal following exposure, underscoring the substance’s capacity to cause physiological dependence.	OC-11

Toledo	Ohio	Cuyahoga County ADAMHS Board	1 - Support	On behalf of our ADAMHS Board, we submit this comment in support of the Ohio Board of Pharmacy's proposed rule classifying Mitragynine and kratom products, including natural plant material and synthesized extracts, as Schedule I controlled substances.	OC-13
Dayton	Ohio	Community Overdose Action Team	1 - Support	On behalf of Public Health - Dayton & Montgomery County's Community Overdose Action Team (COAT), a community coalition comprised of public health partners, treatment providers, harm-reduction organizations, recovery support services, healthcare professionals, first responders, and community stakeholders, we submit this comment in strong support of the proposed rule to classify mitragynine as a Schedule 1 controlled substance.	OC-2
Hudson	Ohio	Northeast Ohio Opioid Consortium	1 - Support	Supports the classification of kratom and all synthetic kratom-related compounds as Schedule I controlled substances in Ohio to protect public health; and Supports the advancement of controlled research and clinical trials to evaluate safety and efficacy in defined therapeutic contexts.	OC-5
Cleveland	Ohio	NAMI Ohio	1 - Support	See attached support letter support for the permanent ban of synthetic Kratom.	OC-6
Springboro	Ohio	Ohio Alliance of Recovery Providers	1 - Support	On behalf of the Ohio Alliance of Recovery Providers (OARP), a statewide organization of addiction treatment providers, certified by the Ohio Department of Behavioral Health, we write in strong support of the proposed changes to Ohio Administrative Code rule 4729:9-1-01.1 and what would be the newly created 4729:9-1-01.2 rule to classify all forms of kratom as Schedule I drugs. As you are well aware, drugs, substances, and chemicals that fall under the Schedule I category have no currently accepted medical use and a high	OC-7

				potential for abuse. We wholeheartedly agree with that assessment, and we believe it will be in the best interest of all Ohioans.	
Chittenango	New York	Kratom Danger Awareness, Inc	1 - Support	My name is Wendy Chamberlain, founder of Kratom Danger Awareness, Inc., and mother of Joseph S. Lumbrazo, who died on August 30, 2020, from mitragynine toxicity. I submit this comment in strong support of scheduling mitragynine as a Schedule I controlled substance. My son's autopsy listed mitragynine toxicity as the sole cause of death. Like many, he used kratom simply for energy. He never imagined it could kill him—because the public messaging around kratom is dangerously misleading. I learned only after his death that mitragynine is an opioid-like alkaloid with respiratory-depressant properties, capable of causing fatal overdose.	OC-9

Covington	Louisiana	Wagar Hickman, LLC	1 - Support	I am representing the mother of a 36 year old woman who died in the US District Court in Louisiana. She was an otherwise healthy young woman who consumed kratom after returning from SE Asia where the leaves are consumed like tea. The kratom sold to the public in the US is not the same. It is adulterated and can be deadly. The AKA is funded by the industry who is prepared to sell this product unlawfully throughout the US even though it has never succeeded in gaining FDA approval to do so. It is the subject of innumerable warnings by virtually all public governmental organizations. It is condemned by the American Medical Association. Look it up. Ohio would be right to ban it. Is it better than heroin? That's the best argument they can make. But addicts can and do become addicted to kratom at high doses without any assurance it is not killing them slowly or suddenly. Finally, the FDA has three approved drugs that are deemed safe and effective to treat opioid addicts. Kratom is just a money machine for the owners of corporations who illegally import it and distribute it. Ban it. You'll be saving lives, not harming them.	

		City of Troy (Mayor Oda)	1 - Support	As the Mayor of Troy, Ohio, I fully support this proposed classification of any and all mitragynine and/or mitragynine-related compounds in any form to the Schedule 1 Controlled Substances. We are seeing firsthand the overt availability of this substance in our community. It is available over the counter at gas stations, convenience stores, smoke and vape shops, regardless of age. It is advertised in windows with flashing neon lights, and can be seen by anyone driving, walking or biking, regardless of age. We hear from our substance abuse/addiction facilities that the numbers are rapidly increasing for those going into treatment to fight this particular addiction. As a leader in this community, I also sit on our Miami County Drug-Free Coalition. This is something we fight every day. Why is Ohio making this substance easy to obtain? I would ask you to put Ohio on the forefront of this fight and ban this substance.	
Cleveland	Ohio	Cleveland Clinic	1 - Support	Additionally, we fully support the Board's proposed Rule 4729:9-1-01.2, which bans the sale of mitragynine, the primary psychoactive alkaloid found in the Mitragyna speciosa plant, commonly known as kratom. However, we are concerned that criminalizing the personal possession of these products will create hesitancy for people to seek care. Therefore, we urge the Board to develop language that discourages the possession of these products by eliminating the sale and marketing of such products in legitimate businesses rather than turning possessors into criminals.	OC-19

Haymarket	Virginia	American Kratom Association	2 - Oppose	At its core, the proposal repeatedly and improperly conflates natural kratom leaf alkaloids — principally mitragynine — with highly concentrated, semi-synthetic, and chemically manipulated products dominated by 7-hydroxymitragynine (7-OH) and mitragynine pseudoindoxyl. This analytical error is not incidental. It permeates the Board's assessment of abuse potential, public health risk, and alleged "imminent hazard," and it leads directly to conclusions that are inconsistent with the best available science, rejected federal precedent, and Ohio's own statutory standard for emergency scheduling.	OC-1
Portland	Oregon	PDX Aromatics, LLC	2 - Oppose	We are a long-standing herbal products company with extensive experience working with state legislatures and regulators across the country to advance reasonable, science-based kratom policy. We support thoughtful regulation that protects public health, ensures product quality, and removes unsafe or inappropriate products from the marketplace. For these reasons, we oppose a blanket ban on natural kratom, while supporting targeted prohibitions on 7-hydroxymitragynine (7-OH) and other synthesized or chemically altered compounds.	OC-12
St. Petersburg	Florida	Reason Foundation	2 - Oppose	Schedule I classification of mitragynine and 7-OH is not supported by a complete eight-factor analysis, contradicts emerging evidence of therapeutic potential, and fails to comply with SB 2's mandate to minimize regulatory burden. 24 A prohibitory approach risks increasing opioid overdose mortality by eliminating a less risky alternative for thousands of Ohioans, some of whom may return to illicit market opioids if kratom is banned.	OC-14

Denver	Colorado	Top Tree Herbs	2 - Oppose	We urge the Board to replace scheduling with sensible, enforceable regulations: age limits; mandatory third-party testing for contaminants and accurate alkaloid labeling; GMP manufacturing standards; clear serving sizes and warnings; and meaningful enforcement against fraud, adulteration, and mislabeling. These measures protect consumers while preserving lawful access and reducing incentives for the illicit innovation the proposal warns about.	OC-15
Dayton	Ohio	Channel Zero Marketing	2 - Oppose	I urge the Board to consider less restrictive regulatory alternatives. Your last presenter talked about following the 6 other states that have banned kratom, but she failed to speak about the 14 states that adopted KCPA regulations, rather than an outright ban that would devastate Ohio businesses and employees.	OC-16
		Kratom Consumer Advisory Council	2 - Oppose	In lieu of scheduling/banning natural kratom leaf, Ohio can be a leader in developing a Kratom Consumer Protection Act that protects consumers but still allows access to products for which the scientific data does not support a complete ban.	OC-17
		Zeiger, Tigges & Little (On Behalf of Botanic Tonics)	2 - Oppose	As explained and corroborated in the GKC comments, the applicable science and law favors the scheduling of concentrated kratom alkaloid isolates ("synthetics"), but not the scheduling of natural kratom leaf ("kratom leaf'). The former (the synthetics) are indistinguishable from opioids in their addictive potential and risk of injury. The latter (kratom leaf) have been proven in clinical trials not to present any significant or unreasonable risk of illness or injury, including the risk of severe addiction.	OC-18

				BT has a direct and substantial interest in each of these proceedings. BT currently sells Feel Free in Ohio through distributors. Its annual revenues from the sale of Feel Free exceed $5 million.	
Tampa	Florida	Holistic Alternative Recovery Trust	2 - Oppose	HART supports sensible regulation for all natural therapeutics derived from mitragyna speciosa or “kratom,” including mitragynine and 7-hydroxymitragynine (7-OH). This work will take time. Furthermore, it must necessarily disregard political exigencies, allowing for rigorous, methodical public health research and feedback from stakeholders including the scientific community, medical experts, and public and consumer perspectives. And, it should endeavor to balance the ideals of protecting children and the public while also protecting access for the hundreds of thousands of Ohio consumers who rely on kratom and its alkaloids to manage pain and overcome addiction.	OC-3
Franklin	Tennessee	HAVEN Access Inc.	2 - Oppose	HAVEN Access urges the Board to deny or withdraw these proposals and to pursue a transparent, evidence-driven process that meaningfully considers real-world impacts and procedural fairness.	OC-4

Cleveland	Ohio	Miracle Kratom, LLC	2 - Oppose	Public statements by Ohio officials in 2019 framed kratom as an urgent public health threat warranting prohibition. Nearly six years later, the predicted crisis has not materialized in our experience as lawful retailers. Instead, the real-world record shows stable retail operations, an absence of criminal activity, and extremely rare adverse events involving polysubstance exposure rather than mitragynine alone. The proposed rule does not meaningfully reconcile this real-world experience with its conclusions.	OC-8
Springfield	Ohio	Krazy Daze	2 - Oppose	Banning kratom would have a detrimental effect on the public's well being. Many people who buy our kratom have a military and law enforcement background. Banning kratom would financially hurt us and the livelihoods of our employees. Thank you for your attention to this matter.	
Largo	Florida	Pure Infinity Botanicals	2 - Oppose	WOW! Yes, I'm in the business, yes this is my livelihood, BUT this is such an important plant for so many people. We are the only company with the care to create a youtube channel for the purpose of educating. I'd be honored if you took a look at our content to see what we are about. We love Ohioans and we love kratom, and we know that this will hurt a lot of people. It's not just an issue of regulation, it's an issue of compassion. Please share some compassion for your constituents.	

Grand Rapids	Michigan	Grand Rapids Botanicals	2 - Oppose	As a business owner and advocate for kratom, we have been open for 6 years here in Michigan. I have seen many customers coming into our store and dealing with all types of addictions and looking for something that would help them to get off of very harmful drugs, alcohol or dealing with pain or suffering from anxiety and depression. And now to this day, I see them come in with a smile on their face and back to work and living their life again. Kratom has helped in so many ways to turn their lives around and feel normal again. These people are so grateful for kratom and it changing their lives. I speak for myself and many others when I say please don't ban kratom! It does help people and changes lives. The Kratom leaf is such a better all natural alternative than opioids or harmful drugs on the streets. Kratom Saves Lives.	
Schuyler	Nebraska	Oasis Farms	2 - Oppose	Please don't ban Kratom	
Cincinnati	Ohio	Lefty's tobacco	2 - Oppose	These new rules will greatly impact my business negatively	
Cincinnati	Ohio	Lefty's Tobacco	2 - Oppose	I do not support this bill.	
Cincinnati	Ohio	Leftys tobacco	2 - Oppose	I think these products should be sold at our store with No restrictions they help people with pain and getting off bad drugs.	
Chicago	Illinois	Lefty's Tobacco Plus	2 - Oppose	Banning kratom would be incredibly disasterous not only for Ohio jobs, but Ohio citizens. Ohio citizens use kratom, a natural, proven safe product for countless reasons, and have done so for years if not decades. Despite the smear attempt of negative press in the last months, kratom is safe and should remain legal. Ohio has attempted to do this multiple times in the past, and received record response in support of keeping kratom legal. Waiting a couple of years and trying to ban it again when Ohio has	

				already spoken seems disegnious and nefarious. Ohio has spoken time and time again. Keep kratom legal. Allow safe and legal access to this popular natural safe product.	
Cincinnati	Ohio	Leftys tobacco	2 - Oppose	Don't ban all kratom! Its helpful!	
Akron	Ohio	Roxbury kava bar	2 - Oppose	Keep Kratom alive. Kratom has helped so many people. It's completely dafe and natural. People need alternatives for alcohol so the can live complete lives	

Tampa	Florida	US Marketing Examiners LLC	2 - Oppose	As an American citizen by birth, I prefer to have the freedom to use the herbs and natural nutrients that science has found our body needs either for growth and maintenance of our health -- or, in the case of herbs -- have been shown safe and useful over centuries of use by local populations for various purposes. As a kratom consumer for 13+ years, kratom has served me well in this regard and the 100 million dollars of National Institutes of Drug Abuse research studies also confirm this plant has little inherent addictive potential, unlike many legal substances like alcohol and pharmaceutical opioids. For this reason, it is disturbing that there are financially biased industries that want to ban this herb's responsible use on the questionable grounds that it may cause deaths and/or addiction. After more than 13 years of daily use in moderation because this plant serves so well to curb my blood sugar spikes, without spending any money for pharmaceutical meds, this plant seems to be a God-sent gift that shouldn't be denied to people because the medical/pharmaceutical industry finds they are losing money, or the alcohol industry is not selling as much booze. The most egregious conflict of financial interest is when trial attorneys advertise for clients that they are looking for clients who will presumably share in the settlements of lawsuits on kratom vendors if the client can expect to be paid for testifying that they become "helplessly addicted" to this herb. There seem to be many large industries that are challenged by this inexpensive herb and they are trying to take this useful plant away from many people whom no longer can get prescriptions for FDA-approved opioids -- people	

				with a legitimate need, some that only kratom has found to work so well. Finally, our U.S. Food and Drug Administration has done some human testing on kratom and -- though their Website still doesn't fully reflect their findings, they have admitted they are not focused on scheduling the natural plant kratom, Rather, they have recommended that the DEA do Emergency Scheduling of the sem-synthetic molecule 7-OH, which is plainly being unlawfully marketed, thus confusing many lawmakers that this is "kratom", which it plainly is NOT. As a citizen of this great and beautiful nation, I would hope that I won't need to dodge Ohio and a handful of other banned states and small communities that would be happy to put me in jail because I have found a natural plant that eases the discomforts of turning 77 years old. (Ironic, isn't it that in many states -- with a doctor's permission -- I could be driving your highways high as can be on cannabis and not be arrested, but no so, with possession of kratom, which is nothing like weed or opioids.) Please study this plant carefully and don't ban this gentle pain neutralizer.	

Worthington	Ohio	Stella Maris is Cleveland	2 - Oppose	As a board-certified addiction specialist with over 15 years of experience treating substance use disorders in clinical settings, including opioid use disorder (OUD), I have witnessed the devastating impact of the ongoing opioid crisis. I've also seen firsthand how some individuals have found meaningful relief and recovery support through certain plant-based options when conventional treatments were inaccessible, insufficient, or not tolerated. I am writing to share a perspective grounded in patient reports, emerging observational data, and real-world clinical anecdotes: natural kratom referring to traditional, unadulterated leaf or minimally processed forms of Mitragyna speciosa, used responsibly in moderate doses appears to be saving lives for a significant number of people struggling with opioid dependence. Many of my patients and those in peer-support communities describe turning to natural kratom as a bridge during opioid withdrawal or as a longer-term harm-reduction tool. They report that it helps manage severe withdrawal symptoms (such as muscle aches, restlessness, insomnia, and intense cravings) far more effectively than going "cold turkey" or relying solely on over-the-counter remedies. In numerous cases, individuals credit kratom with enabling them to step away from illicit opioids like heroin or fentanyl, or from dangerously high doses of prescription painkillers, without entering formal detox programs they could not afford or access. Unlike concentrated extracts or semi-synthetic derivatives (such as those emphasizing 7-hydroxymitragynine/7-OH, which carry much higher risks of rapid tolerance, dependence, and overdose-like effects), plain-leaf	

				natural kratom interacts with opioid receptors in a more nuanced, partial-agonist manner at typical doses. This profile, combined with its stimulant-like effects at lower doses, seems to provide a gentler tapering pathway for some. Self-reported surveys and analyses of user experiences consistently show thousands of people using it specifically to self-manage opioid withdrawal or dependence, often stating it “gave me my life back” or prevented relapse and overdose. In the context of an opioid epidemic that continues to claim over 100,000 lives annually in the U.S., any tool that demonstrably helps even a subset of individuals avoid fatal overdoses, infections from IV use, or despair-driven suicide deserves serious consideration rather than outright dismissal. Natural kratom is not a miracle cure or a risk-free substance. it can lead to dependence with heavy, prolonged use, and it is not appropriate for everyone (particularly those with certain medical conditions or polysubstance histories). However, when used responsibly as part of a broader recovery plan including counseling, support groups, nutrition, and eventual tapering it has served as a literal lifesaver for patients who otherwise faced grim prospects. Regulatory bodies like the FDA have appropriately raised alarms about contaminated products, adulterated extracts, and misleading marketing, especially around potent semi-synthetics. Yet the traditional, natural form long used in Southeast Asia for centuries presents a different risk-benefit profile that warrants regulated access, quality standards (e.g., via GMP and third-party testing), and further rigorous research rather than blanket prohibition. If you or someone you	

				care about is battling opioid addiction, I encourage exploring evidence-based treatments like buprenorphine, methadone, or naltrexone first. But for those who have tried these and still struggle or who face barriers to care natural kratom, used mindfully under informed guidance, has proven to be a valuable harm-reduction option that, in many real cases, is helping people survive long enough to build sustainable recovery. We must prioritize saving lives today while pursuing the science for tomorrow. Natural kratom is doing that for far too many people to ignore. Sincerely, Dr. Elena Ramirez, MD, FASAM Addiction Medicine Specialist	
Cleveland	Ohio	Sacred vortex house	2 - Oppose	Do not ban kratom	
Oklahoma City	Oklahoma	Artisan Botanicals	2 - Oppose	Kratom and 7oh are both incredible tools for the modern day challenges we are met with in society. leaf kratom specifically is an invaluable boon to our communities, family and friends and there should be a legal over the counter and retail friendly market that is regulated with oversight. it has saved millions and millions of souls and will continue to do so. proper education is VITAL. as one of the main people who spearheaded and got the oklahoma kratom consumer protection act passed, separate from the american kratom association. from a consumer and a business owner who wants the best for the people, and therefor the country. thank you for your time and concern in reading this, if you actually do.	
Newington	Connecticut	Kratom Consumer Advisory Council	2 - Oppose	Please see my critique of the 8-factor analysis that you recently conducted. I fear that you did not assess the totality of the data, inflated certain data above stronger data types, and failed to consider trade-offs from consumer availability of natural leaf kratom.	

Worthington	Ohio	North coast kratom llc	2 - Oppose	I am a small business owner in Ohio, operating a kratom shop that provides safe, natural, lab tested kratom to my community. I am also a combat veteran who served in Iraq, and I am writing to express my deep concern and outrage at the possibility of a natural kratom ban in Ohio. Our shop works closely with the American Kratom Association and only sources kratom from responsible suppliers who provide third-party lab testing, ensuring that our customers receive pure, natural kratom powder free from contaminants, adulterants, or dangerous additives. Every batch we sell is tested to the highest standards because we take our responsibility to our customers seriously. We follow the rules, pay our taxes, and operate with integrity. A state ban would destroy everything we have built. My shop employs hardworking people in my community. A ban would kill jobs, shutter my business, and put my family on the street. My children depend on me. They can't eat if I can't work. I am willing to pay high taxes and operate responsibly, yet I would be punished for providing a safe, natural product that millions of Americans rely on every day. This is not fair it is devastating. Listen to the people natural kratom safe Kratom is overwhelmingly safe when used responsibly. A federal ban will not stop people from using it; it will push them to the black market, where untested powders—often laced with fentanyl or other dangerous substances—endanger lives. By banning a safe, lab-tested product, the government would increase public health risks, not reduce them. As a veteran, I understand sacrifice. I know what it means to fight for my country. Yet now, the law threatens to take away my ability to provide for my	

				family, my employees, and my community—not because we are doing anything wrong, but because of fear and misinformation. This is not justice. This is not protection. I urge you to consider the human cost before supporting a federal kratom ban. Protect responsible small businesses, protect families, protect jobs, and protect Americans from unsafe, illicit alternatives. The responsible solution is regulation, testing standards, and education—not prohibition.	

Alliance	Ohio	Anonymous	2 - Oppose	As a business and believer in Kratom products I see every day what a life-changing product this is. I've seen customers in paralyzing pain start living a better life after using kratom. I've seen people who couldn't work a standard shift be able to move and get around like normal after using kratom. I could go on and on but simply put it can help the average person in ways nothing else could. There are some negative effects but the good outweighs the negative hands down. I myself am a very active person and on occasion get hurt or over do something where I'm hobbling around and kratom has helped me to keep on going. I understand the ban and issue with 7-o , but that is NOT Kratom or Mitragynine but a drug that was created. This bill is limiting and prosecuting Mitragynine with is the active in Kratom. True Kratom products have not hurt anyone, only bastardized products. There is no reason to go after an all-natural product that is bringing so much good into the world. Even High Mitragynine extracts may not be necessary, but they really don't hurt anyone. As in any industry there may be a few bad individual products on the market that may need to be addressed but the industry as a whole is heroic and not the villain. The Villainous activity is trying to remove it.	

Worthington	Ohio	Advocates for Natural Wellness	2 - Oppose	As the Executive Director of Advocates for Natural Wellness, a nonprofit organization dedicated to promoting evidence-based use of natural botanicals for health and well-being, I am writing to express our strong support for the recognition and preservation of the natural benefits of kratom (Mitragyna speciosa). Our organization has long advocated for responsible access to plant-based remedies that have been used traditionally for centuries, and kratom stands as a prime example of nature's potential to support human health in a holistic manner. Kratom, a tropical evergreen tree native to Southeast Asia, has been utilized by indigenous communities for generations to enhance energy, alleviate discomfort, and promote mental clarity. Modern users report similar benefits, often turning to kratom as a natural alternative to synthetic pharmaceuticals for managing chronic pain, boosting mood, and aiding in relaxation without the harsh side effects commonly associated with conventional medications. Scientific studies have begun to explore these properties, highlighting alkaloids like mitragynine and 7-hydroxymitragynine, which interact with the body's receptors in ways that may support pain relief and overall vitality. At Advocates for Natural Wellness, we believe in the importance of education, quality control, and regulation to ensure safe consumption. We support policies that protect consumers by mandating purity testing, accurate labeling, and age restrictions, while opposing blanket bans that deny individuals access to this beneficial plant. By fostering research and informed dialogue, we can harness kratom's natural advantages to improve quality of life for many,	

				particularly those seeking non-opioid options in an era of widespread wellness challenges. We urge policymakers, health professionals, and the public to consider the growing body of anecdotal and emerging scientific evidence supporting kratom's role in natural health practices. Our organization is committed to collaborating with stakeholders to advance responsible use and protect this valuable resource. Thank you for your attention to this important matter. We welcome the opportunity to discuss how Advocates for Natural Wellness can contribute to informed decision-making on kratom and other natural botanicals. We support natural kratom	

Cincinnati	Ohio	The Wild Berry	2 - Oppose	Yesterday we had a customer come in and explain that his Doctor's protocall for his degenerative back pain was a prescriprion for 180 Oxycotin pills per month. 6 per day! He uses Kratomas a substitute for the opiods. 6 oxycotin per day would surely lead to addiction which he is trying to avoid. There may be some downside to Kratom use but for him the ;lthe releif is real and his abillity to work and have a fulfillling life has been tied to his Kratom use. Please, for harm reduction keep Kratom legal.	
Ashburn	Virginia	Business	2 - Oppose	This is an incredibly inappropriate and traumatic experience to see and experience the Ohio government ban kratom. The negative impact of the ban would really be damaging to my business and myself as a person. It's really important that the government can be reasonable and look at all the evidence and the reality of the situation regarding the kratom plant in its raw form. I believe the plant has been undoubtedly a very positive thing and its legality is absolutely essential.	
New York City	New York	street 43-music	2 - Oppose	Looking at your Banning proposal and trying to classify Kratom as a schedule 1 Narcotic. Is irresponsible and it is wrong. Reasons stated in section 6, are without merit, and reason. Other than false information given by others with their own agenda. I personally have been using Kratom products purchased from a certified AKA vendor. I've been using Kratom for over 10 years, I am in excellent health, I don't use any other drugs and I don't drink. These other drugs and alcohol which are readily available to people. Those are the ones that you need to put your energy in Banning. Kratom "natural " kratom used regularly and responsibly is as safe as coffee. As a veteran I use for anxiety,	

				depression and pain relief. Just like Ativan and or Tylenol or ibuprofen. Which I never take, and all which have more side effects than Kratom.	
Santa Clara	California	Mitra 9 Brands, LLC	2 - Oppose	I support science-based regulation that protects consumer safety without unintentionally eliminating lawful, compliant kratom products. Overly restrictive limits could effectively criminalize kratom rather than regulate it, pushing consumers toward unregulated alternatives. I encourage the Board to base any thresholds on current scientific evidence, distinguish between compliant and illicit products, and consider alignment with established Kratom Consumer Protection Act (KCPA) standards used in other states. Thoughtful regulation can protect public health while preserving responsible adult access. Thank you for your consideration.	
Jacksonville	Florida	Club13	2 - Oppose	We have been serving customer in Ohio for the past 27 years, who use natural Kratom products to better their lives We respectfully ask that you use reference FDA, NIDA, & NIH published studies proving the safety of natural Kratom products before recommending turn your neighbors into criminals. Thank you	
Strongsville	Ohio	BUsiness	2 - Oppose	The Kratom helps people in dealing with physical pain and is not known dangerous.	

Strongsville	Ohio	Business	2 - Oppose	It should be legal, people have more benefit from Kratom, many of our customers feel relief because of it. Just to help people don't banned it	
Los Angeles	California	Euro Grocers, Cigars and Smoking Accessories	2 - Oppose	Must keep kratom n Mitragynine n not ban it. Very helpful to customers. I'm n retired pharmacist.	
Lakewood	Ohio	Sacred waters Kava bar Lakewood	2 - Oppose	Hello! I am a bartender and a Kava bar in Lakewood Ohio! Kratom has been the backbone of our establishment since we've opened. Since I've been with the company, I've witnessed such a great community grow and flourish in front of me. I've seen our drinks, especially kratom, help people in many ways due to its extensive medical properties. Unfortunately there is too much misconception and misinformation about the lovely product. I fear if kratom is banned, not only would we lose such a great community and family, but our clients would lose a type of medicine and potentially fall back into more dangerous alternatives. I appreciate you taking the time to read this! Sincerely Spencer from sacred waters.	
Huber Heights	Ohio	Monkeys Smoke Shop	2 - Oppose	I am against this rule, I know more than several people that have had only positive outcomes from using kratom. Whether it's for pain management for cancer or back pain that opiods can't help manage, or for people trying to recover off heavy opiod usage.	

Denver	Colorado	Herblux Botanicals	2 - Oppose	My name is Luke Klepec and I am a founder of Herblux Botanicals, a small kratom distribution and online retail company that was founded in Cincinnati, Ohio in 2018. I am a Xavier University alumni and I built Herblux Botanicals out of my basement apartment in Cincinnati, OH with my business partners while driving for Uber on the side after graduating from Xavier. I received a degree in criminal justice, with my sight set on going into law enforcement. I completed an internship at a police department in my hometown of Bloomington, IL. My father had a 38 year career in law enforcement and my mother is a therapist. My family and I have both seen the harm that addiction has caused on individuals and society both personally and professionally. I decided to shift my focus to entrepreneurship, and after I discovered kratom and saw not only the potential, but the existing positive effect that kratom could have on society, I knew that it would be a lifesaving tool for many. That is why I started a kratom company. Kratom has provided a solution to many Ohioan's substance abuse problems, which is has been a national epidemic for far too long. I have since moved to Golden, Colorado, and started a kava bar that serves kratom teas with my business partners in 2023. It's called Golden Kava Lounge. We employ 6 full-time workers, and provide a sustainable, livable wage for these employees, despite a shrinking job market due to AI and automation taking over so many jobs. Amidst a nationwide loneliness epidemic, where younger generations are getting married later, buying houses later, and turning away from alcohol, as alcohol sales are down $830B in the last 4 years,	

				many Ohioans and Americans alike lack a sense of community. My bar has become a vibrant community where memories are made, relationships are formed, and lives are drastically changed for the better. We have been a safe haven for those recovering from hard drugs and alcohol. We provide an alternative mellow, fun, and safe experience, offering community, creating jobs, and generating tax revenue. We host pool tournaments, open mic nights, and chess tournaments, like a coffee shop vibe during the day, and a more socially stimulating nightlife-like environment at night, all supported by kratom as a product. Ohio has some kava bars, like Big Run Kava Bar in Athens, Ohio, whom Herblux Botanicals has supplied kratom to before. I plan to open many more kava bars that serve kratom throughout the country, and Ohio is a state that needs more. The success of kava bars that serve kratom can infinitely stimulate the economy and build community. Kratom, in its natural form, is safe. I have tested every batch of kratom that I've imported with third party labs and have closely analyzed all of the studies regarding kratom's risk. Hyper-potent extracts are the problem. If you must regulate in consideration of public safety, you must focus on hyper-potent extracts like 7-Hydroxymitragynine, not the natural kratom leaf, a safe, mildly uplifting tea and social stimulant that does not debilitate and acts as a safer alternative to alcohol. Kratom is community, connection, safety, recovery, and a booming industry that can create many jobs and generate millions in tax revenue while AI and automation takes them away. Ohio cannot afford to ban kratom.	

Spartanburg	South Carolina	3 Hearts llc	2 - Oppose	Please do not pan natural kratom leaf offerings	
Whiting	New Jersey	Christopher's Organic Botanicals	2 - Oppose	Public Comment: Business and Consumer Impact of a Natural Kratom To Whom It May Concern, I am writing on behalf of Christopher's Organic Botanicals, a small, family-owned online business that sells natural, plain-leaf kratom products directly to adults across the United States, including customers in Ohio. We are submitting this comment in response to the encouragement for impacted businesses—manufacturers, distributors, and retailers—to assess how a proposed ban on natural kratom would affect operations, customers, and commerce. A ban on natural, plain-leaf kratom in Ohio would have a direct and measurable negative impact on our business. We currently serve Ohio customers who legally purchase whole-leaf kratom tea and traditional extracts made from the leaf. Ohio represents an active and consistent portion of our customer base. A prohibition would immediately cut off lawful sales to those customers, resulting in lost revenue, disrupted inventory planning, increased compliance costs, and operational strain for a small business operating on tight margins. In addition to our customer base, this issue is personal for our family. My son is an Ohio resident and a member of the National Guard, and like many Ohioans, he and others in his community value access to lawful, responsibly produced botanical products. Policies that eliminate access to traditional, natural products have real downstream effects on families, service members, and working adults who are trying to maintain stability in their daily lives. More importantly, such	

				a ban would significantly affect our Ohio customers. Many of them rely on natural, unadulterated kratom leaf products as part of their daily routines to maintain stability, productivity, and quality of life. These are not synthetic products, isolated alkaloids, or high-potency formulations. They are traditionally prepared leaf products that customers have chosen specifically because they are simple, tested, and consistent. From direct customer communication, we know that if access to natural kratom is removed, many Ohio consumers will be forced into difficult choices: • Turning to unregulated or illicit markets • Traveling out of state to obtain products • Switching to alternatives that may carry greater risk or cost This outcome would harm consumers while providing no clear public safety benefit. Our company supports reasonable, targeted regulation—including age restrictions, labeling requirements, product testing, and clear distinctions between natural kratom leaf and synthetic or chemically altered substances. We do not support blanket bans that eliminate access to traditional plant products while failing to address the real sources of concern in the marketplace. A prohibition on natural kratom would not only damage small businesses like ours, but would also remove lawful access for informed adult consumers who depend on plain-leaf kratom products to manage their daily lives responsibly. We respectfully urge Ohio decision-makers to consider the economic harm, consumer disruption, and unintended consequences of a natural kratom ban, and to pursue regulatory approaches that protect public health without eliminating legitimate businesses and traditional	

				botanical products. Thank you for the opportunity to submit this comment and for considering the real-world impact on both businesses and consumers. Sincerely, Christopher Deaney Owner & Operator Christopher's Organic Botanicals Salem County, New Jersey customerservice@christophersorganicbotanicals.com 609-202-6880 856-581-1265	

Clearfield	Utah	International Plant & Herbal Alliance	2 - Oppose	I am a pain patient who has consumed kratom for 9 years. It has been life changing! I can participate in life again when before I was unable to function much. There are thousands like me in Ohio who depend on kratom for pain control or for harm reduction as they transition or step away from illicit drugs or abused opioids. Pain patients are being abandoned. We have very little access to prescribed pain medication. If a viable alternative like kratom is banned, the effects will be devastating. There will be suicides due to pain. I guarantee it. Those who continue to take kratom by purchasing out of state lines will be felons. Why would you want your most vulnerable to be criminals just for controlling their pain? This is crazy. The answer is good regulations! Schedule 7-OH and other synthetics. Take these products off shelves due to no science and no safety data. Please leave pure, whole-leaf natural kratom legal and accessible to your citizens. Pass the Kratom Consumer Protection Act and strictly enforce it. There is a right way to do this! Please DO NOT abandon those that truly need kratom for pain relief. DO NOT value the lives of those who choose to abuse substances over the lives of those who responsibly consume a product. Please DO NOT create criminals by taking away a lifeline. Thank you!	

Lakewood	Ohio	Ohio TeaHouse, Inc	2 - Oppose	Dear Ohio Board of Pharmacy, I'm writing to respectfully ask you to protect natural kratom leaf and powder from being classified as a Schedule I drug. I fully support reasonable, consumer-focused regulation, but I strongly oppose any legislation that would ban the natural plant form. I want to be very clear: I am not advocating for synthetic derivatives or 7-hydroxymitragynine products. I am requesting protection only for natural kratom tea, leaf, and powder, which thousands of Ohio residents use safely and responsibly. A ban would: • Push consumers toward unsafe, unregulated, or synthetic products • Harm responsible adults who benefit from natural kratom • Remove access to a plant that has been used traditionally for centuries • Increase risk by moving the market to the black or informal market Instead, I support sensible regulation such as: • Age restrictions (18+ or 21+) • Mandatory lab testing for contaminants and adulterants • Limits on synthetic additives and enhanced products • Clear labeling, packaging standards, and consumer education • Penalties for retailers who sell untested or unsafe products These protections ensure public safety while allowing Ohioans continued access to the natural, unadulterated plant they rely on. Please stand with people like me and choose regulation over prohibition. Protect natural kratom tea and powder, and help create a safe, controlled marketplace. Thank you for your time and consideration. Sincerely, Chris Nunnari Ohio TeaHouse, Inc dba Sacred Waters Kava Bar	

Cleveland	Ohio	Sacred Vortex Teahouse & Kombuchery	2 - Oppose	As an Ohio resident and responsible kratom consumer, I urge the Board of Pharmacy to pursue science-based regulation—not prohibition—when considering the proposed Mitragynine Rule. Natural, whole-leaf kratom has played a positive role in my life. Since incorporating it responsibly, I've experienced a noticeable reduction in my appetite for alcohol. This has supported healthier choices and overall well-being. In addition, kratom has helped me manage everyday pain associated with yoga-related injuries, sciatica, and PMS—allowing me to stay active, focused on movement, and engaged in self-care rather than relying on stronger substances. I believe adults deserve access to safe, regulated products that help them make healthier decisions. Thoughtful regulation—such as age limits, quality standards, accurate labeling, and testing—protects consumers and addresses legitimate safety concerns far better than a blanket ban. Prohibition would not eliminate demand; it would only push people toward unregulated and potentially dangerous alternatives. Please consider the real-world experiences of responsible consumers like me. Protect public health by keeping natural kratom legal and regulated in Ohio, and by basing policy on evidence and harm-reduction—not fear. Thank you for the opportunity to be heard.	

Hamilton	Ohio	Wild Berry Incense	2 - Oppose	We have been a retailer of Kratom for many years. Our experience with those customers use Kratom for chronic pain issues. Many of them have been on Opioids and have suffered through the cycle of dependency. Most of our Kratom customers are veterans and the prescribed treatment at their hospital only leads to more dependency on opioids. It seems like big Pharma is the one that is pushing this restriction. The headlines about the harm created by Kratom is mostly related to additives that is mixed with Kratom. Please let people decide for themselves, whether this is right for them. Many of our customers consider this a godsend of treatment.	
Cleveland	Ohio	JFL Energy	2 - Oppose	While I can understand the confusion around Kratom.related products, the science is clear. The active ingredients in the Kratom leaf are perfectly safe for use to the public, while the synthetic form is problematic and potentially dangerous. This follow along with the FDA's recommendation from over the summer to the DEA to schedule synthetic forms and allowing products using natural leaf safe for public consumption. The public has spoken and like the effects these products provide. Also, pease consider the harm you will do to the entire business chain that a total ban would do. This would do serious harm to a $500MM industry affect all aspects of the growing, shipping, warehousing, manufacturing, distributing and retailing of this plant. Thank you for reading and your consideration on this complicated issue. Joe Lardie Owner JFL Energy, LLC	

Bedford	Ohio	Spirit Apotheosis Botanicals & Findings	2 - Oppose	Kratom raw leaves and powder should remain legal in Ohio because it has a long history of safety and efficacy. We have been responsibly selling kratom since 2010 to documented adults, and have seen its benefit in people's lives. Our source in Indonesia provides all appropriate documentations declarations of it's purity. Responsible adults should be allowed responsible use to manage whatever they feel this benefits.	

Lakeville	Minnesota	Life of kratom	2 - Oppose	I am owner of life of kratom. I have three stores in ohio. I don't think you guys understand how big of and impact this is going to make if you ban kratom powder. My stores do over $100000 a month in revenue. 40% of my business is 60 years old and older. I got into this business to help people get off pharmaceutical drugs. I was a nacar driver for many years and broke my neck in 2007. I was making over 2.5 million a year and had everything I wanted. I was put on pain pills and you know the rest of the story. I didn't know we had and opiate epidemic in this country. Heck I didn't even know what and addiction was. Doctor put me on them and said I would be on it the rest of my life. Kratom saved my life. I am a father husband and now a grandpa. I have built a huge business helping people with pain and so much more. Pain pills, heart medication, suboxan, methadone is killing tens of thousands every year. I don't see those getting banned. Alcohol kills hundreds of thousands of people. We are not running to ban it. The science has shown that kratom alone has kill not one person. Yes not one. There has always been something in there system and guess what that is? You got it pharmaceutical drugs. Anti depression medication and so much more. Kratom is saving millions of lives and helping people live a natural lifestyle without pharmaceutical drugs. There should be no one that should be able to take that away. I was all for banned of 7OH which was being marketed as kratom and the science proved it wasn't. I applaud you for that and I though by dewine seeing that and RFK said kratom powder was safe and the only thing that should be able to be sold. What you would do to this	

				state if you ban it is cause alot of deaths and cause alot of people to go the other way. Bad part is your just going to make people go outside of the state to buy it. That isn't very smart considering the amount of tax money you would be losing. I am always here to talk (330)350-1247. Lastly I don't think the board of pharmacy should be able to have anything to do with this. Of course they want this to go away. They want everyone on there drugs. It's about money! Not safety or about the people! Thank you for your time. Sincerely Jack Smith (CEO) Life of Kratom	

Sandy	Utah	Mitra9	2 - Oppose	Hello, My company sells Kratom products in the US as a Dietary Supplement. This bill if it was to pass would directly impact us as a company and my employment. From a quality assurance side, our products are considered to be the highest purity of kratom. The main concern of the public would be towards 7-OH, and our product consistently tests at "Not Detected" for 7-OH at a testing level of one-hundred-thousandth of a percent. Our product is the safest on the market and our consumers rely on us for it. Passing this bill would hurt the economy in Ohio, and instead I urge Ohio to visit similar states that limit the amount of 7-OH using science backed resources. Trevor	
Ashburn	Virginia	Botanaway Inc.	2 - Oppose	Natural form Kratom and compliant extracts of it MAIN alkaloids are a wonderful harm reduction tool and benefit countless people of all types. Targeting and manipulating minor constituents of the plant is the problem. This problem also exists in other botanical industries, and especially the hemp industry. Ohio should look at targeting synthetic derivatives and not a natural form.	
Dublin	Ohio	Boulder Care via Drew Mossman	3 - Supports Regulation Over Ban	Boulder recognizes that Kratom is easily available and poses health risks, including dependence. Discreet packaging and wide availability of Kratom downplay those risks and are deceiving to the consumer. Consumers deserve full transparency about products they may be purchasing. In that spirit, Boulder supports conspicuous labeling of the risks of Kratom and Kratom-related products, similar to warnings on nicotine and alcohol products. Further, restricting the purchase of these products to ages 18+ and keeping these products behind the counter may curb use by adolescents.	

OAC 4729:9-1-01.2

ATTACHMNETS - INDIVIDUAL COMMENTS

Starting on Page 1: *LOCAL: Includes Ohio-based IP addresses as well as those in IN, MI, WV, KY, and PA.

PLEASE BE ADVISED: THIS DOCUMENT (Pages 9-10) CONTAINS GRAPHIC IMAGES OF WOUNDS THAT MAY BE DISTURBING

Starting on Page 17: NON-LOCAL: IP addresses outside of OH, IN, MI, WV, KY, and PA.

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Free Mail Order Naloxone And Fentanyl Test Strips

As the overdose crisis continues in its second decade, not all communities have access to the life saving naloxone and fentanyl test strips. Thrive for Change launched this mail order program in 2021 to allow anyone in Ohio to access these critical materials.

You may order up to 5 naloxone kits & 25 test strips. You are welcome to place up to 4 orders if needed. The orders will be combined into one shipment once confirmed supplies are needed.

We also offer these limited safer use materials through this program. People can request one of each kit per order. For access to more safer use materials click here.

- Safer injection kit (cottons, cookers, tie offs, alcohol pads)
- Safer snorting kit (multicolor plastic straws, plastic razors, sanitizer)
- Safe sex kit (condoms, lube, dental dams, internal condoms)

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Faculty Lecturer, Entertainment Media Management, Cinema and Television Arts, former Warner Brothers Executive Vice-President, Warner Bros. Animation

Brian Bailys
FOUNDING BOARD MEMBER
CEO, Thrive Peer Recovery Services

Emma Esmont
BOARD MEMBER
Director, Ohio State Based Practice, Sellers Dorsey

Jordan Patterson, J.D.
BOARD MEMBER
Judicial Law Clerk, US District Court, Chicago; Use and the war on drugs has impacted individuals in his personal and professional life.

Cameron Mcnamee
BOARD MEMBER
Director of Policy and Communications, The Ohio Board of Pharmacy

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As a nonprofit organization, our mission is to promote health, hope, and healing for those at risk of overdose and their loved ones.

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Neither the state nor the nonprofit's director knew that Harm Reduction Ohio wasn't the only one paying Reese.

Velocity Bio Group, an Arizona-based consultancy representing Hikma Pharmaceuticals, which manufactures Kloxxado, was paying her more than twice as much as the nonprofit was, court documents say.

In other words, Reese was receiving two salaries: one from Harm Reduction Ohio for procuring overdose reversal drugs, and another from a firm representing the manufacturer of the Kloxxado that Reese was buying on the federal government's dime.

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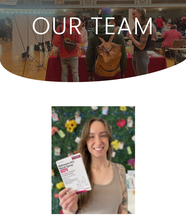

OUR TEAM

Bethany Roebuck (she/her)
CO-FOUNDER & EXECUTIVE DIRECTOR

Bethany oversees and coordinates programmatic planning, staffing and funding while maintaining weekly frontline work and face-to-face engagement with program participants.

Email Bethany

Ashley Rosser (she/her)
CO-FOUNDER & DIRECTOR OF PROGRAMS

Ashley coordinates and supports frontline staffing, provides community education from the perspective of lived experience, and manages communications and marketing.

Email Ashley

Elisha Starkey (she/her)
COMMUNITY ENGAGEMENT & RESPONSE COORDINATOR

Lish conducts street outreach and coordinates volunteers and stakeholders on targeted initiatives and conducts newsletter communications.

Email Lish

Victoria Ma
GRANTS ADMINISTRATOR

Supports grant writing, reporting and donor engagement.

Email Victoria

Shay Bradford (she/they)
HIV OUTREACH SPECIALIST

Shay provides HIV testing and care referral services, staff training, and data reporting.

Email Shay

Morgan Lute (she/her)
RESOURCE SPECIALIST

Morgan uses a peer-to-peer approach to engage with program participants, provide harm reduction and HIV testing services and foster trust, laying the foundation to provide referrals to ongoing care.

Email Morgan

Taylor Massey (she/her)
MAIL ORDER COORDINATOR

Taylor conducts harm reduction outreach and coordinates mail order services to rural and remote areas of Ohio.

Email Taylor

Dylan Brown (he/him)
HARM REDUCTION SPECIALIST

Dylan uses a peer-to-peer approach to provide harm reduction and HIV testing services and anti-stigma education to the community.

Email Dylan

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DOOR GREETER

Uses warm personality and cute floppy ears to help visitors feel welcome!

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▸ Front Pharmacol. 2024 Jun 3;15:1403140. doi: 10.3389/fphar.2024.1403140

Kratom safety and toxicology in the public health context: research needs to better inform regulation

Jack E Henningfield [1,2,*], Oliver Grundmann [3,†], Marilyn A Huestis [4,†], Kirsten E Smith [5,†]

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Abstract

Although kratom use has been part of life for centuries in Southeast Asia, the a

Feedback

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NL-001

E-FILED
08-11-2025, 15:57
Scott G. Weber, Clerk
Clark County

IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
IN AND FOR CLARK COUNTY

David Berg, individually and as Personal Representative of the Estate of JOSIAH BERG, deceased;

Plaintiffs,

vs.

OLISTICA LIFE SCIENCES GROUP; EYAL DAVID GABBAY, an individual; PEYTON PALAIO, an individual; MARK JENNINGS, and individual; MARK REILLY, an individual; ITAMAR DAVID, an individual; ALEXANDER WILLIAM COHEN, an individual; BOB HOBAN, an individual; MARTIAN SALES, INC.; JOPEN, LLC; A1 WHOLESALE SUPPLY, LLC; GWIS, LLC; CSA MANAGING, LLC; HIVATAL, LLC; MINISTERIUM, LLC; OEWM, LLC; PCKNW, LLC; FLOW TECH, LLC; CARYSTUS, LLC; ASHLEYBEND, LLC; SURGEONSLOOP, LLC; LP, INC; CC US HOLDINGS, LLC; PACIFIC WEST HOLDINGS, LLC; PNW HOLDINGS, LLC; FMK GROUP, LLC; NP PHARMA HOLDINGS, LLC; NP BIOTECH, LLC; JOHNSON FOODS, LLC; LOOBIE CORP.; NUZA, LLC; CALIBRE MANUFACTURING, LLC; ADVANCED NUTRITION, LLC; LIV GROUP, LLC; LGI HOLDINGS, LLC; EAZYFIT, LLC; YAM 3, INC.; MARY JANE

NO. 25-2-02919-06

COMPLAINT FOR WRONGFUL DEATH

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Seattle, WA 98101
Phone: (206) 487-7371

HOUSE OF GLASS, INC.; BABY JANE LLC; MFB ENTERPRISES LLC; AMERICAN KRATOM ASSOCIATION, a Virginia non-profit corporation, and JOHN & JANE DOES 1 THROUGH 10. Defendants.	

I. INTRODUCTION

COMES NOW the above-named plaintiff, by and through his attorneys of record, Talis Abolins and Michael Cowgill of **mctlaw**; and alleges the following in support of his claims:

II. PARTIES

i. ESTATE OF JOSIAH BERG ("Josiah"). The Estate of Josiah Berg has been opened in a probate action by the Clark County Superior Court. Josiah Berg was a single man who, until the time of his death, resided in Clark County, Washington. Before his death he was a young unmarried man, and a loving son to his parents and brother to his siblings.

2. DAVID BERG is Josiah's father and the duly appointed Personal Representative of his Estate. He was and is a resident of Vancouver, Clark County, State of Washington. He brings claims on behalf of the Estate and its beneficiaries, including himself and Josiah's mother, Chastidy Berg.

3. Upon information and belief, at all times relevant to this action, Defendant OLISTICA LIFE SCIENCES GROUP ("OLISTICA") is an unincorporated organization of individuals and entities involved in the OLISTICA-OPMS kratom enterprise and its civil conspiracy to perpetuate and expand the trade in adulterated kratom throughout the United States. OLISTICA was and is a name utilized by an unincorporated enterprise of co-

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conspirators responsible for a series of adulterated kratom brands (including OPMS). OLISTICA does business as and through an evolving and expanding set of shell companies, affiliates, alter egos, business names, assumed names, and/or trade names, including but not limited to: Olistica Life Sciences Group; Olistica Group; OPMS; OPMs; Optimized Plant Mediated Solutions; the OPMS Group; the "Chorg, Remar, Whole Kon, USK Co, Chika, and KG Partnership"; the "Peyton Palaio family of companies"; A1 Wholesale; Alphabet Wholesale; A1 Wholesale Supply; A One Wholesale; Jopen; Gwis; Centralized Services; Liv Group Inc.; Cascade Naturals; Della Terra Pharmaceuticals; NP Pharma Holdings, LLC; OPMS; Choice Organics; LP IND., Inc. Jordan Process; Precision Biologics, Inc.; Cannopy Corporation; Innovo Activas; Evolutionary Organics; JOPEN, LLC; CAG Holdings, LLC; RMH Holdings, Inc.; CSA Managing, LLC; Flow Tech, LLC; GWIS, LLC; Hivatal, LLC; Lunar Labs LLC; Martian Sales, Inc.; Ministerium, LLC; NP Biotech, LLC; OEWM, LLC; Pacific West Holdings, LLC; PCKNW, LLC; Surgeonsloop, LLC: Beeman Inc.; Uziel LLC; 1099 Industrial LLC; 1100 Alpha LLC; Engaged Investments LLC; FMK Group, LLC; PNW Holdings, LLC; Jordan Process; CC Holdings, LLC; LGI Holdings, LLC; Axis Holdings, LLC; Calibre Manufacturing, LLC; Savro Management, LLC; Advanced Nutrition, LLC; Admin Assist, LLC; Nuza LLC; Companion Agriculture; NP Biopharma; Della Terra Pharmaceutical; Aether LLC; Allied Manufacturing Services, LLC; Johnson Foods, LLC; Hush Worldwide, LLC; and Ashleybend, LLC.

4. Defendant, EYAL DAVID GABBAY ("DAVID GABBAY" or "GABBAY"), was and is an owner and operator of JOPEN, LLC, and a continuously expanding set of other entities affiliated with and generated by the OLISTICA-OPMS enterprise. GABBAY is a key

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and founding member of OLISTICA. He is a citizen of Texas, residing at 540 Mariah Bay Drive, Rockwall, TX 75032. GABBAY is the admitted distributor of OPMS, and is directly and personally involved in virtually all facets of the OPMS product line, including the import, design, manufacture, marketing, labeling, packaging, distribution, sale, and adverse event reporting of OPMS products.

5. Defendant Peyton Shea Palaio ("PALAIO") is an individual who was and is an owner and operator of various entities affiliated with and generated by the OLISTICA-OPMS enterprise. PALAIO is a key and founding member of OLISTICA. PALAIO is a citizen of Georgia residing at 3955 Ryans Lake Ter., Cumming, GA 30040. PALAIO is a key member of OLISTICA. PALAIO is viewed as the kingpin of the OLISTICA enterprise, directly and personally involved in virtually all facets of the OPMS product line, including the import, marketing, manufacture.

6. Defendant Mark Jennings ("JENNINGS") is an individual who was and is a key manager and operator of OLISTICA and its various associated shell company entities. JENNINGS is frequently identified as the Chief Operating Officer (COO) for the OLISTICA "Group" entities (and many others), and is directly and personally involved in managing and maintaining the secrecy of the supply chain and distribution practices of OLISTICA and its network of associated entities and brands. Upon further information and belief, JENNINGS is a citizen of Georgia residing at 128 Brook Hollow Lake Trail, Cummings, Georgia 30028.

7. Defendant Mark Daniel James Reilly ("REILLY") (a/k/a Chris Dockery) is an individual who is closely associated and directly involved with the kratom business operations of the OPMS brand. REILLY is the owner and operator of MARTIAN SALES. REILLY is

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implicated in, among other things, coming up with the "OPMs" branding concept, because it sounds like "Opium". OPMS quickly became the first major kratom brand in the United States. Despite coming up with the street-genius idea of the "Opium" sounding name, REILLY (through his MARTIAN entity) is a likely strawman for the broader OLISTICA-OPMS enterprise, and the real parties in interest such as GABBAY and PALAIO, who are responsible for the funding and acquisition of raw kratom for OPMS brand products, and oversee the manufacture, labeling, marketing, and national distribution of OPMS brand kratom. Upon information and belief REILLY's work is in part done under a pseudonym, Chris Dockery. Upon further information and belief, Reilly is a citizen of Georgia residing with his mother at 109 Wiley Bridge Court, Woodstock, GA.

8. Defendant Itamar David ("ITAMAR") is the brother-in-law of DAVID GABBAY, and is a member of OLISTICA, and an individual who is closely associated and directly involved with the kratom business operations of the OPMS brand, and various other kratom brands under the management and control of OLISTICA and its distribution members, GABBAY and JOPEN. Itamar is the owner and operator of various affiliated dba's and entities including BN Accounting; OEWM, LLC ("Onix"), PCKNW, LLC ("Flow Tech", and "In Flow Technologies"), and AMI. Personally and through these entities and business names, ITAMAR is personally and directly involved in assisting with the warehousing, packaging, labeling, marketing, and adverse event reporting and (failures to report) for OPMS and the various other OLISTICA branded kratom products. Likewise, ITAMAR works directly with GABBAY and JOPEN to market and distribute OPMS kratom throughout the United States and into Washington. Upon information and belief, ITAMAR is a citizen of Texas residing at

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5540 N 40 PL Dallas, TX.

9. Defendant, Alexander William Cohen ("COHEN") is an individual closely associated and directly involved with the OLISTICA enterprise through his ownership and work on behalf of JOHNSON FOODS, and its affiliated LOOBIE CORP. COHEN was forced to take over as sole owner of Johnson Foods when his predecessor Luis Perez (an Oregon strawman installed by PALAIO) became embroiled in felony charges. Mr. Cohen owns the trade name for "Vidaful", which is the JOHNSON FOODS d/b/a, and the overall "brand" of the kratom derivatives (including NPI-001, Mitra-Vida, Mitra-Leaf) that JOHNSON FOODS is desperately seeking to "legalize" through the New Dietary Ingredient Notification (NDIN) discussed herein – kratom products that are the hoped for legalized successors for OPMS and all other adulterated OLISTICA brands of kratom. Upon information and belief, COHEN is a citizen of Georgia residing at 2753 Battle Trl. SW Marietta, GA 30064.

10. Defendant Robert "Bob" Hoban ("HOBAN") is an individual closely associated and directly involved with OLISTICA-OPMS enterprise, as a key member involved in the development of the OLISTICA branding concept with JENNINGS and PALAIO. HOBAN served as "CEO" of OLISTICA when the name was first concocted, and his affiliated lawyers and law firms continued to represent OLISTICA members on legal matters arising from OLISTICA enterprise business activities. Specifically, HOBAN's law firm represented JOPEN in litigation to recover payments made for OPMS-destined kratom that was to be smuggled into the country by a notorious kratom importer and money launderer, Sebastian Guthery, through Guthery's own web of shell companies. Upon information and belief, HOBAN is a citizen of Colorado residing at 28051 Camel Heights Cir. Unit 420, Evergreen,

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CO.

11. Upon information and belief, at all times relevant to this action, Defendant MARTIAN SALES INC. (d/b/a O.P.M.S. and Choice Organics) ("MARTIAN"), is a foreign corporation incorporated in the State of Wyoming with its principal place of business in Cheyenne, Wyoming. MARTIAN is officially held out as REILLY's entity, as the ostensible owner and manufacturer of OPMS products. MARTIAN is in fact controlled by and conducting its kratom activities through the larger OLISTICA-OPMS kratom enterprise, which operates through a secretive web of affiliates, individuals, shell companies, alter egos, business names, assumed names, and/or trade names, including but not limited to GABBAY, PALAIO, JENNINGS, JOPEN, and all the other OLISTICA-OPMS Defendants identified in this litigation.

12. Defendant JOPEN, LLC (doing business as A1 Wholesale; A One Wholesale; Alphabet Wholesale, Inc.; Party Nuts; Party Nuts Distributions; Uziel; Innovo Activas; Konerb; Whole Herbs Company; Evolutionary Organics; Gwis; etc.) ("JOPEN") was and is a Texas limited liability company. Plaintiff alleges that affiliates, members, and managers for JOPEN's "OPMS" branded kratom activities include the individuals and members operating as the OLISTICA-OPMS enterprise, and especially GABBAY and PALAIO. GABBAY and JOPEN appear to be responsible for collecting and allocating substantially all the funding generated by the nationwide distribution of kratom brands through the OLISTICA-OPMS enterprise activities, including all revenues associated with OPMS. Publicly available tax records confirm that JOPEN is the primary bankroller of the kratom industry's leading trade and lobbying groups: American Kratom Association (AKA) and Center for Plant Science and

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Health (CPSH). JOPEN has consented to the jurisdiction of the Washington courts, and conducts its kratom activities as part of the larger OLISTICA-OPMS kratom enterprise, and its secretive web of affiliates, individuals, shell companies, alter egos, business names, assumed names, and/or trade names.

13. Defendant A1 WHOLESALE SUPPLY, LLC ("A1 WHOLESALE SUPPLY") was and is a limited liability company operating in Texas and Georgia. A1 WHOLESALE SUPPLY is a member of the OLISTICA-OPMS enterprise, and its evolving web of shell companies, and its name was selected to cause confusion and concealment for the members and activities of the OLISTICA-OPMS enterprise, including the other individuals and shell companies ostensibly doing business as "A1 WHOLESALE" or "A ONE WHOLESALE" and distributing OLISTICA kratom brands (including OPMS) throughout the United States.

14. Defendant GWIS, LLC (also doing business as A1 Wholesale) (hereafter "GWIS") was and is a Wyoming limited liability company. GWIS is a secretive member of the OLISTICA-OPMS enterprise, whose concealed owners and operators are also members of the OLISTICA-OPMS enterprise, responsible for and profiting from their management of the OLISTICA-OPMS product lines. In 2019, GWIS submitted an Application in Wyoming for the Trade Name "A1 WHOLESALE", which is identical to the primary Trade Name used by GWIS's alter ego shell companies, including JOPEN. GWIS was the managing member of CSA Managing LLC from 2021 to 2023.

15. Defendant CSA MANAGING, LLC ("CSA") was and is a Texas limited liability company. CSA is a member of the OLISTICA-OPMS enterprise, and CSA's evolving web of corporate lineage can be traced directly to the Texas wing of the enterprise, including

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GABBAY and JOPEN. CSA was the managing member for JOPEN from 2022 to 2024. CSA has served as the manager of "LB&L" in 2022; the manager of FCT55, LLC in 2023; and the manager of TELESCAPH INTER TEXAS LLC beginning in 2021.

16. Defendant HIVATAL, LLC ("HIVATAL") was and is a Wyoming limited liability company. HIVATAL is a member of the OLISTICA-OPMS enterprise, and HIVATAL's evolving web of corporate lineage can be traced directly to the Texas wing of the enterprise, including GABBAY and JOPEN. HIVATAL's alleged place of business is 1309 Coffeen Avenue STE 1200 Sheridan, WY 82801. In 2023, HIVATAL and MINISTERIUM LLC became managing members of CSA, KONERB, LB&L, and GWM Services Texas LLC. In 2024, HIVATAL became the member and director of GWM Services Texas LLC.

17. Defendant MINISTERIUM, LLC ("MINISTERIUM") was and is a Wyoming limited liability company. MINISTERIUM is a member of the OLISTICA-OPMS enterprise, and its evolving web of corporate lineage can be traced directly to the Texas wing of the enterprise, including GABBAY and JOPEN. It's alleged place of business is 1309 Coffeen Avenue STE 1200 Sheridan, WY 82801. In 2023, MINISTERIUM and HIVATAL became the managing members of CSA, KONERB, LB&L, and GWM Services Texas LLC. In 2024, MINISTERIUM became the member and director of LB&L.

18. Defendant OEWM, LLC (doing business as Onix, Outer Edge Web Marketing, and BNACT) ("OEWM") was and is a Texas-based limited liability company. OEWM is a member of the OLISTICA-OPMS enterprise, and its evolving web of shell companies, and its corporate lineage can be traced directly to ITAMAR, and his wife (and GABBAY's sister), Dana David, who are both identified as members on OEWM's Certificate of Formation. The

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Assumed Name Certificate filed on June 12, 2012, identifies the d/b/a "Outer Edge Web Marketing", with 5036 Silver Lake Drive, Plano TX as principal office. A later Assumed Name Certificate filed by Itamar David on July 12, 2018 assigned, "A ONE WHOLESALE" as the DBA. "A1 Wholesale" is a known and established dba of JOPEN, LLC. OEWM is known to provide services related to websites, marketing, and adverse event reporting (and non-reporting) for the OPMS and all other OLISTICA kratom brands. With litigation, OEWM's management has allegedly been transitioned to and through other shell companies, such as "Frigga, LLC".

19. Defendant PCKNW, LLC (doing business as FLOW-TECH, among other names) ("PCKNW"), was and is a Texas limited liability company with its operations in Texas. PCKNW is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and its corporate lineage can be traced directly to ITAMAR, and his wife (and GABBAY's sister), Dana David. Dana David and ITAMAR became managing members in 2015. In 2024, FRIGGA LLC became a manager of PCKNW. PCKNW's alleged place of business is 5960 WEST PARKER ROAD 278-274 Plano, TX 75093.

20. Defendant FLOW TECH, LLC ("FLOW TECH") was and is a Wyoming limited liability company. FLOW TECH is a member of the OLISTICA-OPMS enterprise, and its evolving web of shell companies. FLOW TECH's alleged place of business is 1309 Coffeen Avenue STE 1200, Sheridan, Wyoming 82801. FLOW TECH's name was intentionally chosen to create confusion and to conceal the identities and activities of others who are responsible for the packaging and distribution of OLISTICA kratom products (including OPMS), while using the same or similar "Flow Tech" dba's.

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21. Defendant CARYSTUS, LLC (dba SEOable Domains) ("CARYSTUS") was and is a Texas limited liability company. It's alleged place of business in 2024 was 5900 Balcones Drive Suite 100, Austin, TX. CARYSTUS is a member of the OLISTICA-OPMS enterprise, and its evolving web of shell companies, and its activities can be traced to the Texas wing of the enterprise, including GABBAY, JOPEN, and ITAMAR. The organizer is named as Aaron Michelsohn. As of 2024, the manager of CARYSTUS is ASHLEYBEND, LLC as of 2024.

22. Defendant ASHLEYBEND, LLC ("ASHLEYBEND") was and is a Texas limited liability company. It's alleged place of business is 5900 Balcones Drive, Suite 100, Austin, TX. The organizer was Aaron Michelsohn as of 2024. ASHELYBEND is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and its activities can be traced to the Texas wing of the enterprise, including GABBAY, JOPEN, and ITAMAR. As of 2024, the manager of ASHLEYBEND was SURGEONSLOOP, LLC.

23. Defendant SURGEONSLOOP, LLC ("SURGEONSLOOP") was and is a Texas limited liability company. The organizer was Aaron Michelsohn as of 2024. The manager was ASHLEYBEND in 2024. It's alleged place of business is 5900 Balcones Drive, Suite 100, Austin, TX. SURGEONSLOOP is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and its activities can be traced to the Texas wing of the enterprise, including GABBAY, JOPEN, and ITAMAR.

24. Defendant L.P. IND. Inc. (doing business as Jordan Process) ("LP"), was and is a Wyoming limited liability company with operations in Colorado. LP is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and its corporate management and lineage can be traced directly to PALAIO and JENNINGS. The dba "Jordan

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Process" was created by PALAIO in memory of a brother who tragically passed away. For many years, LP has operated its Jordan Process processing facilities out of Springfield, Colorado, as a key processing plant for OLISTICA-OPMS kratom brands, including and especially the OPMS branded products.

25. Defendant CC US Holdings, LLC (doing business as Centralized Services.) ("CENTRALIZED SERVICES"), was and is a Wyoming Limited Liability Company with kratom operations in Colorado and Georgia. CENTRALIZED SERVICES is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and its corporate management and lineage can be traced directly to PALAIO and JENNINGS. CENTRALIZED SERVICES has been held out as a centralized services provider, orchestrated funding and support for the various shell companies that were originally held out as members of the OLISTICA LIFE SCIENCES "GROUP", with JENNINGS serving as COO.

26. Defendant PACIFIC WEST HOLDINGS, LLC (d/b/a Cascade Naturals, or PWH) ("CASCADE") was and is a Wyoming limited liability company with its alleged principal place of business in Wyoming, and an actual place of business in Oregon. CASCADE is an alter ego of Cascade Naturals LLC and Pacific West Holdings LLC entities formed in Oregon. CASCADE is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and has assumed the name of a defunct Oregon company that had been doing business as Cascade Naturals, and has attempted to conceal its identity behind the Canadian company known as Cascades Sonoco. PNW owns or co-owns a trademark associated to the OLISTICA-OPMS enterprise, and is one of the many alter egos and shell companies involved in OLISTICA-OPMS enterprise.

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27. Defendant PNW Holdings, LLC ("PNW") was and is a Wyoming limited liability company with its alleged principal place of business in Wyoming. PNW is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies. PNW owns or co-owns a trademark associated to the OLISTICA-OPMS enterprise.

28. Defendant FMK Group, LLC ("FMK GROUP") was and is a Wyoming limited liability company with its alleged principal place of business in Wyoming. FMK is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and has been identified as an owner of OLISTICA affiliated trademark for Jordan Process, as the "sole member" of LP (Jordan Process), and as a holding company for OLISTICA affiliates CAG Holdings, LLC and RMH Holdings, LLC.

29. Defendant NP PHARMA HOLDINGS, LLC (doing business as Della Terra) ("NP PHARMA") was and is a Wyoming limited liability company with its principal place of business in Wyoming. NP PHARMA is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and was allegedly hired by JOHNSON FOODS to assist with scientific work for OLISTICA's desperate attempt to legalize its adulterated kratom operations through the NDIN submissions for the "NPI" products. In 2023, NP PHARMA took over from Precision Biologics as the primary contractor with Pinney Associates, Inc., for funding kratom research on behalf of PALAIO and the OLISTICA-OPMS enterprise, and is now the trademark owner of the NPI-001 kratom product that has been the subject of the desperate OLISTICA-OPMS NDIN process, which PINNEY describes as being funded by the "Peyton Palaio Family of Companies".

30. NP BIOTECH, LLC was and is a Wyoming limited liability company with its

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alleged principal place of business in Wyoming. NP BIOTECH is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and is an alleged biopharmaceutical and nutraceutical R&D firm researching the NPI-001 kratom leaf powder, and alleged transferor to JOHNSON FOODS, LLC of a worldwide right to exploit the kratom product lines that OLISTICA is desperately attempting to legalize through its failing NDIN processes.

31. Defendant JOHNSON FOODS, LLC (doing business as Vidaful and Mitravida) ("JOHNSON FOODS"), was and is a Wyoming limited liability company. JOHNSON FOODS is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies. JOHNSON FOODS is the owner of the Mitravida trademark, and is a central player in OLISTICA-OPMS's desperate and failed efforts to create a legalized kratom substitute for its adulterated kratom product lines. A JOHNSON FOOD's manager was tasked by OLISTICA-OPMS with hastily setting up a deceptive adverse event reporting system to address increased FDA scrutiny for deaths arising from OLISTICA's OPMS kratom products.

32. Defendant LOOBIE CORP. ("LOOBIE") was and is a Wyoming corporation, formed by COHEN and the OLISTICA-OPMS enterprise to take over ownership of JOHNSON FOODS, shortly after that entity was named in wrongful death litigation. LOOBIE is now the alleged owner of JOHNSON FOODS, with COHEN as the only disclosed President, Treasurer, and Secretary. The shareholders standing to gain the profits of the kratom derivatives that OLISTICA is desperately seeking to legalize through the JOHNSON FOODS shell company are now effectively concealed. LOOBIE's and COHEN's alleged office address is 30 N. Gould St, STE N, Sheridan, WY 82801.

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33. Defendant NUZA, LLC ("NUZA") (formerly known as Advanced Nutrition, LLC; doing business as Nuza Logistics) was and is a Wyoming limited liability company with an alleged principal place of business in Marietta, Georgia. NUZA is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies. NUZA was identified as a shell company actively involved in the "sourcing" and "logistics" of raw kratom for OPMS and other kratom brands.

34. Defendant CALIBRE MANUFACTURING, LLC ("CALIBRE") was and is a Wyoming limited liability company with its principal places of business identified as Wyoming and/or Georgia. CALIBRE is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies. CALIBRE is the alleged successor of the OPMS kratom contract manufacturing shell company (or companies) doing business as ADVANCED NUTRITION until 2022, and has been directly involved in the manufacture of OPMS and other OLISTICA brands of kratom.

35. Defendant ADVANCED NUTRITION, LLC ("ADVANCED NUTRITION") was and is a Wyoming limited liability company, with an alleged place of business at 1621 Central Ave Cheyenne, WY 82001. ADVANCED NUTRITION is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies, and is the alter ego of at least six other ADVANCED NUTRITION shell companies. ADVANCED NUTRITION was allegedly processing OPMS kratom at the direction of yet another OLISTICA shell company, LIV GROUP, INC., until 2022.

36. Defendant LIV GROUP, INC. ("LIV GROUP") was and is a business incorporated Wyoming, with alter ego entities in Georgia and North Carolina. The alleged

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place of business in Wyoming was 1621 Central Avenue, Cheyenne, and LIV GROUP operations have also reportedly occurred at 550 Sandy Plains Rd., Ste 225 #319, Marietta (until 2021), and 4030 Wake Forest Road STE 349, Raleigh, NC 27609. LIV GROUP is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies. MARTIAN claims its OPMS kratom manufacturing operations have been handled through contracts with LIV GROUP, JOPEN, and ADVANCED NUTRITION. Bulk kratom has been smuggled into the United States from Indonesia and then reportedly shipped to LIV GROUP in North Carolina, where it was processed into bulk OPMS kratom extracts until around 2021, when the facility allegedly burned.

37. Defendant LGI HOLDINGS, LLC (doing business as "Alphabet Wholesale") ("LGI") was and is a limited liability company with its principal place of business in Wyoming. It's alleged place of business in Wyoming is 30 N Gould St Suit 22533, Sheridan, WY 82801. LGI is a member of the OLISTICA-OPMS enterprise and its evolving web of shell companies. LGI, doing business as Alphabet Wholesale, operated as a raw products "broker" of kratom, arranging for the purchase of kratom for OPMS and other brands. In the *Cleanview* litigation, Cleanview filed evidence detailing how PALAIO, LGI, held themselves out as responsible for the OPMS and OLISTICA brands in a scheme to gain the information needed to take over Cleanview's role as the largest importer of Indonesian kratom into the United States.

38. Defendant EAZYFIT, LLC (d/b/a PORT 1000 SMOKE SHOP, PORT 1000 GLASS & VAPE SMOKE SHOP, PORT 1000) ("PORT 1000"), was and is a Washington based limited liability company doing business at 333 East 1st Street, #B, Port Angeles, Clallam County, Washington 98362; and with a principal place of business at 2207 E Sims Way Port

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Townsend, WA 98368. The member and manager responsible for PORT 1000's kratom activities is BASHEER SAED.

39. Defendant YAM 3 INC. (d/b/a SEQUIM SMOKE SHOP) ("SEQUIM SMOKE SHOP"), was and is a Washington based corporation with its principal place of business at 520 and/or 548 W Washington St., STE 104, Sequim, 98382, Clallam County, Washington. The governing members and managers responsible for YAM 3's kratom activities are JAMIL ALAWADA and AMALIA JABER.

40. Defendant MARY JANE HOUSE, INC. ("MARY JANE's"), was and is a Washington based corporation with its principal place of business at 212 NE 164th Ave, Ste. 19, Vancouver, 98684, Clark County, Washington. The member and manager responsible for MARY JANE's kratom activities is Brandon Brock. MARY JANE's distributes and sells kratom through an expanding set of retail locations in Washington and Oregon, with a corporate office and distribution warehouse operating out of Washougal, WA.

41. Defendant BABY JANE LLC (d/b/a/ Mary Jane's House of Glass III) ("BABY JANE"), was and is a Washington based limited liability company with its principal place of business at 7219 NE Highway 99, STE. 109, Vancouver, WA 98665, Clark County, Washington. BABY JANE is owned and managed by BRANDON BROCK and DARCY BYERS.

42. Defendant, MFB ENTERPRISES LLC, (d/b/a/ DISCOUNT TOBACCO AND BEVERAGES) ("DISCOUNT TOBACCO") is a Washington based limited liability company with a principal place of business at 6301 NE Hwy 99, Vancouver, 98665, Clark County,

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Washington. DISCOUNT TOBACCO is a member managed LLC and its sole governor is identified as MOHAMAD FAISAL BONIE.

43. Defendant AMERICAN KRATOM ASSOCIATION ("AKA") is a Virginia non-profit corporation with its principal place of business located at 13575 Heathcote Blvd. Ste, 320 Gainesville, VA 20155.

44. Defendants JOHN AND JANE DOES 1 THROUGH 10 are individuals and/or entities whose names and addresses are unknown, but who have directly and personally participated (separately or as alter egos, agents, joint venturers and/or predecessors) in the wrongful import, manufacture, distribution and/or sale of the kratom product, described more fully below.

III. JURISDICTION AND VENUE

1. This Court has original subject matter jurisdiction pursuant to the Constitution of the State of Washington, Article 4, Section 6. Jurisdiction is proper in the Superior Court of the State of Washington because the Plaintiff and Defendants PORT 1000, SEQUIM SMOKE SHOP, MARY JANE & BABY JANE, and DISCOUNT TOBACCO (hereafter collectively referred to as "RETAILER DEFENDANTS") are Washington residents, and the RETAILER DEFENDANTS sold kratom to JOSIAH BERG in Washington, contributing to his injuries and death in Washington.

2. This Court has personal jurisdiction over the non-resident Defendants pursuant to the 14th Amendment of the United States Constitution and Washington's long arm statute, RCW 4.28.185. All non-resident defendants (Defendants named in paragraphs 3 through 37, above), are collectively referred to as the "OLISTICA-OPMS Defendants". Each OLISTICA-

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OPMS Defendant is or has been a key member and/or controlled alter ego in the civil conspiracy and common enterprise to import, manufacture, market, misrepresent, and distribute a stream of adulterated kratom products (including OPMS) for human consumption throughout the nation, with a massive volume of such products (including OPMS) streaming into Washington. Through these concerted and wrongful activities each of the OLISTICA-OPMS Defendants have sufficient minimum contacts with the state, and substantially all of their revenue is produced through JOPEN's nationwide sale of kratom products. These Defendants' interstate kratom activities involve the transaction of business and the commission of tortious acts within Washington. These Defendants are subject to the jurisdiction of the Washington courts as a matter of fair play and substantial justice to Washington consumers who are and continue to be exposed to their injurious and wrongful activities.

3. Venue is proper in the Clark County Superior Court pursuant to RCW 4.12.020 and RCW 4.12.025; Clark County is where Defendant MARY JANE, BABY JANE, and DISCOUNT TOBACCO reside, transact business, and commit the torts upon which these claims are based.

IV. INTRODUCTION

4. Plaintiffs re-allege and incorporate by reference the paragraphs above as if fully stated herein.

5. Kratom is a complex and powerful substance that is toxic to multiple organ systems.

6. Across the nation, a growing number of death certificates have formally established deaths caused or contributed to by the "Toxic Effects of Mitragynine (Kratom)".

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7. Southeast Washington is already familiar with the tragic toll of Kratom.

8. On June 28, 2020, Patrick Coyne was discovered deceased in his Castle Rock home. The Cowlitz County Coroner confirmed he died of "Toxic Effects of Mitragynine (Kratom)". No other toxic substances were in his system. On July 18, 2023, a Cowlitz County jury issued a verdict of $2,500,000. The jury held the Kratom seller responsible under the Washington Product Liability Act (WPLA) and Consumer Protection Act (CPA). (Cowlitz County Cause No. 20-2-00874-08).

9. On April 5, 2022, another local life was lost to kratom. Longview resident Jordan McKibban collapsed in his home after mixing a drink of kratom. Among the products used by Mr. McKibban, was OPMS. The Cowlitz County Coroner again determined that the cause of death was "Toxic Effects of Mitragynine (Kratom)".

10. Now, the Washington family of Josiah Berg must seek justice for another tragic death caused by the "Toxic Effects of Mitragynine (Kratom)".

11. The Plaintiffs respectfully ask this Court to hold these Defendants accountable for the painful losses they have caused, and to issue a preliminary and permanent injunction barring these Defendants from the distribution and sale of Kratom in Washington.

V. STATEMENT OF FACTS

12. Plaintiffs re-allege and incorporate by reference the paragraphs above as if fully stated herein.

13. Kratom is the name given to botanical products derived from the leaves of the *Mitragyna Speciosa* tree, which grows in Southeast Asia.

14. While the nature and extent of Kratom's impact upon human physiology is a

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matter of ongoing development, medical and scientific research confirms that the powdered Kratom sold in the United States is far more dangerous than other natural products that are sold over the counter.

15. Kratom contains dozens of psychoactive compounds or alkaloids, many of which are not understood. The two most-studied alkaloids are mitragynine and 7-hydroxymitragynine. These two alkaloids bind to the same opioid brain receptors as morphine. Like opiates, these compounds can lead to analgesia (release of pain), euphoria, and sedation.

16. Kratom was not marketed as a dietary ingredient in the United States before October 15, 1994, and is therefore a "new dietary ingredient" under industry standards.

17. As a new dietary ingredient, Kratom is subject to the common sense rule of Safety First. Kratom must not be marketed or sold for human consumption without premarket verification that it is safe for that purpose. This premarket verification of safety must be filed as a "Notice of New Dietary Ingredient" (NDIN) with the FDA.

18. Until a premarket verification of safety has been filed and accepted for a kratom product, the substance is deemed "adulterated", and the importation and distribution of kratom for human consumption is strictly prohibited.

19. None of the Defendants have ever satisfied the basic industry standard for establishing that Kratom is safe for human consumption before marketing it.

20. For several years the OLISTICA-OPMS enterprise has been secretly funneling millions of dollars into its JOHNSON FOODS shell company, in an attempt to legitimize its illegal trade in the kratom products.

21. On October 21, 2022, JOHNSON FOODS, submitted its "New Dietary Ingredient

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Notification for NPI-001, a Dried Leaf Powder" to the FDA.

22. When this Notification was submitted, JOHNSON FOODS (and the affiliated WHOLE HERBS DEFENDANTS) knew that no such Notification had previously satisfied the premarket safety standards required to lawfully distribute and sell kratom in the United States.

23. Like premarket notifications before it, the JOHNSON FOODS NDIN was deemed unacceptable by the FDA and insufficient to satisfy the important standards of premarket safety necessary for the safe marketing, distribution and sale of over-the-counter kratom.

24. The JOHNSON FOODS' NDIN was insufficient under the industry standards for the safe marketing, distribution or sale of botanical ingredients and supplements.

25. A growing body of independent scientific and medical research and literature confirms that no form of psychoactive kratom will ever satisfy the basic standard of premarket safety when it comes to over-the-counter sale of kratom for human consumption.

26. Rather than safe, Kratom is known to cause a wide range of adverse events, including: nervousness, agitation, aggression, sleeplessness, hallucinations, delusions, tremors, loss of libido, constipation, skin hyperpigmentation, nausea, vomiting, addiction, severe withdrawal, heart arrhythmias, respiratory depression, seizures, drug-drug interactions, overdose, and death.[1]

27. According to recent research, Kratom is 63 times more deadly than other natural products that are sold to American consumers.[2]

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[1] *See, e.g.,* Xiaotong Li, et al., *An evaluation of adverse drug reactions and outcomes attributed to kratom in the US Food and Drug Administration Adverse Event Reporting System from January 2004 through September 2021* (Clinical and Translational Science, 00:1-10; 2023); Mori J. Krantz, et al, *Ventricular Arrhythmias Associated With Over-the-Counter and Recreational Opioids* (Journal of American College of Cardiology, Vol. 81, No. 23, 2023); Donna Papsun, *Forensic Implications of Kratom: Kratom Toxicity, Correlation with Mitragynine Concentrations, and Polypharmacy* (Current Addiction Reports; published online May 19, 2023)

[2] Xiaotong Li, et al., *An evaluation of adverse drug reactions and outcomes attributed to kratom in the US Food*

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28. Thus, it is not scientifically possible for Kratom sellers to verify that their products are safe for human consumption when sold over the counter like coffee, tea, or other natural products.

29. Unable to verify kratom's safety, the Kratom industry has instead been built upon clandestine and fraudulent business activities, including the unlawful importation of Kratom as "plant food", "incense", "cosmetic" powders, fertilizer and other legal items.[3]

30. For years, Federal agencies (and courts) have attempted to protect the public by seizing Kratom and taking other civil and criminal actions against Kratom importers, distributors, and those who illegally sell Kratom as an unapproved replacement for significant medical conditions such as chronic pain, anxiety, addiction, or withdrawal.[4]

31. In addition to enforcement actions at the national level, an increasing number of states and cities have passed laws making Kratom illegal at the local level.

32. Despite these efforts, the industry is successfully smuggling billions of dollars worth of Kratom across the border. Once it is past customs and border officials, the Kratom is quickly channeled into chains of distribution managed by individuals and entities generating huge profits from millions of consumers. Despite the serious risks of kratom use, profit-seeking companies continue to market kratom products with unproven and deceptive claims about its safety and ability to cure, treat or prevent medical conditions and diseases. The FDA's examples

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and Drug Administration Adverse Event Reporting System from January 2004 through September 2021 (Clinical and Translational Science, 00:1-10; 2023) (incorporated by reference).

[3] *See* FDA Import Alert # 54-15 (https://www.accessdata.fda.gov/cms_ia/importalert_1137.html) (last accessed October 23, 2023).

[4] *See* Seizures and Injunctions – Health Fraud (https://www.fda.gov/consumers/health-fraud-scams/seizures-and-injunctions-health-fraud) (last accessed October 23, 2023); FDA Statement, Advisory about deadly risks associated with kratom (https://www.fda.gov/news-events/press-announcements/statement-fda-commissioner-scott-gottlieb-md-fda-advisory-about-deadly-risks-associated-kratom) (last accessed October 23, 2023);

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of illegal claims include statements such as: "many people use kratom to overcome opiate addiction," and kratom is frequently used "as a natural alternative" to treat various health conditions, replacing opiate prescriptions.[5]

33. Each Defendant in this case has profited from unfair and deceptive business practices by promoting, distributing and/or selling dangerous Kratom products to Washington residents.

34. OPMS branded kratom is imported, packaged, distributed, and sold through the complex web of companies referred to herein as the OLISTICA-OPMS enterprise. A key subset of the evolving OLISTICA-OPMS members are named herein as the OLISTICA-OPMS Defendants.

35. The OLISTICA-OPMS enterprise may be the largest importer, manufacturer, and distributor of kratom in the United States, including Washington.

36. Through its JOPEN--A1 WHOLESALE distributor, the OLISTICA-OPMS enterprise distributes the following national kratom brands into Washington: OPMS, Whole Herbs, Remarkable Herbs, King Kratom, Chief Kratom, Kratom Aid, Kratom Caps, XXX, and Hush kratom.

37. Because the OPMS kratom is adulterated and deadly, members of the OLISTICA OPMS enterprise conceal their identities, assets, and wrongful activities behind mysterious and evolving shell companies, d/b/a's, and misleading websites and labels.

38. Nonetheless, the identities and evasive activities of those responsible for OPMS

[5] *See* FDA News Release, FDA issues warnings to companies selling illegal, unapproved kratom drug products (https://www.fda.gov/news-events/press-announcements/fda-issues-warnings-companies-selling-illegal-unapproved-kratom-drug-products-marketed-opioid) (last accessed October 23, 2023).

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have been increasingly exposed through FDA enforcement actions, investigative journalism, and litigation arising from the wake of death and addiction caused by their products.[6]

39. PALAIO and GABBAY are key players in the OLISTICA-OPMS operations.

40. PALAIO, REILLY, and GABBAY were implicated by criminal investigators and others for the manufacture, distribution and/or sale of deadly synthetics known as "Spice".[7]

41. In December, 2010, GABBAY flew to Georgia where he joined PALAIO at a conference attended by national distributors of synthetic products like Spice.

42. The conference was held at the Embassy Suites in Roswell, Georgia. After his flight, GABBAY met with PALAIO, and they arrived at the conference together as partners.

43. The conference agenda included the funding of attorneys to help evade legal accountability and Federal disruption of the trade in illicit substances.

44. Since their 2010 meeting, PALAIO and GABBAY have coordinated in the growth of the OLISTICA-OPMS enterprise, and its reliance on adulterated kratom as a major source of revenue. They have enlisted law firms to perpetually generate and maintain shell companies with no legitimate business purpose other than concealment of identities, assets, and operations. The companies are frequently formed in Wyoming, where ownership and management can be concealed.

45. REILLY is the PRESIDENT of MARTIAN, and is the individual responsible for creating the "OPMS" brand of kratom.

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[6] *See, e.g.,* Hannah Critchfield, *A major US kratom brand relies on a maze of companies. Here's the list*, TAMPA BAY TIMES (Dec. 19, 2023) (https://www.tampabay.com/investigations/2023/12/19/major-us-kratom-brand-relies-maze-companies-heres-list/); Hannah Critchfield, Helen Freund and Langston Taylor, *DEADLY DOSE PART 3: Kratom's path across the US is marked by deception and secrets,* TAMPA BAY TIMES (December 17, 2023 (https://project.tampabay.com/investigations/deadly-dose/kratom-industry-opms-supply-chain-indonesia-florida/).

[7] Critchfield, *DEADLY DOSE PART 3, supra* note 6.

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46. REILLY was pleased with the name because it sounded like "Opium".

47. OPMS was the first major brand of kratom in the United States, and has generated massive profits for PALAIO, GABBAY, REILLY, and other OLISTICA-OPMS defendants.

48. Eventually JENNINGS began taking on managerial roles (typically as Chief Operations Officer) for OLISTICA and its various shell companies.

49. HOBAN assumed the role as OLISTICA's Chief Executive Officer, and contributed his personal experience and connections in the strategic development of cannabis business enterprises to the expansion of OLISTICA's kratom operations. HOBAN fully understood the adulterated nature of OLISTICA's kratom business when he became CEO.

50. HOBAN also coordinated the resources of his legal associates in perpetuating OLISTICA's operations, and defending OLISTICA members from litigation arising from wrongful activities.

51. GABBAY, PALAIO, REILLY, JENNINGS, HOBAN, and others have worked through OLISTICA-OPMS enterprise on the importation, manufacturing, marketing, testing, distribution, and sale of kratom products to consumers, contributing directly to an expanding number of serious adverse events, including deaths such as that visited upon Josiah Berg.

52. The OLISTICA-OPMS enterprise has generated massive profits from its kratom operations, and diverted millions as the majority funder of alleged nonprofits such as the American Kratom Association (AKA) and the Center for Plant Science and Health (CPSH), both of which serve as agents, lobbyists, marketers, and mouthpieces for OLISTICA-OPMS business objectives.

53. The OLISTICA-OPMS DEFENDANTS have not procured liability insurance to

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cover the anticipated liabilities associated with wrongful death or other injury caused by their dangerous kratom operations; and are otherwise undercapitalized and manipulated to deprive consumers (and their surviving family members) from recourse for damage caused by the kratom trade.

54. The OLISTICA-OPMS Defendants continue to successfully smuggle vast quantities worth of kratom across the U.S. border. Once it gets past customs and border officials, the kratom is quickly channeled into chains of distribution managed by individuals and entities, including Defendants, generating huge profits from millions of consumers. Despite the serious risks of kratom use, profit-seeking companies continue to market kratom products with unproven and deceptive claims about its safety and ability to cure, treat, or prevent medical conditions.

55. Faced with increasing scrutiny and litigation, the OLISTICA-OPMS Defendants have ramped up their efforts to rely upon and generate an evolving web of undercapitalized alter ego shell entities and fraudulent business names to avoid responsibility for deaths and harms caused by their kratom products. A set of law firms have been instrumental in perpetuating these efforts.

56. For instance, "ONIX" was originally identified by GABBAY's attorneys as an entity responsible for adverse event reporting on the OPMS kratom products.

57. Later, as attorneys for estates continued their search for adverse event documents, ONIX was discovered to be a d/b/a for OEWM – an entity operated by GABBAY's brother-in-law, ITAMAR DAVID. In a deposition, ITAMAR represented that GABBAY only recently directed him to set up an adverse event reporting portal for consumers, which directed adverse event reports to yet another entity, identified as "PRATT".

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58. When an estate sought to subpoena PRATT's records, GABBAY's attorney Gwendolyn Peyton later insisted that PRATT was a Texas company. PRATT was not a Texas company.

59. Later, when served with its subpoena, PRATT produced an extraordinary contract for adverse event reporting that was allegedly drafted on the request of JOHNSON FOODS.

60. The adverse event reporting contract related to kratom products allegedly produced by the "CHORG, REMAR, WHOLE KON, USK CO, CHIKA, and KG COMPANY's PARTNERSHIP" (hereafter PARTNERSHIP).

61. This PARTNERSHIP is fictitious.

62. This PARTNERSHIP is one of the latest permutations of the continuously evolving OLISTICA-OPMS shell game.

63. In the signature block for the PARTNERSHIP, the "CLIENT" is identified as the Kilpatrick Townsend & Stockton Company. The contract is signed by GWENDOLYN PEYTON, an attorney for numerous OLISTICA-OPMS Defendants. PRATT explained that PEYTON is the sole recipient and the apparently "responsible party" of adverse event reports arising from OPMS products and withheld from litigants pursuing wrongful death cases arising from OPMS products. PRATT testifies that he is the client of PEYTON, and PEYTON is the client of PRATT.

64. Multiple reports of serious adverse events – including deaths -- have been submitted through this alleged OLISTICA-OPMS adverse event reporting system. Yet, PRATT reports that he has not seen them.

65. The OLISTICA-OPMS enterprise, through the system set up by GABBAY,

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JOPEN, ITAMAR, OEWM, JOHNSON FOODS, and PEYTON, is actively concealing these serious adverse event reports of death from PRATT and the FDA.

66. The effective review and response to adverse event reports (including reports of death) are critical aspects of product safety and post-sale failures to warn.

67. The failure to respond to and report on kratom-related deaths represents a fraudulent defect in the design, marketing, distribution and sale of defendants' OPMS products. The intentionally designed failure of the adverse event reporting system for OPMS also contributes directly to the ongoing failure to warn consumers, like Josiah Berg, that the OPMS products are in fact adulterated, deadly, not fit for consumption, and should be confiscated and destroyed instead of placed on the shelf.

68. On July 26, 2024, the FDA published a warning to consumers not to use deadly OPMS products, reiterating the adulterated nature of the kratom smuggled into the United States. See Attachment A (last accessed August 1, 2025 at: https://www.fda.gov/food/alerts-advisories-safety-information/fda-warns-consumers-not-use-optimized-plant-mediated-solutions-opms-black-liquid-kratom).

69. This FDA Warning on the deadly nature of OPMS kratom was prompted by an inexplicable failure of the OLISTICA-OPMS defendants (and attorneys) to respond to an adverse event report arising from another OPMS-caused death.

70. It was not until after the FDA Warning, that the FDA began to engage with PEYTON, as a spokesperson for the OLISTICA-OPMS regime. What followed was a shocking email exchange in which the FDA highlighted the deceptive nature of those responsible for the OPMS product line. If Plaintiff's death were not enough, the scathing email exchange between

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the FDA and the OLISTICA-OPMS representatives provides emphasis to the need to protect Washington consumers from the deadly kratom products. See Attachment B.

71. All Defendants have profited from unfair and deceptive business practices by importing, manufacturing, promoting, distributing, and/or selling dangerous kratom products to Washington residents, including Josiah Berg.

72. PORT 1000 is a local retail store in Port Townsend, Washington. PORT 1000 purchases and sells a variety of kratom products to Washington consumers in Jefferson County and sold kratom products that contributed to the Plaintiff's dependency and death from kratom.

73. SEQUIM SMOKE SHOP is a local retail store in Sequim, Washington. SEQUIM purchases and sells a variety of kratom products to Washington consumers in Clallam County, and sold kratom products that contributed to the Plaintiff's dependency and death from kratom.

74. MARY JANE'S and BABY JANE'S is a local retailer in Vancouver, Washington. MARY JANE'S and BABY JANE'S are responsible for the purchase and sale of a variety of kratom products to Washington consumers in Clark County, and sold kratom products that contributed to the Plaintiff's dependency and death from kratom.

75. DISCOUNT TOBACCO is a local retail store in Vancouver, Washington. DISCOUNT TOBACCO purchases and sells a variety of kratom products to Washington consumers in Clark County, and sold kratom products that contributed to the Plaintiff's dependency and death from kratom.

76. Among their lines of branded kratom products, the RETAILER DEFENDANTS sold kratom products distributed by the OLISTICA-OPMS DEFENDANTS.

77. The RETAILER DEFENDANTS, like the other Defendants, represented various

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medicinal benefits from the consumption of the kratom products sold to Josiah and/or failed to inform Josiah of any risks associated to kratom consumption despite direct or constructive knowledge of such risks.

78. On information and belief, the RETAILER DEFENDANTS are likewise undercapitalized entities who have not procured liability insurance to cover the risk of wrongful death or other injury caused by their dangerous kratom operations; and are otherwise failing to retain reasonable capital reserves necessary to cover the business risks associated with the irresponsible sale of products that are known to be associated with addiction and death.

79. Josiah Berg is one of many Washington residents who was exposed to and relied upon the OPMS's pervasive unfair and deceptive messaging about over-the-counter kratom.

80. Josiah Berg resided in Vancouver, Clark County, WA. He was beloved by his family and friends as a caring son and loving sibling.

81. At 20-years old, Josiah was young, and physically active. He had a passion for playing guitar and wanted to be a musical therapist.

82. Josiah was also vulnerable. He had trouble sleeping and would sometimes be up until the early morning hours. He sought the aid of medical professionals to assist him.

83. In his search for a natural source of energy, Josiah learned about and relied on the pervasive statements, misrepresentations, and omissions concerning kratom that were generated by the Defendants in this case.

84. Josiah relied upon the Defendants' express and implied warranties, including the basic warranty that the Kratom products were lawfully imported and distributed, merchantable, and reasonably fit for their intended purposes, including the purpose of human consumption, and

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for a natural energy source.

85. Josiah learned that the RETAILER DEFENDANTS were selling Kratom products nearby. Josiah learned that these products were being sold as safe, legal, and all-natural alternatives to energy drinks and other prescriptions.

86. Josiah purchased and consumed the OPMS kratom products.

87. These kratom products all contributed to Josiah's gradually increasing tolerance, dependency, and daily use of the toxic kratom products.

88. On October 27, 2023, Josiah Berg's kratom use came to an end. Josiah had just finished painting a family member's house around 6pm on October 26th when he went into his room for the night. The next day his family members became concerned when he did not come out of his room and decided to check on him, where they found him deceased in his bedroom with multiple OPMS kratom products near his body.

89. The family called 911 and the Sheriff responded to the scene.

90. Josiah's body was transferred to the Clallam County Coroner's Office where an autopsy was performed by Dr. Megan Quinn.

91. A postmortem expanded forensic toxicology test was requested from NMS Labs.

92. On December 21, 2023, NMS Labs issued its Toxicology Report. The Toxicology Report showed a positive finding for Mitragynine (the main Kratom alkaloid), in the amount of 2,300 ng/mL.

93. A copy of the NMS Labs report was delivered to Dr. Quinn to aid in the completion of the autopsy report and issuance of the death certificate.

94. Based on the report, and with the guidance of forensic pathologist Dr. Justin

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Brower, the Clallam County Coroner issued its case report and cause of death: Josiah Berg died from the "Mixed mitragynine (kratom) and diphenhydramine toxicity."

V. CAUSES OF ACTION AND DAMAGES

95. Plaintiffs re-allege and incorporate by reference the paragraphs above as if fully stated herein.

96. JOSIAH BERG suffered an untimely death as a direct and proximate result of the products that were imported, manufactured, marketed, distributed and/or sold by each of the Defendants.

97. The Defendants in this case all failed to warn JOSIAH BERG that Kratom is: (a) fraudulently imported; (b) wrongfully distributed, marketed and sold for human consumption without the required premarket verification of safety; (c) causing dependence, addiction, and withdrawal in regular users; (d) found to be 63 times more deadly than other natural products; and (e) found to be a contributor or cause of numerous overdoses and deaths.

98. Each and every Defendant wrongfully contributed to JOSIAH BERG's escalating cycle of Kratom tolerance, dependance and use, which led predictably to the toxic levels that ultimately caused his death.

99. The ESTATE OF JOSIAH BERG and its beneficiaries have incurred and will continue to incur enormous general and special damages in an amount to be determined by the jury at the close of trial.

100. All kratom imported by a Defendant in this case was manufactured by persons who are not subject to service of process or the jurisdiction of this Court.

101. The OPMS and RETAILER DEFENDANTS were sellers and/or manufacturers

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of kratom products under Chapter 7.72 RCW, and are jointly and severally liable for the damages caused to the ESTATE OF JOSIAH BERG and its beneficiaries.

COUNT ONE— FAILURE TO WARN –
OLISTICA-OPMS AND RETAILER DEFENDANTS
[Wash. Rev. Code Section 7.72.010(4) and .030(1)]

102. Plaintiff re-alleges and incorporates by reference the paragraphs above as if fully stated herein.

103. Each named Defendant was involved in the promotion, distribution, and sale of the Kratom product that killed JOSIAH BERG.

104. The Defendants' Kratom products were continuously sold without adequate warnings or instructions regarding the serious health risks of the product, including the risks of abuse, dependence, addiction, overdose, and death.

105. An ordinary consumer would reasonably conclude that Defendants' kratom products are not reasonably safe when sold without warnings or instructions about the serious adverse health risks, including the risk of overdose and death suffered by JOSIAH BERG.

106. In addition, at the time of manufacturing, the likelihood that Defendants' kratom products would cause and contribute to the serious harms inflicted on JOSIAH BERG (including increasing toxicity and death) rendered Defendants' Kratom warnings and instructions completely inadequate, even though warnings about the poisonous nature of kratom and the risk of those serious harms could easily have been provided.

107. At the times and on the occasions in question, JOSIAH BERG was using the Defendants' Kratom products for the very purposes intended and promoted by the Defendants, including: (a) human consumption of a natural, merchantable over-the-counter product; (b) relief

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from pain; and (c) relaxation and relief from anxiety.

108. Without proper warnings and instructions, the products were unreasonably dangerous, unfit for their intended use, and defective.

109. If the products had been sold with appropriate warnings and instructions regarding its poisonous nature and the health risks, including but not limited to adequate disclosure of the major risks of overdose and death, then JOSIAH BERG's overdose and death from the product would not have occurred.

110. The Defendants are liable for all damages caused by their failures to provide adequate warnings and instructions that would have prevented the death caused by their defective and unreasonably dangerous nature of their product. The manufacturer Defendants are subject to strict liability for these damages.

111. The Defendants also had a continuing, post-sale duty to warn regarding the unreasonable risk of harm associated with the product after the product had been distributed to JOSIAH BERG.

112. After JOSIAH BERG began purchasing and ingesting the products, Defendants knew or should have known of the increasing scientific and medical information confirming the serious risks and dangers associated with their adulterated product, including the risk of death from a powerful substance that was never fit for medically unsupervised use.

113. After JOSIAH BERG began purchasing and ingesting the product, Defendants all breached their duty to issue adequate post-sale instructions and warnings to reduce and prevent the foreseeable risk of harm and death to JOSIAH BERG from the products.

114. All Defendants failed to exercise reasonable care to provide adequate post-sale

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instructions and warnings to JOSIAH BERG and other Washington residents about the serious health risks and dangers of the product, including the risk and danger of death.

115. As a direct and proximate result of the lack of reasonable and adequate post-sale instructions or warnings regarding the defects in Kratom, Plaintiffs suffered the injuries described above.

COUNT TWO – DESIGN AND MANUFACTURING DEFECT
OLISTICA-OPMS AND RETAILER DEFENDANTS
[Wash. Rev. Code Section 7.72.010(2), (4), and .030]

116. Plaintiff re-alleges and incorporates by reference the paragraphs above as if fully stated herein.

117. At the time Defendants imported or manufactured the products sold to and consumed by JOSIAH BERG, the products were not reasonably safe as designed.

118. The Kratom products were and are far more dangerous than the ordinary consumer would reasonably expect, considering relevant factors, such as the product's intrinsic nature, relative cost, severity of potential harm (including death), the industry standards governing natural products, and the cost and feasibility of minimizing such risk.

119. The Defendants are unable to adequately assure that the manufacturing processes for their Kratom products can achieve a product that is reasonably safe for human consumption.

120. The product sold to JOSIAH BERG was unreasonably dangerous beyond the expectations of the ordinary consumer and was unfit for its intended use.

121. At the time and on the occasions in question, JOSIAH BERG was using the Defendants' products for the foreseeable purposes that Defendants knew of and intended, and was in this respect defective, unsafe and unreasonably dangerous.

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122. As a direct and proximate result of the defects in the Defendants products, Plaintiffs suffered the injuries as described above.

COUNT THREE – BREACH OF WARRANTY
OLISTICA-OPMS AND RETAILER DEFENDANTS
[Wash. Rev. Code Section 7.72.010(4), .030(2)(b) and .040(1)]

123. Plaintiff re-alleges and incorporate by reference the paragraphs above as if fully stated herein.

124. Defendants all expressly and impliedly warranted that their products were reasonably fit for their intended purposes of human consumption, improving health and well-being, and as a safe and effective product for medical purposes such as pain relief and anxiety.

125. Defendants issued these warranties to develop and promote the sale of their products through their respective chains of distribution and retailing, ultimately resulting in the sales to JOSIAH BERG.

126. As a Washington resident, JOSIAH BERG was a reasonably foreseeable end user of the product, and was a third-party beneficiary of all warranties made and passed along by the Defendants through the chain of distribution to the end users.

127. The Defendants' warranties regarding product related to material facts regarding the safety and efficacy of Kratom.

128. The Defendants' warranties, including the warranties that the products were merchantable and lawfully on the shelf, safe, and would not kill you, were part of the basis of the bargain for JOSIAH BERG's purchases of the products.

129. The Defendants' warranties were untrue; the Defendants' products did not conform to the representations that were made.

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130. As a direct and proximate result of the breach of the Defendants' warranties regarding the products, Plaintiff suffered the injuries and death described above.

COUNT FOUR – MISREPRESENTATION
OLISTICA-OPMS AND RETAILER DEFENDANTS
[Wash. Rev. Code Section 7.72.010(4) and .040(1)]

131. Plaintiff re-alleges and incorporates by reference the paragraphs above as if fully stated herein.

132. As stated above, Defendants made misrepresentations of material facts about the Kratom product and intentionally concealed information about the product from Plaintiffs during the time JOSIAH BERG bought and used the product.

133. Defendants possessed superior knowledge about the lack of clinical testing and safety of its products, including the lack of reliable support for representations about the asserted clinical and medicinal safety of the product, and the absence of deaths caused by kratom products.

134. Defendants failed in their duty to disclose known material facts to Plaintiffs regarding their products, including but not limited to:

a. The health risks (including deaths) associated with regular consumption of kratom products.
b. Information regarding adverse events associated with kratom products that have been concealed and/or destroyed.
c. The risk of addiction, overdose, and death associated with kratom products.
d. The false representations and misdirection to consumers that a California distributor named CHOICE ORGANICS is available and qualified to respond to any reports of adverse events, such as death, that would underscore the need for removal of the OPMS products from the shelf.
e. Concealment of scientific research and findings which confirm that kratom is far more dangerous and addictive than Defendants have acknowledged.

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135. Additional misrepresentations and concealment included, but were not limited to:

a. Falsely representing that the product will not cause death.
b. Falsely representing that the product is safe and appropriate for regular human consumption.
c. Falsely representing that every batch of Kratom product was lab tested for quality and purity.
d. Falsely representing that the product is never adulterated.
e. Falsely representing that the product has no serious adverse health effects.

136. The foregoing representations and omissions were material and were made with the intent to persuade and induce JOSIAH BERG to choose and regularly use the product.

137. Defendants made the above representations or omissions knowing the misrepresentations were false or were ignorant of the truth of the assertions.

138. The above representations and omissions are reflected in Defendants system for marketing its product. Together, all these defendants unlawfully promoted and held out for sale the unreasonably dangerous product for medicinal purposes to Washington Residents.

139. Defendants made the above misrepresentations or omissions with the intention and knowledge that Washington consumers would select the product for regular consumption for the purposes identified in their marketing.

140. JOSIAH BERG relied upon and was induced to act in reliance on these Defendants' misrepresentations and omissions when he in fact purchased the product to achieve energy from a natural source.

141. As a direct and proximate result of the breach of the warranties regarding the product, Plaintiff suffered injuries as described above.

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COUNT FIVE – NEGLIGENCE
OLISTICA-OPMS AND RETAILER DEFENDANTS
[Wash. Rev. Code Section 7.72.010(4) and .040(1)]

142. Plaintiff re-alleges and incorporates by reference the paragraphs above as if fully stated herein.

143. The Defendants were all negligent and careless in the import, design, manufacturing, testing, marketing, distribution, and/or sale of Kratom products.

144. The Defendants, as product sellers, were negligent and careless in their distribution, promotion and sale of Defendants' Kratom products.

145. The Defendants failed to follow the industry standard of safety first, which exists for the protection of consumers from New Dietary Ingredients whose safety and efficacy has not been established.

146. The Defendants failed to follow the industry standards which prohibit the use of medical claims in the marketing, distribution, and sale of botanical ingredients for human consumption.

147. The Defendants failed to follow the industry standards which require the disclosure of material facts necessary to prevent consumers from being misled about the relative safety or danger of the products that are proposed for their consumption.

148. The Defendants knew or should have known that the improperly imported Kratom products were unreasonably dangerous for human consumption and especially for medical uses including but not limited to the alleviation of chronic pain.

149. The Defendants knew that they were unlawfully selling the products to customers for medical purposes, even though the unreasonable health risks of such use were not properly

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understood, identified, disclosed, approved or regulated.

150. Defendants' failures to discharge their duties were a direct and proximate cause of Plaintiff's injuries as described above.

COUNT SIX – UNFAIR TRADE PRACTICES
OLISTICA-OPMS AND RETAILER DEFENDANTS
[Wash. Rev. Code Section 19.86.010]

151. Plaintiff re-alleges and incorporates by reference the paragraphs above as if fully stated herein.

152. The acts by Defendants in this cause of action include, but are not limited to, the following deceptive and unfair acts:

a. Representing that kratom is merchantable and safe for human consumption as a natural over-the-counter product.
b. Failing to disclose adequate information about the safety and efficacy of the Kratom product, either before or after Plaintiff's purchase.
c. Failing to provide adequate warnings, labels or instructions about the product's dangerous propensities.
d. Knowingly selling the product for human consumption and the alleviation of chronic pain, despite sham reseller conditions that the product should only be sold for "research", "incense", "ornamental" or similar purposes that do not involve human consumption.
e. Representing that the product is appropriately used for medicinal benefits.
f. Representing that the product possesses many therapeutic effects.

153. Such acts occurred in the course of trade or commerce in the State of Washington.

154. Such acts affected, and still affect, the public interest of all the citizens of the State of Washington.

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155. Such acts caused injury to JOSIAH BERG in his property and business, by forcing him to incur substantial expenditures on a product that instead of being safe and effective, was the cause of his death.

COUNT SEVEN –INFORMATION NEGLIGENTLY SUPPLIED FOR THE GUIDANCE OF OTHERS – AKA and OLISTICA-OPMS DEFENDANTS [Restatement of Torts, Section 552]

156. Plaintiffs re-allege and incorporate by reference the paragraphs above as if fully stated herein.

157. Working as an agent and mouthpiece of OLISTICA-OPMS, the AKA supplied information for the guidance of Washington consumers, including decedent, JOSIAH BERG, in their business transactions that were false.

158. The AKA knew or should have known that the information was supplied to guide Washington consumers, including the decedent, in their business transactions, namely purchase of kratom products.

159. The AKA was negligent in obtaining or communicating the false information, including but not limited to:

a. Claiming kratom was safe, particularly if purchased by a GMP certified vendor.

b. Actively campaigning against warnings, enforcement action, and medical literature from trusted actors including the FDA and medical journals that call Kratom's safety and efficacy into question.

c. Actively campaigning to legitimize kratom through passage of the so-called Kratom Consumer Protection Act.

d. Claiming that kratom was not adulterated even as they worked with OLISTICA-OPMS on maintaining and developing channels for illegal smuggling of kratom into the United States

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160. JOSIAH BERG relied on said false information, and such reliance was reasonable.

161. The false information proximately caused the death of JOSIAH BERG.

162. Further, the AKA had a duty to disclose to JOSIAH BERG the following information including but not limited to:

a. The adulterated nature of kratom products for which no NDIN had ever been submitted.

b. The risks associated to use of kratom, including addiction and overdose.

c. The truth that GMP certification does not amount to safety.

d. The truth that even GMP certified labeling is both non-compliant with FDA requirements but is wholly deficient for provision of a safe product.

163. The AKA did not disclose this information to JOSIAH BERG.

164. The AKA was negligent in failing to disclose this information.

165. Such disclosure would have caused JOSIAH BERG (and those who cared for him) to act differently, and JOSIAH BERG was damaged by the failure to disclose such information.

COUNT EIGHT –NEGLIGENCE – AKA and OLISTICA-OPMS DEFENDANTS [Restatement of Torts Section 324A]

166. Plaintiffs re-allege and incorporate by reference the paragraphs above as if fully stated herein.

167. The AKA and OLISTICA-OPMS DEFENDANTS were negligent and careless in their actions described herein, including their coordination and orchestration on a campaign of misrepresentations made to the public and consumers regarding kratom's safety for human consumption; attacks on legitimate science examining Kratom's safety profile; attacks on kratom regulation including actions taken by the FDA; guidance and advice provided to kratom

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manufacturers, distributors, and sellers; and the administration of their GMP certification program.

168. The AKA and OLISTICA-OPMS DEFENDANTS knew or should have known that improperly imported Kratom products were unreasonably dangerous for human consumption and especially for medical uses including but not limited to the alleviation of chronic pain.

169. The AKA and OPMS DEFENDANTS knew or should have known that their campaign to foster a market and create a sense of safety surrounding the use of kratom was negligent insofar as the activities promote the unlawful sale of kratom products to customers for medical purposes, even though the unreasonable health risks of such use were not properly understood, identified, disclosed, approved, or regulated.

170. The AKA and OLISTICA-OPMS DEFENDANTS assumed a duty in relation to kratom sales because they exert significant control over the kratom industry and other members of the trade association through administration of the GMP certification program, its funding structure, and its predominance over the public discourse over kratom importation, manufacture, sale, and use. The AKA and OPMS DEFENDANTS have also assumed a duty because of their denial of known risks of kratom; their active role in advocating for kratom's importation, manufacture, and sale; and their active role in creating a market in which kratom is falsely viewed as safe by many consumers.

171. The AKA's failures to discharge their duties were a direct and proximate cause of Plaintiffs' injuries as described above.

COUNT NINE – CIVIL CONSPIRACY
OLISTICA-OPMS and AKA DEFENDANTS
[5 Restatement of Torts (Second) Section 876]

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172. Plaintiff re-alleges and incorporates by reference the paragraphs above as if fully stated herein.

173. The OLISTICA-OPMS and AKA Defendants have combined to accomplish an unlawful purpose, including the importation, marketing, distribution, and sale of kratom within the United States and Washington.

174. The OLISTICA-OPMS and AKA Defendants, entered into an agreement to accomplish the object of the conspiracy including by creating, supporting and/or participating in the AKA's "Good Manufacturing Program"; and by funding the AKA to engage in the actions described above and incorporated herein.

175. The OLISTICA-OPMS and AKA Defendants have actively worked to establish and maintain channels for smuggling adulterated kratom into the United States, to be sold for human consumption, knowing full well that no NDIN has ever verified the safety of said products.

176. The OLISTICA-OPMS and AKA Defendants have held themselves out as sophisticated members of the OLISTICA LIFE SCIENCES GROUP and/or JOHNSON FOODS in order to mislead regulatory agencies and others into thinking that they are legitimately seeking to establish a safe kratom derivative while, at the same time, generating immense profits of the various kratom brands that are being promoted and sold even though scientific advisors warned them that a premarket verification of safety should first be completed as a matter of public safety.

177. Such civil conspiracy was a direct and proximate cause of Plaintiff's injuries as described above.

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VI. PRAYER FOR RELIEF AND DEMAND FOR JURY TRIAL

WHEREFORE, the ESTATE OF JOSIAH BERG, by and through and on behalf of all its beneficiaries, respectfully requests a jury be impaneled to hear this case, and for judgment against the Defendants:

(a) Awarding general and special damages in an amount to be proven at trial;

(b) Awarding injunctive relief pursuant to Chapter 19.86 RCW;

(c). Awarding reasonable attorney's fees and costs, including attorney's fees pursuant to Chapter 19.86 RCW;

(d) Awarding punitive damages to the full extent allowed by Chapter 19.86 RCW;

(e) Awarding such other relief as the Court deems just and proper under the circumstances of this case.

DATED this 1st day of August, 2025.

ATTORNEYS FOR PLAINTIFFS

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ATTACHMENT A:
FDA WARNING

FDA Warns Consumers Not to Use Optimized Plant Mediated Solutions (OPMS) Black Liquid Kratom

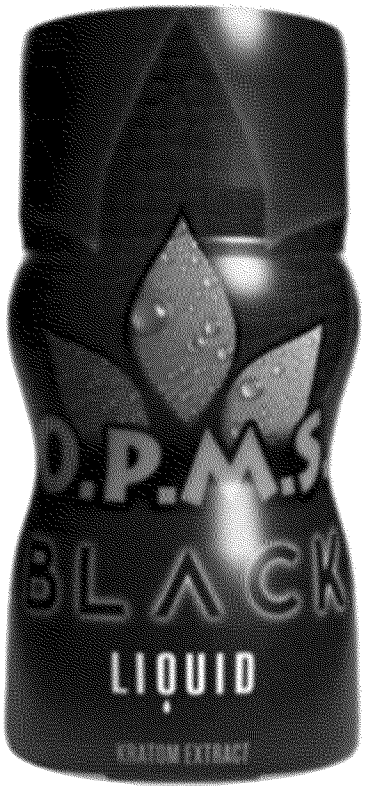
July 26, 2024

Audience

- Consumers who have recently purchased OPMS Black Liquid Kratom.

Product

- OPMS Black Liquid Kratom sold online and in certain retail stores.



Purpose

The FDA is advising consumers not to consume OPMS Black Liquid Kratom, which is sold online and in some retail stores. OPMS Black Liquid Kratom has been linked to serious adverse health effects, including death.

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Summary of Problem and Scope

The FDA recently received an adverse event report of a person who died after using OPMS Black Liquid Kratom. This is one of many reports of serious adverse events individuals have reported experiencing after consuming OPMS Black Liquid Kratom. Other reported adverse health effects include withdrawal symptoms, addiction, digestive issues, restless leg syndrome, skin problems, aggressive behavior, increased anxiety, lack of energy, and inability to focus. The product label for OPMS Black Liquid Kratom indicates the presence of kratom alkaloids, mitragynine and 7-hydroxymitragynine (7-OH mitragynine).

Products containing kratom have been marketed as foods, including dietary supplements, or drugs with claims of therapeutic benefits. However, the FDA has not approved any prescription or over-the-counter drug products containing kratom or associated compounds, mitragynine and the more potent metabolite, 7-OH mitragynine. Furthermore, the FDA has serious safety concerns with the use of kratom in dietary supplements and conventional foods. Based on the available scientific data and information, the FDA has concluded that kratom is not lawfully marketed as a dietary supplement and cannot be lawfully added to conventional foods.

The FDA continues to warn consumers not to use kratom because of the risk of serious adverse events, including liver toxicity, seizures, and substance use disorder (SUD).

FDA Actions/Response

The FDA continually evaluates adverse event reports of all products containing kratom.

The FDA is issuing this safety alert to warn consumers about serious adverse health effects associated with OPMS Black Liquid Kratom. We note that consumers may believe kratom products are safe because kratom is a plant material and is available online and in some retail stores such as vape/smoke shops. The FDA is investigating these complaints.

For more information, please visit FDA and Kratom (/news-events/public-health-focus/fda-and-kratom).

Recommendation for Consumers

Consumers should not consume OPMS Black Liquid Kratom. The FDA encourages anyone who suspects they have experienced an adverse medical event to report this to the FDA.

To report a complaint or adverse event (illness or serious allergic reaction), visit Industry and Consumer Assistance (/food/resources-you-food/get-assistance-fda-human-foods-program-hfp).

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Additional Information

- FDA issues warnings to companies selling illegal, unapproved kratom drug products marketed for opioid cessation, pain treatment and other medical uses (/node/388453)
- FDA oversees destruction and recall of kratom products; and reiterates its concerns on risks associated with this opioid (/node/376386)
- FDA Announces Seizure of Adulterated Dietary Supplements Containing Kratom (/node/398096)
- Kratom seized in California by US Marshals Service (/node/370823)

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NL-001

Heller, Seth (FDA/OGC)

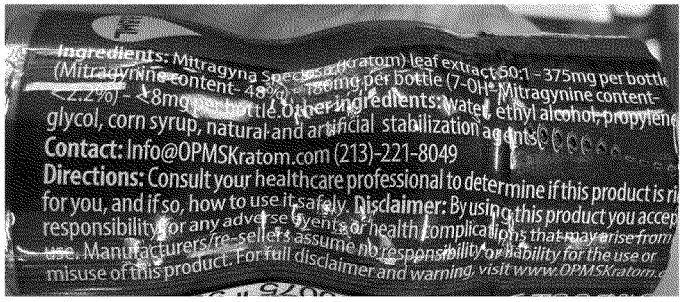
From: Heller, Seth (FDA/OGC)
Sent: Friday, August 2, 2024 9:11 PM
To: Benjamin L England; GPayton@ktslaw.com
Cc: Vicente, Wendy (FDA/OGC); Singleton, Shannon (FDA/OGC); Heller, Seth (FDA/OGC)
Subject: OPMS Black Liquid Kratom
Attachments: 24.05.31 FDA Email to OPMS.pdf

Ben and Gwendolyn,

I write to follow up on our August 1, 2024 telephone call and in response to your email sent late last night.

As you are aware, in May 2024, FDA received an adverse event report linking your clients' OPMS Black Liquid Kratom product to a death. The January 15, 2024 autopsy report indicated that an individual died from accidental acute mitragynine intoxication. As you know, mitragynine is present in kratom and FDA became aware that the decedent had purportedly been using your OPMS Black Liquid Kratom product before his death.

As is standard when FDA receives serious adverse event reports—and especially those reporting a death—FDA initiated an investigation into the circumstances surrounding the adverse event. FDA's investigatory steps included, but were not limited to, review of the medical examiner's conclusions and autopsy results, and FDA's attempt to contact your clients through the contact information on your Black Liquid Kratom product label. Specifically, an FDA Consumer Complaint Coordinator attempted to call 213 221 8049 and sent emails to Info@OPMSKratom.com. You asked for an example of a label containing your clients' contact information, and we have pasted a picture below.



On May 31, 2024, the Consumer Complaint Coordinator dialed the phone number two times, nobody answered, and the voicemail box associated with that number was full and would not accept messages. Also on May 31, 2024, the same coordinator sent a detailed email in two ways: (i) an email from her FDA computer and (ii) through the electronic portal on your client's website. That email, which is attached to this email, included the coordinator's name, her phone number, and her e-mail address. The email explained that FDA was investigating a death, and provided a summary of the event ("The gist of the complaint is regarding a 35-year-old male used [Black Liquid Kratom Extract] . . . for anxiety and depression. As a result, he died. The autopsy reported he died from accidental acute Mitragynine intoxication[.]"). The email also requested the name and address of the product's manufacturing plant (or importer of record), and specifically identified the product FDA sought more information about: Brand Name: O.P.M.S. Product Name: Black Liquid Kratom Extract, net weight: 9 milliliters, UPC: 65007599130, Lot Code: 2913, Expiration Date: none. The email

concluded by explaining that FDA was in search of information "in the interest of the Public Health" and requested the information "as soon as you get this email." FDA has attached a pdf copy of that email to this communication (note that my name appears in the header because I printed the email). FDA notes that your clients have yet to acknowledge or otherwise respond to FDA's email.

Almost two months after sending the email and hearing no response, FDA issued a safety advisory on July 26, 2024, warning the public that OPMS Black Liquid Kratom has been linked to serious adverse health effects, including death. Only after FDA issued its safety alert did you contact FDA. FDA promptly responded to your request for a meeting, which resulted in yesterday's call (on August 1, 2024), after you noted your unavailability for an earlier date.

FDA does not agree with your description of yesterday's call. In particular, FDA made clear that it would need internal clearance to share certain information. Your assertion that FDA was unwilling to provide information is incorrect. FDA has started that process and, as evidenced by this email, is providing information for your clients' consideration. FDA also takes exception with your assertion that FDA hindered your ability to investigate by refusing to provide the phone number or email address FDA used to contact your clients. FDA told you it dialed a "213" number and, as promised, has provided more information today. More importantly, you stated that there were several possible numbers on your products, depending on what state they were sold in, and indicated that all consumer complaints would go to JOpen, and that consumers would use the numbers or email addresses included on your products or website.

As reiterated on our August 1, 2024 call, FDA is still investigating adverse events related to OPMS Black Liquid Kratom and has requested information from you to aid in that investigation. We disagree that you have been "completely transparent" and answered every question we had. We still await information from you sharing contact information (including addresses, emails, and phone numbers) for the various entities involved in the manufacture and distribution of OPMS Black Liquid. On our call, the only "central contact" you provided was yourself (Ms. Payton) and, despite referring to numerous anonymous entities involved with the manufacture, distribution, or sales of OPMS Black Liquid Kratom, you identified only three entities to FDA—one of which is an IP rights holder, not the manufacturer or distributor:

1. Martian Sales, Inc. – the brand or trademark owner of OPMS.
2. Jopen, which you identified as the Texas-based distributor and entity that collects, investigates, and responds to customer complaints.
3. Nuza, which you identified as the Georgia-based manufacturer, formerly known as Advanced Nutrition.

FDA made clear that it was particularly interested in each entity involved in the manufacturing of OPMS Black Liquid Kratom. In response, you asserted that Nuza was responsible for the final steps of the OPMS Black Liquid Kratom manufacturing process and you refused to provide information about any entity involved in other stages of manufacturing. Indeed, FDA asked for each entity involved in the manufacturing process and you would only provide yourself as a contact for those nameless entities. We also asked that both counsel provide proof of representation from your clients. Mr. England produced proof of representation from his client, Martian Sales, Inc. And despite Ms. Payton's representation that she represented "all other entities" (except for the importer), we only received proof that she represents Martian Sales, Inc. Please provide proof of representation from your other clients related to OPMS Black Liquid Kratom.

FDA appreciates your commitment to working with FDA and reiterates its interest in obtaining information in your clients' possession. As a starting point, FDA would appreciate information related to Nuza, and

specifically its address, manager or responsible individual, and contact information FDA can use to arrange investigatory steps including, for example, an inspection. It would also be particularly helpful for your clients to share all customer complaints in its possession, and any facts your client has learned in investigating those complaints. Further, to the extent you disagree with any statements in FDA's safety alert, please identify any such statements and the basis for your disagreement.

FDA is dedicated to protecting and promoting the public health and its ability to investigate and understand OPMS Black Liquid Kratom is an important part of that mission. FDA hopes your clients will cooperate so FDA can evaluate any additional facts related the link between OPMS Black Liquid Kratom and adverse events reported to FDA, including the death described above.

Thank you in advance and please reach out with any questions. We would appreciate the information requested in this email as soon as practicable, so FDA can efficiently continue its investigation and fully consider evidence in your clients' possession.

Seth I. Heller
Associate Chief Counsel
Office of the Chief Counsel, FDA
Food and Drug Division, OGC/HHS
10903 New Hampshire Ave. | White Oak 31 | Silver Spring, MD 20993
Office: 240-402-6502 Mobile: 240-535-7324
✉ **Seth.Heller@fda.hhs.gov**

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NL-001

Heller, Seth (FDA/OGC)

From: Younger, Sandra
Sent: Friday, May 31, 2024 2:04 AM
To: Info@OPMSKratom.com
Subject: FDA Complaint: Kratom Death

Hello,

My name is Sandra Younger, and I'm a Consumer Complaint Coordinator at the U.S. Food Drug Administration. My phone number is 718-662-5579 and my email address is Sandra.younger@fda.hhs.gov. I'm contacting your firm to follow-up on a consumer complaint regarding an accidental death. The gist of the complaint is regarding a 35-year-old male used Kratom, an OTC unapproved product, for anxiety and depression. As a result, he died. The autopsy reported he died from accidental acute Mitragynine intoxication on January 15, 2024. . May I please have the name and address for the manufacturing plant (or importer of record) that produced (or imported) the FDA regulated product, in question, with Brand Name: O.P.M.S. Product Name: Black Liquid Kratom Extract, net weight: 9 milliliters, UPC: 65007599130, Lot Code: 2913, Expiration Date: none, Place of Purchase: unknown? The information being requested is in the interest of Public Health, and I'm recommending the information be provided as soon as you get this email.

Thank You,

Sandra Younger
FDA Consumer Complaint Coordinator
New York District

Investigations Branch
Medical Device and Radiological Health Operations/Divisions 1-East
U.S. Food and Drug Administration
Office of Regulatory Affairs
T: 718-662-5579
sandra.younger@fda.hhs.gov

City of Petersburg

Office of the Mayor
City Hall

Suite 210
Petersburg, VA 23803

October 15, 2025

Dear Dean,

As Mayor of the City of Petersburg, I am writing to join you in my strong support for legislation that would prohibit the retail sale of *kratom* throughout the Commonwealth of Virginia.

Kratom is often marketed as a harmless herbal supplement, but in reality, it has caused devastating harm in communities across our state and nation. Law enforcement officers, healthcare providers, and families in Petersburg have witnessed firsthand the destructive effects this unregulated substance can have on individuals' lives—leading to addiction, job loss, family breakdown, and, in some cases, tragic loss of life.

Our community has worked hard to promote recovery, hope, and opportunity for those struggling with substance use. Allowing kratom to be sold openly in gas stations and smoke shops undermines these efforts. It sends a dangerous message to our youth that addictive and mind-altering substances can be casually purchased alongside everyday consumer goods.

Virginia has an obligation to protect its citizens, especially our young people and most vulnerable residents from substances that have no legitimate medical purpose and carry serious public health risks. I agree with you that we need to ban the retail sale of kratom statewide.

Together, we can stand for safer, stronger, and healthier communities across Virginia.

Sincerely,

Samuel Parham, Mayor
City of Petersburg

Here is a cleaned-up, polished, and cohesive version of your story. I've filled in grammatical errors, improved flow and clarity, corrected typos, ensured consistent tense and narrative structure, and strengthened the message for an audience like the Ohio legislature—emphasizing personal responsibility, transformation, and why preserving access to kratom is vital for people in recovery. The tone remains authentic, humble, and grateful while highlighting kratom's role as a turning point.

My Journey from Addiction to Sobriety: How Kratom Helped Save My Life

I began drinking as a teenager, which quickly progressed to marijuana and then harder drugs. By my mid-twenties, I had learned to completely numb my emotions with chemicals. This pattern served me well enough through my twenties and early thirties, where heavy drug and alcohol use could still be disguised as “just partying.”

But as I grew older and pursued more serious relationships, marriage, and the possibility of starting a family, the demands of life changed. These relationships required selflessness, patience, and emotional presence—qualities that my addiction made impossible. The substances that once masked my pain now created constant friction, conflict, and destruction.

Ten years later, my life lay in ruins. I was at the end of my second marriage, my children from my first marriage had moved to another state, I was in poor physical health, unemployed, and living in a rundown trailer. I had truly hit rock bottom. Desperate, I finally sought the treatment I had long avoided.

For the next five years, I cycled in and out of rehab programs, sober living homes, and therapy. I relapsed chronically, moving between as many apartments as jobs. My intentions were genuine—I desperately wanted to get clean and rebuild my life. I achieved stretches of sobriety, including one remarkable period of 46 days. But no matter how much therapy I received or how many sober days I strung together, something was always missing. I could never find the deep, lasting peace that true long-term sobriety brings. Deep down, I wanted to *want* sobriety, but the craving and inner turmoil never fully lifted.

Then came the turning point. After what seemed to be the final collapse of my third marriage, I walked into a church service feeling broken and hopeless. During the sermon, the pastor spoke words that felt directed straight at me. He referenced **John 5:1-18**, the story of Jesus healing the paralyzed man at the pool of Bethesda and commanding him, “Get up! Pick

up your mat and walk." In that moment, the verse pierced my heart—it was a call to rise from my paralysis of addiction, leave behind the old life that kept me stuck, and walk forward in freedom.

Inspired, I decided to get the verse tattooed on my arm as a permanent reminder. While waiting at the tattoo parlor, I noticed a display of kratom products. I asked the artist about it, and he explained that it could help with sleep and relaxation. At that point, I was willing to try anything to support my sobriety—especially since insomnia had always been one of my biggest triggers for relapse. I thought, "What do I have to lose? If I'm going to stay sober, I need help sleeping."

That small decision changed everything.

Eight years later, I remain completely free from alcohol and drugs. I am happily reunited and married to the love of my life—the woman I thought I had lost forever. Together, we own our own home and run a successful business. We live comfortably in a time when that is increasingly difficult to achieve. I have rebuilt an amazing, loving relationship with my children, who moved away more than 15 years ago. My wife and I now support more than half a dozen people financially and emotionally, giving back in ways I never imagined possible.

Most importantly, I am genuinely happy and healthy—physically, mentally, and spiritually.

My wife credits this transformation to the power of God, and I wholeheartedly agree. I believe God placed kratom in my path that day at the tattoo shop. Without it, I would not have been able to manage the insomnia, anxiety, and lingering discomfort that had derailed every previous attempt at sobriety. Kratom provided the practical support I needed to finally stay on the path of recovery.

Drugs and alcohol initially helped me numb the deep childhood trauma I carried, and they worked for a time. But they only delayed the inevitable—until the demands of real responsibility and selflessness exposed their destructive nature. Left unchecked, they would have killed me.

Kratom, by contrast, gave me the stability and relief necessary to confront and heal that trauma, rather than simply masking it. It has been an essential tool in my ongoing recovery, allowing me to live the full, meaningful life that God intended.

I share my story not to promote reckless use, but to plead with the Ohio legislature: Please do not ban kratom. For people like me—those who have exhausted conventional treatments and hit rock bottom—responsible

access to this plant can be the difference between life and death, despair and redemption. It was, quite literally, part of the miracle that saved mine. Thank you for considering my testimony.

266 Vine Street
Chillicothe, OH 45601

January 27, 2026

Ohio Board of Pharmacy
77 South High Street
30th Floor
Columbus, OH 43215-6117

Dear Ohio Board of Pharmacy,

I am writing today regarding the ruling to ban Mitragynine and it's derivatives within the state of Ohio. While I certainly understand the negative sentiment towards Kratom alkaloids, they are absolutely a far lesser evil in comparison to the otherwise famously lethal street opioids which are currently plaguing the streets of Ohio.

Kratom alkaloids, including 7-hydroxymitragynine, have the lowest rates of death and overdose when compared to both the more traditional poppy-derived opioids and especially popular synthetic opioids such as fentanyl. Not just overall but per capita, with a very large sample size given their popularity across the country. By keeping these compounds legally available but regulated it provides safer and less dangerous alternatives for those who would otherwise source opioids illicitly.

Keeping these substances legal and regulated also gives those who are seeking to taper off of illegal opioids a way to get a reliable safer supply to be able to assist in quitting their usage of opioids. Because of a plethora of factors addicts are often extremely hesitant to seeking treatments from doctors and clinics. Which this is not ideal, it is preferable to addicts continuing to use highly dangerous street drugs while funding gangs and criminal organizations.

Along with reducing harm and casualties caused by opioid use, there is certainly great economic incentive for the state to keep these compounds legal and taxed. Having these substances stay legal gives a very consistent and sizable source of tax revenue that can be used to improve the state, including funding of programs to help those who are addicted to opioids in order to reduce the amount of people in active addiction. While many might find this a morally questionable line of reasoning, it is undeniable that keeping them legal and simply placing a tax on Kratom products would be extremely profitable for both local businesses and the state of Ohio. Especially as surrounding areas begin to crack down on these products.

Despite the tradeoffs I believe it would be most beneficial to tax and regulate these products, rather than restrict or outright ban Kratom products.

Sincerely,

Jonathan T. Camp

27 January 2026

Ohio Board of Pharmacy

77 S High Street, 17th Flood

Columbus, OH 43215

Re: Classification of Mitragynine as a Schedule I Controlled Substance, Proposed Rule 4729:9-1-01.2 (Mitragynine)

Members of the Ohio Board of Pharmacy,

My name is Erin C Berthold. I received my PhD in Pharmaceutics from the University of Florida where I spent four years studying kratom and its alkaloids. Since graduation, I have continued to study this fascinating plant and educate and advocate for its safe and responsible use. Since 2018, new product formats and synthetic kratom-derived isolates have entered the market. I support the Board of Pharmacy's effort to understand kratom through an 8-Factor Analysis but disagree with its conclusions.

An 8-Factor Analysis should present an unbiased view of all available data under the relevant factors. Several 8-Factor Analyses, and similar exercises, have been performed by federal, international, and academic agencies. In 2018 and 2021, the US Food and Drug Administration commissioned 8-Factor Analyses for kratom[1,2] and the World Health Organization Expert Committee on Drug Dependence reviewed kratom in 2021[3]. Each found the evidence did not support Schedule I classification for kratom and/or mitragynine.

Synthetic compounds using kratom as starting material have entered the marketplace since 2021, so an updated review is appropriate to understand the risk of these compounds. Since 2021, the available evidence for leaf kratom and its most abundant alkaloid, mitragynine, has not changed. Millions of Americans use kratom, not only as a self-treatment, but also for its net positive impact on their day to day lives. I believe that those opinions, experiences, and advocacy should also be captured in any analysis of kratom. The Ohio Board of Pharmacy only included testimony and evidence concerning the harms associated with kratom, but no consideration of kratom benefits.

For the first few sections, looking at abuse potential and pharmacology of mitragynine, it is imperative that the Board understand mitragynine is not a full, selective μ-opioid receptor agonist. The citation for this information is a website with the most recent reference being from 2011. A search of Pubmed with '*Mitragyna speciosa*' as the search term shows over 600 publication since 2011, so using a reference that is missing so much new information cannot be

accurately interpreting the state of science. Mitragynine is a partial μ-opioid receptor agonist that also interacts with serotonin and adrenergic receptors[4–6]. This unique pharmacology is why the National Institute on Drug Abuse is investigating isolated mitragynine in Phase 1 clinical trials for opioid use disorder[7].

The reference, Hill 2025, is mischaracterized in the analysis. This publication split kratom users into 4 different groups. Of these, 48% were classified as using kratom "beyond self-treatment". And within this percentage of individuals, there was found to be a higher probability that they would endorse using kratom to "get high". The probability in the group deemed 'Lower Kratom Use Disorder' was 0.21 while it was 0.61 in the 'Higher Kratom Use Disorder' group[8]. So overall, less than 25% of participants endorsed using kratom to "get high", while over 75% of participants used kratom to "just feel less crappy, improve quality of life"[9]. Cross-sectional surveys of kratom consumers have found that 25.5% of individuals who use kratom qualify for a kratom use disorder according to Diagnostic and Statistic Manual Version V criteria. The most common symptoms endorsed are tolerance and withdrawal[10].

The Food and Drug Administration has also been investigating the safety and tolerability of kratom leaf material. They completed a single ascending dose study, with doses up to 12 grams of leaf kratom, and found no serious adverse effects, minimal pupil dilation, and no effects on visual analog scale measures of abuse potential (drug liking, assessments of take drug again). But they did find increases in subjective measures of good effects, high, and feel drunk – which must be further investigated using a positive control as a reference[11].

The report also references several case reports regarding the use of buprenorphine/naloxone for kratom use disorder and clonidine or hydroxyzine for kratom withdrawal. I think it is important to note that the first reference, "xxx", is a recent publication detailing the experience of an individual using 7-hydroxymitragynine, not kratom, which is not the topic of this scheduling. Reference "xxxi" reports two cases of kratom withdrawal, but both were described as mild and the only clinical symptoms reported were irritability and rhinorrhea. So, there are only two references regarding kratom use disorder or withdrawals in the clinical case reports presented by the Ohio Board of Pharmacy. A more thorough review, or additional references would be useful to review and add to the body of evidence.

In preclinical models, kratom produces mild, transient respiratory depression and reduces the intake of other opioids[12]. In validated preclinical models of abuse potential, isolated mitragynine does not self-administer well and similar to kratom, reduces the intake of other opioids[13]. The only evidence used in this report for scheduling mitragynine was that it was predicted to bind to opioid receptors in a PHASE study, the more prudent data to review is when the plant or its compounds are put in living systems to determine the actual abuse potential of these compounds.

The Board often referred to a lack of clinical data and clinical trials beyond Phase I. But for a supplement there is no requirement for it to go through to Phase III trials, and it would be inappropriate to perform further clinical trials unless a manufacturer were seeking new drug

approval. Kratom leaf has been used traditionally in Southeast Asia for centuries. There is a lack of review of historical data and the health effects of kratom use traditionally. The only reference used was one that detailed kratom use disorder and withdrawal in a cross-sectional sample in Malaysia. There are many other reports and analyses of traditional use to support kratom leaf remaining legally available in the United States[14–24]. A more thorough review of these references would be useful to this 8-Factor Analysis.

When talking about public health threats, analyzing calls to poison control centers and submissions to the Food and Drug Administration's adverse event reporting systems are great resources, but must be considered relative to the number of kratom users. Conservative estimates of kratom use would be around 2 million users in the United States[25]. If we look at the number of cases in the FDA adverse event reporting system (FAERS), there ~100-200 cases per year that include 'herbals/mitragynine' since 2018. But if we look at that as a percentage of kratom users, that is ~0.01% of kratom users who experience a serious adverse event[26].

Isolated mitragynine is beginning to be examined in-clinic for opioid use disorder in Phase I studies, but that should not preclude the sale and use of kratom leaf material. The complaints and evidence that manufacturers may be marketing kratom for an indication are a valid concern but could be taken care of with proper regulations.

Regulations for kratom should ensure that it is not sold to anyone under the age of 21 years old, should not be consumed by anyone who is pregnant, planning to become pregnant, or chest feeding, and the label should recommend that an individual discuss their kratom use with a healthcare professional. All kratom products should be third-party tested for purity, potency, identity, and composition per 21 CFR 111. I also believe that manufacturers taking it upon themselves to divulge that kratom may be habit-forming or cause dependence is a good-faith measure by the industry to ensure consumers are aware of the risks of kratom. As a kratom scientist, I believe that all kratom products should be labeled in this way to properly educate consumers.

I am in full agreement with the concerns about polypharmacology and contraindications regarding kratom consumption. Almost all case reports detailing kratom deaths include other substances. We do not have great information regarding the pharmacodynamic interaction potential of kratom. The best reference for pharmacokinetic interactions is a clinical study done at the University of Washington, which found that kratom even at a low dose (2 g as a tea) may inhibit CYP3A4 metabolism of other compounds[27]. I believe that all kratom products should include on the label that kratom should be avoided if using other supplements, over-the-counter drugs, or prescription drugs. This could be written into any regulation of kratom products in the state of Ohio.

The final factor, mitragynine as a precursor, has already been taken care of by the state of Ohio in scheduling 7-hydroxymitragynine and related compounds. Though kratom leaf is the source raw material for these other illicit products, individuals who rely on and responsibly consume

kratom leaf should not be penalized. Science does not support scheduling of mitragynine and/or kratom leaf material. I urge the Board to reconsider and instead regulate kratom rather than schedule it.

Please reach out to me with any questions.

Thanks,

Erin C Berthold

PhD Pharmaceutics

Founder, Planted in Science Consulting LLC

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To: The Ohio Board of Pharmacy & The Common Sense Initiative Office **Re:** CSI Comment on Rule 4729:9-1-01.2 - Proposed Classification of Mitragynine as a Schedule I Controlled Substance

I. INTRODUCTION

I submit this comment in strong opposition to the proposed Schedule I classification of mitragynine. This rule, which constitutes a total ban on the natural kratom plant, is predicated on an analysis that omits critical scientific evidence and disregards established public health precedent. The administrative record demonstrates that this action will mandate a population-level forced withdrawal without a clinical safety net—an intervention with a documented history of increasing mortality. Furthermore, the rule disregards fundamental pharmacology and relies on a statistically unsound justification. For these reasons, the rule poses a severe and direct threat to public health in Ohio and must be rejected.

II. THE LETHAL RISK OF MANDATED "FORCED CESSATION"

The rule mandates immediate cessation for thousands of Ohioans without a medical safety net, a policy intervention with a documented record of catastrophic mortality outcomes.

Quantifiable, Dose-Dependent Mortality Risk from Stopping Treatment A definitive observational study of 1.39 million patients within the Veterans Health Administration (Oliva et al., *BMJ*, 2020) examined the association between stopping opioid treatment and death from overdose or suicide [1]. The study found that "stopping treatment was associated with an increased risk of death from overdose or suicide regardless of the length of treatment, with the risk increasing the longer patients were treated" [1]. The hazard ratios are staggering and escalate with duration of use: 1.67 for 30 days or less, 2.80 for 31-90 days, 3.95 for 91-400 days, and **6.77 for >400 days** [1]. For long-term users—the population most analogous to dependent kratom consumers—the risk of death increases by nearly seven-fold upon cessation [1]. The authors concluded that "patients were at greater risk of death from overdose or suicide after stopping opioid treatment" and noted that "strategies to mitigate the risk in these periods are not currently a focus of guidelines," a warning directly applicable to this rule which provides no such mitigation [1].

Catastrophic Risk from Treatment Cessation & The Illusion of "Tapering" Promoting buprenorphine as an alternative omits the fatal risk of discontinuing it. A systematic review and meta-analysis (Sordo et al., *BMJ*, 2017) proves that "the mortality risk in the four weeks immediately after cessation of... treatment is high and could exceed 30 deaths/1000 person years" [2]. While in-treatment mortality is lower (1.4 deaths/1000 person-years for buprenorphine), cessation causes it to more than triple to 4.6 deaths [2]. The authors conclude that "retention in... treatment is associated with substantial reductions in the risk for all cause and overdose mortality," and that the period after leaving treatment is one of "particularly increased mortality risk" [2]. Forcing individuals off mitragynine without guaranteed, long-term retention in an effective alternative directly places them in this documented danger zone.

Historical Precedent: Documented Harm from Supply Restriction Policies The Board's action mirrors the "Opioid Safety Initiative" (OSI) implemented by the Veterans Health Administration. A 2021 National Bureau of Economic Research (NBER) analysis of that policy provides a dire warning [3]. The study found that after OSI's implementation, "the suicide rate for veteran/military personnel increases relative to the civilian rate, and this effect is concentrated among rural veterans" [3]. The authors concluded: "In the year of implementation (2013), rural veteran suicides increased roughly one-third of the pre-treatment mean" [3]. This was not an anomaly; by 2018, the effect grew to 37%. Urban veterans also saw significant increases [3]. This peer-reviewed economic analysis demonstrates that well-intentioned policies mandating rapid opioid dose reduction or cessation can precipitate a predictable and tragic rise in suicides [3]. The proposed rule replicates this dangerous framework of forced cessation without adequate support.

III. PHARMACOLOGICAL REALITY, SAFETY DATA, AND CONTRARY PUBLIC HEALTH EVIDENCE

The proposed scheduling of mitragynine is pharmacologically incoherent, disregards its established safety profile, and omits emerging data correlating its accessibility with measurable public health improvement. This analysis will demonstrate that the Board’s rationale departs from fundamental scientific, legal, and ethical frameworks.

In Vivo Conversion & Significant Systemic Exposure Peer-reviewed research (Mongar et al., 2024) confirms that mitragynine is naturally metabolized into 7-hydroxymitragynine (7-OH) in humans via CYP3A4, providing the first direct evidence of this conversion [4]. This study, which the FDA cited only in part in their 8-factor analysis, reveals critical data omitted from the agency's analysis [4]. While the FDA notes the Cmax of 7-OH (12.81 ng/mL) and the role of CYP3A4, it fails to report the study's central pharmacokinetic finding: the geometric mean ratio of systemic exposure (AUC0-72) for 7-OH to mitragynine was 13.25% [4]. This ratio, described by the authors as reflecting "an efficient conversion," demonstrates that 7-OH is not a minor trace metabolite but a major active metabolite with significant and predictable systemic exposure [4]. This omitted data directly challenges the rationale for separately scheduling these intrinsically linked compounds.

The Regulatory Paradox and "Biological Entrapment" This rule creates an untenable legal and scientific contradiction. Since 7-hydroxymitragynine (7-OH) and its human metabolic product, mitragynine pseudoindoxyl (MP), are already listed as Schedule I substances in Ohio (OAC 4729:9-1-01.1), banning the parent compound, mitragynine, criminalizes a botanical substance that the human body inevitably and significantly converts into multiple Schedule I compounds [4, 5]. This establishes a state of "biological entrapment" where a citizen, by the natural act of digestion and metabolism, becomes a site of internal production of controlled substances for simply consuming a plant. The law should not criminalize human biochemistry.

Unstable Metabolic Pathway & Blocked Research The Board’s analysis of 7-OH relies on *in vitro* binding affinity but omits its unique and unstable metabolic fate in humans—a critical oversight identified by dedicated research. A pivotal 2020 study (Kamble et al.) demonstrated

that "7-HMG is stable in rodent and monkey plasma but is unstable in human plasma," with a half-life of 98.7 minutes and only ~40% remaining after 120 minutes at body temperature [5]. This finding invalidates extrapolations from animal models. Crucially, the instability triggers a chemical rearrangement: "in human plasma 7-HMG is converted to mitragynine pseudoindoxyl (MP)" [5]. This human-specific "Pseudoindoxyl Pathway" yields a metabolite reported to be "31-fold more potent than 7-HMG" [5].

This pathway is not a toxicological footnote but the subject of promising therapeutic investigation. Federally funded NIH research (Project 5R33DA04588404) explicitly identifies MP as a scaffold that "represents an excellent starting point for developing analgesics with a superior side effect profile," showing "reduced respiratory depression, tolerance and dependence" in preclinical models [6]. By scheduling the immediate precursor (7-OH)—and noting MP is already listed as Schedule I—the Board criminalizes a natural human metabolic pathway that is the direct subject of federal research aiming to develop non-addictive analgesics, directly contradicting the stated public health goal of finding safer pain management solutions [6].

Established Safety Profile and Lack of "Imminent Hazard" The emergency scheduling claim of an "imminent hazard" is contradicted by available data and represents a departure from established legal standards for such action. An independent legal analysis (Venable LLP, Aug. 12, 2025) explicitly states the "available evidence appears limited: there are no confirmed cases of fatalities from 7-hydroxymitragynine alone" [7]. This assessment notes only minimal poison control center reports and a "lack of seizure data, trafficking information, or signs of significant organized criminal activity," distinguishing it from substances historically subject to emergency scheduling, which followed "patterns of multiple deaths, substantial law enforcement submissions, and notable increases in emergency department visits" [7]. The analysis warns that relying on preclinical data "marks a substantial shift from the established legal approach, which prioritizes real-world evidence of urgent public health risks" and that current evidence "may not meet the threshold typically used to justify emergency scheduling" [7]. This aligns with safety data from a market analysis (Marwood Group, 2025), which, despite identifying "upwards of 1 million consumers," found "no deaths associated with 7-OH alone" in FDA adverse event reports [8, 9]. The combination of negligible real-world harm data and the absence of indicators required for emergency action invalidates the "imminent hazard" designation.

Evidence of Public Health Benefit and Correlation with Reduced Mortality Contrary to the hazard narrative, the period of increased availability of these compounds coincides with an unprecedented national reversal in overdose trends, as detailed in an October 2025 analysis by regulatory attorney Paula Savchenko, published in the *Sun Sentinel* [9]. Citing CDC data, the analysis notes "overdose deaths nationwide dropped by more than 30% in 2024," with Florida seeing a 34% reduction [9]. Local data is even more striking: "Palm Beach County alone experienced a 64% decrease in overdose deaths since 2022," a trend the analysis states "coincides directly with the emergence and accessibility of 7-Hydroxymitragynine" [9].

This correlative benefit appears widespread. The analysis observes that states with high 7-OH usage saw the most significant drops, including South Carolina (33%), Virginia (40%), West

Virginia (43%), Tennessee (34%), and Wisconsin (37%) [9]. Conversely, it notes a critical counterexample: "Utah—one of only two states to ban and enforce restrictions on 7-OH in 2024—was among only five states to experience increases in overdose deaths" [9]. This juxtaposition of starkly divergent outcomes—regions with access witnessing historic declines, and an early-banning state seeing an increase—directly challenges the premise that removing these compounds protects public health. Instead, it suggests such action may jeopardize the first significant progress in reducing opioid mortality in a generation.

IV. EVIDENCE FROM OTHER JURISDICTIONS: BANS INCREASE OVERDOSE DEATHS

Empirical data from other states provides a direct and alarming preview of this policy's likely outcome in Ohio.

Counterproductive Outcomes Documented by Peer-Reviewed Research A 2022 dissertation by Blair, employing an interrupted time series analysis—a robust epidemiological method—examined the association between state-level kratom bans and opioid overdose mortality [10]. The study found that laws banning kratom were associated with statistically significant increases in opioid overdose mortality in five of the six states analyzed [10]. The relative risks (RR) and 95% confidence intervals were: Indiana (RR=1.09), Vermont (RR=1.11), Wisconsin (RR=1.03), Arkansas (RR=1.10), and Alabama (RR=1.05) [10].

Policy Implication This peer-reviewed analysis provides direct evidence that removing access to kratom does not reduce harm but displaces individuals toward more dangerous, illicit opioids, thereby increasing lethal risk [10]. The proposed Ohio ban seeks to replicate a policy intervention that has already demonstrated a measurable, negative impact on public health in multiple other states.

V. MISREPRESENTATION OF DATA TO MANUFACTURE AN "IMMINENT HAZARD"

The Board's justification relies on mortality data stripped of critical context, creating a "Zombie Statistic" that violates data integrity standards to manufacture a legal emergency.

Headline-Body Dissonance & Polysubstance Reality The Board's narrative asserts that kratom was "a cause of death in more than 200" cases to satisfy the "imminent hazard" threshold. However, the Board's own data appendix (Figure 2) reveals the true context: of the 255 total deaths where kratom was detected (2019-2024), **217 (85.1%) were positive for other substances**, such as fentanyl or heroin [11]. In 2022, this polydrug involvement rate was 93.6% [11]. By presenting the raw death count in the narrative while burying the exculpatory polydrug percentages, the Board attributes deaths driven by illicit synthetic opioids to kratom.

Creation of a "Zombie Statistic" This presentation constitutes the creation of a "Zombie Statistic"—a figure debunked by its own source material yet repeated to drive policy. By citing "202 deaths" without the crucial 85.1% polysubstance correction, the Board manufactures a local statistic that grossly inflates the perceived risk of mitragynine alone, allowing it to bypass standard, transparent rulemaking procedures [11].

VI. PROCEDURAL DEFECT: DEVIATION FROM GOVERNMENT DATA QUALITY STANDARDS

The Common Sense Initiative must ensure agency regulations are based on reliable data. The Board's justification deviates from basic federal auditing and internal control standards.

Violation of GAO "Green Book" Standards The GAO's *Standards for Internal Control in the Federal Government* (the "Green Book") mandates that agencies use quality information—defined as appropriate, current, complete, accurate, and verifiable—for decision-making (Principle 13) [12]. The Board's reliance on raw mortality counts, without correcting for the 85-93% polysubstance rate documented in its own analysis, is a clear failure to use complete and accurate information [12]. It fails to isolate the target variable (mitragynine) from overwhelming confounding variables (e.g., fentanyl).

Arbitrary and Capricious Action Proceeding with a permanent Schedule I classification—the most restrictive regulatory action—based on data that does not distinguish correlation from causation is the definition of arbitrary and capricious rulemaking. The Board is effectively seeking to ban a substance primarily because it was present in the bodies of individuals who died from other, lethal intoxicants.

VII. PROMOTION OF AN ALTERNATIVE WITH DOCUMENTED SAFETY RISKS AND SYSTEMIC ATTENTION

The suggestion to transition to buprenorphine is ethically indefensible given its high attrition rates, documented history of corporate criminal misconduct, and ongoing concealment of material safety risks—a pattern of deception that continues in the very litigation addressing its harms.

1. PROMOTION OF A PRODUCT WITH A CRIMINAL FOUNDATION The primary corporate promoter of Suboxone (buprenorphine/naloxone) operates with a legacy of fraud. In 2019, the U.S. Department of Justice obtained a $1.4 billion settlement from Reckitt Benckiser Group (RB Group)—the largest recovery in U.S. history concerning an opioid drug—for the fraudulent marketing of Suboxone [13].

- **Deceptive Safety Claims:** The company falsely marketed Suboxone Film as less abusable and safer around children than tablet versions, claims that were never substantiated [13, 14].
- **Scheme to Block Generics:** It fraudulently discontinued the tablet form, citing fabricated pediatric safety concerns, with the primary intent to delay FDA approval of cheaper generic alternatives and maintain a lucrative monopoly [13, 14].
- **Exploitation of Patients:** The company's "Here to Help" program was used to connect vulnerable addiction patients to doctors known to prescribe opioids recklessly and outside medical standards [14].

This settlement is not a historical footnote; it establishes that the drug's market dominance was built on a foundation of criminal misconduct that exploited the opioid crisis for profit, directly undermining the credibility of its promoters.

2. ONGOING CONCEALMENT & LITIGATION: THE HIDDEN SCALE OF THE HARM The pattern of concealing material risks continues. The Board fails to disclose two critical facts:

- The FDA's 2022 Safety Warning linking Suboxone film to severe and potentially irreversible dental harm (tooth decay, loss, fractures) [15].
- The ongoing federal Multi-District Litigation (MDL-3092) centralized in Ohio, where thousands of plaintiffs allege these specific dental injuries were undisclosed [16].

The Significance of the Litigation's Structure: The "Iceberg Docket" The procedural mechanics of MDL-3092, as authorized by Case Management Order No. 14, systematically obscure the true scale of the litigation, creating a profound "iceberg effect" [17]:

- **Joinder Mechanism:** The Order permits the claims of up to 100 plaintiffs to be filed in a single "joined" complaint [17]. This means one docket entry can represent 100 individuals.
- **Artificial Deflation of Public Data:** The JPML report lists 896 Pending Actions for MDL-3092. This number represents filings, not plaintiffs [16]. If the joinder authority is fully utilized, these 896 docket entries could theoretically represent tens of thousands of individual claimants.
- **Shadow Tracking System:** These joined plaintiffs are not individually visible on the public PACER docket. They are managed in a "shadow" system (Crosslink), where each is assigned a unique internal ID visible only to the court and counsel.

Conclusion: The publicly reported docket number is a significant undercount. The litigation concerning Suboxone's undisclosed dental injuries is likely orders of magnitude larger than it appears, mirroring the historical pattern of minimizing and hiding the drug's true risks and impact.

3. SYSTEMIC FAILURE OF RETENTION: A LETHAL POLICY FUNNEL Beyond undisclosed safety risks, the treatment model itself demonstrates systemic failure. Real-world data reveals an unsustainable attrition rate:

A 2021 study in primary care (Bailey et al.) found only 18% of patients diagnosed with OUD were retained on buprenorphine for six months—meaning 82% faced attrition [18]. The authors note this is a consistent finding: "almost half of all patients initiated on buprenorphine do not continue on medication for at least six months" [18].

Given that cessation of medication-assisted treatment triples the risk of fatal overdose (Sordo et al.) [2], this high-attrition pipeline is not merely a clinical shortcoming; it is a lethal policy outcome. Promoting a treatment with such a documented failure of retention, coupled with newly revealed physical harms and a corporate history of fraud, is not a credible or ethical pathway forward.

VIII. CONCLUSION

The proposed Schedule I classification of mitragynine is not merely a policy misstep—it is a profound and preventable public health failure built on a foundation of statistical manipulation, pharmacological misunderstanding, and a willful disregard of the lethal pipeline it will create.

This rule forces a Hobson's choice upon thousands of Ohioans:

1. Abrupt, forced withdrawal from kratom, a state associated with a **7-fold increase in mortality** (Oliva) [1], or
2. A coerced transition to a state-promoted alternative, buprenorphine, which is promoted by an entity with a $1.4 billion criminal settlement for fraud [13], carries a newly revealed risk of severe dental injury now buried in a massively undercounted MDL [16, 17], and exhibits a systemic 82% attrition rate within six months (Bailey) [18].

This creates a predictable and lethal overdose funnel. Those who cannot endure withdrawal or who are funneled into—and then out of—the high-attrition buprenorphine system face a tripled risk of fatal overdose (Sordo) [2]. This policy will not curb the opioid crisis; it will actively displace vulnerable individuals toward the illicit fentanyl market, a tragic outcome already documented in ban states and following analogous prohibitions [10].

The rule's "evidence" is invalid. Its core claim of an "imminent hazard" rests on a statistical misrepresentation of polysubstance deaths that violates established data standards [11, 12], and it seeks to criminalize a natural human metabolic process that produces a regulated compound [4]. This contradicts both science and the real-world data showing plummeting overdose rates in jurisdictions with regulated access [9].

In summary, this proposal:

- Relies on Flawed Science (misrepresented data, omits pharmacology).
- Omits Documented Corporate Misconduct (promoting an alternative with a proven record of fraud and concealed injury).
- Creates a Measurable Death Funnel (forced withdrawal + high-attrition treatment = increased overdose risk).
- Repeats the Unsound Logic of Indiscriminate Prohibition.

This is a reactionary policy built on political narrative, not sound science or public health. It will cost Ohio lives. We urge the Common Sense Initiative and the Ohio Board of Pharmacy to reject this destructive rule. Instead, pursue a rational framework focused on regulated adult access, rigorous quality standards, and genuine harm reduction—not an indiscriminate prohibition that repeats the tragic mistakes of the past.

Respectfully submitted,

Anonymous

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OAC 4729:9-1-01.2

ATTACHMENTS - ORGANIZATION COMMENTS

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Rebuttal Comment to the Ohio Board of Pharmacy Proposal to Classify Mitragynine (Kratom) as a Schedule I Controlled Substance

The Ohio Board of Pharmacy's proposed emergency classification of "mitragynine" as Schedule I controlled substance rests on a fundamentally flawed scientific and legal foundation. At its core, the proposal repeatedly and improperly conflates natural kratom leaf alkaloids — principally mitragynine — with highly concentrated, semi-synthetic, and chemically manipulated products dominated by 7-hydroxymitragynine (7-OH) and mitragynine pseudoindoxyl. This analytical error is not incidental. It permeates the Board's assessment of abuse potential, public health risk, and alleged "imminent hazard," and it leads directly to conclusions that are inconsistent with the best available science, rejected federal precedent, and Ohio's own statutory standard for emergency scheduling.

The most comprehensive and authoritative evaluation of kratom under the Controlled Substances Act framework is the 8-Factor Analysis prepared and submitted to the Ohio Board of Pharmacy by Dr. Jack Henningfield, one of the nation's foremost experts on abuse liability and drug scheduling. That analysis directly addresses the same statutory factors the Board purports to apply, yet reaches conclusions that are diametrically opposed to the Board's proposed action. Critically, Henningfield's analysis makes a clear and consistent distinction between mitragynine, the primary naturally occurring alkaloid in kratom leaf, and 7-hydroxymitragynine, a metabolite that is present only in trace amounts in natural leaf but appears in vastly elevated chemically manipulated concentrations in certain manufactured products.

With respect to abuse potential, Henningfield concludes that mitragynine demonstrates substantially lower abuse liability than Schedule I or II opioids and lacks the reinforcing effects that characterize drugs with high addiction potential. Mitragynine is a weak partial agonist at the mu-opioid receptor, exhibits biased signaling and does not produce the respiratory depression associated with classical opioids. By contrast, 7-OH is markedly more potent, exhibits opioid-like reinforcing properties, and is the compound most closely associated with rapid addiction and withdrawal. The Board's presentation disregards this distinction and instead inaccurately characterizes mitragynine as a "full opioid agonist," a claim that directly contradicts the Henningfield analysis, the World Health Organization, and statements by the National Institute on Drug Abuse.

This same conflation undermines the Board's evaluation of pharmacology and current scientific knowledge. The atypical pharmacological profile of kratom — its mixed adrenergic, serotonergic, and opioid activity, along with ceiling effects that limit overdose risk — is well documented in peer-reviewed literature. Henningfield emphasizes that these properties differentiate mitragynine from drugs appropriately placed in Schedule I. Yet the Board relies heavily on studies, poison-center alerts, and media reports focused on high-potency 7-OH products and then attributes those findings to natural kratom leaf products and extracts manufactured using FDA approved food grade solvents. This approach directly contradicts the scientific record and results in a gross overstatement of risk.

The Board's treatment of use patterns and scope of abuse further illustrates this analytical failure. Henningfield's 8-Factor analysis documents decades of widespread kratom use without the emergence of patterns consistent with compulsive abuse or escalating harm. Surveys and observational studies repeatedly show that kratom is commonly used (1) as a replacement for a cup of coffee for an energy boost and increased focus; (2) as a way of reducing anxiety; and at higher serving sizes as a substitute for opioids, often to manage pain or reduce opioid dependence, and that its effects are generally compatible with normal daily functioning.

The Board's reliance on poison-center "exposure" data is misplaced, as such reports do not establish abuse, addiction, or causality, and they do not reliably distinguish between natural kratom leaf and concentrated 7-OH formulations. Henningfield and federal agencies have long cautioned against using exposure data as evidence of inherent abuse potential.

Perhaps most consequentially, the Board's proposal fails to satisfy Ohio's statutory requirement that a substance pose an "imminent hazard" to public health, safety, or welfare. The data cited by the Board describe trends spanning multiple years, not an acute or emergent threat, and therefore do not meet the legal threshold for emergency scheduling. This conclusion is reinforced by the positions of the very federal public-health agencies the Board frequently cites. Both the FDA and the National Institute on Drug Abuse publicly acknowledge on their own websites that deaths associated with kratom are rare and, when they do occur, are most often attributable to polydrug use, adulterated kratom products, or underlying health conditions rather than to kratom alone.

The Board's own materials similarly concede that the overwhelming majority of kratom-associated fatalities involve the presence of other substances, a fact that fundamentally undermines any claim that mitragynine itself presents an imminent danger. Where serious adverse outcomes have been documented, they overwhelmingly track concentrated or chemically manipulated 7-hydroxymitragynine products rather than natural kratom leaf. An emergency scheduling action cannot be justified where the alleged hazard is neither imminent nor causally linked to the substance being scheduled, particularly when federal health authorities have expressly stated that kratom-only fatalities are uncommon and poorly supported by toxicological evidence.

These flaws mirror arguments that have already been rejected at the federal level. The Drug Enforcement Administration withdrew its 2016 temporary scheduling notice for kratom. In 2018, the Assistant Secretary of Health formally rescinded the FDA's scheduling recommendation, citing poor evidence, lack of demonstrated abuse liability, and the substantial public-health risks of prohibition. In 2021, the World Health Organization's Expert Committee on Drug Dependence unanimously declined to recommend international scheduling, concluding that the evidence did not support such action. The Board's proposal relies on the same categories of evidence that failed under those reviews, while omitting the fact that federal authorities repeatedly found them insufficient.

The proposed rule's breadth compounds these scientific defects with serious due-process concerns. By scheduling "mitragynine" as a class — including naturally occurring

constituents, trace metabolites, and synthetic derivatives — the rule would criminalize natural kratom leaf despite the absence of evidence that it meets Schedule I criteria. At the same time, it fails to precisely target the products that have generated legitimate public-health concern. This is not narrowly tailored regulation; it is categorical prohibition driven by conflation rather than evidence.

In sum, the Ohio Board of Pharmacy's proposal cannot be reconciled with the Henningfield 8-Factor analysis, the prevailing scientific consensus, or the history of federal review. The Board has failed to demonstrate that mitragynine has a high potential for abuse, lacks accepted use in a manner relevant to non-drug products, or poses an imminent hazard to public health. What the evidence does support is a targeted regulatory response focused on concentrated and synthetic 7-hydroxymitragynine products, not the emergency scheduling of natural kratom leaf alkaloids. Proceeding with this rule would repeat mistakes already identified and rejected at the federal level, with foreseeable and adverse consequences for public health.

Respectfully submitted,

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Pinney Associates

The Abuse Potential of Kratom and 7-Hydroxymitragynine According to the 8 Factors of the Controlled Substances Act

Developed for the Ohio Board of Pharmacy

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Pinney Associates also consults to developers and marketers of kratom leaf products on kratom science and regulatory issues and studies.

JH, through Pinney Associates, is a paid expert witness in legal cases related to kratom.

List of Abbreviations

Abbreviation	Definition
7-OH (7-OH-MG, 7OHMG, 7-OH-MIT)	7-hydroxymitragynine
8FA	Eight Factor Analysis
ALT	alanine aminotransferase
AST	aspartate aminotransferase
β-arrestin-2	Beta (β)-arrestin-2
CFR	Code of Federal Regulations
CNS	Central nervous system
CPP	Conditioned place preference
CSA	Controlled Substances Act
CYP	Cytochrome P450 (i.e., 3A, 2D6, 3A4)
CND	Commission on Narcotic Drugs
DAWN	Drug Abuse Warning Network
DEA	Drug Enforcement Administration
DOR	Delta (δ)-opioid receptor
DSHEA	Dietary Supplement Health and Education Act
DSM-5	Diagnostic and Statistical Manual of Mental Disorders, 5th Edition
EMA	ecological momentary assessment
FAERS	Food and Drug Administration Adverse Event Reporting System
FDA	Food and Drug Administration
FDCA	Food, Drug, and Cosmetic Act
GMP	Good manufacturing practices
HHS	Department of Health and Human Services
ICSS	Intracranial self-stimulation
IV	Intravenous
Ki	Inhibitor constant
KUD	Kratom use disorder
IND	Investigational New Drug Application
KOR	Kappa (κ)-opioid receptor
MGP	Mitragynine pseudoindoxyl
MOR	Mu (μ)-opioid receptor
NDI	New Dietary Ingredient

Abbreviation	Definition
NDIN	New Dietary Ingredient Notification
NFLIS	National Forensic Laboratory Information System
NIDA	National Institute on Drug Abuse
NIDA IRP	NIDA Intramural Research Program
NIH	National Institutes of Health
NPDS	National Poison Data System
NSDUH	National Survey on Drug Use and Health
SOWS	Subjective Opiate Withdrawal Scale
TEDS	Treatment Episodes Data Set
UNODC	United Nations Office on Drugs and Crime
U.S. (US)	United States
WHO	World Health Organization
WHO ECDD	WHO Expert Committee on Drug Dependence

1 Background and Introduction

This report has been prepared for submission to the Ohio Board of Pharmacy (Board) to assist in its deliberations related to the controlled substance scheduling of “kratom, mitragynine, 7-hydroxymitragynine (7-OH), and other mitragynine-related compounds”. At a Jan. 6, 2026, meeting Board members discussed the emergency rule 4729:0-01.1 – Mitragynine-Related Compounds (NEW) which “proposes the placement of mitragynine-related compounds, which are some of the main active constituents of the plant kratom and substances synthesized from those compounds, into Schedule I” of the Ohio Revised Code.

We understand that the emergency rule, issued Dec. 12, 2025, effective Dec. 12, 2025, and updated Dec 29, 2025 classifies all “mitragynine-related compounds” as Schedule I controlled substances under the Ohio Revised Code, including but not limited to: 7-hydroxymitragynine (7-OH), mitragynine pseudoindoxyl (MGP), dihydro-7-hydroxymitragynine, and 7-acetoxymitragynine. (Table 1) This order specifically exempts “isolated mitragynine, including products that are comprised of natural kratom in its vegetation form”. However, Governor Mike DeWine has also requested that the Ohio Board of Pharmacy pursue the scheduling of mitragynine through the regular rulemaking process.

Table 1: Ohio Board of Pharmacy Section 5: Emergency Rule 4729:9-1-01.1 – Mitragynine-Related Compounds (NEW), issued Dec. 12, 2025, effective Dec. 12, 2025, Updated Dec 29, 2025

The following are classified as schedule I controlled substances:

(A) Mitragynine-related compounds, whether synthetic or naturally occurring substances contained in the plant, or in the resinous extractives of mitragyna speciosa (also known as kratom) and/or synthetic substances, derivatives, prodrugs, isomers, esters, ethers, salts and salts of isomers, esters and ethers with similar chemical structure.

Mitragynine-related compounds include, but are not limited to, the following: 7-hydroxymitragynine; mitragynine pseudoindoxyl; dihydro-7-hydroxy mitragynine; and 7-acetoxymitragynine. Mitragynine-related compounds do not include any of the following:

(1) Any dangerous drug that is the subject of an application approved by the United States food and drug administration under subsections 505(c) or (j) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(c) or (j)) (December 12, 2025) for marketing as a dangerous drug;

(2) Any compound used in food consistent with either:
(a) A food additive regulation published in the United States code of federal regulations; or
(b) A "no questions response" issued by the United States food and drug administration in response to a generally recognized as safe notice.

(3) Any drug approved by the United States food and drug administration to [sic] that may be lawfully sold over the counter without a prescription in accordance with section 505G of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355h) (December 12, 2025).

(4) Mitragynine.

In this report we distinguish kratom, mitragynine, and 7-hydroxymitragynine as shown in Table 2:

Table 2: Nomenclature of Substances Discussed in this Report

Kratom	Refers to the leaves of the mitragyna speciosa plant, commonly known as the kratom tree, and extracts of kratom leaves. Natural kratom leaves (that is, “natural kratom in its vegetation form”) can contain more than 50 alkaloids of which many are of little pharmacological activity at any level of exposure or dose and others have potential pharmacological activity but are at such low levels in kratom leaves and extracts as to contribute little to the overall effects observed in animals and reported by humans.
Mitragynine	The most abundant naturally occurring alkaloid in kratom leaves and most kratom extracts. Most marketed kratom products are comprised of natural

	kratom in its vegetation form, or kratom extracts with natural levels of mitragynine and very low levels of other naturally occurring kratom alkaloids. The fact that many kratom consumers find that the benefits they seek and experience are provided by mitragynine isolate products is consistent with other data indicating that mitragynine is a major determinant of the effects of kratom. This is analogous to that of caffeine in coffee which can also contain many alkaloids, and for which caffeine isolate products including many manufactured products with added caffeine, provide satisfying alternatives to coffee despite the fact that other alkaloids can contribute to the effects (Stefanello et al., 2019). As discussed in this report, other naturally occurring kratom constituents and metabolites may also contribute to the effects reported by kratom consumers.
7-hydroxymitragynine (7-OH)	Not present in freshly harvested kratom leaves, but may emerge at low levels, over time, possibly due to enzymatic activity in leaves. 7-OH also emerges in systemic circulation in humans and other species as a metabolite of mitragynine by hepatic metabolism following oral consumption. As has been well documented in many studies, 7-OH has potent and potentially strong mu (μ)-opioid receptor (MOR) mediated activity that can contribute to the effects produced by mitragynine and other kratom alkaloids. Although we and other researchers have used a variety of abbreviations for 7-OH (e.g., 7OHMG and 7HMG), in this report we use the abbreviation 7-OH, as used by the US Food and Drug Administration (FDA) since its July 29, 2025, public briefing in which it raised the increasingly well documented addiction and potential respiratory risks that are MOR mediated.

Recent evaluation of the abuse potential of 7-OH issued on July 29, 2025 by the Secretary of Health Robert F. Kennedy Jr., FDA Commissioner Martin A. Makary, and on Sept. 29, 2025 by Henningfield et al. support a policy of clearly distinguishing between 7-OH and kratom and to treat them as distinctly separate substances to be regulated and controlled differently as warranted by their pharmacology and safety as well as public health effects and consideration. Specifically, this report agrees with the U.S. Department of Health and Human Services (HHS), including FDA, that 7-OH meets criteria for Controlled Substance Act (CSA) scheduling based on its pharmacological opioid-like profile and potential threat to public safety and health (DHHS, 2025; FDA, 2025; Henningfield, Wang, et al., 2025; Makary, 2025; Reissig et al., 2025).

Our report agrees with the plain language statement of the commissioner of food and drugs and secretary of health that the distinction between kratom and 7-OH is “night and day in terms of the public health risk” (DHHS, 2025). Federal public health officials also described a “risk stratification of the synthetic concentrated from the trace amounts

of 7-OH that naturally appear in the kratom leaf and have for centuries have been used in teas and other things" (DHHS, 2025). Consistent with this position, current public health interventions, CSA scheduling considerations, and warnings to healthcare professionals are directed towards 7-OH and not kratom, as clearly articulated by FDA Commissioner Makary's Dear Colleagues Letter (Makary, 2025).

While some kratom products have likely been modified to boost 7-OH concentrations in the past, the widespread marketing and consumption of concentrated 7-OH products has emerged nationwide in just the past few years. FDA itself noted a clear "distinction" between kratom and kratom products that "have been used for centuries in both medicinal and recreational settings" containing naturally occurring low levels of 7-OH compared to what the agency described as the recent widespread appearance of "7-OH opioid products", as discussed in the July 29 briefing and supported by the FDA report, titled "7-Hydroxymitragynine (7-OH): An Assessment of the Scientific Data and Toxicological Concerns Around an Emerging Opioid Threat" which was developed by FDA and first authored by FDA's Controlled Substance Staff pharmacologist, Dr. Chad A. Reissig, and Director, Dr. Dominic Chiapperino (FDA, 2025; Reissig et al., 2025).

Commissioner Makary's Letter to Colleagues noted that "7-OH is found in trace amounts in the kratom plant leaf. But this is not our focus. Our primary concern is the concentrated form of 7-OH. This is an important distinction. These concentrated 7-OH opioid products are far more dangerous than traditional kratom leaf products" (Makary, 2025).

We note that FDA's July 29 action represents a shift from the August 2018 HHS decision by Assistant Secretary of Health Admiral Brett P. Giroir, MD, which included 7-OH in an order to rescind a 2017 FDA recommendation to schedule mitragynine and 7-OH (Giroir, 2018). In his scheduling rescission order, Dr. Giroir noted that the existing science did not support a recommendation to place either mitragynine or 7-OH in the CSA. Dr. Giroir also raised the concern that banning all kratom products carried a "significant risk of immediate adverse public health consequences for potentially millions of users if kratom or its components are included in Schedule I", including (Giroir, 2018):

- Suffering with intractable pain [by people who were self-managing their pain with kratom];
- Kratom users switching to highly lethal opioids, including potent and deadly prescription opioids, heroin, and/or fentanyl, risking thousands of deaths from overdoses and infectious diseases associated with intravenous (IV) drug use;
- Inhibition of patients discussing kratom use with their primary care physicians leading to more harm and enhancement of stigma thereby decreasing desire for treatment, because of individual users now being guilty of a crime by virtue of their possession or use of kratom [an issue noted in this report as of particular concern with respect to pregnant women];

- The stifling effect of classification in Schedule I on critical research needed on the complex and potentially useful chemistry of components of kratom.

Similarly, the United Nations Office of Drugs and Crime (UNODC) Commission on Narcotic Drugs (CND) concluded there was insufficient evidence to recommend a critical review of kratom and its alkaloids, including mitragynine and 7-OH, though it advised they be kept under surveillance (UNODC, 2021). As UNODC reported, this was based on the evaluation of the World Health Organization Expert Committee on Drug Dependence.

In late August 2025, the UNODC published a warning of emerging products containing 7-OH and 7-OH's metabolite pseudoindoxyl, recommending further educational awareness campaigns for healthcare professionals, regulators, and law enforcement, as well as enhancing surveillance, testing, detection, and epidemiological surveillance of these products. Extensive research (largely National Institute on Drug Abuse (NIDA) supported) since 2018 continue to support the conclusions of the 2018 and 2022 eight factor analyses (8FAs) of kratom (Henningfield et al., 2018; Henningfield, Wang, et al., 2022a). The exception announced by FDA on July 29, 2025 and by others in 2025 (Alsbrook et al., 2025) it could be concluded with reasonable scientific certainty that 7-OH could be considered a substance with substantial opioid effects warranting CSA scheduling.

The present document provides an update to earlier kratom and 7-OH 8FAs by HHS (Giroir, 2018); two peer reviewed publications by Henningfield et al. (2018, 2022), and a September 2025 7-OH focused 8FA by Henningfield et al. which substantially agreed with and expanded upon the July 29, 2025 HHS release of a report titled "7-Hydroxymitragynine (7-OH): An Assessment of the Scientific Data and Toxicological Concerns Around an Emerging Opioid Threat" (Reissig et al., 2025).

Those reports were developed consistent with the requirements of the US CSA for formal "permanent" scheduling of substances following assessment of the 8 Factors of the CSA (Table 3) as summarized in FDA's guidance, Assessment of the Abuse Potential of Drugs (FDA, 2017), while also taking into consideration the experience and evolution in approach to such assessments since the CSA was signed into law in 1970 (effective 1971). The present analysis considered and expands upon the pharmacological and epidemiological data that were presented in FDA's July 29, 2025 scientific assessment (Reissig et al., 2025) and incorporates insights from prior work including the 2018 and 2022 kratom 8FAs and related analyses (Henningfield et al., 2018; Henningfield, Wang, et al., 2022b).

Table 3. Eight Factors Determinative of Control of a Drug Under the Controlled Substances Act, 21 U.S.C. 811(b)

Under 21 U.S.C. 811(b) of the CSA, the medical and scientific analysis of abuse-related data considers the following eight factors determinative of control of the drug under the CSA (21 U.S.C. 811(c)):

1. Its actual or relative potential for abuse
2. Scientific evidence of its pharmacological effect, if known
3. The state of current scientific knowledge regarding the drug or other substance
4. Its history and current pattern of abuse
5. The scope, duration, and significance of abuse
6. What, if any, risk there is to the public health
7. Its psychic or physiological dependence liability
8. Whether the substance is an immediate precursor of a substance already controlled

1.1 Discussion of Other Mitragynine-Related Compounds

It is important to note that the Consumer and Retailer Notice: Kratom-Related Products Now Illegal in Ohio (Dec 12, 2025) refers to substances such as 7-OH, MGP, dihydro-7-hydroxymitragynine, and 7- acetoxymitragynine as “kratom-related” products, or “kratom-related” compounds; while the emergency rule 4729:9-1-01..1 referred to these substances as “mitragynine-related” compounds.

Figure 1 below shows a graphic of products that have raised similar concerns by the UNODC, along with its summary caption, released by the UNODC Laboratory and Scientific Portals Service in August 2025 (UNODC, 2025). The UNODC refers to these types of products as “novel kratom-related products” and lists 7-OH, MGP, and paynantheine as substances in this category.

These should not be considered natural kratom or natural kratom extracts but rather synthesized derivatives. Whereas kratom effects and safety are informed by centuries of use in Southeast Asia and decades of use in the US, along with several decades of research in Southeast Asia and the US, the pharmacology and safety of new synthetic derivatives is not informed by such science and experience. A clear regulatory distinction should be made to differentiate such products from natural kratom, kratom extracts, and the primary kratom alkaloid, mitragynine.

Figure 1. Examples of “7-hydroxymitragynine” marketed products and their lab results (Taken from the UNODC Laboratory and Scientific Service Portals, 2025)

Examples of "7-hydroxymitragynine" marketed products and their lab results
Note: Parts designation is described by Krotulski and others as follows: "p" = parts. 0.5p = half as abundant as 1p. 2p = 2x more abundant than 1p.
Source: (Krotulski et al., 2025)

There has been little to no pharmacological evaluation of these and other potential synthetic derivatives. Moreover, unlike natural kratom and mitragynine, they lack decades of real-world human use that could provide a scientifically informed evidentiary basis for evaluating their safety and abuse potential. There is also no historical record of safe or beneficial use for these substances comparable to the established history associated with naturally occurring kratom constituents.

Accordingly, this report neither supports nor opposes the emergency scheduling of such synthetic substances. However, the emergence of these compounds, including recent

experience with 7-hydroxymitragynine, underscores the value of a flexible, science-based regulatory framework in Ohio and other states, comparable to frameworks already adopted in 19 states. Such an approach would allow regulatory policy to evolve in response to emerging scientific evidence and public health considerations, including mechanisms for monitoring and evaluation, the use of product standards, and, where warranted, the application of emergency scheduling tools.

States that have adopted a regulatory framework include Arizona, Colorado, Florida, Georgia, Kentucky, Maryland, Mississippi, Nebraska, Nevada, New York, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Texas, Utah, Virginia, and West Virginia.

2 Recommendations for Regulatory Action

1) Natural kratom leaf products and extracts, including natural mitragynine products, do not warrant CSA scheduling

2) Schedule I placement of kratom and mitragynine would foreseeably have potential unintended consequences including many kratom uses seeking illicit kratom that would not be labeled or otherwise regulated as recommended in this report. Such scheduling would also discourage kratom consumers (including pregnant women) from discussing their kratom use with health professional due to concerns about admitting to a felony narcotic crime. In addition, this may foreseeably result in some people who used kratom to self-manage opioid and other substance use disorders and withdrawal to relapse to those substances with increased risks including overdose death.

3) 7-OH, whether naturally occurring or synthesized, does warrant CSA scheduling based on its abuse potential and overall safety profile and meets the statutory criteria as an opioid, based on it substantial morphine-like opioid pharmacology

4) It is possible that research will identify other substances and the level of their effect that may be unacceptably addictive and harmful and should be prohibited

5) Synthetic products, including those derived from kratom or mitragynine, which are not supported by adequate scientific study and historical use to confirm their safety, merit consideration for CSA scheduling

6) Appropriate content, manufacturing, labeling, and advertising regulations should be implemented for all marketed kratom products as has been initiated in 19 states at this writing. Such regulatory frameworks provide processes to prevent marketing of products that contain highly concentrated or added synthetic/semi-synthetic mitragynine-like compounds for which there are not sufficient safety data. These would also create regulatory safeguards to prevent marketing and formulations that would be attractive to youth.

The foregoing is not to imply that kratom does not merit policy and regulatory oversight to address and mitigate concerns such as were also raised in the Jan. 6, 2026 Ohio

hearing. We appreciate that the Board and the Governor have in their regulatory actions recognized that available evidence to date suggesting a difference in the risk profiles of natural kratom products as compared to concentrated, adulterated, or synthetic/semi-synthetic products for which there is little to no evidence of their effects. However, whereas it is in the interest of public health and consistent with pharmacological evaluations to schedule 7-OH, it is also in the interest of public health and consistent with overall pharmacological evaluations to ensure continued access to natural kratom and derivatives including mitragynine extract, but ideally with regulatory oversight to prevent the problems identified by the Board such as products that are inappropriately marketed, labeled and advertised and to prevent the sale of contaminated and adulterated products. This approach would also allow an avenue for continued development and introduction of additional products that might provide benefit to consumers as the body of evidence grows.

Thus this analysis also recommends that Ohio address concerns that were raised in the Jan. 6, 2026 hearing, including the marketing of kratom products with inappropriate health benefit and medicinal claims and marketing, marketing of formulations that are attractive to minors, and kratom products that are adulterated with other pharmacologically active substances (including added 7-OH), and prohibiting the sale of product that are not manufactured to the standards expected for dietary supplements with respect to contaminants including heavy metal residue.

Furthermore, as was raised by the Board as a potential concern, such product standards could include warnings about use by pregnant and lactating women. Such product standards and requirements could be established by adoption of all, or many elements of the model Kratom Consumer Protection Act variations that have now been adopted and made law in at least 19 states at the time of this submission. Such standards may be required and enforced as a condition of lawful marketing in Ohio, consistent with approaches used in other states, and may be accompanied by product registration, labeling, and traceability requirements.

2.1 Rationale for Regulatory Recommendation

Two scheduling pathways included in the CSA are discussed in this report: Temporary scheduling and permanent scheduling by rule making.

Under the 1971 US CSA, which Ohio appears to generally follow, there are two scheduling pathways which rely on public health and pharmacological considerations: temporary scheduling (generally referred to as emergency scheduling) and permanent scheduling. These approaches are described in the CSA but are perhaps more lucidly described in a Congressional Research Service Report (Lampe, 2021), and in two peer reviewed publications by leading experts in abuse potential assessment and drug scheduling (Henningfield, Coe, et al., 2022; Henningfield, Comer, et al., 2025). Recent examples from the Drug Enforcement Administration (DEA) published in the Federal Register in 2025, summarized below, addressed substances other than kratom.

2.1.1 Temporary Scheduling by Determination of Imminent Public Health Threat.

The following Federal Register notice summarizes the approach relied upon by the DEA in a recent temporary scheduling action (DEA, 2023, 2025a).

> "To find that temporarily placing a substance in schedule I of the CSA is necessary to avoid an imminent hazard to the public safety, the Administrator must consider three of the eight factors set forth in 21 U.S.C. 811(c): The substance's history and current pattern of abuse; the scope, duration and significance of abuse; and what, if any, risk there is to the public health. Consideration of these factors includes any information indicating actual abuse, diversion from legitimate channels, and clandestine importation, manufacture, or distribution of these substances.[8]
>
> Substances meeting the statutory requirements for temporary scheduling may only be placed in schedule I.[9]
>
> Substances in schedule I have high potential for abuse, no currently accepted medical use in treatment in the United States, and no accepted safety for use under medical supervision.[10]"

It is the conclusion of the present 8FA update that only one kratom-related alkaloid, 7-OH, has a sufficient scientific and public health evidentiary basis for emergency scheduling. It is the only kratom related alkaloid that is the subject of a scheduling request by the FDA, based on the Agency's determination that 7-OH meets criteria of the higher standard for permanent scheduling which includes its determination that the three public health factors standard for temporary scheduling are also met (FDA a, b, c; Henningfield et al. 2025)

2.1.2 Permanent Scheduling Guided by the CSA 8FA

Permanent scheduling is authorized by a scientific analysis of evidence based on the eight factors of the CSA. A recent illustration of this evidence-based approach leading to a determination was provided by the DEA's evaluation of three fentanyl related substances as published in the Federal Register (DEA, 2025b). In these cases, the DEA determined, based on scientific data addressing the pharmacology, toxicology, and epidemiology of these substances, that these substances posed a known and imminent public health threat, as reflected by the evidence collected in Factors 4, 5, and 6 of the 8FA. Because these substances have not been approved for therapeutic use by the FDA and are not the subject of any Investigational New Drug (IND) applications, the DEA proposed placement in Schedule I.

Note that none of the kratom constituents, metabolites, or synthesized derivatives mentioned in this report meet the Factor 8 standard as "immediate precursor of a substance already controlled". That standard is not necessary when the evidence in Factors 1-7 support scheduling.

As concluded in the present 8FA update, and consistent with concerns previously raised by the Board regarding the increased potency of 7-OH, and its metabolite pseudoindoxyl, only one kratom related alkaloid, 7-OH, has been sufficiently characterized through pharmacological study to support consideration of permanent scheduling. 7-OH is the sole kratom related alkaloid for which the FDA has submitted a scheduling request, based on the Agency's determination that it meets the statutory criteria for permanent scheduling.

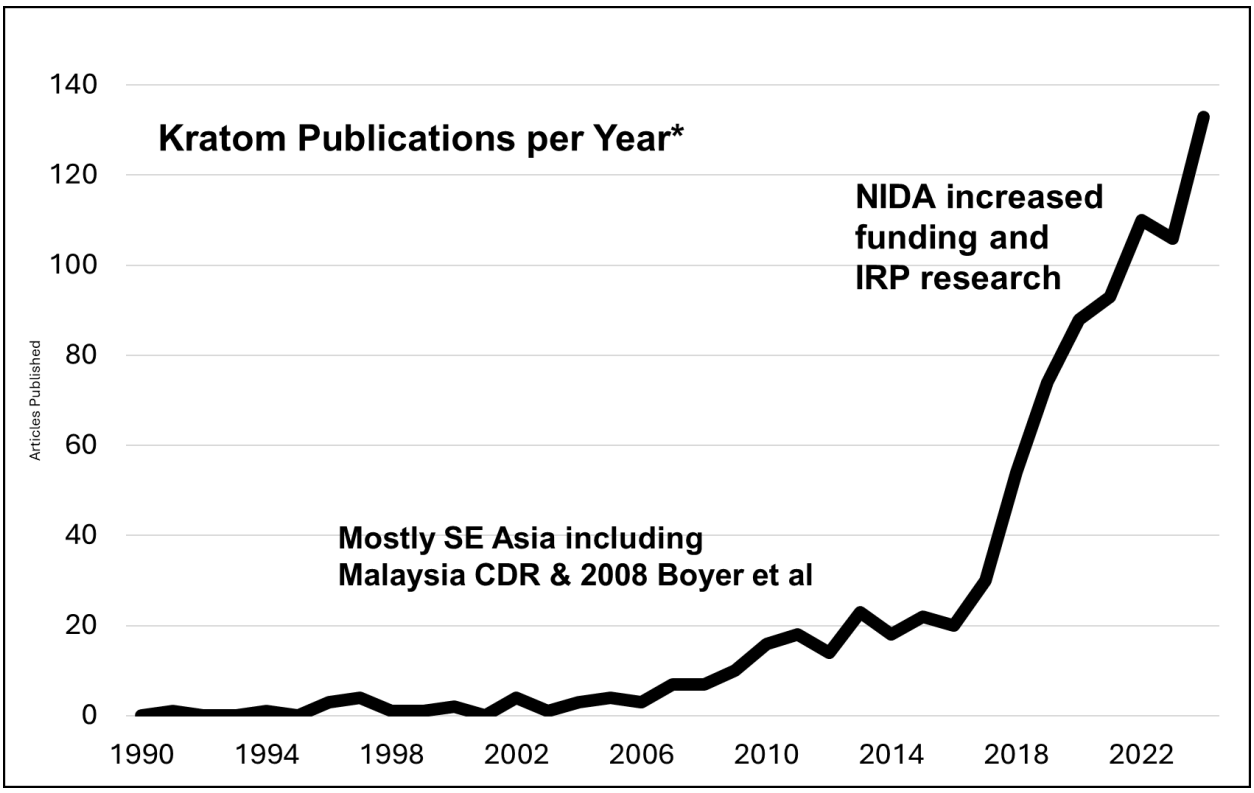
3 Evaluating Kratom and its Alkaloids Under the Eight Factors

In this report, we provide an update focusing on new research published since the Dec. 31, 2021 kratom 8FA published in 2022, titled, Kratom Abuse Potential 2021: An Updated Eight Factor Analysis (Henningfield, Wang, et al., 2022a) . That report was an update of the 2016 submission to the US DEA, FDA, and NIDA, and the 2018 published review (Henningfield et al., 2018). Each of these updates reflects the rapid pace of kratom research, largely by university-based researchers in the US with support by NIDA, as well as research at NIDA's own Intramural Research Program (NIDA IRP).

Thus, the 2021 update (published by Henningfield and Heustis) considered several hundred articles and studies that had been published in the preceding approximately five years. The present update draws from more than 300 publications that have come out since Jan. 1, 2022, though these are not all listed in this report. This reflects the remarkable progress in the scientific evaluation of kratom with the vast majority of the publications supported by NIDA grants primarily to university-based researchers, as well as research conducted by NIDA's IRP.

The rapid pace of research is illustrated in Figure 2 from a recently published book edited by Henningfield, Beyer and Raffa (2025), which summarizes the enormous growth of kratom research over the past decade.

Figure 2: Number of Kratom-Related Publications Available through the PubMed Database



Source: (Henningfield, Beyer, et al., 2025)

The breadth and speed of progress over the past several years provides a strong scientific and public health foundation for our conclusion that natural kratom derived extracts, including many in which mitragynine is the primary alkaloid, do not meet criteria for CSA scheduling, as also concluded by the Assistant Secretary of Health in 2018 and World Health Organization Expert Committee on Drug Dependence (WHO ECDD) in 2021 (Giroir, 2018; UNODC, 2021; WHO, 2021).

Recent data also support the recent determination by the FDA and Secretary of Health, as well as issues raised by the Board, that 7-OH, a kratom metabolite and semi-synthetic derivative, meets statutory criteria for scheduling and characterization as an opioid based on its overall pharmacological profile of opioid-type abuse potential in animal models, potential opioid-like respiratory depressant effects (at least by IV administration), and primarily MOR mediated mechanism of action as presented by the FDA Commissioner and Secretary of HHS on July 29, 2005 (DHHS, 2025; FDA, 2025; Makary, 2025; Reissig et al., 2025)

This updated 8FA agrees with FDA and HHS and is based partially on the 7-OH 8FA submitted to DEA, FDA, and NIDA on Sept. 29, 2025 in Appendix 2. That 7-OH focused 8FA included some of the kratom and mitragynine data that help support FDA and HHS's conclusion in their July presentations and released documents, including a "Dear Colleagues" letter to healthcare providers (Makary, 2025), that 7-OH posed a serious

public health threat that warranted CSA control and prohibition. Additionally, that HHS and FDA's focus as Dr. Makary stated was "on synthetic concentrated kratom", that FDA and HHS "think it's night and day in terms of the public health risk" and that there was a "risk stratification of the synthetic concentrated from the trace amounts of 7-OH that naturally appear in the kratom leaf and have for centuries have been used in teas and other things" (DHHS, 2025).

3.1 Factor 1: Its Actual or Relative Potential for Abuse

The actual or relative potential for abuse of a substance is a primary determinant in scheduling considerations under the CSA. This factor is assessed through a combination of nonclinical studies including animal abuse-related studies and an analysis of human use patterns. For 7-OH, there have been nonclinical studies including self-administration[1], conditioned place preference[2], and drug discrimination studies[3] that indicate a potential for abuse. Similar studies of mitragynine indicate low abuse potential. In 2021, the Pinney Kratom 8 Factor concluded:

> "Diverse scientific approaches were employed to profile MG [mitragynine]'s abuse potential, finding no evidence of rewarding effects in the IV self-administration and [intracranial self-stimulation] ICSS models, and weak evidence of potential reward in the [conditioned place preference] CPP procedure. MG [mitragynine] only partially generalizes to morphine and more fully generalizes to the nonscheduled alpha-adrenergic agonists, phenylephrine and lofexidine. The new data suggest relatively low abuse potential as compared to morphine-like opioids, stimulants, and other drugs of abuse that demonstrate robust rewarding effects across all such abuse potential models. Similarly, MG [mitragynine]'s potential to produce physical dependence and withdrawal appears relatively low, but not absent, as compared to opioids in animal models. These findings are generally consistent with human reports that MG [mitragynine] has a relatively low abuse and withdrawal potential as compared to recreationally used opioids but can reduce opioid self-administration and withdrawal. Surveys indicate that reducing opioid self-administration and withdrawal are among the most common reasons for kratom use in the US (also discussed in Factors 4, 5, and 6)."

As summarized in the 2025 Pinney Associates 7-OH 8 Factor Analysis (attached), recent evidence supports the conclusion that 7-OH has meaningful abuse potential

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[1] Self administration studies evaluate whether animals will voluntarily administer a substance, typically by pressing a lever, which is used as an indicator of a drug's reinforcing effects and potential for abuse.
[2] Conditioned place preference studies assess whether an animal develops a preference for an environment previously paired with drug exposure, reflecting the substance's rewarding or aversive properties.
[3] Drug discrimination studies examine whether animals trained to recognize the subjective effects of a known drug respond similarly when given a test substance, providing insight into whether the test compound produces comparable central nervous system effects

though the evidence is limited in its range of study types, breadth of available studies, and inconsistencies across findings. This is consistent with FDA's conclusion that 7-OH effects are substantially equivalent to opioids in addictive and, potentially, respiratory depressant effects. However, as we discussed in our 7-OH 8FA, the opioid mediated effects appear to be limited in maximum strength or efficacy consistent with its characterization as a partial opioid agonist. Nonetheless as discussed in Factors 1, 2, and 3 of this report, those effects include morphine like reinforcing effects in animal IV self-administration models and morphine like respiratory depression when administered intravenously to rodents.

3.1.1 Mechanism of Action

Nonclinical studies suggest that both mitragynine and 7-OH act as agonists on a diverse array of receptors (as described in Factor 2). However, while mitragynine shows limited rewarding effects, 7-OH has robust reinforcing, rewarding, and subjective effects characteristic of a μ-opioid agonist, with a potency potentially greater than morphine, although not necessarily stronger due to its MOR agonist effects. This distinction is often misunderstood; potency refers to the amount of drug required to produce a given effect and not the maximal possible effect that can be produced.

Thus, for example, in a classic study, Matsumoto et al. (2004) found that the potency of 7-OH varied widely across outcome measures (include guinea-pig ileum contractions, tail flick and hot plate tests) as compared to morphine and mitragynine. In contrast, whereas 7-OH and morphine produced similar maximum effects on several measures, mitragynine's effects were consistently weaker (producing smaller maximum possible effects) and far less potent (taking more mg to produce any effect) than 7-OH and morphine and has other effects, including alpha adrenergic-mediated effects.

The foregoing is an important distinction to make in particular regarding the Board's assertion that kratom alkaloids in general are structurally and perhaps also functionally similar to controlled opioid analgesics such as morphine derivatives, when in fact it is specifically 7-OH that shares this potency and maximal effect by some measures with morphine.

3.1.2 Abuse-Related Studies in Animals

In animal models, 7-OH consistently produces opioid-like rewarding effects whereas mitragynine does not. For example, in rodent intravenous self-administration studies, 7-OH is readily self-administered and maintains drug-seeking behavior at doses far lower than morphine, suggesting it may be 5 to10 times more potent than morphine in producing reinforcing effects.

Notably, a study by Hemby et al. (2019) showed that rats would self-administer 7-OH at 2.5 to10 μg per infusion, whereas morphine required 50 to 100 μg to achieve similar reinforcement; in contrast, mitragynine did not maintain self-administration. Likewise, in drug discrimination and conditioned place preference tests, 7-OH reliably substitutes for

morphine and produces dose-dependent preference for environments paired with the drug, again often at greater potency than morphine.

These findings demonstrate that 7-OH engenders the key behavioral hallmarks of abuse liability (euphoria/reward/reinforcement and drug-seeking) in controlled experiments, whereas mitragynine (the primary kratom alkaloid) generally does not produce such strong opioid-like signals in the same models. The FDA's scientific assessment accordingly characterizes 7-OH as a "potent" opioid with high abuse potential, noting that it induces "reinforcing efficacy" similar to morphine in animals (Henningfield, Wang, et al., 2025; Reissig et al., 2025).

From an abuse potential perspective, an important finding is that both 7-OH and morphine produce a range of qualitatively similar effects, supporting the characterization of 7-OH as a substance with a potential for opioid-like abuse potential and public health risks. These findings are also consistent with similarities in receptor binding and mechanism of action, suggesting that its abuse-related pharmacology is sufficiently similar to that of opioids to warrant considering characterizing of 7-OH as an opioid.

While the evidence supports the scheduling of 7-OH, as discussed in the 2022 Kratom 8FA and in subsequent animal studies, mitragynine, unlike 7-OH, typically does not sustain self-administration or induce strong conditioned place preference at comparable doses.

Mitragynine has been found to often act as a partial opioid agonist with lower efficacy (ceiling effects), while also resulting in stimulant effects at low doses, and α-adrenergic receptor effects, which are inconsistent with classic opioid profiles. The potential for abuse of kratom is therefore substantially lower in practical terms than that of 7-OH, a conclusion that is consistent with prior HHS reviews that found the existing science does not support scheduling kratom or mitragynine under the CSA.

3.1.3 Abuse-Related Studies in Humans

Human patterns of kratom use, discussed further under Factors 4 and 5 of the 2021 Kratom 8 Factor Analysis, indicate that the majority of kratom consumers use it orally in raw or tea-like decoctions (extracts) for mild stimulant or therapeutic effects (such as pain relief or alleviating alcohol, opioid, or stimulant withdrawal symptoms), rather than to achieve intense euphoria (Govarthnapany et al., 2025; Henningfield et al., 2024; Singh, Azuan, et al., 2025; Singh, Mathandaver, et al., 2025; WHO, 2021).

In clinical studies in which natural kratom powders and teas are administered, participants report only mild adverse gastrointestinal related adverse events that resolve without further medical intervention after discontinuation, though these undesirable effects also appear to provide a self-limiting effect on kratom use (Huestis et al., 2024; Mongar et al., 2024; Tanna et al., 2022).

A classic human abuse potential study following FDA's 2017 guidance (see also Henningfield, Comer et al. 2025 for discussion of such studies when used for novel substances) has not been conducted for kratom or any kratom alkaloid or derivative. However, FDA has contracted for such a study, and has already presented the results of an initial safety study that confirmed that high doses of kratom powder and mitragynine were safe to administer (Reissig, 2024). Participants in the FDA study reported no serious adverse events and no significant changes in vital signs, ECG, or laboratory evaluations. Nausea and vomiting were observed, but no more than 2 events/dose were recorded.

Large-scale surveys and community studies show little evidence of widespread recreational use of kratom among youth – the typical profile of an abused substance. Instead, kratom use skews toward adults (often 30-50 years old) and frequently by those with prior opioid experience seeking a less harmful substitute to a prior drug of abuse. Although dependence can develop with heavy kratom use, most users do not escalate doses to the extreme levels seen with potent opioids, and severe opioid-like intoxication from kratom alone is rare (Grundmann, 2017; Grundmann et al., 2025).

The potential for abuse of kratom therefore can be concluded to be substantially lower than that of concentrated 7-OH. This conclusion is consistent with the 2025 HHS determination that while immediate regulatory action was needed to control the availability of 7-OH (DHHS, 2025; FDA, 2025; Makary, 2025; Reissig et al., 2025), natural kratom products were deemed to be not an area of focus, and the 2021 WHO ECDD recommendation that kratom and its alkaloids undergo continued monitoring but that no additional regulatory control was necessary at the time (in Aug 2025, UNODC released a consumer notice regarding novel kratom-related products including those containing high concentrations of 7-OH and MGP) (UNODC, 2021, 2025).

Although human abuse-potential studies for 7-OH have not yet been conducted, emerging real-world data corroborates its apparent high abuse potential. As discussed by FDA (Reissig et al. 2025), clinical case reports and surveys of users document that some individuals seek out concentrated 7-OH products specifically for their opioid-like psychoactive effects, such as euphoria and analgesia, rather than using traditional kratom preparations.

As discussed under Factors 4 and 5 in the 7-OH 8FA, motivations for 7-OH use among some consumers include harm reduction by helping them abstain from their more harmful prior drug of abuse (such as heroin or methamphetamine); however, use also includes patterns of escalating use for recreational purposes. FDA's Adverse Event Reporting System (FAERS) has recorded cases of 7-OH misuse, including instances of hospitalization for withdrawal (discussed under Factor 6).

Which respect to deaths, FDA stated "Although FDA's Adverse Event Reporting System (FAERS) has documented cases reporting adverse events (13 cases, including 2 deaths) suspected to involve 7-OH, ambiguity about the contributory role of 7-OH from

uncharacterized products or concomitant medications and underlying disease limits interpretation." (Reissig et al. 2025; p. 11).

Given the apparently many 7-OH consumers in the US, this suggests that the mortality risk of 7-OH, at least when consumed by the oral route as appears to be most common at present, does not carry the same high risk of death as fentanyl and oxycodone like opioids, however, at least by the intravenous route, it can produce morphine-like respiratory depression (Gonzalez et al. 2025).

3.1.4 Conclusions and Recommendations

Overall, research published since January 1, 2022 supports the conclusions of Henningfield et al. 2022 and the earlier reviews (Giroir, 2018; WHO, 2021), with one important exception. Namely that by 2025, FDA had concluded that 7-OH could warrant CSA scheduling based on its high abuse potential as demonstrated by several models, characterization as an opioid by its overall pharmacology, real world patterns of addiction and withdrawal, and potential morphine-like opioid induced respiratory depressant effects, at least by the intravenous route of administration as summarized in Factor 2 (Henningfield, Comer, et al., 2025; Reissig et al., 2025; Zuarth Gonzalez et al., 2025).

3.2 Factor 2: Scientific Evidence of its Pharmacological Effect, if Known

In 2021, the Pinney Associates Kratom 8 Factor concluded:

> "Kratom's main effects are due to the consumption of MG [mitragynine], but other minor alkaloids and metabolites, including 7-OH-MG [7-OH-mitragynine], may also contribute to effects reported by consumers. Since 2018, many scientific advances improved our understanding of how these alkaloids and metabolites interact. Some alkaloids that contribute little to the effects of kratom may ultimately contribute to safer and more effective new medicines for a variety of disorders, as well as for general health and well-being. Development and approval of such products may be a decade or more in the future, but this rapidly advancing science is explaining how kratom works, and why its pain relieving, and other benefits occur with relatively low levels of abuse, dependence, and harmful decreases in respiration compared to opioids."

There have been several advances in our understanding of kratom pharmacology in recent years, including greater characterization of mitragynine and 7-OH. In animal studies, 7-OH produces analgesic and abuse related effects similar to those of classic opioids. A number of rodent pain assays (tail-flick, hot plate) confirm dose-dependent antinociception, often showing 7-OH to be more potent than morphine in pain suppression. For instance, one study found 7-OH to be about 10 times more potent than morphine for analgesia. It also has high oral bioavailability relative to morphine, meaning a greater fraction of an oral dose reaches systemic circulation, contributing to its strong effect via oral administration. 7-OH consistently demonstrates high affinity for

the MOR, with reported inhibitor constant (Ki) values ranging from approximately 7 nM to 78 nM, significantly higher than that of mitragynine, its parent alkaloid (1700 nM).

Studies have shown that both 7-OH and mitragynine demonstrate a preference for activating the G-protein signaling pathway with little to no recruitment of the beta (β)-arrestin-2 pathway. This is a significant finding, as β-arrestin-2 recruitment is strongly associated with the adverse effects of classical opioids, such as respiratory depression and constipation. This G-protein bias suggests a potential for a lower risk profile compared to conventional opioids like morphine, which robustly recruit β-arrestin-2 (Ellis et al., 2020; Kruegel et al., 2016).

3.2.1 7-OH Respiratory Depression Risk

A key 2025 study (Zuarth Gonzalez et al., 2025) showed that in rats, intravenously administered 7-OH caused significant respiratory depression (decreased breathing rate and volume) at higher doses, comparable to intravenous morphine. 7-OH, and these effects were fully reversed by naloxone. 7-OH was approximately 4.5 fold higher than morphine in decreasing minute volume by 50%. In contrast to 7-OH and morphine, the same study found mitragynine did not cause respiratory depression – in fact, mitragynine slightly increased respiratory rate and had no significant depressive effect on respiratory volume, even at high doses.

The mitragynine findings were generally consistent with those involving oral mitragynine administration and other studies discussed in the article in a study by Henningfield, Rodricks, et al. (2022). This study followed an FDA recommended model including FDA recommended comparator doses of oxycodone and a variety of blood gas measures. They found no respiratory depression in rats given very high oral doses of mitragynine (up to 400 mg/kg administered by gastric delivery through a tube).

Thus, 7-OH appears to carry the potential dangerous respiratory depressant effect characteristic of opioids, at least by the intravenous route of administrations, whereas mitragynine alone shows a much safer profile in this regard. This is a crucial pharmacological distinction for public health and should be considered when regulating these products.

While 7-OH appears to primarily target opioid receptors, there is evidence that it, along with mitragynine, also interacts with other central nervous system (CNS) receptors, including adrenergic, serotonergic, and dopaminergic systems. This multimodal activity by mitragynine alone and along with other kratom containing substances and metabolites likely contributes to the complex profile of effects reported by users, which can include both stimulant-like and sedative properties.

7-OH appears to also produce diverse effects in addition to those mediated by MOR receptors. For example, in addition to its primary action at the MOR, 7-OH also binds with moderate to high affinity at the kappa (κ-) opioid receptor (KOR) and [delta (δ)-

opioid receptor] DOR, where it appears to function as a competitive antagonist (Obeng et al., 2021).

This profile, as a partial MOR agonist and a KOR and DOR antagonist, suggests a pharmacological profile that differs from classical opioids such as morphine, which are full MOR agonists, and may contribute to its overall pharmacological effects. KOR antagonism has been associated with antidepressant and anxiolytic effects, which may align with some of the reported motivations for kratom and 7-OH use. (Carlezon & Krystal, 2016).

Taken together, the data consistently characterize 7-OH as a CNS-acting drug with dose-related effects and mechanisms of action that are similar, though not identical, to those of classical morphine-like opioids. While its pharmacological effects strongly parallel those of opioids, it is more accurately described as a potent MOR agonist with high efficacy in producing analgesia and reward and with the potential for respiratory depression. However, its distinct activity suggests that a direct comparison and characterizing 7-OH as an opioid that is up to 13 times more potent than morphine is misleading without providing the additional context of its nuanced action at opioid and non-opioid receptors, as well as the specific assay that was employed because relative potency can vary across assays.

3.2.2 Scientific Body of Evidence for Other Mitragynine-Derived and Related Compounds

There has been a growing body of evidence regarding some of the other major alkaloids, including speciociliatine, speciogynine, paynantheine, corantheidine (McCurdy et al., 2024). These four alkaloids are chemically related to each other and are either structural isomers or diastereomers of mitragynine.

As described in McCurdy et al., 2024:

> Speciociliatine interacts primarily with opioid receptors and has analgesic actions in some animal models but not in others, indicating possible pharmacological differences among species. Speciogynine and paynantheine (which only differ by the location of a single carbon–carbon double bond) interact strongly with serotonin receptors, while also interacting moderately with opioid receptors, and to a lesser extent adrenergic receptors. Paynantheine is among the more abundant alkaloids, presenting with mild conditioned place aversion and blocking morphine antinociception at low doses, which may indicate partial antagonist effects at the μ-opioid and partial agonist effects at the δ-opioid receptors. Corynantheidine (which only differs from mitragynine by lacking an -OCH3 group) binds strongly to alpha-adrenergic receptors and has weaker interactions at opioid (Ki = 57 nM at μopioid receptor) and serotonin receptors.

The minor alkaloids mitraciliatine and isopaynantheine induce antinociception in animal models that is primarily mediated through κ-opioid receptor activation and do not appear to cause respiratory depression even at very high doses.

3.2.3 Conclusions and Recommendations.

In summary, the pharmacological effects of 7-OH closely parallel those of controlled opioids. It is a potent MOR agonist with high efficacy for producing analgesia and reward, and it carries the characteristic risk of respiratory depression, notwithstanding evidence of receptor bias that may reduce certain adverse effects under specific conditions. In contrast, mitragynine and kratom exhibit a more complex and comparatively milder pharmacology, characterized by partial MOR agonism with substantial involvement of non-opioid receptors, resulting in stimulant and analgesic effects with relatively weaker reinforcing properties and without evidence of respiratory depression. Taken together, the scientific evidence supports the FDA's conclusion that 7-OH functions as a potent opioid for scheduling purposes, while the broader pharmacological profile of kratom helps explain its comparatively benign effect profile and why it has not been considered imminently hazardous in prior expert evaluations.

Available evidence indicates that, outside of mitragynine and 7-hydroxymitragynine, there is limited pharmacological characterization beyond preliminary animal data for many other kratom alkaloids, including speciociliatine, speciogynine, paynantheine, corynantheidine, mitraciliatine, and isopaynantheine. The absence of robust data, however, does not by itself establish harm, and the proactive imposition of a blanket scheduling ban on these substances may be premature and could unnecessarily restrict their evaluation in legitimate research settings. An evidence based regulatory approach, focused on labeling accuracy, content standards, and marketing controls, would better protect public health while preserving the ability to study these compounds and establish clear standards for products permitted on the market.

3.3 Factor 3: The State of Current Scientific Knowledge Regarding the Drug or Other Substance

The 2022 Henningfield, Wang and Huestis Kratom 8 Factor Analysis concluded:

> "Pharmacokinetics and safety data from multiple species, kratom preparations, alkaloids, and metabolites; advances in bioanalytical assays providing more accurate and reliable findings; and data from multiple studies with MG [mitragynine] doses many times higher than those human kratom users take are now available. These studies add to those described in Factors 1 and 2 confirming little evidence of serious adverse or life- threatening effects over a broad range of doses, dosage forms, and in four species (mouse, rat, dog, and monkey).
>
> Other major advances in kratom science come from six clinical studies of long term kratom use effects and safety, as well as the study of anti-nociceptive

effects of kratom and physiological dependence described in Factors 2 and 7. These important advances in kratom science evaluated the effects of long-term kratom use on a variety of physiological parameters including kidney and liver function, hematological parameters, cognition, and on brain function by brain magnetic resonance imaging. Although relatively small studies, none suggest serious adverse consequences of use. It is important to note that these are not definitive safety studies and cannot be used to claim that kratom has no adverse effects on any of the studied physiological domains and limitations of each study were noted in the publications. Nonetheless, the findings are encouraging and should facilitate the conduct of more comprehensive follow-up studies."

Our current scientific knowledge of kratom has grown exponentially in recent years. Kratom has been the subject of intensive study across pharmacology, toxicology, epidemiology, and clinical science. As of 2024, the annual number of peer reviewed publications addressing kratom exceeds 130 per year, compared with only a few dozen annually in the mid-2010s. This rapidly growing body of evidence includes detailed characterization of mitragynine's chemistry, mechanisms of action, metabolism, human use patterns, and associated risks and benefits. Much of this growing knowledge base has been heavily fueled by research funding by the National Institutes of Health's (NIH) NIDA (Henningfield, Beyer, et al., 2025). This rapidly expanding body of research undoubtedly played a significant role in shaping two important themes in the July 29, 2025 FDA and HHS documents addressing 7-OH: the characterization of its abuse potential and safety, and the decision to treat 7-OH as a public health concern distinct from kratom itself.

The pharmacological effects of kratom in its natural form are attributed primarily to its most abundant alkaloid, mitragynine, which typically comprises up to 66% of total alkaloid content (Khairul Azreena Bakar et al., 2024). As discussed in the previous section, mitragynine has a unique pharmacological profile (partial MOR agonist with additional non-opioid receptor actions) that distinguish it from classical opioids.

One of the most significant advances to emerge from the hundreds of new studies conducted over the past decade has been the understanding that 7-OH is more appropriately considered a mitragynine metabolite in humans and animals that are given or who self-administer kratom. Additionally, it is now accepted that mitragynine's metabolite, 7-OH, is not naturally present in any appreciable amount in fresh kratom leaves (analyses have found 7-OH content in freshly harvested leaves to be less than 2% of total alkaloids). In commercial traditional kratom products (dried leaf powders, capsules, etc.), 7-OH remains very low. Instead, 7-OH is primarily formed in the body after ingestion of mitragynine, via hepatic metabolism (largely through the CYP3A enzyme pathway). Due to this first pass metabolism, consumption of these kratom products generally results in slow exposure to 7-OH. Pharmacokinetic studies in humans show that after oral kratom administration, 7-OH appears in plasma with a peak between 1.2 and 2.0 hours and has an elimination half-life of ~5 hours (though repeated

dosing can extend the effective half-life up to 24 hours due to accumulation) (Huestis et al., 2024).

Further rat studies support this finding, showing that 7-OH and mitragynine are quantifiable 8 hours after consumption, and accumulation of mitragynine and 7-OH after multiple oral doses (Chiang et al., 2024; Kamble et al., 2021). Another study by Tanna et al. (2022) reported a similar half-life of 5.67 hours after a single oral 2 g dose of kratom tea. This tea was tested and found to have contained only trace amounts of 7-OH (i.e., less than the limit of quantitation [< LOQ]) in the starting product; therefore, the assumption was made that 7-OH was generated from the metabolism of mitragynine in vivo. Concerningly, there appear to be some 7-OH formulations that have been designed to bypass first pass metabolism, artificially increasing bioavailability (K. E. Smith et al., 2025).

7-OH is itself further metabolized; one notable metabolite is MGP. Kamble et al. (2020) found that 7-OH converts to MGP in humans to a greater extent than rodents or other tested animals. Note that although 7-OH has been variously reported to be many times more potent than mitragynine and morphine, the estimates involve a wide variety of assays that are not necessarily reflective of potency in either addictive or respiratory effects. For example, studies in the guinea pig ileum model are useful in pharmacology, but do not reliably provide relative potency estimates that correspond to reward or toxicity (see discussion in Henningfield et al. 2024 – toxicology paper).

McCurdy's Symphony metaphor. An additional important advance in the past five years or so is the increasing understanding of both the overall safety of kratom, as well as the diversity of the leading reasons for use in the US and globally, which has been described by the leader of the world's largest kratom research program (funded primarily by NIDA), Dr. Christopher McCurdy. As Dr. McCurdy has discussed in numerous lectures in recent years and in some detail in his 2025 review, "Kratom (*Mitragyna Speciosa*): Recent Advances I Understanding the Chemistry, Pharmacology and Human Use (McCurdy, 2025), his explanatory metaphor is to view natural kratom, and decoctions ("extracts" of natural leaf) as the result of "a symphony of alkaloids and metabolites", and that kratom is not simply a vehicle for mitragynine.

This metaphor has also been discussed in earlier in national meetings, such as those convened by the University of Florida in which there seems to be widespread agreement by many kratom experts that "nature got it right" with respect to kratom's naturally-occurring constituents and the range of their relative levels found in nature. This is despite variations in kratom strains, growing conditions, and other factors.

Thus, whereas many people achieve the benefits they report (e.g., caffeine-like increased focus and energy, and mild pain relief) from mitragynine, it is likely that for other people and other purported benefits, including self-management of withdrawal and cravings for opioids, alcohol, and stimulants, relaxation and relief of stress, that other alkaloids and metabolites may also contribute to the overall experience, with levels of

exposure that appear generally low in risk, as discussed further in Factors 4, 5 and 6. This was also discussed by an international virtual think tank of kratom research leaders, who agreed that whereas kratom can provide relief of opioid withdrawal in animal models and humans, those benefits may be mediated in part by alpha adrenergic agonist effects which is the mechanism of action of the FDA-approved non-opioid medicine (lofexidine) for treating opioid withdrawal (Henningfield et al., 2023).

This is also consistent with what McCurdy and others have reported in the Southeast Asian kratom market, in which kratom leaf and natural kratom decoctions and extracts vary in appearance of the leaves, and with regional variation, as is common with most other plants, including coffee and tea. A caveat is that products should not be marketed with health claims or differential benefits based only on the color of the leaves, but rather should considered in conjunction with its other characteristics, effects, and benefits. Regulatory oversight as described further in this report and as has been passed into law in 19 states at the time of this writing can, and should, prohibit such claims that focus solely on the color of the leaves.

The foregoing appears consistent with FDA's July 2025 statements that the Agency's focus is on 7-OH and not kratom, as well as Ohio's exemption of "natural kratom in its vegetation form" and mitragynine in its December 2025 emergency scheduling action.

However, this report does not support the scheduling of mitragynine, which appears to the be the most important naturally-occurring kratom alkaloid contributing to the benefits sought by millions of kratom consumers in the US. Scheduling mitragynine would be a de facto ban on kratom.

The implications of this science-driven understanding contributes to the conclusion that a healthy and health-serving kratom marketplace should continue to include kratom products, in their naturally occurring variations, including naturally derived extracts, and including products, in which the primary, if not sole, alkaloid is mitragynine. The exception is products with boosted (artificially elevated) levels of 7-OH and highly concentrated 7-OH, whether or not the 7-OH is a semi-synthetic derivative of kratom or fully synthetic.

3.3.1 Conclusions and Recommendations

The current evidence, as a whole, suggests that natural kratom products pose a relatively low risk to the public health, especially when compared to conventional opioids or other substances of abuse. This consensus has been acknowledged by authoritative bodies: for instance, after extensive review, the WHO ECDD in 2021 declined to recommend international control of kratom, finding insufficient evidence of substantial abuse or harm. Likewise, the U.S. Department of Health and Human Services in 2018 concluded that kratom's main constituents did not warrant Schedule I placement at that time (Giroir, 2018). These conclusions were based on the scientific knowledge available and have only been bolstered by subsequent research.

3.4 Factor 4: History and Current Patterns of Abuse

Kratom has a long history of human use, particularly in Southeast Asia (SEA). For centuries, laborers and rural communities in countries including Thailand, Malaysia, and Indonesia have used kratom leaves as a traditional stimulant and remedy for mild pain related to manual labor. Typically, fresh or dried leaves were chewed or brewed into tea to increase endurance, relieve musculoskeletal pain, treat ailments like diarrhea or cough, and substitute for opium in times of shortage.

This traditional context is marked by moderate, routine consumption (often a few leaves at a time) rather than binge use, although actual amount per day can vary widely to satisfy individual needs and desires. For example, in the US, it appears that kratom intake per day and/or per consumption by people using to self-manage pain and withdrawal is higher than for many other commonly reported reasons for use such as energy (Grundmann et al., 2025).

Grundmann conducted the first major national survey of kratom use, patterns of use, reasons for use, demographics of kratom users, and risks and benefits attributed to kratom including addiction and use to treat addictions (Grundmann, 2017). His 2025 survey is another landmark survey as provides a nationally representative approach described in the article as follows:

"A cross-sectional survey utilized a non-probabilistic nationally representative sampling with a total of 11,545 respondents of which 1,049 reported current kratom use, indicating a 9.1% prevalence. The most common kratom products used in the past 30 days were pills, gummies and powder formulations. Pain relief (n = 603, 57.5%) was the most common condition for using kratom, followed by relaxation/stress relief (n = 562, 53.6%) and boost energy (n = 520, 49.6%). The reported benefits were increased energy from tea bags and improved sleep with leaf or extract powders. A significant positive correlation was found between the increased frequency of consuming kratom shots/extract powder and pain relief (p = .009 and 0.015, respectively. A higher incidence of adverse effects was reported as the amount of kratom per dose increased with gummies/capsules/tablets/pills. The lack of standardization and consistency in kratom products results in unpredictable effects, emphasizing the need for increased research to establish reliable safety guidelines for dosage recommendations." Grundmann et al. 2025, p. 1)

Although the survey was not designed to ascertain information about whether some of these "kratom" products had potentially boosted levels of 7-OH and other synthetic mitragynine derivatives, that possibility seems plausible and may have contributed to the increased reports of adverse events with some products that appear that have been associated with increased amount of kratom per dose.

A letter to the international journal, Addiction, by Grundmann and other researchers discussed these concerns. Titled " Not all kratom is equal: The important distinction between native leaf and extract products", the researchers discussed benefits of kratom

use along with potential risks and did not recommend scheduling or banning kratom, but rather the need for regulatory oversight as is emerging in increasing numbers of states across the nation discussed earlier in this report. They and many other leading kratom researchers have recommended that consumers “should consult with their health-care provider before using any kratom product, including and especially kratom extracts.” (Grundmann et al. 2024). The authors of this report agree and note that dietary product regulation, like regulation of conventional foods, drugs, cosmetics, and most recently, tobacco by the FDA generally begins with foundation of data to guide initial regulatory requirements as is beginning in 19 states. However, this is always an evolutionary process guided by science to address emerging issues, risks, and benefits in the effort to minimize risks without losing sight of the benefits and other factors that consumers and, often health professionals take into consideration in decisions to use various products.

In Southeast Asia where kratom use is more widespread in many regions, its use appears more accepted as an asset in daily life and health and not generally associated with impairment, social disruption, crime or deaths (Raffa, 2014). Overall, there are many parallels with the US experience. Including the fact that in SEA, there was and remains heavy use by some fraction of consumers and self-reports of “addiction”

Nonetheless in some countries public health concerns and/or economic factors such as government interest in collecting taxes on pharmaceutical products led to mid 20th century laws making kratom illegal have more recently been replaced with the emergence of kratom as important agricultural crops with accepted use (Charoenratana et al., 2021; Karunakaran, Marimuthu, et al., 2025).

The market for kratom began to rapidly evolve with the rise of its popularity in the U.S. in the early 2000s, though use likely dates back as early as the 1980s, brought back by American veterans returning from Southeast Asia and immigrants from those areas. Consumer demand for alternative kratom products, combined with scientific and manufacturing resources and innovation from American entrepreneurs led to rapid growth in the number of kratom extracts and as well as products artificially enhanced with higher than typically occurring natural amounts of kratom alkaloids and/or other substances? .

A pivotal shift occurred in recent years with the proliferation of products specifically marketed as “7-OH” products (Henningfield, Beyer, et al., 2025; K. E. Smith et al., 2025). These products often contain artificially elevated levels of 7-OH, often created through synthetic or semi-synthetic means, such as chemical oxidation of mitragynine, which is much more readily abundant naturally and economically viable than isolating from kratom leaves.

The marketing and apparent sales and consumption of 7-OH have increased rapidly since about 2022, and 7-OH has progressed over the past several years from a minor, little known alkaloid with little to no independent history of use to a commercially

available, highly concentrated product at the center of what FDA deems an “emerging public health threat”. Although reliable estimates of 7-OH prevalence are not available, it is plausible that the number of 7-OH consumers exceeds one million, and that growth in 7-OH use has contributed to the 9.1 percent kratom use prevalence estimate reported in 2025. Surveys measuring “kratom” use may have included respondents who understood or reported 7-OH products as kratom. Notwithstanding these uncertainties, the authors of this report concur with the FDA’s determination that both consumption and marketing of 7-OH have increased substantially in recent years.

Analysis of these commercial products revealed concentrations of 7-OH that are hundreds of times higher than would be expected in natural kratom leaf. For example, one analysis reported that 7 of 8 products tested contained 109-509% more 7-OH than would be expected in a natural product (Ogozalek, 2023), and news reports identified pill products containing 15 mg of 7-OH per pill, a dose far exceeding natural levels and one that is likely pharmacologically significant.

This is in contrast to an analysis of 13 commercial kratom products, which found 7-OH at 0.01-0.04% by weight, aligning with reports that 7-OH represents less than 0.05% of the alkaloid content, substantially lower than mitragynine. This indicates that naturally occurring levels of 7-OH in kratom are minimal compared to the primary alkaloid (Kikura-Hanajiri et al., 2009; Kruegel et al., 2019). These 7-OH products are now readily available online and in retail locations such as gas stations, vape shops, convenience stores, and corner shops, often in a vast array of formulations like gummies, tablets, and liquid shots (Hill, Henderson, et al., 2025).

3.4.1 Patterns of Use

Traditional use of kratom involves using fresh or dried leaves, sometimes powdered and encapsulated, or crushed for brewing. Many users do not view their use as abuse but as self-treatment and there is some evidence that consumers will self-titrate their intake based on product strength, dose-related GI and nausea effects, or the unpleasant taste. More recently, companies have introduced concentrated extracts and enhanced products (e.g. products enhanced with isolated mitragynine, 7-OH, or other alkaloids) to the market. These products may be used by those with higher tolerance or seeking more pronounced therapeutic effects.

Available data, such as epidemiological surveys, indicate that only a minority of kratom users escalate to very high doses or meet the diagnostic criteria for kratom use disorder (Rogers, Weiss, et al., 2024; Smith, Epstein, et al., 2024; Xu et al., 2021). This includes a cross-sectional survey of over 2,700 kratom consumers that found only 12.3% meeting criteria for past year kratom use disorder (KUD) and over 80% of these consumers had mild cases (meaning only reporting 2-3 out of 11 possible symptoms) (Garcia-Romeu et al., 2020).

A more recent survey in 2023 found a somewhat higher rate (about 25.5% of respondents met the criteria for past year KUD), with over 60% of respondents reporting their symptoms as mild (20% reported moderate, and 14% reported severe symptoms). (Hill et al., 2024), though this survey was conducted after the introduction of isolated and enhanced products to the market, which may have affected these results (this survey did not differentiate between such products and natural kratom products).

There are reports of some kratom users consuming large daily quantities or escalating quantities; however, these individuals often have prior histories of substance abuse (Hill et al., 2024; Palamar, 2021). Further, much of this use can also be categorized as self-treatment for SUD related to other substances (Garcia-Romeu et al., 2020; Henningfield et al., 2024; Stanciu et al., 2024).

With the appearance of 7-OH products, anecdotal evidence (Henningfield, Wang, et al., 2025) suggests a bifurcation in the user base with a group of existing kratom users who use natural kratom products because they find them more effective or more accessible than traditional therapeutics. This group uses these products to treat symptoms associated with ailments that are sometimes treated with other natural products, such as issues with mood, sleep, or mild pain. There is also a subset of this first group who uses kratom as a way to transition or abstain from other drugs of abuse, often with more apparent potential for harm to individual or public health. These users may not view themselves as “abusing” a drug, rather they find it a pragmatic choice for harm reduction or self-treatment.

The second group is a new group who escalate doses quickly and may have transitioned to 7-OH either to avoid consuming large quantities of natural kratom plant matter, or are seeking intense recreational effects. It is unknown what proportion of these 7-OH consumers are using for therapeutic or recreational purposes, but it is possible that a complete ban on 7-OH products may lead to harm from 7-OH consumers reverting back to another drug of abuse.

3.4.2 Conclusions and Recommendations

The history and current patterns of use demonstrate a divergence between traditional kratom use and the recent introduction of high-potency 7-OH products. Kratom has a long history of human use with relatively low-level patterns of abuse (more akin to caffeine or tobacco in some contexts), whereas 7-OH has essentially no historical use until recent years. Companies in this space have effectively created a new class of products that market themselves under the guise of “kratom” products.

This context is vital for appropriate regulatory treatment of natural kratom products and to distinguish them from synthetic or semi-synthetic products, or products with enhanced levels of kratom alkaloids or metabolites. These products should be addressed without penalizing the much larger population of kratom consumers who are

not engaging in high risk behavior but rather are using as a means of harm reduction or necessary self-treatment.

As discussed previously in Factor 4, balanced regulatory oversight of kratom products, consistent with approaches emerging in 19 other states, is warranted. Such oversight should be accompanied by continued, and where appropriate expanded, surveillance and research to better characterize both risks and benefits and to inform the evolution of labeling and regulatory standards over time. The emergence of novel products, including 7 hydroxymitragynine and other mitragynine related derivatives, increases the urgency of establishing a clear research and regulatory framework.

Placement of a substance in Schedule I can have a research deterring effect, although such action may be appropriate for certain high risk compounds, such as 7 hydroxymitragynine. For other substances, including kratom and mitragynine, which are not currently scheduled, research is not subject to these barriers. Accordingly, Ohio is encouraged to expand its own research efforts, including by supporting or incentivizing universities and biomedical researchers to pursue both federal and state funding to advance scientific understanding in this area.

Laws that make possession of products felony crimes, such as Schedule I placement in state and federal CSAs are impediments to the willingness of people, especially pregnant women, to discuss their possession and use with health professionals and we urge the Ohio Board of Pharmacy to consider such negative unintended consequences of scheduling kratom and mitragynine rather than providing balanced regulation.

3.5 Factor 5: Scope, Duration, and Significance of Abuse

Modern surveys and studies reveal that kratom is used by a diverse range of consumers for a variety of purposes, though primarily for reasons similar to use of other products relied on as natural and botanical therapeutics. These reasons range from providing the consumer with improved mood, help with sleep, or help with mild or moderate pain; it is rare that use is purely recreational.

Several large online and academic surveys in the U.S. (2016–2025) have consistently found the top self-reported reasons for kratom use to be: managing pain (acute and chronic), alleviating anxiety or depression, increasing energy or focus (as a caffeine alternative), and self-treating opioid withdrawal or dependence (Grundmann et al., 2025; Grundmann, Veltri, Morcos, Knightes, et al., 2022; Hill et al., 2024; Smith, Dunn, Grundmann, et al., 2022b; Smith, Panlilio, Feldman, et al., 2024b). Notably, using kratom to reduce or quit other drugs (especially opioids, stimulants, or alcohol) is a recurring theme – a significant subset of users are former opioid-dependent individuals who report kratom as a harm-reduction substitute that helps them avoid relapse into more dangerous opioids. These reasons broadly mirror those documented in Southeast Asian contexts (e.g., users also report using kratom for pain, stamina, and as a

substitute for other drugs of abuse (Govarthnapany et al., 2025; Singh et al., 2023; Singh, Mathandaver, et al., 2025; WHO, 2021).

3.5.1 Prevalence of Kratom Use

Kratom use prevalence is difficult to precisely quantify due to lack of inclusion in past national drug surveys and issues in methodology that make direct comparisons difficult, as discussed elsewhere (Henningfield, Grundmann, et al., 2022). Previous attempts at estimating total kratom use prevalence in the United States (U.S.) found results ranging from 1.8 million to over 16 million users in the U.S (Henningfield, Wang, et al., 2022a).

The National Survey on Drug Use and Health (NSDUH) first included questions on kratom in 2019. Results suggested an estimated 0.7% of the U.S. population (roughly 2.1 million people) used kratom in the past year as of 2019. Lifetime use was about 1.4% of the population. These estimates were substantially lower than earlier estimates of 3-5 million consumers (Henningfield et al. 2018). In 2024, NSDUH data suggested lifetime kratom use was increasing (to ~1.9%, with past-year use around 0.4%) but still far lower than estimates by other nationally representative surveys and kratom marketers that suggested that there were more than 10 million kratom consumers, and Grundmann et al.'s 2025 survey suggesting potentially 20 million or more kratom consumers nationwide (Henningfield, Grundmann, et al., 2022). For comparison, past year cannabis use has been appears to be approximately 15%, and opioid pain reliever misuse, 3.3% (SAMHSA, 2025). Importantly, NSDUH does not distinguish 7-OH, and other synthetic kratom derivatives. Hopefully this survey will soon be modifies to collect such vital data.

Table 4: Kratom and 7-OH Prevalence and AE Data from Federal Data Sources

Survey/Data Source	2022 Findings (Kratom)	2026 Findings (Kratom)	2025 Findings (7-OH)
Drug Abuse Warning Network (DAWN)	No reports in DAWN from 1970 to 2011 "New DAWN" began in 2019 and has not listed kratom	Kratom was not mentioned in "New DAWN" annual reports from 2022-2024 "New DAWN" ceased data collection on June 13, 2025	"7-OH" added to DAWN slang terms database in 1Q25
Monitoring the Future (MTF)	Kratom use is not assessed	Kratom use is not assessed	
National Forensic Laboratory Information Service (NFLIS)	Since 2016 NFLIS did not include mitragynine/kratom reports because the rates are below the threshold for inclusion	Not included in NFLIS reports because levels have been relatively stable and low since about 2015 Mitragynine-related information is available through the NFLIS DQS-P (Data Query System - Public) As of January 13, 2026, 278 mitragynine reports for 2024; 209 mitragynine reports for 2025 (partial year)	24 reports of 7-OH and 1 report for mitragynine pseudoindoxyl in 2025
National Survey on Drug Use and Health (NSDUH)	Paid responders on national panel (n = 67,625). 2019 Prevalence Lifetime Use: 1.4%; Past Year Use: 0.7%	Paid responders on national panel (n = 70,241). 2024 Prevalence Lifetime Use: 1.9%; Past Year Use: 0.4% Note that about 2% of lifetime NSDUH kratom use reports were from 12–17 year-olds, and about 4% of past-year kratom use reports were from 12-17 year-olds.	

Survey/Data Source	2022 Findings (Kratom)	2026 Findings (Kratom)	2025 Findings (7-OH)
Treatment Episodes Data Set (TEDS)	No reports. This does not mean there were no reports but suggests subthreshold signal	No reports. This does not mean there were no reports but suggests subthreshold signal	
FDA Adverse Event Reporting System (FAERS)	Not included	1,468 FAERS reports involving "mitragynine" as a suspect or interacting product were identified. Of these, 1,370 reports (93.3%) were classified as serious. Among all reports, 721 cases reported death as an outcome. The earliest FAERS report was submitted in 2008. In 2024, there were 205 "mitragynine" reports. Of these, 190 (92.7%) were serious cases. Among these the following outcomes were reported: Other serious outcome: 125 cases, Death: 62 cases, Hospitalization (initial or prolonged): 57 cases, Disability: 23 cases, Life-threatening event: 17 cases, Congenital anomaly: 1 case There were also 15 non-serious cases reported. Source: FAERS Public Dashboard	14 unique cases involving 7-OH, including two fatalities
National Poison Data System (NPDS)	Not included	In 2024, 1,645 cases involving kratom, including 1,027 single substance exposure cases. Of single substance kratom cases, over half were 20+ years of age (820), intentional	53 cases, including 37 single substance exposure cases.

Survey/Data Source	2022 Findings (Kratom)	2026 Findings (Kratom)	2025 Findings (7-OH)
		exposures (608), and treated in a health care facility (803). 7 deaths were reported among single-substance kratom cases.	There were 24 abuse cases, including 16 single substance abuse cases
DEA Toxicology Testing Program (DEA TOX)		Between 2019 and 2025, 103 cases were identified where mitragynine, 7-OH, or mitragynine pseudoindoxyl were detected	

Note that that some surveys that provide information about the use and effects of kratom do not provide a basis for estimating prevalence. This includes the Substance Abuse and Mental Health Services Administration's Treatment Episode Data Set (TEDS), which records reasons for drug treatment admissions or the Drug Abuse Warning Network (DAWN); neither of these data sources have ever flagged kratom as an emerging pharmacological threat. This is similarly the case with respect to DEA's NFLIS which does not provide an estimate of prevalence of use, and National Drug Threat assessments which have never listed kratom as a National Drug Threat.

Thus, while these data are helpful in elucidating the landscape of kratom use, it is vital to remain cognizant of the limitations of each of these sources of data, especially as kratom has only recently been added to these surveys, and 7-OH even more recently added, if at all. For instance, the Board's report noted that in the first seven months of 2025, U.S. poison control centers received 1,690 reports involving kratom – surpassing the total number of kratom-related calls in all of 2024. However, it is important to note that until recently (February 2025), all kratom-related calls to U.S. poison control centers were logged under a general kratom code.

Thus, while 7-OH has been tracked separately since then, the full distribution of calls for natural kratom vs. other kratom-related compounds is unknown. Additionally, calls to U.S. poison control centers are, in most cases, self-reports or second-hand reports without full knowledge of number of substances ingested. Therefore, there is no way to be absolutely certain that reports of single-substance kratom cases truly included only kratom (and not other substances concomitantly).

Similar limitations apply to adverse event data derived from the FDA Adverse Event Reporting System (FAERS). FAERS is a passive surveillance system that relies on voluntary reporting and is therefore subject to substantial underreporting, reporting biases, and the absence of independent verification of causality. In the context of kratom, submissions may disproportionately reflect more severe or atypical outcomes, particularly in light of heightened regulatory scrutiny and media attention. Limitations in FAERS were also discussed in FDA's July 29 released data (Reissig et al. 2025).

Misclassification is also common for botanical products: mitragynine may be recorded under multiple product names, general "herbal supplement" categories, or nonspecific descriptors, and 7-OH is frequently not captured at all. Additionally, FAERS cannot establish causal relationships, and many kratom-related reports may involve polydrug exposure, co-ingestion of other substances, or incomplete toxicological data, further complicating efforts to attribute reported outcomes solely to kratom.

This recent inclusion of mitragynine and 7-OH to FAERS and National Poison Data System (NPDS) is notable, but those data must also be interpreted in context. With kratom being consumed monthly by millions in the U.S., a few thousand annual calls (many of which are likely minor or precautionary cases) is a relatively low incident rate. For comparison, substances like caffeine, dietary supplements, or common medications also generate

thousands of poison center calls annually, often without indicating a major public health menace.

The severity of kratom-related calls is generally low in most cases: prior analyses (Eggleston et al., 2019; Post et al., 2019) found that while minor symptoms (nausea, tachycardia, drowsiness) are frequently reported, serious outcomes (such as life-threatening conditions) are uncommon and usually involve polydrug use.

3.5.1.1 Internet Monitoring

Internet based monitoring of user reports can provide qualitative information that may be useful in informing policy and regulatory considerations, but such data must be interpreted cautiously and within the limitations discussed in this section. These reports generally do not allow for assessment of their reliability, nor do they establish whether the reported effects attributed to a specific substance were in fact caused by that substance or by other contributing factors. In addition, such data rarely provide an appropriate basis for comparison with control conditions, as would be expected in scientific studies designed to evaluate the risks and benefits of substances.

Erowid is an online forum where individuals can post anonymous reports describing their experiences after taking licit and illicit substances. There were N=613 experiences in the Erowid Experience Vaults for 'Kratom (also Mitragyna speciosa)' available as of 12 January 2026.

This qualitative summary focused on all experience reports under the Erowid topics 'Bad Trips' (n=3), 'Train Wrecks & Trip Disasters' (n=2), and 'Health Problems' (n=31; n's not mutually exclusive, since a report could appear under multiple topics), which represent experience reports biased toward negative outcomes.

Reports are provided by individuals and not medical practitioners and are subject to the usual limitations of self-report data including but not limited to recall bias. Adverse effects where kratom was reportedly used concomitantly with other drugs or foods are separated under subheadings because it is not possible to parse out the cause of the reported adverse effects when other substances are involved. Reports should be interpreted with caution. Note also that no concomitant substances being reported does not mean that no concomitant substances were taken. Erowid Experience IDs (ExpIDs) are provided.

3.5.1.1.1 Adverse Effects

General Adverse Effects, Including Gastrointestinal Effects

With Concomitant Substances Reported

Among the n=3 'Bad Trips' experience reports, kratom use was secondary to psychedelics in n=2 reports, namely smoked salvia extract and insufflated ketamine, respectively (ExpID: 116546; ExpID: 114588); in these reports where kratom was secondary, the reporters were experienced with substance use in general and kratom in particular ("I take 7.5g Kratom 2 times daily" and "daily user of kratom") and reported experiencing visual hallucinations,

dissociation, apathy, nausea, sensory overload, anxiety, and depression. Doses of kratom were relatively lower in these two reports (7-7.5 g or 0.06-1 g/kg body mass, oral).

The reporter who used kratom concomitantly with ketamine stated: "I'm never combining them again and can't recommend anyone else to combine them either". Among the n=31 'Health Problems' experience reports, one reporter (female, age 43 years; ExpID: 116269) with a history of alcohol use disorder who had "taken Kratom almost daily for over 10 years, and I have never had any withdrawal if I went without it" reported experiencing sweating, nausea, involuntary movements, tinnitus, anxiety, restlessness, and body pain after taking prescription naltrexone (50 mg oral) concomitantly with kratom (5 g or 0.08 g/kg oral). They reported visiting the ER, where healthcare practitioners described the reason for the visit as "alcohol withdrawal". A male (age unknown; ExpID: 67650) reported experiencing sedation, nausea, dysphoria, constipation, abdominal pain, and vomiting after taking kratom (12 g or 0.1 g/kg oral) stirred in grape juice.

With No Concomitant Substances Reported

A male (age 25; ExpID: 98883) reported feeling of relaxation, euphoria, constipation, nausea, and severe abdominal pain that lasted for weeks after taking kratom (6 g or 0.08 g/kg) daily for a few days. This individual had a history of pancreatitis. A male (age 24; ExpID: 103310) reported experiencing abdominal pain and had an esophagogastroduodenoscopy which identified intestinal inflammation after taking kratom (4 g or 0.07 g/kg oral) once per week for approximately one year. They reported: "now I take kratom a lot less (once or twice a week) I take it with black cumins seed oil and my intestinal problems have reversed significantly." A male (age unknown; ExpID: 79456) reported experiencing nausea, vomiting, and facial swelling after taking a relatively large dose of kratom (18 g or 0.2 g/kg oral).

<u>Adverse Effects Related to Renal and Urinary Issues</u>

With No Concomitant Substances Reported

In the n=1 'bad trip' where no concomitant substance was reported, a male (age not reported; ExpID: 56786) reported taking kratom at an uncommonly large dose of 41.6 g or 0.6 g/kg over the course of 24 hours; the effects reported include tiredness, loss of concentration, nausea, miosis, urinary retention (which did not require medical intervention), feeling of relaxation, and dissociation. These symptoms lasted approximately one day.

Among the n=31 'Health Problems' experience reports, a male (age unknown; ExpID: 51161) reported experiencing feeling drunk, headache, lethargy, depression, constipation, abdominal pain, urine discoloration, urinary retention, and fever after consuming kratom (orally) approximately once per week for a few months. A male (age unknown; ExpID: 45265) reported experiencing euphoria, urinary retention, and hematuria after repeated kratom use (dose/duration unknown). A male (age 36; ExpID: 113752) reported

experiencing abdominal pain, erectile dysfunction, testicular pain, and dysuria after taking kratom (4 g or 0.03 g/kg oral) infrequently for approximately three months.

Adverse Effects Related to the Cardiovascular System, Including Syncope

With Concomitant Substances Reported

A female (age 20; ExpID: 96240) reported feeling drunk, impaired motor function, thirst, increased energy, aphrodesia, increased mood, nausea, euphoria, vomiting, headache, tachycardia, and hot flashes after taking kratom (15 g or 0.3 g/kg oral) concomitantly with alcohol. They stated: “I think the alcohol is more to blame for my nausea, and the kratom could have been a positive experience if I'd eaten less of it and hadn't drank, too (the label on the bag said not to combine with alcohol).”

A male (age 18; ExpID: 102572) reported experiencing feeling of relaxation, sedation, impairment of motor function, shallow breathing, disorientation, confusion, and nausea after taking kratom (13 g or 0.2 g/kg oral) concomitantly with carisoprodol, alprazolam, and cannabis.

A male (age not reported; ExpID: 60718) reported experiencing euphoria, vision blurred, convulsions, syncope, bradycardia, and impaired motor function after taking kratom (1 tsp oral) concomitantly with psychedelic mushrooms and cannabis. A male (age 62; ExpID: 100175) reported experiencing fatigue and ‘diaphragm cramp’ after taking kratom (5 tablespoons approximately once per week for approximately one year) concomitantly with alcohol and caffeine.

A male (age 22; ExpID: 99430) reported experiencing feeling drunk and syncope after taking kratom (3 g or 0.04 g/kg oral) concomitantly with alcohol. A female (age 47; ExpID: 86136) reported experiencing nausea, headache, vomiting, chest pains (from smoking), laryngitis (from oral), increased thirst, and apathy after taking kratom (dose not reported) orally and smoked concomitantly with (and as a substitute for) methadone.

With No Concomitant Substances Reported

Among the n=2 ‘Train Wrecks & Trip Disasters’ experience reports, one was unrelated to kratom use and instead reported local drug taskforce intervention in a kratom shipment to the individual’s residence (ExpID: 44892).

In the other ‘Train Wrecks & Trip Disasters’ report, a male (age 23; Exp 105426) described kratom as their “stim of choice” (potentially implying past experience with kratom use) and reported sudden heart palpitations, tachychardia, pre-syncope, and syncope after reportedly taking 4.6 g or 0.05 g/kg ground/crushed kratom PO. The individual reportedly recovered after approximately 40 minutes and did not seek medical attention due to their rural location.

Among the n=31 ‘Health Problems’ reports, a male (age 25 years; ExpID: 81443) reported nausea, feeling drunk, increased thirst, impaired motor function, heart palpitations,

tachycardia, dizziness, and anxiety after taking kratom (7 g or 0.09 g/kg oral). This individual had a history of premature ventricular contractions. Another male (age 23 years; ExpID: 115740) reported experiencing dissociation, impaired cognition, tachycardia, convulsions, and panic attacks after taking kratom intermittently for approximately two years. They reported that “I've been to a neurologist and have had a general practitioner take blood samples and all that; everything came back normal and I spent quite a large sum on these tests.” A male (age not reported; ExpID: 73969) reported experiencing tachycardia, anxiety, nausea, dizziness, and tremors after taking kratom (2 g or 0.03 g/kg oral).

Adverse Effects Related to the Liver

With Concomitant Substances Reported

Among the n=31 ‘Health Problems’ experience reports, a male (age 37; ExpID: 93736) reported euphoria, abdominal pain, difficulty breathing, constipation, ALT increased, and AST increased after taking “Kratom Extract that is supposed to be the strongest concentration ever, .25g being equal to 10g regular kratom” (0.25 g or 0.003 g/kg oral) concomitant with raw seafood. A female (age 26; ExpID: 106023) reported experiencing dissociation, headache, nausea, fever, chills, sweating, tiredness, ALT increased, urine discoloration, and jaundice after taking 2-3 tsp kratom orally daily for two weeks concomitantly with alcohol. Similarly, a male (age 26; ExpID: 100091) who self-reported that “

Test results in the past have suggested that I have a somewhat sensitive liver” reported sedation, euphoria, nodding, nausea, vomiting, dehydration, liver enzymes elevated, jaundice, body shakes, and sweating after taking kratom (10 g or 0.1 g/kg orally five times over two weeks) concomitantly with alcohol and cannabis. They reported that they were “discharged from hospital after a week with a diagnosis of a drug-induced hepatic injury.”

The fact that many kratom consumers report use for self-management of pain and addiction, including to alcohol and likely have histories of chronic acetaminophen use and alcohol consumption greatly complicates determination of the potential contribution of kratom to liver diseases.

With No Concomitant Substances Reported

Among the n=31 ‘Health Problems’ experience reports, a female (age 22; ExpID: 88678) reported tiredness, loss of appetite, abdominal pain, jaundice, increased alanine aminotransferase (ALT), increase aspartate aminotransferase (AST), and hepatitis after taking kratom (3 g or 0.04 g/kg oral) daily for two weeks.

A male (age not reported; ExpID: 71949) reported euphoria, abdominal pain, vomiting, chills, urine discoloration, nausea, jaundice, cholestatic hepatitis, elevated ALT, elevated AST, elevated alkaline phosphate, elevated bilirubin, and elevated serum albumin after taking a kratom extract (4 g or 0.06 g/kg). They concluded that “It very well could have been that the extract was tainted with lab chemicals.” A female (age 20; ExpID: 112623)

reported experiencing dissociation, nausea, dizziness, tiredness, vomiting, fever, abdominal pain, hepatitis, elevated ALT, and elevated bilirubin after taking kratom (2 g or 0.04 g/kg oral).

A male (age not reported; ExpID: 102799) reported experiencing headache, fever, chills, pain, and jaundice after taking kratom (7 g or 0.09 g/kg) daily for several months. Medical professionals reportedly told this individual that they had liver toxicity. A male (age unknown; ExpID: 95669) reported experiencing liver enzymes increased and jaundice after taking kratom (4-10 tablespoons oral) daily for one week. They reported that: “I had a liver biopsy and the diagnosed the blockage of the bile duct caused by a unknown substance... After I started on the Ursodiol, I recovered really fast.”

A reporter reported that their girlfriend (female, age 38; ExpID: 96857) had experienced jaundice, chest pain, shortness of breath, and liver enzymes increased after taking a relatively high dose of kratom (12 g or 0.4 g/kg). A male (age 23; ExpID: 105711) reported experiencing abdominal pain, urine discoloration, jaundice, and bilirubin increased after taking kratom (8 g or 0.1 g/kg oral) in extract form. They stated: “I went to one of those 24 hour clinics the next morning, and was informed that I had drug-induced hepatoxicity... I am well aware that my experience was not with 'pure' kratom leaves and that the extracts in those capsules likely have some sort of synthetic filler.”

Adverse Effects Related to Dependence

A female (age unknown; ExpID: 69770) reported experiencing euphoria, analgesia, increased energy, aphrodesia, nausea, depression, tolerance, and withdrawal after “long-term” kratom use (oral). They reported that “It’s probably not as addictive as opiates, but I personally was addicted to it for a while. More psychologically than physically. I wasn’t a super-user so the withdrawal wasn’t physically unpleasant so much as depressing... maybe this is just a coincidence. Maybe kratom isn’t the crook, but I think that it’s something to keep in mind.”

A male (age not reported; ExpID: 107532) reported experiencing withdrawal systems after taking a relatively large dose of kratom (50 g or 0.6 g/kg oral) daily for approximately one year concomitantly with oxycodone and naltrexone. This individual reported ceasing oxycodone and continuing with kratom before taking a single dose of naltrexone, at which point withdrawal symptoms began. They stated: “The reason I am writing this is so no one ever has to feel the way I did by taking naltrexone why [sic] under the influence of kratom. I would not take any naltrexone for at least 2-3 days after quitting kratom.”

A male (age 50; ExpID: 101874) reported experiencing blood pressure increased and withdrawal after escalating kratom use at an unspecified dose and duration. They stated that: “The withdrawal was bad but not overwhelming... I think kratom is fine in moderation like anything else.”

3.5.1.1.1.1 Reasons for Use

Reasons for use in the experience reports above were not commonly reported, but included harm reduction (choosing/substituting kratom over/for alcohol, opioids, and other substances), as an antidepressant, and for a legal high.

3.5.1.1.1.2 Comparisons between Kratom and 7-OH

Among the n=15 experiences in the Erowid Experience Vaults for '7-Hydroxymitragynine (also 7-OH; 7-OH-Mitragynine; 7-HO-Mitragynine; 7-OH-MIT)' as of 12 January 2026, one male (age 29; ExpID: 118316) experienced with kratom use stated that they would "rank the experience of taking 3x14mg of [7-OH alone] higher than most kratom experiences I have had".

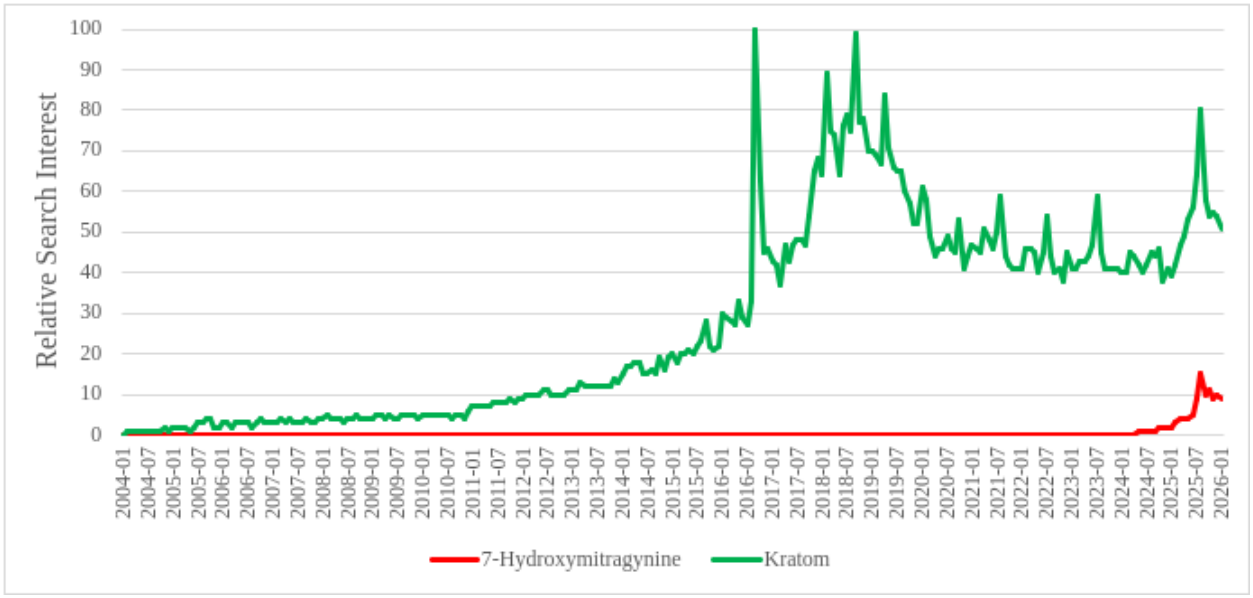
A male (age 31; ExpID: 118938) reported that "Immediately after dosing [7-OH] I noticed this felt nothing like regular kratom... It's significant more addictive than kratom. More clean than kratom and I'd rate it up there with most morphine derivatives."

A male (age 36; ExpID: 118770) reported that "I'm a semi-regular Kratom user... I've never had any withdrawals from Kratom even after taking it multiple days in a row, but have heard those stories. 7-hydroxy is different. This product is a legitimate narcotic."

3.5.1.1.1.3 Online Search Interest

Online search interest in 'Kratom' (Plant topic) and '7-Hydroxymitragynine' (Pill topic) were assessed with Google Trends (U.S. only). Search interest in kratom increased steadily from 2004 to 2010 before increasingly non-linearly through and peaking circa 2018 before decreasing to a constant level from 2022 to 2024. Search interest in kratom spiked again from 2024 to 2025, exactly when search interest in 7-OH increased. It is likely that increased interest in kratom in the last two years was simply a result of increased interest in 7-OH.

Figure 3 Relative Google Trends Search Interest in '7-Hydroxymitragynine' (7-OH) and 'Kratom' from 2004 to 2026



3.5.2 Conclusions and Recommendations

These reports, along with those reported in the 2025 7-OH 8 Factor Analysis (Henningfield, Wang, et al., 2025), though inherently limited by self-reporting, recall, bias, and incomplete disclosure of concomitant substance use, provide qualitative insight into adverse events potentially related to kratom consumption and use patterns associated with kratom and 7-OH products.

From a policy and regulatory perspective, such qualitative data are important to consider but also vital to mind the limitations of the reliability of such reports.

Dependence and withdrawal related to use of natural kratom products were described by a minority of users and were generally characterized as milder than traditional opioids; however, severe precipitated withdrawal was reported when naltrexone was taken shortly after kratom use, consistent with opioid receptor antagonism.

Many of the more severe or atypical adverse events occurred in the context of polydrug use, including alcohol, benzodiazepines, opioids, psychedelics, and prescription medications, with several reporters attributing harms to drug combinations rather than kratom alone. Reasons for kratom use were inconsistently reported but included harm-reduction substitution for alcohol or opioids, mood or energy enhancement, analgesia, and legal psychoactive use.

In contrast, the limited number of Erowid reports involving 7-OH consistently described it as qualitatively distinct from kratom leaf, with users characterizing 7-OH as more potent, more opioid-like, and more addictive, frequently drawing comparisons to morphine or other narcotics and reporting withdrawal effects not experienced with kratom.

Complementary Google Trends data show that U.S. search interest in kratom rose steadily until approximately 2018, stabilized from 2022 to 2024, and then increased again from 2024 to 2025 in parallel with a sharp rise in searches for 7-OH, suggesting that recent increases in kratom-related search activity are likely driven by growing interest in 7-OH rather than renewed demand for traditional kratom leaf products.

Kratom has been sold in the U.S. for at least two decades (and there is some evidence that it has been marketed in this country for longer). Even so, documented growing use of kratom has been a recent occurrence and the incidence rate of patterns of escalating harmful use and negative health outcomes are relatively rare.

Several observational surveys (Grundmann, 2017; Grundmann et al., 2025; Smith et al., 2021) found that the majority of U.S. kratom consumers are adults, often middle-aged, and a large proportion had histories of other substance use disorders or chronic pain conditions. For example, Grundmann et al,. 2025 found that 55% of kratom users were men; the majority of whom were 30-49 years of age. More than half were college attendees or graduates and had incomes ranging from $30-149,000. Most were employed and were using kratom for pain relief and stress relief. Youth or adolescent use has remained low;

national surveys such as Monitoring the Future have not added it to youth surveys and poisoning data show very few cases relative to adults.

Although the Board and Governor Dewine have discussed kratom-related deaths and deaths in which "kratom was listed as a cause", case by case evaluations of deaths in which kratom may have been consumed have largely been found to have involved other substances and/or reasons for the death. For example, on February 6, 2018, FDA made the following statement on its website (FDA, 2018): "we now have 44 reported deaths associated with the use of kratom….Overall, many of the cases received could not be fully addressed because of limited information provided; however, one new report of death was of particular concern. This individual had no known historical or toxicological evidence of opioid use, except for kratom. We are continuing to investigate this report" It was eventually determined that the death was the result of an automobile accident without evidence that kratom use was a factor.

In fact, kratom only deaths appear rare and have not been listed as contributing to the national drug overdose death epidemic. Specifically, the DEA has never listed kratom as a public health threat in any of its annual National Drug Threat Assessment reports and has not listed kratom alkaloids in any of its National Forensic Laboratory Information System (NFLIS) reports since 2016. Furthermore, DEA does not discuss kratom overdose or addiction risks (in contrast to its statements on opioids) but does note that it has listed kratom as a Drug and Chemical of Concern, meaning that it monitors kratom closely.

Note that NIDA has concluded that deaths involving only kratom have been rare for more than a decade. The Assistant Secretary of Health and FDA both came to similar conclusions in 2018 (Giroir 2018), and 2024, respectively, as discussed below. Taken together, the conclusions of Assistant Secretary Giroir that whereas the role of kratom is drug overdose death is unclear because most deaths involve other substances or conditions, banning kratom could foreseeably lead to thousands of overdose deaths by kratom consumers relapsing to the use of opioids and other drugs (Giroir, 2018 and discussed below by Henningfield et al., 2024).

It is not clear when FDA stopped listing numbers of estimated kratom deaths but in February 2024 it issued the following statement on its "FDA and Kratom" website:

> In rare cases, deaths have been associated with kratom use, as confirmed by a medical examiner or toxicology reports. However, in these cases, kratom was usually used in combination with other drugs, and the contribution of kratom in the deaths is unclear.

As of this writing, FDA has not changed this statement.

Limitations in ascertaining kratom's potential involvement in cases of potential or known kratom exposure have been discussed in detail elsewhere, e.g. (Henningfield et al., 2024; Papsun et al., 2023). This includes the fact that in contrast to many drugs of abuse and substances that carry substantial overdose risk and in which there is an understanding of

the signature apparent mechanisms and pathophysiological basis of death, (e.g., respiratory depression due to opioids) kratom associated deaths show no such pattern with most listed as “kratom intoxication”, or simply attributed base one evidence of exposure or “high” levels of mitragynine even though a lethal oral mitragynine dose has not been established for animals or humans (Henningfield et al., 2024, 2022).

Neither this report nor prior publications by Henningfield and colleagues, or other leading kratom researchers, assert that kratom is without risk. Rather, the prevailing conclusion of NIDA, FDA, and the peer reviewed literature is that kratom associated deaths are relatively rare when compared with substances driving the ongoing U.S. overdose crisis. As summarized in a recent toxicological assessment, available human epidemiology, forensic toxicology, and animal data are consistent with a broader margin of safety and lower overall overdose risk relative to the primary contributors to the overdose epidemic.

Recent studies and evidence have not changed the conclusion of the following peer reviewed assessment of kratom toxicology:

“None of the foregoing should be taken to imply that kratom or MG [mitragynine] is without potential as a primary or contributing cause of death in some cases, but rather that the human epidemiology, forensic toxicology, and animal studies are consistent with the profile of products with a broader margin of safety and lower overall risk of overdose as compared to the main contributors to the US drug overdose epidemic.” (Henningfield et al., 2024)

We agree with Papsun et al. (2023) that ‘Current interpretation of MG [mitragynine] in a forensic case is subject to a number of confounding factors, including limited chemical stability, appropriate chemical analysis that ensures separation and identification of pertinent alkaloids, the lack of regulation of commercial kratom products and risks of contamination and adulteration, underlying medical conditions, and frequent detection with other substances.’ Suggestion of a lethal dose of kratom or MG [mitragynine] in humans should be based on the known toxicology or pathophysiological effects of kratom or its constituents and on animal studies of LD50 with appropriate algorithms.” (Henningfield et al., 2024, p. 9)

More recent data have not changed this assessment, except with respect to highly concentrated 7-OH products which are the focus of FDA and Secretary of Health concerns, which our Sept. 29, 2025, 7-OH 8FA supported (Henningfield, Wang, et al., 2025).

It is also possible, if not plausible that increases in prevalence of kratom use since the 2022 Pinney Kratom 8 Factor (Henningfield, Wang, et al., 2022a), is related to the emergence of synthetic or semi-synthetic mitragynine-related compounds such 7-OH which have also coincided with increases in signals of adverse events or negative health outcomes associated with kratom. It is vital that surveys and those trained to report incidents are familiar with these products and can distinguish natural products from these newer compounds for which there are little data regarding their safety. Additionally, regulation of product labeling and packaging (such as those adopted through Kratom Consumer Protection Acts in 19 states) could reduce the risk of deaths that are associated with

products that may be marketed as kratom but are actually adulterated or contaminated products, and/or products that contain no kratom at all, but rather are synthetic derivatives.

These data highlight the need for a nuanced approach to regulation stratified by relative risk that would provide an avenue for continued access for potentially tens of thousands of daily kratom users who would otherwise shift to black market opioids, or illicit sources of 7-OH, which would inadvertently worsen the public health opioid epidemic.

3.6 Factor 6: What, if any, Risk is there to the Public Health

While there have been individual reported cases of problematic kratom use, the totality of the data (as described in Factors 4 and 5) indicate that the overall public health risk posed by kratom in its natural form is relatively low. This is supported by multiple scientific and regulatory reviews (Giroir, 2018; WHO, 2021) that did not find kratom to be an imminent hazard. The majority of adverse effects associated with use of kratom are related to gastrointestinal issues (nausea, vomiting, constipation) that may contribute to users self-titrating their use before they experience the level of rewarding effects associated with traditional drugs of abuse. Regular high-dose use of kratom has the potential to illicit dependence and withdrawal symptoms, though as reported in surveys and in internet monitoring (Factor 5), these symptoms are typically less severe than from classical opioids and many users taper without medical intervention or relying on inpatient care. The public health burden of availability of natural kratom products, therefore, exists but has been relatively modest compared to other drugs of abuse, and may be contributing to users abstaining from those other more harmful substances.

In contrast, available evidence indicates that 7-OH poses a greater risk to the public health, driven by 7-OH's opioid pharmacology combined with its appearance in highly concentrated, unregulated products. An important study informing this conclusion was conducted by Zuarth Gonzalez et al. (2025) and identified a risk of potentially lethal respiratory depression at high doses. It is notable however that documented incidence of 7-OH-attributable fatalities is low, and it appears 7-OH has not caused a wave of overdose deaths despite its growing availability. This may be due to the fact that most use of 7-OH is oral (slower onset, lower risk than injected opioids) and 7-OH's partial opioid agonist nature may moderate its overdose potential to a degree. However, an unregulated market has the potential to cause an "arms race" in providing escalating doses to consumers. Additionally, that products containing concentrated or enhanced levels of mitragynine-like compounds are being sold in forms attractive to children (gummies, candies) is alarming. Even adults who are naive to opioids might overdose if they misjudge these products (thinking "herbal supplement" and not realizing potency). Thus, as identified by the Board report, unregulated availability of these products poses a risk of accidental or uninformed misuse by vulnerable groups.

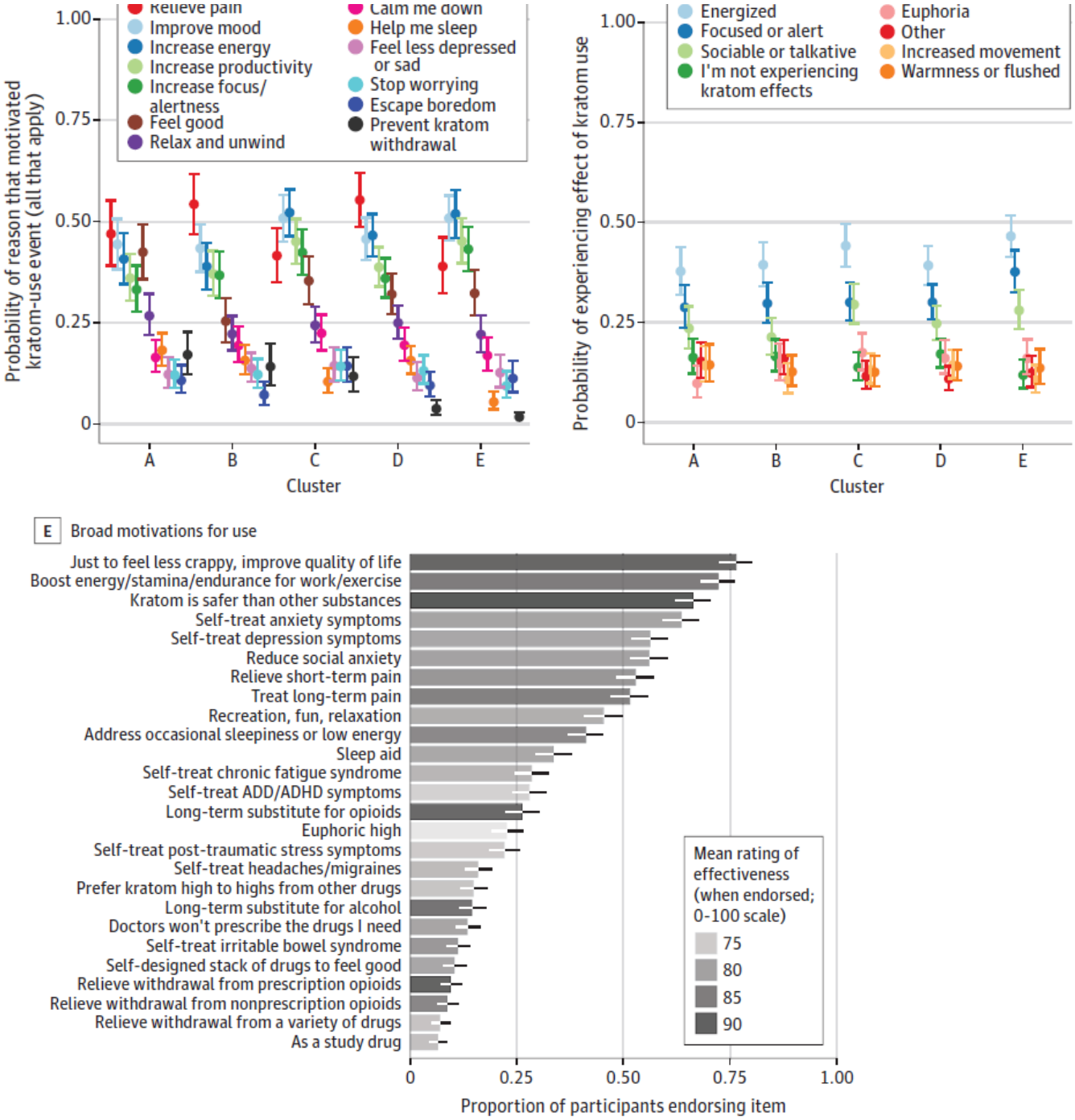
3.6.1 Reasons for Use and Benefits of Use

It's important in regulating kratom and mitragynine-related compounds to consider any public health benefits that may be lost if these substances were scheduled. As mentioned

above in Factor 5, a subset of individuals use kratom as a safer alternative to opioids for pain or as a self-treatment for opioid dependence. As HHS in 2018 and 2021 and WHO in 2021 noted, banning kratom could have the unintended effect of driving people to illicit drugs of abuse, such as classical opioids, increasing the risk of overdose deaths. Similarly, WHO noted potential therapeutic applications of kratom or its components that merit further research, and outright placement in Schedule I may stifle that research. This does not mean kratom is without risks – but those risks (e.g., a few hundred poison calls, some emergency room visits for withdrawal) are generally lower severity than risks from Schedule I opioids and should be weighed against kratom's apparent benefits.

Reasons for using kratom range from providing the consumer with improved mood, help with sleep, or help with mild or moderate pain; it is rare that use is purely recreational. Several large online and academic surveys in the U.S. (2016–2023) have consistently found the top self-reported reasons for kratom use to be: managing pain (acute and chronic), alleviating anxiety or depression, increasing energy or focus (as a caffeine alternative), and self-treating opioid withdrawal or dependence (Grundmann et al., 2025; Grundmann, Veltri, Morcos, Knightes, et al., 2022; Hill et al., 2024; Smith, Dunn, Grundmann, et al., 2022b; Smith, Panlilio, Feldman, et al., 2024b). Notably, using kratom to reduce or quit other drugs (especially opioids, stimulants, or alcohol) is a recurring theme – a significant subset of users are former opioid-dependent individuals who report kratom as a harm-reduction substitute that helps them avoid relapse into more dangerous opioids. For instance, a recent survey by Grundmann et al. (2025) reported that among 11,545 respondents (of which 1,049 were current kratom users), 57.4% (n=603) used kratom products for pain relief; 53.6% used for relaxation/stress relief (n=562); and 49.6% used to boost energy (n=520). Other reasons for use included improving sleep (42%); improved focus/concentration (34%), euphoria (27%), and opioid withdrawal assistance (22%). Higher reported frequency of kratom shots/extract powder consumed was correlated with use for pain relief.

Figure 4: [C] Proximal motivations for use; [D] Acute effects; [E] Broad motivations for use



Source: (Smith, Panlilio, Feldman, et al., 2024b)

These reasons broadly mirror those documented in Southeast Asian contexts (e.g., users also report using kratom for pain, stamina, and as a substitute for other drugs of abuse (Govarthnapany et al., 2025; Singh et al., 2023; Singh, Mathandaver, et al., 2025; WHO,

2021). The DEA's 2016 public call for comments yielded thousands of testimonials describing kratom being used for quality-of-life improvements – such as better sleep, relief from posttraumatic stress disorder symptoms, or managing depression – rather than for intoxication. That said, a minority of users do take kratom in social or recreational settings, sometimes in high doses to achieve sedating opioid-like effects.

Similarly, reports in public media and other sources indicate that some 7-OH users perceive it to be more effective, acceptable, or accessible than FDA approved medicines, kratom, or other approaches for their conditions. Similar conclusions for kratom were reached in 2016 (Henningfield & Fant, 2016) and in subsequent analyses (Giroir, 2018; UNODC, 2021). Consequently, removal of 7-OH from the licit marketplace without simultaneously ensuring the availability of viable accessible alternatives carries the risks of unintended consequences. These include the risk that current 7-OH consumers may relapse to potentially deadlier opioid use, as well as the likely emergence of an illicit market in which 7-OH products would proliferate without the quality standards that some 7-OH makers and marketers appear to voluntarily adhere. An illicit 7-OH market also raises the potential, if not likelihood, of 7-OH products being replaced or adulterated with fentanyl-related substances. While 7-OH's potential benefits do not necessarily affect whether substances or products should be scheduled, these issues should be considered in how scheduling actions are implemented to minimize unintended individual and public health consequences.

3.6.2 Estimated numbers of Kratom Consumers in Ohio.

Estimates of kratom consumer nationwide have varied widely over the past decade from a little over 2 million by the National Survey on Drug Use and Health, which appears to underestimate novel substances in it panels of respondents to the most recent nationally representative internet survey by Grundmann et al (2025) which estimates an approximately 9% prevalence of past 30 day kratom consuming adults. It is likely that some fraction of these respondents were using novel kratom derivatives and may have overestimated the population that is primarily consuming natural kratom leaf based products and extract. An earlier nationally representative survey estimated approximately 6.1% prevalence for approximately 10.5 million kratom consumers (Covvey et al., 2020). See discussion of the challenge of kratom prevalence estimates by (Henningfield, Grundmann, et al., 2022).

Based on an estimate of Ohio's adult population of 8.2 million the Covvey et al. 2020 and Grundmann et al. 2022 suggest that past 30 day kratom consumers number more than 500,000 and less than 738,000. The opinion of the authors of this report is that 738,000 is a likely overestimate for reason discussed above. Regardless, there are a substantial number of kratom consumers who would become felon criminals if they continued to possess kratom, as suggested by several surveys including the Grundmann et al. 2025 survey, the majority of these kratom consumers are 30 to 50 years of age, work and many with education beyond high school. Most surveys suggest more kratom consumers are men than women with the prevalence of men in Grundmann survey approximately 55%

Although some of these kratom consumers may discontinue their kratom use, many would continue, however, they would be less likely to discuss their use with health professional which these authors and others (e.g., Swogger et al. (2022)) recommend. That includes pregnant women.

These concerns and others were expressed by Assistant Secretary of Health Brett Giroir who requested a departmental review of the FDA's 2017 proposal to schedule kratom. Giroir rescinded that recommendation making clear that the evidence did not support scheduling and that FDA had failed to consider the serious adverse public health consequences of a kratom ban, as stated below (Giroir, 2018):

Furthermore there is a significant risk of immediate adverse public health consequences for potentially millions of users if kratom or its components are included in Schedule I, such as,

- Suffering with intractable pain [by people who were self-managing their pain with kratom];
- Kratom users switching to highly lethal opioids, including potent and deadly prescription opioids, heroin, and/or fentanyl, risking thousands of deaths from overdoses and infectious diseases associated with intravenous (IV) drug use;
- Inhibition of patients discussing kratom use with their primary care physicians leading to more harm and enhancement of stigma thereby decreasing desire for treatment, because of individual users now being guilty of a crime by virtue of their possession or use of kratom [an issue noted in this report as of particular concern with respect to pregnant women];
- The stifling effect of classification in Schedule I on important research needed on the complex and potentially useful chemistry of components of kratom.

3.6.3 Conclusions and Recommendations

Additional research is needed to more fully characterize the risks associated with 7 hydroxymitragynine, both on its own and in comparison with kratom products and with classical drugs of abuse. This need for further research should not be interpreted as an absence of sufficient scientific evidence to support initial regulatory frameworks, but rather as a means of informing the ongoing evolution of policy and regulation as new data emerge.

Multiple surveys suggest that most kratom use is motivated by use to self-manage various health conditions, and/or to contribute to well-being and achievement of goals and responsibilities in daily life (Coe et al., 2019; Grundmann, Veltri, Morcos, Knightes, et al., 2022; Jeffrey M Rogers et al., 2022; Smith, Dunn, Grundmann, et al., 2022a; Smith & Lawson, 2017; Smith, Panlilio, Feldman, et al., 2024a; Smith, Rogers, et al., 2024; Swogger et al., 2015; Zamarripa et al., 2024). FDA in its 2018 determination to rescind the recommendation for CSA control of mitragynine and 7-OH cited a "potentially substantial risk to public health if these chemicals were scheduled at this time" due to potential adverse consequences if kratom is no longer available for people using for symptoms such as

intractable pain, psychological distress, risk for suicide, transition from opioids or other potential or harmful drugs (Giroir, 2018).

Similarly, reported use of 7-OH includes consumers and patients using for therapeutic purposes, and who may suffer unintended adverse consequences from its sudden removal from the market. Given its distinct risk profile, especially in the context of highly concentrated 7-OH products, careful surveillance and research are necessary and warranted including, but not limited to, studying 7-OH using accepted FDA toxicological standards (e.g., through NIH funded research or through development as an FDA approved drug).

Despite evidence suggesting many thousands of individuals are currently using 7-OH – including some who appear to be consuming highly concentrated preparations and substantial total doses – the documented incidence of fatalities directly attributable to 7-OH remains very low. Even if, as FDA has suggested, 7-OH-related deaths are underreported, it is notable that such cases appear to be rare. This low apparent lethality may be explained by two key factors: first, the predominant route of administration among users is oral rather than intravenous; and second, 7-OH exhibits the pharmacological profile of a partial MOR agonist by several measures, as discussed in Factor 2.

The available evidence indicates that 7-OH may indeed pose a “risk to public health” or a “national drug threat”, thereby warranting regulatory attention and interventions as discussed in Factors 4 and 5 and below. However, it remains uncertain whether 7-OH poses a population-level overdose risk comparable to that of other opioids. This uncertainty does not diminish the case for control measures; this report concurs that such measures – including potential scheduling under the CSA – are justified. However, it is important to recognize that some individuals report using 7-OH as their preferred and/or most effective alternative to opioids known to carry high risks of fatal overdose, or as a means of self-managing other serious disorders. Considering this population should inform any policy approaches, particularly those involving criminal penalties for possession if 7-OH is placed in Schedule I, as discussed in the policy section of this report.

3.7 Factor 7: Its Psychic or Physiological Dependence Liability

Kratom contains more than fifty alkaloids that collectively contribute to its pharmacological effects. Mitragynine is the most abundant alkaloid in kratom leaf and appears to account for many of the reported benefits. It is a partial μ-opioid receptor agonist with additional α-adrenergic and other non-opioid effects that likely contribute to alertness and relief of withdrawal symptoms. Mitragynine is not reinforcing in animal studies and produces little respiratory depression across a wide range of doses (Henningfield et al., 2024; Henningfield, Rodricks, et al., 2022; Henningfield et al., 2021; Smith, Epstein, et al., 2024).

In recent surveys of kratom use disorder, a growing body of survey-based research has examined the prevalence, characteristics, and clinical relevance of KUD among active users. These studies, largely conducted by academic research groups and funded by NIDA, consistently show that while a measurable minority of kratom users meet Diagnostic

and Statistical Manual of Mental Disorders, 5th Edition (DSM-5) criteria for a substance use disorder, the overwhelming majority of cases are mild and driven primarily by physical dependence rather than by compulsive use or significant psychosocial impairment.

For example, Smith, Dunn, Rogers, Garcia-Romeu, et al. (2022) examined prevalence of KUD in a sample of 129 current U.S. kratom users recruited online. 29.5% of respondents met criteria for past-year KUD, though importantly most of these cases were classified as mild (14.0%) or moderate (7.0%), with only 8.5% meeting criteria for severe KUD. More than half of respondents (52.7%) had never met criteria for KUD, and an additional 17.8% had previously met criteria but were in remission at the time of survey. The most frequently endorsed DSM-5 criteria were tolerance, withdrawal, craving, and using more than intended, whereas classic indicators of addiction-related outcomes, such as abandoning obligations or experiencing major social harm, were uncommon.

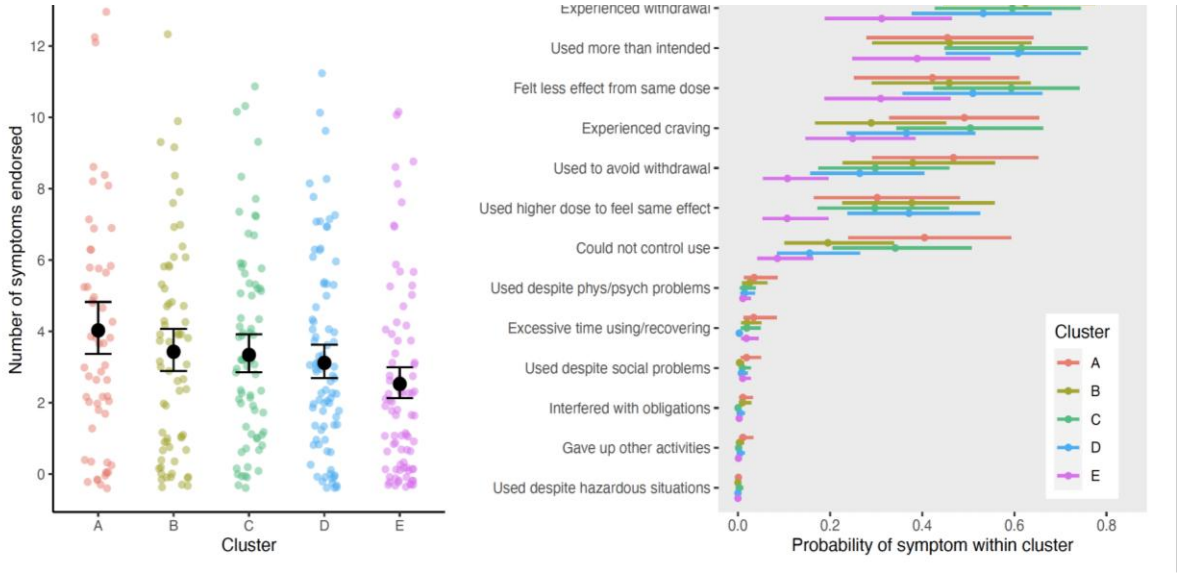
These results were largely confirmed in a much larger survey conducted by Hill et al. (2024), which assessed 2,061 current kratom consumers recruited between February and May 2023. In this sample, 25.5% of participants met DSM-5 criteria for current KUD, with most cases being classified as mild (66%) or moderate (20.0%), with severe KUD (13.9%) representing a small fraction of the total. Tolerance (81.3%) and withdrawal (68.0%) were the most commonly reported symptoms among those with KUD, while symptoms reflecting function impairment, such as failure to meet work or family requirements, were endorsed by a small fraction of the group. The authors also reported that individuals with a history of another substance use disorder were approximately 2.8 times more likely to meet criteria for KUD, suggesting that vulnerability to KUD is likely influenced by many other factors common to use disorders rather than kratom exposure alone.

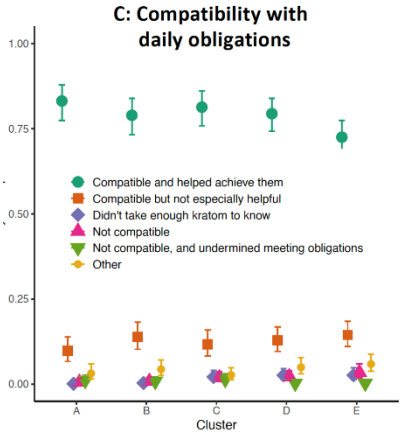
A study by Smith, Panlilio, Feldman, et al. (2024b) found in a 2022–2023 ecological momentary assessment (EMA) and survey study of 357 near-daily kratom users that 66.7% met DSM-5 criteria for KUD. However, this elevated prevalence must be interpreted in context: participants were specifically selected for very frequent use, and most KUD cases were defined by exactly two or three criteria. Notably, only three individuals (approximately 1% of the sample) met KUD criteria based solely on tolerance and withdrawal, indicating that most KUD-positive respondents also endorsed at least one additional symptom such as craving. Even in this heavy-use cohort, reports of social, occupational, or interpersonal impairment attributable to kratom were rare, and many participants reported perceived benefits such as improved mood, pain control, or productivity.

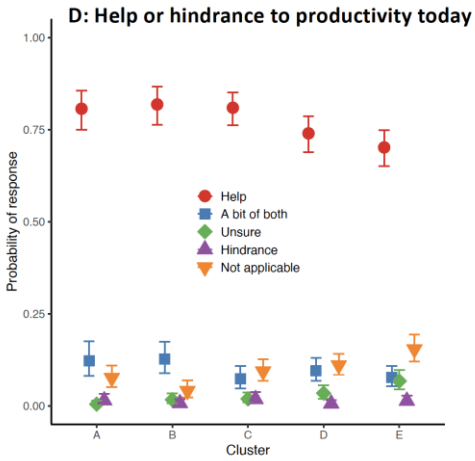
Across all clusters, kratom users reported low to moderate endorsement of DSM substance-use symptoms, with average symptom counts remaining modest and well below levels typically associated with severe substance use disorder (Figure A). The most commonly endorsed symptoms involved tolerance, withdrawal, craving, and using more than intended, while markers of serious dysfunction, such as hazardous use, giving up activities, interference with obligations, or continued use despite social or health problems, were rare across all groups (Figure B). Differences between clusters reflected differences in physical tolerance to kratom, not widespread compulsive or harmful use.

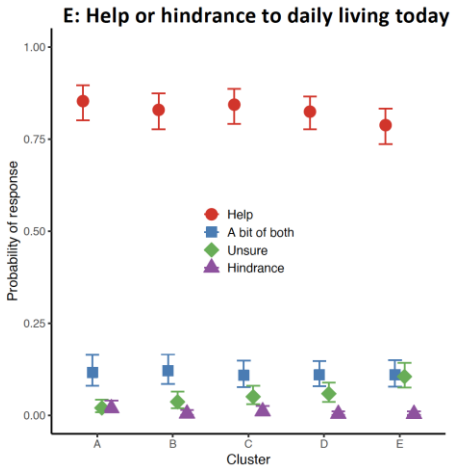
Consistent with this pattern, the large majority of respondents across clusters reported that kratom use was compatible with daily obligations and often helped them meet those obligations (Figure C), as well as improving productivity and daily living (Figures D and E). Reports of hindrance or incompatibility were uncommon, and even clusters with higher symptom endorsement were far more likely to report benefit than harm. Overall, these findings indicate that most kratom users perceive their use as functionally supportive rather than impairing, with limited evidence of severe or disruptive substance-use pathology. Such use is sometimes referred to as “beneficial”, “instrumental” and “therapeutic” despite the fact that no kratom product has been submitted to the FDA for approval as a new drug, nor does FDA recognize kratom as a substance Commonly Accepted for Medical Use (Kirsten E. Smith et al., 2025).

Figure 5: [A] Number of DSM Symptoms endorsed; [B] Prevelance of Specific Symptoms; [C] Compatability with Daily Obligations; [D] Help or Hindrance to Productivity Today; [E] Help or Hindrance to Daily Living Today









Source: (Smith, Panlilio, Feldman, et al., 2024b)

A survey by Rogers, Weiss, et al. (2024) assessed 395 active U.S. adult kratom users and found that the probability of reporting symptoms associated with KUD is consistently higher than completely stopping (cessation) kratom use rather than after missing a single dose. Most (95.9%) reported regularly using whole-leaf kratom products; 16 (4.1%) reported regular extract use. Subjective Opiate Withdrawal Scale (SOWS) scores were mild to moderate on average (13.5, Standard Deviation 11.9). KUD symptom counts were mostly in the mild/moderate range (80.7%). Withdrawal and KUD symptoms were more closely associated with dose frequency than dose amount. Men reported more acute effects, withdrawal symptoms with cessation, and KUD symptoms than women.

Figure 6: Experiences AFTER MISSED DOSE of Kratom vs Experience AFTER STOPPING Kratom Use

Fig. 3. Model-fitted distributions of the probability of endorsing a given kratom withdrawal symptom under two circumstances: after one missed dose (left panel) and after stopping use for at least one day (right panel). Distributions are displayed from highest to lowest base rate (vertically) and by participant sex/gender (color coding). Estimates were fit from binomial models, controlling for other demographic factors, dose amount, and dose frequency. Inferential statistics and effect sizes for sex differences are shown in Table 3.

Source: (Rogers, Weiss, et al., 2024)

Across these studies, a substantial proportion of individuals who technically meet criteria for KUD do not view their kratom use as problematic and do not experience meaningful impairment in daily life (Hill et al., 2024; Smith, Dunn, Rogers, Garcia-Romeu, et al., 2022). Many respondents reported that kratom improved their ability to work, manage pain, or maintain emotional stability, and a minority reported interference with major life obligations.

To date, there are no similar published, peer-reviewed, survey-based epidemiologic studies (past 2–3 years) that clearly distinguish 7-OH-specific use disorder or withdrawal prevalence using previously validated methods. This is a clear gap in the research that should be addressed in future surveys. This is explicitly highlighted as a measurement problem in FDA's 2025 scientific assessment (Reissig et al., 2025) which notes that consumers may be unaware they are obtaining 7-OH-enhanced products and that 7-OH use would likely be underreported in self-report data. This report also notes that forensic testing often uses mitragynine as a marker, which can lead to misclassification of 7-OH cases as "kratom/mitragynine-related."

3.7.1 Conclusions and Recommendations

Overall, these recent NIDA-funded clinical studies and surveys highlight that while some kratom users develop symptoms indicative of substance use disorder, the severity of these symptoms is generally milder and more manageable than opioid or stimulant use disorders and without adverse social, occupational, or criminal related consequences. The current data suggest that for many, use of kratom is primarily as a daily self-maintenance or self-therapeutic, similar to caffeine dependence, rather than a trajectory of more problematic and risky use.

Kratom consumers who seek assistance in managing their own use disorders and withdrawal should be provided with such assistance. This has been recently discussed elsewhere (e.g. Swogger et al. 2022; Smith Dunn Epstein et al 2022. We include a verbatim recommendation from Smith et al. (p. 3).

> Clinicians should consider the full spectrum of kratom's actions rather than focusing on one system; however, if the opioid system is the focus, then clear and systematic assessment measures should be used before an intervention is chosen.
>
> Finally, we suggest that all authors undertaking kratom research in humans consider what "advantageous" entails within a broader context of KUD or other SUD treatment. Buprenorphine/naloxone may be the best treatment for patients with moderate-severe KUD who are not opioid-naïve (especially if they have a history of OUD) and who wish to begin pharmacotherapy, but this should be carefully determined on a case-by-case basis in light of the patient's history and treatment goals. Given our limited understanding of the mechanisms of action for kratom alkaloids and the lack of standardization of kratom products, pharmacotherapies for KUD should be approached with caution and with patients' full informed consent regarding treatment options.

3.8 Factor 8: Whether the Substance is an Immediate Precursor of a Substance Already Controlled

Mitragynine and 7-OH are not immediate precursors of any currently controlled substances in the technical sense of chemical scheduling. A precursor is defined typically as a compound that is primarily used to manufacture a controlled drug and is a direct chemical forerunner of that drug. Neither mitragynine nor 7-OH is used to synthesize any controlled opioid like morphine or fentanyl. They are structurally unrelated to the opiates derived from opium poppy, and they are not known to be converted into any other controlled drug other than other alkaloids such as mitragynine-like compounds.

4 Additional Scientific, Regulatory, and Policy Considerations

4.1 Regulatory/Policy Analysis of Dietary Supplements

As discussed by the Board in its January 6, 2026 meeting, neither kratom, nor mitragynine, nor any other kratom constituent are approved as drugs by FDA for therapeutic use, nor are the recognized as Commonly Accepted for Medical Use (CAMU) – a determination that was made by DHHS with FDA for “marijuana” (Henningfield, Comer, et al., 2025).

The main relevance of such a determination for CSA scheduling is not whether it should be scheduled, but rather which schedule should be considered if the abuse potential and public health risk indicated the scheduling is warranted. If the drug product, or substance with such abuse potential is approved by FDA for therapeutic use or designated as CAMU, then it can only be placed in Schedules II, III, IV or V, commensurate with its abuse potential. If the substance is not approved or recognized as CAMU it can only be placed in Schedule I, and if place in Schedule I can only be removed if it is subsequently approved by FDA.

That does not include dietary substances, whether regulated as conventional foods or the special category of dietary ingredients and supplements, such as kratom. This is codified in the Federal Food, Drug, and Cosmetic Act (FDCA), but may be more lucidly understood in a recent chapter by a former director of FDA’s Office of Dietary Supplements, Robert Durkin and his colleagues (Durkin et al. 2025). Here we present a summary of some key points that may be of interest when considering kratoms risks, benefits, use, and potential restrictions on marketing and labeling if Ohio implements its own approach to kratom regulation.

Products derived from the botanical *Mitragyna speciosa*, broadly referred to as “kratom,” are regulated, marketed, and sold as dietary supplements in the U.S. (Durkin et al., 2025). In the U.S., dietary supplements are regulated by FDA as a unique type of food – separately from drugs, conventional foods, and cosmetics – with a formal regulatory definition provided in the Dietary Supplement Health and Education Act (DSHEA) which was signed into law on October 25, 1994 (ODS, 1994). As such, the Board’s concern that mitragynine-related compounds (including specifically kratom), are not approved for medical use does not apply to dietary supplements derived from kratom.

Prior to DSHEA, dietary ingredients were frequently regulated by FDA as food additives, with the belief that dietary supplements consisted of adulterated foods containing either unapproved or unsafe food additives. This presented a significant challenge, given that the process for introducing new food additives is costly, time-consuming, and requires that new food additives be available widely throughout the entire food supply with significantly broader exposure versus if the ingredient was intended to be used far more narrowly and in a limited number of products, such as dietary supplements. DSHEA, a bipartisan effort that was unanimously passed by Congress, conveyed unique “statutory and regulatory requirements for dietary supplements and their dietary ingredient constituents” such that FDA’s regulation of dietary supplements would be less arduous while at the same time more consistent from that point forward (Durkin et al., 2025).

Per section 201 (21 USC 321) (ff)(1) of the Food, Drug, and Cosmetic Act (FDCA), a dietary supplement is “a product (other than tobacco) intended to supplement the diet that bears or contains one or more of the following dietary ingredients:

- (A) a vitamin;
- (B) a mineral;
- (C) an herb or other botanical;
- (D) an amino acid;
- (E) a dietary substance for use by man to supplement the diet by increasing the total dietary intake; or
- (F) a concentrate, metabolite, constituent, extract, or combination of any ingredient described in clause (A), (B), (C), (D), or (E)” (ODS, 1994)

Additionally, among other characteristics, a dietary supplement must be swallowed into the alimentary canal, not be intended to be a replacement for a conventional food, and not contain a dietary ingredient that has been previously studied or approved as a drug (Durkin et al., 2025). By this definition, kratom, a botanical, and its extracts and constituents including alkaloids, flavonoids, and metabolites meet the criteria for dietary supplements.

Dietary supplements must be manufactured according to Title 21 of the Code of Federal Regulations (21 CFR Part 111) “Current Good Manufacturing Practice in Manufacturing, Packaging, Labeling, or Holding Operations for Dietary Supplements.” For any kratom-containing or kratom-derived dietary ingredient/supplement, these good manufacturing practices (GMPs) include identifying and confirming the identity and specifications for every dietary ingredient used to manufacture a dietary supplement.

Dietary ingredients and dietary supplements that were available on the market before DSHEA are differentiated from those that have been introduced after DSHEA was enacted (Durkin et al., 2025). Any dietary ingredient that was not marketed in the U.S. as a dietary ingredient or a dietary supplement prior to October 25, 1994 is considered to be a “New Dietary Ingredient” (NDI). If it cannot be shown that the NDI is present in the food supply in a chemically unaltered form, then a New Dietary Ingredient Notification (NDIN) must be

submitted to FDA at least 75 days before the ingredient enters the market, as the Agency established in 1997 and codified in 21 CFR §190.6.

Kratom, along with many other dietary ingredients and supplements, was used and marketed prior to 1994, as anecdotally reported by people who immigrated from Asia; however, the level of evidence and documentation required by FDA for determination that they meet criteria as old dietary ingredients and "grandfathered" without an NDIN.

Importantly however, the manufacturers and distributors of any food, including kratom products that are marketed as dietary supplements, are not required to either *seek* or *gain* FDA's approval before putting their food or dietary supplement product(s) on the market (Durkin et al., 2025). The NDIN requirement to sell NDIs is merely a requirement to *notify* FDA as to why the dietary supplement is reasonably expected to be safe based on the conditions of use included on the product labeling. After receipt of FDA's response, or alternatively if no Agency response is received within the 75-day period, the company that submitted the NDIN has satisfied the obligation laid out in section 413(a) of the Act and can proceed to place the NDI-containing dietary supplement on the market "regardless of whether the FDA objects with the company's basis for concluding that their product is safe" (Durkin et al., 2025). The authors estimate only seven kratom-related NDINs have been submitted to FDA to date (as of 2025). This lack of a requirement for premarket FDA approval for a dietary supplement does require the manufacturer or distributor of the dietary supplement to have an evidentiary basis to conclude that their product is safe – that is, the supplement does not present an unreasonable risk of illness or injury – before going to market.

Regarding scheduling, while the FDA has recommended banning kratom under the CSA twice (in 2014-2016 [Henningfield et al., 2018] and 2018 [Henningfield et al., 2024]), it remains unscheduled. Following the first FDA recommendation in 2014, the DEA requested that HHS conduct a scientific and medical assessment of kratom's major alkaloid, mitragynine, as well as one of its active metabolites, 7-OH, specifically in order to make a determination as to whether kratom and these constituents should be recommended for CSA scheduling (Durkin et al., 2025). Pending the HHS assessment, on August 31, 2016 the DEA announced a plan to temporarily add mitragynine and 7-OH to Schedule I in order "to avoid an imminent hazard to the public safety" (DEA Notice of Intent; 81 FR 59929), although on October 13, 2016, the DEA withdrew its notice of intent due to receiving "numerous comments from members of the public challenging the scheduling action and requesting that the agency consider these comments and accompanying information before taking further action" (DEA Withdrawal of Notice of Intent; 81 FR 70652). The following year, HHS officials again recommended to DEA that mitragynine and 7-OH be permanently placed in Schedule I of the CSA, but in August 2018 then Assistant Secretary of HHS, Dr. Brett Giroir, instructed FDA to withdraw its 2017 scheduling recommendation to the DEA, stating that "this decision is based on many factors, in part on new data, and in part on the relative lack of evidence, combined with an unknown and potentially substantial risk to public health if these chemicals were scheduled at this time" and indicating that further research was needed (Giroir, 2018). And, in fact, contrary to the concerns raised by the

Board, the scientific evidence base to date supports that kratom does not meet requirements for CSA scheduling, either due to the potential for abuse or concerns that kratom poses a clear threat to public health (Henningfield et al., 2018; Henningfield et al., 2024; Henningfield, Wang, et al., 2022a).

4.2 Characterization of 7-OH as a Morphine-like Opioid.

Note that kratom is not an opioid (see discussion by Henningfield et al. 2022, 2024), however, this report agrees with FDA that 7-OH can be considered an opioid based on its substantial opioid pharmacological effects (Reissig et al. 2025).

The CSA includes a provision (21 U.S.C. § 802(18)) that guides determination of whether a substance can be determined to be sufficiently pharmacologically equivalent to morphine with respect to key effects related to "addiction liability" to be designated and regulated as an opioid. Specifically, no. 18 states:

> "The term 'opiate' or 'opioid' means any drug or other substance having an addiction-forming or addiction-sustaining liability similar to morphine or being capable of conversion into a drug having such addiction-forming or addiction-sustaining liability."

This pharmacological definition is important in the regulatory consideration of 7-OH. It allows the DEA, upon recommendation from HHS, to classify a substance as an opioid based on its effects, even if it does not meet the chemical, structural or precursor criteria of Factor 8.

The determination of whether a substance has an "addiction-forming or addiction-sustaining liability similar to morphine" is based on the scientific and medical evidence evaluated under the other factors of the 8FA, particularly Factors 1, 2, 3, and 7.

An example of this in pharmaceutical development was tapentadol. During its evaluation and development as an analgesic, it was not designated as an opioid based on its chemical structure; however, based on its overall pharmacological profile and similarity to morphine and related opioids, tapentadol was placed in Schedule II of the CSA, along with morphine and oxycodone, following its approval for therapeutic use and is now widely classified as an "opioid" – of the morphine type and not naloxone type based on its overall pharmacology. The fact that naloxone binds to the same receptors as morphine do not make it a morphine type opioid. Although there is not a simple algorithm for such a determination, the authors of this report agree with FDA's apparent determination that 7-OH can be similarly characterized based on its overall pharmacology including rewarding, respiratory depressant and other effects.

Table 5: Summary of References Published since Jan 1, 2022 Reviewed by the authors for this Report by CSA Factor

Factor 1: Actual or relative potential for abuse	
(Henningfield, Rodricks, et al., 2022; Zuarth Gonzalez et al., 2025)	(Henningfield, Rodricks, et al., 2022; Zuarth Gonzalez et al., 2025)
(Bowe & Kerr, 2024)	(Bowe & Kerr, 2024)
(Huestis et al., 2024)	(Huestis et al., 2024)
(Henningfield, Wang, et al., 2022a)	(Henningfield, Wang, et al., 2022a)
(Henningfield et al., 2023)	(Henningfield et al., 2023)
(Japarin et al., 2023)	(Japarin et al., 2023)
(Jarka & Gregoire, 2023)	(Jarka & Gregoire, 2023)
(Prevete et al., 2025)	(Prevete et al., 2025)
(Smith, Epstein, et al., 2024)	(Smith, Epstein, et al., 2024)
(Smith, Panlilio, Feldman, et al., 2024a)	(Smith, Panlilio, Feldman, et al., 2024a)
(Smith, Rogers, et al., 2024)	(Smith, Rogers, et al., 2024)
(Yunusa et al., 2024)	(Yunusa et al., 2024)
(Yue et al., 2022)	(Yue et al., 2022)
(Yusoff et al., 2022)	(Yusoff et al., 2022)
Factor 2: Scientific evidence of pharmacological effect	
(Abduraman et al., 2025)	(Karunakaran, Ganasan, et al., 2025)
(Annuar et al., 2024)	(Limcharoen et al., 2022)
(Berthold et al., 2022)	(Manus et al., 2025)
(Berthold et al., 2024)	(Mat et al., 2023)
(Chiang et al., 2024)	(Mongar et al., 2024)
(Chiang et al., 2025)	(Nukitram et al., 2022)
(Das, 2024)	(Obeng et al., 2022)
(Deebel et al., 2023)	(Obeng et al., 2024)
(Dufour et al., 2024)	(Ortiz et al., 2023)
(Effendy et al., 2023)	(Owaid et al., 2025)

(Farkas et al., 2023)	(Paankhao et al., 2024)
(Farkas et al., 2025)	(Pansai et al., 2024)
(Fauzi et al., 2022)	(Qureshi et al., 2024)
(Zuarth Gonzalez et al., 2025)	(Tanna et al., 2022)
(Hartley et al., 2022)	(Tanna, Nguyen, et al., 2023)
(Hassan et al., 2023)	(Tanna, Cech, et al., 2023)
(Hill et al., 2022)	(You et al., 2022)
(Hiranita et al., 2022)	(Yunusa et al., 2023)
(Hoshina & Liang, 2024)	(Yunusa et al., 2024)
(Hughes et al., 2022)	(Zainudin et al., 2023)
(Indriani et al., 2025)	(Zhang et al., 2023)
(Janthongkaw et al., 2023)	
(Janthongkaw et al., 2024)	
Factor 3: Current state of scientific knowledge	
(Ahmad et al., 2022)	(Hong et al., 2023)
(Akbar et al., 2025)	(Hossain et al., 2023)
(Alford et al., 2025)	(Hughs et al., 2023)
(Allison et al., 2022)	(Huisman et al., 2023)
(Anand & Hosanagar, 2022)	(Kamble et al., 2023)
(Angyal et al., 2023)	(Karunakaran et al., 2022)
(Annuar et al., 2024)	(Kedzierski & Mata, 2023)
(Arenson et al., 2023)	(Kim et al., 2023)
(Arenson et al., 2024)	(Koturbash et al., 2024)
(Bachu et al., 2023)	(Laforest et al., 2023)
(Bachu et al., 2024)	(Larsen et al., 2022)
(Bade et al., 2024)	(Le et al., 2022)
(K. A. Bakar et al., 2024)	(Leksungnoen et al., 2022)

(Bayu et al., 2024)	(Leyrer-Jackson et al., 2022)
(Basheer et al., 2023)	(Li et al., 2023)
(Begum, Arzmi, Helal Uddin, et al., 2024)	(Liang et al., 2024)
(Begum, Arzmi, Khatib, et al., 2024)	(Mahaprom et al., 2025)
(Bonnet et al., 2022)	(McCurdy et al., 2024)
(Chathiran et al., 2025)	(Manwill et al., 2022)
(Chen et al., 2025)	(Nakajima et al., 2024)
(Chichagi et al., 2024)	(Nam et al., 2024)
(Chou et al., 2022)	(Papadi et al., 2022)
(Citti et al., 2023)	(Pont-Fernandez et al., 2023)
(Collar & Barrett, 2024)	(Prevete et al., 2023)
(Dhoble et al., 2025)	(Rayanakorn et al., 2025)
(Doharszky et al., 2024)	(Riley, 2025)
(Dror et al., 2024)	(Rogers, Weiss, et al., 2024)
(Edinoff et al., 2024)	(Rogers, Colvin, et al., 2024)
(Emerick et al., 2024)	(Rossheim et al., 2024)
(Garba et al., 2024)	(Sakamoto et al., 2022)
(Garza-Garcia & Qu, 2024)	(Schotte et al., 2023)
(Garmon & Olson, 2022)	(Striley et al., 2022)
(Gorelick, 2022)	(Sudmoon et al., 2025)
(Green et al., 2024)	(Suhaimi et al., 2023)
(Green et al., 2025)	(Suhaimi et al., 2025)
(Groff et al., 2022)	(Suriaga et al., 2024)
(Grundmann, Garcia-Romeu, et al., 2024)	(Swart et al., 2024a)
(Grundmann, Smith, et al., 2024)	(Swatek & Peterson, 2024)
(Haider et al., 2023)	(Swogger et al., 2022)
(Harun et al., 2022)	(Thongsepee et al., 2025)

(Hatch et al., 2024) (Helander & Rylski, 2023) (Henningfield, Rodricks, et al., 2022) (Henningfield, Grundmann, et al., 2022) (Henningfield et al., 2024) (Heywood et al., 2024)	(Uchaipichat, 2025) (Vicknasingam et al., 2024) (Viwatpinyo et al., 2023) (Wei, 2024) (Yang et al., 2023) (Zul Aznal et al., 2022)
Factors 4, 5, and 6—History and Current Patterns of Abuse; The Scope, Significance and Duration of abuse; What, if any, Risk is there to the Public Health	
(Abdali et al., 2024) (Adzrago et al., 2022) (Ahmed et al., 2023) (Alameh et al., 2025) (Alghalith et al., 2024) (Ameline et al., 2024) (Anderer, 2025) (Arhin et al., 2023) (Awad et al., 2024) (Axelsson et al., 2022) (Axelsson et al., 2025) (Bakir et al., 2025) (Beckerdite & Wu, 2024) (Behonick et al., 2022) (Bowman et al., 2023) (Brogdon et al., 2022) (Broyan et al., 2022) (Broul et al., 2025) (Cauldron et al., 2024)	(Palamar, 2022) (Parent et al., 2022) (Parent et al., 2024) (Peran et al., 2023) (Penzak et al., 2023) (Perez, 2023) (Piercey et al., 2025) (Prevete et al., 2023) (Prozialeck et al., 2022) (Reich et al., 2022) (Rhee et al., 2024) (Rogers, Weiss, et al., 2024) (Rogers, Colvin, et al., 2024) (Rianprakaisang et al., 2023) (J. M. Rogers et al., 2022) (Roma et al., 2023) (Sablaban & Gautam, 2023) (Saengmolee et al., 2022) (Saingam et al., 2023)

(Chiappini et al., 2022)

(Chichagi et al., 2024)

(Chinnappan et al., 2023)

(Choo et al., 2022)

(Dadamyan et al., 2025)

(Dasgupta & Ye, 2024)

(DeJonge et al., 2023)

(Dodulik et al., 2024)

(Donroe & Fiellin, 2022)

(Eckhardt & Nickel, 2023)

(Ellis et al., 2024)

(Eudaley et al., 2022)

(Evoy et al., 2025)

(Falise et al., 2023)

(Faucher et al., 2024)

(Gandhi et al., 2024)

(Gerona et al., 2025)

(Gnanasegaram et al., 2024)

(Gorelick, 2024)

(Govarthnapany et al., 2025)

(Grundmann, Veltri, Morcos, Knightes, et al., 2022)

(Grundmann, Veltri, Morcos, Knightes Iii, et al., 2022)

(Grundmann, Hendrickson, et al., 2023)

(Grundmann, Hill, et al., 2023)

(Grundmann, Veltri, et al., 2023)

(Grundmann, Smith, et al., 2024)

(Schmid et al., 2022)

(Settle et al., 2023)

(Schwensohn et al., 2022)

(Sekar et al., 2022)

(Settle & Yang, 2022)

(Settle et al., 2024)

(Sharron et al., 2025)

(Shi & Shea, 2024)

(Singh et al., 2023)

(Smith, Dunn, Epstein, et al., 2022)

(Smith, Dunn, Grundmann, et al., 2022b)

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1 Appendix 1: Kratom Abuse Potential 2021: An Updated Eight Factor Analysis

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REVIEW
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Kratom Abuse Potential 2021: An Updated Eight Factor Analysis

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Drugs are regulated in the United States (US) by the Controlled Substances Act (CSA) if assessment of their abuse potential, including public health risks, show such control is warranted. An evaluation via the 8 factors of the CSA provides the comprehensive assessment required for permanent listing of new chemical entities and previously uncontrolled substances. Such an assessment was published for two kratom alkaloids in 2018 that the Food and Drug Administration (FDA) have identified as candidates for CSA listing: mitragynine (MG) and 7-hydroxymitragynine (7-OH-MG) (Henningfield et al., 2018a). That assessment concluded the abuse potential of MG was within the range of many other uncontrolled substances, that there was not evidence of an imminent risk to public health, and that a Schedule I listing (the only option for substances that are not FDA approved for therapeutic use such as kratom) carried public health risks including drug overdoses by people using kratom to abstain from opioids. The purpose of this review is to provide an updated abuse potential assessment reviewing greater than 100 studies published since January 1, 2018. These include studies of abuse potential and physical dependence/withdrawal in animals; *in-vitro* receptor binding; assessments of potential efficacy treating pain and substance use disorders; pharmacokinetic/pharmacodynamic studies with safety-related findings; clinical studies of long-term users with various physiological endpoints; and surveys of patterns and reasons for use and associated effects including dependence and withdrawal. Findings from these studies suggest that public health is better served by assuring continued access to kratom products by consumers and researchers. Currently, Kratom alkaloids and derivatives are in development as safer and/or more effective medicines for treating pain, substances use disorders, and mood disorders. Placing kratom in the CSA via scheduling would criminalize consumers and possession, seriously impede research, and can be predicted to have serious adverse public health consequences, including potentially thousands of drug overdose deaths. Therefore, CSA listing is not recommended. Regulation to minimize risks of contaminated, adulterated, and inappropriately marketed products is recommended.

Keywords: dietary supplement, safety, abuse potential, epidemiology, substance use disorder treatment, opioid pharmacology, Controlled Substances Act

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1 INTRODUCTION

This is an update to the Henningfield et al. (2018) assessment of the abuse potential of kratom based on the eight factors of the United States Controlled Substances Act (US CSA) (Henningfield et al., 2018a) and summarizes new scientific findings from January 2018 through August 2021. The CSA eight factors evaluate pharmacological actions in the brain or central nervous system (CNS) that may lead to dependence, substance use disorders, or addictions (American Psychiatric Association, 2013; National Institute on Drug Abuse, 2019; World Health Organization, 1994; O'Brien et al., 2011). Abuse potential assessments determine whether substances and medicinal products should be controlled by the CSA (scheduled), and if so the restrictiveness or level of control. Substances are only placed in Schedule I (heroin, LSD, cannabis) when there is no FDA approved therapeutic use and sufficient abuse potential to merit control. Substances with approved therapeutic uses and sufficient abuse potential must be placed in Schedules II–V. By law, an eight-factor analysis (8-FA) provides the primary pharmacological and public health basis for drug scheduling (Food and Drug Administration, 2017a; Beloun and Henningfield, 2018; Johnson et al., 2018). This assessment focuses on kratom and its alkaloids, in particular mitragynine (MG), the primary alkaloid in kratom present in sufficient amounts to account for its effects.

Kratom and its alkaloids are not approved for any therapeutic use by the FDA, are not federally controlled in the US, nor in the International Drug Control Conventions; however some countries do control kratom and/or its two primary alkaloids, MG and 7-OH-MG (Prozialeck et al., 2019; International Narcotics C, 2020a; International Narcotics C, 2020b). Six states in the US (Alabama, Arkansas, Indiana, Tennessee, Vermont and Wisconsin) have banned kratom, while five have passed consumer protection legislation to ensure consumer access to kratom with a framework for regulatory oversight (Arizona, Georgia, Nevada, Oklahoma and Utah). Maryland rejected a proposed ban and passed a minimum age of purchase law (age 21), and at this writing, several states are considering their own kratom consumer protection laws to ensure consumer access but with regulatory oversight. In 2021, Thailand decriminalized kratom farming, possession and sales. In December, 2021, the World Health Organization Expert Committee on Drug Dependence concluded "there is insufficient evidence to recommend a critical review of kratom mitragynine and 7-hydroxymitragynine" [for potential scheduling] but should be kept under surveillance (Commission on Narcotic Drugs, 2021).

In August 2016 the US Drug Enforcement Agency (DEA) proposed scheduling kratom on a temporary "emergency" basis but withdrew the proposal due to thousands of comments from kratom consumers and bipartisan members of Congress, and out of concern that people who were managing their opioid use disorder with the aid of kratom would return to opioid use. The DEA requested that FDA perform a full 8-FA and develop its own independent recommendations related to scheduling (Ingraham, 2016a; Ingraham, 2016b). Subsequently, Dr. Henningfield and his colleagues at PinneyAssociates were commissioned by the American Kratom Association's legal regulatory counsel to develop an 8-FA (Pinney Associates (2016)) for submission to DEA by December 2, 2016. In November 2017, FDA Commissioner Scott Gottlieb announced that kratom carried "narcotic like" risks of addiction and death but did not make public its October 17th recommendation to DEA to permanently place MG and 7-OH-MG in Schedule I of the CSA (Food and Drug Administration, 2017b; Food and Drug Administration, 2017c).

DEA typically responds to formal 8-FA scheduling requests within 90 days, though there is no legal timeline; however, a formal scheduling rescission order was issued on August 18, 2018 from the Assistant Secretary of Health, US Department of Health and Human Services (DHHS) (Giroir, 2018). The order included conclusions based on a DHHS review consistent with those of the Henningfield et al. (2018) 8-FA (Henningfield et al., 2018a). The DHHS rescission letter stated "mitragynine does not satisfy the first of the three statutory requisites for Schedule I"; "There is still debate among reputable scientists over whether kratom by itself is associated with fatal overdoses"; and "there is a significant risk of immediate adverse public health consequences for potentially millions of users if kratom or its components are included in Schedule I." The letter also raised concerns about "the stifling effect of classification in Schedule I on critical research needed on the complex and potentially useful chemistry of components of kratom." This letter was not made public until January 2021.

In 2017, the National Institute on Drug Abuse (NIDA) substantially increased its active research program on kratom's alkaloids and derivatives as potentially safer and less abusable medicines for pain and addiction and other disorders. The purpose of this review is to provide an update of our 2018 article on the abuse potential of kratom. It includes more than 100 new studies related to kratom abuse potential, safety, patterns of use, and potential therapeutic and public health benefits.

2 METHODS

The intent was to include all new studies published in English relevant to kratom abuse potential, safety and mechanisms of action published in since January 1, 2018 with some essential earlier studies mentioned and referenced to our 2018 review.[1] This was by comprehensive online literature searches, and direct requests to leading kratom researchers worldwide. To be concise, factors 4, 5, and 6 are considered a single group of public health related factors.[2] (Henningfield et al., 2018a; Johnson et al., 2018). Factor 8 is unchanged as neither kratom nor its constituents are scheduled.

[1] The authors welcome communications from readers on abuse-potential and safety related kratom research published since 2018 that we might have missed.

[2] For formal FDA submissions Factors 4, 5, and 6 are considered separately (see Henningfield et al., 2018a and Johnson, Griffiths, Hendricks and Henningfield, 2018 as examples), however, for temporary (also known as "emergency") scheduling, determining if a substance poses an imminent health risk is based on the analysis of all three factors combined similarly to our approach in this review.

3 RESULTS

3.1 Factor 1: Actual or Relative Potential for Abuse

A summary of the references used, along with main findings and comments from the authors of this review are included in Table 1.

3.1.1 Summary of 2018 Findings

There were no animal intravenous drug self-administration (IV DSA), intracranial self-stimulation (ICSS) brain reward, or physical dependence/withdrawal studies of kratom's alkaloids; however, other data suggested relatively low abuse potential as compared to opioids and other drugs of abuse (Henningfield et al., 2018a). There was evidence of morphine opioid receptor (MOR) mediated effects, and preliminary drug discrimination and conditioned place preference (CPP) studies with rats suggested abuse related effects at high intolerable human dose equivalents.

Survey data from the US and field studies in Southeast Asia (SEA) showed most kratom use was for health-related benefits, and to facilitate occupational performance. Data indicated that problem abuse and addiction were not common and was generally more tolerable and readily self-manageable as compared to opioids. A frequent reason for use was as an opioid substitute for pain and self-management of opioid, alcohol, and other drug dependence.

3.1.2 Factor 1 Science Updates

3.1.2.1 Intravenous Drug Self-Administration Trials

Rates of MG self-administration were similar to those of saline, and MG pretreatment produced dose-related reductions in morphine self-administration rates (Hemby et al., 2019). The authors concluded "The present findings indicate that MG does not have abuse potential and reduces morphine intake, desired characteristics of candidate pharmacotherapies for opiate addiction and withdrawal ... ". 7-OH-MG was self-administered at high doses and pretreatment increased morphine self-administration.

MG self-administration rates in rats did not exceed those obtained with saline and MG pretreatment decreased heroin self-administration, with little effect on methamphetamine self-administration (Yue et al., 2018). The authors noted "These results suggest limited abuse liability of mitragynine and the potential for mitragynine treatment to specifically reduce opioid abuse. With the current prevalence of opioid abuse and misuse, it appears currently that mitragynine is deserving of more extensive exploration for its development or that of an analog as a medical treatment for opioid abuse." These results are consistent with human reports that kratom is useful in the management of opioid craving and withdrawal and to support opioid abstinence (Grundmann et al., 2018; Coe et al., 2019; Prozialeck et al., 2019; Garcia-Romeu et al., 2020).

Intracranial Self-Stimulation

In the ICSS model, rats equipped with brain electrodes self-deliver rewarding electrical brain stimulation. Opioids, amphetamine-like stimulants, cocaine, and other classic drugs of abuse reduce the stimulation threshold and increase the strength of the rewarding effects of drugs on ICSS (Negus and Miller, 2014). Neither MG nor 7-OH-MG showed evidence of brain rewarding effects, whereas morphine robustly and dose-dependently decreased the stimulation threshold (Behnood-Rod et al., 2020). Thus, the ICSS results suggest lower brain rewarding effects of MG as compared to morphine.

Drug Discrimination Studies

The discriminative stimulus effects of MG were evaluated in studies designed to assess generalization to morphine as well as the delta-opioid receptor agonist SNC80 and kappa-opioid receptor agonist U69593, alpha adrenergic agonists lofexidine, clonidine and phenylephrine, alpha adrenergic antagonists yohimbine and atipamezole, and the cannabinoid agonist Δ-9-tetrahydrocannabinol (Reeve et al., 2020). The strongest generalization was to lofexidine and phenylephrine, both unscheduled drugs: phenylephrine is in some over-the-counter cold medicines; lofexidine is approved for several indications including the first nonopioid for alleviating opioid withdrawal.

In a comparison of MG and 7-OH-MG across studies that included *in vitro* receptor binding and an antinociception test, MG partially generalized to morphine, whereas 7-OH-MG fully generalized to morphine in rats (Obeng et al., 2021). Similarly, Hiranita et al. (2020) found only partial generalization of oral MG to i.p. morphine in rats (Hiranita et al., 2020).

3.1.2.4 Conditioned Place Preference

Various MG preparations produced mixed CPP effects with some suggesting abuse potential at high doses. A low priming injection of MG or morphine reinstated CPP after establishment with either drug, suggesting rewarding effects for both (Japarin et al., 2021). Baclofen pretreatment prevented the acquisition and expression of MG-induced CPP (Yusoff et al., 2018). CPP was achieved in mice with a high dose methanolic extract of kratom leaves (Vijeepallam et al., 2019). In a fourth study (see also Factor 2), lyophilized (freeze-dried) kratom tea (LKT), a potential treatment for pain and opioid dependence, did not induce CPP in mice (Wilson et al., 2020).

3.1.2.5 Physical Dependence and Withdrawal

Discontinuation of morphine administration produced response rate disruptions indicating significant signs of spontaneous withdrawal, whereas discontinuation of MG administration did not produce significant signs of spontaneous withdrawal. Naloxone administration did precipitate response rate disruptions indicating withdrawal in both MG and morphine treated rats, however, this withdrawal effect was weaker and shorter lived in MG treated rats as compared to morphine treated rats (Harun et al., 2020). MG treatment also reduced naloxone precipitated withdrawal in animals receiving chronic morphine, consistent with human reports. Hassan, Pike, See, Sreenlivasan et al. (2020) compared the efficacy of MG to methadone for treating morphine withdrawal in rats concluding that MG treatment attenuated withdrawal symptoms significantly, similar to methadone and buprenorphine, and potentially with less undesired effects (Hassan et al., 2020).

TABLE 1 | Summary of references.

Factor/Description	Citations	Main findings	Comments
Factor 1: Actual or relative potential for abuse			
Intravenous Self-Administration (IV SA)	(Prozialeck et al., 2019), (Grundmann et al., 2018; Yue et al., 2018; Coe et al., 2019; Hemby et al., 2019; Garcia-Romeu et al., 2020)	No evidence of reward	MG pretreatment reduced morphine self-administration
Intracranial Self-Stimulation (ICSS)	(Negus and Miller, 2014)-(Behnood-Rod et al., 2020)	No evidence of reward for MG or 7-OH-MG	
Drug Discrimination	(Hiranita et al., 2020; Reeve et al., 2020; Obeng et al., 2021)	MG showed partial generalization to multiple drugs, including morphine 7-OH-MG showed full generalization to morphine	Strongest generalization of MG was to unscheduled drugs: phenylephrine and lofexidine
Conditioned Place Preference (CPP)	(Yusoff et al., 2018; Vijeepallam et al., 2019; Wilson et al., 2020; Japarin et al., 2021)	Mixed evidence of CPP	
Physical Dependence/ Withdrawal	(Harun et al., 2020; Hassan et al., 2020; Johari et al., 2021; Hassan et al., 2021; Hassan et al., 20211778; Harun et al., 2021a)	Mixed evidence of weak withdrawal across studies relative to morphine	MG reduces morphine withdrawal and differs from morphine withdrawal on some measures
Survey Data	(Prozialeck et al., 2019), (Grundmann et al., 2018; Coe et al., 2019; Garcia-Romeu et al., 2020), (Singh et al., 2014; Galbis-Reig, 2016; Swogger and Walsh, 2018; Smith et al., 2019; Harun et al., 2021b)	Majority use is for health benefits, not recreational use or to get high. Use is almost exclusively oral, without the tendency of many recreational substance to smoke, inject, and/or nasally insufflate	Most people reporting "kratom addiction" found it weaker and more tolerable and acceptable than "drug" addiction and were more likely so use it to manage other addictions than to use addictively
Factor 2: Scientific evidence of pharmacological effect			
Potential Therapeutic Effects	(Behnood-Rod et al., 2020; Obeng et al., 2021), (Vicknasingam et al., 2020; Chakraborty et al., 2021a)	Kratom's antinociceptive effects appear to be mediated at least partly by 7-OH-MG metabolite formation	Animal study findings are consistent for use to manage opioid use disorder and withdrawal, pain and suggest exploration for other disorders
Mechanisms of Action	(Prozialeck et al., 2019), (Behnood-Rod et al., 2020), (Hassan et al., 2019; Hiranita et al., 2019; Kruegel et al., 2019; Gutridge et al., 2020; Todd et al., 2020; Suhaimi et al., 2021)	Kratom alkaloids, including 7-OH-MG may interact with opioid receptors, but do not recruit β-arrestin 2	These are consistent with little or no respiratory depression across a broad range of doses and conditions
Kratom Minor Alkaloids and Metabolites	(Kruegel et al., 2019; Chakraborty et al., 2021a; León et al., 2021; Sharma and McCurdy, 2021), (Newman and Cragg, 2016; Sharma et al., 2019; Domnic et al., 2021a; Domnic et al., 2021b; Chear et al., 2021)	Most minor kratom alkaloids and metabolites are in de minimis levels	Some minor alkaloids might influence kratom's pharmacological effects and merit evaluation for potential therapeutic uses at much higher doses than provided by kratom
Metabolism and Metabolite Profiling	(Kamble et al., 2019; Kamble et al., 2020a; Kamble et al., 2020b)	7-OH-MG appears to metabolize differently in humans than in other species (e.g., rats, dogs, monkeys)	Animal models for kratom alone may not be fully predictive of human effects
Factor 3: Current state of scientific knowledge			
MG and 7-OH-MG PK/PD	(Hiranita et al., 2020), (Avery et al., 2019; Jagaballan et al., 2019; Maxwell et al., 2020)	Greater exposure observed with natural kratom formulations than with oral MG	
Minor Alkaloids PK/PD	(King et al., 2020; Berthold et al., 2021; Kamble et al., 2021)	Approximately one third of minor alkaloids are characterized	
Clinical Studies	(Singh et al., 2018a; Singh et al., 2018b; Singh et al., 2019a; Singh et al., 2020a; Leong Bin Abdullah et al., 2020; Leong Abdullah et al., 2021)	Long term users of kratom have no significant differences in most physiological measures compared to nonusers	These should not be considered definitive safety data but provide a foundation for further studies
Factors 4, 5, and 6—History and Current Patterns of Abuse; The Scope, Significance and Duration of abuse; What, if any, Risk is there to the Public Health			
U.S. National and Federal Survey Data	(National Institute on Drug Abuse, 2019), (Coe et al., 2019)-(Garcia-Romeu et al., 2020), (U.S. Department of health and Human Services, 2020; Schimmel et al., 2021; Covey et al., 2020; Grundmann, 2017; Drug Abuse Warning Network, 2020; Drug Enforcement Adm, 2020a; Substance Abuse and Menta,	NSDUH Lifetime Use: 1.4%; Past Year Use0.7%. Little evidence of use on other federal surveys either because kratom was not specifically included or did not meet the threshold for reporting	Federal survey data provide no evidence that kratom poses an imminent threat to public health but merits continuing monitoring to better understand trends in use

(Continued on following page)

TABLE 1 | *(Continued)* Summary of references.

Factor/Description	Citations	Main findings	Comments
	2020; Drug Enforcement Adm, 2020b; Grundmann et al., 2021; Miech et al., 2021)		
Kratom Use Prevalence	(U.S. Department of Health and Human Services, 2020; Schimmel et al., 2021; Covey et al., 2020), (Botanical Education Alliance, 2016)	Estimates range from 1.8 million to over 16 million users in the US	It appears likely that there are at least 10 million kratom users in the US but more definitive studies are needed
Kratom Use Associated Mortality	(National Institute on Drug Abuse, 2019), (Giroir, 2018), (Food and Drug Admini, 2018; Gershman et al., 2019; Henningfield et al., 2019; Olsen et al., 2019)	Risk of kratom associated death appears to be at least a thousand times lower than for morphine-like opioids	Approximately 80% of kratom positive or "involved" deaths also detected other drugs of abuse or the decedent had a history of substance use disorders in one study contribution by other drugs not possible to rule out
Mortality Risks Projected as a Result of Banning Licit Kratom	(Henningfield et al., 2018a), (Ingraham, 2016b), (Giroir, 2018), (Grundmann et al., 2018; Coe et al., 2019; Garcia-Romeu et al., 2020), (Grundmann, 2017), (Henningfield et al., 2018b; Henningfield et al., 2018c; Henningfield et al., 2018d; Prozialeck et al., 2020)	Surveys suggest that it is likely that some kratom users would return to opioid use if kratom use and possession is banned	Fears of relapse to opioid use was a serious concern voiced by thousands of users in surveys and comments to DEA and FDA
Public Health and Individual Benefits of Kratom	(Henningfield et al., 2018a), (Prozialeck et al., 2019), (Coe et al., 2019)-(Garcia-Romeu et al., 2020), (Swogger and Walsh, 2018), (Grundmann, 2017), (Drug Enforcement Adm, 2016), (Raffa, 2014)-(Pain News Network, 2018)	Kratom is used by millions of people in the US to manage substance use disorders, pain, mood disorder, and for energy and improved mental focus and alertness	Reasons for use of kratom rather than FDA approved medications included better efficacy, presumed lower risks and because it is more accessible and tolerable, and/or preferred as a "natural product". Note: such data should not be used to support therapeutic claims in labeling or marketing
Kratom Use for Managing Opioid Use/Withdrawal and Other Health Reasons	(Coe et al., 2019), (Grundmann, 2017), (Singh et al., 2019b; Singh et al., 2020b; Singh et al., 2020c)	Surveys in US and SEA report kratom is used mostly for its health benefits, including opioid withdrawal	Although management of opioid use and withdrawal is prominent, nonclinical data suggest that use for other substance use disorder management and many other disorders merit further exploration
Comment on Therapeutic Use in Context of FDA Standards	(Katz, 2004; DiMasi et al., 2016; Food and Drug Admini, 2016; Dabrowska and Thaul, 2018; Wouters et al., 2020)	While research has yet to meet FDA's standard for therapeutic efficacy (NDA), there is substantial evidence of its use and efficacy in treating opioid withdrawal symptoms, and other disorders	
Factor 7—The psychic or physiological dependence liability			
Science Updates	(Hemby et al., 2019), (Coe et al., 2019)-(Garcia-Romeu et al. 2020), (Swogger and Walsh, 2018), (Harun et al., 2021b)-(Micknasingam et al., 2020), (Grundmann, 2017), (Grundmann et al., 2021), (Swogger et al., 2015; Smith and Lawson, 2017; Singh et al., 2018c; Leong Bin Abdullah et al., 2021)	Some chronic, frequent kratom users report dependence/addition and/or withdrawal, but this is generally more readily self-managed compared to use disorders of other drugs of abuse	

Although MG withdrawal signs are weak in rats compared to those from morphine withdrawal, there does appear to be evidence of physical dependence; however, MG withdrawal unlike morphine was not associated with anxiogenic-like subjective symptoms. When using a pentylenetetrazol (PTZ) discrimination trial to evaluate anxiogenic signs in rats after MG or morphine withdrawal precipitated by naloxone, MG showed no substitution to the PTZ discriminative stimulus, while morphine produced a dose-related PTZ-like stimulus, further supporting MG as a novel pharmacotherapeutic intervention for managing opioid use disorder (Johari et al., 2021).

Other studies of opioid or MG withdrawal suggested that specific brain proteins might serve as more sensitive biomarkers for physiological dependence in rats as compared to behavioral signs (Hassan et al., 2021). Clonidine treatment may attenuate MG withdrawal signs in rats (Hassan et al., 2021). Another recent study employed an open-field test and an elevated-plus maze test to evaluate naloxone-precipitated withdrawal from MG as compared to morphine, and provided additional evidence confirming that MG can induce physical dependence and measurable signs of withdrawal in rats (Harun et al., 2021a). Overall, the research is consistent with human reports that

kratom withdrawal is generally more modest and more readily self-manageable than that produced by opioids (e.g., 22 and as discussed in Factor 7).

3.1.2.6 Real World Evidence of Abuse and Dependence

Factors 4–6 discuss the public health aspects of kratom use; however, many of the same studies address Factor 1 concerning evidence for abuse and are mentioned here.

As reported by Henningfield, et al. (2018), although surveys and anecdotal reports in the US and SEA confirm that some kratom consumers reported "addiction" those studies also indicated that use "to get high" is relatively low as compared to opioids and other recreational drugs of abuse, and that use by smoking, injecting, and/or insufflating was rare as compared to opioids, stimulants and other recreational drugs (Henningfield et al., 2018a). Recent studies confirm that kratom intake can lead to dependence and withdrawal in some kratom users, but these are substantially less likely to interfere with family, social and occupational life and commitments as compared to opioid dependence. Moreover, kratom is widely viewed as a healthier and less life-impairing substance to replace drugs such as opioids, alcohol, and stimulants (Singh et al., 2014; Galbis-Reig, 2016; Swogger and Walsh, 2018; Prozialeck et al., 2019).

A variety of reports confirm kratom use to self-manage opioid withdrawal and that abstinence from high chronic kratom use is typically associated with milder symptomatology than abstinence from classical opioids (Grundmann et al., 2018; Smith et al., 2019; Garcia-Romeu et al., 2020). The conclusion of Prozialeck et al. (2019) and Grundmann et al. (2018) (Grundmann et al., 2018; Prozialeck et al., 2019) were further strengthened by two published US surveys which found that the overwhelming majority of kratom consumers reported that their use was for various health benefits and not for recreational purposes (Coe et al., 2019; Garcia-Romeu et al., 2020; Harun et al., 2021b).

3.1.3 Factor 1 Updated Conclusion

Diverse scientific approaches were employed to profile MG's abuse potential, finding no evidence of rewarding effects in the IV self-administration and ICSS models, and weak evidence of potential reward in the CPP procedure. MG only partially generalizes to morphine and more fully generalizes to the nonscheduled alpha-adrenergic agonists, phenylephrine and lofexidine. The new data suggest relatively low abuse potential as compared to morphine-like opioids, stimulants, and other drugs of abuse that demonstrate robust rewarding effects across all such abuse potential models. Similarly, MG's potential to produce physical dependence and withdrawal appears relatively low, but not absent, as compared to opioids in animal models. These findings are generally consistent with human reports that MG has a relatively low abuse and withdrawal potential as compared to recreationally used opioids but can reduce opioid self-administration and withdrawal. Surveys indicate that reducing opioid self-administration and withdrawal are among the most common reasons for kratom use in the US (also discussed in Factors 4, 5, and 6). New studies discussed in Factors 2–7 contribute further to the understanding of kratom's abuse potential, including its public health risks and benefits, that are part of the 8-factor abuse potential assessment.

3.2 Factor 2—Scientific Evidence of its Pharmacological Effects

3.2.1 Summary of 2018 Findings

MG and 7-OH-MG have some MOR mediated effects, but 7-OH-MG occurs at low concentrations in kratom leaves and is absent in many kratom product derivatives suggesting that the effects reported by kratom consumers are due primarily to MG. Some kratom effects were shown to be naloxone reversible (e.g., "pain" tolerance); however, MG and 7-OH-MG mechanisms of action were diverse and mediated by non-opioid transmitters and pathways (Kruegel and Grundmann, 2018). Thus, characterization of MG as an opioid "analog" or "narcotic like opioid" is not consistent with the overall evidence, leading Henningfield et al. (2018) to conclude "More research is clearly needed to elucidate receptor binding profiles and the diverse and probably complex mechanisms of action of the kratom alkaloids singly, in combination, and as commonly occur in marketed products and brewed extracts" (Henningfield et al., 2018a).

3.2.2 Factor 2 Science Updates

3.2.2.1 Potential Therapeutic Effects

Although neither kratom nor any of its alkaloids are approved for therapeutic use for any disorder, surveys discussed in *Factors 4, 5, and 6—History and Current Patterns of Abuse; the Scope, Significance and Duration of Abuse; what, if Any, Risk is There to the Public Health* and elsewhere (Henningfield et al., 2018a; Grundmann et al., 2018; Swogger and Walsh, 2018; Coe et al., 2019; Prozialeck et al., 2019; Garcia-Romeu et al., 2020) show individuals in the US and around the world describe using kratom for its health benefits. Research characterizing kratom's effects, mechanisms of action, and therapeutic kratom alkaloid use rapidly advanced since 2018. In a placebo-controlled cold pressor task evaluating anti-nociceptive effects, pain tolerance was significantly increased following consumption of a kratom tea-type decoction similar to Malaysian preparations (Vicknasingam et al., 2020). These data provided "the first objectively measured evidence obtained in controlled research with human subjects that are preliminarily supporting or confirming previously published reports of kratom pain relieving properties based on self-reports collected in observational studies".

Consistent with Vicknasingam et al. (2020)'s clinical findings, oral LKT administration to mice produced dose-related antinociceptive effects at doses that did not alter locomotion or produce CPP; there were brief, non-life threatening decreases in respiration (Behnood-Rod et al., 2020). Repeated LKT administration produced no physical dependence, but significantly decreased naloxone-precipitated withdrawal in morphine dependent mice, confirming MOR agonist activity and therapeutic LKT effect for treating pain and opioid physical dependence.

After investigating *in vitro* receptor binding affinity and *in vivo* morphine discrimination, antinociception in the "heated plate" pain test, and naloxone challenge tests in rats, the authors concluded "At human m-opioid receptor (MOR) *in vitro*, mitragynine has low affinity and is an antagonist … ". Overall, 7-OH-MG had stronger MOR mediated effects including antinociception (Obeng et al., 2021). An extensive series of tests characterized several minor indole and oxindole alkaloids that the authors suggest are insufficient in abundance to account for the biological effects of kratom but may show promise for the development of potential medicines including potential new chemical entities (Chakraborty et al., 2021a).

Several of these studies showed MOR mediated antinociceptive effects with little evidence of respiratory depression suggesting the potential to contribute to new generations of nonopioid analgesics.

3.2.2.2 Mechanisms of Action

Although kratom produces some effects in common with opioids, and some of its alkaloid's actions are mediated by MOR receptors, its effects and mechanisms of action are diverse and include non-opioid mechanisms of action and non-opioid acting constituent alkaloids, as discussed in earlier reviews (Henningfield et al., 2018a; Kruegel and Grundmann, 2018; Prozialeck et al., 2019). In 2021, Leon et al. (2021) investigated several alkaloids, including mitragynine, paynantheine and speciogynine that produce serotonergic effects potentially mediated by their metabolites. As the authors discuss, such actions would be consistent with some of the mood enhancing effects attributed to kratom (Kruegel and Grundmann, 2018; Sharma and McCurdy, 2021).

Kratom contains approximately 1–2% MG by weight, as well as other alkaloids (including 7-OH-MG) that typically are present at such low levels in kratom leaf material that it is uncertain if they contribute to kratom effects (Prozialeck et al., 2019). 7-OH-MG is present in low concentrations in natural kratom products, but gradually emerges *in vivo* as a MG metabolite. Kruegel et al. (2019) studied its role as a mediator of MG effects (Kruegel et al., 2019) summarizing "7-hydroxymitragynine is formed from mitragynine in mice and … brain concentrations of this metabolite are sufficient to explain most or all of the opioid-receptor-mediated analgesic activity of mitragynine … it suggests a possible explanation for the seemingly improved safety profile of mitragynine compared to classical opioid agonists … We believe mitragynine and related compounds have great potential as future therapeutics, but metabolic processes must be carefully considered as the field continues to advance." Hiranita, Sharma, Oyola et al. (2020) reported although "the conversion rate of 7-hydroxymitragynine from p.o. mitragynine is low, 7-hydroxymitragynine is a more potent and efficacious μ-opioid receptor agonist than mitragynine, suggesting that conversion to this metabolite may contribute to the *in vivo* μ-opioid activity of mitragynine" (Behnood-Rod et al., 2020).

Kratom is commonly consumed to enhance occupational performance and as a coffee substitute for energy at low doses. In an animal model of spatial learning and memory, high doses impaired memory (Hassan et al., 2019). Suhaimi, Hassan, Mansor and Müller (2021) reported changes in brain electroencephalogram (EEG) activity after acute and chronic MG exposure in rats, with strong effects on some measures at high doses, supporting the importance of more research on brain function and potential cognitive effects (Suhaimi et al., 2021).

Gutridge et al. (2020) pharmacologically characterized interactions between kratom extracts, kratom alkaloids, and synthetic carfentanil-amide opioids with G-proteins and beta-arrestin at mu, delta and kappa opioid receptors *in vitro*, and assessed whether they had rewarding properties and the degree to which they reduced alcohol intake (Gutridge et al., 2020). The authors concluded that "kratom alkaloids do not recruit β-arrestin 2 at the μOP, δOP, and κOP and can significantly reduce both moderate and binge alcohol intake in male and female mice. This pharmacological profile and effect on alcohol intake in rodents may explain why some find kratom useful to self-medicate for alcohol use disorder." These findings were further supported by the findings by Todd et al. (2020) who concluded "mitragynine and 7-hydroxymitragynine demonstrate functional selectivity for G-protein signaling, with no measurable recruitment of β-arrestin. Overall, the study demonstrates the unique binding and functional profiles of the kratom alkaloids, suggesting potential utility for managing pain, but further studies are needed to follow up on these *in vitro* findings" (Todd et al., 2020).

Hiranita et al. (2019) compared the effects of MG to morphine in behavioral and antinociception assays in rat models finding "Opioid receptors do not appear to mediate the disruptive effects of mitragynine on learned behavior. Mitragynine had lesser antinociceptive effects than morphine, and these did not appear to be mediated by opioid receptors. The pharmacology of mitragynine includes a substantial non-opioid mechanism" (Hiranita et al., 2019).

3.2.2.3 Studies of Kratom Minor Alkaloids and Their Metabolites, and Analogs

Advances in analytical methods are accelerating our understanding of the effects of numerous kratom alkaloids including liquid chromatography–tandem mass spectrometry assays that quantify kratom alkaloids in kratom leaf extracts and commercial products (Sharma et al., 2019).

Most of these alkaloids are present at de minimis levels with respect to human experience, effects, and safety; however, it is possible that while the majority of natural plant-based kratom preparation effects are mediated by MG, one or more minor alkaloids may also play a minor role and account for differences in kratom strains (Kruegel et al., 2019; Chear et al., 2021).

An *in vitro* pharmacological characterization of five kratom based minor alkaloids found that their low abundance made it unlikely that these alkaloids play a major mediating role in the biological actions of kratom consumed by humans, but this research may contribute to furthering the understanding of kratom mechanisms of action and opioid receptor function (Chakraborty et al., 2021a).

Kratom alkaloids are of interest as templates for novel synthesized molecules (i.e., analogs) for new medicines. One third to one half of FDA-approved medicines are based on natural plant product substances from which novel chemical entities were developed (Newman and Cragg, 2016; Domnic et al., 2021a). Such efforts are actively in progress characterizing a variety of indole and oxindole alkaloids, determining their chemical structures, and binding affinities for opioid and other receptors (Chear et al., 2021). One approach to the synthesis of novel MG analogs produced several partial MOR agonists with low G-protein activation (Chakraborty et al., 2021b). These analogs demonstrated robust analgesic effects but low respiratory depressant, locomotor, and conditioned place preference suggesting lower adverse effects including abuse potential.

Combinations of kratom alkaloids may inhibit cell proliferation and migration of nasopharyngeal carcinoma cells suggesting alkaloid or new analogs as potential cancer treatments (Domnic et al., 2021b).

3.2.2.4 MG Metabolism and Metabolite Profiling

Thirteen MG metabolites were identified in human liver microsomes (HLM) and S9 fraction studies (Kamble et al., 2019), and potential MG and other kratom alkaloids drug interactions were investigated including with pharmaceutic products (Kamble et al., 2020a).

7-OH-MG can be converted to pseudoindoxyl-MG in human plasma to a greater extent than is produced in mice, rats, dogs and cynomolgus monkeys, possibly explaining potential human effects and benefits that may not be predicted in animal studies alone (Kamble et al., 2020b).

3.2.3 Factor 2 Updated Conclusion

Kratom's main effects are due to the consumption of MG, but other minor alkaloids and metabolites, including 7-OH-MG, may also contribute to effects reported by consumers. Since 2018, many scientific advances improved our understanding of how these alkaloids and metabolites interact. Some alkaloids that contribute little to the effects of kratom may ultimately contribute to safer and more effective new medicines for a variety of disorders, as well as for general health and well-being. Development and approval of such products may be a decade or more in the future, but this rapidly advancing science is explaining how kratom works, and why its pain relieving, and other benefits occur with relatively low levels of abuse, dependence, and harmful decreases in respiration compared to opioids.

3.3 Factor 3—The State of Current Scientific Knowledge Regarding the Drug

3.3.1 Summary of 2018 Findings

The 2018 8-FA highlighted kratom's pharmacodynamic effects. Preclinical anti-nociceptive studies suggested that MG and 7-OH-MG produced such effects mediated by MOR receptors. Most information about the effects of long-term use in humans on various physiological, and cognitive parameters was based on anecdotal reports, case histories, and preliminary field studies in SEA. A two-compartment model best described human oral MG pharmacokinetics (Trakulsrichai et al., 2015).

3.3.2 Factor 3 Science Updates

New kratom pharmacokinetics studies in rats, mice and dogs document plasma MG, 7-OH-MG, and other alkaloids and minor metabolites over 12 h or more, with accompanying safety assessments. Six new clinical studies following long-term kratom use provide safety data on health, and organ and brain function were also conducted.

3.3.2.1 Pharmacokinetics and Pharmacodynamics Findings Related to MG and 7-OH-MG Safety

After oral administration of traditional or other natural kratom formulations to rats, greater systemic exposure was observed than that of an equivalent oral MG dose alone; no adverse events were reported (Avery et al., 2019).

Administration of 5 mg/kg oral MG (equivalent to approximately 3 mg/kg in humans) and 0.1 mg/kg IV MG to beagle dogs was well tolerated and produced no adverse events or major abnormalities in clinical parameters (Maxwell et al., 2020).

The estimated MG clearance (CL/F) was 2.21 L/h, absorption rate (Ka) 0.82/h, and volume of distribution (Vd) 30.8 L after oral 20, 40, and 80 mg/kg MG doses to rats (Jagabalan et al., 2019). Oral 55 mg/kg MG produced 85 ng/ml Cmax for 7-OH-MG, 14 times lower than the MG Cmax. Anti-nociception after IV MG and 7-OH-MG suggested that 7-OH-MG was more potent and efficacious than MG, and metabolic formation of 7-OH-MG contributes to *in vivo* MOR mediated effects of oral MG (Hiranita et al., 2020).

3.3.2.2 Pharmacokinetic and Pharmacodynamic Findings With Kratom's Minor Alkaloids

MG, 7-OH-MG, corynantheidine, speciogynine, speciociliatine, paynantheine, corynoxine, corynoxine-B, mitraphylline, ajmalicine, and isospeciofoline were analyzed in rat plasma after a variety of oral kratom products, with only MG, 7-OH-MG, speciociliatine, and corynantheidine quantifiable at 8 h (Kamble et al., 2021).

Speciociliatine pharmacokinetics were characterized following IV and oral dosing to help understand the potential contribution of this alkaloid to *in vivo* kratom administration effects (Berthold et al., 2021). Speciociliatine had higher systemic exposure and lower clearance compared to the other kratom alkaloids mitragynine and corynantheidine. Similarly, the pharmacokinetics of corynanthidine, a minor kratom alkaloid and perhaps a MOR antagonist, were determined after 2.5 mg/kg IV and 20 mg/kg oral doses to rats, yielding a 50% oral bioavailability, a 4.1 h Tmax and extensive distribution including in brain corpus callosum and hippocampus regions (King et al., 2020).

3.3.2.3 *Safety Assessments From Clinical Studies*

Kratom's anti-nociceptive effects in the cold pressor test are described in Factor 2 and its potential for physiological dependence and withdrawal are discussed in Factor 7 (Vicknasingam et al., 2020). This section summarizes six new clinical studies that assessed health and safety endpoints.

Leong Bin Abdullah et al. (2020) studied the lipid profiles, liver function and blood chemistries in 100 chronic kratom users and 100 healthy nonusers in Malaysia finding that the "liver parameters of the study participants were within normal range. The serum total cholesterol and LDL of kratom users were significantly lower than those of healthy subjects who do not use kratom. There were no significant differences in the serum triglyceride and HDL levels. However, higher average daily frequency of kratom use and increasing age were associated with increased serum total cholesterol among kratom users."

Singh, Muller, Murugaiyah et al. (2018) studied various hematological and clinical-chemistry parameters of kratom users in Malaysia (Singh et al., 2018a). They interviewed and collected blood samples from 58 "regular kratom users" and 19 "healthy controls." Findings showed there were no significant differences in the hematological and clinical-chemistry parameters of traditional kratom users and healthy controls, except for HDL and LDL cholesterol values; these were found to be above the normal reference range for the users. Similarly, long-term kratom consumption (>5 years), and quantity of daily kratom use (≥3 ½ glasses; mitragynine content 76.3–114.8 mg) did not appear to alter the hematological and biochemical parameters of kratom users. These data suggest that even long-term and heavy kratom consumption did not significantly alter the hematological and clinical-chemistry parameters of kratom users in a traditional setting.

Singh, Narayanan, Grundmann et al. (2020), studied the long-term effects of kratom use in thirteen people in Malaysia who used kratom longer than 20 years in a cross-sectional pilot study (Singh et al., 2020a). They summarized their results as follows: "Respondents were required to undergo a blood-test and laboratory analysis was conducted to determine the mitragynine content in an acquired street sample of kratom. The regular, long-term consumption of brewed kratom decoction did not cause any significant alterations in haematological, kidney, liver, thyroid, inflammatory and gastrointestinal analytes in a cohort of kratom users who had no history of substance misuse. However, those who had a higher intake (>3 glasses per day) of kratom exhibited higher lipid values (except for HDL-cholesterol), and a moderate elevation of homocysteine level. Long-term (>20 years with a daily intake of ≥87.54 mg mitragynine) kratom consumption was not associated with altered biochemical levels, although prolonged and chronic, frequent use (>3 glasses daily) may result in cardiovascular risks." Note that this study was not designed to determine if kratom or other factors contributed to higher lipid values.

Singh, Chye, Suo et al. (2018) conducted a preliminary study of the impact of kratom use on brain function, as assessed by brain magnetic resonance imaging, among chronic kratom users in Malaysia. They reported "There were no significant differences ($p > 0.05$) in the intracranial volume (ICV), cortical volumes (frontal, parietal, temporal, occipital, or cingulate lobe), or subcortical volumes (striatum, hippocampus, or amygdala), as well as in the diffusion tensor imaging (DTI) metrics, fractional anisotropy (FA) and mean diffusivity (MD) between kratom users and the controls. This preliminary study showed long-term consumption of kratom decoction is not significantly associated with altered brain structures in regular kratom users in traditional settings" (Singh et al., 2018b).

Singh, Narayanan, Muller et al. (2019) studied potential long-term cognitive effects associated with kratom use in kratom uses in Malaysia with assessments performed using the Cambridge Neuropsychological Test Automated Battery (Singh et al., 2019a). Relative to control participants, higher consumption (>3 glasses daily or mitragynine doses between 72.5 and 74.9 mg) of kratom tea was selectively associated with impaired performance on the Paired Associates Learning task of the Cambridge Neuropsychological Test Automated Battery, reflecting deficits in visual episodic memory and new learning.

Leong Bin Abdullah, Tan, et al., evaluated the prevalence of ECG abnormalities and QTc intervals in kratom users without histories of illicit drug use. Sinus tachycardia was higher in kratom users. Daily kratom consumption was associated with borderline QTc intervals (Leong Abdullah et al., 2021). Another study by Leong Bin Abdullah and Singh found that people who consumed four or more glasses of kratom tea daily had higher MG concentrations than lower intake consumers and this higher intake was associated with prolonged QTc intervals (Leong Bin Abdullah and Singh, 2021a). The same authors published a comprehensive review of the cardiovascular and cardiotoxic effects of kratom and came to the conclusion that limitations in studies to date do not permit definitive conclusions about the cardiovascular risks (Leong Bin Abdullah and Singh, 2021b).

3.3.3 Factor 3 Updated Conclusion

Pharmacokinetics and safety data from multiple species, kratom preparations, alkaloids, and metabolites; advances in bioanalytical assays providing more accurate and reliable findings; and data from multiple studies with MG doses many times higher than those human kratom users take are now available. These studies add to those described in Factors 1 and 2 confirming little evidence of serious adverse or life-threatening effects over a broad range of doses, dosage forms, and in four species (mouse, rat, dog, and monkey).

Other major advances in kratom science come from six clinical studies of long term kratom use effects and safety, as well as the study of anti-nociceptive effects of kratom and physiological dependence described in Factors 2 and 7. These important advances in kratom science evaluated the effects of long-term kratom use on a variety of physiological parameters including kidney and liver function, hematological parameters, cognition, and on brain function by brain magnetic resonance imaging. Although relatively small studies, none suggest serious adverse consequences of use. It is important to note that these are not definitive safety studies and cannot be used to claim that kratom has no adverse effects on any of the studied

physiological domains and limitations of each study were noted in the publications. Nonetheless, the findings are encouraging and should facilitate the conduct of more comprehensive follow-up studies.

3.4 Factors 4, 5, and 6—History and Current Patterns of Abuse; the Scope, Significance and Duration of Abuse; what, if Any, Risk is There to the Public Health

3.4.1 Summary of 2018 Findings

Note that for this update, Factors 4, 5, and 6 are considered together because they all contribute to understanding nonmedical use, recreational use and abuse, and public health impact, relying on some of the same surveys across factors. The Henningfield et al., 2018 8-FA considered all major relevant federal surveys, as well as data from internet monitoring, and more than 20,200 comments to the DEA, and concluded that there was no evidence of an imminent public health threat associated with kratom (Henningfield et al., 2018a). To the contrary, the review concluded that there were foreseeable health risks including opioid overdose and deaths if lawful kratom was banned and possession criminalized. Moreover, although kratom is not approved as safe and effective for therapeutic use, it was evident that most kratom use in the US was for health and well-being by people who personally found kratom to be more effective, tolerable, accessible and/or preferred a natural product as compared to FDA approved medicines.

3.4.2 Factors 4, 5, and 6 Science Updates

3.4.2.1 U.S. National and Federal Survey Data

Table 2 summarizes the main findings from the major national and federal surveys and other data sources. Overall, there are more similarities than differences with respect to demographics reported in this table as well as in other demographics reported in the published survey results. Prevalence appears to be substantially underestimated by the NSDUH and RADARS surveys (U.S. Department of health and Human Services, 2020; Schimmel et al., 2021).

NSDUH, RADARS, and Covvey et al. did not report reasons for use; however, many kratom users reported past or present use of opioids and/or drug addiction treatment consistent with past findings that self-management of addiction and withdrawal is a common reason for kratom use (National Institute on Drug Abuse, 2019; Coe et al., 2019; Garcia-Romeu et al., 2020; U.S. Department of health and Human Services, 2020; Schimmel et al., 2021; Covvey et al., 2020; Grundmann, 2017). Survey data incidence reports for DAWN, MTFS, NFLIS, and TEDS are apparently below the threshold for reporting as confirmed in an inquiry to NFLIS (Drug Enforcement Administration, 2020a; Drug Abuse Warning Network, 2020; Substance Abuse and Mental, 2020).

These findings do not support the conclusion that kratom use represents an imminent health threat and in fact kratom is not listed in the most recent DEA National Drug Threat Assessment (Drug Enforcement Administration, 2020b). There is no evidence that kratom is "fueling" or otherwise contributing to the opioid epidemic, though the survey data suggest that it is an informal self-management approach supporting the efforts of many opioid users to reduce and discontinue opioid use (Grundmann, 2017; Coe et al., 2019; Garcia-Romeu et al., 2020; Grundmann et al., 2021).

3.4.2.2 Kratom Use Prevalence

As mentioned in Table 2, the NSDUH and RADARS surveys may greatly underestimate the US prevalence and incidence of kratom use, with estimates of past year kratom use of 1,790,00–2,040,000.[3] (U.S. Department of health and Human Services, 2020; Schimmel et al., 2021). In contrast, a credible estimate based on market data suggested prevalence of 3–5 million in 2014–2015 (Botanical Education Allia, 2016).

Experts and marketers agree that the kratom market substantially expanded since that time, with kratom export data from Indonesia to the US and major marketer consensus finding that the US consumer base was likely 10–16 million. This is consistent with a nationally projectable survey estimate from 2020 concluding past year kratom use as 4.1% or 10,500,000 kratom users (Covvey et al., 2020).

3.4.2.3 Kratom Use Associated Mortality

The two most widely cited estimates of kratom associated mortality are based on world-wide reports over nearly 10 years (Food and Drug Administration, 2018; Olsen et al., 2019). FDA's statement noted that all but one involved other substances, and that case was under further investigation.[4] Medical examiners or coroners reported kratom as the cause of death in 91 (59.9%) of 152 kratom positive decedents (out of 27,338 overdose deaths in 27 states), including seven for whom kratom was the only substance positive on postmortem toxicology, although other substances could not be ruled out (Olsen et al., 2019). In approximately 80% of kratom positive or "involved" deaths, decedents had a history of "substance misuse", with 65% of cases listing fentanyl as the cause of death, 32.9% heroin, followed by benzodiazepines, prescription opioids, and cocaine. An earlier study (Gershman et al., 2019) cautioned that comprehensive toxicology might identify other substances contributing or causing death. We are not aware that any of the 93,000 drug overdoses estimated for 2020 included deaths due to kratom. That does not mean that there were no deaths in which kratom was the primary cause or a contributing factor; however, the signal is clearly low.

An assessment of various survey data concluded that the risk of kratom associated death was at least a thousand times lower than for morphine-like opioids (Henningfield et al., 2019). This is consistent with NIDA's position (National Institute on Drug Abuse, 2019) and with the 2018 DHHS kratom scheduling rescission letter and the conclusions drawn by Assistant Secretary of Health Brett P. Giroir, MD, ADM who stated:

[3]Note in a summary of RADARS data presented a few months after the Schimmel et al., 2020 publication, it was reported that the national projected past year prevalence estimate was 3.35 million.

[4]FDA never reported the results of that investigation, however, the US DHHS review that led to the 2018 withdrawal of the 2017 MG and 7-OH-MG CSA scheduling recommendation determined that the incident in question was an automobile crash not attributable to kratom use.

TABLE 2 | Summary of data sources.

Survey/Data source	Main results and comment	Other comments
Drug Abuse Warning Network (Drug Abuse Warning Networ, 2020)	No reports in DAWN from 1970 to 2011 "New DAWN" began in 2019 and has not listed kratom	
Monitoring the Future Study (Miech et al., 2021)	Kratom use is not assessed	Note that 9% of NSDUH Reports were from age 12–17 year olds
National Forensic Laboratory Information Service (Drug Enforcement Adm, 2020a)	Since 2016 NFLIS did not include MG/kratom reports because the rates are below the threshold for inclusion	
National Survey on Drug Use and Health (U.S. Department of health and Human Services, 2020)	Paid responders on national panel (n = 67,625).[6] 2019 Prevalence Lifetime Use: 1.4%; Past Year Use: 0.7%	See Grundmann et al., 2021 and Henningfield et al., 2021 comment on apparent underestimation of kratom use prevalence (Grundmann et al., 2021; Henningfield et al., 2021)
Treatment Episodes Data Set (Substance Abuse and Menta, 2020)	No reports. This does not mean there were no reports but suggests subthreshold signal	Internet chatrooms and SUD treatment clinic advertising suggests some kratom users are seeking cessation assistance
Coe et al. (2019) (Coe et al., 2019)	Internet Survey of self-identified kratom users age ≥18 (n = 2,867) 48% use for self-management of pain 10% for self-management of opioid UD or withdrawal 22% use for mood management 2.4% use to get high	
Garcia-Romeu et al. (2020) (Garcia-Romeu et al., 2020)	Internet Survey of self-identified kratom users, age ≥18 (n = 2,798) 91% use for self-management of pain 41% for self-management of opioid UD or withdrawal 67% for management of anxiety 65% for depression <3% report kratom dependence	2% met DSM-5 criteria for past-year moderate or severe kratom-related SUD, but it was rated very low on scale of concern and adverse impact
Cowey et al. (2020) (Cowey et al., 2020)	Nationally representative Internet survey of persons aged 18–59 (n = 1842) 112 (6%) reported lifetime kratom use 72% were 25–44 years old, male, employed, and at higher educational levels 24–47% of respondents indicated self-reported diagnoses for any addiction, and 43% reported previously received treatment for addiction	Similar demographics as Grundmann 2017, Coe et al., 2019 and Garcia-Romeu et al., 2020 but may have underestimated % over 50 due to 59 year old upper age limit of survey. ((Coe et al., 2019), (Garcia-Romeu et al., 2020), (Grundmann, 2017)) Reasons for use were not asked, e.g., to self-manage pain, addiction, mood
Schimmel et al. (2021) (Schimmel et al., 2021)	RADARS® survey of paid survey responder on national panel age >18 (n = 59,714) 0.8% lifetime use 44% age >35 61% male 59% past year opioid use	Reasons for use were not asked, e.g., pain, addiction, mood. See Grundmann et al., 2021 and Henningfield et al., 2021 comment on apparent under estimation of kratom use prevalence (Grundmann et al., 2021; Henningfield et al., 2021)

"There is still debate among reputable scientists over whether kratom by itself is associated with fatal overdoses" (Giroir, 2018).

3.4.2.4 Mortality Risks Projected as a Result of Banning Licit Kratom

Surveys and more than 20,000 comments to the DEA suggest that many kratom users fear resumption of opioid use and the need to resort to illicit kratom markets (Drug Enforcement Adm, 2016; Grundmann, 2017; Coe et al., 2019; Garcia-Romeu et al., 2020). It is not possible to project how many people would relapse to opioids and potentially overdose (Henningfield et al., 2018a; Henningfield et al., 2018b; Henningfield et al., 2018c; Henningfield et al., 2018d; Grundmann et al., 2018; Prozialeck et al., 2020). This was a concern of the DEA in withdrawing its 2016 kratom scheduling proposal (Ingraham, 2016b) and in the US DHHS kratom scheduling recission letter (Giroir, 2018).

3.4.2.5 Public Health and Individual Benefits of Kratom

In 2018, a systematic review of kratom use and mental health by Swogger and Walsh concluded ". . .kratom use appears to have several important mental health benefits that warrant further study. Kratom dependence is a risk for some people, though the dependence syndrome appears to be mild in its psychosocial and physiological effects relative to that of opioids. More and better research, including well-controlled, prospective studies, is necessary to further elucidate kratom's potential for good and harm and the moderators of its effects" (Swogger and Walsh, 2018). The

therapeutic potential of kratom based on surveys, anecdotal reports, and nonclinical research supports the plausibility of such benefits as discussed by other reviewers (Prozialeck et al., 2019; Hemby et al., 2019; Yue et al., 2018; Grundmann et al., 2018; Kruegel and Grundmann, 2018; Sharma and McCurdy, 2021; Swogger et al., 2018; Prozialeck et al., 2021).

The most important public health benefits with respect to mortality are widely agreed upon by kratom experts and surveys, and that is its use to self-manage opioid and other drug addiction and withdrawal symptoms, and thereby reduce use and overdose from far deadlier substances. This type of use is not unique in the US but was long reported in SEA (Raffa, 2014; Henningfield et al., 2018a). This was also reported in the first major US Internet survey of kratom use (Grundmann, 2017), as well as in subsequent surveys (Coe et al., 2019; Garcia-Romeu et al., 2020; Pain News Network (2018)). This was also a conclusion of a systematic review of 13 studies addressing kratom use and mental health in the US, SEA, and other countries and regions of the world, and a review by an international consortium of kratom researchers (Swogger and Walsh, 2018; Prozialeck et al., 2019).

While the opioid epidemic represents a highly visible and deadly epidemic in its own right, it is important to recognize that many millions use kratom as their preferred approach to managing other life-threatening disorders including pain, depression, anxiety, post-traumatic stress, fibromyalgia and more (Drug Enforcement Adm, 2016; Grundmann, 2017; Coe et al., 2019; Garcia-Romeu et al., 2020).

3.4.2.6 Kratom Use for Managing Opioid Use/Withdrawal and Other Health Reasons

In the first half-year of the COVID-19 pandemic, there was uncertainty about kratom supply by vendors and consumers, however, overall US supply was not affected. The main reasons for kratom use are pain relief (48%), anxiety, "PTSD" or depression (22%), increase energy or focus (10%), and "help cut down on opioid use and/or relieve withdrawal" (10%) (Coe et al., 2019). Side effects were generally minor, e.g., stomach upset, rarely required medical attention and rates and severity of "bad reactions" were generally similar to those reported by Grundmann (Grundmann, 2017).

Field studies with face-to-face interviews in Malaysia provide complementary evidence to US Internet surveys regarding reasons for use and potential benefits (Singh et al., 2019b). Motives related to mood and other factors in 116 regular kratom users employed the Drinking Motives Questionnaire (DMQ) to measure motives for kratom use, reported "heavy" kratom use as drinking more than three glasses daily (estimating that 1 glass contains 48.24–50.4 mg of mitragynine), with use associated with significantly higher means scores on the Coping and Enhancement scales. A field face-to-face survey of 92 long-term male kratom users found that 72 participants (78%) reported using kratom to "enhance sexual performance" and all but one found did their sexual performance did improve. Interestingly, among participants who described kratom intake for other reasons, 35% reported enhanced sexual performance (Singh et al., 2020b).

Patterns and reasons for use and demographics were investigated in 142 current and 62 former opioid polydrug users in Malaysia (Singh et al., 2020c). The alkaloid content of a kratom street sample was primarily MG, followed by paynantheine, speciociliatine, speciogynine, and "low levels" of 7-OH-MG. There were no significant differences in demographic characteristics between current and former opioid polydrug users except with respect to marital status, with current kratom users having a higher odds ratio of being single. While both current and former opioid users reported using kratom to ameliorate opioid withdrawal, current users had significantly higher likelihood of using kratom for that purpose; however, former opioid users were more likely to use kratom for mood elevating effects.

3.4.2.7 Comment on Therapeutic Use in Context of FDA Standards

It is important to note that the benefits documented in published surveys do not constitute the basis for therapeutic claims and no kratom product or kratom alkaloid is approved for therapeutic use in the US. The FDA and other federal agencies state that there is no proven therapeutic use for kratom despite evidence that millions of people in the US and many more in SEA use kratom primarily for therapeutic, beneficial use. That evidence includes peer reviewed surveys and field studies in the US and SEA, clinical and preclinical studies showing that MG's mechanisms of action are consistent with such effects. Moreover, several animal models used to predict efficacy for treating opioid use disorder, opioid withdrawal and pain demonstrated efficacy.

None of this research meets FDA's standard for therapeutic efficacy that is determined by evaluation of a New Drug Application (NDA). The NDA must be supported by "substantial evidence of effectiveness," and is defined as "evidence consisting of adequate and well-controlled investigations" (Katz, 2004; Dabrowska and Thaul, 2018). The time and cost to develop and achieve FDA approval of a product as therapeutically effective and acceptably safe varies widely but is often approximated at 10 years and 1 billion dollars (DiMasi et al., 2016; Wouters et al., 2020). Only two botanical substances, Veregen® (sinecatechins) and Mytesi™ (crofelemer), were developed as drug products consistent with FDA's Botanical Drug Guidance and both are available only as prescription drugs that is typical of new drug approvals (Food and Drug Admini, 2016).

3.4.3 Factor 4, 5, and 6 Updated Conclusions

The most important finding from new US survey evidence is that the conclusion that kratom products and kratom's primary active alkaloid, MG, pose a "serious imminent threat to public health" is not supported. This extensive survey update agrees with the Henningfield et al. (2018) conclusion: "There has been no documented threat to public health that would appear to warrant emergency scheduling of the products and placement in Schedule I of the CSA carries risks of creating serious public health problems.... Although kratom appears to have pharmacological properties that support some level of scheduling, if it was an approved drug, placing it into Schedule I, thus banning it, risks creating public health problems that do not presently exist" (Henningfield et al., 2018a).

The evidence shows that millions of people in the US purchase and use kratom products for improving health and are preferred to FDA approved medicines because for them, kratom products are more effective, accessible, and tolerable. Furthermore, many prefer managing health problems with natural products.

For those using kratom products in place of opioids, which appears to be approximately 1/3 of all kratom users, it is foreseeable that removing kratom from the legal marketplace would put many at risk of returning to opioid use and risking opioid overdose death. This was clearly stated in comments to the DEA and public hearings as reported in the 2018 8-FA, and in surveys. Assistant Secretary Dr. Giroir noted "... there is a significant risk of immediate adverse public health consequences for potentially millions of users if kratom or its components are included in Schedule I, such as: ... Kratom users switching to highly lethal opioids, including potent and deadly prescription opioids, heroin, and/or fentanyl, risking thousands of deaths from overdoses and infectious diseases associated with IV drug use ..." (Giroir, 2018).

3.5 Factor 7—The Psychic or Physiological Dependence Liability

3.5.1 Summary of 2018 Findings

Recently, psychic dependence is referred to simply as "dependence" or "substance use disorder" and more commonly as "addiction" though definitions of addiction vary widely (American Psychiatric Asso, 1994; World Health Organization, 1994). Physiological dependence is often used interchangeably with the most common measure of physiological dependence, namely "withdrawal" which is also considered a clinical disorder (American Psychiatric Asso, 2013).

In the 2018 8-FA, Henningfield, Fant and Wang (2018) concluded "There have not been laboratory studies of physical or psychological dependence or abuse potential in humans caused by kratom." Nor had classic animal studies employing the drug self-administration and physical dependence/withdrawal model been conducted (see Factor 2 in this report)".

Nonetheless, the real-world evidence in the published literature supported the following conclusions: "...abrupt discontinuation [of kratom use] may be accompanied by withdrawal symptoms that are qualitatively similar but generally weaker than those observed following discontinuation of opioids. However, such reports make it difficult to disentangle the emergence of preexisting symptoms that had been mitigated by kratom use from those that occur as a physiological rebound accompanying the abrupt discontinuation of kratom use in kratom-dependent people. More studies of kratom's potential to produce physical dependence, tolerance, and withdrawal are needed to characterize the nature and severity, and determinants of abstinence-associated symptoms."

3.5.2 Factor 7 Science Updates

In addition to the animal laboratory studies predictive of abuse potential, dependence, and withdrawal summarized in Factor 1, there are several new studies, surveys, and expert reviews addressing the risk and factors associated with dependence and withdrawal. A major category of kratom use is related to the typically mild and tolerable dependence and withdrawal that occurs in some frequent kratom users and the resulting use of kratom as an approach to self-management. In this context, kratom provides a harm reduction alternative to opioids in particular, but also potentially for alcohol, methamphetamine, and other drugs.

Dependence and withdrawal were addressed in a systematic review of kratom use for mental health reasons that concluded "Kratom dependence is a risk for some people, though the dependence syndrome appears to be mild in its psychosocial and physiological effects relative to that of opioids ... kratom use does not appear to result in significant respiratory depression" (Swogger and Walsh, 2018). A major category of kratom use globally was to self-manage substance use disorders, consistent with the findings discussed in Factor 1 that demonstrated low abuse and physical dependence potential, and that MG administration reduced morphine and heroin self-administration, and withdrawal signs (Hemby et al., 2019; Harun et al., 2021b).

The Vicknasingam et al. (2021) study included in Factor 2 also assessed potential withdrawal signs using the Clinical Opiate Withdrawal Scale (COWS), comparing scores when participants were administered placebo or a kratom concoction (Vicknasingam et al., 2020). Although this study was not designed to be a definitive withdrawal assessment study, and did not include an opioid comparator, it was likely that people using kratom multiple times per day for many years would have experienced pronounced withdrawal symptoms. The authors concluded "None of the participants reported withdrawal symptoms either using spontaneous self-report or had significant withdrawal symptoms based on the COWS scores... All participants reported long histories of daily kratom consumption, with high frequency of daily consumption and substantial amounts consumed. It is not possible to quantify these reports into markers that could be used to approximate amounts of plant material or active ingredients consumed. However, despite the reported long duration and high levels of daily kratom consumption, during documented kratom discontinuation lasting from 10 to 20 h, no participant reported or displayed discomfort, symptoms, or signs of potential withdrawal symptoms."

100 long term kratom users and 100 non-users in Malaysia were interviewed to assess potential symptoms related to kratom dependence and withdrawal (Leong Bin Abdullah et al., 2021). Kratom use longer than 6 years and 3 or more times per day were more likely to be associated with dependence, reduced quality of life and/or withdrawal symptoms when kratom use is discontinued. However, the authors noted that the study did not allow causative conclusions as to whether quality of life reductions are a

result of increased kratom use or if such quality of life and other demographic factors contribute to more frequent kratom use.

An internet survey assessing reasons for use and effects of use in 2,798 present and past kratom users included questions about kratom dependence, withdrawal symptoms associated with discontinuation, and use to self-manage opioid dependence (Garcia-Romeu et al., 2020). Kratom-related withdrawal symptoms were reported by 9.5% of respondents with another 17.5% reporting possible kratom-related withdrawal. This supports results of previous studies (Swogger et al., 2015; Grundmann, 2017; Smith and Lawson, 2017; Coe et al., 2019) by suggesting that kratom has a relatively benign risk profile compared to typical opioids, with only a minority of respondents endorsing kratom-related adverse effects, withdrawal symptoms, or problematic use.

Coe et al. (2019) conducted an internet survey (2,867 current, 157 former kratom users) that included similar questions as Garcia-Romeu et al. and Grundmann (2017) (Grundmann, 2017; Garcia-Romeu et al., 2020), related to opioid use and effects. Kratom use was less likely to interfere with social, family, and occupational functioning compared to conventional opioids. Kratom was used by many to reduce or completely replace prescription and nonprescription opioid withdrawal and was generally considered "very effective" for managing opioid withdrawal. Relief of anxiety (including associated with post-traumatic stress disorder), depression, as well as to increase focus or energy were other major reasons for use. The foregoing conclusions are also consistent with those of Grundmann, Babin, Henningfield et al. (2021) who stated: "Some user reports suggest that regular kratom consumption carries risks of dependency and addiction, though with generally self-manageable withdrawal" (Grundmann et al., 2021).

Singh, Narayanan, Muller et al. (2018) employed widely used psychiatric instruments (Beck Depression Inventory and Beck Anxiety Inventory) to assess potential symptoms of anxiety and depression that may accompany abrupt discontinuation of kratom use in apparently frequent chronic kratom consumers in Malaysia (Singh et al., 2018c). Most respondents (70%) experienced symptoms of mild anxiety, while 81% reported symptoms of mild depression during kratom cessation. Those who consumed higher quantities of kratom tea daily (≥4 glasses) had "higher odds of reporting longer duration of kratom use history . . . , higher frequency of daily kratom use (≥4 times), . . . and were more likely to experience moderate symptoms of depression during kratom cessation" than those who consumed less. Cessation from regular and long-term kratom tea consumption was not associated with symptoms of high anxiety or depression.

3.5.3 Factor 7 Updated Conclusion

Kratom's potential to produce psychic dependence (aka "dependence" or "use disorder") and physiological dependence (aka, "withdrawal") advanced considerably due to surveys, and preclinical and clinical studies. Several surveys in the US, field studies in Malaysia, and a clinical trial of pain relief efficacy that included assessment of withdrawal support the conclusions of the 2018 8-FA (Henningfield et al., 2018a). Some kratom users report dependence/addiction and/or withdrawal with a greater likelihood with higher levels of chronic daily consumption. In general, it is more readily self-managed and less likely to interfere with occupational, social and family activities and responsibilities compared to dependencies to opioids, alcohol, stimulants and other drugs of abuse.

It is also important to note that there is wide individual variability, and some people do experience what they consider to be strong addiction and withdrawal to kratom. At present, it appears likely that many if not most individuals had prior histories of dependence to opioids and/or other drugs. Their conditions remain of concern nonetheless and is another area warranting further study. People for whom kratom use is considered a serious problem should have the same access to treatment as anyone with a substance use disorder. Many addiction treatment providers already advertise and offer kratom use disorder treatment assistance.

Use of opioids such as methadone and buprenorphine should be judicious in people seeking help to manage their kratom use disorder and/or withdrawal. If they formerly or are perhaps still using opioids, then the possibility of treatment with buprenorphine or methadone may be more helpful and appropriate if kratom is not satisfactory. However, for people without prior histories of recreational opioid use and dependence, treating with buprenorphine or methadone may introduce individuals to opioids and may not be the best option. This could be like treating unwanted caffeine dependence with amphetamine to replace the caffeine.

4 DISCUSSION AND CONCLUSION

In 2018, there was sufficient evidence to conclude that there was no imminent public health threat nor high degree of pharmacological abuse potential that would justify scheduling, taking into consideration the serious foreseeable adverse public health consequences of thousands of former opioid users returning to opioids and risking overdose, as well as the *de facto* criminalization of millions of US citizens. Approximately 8 months after the Henningfield et al. 8-FA was published, the US DHHS came to the same conclusion and rescinded the 2017 recommendation to place MG and 7-OH-MG in Schedule I of the CSA (Giroir, 2018). Since January 2018, there was remarkable research relevant to the abuse potential and safety of kratom from the perspective of the CSA eight factors.

Two intravenous drug self-administration studies showed that MG did not substitute for morphine (Hemby et al., 2019) or heroin (Yue et al., 2018), and that MG pretreatment reduced morphine and heroin self-administration. An intracranial brain self-stimulation (ICSS) study showed that whereas morphine produced robust decreases in the brain stimulation threshold, MG and 7-OH-MG did not (Behnood-Rod et al., 2020).

In the evaluation of physical dependence and withdrawal potential, four studies showed MG did not carry morphine-like physical dependence or withdrawal potential (Harun et al., 2020; Hassan et al., 2020; Wilson et al., 2020; Johari et al., 2021). Moreover, MG pretreatment of animals reduced spontaneous

morphine withdrawal (Hassan et al., 2020). In MG physically dependent animals, withdrawal signs were qualitatively different and much weaker than morphine, consistent with its mixed mechanisms of action (Johari et al., 2021). In a mouse physical dependence model (Wilson et al., 2020), naloxone precipitated withdrawal in morphine- but not MG LKT-maintained animals, while LKT pretreatment significantly reduced withdrawal in the morphine-maintained mice.

These findings are consistent with new US survey data showing relatively low self-reported kratom addiction rates, with most people describing MG use to manage pain, depression, anxiety, opioid and other drug use disorders and withdrawal, and to increase alertness, focus and work performance. In addition, kratom dependence and withdrawal are generally weaker and more readily self-managed relative to opioids.

Extensive *in vitro* and *in vivo* animal neuropharmacology studies of the mechanisms of action of MG, 7-OH-MG and other alkaloids illustrate that they are not appropriately designated as opioids, opioid analogs, or "atypical opioids," though some are partial agonists with low potential to recruit beta arrestin and produce respiratory depression. 7-OH-MG produces stronger MOR mediated opioid effects on abuse potential related measures and antinociception, but naturally occurs at levels so low as to not contribute meaningfully to kratom effects. This supports recommendations that regulations should prohibit kratom products with 7-OH-MG concentrations greater than occur safely in nature.[5]

Safety assessments in pharmacokinetic and pharmacodynamic studies confirm that kratom based extracts and individual alkaloids at far higher doses than consumed by humans do not appear to carry substantial mortality risk, with one analysis suggesting a mortality risk at least 1000 times less than illicit opioids (Henningfield et al., 2019). Results support the US DHHS conclusion that "experts disagree on whether kratom by itself causes overdose deaths" (Giroir, 2018; National Institute on Drug Abuse, 2019). This does not imply that kratom does not carry a mortality risk—most substances do under certain conditions and exposure levels, another important area for further research.

As to the question of whether or not kratom poses an imminent public health threat, no analysis of factors 4–6 of the 8 CSA factors, including the FDA analysis (Food and Drug Administration, 2017b), revealed kratom to pose an imminent public health risk. The US has the most comprehensive survey data to address the need for temporary or "emergency" placement of substances into CSA Schedule I. Yet none of the major surveillance systems identified such a public health threat. This includes the old and new Drug Abuse Warning Network, Monitoring the Future, National Survey on Drug Use and Health, RADARS®, or the Treatment Evaluation Data Set. DEA's National Forensic Laboratory Information System mentioned kratom reports from 2010–2016 but none thereafter because the signal remained low. Neither has kratom been included in any DEA Annual National Drug Threat Reports.

The primary public health consequences of kratom use are well documented by four surveys of more than 20,000 kratom consumers summarized in this review, by Henningfield et al., 2018 (Henningfield et al., 2018a), and more than 20,000 comments to DEA (Drug Enforcement Adm, 2016) suggesting that millions of US citizens use kratom for health and well-being and many to self-manage opioid and other drug withdrawal and use disorders as their preferred approach. Many kratom users believe kratom is more effective, tolerable and/or accessible than other pharmaceuticals (Grundmann et al., 2018; Swogger and Walsh, 2018; Prozialeck et al., 2019; Prozialeck et al., 2020).

There are problems with kratom product purity (e.g., Prozialeck et al., 2020) (Prozialeck et al., 2020) and adulteration (Prozialeck et al., 2019) in the consumer marketplace. A scheduling imposed kratom ban would likely worsen these problems because kratom marketing would not discontinue and consumer demand would not cease, rather marketing would switch from regulatable lawful to illicit kratom suppliers. More states and ideally the US federal government could address these issues by product performance standards and regulatory approaches guided by science and informed through a federal rule-making approach.

Remarkably, as discussed in several reports (Henningfield et al., 2019; Prozialeck et al., 2019; Henningfield et al., 2021), there has yet to emerge a generally accepted estimate of the number of current US kratom consumers, which current ranges from approximately 2 to more than 10 million (see factors 4–6 and Henningfield et al., 2021) (Henningfield et al., 2021). As noted by Henningfield et al., 2018 and bluntly stated in the US DHHS scheduling rescission letter (Giroir, 2018), surveys need to address such issues before any action to ban consumer kratom sales and possession is contemplated. As stated in the DHHS letter:

"Further analysis and public input regarding kratom and its chemical components are needed before any scheduling should be undertaken. It is important that we have additional information to justify scheduling, such as:

- A scientific assessment of how many Americans utilize *kratom*, and an understanding of the geographic and demographic distribution of these users (Factors 4, 5);
- A scientific assessment of the actual scale and degree of dependence and/or addiction of Americans utilizing *kratom* (Factors 1, 5, 7);
- A scientific determination based on data whether *kratom* actually serves as a gateway drug that promotes further use of more dangerous opioids (Factors 1, 4, 5).
- A valid prediction of how many kratom users will suffer adverse consequences if kratom is no longer available, including among people with intractable pain, psychological distress, risk for suicide; and/or people who might transition to proven deadly opioids such as prescription opioids, heroin, or fentanyl.

[5]Five states (AZ, GA, NV, OK, and UT) have taken this approach in their kratom consumer protection regulations and law but setting actual performance standards to address the variety of kratom based products would be seem best done by FDA which has extensive experience in such matters and could take a federal rule making approach that ensures input from diverse stakeholders representing science, public health, consumers, and the industry that prepares and manufactures kratom products.

- A scientifically valid assessment of causality in the current few deaths in which *kratom* was co-utilized with known lethal drugs such as fentanyl (Factors 1, 2, 3, 5 and 6)" (Giroir, 2018).

By law, scheduling considers diverse evidence including chemistry and pharmacology, level of abuse potential, physiological dependence determined in animal and human studies, as well as assessment of individual and public health risks and benefits. Taking all of these factors into account, this review provides stronger evidence than was available to Henningfield et al., or the US DHHS in 2018 (Henningfield et al., 2018a; Giroir, 2018) to recommend not only that CSA scheduling is not warranted but that CSA scheduling carries a substantial foreseeable risk of thousands of opioid overdose deaths as well as depriving millions of US citizens of one of their preferred health management assets. The fact that possession of kratom by millions of US citizens would be criminalized as a heroin-like drug felony offense is not a CSA consideration but should not be ignored.

In conclusion, we do not recommend scheduling kratom or any of its alkaloids in the CSA. We do recommend accelerated research to address the many questions raised in this review, including support of the potential development of new medicines with potential better safety and/or efficacy profiles for a variety of diseases. Finally, we recommend that the US federal government and other nations consider approaches to kratom regulation as are presently being pioneered in five US states.

AUTHOR CONTRIBUTIONS

JH was the primary scientist/investigator, and lead the identification of articles, writing, and analysis. DW supported writing, research, and analysis. MH provided toxicological analysis of articles and supported writing and analysis.

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Conflict of Interest: Authors JH, DW, and MH were employed by the company Pinney Associates, Inc. Through Pinney Associates, JH, MH, DW, and colleagues provide scientific and regulatory consulting to support new drug applications (NDAs) and risk management programs for a broad range of CNS active substances and drug products including psychedelic substances, new chemical entities, and alternative formulations and routes of delivery, as well as dietary ingredient notifications, cannabinoid assessment, and noncombustible tobacco/nicotine products for FDA regulation. This includes advising the American Kratom Association and its affiliate, the Center for Plant Science and Health, on kratom science and regulation. MH is also a Professor at Thomas Jefferson University & President, Huestis & Smith Toxicology LLC, a toxicology consulting company working with pharmaceutical & diagnostic companies. No clients had any contribution or input into this assessment or its conclusions.

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2 Appendix 2: The Abuse Potential of 7-Hydroxymitragynine (7-OH) According to the 8 Factors of the Controlled Substances Act

Pinney Associates

The Abuse Potential of 7-Hydroxymitragynine (7-OH) According to the 8 Factors of the Controlled Substances Act

Developed for Submission to the Drug Enforcement Administration (DEA), Food and Drug Administration (FDA), and National Institute on Drug Abuse (NIDA)

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September 29, 2025

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List of Abbreviations

Abbreviation	Definition
B-arrestin-2	Beta (β)-arrestin-2
7-OH (7-OH-MG, 7-OH-MIT)	7-hydroxymitragynine
8-FA	8-Factor Analysis
CAMU	Commonly Accepted for Medical Use
CNS	Central nervous system
CPP	Conditioned place preference
CSA	Controlled Substances Act
CYP	Cytochrome P450 (i.e., 3A, 2D6, 3A4)
DAWN	Drug Abuse Warning Network
DEA	Drug Enforcement Agency
DHHS	Department of Health and Human Services
DOJ	Department of Justice
DOR	Delta (δ)-opioid receptor
ECDD	World Health Organization's Expert Committee on Drug Dependence
FAERS	Food and Drug Administration Adverse Event Reporting System
FDA	Food and Drug Administration
GI	Gastrointestinal
IC_{50}	Half-maximal inhibitory concentration
ICSS	Intracranial self-stimulation
IP	intraperitoneal
IQR	Interquartile range
IV	intravenous
Ki	Inhibitor constant
KOR	Kappa (κ)-opioid receptor
LSD	Lysergic acid diethylamide
MOR	Mu (μ)-opioid receptors
NDIN	New Dietary Ingredient Notification
NFLIS	National Forensic Laboratory Information System
NIDA	National Institute on Drug Abuse
NIH	National Institutes of Health
NFLIS	National Forensic Laboratory Information System
NPDS	National Poison Data System
NSDUH	National Survey on Drug Use and Health
PO	Per oral
TEDS	Treatment Episodes Data Set
UGT	UDP-glucuronosyltransferase (i.e., UGT1A1, UGT1A3, UGT1A9)
UNODC	United Nations Office on Drugs and Crime
U.S.	United States

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1 Introduction

On July 29, 2025, the United States (U.S.) Food and Drug Administration (FDA) presented its assessment of a potential "novel, emerging public health threat", 7-hydroxymitragynine (also known as 7-OH), a psychoactive substance that naturally occurs as a minor constituent of the kratom plant (Mitragyna speciosa) and also forms in the body as a metabolite of mitragynine, the plant's primary alkaloid. This assessment, shared as a news release on the FDA website (FDA, 2025a), was based on epidemiological findings and scientific data on toxicological concerns. FDA's release linked to a summary scientific evaluation developed by FDA scientists titled "Assessment of the Scientific Data and Toxicological Concerns Around an Emerging Opioid Threat" (Reissig et al., 2025), a slide set titled "Preventing the Next Wave of the Opioid Epidemic: What You Need to Know about 7-OH" (FDA, 2025b), and a Dear Colleagues letter by Commissioner Dr. Marty Makary (2025). Additionally, the Secretary of Health and Human Services, Robert F. Kennedy, Jr., hosted a press conference described as "measures to safeguard American public from dangerous opioid 7-OH (DHHS, 2025b). Participants included Secretary Kennedy, Department of Health and Human Services (DHHS) Deputy Secretary Jim O'Neill, FDA Commissioner Dr. Marty Makary, U.S. Senator Markwayne Mullin (R-OK), and Melody Woolf (chronic pain survivor) (DHHS, 2025a).

These scientific analyses and announcements summarized FDA's findings that 7-OH binds to morphine opioid receptors (also referred to as "mu (μ)- opioid receptors or MOR") with potentially strong effects similar to those that can be produced by morphine and other classical opioids. Of particular concern to FDA is the increasing proliferation of products that contain highly concentrated, often semi-synthetically derived 7-OH. These novel products deliver significantly higher levels of 7-OH than occur naturally or are found in traditional kratom leaf products. In its July 29, 2025 media release FDA cites evidence from key studies and assays typically considered in drug scheduling determinations, including rewarding effects in animal studies, physical dependence and withdrawal symptoms, respiratory depression (at least when administered intravenously), and effects in animals generalized to morphine.

Additionally, FDA cites clinical presentations (often referred to as anecdotal reports) and receptor binding profiles. These data support FDA's characterization of 7-OH as a substance with a pharmacological profile that is qualitatively similar to classical opioids with effects such as "euphoria, sedation, respiratory depression, and opioid-like withdrawal syndromes, with users acknowledging its significant addiction potential (Reissig et al., 2025, p. 4). FDA concluded "The pharmacological profile, abuse liability, and emerging patterns of nonmedical use establish 7-OH as a dangerous substance" (Reissig et al., 2025, p. 4). As discussed in Factor 8, such data suggest that 7-OH meets the statutory definition of an opioid as described in the 1970 Controlled Substances Act (CSA).

Although some kratom products have likely been boosted in their 7-OH concentrations in the past, the widespread marketing and consumption of concentrated 7-OH products has emerged nationwide in just the past few years. FDA itself noted a clear "distinction" between kratom and kratom products that "have been used for centuries in both

medicinal and recreational settings" containing naturally low occurring levels of 7-OH compared to what the agency described as the recent widespread appearance of "7-OH opioid products" (e.g., FDA (2025a). FDA emphasized that "7-OH is found in trace amounts in the kratom plant leaf. But this is not our focus. Our primary concern is the concentrated form of 7-OH. This is an important distinction. These concentrated 7-OH opioid products are far more dangerous than traditional kratom leaf products" (Makary, 2025)

Currently, many kratom and related products, including concentrated 7-OH products are marketed as dietary ingredients and/or supplements, though to date no New Dietary Ingredient Notification (NDIN) has been accepted by FDA and the lack of adequately documented history of use prior to 1994 has precluded its acceptance as an 'old dietary ingredient' that is exempt from the NDIN requirements as described in the 1994 Dietary Supplement Health and Education Act (DSHEA).

During the FDA's July 29, 2025, press conference, the DHHS leadership indicated that the Department would recommend the Drug Enforcement Administration (DEA) place 7-OH in the CSA. If DEA concurs, then 7-OH would be placed in Schedule I, along with heroin, LSD, and marijuana as that is the only CSA schedule for substances with high abuse potential and which are not "Commonly Accepted for Medical Use" (CAMU). CAMU is typically determined by FDA's approval as a drug for medical use, or in a rare recent case with respect to marijuana, a substantial body of medical use, state-level authorization, and clinical evidence was considered adequate to support the designation of marijuana as CAMU despite the absence of FDA formal therapeutic/medical approval (DHHS, 2023a; DEA, 2024).

Permanent placement in Schedule I requires an 8-factor analysis (8-FA), which is the structured evaluation described in the CSA that is determinative of CSA control and scheduling. Factors 1, 2, 3, and 7 are based on chemical, pharmacological, and clinical studies, while Factors 4, 5, and 6 determine public health impact and whether the substance poses an imminent hazard to public health. Factor 8 examines whether the substance is a chemical precursor of a substance that is already controlled in the CSA, or has the same chemical structure, or in the case of opioids is derived from the opium poppy by extraction, or chemical synthesis based on opium or an opium poppy constituent such thebaine or morphine or has a pharmacological profile similar to that of already controlled morphine-like opioids[1].

This recent action represents a shift from a 2018 DHHS decision, which rescinded a prior recommendation to schedule kratom and its alkaloids, including 7-OH. In that

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[1] In 21 U.S. Code § 802 – Definitions

(17) The term "narcotic drug" means any of the following whether produced directly or indirectly by extraction from substances of vegetable origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis:

(A) Opium, opiates, derivatives of opium and opiates, including their isomers, esters, ethers, salts, and salts of isomers, esters, and ethers, whenever the existence of such isomers, esters, ethers,

and salts is possible within the specific chemical designation. Such term does not include the isoquinoline alkaloids of opium.

decision, U.S. Assistant Secretary for Health Admiral Brett P. Giroir noted that the existing science did not support a recommendation to place mitragynine and 7-OH in the CSA because this would have had the effect of banning kratom product and that carried a “significant risk of immediate adverse public health consequences” if users were to switch to more lethal opioids (Giroir, 2018).

Similarly, the United Nations Commission on Narcotic Drugs (UNODC) Commission on Narcotic Drugs (CND) concluded there was insufficient evidence to recommend a critical review of kratom and its alkaloids, including mitragynine and 7-OH, though it advised they be kept under surveillance (UNODC, 2021). Since then, in late August 2025, the UNODC published a warning of emerging products containing 7-OH and 7-OH’s metabolite pseudoindoxyl, recommending further educational awareness campaigns by healthcare professionals, regulators, and law enforcement, as well as enhancing surveillance, testing, detection, and epidemiological surveillance of these products.

The present document provides an 8-FA of 7-OH according to the 1970 Controlled Substances Act. This 8-FA has been developed following the model laid out in FDA’s guidance, Assessment of the Abuse Potential of Drugs (FDA, 2017), while also taking into consideration the experience and evolution in approach to such assessments since the CSA was signed into law in 1970. The present analysis considered and expands upon the pharmacological and epidemiological data that were presented in FDA’s July 29, 2025 scientific assessment (Reissig et al., 2025) and incorporates insights from prior work by Pinney Associates, including the 2018 and 2022 kratom 8-FAs and related analyses (Henningfield, Fant, & Wang, 2018; Henningfield, Wang, & Huestis, 2022).

The Appendices include four documents released by FDA addressing 7-OH science, warnings and educational materials (FDA, 2025a, FDA, 2025b, Makary, 2025; Reissig et al., 2025), as well as the conference transcript in Appendix 5.

The purpose is to provide a structured review of the evidence typically used to inform the FDA and National Institute on Drug Abuse (NIDA) in their CSA scheduling recommendations and the DEA in its potential scheduling action, as well as to provide a resource for public health policymakers, regulators, scientists, and the public in general to learn about the risks associated with 7-OH and the complexities of its potential regulatory and legal control. This 8-FA also discusses policy considerations such as potential scheduling and enforcement approaches; efforts to mitigate unintended consequences such as fueling the formation of illicit (“black”) 7-OH markets and relapse to deadlier classical opioid use; and addressing other potential health problems and medical issues in people who found 7-OH to be more effective, acceptable or assessable than FDA approved medicines, kratom, or other approaches in addressing their health needs including opioid dependence and withdrawal.

Table 1 from FDA (2017) summarizes the 8 factors of the CSA as follows:

> Under 21 U.S.C. 811(b) of the CSA, the medical and scientific analysis considers the following eight factors determinative of control of the drug under the CSA (21 U.S.C. 811(c)):

1. Its actual or relative potential for abuse.
2. Scientific evidence of its pharmacological effect, if known.
3. The state of current scientific knowledge regarding the drug or other substance.
4. Its history and current pattern of abuse.
5. The scope, duration, and significance of abuse.
6. What, if any, risk there is to the public health.
7. Its psychic or physiological dependence liability.
8. Whether the substance is an immediate precursor of a substance already controlled.

2 Factor 1: Actual or Relative Potential for Abuse

The actual or relative potential for abuse of a substance is a primary determinant in scheduling considerations under the CSA. This factor is assessed through a combination of preclinical studies in animals and an analysis of human use patterns. For 7-OH, a number of nonclinical studies including self-administration, conditioned place preference, and drug discrimination studies indicate potential for abuse, with effects that are often comparable to, or more potent than, those of morphine. While controlled human abuse potential studies have not yet been conducted, emerging data from user reports and clinical case studies corroborate the findings from animal research, suggesting that concentrated 7-OH products are being used for their rewarding and opioid-like effects.

2.1 Pharmacology

7-OH has been shown to naturally occur at de minimis levels in the kratom plant and is generally formed in vivo from mitragynine, the parent alkaloid, through metabolic oxidation in the liver, mediated by cytochrome (CYP) P450 3A (Kruegel et al., 2019). It appears that low levels of 7-OH may also occur post-harvest in leaves by enzymatic interactions (Karunakaran, Vicknasingam, & Chawarski, 2025; Smith et al., 2024).

7-OH has demonstrated pharmacological properties consistent with potential for recreational use, abuse, and dependence. However, available evidence indicates that 7-OH acts as a partial agonist at opioid receptors, suggesting that by some measures it is weaker in its expression or less efficacious compared to morphine, such as opioid-like effects. Whether the overall abuse potential of 7-OH is most accurately described as lower, higher, or similar to morphine (the most common standard comparator) is not clear at present; however, as discussed by FDA (Reissig et al., 2025), 7-OH has sufficiently similar pharmacology to be characterized as an opioid. Moreover, although its potency (the amount of drug required to produce a given effect) varies widely across measures and studies, it requires smaller amounts of 7-OH by weight (e.g., mg) to produce a variety of abuse-related effects as compared to morphine, therefore

supporting the general description of 7-OH by FDA as a “potent’ and even “highly potent” opioid”.

Specifically, 7-OH exhibits high affinity for MORs and acts as a partial agonist, producing G-protein biased signaling with limited beta- (β) arrestin-2 recruitment (Kruegel et al., 2016; Todd et al., 2020). This bias is generally associated with reduced opioid-like effects such as constipation (Gutridge et al., 2020).

The FDA’s 2025 assessment characterizes 7-OH as a potent MOR agonist with high abuse potential and risk of severe dependence stating, “Critically, 7-OH produces respiratory depression, physical dependence, and withdrawal symptoms characteristic of classical opioids, such as morphine, fentanyl, oxycodone, and hydrocodone”. It is important to note that demonstrations of morphine equivalent reinforcing efficacy and respiratory depression in rodent models were by the intravenous (IV) route of administration, whereas virtually all human consumption is by the oral route. Overdose risk by the oral route would seem to be a plausible risk but has not been well-documented in animals and the evidence for apparent 7-OH attributed overdose deaths in humans is not strong. FDA described two cases in which an overdose death occurred and concluded as follows:

> “Although FDA’s Adverse Event Reporting System (FAERS) has documented cases reporting adverse events (13 cases, including 2 deaths) suspected to involve 7-OH, ambiguity about the contributory role of 7-OH from uncharacterized products or concomitant medications and underlying disease limits interpretation” (Reissig et al., 2025).

Note that these reports are not limited to a single year but rather all the cases that have been reported to date. Whereas these reports are concerning, and this report agrees with FDA that adverse events related to 7-OH use have been under-reported, the actual numbers of such cases are very low as compared to the thousands reported over time and annually for opioids such as heroin, oxycodone and fentanyl and fentanyl related substances.

Whereas most animal studies indicated that mitragynine is neither potent, strong, nor reliable in producing respiratory depression (e.g., (Henningfield, Rodricks, et al., 2022), 7-OH produced stronger morphine-like respiratory depression by the IV route at lower concentrations than mitragynine (Gonzalez et al., 2025; Harun et al., 2015).

Also, unlike mitragynine, 7-OH reliably substitutes for morphine across antinociception, discrimination, and self-administration paradigms, showing dose-dependent reinforcing and conditioned place preference effects with greater potency than morphine in several animal models (Gutridge et al., 2020; Harun et al., 2015).

7-OH produces strong naloxone-reversible analgesia yet with less respiratory depression and constipation at equianalgesic doses, and exhibits higher oral bioavailability than morphine (Kruegel et al., 2016; Matsumoto et al., 2004). In mice, brain concentrations of 7-OH after mitragynine administration are sufficient to explain

most or all of the opioid-receptor mediated analgesic effects associated with mitragynine use (Kruegel et al., 2019).

2.2 Nonclinical Abuse Potential Models (Rewarding Effects)

2.2.1 Self-Administration

A study by Hemby et al. (2019) evaluated the reinforcing effects of 7-OH in rats and found that 7-OH not only engendered but also maintained self-administration behavior at intravenous doses ranging from 2.5 to 10 µg/infusion, demonstrating reinforcing effects comparable to those of morphine when administered at 50 and 100 µg/infusion, suggesting 7-OH may be 10-20 times more potent than morphine in this test. In contrast, mitragynine did not maintain self-administration, highlighting a critical pharmacological distinction between the two compounds. The reinforcing effects of 7-OH were found to be mediated by both MORs and delta (δ)-opioid receptors (DOR), as intake was reduced by antagonists for both receptor types (NLXZ and NTI, respectively). This contrasts with morphine, whose reinforcing effects in the same study were primarily mediated by MORs.

To contextualize these findings for human risk, an allometric scaling factor can be used to estimate a human equivalent dose. Based on the rat data, the reinforcing intravenous dose of 7-OH for a 70 kg person is estimated to be between 0.161 and 0.322 mg, compared to 1.61 mg for morphine. This calculation suggests that 7-OH might be between 5-10x more potent than morphine in producing reinforcing effects, a key indicator of abuse potential though this should be considered a possibility to be tested and not an established fact. It is crucial to note, however, that the clinical meaningfulness of such estimates is not clear because the animal data are based on intravenous administration, whereas human consumption of 7-OH products is typically oral. The abuse potential of 7-OH in humans has not been directly evaluated in human abuse potential studies by any route of administration using protocols recommended by FDA in its 2017 Guidance (FDA, 2017) nor have other potential effects of 7-OH administration been well characterized in controlled clinical studies.

2.2.2 Intracranial Self-Stimulation

In an intracranial self-stimulation (ICSS) study, neither mitragynine nor 7-OH-MG showed evidence of brain rewarding effects, whereas morphine robustly and dose dependently decreased the stimulation threshold (Behnood-Rod et al., 2020). Thus, the ICSS results suggest lower brain rewarding effects of mitragynine as compared to morphine. Note that ICSS is not recommended in FDAs guidance for abuse potential assessment but is considered a potentially informative model (Henningfield, Comer, Banks, Coe, Collins, Cooper, Fantegrossi, Durgin, Heal, Huskinson, Lanier, Lynch, Miesch, Rowlett, Strickland, & Gannon, 2025).

2.2.3 Drug Discrimination

Drug discrimination studies assess the interoceptive (subjective) effects of a substance by training animals to recognize and distinguish the effects of a test drug from a placebo (saline) or another drug. An animal's ability to generalize the subjective cue of a novel

compound to that of a known drug of abuse, such as morphine, is considered predictive of similar subjective effects and abuse potential in humans.

Several studies have shown that 7-OH fully substitutes for the discriminative stimulus effects of morphine. Harun et al. (2015) trained male Sprague Dawley rats to discriminate morphine (5.0 mg/kg, intraperitoneal [i.p.]) from saline. In subsequent substitution tests, the highest dose of 7-OH (3.0 mg/kg) produced complete substitution for the morphine cue, and this effect was reversed by the opioid antagonist naloxone. Notably, this study found 7-OH to be more potent than morphine in producing these subjective effects.

Further research has reinforced these findings. Obeng et al. (2021) reported that 7-OH fully generalized to morphine in rats, whereas mitragynine only partially generalized. Similarly, Hemby et al. (2019) found that 7-OH substituted for morphine in a dose-dependent manner, while mitragynine did not substitute at any dose tested. The consistent and complete generalization of 7-OH to the morphine cue across multiple studies provides strong evidence that it may produce subjective effects that are qualitatively similar to those of classical opioids.

2.2.4 Conditioned Place Preference

Matsumoto et al. (2008) found that 7-OH administered at 2 mg/kg produced conditioned place preference (CPP) with greater potency than morphine. Similarly, Gutridge et al. (2020) demonstrated that 7-OH at a dose of 3 mg/kg induced CPP in C57BL/6 mice, although it required four conditioning sessions compared to 2 sessions for morphine (6 mg/kg) to establish the preference. This suggests that while 7-OH is rewarding, the onset or strength of the conditioned association may differ from that of morphine under certain experimental conditions. Another study by Chakraborty, Uprety, et al. (2021) also confirmed that 7-OH produces significant CPP, whereas its metabolite, mitragynine pseudoindoxyl, did not, indicating distinct rewarding profiles among related alkaloids. Collectively, these findings consistently show that 7-OH has rewarding effects sufficient to establish a conditioned preference, common in drugs with abuse potential.

2.3 Clinical Studies and Evidence of Abuse Potential in Humans

While there have been no controlled human laboratory studies conducted to date specifically designed to assess the abuse potential of 7-OH, a growing body of epidemiological data, clinical case reports, and user self-reports provide evidence of its nonmedical use and abuse. The FDA's 2025 scientific assessment noted clinical presentations that include reports of “euphoria, sedation, respiratory depression, and opioid-like withdrawal syndromes, with users acknowledging its significant addiction potential”. These reports align with the effects predicted by preclinical models and are characteristic of substances with abuse potential, discussed further in Factors 4-6.

2.4 Implications for Abuse Potential

Taken together, the evidence summarized in Factor 1 suggests that 7-OH has meaningful abuse potential despite limitations in the breadth of available studies, the range of study types, and inconsistencies across findings. Preclinical studies suggest robust reinforcing, rewarding, and subjective effects characteristic of a μ-opioid agonist,

with potentially a potency greater than morphine, although not necessarily stronger. This distinction is often misunderstood; potency refers to the amount of drug required to produce a given effect and not the maximal possible effect that can be produced. Thus, for example, in a classic study, Matsumoto et al. (2004) found that the potency of 7-OH varied widely across outcome measures (include guinea-pig ileum contractions, tail flick and hot plate tests) as compared to morphine and mitragynine, however, whereas 7-OH and morphine produced similar maximum effects on several measures, mitragynine's effects were consistently weaker (producing smaller maximum possible effects) and far less potent (taking more mg to produce any effect) than 7-OH and morphine.

From an abuse potential perspective, the most important finding is that both 7-OH and morphine produce a range of qualitatively similar effects, supporting the characterization of 7-OH as an 'opioid' and as a drug with a potential for opioid-like abuse potential. These findings are also consistent with similarities in receptor binding and mechanism of action, suggesting that its abuse related pharmacology is sufficiently similar to that of opioids to warrant considering characterizing of 7-OH as an opioid.

At present, the available evidence does not provide a basis for determining the overall abuse potential of 7-OH relative to morphine. However, that level of pharmacological characterization is not critical to determine whether a substance lacking FDA approval or commonly accepted for medical use meets the requirements for placement into Schedule I of the Substances Act. That 7-OH as a substance exhibits meaningful abuse potential and overall morphine-like opioid pharmacology satisfies the statutory criteria for scheduling.

If 7-OH were to be submitted to FDA as part of a New Drug Application and subsequently approved for therapeutic use, a quantitative determination of its relative abuse potential would be important to guide scheduling – for example if it should be placed alongside morphine in Schedule II, or in a less restrictive schedule (III, IV, or V) based on the totality of evidence.

3 Factor 2: Scientific Evidence of its Pharmacological Effects

Current scientific evidence shows that 7-OH is pharmacologically active with a distinct profile of central nervous system (CNS) mediated effects. It acts primarily as a potent partial agonist at the MOR, but its effects extend to other neurotransmitter systems, indicating that while its effects appear to warrant the designation as an opioid, it has additional effects that appear to differentiate 7-OH from morphine-type opioids in its overall pharmacology.

3.1 Mechanism of Action and Opioid Binding

7-OH's interactions with opioid receptors appear to be the predominate cause of at least its abuse related effects. For example, 7-OH consistently demonstrates high affinity for the MOR, with reported inhibitor constant (Ki) values ranging from approximately 7 nM to 78 nM, significantly higher than that of mitragynine, its parent alkaloid (1700 nM). Studies have shown that both 7-OH and mitragynine demonstrate a preference for activating the G-protein signaling pathway with little to no recruitment of the β-arrestin-2 pathway. This is a significant finding, as β-arrestin-2 recruitment is strongly associated

with the adverse effects of classical opioids, such as respiratory depression and constipation. This G-protein bias suggests a potential for a lower risk profile compared to conventional opioids like morphine, which robustly recruit β-arrestin-2 (Ellis et al., 2020; Kruegel et al., 2016). Nonetheless, other findings with 7-OH indicate meaningful opioid-like abuse potential, as discussed in Factor 2.

For example, in addition to its primary action at the MOR, 7-OH also binds with moderate to high affinity at the kappa (κ-) opioid receptor (KOR) and DOR, where it appears to function as a competitive antagonist (Obeng et al., 2021). This profile as a partial MOR agonist and a KOR/DOR antagonist distinguishes it from classical opioids like morphine, which are full MOR agonists, and may contribute to its unique pharmacological effects. For instance, KOR antagonism is associated with antidepressant and anxiolytic effects, which could align with some of the reported motivations for kratom and 7-OH use (Carlezon, & Krystal, 2016).

3.2 Effects on Other Neurotransmitter Systems

While 7-OH appears to primarily target opioid receptors, there is evidence that it, along with mitragynine, also interacts with other CNS receptors, including adrenergic, serotonergic, and dopaminergic systems. This multimodal activity likely contributes to the complex profile of effects reported by users, which can include both stimulant-like and sedative properties.

A study by James P. Manus et al. (2025) investigated the effects of 7-OH on dopamine release in the nucleus accumbens, a key brain region in the reward pathway. The study found a bidirectional effect: a low dose of 7-OH (0.5 mg/kg) increased dopamine release, while a high dose (2 mg/kg) decreased it. The authors noted that these alterations in dopamine function are not necessarily consistent with those of classic drugs of abuse, suggesting a more complex mechanism of action on the brain's reward systems. Ellis et al. (2020) found that the oxidation of mitragynine to 7-OH significantly strengthens its binding affinity at the MOR but weakens its affinity at adrenergic and serotonin receptors, indicating that the pharmacological profile shifts substantially upon metabolism.

3.3 Antinociception

Numerous studies have demonstrated that 7-OH produces robust, dose-dependent antinociceptive effects in animal models such as the hot plate and tail flick tests (Behnood-Rod et al., 2020; Matsumoto et al., 2004). Its potency in producing analgesia is consistently reported to be significantly greater than that of morphine. For example, Kruegel et al. (2016) reported that 7-OH was approximately 10 times more potent than morphine in producing antinociception. This potent analgesic effect, combined with its high oral bioavailability compared to morphine, and its lack of measurable β-arrestin-2 recruitment makes 7-OH an interesting subject for potential therapeutic development.

3.4 Respiratory Depression

While studies referenced above determined mitragynine and 7-OH lacked measurable β-arrestin-2 recruitment, a study by Gonzalez et al. (2025) found that 7-OH caused dose-dependent reductions in respiratory frequency and minute volume in rats, effects

fully reversed by naloxone. This is in contrast to mitragynine, which unexpectedly increased respiratory frequency with no significant depression of tidal/minute volume. This lack of respiratory depressive effects by mitragynine was confirmed by Henningfield, Rodricks, et al. (2022)'s study showing no respiratory depression in rats administered up to 400 mg/kg oral mitragynine. Mitragynine's stimulant effect was not blocked by naloxone, suggesting a non-opioid mechanism.

3.5 Comparison to Morphine

Comparing the relative potency of kratom, mitragynine, and 7-OH to morphine is important in pharmacological evaluations but is often misinterpreted as indicative of abuse, addiction and/or harm potential. What is more important in abuse potential assessments is the maximum possible effect of a drug as a reward or euphoriant which is generally considered a stronger determinant of the overall abuse potential of a drug and its likelihood of recreational use. Potency should not be considered the same as maximum possible effect.

Numerous studies have shown that 7-OH is more potent than morphine on several measures but most of these do not suggest that 7-OH has stronger maximum possible effects. For example, an in vitro study using electrically stimulated guinea pig ileum, a classic assay for opioid activity, found that 7-OH was approximately 17 times more potent than morphine and 30 times more potent than mitragynine (Horie et al., 2005). A similar study by Takayama et al. (2002) found that 7-OH had 13 times higher potency than morphine and 46 times more than mitragynine. Studies of 7-OH's antinociception potential have reported it at 10 times that of morphine (Kruegel et al., 2016).

However, it is critical to interpret these findings with caution. While informative, results from in-vitro assays and subsequent in-vivo animal models do not always directly translate to the complex human experience. Also, while 7-OH's affinity to opioid receptors relative to morphine can be quantified in a controlled laboratory setting, their respective pharmacological profiles merit further study. Factors such as route of administration, formulation, metabolism rate, bioavailability, blood-blood brain barrier penetration, and the activation and interactions of multiple neurotransmitter systems create a more complex web of effects than can be observed in a controlled laboratory setting. Therefore, while the existing research provides a valuable pharmacological baseline establishing 7-OH as a potent opioid agonist in some assays, its overall pharmacological effects in humans have not been well characterized and remains an area requiring further clinical research.

3.6 Implications for Abuse Potential

Taken together the data reviewed in this factor are consistent with the characterization of 7-OH as a CNS-acting drug with effects likely to contribute to use and abuse potential. Data from numerous studies indicate that 7-OH is pharmacologically active with dose-related effects and mechanisms of action being similar though not identical to those of morphine-like opioids. The relative potency compared to morphine appears to vary widely across measures, which is not surprising nor atypical of opioids. However, its distinct activity and variability (especially its lack of measurable β-arrestin-2 recruitment and activity at KOR and DOR receptors) suggest that direct comparison and

characterizing 7-OH as an opioid that is up to 13 times more potent than morphine is misleading as a stand-alone indicator of its abuse potential as these estimates are based on animal models that may not necessarily relate to human effects.

Moreover, as mentioned earlier, relative potency is not necessarily indicative of abuse potential. The mixed mechanisms of action of 7-OH may contribute to the diversity of reasons people report for its use (as discussed in Factors 4, 5, and 6); however, this pharmacological complexity does not inherently determine its level of abuse potential. For example, when seeking rewarding and euphoriant effects, many recreational users prefer opioids with a pharmacological profile characterized predominantly by MOR agonism, such as morphine, oxycodone, heroin and fentanyl. Overall, the risk profile of 7-OH remains incompletely understood and warrants further study.

4 Factor 3: Current State of Scientific Knowledge

Research on kratom, including research on 7-OH specifically, has increased enormously in the past decade. For example, the introduction to Kratom: History, Science, and Therapeutic Potential, a recently published book featuring contributions from many of the world's leading kratom researchers, notes the rate of annual kratom science publications increased from about 20 per year in 2016 to more than 130 per year by 2024, with the increased fueled heavily by research funding by the National Institutes of Health (NIH), NIDA (Henningfield, Beyer, & Raffa, 2025). This rapidly expanding body of research undoubtedly played a significant role in shaping two important themes in the July 29, 2025 FDA and DHHS documents addressing 7-OH: the characterization of its abuse potential and safety, and the decision to treat 7-OH as a public health concern distinct from kratom itself.

One of the most significant advances to emerge from the hundreds of new studies conducted over the past decade has been the understanding that 7-OH is more appropriately considered a mitragynine metabolite in humans and animals that are given or who self-administer kratom. Additionally, while it has been established that it is either absent from or appears in de minimis levels in freshly harvested kratom leaves, 7-OH may emerge at low levels in the leaves over time, likely as a result of enzymatic processes (Karunakaran, Vicknasingam, & Chawarski, 2025; Smith et al., 2024). Indeed, it was observed several decades ago that 7-OH is less than 2% of the total content of all of the alkaloids in kratom leaves (Takayama, 2004). In many marketed kratom products including leaf powder, encapsulated kratom powder and extracts in the U.S. 7-OH content is lower still ranging from undetectable to about 0.01% to 0.04% by weight (Kikura-Hanajiri et al., 2009).

4.1 Pharmacokinetics

When kratom or pure, single isolate mitragynine extracts are self-administered or administered in clinical studies, mitragynine is metabolized in the liver, a conversion mediated primarily by the CYP3A enzyme, forming 7-OH. A human clinical study by Mongar et al. (2024) found that co-administration of itraconazole, a potent CYP3A4 inhibitor, decreased the formation of 7-OH from mitragynine, reducing its peak plasma concentration (i.e., C_{max}) by 56% and its total exposure (i.e., area under the curve) by 43%.

A large scale clinical trial found that after administration of encapsulated kratom leaf powder, the time to reach maximum plasma concentration (i.e., T_{max}) for 7-OH was between 1.2 and 2.0 hours (Huestis et al., 2024). The elimination half-life (i.e., $T_{1/2}$) was found to be 4.7 hours after a single dose and extended to 24.7 hours after multiple daily doses, indicating potential for accumulation with long term and/or daily use.

A study in beagles found a conversion rate of 23.1% of mitragynine to 7-OH, though this may not be representative of human conversion rates. For instance, Hiranita et al. (2020) reported “the conversion rate of 7-hydroxymitragynine from per oral (PO) mitragynine is low. In a study of pharmacokinetic interaction of kratom and cannabidiol in male rats, the metabolite to parent (mitragynine) exposure ratio percentage of 7-OH-MG remained similar (3.5 and 3.1 with and without cannabidiol, respectively). As there was an increase in mitragynine exposure during this study, it was expected that this would be due to a decrease in metabolism, but this was not the case for 7-OH-MG despite it being primarily metabolized by CYP3A and cannabidiol being a competitive inhibitor of CYP3A (Berthold et al., 2024).

Further rat studies support this finding, showing that 7-OH and mitragynine are quantifiable 8 hours after consumption, and accumulation of mitragynine and 7-OH after multiple oral doses (Chiang et al., 2024; Kamble et al., 2021). Another study by Tanna et al. (2022) reported a similar half-life of 5.67 hours after a single oral 2 g dose of kratom tea. This tea was tested and found to have contained only trace amounts of 7-OH (i.e., less than the limit of quantitation [< LOQ]) in the starting product; therefore, the assumption was made that 7-OH was generated from the metabolism of mitragynine in vivo. Concerningly, there appear to be some 7-OH formulations that have been designed to bypass first pass metabolism, artificially increasing bioavailability (Smith et al., 2025).

Kruegel et al. (2019) found that brain concentrations of 7-OH formed from mitragynine in mice are sufficient to explain most or all of the opioid-receptor-mediated analgesic activity of mitragynine. At the same time, mitragynine is found in the brains of mice at very high concentrations relative to its opioid receptor binding affinity, suggesting that it does not directly activate opioid receptors (Kruegel et al., 2019).

Uchaipichat (2025) found that 7-OH-MG exhibited inhibitory potency on UGT1A9, with a half-maximal inhibitory concentration (IC_{50}) value of 51 µM, while moderate potency was observed for UGT1A1 and UGT1A3, with IC_{50} values of 196 and 141 µM, suggesting the potential for herb-drug interactions in individuals consuming high doses of 7-OH-MG. However, the experimental Ki values found in this study were relatively high compared to the maximum plasma concentrations of mitragynine and 7-OH reported in humans.

In a study relevant to breast cancer treatment medications are potential effects of 7-OH (and mitragynine) on as HER2 inhibitors. This in silico study (involving computer simulations to predict pharmacological effects) suggested that the molecular docking included binding energies of −7.56 kcal/mol and −8.77 kcal/mol, respectively, with key interactions involving residues such as Leu726, Val734, Ala751, Lys753, Thr798, and

Asp863. Akbar et al. (2025) found both mitragynine and 7-OH were inhibitors of CYP2D6 and CYP3A4, though neither were found to be P-glycoprotein substrates, which minimizes the risk of efflux-related bioavailability issues. Both studies confirm the potential for significant drug-drug interactions with other substances that are substrates, inhibitors, or inducers of these systems. These should be considered preliminary findings and not necessarily related to abuse potential or safety but provide an example of other research that involves 7-OH and other mitragynine related substances.

While Akbar et al. (2025)'s Absorption, Distribution, Metabolism, Excretion, and Toxicity analysis found that both mitragynine and 7-OH demonstrated high gastrointestinal (GI) absorption, suggesting high oral bioavailability (also a conclusion by Chakraborty, Uprety, et al. (2021), a study in rats reported a low oral bioavailability of only 2.7%, possibly due to poor water solubility, indicating that formulation and species differences may significantly impact absorption (Chiang et al., 2025).

A recent case report that has been accepted for publication at the time of this writing described a patient admitted to a hospital emergency department following "cardio-pulmonary arrest". He was found unresponsive and received approximately 10 min of cardiopulmonary resuscitation; he was successfully revived with two doses of naloxone 4mg intravenously." The patient reported ongoing use of other substances that may have contributed to this event, as well having ingested several times the recommended serving size labeled on the 7-OH product. Thus, whereas causality cannot be definitively determined beyond a likely poly-pharmaceutical contribution is not clear, the responsiveness to naloxone suggests that 7-OH's opioid receptor-mediated activity may have played a role, particularly since no other conventionally screened 'opiates' were detected in the blood (Pullman, Kanumuri, Leon et al. 2025).

4.2 Mitragynine Pseudoindoxyl

Kamble et al. (2020) further discovered that 7-OH is itself converted to mitragynine pseudoindoxyl in human plasma, and to a greater extent than is produced in mice, rats, dogs, and cynomolgus monkeys, possibly explaining potential human effects that may not be predicted in animal studies alone. Mitragynine pseudoindoxyl's effects, however, are still mostly unclear; for instance while 7-OH-MG and mitragynine have shown significant conditioned place preference (Section 2.2.4), mitragynine pseudoindoxyl did not (Chakraborty, DiBerto, et al., 2021).

4.3 Conclusions

The available evidence shows that 7-OH is a potent, orally bioavailable, μ-opioid partial agonist with a G-protein bias that can accumulate in the body upon daily and/or chronic use. Its metabolism is heavily dependent on the CYP3A4 enzyme processes. Its complex pharmacology, involving interactions with multiple opioid receptor subtypes and other neurotransmitter systems, underlies its opioid-like effects, including analgesia, euphoria, and sedation, as well as its potential for abuse and dependence.

5 Factors 4, 5, and 6: History and Current Patterns of Abuse; The Scope, Significance and Duration of Abuse; What, if any, Risk is there to the Public Health

5.1 Factor 4: History and Current Patterns of Abuse

The marketing and apparent sales and consumption of 7-OH have increased rapidly since about 2022, and 7-OH has progressed over the past several years from a minor, little known alkaloid with little to no independent history of use to a commercially available, highly concentrated product at the center of what FDA deems an “emerging public health threat”. This has been driven in part by growing awareness of its potentially potent opioid pharmacology though current use patterns (as gleaned from national surveys, surveillance systems, and online user communities) reveal a user base with diverse motivations. However, these data sources also highlight an escalating pattern of high-dose use of concentrated products that is associated with dependence, withdrawal, and other adverse outcomes.

Traditional use of kratom in Southeast Asia, which involves chewing fresh leaves or brewing them into tea, results in ingestion of only trace amounts of 7-OH. The primary psychoactive effects from traditional kratom preparations are attributed primarily to its most abundant alkaloid mitragynine and the complex interactions of the many other alkaloids in the plant leaves. The market for kratom began to rapidly evolve with the rise of its popularity in the U.S. in the mid-2000s, though use likely dates back as early as the 1980s, brought back by American veterans returning from Southeast Asia and immigrants from those areas. Consumer demand for alternative kratom products, combined with scientific and manufacturing resources and innovation from American entrepreneurs led to explosive growth in the number of kratom extracts and other products artificially enhanced with non-natural amounts of kratom alkaloids and/or other substances.

A pivotal shift occurred with the proliferation of products specifically marketed as “7-OH” products. These products often contain artificially elevated levels of 7-OH, often created through synthetic or semi-synthetic means, such as chemical oxidation of mitragynine, which is much more readily abundant naturally and economically viable than isolating from kratom leaves.

Analysis of these commercial products revealed concentrations of 7-OH that are hundreds of times higher than would be expected in natural kratom leaf. For example, one analysis reported that 7 of 8 products tested contained 109-509% more 7-OH than would be expected in a natural product (Ogozalek, 2023), and news reports identified pill products containing 15 mg of 7-OH per pill, a dose far exceeding natural levels and one that is likely pharmacologically significant. This is in contrast to an analysis of 13 commercial kratom products, which found 7-OH at 0.01-0.04% by weight, aligning with reports that 7-OH represents less than 0.05% of the alkaloid content, substantially lower than mitragynine. This indicates that naturally occurring levels of 7-OH in kratom are minimal compared to the primary alkaloid (Kikura-Hanajiri et al., 2009; Kruegel et al., 2019). These 7-OH products are now readily available online and in retail locations such as gas stations, vape shops, convenience stores, and corner shops, often in a vast

array of formulations like gummies, tablets, and liquid shots (Hill, Henderson, et al., 2025).

5.1.1 Reasons for Use

While national surveys like the National Survey on Drug Use and Health (NSDUH) track kratom use, they do not yet specifically distinguish users of traditional kratom from users of concentrated 7-OH products. General kratom user demographics from the 2019 NSDUH and other surveys indicate that users are generally somewhat more male than female users, with most identifying as “White” or Caucasian, and between the ages of 18 and 49, though results vary widely. The most recent largescale kratom survey at this writing reported the majority of kratom users were males between 30-49 years old who identify as Caucasian (Grundmann et al., 2025). There is evidence that kratom users are generally older, often reporting reasons for use related to potential therapeutic effects (relief of common pain symptoms, elevating energy); there is little evidence of youth use.

However, none of these surveys addressed people who are primarily 7-OH consumers, a critical area in need of research. Thus, extrapolations from kratom-focused surveys are not necessarily representative. This caveat applies to reasons for use as well, although some anecdotal data described below suggest that at least some 7-OH users are people who found it to be more effective or satisfying than kratom for pain and self-management of their opioid use disorder and/or opioid withdrawal.

Those who use kratom and 7-OH report a diverse range of motivations, including for therapeutic or self-medication purposes, such as for pain relief, anxiety, and depression. A significant portion of users, particularly those with a history of opioid use, report using kratom to address opioid withdrawal symptoms or as a substitute for more dangerous illicit opioids. Additionally, current opioid users were more likely to report use kratom for opioid withdrawal, while former opioid users were more likely to report mood elevation as their reason for use (Singh et al., 2020).

The emergence of concentrated 7-OH products appears to be attracting both existing kratom users and new consumers. Analysis of Reddit discussions reveals two primary user groups for 7-OH: individuals seeking potent relief for chronic pain, and individuals seeking strong, opioid-like recreational effects. For example, one Reddit user in a chronic pain forum reported using 7-OH for pain management, often at lower daily doses (e.g., 11 mg/day) without reporting significant adverse effects. In contrast, discussions in subreddits focused on substance use and quitting kratom describe patterns of high-dose, frequent use for euphoric effects, leading to rapid development of dependence and severe withdrawal. This bifurcation suggests that the availability of a more potent, isolated compound is creating distinct patterns of use and risk profiles compared to traditional kratom.

5.1.2 Dosing, Routes of Administration, and Trajectory of Use

Information from online user reports provides detailed, albeit anecdotal, data on current use patterns for 7-OH products. An analysis of 6 Erowid experience reports found a median oral dose of 13.5 mg (range 6.9 mg - 16.9 mg), with a maximum reported dose

of 120 mg. Most reports described oral administration of pills, capsules, or tablets, though sublingual and insufflation (snorting) routes were also mentioned.

A concerning pattern emerging from these reports is the trajectory of use. While some reports describe single-dose experiences, a significant portion describe daily use, escalating over periods from a few days to several months. Reddit users in the “Quitting Kratom” subreddit describe daily use, sometimes up to 5× per day, with doses associated with withdrawal symptoms ranging from 30 mg/day to as high as 500 mg/day. This pattern of escalating, high-frequency dosing is a classic hallmark of substance use disorders and is consistent with the development of tolerance to 7-OH's effects. The availability of 7-OH in discrete, high-dose units like pills and liquid shots facilitates this pattern of use in a way that traditional kratom use (i.e., consuming dried kratom leaf powder) does not.

5.2 Factor 5: Scope, Duration, and Significance of Abuse

National surveillance systems in the U.S. have in recent years begun tracking use of kratom; however, the majority of these systems have yet to track data as it relates to 7-OH use, and attempts at analysis with current data are complicated by these systems combining 7-OH and kratom cases as one category. However, recent efforts to monitor 7-OH specifically, combined with analyses of existing data, reveal concerning signals of increasing human exposure and associated risk as discussed by FDA (Reissig et al. 2025) and in this Factor. The scope of use appears to be significant and growing, marked by a sharp increase in incidents beginning in late 2023 and continuing through 2025.

Adding to the domestic data, the UNODC has noted that since 2024, the U.S. and other jurisdictions worldwide have reported toxicology cases involving high-concentration 7-OH products to its Early Warning Advisory on New Psychoactive Substances (UNODC, 2025).

See further discussion relevant to scope and significance in Factors 4 and 6.

5.2.1 National Surveillance Systems

5.2.1.1 FAERS

FAERS reports involving 7-OH were identified through searches of the FAERS Public Dashboard and open FDA using the term “7-Hydroxymitragynine,” limited to cases in which 7-OH was designated as the primary suspect drug. No date restrictions or deduplication procedures were applied. The two sources largely overlapped, though 2 cases appeared exclusively in the Public Dashboard. In total, 14 unique cases were identified. Corresponding data were extracted from open FDA and qualitatively reviewed. A summary of findings is presented below.

The 14 FAERS case reports involving 7-OH primarily describe patterns of dependence, withdrawal, and psychiatric disturbances. Across patients ranging from their early 20s to mid-60s, reactions commonly included drug dependence, withdrawal syndrome, depression, anxiety, insomnia, somnolence, and impaired quality of life. Several cases noted GI complaints (e.g., nausea, vomiting, diarrhea, constipation), neurological issues

(e.g., dyskinesia, memory problems, dizziness), or musculoskeletal symptoms (e.g., myalgia, restless legs). Some patients reported product quality concerns or suspected tampering, suggesting variability in supply or formulation. Many cases involved concomitant use of prescription medications (e.g., clonidine, gabapentin, antidepressants, Suboxone, benzodiazepines) or other herbal mitragynine products, complicating causality assessments.

Importantly, 2 fatal cases associated with 7-OH consumption were recorded: one involving toxicity from multiple agents including opioids and mitragynine in a 38-year-old male, and another describing accidental poisoning and respiratory depression in association with polypharmacy (including citalopram, lamotrigine, and zopiclone) in a male from Norway. These highlight potential risks of combining 7-OH with other CNS-active substances. Overall, the data remain sparse but suggest that 7-OH is more frequently linked to dependence, withdrawal, psychiatric symptoms, and – in rare but severe cases – fatal outcomes, warranting continued monitoring and further investigation.

5.2.1.2 National Poison Data System

Between February 1, 2025 and April 30, 2025, the National Poison Data System (NPDS) recorded 53 closed human exposure cases involving 7-OH (Table 1). Of these, 24 were classified as abuse cases, and 37 involved single-substance exposures, including 16 single-substance abuse cases. The most common reasons for exposure were intentional abuse (24 cases, 16 single-substance), withdrawal-related use (8 cases, 6 single-substance), and unintentional general exposure (4 cases, all single-substance). Smaller numbers were attributed to suspected suicide (2 cases), adverse drug reactions (4 cases), misuse (3 total cases), therapeutic error (4 cases), and unknown reasons (2 cases).

Most reported clinical effects were moderate (13 cases, 6 single-substance) or minor (6 cases, 3 single-substance), with 3 major outcomes (including 1 single-substance). Five cases were judged as having minimal effects, and one was considered a potentially toxic exposure but could not be followed.

Age distribution showed that the majority of cases occurred in adults (≥18 years; 46 cases, including 23 abuse cases and 32 single-substance exposures), while 6 cases involved individuals under 18, and 1 case had unknown age.

Table 1. National Poison Data System Closed Human Exposure Cases[a] (01Feb2025-30Apr2025)

	Number of Exposure Cases[b]	Number of Abuse Cases[c]	Single Substance Exposure Cases	Single Substance Abuse Cases
Total cases involving 7-OH	53	24	37	16
Reason				

	Number of Exposure Cases[b]	Number of Abuse Cases[c]	Single Substance Exposure Cases	Single Substance Abuse Cases
Adverse drug reaction	4		2	
Intentional- abuse	24		16	
Intentional- misuse	4		3	
Intentional- suspected suicide	2		0	
Other- withdrawal	8		6	
Unintentional- general	4		4	
Unintentional- misuse	1		1	
Unintentional therapeutic error	4		3	
Unknown reason	2		2	
Related Clinical Outcomes				
Minor			6	3
Moderate			13	6
Major			3	1
Note followed, minimal clinical effects possible			5	3
Unable to follow, judged as potentially toxic exposure			1	0
Age				
< 18 years	6	1	5	0
≤ 18 years	46	23	32	16
Unknown age	1	0	0	0

Abbreviations: 7-OH = 7-hydroxymitragynine; NPDS = National Poison Data System.

Note: Related clinical outcomes includes cases with clinical effects deemed "related" to exposure based on timing, severity, and assessment of clinical effects by Poison Center Specialists. Definitions available from America's Poison Centers: NPDS Full Report 2023 (Gummin et al., 2024, p. 235).

a Excludes cases classified as 'confirmed non-exposure'.
b Cases may involve other substances, besides 7-OH.
Source: Adapted from NPDS dataset.

5.2.1.3 National Forensic Laboratory Information System (NFLIS)

The National Forensic Laboratory Information System (NFLIS) collects drug identification results obtained during law enforcement investigations involving potential

criminal possession and distribution of illicit drugs and substance seizures collected during those operations. Historically, mitragynine has never reached the threshold to be listed among the top 25 most frequently identified drugs, though it has appeared in lower-level reports. Mitragynine has not been reported in annual NFLIS reports because its levels have been relatively stable and low since about 2015. However, data can be obtained from the NFLIS Public Data Query System. As of August 2025, data from the NFLIS Public Data Query System showed 253 mitragynine drug reports in 2024, but specific data for 7-OH seizures are not yet separately reported in publicly available annual summaries. The lack of 7-OH specific data in law enforcement seizure reports represents an important current gap in surveillance.

5.2.1.4 DEA Toxicology Testing Program (DEA TOX)

The DEA TOX program analyzes toxicological evidence from death investigations. Between 2019 and 2025, 103 cases were identified where mitragynine, 7-OH, or mitragynine pseudoindoxyl were detected. A significant limitation of this data is the difficulty in discerning whether deaths are related to one specific alkaloid, as 7-OH is a metabolite of mitragynine. However, the report notes a trend: the number of fatal overdose cases in which one or more of these substances were detected was approximately 3-fold higher for the years 2023 to 2025 compared to the period from 2019 through 2022. This increase coincides directly with the recent market entry of concentrated 7-OH products, suggesting a strong temporal association between the availability of these new products and fatal outcomes.

It is important to note that many reported kratom-associated deaths involve toxic levels of other substances, and many lack the comprehensive toxicological testing needed to confirm a causal role for either mitragynine or 7-OH. Kratom products may also be present at opioid-related fatalities because they are often used to manage opioid use disorder or withdrawal. Additionally, routine toxicology screens may miss novel psychoactive substances, such as designer opioids or benzodiazepines, requiring more specialized and costly testing (Henningfield, Grundmann, Huestis, and Smith, 2024)

5.2.1.5 Other National Surveillance Data

Two important national surveillance systems that monitor substance use trends, NSDUH and the proprietary Researched Abuse, Diversion and Addiction-Related Surveillance (RADARS) (which also receives federal funding), have included “kratom” as a tracked substance” but have not differentiated traditional kratom products from concentrated 7-OH products. NSDUH provides prevalence estimates for kratom use (0.6% past-year use in 2024) but does not yet differentiate 7-OH use. As a result, their reported “kratom” data likely represent a combined population of kratom users and those using 7-OH products, a segment that appears to have emerged and grown rapidly in recent years. A further challenge in these surveillance efforts is that some individuals who use 7-OH may continue to report their past or current use simply as “kratom”, even when the product in question would more accurately be classified as a 7-OH product. These two surveillance systems also likely underestimate kratom use overall, possibly due to their survey designs and sampling approaches that primarily target major illicit and prescription drug use (see discussion in Henningfield, Grundmann, et al. (2022). These Kratom focused reports suggested estimates of approximately 1.7 to 2.0 million

past-year kratom consumers from 2019–2021 (Palamar, 2021; SAMHSA, 2023, 2024), with an estimated lifetime prevalence at 3.4 million based on 2018–2019 data (Schimmel, & Dart, 2020).

Other major surveillance systems, such as the Drug Abuse Warning Network (DAWN), which tracks drug-related emergency department visits, and the Treatment Episodes Data Set (TEDS), have not yet reported specific data for 7-OH, though the "New DAWN" system recently identified "7-OH" as a new slang term to monitor.

A more recent nationally representative survey suggests past 30 day ('current use') prevalence suggests potentially more than 20 million kratom users ages 18 and older (Grundmann et al., 2025).The recency of this survey conducted in 2024 makes it likely that some respondents were actually primary 7-OH users, possibly contributing to the larger estimated population of kratom consumption in earlier surveys.

Similarly, it is possible if not plausible that some fraction of adverse events reported to FDA's Adverse Event Reporting System, to the poison control centers, and possibly deaths associated with kratom consumption involved consumption of 7-OH products in addition to or in place of kratom products that do not contain artificially boosted or high concentrations of 7-OH. This conclusion is consistent with the following observations by FDA in its Reissig-led scientific evaluation (Reissig et al., 2025):

> "Available surveillance data indicate that abuse of 7-OH is occurring and is associated with serious harms; however, as noted previously, it is difficult to quantify the public health burden because surveillance systems do not provide estimates for the prevalence of 7-OH use and are only beginning to track the specific involvement of 7-OH enhanced products in exposure cases and overdoses. The current epidemiologic data on 7-OH exposures often lack sufficient detail to distinguish with confidence involvement of botanical kratom products from 7-OH enhanced products." (Reissig et al., 2025, p. 14)

And in its Conclusions section:

> "Due to the fact that 7-OH is both a metabolite of mitragynine and naturally present in low amounts in botanical kratom, using toxicology results to identify 7-OH as a primary or sole contributor in human exposures is challenging. There is also a need for improved clinical awareness and population surveillance to better characterize patterns of 7-OH use, the products that people are obtaining, and individual treatment needs following 7-OH exposure. Additionally, questions on 7-OH are not generally included in national surveys, and other data sources that rely on self-reported use of 7-OH likely underestimate the number of 7-OH exposure cases, as individuals may be unaware of the distinction from kratom products. Nonetheless, since specific codes were added earlier this year to document 7-OH exposure cases, U.S. poison centers have identified multiple single-substance cases of 7-OH exposure resulting in serious adverse clinical outcomes." (Reissig et al., 2025, p. 18)

The foregoing observations of this report and those of Reissig et al. above are consistent with recent conclusions and evaluations by other experts which suggest that some fraction of the adverse events and possibly deaths that have been reported and or interpreted as involving or even caused by kratom, were actually more likely attributable to the consumption of 7-OH products in addition to or in place of kratom (Grundmann et al., 2024; Hill, Boyer, et al., 2025; Papsun et al., 2023; Smith et al., 2025; Vadiei, Evoy, & Grundmann, 2025).

Taken together, the foregoing observations support the conclusion that it is urgent to add 7-OH to relevant substance surveillance systems including NSDUH, RADARS, FAERS, and poison control. Similarly, assessment of 7-OH in blood plasma in forensic toxicology examinations as well as kratom research in general is a critical need.

It is beyond the scope of this report to specify how surveillance systems should be designed to distinguish between kratom products and those containing 7-OH, including the precise wording of survey questions or the analytical methods to detect 7-OH. These should be developed with input from appropriate experts and stakeholders, ideally with a fast-track approach with a proposal from FDA and request for comments. A public meeting for comment convened by FDA, ideally with NIDA and DEA involvement may also help to ensure that the approaches to surveillance and biological assessment will be scientifically reliable, valid, and relevant to the emerging marketplace, regardless of whether or not 7-OH is ultimately scheduled.

5.2.2 Published Case Reports

Published case reports provide clinical evidence recorded and reported by trained healthcare professionals; however, these accounts are considered anecdotal and may not be representative of common experiences.

A case report by Wightman and Hu (2025) detailed the experience of a 38-year-old man with a history of opioid use disorder who escalated his use from kratom to concentrated 7-OH products, consuming up to eight 30 mg tablets daily. Upon stopping, he experienced a clear opioid withdrawal syndrome, with a peak Clinical Opiate Withdrawal Scale (i.e., COWS) score of 14. His symptoms, which included anxiety, insomnia, and restlessness, were successfully managed with buprenorphine during an inpatient stay.

Another case report described a 31-year-old who suffered severe substance-induced psychosis involving both kratom and cannabis, which resulted in self-amputation of his ears and penis (Broul et al., 2025).

5.2.3 Social Media Discussion

To investigate online sources of discussion around 7-OH, the search terms “7-OH”, “7-OH-MG”, “7-OH-MIT”, and “7-Hydroxymitragynine” were included in a boolean search of Erowid (erowid.org) using the Google search term “7-OH OR 7-OH-MG OR 7-OH-MIT OR 7-Hydroxymitragynine site:erowid.org”, and of Reddit (reddit.com) using the Google search term “7-OH OR 7-OH-MG OR 7-OH-MIT OR 7-Hydroxymitragynine site:reddit.com”. The searches were completed in August 2025.

Six experience reports in the Erowid vault were found. Where provided, information on sex, age, body mass index, dose, route of administration, formulation, duration, and effects were recorded. Most (3/5 experience reports with dates) were recent (i.e., since 2024). The remaining 2 experience reports with dates described experiences from more than a decade ago (2007-2010). One experience report did not report its date.

In terms of demographics, all 6 reports came from males aged 22 years to 39 years (i.e., younger adults). Across these 6 experiences, the median dose was 13.5 mg (interquartile range [IQR]: 6.9 mg – 16.9 mg) or 0.15 mg/kg body mass (IQR: 0.09 mg/kg – 0.19 mg). The maximum dose was 120 mg or 1.5 mg/kg. Two reports (33%) described single-dose experiences, 2 reports (33%) described daily use for 2 days, and 2 reports (33%) described longer-term, daily use from 2 weeks to 6 months. The majority (67% of reports) described oral administration of 7-OH, while the remaining reports described sublingual administration (n=1; 17%) and insufflation (n=1; 17%). The majority (67% of reports) described pill/capsule/tablet formulations, while the remaining 2 (33%) described tincture/liquid formulations. Experiences lasted from 3-6 hours.

Only one report described concomitant substances, namely cannabis (smoked), though this does not necessarily mean that no other substances were taken. Effects included euphoria (83% of reports), cravings (50%), increased heart rate (33%), itch (33%), tiredness, lethargy, or sedation (33%), constipation (17%), self-reported “withdrawal” (17%), body shakes (17%), numbness (17%), weightlessness (17%), sick feeling (17%), feeling of relaxation (17%), aphrodisia (17%), analgesia (17%), loss of balance (17%), visual distortion (17%), and most significantly, hospitalization (17%) and self-reported “respiratory depression” (17%).

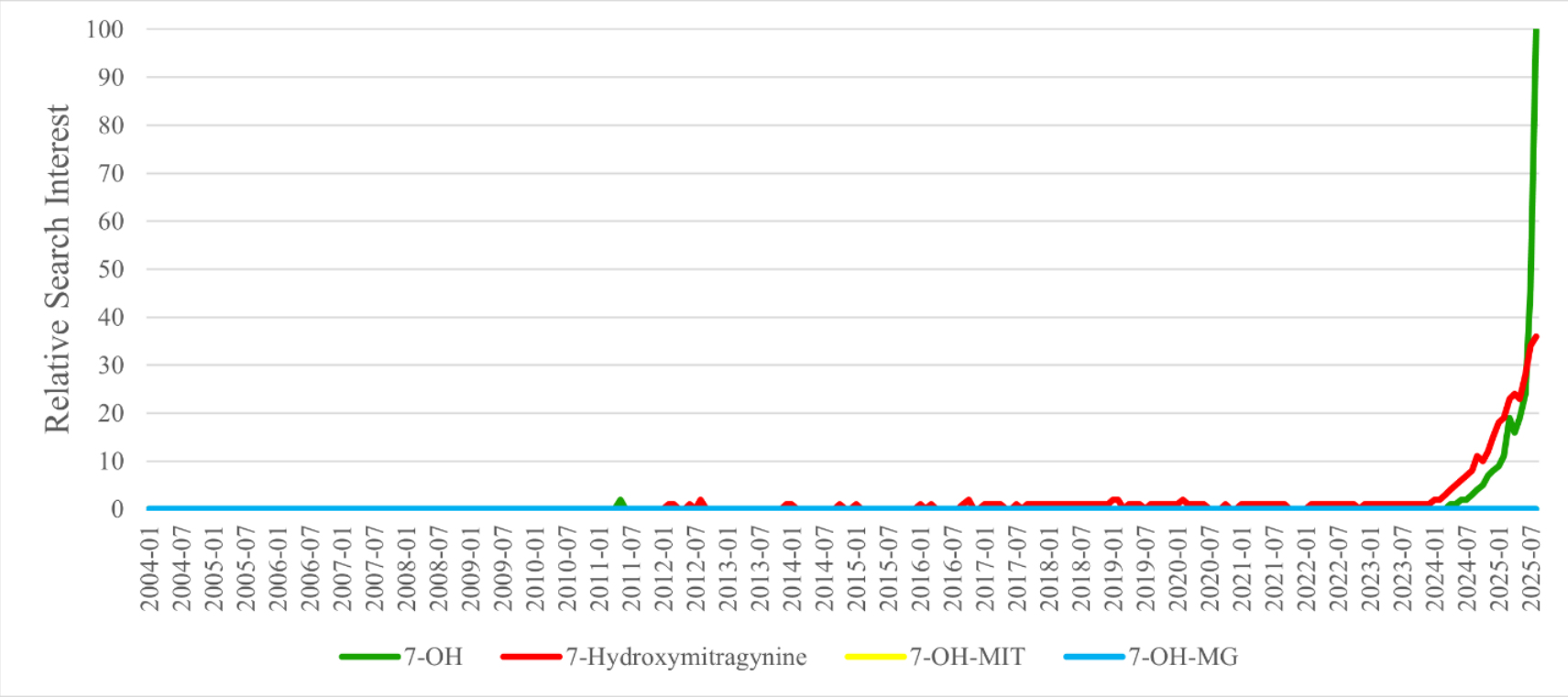
The following review of Reddit posts and comments on 7-OH is non-exhaustive. On Reddit, 7-OH was discussed in the Quitting Kratom subreddit (www.reddit.com/r/quittingkratom). Reddit posts and comments were much less descriptive than Erowid experience reports making inferences difficult. Nevertheless, a number of Reddit users reported using or formerly using kratom and being offered 7-OH, sometimes for free, from stores where they would typically purchase kratom. Most users who reported 7-OH use reported pill/capsule/tablet forms; tinctures/liquid formulations were relatively rare. Most posts reported daily use, up to 5 × daily, with use duration from 5 days to 8 months. Some users attempted to dissuade others from 7-OH use. Effects were consistent with Erowid experience reports, including euphoria, withdrawal, anxiety, insomnia, restlessness, involuntary arm and leg movement, abdominal pain, vomiting, body shakes, tightness in chest, tachycardia, diarrhoea, fatigue, sedation, dizziness, paranoia, anhedonia, kidney pain, and 1 case of hospitalization. Some Reddit users compared the severity of withdrawal from 7-OH to other substances; these included “worse than how I was with the oxy withdrawal” and “50% as bad as Fentanyl withdrawal”. Some Reddit users described stopping 7-OH use “cold turkey”, or using kratom or other substances including suboxone to “taper off” of 7-OH. Many posts and comments were missing data on dose. Among comments reporting withdrawal symptoms and dose, these ranged from 30 mg/day to 500 mg/day. Many posts and comments were missing data on dose. Among comments reporting withdrawal symptoms and dose, these ranged from 30 mg/day to 500 mg/day. Many

posts and comments were missing data on dose. Among comments reporting withdrawal symptoms and dose, these ranged from 30 mg/day to 500 mg/day.

7-OH was also discussed by a number of Reddit users in the Chronic Pain subreddit (https://www.reddit.com/r/ChronicPain) who reported using 7-OH for chronic pain management. Only one Reddit user discussing 7-OH for chronic pain reported dose; they reported taking 5.5 mg tablets twice daily (11 mg/day) and did not report adverse effects or withdrawal or withdrawal. This is lower than the doses reported by Reddit users experiencing withdrawal.

To quantify interest in 7-OH over time, Google Trends was used. Google search interest (i.e., the relative volume of Google searches) for “7-OH”, “7-OH-MG”, “7-OH-MIT”, and “7-Hydroxymitragynine” was extracted (Figure 1). Search interest in these search terms was zero from 2004 through 2010. Beginning in 2011, minimal search interest in “7-OH” and “7-Hydroxymitragynine” began, staying low through the end of 2023. Beginning in 2024 however, search interest in “7-OH” and “7-Hydroxymitragynine” grew rapidly, peaking in August 2025 shortly after FDA announced action on 7-OH products, which are the latest available data; search interest may continue to rise in the months following August 2025. Search interest in “7-OH-MIT” and “7-OH-MG” remained negligibly low throughout.

Figure 1. Google Search Interest in 7-OH-Related Search Terms



Note: 7-OH-mitragynine may be referred to by the short-hand versions “7-OH”, “7-OH-MIT”, or “7-OH-MG”.

There are many websites that focus specifically on drug misuse and abuse, some intended to discourage such use as well as those that appear dedicated to providing information in support of, if not to encourage, misuse and abuse of drugs. Many of the kratom-related postings involve what appear to be extremely high dosages of kratom substances and extracts, and self-made extracts from a variety of kratom sources. For example, users may combine several grams of kratom powder, several ounces of kratom leaves, and indeterminate forms of this or other substances. Some people have reported experiencing intoxication, euphoria, and other effects at these very high dosages, though typically their comparisons to other drugs provide a basis for understanding why kratom and kratom products apparently are rarely the substance of choice among people who seek abused drugs and are in search of better ways to get better highs and euphoria. There are self-reports of dependence and withdrawal, but these tended to involve extremely high intakes of kratom, apparently along with other substances.

5.3 Factor 6: What, if any, Risk is there to the Public Health

Factor 6 requires an integrated assessment of the overall risk a substance poses to public health. This involves synthesizing the pharmacological data on its intrinsic pharmacological risks (Factor 2), its potential for abuse and dependence (Factors 1 and 7), and the real-world evidence of its harm (Factors 4 and 5). For 7-OH, the available data indicate a potential risk to public health, which has led the FDA to conclude that it is a “dangerous substance” that poses an “emerging public health threat” and an “imminent hazard”. This risk is fundamentally driven by the substance's potent opioid pharmacology, exacerbated by its increasing availability in highly concentrated, unregulated products.

Evaluation of Factor 6 can include individual and public health benefits evidence as well because real and perceived benefits can contribute to evaluating FDA approved pharmaceuticals as well as substances that have not been approved for therapeutic use (Henningfield, Coe, et al., 2022; Henningfield et al., 2025).

FDA’s July 29, 2025 summary of the science (Reissig et al., 2025) and other FDA documents release on July 29 made clear the concerns of FDA and the DHHS have about the risks of 7-OH. In FDA’s July 29, 2025 educational slide set “Preventing the Next Wave of the Opioid Epidemic: What You Need to Know about 7-OH (FDA, 2025b), the second slide depicted four waves of the opioid crisis of approximately equal size and shape. These were labeled “prescription pills”, “heroin”, “fentanyl”, and “7-OH’, respectively. While the conclusion that 7-OH presents a potential and imminent public health risk necessitating regulatory attention is supported, caution is warranted against overstating the overdose risk, particularly given the likelihood of misinterpretation by the public and media when hearing references to 7-OH as “more potent than morphine”, even though the term “overdose” is not used in the figure.

Despite evidence suggesting thousands of individuals are currently using 7-OH – including some who appear to be consuming highly concentrated preparations and substantial total doses – the documented incidence of fatalities directly attributable to 7-OH remains very low. Even if, as FDA has suggested, 7-OH-related deaths are

underreported, it is notable that such cases appear to be rare. This low apparent lethality may be explained by two key factors: first, the predominant route of administration among users is oral rather than intravenous; and second, 7-OH exhibits the pharmacological profile of a partial MOR agonist by several measures, as discussed in Factor 2.

The available evidence indicates that 7-OH may indeed pose a “risk to public health” or a “national drug threat”, thereby warranting regulatory attention and interventions as discussed in Factors 4 and 5 and below. However, it remains uncertain whether 7-OH poses a population-level overdose risk comparable to that of other opioids. This uncertainty does not diminish the case for control measures; this report concurs that such measures – including potential scheduling under the CSA – are justified. However, it is important to recognize that some individuals report using 7-OH as their preferred and/or most effective alternative to opioids known to carry high risks of fatal overdose, or as a means of self-managing other serious disorders. Considering this population should inform any policy approaches, particularly those involving criminal penalties for possession if 7-OH is placed in Schedule I, as discussed in the policy section of this report.

5.3.1 Pharmacological Risks

The primary risk inherent to 7-OH is its potent activity at the MOR, which mediates not only its abuse-related effects but also its most dangerous potential adverse effect: respiratory depression. As reported by Gonzalez et al. (2025), 7-OH produces dose-dependent respiratory depression that is reversible with naloxone, a classic feature of opioid toxicity. While some research suggests its G-protein bias and lack of measurable β-arrestin-2 recruitment may confer a degree of safety relative to classical opioids at equianalgesic doses, this risk may preclude 7-OH to be marketed as a dietary ingredient to be used in supplements regardless of whether it is placed in Schedule I.

5.3.2 Abuse, Dependence, and Withdrawal Risk

While the abuse-related risk of 7-OH is primarily attributed to its effects at the MOR receptors, its pharmacology is not identical to that of classical opioids that are primarily active at the MOR (Factor 2). The FDA's 2025 assessment states that 7-OH produces “physical dependence, and withdrawal symptoms characteristic of classical opioids” and notes that clinical presentations include “opioid-like withdrawal syndromes” (Reissig et al., 2025). This is supported by published case reports in the medical literature, with reports of symptoms associated with opioid withdrawal including anxiety, insomnia, rhinorrhea, abdominal discomfort, restlessness, diaphoresis, and chills that were successfully managed with buprenorphine, a standard treatment for opioid withdrawal and dependence (Wightman, & Hu, 2025). However, these preliminary findings merit further study.

As evidenced by user reports, the availability of potent products with concentrations of 7-OH that is far higher than is found naturally may be facilitating patterns of chronic, escalating dose use that can lead to dependence, withdrawal, and other symptoms associated with drugs of abuse. The consequences of this include not only the direct

risk of harm from the substance itself but also the broader medical, psychological, and social harms associated with addiction.

The opioid-like withdrawal syndromes associated with 7-OH dependence presents another risk. Individuals attempting cessation may experience physical and psychological symptoms, which can be detrimental to their work and personal lives, a major barrier to recovery, and a cause to relapse. In some cases, individuals may require medically supervised withdrawal and medication-assisted treatment (e.g., with buprenorphine), placing additional burden on the healthcare system.

5.3.3 Potential Benefits to Consumers and Public Health

Anecdotal reports in public media and other sources indicate that some 7-OH users perceive it to be more effective, acceptable, or accessible than FDA approved medicines, kratom, or other approaches for their conditions. Similar conclusions for kratom were reached in 2016 (Henningfield and Fant, 2016), and in subsequent analyses (Giroir, 2018; UNODC, 2021). Consequently, removal of 7-OH from the licit marketplace without simultaneously ensuring the availability of viable accessible alternatives carries the risks of unintended consequences. These include the risk that current 7-OH consumers may relapse to potentially deadlier opioid use, as well as the likely emergence of an illicit market in which 7-OH products would proliferate without the quality standards that some 7-OH makers and marketers appear to voluntarily adhere. An illicit 7-OH market also raises the potential, if not likelihood, of 7-OH products being replaced or adulterated with fentanyl related substances. While 7-OH's potential benefits do not necessarily affect whether substances or products should be scheduled, these issues should be considered in how scheduling actions are implemented to minimize unintended individual and public health consequences.

5.4 Implications

The widespread use of highly concentrated 7-OH products is a relatively new phenomenon in the U.S., but it appears to be growing rapidly. Since about 2022, data from surveillance systems and user reports from social media, surveys, and case studies provide valuable insights into the patterns of 7-OH use, with users reporting that they are using it for pain management, to self-treat opioid withdrawal, and for recreational purposes. Data from America's Poison Centers also indicate a growing public health problem, with a rising number of exposure cases involving 7-OH and serious health effects. The FDA has also issued warnings about the public health risks associated with 7-OH, citing the high concentrations of the substance in some products and the lack of regulation and quality control.

It is important to note that 7-OH associated outcomes, both at the individual and population levels, have likely been underreported and instead attributed broadly to "kratom". This underestimation arises because current surveillance methodology does not distinguish 7-OH products from traditional kratom preparations, instead aggregating them into a single "kratom" category. This problem is exacerbated by marketing and labeling of many 7-OH products as "kratom" or "kratom derived" with implied safety statements based on studies of kratom and its far more widely studied naturally occurring constituent, mitragynine.

Despite limitations, it is clear that 7-OH is becoming more of a concern and priority for regulatory, law enforcement, and surveillance authorities. Available evidence suggests that there are signals of meaningful real-world nonmedical use and abuse with potentially significant medical outcomes, such as dependence, withdrawal, and development of substance use disorder. However, it is still not clear the severity of the risk posed to the public health by 7-OH. While surveillance systems are capturing an increasing number of cases regarding kratom, this coincides with a rapidly growing kratom market with some estimates suggesting the total market size to be 1-1.5 billion USD. Presumably, a proportion of these cases are due to consumption of concentrated 7-OH products, as many of these cases have been included as “kratom” cases, though this figure is unclear based on current surveillance capabilities.

For example, the 44th WHO Expert Committee on Drug Dependence (ECDD) reviewed the available evidence on kratom and its alkaloids in 2020 (UNODC, 2021). It concluded that there was insufficient evidence to recommend a critical review of these substances. However, the committee also noted the increasing availability of concentrated kratom products and the potential for these products to pose a public health risk. The UNODC has also issued an announcement about new kratom-related products, expressing concern about their potential health effects. However, this report was focused on kratom plant products and extracts and mitragynine studies and not the subcategory of high-concentration 7-OH products, which had not yet emerged as a significant or substantial category of product in the U.S. or globally.

It is critical to characterize the relative risk of 7-OH to that of kratom products that are consistent with the natural constitution of the kratom plant, and to classical drugs of abuse. Despite a growing kratom market, there have been few signals of risk to the public health from natural kratom products, and a number of reports and surveys showing consumers using them for therapeutic purposes (Grundmann et al., 2022; Smith, & Lawson, 2017). FDA in its 2018 determination to rescind the recommendation for CSA control of mitragynine and 7-OH cited a “potentially substantial risk to public health if these chemicals were scheduled at this time” due to potential adverse consequences if kratom is no longer available for people using for symptoms such as intractable pain, psychological distress, risk for suicide, transition from opioids or other potential or harmful drugs (Giroir, 2018). Similarly, reported use of 7-OH includes consumers and patients using for therapeutic purposes, and who may suffer unintended adverse consequences from its sudden removal from the market. Given its distinct risk profile, especially in the context of highly concentrated 7-OH products, careful surveillance and research are necessary and warranted including but not limited to studying 7-OH using accepted FDA toxicological standards (e.g., through NIH funded research or through development as an FDA approved drug).

6 Factor 7: The Psychic or Physiological Dependence Liability

As discussed in Factor 1 and elsewhere, this report agrees with FDA regarding the evidence that some 7-OH consumers can become psychologically and physically dependent and develop substance use and withdrawal disorders, respectively. However, the level of risk and an evidence-based characterization of 7-OH dependency, use disorder, or withdrawal has received little study and more research is warranted,

regardless of the scheduling action and approach. The existing data are likely to be considered insufficient to conclude at present that the 7-OH withdrawal syndrome is sufficiently similar to classical opioids to warrant inclusion in a diagnostic manual.

7 Factor 8: Whether the Substance is an Immediate Precursor of a Substance Already Controlled

It is important to note that 7-OH does not meet the prototypical criteria of Factor 8 as an immediate precursor of a substance already controlled as it is neither an immediate precursor of a substance already controlled, nor is it an opioid based on its botanical origin or chemical structure. It is not an immediate chemical precursor used in the synthesis of any currently controlled substance. Furthermore, 7-OH is a metabolite of mitragynine, a naturally occurring alkaloid from the Mitragyna speciosa plant, which is botanically unrelated to the opium poppy (Papaver somniferum). Therefore, it is not an opiate derived by extraction or chemical synthesis from opium or its constituents, such as morphine or thebaine.

However, the CSA includes a provision (21 U.S.C. § 802(18)) that guides determination of whether a substance can be determined to be sufficiently pharmacologically equivalent to morphine with respect to key effects related to “addiction liability” to be designated and regulated as an opioid. Specifically, no. 18 states:

> “The term ‘opiate’ or ‘opioid’ means any drug or other substance having an addiction-forming or addiction-sustaining liability similar to morphine or being capable of conversion into a drug having such addiction-forming or addiction-sustaining liability.”

This pharmacological definition is critical to the regulatory consideration of 7-OH. It allows the DEA, upon recommendation from DHHS, to classify a substance as an opioid based on its effects, even if it does not meet the structural or precursor criteria of Factor 8. The determination of whether a substance has an “addiction-forming or addiction-sustaining liability similar to morphine” is based on the scientific and medical evidence evaluated under the other factors of the 8-FA, particularly Factors 1, 2, 3, and 7.

An example of this in pharmaceutical development was tapentadol. During its evaluation and development as an analgesic, it was not designated as an opioid based on its chemical structure; however, based on its overall pharmacological profile and similarity to morphine and related opioids, tapentadol was placed in Schedule II of the CSA, along with morphine and oxycodone, following its approval for therapeutic use and is now widely classified as an “opioid”.

8 Scheduling Recommendation

This 8-FA supports FDA’s preliminary July 29, 2025 recommendation that placement of 7-OH in the CSA is warranted. Moreover, because 7-OH has not been approved by FDA for therapeutic use and has not been determined by FDA and DHHS to be commonly accepted for medical use (i.e., CAMU), the only CSA scheduling option is Schedule I.

Specifically, the present analysis supports FDA's "Assessment of the Scientific Data and Toxicological Concerns" which included the following conclusions:

> "Based on demonstrated pharmacology, repeated or prolonged use of 7-OH would lead to tolerance, physical dependence, and potentially to opioid addiction — typical of mu opioid agonist drugs of abuse."

The analysis of Factors 1, 2, 3 and 7 in the present report and the FDA analysis both support the conclusion that 7-OH meets the statutory criteria of the Controlled Substances Act's specific provision (at 21 U.S.C. § 802(18)) that guides determination of whether a substance can be determined to be sufficiently pharmacologically equivalent to morphine with respect to key effects related to "addiction liability". Thus, 7-OH can be designated and regulated as an opioid as discussed above in Factor 8.

Moreover, with respect to the determination of whether 7-OH poses a known or imminent public health threat, which is among the criteria for both temporary (i.e., "emergency") scheduling and permanent scheduling, FDA's July 29th analysis concluded as follows:

> "The pharmacological profile, abuse liability, and emerging patterns of non-medical use establish 7-OH as a dangerous substance. Current regulatory gaps have enabled widespread availability of these products despite their opioid-like properties and necessitate immediate policy intervention to address this emerging threat to American public health."

Factors 4, 5, and 6 in the present report supports FDA's conclusion that 7-OH poses a likely imminent public health threat, thus supporting the known or imminent public health threat criteria for temporary and permanent scheduling.

8.1 Policy Implementation Considerations to Minimize Unintended Consequences

Evidence suggests that there is likely a proportion of individuals who may benefit from their use of 7-OH, with some considering it a life-saving path away from more deadly illicit opioids. While such reports may not, on their own, be sufficient justification to avoid scheduling 7-OH, they should be considered in how such a regulatory policy is implemented and enforced. As discussed in greater detail in the Research Priorities and Policy Considerations section below, some 7-OH consumers may need time, support, and assistance to identify effective alternatives, and to reduce the likelihood that a significant illicit market for 7-OH will emerge if 7-OH is scheduled.

The FDA appeared careful in its July 29th documents and press conference to distinguish between concentrated 7-OH products and natural kratom products, which it acknowledges often contains detectable levels of 7-OH. For controlled substances the CSA does not set a level of for controlled substances that can be marketed without control. However, there are examples of substances and products that contain low levels of substances. For example, FDA has not banned, and DEA has not scheduled, poppy seeds used in cooking even though their consumption can produce detectable levels of morphine following consumption of poppy seed pastries, curries and other

foods. Other examples include a Parkinson's Disease diagnostic scanning assay that includes small amounts of cocaine related substances that DEA determined did not require scheduling. Implementation may include a performance standard for kratom products such as the maximum allowable amount per serving size.

As discussed in Factor 4, 5 and 6 and in the policy implications of this report, a subset of 7-OH users consider it to be their path away from illicit or pharmaceutical opioids that likely carry greater risks of overdose death than 7-OH. Individuals also report benefits such as relief of pain, sometimes describing 7-OH as more effective or preferred to FDA approved medicines or kratom. Although there are significant gaps in the current body of evidence that do not allow credible estimates of the incidence of such cases or the prevalence among 7-OH users, these reports underscore the importance of carefully planning and implementing any scheduling action. Enforcement priorities should aim to minimize the risks of 7-OH users relapsing to more deadly opioid use, and prevent the emergence of an illicit market in which trafficking organizations such as cartels manufacture and distribute unregulated 7-OH products. Such illicit products may lack the quality controls observed by at least some current manufacturers. Such illicit marketers may also add fentanyl related substances to 7-OH for boosted effects or even replace 7-OH with fentanyl related substances.

To be clear, this discussion of potential unintended public health consequences does not mean that scheduling is not warranted; rather, it underscores the need for thoughtful implementation giving consideration to the potentially thousands of current 7-OH consumers. The timing, scope, and enforcement approach to scheduling and policy implementation should be carefully considered by the DEA/Department of Justice (DOJ) ideally in coordination with CDC, FDA, and NIH, with diverse stakeholder input (including 7-OH consumers). Such coordination would provide the umbrella of supporting surveillance, assistance, and research to detect and minimize unintended consequences, and provide time and assistance to current 7-OH users to find alternatives to 7-OH.

9 Research Priorities and Policy Considerations

The recommendation by the FDA to the DEA of a scheduling action to control 7-OH under the CSA represents a significant federal response to what the agency has deemed an "emerging public health threat". This action is a continuation of a complex history of regulatory considerations for kratom and its alkaloids and has continued to highlight gaps in the regulatory and legal framework for regulating novel botanical psychoactive substances. Some experts may feel that potentially lower real-world risks of addiction, abuse, and overdose exist for 7-OH and therefore warrant less restrictive scheduling than those drugs that are placed in Schedule II (i.e., fentanyl and oxycodone) and Schedule I (i.e., heroin).

However, under current law, Schedule I is the only option for 7-OH. The CSA makes clear that if a drug has sufficient abuse potential to warrant scheduling and it is not approved by FDA or designated as CAMU, then placement in Schedule I is required. Further, while the evidence of overdose risk is primarily by the intravenous route and real world-use is primarily by the potentially lower risk oral route, the pharmacological

and toxicological profile of the 'substance' or 'chemical entity' is the basis for scheduling – regardless of route. If 7-OH is placed in Schedule I, and then in the future, a New Drug Application for a 7-OH containing product is developed and approved by FDA, that product will be removed from Schedule I and rescheduled or removed from CSA control as informed by an 8-FA for that product and other considerations.

Specifically, as per the CSA, approved drugs are scheduled according to their abuse-related risks as guided by the 8-FA in which Schedule V is least restrictive (e.g., cough preparations with less than 200 milligrams of codeine or per 100 milliliters, and pregabalin) and Schedule II is most restrictive (e.g., morphine, oxycodone, amphetamine, cocaine and fentanyl).

Thus, FDA's report, "7-Hydroxymitragynine (7-OH): An Assessment of the Scientific Data and Toxicological Concerns Around an Emerging Opioid Threat", summarizes the chemical, pharmacological and epidemiological evidence related to 7-OH safety and abuse potential. Although not structured as a formal 8-FA, it includes key data which formed the basis for its determination that:

> (a) 7-OH demonstrates sufficient pharmacological equivalence on key abuse and safety related variables to be considered an "opioid", thus triggering CSA's statutory implications that include placement in Schedule I if not approved as a drug, and placement in Schedule II if under development with an Investigational New Drug (IND) application that has been accepted; and,
>
> (b) 7-OH is "dangerous" and poses an imminent hazard to public health which satisfies a key criterion for temporary (aka "emergency") drug scheduling.

A critical implication of these two determinations is that to warrant scheduling, the substance does not need to carry the same or equivalent abuse potential or overdose risk as classical opioids (e.g., frequent reference standards morphine and oxycodone, or epidemiological comparators such as heroin and fentanyl). However, in practice, the greater the risk to public health, the greater the urgency and justification for rapid action.

It is important to note that the definition of CAMU has been recently evolving, as evidenced by the 2024 DEA recommendation to place marijuana into Schedule III of the CSA (DEA, 2024), which states:

> "In its most recent evaluation, HHS informed DEA of its view that DEA's previous approach to determining whether a drug has a CAMU does not adequately account for certain indicia of medical use that, where present, are relevant to determining whether a substance has a CAMU for purposes of scheduling under the CSA. Specifically, HHS observed that DEA's tests left no room for an evaluation of (1) whether there is widespread medical use of a drug under the supervision of licensed health care practitioners under State-authorized programs and, (2) if so, whether there is credible scientific evidence supporting such medical use."

DHHS therefore developed an alternative test wherein:

> "Under Part 1 of the HHS CAMU test, the Office of the Assistant Secretary for Health ("OASH") considered whether there is widespread current experience with medical use of marijuana in the United States by licensed [healthcare providers] HCPs operating in accordance with implemented State-authorized programs, where such medical use is recognized by entities that regulate the practice of medicine under these State jurisdictions. Part 2 of the CAMU test evaluated whether there exists some credible scientific support for at least one of the medical conditions for which the Part 1 test is satisfied. The evaluation in Part 2, undertaken by FDA, was not meant to be, nor is it, a determination of safety and efficacy under the Federal Food, Drug, and Cosmetic Act's drug approval standard for new human or animal drugs. Rather, HHS's two-part test is designed to evaluate whether a substance, in this case marijuana, has a CAMU for purposes of drug scheduling recommendations and placement in a drug schedule consistent with criteria set forth in 21 U.S.C. 812(b)."

While there are reports of consumers using 7-OH for therapeutic purposes, the available body of evidence falls far short of the level that supported DHHS/FDA designation of "marijuana" as CAMU in its 2023 analysis, led by the Office of the Assistant Secretary of Health (OASH). The analysis included extensive data which confirmed "that more than 30,000 HCPs [health care providers] across 43 U.S. jurisdictions are authorized to recommend the medical use of marijuana for more than six million registered patients for at least 15 medical conditions. OASH's Part 1 analysis, therefore, supports the finding that marijuana has at least one CAMU in the United States." Note this evaluation does not mean marijuana has been approved as a drug for any given condition. Rather, the widespread and well-documented medical use was deemed sufficient to satisfy the CAMU requirement and provide the basis for removal of marijuana from Schedule I – a recommendation that is presently under consideration by the DEA. Currently, no comparable body of evidence exists to support a similar CAMU designation for 7-OH

Likewise, neither kratom nor any of its alkaloids (including mitragynine, the predominant active constituent in most kratom products and extracts) have been designated as CAMU. Further, kratom and its alkaloids have not been designated as 'opioids' based on botanical origin, chemical structure, or sufficient pharmacological equivalence to morphine. Moreover, several prior 8-FAs have determined that they do not warrant scheduling under the Controlled Substances Act. This includes the 2018 analysis by Assistant Secretary Brett Giroir (Giroir, 2018), which rescinded an earlier recommendation to schedule kratom's main alkaloids, mitragynine and 7-OH. That rescission was based on the determination that the scientific evidence at the time was underdeveloped and insufficient, and that scheduling carried a "significant risk of immediate adverse public health consequences," such as driving users to more lethal opioids.

Similarly, the in 2020, the World Health Organization's Expert Committee on Drug Dependence (ECDD), found insufficient evidence to recommend a critical review of kratom, mitragynine, and 7-OH for international scheduling, though it recommended continued surveillance (UNODC, 2021). Three other 8-FA (one submitted as a comment

to DEA in 2016 [Henningfield and Fant, 2016], and two as peer reviewed publications (Henningfield, Fant, and Wang, 2017; Henningfield, Wang, and Huestis, 2021) also concluded that kratom did not warrant CSA scheduling.

Although these prior evaluations included consideration of 7-OH, they did not find sufficient basis for scheduling at the time. However, the science has advanced significantly in recent years as discussed in Factor 3. Specifically, the introduction to Kratom: History, Science, and Therapeutic Potential, a recently published book featuring contributions from many of the world's leading kratom researchers, notes the rate of annual kratom science publications increased from about 20 per year in 2016 to more than 130 per year by 2024, with the increased fueled heavily by research funding by the National Institutes of Health (NIH), NIDA (Henningfield, Beyer, & Raffa, 2025).

The rapid growth in 7-OH marketing and consumption since 2022, coupled with an expanding body of research addressing its abuse potential and safety (Reissig et al. 2025), in addition to the increased body of evidence regarding kratom in general, has altered the public health context. Accordingly, this report concurs with the July 2025 FDA's evaluation that potential and increasing public health risks – exacerbated by extensive 7-OH product marketing and consumer consumption, rising consumer exposure, and new scientific evidence – support the recommendations for scheduling.

As discussed earlier, the foregoing observations of this report and those of Reissig et al. above are consistent with recent conclusions and evaluations by other experts which suggest that some fraction of the adverse events and possibly deaths that have been reported and or interpreted as involving or even caused by kratom, were actually more likely attributable to the consumption of 7-OH products in addition to or in place of kratom (Grundmann et al., 2024; Hill, Boyer, et al., 2025; Papsun et al., 2023; Smith et al., 2025; Vadiei, Evoy, & Grundmann, 2025).

Taken together, the foregoing observations support the conclusion that it is urgent to add 7-OH to relevant substance surveillance systems including NSDUH, RADARS, FAERS, and poison control. Similarly, assessment of 7-OH in blood plasma in forensic toxicology examinations as well as kratom research in general is a critical need. As discussed in Factor 5, it is beyond the scope of this report to specify how surveillance systems should be designed to distinguish between kratom products and those containing 7-OH, including the precise wording of survey questions or the analytical methods to detect 7-OH, which should be developed with input from appropriate experts and stakeholders.

9.1 Comparison of 7-OH to Kratom and other Substances

Currently, many kratom and related products, including concentrated 7-OH products are marketed as dietary ingredients and/or supplements, though to date no NDIN has been accepted by FDA and the lack of documented history of use prior to 1994 has precluded its acceptance as an ingredient exempt from the NDIN requirements as described in the Dietary Supplement Health and Education Act (DSHEA) of 1994. A crucial aspect to determine 7-OH's risk to the public health is the distinction between traditional kratom and concentrated 7-OH products. The FDA has explicitly stated that its primary concern

is not with natural kratom leaf, where 7-OH is present in only trace amounts, but with the “concentrated 7-OH opioid products” that are ‘far more dangerous”. While traditional kratom is not without risks and has been associated with dependence and adverse events, its risk profile appears to be substantially lower than that of concentrated 7-OH. The limiting nature of consuming bulky plant powder and the complex interplay of dozens of alkaloids in traditional kratom may moderate its effects and abuse potential compared to isolated 7-OH.

However, neither these statements from FDA nor kratom’s apparent lack of signal of risk to public health should be misinterpreted that the Agency accepts kratom as safe. It has not accepted any submitted NDINs in which the standard for acceptance is that the products specified in the NDIN’s were found to be “acceptably safe”, though this has not been a standard that FDA has formally defined. In December 2023, FDA stated in a federal court hearing in the Southern District of California that the Agency had not yet determined if kratom was hazardous (United States v. Nine2Five, LLC, No. 3:23-CR-00179-TWR [S.D. Cal.], ECF No. 110-8). FDA also reminds the public on its kratom website page that kratom has not been approved for therapeutic use. While this is not directly relevant to the legality or safety of kratom as approval for therapeutic use is not a standard for accepting a substance as a dietary substance, it means that products cannot legally be marketed with disease treatment and prevention claims.

When compared to illicit opioids, FDA describes the risk of 7-OH as a potential “new wave of the opioid epidemic”, and implies the potential risk of fueling an overdose epidemic rivaling that by three earlier waves of prescription drugs, heroin, and fentanyl (and related substances) - a message reinforced by recent pharmacological and epidemiological data presented by FDA (Reissig et al., 2025) and portrayed in a graphic in its educational materials (FDA, 2025b).

9.2 Potential Unintended Consequences of Schedule I Placement and Policy Implications

9.2.1 Potential Unintended Consequences of Scheduling

While scheduling 7-OH under the CSA is intended to mitigate public health risks, such an action has the potential to create unintended negative outcomes. A comprehensive policy analysis must consider potential unintended consequences, which could, in some cases, undermine the primary goal of protecting public health.

9.2.1.1 Relapse by Patients and Consumers to Harmful Opioids

A key consideration in the 2018 DHHS decision not to schedule kratom or its alkaloids was the concern that a ban would cause individuals using kratom to manage opioid withdrawal symptoms or chronic pain to switch to more dangerous and harmful substances such as heroin and fentanyl (Giroir, 2018). These risks and others described by Giroir (see also Henningfield, Fant and Wang (2018); Henningfield, Grundmann, et al. (2019); Henningfield and Fant (2016)) appear plausible if 7-OH is scheduled.

As discussed in Factor 6 of this report, a similar conclusion as pertains to 7-OH is based on admittedly limited anecdotal evidence suggesting that some 7-OH users report that 7-OH to be more effective, acceptable, or assessable than FDA approved medicines, kratom, or other approaches, as was similarly concluded for kratom in 2016 (Henningfield and Fant, 2016), and in subsequent analyses (Giroir, 2018; UNODC, 2021). Nonetheless, it is foreseeable that removal of 7-OH from the licit marketplace carries the risks of unintended consequences of 7-OH consumers relapsing to potentially deadlier opioid use, and resulting in an illicit market in which 7-OH products would proliferate without the quality standards that some 7-OH makers and marketers appear to voluntarily adhere.

An illicit 7-OH market also raises the potential if not likelihood of 7-OH products being replaced or adulterated with fentanyl related substances. This risk is not theoretical and decades of experience with opioids have elucidated what is sometimes referred to as the “whack A mole” effect, whereby reduction in access to one opioid has little effect on overall opioid use as people simply migrate to other opioids. Thus, for example, when the abuse deterrent formulation of OxyContin was marketed in August 2010 and the original OxyContin removed from the market, OxyContin abuse actually decreased. However, surveillance studies over the next two years revealed there was no reduction in opioid use but rather use of other opioids (including fentanyl and hydromorphone selection) rose markedly from 20% to 32% and heroin use nearly doubled (Cicero, Ellis, & Surratt, 2012). Even more sobering is that although high dose and Schedule II opioid prescribing rates have declined in the U.S. since about 2012, annual opioid overdose deaths have continued to increase primarily due to heroin and fentanyl related substances (Henningfield, Ashworth, et al., 2019; Strickler et al., 2020).

9.2.1.2 Restrictions and Impediments to Scientific Research

Placing 7-OH in Schedule I would impose significant regulatory barriers on scientific research. Investigators wishing to study the substance – whether for its risks or its potential therapeutic benefits – would face stringent registration, security, and record-keeping requirements from the DEA, as well as funding limitations in procuring, storing, or administrating these substances in research settings (Andreae et al., 2016). This could stifle much-needed research into 7-OH's pharmacology, safety profile, and potential as a lead compound for developing safer analgesics. The G-protein biased agonism of 7-OH is of significant scientific interest for the development of novel pain medications with fewer side effects, and a Schedule I designation could severely hamper progress in this area.

9.2.1.3 Criminalization and Enforcement

Placement in Schedule I could have profound consequences including potentially severe restrictions and criminal penalties for possession and distribution. As the benefits and risks of 7-OH and the extent to which consumers are using 7-OH for therapeutic purposes have yet to be determined, it’s important for policy decisions to consider the actions and effects that may have potential unintended consequences and how to minimize the risks.

While there are no reliable estimates of how many people use 7-OH for therapeutic purposes, the potentially thousands of people using 7-OH to refrain from harmful opioid use may benefit from additional federal resources, funding treatment and harm reduction for substance use issues, as well as the DOJ deprioritizing individual possession while prioritizing inappropriate marketing and sales. The specific options and approaches for policy to minimize unintended consequences are beyond the scope of this report; however, this report recommends consideration should be given to risk mitigation before 7-OH is scheduled. A request for comment and possibly a public hearing to give consumers and various important stakeholders consideration is recommended, because preliminary anecdotal reports suggest that for some people 7-OH is their lifeline away from potentially more deadly opioid such as fentanyl. They may need time and assistance to find alternative, acceptable, and effective therapeutic strategies and support.

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11 Appendices

11.1 Appendix 1: Published Findings Related to Abuse, Physical Dependence, Withdrawal, and Safety Signals of 7-OH

Table 2. Published Findings Related to Abuse, Physical Dependence, Withdrawal, and Safety Signals of 7-OH

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
Factor 1: Actual or Relative Potential for Abuse						
Gonzalez et al. (2025)	Mitragynine and 7-Hydroxymitragynine: Bidirectional Effects on Breathing in Rats.	MG: 5.6, 10, 17.8 mg/kg, IV 7-HMG: 1, 3.2, 10 mg/kg, IV Positive control opioid: morphine (10, 32 mg/kg IV). Antagonist: naloxone (1 mg/kg IV).	NA	Did not assess withdrawal	Morphine caused dose-dependent respiratory depression while mitragynine unexpectedly increased respiratory frequency at 10 mg/kg, with no significant depression of tidal/minute volume. High dose (17.8 mg/kg) caused seizures in some rats without respiratory depression. MG's stimulant effect was not blocked by naloxone, suggesting a non-opioid mechanism. 7-OH-MG caused dose-dependent respiratory depression: reduced frequency and minute volume at 3.2 and 10 mg/kg, tidal volume trends toward depression. Naloxone fully reversed 7-HMG-induced respiratory depression (tidal and minute volume restored).	NA
Sudmoon et al. (2025) Discovery of rhynchophylline and mitraphylline in two Thai	Toxicity testing of two Thai Mitragyna species and the investigation of their biological activity via opioid	MG, 7-OH-MG, mitraphylline, and rhynchophylline	NA	NA	Mild motor impairment seen at ≥50 mg/kg IP, no lethal effects	MG exhibited moderate affinity for the MOR and KOR, whereas 7-OH-MG had 14x greater binding affinity than MG. Rhynchophylline, MG, and 7-OH-MG were found in other Mitragyna species.

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
Mitragyna species and the investigation of their biological activity via opioid gene expression analysis.	gene expression analysis					
Henningfield, Rodricks, et al. (2022)	Rat respiratory effects & plasma MG & 7-OH-MG	Oxy & MG	General behavior (e.g., sedation)	NA	Oxy: respiratory depression & deaths; MG: no respiratory effect	Plasma MG & 7-OH-MG confirmed high-dose exposure.
Chakraborty, Uprety, et al. (2021)	Oxidative metabolism as a modulator of kratom's biological actions	MG, 7-OH-MG, MGP	7-OH-MG & MG showed significant CPP, though MGP did not	NA	7-OH-MG inhibited GI transit.	7-OH-MG produced from MG via CYP3A mediated oxidation. Acts as a MOR agonist and produced dose-dependent antinociception in tail flick and hot plate. Higher potency by the oral route vs morphine which was higher via SC admin.
Obeng et al. (2021)	Pharmacological comparison of Mitragynine and 7-OH-MG	DAMGO, morphine, fentanyl, buprenorphine, nalbuphine, naltrexone, U69,593; SNC-80 MG, 7-OH-MG	7-OH-MG produced a maximum of 100% drug lever responding in morphine trained rats In MG-trained rats, 7-OH-MG produced a maximum of	NA	100 mg/kg MG lethal (IP), even with 10 mg/kg naltrexone.	7-OH-MG produced significant naltrexone- and naloxone-reversible antinociception in rats in hot plate test.

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
			98% drug lever responding			
Gutridge et al. (2020)	G protein-biased kratom-alkaloids and synthetic carfentanilamide opioids as potential treatments for alcohol use disorder	Kratom extract, mitragynine, paynantheine, speciogynine, 7-OH-MG (3 mg/kg, IP) MP102, MP103, MP105, TRV130 morphine, DAMGO, Leu-enkephalin, U50,488	CPP findings show reward potential for kratom extract and 7-OH-MG	NA	NA	MG, paynantheine, and speciogynine reduced ethanol intake at 10-30 mg/kg in mice. 7-OH-MG reduced intake at 1-3 mg/kg (male) and 3 mg/kg (female). Speciogynine (30 mg/kg) decreased activity. 7-OH-MG (3 mg/kg) increased locomotor activity. Kratom extract #1 (30 mg/kg) and 7-OH-MG (3–10 mg/kg) induced CPP. Morphine induced CPP as expected.
Obeng et al. (2020)	Adrenergic and opioid binding affinities, metabolic stability, plasma protein binding properties, and functional effects of selected indole-based kratom alkaloids	MG, 7-OH-MG, speciociliatine, corynantheidine, 9-hydroxycorynantheidine	NA	NA	NA	7-OH-MG had the highest affinity among tested alkaloids at the MOR, and showed high affinity at the KOR and moderate affinity at the DOR. In rat hot plate tests, 7-OH-MG produced greater potency than morphine and speciociliatine but lower than fentanyl. Analgesic effect blocked by naltrexone. Did not produce hypothermia.
Todd et al. (2020)	Receptor binding of 7-OH-MG,	7-OH-MG, mitragynine, speciofoline	Binding affinity to opioid receptors	NA	Not population-specific	MG and 7-OH function as partial agonists of the human MOR, while speciociliatine does not exhibit measurable binding affinity at the

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
	mitragynine, and speciofoline					MOR, DOR, or KORs. MG and 7-OH demonstrate functional selectivity for G-protein signaling, with no measurable recruitment of β-arrestin.
Hemby et al. (2019)	Abuse liability and therapeutic potential of the *Mitragyna speciosa* (kratom) alkaloids mitragynine and 7-hydroxymitragynine.	MG: 25-150 µg/infusion, 7-OH-MG: 2.5-20 µg/infusion Morphine: 50-100 µg/infusion	Experiment 1: MG did not substitute for morphine at any dose. 7-OH-MG substituted for morphine in a dose-dependent manner (2.5–20 µg/infusion), with an inverted U-shaped curve and maximal response at 5–10 µg/infusion Experiment 2: Morphine and 7-OH-MG both engendered and maintained self admin. MG did not	NA	No lethality reported	NA

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
			7-HMG maintained intake at 2.5-10 µg/infusion, comparable to morphine Experiment 3: Morphine intake reduced by NLXZ (µ1 antagonist) but not NTI. 7-HMG intake reduced by both NLXZ and NTI, suggesting reinforcement mediated by MOR and DOR.			
Kruegel et al. (2019)	Hydroxymitragynine is an active metabolite of mitragynine and a key mediator of its analgesic effects.	MG, 7-OH-MG, MGP	NA	NA	NA	MG is converted in vitro in both mouse and human liver preparations to 7-OH-MG, mediated by CYP P450 3A 7-OH is formed from MG in mice and that brain concentrations of this metabolite are sufficient to explain most or all of the opioid-receptor-mediated analgesic activity of MG. At the same time, MG is found in the brains of mice at very high concentrations relative to its opioid

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
						receptor binding affinity, suggesting that it does not directly activate opioid receptors.
Kruegel et al. (2016)	Synthetic and Receptor Signaling Explorations of the Mitragyna Alkaloids: Mitragynine as an Atypical Molecular Framework for Opioid Receptor Modulators	MG, paynantheine, speciogynine, speciociliatine, 7-OH, morphine, DAMGO, fentanyl, HEK293	Characterization of 7-OH's activity at MOR, KOR, DOR. 7-OH-MG bound MOR with high affinity (Ki ~ 30 nM). Showed G-protein biased signaling	NA	Both 7-OH and MG were found to elicit no measurable β-arrestin recruitment	7-OH-MG produced potent antinociception, 10x more potent than morphine, blocked by naloxone. At equianalgesic doses, 7-OH-MG caused less respiratory depression and constipation than morphine.
Harun et al. (2015)	Discriminative stimulus properties of mitragynine (kratom) in rats.	MG: 3-56 mg/kg IP), 7-HMG: 0.3–3 mg/kg IP, Morphine, codeine, cocaine, diazepam, U50,488H	MG did not substitute for morphine. 7-OH-MG fully substituted for morphine. Effects were dose dependent and naloxone reversible	NA	No lethal toxicity. MG at high doses produced sedation and reduced response. 7-OH-MG elicited responses at much lower doses (0.3-3 mg/kg).	NA
Matsumoto et al. (2004)	Antinociceptive effect of 7-OH-MG in mice	7-OH-MG, MG, morphine	NA	NA	No safety-related signals or adverse effects reported	7-OH-MG showed dose-dependent antinociceptive properties when subcutaneously and orally administered to mice. Also suggests

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
						7-OH-MG may be more orally bioavailable than morphine.
Factor 2 Scientific Evidence of its Pharmacological Effects						
J. P. Manus et al. (2025)	Effects of kratom alkaloids on mesolimbic dopamine release.	MG, 7-OH-MG, (cocaine, amphetamine, opioids mentioned but not directly compared)	NA	NA	NA	Fixed potential amperometry was used to quantify stimulation-evoked phasic dopamine release in the nucleus accumbens (NAc) of anesthetized male and female mice before and after MG (1, 15, or 30 mg/kg, IP), 7-OH-MG (0.5, 1, or 2 mg/kg, IP), or vehicle. MG reduced dopamine release over the recording period (90 min) in a dose-dependent manner, and the low dose of MG significantly increased dopamine autoreceptor functioning in males. Both sexes responded similarly to 7-OH-MG with the low dose of 7-OH-MG increasing dopamine release while the high dose decreased dopamine release. 7-OH-MG did not alter dopamine autoreceptor functioning for either sex. Neither MG nor 7-OH-MG altered the clearance rate of stimulation-evoked dopamine. Findings suggest that these kratom alkaloids do alter dopamine functioning, although potentially not in a way consistent with classic drugs of abuse.

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
Obeng et al. (2022)	Interactive Effects of m-Opioid and Adrenergic a2 Receptor Agonists in Rats Pharmacological investigation of the primary kratom alkaloid mitragynine and its metabolite 7-hydroxymitragynine	MG, 7-OH-MG, morphine, methadone, clonidine, lofexidine, U69,593, naltrexone, yohimbine	MG showed low affinity at α2A and α2C receptors MG bound MOR with Ki ~1700 nM. 7-OH-MG showed stronger MOR affinity (Ki ~78 nM) but no α2 binding at ≤10 μM.	NA	No toxicity or lethality reported.	MG has weak affinity for MOR but meaningful interactions with α2-adrenergic systems. Combined activity may account for kratom's mixed reported stimulant/analgesic profile. In hot plate tests, MG did not produce significant antinociception across routes (IP, SC, oral). In contrast, 7-OH-MG produced robust, naloxone-sensitive antinociception. MG and 7-OH-MG enhanced potency of α2 agonists (clonidine/lofexidine)
Maxwell et al. (2021)	Oral pharmacokinetics in beagle dogs of the mitragynine metabolite, 7-hydroxymitragynine.	MG, 7-OH-MG	NA	NA	NA	Following a single oral dose (1 mg/kg) of 7-HMG, plasma samples were obtained from healthy female beagle dogs. Absorption of 7-HMG was rapid, with a peak plasma concentration (C_{max}, 56.4 ± 1.6 ng/mL) observed within 15 min post-dose. In contrast, 7-HMG elimination was slow, exhibiting a mono-exponential distribution and mean $t_{1/2}$ of 3.6 ± 0.5 h. Oral dosing of 1 mg/kg 7-HMG was well-tolerated with no observed AEs or significant changes to clinical laboratory tests. The exposure of 7-HMG after MG dosing due to metabolism corresponds to a 0.24 mg/kg dose of 7-HMG indicating a 23.1%

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
						conversion of MG to 7-HMG in beagle dogs.
Ellis et al. (2020)	Receptor binding and signaling of kratom	MG, 7-OH-MG, other alkaloids	Binding affinity to opioid receptors	NA	Not population-specific	Identified MOR partial agonism for 7-OH-MG and MG, biased signaling.
Takayama et al. (2002)	Synthesis and Opioid Agonistic Activities of Mitragynine-Related Indole Alkaloids	MG, 7-OH-MG, pseudoindoxyl Morphine	NA	NA	NA	In vitro tissue assays and in vivo mouse hot plate and tail-flick tests showed potent naloxone reversible antinociception
Factor 3 Current State of Scientific Knowledge						
Akbar et al. (2025)	Screening, docking, and molecular dynamics analysis of Mitragyna speciosa (Korth.) compounds for targeting HER2 in breast cancer.	MG, 7-OH-MG, paynantheine, speciociliatine, speciogynine	NA	NA	NA	MG was found to be BBB permeant, whereas 7-OH-MG was not BBB permeant, which could reduce the likelihood of CNS-related side effects. Neither were found to be P-gp substrates, which minimizes the risk of efflux-related bioavailability issues. However, both were inhibitors of CYP2D6 and CYP3A4 enzymes. 7-OH-MG demonstrated MOR binding and partial agonist activity. 7-OH-MG showed potent G-protein biased MOR agonism.

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
						7-OH-MG and MG both demonstrated high GI absorption, suggesting high oral bioavailability. Docked to HER2 binding pocket with lower binding energies, and 7-OH-MG demonstrated stable hydrogen-bond interactions with residues critical for HER2 inhibition.
Chiang et al. (2025)	In Vitro and In Vivo Pharmacokinetic Characterization of 7-Hydroxymitragynine, an Active Metabolite of Mitragynine, in Sprague-Dawley Rats.	MG MGP, 7-OH-MG	NA	NA	NA	7-OH-MG exhibited high permeability in Caco-2 cells 7-OH-MG exhibited lower plasma protein binding in rats compared to MTG. Lower plasma protein binding of 7-OH-MG may lead to a larger volume of distribution and a shorter $t_{1/2}$ than MTG. 7-HMG showed a rapid elimination with short metabolic half-lives in rat liver microsomes (0.4 ± 0.0 h) and hepatocytes (0.3 ±0.0 h). After oral dosing, the C_{max} was 28.5 ± 5.0 ng/ml, and T_{max} was 0.3 ± 0.1 h, which indicated rapid absorption of 7-HMG. The $t_{1/2}$ of 7-HMG was 0.5 ± 0.0 and 1.7 ± 0.5 h after IV and oral dosing, respectively, which indicated 7-HMG eliminates rapidly from the systemic circulation. In contrast to other studies, this study found poor oral bioavailability

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
						of 7-OH-MG, though this may be due to poor water solubility. The concentration of 7-HMG fell below the LLOQ after 8 h following IV administration and 4 h following oral administration.
Uchaipichat (2025)	Inhibitory effects of Kratom constituents, mitragynine and 7-hydroxymitragynine, on 4-methylumbelliferone glucuronidation by human UDP-glucuronosyltransferases.	MG, 7-OH-MG	NA	NA	NA	7-OH exhibited the highest inhibitory potency on UGT1A9, with IC_{50} value of 51 μM, while moderate potency was observed for UGT1A1 and UGT1A3, with IC_{50} value of 196 and 141 μM, respectively. The inhibitory potency of 7-OH on UGT2B15 was low (IC_{50} > 200 μM), while negligible effects were observed for UGT1A6 and UGT2B7. 7-OH competitively inhibited UGT1A3 (Ki = 33 μM) and noncompetitively inhibited UGT1A9 (Ki = 29 μM). Values are relatively high compared to the maximum plasma concentrations reported in humans, suggesting an unlikely potential for herb-drug interactions via UGT inhibition.
Berthold et al. (2024)	Pharmacokinetic Interaction of Kratom and Cannabidiol in Male Rats	MG, 7-OH-MG, speciociliaine, paynantheine, speciogynine, corynantheidine measured	NA	NA	NA	The metabolite to parent (i.e., mitragynine) exposure ratio percentage of 7-OH-MG remained similar (3.5 and 3.1 with and without cannabidiol, respectively). As there was an increase in MG exposure during this study, it was expected that this would be due to a decrease

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
		OPMSS Gold kratom extract (11.8 mg/mL MG, 2.8 mg/mL speciociliatine, 2.2 mg/mL paynantheine, 1.5 mg/mL speciogynine). CBD (33.3 mg/mL cannabidiol)				in metabolism, but this was not the case for 7-OH-MG despite it being primarily metabolized by CYP3A and cannabidiol being a competitive inhibitor of CYP3A
Chiang et al. (2024)	Multiple-Dose Pharmacokinetics and Safety of Mitragynine, the Major Alkaloid of Kratom, in Rats.	MG, 7-OH-MG (Morphine, oxycodone, methadone mentioned but not directly compared)	NA	NA	NA	Female rats showed significantly higher exposure to 7-OH-MG compared to male rats after multiple doses of MTG; similar results in mice (may not be applicable to humans, as women have higher expression of CYP3A activity than men); whereas male rats have higher expression than female rats.
Huestis et al. (2024)	Human Mitragynine and 7-Hydroxymitragynine Pharmacokinetics after Single and Multiple Daily Doses of Oral Encapsulated Dried Kratom Leaf Powder.	Kratom leaf powder Measured MG and 7-OH-MG	NA	COWS and SOWS No opioid-like withdrawal observed after cessation of either single or 15 day dosing.	Mild AEs including GI upset (vomiting, nausea), dizziness, fatigue. No serious AEs reported. Hematology, liver/kidney panels normal.	Controlled clinical PK study of kratom leaf capsules — **first large double-blind, placebo-controlled trial** with single and repeated dosing Mean metabolite ratio of 7-OH-MG ranged from 21-31% after a single oral dose of kratom capsules (MTG content 6.7-53.2mg) and 15-18% after multiple doses of kratom.

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
Mongar et al. (2024)	Effects of Itraconazole on Pharmacokinetics of Mitragynine and 7-Hydroxymitragynine in Healthy Volunteers.	Kratom tea, MG, 7-OH-MG	NA	NA Only single dose study, no tapering or withdrawal monitoring	Total of 15 AEs were recorded during period 1: drowsiness (56.2%), vomiting (31.2%), dizziness (31.2%), headache (18.7%), fatigue (18.7%), and nausea (12.5%), while other typical AEs such as diarrhea, fever, skin itchy, irritation, constipation, anorexia, and heartburn were not observed. In period 2, the only AE observed was vomiting (6.3%). All events were resolved on the same day without any treatment and did not lead to any drop outs	After oral administration of kratom tea (MTG content 23.6 mg), the mean metabolite ratio of 7-OH-MG was 11.5-16.2%. The median C_{max} for MTG of 159.12 ± 8.68 ng/mL was attained in 0.84 h. While median C_{max} for 7-OH of 12.81 ± 3.39 ng/mL was observed at 1.77 h.
Tanna et al. (2022)	Clinical Pharmacokinetic Assessment of Kratom (Mitragyna speciosa), a Botanical Product with Opioid-like Effects, in Healthy Adult Participants	Kratom tea from purified Mitragyna speciosa (2 g)	NA	NA	Kratom tea was well-tolerated in 5 of 7 enrolled participants. 2 participants experienced nausea and vomiting; 1 withdrew due to these AEs, and 1 was withdrawn due to abnormal appearing urine deemed likely unrelated to kratom consumption. 2 participants experienced lightheadedness and headache, deemed unrelated to kratom and related to placement of IV catheter.	PK results of 3S and 3R alkaloids included the following: Plasma concentrations for 3S/3R alkaloids were quantifiable 15 min after consumption, suggesting rapid absorption. Multiple peaks during absorption reflected delayed GI emptying common with opioids. Minimal 3S/3R alkaloids were excreted unchanged in urine. 3S alkaloids (MG, speciogynine, and paynantheine) followed biphasic concentration-time profile; displayed higher peripheral volumes of

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
					No patients experienced severe AEs.	distribution and clearance than 3R alkaloids; exhibited longer terminal $t_{1/2}$, higher CL/F and Vz/F, lower dose-normalized AUC_{inf} and C_{max}, shorter T_{max} than 3R alkaloids. 3R alkaloids (mitraciliatine, speciociliatine, isopaynantheine) followed monophasic concentration-time profile.
Kamble et al. (2021)	Pharmacokinetics of Eleven Kratom Alkaloids Following an Oral Dose of Either Traditional or Commercial Kratom Products in Rats	Traditional Kratom (lyophilized kratom tea) Commercial Kratom (OPMS liquid shot)	NA	NA	NA	Among the 11 alkaloids, only MG, 7-OH-MG, speciociliatine, and corynantheidine showed systemic exposure 8 h postdose, and the dose-normalized systemic exposure of these four alkaloids was higher (1.6−2.4-fold) following the administration of the commercial OPMS liquid. Paynantheine and speciogynine levels were quantifiable up to 1 h postdose, whereas none of the other alkaloids were detected.
Hiranita et al. (2020)	Potential Contribution of 7-Hydroxymitragynine, a Metabolite of the Primary Kratom (Mitragyna Speciosa) Alkaloid Mitragynine, to the μ-Opioid Activity of	MG and 7-OH binding activity and efficacy at the MOR were compared Plasma levels following PO MG administration were measured Antinociception in	In rats discriminating morphine (3.2 mg/kg, IP) from vehicle, the discriminative stimulus effects of MG were assessed 90 min after PO administration.	NA	32 mg/kg MG was lethal.	Binding activity of 7-OH at MOR (Ki = 78 nm) was 22-fold lower than morphine and 9-0 fold higher than MG. Following PO administration of MG (HCl salt, 55 mg/kg), C_{max} of 7-OH (85 ng/mL) was 14-fold less than MG. T_{max} of 7-OH and MG were 30 and 84 min, respectively. 7-OH is a more potent and efficacious MOR agonist than MG,

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	Mitragynine in Rats	hotplate assay was assessed	MG (up to 178 mg/kg) produced 76% morphine-lever responding (ED_{50}=51 mg/kg).			suggesting that conversion to this metabolite may contribute to the in vivo MOR of MG.
Kamble et al. (2020)	Metabolism of a Kratom Alkaloid Metabolite in Human Plasma Increases Its Opioid Potency and Efficacy	7-HMG in pooled mouse, dog, monkey, and human plasma was evaluated	NA	NA	NA	Stability varied across species with high stability in mouse, rat, and monkey plasma (>80% 7-HMG remained after 120 min), intermediate stability in dog plasma (>61% remaining after 120 min), and low stability in human plasma (~40% 7-HMG remaining after 120 min). Incubation of human plasma produced an unknown converted metabolite with NMR data matching MGP. Study findings suggest potential for human plasma to form MGP.
Factor 4 History and Current Patterns of Abuse **Factor 5 The Scope, Significance and Duration of Abuse** **Factor 6 What, if any, Risk is there to the Public Health**						
Broul et al. (2025)	Case Report: Cannabis and kratom-induced self-amputation of ears and penis.	NA	NA	NA	NA	31 year old suffered severe substance-induced psychosis involving kratom and cannabis that resulted in self-amputation.

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
Grundmann et al. (2025)	Prevalence and Use Patterns of Kratom (Mitragyna speciosa Korth.) in a US Nationally Representative Sample.	NA	NA	NA	Adverse events more frequently reported with gummies/capsules/tablets/pills at higher doses	No 7-OH-MG specific data Survey of 11,545 respondents, 1,049 current kratom users (9.1% prevalence) Motivations for use (among users): Pain relief: 57.5% (n=603). Relaxation/stress relief: 53.6% (n=562). Energy boost: 49.6% (n=520). Higher reported frequency of kratom shots/extract powder consumed was correlated with use for pain relief
Hill, Boyer, et al. (2025)	De facto opioids: Characterization of novel 7-hydroxymitragynine and mitragynine pseudoindoxyl product marketing.	7-OH-MG, MGP	NA	NA	Did not assess withdrawal directly, but authors noted widespread online reports of 7-OH-MG dependence and withdrawal	Identified 304 marketed 7-OH and/or MGP products. 82.2% = 7-OH alone. 14.5% = 7-OH + MGP combos. 3.3% = MGP alone. **Formulations:** chewable/sublingual tablets (60.2%), liquid shots (20.7%), gummies (4.3%), drink mixes (4.0%), vapes (3.0%), syrups (2.3%), capsules (2.0%), strips (2.0%), food (1.3%), powder (0.3%). **Claims:** 73.4% made “general wellbeing” claims (focus ↑ 58%, relaxation 47%, energy boost 39%).

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
						37.8% made "functional" claims (pain relief 26%, anxiety/stress reduction 21%). 12.5% made explicit "drug" claims (opioid receptor activity, analgesia, sedation). **Dosing/costs:** Recommended dose range = 1-700 mg; mean = 20 mg/dose (7-OH higher than MP). MP mean recommended dose = 10.1 mg. Mean cost per recommended dose = $3.97 (7-OH); ~$5 for MP. **Marketing:** 93.1% falsely marketed as "kratom" despite being semi-synthetic opioids. Many brands mimic prescription medications (names like "Curevana," "Pain Crusher Rx," packaging like blister packs or syrups).
Osawa and Johnson (2025)	Postmortem distribution of mitragynine and 7-hydroxymitragynine in 51 cases	Fluid and tissue specimens from 51 postmortem cases to investigate the distribution of MG and its active metabolite 7-OH.	NA	NA	NA	Central and peripheral blood concentrations were compared, with an average heart blood to femoral blood ratio being 1.37 for MG and 1.08 for 7-OH. This ratio >1.0 suggests that MG has some propensity toward postmortem redistribution; however, the difference in concentrations of MG and 7-OH was not statistically significant.

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
						Large average MG to 7-OH ratios of 30.9 in femoral blood and 32.4 in heart blood were observed compared to average ratios of 14.8 in vitreous humor and 16.9 in urine.
Smith et al. (2025)	The rise of novel, semi-synthetic 7-hydroxymitragnine products.	NA	NA	NA	NA	Letter to editor Began marketing novel semi-synthetic products with varying routes of administration (e.g. sublingual tablets, nasal sprays) containing 14-25 mg. 7-OH-MG per labeled dose, often with brand names alluding to narcotics. These newly marketed products may contain up to 98% 7-OH-MG, together with other kratom alkaloids. Concerningly, some product formulations circumvent first-pass metabolism, increasing bioavailability. Chronic 7-OH product use could result in opioid-like physical dependence and possibly addiction. Scale and severity may be distinct from kratom leaf-based and extract products, which have not produced widespread severe addiction, but rather mild–moderate physical dependence. Currently, 7-OH products contain trace amounts of MG and 'new'

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
						chemicals yet to be identified. The safety of these unknown chemicals are unknown
Vadiei, Evoy and Grundmann (2025)	The Impact of Diverse Kratom Products on Use Patterns, Dependence, and Toxicity	NA	NA	NA	NA	Although alkaloid content naturally ranges from 2-5% in native leaf material, it can be up to 60% in concentrated extracts. Concentrated kratom products may pose risks not comparable to traditional use, and may require regulatory oversight and clinical evaluation before marketing and therapeutic use.
White (2025)	Kratom's Use and Impact on Pediatric Populations.	MG and 7-OH-MG	NA	NA	Reviewed a case series of 6 neonates exposed prenatally: withdrawal onset ~24 h after birth (jitteriness, irritability, vomiting, poor feeding, crying). Treated successfully with morphine or buprenorphine taper .	Review/Letter Poison control (2011–2017, n=1,807 exposures): 10.2% <20 years old. 48 children <13 (42 used kratom only); 137 adolescents 13–19 (80 kratom only). Admission rates after kratom-only exposure: 14.3% (<13 yr), 21.3% (13–19 yr), 27% (≥20 yr). Symptoms: opioid-like (confusion, drowsiness, nausea, vomiting), stimulant-like (agitation, seizures, tremor, tachycardia, hypertension, chest pain, tachypnea). Respiratory depression rare. Children/adolescents may use as a simulant “smart drug” or by athletes for pain/stamina reasons.

Publication or Source	Short Title or Description	Comparators Studied or Mentioned	Abuse-related Variables	Physical Dependence & Withdrawal	Safety Individual Population	Comments
Wightman and Hu (2025)	A Case of 7-OH Mitragynine Use Requiring Inpatient Medically Managed Withdrawal.	NA	NA	NA	Patient reported withdrawal symptoms upon cessation of 7-OH use including anxiety, insomnia, rhinorrhea, abdominal discomfort, restlessness, diaphoresis, and chills COWS score peaked at 14 on day 2	38 year old man with history of opioid use disorder reported escalation of use including kratom to 7-OH. Abstinent from opioids then started using kratom at 31 (30 g a day) 3 months before presentation, switched to 7-OH, with escalating use (up to eight 30 mg tablets daily, taking them every 1-2 hours). Patient received buprenorphine and transitioned to residential care.

Abbreviations: 7-OH-MG (7-HMG; 7-OH) = 7-hydroxymitragynine; AE(s) = adverse event(s)/adverse effect(s); BBB = blood brain barrier; C_{max} = maximum concentration; CNS = central nervous system; COWS = Clinical Opiate Withdrawal Scale; CPP = conditioned place preference; CYP = cytochrome; DOR = delta (δ)- opioid receptor; GI

= gastrointestinal; IC_{50} = half maximal inhibitory concentration; IP = intraperitoneal; Ki = inhibitor constant; IV = intravenous; KOR = kappa (ƙ)- opioid receptor; LLOQ = lower limit of quantitation; MG (MTG) = mitragynine; MGP (MP) = mitragynine pseudoindoxyl; MOR = mu (μ)- opioid receptor; NA = not available; Oxy = oxycodone; P-gp

= P-glycoprotein; PK = pharmacokinetic; SC = subcutaneous; SOWS = Subjective Opiate Withdrawal Scale; $t_{1/2}$ = half life; T_{max} = time to maximum concentration.

11.2 Appendix 2: Press Release: FDA Takes Steps to Restrict 7-OH Opioid Products Threatening American Consumers

FDA NEWS RELEASE

FDA Takes Steps to Restrict 7-OH Opioid Products Threatening American Consumers

Agency alerts health care professionals and consumers of 7-hydroxymitragynine risks

More Press Announcements (/news-events/newsroom/press-announcements)

For Immediate Release:

July 29, 2025

The U.S. Food and Drug Administration today is taking a bold step to protect Americans from dangerous, illegal opioids by recommending a scheduling action to control certain 7-hydroxymitragynine (also known as 7-OH) products under the Controlled Substances Act (CSA).

The FDA is specifically targeting 7-OH, a concentrated byproduct of the kratom plant; it is not focused on natural kratom leaf products. 7-OH is increasingly recognized as having potential for abuse because of its ability to bind to opioid receptors. The FDA is releasing a new report (https://www.fda.gov/media/187899/download?attachment) to educate the public about the health concerns of 7-OH and its distinction from the kratom plant leaf.

"Today, we're taking action on 7-OH as a critical step in the fight against opioid addiction," **said HHS Secretary Robert F. Kennedy, Jr**. "We will protect the health of our nation's youth as we advance our mission to Make America Healthy Again."

This recommendation follows a thorough medical and scientific analysis by the FDA and is one of several efforts to address the agency's concerns around the growing availability and use of 7-OH opioid products. There are no FDA-approved 7-OH drugs, 7-OH is not lawful in dietary supplements and 7-OH cannot be lawfully added to conventional foods.

"Vape stores are popping up in every neighborhood in America, and many are selling addictive products like concentrated 7-OH. After the last wave of the opioid epidemic, we cannot get caught flat-footed again," **said FDA Commissioner Marty Makary, M.D., M.P.H.** "7-OH is an opioid that can be more potent than morphine. We need regulation and public education to prevent another wave of the opioid epidemic."

The availability of 7-OH products is a major concern to the FDA, as consumers can easily purchase products with concentrated levels of 7-OH online and in gas stations, corner stores and vape shops. The FDA is particularly concerned with the growing market of 7-OH products that may be especially appealing to children and teenagers, such as fruit-flavored gummies and ice cream cones. These products may not be clearly or accurately labeled as to their 7-OH content and are sometimes disguised or marketed as kratom. The FDA has also published educational materials (https://www.fda.gov/media/187900/download) for consumers to be more informed about these harmful products.

In June, the FDA issued warning letters to seven companies for illegally distributing products containing 7-OH, including tablets, gummies, drink mixes and shots. Today, the FDA is also issuing a letter to health care professionals (https://www.fda.gov/media/187898/download?attachment) and is warning consumers (https://www.fda.gov/drugs/information-consumers-and-patients-drugs/hiding-plain-sight-7-oh-products) about the risks associated with 7-OH products.

Under the CSA, drugs, substances and certain chemicals are placed into one of five schedules based upon their medical use, potential for abuse and safety or dependence liability. The Drug Enforcement Administration is reviewing the recommendation and has the final authority on scheduling, which requires a rulemaking process that includes a period for the public to provide comments before any scheduling action is finalized.

Related Information

- Hiding in Plain Sight: 7-OH Products (https://www.fda.gov/drugs/information-consumers-and-patients-drugs/hiding-plain-sight-7-oh-products)

Media:
HHS Request for Comment (https://www.hhs.gov/request-for-comment-form/index.html?Agency=ASPA)
202-690-6343

Consumer:
888-INFO-FDA

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11.3 Appendix 3: FDA Report: 7-Hydroxymitragyine (7-OH): An Assessment of the Scientific Data and Toxicological Concerns Around an Emerging Opioid Threat

U.S. FOOD & DRUG ADMINISTRATION

7-Hydroxymitragynine (7-OH):

An Assessment of the Scientific Data and Toxicological Concerns Around an Emerging Opioid Threat

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An Assessment of the Scientific Data and Toxicological Concerns Around an Emerging Opioid Threat

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EXECUTIVE SUMMARY

Recent reports indicate increased availability and marketing of 7-hydroxymitragynine (7-OH) in the U.S., raising public health concerns due to its pharmacology. This report provides an overview on the chemical, pharmacological, and epidemiological data on 7-OH. It focuses on the characterization of 7-OH-containing products in the marketplace, the evidence of increasing human exposures, and the extensive body of preclinical studies in the scientific literature that indicate the predominant mu opioid agonist pharmacology of 7-OH. These data sources indicate that 7-OH is a potent opioid that poses an emerging public health threat, especially when considering the increasing availability of enhanced or concentrated 7-OH products in the marketplace.

7-OH is a naturally occurring substance in the kratom plant (*Mitragyna speciosa*), but only a minor constituent that comprises less than 2% of the total alkaloid content in natural kratom leaves. However, 7-OH demonstrates substantially greater mu-opioid receptor potency than kratom's primary alkaloid constituent mitragynine, as well as other classical opioids such as morphine. In vitro studies reveal 7-OH exhibits high binding affinity for mu-opioid receptors (Ki = 7.2-70 nM), with functional activity as a mu agonist. Animal behavioral studies demonstrate its rewarding effects from self-administration and conditioned place preference methods, consistent with its opioid properties. Critically, 7-OH produces respiratory depression, physical dependence, and withdrawal symptoms characteristic of classical opioids, such as morphine, fentanyl, oxycodone, and hydrocodone.

Recently, there has been a concerning proliferation of concentrated 7-OH products that are sold over the counter and online. The enhanced amount of 7-OH in these products is likely synthetically derived through oxidate chemical conversion of mitragynine isolates or kratom extracts. Given the trace amounts of 7-OH that are naturally present in kratom, direct extraction of 7-OH from plant material would simply be unfeasible economically.

Surveillance data from multiple sources, including America's Poison Centers National Poison Data System (NPDS), Drug Enforcement Administration toxicology testing programs, and social media monitoring, suggest increasing human exposure to these concentrated 7-OH products. Clinical presentations include euphoria, sedation, respiratory depression, and opioid-like withdrawal syndromes, with users acknowledging its significant addiction potential.

The pharmacological profile, abuse liability, and emerging patterns of non-medical use establish 7-OH as a dangerous substance. Current regulatory gaps have enabled widespread availability of these products despite their opioid-like properties and necessitate immediate policy intervention to address this emerging threat to American public health.

INTRODUCTION

The Context for 7-OH Concerns

7-Hydroxymitragynine (7-OH) is a component of the plant kratom (*Mitragyna speciosa*), a tropical evergreen tree in the Rubiaceae family that grows in the wetlands of Southeast Asia (Brown et al., 2017). Kratom leaves contain over 50 alkaloids, with mitragynine and 7-OH being the primary psychoactive constituents (Warner et al., 2016). Its leaves, consumed as a tea or in dry leaf form, have been used for centuries in both medicinal and recreational settings, largely due the properties of its alkaloids mitragynine and 7-OH. Typically, 7-OH occurs in botanical kratom in amounts no more than ~.01-.04 percent by dry weight (Heywood et al., 2024). Medicinally, kratom has been used to treat headaches, diarrhea, insomnia, anxiety, opioid use withdrawal, and more, while in recreational use cases, it has been associated with feelings of euphoria (Hill et al., 2025). Currently, there are no FDA-approved drugs containing kratom or kratom-derived drug substances such as 7-OH for any therapeutic indications.

Kratom products have grown in popularity since the mid-2000's; however, kratom, mitragynine, and 7-OH have faced regulatory scrutiny in the United States due to concerns about their safety and potential for abuse. None of these substances are lawful when added to conventional foods, as dietary supplements, or as ingredients in any FDA-approved drug, and yet, these substances are still sold in various markets. At the state level, some jurisdictions have implemented restrictions on their sale and use. Until now, 7-OH has not been the sole target of a regulatory response but has always been addressed alongside the kratom plant and mitragynine.

FDA issued its first import alert for kratom in 2012. At the time, kratom was being marketed in various forms for human consumption despite a lack of approved drug uses or established safety as a dietary ingredient. In the years since, additional import alerts have been issued by the Agency. The Drug Enforcement Administration (DEA) and the Department of Health and Human Services (HHS) had given consideration to kratom, as well as its constituents, mitragynine and 7-OH, to determine whether these substances should be recommended for control under the Controlled Substances Act (CSA). Those actions were ultimately suspended in 2018, with the Assistant Secretary for Health at that time stating that the science was incomplete, and the available data were not adequate to support a recommendation to control these substances under the CSA.

Contemporary Outlook

Given the concerning trends with 7-OH and other kratom-related products, FDA has now determined that a more comprehensive assessment of available scientific and medical data on 7-OH is warranted. Many of the products available today, which are often associated with or advertised as kratom, no longer resemble botanical kratom. Instead, they contain "enhanced" or concentrated amounts of 7-OH and are formulated as powders, capsules, and liquid extracts designed to generate a stronger effect on users. Other products are explicitly advertised as 7-OH-containing products. One analysis of websites selling 7-OH products found that most (82.2 %) were formulated as chewable/sublingual tablets, shots, or gummies and marketed specifically as 7-OH only products (92%). The mean cost per recommended dose/serving was $3.97 (Hill et al., 2025).

As described below, research has shown that 7-OH is a potent mu-opioid receptor agonist, demonstrating pharmacological characteristics that define classical opioids like morphine and fentanyl. Based on its opioid pharmacology, there is significant potential for abuse of 7-OH. In fact, in various preclinical studies it has demonstrated greater potency than classical opioids. For example, 7-OH produces respiratory depression with more than 3-fold greater potency than morphine. Since the substance's therapeutic and psychoactive effects are mediated through the same mu-opioid receptor pathways as classical opioids, it can be considered to have opioid properties warranting similar regulatory consideration (Hill et al., 2025; Obeng et al., 2021).

In this report, FDA presents its new assessment of the available scientific data and literature on 7-OH, as well as more recent law enforcement data and the rapidly evolving trends in kratom-related products. FDA still has concerns about the safety of kratom products more broadly and the unlawful marketing of them under several regulated product categories in the Federal Food, Drug, and Cosmetic Act. However, there is a recognized need for more immediate action to address 7-OH because it is a substance with potent mu opioid agonist properties and significant abuse liability.

ANALYSIS OF DATA ON 7-HYDROXYMITRAGYNINE (7-OH)

7-OH Sources and Products vs. Kratom

The alkaloid 7-hydroxymitragynine (7-OH) is a naturally occurring substance in the kratom plant (*Mitragyna speciosa*), but only a minor constituent, described as early as 1994, when it was reported to comprise about 1.6% of the total alkaloid content of kratom leaves (Ponglux et al., 1994). This early reported value is in agreement with more recent assessments that have consistently demonstrated 7-OH as comprising less than 2% of the total alkaloid content in natural kratom as noted below.

7-OH has the chemical structure shown in Figure 1. Its IUPAC name is methyl (E)-2-[(2S,3S,7aS,12bS)-3-ethyl-7a-hydroxy-8-methoxy-2,3,4,6,7,12b-hexahydro-1H-indolo[2,3-a]quinolizin-2-yl]-3-methoxyprop-2-enoate, and it has the molecular formular $C_{23}H_{30}N_2O_5$, with a molecular weight of 414.40 amu.

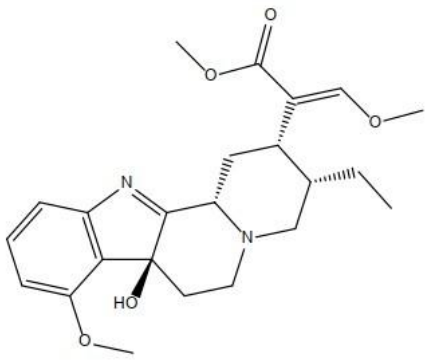

Figure 1. 7-Hydroxymitragynine Chemical Structure

Although details are not well-known, 7-OH is present in some products in amounts far exceeding its natural levels in the kratom plant. The 7-OH in these products is likely derived from the kratom plant. These 7-OH-enhanced products likely involve additional chemical synthetic steps by the producers of these products, converting the more abundant plant alkaloid mitragynine into 7-OH via chemical oxidation.

Data are available regarding 7-OH as a percentage of the total alkaloid content in kratom, and also as a percentage of dried botanical kratom leaf material and other kratom-derived products in the U.S. marketplace. One recent review reports 7-OH as comprising 2% of the total alkaloid content in kratom (Hossain et al., 2023) and this result can be extended to samples of kratom grown in the U.S. (Leon et al., 2009). In another analysis of 13 commercial products purported to contain kratom, the 7-OH content by weight ranged from 0.01-0.04% (Kikura-Hanajiri et al., 2009) a finding in agreement with others that have reported 7-OH to account for less than 0.05% by weight, substantially lower than reported mitragynine amounts (Kruegel et al., 2019). A more

recent study used ecological momentary assessment to evaluate the motivations and patterns of use of adult U.S. kratom consumers (Smith, Panlilio, Feldman, et al., 2024; Smith, Panlilio, Sharma, et al., 2024). As part of the study, subjects provided samples for quantitative testing of their own kratom products that they obtained and were self-administering. Across the 341 samples, the 7-OH content (expressed as a percentage by weight/weight or weight/volume, as indicated) ranged from below the limit of quantitation (< 0.005%) to a maximum of 0.21% with a mean of 0.01% (Sharma et al., 2025). These data suggest 7-OH is present in botanical kratom (i.e., leaf) at relatively low or trace amounts and may be a postharvest oxidative derivative of mitragynine (Karunakaran et al., 2024).

Common forms of kratom sold online include powders, capsules, resin extracts, crushed leaves, and tablets, although loose powder and prepared capsules have been reported to be the most frequently used formulations (Garcia-Romeu et al., 2020; Smith, Panlilio, et al., 2024). While kratom use characteristics are complicated by the diversity of products in the marketplace, survey studies have reported on consumption patterns. Garcia-Romeu collected data from regular kratom users and found that most users reported using 1-3g (49%) or 4-6g (33.4%) of botanical kratom per consumption (Garcia-Romeu et al., 2020). In other survey studies, the self-reported average consumption of kratom powder was 4-5 g per serving with serving sizes ranging between 2.6- 7.5 g (Rogers et al., 2024; Smith et al., 2022). When quantifying the amount of mitragynine consumed through the use of kratom, individuals self-reported consuming an average of 31.3 mg of mitragynine/serving and a range of 78.3 – 134.6 mg of mitragynine per day (Sharma et al., 2025).

Mitragynine, as the most abundant alkaloid in kratom, accounts for about 66% of the *total alkaloid content* of kratom and less than 2% of dried leaf content *by weight*, although there are reports of regional and seasonal variability in the tree's alkaloid composition (Arndt et al., 2011; Leon et al., 2009; Sengnon et al., 2023). For example, Chear and colleagues collected fresh kratom leaves from different locations in Peninsular Malaysia and determined their alkaloid profiles. The mitragynine concentration ranged from 9.38 to 18.85 mg/g or 0.38% to 1.89% of dried leaf weight while the 7-OH concentration ranged from 0.05 to 0.15 mg/g or 0.005% to 0.015% (Chear et al., 2021).

Despite the low amounts of 7-OH in botanical kratom, there are reports of its more-enhanced presence in commercial kratom-related products (Grundmann et al., 2024), although some products have been identified in reports from nearly a decade ago. For example, Lydecker and colleagues tested eight commercially available kratom products for their alkaloid content(s). In seven of the eight products tested, they found levels of 7-OH to be 109-509% higher than expected, based on naturally occurring levels of 7-OH reported in the kratom plant (Lydecker et al., 2016). More recently, the Tampa Bay Times purchased twenty kratom-derived products from local stores. One of those products consisted of pressed pills and contained 15 mg/pill of 7-OH, an amount far greater than observed in any botanical kratom preparation to date (Ogozalek, 2023). In addition to the verified amounts of 7-OH in the products obtained by Lydecker et al. and the Tampa Bay Times, other products *labeled* and/or *purported* to have high levels of 7-OH appear to be readily available for purchase online.

In summary, the low amounts of 7-OH in natural botanical kratom products is well-established as a percentage of alkaloid content, as a percentage of dried kratom leaf material, and in products representing other dosage forms made from natural kratom and consistent with its natural

composition. However, there are also a concerning and increasing number of products being sold that have unexpectedly and unnaturally high levels of 7-OH. This poses a threat to public health that is more clearly understood based on the pharmacological properties and effects of 7-OH, discussed in the preclinical data section below, and also in the limited information available on known patterns of human use and resulting harms discussed below. These sections will present and discuss the evidence in the available data that establishes the mu opioid agonist pharmacology associated with 7-OH in particular.

Patterns of 7-OH Use, Human Exposures, and Law Enforcement Data

There are several sources of information to characterize the current patterns of 7-OH use and the resulting harms to individuals who knowingly or unknowingly are exposed to 7-OH at significant doses from 7-OH-enhanced products, as described in the subsections below.

National Drug Early Warning System (NDEWS)

The National Drug Early Warning System (NDEWS) provides real-time surveillance from sentinel sites across U.S. to detect early signals of potential drug epidemics using novel (e.g., street reporting, web monitoring) and traditional data sources (e.g., OD deaths, treatment admissions).

NDEWS analyzed Reddit posts mentioning 7-OH during January to September 2024 and found that posts increased over this time. These posts are broad and can vary in content but have included warnings from Reddit users about respiratory depression, potency, dependence and long-lasting withdrawal (NDEWS, 2024).

Social Media

A variety of social media outlets were assessed for mentions and/or discussions of 7-OH. Websites included:

- erowid.org - a member-supported organization providing access to information about psychoactive plants, chemicals, and related issues;
- bluelight.org - an international message board that educates the public about responsible drug use by promoting free discussion, advocating harm reduction, and attempting to eliminate misinformation;
- reddit.com - online forum that functions as a vast collection of user-driven communities, known as sub-Reddits, each centered around specific topics.

It is important to note that all considerations of these social media sources are, at best, anecdotal in considering the risks and abuse potential associated with 7-OH products. However, it is clear that there is fairly widespread understanding of the availability of products specifically targeting high levels of the substance 7-OH, distinct from kratom products generally. In analyzing these social media posts, some relevant themes have been identified and include mention of the following: euphoria and an opioid-like "buzz"/high as motivation for consuming 7-OH; availability of "candy-like" formulations which users acknowledge as having a risk of overconsumption to their own detriment; perceptions of therapeutic value of 7-OH in self-treating pain and anxiety; concerns over loss of access to these products if they were to be banned; acknowledgement that use of these products could lead to overdose and serious

outcomes including death; and acknowledgement that use could lead to addiction and has caused users to experience withdrawal symptomology much like that produced by other commonly abused opioids.

Drug Enforcement Administration Toxicology Testing Program (DEA TOX)

The Drug Enforcement Administration Toxicology Testing program (DEA TOX) conducts analyses of voluntarily submitted leftover or previously collected biological samples from drug overdose victims to identify novel psychoactive substances (NPS) and other drugs of abuse in subjects with fatal and nonfatal overdose. The DEA TOX database was queried for reports of mitragynine, 7-OH, or mitragynine pseudoindoxyl from 2019-2025. A total of 103 cases, some fatal and some non-fatal, were identified in this selected sample; this database does not include all overdose cases, and the number of samples voluntarily submitted for analysis may vary year to year based on unknown factors.

It is notable that the utility of the DEA TOX data is limited because it generally cannot be discerned whether deaths are related to mitragynine, 7-OH, or mitragynine pseudoindoxyl, or some combination thereof. In addition, although 7-OH and mitragynine pseudoindoxyl are not typically found in appreciable amounts in fresh kratom leaves (Hill et al., 2025), both are metabolites of mitragynine, complicating forensic assessments of causality (Kamble et al., 2020). These are significant limitations in making inferences from these data; however, the number of fatal overdose cases in which one or more of these substances were detected for 2023 to 2025 are approximately three-fold higher than for the years 2019 through 2022, coinciding with the more recent entry of more-concerning kratom-related products in the marketplace, such as 7-OH.

Human Exposures in Pharmacokinetic Studies

Pharmacokinetic (PK) data for 7-OH are sparse, as to our knowledge, no clinical studies have been performed using isolated or purified 7-OH. Nonetheless, there are 7-OH PK data derived from a small number of studies using botanical kratom. Most available clinical PK data for 7-OH are variable, which may be for several reasons such as genetic differences in kratom plants, different formulations (e.g., teas, capsules, etc.), and methods of analysis. Much of the data is also from non-controlled studies making it difficult to interpret the results. Huestis and colleagues conducted a randomized, between-subject, double-blind, placebo-controlled dose escalation study of 500-4000 mg encapsulated dried kratom leaf powder corresponding to mitragynine doses of 6.65-53.2 mg. Twelve subjects enrolled in the study (n=12). Blood plasma levels of mitragynine and 7-OH were assessed after a single dose, and then again after 15 days of continuous dosing. According to the study authors, peak plasma levels of 7-OH (i.e., C_{max}values) and exposure (i.e., area under the curve, (AUC)) were lower than mitragynine but increased in a dose proportional manner and ranged from 3.6 to 22.7 ng/mL while the time to peak plasma levels (i.e.,T_{max} values) ranged from 1.2 – 1.8 h. The half-life of 7-OH increased with increasing dose and ranged from a mean of 1.7 to 4.7 hours. During the multiple dose phase of the study, 7-OH steady state was reached in about 7 days (Huestis et al., 2024).

In another study examining the PK properties of 7-OH, sixteen healthy subjects (n=16) received kratom tea containing 23.6 mg of mitragynine. Subjects were administered tea in two sessions: once with tea alone, and in a second session following pretreatment with itraconazole, a

CYP3A4 inhibitor. The 7-OH C_{max} was 12.81±3.39 ng/mL which occurred 1.7 h after administration (T_{max}). In the second session after pretreatment with itraconazole (200 mg), the C_{max} decreased 56% with a concomitant 43% decrease in AUC. These data describe the PK of 7-OH and demonstrate that the metabolism of mitragynine to 7-OH is heavily dependent on CYP3A4 (Mongar et al., 2024).

Tanna et. al., assessed the PK of a single orally administered dose of kratom (2 g), in the form of a tea, to healthy adult subjects (n = 5 completers). According to the authors, there were only trace amounts of 7-OH (< LOQ) in the starting product, therefore, the assumption was made that 7-OH was generated from the metabolism of mitragynine *in vivo.* The authors identified a PK difference between enantiomers of kratom alkaloids in either the 3S or 3R configuration. 7-OH has a 3S configuration which, according to the authors, leads to a shorter T_{max}, lower exposure (AUC), longer terminal half-life, and a higher volume of distribution during the terminal phase compared to the 3R alkaloids. Measured 7-OH in plasma samples demonstrated that 7-OH had a C_{max} = 16.1 nM, T_{max} = 1h, half-life = 5.67h, and an AUC0-120h = 103nM x h.(Tanna et al., 2022).

Epidemiological Data Sources

Limitations with the Epidemiological Data Sources

Because 7-OH appears to be a novel, emerging public health threat, the ability of public health surveillance systems to monitor 7-OH specific risks may be limited. For example, large national surveys such as the National Survey on Drug Use and Health include questions about use of kratom, but not 7-OH. Additionally, there may be a lack of awareness among consumers of kratom-related products that they are obtaining 7-OH enhanced products, and thus use of 7-OH would likely be underreported in data collected using self-report. Many forensic laboratories test for mitragynine as a marker of kratom use. In these cases, 7-OH overdose cases and fatalities may incorrectly be classified as kratom and/or mitragynine-related (Smith, Boyer, et al., 2024). Furthermore, toxicology reports documenting presence of 7-OH are difficult to interpret, because 7-OH is a known metabolite of mitragynine in humans. All of these issues complicate the real-world assessment of risks associated with use of 7-OH containing products as distinct from risks associated with kratom and other mitragynine-containing products.

FDA's Adverse Event Reporting System

Although FDA's Adverse Event Reporting System (FAERS) has documented cases reporting adverse events (13 cases, including 2 deaths) suspected to involve 7-OH, ambiguity about the contributory role of 7-OH from uncharacterized products or concomitant medications and underlying disease limits interpretation. Therefore, we do not include further analysis of these FAERS cases here.

America's Poison Centers, National Poison Data System

National Poison Data System (NPDS) receives near real-time data from the nation's poison centers (PC), providing information and assistance to callers on exposures to prescription drugs, over-the-counter medications, unapproved products, and other substances. PC healthcare professionals systematically follow up on exposure cases to document medical and clinical effects. Quality control measures are used to ensure data accuracy and completeness. Notably, 7-OH specific NPDS codes were only recently added (Feb-May 2025), and therefore the NPDS reporting period is limited to 2/1/2025-4/30/2025. As shown below, there were a total of 53 exposure cases involving 7-OH during this time period, the majority of which involved abuse-related reasons for use (i.e., "intentional abuse"). Most single-substance 7-OH exposure cases resulted in minor or moderate clinical outcomes, with several documented has having major clinical outcomes.

Table 1. National Poison Data System Closed Human Exposure Cases*, 2/1/2025-4/30/2025

	Number of exposure cases**	Number of abuse cases**	Single substance exposure cases	Single substance abuse cases
Total cases involving 7-OH	53	24	37	16
Reason				
Adverse drug reaction	4		2	
Intentional- abuse	24		16	
Intentional- misuse	4		3	
Intentional - Suspected suicide	2		0	
Other – Withdrawal	8		6	
Unintentional – general	4		4	
Unintentional- misuse	1		1	
Unintentional therapeutic error	4		3	
Unknown reason	2		2	
Related clinical outcomes				
Minor			6	3
Moderate			13	6
Major			3	1
Not followed, minimal clinical effects possible			5	3
Unable to follow, judged as potentially toxic exposure			1	0
Age				
<18 years	6	1	5	0
≥ 18 years	46	23	32	16
Unknown age	1	0	0	0

*Excludes cases classified as 'confirmed non-exposure'
**Cases may involve other substances, besides 7-OH
Related clinical outcomes include cases with clinical effects deemed "related" to exposure based on timing, severity, and assessment of clinical effects by Poison Center Specialists. Definitions available from America's Poison Centers: NPDS Full Report 2023. Page 235.

Note: This analysis used the case listing data in NPDS to identify and characterize cases documented as involving 7-OH. As of July 2025, an in-depth review NPDS case narrative data was ongoing; this further review may yield different numbers from those presented here.

Summary of Epidemiological Data and 7-OH Concerns

Available surveillance data indicate that abuse of 7-OH is occurring and is associated with serious harms; however, as noted previously, it is difficult to quantify the public health burden because surveillance systems do not provide estimates for the prevalence of 7-OH use and are only beginning to track the specific involvement of 7-OH enhanced products in exposure cases and overdoses. The current epidemiologic data on 7-OH exposures often lack sufficient detail to distinguish with confidence involvement of botanical kratom products from 7-OH enhanced products.

Preclinical Data Characterizing 7-OH Pharmacology

Although there are limited data from human studies to characterize effects of 7-OH in humans, as noted above, there is a large body of in vitro and animal studies that provide extensive evidence of 7-OH as a potent mu opioid agonist, as described in below subsections.

In Vitro Data

Receptor Binding Studies

7-OH has been shown to have affinity and activity at mu opioid receptors. In a study using human embryonic kidney (HEK) cells with cloned, human opioid receptors, 7-OH demonstrated high affinity for the mu opioid receptor (Ki = 47 nM) relative to kappa (Ki = 188 nM) and delta opioid receptors (Ki = 219 nM) (Kruegel et al., 2016). In a second study using HEK 293 cells expressing human mu and other opioid receptors, 7-OH demonstrated high affinity for mu opioid receptors (Ki = 16 ± 1 nM) and its affinity was greater than mitragynine (Ki = 238 ± 28 nM) and lower than morphine (Ki = 1.50 ± 0.04 nM) (Todd et al., 2020). Using an in vitro radioligand binding assay with CHO cells expressing murine-derived opioid receptors, 7-OH demonstrated relatively high affinity for mu-opioid receptors (Ki = 37 ± 4 nM), relative to mitragynine (Ki = 230 ± 47 nM), although its affinity was lower than morphine (Ki = 4.6 ± 1.8 nM) (Varadi et al., 2016). Other studies conducted using whole brain homogenates of guinea pig brain tissue have also demonstrated that 7-OH has high affinity at mu opioid receptors (Ki = 8.0 nM) relative to kappa (Ki = 6.7 nM) and delta opioid receptors (Ki = 6.8 nM) (Matsumoto et al., 2004). Obeng and colleagues evaluated the binding affinity of 7-OH using human recombinant HEK 293 cells expressing mu opioid receptors. Their results are in agreement with the data presented above where the authors found that 7-OH binds with high affinity (Ki = 7.2 nM) to mu opioid receptors relative to delta (Ki = 236 nM) and kappa (Ki = 74.1 nM) receptor subtypes (Obeng et al., 2020). A number of additional binding studies are in keeping with the data described above, demonstrating the affinity of 7-OH for mu opioid receptors across a variety of binding assays (Chakraborty et al., 2021; Matsumoto et al., 2008; Obeng et al., 2021; Takayama et al., 2002).

The results of the receptor binding studies with 7-OH are in keeping with *in silico* receptor binding models that suggest 7-OH has high affinity for the mu opioid receptor. The *in silico* modeling results were subsequently confirmed with a radioligand binding assay where 7-OH demonstrated high affinity for cloned, human mu opioid receptors (K_i = 70 nM). (Ellis et al.,

2020). Collectively, the available receptor binding data demonstrate the affinity and binding of 7-OH to mu opioid receptors.

Functional Studies

Many of the studies referenced above performed additional assessments of 7-OH to determine its functional activity after binding (i.e., agonist or antagonist effects). These studies have consistently demonstrated that 7-OH produces mu-opioid agonist effects. For example, Kruegel and colleagues examined the functional activity of 7-OH and mitragynine in HEK cells expressing opioid receptors using a bioluminescence resonance energy transfer (BRET) assay. Both mitragynine and 7-OH functioned as partial agonists, producing Emax values of 34% and 47% respectively and EC_{50} values of 339 ± 178 nM and 34.5 ± 4.5 nM (Kruegel et al., 2016). Activation of the mu opioid receptor pathway was also investigated using forskolin-stimulated cyclic adenosine monophosphate (cAMP) accumulation in Chinese Hamster Ovary (CHO) cells expressing mu opioid receptors. In this assay, 7-OH produced a maximal activation (Emax) of 85.9%, a value similar to that produced by the positive control comparators DAMGO (86.2%) and morphine (86.9%). These data suggest 7-OH acts a full mu opioid agonist (Todd et al., 2020). Similarly, Matsumoto and colleagues concluded that 7-OH was "found to have an opioid agonist property on μ- and/or κ-opioid receptors" based on its ability to inhibit contraction of isolated guinea pig ileum. In this assay, 7-OH displayed approximately 13-fold greater potency than morphine and 46-fold greater potency than mitragynine. The inhibition was reversed by naloxone, suggesting the effects are mediated via mu opioid receptors (Matsumoto et al., 2004). Other functional assays produced results that are aligned with Matsumoto and colleagues. For example, using a cAMP mobilization assay as a measure of functional effects, 7-OH acted as a full agonist with an EC_{50} of 7.6 nM, and was more potent than mitragynine (EC_{50} 307.5 nM) (Obeng et al., 2020). Likewise, when evaluating the agonist activity of 7-OH in an electrically stimulated guinea pig ileum, 7-OH acted as a full agonist and was more potent than morphine (Takayama et al., 2002). Finally, using a [^{35}S] GTPγS functional assay, 7-OH produced an Emax of 77% with an EC_{50} of 53.4 nM, further demonstrating its agonist effects (Varadi et al., 2016).

Animal Data on Behavioral and Physiological Effects

Conditioned Place Preference

Conditioned place preference (CPP) is a commonly utilized animal model to study the rewarding effects of drugs. In this paradigm, an animal is conditioned to associate a particular environment with a drug treatment, and an alternative environment with a non-drug condition. After repeated sessions, the animal is then observed under non-drug conditions to determine which environment the animal prefers. CPP is established if the animal spends more time in the drug-paired compartment vs. the vehicle-paired compartment (Mombelli, 2022; Prus et al., 2009). Many drugs of abuse produce CPP, though notably, it is not a direct measure of reinforcing effects.

Using the CPP paradigm, several studies have demonstrated the ability of 7-OH to produce rewarding effects and that it does so more potently than morphine. Gutridge and colleagues employed C57BL/6 mice and demonstrated the development of CPP after 3 mg/kg 7-OH. CPP was observed after both doses although 7-OH required more sessions (4 sessions) whereas morphine (6 mg/kg) was able to establish CPP in two sessions (Gutridge et al., 2020). Similarly,

other studies have demonstrated the ability of 7-OH (2 mg/kg) to produce CPP, and that it does so with greater potency than morphine (Matsumoto et al., 2008).

Drug Discrimination

Drug discrimination is an experimental method in which animals identify whether a test drug produces interoceptive effects similar to those produced by a drug to which the animals are trained to differentiate from placebo, and which has known pharmacological properties. If the known drug is one with abuse potential, drug discrimination methods can be used to predict if a test drug will have abuse potential in humans (Balster & Bigelow, 2003; Solinas et al., 2006).

For abuse assessment purposes, an animal is trained to press one bar when it receives a known drug of abuse (the training drug) and another bar when it receives placebo. A challenge session with the test drug determines which of the two bars the animal presses more often as an indicator of whether the test drug is more like the known drug of abuse or more like placebo. A test drug is said to have "full generalization" to the training drug when the test drug produces bar pressing >80% on the bar associated with the training drug (Ator & Griffiths, 2003; Swedberg, 2016; Walker, 2018; Young, 2009). A test drug that generalizes to a known drug of abuse will likely be abused by humans (Balster and Bigelow, 2003).

Male Sprague Dawley rats were trained to discriminate morphine (5.0 mg/kg i.p.) from saline using a 30 min pretreatment time and FR10 schedule of reinforcement. After successful training, substitution tests with 7-OH (0.3, 1.0 and 3.0 mg/kg) were performed. The highest dose of 7-OH (3.0 mg/kg) produced complete substitution for the morphine stimulus cue. Moreover, pretreatment with naloxone significantly reversed the 7-OH substitution and resulted in saline-like responding. Notably, in this study, 7-OH was more potent than morphine (Harun et al., 2015).

In a second study, the discriminative stimulus effects of 7-OH were examined in separate groups of rats trained to discriminate either morphine (3.2 mg/kg i.p., 15 min pretreatment) or mitragynine (32 mg/kg i.p., 30 min pretreatment) from saline. After successful acquisition of discrimination training 7-OH was administered in substitution tests. 7-OH was administered i.p., with a 15 min pretreatment time in a dose range of 0.1-17.8 mg/kg. In the morphine-trained rats, 7-OH produced complete substitution at doses above 0.56 mg/kg, with the 1.0 mg/kg dose producing 100% drug-lever-appropriate responding and a resultant ED_{50} of 0.28 mg/kg. Notably, the dose-response curve was shifted to the left, demonstrating an increased potency of 7-OH relative to morphine. In addition, pretreatment with 0.032 mg/kg naltrexone shifted the dose-response curve to the right suggesting substitution was mediated via mu-opioid receptors (Obeng et al., 2021). Taken together, the drug discrimination data demonstrate the ability of 7-OH to substitute and mimic the stimulus effects of morphine, and that 7-OH is more potent in doing so. These data are a strong indication that 7-OH produces subjective effects in humans that are similar to opioids, along with an associated abuse potential.

Self-Administration

Self-administration is a method that assesses whether a drug produces reinforcing effects that increase the likelihood of behavioral responses in order to obtain additional drug (i.e., whether an animal will press a lever for a drug injection). Drugs that are self-administered by animals are

likely to produce rewarding effects in humans, which is indicative of abuse potential. Generally, a good correlation exists between those drugs that are self-administered by animals and those that are abused by humans (Balster & Bigelow, 2003; Brady et al., 1987; Johanson & Schuster, 1981; Panlilio & Goldberg, 2007). It is notable that self-administration is a behavior that is produced by drugs that have been placed into every schedule of the CSA. Additionally, rates of self-administration for a particular drug will go up or down if the available drug dose or the work requirement (bar pressing for drug) is altered. Positive results from a self-administration study provide an abuse potential signal, suggesting that a drug has rewarding properties, but not necessarily that it produces more rewarding effects than another drug in humans.

7-OH produces reinforcing effects and is self-administered by rodents. In the study, rodents were trained to self-administer morphine (100 µg/infusion) and faded to 50 µg/infusion once stable responding was achieved. Thereafter, extinction sessions were performed to confirm acquisition of the self-administration training prior to substitution tests. Substitution tests were performed with 7-OH doses of 2.5, 5, 10 and 20 µg/infusion. In the substitution tests, 7-OH produced an inverted U-shaped curve and the number of infusions for 5 and 10 µg/infusion of 7-OH were significantly greater than vehicle, demonstrating the reinforcing effects of 7-OH (Hemby et al., 2019).

The self-administration of 7-OH was blocked by both a mu opioid antagonist (naloxonazine) and a delta opioid antagonist (naltrindole), suggesting its reinforcing effects are mediated via opioid receptors. In addition, peak morphine self-administration occurred at 50 µg/infusion while peak 7-OH infusions occurred at 5 µg/infusion, demonstrating a substantially increased potency of 7-OH relative to morphine.

There are some pharmacokinetic (PK) data available from animal studies involving the administration of isolated, i.e., single entity, 7-OH. Following a single oral dose (1 mg/kg 7-OH) to beagle dogs, absorption was rapid, with a peak plasma concentration (i.e., Cmax) of 56 ± 1.6 ng/mL 15 minutes post-dose. The elimination half-life was slower, producing a mean of 3.6 ± 0.5 h. No AEs were observed, and no abnormal laboratory findings were reported (Maxwell et al., 2021). In adult male and female mice, the PK parameters of 7-OH were investigated after a single oral dose of 50 mg/kg 7-OH. The tissue distribution of 7-OH was observed in descending order: liver > kidney > spleen > lung > brain. Plasme C_{max} values were 0.6 and 09 µg/mL in males and females with a T max value of 0.5 hr. Area under the curve (AUC) values over 48 hours (AUC_{0-48} hr* µg/mL) were 1.4 and 2.9 in male and female mice (Berthold et al., 2022).

Antinociceptive Effects

The antinociceptive effects of 7-OH were investigated in mice using the tail flick and hot plate tests. These tests are commonly used to examine pain and analgesic effects in rodents (D'Amour & Smith, 1941). In these tests, rodents are subject to a heat stimulus and timed for the duration it takes to move their tail (i.e., tail flick) or produce a response such as jumping, licking, or shaking of limbs (i.e., hot plate).

In the tail flick test, subcutaneous administration of 7-OH (2.5 – 10 mg/kg) produced both time and dose-related antinociceptive effects. Notably, the dose-effect curve for 7-OH was shifted to the left, indicating a greater potency than the positive control comparator, morphine. Similar results were observed in the hot plate test, and when morphine and 7-OH were administered

orally. Naloxone (2 mg/kg s.c.) inhibited the effects of 7-OH and morphine in both tests (Matsumoto et al., 2004; Matsumoto et al., 2008). Concurrent results were observed by Obeng and colleagues using the hot plate test. In their study, 7-OH (0.0032 – 3.2 mg/kg, i.v.) produced maximum antinociceptive effects and was more potent morphine but less potent than fentanyl when administered intravenously. Likewise, naltrexone (0.1 mg/kg) reversed the antinociceptive effects of 7-OH suggesting the antinociception was mediated via mu opioid receptors (Obeng et al., 2020).

Respiratory Depression

A major risk of opioid exposure and cause of opioid-induced death is respiratory depression (Baldo & Rose, 2022; Bateman et al., 2023). To examine the respiratory effects of 7-OH in rodents, whole body plethysmography was used in freely moving, awake rats. Both morphine (10 and 32 mg/kg, i.v.) and 7-OH (1, 3.2, and 10 mg/kg, i.v.) induced significant respiratory depression as assessed by minute volume, tidal volume, and breathing frequency. The mu-opioid agonist naloxone (1.0 mg/kg i.v.) reversed these effects, a finding consistent with the mu opioid effects of 7-OH (Zuarth Gonzalez et al., 2025). These data highlight a potential risk factor of 7-OH exposure and suggest 7-OH may expose individuals to similar risks as classic opioids, including respiratory depression.

Physical Dependence and Withdrawal

It is well-established that chronic administration of opioids leads to the development of tolerance and physical dependence that may culminate into a withdrawal syndrome. In parallel with some of the hot plate tests described above, the ability of 7-OH to produce physical dependence and withdrawal was examined. Mice were treated with subcutaneous 7-OH (10 mg/kg b.i.d.) or morphine (10 mg/kg b.i.d.) for five days. Tolerance was assessed as a reduction of analgesia in the hot plate test. After five days of treatment, both morphine and 7-OH showed a decreased analgesic response on the hot plate test, demonstrating the development of tolerance. In addition, cross-tolerance was also observed between morphine and 7-OH suggesting a similar mechanism of action between the drugs. Finally, after five days of escalating doses of 7-OH and morphine (8-45 mg/kg b.i.d.) the development of withdrawal was assessed with a 3 mg/kg s.c., dose of naloxone injected two hours after 7-OH administration. Both morphine and 7-OH treatment produced signs of withdrawal such as jumping, rearing, urination, ptosis, forepaw tremor, and diarrhea (Matsumoto et al., 2005).

Summary of Preclinical Data

From the studies described above, 7-OH has high affinity for mu opioid receptors and functional activity as an agonist at these receptors. Consistent with this pharmacological activity, 7-OH is self-administered by animals, substitutes for morphine in drug discrimination studies, produces antinociception, and physical dependence leading to withdrawal when administered to rodents. Moreover, 7-OH has consistently demonstrated an increased potency relative to morphine in preclinical rodent studies. These observations suggest 7-OH has pharmacological properties representative of a full mu opioid agonist and an associated high potential for abuse.

CONCLUSIONS

The data described in this report indicate that 7-OH has a significant potential for abuse and associated harms. Conclusively, 7-OH has high affinity and agonist activity at mu opioid receptors. Consistent with this pharmacological mechanism of action, 7-OH demonstrates rewarding effects in that it is self-administered by animals and also produces conditioned place preference, two well-established animal behavioral models measuring rewarding effects as a predictor of abuse potential in humans. In animal drug discrimination studies, 7-OH substitutes for morphine with full generalization. 7-OH is also demonstrated to produce antinociception consistent with opioid pharmacology, and to produce physical dependence when administered to rodents, as evidenced by a classic set of withdrawal signs associated with opioid withdrawal upon discontinuation of opioid administration. Moreover, 7-OH in all above models has consistently demonstrated an increased potency relative to morphine.

Due to the fact that 7-OH is both a metabolite of mitragynine and naturally present in low amounts in botanical kratom, using toxicology results to identify 7-OH as a primary or sole contributor in human exposures is challenging. There is also a need for improved clinical awareness and population surveillance to better characterize patterns of 7-OH use, the products that people are obtaining, and individual treatment needs following 7-OH exposure. Additionally, questions on 7-OH are not generally included in national surveys, and other data sources that rely on self-reported use of 7-OH likely underestimate the number of 7-OH exposure cases, as individuals may be unaware of the distinction from kratom products. Nonetheless, since specific codes were added earlier this year to document 7-OH exposure cases, U.S. poison centers have identified multiple single-substance cases of 7-OH exposure resulting in serious adverse clinical outcomes. Also, although anecdotal, social media and online forums indicate growing awareness and use of 7-OH, and many testimonials of the negative opioid-mediated effects users have experienced, including 7-OH dependence, associated withdrawal syndrome, and addiction.

In the current marketplace in the U.S., 7-OH is increasingly being marketed over-the-counter and online, in concentrated forms or sufficient doses to cause harms to those individuals engaging, knowingly or unknowingly, in use of 7-OH. Based on demonstrated pharmacology, repeated or prolonged use of 7-OH would lead to tolerance, physical dependence, and potentially to opioid addiction— typical of mu opioid agonist drugs of abuse. This public health threat is troubling and requires immediate and impactful policies to educate consumers and take regulatory action that limits access to 7-OH containing products.

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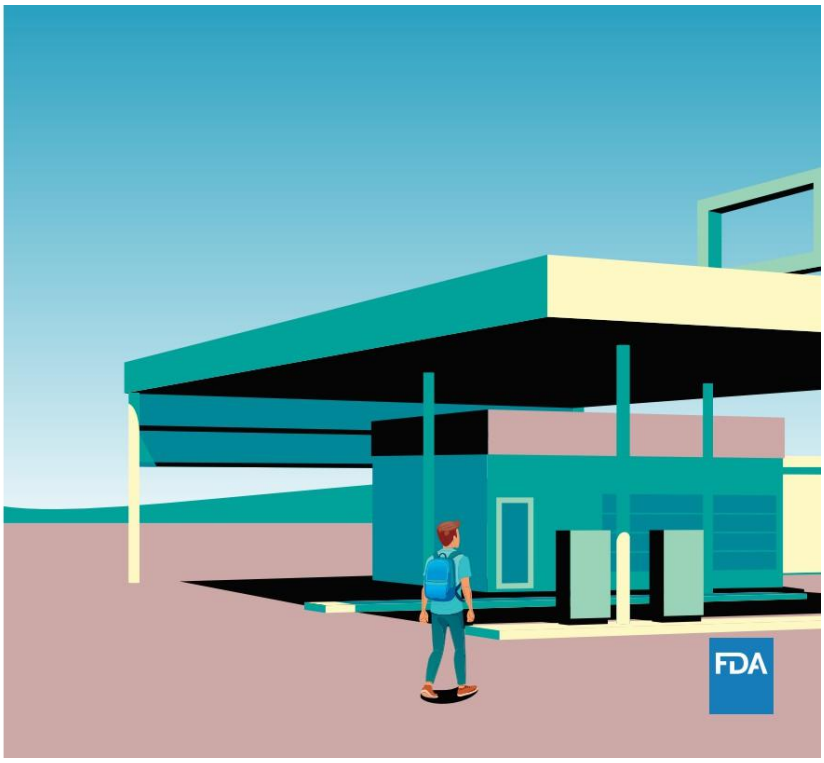
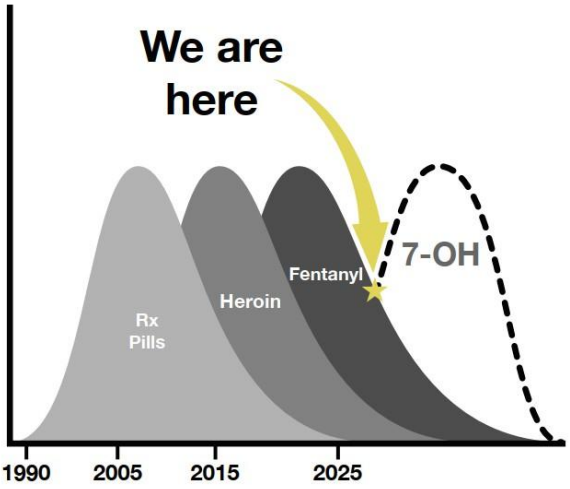
11.4 Appendix 4: FDA Slide Set: Preventing The Next Wave of the Opioid Epidemic: What You Need to Know About 7-OH

Preventing The Next Wave of the Opioid Epidemic:

What You Need to Know About 7-OH

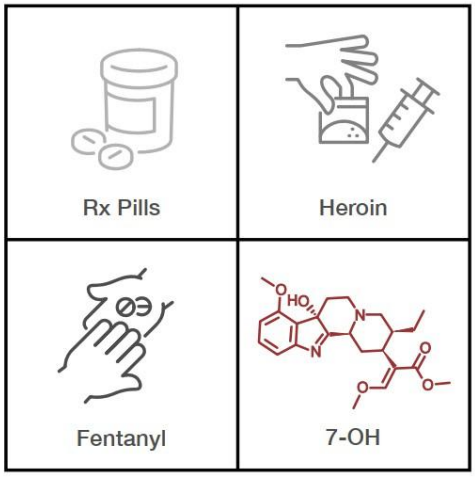


The Opioid Epidemic is Evolving with 7-OH. We Can and Must Act Now to Prevent a New Wave.



Note: The next potential phase of the opioid crisis may be defined by the emergence of novel synthetic opioids like 7-OH, combined with an increasing prevalance of concurrent use of opioids and other controlled substances.

7-OH is Engineered to be Addictive. It is a Potent Opioid by Design.



7-OH (formally known as 7-Hydroxymitragynine) is a powerful psychoactive compound that occurs naturally in very small amounts in the Kratom plant.

7-OH products are concentrated derivatives often falsely marketed as Kratom.

Street names include 7-Hydroxy, 7-OHMG and '7'.

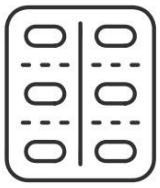
This Opioid is not Prescribed or Purchased on the Street - It's Sold like Candy at Retail Stores and Online.

What began as doctor-prescribed painkillers migrated to back-alley dealers when prescriptions dried up. Opioids have disturbingly gone mainstream with 7-OH—no prescription needed, no dealer required. This dangerous opioid is sitting on store shelves, making gas stations and convenience stores risky places where kids can purchase these drugs as easily as buying candy.

Hiding in Plain Sight: 7-OH Products are Designed to Look Like Everyday Treats Like Gummies, Candies and Ice Cream.

Note: These images are select illustrative examples and do not represent the full scope of 7-OH products on the market. Consumers should read packaging and labels carefully to determine whether a product contains 7-OH.

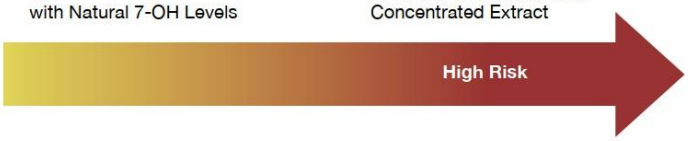
While Some 7-OH Products are Marketed as Natural Kratom, They are Not the Same. 7-OH Presents Significant Risks.



7-OH is 13x more potent than morphine.

Crushed/Powdered Leaves with Natural 7-OH Levels

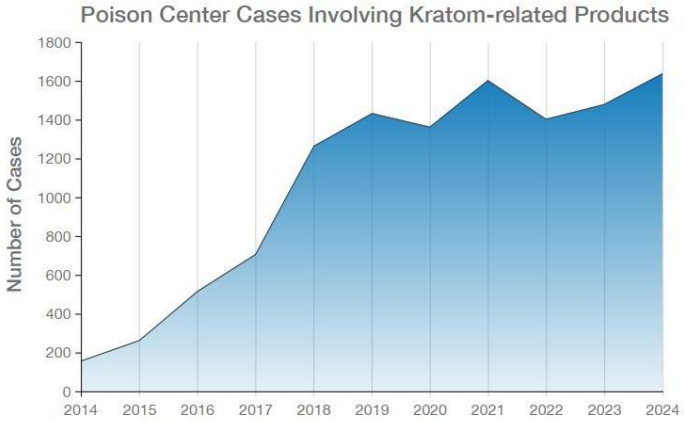
Kratom 7-OH Significantly Concentrated Extract



"Enhanced" or "spiked" kratom products may appear to be natural leaf, but actually contain as much as 500% more 7-OH than would be expected naturally.

Poison Control is Sounding the Alarm on 7-OH.

American families are reporting side effects such as dependency, withdrawals, overdose and even death.



In 2025*, approximately 40% of 7-OH reports were among individuals abusing the drug.

Note: Kratom-related products refers to a broad category of botanical kratom products and other kratom-derived products, including an unknown number of 7-OH involved cases; a classification code for 7-OH products was added to the National Poison Data System only in February, 2025.

**Data reflect partial year.*

There is No Safe Swap. 7-OH is an Opioid, Not an Alternative for Approved Treatments.

Kratom-related products, including 7-OH, are not safe or approved treatments for opioid or SSRI (selective serotonin reuptake inhibitors) withdrawal symptoms, chronic pain, or to treat depression, anxiety and other mood disorders.

KRATOM

7-OH

FDA APPROVED THERAPIES

Protect You and Your Family

POISON HELP 1-800-222-1222 POISONHELP.ORG

If you believe someone is experiencing an adverse event from a 7-OH product, contact the Poison Help Line (1-800-222-1222) or visit **www.poisonhelp.org** for help.

If someone is unresponsive, dial **911** immediately!

- Avoid buying any products with 7-OH.
- When buying candy or other treats for you or your family, examine the packaging and label so you don't accidentally buy a treat containing 7-OH.
- Talk to your health care professional if you need help with opioid addiction, anxiety, mood disorders, pain, or other ailments.

"Even better than rolling back a public health crisis would be never having one in the first place: Let's not allow 7-OH to drive the next wave of the U.S. opioid epidemic."

– Marty Makary, M.D., M.P.H., FDA Commissioner

Scan the QR code or visit fda.gov/7-OH for additional resources and to learn more.

11.5 Appendix 5: Department of Health and Human Services Press Conference Transcript

Measures to Safeguard American Public from Dangerous Opioid 7-OH

2.1 Participants:

HHS Secretary Robert F. Kennedy, Jr.

HHS Deputy Secretary Jim O'Neill

FDA Commissioner Dr. Marty Makary

Melody Woolf (chronic pain survivor).

Hubert H. Humphrey Building Auditorium

200 Independence Ave SW Washington, D.C.

Tuesday, July 29 at 10:30 AM Eastern Daylight Time.

Announcement accessed at https://www.hhs.gov/press-room/hhs-opioid-7oh-press-conference-kennedy.html

RE: Press Conference on Opioid 7-Oh Public Safety with Deputy Secretary Jim O'Neill, Commissioner of Food and Drugs, Dr. Marty Makary, DEA Assistant Administrator Tom Prevoznik, Melody Woolf, Senator Markwayne Mullin, Secretary Robert Kennedy

STEPHANIE: Thank you for being here today. We're looking forward to this press conference. Appreciate all of you being here. I am honored to introduce to the stage Deputy Secretary Jim O'Neill.

MR. O'NEILL: Thank you, Stephanie (phonetic). HHS is honored to host today our friends in the Department of Justice. We look forward to collaborating with you over the next four years to make America healthy again. We're also honored to welcome Senator Mullin, who has been a wonderful friend of this department from the Health Committee.

I've had the pleasure of working with people -- many people on the frontier of innovation. Innovation in health care, innovation in government, innovation in business, working to make things better. But not all innovation is positive. Dark innovations in chemistry have exacerbated the addiction crisis in this country. Synthetic opioids, like Carfentanil and the substance we're here to take action on today, 7-Hydroxymitragynine.

7-OH carries a high risk of addiction on purpose. It is a powerful opioid agonist, many times more potent than morphine. We've seen a disturbing rise in reports of overdoses, poisonings,

and emergency room visits linked to products containing 7-OH. These substances are often sold online or in convenience stores with no quality control, no dosage control, and no warnings. This is a recipe for public health disaster.

Young people, Veterans, and people who suffer from chronic pain or addiction are being misled into thinking that these are safe alternatives. They're not. Here at HHS, we're committed to gold standard science, safety, and compassion. We know people are looking for relief, but that relief must be grounded in reality. We owe it to the American people to act decisively, and that's what we're doing today, initiating a process to schedule 7-OH as an illicit substance.

To share more, I'd like to welcome to the stage my good friend and colleague, the Commissioner of Food and Drugs, Dr. Marty Makary.

DR. MAKARY: Thank you, Deputy Secretary O'Neill. It's great to be here. 7-OH is not just like an opioid; it does not just have opioid binding properties. 7-OH binds to the mu-receptor, which means, scientifically, by definition, it is an opioid. And yet, it is sold in vape stores, in smoke shops, in convenience stores, in gas stations that are popping up all over the United States, and nobody knows what it is. It is a synthetic concentrated byproduct of kratom. Our focus is not on kratom; our focus is on 7-OH, which, according to the Journal of Medical Chemistry, is 13 times more potent than morphine.

We have a history in public health of being asleep at the wheel. 30 years after cigarettes were widely used, then we started raising public health concerns. After heroin, crack, cocaine, and other street drugs became popular, about 10 years later, the medical establishment and public health community responded. Eighteen years after the approval of OxyContin by the FDA, we woke up to a terrible crisis that may have killed almost a million Americans. And then again, right afterwards, with fentanyl.

We have a history of being asleep at the wheel. For the sake of our nation's children, let's not get caught flat-footed again.

Public health is supposed to prevent disasters, not just clean them up after they've killed thousands and thousands of people. Why do we get caught flat-footed time and time again? In my opinion, it's because of a disconnect between the ivory towers and the streets. Have experts been to the vape stores? It affects what we see in the operating room.

I learned from living and working in inner-city Baltimore that you have to be proximate to a problem to understand it. We can't just talk about it on panels, at medical conferences, and in the ivory towers of the medical establishment. I saw on the streets of Baltimore how some of my patients that I would bump into switched from the prescription opioid that I would prescribe to heroin because they couldn't afford the co-pay.

I've been surprised going to these vape stores at what I'm

seeing. First of all, roughly 85 percent of the vape products are illegal vape products. We know that because the FDA publishes a list of legal vape products, and no cutesy, fruity flavor designed to appeal to children or a video game vape product device is legal or approved by the FDA.

I've been surprised that the candies and gummies and drinks and ice cream cones -- here's one drink with 7-OH in it. There are other products that get added to drinks. Do we understand what 7-OH is at public health scale? Let's not get caught flat-footed again. We're not targeting the kratom leaf or ground-up kratom. We are targeting the concentrated synthetic byproduct that is an opioid.

The Trump Administration is deeply committed to preventing another wave of the opioid epidemic. And this is deeply personal for many people. It's deeply personal for the Secretary of Health and Human Services, who will share how, at a young age, he struggled with addiction.

It's personal for a family friend, a good family with a good kid who is addicted, knows they're addicted, wants to stop their addiction, but can't stop. That story is going on all across the United States, and we don't have research or numbers or statistics on the scale of that problem. Let's not allow another wave of the opioid epidemic to get -- catch us blindsided again. I've met some of these families. Let's be honest, there's also a lot we don't know. This may be the calm before the storm. It may be the tip of

the iceberg. But let's be aggressive and proactive.

Today, the FDA is announcing that we are initiating action to recommend scheduling of 7-OH as a controlled substance by the DEA. We are also releasing a report on 7-OH to educate the public, including the other names it goes by.

And finally, we need to educate the public, including the medical community. I've talked to many doctors who don't know what 7-OH is. We need to be proactive so we don't get caught blindsided again. Thank you very much.

Now, I'd like to introduce DEA Assistant Administrator Tom Prevoznik.

Tom, if you could come up here?

He leads the Diversion Control Program Office. And he's worked with HHS to uncover billions in health care fraud.

Thank you, Tom.

MR. PREVOZNIK: Thanks, Marty.

DR. MAKARY: Thank you.

MR. PREVOZNIK: Good morning, and thank you all for being here. Let me start by saying DEA's mission is to protect the public health and safety, period. That means taking action when dangerous, unregulated substances threaten American lives. DEA just received the Department of Health and Human Services' formal recommendation for 7-Hydroxymitragynine. And now that we have it, we'll review it expeditiously, thoroughly, and in accordance with the law.

We don't play politics with science, and we don't cut corners when it comes to public safety. DEA is the agency charged with making the final scheduling decisions under the Controlled Substances Act. But we don't act alone. We rely on HHS and the FDA to conduct rigorous science-based evaluations, including the eight-factor analysis that considers abuse potential, medical use, and public health risks.

DEA will now begin the legal rulemaking process, which includes an opportunity for the public to comment before any final scheduling decision is made. That means full transparency, and all voices will be heard. DEA will do what we've always done, follow science, follow the law, and do what's right to keep our communities safe. Thank you.

DR. MAKARY: Thank you, Tom. One of the dangerous things about 7-OH is how much confusion it can cause. Many 7-OH products are marketed as kratom extracts or enhanced kratom. But in reality, they are the concentrated synthetic potent form that is an opioid.

Our next speaker, Melody Woolf -- Melody, come on up here -- has experienced suffering looking for pain relief, and she's going to share a bit about her story and how the dangerous 7-OH product affected her life.

Thank you, Melody.

MS. WOOLF: So very good to be here today. My name is Melody Woolf, and I'm from Kalamazoo, Michigan. I have three grown

children, and I'm going to be celebrating my 39th wedding anniversary on July 31. So, I'm very happy to get to do this and have my family see me doing this today.

I'm also a 20-year chronic pain patient. I spent eight of those years in bed. Our home was a pretty dismal place. My kids had fans on in their rooms at night because they needed to sleep, and they could hear me crying in the downstairs. They were able to go to very few activities because I was bedridden. And they had no parent to take them. My husband was working, and so they missed out on a lot of activities that they should have been at.

And to be quite truthful, my marriage was headed for a divorce. But remember, I'm celebrating my 39th wedding anniversary soon. I saw many doctors at the Cleveland Clinic, the University of Michigan Rheumatology, and so many specialists.

I was taking up to 11 medications at one time from one doctor, and one of them being the highest patch count for fentanyl. It didn't really help my pain. It made it easier to take because it made me sleep a lot. It made me groggy. But you know what? It also made me mean.

And like I said, our house was a dismal place, and I'm just so thankful that I found a botanical called kratom. And right away, my life improved; I was out of bed. I was doing activities with my kids, and I lost a lot of weight too. Being in bed for eight years -- it affects your health very negatively. So I got my life back. I've taken tent camping trips to both eclipses. And

things just turned around for my family.

In 2022, during COVID time, my daughter and son-in-law lost their childcare. I got a call, "Mom, would you like to come move in with us for the year?" I said, "Yes," immediately. "Don't you have to ask Dad?" "No." It was very thrilling for me to get to spend the entire year with my granddaughter. And it was kratom only, the powdered leaf, that saved my life.

And now, I'm seeing something very dangerous happen. 7-OH is being sold over the counter, and it is not the plant. It's a concentrated substance that is very dangerous to consumers. 7-OH is not what helped me get out of bed and get a quality of life again that I enjoy.

I check out my smoke shops to make sure that they're selling products appropriately, that there's labeling on them, that they have a no-minors, and that kratom is behind the counter locked up. I did that on Sunday. I said, "Where are your kratom products?" He said, "Oh, here they are." He handed me a 7-OH product. And I said, "That's not kratom," and he was very confused. He said, "It's not? I thought it was." And I said, "No, it's not." I briefly explained it to him.

And then when I told him that I do not take 7-OH, and I never would, he said, "Well, I'm very glad to hear that, because many of my customers tell them that it takes them back to their heroin days." And there is the big danger.

So this is what's happening. 7-OH is pulling people away

from the opioid use that they've been trying to get away from. 7-OH needs to be off of the shelves. Thank you.

MR. MAKARY: Thank you, Melody.

Now, we're going to hear from Senator Markwayne Mullin from Oklahoma. And he has been a champion in Congress on addressing the opioid epidemic.

And so, Senator Mullin, great to have you here, and thanks for speaking.

MR. MULLIN: Thank you, sir. Appreciate it.

We all get involved in issues for purposes of either passion or personal experiences. And with the opioid crisis or the drug epidemic we've had throughout the country, it's affected almost all of us, either directly or indirectly.

For us, my wife and I, it's affected us directly. Unfortunately, we have family members that we love and we want to take care of. And if you've ever dealt with a family member that is struggling with drug use, and you're the caregiver of that individual, they go missing for days, and you're worried about your phone ringing. You're afraid to be away from your phone. The phone rings at two o'clock in the morning. You pick it up because you're afraid to hear what you're worried about 24/7, is they found him dead.

And typically, it's, hey, I got arrested. I got in a fight. I'm in trouble. Got stabbed. Can you come get me? And the list goes on. And I could give you horror stories of all the phone

calls that my wife and I received over the last 20 years.

And then when someone goes and they go to rehab and you get out -- and because, my Lord, we've been to every rehab center you can imagine. And I'm sure some of you guys have experienced the same thing. And they're clean, they're doing better, and they find out they can go to a gas station, or a vape shop, or a skate shop, or a bike shop, and they can find something that's legal for them to take that gives them the same high. And they can still pass drug tests, even though they're on probation.

But yet, it's a road to the same addiction. And you see the pattern. You see it in their face. You see it in their eyes. You see it in their words. You see it in their behavior. And you're going, "Oh, my gosh, here we go again."

And you go get them drug tested, and they pass, and you're going, what is going on? How can they pass this? "What are you doing?" "I'm not doing anything. I'm not doing anything illegal." But you can read it, because you've been with that loved one so long. You see it, and you're helpless. And once again, you know where the road is headed.

And then honestly, those of our family members that we've struggled with addiction, when they actually get put in prison, it's probably the first night you actually sleep well, because you know where they're at. You know you're not going to get that phone call. You don't like it, but you can breathe for the first time. And in our case, a person gets out after years in prison, and they

find it in a drugstore again. And these individuals that are selling it know what they're doing. They know the individuals they're targeting. They know the loophole and sell it as a dietary substance.

Well, they probably do lose weight, but not for the purposes that we would like them to. And now that the industry has grown from nothing to over a $9 billion industry, more than even opioids that are selling on the street, which is at $5 billion a day. Because they justify it. It's legal, but it's an addiction that's ruining lives. It's an addiction that's truly killing people, because it leads them down a road that sometimes they'll never recover from, and we've known this.

And for the first time, we have a Secretary who not only has a backbone to do something about it, but he does it because he has personal experience. He understands addiction better than probably any of us in this room. And it takes somebody like that who understands the danger that this causes to stand up and push against this. I say, illegal industry because they're using every loophole they possibly can.

And once again, selling it as an energy drink or a dietary -- but, yet the packages look like it came off the shelf of a cereal box or a candy bar, or one of their favorite Mountain Dew drinks. The list goes on. They know who they're targeting.

And so, Secretary Kennedy, thank you for standing up and actually doing something about this. Because this isn't anything

new. This has been around for years. But without your leadership, this would never happen. So from my family and every single family that has dealt with this, God bless you and thank you.

MR. KENNEDY: Thank you very much. Thank you for those kind words, Markwayne. Thank you to Jim O'Neill, to Tom Prevoznik, to Marty Makary, and to Wendy as well. Thank you for that, for sharing your story.

I spent 14 years as a heroin addict. And so I've been 43 years in recovery. And so I spent a lot of time talking about addiction and reading about it. And typically in most societies, you have about 10 percent of the population that suffers from addiction. But when there is availability, that can become a crisis. And you can have, for example, in Yemen, virtually 100 percent of the adult population is addicted to Khat because it's available on every corner.

And my addiction started because of -- let me say this, it was precipitated by availability. And in April of 1968, three years -- three months before my dad died, the French Connection, the biggest heroin bust in history -- heroin recovery, happened altogether. They got out of one automobile, 200 pounds of heroin -- pure heroin. And they ended up getting, I think, about 1,600 pounds over time.

That heroin was then stolen from the evidence locker room in the Manhattan DA's office, and it was distributed on the streets of New York. And for several years, there was $2 heroin, so it was

available in deuces. And there were people on every corner in Harlem, every corner in the Lower East Side, who were selling $2 heroin. And 72nd Street in Central Park, there were over 100 dealers selling it at that time.

And I had iron willpower in other parts of my life. I gave up candy for Lent when I was 13. I never ate candy again until I was in college. I gave up desserts for Lent the following year, and I never had another dessert until I was playing sports in college and trying to bulk up for sports. I felt I could do anything with my willpower. But this compulsion was absolutely impervious to my will. And part of the problem was just the availability. It was too easy to get this drug for me.

And if you look at the waves of addiction that Marty talked about throughout history, they're all precipitated by availability. Morphine was invented in 1803. And during the 1880s and 1890s, there was an addiction crisis in this country. One because of the availability of opium that was coming in through immigrant supply chains. And the other was there was a lot of Civil War Veterans who had become addicted, and it was widely available. Cocaine was available in medicinal drinks and in popular drinks like Coca-Cola.

And Congress, in response to that crisis, made heroin and cocaine illegal in 1914. And we had a break from it for many, many years. And then the drug culture began in the 1960s, where it was psychedelics, et cetera. But the real addiction crisis began after 1969 when that heroin became available. And you got a whole

generation that was hooked on that.

And then in 1970, Congress again acted to criminalize heroin possession. And we got a little bit of freedom until the 1880s -- I mean, 1980s, when there was the drug cartels in Mexico and elsewhere, developed supply lanes through the Bahamas and Mexico that the DEA was not ready for at that time.

There were huge surpluses of cocaine in our country. And the drug dealers figured out a way to market it very cheaply through a new form of cocaine called "Crack." And throughout the 80s and 90s, we had the crack crisis in our country because of the availability. And then in 2000, we had the oxycodone crisis, because suddenly, opiate pills were available partly because of the agency capture at the FDA that Marty is now dismantling. And with that, FDA's action abetted that crisis.

And so when we have that availability, it turns into a national crisis, and we're still losing 80,000 kids a year. Three years ago, we lost 106,000 kids to addiction. That's double the number of children that died, of American kids who died during the 20-year Vietnam War. It's two Vietnam Wars' worth of casualties a year from this crisis.

And as Markwayne said, "All of us are touched." President Trump is touched. His family also suffered from addiction. My family, I lost a brother to this disease. I lost a niece during COVID, a niece who I raised in my house, who was like a daughter to me. I lost another niece to injuries who's now a quadriplegic

because of this disease. All of our families are touched. Every American family.

The financial cost to our country is in the trillions. And what we're determined to do is to avert a fourth wave of addiction. I became an addict because it was so available. But I still had to go to Harlem. Or, I had to go to the South Bronx. Or, I had to go to the Lower East Side, and now you can go to any gas station.

And the people who are marketing these drugs, we looked -- we met with Pam Bondi yesterday talking about this issue and with these people from the DEA. And they showed us maps of the places where the vape shops and the smoke shops where this stuff is being sold. And they're around military reservations in our country. And the DEA has done measurements of urine in our troops, and they're skyrocketing.

The more it's directly correlated to the number of vape shops in their area. They're putting them around schools. They're putting them in our poorest neighborhoods. And now they're putting them in every gas station. And they're marketed for children. They're gummy bears. They're bright colors. They're candy-flavored. This is really a sinister, sinister industry.

As Marty pointed out, we've been -- our agency's been asleep at the wheel for all of these other crises. And now we're going to wake up, and we're going to stop this before it starts.

So I want to thank all of these ladies and gentlemen for their commitment to making sure that this does not happen again in

our country and averting the fourth wave of addiction. Thank you very much.

STEPHANIE: Thank you, Secretary Kennedy.

We're now going to take questions from the press. If you can, please keep your questions to the reason we're here today. And also give your first name, last name, and outlet. We have a microphone for you.

MR. LIM: David Lim with Politico. Thanks for taking my question. In 2018, former FDA Commissioner Scott Gottlieb said FDA scientists conducted an analysis suggesting that kratom compounds had opioid-like properties. And he said that there was, "No evidence to indicate kratom is safe or effective for any medical use."

I know the FDA's warning letters and actions today are concentrated on concentrated 7-OH products. But does the government today believe kratom itself is safe to consume? And then secondly, the DEA previously attempted to temporarily schedule 7-OH in 2016 before backing off after receiving public blowback. Is the Trump Administration prepared to finalize the scheduling process even if it receives similar concerns now?

DR. MAKARY: So first of all, we're not prepared to say anything is 100 percent safe, especially when it has psychoactive properties. But what we are saying is that our focus is on synthetic concentrated kratom. And you point out a good point. And that is that, if we talk about all 7-OH, then we're not

distinguishing to the public the risk stratification of the synthetic concentrated from the trace amounts of 7-OH that naturally appear in the kratom leaf and have for centuries and have been used in teas and other things.

So our scheduling recommendation will delineate trace amounts from synthetic concentrated amounts. Great question. Thank you.

MS. LAWRENCE: Hi, Lizzy Lawrence, reporter with STAT. I'm curious how many, if there are any, known cases there are of 7-OH being recorded as the sole cause of a fatal overdose?

DR. MAKARY: We have terrible statistics. Because if somebody comes in with a 7-OH overdose, I'm not even sure a doctor would know to ask about 7-OH. Very few doctors I've spoken with know what's in these vape stores or know what 7-OH is. I've had to explain it to the dozen or so doctors I've talked to.

So I think we're just starting to understand. It's very, very reminiscent of when we prescribed opioids to patients who didn't need them after minor surgical procedures. Or too many opioids for those who did need an opioid, and we would notice some people were coming back for refills at a very high rate. But we hadn't put the two together because we hadn't recognized the addictive nature.

So we need better statistics. There is a commitment from NIH to do some research to try to understand this. But this is not something where, after 50,000 Americans have died from it, we want

to start that process.

Thank you, Lizzy.

MS. OWERMOHLE: Hi, Sarah Owermohle, CNN. To David's question, what kind of regulation and guidance, or scientific evaluation could we see in the future about natural kratom?

DR. MAKARY: Look, I think there have been physicians who have had concerns about some claims around natural kratom. We have to prioritize what we work on. So we are going after the killer first, which is the synthetic concentrated kratom, and then we can look into that other question. But we think it's night and day in terms of the public health risk. Thank you.

MR. MCFARLANE: Hey, thank you. I'm Scott with CBS. You mentioned the doctors need to become more familiar with the danger here. And you've issued a letter, I think, today to doctors. But what, in fact, changes today? I'm sorry, are you issuing a new regulation? Are you going to do the scheduling? What actual change is HHS affecting today?

DR. MAKARY: Yes, so great question. Thank you for that. So a couple of things. One, we're issuing a report -- an FDA report on 7-OH, explaining it. We are putting that out there, and we'd love for you to let Americans know about that report so they can learn.

It has both a deep science component and a section for laypeople so they can understand the issue. We think every school board should be talking about this. We are number 2 issuing a

letter today to the DEA to recommend scheduling above a concentration threshold as a controlled substance. Number three, we are sending a Dear Doctor Letter to every physician in the United States, warning them about this. And we're going to continue to try to educate the public. So, a couple of very definitive actions today.

And of course, we announced a couple of weeks ago that we have let distributors to the retail stores know that we have serious safety concerns and specified those concerns.

MS. MANTO: Hi, Margaret Manto with NOTUS. You said that you're thinking about this in terms of concentration, where it's like trace amounts of 7-OH and kratom versus the much more concentrated product. Is this a framework that you think the FDA could use for other dietary supplements?

DR. MAKARY: I think it's a good idea. Thank you for suggesting it. We do something called an Eight-Factor Analysis. So our scientific team and the scientific team at the DEA independently try to evaluate is there a threshold? And they look at animal studies and a whole bunch of other criteria to look at dependence and addictive thresholds.

So we have a threshold that is calculated in two different mathematical ways to try to distinguish what we're talking about with concentrated kratom from the trace amounts that appear in the kratom leaf. Thank you.

MS. ASSAF: Thank you, Caitrin Assaf, Gray Media. I know

you said this process is just beginning. But of course, that takes time. So in the meantime, can you tell us how quickly can we see these products removed from shelves or at least made harder to obtain? And then what message do you want to give to Americans who are seeing this and saying, "Oh, I thought it was totally safe," and maybe still today can actually go and get it?

DR. MAKARY: So, effective immediately, the letters are out to the distributors. And we've actually gotten some positive feedback from some of those distributors. So we're sounding the alarm with the distributors of the synthetic concentrated kratom.

We also want to create a national conversation. Where parents talk to their children. Kids are sometimes using these substances, and the parents don't know. And sometimes the kids are using it, and they don't actually know what's in these substances. So this is a time, as with other new addictive substances that enter the United States, for us to have these conversations. And I hope school boards, places of worship, all talk about the illegal substances in these vape and smoke shops. Thank you.

MS. WHYTE: Hi, Liz Whyte with the Wall Street Journal. Also very present in smoke shops and vape shops are high-potency cannabis products and synthetic cannabis products, such as Delta 9, Delta 8, THCA, high THC products. And these have been linked in the medical literature already to psychosis. Is there a reason that this kind of well-established smoke shop problem is not something you're going after?

DR. MAKARY: So I personally, in my writings as a physician, in my statements, and also the Department of Health and Human Services, have expressed serious concerns about people using these cannabis products. We don't want kids to use them. Cannabis use disorder is a real thing. And as you appropriately mentioned, there are now studies linking it to psychosis and even cardiovascular problems. So that is an entirely separate public health campaign, and it's an important issue. Thank you.

STEPHANIE: Okay, last question right here.

MS. SEITZ: Thank you. Amanda Seitz with the Associated Press. I was wondering if you could say what class you're recommending that it be scheduled, and how quickly you're expecting the DEA to act.

DR. MAKARY: Class 1. It is an opioid by definition. It will be ultimately up to the DEA to decide. Thank you.

STEPHANIE: Thank you so much.

(End of press conference)

CERTIFICATE

I certify that the foregoing is a correct transcript from the electronic sound recording of the proceedings in the above-entitled matter.

/s/ Vivian Saxe 9/2/25

VIVIAN SAXE, CERT**D 631 DATE

11.6 Appendix 6: Dr. Martin A. Makary 7-OH Letter to Colleagues

July 29, 2025

Dear Colleague,

I am writing to warn you about an opioid that few physicians may be aware of. It's called 7-hydroxymitragynine (7-OH).

7-OH is found in trace amounts in the kratom plant leaf. But this is not our focus. Our primary concern is the concentrated form of 7-OH. This is an important distinction. These concentrated 7-OH opioid products are far more dangerous than traditional kratom leaf products.

Concentrated 7-OH products have exploded in popularity in recent years, with vape shops, gas stations and corner stores selling pills, gummies, candies, and even eye-catching products like ice cream cones containing 7-OH. You may also see 7-OH referred to as 7-OHMG, 7-Hydroxy, 7-HMG, or 7. Additionally, some kratom leaf products marketed as "spiked" or "enhanced" may contain 7-OH at a level 500% higher than would be naturally expected in kratom leaf.

Notably, one study in the Journal of Medicinal Chemistry found 7-OH to be 13 times more potent than morphine. Aside from addiction, 7-OH side effects include withdrawal symptoms, insomnia and anxiety, seizures, and fatal respiratory depression. The FDA is seeing increases in adverse events and related reports to poison control and is concerned about the growth of 7-OH product sales nationwide. We have already issued warning letters to several firms for illegally distributing 7-OH products and are working alongside our partners at the DEA to move forward with adding certain 7-OH products to the controlled substances schedules.

Like many physicians, I find it painful to recall the many opioid prescriptions I wrote in the early 2000s for routine procedures, unaware of the high potential for abuse. Our recognition of the abuse potential and our delayed response as a medical community resulted in a national health crisis. Let's not get caught flat footed again. In addition to the FDA's ongoing regulatory activities and education efforts, I appreciate your vigilance on this issue.

For more information, please refer to our new report and educational resources, which can be found at www.fda.gov/7-OH.

Sincerely,

Martin A. Makary, M.D., M.P.H
Commissioner of Food and Drugs

U.S. Food & Drug Administration
10903 New Hampshire Avenue
Silver Spring, MD 20903
www.fda.gov

COMMUNITY OVERDOSE ACTION TEAM
ENDING OVERDOSES TOGETHER

(1.28.2026) **Regarding proposed ORC Section 4729:9-1-01.2 – Mitragynine, that classifies mitragynine, the primary psychoactive alkaloid found in the *Mitragyna speciosa* plant, commonly known as kratom, as a Schedule 1 Controlled Substance,**

On behalf of Public Health - Dayton & Montgomery County's Community Overdose Action Team (COAT), a community coalition comprised of public health partners, treatment providers, harm-reduction organizations, recovery support services, healthcare professionals, first responders, and community stakeholders, we submit this comment in **strong support of the proposed rule to classify mitragynine as a Schedule 1 controlled substance**.

Our coalition's work is guided by the goal of preventing overdose deaths and improving long-term recovery outcomes through a coordinated continuum of prevention, harm reduction, evidence-based treatment, and recovery supports. We write to emphasize that widespread over the counter (OTC) availability of kratom products containing mitragynine undermines community overdose-reduction progress and creates avoidable safety risks.

1. Community Overdose Reduction Depends on Rapid Linkage to Evidence-Based, Supervised Care

Our community has achieved meaningful progress in reducing opioid-related harms by building and sustaining an integrated system of care. Overdose deaths have declined 73% since their peak in 2017.[1] Our ability to reduce overdoses relies on reducing stigma associated with seeking help, identifying opioid use disorder (OUD) early, and connecting people to evidence based, medically supervised treatment pathways and established recovery networks. This includes low-barrier access to evidence-based treatment, including FDA-approved medications for opioid use disorder (MOUD), and robust wraparound supports (peer navigation, harm reduction services, mental health supports, social services linkage, and recovery services).

2. OTC Availability Sends a Misleading Safety Signal, Promotes New Initiation, and Undermines Engagement in Evidence-Based OUD Care

OTC availability of mitraginine creates a misleading perception of safety, suggesting standardization, quality control, and minimal risk. This framing encourages initiation among individuals who would not otherwise use addictive substances, including those seeking "natural" alternatives to self-manage chronic symptoms or opioid withdrawal—the result of a well-documented "naturalness bias."[2]

This perception of safety and effectiveness is particularly harmful when individuals begin using mitragynine to manage withdrawal based on informal advice, marketing claims, or online information rather than engaging with clinicians, evidence-based treatments, and established,

[1] (COAT Data Unit)
[2] (Meier, Dillard, & Lappas, 2026)

comprehensive community supports that improve safety and long-term outcomes, including supervised stabilization, medical oversight, behavioral health care, peer services, infectious disease screening, and harm-reduction education.

Mitragynine's addictive potential can lead to physiologic dependence, creating a cycle in which individuals substitute one dependence for another while believing they have chosen a safer option. This dynamic contributes to delayed diagnosis, delayed initiation of MOUD, fragmented care, and heightened vulnerability to relapse and overdose. In effect, mitragynine undermines our community's efforts to reduce opioid-related harm.

3. Morbidity and Mortality Signals: Detection in Toxicology, Including Postmortem Reports
The prevalence of various substances in the drug supply changes over time. COAT collects extensive data on overdose deaths every year, including which drugs were present in each overdose death. COAT data comes from multiple sources, including Public Health – Dayton & Montgomery County, Dayton Police Department, ADAMHS, the Montgomery County Coroner' Office, the Montgomery County Probation Office, the Montgomery County Sheriff's Office, Project Dawn, and Wright State University.

According to COAT's data, mitragynine has been identified in our local toxicology findings, including in autopsy reports, both as a single substance and in combination with other substances.[3] While polysubstance exposure is common in overdose deaths, the detection of mitragynine underscores that it is not a benign OTC product and that its presence can be associated with serious outcomes—as a single agent and particularly when combined with other sedating or psychoactive agents.

Conclusion
Schedule I placement is necessary to reduce broad commercial availability, curb initiation among individuals misled by OTC status, and prevent continued diversion away from established, evidence-based community treatment pathways. Our community has invested substantial resources in an accountable system that reduces opioid overdose deaths. Allowing a dependence-forming substance to remain widely available OTC undermines those gains and places community members at increased risk.

The Community Overdose Action Team respectfully urges the Board of Pharmacy to finalize the proposed rule and place mitragynine in Schedule I. Doing so will protect communities by reducing exposure to an addictive substance currently marketed and perceived as benign, prevent unsafe self-treatment of opioid withdrawal, and promote connection to safe, effective, evidence-based OUD treatment and the robust harm reduction and recovery infrastructure our community has developed.

[3] (COAT Data Unit)

Respectfully submitted,

The Community Overdose Action Team

About the Community Overdose Action Team:
The Community Overdose Action Team seeks to reduce the number of people dying from drug overdoses and drug abuse. The Community Overdose Action Team was established in the fall of 2016 to address the opioid/heroin epidemic in Montgomery County. Montgomery County Alcohol, Drug Addiction & Mental Health Services, Public Health – Dayton & Montgomery County, and Montgomery County Administration are the lead agencies in the effort to combat the epidemic. COAT has over 200 members representing all sectors within our community including government, healthcare, faith-based, civic/volunteer organizations, law enforcement, fire/EMS, youth-serving organizations, schools, media, substance abuse organizations, concerned citizens, those in recovery, and families/friends of those in recovery. The COAT Project Manager is Dawn Schwartz, (937) 225-6026.

To: Ohio Board of Pharmacy

From: Holistic Alternative Recovery Trust

Re: 4729:9-1-01.2 - Mitragynine Rule Comments

Date: January 27, 2026

On behalf of Holistic Alternative Recovery Trust (HART), I am writing to urge the Ohio Board of Pharmacy to reject the "Proposed Classification of Mitragynine as a Schedule I Controlled Substance."

We at HART are tremendously concerned about proposals to ban kratom and its natural alkaloids, including mitragynine and 7-hydroxymitragynine. The basis for doing so is fundamentally flawed, resulting from widespread alarmism with no grounding in science or fact.

HART supports sensible regulation for all natural therapeutics derived from *mitragyna speciosa* or "kratom," including mitragynine and 7-hydroxymitragynine (7-OH). This work will take time. Furthermore, it must necessarily disregard political exigencies, allowing for rigorous, methodical public health research and feedback from stakeholders including the scientific community, medical experts, and public and consumer perspectives. And, it should endeavor to balance the ideals of protecting children and the public while also protecting access for the hundreds of thousands of Ohio consumers who rely on kratom and its alkaloids to manage pain and overcome addiction.

HART supports immediate steps to ensure child safety, with subsequent, thoughtful conversations about adult regulations following a transparent and due process.

Immediate first steps for Kratom in 2026 should include:

- Limiting sale of all Kratom products, including 7-OH, to 21+ locations;
- Requiring child-safe packaging; and
- Prohibiting packaging that appeals to children.

An immediate ban, by contrast, would cause immeasurable harm.

There exists a clear, pharmacologically grounded classification of kratom products into four categories:

1) Whole-leaf kratom products (powder, capsules etc.);
2) Full-spectrum kratom extract products;
3) Kratom alkaloid products, including isolates such as mitragynine or 7-OH; and
4) Blended kratom products that combine kratom with other psychoactive or bioactive ingredients such as kava (ex: Feel Free drinks).

No category is inherently risk-free. Physical dependence, withdrawal symptoms, and adverse effects can occur across all categories, particularly with high doses, frequent use, or riskier routes

of administration such as drinks. Importantly, however, no categories are associated with death when consumed in isolation.

Yet, a Schedule 1 ban on mitragynine and 7-hydroxymitragynine *would* lead to the kind of harm (and even deaths) that the Board wants to prevent, criminalizing otherwise law-abiding citizens and hurting those in recovery who need empathy and help. Hundreds of thousands of Ohioans currently use kratom to manage pain or reduce dependence on far more dangerous opioids. Those consumers are not – and should not be considered – criminals.

History shows that when lower-risk, regulated alternatives are eliminated, demand does not disappear; it shifts to illicit markets dominated by fentanyl. That displacement predictably increases overdose risk, emergency room visits, and long-term addiction, while also driving job loss, disability, and higher public assistance costs.

For example, there are no documented deaths attributed to 7-OH alone, yet banning it has pushed many consumers back toward substances that are responsible for tens of thousands of deaths each year. Following the emergency ban in Florida, overdose spikes tripled in the central part of the state, a tragic but predictable result that is likely to be repeated if Ohio continues its politicized policy of banning comparatively innocuous substances like kratom and 7-OH.

The result of a kratom ban would not be improved public safety, but higher mortality, greater strain on emergency services, and avoidable human suffering borne by Ohio families and taxpayers. Per the requirements of Ohio's Common Sense Initiative, the Board notes that success of a mitragynine ban will be measured, in part, by "a reduction in adverse events associated with these products." Such a reduction may or may not occur, but adverse events associated with "street drugs" and associated narcotics will surely increase.

The eight-factor analysis provided by the Board fails to substantively or meaningfully address these risks, repeatedly and summarily dismissing the nuances of this complex issue based on anecdotal first-person accounts and sensationalized news reports. Repeated references to the supposed failure of Utah's regulatory scheme relies not on data, but on uninformed commentary from a single emergency physician who conveys apparent patient confusion about kratom's pharmacology (notably, a problem easily remedied by implementing simple labeling requirements). Where adverse event reports are referenced, the Board readily admits that overdoses largely resulted from polysubstance use.

Assertions that kratom products produce a "cocaine-like" effect in smaller doses and a "morphine-like" effect in larger amounts is ludicrous in the extreme, completely disregarding the lived experience of 15 million Americans who have consumed these products. It simply isn't true.

7-OH, like mitragynine, has been the subject in recent months of a vast and pervasive propaganda effort, with critics misguidedly decrying it as the "next opioid epidemic." The facts tell a different story.

Since 2023, over one million Americans have consumed over 1.5 billion servings of 7-OH. Yet, the FDA's public database shows only 67 adverse event reports linked to 7-OH – hundreds fewer than soap. That's 67 adverse events – many of which involve side effects as minor as nausea and dizziness – out of 1.5 billion servings consumed. While eight deaths are reported, a

detailed analysis reveals that two were suicides, nearly all involved concurrent use with other substances and, in two instances, occurred before 7-OH products were even available on the market.

7-OH's low mortality is explained by its pharmacology. 7-OH is a G protein-based partial agonist at the mu-opioid receptor. Although 7-OH binds with high affinity, it only partially activates the receptor – exhibiting low intrinsic efficacy similar to buprenorphine (Kruegel, 2016; Obeng, 2021; Todd, 2020; Varadi, 2016; & WHO, 2021). Claims that 7-OH is more potent than morphine conflate high potency with intrinsic efficacy. While 7-OH demonstrates higher potency in some assays, its partial agonism results in a ceiling effect on opioid-like outcomes and significantly reduces β-arrestin-2 recruitment – a signaling pathway associated with respiratory depression and other adverse effects of conventional opioids (Samways, 2024; Todd, 2020).

Accordingly, leading researchers from Johns Hopkins, Harvard and UCLA stress that 7-OH should not be considered a public health crisis and that available data show no evidence of overdose deaths, respiratory depression, or widespread dependence. No oral lethal dose (LD50) has been found in mice, in contrast to the known lethality of opioids – and even substances like Tylenol.

HART urges the Ohio Board of Pharmacy to reject prohibition and instead embrace a responsible regulatory framework for mitragynine and 7-OH, including: dosage limits, age restrictions for purchase, age-gating in stores, required compliance with Current Good Manufacturing Practices, third-party testing, labeling requirements, and truth in marketing.

Such requirements would constitute an evidence-driven path forward, focused on health – not fear, politics or profit.

Sincerely,

Jeff Smith, PhD

National Policy Director

Holistic Alternative Recovery Trust

Organizational Public Comment

Submitted by: HAVEN Access Inc.

This comment applies to both proposed rules titled “CSI – BIA – Mitragynine” and “CSI – BIA – Mitragynine-Related Compounds.”

HAVEN Access Inc. formally opposes the proposed placement of mitragynine and mitragynine-related compounds into Schedule I.

HAVEN Access is a public-interest advocacy organization focused on protecting lawful access and ensuring evidence-based, procedurally sound drug policy. The parallel pursuit of two overlapping Schedule I proposals, released simultaneously with identical comment deadlines, creates fragmented public participation and prevents meaningful evaluation of cumulative impact.

Schedule I placement requires findings that a substance has a high potential for abuse, no accepted medical utility, and a lack of accepted safety even under medical supervision. The proposed rules do not demonstrate these findings using real-world, population-level evidence. Instead, they rely on speculative, indirect, or incomplete reasoning while disregarding the lived experiences of individuals who utilize kratom-derived products and the consequences of abruptly eliminating lawful access.

The mitragynine-related compounds proposal functions as a broad catch-all that effectively sweeps naturally occurring alkaloids and future derivatives into Schedule I without individualized analysis. Combined with the separate mitragynine proposal, this approach raises serious concerns regarding overbreadth, duplication, and the absence of a coherent, consolidated review.

We respectfully request that the Ohio Board of Pharmacy:

1. Hold a single public hearing that covers both proposed rules together

2. Allow testimony from affected individuals, clinicians, researchers, and other stakeholders relying on real-world evidence

3. Evaluate whether the rules should be denied or withdrawn, or at minimum consolidated and subjected to an extended comment period

Eliminating lawful access through permanent Schedule I placement would cause immediate and foreseeable harm, including driving individuals toward illicit markets or less safe alternatives, while failing to meet the statutory standards required for such classification.

HAVEN Access urges the Board to deny or withdraw these proposals and to pursue a transparent, evidence-driven process that meaningfully considers real-world impacts and procedural fairness.

WellLink™ | Northeast Ohio Opioid Consortium

January 28, 2026

Ohio Board of Pharmacy
77 South High Street
Columbus, OH 43215

RE: Support for Classification of Kratom and Synthetic Kratom Compounds as Schedule I Controlled Substances & Support for Research on Safety and Therapeutic Use

Dear Members of the Ohio Board of Pharmacy:

On behalf of the Northeast Ohio Opioid Consortium, we write to express our support for the classification of kratom and any synthetic kratom compounds, including mitragynine-related substances, as Schedule I controlled substances under Ohio law. We also urge the Board to support and enable rigorous scientific research and clinical trials to determine whether kratom or its derivatives may have safe and effective medical uses under controlled conditions.

Kratom (derived from the plant *Mitragyna speciosa*) and its primary alkaloids, including mitragynine and 7-hydroxymitragynine (7-OH), have come under increasing scrutiny due to their opioid-like effects and association with adverse outcomes. Although kratom has been marketed and used by some for purported benefits such as pain relief or managing withdrawal symptoms, there is currently no drug product containing kratom or its compounds that has received approval from the U.S. Food and Drug Administration for any medical indication. Moreover, adverse health events, including seizures, psychosis, and deaths, have been reported in association with kratom use, particularly with concentrated or synthetic derivatives.

Given these concerns, the Ohio Board of Pharmacy recently issued an emergency scheduling rule under Ohio Administrative Code Rule 4729:9-1-01.1, which classifies mitragynine-related compounds, including synthetic alkaloids like 7-OH and mitragynine pseudoindoxyl, as Schedule I controlled substances. This action reflects a precautionary approach in light of the absence of accepted medical use and the public health risks posed by these substances.

The Northeast Ohio Opioid Consortium, dedicated to reducing opioid misuse, overdose, and related harms across Northeast Ohio, supports this scheduling because it aligns with our mission to protect residents from substances that pose significant risk yet lack demonstrated medical utility. Controlling kratom and its potent derivatives as Schedule I will help prevent unregulated access and reduce the risk of misuse, dependency, and overdose among Ohioans.

At the same time, we recognize that some individuals and clinicians advocate for further exploration of kratom's potential therapeutic effects. We encourage the Board and policymakers to work with academic institutions, research bodies, and regulatory agencies to establish appropriate pathways that enable ethical, scientifically sound research, including necessary approvals from state and federal controlled substances authorities.

1226 Huron Road E, Cleveland, OH 44115
216.696.6900
WellLinkHealthAlliance.com

In closing, the Northeast Ohio Opioid Consortium:

1. Supports the classification of kratom and all synthetic kratom-related compounds as Schedule I controlled substances in Ohio to protect public health; and
2. Supports the advancement of controlled research and clinical trials to evaluate safety and efficacy in defined therapeutic contexts.

Thank you for your consideration of these important public health issues. We stand ready to assist the Board in its efforts to promote health and safety for all Ohioans. If you require additional information, please contact Jodi Mitchell, jodi.mitchell@mywelllink.com.

Respectfully,

Northeast Ohio Opioid Consortium Advisory Committee
Jennifer Johns, The Academy of Medicine of Cleveland & Northern Ohio (AMCNO)
Dr. Jeanne Lackamp, University Hospitals
Thom Olmstead, Sisters of Charity Health System
Dr. Joan Papp, The MetroHealth System
Dr. Ted Parran, Rosary Hall, St. Vincent Charity Community Health Center
Dr. David Streem, Cleveland Clinic
Daniel Lettenberger-Klein, WellLink Health Alliance

NAMI Ohio
National Alliance on Mental Illness The State's Voice on Mental Illness
1225 Dublin Road, Suite 210, Columbus, OH 43215

January 21, 2026

Re: Support to rule changes

OAC 4729:9-1-01.2 – This proposed rule classifies the primary compound in kratom as a Schedule I controlled substance. This covers all kratom products including natural plant material (including "natural leaf products" as well as synthesized extracts.)

Members of the Board of Pharmacy:

Thank you for the opportunity to provide opponent written remarks in support of the rule to classify kratom as a Schedule I controlled substance.

My name is Luke Russell, Executive Director of NAMI Ohio. We are proud to be part of the largest mental health advocacy organization in the country. We represent over 500,000 Ohio citizens and their families in Ohio whose lives have been invaded by mental illness. NAMI Ohio has thirty-nine affiliates throughout Ohio, serving all 88 counties. These Affiliates offer over 4000 education, support, and advocacy programs every year in Ohio (for free) to over 44,0000 individuals. Every day, somewhere in Ohio, NAMI is offering a support group, education program, or advocating for an individual and family in need. Each of you have constituents with mental illness and their families are desperately seeking your support.
Those living with mental illness and their families rely on Ohio's mental health system to provide the care they so desperately need. NAMI Ohio applauds recent efforts to improve our behavioral care health system. This includes the recent work with children and families, work across our communities on prevention and crisis services, expanding access to mental health telehealth care, and the statewide work on improving substance use disorder access and care. More Ohioans are now getting the mental health services and help they need. Key to true wellness and recovery is access to affordable medications.

While Kratom isn't considered a controlled substance to most states nor the federal government, the use of kratom is not recommended by the FDA and the DEA has it listed as a drug of concern. Researchers who have studied kratom think its side effects and safety problems more than offset any potential benefits. Poison control centers in the United States received 1,800 reports involving the use of kratom from 2011 through 2017, including reports of death. Half of these exposures resulted in serious negative outcomes such as seizures and high blood pressure. Five of the seven infants who were reported to have been exposed to kratom went through withdrawal.

Nationally it is estimated that 10.9 million users of drugs other than alcohol reported they were using these substances "a little more or much more" than they did before the COVID-19 pandemic began. At a time when Ohio families are grappling with unprecedented addiction compounded by the stress of a global pandemic, we consider the commercialization of an addictive drug with such scientifically proven public health harms to be unacceptable.

NAMI Ohio wants to express the negative risks to a person's mental and physical health that have been documented and include nausea, seizures, hallucinations, and other psychotic symptoms. Some users have reported becoming addicted to Kratom. At this time, there are no specific medical treatments or behavioral therapies for kratom addiction. Scientists need more research to determine effective treatment options.

Thank you again for allowing me to provide written testimony.

OARP
Ohio Alliance Of Recovery Providers

January 26, 2026

Executive Director Steven W. Schierholt, Esq.
Ohio Board of Pharmacy
77 S. High Street, 17th Floor
Columbus, Ohio 43215-6126

RE: OAC 4729:9-1-01.1 Mitragynine-related compounds
OAC 4729:9-1-01.2 Mitragynine (NEW)

Dear Executive Director Schierholt and members of the Ohio Board of Pharmacy,

On behalf of the Ohio Alliance of Recovery Providers (OARP), a statewide organization of addiction treatment providers, certified by the Ohio Department of Behavioral Health, we write in strong support of the proposed changes to Ohio Administrative Code rule 4729:9-1-01.1 and what would be the newly created 4729:9-1-01.2 rule to classify all forms of kratom as Schedule I drugs. As you are well aware, drugs, substances, and chemicals that fall under the Schedule I category have no currently accepted medical use and a high potential for abuse. We wholeheartedly agree with that assessment, and we believe it will be in the best interest of all Ohioans.

OARP members are dedicated to the prevention and treatment of substance use disorders, and we work daily with individuals and families affected by addiction. In recent years, we have observed increasing use of kratom among patients with substance use disorders, often under the mistaken belief that it is a safe or therapeutic alternative to opioids. In our experience, kratom use has been associated with dependence, withdrawal symptoms, relapse risk, and delayed engagement in evidence-based treatment.

Kratom's active compounds exert opioid-like effects, yet the substance remains unregulated, unstandardized, and not approved by the U.S. Food and Drug Administration for any medical use or even as a dietary supplement. Variability in potency, contamination concerns, and the lack of reliable dosing information present serious risks to public health. From a treatment perspective, these factors complicate recovery and undermine our harm-reduction and prevention efforts.

We are particularly concerned about the accessibility of kratom to vulnerable populations, including individuals in recovery and young people, who may perceive it as a benign or "natural" product. Scheduling kratom as a Schedule I substance would reduce availability and send an important public health message about the risks it poses.

We commend Governor DeWine and the Board of Pharmacy for your careful review of the scientific, clinical, and public safety considerations related to kratom. We believe the proposed rules are a necessary and responsible step to protect patients, support recovery, and prevent further harm in our communities.

Sincerely,

Brian Bailys
President, Ohio Alliance of Recovery Providers
CEO, Thrive Peer Recovery Services

To the Ohio Board of Pharmacy,

I submit this comment as an Ohio business owner directly affected by the proposed rule to classify mitragynine as a Schedule I controlled substance.

My husband and I operate two Ohio retail locations that sell only kratom products consisting solely of plain leaf powder or, under the emergency rule OAC 4729:9-1-01.1, kratom in its vegetative state. One location has operated continuously for nine years as of December 2025, and the second has operated since October 2021. Our Columbus location employs three individuals, and our Cleveland location employs two, in addition to ourselves. We maintain two commercial leases, one in the City of Columbus and one in the City of Cleveland.

Over many years of lawful operation, our businesses have generated ongoing revenue for the State of Ohio. From 2019 through 2025, our Columbus location alone generated $260,273.46 in Ohio sales tax revenue. From 2021 through 2025, our Cleveland location generated an additional $52,298.12 in Ohio sales tax revenue. These figures do not include payroll taxes associated with our employees, commercial lease payments to Ohio property owners, or local spending with Ohio-based vendors and service providers.

The Board's CSI identifies approximately twelve kratom-focused retail locations statewide, two of which we operate. However, the Board has also acknowledged that kratom is sold in a much broader range of establishments, including approximately 130 smoke shops in the City of Cleveland alone. This discrepancy demonstrates that the true economic impact of the proposed rule extends well beyond kratom-only businesses and is substantially larger than reflected in the Business Impact Analysis.

In 2019, the Board previously proposed scheduling kratom as a Schedule I controlled substance, framing it as a public health risk with no accepted medical use. At that time, media statements by state officials emphasized theoretical dangers rather than real-world data. Nearly six years later, the data now provided by the Board, as well as the experience of lawful retailers, does not reflect the public safety crisis that was predicted.

Additionally, in the 2019 Rule Summary and Fiscal Analysis, the Board concluded that such scheduling would have no impact on revenues or expenditures, would impose no costs of compliance, would not adversely impact businesses, and would not impose criminal or civil penalties. Those conclusions have proven incorrect. The current proposal to schedule mitragynine would result in immediate criminalization, loss of lawful inventory, termination of commercial leases, elimination of Ohio jobs, and loss of Ohio sales tax revenue. The Board's historical and current analyses therefore demonstrate a pattern of substantially underestimating the real-world economic and legal consequences of scheduling actions.

Across nearly a decade of continuous operation, we have never experienced a kratom-related police incident, disturbance, or violent event at either location. There have been no thefts or attempted thefts of our kratom products, despite highly visible exterior signage. This absence of criminal activity is inconsistent with substances typically associated with high abuse potential. Our daily interactions with customers over many years do not reflect behavioral patterns associated

with Schedule I substances, such as acute intoxication, aggression, loss of consciousness, or compulsive dose escalation at the point of sale.

In nine years of operation, there has been only one medical incident in which kratom was referenced. The Licking County Coroner attributed the death to acute combined drug effects, not mitragynine alone. Toxicology identified multiple substances, including toxic levels of gabapentin, along with diphenhydramine, diazepam, nordiazepam, and mitragynine, several of which are central nervous system depressants known to increase overdose risk when combined. We became aware of this incident after it was reported to the FDA. In August 2024, an FDA agent visited our location unannounced, requested documentation, and was provided all requested information related to the product involved and our company's operations. The FDA did not pursue enforcement or further action. We cooperated fully, and no violations were identified. This record does not support a conclusion that mitragynine lacks safety "even under medical supervision," nor does it demonstrate a risk profile consistent with Schedule I classification.

Ohio continues to regulate, rather than prohibit, substances with documented overdose mortality and abuse potential, including alcohol and certain prescription medications. The proposed rule does not explain why mitragynine warrants a more severe classification than substances with demonstrably higher public-health burdens.

As of December 12, the Board implemented emergency scheduling that already restricts kratom-related products beyond plain leaf in its vegetative state. The proposed permanent Schedule I classification of mitragynine appears largely redundant in effect, while imposing significantly greater criminal, economic, and regulatory consequences. The Board has not explained why existing emergency measures are insufficient or why escalation to Schedule I classification is necessary. This lack of justification raises concerns regarding proportionality and reasoned decision-making.

The Board's own language, public statements, and media coverage frequently fail to distinguish between natural kratom leaf products and high-potency 7-hydroxymitragynine products, which have significantly different potency and risk profiles. Regulatory concern appears to be focused on concentrated or synthetic derivatives, yet this rule targets mitragynine broadly, which would criminalize traditional kratom leaf products. Treating risks associated with semi-synthetic or highly concentrated derivatives as representative of all kratom products has increased confusion in both the public record and media coverage. Current evidence shows that the risks associated with highly concentrated or altered compounds are not the same as risks associated with kratom in its natural vegetative state. The proposed rule does not address this distinction.

The rule also does not explain why less restrictive regulatory options were rejected, including age restrictions, product testing and labeling standards, alkaloid content limits, licensing requirements, or consumer protection frameworks adopted in other states. Jumping directly to Schedule I classification without addressing these alternatives reflects a failure to consider proportional regulation. House Bill 587or Senate Bill 299, would formalize the Board's emergency rule while allowing natural kratom products to be regulated within the state.

It is also important to recognize that kratom and its alkaloids are currently the subject of active legal and regulatory disputes. Recent litigation seeking injunctive relief demonstrates that the proper

regulatory treatment of kratom remains a contested issue, not a settled scientific or legal conclusion. Courts are being asked to examine whether current regulatory interpretations and enforcement approaches are legally and scientifically supportable. Proceeding with permanent Schedule I classification while these matters are under judicial review risks placing Ohio in a position of regulatory overreach based on disputed interpretations of the evidence. Schedule I is the most restrictive classification available and is intended for substances with both a high potential for abuse and no accepted medical use. At minimum, this level of legal and scientific uncertainty weighs strongly against a finding that the Schedule I criteria have been clearly and definitively met.

Public statements by Ohio officials in 2019 framed kratom as an urgent public health threat warranting prohibition. Nearly six years later, the predicted crisis has not materialized in our experience as lawful retailers. Instead, the real-world record shows stable retail operations, an absence of criminal activity, and extremely rare adverse events involving polysubstance exposure rather than mitragynine alone. The proposed rule does not meaningfully reconcile this real-world experience with its conclusions.

Classifying mitragynine as Schedule I would also restrict research access and discourage scientific study, making it more difficult to generate safety and efficacy data. This creates a circular outcome in which the absence of research is then used to justify continued prohibition.

For the reasons stated above, I respectfully request that the Ohio Board of Pharmacy withdraw the proposed rule and allow the elected representatives of this state to pursue evidence-based, proportionate regulatory alternatives that have already been introduced, rather than Schedule I classification.

Respectfully submitted,
Natalie and Christian DeVere

Re: Proposed Classification of Mitragynine as a Schedule I Controlled Substance

To the Ohio Common Sense Initiative,

My name is Wendy Chamberlain, founder of Kratom Danger Awareness, Inc., and mother of Joseph S. Lumbrazo, who died on August 30, 2020, from mitragynine toxicity. I submit this comment in strong support of scheduling mitragynine as a Schedule I controlled substance.

My son's autopsy listed mitragynine toxicity as the sole cause of death. Like many, he used kratom simply for energy. He never imagined it could kill him—because the public messaging around kratom is dangerously misleading. I learned only after his death that mitragynine is an opioid-like alkaloid with respiratory-depressant properties, capable of causing fatal overdose.

Today, I hear from families across the country facing the same tragedy. They all say the same thing: "We had no idea it could kill."

■■ KEY DATA POINTS THAT SUPPORT SCHEDULING

1. CDC Data Shows Over 1,800+ Kratom-Involved Deaths

According to the CDC's SUDORS and NVDRS datasets (2016–2022):

• Over 1,800 kratom-involved deaths have been documented.

• In hundreds of cases, mitragynine was listed as the primary cause of death or the only substance detected at toxic levels.

2. The FDA Has Already Declared Mitragynine a Dangerous, Unapproved Drug

The FDA has:

• Issued import alerts against kratom (Import Alert 54-15)

• Sent warnings on adulteration, contamination, and mislabeled potency

• Conducted two dose-finding animal studies showing respiratory depression and death at high mitragynine doses

3. Medical Examiners Across the U.S. Have Identified Primary-Cause Mitragynine Fatalities

States with confirmed primary cause mitragynine deaths include: Ohio, Florida, Pennsylvania, North Carolina, Colorado, New York, Texas, Washington, Illinois, Massachusetts.

4. Kratom Sold Today is NOT “Natural Leaf”

Ohio residents are consuming: highly processed extracts, vapes, gummies, 7-OH–enhanced products, and synthetic derivatives (pseudoindoxyl, MGM-15, MGM-16) — none with dosage limits, purity testing, safety standards, or accurate labels.

5. States Attempting Regulation (KCPA) Continue to Report Harm

Utah has ongoing hospitalizations and investigations despite regulation. Connecticut banned kratom in 2025 due to ER spikes, youth access, and high-potency concentrates.

■■ THE PUBLIC IS NOT INFORMED ABOUT THE RISKS

Consumers are told “it’s just a plant.” Most families do not know to test for mitragynine, 7-hydroxymitragynine, or novel analogs, leading to missed diagnoses and preventable deaths.

■■ WHY SCHEDULE I IS NECESSARY

Ohio faces unregulated access, youth access, gas-station sales, high-potency extracts, and synthetic analogs. Scheduling will remove dangerous products, prevent youth access, stop deceptive marketing, allow controlled research-only use, and protect families.

■ FINAL STATEMENT

I will never get Joseph back, but I can fight so other families do not feel this pain. Please move forward with full Schedule I classification of mitragynine in Ohio.

Respectfully,

Wendy Chamberlain

Founder & Chair

Kratom Danger Awareness, Inc.

www.KratomDangerAwareness.org

OHIO PROSECUTING ATTORNEYS ASSOCIATION

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Louis Tobin, *Executive Director*

January 23, 2026

Ms. Summer Reyburn
Policy and Public Affairs Liaison
Ohio Board of Pharmacy
77 South High Street, 17th Floor
Columbus, OH 43215-6126

RE: Support for Proposed OAC Rules 4729:9-1-01.1 and 4729:9-1-01.2

Ms. Reyburn –

I write on behalf of Ohio's prosecuting attorneys to express our support for the recently proposed rules classifying kratom-related compounds and the primary compound in kratom as Schedule I controlled substances thereby banning the sale and possession of these substances in Ohio.

As you and the Board of Pharmacy are well aware, kratom products have a high potential for abuse. These products can, however, be viewed by consumers as a safe way to self-medicate for things like pain, anxiety or stress, a safe alternative to other drugs of abuse, or a safe way to manage something like opioid use disorder. This is due to the products' legal status, marketing, and wide availability. This causes our Association concern for several reasons.

Dangerous for Ohio Children and Youth

Kratom products are unregulated, psychoactive products that are often marketed deceptively, even sometimes sold in forms that are attractive to children. Kratom is sold in gas stations, convenience stores, vape shops, and on the internet. While these unregulated products are dangerous for any consumer, they create dangers that are particularly acute for Ohio children. Children may be more susceptible to this style of marketing and at greater risk of eventual harm from use of the product. Children who cannot purchase these products on their own may be more likely to mistake them for candy or some other harmless snack and to become the victim of accidental ingestion. And as with other controlled substances children may be more likely to become addicted or to suffer other lifelong consequences from the use of these products.

According to the website HealthyChildren.org, an online resource of the American Academy of Pediatrics, kratom "can cause liver damage, hallucinations and convulsions or seizures." "At higher doses, kratom reduces anxiety and causes sleepiness, the way strong pain drugs like opioids (heroin or fentanyl) do" and in fact "can cause people to stop breathing at high doses."[1]

Banning these products will reduce early exposure to these risks and early exposure to addictive substances that could have lifelong consequences for youth.

Substance Use Disorder

According to FDA Commissioner Dr. Marty Makary, 7-OH, a synthetic byproduct of kratom, binds strongly to the body's opioid receptors and is up to 13 times more potent than morphine and has compared emerging problems to previous waves of the opioid crisis.[2] It produces respiratory depression, physical dependence, and withdrawal symptoms similar to opioids like morphine and fentanyl. Exacerbating this is the fact that kratom is reportedly marketed as a way to mitigate opioid withdrawal symptoms and stop opioid use, placing the very people it claims to help at greater risk of addiction and its consequences.

Beyond the tragic public health problems and problems for individuals who are suffering from addiction or who become addicted are the public safety and criminal justice issues that historically go along with substance abuse – most notably the increase in crimes like theft, burglary, forgery, and fraud. Given the unregulated nature of these products and the likelihood that they are manufactured, marketed, and sold without sufficient testing to protect consumers, the risk for accidental injury and even death is higher for the consumer and consequently, so is the risk of prosecution of the people distributing these products for something like involuntary manslaughter or reckless homicide. Finally, one of the saddest byproducts of the of the opioid crisis was the increased burden on our foster care system and on caretakers due to parental addiction issues.

Given the potency of some of these products and the similarity of them to opioids, we should indeed, as Dr. Makary of the FDA suggests, get out in front of this problem and avoid being caught flat-footed as we were during previous waves of the opioid crisis.[3] Doing so will help prevent the development and exacerbation of substance use disorders and the attendant consequences.

Highway Safety

Finally, the wide availability of these products at places like gas stations, convenience stores, and vape shops combined with the fact that there is no prohibition on having the products open and accessible in vehicles may lead to people to believe that it is safe to consume kratom products and drive. Kratom can cause sedation and impaired coordination. This raises the risks of impaired driving on our highways. It also presents unique problems for law enforcement interdiction efforts since kratom is not now typically tested for in drug screens or as part of a roadside test.

Banning kratom products as proposed will bring clarity to this issue for the public and will enable law enforcement to more consistently enforce our impaired driving laws, improving highway safety.

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[1] https://www.healthychildren.org/English/ages-stages/teen/substance-abuse/Pages/kratom-what-parents-need-to-know-about-this-risky-substance.aspx

[2] https://nypost.com/2025/07/29/opinion/beware-synthetic-kratom-7-oh-powers-a-new-opioid-crisis/

[3] Id.

For these reasons, we support the adoption of the proposed rules scheduling kratom and kratom-related compounds as Schedule I controlled substances.

Respectfully,

Louis Tobin
Executive Director

Prevention
Action Alliance
Lifetime Prevention | Lifetime Wellness

January 27, 2026

RE: OAC 4729:9-1-01.2 – This proposed rule classifies the primary compound in kratom as a Schedule I controlled substance. This covers all kratom products including natural plant material (including "natural leaf products" as well as synthesized extracts.)

Thank you for the opportunity to submit public comments on the Ohio Board of Pharmacy's proposed rule to classify mitragynine, the primary psychoactive alkaloid found in kratom, as a Schedule I controlled substance.

My name is Frances Gerbig, and I am the Executive Director of Prevention Action Alliance (PAA), a statewide nonprofit prevention organization based in Columbus, Ohio. For more than 30 years, PAA has partnered with communities across Ohio to prevent substance misuse, promote mental health, and advance evidence-based public health strategies that protect youth, families, and communities.

Prevention Action Alliance supports the Board's proposed rule due to the documented and growing public health risks associated with kratom and mitragynine. Although kratom is often marketed as a natural supplement, scientific evidence indicates that mitragynine carries a high potential for abuse and dependence, along with significant adverse physical and mental health effects.

Research and surveillance data link kratom use to seizures, hypertension, hallucinations, psychosis, and withdrawal symptoms. U.S. poison control centers have received thousands of reports of kratom exposure, including serious outcomes and fatalities. Particularly concerning are documented cases of infant withdrawal following exposure, underscoring the substance's capacity to cause physiological dependence.

Consistent with the criteria outlined in Ohio Revised Code 3719.44, the available evidence demonstrates that mitragynine:

- Has demonstrated potential for abuse and dependence.
- Has no accepted medical use in treatment in Ohio; and
- Lacks accepted safety for use under medical supervision.

As Ohio continues to confront significant substance use and mental health challenges, permitting the unregulated sale and possession of a psychoactive substance with these documented risks poses a clear threat to public health. Experience in other states suggests that limited regulatory approaches, such as age restrictions or product standards, have not adequately reduced harm or prevented misuse.

Prevention Action Alliance appreciates the Ohio Board of Pharmacy's careful review and commitment to evidence-based regulation. We support the proposed classification of mitragynine as a Schedule I controlled substance as a necessary step to reduce harm and protect Ohio's communities, particularly young people and families.

Thank you for your consideration and for your continued efforts to safeguard the health and safety of Ohioans.

Respectfully submitted,

Frances R. Gerbig, MPH, OCPC, ICPS
Executive Director
Prevention Action Alliance

January 28, 2025

Our company appreciates the opportunity to submit public comment regarding the proposed action before the Ohio Board of Pharmacy concerning kratom.

We are a long-standing herbal products company with extensive experience working with state legislatures and regulators across the country to advance reasonable, science-based kratom policy. We support thoughtful regulation that protects public health, ensures product quality, and removes unsafe or inappropriate products from the marketplace. For these reasons, we oppose a blanket ban on natural kratom, while supporting targeted prohibitions on 7-hydroxymitragynine (7-OH) and other synthesized or chemically altered compounds.

Kratom is a botanical product derived from the leaves of Mitragyna speciosa, a tree indigenous to Southeast Asia that has been traditionally consumed for centuries, most commonly by chewing the leaf or brewing it as tea. In the United States today, millions of adults use kratom as part of their personal wellness routines. Like many other plant-based products, kratom presents regulatory challenges that are best addressed through quality standards, transparency, and consumer protections, not prohibition.

We believe it is important to distinguish between natural kratom leaf and naturally occurring alkaloid extracts and novel, synthesized, or chemically concentrated compounds that were not historically present in the marketplace. In particular, we support regulatory action to prohibit or strictly control products containing isolated or synthetically enhanced 7-hydroxymitragynine (7-OH), as well as other altered alkaloids that raise legitimate safety concerns. These products do not reflect traditional kratom use and should not be conflated with responsibly manufactured natural kratom products.

At the same time, banning natural kratom leaf and non-synthetic alkaloid extracts would remove access to products that many adults use responsibly, while failing to address the root causes of safety concerns. Experience in other states has shown that prohibition does not eliminate demand; it instead drives consumers to unregulated or illicit markets where quality controls are nonexistent.

Across the country, states have successfully adopted regulatory frameworks, such as Kratom Consumer Protection Acts, that require:

- Registration of kratom vendors

- Third-party laboratory testing and Certificates of Analysis
- Limits on adulterants and contaminants
- Clear labeling and age restrictions

These policies improve consumer safety while allowing regulators to meaningfully oversee the marketplace. Our company has supported and complied with such standards for years, including adherence to Good Manufacturing Practices and independent laboratory testing. Unfortunately, not all vendors do so voluntarily, which is precisely why clear, enforceable regulation is necessary.

We respectfully urge the Ohio Board of Pharmacy to pursue targeted regulation rather than a broad ban, focusing enforcement on synthesized compounds like 7-OH while preserving access to responsibly manufactured natural kratom products. This approach better protects Ohio consumers, supports regulatory oversight, and avoids unintended consequences that accompany prohibition.

We appreciate the Board's attention to this matter and welcome continued dialogue on how to establish a regulatory framework that prioritizes public health, transparency, and consumer safety.

ADAMHS BOARD OF CUYAHOGA COUNTY
ALCOHOL, DRUG ADDICTION & MENTAL HEALTH SERVICES

Public Comment for OAC 4729:9-1-01.2

(Mitragynine / Natural Kratom Products)

Comment:

On behalf of our ADAMHS Board, we submit this comment in **support of the Ohio Board of Pharmacy's proposed rule** classifying Mitragynine and kratom products, including natural plant material and synthesized extracts, as Schedule I controlled substances.

Although often marketed as "natural" or "safe," kratom products contain psychoactive compounds with opioid-like effects and a growing record of harm. Our behavioral health and crisis systems continue to encounter individuals experiencing dependency, withdrawal, exacerbation of mental health conditions, and overdose risk associated with kratom use, often without prior awareness of its potency or risks.

The widespread availability of unregulated kratom products undermines prevention and recovery efforts and contributes to misinformation among consumers. Clear classification under state law is necessary to reduce harm, support consistent enforcement, and strengthen public health messaging.

This proposed rule provides clarity and consistency for providers, regulators, and the public, and represents an important step toward protecting individuals and communities across Ohio.

We appreciate the Board of Pharmacy's thoughtful approach and urge adoption of this rule.

Respectfully submitted,

Jason M. Joyce
CEO
ADAMHS Board of Cuyahoga County
2012 West 25th Street Cleveland, OH 44113

January 28, 2026
Testimony of Reason Foundation
Policy Analyst, Madison Carlino

To: The Ohio Board of Pharmacy
Re: Business Impact Analysis and Proposed Rule OAC 4729-9-01.2 – Classification of Mitragynine as a Schedule I Controlled Substance

Dear members of the Common Sense Initiative Office and Ohio Board of Pharmacy:

On behalf of Reason Foundation, we respectfully submit these comments opposing proposed rule OAC 4729-9-01.2 to classify mitragynine pseudoindoxyl—the primary alkaloid in kratom—as a Schedule I controlled substance. Reason Foundation is a 501(c)(3) nonprofit think tank dedicated to advocating for policy solutions that enhance public health, foster dynamic markets that offer economic opportunity, and ensure consumer access to safe, regulated products.

The rule and its supporting Business Impact Analysis (BIA) fail to satisfy the least-burdensome-regulation requirements of Ohio Senate Bill 2 of the 129th General Assembly (SB 2) and the Common Sense Initiative (CSI).[1] While the board has identified legitimate public-health concerns related to certain high-potency kratom extracts, unsafe kratom manufacturing practices, and misleading advertising, a blanket Schedule I classification is a disproportionate response not supported by the requisite eight-factor analysis. Moreover, outlawing kratom-related products will do little to protect consumers from potentially adulterated or mislabeled products, forcing them instead into the illicit market where products are wholly unregulated. Instead, we advocate for Ohio to adopt a targeted regulatory framework that addresses the harms identified by the board while preserving adult access to kratom and capped amounts of 7--hydroxymitragynine (7--OH).

I. The Eight-Factor Analysis Does Not Support a "High Potential for Abuse" Finding for Schedule I

In making a determination to add an unscheduled compound, the board is required to consider the following eight criteria: the actual or relative potential for abuse; the scientific evidence of the pharmacological effect of the substance; the state of current scientific knowledge regarding the substance; the history and current pattern of abuse; the scope, duration, and significance of abuse; the risk to the public health; the potential of the substance to produce psychic or

[1] Senate Bill 2 of the 129th General Assembly (2021), Common Sense Initiative (CSI) framework; codified at Ohio Revised Code § 107.61.

physiological dependence liability; and whether the substance is an immediate precursor to a scheduled compound.

The BIA states that "based upon a review of the 8-factor analysis, the board determined mitragynine has a high potential for abuse" and therefore Schedule I placement is warranted under *ORC 3719.44.*[2] This conclusion directly contradicts a 2018 peer-reviewed eight-factor analysis of kratom and mitragynine published in *Psychopharmacology.*[3] That independent analysis, applying the same statutory criteria, concluded that kratom's abuse potential is within the range of other unscheduled substances. It warned Schedule I placement would "seriously impede research" and could produce "serious unintended public health consequences."

The board's analysis neither cites this pivotal study nor explains why the board's conclusion diverges so sharply. For the rule to be valid, the board must either provide a point-by-point rebuttal of the published eight-factor analysis or acknowledge the statutory Schedule I standard is not met and pursue a regulated model.

II. The "Precursor" Argument for Scheduling Mitragynine Is an Overexpansion of Policy.

The board justifies scheduling mitragynine partly because it is metabolized into 7-hydroxymitragynine (7-OH), citing its higher potency. This "precursor" logic is flawed, and using precursor status alone to justify Schedule I represents a radical policy overreach.

Banning a primary plant alkaloid because a more potent analogue exists would logically justify banning numerous other benign precursors, plant alkaloids, and semi-synthetic pathways now safely regulated via licensing and manufacturing controls. Ohio has already appropriately scheduled truly high-risk synthetics, like MGM-15, without criminalizing all upstream plant chemistry.[4] In this case, the cited biosynthetic and pharmacokinetic data do not support equating typical mitragynine use with 7-OH abuse. While human studies indicate dose-proportional 7-OH formation and steady state after repeated dosing, they also show that at realistic oral doses, mitragynine was well-tolerated and did not produce significant classical opioid respiratory toxicity.[5]

Most of the harms the board highlights (gas-station shots, MGM-15 tablets, heavy metals, salmonella) concern high-potency extracts and semi-synthetics, not traditional or moderate-dose

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[2] Ohio Board of Pharmacy, "Emergency Rule OAC 4729-9-01.1 – Classification of 7-Hydroxymitragynine and Analogs as Schedule I" (December 12, 2025).

[3] Jack Henningfield et al., "The abuse potential of kratom according to 8 factors of the Controlled Substances Act: implications for regulation and research," Psychopharmacology (Berl), 2018. https://pmc.ncbi.nlm.nih.gov/articles/PMC5813050/

[4] Ohio Board of Pharmacy, "Emergency Rule OAC 4729-9-01.1 – Classification of 7-Hydroxymitragynine and Analogs as Schedule I" (December 12, 2025).

[5] J. C. Olsen et al., "Human Mitragynine and 7-Hydroxymitragynine Pharmacokinetics after Single and Multiple Daily Doses of Oral Encapsulated Dried Kratom Leaf Powder," *Journal of Forensic and Legal Medicine* 9, no. 8 (2024): 102–214; A. Sharma et al., "Clinical Pharmacokinetic Assessment of Kratom (Mitragyna speciosa), a Botanical Product with Opioid-like Effects, in Healthy Adult Participants," *Frontiers in Pharmacology* 13 (2022): 841–858.

mitragynine products. A rational response is targeted control of the high-risk preparations, not a blanket ban on all products containing 7-hydroxymitragynine and mitragynine pseudoindoxyl, which will unintentionally criminalize many consumers Targeted control may involve the state licensing, monitoring, or capping the content of any compounds of concern found in adult-use products.

III. Dependence and Withdrawal Are Insufficient Bases for Schedule I Classification

The BIA cites dependence and withdrawal symptoms drawn from case reports and Malaysian user surveys to support scheduling. Yet dependence liability is only one of the eight factors and is not, by itself, sufficient to establish a "high potential for abuse." Moreover, such phenomena occur with many unscheduled and non-schedule I substances, including caffeine, alcohol, many antidepressants, and benzodiazepine taper scenarios.

According to a World Health Organization (WHO) report, kratom withdrawal symptoms have been reported in humans; however, the report stated that "limited epidemiological evidence indicates that withdrawal is usually mild." The WHO report recognizes some of the public health concerns, including liver toxicity cases after kratom intoxication, but found insufficient evidence to recommend critical reviews of kratom, mitragynine, and 7-hydroxymitragynine (7-OH), advising against scheduling. [6]

IV. Kratom-Associated Death Data Are Misleading and Do Not Justify Prohibition

The BIA cites 202 Ohio deaths (2019-2024) where kratom was listed as a cause, citing "a growing number of deaths associated with kratom" as justification for scheduling. This claim is profoundly misleading. A recent public-health review concluded that there are "several million" past-year kratom consumers in the U.S., that serious adverse events are rare relative to this denominator, and that thoughtful regulation rather than prohibition is the most appropriate policy response.[7] In reality, several factors make it difficult to conclusively attribute the cause of death to kratom in cases where it is present.[8] These include:

- Polydrug Use: A review of 156 identified cases of deaths associated with kratom use found that one or more other drugs were present in 95.6% of cases with available toxicology data. Opioids were the most frequently encountered co-occurring drug.[9] The BIA's own data shows that 85% of kratom-positive deaths also involved one or more other substances. This is not sufficient evidence to suggest kratom as the sole or primary cause of death in the majority of cases. This invalidates attributing causation to kratom.

Small Proportional Impact: These 202 deaths represent approximately 0.8% of Ohio's total

[6] World Health Organization (WHO), "Annex I. 44th WHO ECDD Summary assessments, findings and recommendations," 11-15, October 2021, https://cdn.who.int/media/docs/default-source/controlled-substances/44ecdd_unsg_annex1.pdf?sfvrsn=9c380ac2_5

[7] J. M. Corkery et al., "Kratom-Related Deaths in the United States, July 2016–December 2017," *Clinical Toxicology* 58, no. 4 (2020): 248–259.
[8] D. Papsun et al., "Kratom (Mitragyna speciosa) Use, Plasma Mitragynine Concentrations, and Unintentional Deaths," *Journal of Analytical Toxicology* 43, no. 8 (2019): 589–595
[9] John Corkery et al., "Kratom-Related Deaths," *J Psychopharmacol.* https://pubmed.ncbi.nlm.nih.gov/31429622/

overdose deaths for the period. Meanwhile, Ohio reported unintentional prescription and synthetic opioid deaths legally prescribed and illicit Schedule II–IV opioids remain involved in a far higher proportion of deaths (yet are regulated rather than outright banned.) Unintentional prescription opioid overdoses caused 11,790 deaths in Ohio between 2010 and 2017, rising exponentially from 653 cases in 2010 to 3,674 cases in 2017.[10] In fact, Ohio was also one of eight states where the opioid mortality rate doubled every three years from 1999 to 2016.[11]

- Analytical Challenges: Identifying the two main active compounds, mitragynine and 7-OH, is challenging due to their instability at room or body temperature over time and the requirement for highly specific assays to differentiate them from their stereoisomers. Additionally, many cases lack a comprehensive toxicological evaluation, meaning some novel psychoactive substances (NPS) may not be detected because accurate assays are not yet available.

V. "No Accepted Medical Use" Misinterprets Ohio Law and Ignores Evidence

The board concludes that mitragynine "has not been approved for medical use as a drug, nor is it generally recognized as safe by the FDA [Food and Drug Administration]," and that it "has not undergone randomized, placebo-controlled studies necessary to demonstrate efficacy for any condition." As a result, the board concludes that kratom has "no accepted medical use." But Ohio law intentionally separates "accepted medical use" from federal FDA status.[12] Off-label prescribing and state medical marijuana programs demonstrate this distinction.

The board itself acknowledges that many users consume kratom to self-treat pain, fatigue, and even opioid withdrawal. However, because there is "no FDA-approved medical use," the board classifies this "self-treatment" as abuse. Testimonials indicate some users see kratom as a way to reduce or end abuse of opioids.[13] One of the direst consequences of a total ban, which makes even personal possession of such products illegal, would be the criminalization of many consumers attempting to treat pain without pharmaceutical opioids. Drug use is first and foremost a public health issue, and criminalization of individual possession and use is not an appropriate response.

In addition to self-reported benefits, emerging evidence supports the therapeutic potential of kratom, including Phase 1 clinical trials and extensive observational data, demonstrating plausible therapeutic value for pain, mood disorders, and opioid cessation and withdrawal symptoms with an acceptable safety profile at typical doses:

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[10] Andres Hernandez, Adam Branscum, Jingjing Li, Neil MacKinnon, Ana Hincapie, and Diego Cuadros, "Epidemiological and geospatial profile of the prescription opioid crisis in Ohio, United States," *Scientific Reports* (Nature), Mar. 9, 2020, https://www.nature.com/articles/s41598-020-61281-y

[11] Neil J. MacKinnon and Ellena Privitera, "Addressing the Opioid Crisis through an Interdisciplinary Task Force in Cincinnati, Ohio, USA," *Pharmacy* (MDPI), July 9, 2020, https://www.mdpi.com/2226-4787/8/3/116

[12] Ohio Revised Code § 3719.44.

[13] O. Grundmann, "Patterns of Kratom Use and Health Impact in the U.S.—Results from an Online Survey," *Frontiers in Public Health* 3 (2015): 244, https://doi.org/10.3389/fpubh.2015.00244.

- **Phase 1 Clinical Trial and Human Safety Data (2024)**. An exploratory study found that single oral mitragynine doses up to 40 mg in healthy adults were "generally well tolerated," with only mild and transient adverse events, and measurable dose-related effects without clinically meaningful respiratory depression.[14] Earlier pharmacokinetic studies likewise concluded that mitragynine's linear kinetics and day-long half-life make it a plausible future pain-management candidate.[15]
- **Pharmacokinetic Data (2022)**. Studies confirm linear pharmacokinetics for mitragynine, as well as an elimination half-life that supports once- or twice-daily dosing and found no serious toxicity at studied dose ranges in healthy volunteers.[16]
- **Preclinical and Clinical Literature.** Scientific literature documents analgesic, anti-inflammatory, anxiolytic, and opioid-withdrawal-relief effects of mitragynine and related alkaloids, with fewer respiratory-depression concerns than classical opioids. The board's own eight-factor analysis cites a 2024 review that expressly notes potential benefits of mitragynine, including antinociceptive, anti-inflammatory, antidepressant, sedative, anxiolytic effects, and management of opioid withdrawal; yet, the analysis emphasizes only the tolerance and withdrawal caveats and does not reflect these therapeutic findings in its "no accepted medical use" conclusion under ORC 3719.44.[17]

VI. Utah's Experience Reflects Weak Regulation, Not Regulatory Failure

The BIA cites Utah's regulated kratom market and persistent "kratom-related" deaths as proof that regulation cannot adequately mitigate risks. This argument conflates correlation with causation and ignores Utah's broader opioid crisis context.

Utah's reported data show that most "kratom-related" deaths involve multiple substances, making it impossible to attribute causality to kratom alone.[18] Furthermore, Utah's 2019 regulatory framework did not include regulatory guardrails now recognized as essential for a properly regulated market: limits on the per-serving potency of extracts, restrictions on artificial kratom alkaloids, , strict product-type differentiation, product standards and testing requirements, labeling requirements, risk transparency, robust quality controls, and civil penalties for non-compliance.

The BIA also fails to include a discussion of states that adopted a version of the Kratom Consumer Protection Act model, which imposes strict regulatory requirements rather than

[14] Marilyn Huestis et al.,"Human Mitragynine and 7-Hydroxymitragynine Pharmacokinetics…," *Molecules*, 23 Feb 2024, https://jdc.jefferson.edu/iehpfp/27/

[15] Satariya Trakulsrichai *et al.,* "Pharmacokinetics of Mitragynine in Man," *Drug Design, Development & Therapy*, 29 Apr 2015, https://pmc.ncbi.nlm.nih.gov/articles/PMC4425236/

[16] Ibid.

[17] Ohio Board of Pharmacy, "Business Impact Analysis."

[18] Case Western Reserve University Prevention Research Center for Healthy Neighborhoods, "Kratom Retail Survey: Cleveland, Ohio" (2025).

imposed blanket bans.[19] These frameworks include regulations that address many of the concerns mentioned by the board. Some examples of policies adopted under the KCPA model include:

- Age limits (18 or 21);
- Product standards and testing requirements;
- Labeling with alkaloid content;
- Alkaloid concentration limits for extracts;
- No prohibition of traditional or modest-potency leaves; and
- Civil penalties for non-compliant products while rejecting outright bans.

The Utah narrative does not establish that regulation is inherently ineffective but rather shows that a lax regulatory framework that does not control high-potency extracts, synthetic analogs, or product quality will predictably leave regulatory gaps. Ohio can learn from those shortcomings by implementing a focused regulatory model for adult-use kratom and tightly controlled, licensed 7-OH products instead of defaulting to Schedule I or prohibition.

VII. Contamination Harms Are a Failure of Regulation, Not Pharmacology

The BIA cites heavy metal contamination and a salmonella outbreak as a reason for prohibition. Yet, these are classic symptoms of an unregulated market with unsafe manufacturing practices or sourcing, not inherent properties of mitragynine.

While the FDA's testing of kratom products found elevated lead and nickel concentrations, a comprehensive toxicology analysis concluded that "poorly regulated kratom products" are the key source of contamination recommending mitigation through good manufacturing practices and product testing.[20] Similarly, past salmonella outbreaks associated with kratom were traced contamination.[21]

The board ultimately conflates harms from contaminated, adulterated, or polydrug kratom products with harms from mitragynine itself. Outlawing products will do little to address contaminated or adulterated products. Instead, we recommend an effective regulatory framework that include guidelines for Good Manufacturing Practices, contaminant limits, proper testing for heavy metals and contamination, accurate labeling, and product-type differentiation to directly address these risks without the collateral damage of Schedule I criminalization.

[19] Tennessee House Bill 1414 (2022), "Kratom Consumer Protection Act," codified at Tenn. Code Ann. § 39-17-415; Arkansas Code § 5-64-1101 et seq., "Kratom Products Regulation" (2023); Nevada Assembly Bill 701 (2021), "Kratom Regulation," Nevada Revised Statutes § 454A.

[20] Jack Henningfield et al., "Kratom Safety and Toxicology in the Public Health Context," *Frontiers in Pharmacology*, 2023, 2024, https://pmc.ncbi.nlm.nih.gov/articles/PMC11180979/

[21] Colin Schwensohn et al., "A Multiple-Serotype Outbreak of Salmonella Infections Linked to Kratom, United States, 2017–2018," *Foodborne Pathogens and Disease* (via PubMed Central), August 1, 2022, https://pmc.ncbi.nlm.nih.gov/articles/PMC10961741

VIII. The Business Impact Analysis Fails SB 2 Standards by Rejecting Alternatives

The BIA acknowledges the rule will result in the closure of kratom retailers and imposes criminal penalties under ORC 2925. Yet, the board failed to consider regulatory alternatives as required under Ohio statute.

In response to CSI Question 12 ("What alternative regulations did the agency consider?"), the board states: "No." This admission is fatal to the rule's compliance with SB 2. ORC 3719.44 authorizes, but does not require, Schedule I placement where criteria are met, but it also directs the board to consider a range of factors. The agency cannot satisfy SB 2's "adverse impact" and CSI balancing requirements by simply stating that Schedule I is the chosen outcome and dismissing all intermediate options.

The CSI framework also directs agencies to eliminate excessive and duplicative rules and to balance the regulatory objectives that have an adverse impact on business with the costs of compliance by the regulated parties. Agencies are also told to "prioritize compliance over punishment."[22]

A Case Western Reserve University report documented over 130 kratom-carrying retailers in Cleveland alone and at least 12 kratom-specialty stores statewide.[23] Though the BIA admits the rule will likely result in the closure of these stores, it identifies no less-restrictive alternative as required by the CSI's own guidance. The board explicitly considered no graduated regulatory options (licensing, product standards, age limits, or potency caps) even though such options exist and are in use in other states.

IX. Proposed Path Forward: A Regulatory Framework for Adult Access and Consumer Safety

Rather than scheduling or prohibition, Reason Foundation recommends the Board follow SB 2 guidelines and explore less-burdensome approaches to create a legal and well-regulated adult-use market for kratom with tightly regulated 7-OH products. To better align with public-health goals and SB 2, we respectfully urge CSI and the Board to reject proposed OAC 4729-9-01.2 and instead pursue legislation and rulemaking to establish:

- **Adult-Only Access:** Prohibit sales of kratom and kratom-derived products, including any containing mitragynine, 7-OH, or other kratom analogs to minors, require ID verification at point of sale and for online purchases, and impose civil penalties for non-compliance.
- **Product-Type Differentiation:** Maintain a legal, regulated market for traditional and modest-potency mitragynine products (leaf, teas, low-ratio extracts) that are tested, labeled, and sold only to adults.

[22] Ohio Revised Code, "Section 107.61 | Common sense initiative office," *Ohio Laws (codes.ohio.gov)*, effective June 7, 2011, https://codes.ohio.gov/ohio-revised-code/section-107.61

[23] Case Western Reserve University Prevention Research Center for Healthy Neighborhoods, "Kratom Retail Survey."

- **Potency and Formulation Limits:** Set maximum allowable per-serving dosage of mitragynine and 7-OH derivatives in kratom extract products, require clear labeling of alkaloid content, and establish evidence-based regulations for sale of such products**.**
- **Marketing and Consumer Information:** Ban disease-treatment claims and youth-oriented branding; require standardized warnings regarding dependence, withdrawal, and polydrug risks.
- **Quality, Testing, and Contamination Controls:** Require all kratom and kratom-derived products sold in Ohio to be manufactured under current good manufacturing practices (cGMP) and tested by accredited third-party laboratories for heavy metals (including lead and nickel), microbial contamination, and active alkaloid content; Authorize the board to mandate recalls, issue public safety notices, and impose civil penalties or license actions for non-compliant products and false testing claims.
- **Labeling, Warnings, and Marketing Restrictions:** Mandate clear, standardized warnings regarding dependence and withdrawal potential, polydrug use risks (especially with opioids, benzodiazepines, and alcohol), and contraindications for pregnancy; mandate disclosure that kratom is not FDA-approved for any medical indication; prohibit unsubstantiated disease-treatment claims unless supported by evidence and authorized under federal and state law; and restrict youth-oriented marketing.

X. Conclusion

Schedule I classification of mitragynine and 7-OH is not supported by a complete eight-factor analysis, contradicts emerging evidence of therapeutic potential, and fails to comply with SB 2's mandate to minimize regulatory burden. [24] A prohibitory approach risks increasing opioid overdose mortality by eliminating a less risky alternative for thousands of Ohioans, some of whom may return to illicit market opioids if kratom is banned.

Ohio has a legitimate interest in protecting public health from contaminated products, high-potency products without proper dosing information, and deceptive marketing. However, this can be better achieved through a tightly regulated, adult-use framework that directly targets the board's identified harms of contamination, high potency synthetics, and youth access, without the collateral damage of criminalization.

A sufficiently regulated, adult-use framework for kratom and its analogs—with strict labeling requirements, defined and evidence-based limits on dosage per serving—transparency requirements, and quality standards– better aligns with SB 2's demand for the least-burdensome regulation, targets the sources of harm rather than low-risk use, and preserves adult access to safe and regulated kratom products.

This framework would directly address the harms the board has specifically identified, including kratom dependence, abuse liability, adverse effects from bad manufacturing practices,

[24] Jack Henningfield et al., "Kratom Abuse Potential 2021: An updated eight-factor analysis" https://pmc.ncbi.nlm.nih.gov/articles/PMC8860177/

semi-synthetic analogs, quality products, labeling and transparency requirements, and youth access, while preserving the ability of adults and clinicians to use regulated mitragynine and carefully controlled 7-OH as potentially safer alternatives to traditional opioids. It would also ensure that Ohio does not inadvertently increase opioid-overdose mortality by pushing current kratom consumers back to more dangerous substances, as multiple expert analyses warn could occur under a prohibition model.

For these reasons, we strongly recommend the CSI Office reject the proposed OAC 4729-9-01.2 in its current form and to direct the board of Pharmacy to develop a comprehensive, adult-only regulatory framework for kratom-related products like 7-OH, instead of a Schedule I ban.

Respectfully submitted,

Madison Carlino

Drug Policy Analyst
Reason Foundation
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To the Ohio Board of Pharmacy, Common Sense Initiative, and the Joint Committee on Agency Rule Review,

I'm writing on behalf of Top Tree Herbs, a small business founded in 2020 that produces traditionally prepared, lab-tested kratom tea bags and related products. We're based in Denver, Colorado, but we serve customers nationwide—and from 2020–2023 we also grew kratom trees in the Ohio Valley in Sardis, Ohio. Our goal from day one has been to help replace a "grey market" reputation with a model of transparency, quality control, and responsible access. We follow GMP-style practices and conduct exhaustive third-party testing for alkaloid levels and common contaminants (including heavy metals and pathogens).

We respectfully oppose the proposed rule to place naturally occurring mitragynine into Schedule I, especially the broad scope covering any material or preparation containing mitragynine, combined with criminal penalties under ORC 2925 and no small-business flexibility. As written, this approach would criminalize responsible consumers and reputable companies while predictably shifting demand to the least regulated channels—where products are more likely to be adulterated, mislabeled, or dangerously concentrated.

We also want to address the proposal's "bath salts/cathinone" analogy. It is true that novel analogs can proliferate. But the core driver of that "cat-and-mouse" market is prohibition or looming prohibition of a known product class. When a natural product remains legal under clear, enforceable guardrails, there is less economic incentive to create unknown, riskier substitutes. Each new analog is, by definition, less characterized and therefore more likely to create unexpected toxicity or harm. A sweeping Schedule I action could unintentionally accelerate the very dynamic the Board is trying to prevent by pushing consumers into illicit markets and increasing the rewards for clandestine chemistry.

A more effective harm-reduction strategy is a consumer-protection regulatory framework designed to optimize personal freedom and public health. Kratom has a long history of traditional use as a tea/infusion, and modern tea bags are one practical way to keep use closer to that model. A peer-reviewed study led by Dr. Oliver Grundmann (Correlations of kratom tea bag preparations and reported pharmacological effects, 2023) found that tea infusion from tea bags yields substantially lower mitragynine than exhaustive methanolic extraction and concluded that traditional tea infusions "provide a potentially safer formulation compared to more concentrated products." This supports a policy focus on transparency, standards, and informed adult choice—not blanket criminalization.

We urge the Board to replace scheduling with sensible, enforceable regulations: age limits; mandatory third-party testing for contaminants and accurate alkaloid labeling; GMP manufacturing standards; clear serving sizes and warnings; and meaningful enforcement against fraud, adulteration, and mislabeling. These measures protect consumers while preserving lawful access and reducing incentives for the illicit innovation the proposal warns about.

For these reasons, we respectfully request the Board withdraw the proposed rule and convene a stakeholder process to implement a targeted, evidence-based regulatory framework. Top Tree Herbs is ready to participate constructively.

Thank you for your time and your focus on public safety.

Sincerely,
Soren Shade
Founder, Top Tree Herbs

TOP TREE HERBS

Officials,

I am a small business owner operating in Ohio and employ 4 people.

The proposed scheduling of kratom as a Schedule I substance would cause immediate and severe economic harm to my business. Kratom represents approximately 100% of my lawful revenue, and this rule would result in unsellable inventory, loss of income, and potential layoffs.

Kratom is currently a lawful product in Ohio, and my business has operated in compliance with all applicable laws. A Schedule I classification would abruptly criminalize lawful commerce without providing a reasonable transition or alternative regulatory framework.

This proposal constitutes an adverse impact on businesses as defined by R.C. 107.52 and therefore requires a full Business Impact Analysis and review by the Common Sense Initiative pursuant to R.C. 106.03 and 106.031.

I urge the Board to consider less restrictive regulatory alternatives. Your last presenter talked about following the 6 other states that have banned kratom, but she failed to speak about the 14 states that adopted KCPA regulations, rather than an outright ban that would devastate Ohio businesses and employees.

John Blair
Channel Zero Marketing, LLC
Centerville, Ohio
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A Critique of the Ohio Board of Pharmacy's Eight Factor Analysis for Mitragynine:

C. Michael White, Pharm.D., FCP, FCCP, FASHP

Chair, Kratom Consumer Advisory Council

Brief Biography of Author and Disclaimer

I am a pharmacist, clinical pharmacology and outcomes researcher, [CW1]. I have written and published extensively about both kratom and substances of abuse [CW2] in the biomedical literature going back many years. I think I have a realistic view of natural leaf kratom's potential harm and its potential benefits.

I am not writing this document as a representative of the University of Connecticut School of Pharmacy where I am employed, but as the Chair of the Kratom Consumer Advisory Council (KCAC) [CW3]. The KCAC is an independent board comprised of a clinician-scientist (me) and members who were hurt or helped by kratom derived products. Global Kratom Coalition established this council but its members do not vote on our position statements and are not bound to follow or support our statements or informational pieces.

Summary of Issues And Weaknesses With The Board's Analysis

The Ohio Board of Pharmacy eight factor analysis suffers from shortcomings that demonstrate it does not present an accurate determination of the risk profile of natural leaf kratom products.

1. Their eight-factor analysis is a conglomeration of information, much of which is one-sided and fails to fully and objectively evaluate all relevant data—including data supporting potential health and societal benefits resulting from properly-regulated use of natural leaf kratom products.

2. Their determination to schedule natural leaf kratom is at odds with the determination of the FDA, DEA, and WHO — without a reasoned explanation for the conflicting conclusion.

3. They rely on a modeling study for opioid binding, which is cited to the exclusion of other more substantial data, including in vitro and in vivo data that is substantially stronger.

4. They do not consider the proven and major pharmacologic differences between natural leaf kratom and mitragynine versus prescription or illicit opioids.

   A. An in vitro Ki value that shows markedly weaker mu-opioid binding strength for mitragynine and evidence that some alkaloids in natural leaf kratom block some opioid receptors

   B. No in vivo self-administration signal for addiction

   C. No in vivo reinforcing effect signal for addiction

   D. Human pupil constriction markedly less than with opioids, even at the highest doses, showing a different intensity of pharmacologic effect

   E. No in vivo concerning respiratory depression

5. They assume that the alternative to natural leaf kratom use is for consumers to abstain from all substances, which the available evidence suggests is untrue:

   A. Kratom is being used as a substance of abuse substitute or for intractable pain syndromes in people without traditional care options.

   B. As described by the Department of Health and Human Services, viewing natural leaf kratom use in black and white terms, without consideration of context or nuance, can potentially harm public health because there is a trade

off between potential benefits and risks of making the substance schedule I. Banned substances cannot be utilized in those for which the benefit would outweigh the risk and it cannot be researched further to better understand the benefits and risks.

6. To suggest that the available data equates the addictive and safety profile of natural leaf kratom with illicit opioids, cocaine, and methamphetamines is unfounded and contrary to scientific evidence that other health organizations that counselled or decided against doing so.

7. In lieu of scheduling/banning natural kratom leaf, Ohio can be a leader in developing a Kratom Consumer Protection Act that protects consumers but still allows access to products for which the scientific data does not support a complete ban.

Ohio Board of Pharmacy Eight-Factor Analysis at Odds with National and International Analyses

I was pleased that the Ohio Board of Pharmacy assessed the potential risks associated with isolated, concentrated 7-hydroxymitragynine (7-OH) and attempted to put in place an emergency ban (which the Board publicly-announced as excluding natural leaf kratom) to protect the citizens of Ohio within the past few weeks. This decision aligns with the pharmacology and other evidence as well as the recommendations of the Food and Drug Administration (FDA).

Unfortunately, the Ohio Board of Pharmacy has now taken a step towards scheduling natural kratom leaf products for the citizens of Ohio through its purported consideration of the requisite eight-factor analysis. For reasons they do not explain, their eight-factor analysis is at strong odds with eight-factor analyses [CW4] conducted in the past [CW5] and does not, in my view, reflect a full and objective analysis of all available and relevant data, including scientific studies.

The Ohio Board of Pharmacy's position to schedule natural leaf kratom is explicitly in opposition to the recommendations of the FDA. When the FDA recommended that the Drug Enforcement Administration (DEA) schedule isolated, concentrated 7-hydroxymitragynine (7-OH) in 2025, the leaders of the FDA and Department of Health and Human Services made it clear that they were not recommending the scheduling of natural leaf kratom. Here is a screenshot from their press release [CW6]:

FDA NEWS RELEASE

FDA Takes Steps to Restrict 7-OH Opioid Products Threatening American Consumers

Agency alerts health care professionals and consumers of 7-hydroxymitragynine risks

ents

For Immediate Release: July 29, 2025

The U.S. Food and Drug Administration today is taking a bold step to protect Americans from dangerous, illegal opioids by recommending a scheduling action to control certain 7-hydroxymitragynine (also known as 7-OH) products under the Controlled Substances Act (CSA).

The FDA is specifically targeting 7-OH, a concentrated byproduct of the kratom plant; it is not focused on natural kratom leaf products. 7-OH is increasingly recognized as having potential for abuse because of its ability to bind to opioid receptors. The FDA is releasing a new report to educate the public about the health concerns of 7-OH and its distinction from the kratom plant leaf.

The FDA report [CW7] from summer 2025 goes on to identify why 7-OH is not the same as natural leaf kratom and why the federal agency now believes the data is strong enough to say the risk associated with isolated, concentrated 7-OH products warrants scheduling but natural leaf kratom does not. In their eight-factor analysis, the Ohio Board of Pharmacy selectively quotes from the FDA website to create the impression that the FDA and Health of Human Services would support a ban of kratom. However, the Ohio Board of Pharmacy inexplicably leaves out that the Assistant Secretary of Health, Dr. Brett Giroir sent a "Kratom Scheduling Recission Letter" [CW8] to the DEA on August 16, 2018. In that letter the Assistant Secretary made clear that:

"I am rescinding our prior recommendation… that mitragynine… …be permanently controlled in Schedule I of the CSA."

"This decision is based on many factors, in part on new data, and in part on lack of evidence, combined with an unknown and potentially substantial risk to public health if these chemicals were scheduled at this time."

Scheduling would lead to:

"… kratom users switching to highly lethal opioids… risking thousands of deaths…"

"…inhibition of patients discussing kratom use with their primary care physicians leading to more harm, and enhancement of stigma…"

The Health and Human Services letter then goes on to say:

“I am also concerned about the stifling impact of scheduling kratom on our ability to conduct research…”

The FDA’s recently-completed patient tolerability clinical trial [CW9] coupled with the agency’s explicit statement regarding scheduling 7-OH but not scheduling natural leaf kratom, shows that its position and that of the Department of Health and Human Services has not changed. The benign results of their tolerability study, even at high doses (study discussed in detail below) in this clinical trial, are now prompting the FDA to conduct an additional study which will further our understanding of this natural ingredient. The FDA is engaged in better understanding natural leaf kratom and is not concerned about severe immediate negative health risks to the public from natural leaf kratom products. The DEA and the World Health Organization (WHO) [CW10] have also intensively evaluated whether natural leaf kratom should be scheduled/banned and both have decided against it in the past with no plans to assess it again.

Why the Ohio Board of Pharmacy has not probed the rationale for major organizations like the DEA and WHO that decided not to schedule/ban whole leaf kratom or at least referred to and considered the studies already identified in previously conducted eight-factor analyses in their deliberations is not discussed.

Review of the Factors

Factor 1: The Actual or Relative Potential for Abuse.

The Ohio Board of Pharmacy focused heavily on the US Food and Drug Administration’s (FDA) Public Health Assessment via Structural Evaluation (PHASE) [CW11] protocol to characterize whether different alkaloids in natural leaf kratom would interact with opioid receptors, including the mu-opioid receptor. According to the FDA authors of this study published in PLoS One, they developed the PHASE protocol: *“as a tool for characterizing newly identified substances that lack in vitro and in vivo data”*. The FDA is transparently stating that it is not the definitive model but rather a way to get an initial assessment when in vitro and in vivo data do not exist. However, the alkaloids in the natural leaf have been assessed both in vitro and in vivo for actual or relative potential for abuse. This should have been identified by the Ohio Board of Pharmacy as they decided how much weight to place on this model — i.e., effectively dispositive weight — versus other data not mentioned, or glossed over, in the Board’s analysis.

In an analytical framework, some types of data are inherently stronger than others and are therefore more likely to reflect what will occur in real life situations. Modeling is not as strong as actual in vitro data, and in vitro data is not as strong as in vivo animal studies. Similarly, in vivo animal studies are not as strong observational controlled studies which are not as strong as clinical trials. Anecdotal experiences (case studies, case series, descriptive studies) are methodologically weak, as there are many biases that can explain an outcome unrelated to the product under assessment. I am not sure why the Ohio Board of Pharmacy focused, and

strongly disagree with its decision to focus, so heavily on this modeling study and anecdotal evidence to the exclusion of stronger study types.

In Vitro Data

Ki **v**alues, which show how strongly a substance binds to a specific receptor, are a valuable and quantifiable way of determining the strength of binding to a receptor in vitro. In a recent comprehensive review [CW12], research experts who conducted sentinel work on natural kratom leaf specified that:

"In vitro pharmacological screening using a panel of 82 central nervous system drug targets has been conducted for all the major kratom alkaloids. Due to its natural abundance, mitragynine was hypothesized to interact primarily with opioid receptors, and it has been shown to bind most strongly to the μ-opioid receptor (K_i=709 nM) as a partial agonist. In contrast, it is a weak competitive antagonist at κ-opioid (K_i=1,700 nM) and δ-opioid (K_i=6,800 nM) receptors. Interestingly, mitragynine does not have a high affinity or preference for any one class of receptors and exhibits pharmacological actions through a variety of targets including opioid, serotonin, and adrenergic receptors."

"Speciociliatine interacts primarily with opioid receptors and has analgesic actions in some animal models but not in others, indicating possible pharmacological differences among species. Speciogynine and paynantheine (which only differ by the location of a single carbon-carbon double bond) interact strongly with serotonin receptors, while also interacting moderately with opioid receptors, and to a lesser extent adrenergic receptors. Paynantheine is among the more abundant alkaloids, presenting with mild conditioned place aversion and blocking morphine antinociception at low doses, which may indicate partial antagonist effects at the μ-opioid and partial agonist effects at the δ-opioid receptors. Corynantheidine (which only differs from mitragynine by lacking an -OCH_3 group) binds strongly to alpha-adrenergic receptors and has weaker interactions at opioid (K_i=57 nM at μ-opioid receptor) and serotonin receptors."

"The minor alkaloids mitraciliatine and isopaynantheine induce antinociception in animal models that is primarily mediated through κ-opioid receptor activation and do not appear to cause respiratory depression even at very high doses."

This review, conducted by kratom researchers in the field, and peer reviewed before publication, is relying on actual in vitro data that paints a picture far more granular and nuanced than when the PHASE conformational model is used in isolation. It is important to focus on three major things derived from these in vitro studies which are not reflected in the Ohio Board of Pharmacy Eight Factor Analysis.

First, the higher the Ki value the weaker the binding to the opioid receptor. The Ki values of prescription or illicit opioids [CW13] such as oxycodone, morphine, hydromorphone, fentanyl and sufentanil range from 0.2 to 25 nM (potent binding) as compared to the Ki value for mitragynine for the mu-opioid receptor of 709 nM (very weak binding). The Ki value for the mu-opioid

receptor chosen for the expert review was selected because it is conservative, with a Ki value for the mu-opioid receptor of 7,709 nM [CW14] found in another in vitro study. It is indisputable that the binding of mitragynine to the mu-opioid receptor is far weaker than that of commonly used prescription or illicit opioids.

Second, the aforementioned expert review specifies that several of the alkaloids in natural leaf kratom actually block opioid receptors. This paints a complex pharmacologic profile where the opioid effects of some alkaloids are attenuated by the actions of others, and this is not reflected in the Ohio Board of Pharmacy Eight Factor Analysis. This does not occur with any full agonist prescription opioids or illicit opioids.

Third, the Ohio Board of Pharmacy Eight Factor Analysis is silent on the non-opioid effects of natural leaf kratom alkaloids. This is important because major effects of natural leaf kratom, and of mitragynine, are likely derived from non-opioid pathways.

Fourth, there are visible structural differences between prescription and illicit opioids vs. mitragynine as evidenced in the excerpt below from another 8-factor analysis [CW15] :

Structurally, MG and 7-OH-MG are unrelated to other natural and synthetic MOR agonists (**Figure 1**). MG and 7-OH-MG are considered indole alkaloids, whereas morphine (a natural MOR agonist) is considered a phenanthrene derivative and fentanyl (synthetic MOR agonist) is a 4-anilidopiperidine. All of these MOR agonists share in common a basic amine group, thus they are all alkaloids. There are over 40 indole alkaloids present in the plant that have been reported to date. 7-OH-MG is present in the leaves of *M. speciosa*, though in quantities that are unlikely to contribute to its pharmacologic effect when taken orally; however, MG is metabolized into 7-OH-MG *in vivo*, and could indeed be considered an active metabolite of oral MG. More research is needed to determine this.

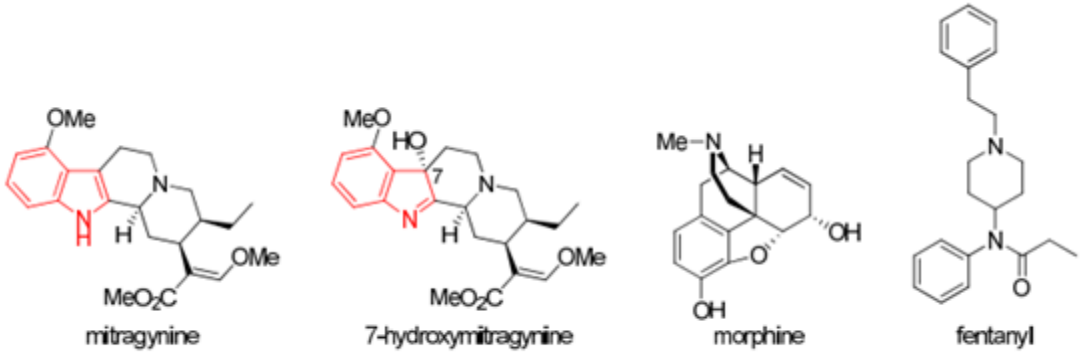


Figure 1. Structures of mitragynine (MG), 7-hydroxymitragynine (7-OH-MG), morphine (a naturally occurring MOR agonist), and fentanyl (a synthetic MOR agonist). The indole group of MG and 7-OH-MG is shown in red.

In Vivo Preclinical Data

Mitragynine Does Not Cause Animal Self-Administration

In another eight-factor analysis [CW16] , there were multiple studies showing the lack of an addiction signal from animal self-administration as noted in this excerpt:

Factor/Description	Citations	Main findings	Comments
Factor 1: Actual or relative potential for abuse			
Intravenous Self-Administration (IV SA)	(Prozialeck et al., 2019), (Grundmann et al., 2018; Yue et al., 2018; Coe et al., 2019; Hemby et al., 2019; Garcia-Romeu et al., 2020)	No evidence of reward	MG pretreatment reduced morphine self-administration
Intracranial Self-Stimulation (ICSS)	(Negus and Miller, 2014)-(Behnood-Rod et al., 2020)	No evidence of reward for MG or 7-OH-MG	

Included are multiple references not mentioned in the Ohio Board of Pharmacy eight-factor analysis which seem relevant in establishing that mitragynine has distinct differences from prescription or illicit opioids.

Mitragynine Does Not Cause Reinforcing Effects

There are many studies that suggest mitragynine and natural leaf kratom are not the same as prescription or illicit opioids. The lack of a full literature search to identify them is a weakness in the Ohio Board of Pharmacy assessment. While I will not provide an exhaustive list of studies here, I will highlight a few prime examples. However, there is reference to them in an updated peer reviewed and published [CW17] eight-factor analysis from Pinney & Associates, one from the World Health Organization [CW18], and another from academic researchers [CW19] at the University of Wisconsin.

The following is from a critically important mouse study [CW20] examining the reinforcing effects of mitragynine (referred to as MG) and isolated, concentrated 7-hydroxymitragynine (7-OH, or referred to in this study as 7-HMG).

"7-HMG, but not MG, substituted for morphine self-administration in a dose-dependent manner in the rat self-administration paradigm. Following the substitution procedure, re-assessment of morphine self-administration revealed a significant increase following 7-HMG and a significant decrease following MG substitution. In a separate cohort, 7-HMG, but not MG, engendered and maintained intravenous self-administration in a dose-dependent manner."

“The present results are the first to demonstrate that 7-HMG is readily self-administered, and the reinforcing effects of 7-HMG are mediated in part by μ and δ opiate receptors. In addition, prior exposure to 7-HMG increased subsequent morphine intake whereas prior exposure to MG decreased morphine intake.”

“The present findings indicate that MG does not have abuse potential and reduces morphine intake, desired characteristics of candidate pharmacotherapies for opiate addiction and withdrawal, whereas 7-HMG should be considered a kratom constituent with high abuse potential that may also increase the intake of other opiates.”

This mouse study shows that the substitution of morphine with mitragynine does not reinforce opioid addiction but rather leads to a lower morphine utilization dose over time. These pharmacologic effects are not seen with 7-OH, the isolated, concentrated synthetic opioid that the Ohio Board has already sought to ban via an emergency rule. Later in the Ohio Board of Pharmacy eight factor analysis, they state that since a portion of mitragynine can be converted into 7-OH, it must assume the risk profile of 7-OH. However, this first mouse study shows this assumption is unfounded and not pharmacologically accurate. A small portion of the mitragynine introduced into the mice was undoubtedly converted into 7-OH by the body, but even so, it did not change the pharmacologic findings versus isolated and concentrated 7-OH.

The results are similar to those obtained in a combination in vitro and in vivo study. In the in vitro portion mitragynine was found to have mu-opioid receptor specificity that was ~ 200-fold less than that for morphine. In the in vivo portion of the study rats were trained to self-administer methamphetamine (0.022 mg/kg/injection) during 1-h daily sessions. They then underwent periodic self-administration of mitragynine, heroin, methamphetamine, or saline. In rats trained to self-administer methamphetamine, saline substitutions and mitragynine substitutions significantly decreased the number of responses, whereas different doses of methamphetamine (0.002–0.068 mg/kg/injection) or heroin (0.001–0.03 mg/kg/injection) maintained self-administration. Equally as important, pre-session mitragynine treatment (0.1 to 3.0 mg/kg) decreased response rates maintained by heroin suggesting an attenuation of heroin’s negative addictive effects. This is not surprising since mitragynine is a partial mu-opioid receptor stimulator, not a full opioid receptor stimulator.

As such, there were two important studies that provide insight into exactly what the Ohio Board of Pharmacy was asked to evaluate, whether mitragynine and whole leaf kratom are distinct from other substances of abuse. Yet, the Board failed to even mention these studies in their assessment.

<u>Natural Leaf Kratom and Mitragynine Overview by the WHO</u>

The WHO assessment admittedly shows in vivo data that mitragynine is a mu-opioid receptor and that some of its effects are blocked by traditional opioid receptor blockers, showing that is at least one of the mechanisms of action. However, there are a number of studies referenced in the WHO report that show major differences from traditional opioids that should be noted but are

absent from the Ohio Board of Pharmacy 8 factor analysis. The following are relevant excerpts from the WHO analysis:

"…a methanolic extract of kratom leaves (50-300 mg/kg i.p.) does not generate conditioned place preference (Sufka et al., 2012), nor does lyophilized kratom tea (100 mg [equivalent to 0.74mg mitragynine]/kg, 1 g [7.4 mg mitragynine]/kg orally) in mice (Wilson et al., 2020)."

"Mitragynine is not self-administered by rats (25-150 µg or 0.1-3.0 mg iv) (Hemby et al., 2108; Yue et al., 2018) and does not alter the reward threshold (lowering threshold is rewarding) or response latency for intracranial self-stimulation (ICSS) at 1-30 mg/kg ip or intragastric (Behnood-Rod et al., 2020) (Dr. Patrick Beardsley, personal communication)."

"Mitragynine increased the reward threshold at the highest dose studied (56 mg/kg ip), suggesting an aversive action (Behnood-Rod et al., 2020)."

"7-Hydroxymitragynine is perceived as more morphine-like than is mitragynine (Obeng et al., 2021). Kratom methanolic extract (100 mg/kg p.o., 4.4% mitragynine by weight) did not acutely increase dopamine concentration in mouse brain nucleus accumbens, while a reinforcing dose of alcohol did (Vijeepallam et al., 2019). Increasing nucleus accumbens dopamine concentration is an acute effect of almost all substances of abuse, including opioids (Gardner, 2011)."

Mitragynine Does Not Produce Traditional Opioid Respiratory Depression Risks

Another way to determine if the effects of mitragynine are analogous to prescription or illicit opioids is to assess a known serious and common adverse event that they cause, namely respiratory depression. We summarize this in one of our KCAC position statements [CW21] .

The most recent study [CW22] on the subject is special because it looked at respiratory rate (how many breaths per minute) and minute ventilation (how much air is breathed in and out each minute). This study found that rats given 7-OH, like those given morphine, had significantly lower respiratory rates and minute ventilation 30-minutes after dosing. The study also found that as the dose of 7-OH or morphine increased, the extent of respiratory depression got worse. The degree of respiratory depression was very similar when 7-OH or morphine was given. Interestingly, mitragynine administration across all the doses did not suppress respiratory rate or minute ventilation. Both 7-OH and morphine decrease respiration through opioid mediated pathways as shown by the fact that the effects were reversed by naloxone, an opioid receptor antagonist. On the other hand, the effects of mitragynine on respiration were unaffected by naloxone administration, indicating that mitragynine is not modifying respiration through opioid dependent pathways.

In a mouse study [CW23], 7-OH (1.9 mg/kg), morphine, (3.8 mg/kg), and mitragynine (5.5 mg/kg) reduced respiration to the same extent in low doses but as the dose of 7-OH and morphine escalated to 10 mg/kg and 30 mg/ kg, the respiratory depression continued to worsen while mitragynine's respiratory depressant effects hit a "ceiling effect" and did not get any worse as the dose rose to 10 mg/kg, 30 mg/kg or even 90 mg/kg. The extent of respiratory depression with 7-OH and morphine across doses were similar.

In a rat study [CW24] , mitragynine's impact on respiratory depression versus oxycodone was also assessed. Oxycodone administration produced significant dose-related respiratory depressant effects while mitragynine did not.

The current best evidence suggests that a variety of opioids, including 7-OH, induce substantial respiratory depression at higher doses while mitragynine is uniquely lacking in this dose-related phenomenon. Respiratory depression is a major cause of tens of thousands of opioid overdose deaths each year in the United States, so this should have been a major consideration. A proper 8-point analysis should, thus, explore why this stark pharmacologic difference is occurring and how it suggests that mitragynine in natural leaf kratom is a complex alkaloid and that natural leaf kratom is more complex with many alkaloids with complex overlapping and blocking effects. Clearly the pharmacologic effects cannot be directly extrapolated from other opioid datasets.

Human Data

In considering potential for abuse, it is critical to understand that addiction, now termed a use disorder, is determined by a number of factors; some of which are much more detrimental to individual and population health than others. I believe this is the reason why the FDA and the Department of Health and Human Services have a prudent and nuanced approach to natural leaf kratom versus isolated, concentrated 7-OH products. The Ohio Board of Pharmacy should take a similar approach that strives to better and more deeply understand all of the components of addiction and its nuances, particularly in the context of a complex substance like natural leaf kratom.

Pupil Dilation and Addiction Potential

There are two gold standard studies (placebo controlled clinical trials) that have assessed the tolerability of single dose kratom use. One of the two also assessed multiple day therapy. The first of these [CW25] clinical trials was conducted by the FDA. In the trial, normal volunteers were given placebo or one of several doses of natural leaf kratom (1g to 12 g; with 12 grams being four times higher than the normally consumed dose). The FDA found that natural leaf kratom at high doses produced relatively mild (~2 mm) pupillary constriction compared to morphine and oxycodone that produce >4 mm of pupillary constriction at high doses. This shows another clear mu-opioid receptor effect that is less than half as pronounced with natural leaf kratom than with prescription opioids.

The FDA looked at four markers that could suggest future addictive potential, feeling high/euphoric, feeling drunk, drug liking, and desire to take it again. These factors were not elevated above placebo levels for normal consumption doses of 1-3 g. There were some qualitative increases at the 8 to 12 g doses, but the FDA did not identify these as being concerning and merely recommended additional study. The FDA stated:

"Kratom did not appear to produce clear, dose-related or significant effects on VAS-rated measures commonly associated with abuse potential including ratings of drug liking, overall drug liking, and assessments of take drug again."

"These data warrant additional studies to more thoroughly assess the abuse potential of kratom."

If the FDA's concluded that there is no clear signal of risk in humans and that the correct step to protect public health is to conduct additional studies (one of which is already being planned by the FDA), it is difficult to reconcile the Ohio Board of Pharmacy's asserted belief that there is currently sufficient evidence to schedule the product now due to its addictive potential. What the FDA study clearly identified was dose related increases in gastrointestinal adverse events like nausea and vomiting. This effect, bolstered by the leaf vegetal matter, is a built-in hedge against binging the product and one that prescription and illicit opioids do not have

In a separate, multiple dose clinical trial [CW26] , investigators gave 116 people placebo or 500mg, 1g, 2g, and 4g of kratom, with a mitragynine concentration per gram that was higher than that of the FDA tolerability study. The researchers also looked at euphoria and feeling drunk. They found no more than one person reporting feeling euphoria per dosing group and in the placebo group. They found no people feeling drunk in the placebo or 500mg to 2g group but two in the 4g group. The researchers did not identify natural leaf kratom's effect on either marker as a concerning signal of addiction potential.

In their Eight-Factor Analysis, The Ohio Board of Pharmacy downplays these clinical trials for having only ~100 people. However, these placebo-controlled dose finding clinical trials have the highest internal validity of all study types. Instead, the Ohio Board of Pharmacy relies heavily on anecdotal information, including supposed personal observations that can never be verified from anonymous online chat groups. In conducting a thorough and balanced analysis, the Board should examine both clinical trials and other peer reviewed existing literature to compare how the effects of natural leaf kratom compare with those of prescription or illicit opioids.

The Ohio Board of Pharmacy points to the fact that select other countries and states in the United States have scheduled/banned natural leaf kratom products. However, they do not even acknowledge the fact that a number of states that have banned isolated, concentrated 7-OH products but have not banned natural leaf kratom products (as the FDA is recommending) and the other states that have simply regulated or not banned natural leaf kratom. They also inexplicably discount or ignore the fact that the vast majority of countries in the world are following the World Health Organization's position that natural leaf kratom does not meet the criteria for scheduling/banning. Notably, the Connecticut law cited by the Board is problematic in several respects. It included multiple substances, including natural leaf kratom, in the ban; was not discussed in committee; was not open for public comment, and was first brought up at the very end of the legislative session for a vote where the law referred to natural leaf kratom as *Mitragyna speciosa* (the Latin plant name) which could have confused legislators. This may be a rationale for natural leaf kratom to be excluded from scheduling in an upcoming legislative session of the Connecticut legislature.

Another thing the Ohio Board of Pharmacy relies on are quotes from individuals who posted online about harm they felt kratom caused is misplaced. Putting aside obvious issues with the credibility and veracity thereof, in the case of such anecdotal experiences, it is virtually

impossible to know whether the experiences refer to natural leaf kratom, concentrated mitragynine extracts, or isolated, concentrated 7-OH products. All of these products have been sold under the umbrella term “kratom” but they are characteristically different in important ways. Poison control centers did not even have 7-OH as its own code until the end of February 2025. Additionally, if anecdotal experiences are so important to the Ohio Board of Pharmacy, the Board’s selective use of quotes from those claiming addiction is inexplicable and ignores quotes from the large number of respondents who claim that natural leaf kratom products helped them move off more detrimental illicit drugs such as opioids and stimulants.

It is highly likely that the case reported [CW27] by the Ohio Board of Pharmacy where a free sample [CW28] started an alleged addiction was a 7-OH product and not a natural leaf kratom product given the stated marketing of manufacturers and distributors of 7-OH. As such this case is likely misattributed and incorrectly used as a datapoint to ban natural leaf kratom.

Users of Natural Leaf Kratom Seeking to Reduce Use of Substances of Abuse

Research, in fact, suggests that natural leaf kratom may be beneficial to those who are addicted to other substances. In a cross-sectional study [CW29] of 332 people who used natural leaf kratom for any reason, 59% used it as a substitute for heroin and methamphetamine. In another cross-sectional assessment, 961 patients [CW30] used kratom along with another substance of abuse specifically to manage their disorder. Only 5.2% of people still used the other substance within 6 months of starting kratom (94.8% stopped). Importantly, 83% of people stopped using the other substance of abuse for ≥1 year, 29% for 2-5yr, and 35% for >5 years. In a much larger cross-sectional study, [CW31] over 7,600 people were queried about why they used kratom. Overall, 2,352 people wanted to either stop or wean down an opioid they were addicted to and 4,811 had untreated pain. Importantly, 3,715 of 7,605 (49%) people reported eliminating their opioids or reducing their reliance on them.

Natural Leaf Kratom May Reduce Illicit Drug Adverse Events

Similarly, there is research indicating that natural kratom use may help to reduce adverse events associated with users’ abuse of other substances. For instance, there are three studies assessing the impact of kratom substitution on adverse events caused by illicit opioids. The first study [CW32] was a cross-sectional evaluation of 163 participants with a history of illicit opioid use that was replaced by natural leaf kratom use. Researchers found that natural leaf kratom substitution was associated with a decreased prevalence of slowed or stopped breathing (respiratory depression), physical pain severity, cravings, constipation, insomnia, depression, loss of appetite, decreased sexual performance, weight loss and fatigue associated with illicit opioid use.

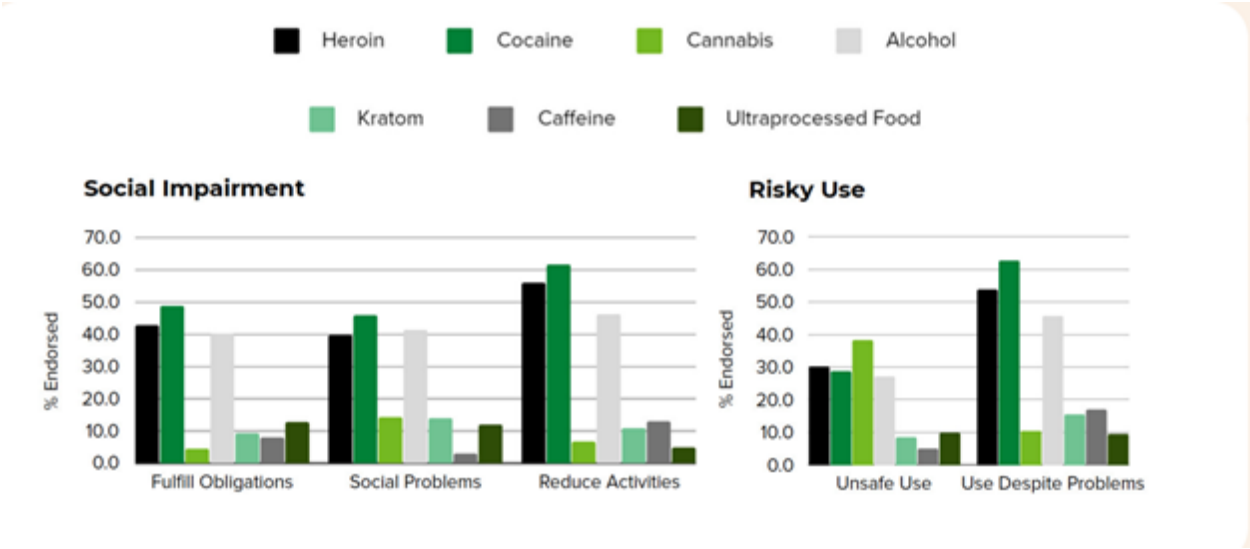
The next two cross-sectional studies were specifically focused on HIV risk behaviors (which are the same behaviors that cause hepatitis B and C infections as well as bacterial and fungal infections). In the first cross-sectional study [CW33] , 260 participants who attempted to substitute natural leaf kratom for illicit drug use were assessed. Participants reported a reduction in the illicit use of heroin, methamphetamine, amphetamine, cannabis, benzodiazepines, ketamine,

methadone, and alcohol after kratom initiation and a reduction in HIV risk behaviors such as injecting illicit drugs and sharing needles and syringes. In the second HIV risk cross-sectional study [CW34] , 32 HIV positive users dramatically reduced their illicit opioid injection and reduced sharing syringes and needles once they were using natural leaf kratom.

Natural Leaf Kratom May Better Allow People to Fulfill Societal Obligations

In addition, there is research indicating that natural leaf kratom use actually aids the users' societal functionality. There are three descriptive datasets assessing the ability of people to fulfill their daily obligations when using kratom. In the first descriptive study of 103 users of kratom [CW35] , 54% of users said that kratom helped them meet their daily obligations while only 3% felt that it impeded them meeting their daily obligations. The rest of the respondents felt the effects were more equivocal or did not express an opinion. In a new study [CW36] , 16 people reported a pronounced reduction in the frequency and quantity of alcohol use when they started using kratom to manage their issue. While alcohol affected their daily functioning, they reported that kratom did not do so.

An assessment [CW37] from the Global Kratom Coalition provides useful information about how people using illicit opioids fare versus those using natural leaf kratom or mitragynine extract products. Overall, 86% of people using heroin met the criteria for substance use disorder versus 29% for kratom. Of the population with a substance use disorder, 62% vs. 29% had a severe disorder (53.3% vs. 8.4% of the total) on heroin vs. kratom. The biggest differences between heroin use disorder and kratom use disorder were seen in the percentage of people unable to fulfill family, work, and societal obligations (42% vs. 9%), causing societal problems (40% vs. 12%), unsafe use practices (30% vs. 8%), and use despite problems (family, work, societal; 53% vs. 15%). People were less likely to have unsuccessful quitting attempts on kratom (73% vs. 33%), fewer cravings (62% vs. 30%), less tolerance (63% vs. 39%), and fewer withdrawals (60% vs. 33%) than with heroin. The dramatically more negative impact of cocaine and alcohol on people's ability to function than when using kratom also suggests that switching from these other substances of abuse to natural leaf kratom would provide societal benefits as demonstrated in Figure 1.



Factor 2. The Scientific Evidence of the Pharmacological Effect of the Substance.

The Ohio Board of Pharmacy relies on a quote from the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) to the effect that kratom and its related compounds are selective and full agonists of the μ-opioid receptor. The EMCDDA then stated the effects of kratom in humans are dose-dependent, with small doses producing a 'cocaine-like' stimulation while larger amounts cause 'morphine-like' sedative-narcotic effects.

These assertions seem to be provided for their sensationalism, not for their factual basis. Experts agree that mitragynine is a partial agonist of the mu-opioid receptor, not a full agonist like morphine. There are no "cocaine" like effects noted across any doses of natural leaf kratom in the FDA conducted study. Here is the list of observed adverse events showing comparability with placebo, especially at lower doses:

SOC [n(%)]	Kratom 1 g (N=6)	Kratom 3 g (N=6)	Kratom 8 g (N=6)	Kratom 10 g (N=6)	Kratom 12 g (N=6)	Pooled Placebo (N=10)	Pooled kratom (N=30)
Gastrointestinal Disorders	0	0	2 (33.3%)	1 (16.7%)	2 (33.3%)	2 (20%)	5 (16.7%)
Nervous System Disorders	1 (16.7%)	0	1 (16.7%)	3 (50%)	0	6 (60%)	5 (16.7%)
Psychiatric Disorders	0	0	1 (16.7%)	2 (33.3%)	0	1 (10%)	3 (10.0%)
Skin and Subcutaneous Disorders	1 (16.7%)	0	0	0	1 (16.7%)	0	2 (6.7%)
General Disorders	0	0	0	1 (16.7%)	1 (16.7%)	0	2 (6.7%)

These clinical trials support the preclinical in vitro and in vivo studies showing that any ‘morphine like’ sedative effects with mitragynine or natural leaf kratom are orders of magnitude less severe than morphine.

The Ohio Board of Pharmacy then again goes forward with anecdotal evidence to support their hypothesis without providing any of the relevant contrary information that I presented in Factor 1. That contrary data I provided is inherently methodologically stronger than that presented by the Ohio Board of Pharmacy. The Ohio Board of Pharmacy again only looks at negative anecdotal experiences and does not review the anecdotal evidence to suggest the beneficial effects of natural leaf kratom in reducing risks from other substances of abuse.

Factor 3: The State of Current Scientific Knowledge Regarding the Substance.

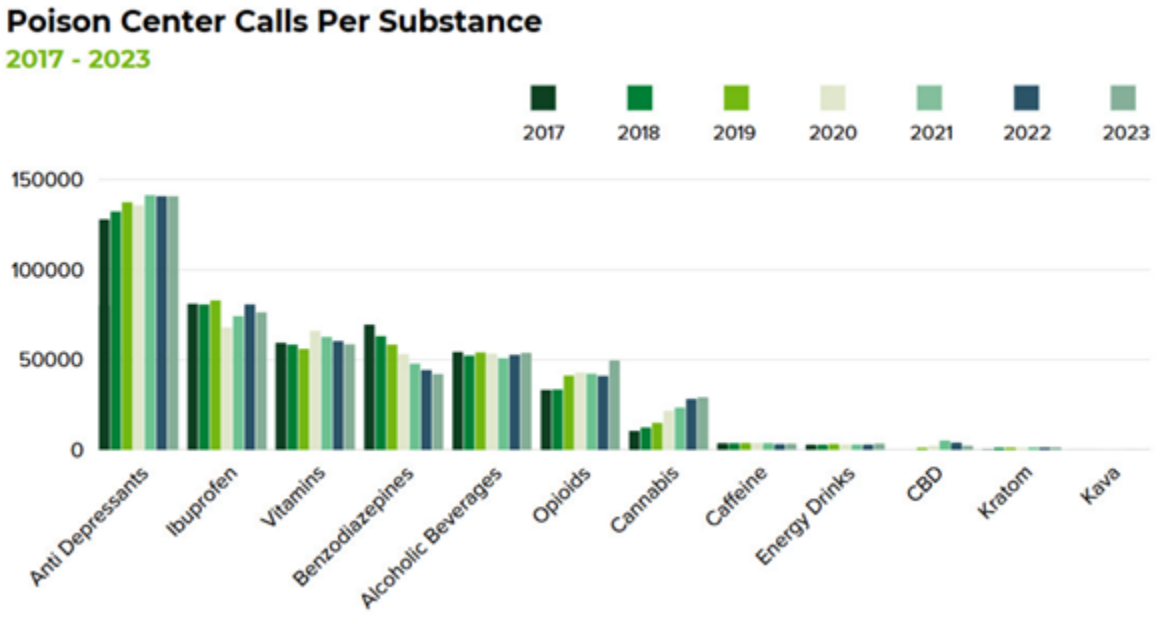
Again, the Ohio Board of Pharmacy is selectively picking information that only supports their apparently pre-conceived narrative without displaying the totality of the evidence and the relative strength and applicability of evidence essential to making scientifically-valid determinations. This leads to a biased conclusion, not one that is prudent and scientifically-accurate.

Factor 4: The History and Current Pattern of Abuse.

The Ohio Board of Pharmacy’s primary justification for scheduling natural leaf kratom, under this prong of its 8-factor analysis, is that some of the products are enriched with isolated, concentrated 7-OH, have heavy metal contamination, or otherwise have misleading marketing or mislabeling. These are real issues with some producers and sellers, but it does not change the inherently-low risk associated with use of unadulterated products made according to good manufacturing practices. I have personally written numerous articles [CW38] on adulteration of dietary supplements [CW39]. Such adulteration is, unquestionably, a major issue with natural products in the United States. However, if all dietary supplement products were scheduled because a few bad actors were not following the Dietary Supplement Health and Education Act, we would lose the benefit of an exceptional number of natural products. All these quality control issues can be dealt with through a Kratom Consumer Protection Act that is meaningfully enforced. The KCAC has many best practices that can support the Ohio Board of Pharmacy in reducing the risk of unwanted adulteration without banning a substance that many people believe has given them back the ability to function and reduced risks associated with illicit opioid use like respiratory depression and blood borne diseases.

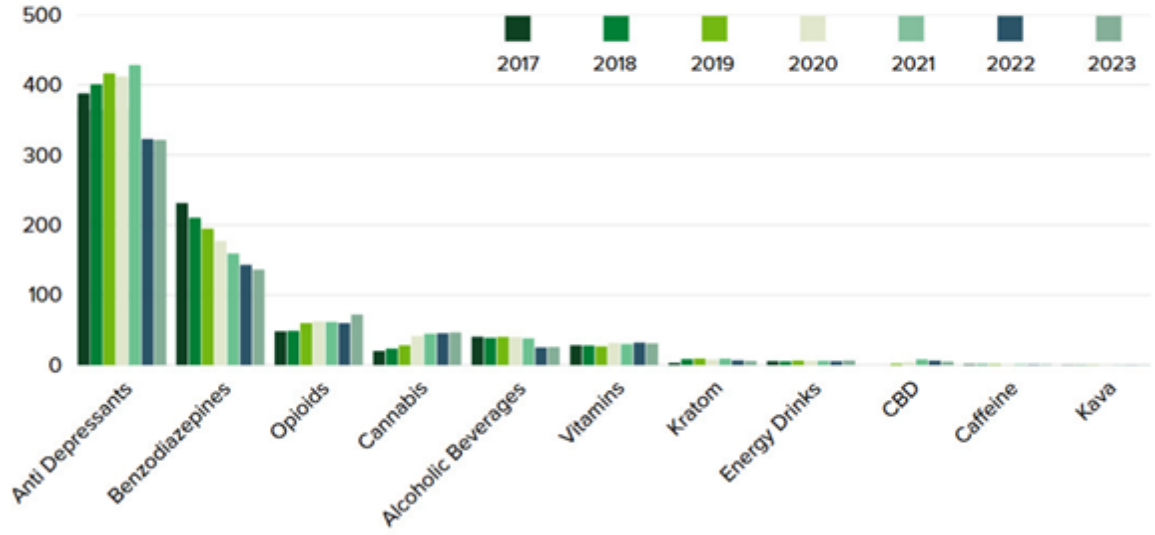
The poison control center data that the Ohio Board of Pharmacy presents in this section is simply the number of calls from all kratom related products. Until February 2025, the poison control dataset did not have a separate category for 7-OH products. Thus, the reported data is tainted with 7-OH cases. Additionally, and more importantly, there is no denominator for how many users there were, and no other products are included for the sake of comparison.

However, there is an available assessment [CW40] of the calls per 100,000 users of kratom versus other commonly used substances, including substances of abuse. Below I provide several figures from that analysis. The first reflects the number of calls with no denominators. In the second, the number of calls per 100,000 users is included. In the third, the number of deaths per 100,000 users is presented. In all, this data makes clear that the number of calls and deaths are less for kratom than the dangerous substances of abuse for which people routinely substitute kratom. It would behoove the Ohio Board of Pharmacy to explore the assumptions and provide some comparative risk assessment versus opioids and alcohol, rather than providing only simple case numbers that cannot be placed into context for public health decision making.



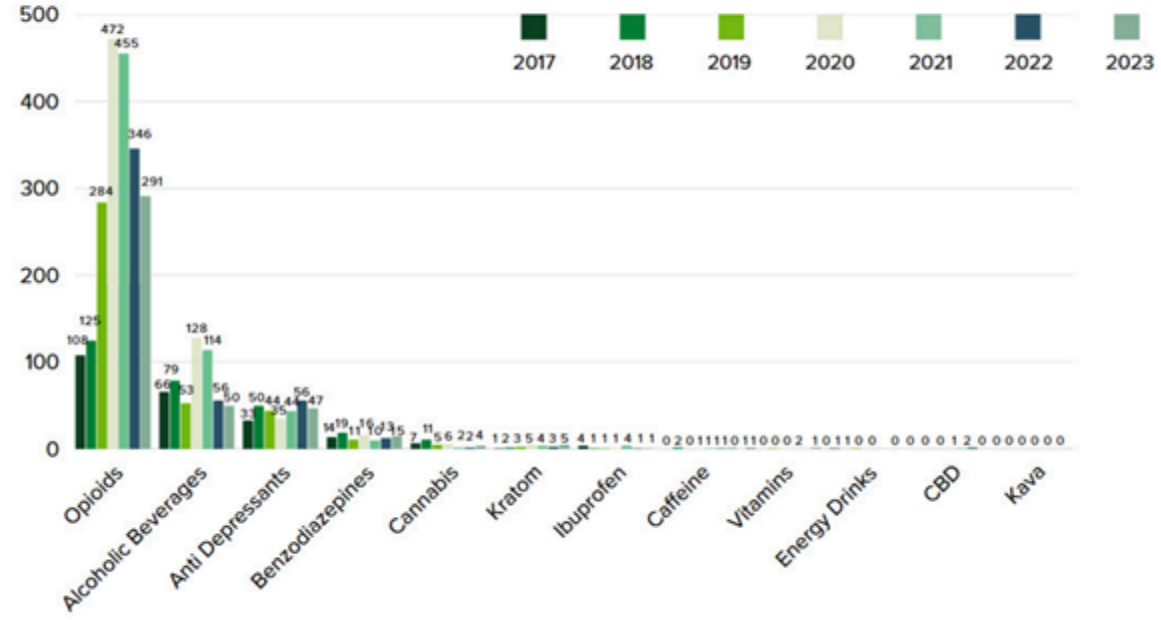
Poison Center Calls Per 100K Users

2017 - 2023



Poison Center Calls Deaths Per Substance

2017 - 2023



Factor 5: The Scope, Duration, and Significance of Abuse.

The Ohio Board of Pharmacy refers back to their selected datasets in Factor 1 to justify the conclusion that kratom meets the criteria here. For the reasons described above, however, the numerous shortcomings in the Board's analysis of Factor 1 are equally fatal to its identical analysis for purposes of Factor 5.

Factor 6: The Risk to the Public Health.

Here the Ohio Board of Pharmacy relies on data indicating that select companies have marketed their products in an unethical or illegal way. Something that could be controlled via regulation and not scheduling. They refer again to anecdotal evidence without also providing anecdotal evidence to the contrary and comparatively assessing them. They refer to 92 cases of liver damage associated with kratom use but provide no denominator for which to determine the level of risk. But, if there are tens of millions of users around the world who use kratom therapy chronically, a certain number of cases of liver toxicity will occur extraneously to kratom use. What is the true risk and how much of that risk can be avoided by requiring independent third-party testing for heavy metals? The Board does not even ask, let alone try to answer, these crucial questions that are part of any truly-objective and scientific analysis.

Further, the Board provides purported death data in Ohio from “kratom” but does not separate deaths from natural leaf products versus mitragynine extracts or 7-OH products. Even with these telling limitations of the dataset, the Board found only 0.9% of overdose deaths related to kratom and 85.1% of them involved polysubstance abuse. This doesn’t mean that kratom was not a cause or a co-contributor to the harm or death. But, it also doesn’t mean it was. Indeed Kratom may be an innocent bystander in some or many of these cases. The data provided by the Board cannot yield any true sense of the relative harm that kratom is providing versus other substances of abuse.

The Board again brings up heavy metal contamination, which is a real concern and one that I have personally highlighted in the past [CW41]. However, this is not an insurmountable issue that warrants the banning of an entire substance. Rather, it is an issue that could be fixed with third-party analysis. If food or supplement categories were banned because of the potential risk of heavy metal contamination, we would lose all rice products, apples, baby food [CW42], cinnamon, protein supplements [CW43], and many other products.

The Board also brings up the number of children who used kratom in the past year in the United States, putting the number at 45,000. However, that number is very small when compared to many substances of abuse. For example, in this dataset, 134 million used alcohol, 48 million smoked, 28 million vaped, and 44 million used cannabis[CW61]. The Board also fails to differentiate between natural leaf kratom, mitragynine extracts, or isolated, concentrated 7-OH products. Natural leaf can cause gastrointestinal issues given the fibrous vegetal matter that is

otherwise removed when making extracts and when mitragynine is extracted and turned into isolated, concentrated 7-OH products. Those adverse gastrointestinal effects, and users' desire to avoid them, provide an additional barrier to the overuse of natural leaf kratom that does not exist as to other, enhanced mitragynine-containing products.

When assessing the risk to the public, the risk should be determined by the balance of the potential for risk versus the potential for benefit. The Board did not do that here.

Factor 7: The Potential of the Substance to Produce Psychic or Physiological Dependence Liability.

As reflected in my discussion of Factor 1 above, there is some potential to induce psychic and physiologic dependence with prolonged use of natural kratom leaf products. However, given the nature of the population using natural leaf products for pain relief in lieu of opioids or to substitute for substances of abuse that are already negatively impacting people's ability to function, the balance of benefits to harms with the different aspects of addiction and tolerance for natural leaf kratom needs to be compared against those associated with the substances of abuse that the same people are using or are likely to use otherwise.

Factor 8: Whether the Substance is an Immediate Precursor.

The multi-cannabinoid and terpene containing natural hemp leaf is not a precursor to THC, even though the CBD in the cannabis can be chemically manipulated in a laboratory to form THC. Similarly, natural leaf kratom is not just mitragynine, it is a multi-alkaloid substance with a variety of biological actions at multiple receptor types. While some mitragynine is converted into 7-OH in the body when natural leaf kratom is ingested, all of the pharmacologic and clinical evaluations of mitragynine or natural leaf kratom described above have accounted for that conversion built in as part of the study. This fact does not change the risk profile for natural leaf kratom. Specifically, mitragynine to 7-OH conversion does not change the comparative risk profile of natural leaf versus isolated, concentrated 7-OH products (lower for mitragynine and higher for 7-OH). Research clearly shows that the antinociceptive effects of mitragynine are not driven by the conversion [CW44] to 7-OH and suggests a much more complicated pharmacologic picture [CW45] .

Comparative Risk is an Important Consideration

I believe the Ohio Board of Pharmacy failed to fully or adequately evaluate all of the scientific data regarding natural leaf kratom use or to properly engage in a comparative risk/benefit assessment of kratom use in the larger context of widespread opioid abuse. In this regard, a few general observations merit additional consideration.

Prescription and Illicit Opioid Use Disorder is a poorly Addressed Major Issue

According to Avalere Health [CW46], 6 million Americans have an opioid use disorder and cost the US almost $3.98 trillion dollars in 2024. This was driven by lost productivity (individual, corporation, family), healthcare costs, criminal justice costs, societal costs (social services for individuals and families), lost money or property stolen, substance treatment costs, and lost tax revenue. For comparison, the CDC estimates that the economic toll of heart attacks and strokes totals $254 billion in healthcare costs and $168 billion in lost productivity per year. This is because heart disease usually manifests later in life and does not strain public health services and, especially, the criminal justice system to the same extent as opioid abuse.

When lifetime direct costs and specific factors like reduced quality of life and lifespan are factored in, the total lifetime cost to the United States per person with uncontrolled opioid use disorder is $532,000. The use of behavioral therapy with FDA approved therapies like methadone or buprenorphine can save $271,000 to $295,000 per person over a lifetime by allowing people with opioid use disorder to live longer and more productive lives.

Unfortunately, in the United States [CW47] only 22.5% of people are receiving any medication to treat their opioid use disorder. People with a family income below $50,000, males, non-Hispanic whites, and people living in metropolitan areas were more likely to access care. In another study of unhoused (homeless) people in California [CW48], only 6.7% of people were receiving care for substance use disorders. However, 21.2% desired such care but could not access it. All of this supports the conclusion that; vulnerable people with opioid use disorder without sufficient healthcare coverage or who are unhoused are at high risk of continuing illicit opioid use and incurring the immense personal and societal costs associated with it.

Below, I identify several categories where opioid use disorder negatively impacts public health. Although leaf kratom should not be used by people who can access and afford FDA approved options such as methadone, buprenorphine, or naltrexone, unless those people could not access those therapies, did not experience benefits or were intolerant of the adverse events from therapy, the data indicates that leaf kratom can serve a positive role in addressing opioid use disorder.

Adverse Health Outcomes from Opioid Use Disorder

Opioid Overdose Deaths

According to the CDC, [CW49] the United States has made tremendous progress in reducing opioid related deaths. Overdose deaths involving opioids decreased from an estimated 83,140 in 2023 to 54,743 in 2024.

· This drop is largely attributed to a public-private partnership focused on dramatically increasing the accessibility of naloxone in communities and training first responders and community members themselves.

· Increased accessibility to fentanyl test strips is also thought to have reduced inadvertent exposure to fentanyl in illicit or counterfeit products, reducing deaths.

While tremendous progress has been made in deaths, another important factor in reducing the public health risk from illicit opioids is to move people from using illicit opioids to viable alternatives. There is strong data to support FDA approved options such as methadone, buprenorphine, and naltrexone as an illicit opioid substitute. There is also descriptive data from surveys and anecdotal experiences to support the use of whole leaf kratom for this purpose.

One important distinction between whole leaf kratom's most abundant alkaloid called mitragynine versus potent traditional semisynthetic or synthetic opioids is that mitragynine does not induce dose-dependent reductions in breathing in preclinical studies as we described with study specifics in another position statement[CW50] . This is bolstered by years of anecdotal data and clinical trial data for both single dose [CW51] and multiple dose (15 days) [CW52] use at doses up to 12g and 4g, respectively.

Hospitalizations and Severe Brain Damage

The CDC estimates that [CW53] from 2010 to 2020, for every fatal opioid overdose, there were 15 non-fatal ones. That puts the number of opioid overdoses at over a million a year. While recent progress has been made in reducing the number of deaths due to enhanced naloxone availability, that availability likely doesn't reduce the number of overdoses that occurred.

In 2024 [CW54], the CDC reports that non-fatal opioid overdoses cause 43.2 emergency department visits and 17.7 hospital admissions per 100,000 persons. Assuming 330 million people in the United States, this is approximately 142,560 emergency visits and approximately 58,410 hospital admissions due to opioid overdose in the US annually. In a separate evaluation of patients [CW55] hospitalized at 162 hospitals in 44 states for opioid overdose between 2009 and 2015, approximately 17% of patients admitted to the hospital required intensive care (or about 9,930 intensive care unit admissions based on a total US population of approximately 330 million people). Of the patients with intensive care unit admission:

- 8% experienced anoxic brain injury (or about 794 anoxic brain injuries annually for based on a total US population of approximately 330 million people)
    - Developing anoxic brain injury [CW56] can have immense societal and family implications for those that must provide ongoing care for patients who cannot feed or care for themselves

- 25% experienced aspiration pneumonia (or about 2,483 aspiration pneumonias annually based on a total US population of approximately 330 million people)
- 15% developed severe muscle breakdown called rhabdomyolysis (or about 1,490 rhabdomyolysis cases annually based on a total US population of approximately 330 million people)

Viral infections

Injecting illicit drugs annually causes [CW57] the following new viral infections:

- 2,300 new HIV infections
- 35,048 new Hepatitis C infections (70% develop chronic disease and ~approximately 15% of those develop liver failure, liver cancer, or liver cirrhosis)
- 3,312 new Hepatitis B infections (3% develop chronic disease which can cause aforementioned liver issues)
- 297 new Hepatitis A infections (approximately 1% develop severe issues)

These infections are not limited to newly infected people but can spread to others not abusing injected drugs through sexual contact or pregnancy.

Bacterial and Fungal Infections

Over a 10-year period [CW58] , there was almost a doubling of admissions for serious infections (from 3,421 in 2002 to 6,535 in 2012). This included a:

- 1.5-fold increase in heart valve infections (infective endocarditis)
- 2.2-fold increase in bone infections (osteomyelitis)
- 2.6-fold increase in spinal epidural abscesses.

From 1993 to 2010, the national incidence of skin and soft tissue infections due to injected illicit opioids was assessed (<4 per 100,000 in 1993 to >9 per 100,000 in 2010). This was even before the use of xylazine in illicit opioid products which by itself compromises the ability of the immune system to fight skin infections.

Homelessness

In an assessment [CW59] of homeless or unhoused people in California

- 10.4% of people were regular opioid users and 3.7% were occasional opioid users.
- If that is consistent with 650,000 unhoused people nationwide, that would be 91,650 unhoused opioid users in the US.

Reasons Why People Don’t Access FDA Approved Options

- There are many reasons people with opioid use disorder do not seek care.
- They may not have insurance coverage for care or have high-deductible plans they cannot afford.
- They may not have a healthcare provider.
- They may not have reliable transportation or the ability to make scheduled appointments.
- They may not want to disclose to loved ones or employers they have an opioid use disorder
- They might not have benefitted from available FDA approved options.
- They might have experienced intolerable adverse effects from available FDA approved options.

As such, there is a great need for vulnerable people to use an accessible and affordable option if the alternative is continued use of illicit opioid products. In a public health scenario where FDA approved options are inaccessible or have failed many people, the decision to try natural leaf kratom instead of continuing illicit opioids could be positive. Making natural leaf kratom illegal could drive people to continue using illicit opioids or those who felt well managed on kratom and were functioning within society to move back to illicit opioids. This is the piece that the FDA and the Department of Health and Human Services understands and it prudently impacted their decisionmaking.

Regulation is a Viable Alternative to a Ban

The KCAC knows that natural kratom use is not risk free and public health protections are needed. We have numerous position statements [CW60] on how to regulate natural leaf kratom products to reduce public health risks without denying vulnerable people access to the products. One of the most important is pre-registration of products where the products need to provide a photo of their packaging and dosage form. If there is something that would appeal to children, the product can be denied. If the product is not properly labeled, it can be denied. If the product is overly concentrated with non-intuative serving sizes, the product can be denied. If the product is in a form that is not swallowed, such as vape products, sublingual or buccal, or transdermal products, they can be denied. In the pre-registration process, independent third party laboratory testing must be uploaded showing a lack of adulteration and contamination. If a certificate of analysis isn't uploaded or an issue is found, it can be denied. For example, if the lab testing shows an unnatural level of 7-OH, mitragynine pseudoindoxyl, or any synthetic alkaloid, it can be denied. These safety checks before allowing a product to be sold can allow enforcement since the enforcer can simply go to a store and any product that is not preregistered can be seized and sellers fined. These measures coupled with statewide purchasing bans for consumers under 21 years of age can reduce societal risk.

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January 28, 2026

Re: Comments of Botanic Tonics, LLC in
Ohio Board of Pharmacy Scheduling Proceedings
Proposed Rule 4729.9-1-01.1 (Mitragynine-Related Compounds);
Proposed Rule 4729.9-1-01.2 (Mitragynine)

Dear Board of Pharmacy:

I represent Botanic Tonics, LLC ("BT"), manufacturer of a whole kratom leaf (whole kratom leaf infused in water) dietary supplement, *feel free* CLASSIC® ("Feel Free"). BT submits this comment for inclusion in both above-referenced proceedings. By it, BT endorses both the argument presented and the conclusions reached in the comments filed in each respective proceeding by Global Kratom Coalition (GKC). BT therefore urges the Board to adopt GKC's recommendations in its comments.

As explained and corroborated in the GKC comments, the applicable science and law favors the scheduling of concentrated kratom alkaloid isolates ("synthetics"), but not the scheduling of natural kratom leaf ("kratom leaf"). The former (the synthetics) are indistinguishable from opioids in their addictive potential and risk of injury. The latter (kratom leaf) have been proven in clinical trials not to present any significant or unreasonable risk of illness or injury, including the risk of severe addiction.

BT has a direct and substantial interest in each of these proceedings. BT currently sells Feel Free in Ohio through distributors. Its annual revenues from the sale of Feel Free exceed $5 million. If the Proposed Rules are adopted in a way that would cause kratom leaf to be scheduled along with the synthetics, the effect would be to cause BT to suffer a complete loss of revenues, as it would no longer be able to sell Feel Free in Ohio.

Sincerely,

Marion H. Little

1075947

Cleveland Clinic

January 22, 2026

State of Ohio Board of Pharmacy
77 South High Street, 17th Floor
Columbus, OH 43215

Re: Rules 4729:9-1-01.1 and 4729:9-1-01.2

Submitted Via: RuleComments@pharmacy.ohio.gov

Cleveland Clinic is a not-for-profit, integrated healthcare system dedicated to patient-centered care, teaching, and research. Cleveland Clinic Health System operates 23 hospitals with more than 6,700 staffed beds, including a main campus near downtown Cleveland and 15 Northeast Ohio regional hospitals, as well as 280 outpatient locations. Cleveland Clinic employs over 5,700 physicians and researchers, and 16,800 nurses. Last year, our system cared for 3.5 million patients, including 14.1 million outpatient visits and 333,000 hospital admissions and observations. Below are our comments on the above-captioned rule.

Our prior correspondence to the Board has consistently highlighted the significant risks posed by Kratom and its related compounds. As we have noted in earlier letters, these substances have been associated with serious adverse health effects, including addiction, withdrawal symptoms, and, in some cases, life-threatening toxicity. The unpredictable potency and lack of regulation further exacerbate these risks, posing particular dangers to vulnerable populations, including adolescents and individuals with substance use disorders.

We appreciate the Board's efforts to address the growing concerns associated with mitragynine-related compounds and strongly support proposed Rule 4729:9-1-01.1 which classifies these substances as Schedule I controlled substances. The inclusion of compounds such as 7-hydroxymitragynine (7-OH), mitragynine pseudoindoxyl (MP), dihydro-7-hydroxy mitragynine (MGM-15), and 7-acetoxymitragynine is both prudent and necessary to safeguard public health.

Additionally, we fully support the Board's proposed Rule 4729:9-1-01.2, which bans the sale of mitragynine, the primary psychoactive alkaloid found in the Mitragyna speciosa plant, commonly known as kratom. However, we are concerned that criminalizing the personal possession of these products will create hesitancy for people to seek care. Therefore, we urge the Board to develop language that discourages the possession of these products by eliminating the sale and marketing of such products in legitimate businesses rather than turning possessors into criminals.

By enacting this rule, the Board is taking an important step to protect Ohioans from the significant health risks associated with kratom use. The prohibition of mitragynine aligns with our mission to promote patient safety and uphold the highest standards of care in our community. By banning the sale of these substances, the Board is taking proactive steps to prevent their misuse and potential harm within our communities.

We support the Board's comprehensive approach to regulating mitragynine-related compounds, as it aligns with our commitment to patient safety and public health. The Cleveland Clinic has long advocated for evidence-based policies to address emerging threats posed by novel psychoactive substances. The proposed rule reflects a thoughtful and measured response, and we commend the Board for prioritizing the well-being of Ohioans. We urge the Board to move forward with these much-needed controls and reiterate our willingness to provide additional information or support as needed.

Thank you for conducting a thoughtful process that allows us to provide input on such important issues and for your consideration of our feedback. Should you need any further information, please contact me.

Sincerely,

David Streem, MD
Medical Director
Alcohol and Drug Recovery Center

COMMENTS OF THE GLOBAL KRATOM COALITION
Re: Proposed Rule 4729:9-1-01.2 (Mitragynine)
January 28, 2026

Global Kratom Coalition ("GKC") hereby responds to the Ohio Board of Pharmacy's January 7, 2026 request for Comment regarding proposed rule 4729:9-1-01.2, which would classify all mitragynine regardless of amount or source as a Schedule I controlled substance.

I. Identity of Commenter.

GKC[1] is a science-based education and advocacy non-profit organization that engages researchers, regulators, and stakeholders in evidence-based assessment of kratom and in advocating correspondingly appropriate kratom regulation. These comments principally concern **natural kratom leaf** products, i.e., products comprised of dried, crushed, or pulverized leaf of mitragyna speciosa in its botanical form.

II. Summary Distinctions Between Synthetics and Natural Kratom Leaf.

Natural kratom leaf is a complex nutritional product, comprised of approximately 40% to 50% fiber, with the fibrous leaf material containing alkaloids at approximately 2% by dried weight, but also a complex mix of alkaloid modulating substances consisting of antioxidants, flavonoids, tannins, and other phytochemicals, which make up 25% of the weight of the leaf material. The balance of **natural kratom leaf** is water and other plant matter.[2][3] The peer-reviewed clinical trial scientific evidence concerning **natural kratom leaf**, including the FDA's own Single Ascending Dose clinical trial,[4] establishes no evidence of significant or unreasonable risk of illness or injury from consumption of kratom leaf, across all dosing levels, including no evidence of severe addiction[5].

Synthetic kratom is entirely different from **natural kratom leaf**. Termed **"synthetics"** because they consist of **concentrated alkaloid isolate derivatives** of the kratom plant, these substances are different in composition, structure, and biochemical effects from **natural kratom**

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1 https://globalkratomcoalition.org/

2 Chanjula, P.; Wungsintaweekul, J.; Chiarawipa, R.; Rugkong, A.; Khonkhaeng, B.; Suntara, C.; Cherdthong, A. Effect of Feed Supplement Containing Dried Kratom Leaves on Apparent Digestibility, Rumen Fermentation, Serum Antioxidants, Hematology, and Nitrogen Balance in Goats. Fermentation 2022, 8, 131. https://doi.org/10.3390/ fermentation8030131

3 Phesatcha, K.; Phesatcha, B.; Wanapat, M.; Cherdthong, A. Mitragyna speciosa Korth Leaves Supplementation on Feed Utilization, Rumen Fermentation Efficiency, Microbial Population, and Methane Production In Vitro. Fermentation 2022, https://doi.org/10.3390/ fermentation8010008

4 FDA Single Ascending Dose clinical studies, as reflected in ClinicalTrials.gov records

5 2026, Huestis, Marilyn A. PhD*; Bothmer, John PhD†; Hudzik, Thomas PhD‡; Henningfield, Jack E. PhD§; Swift, Sibyl PhD, Safety and Tolerability of Single and Multiple Daily Oral Doses of Dried Kratom Leaf Powder in a Randomized Trial in Healthy Volunteers

leaf and should not be viewed as indistinguishable from kratom leaf.[6] By isolating, concentrating and chemically altering single alkaloids from the kratom plant and separating them from all modulating substances naturally occurring in the plant, **synthetics** are manipulated to be powerful opioids, as FDA found in the case of **synthetic** 7-hydroxymitragynine concentrates. By contrast, FDA's science assessment concluded that 7-OH when naturally occurring in kratom leaf is a de minimis constituent that "occurs in botanical kratom in amounts no more than 0.01-.04 percent by dry weight"[7] and is beneath levels associated with adverse physiological effects in the body when consumed. The evidence concerning the **synthetics** reveals them to be transformed from innocuous to toxic opioids, as the FDA found concerning **synthetic** 7-hydroxymitragynine concentrates,[8] and to be appropriate candidates for scheduling.[9]

III. Overall Summary.

By statute, the Ohio Board of Pharmacy operates under a comprehensive framework that establishes legal and scientific standards for the scheduling of controlled substances. Under Ohio Revised Code § 3719.44, the Board must consider eight mandatory criteria when making scheduling determinations, including potential for abuse, scientific evidence of pharmacological effects, current scientific knowledge, history and pattern of abuse, scope and significance of abuse, risk to public health, potential for dependence, and whether the substance is an immediate precursor. See R.C. § 3719.44. BOP scheduling orders are subject to judicial review pursuant to Ohio Revised Code § 119.12.

Ohio Board of Pharmacy determinations must mirror federal law and policy and, to the extent that they deviate from federal law and policy, invite invalidation pursuant to federal pre-emption doctrine under the Supremacy Clause of the United States Constitution, Article VI, Clause 2.

In this instance, the proposed scheduling of all mitragynine lacks necessary and sufficient tailoring to ensure that the Board of Pharmacy scheduling order is targeted to schedule mitragynine in the form and concentration that satisfies the eight factor analysis and presents serious addiction and injury risk. As currently proposed, the Board of Pharmacy scheduling order would include **natural kratom leaf**, which as the published peer-reviewed clinical trial scientific evidence presented here confirms, does not present significant or unreasonable risks of illness or injury to consumers. Although **synthetic** 7-hydroxymitragynine ("7-OH") has been recommended by the FDA to the DEA for scheduling as a Schedule I controlled substance, **natural kratom leaf** has specifically not been recommended by the U.S. Food and Drug Administration to the U.S. Drug

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6 Grundmann, O., McCurdy, C.R., Sharma, A., & Smith, K. (2024). Statement on 7-hydroxymitragynine and mitragynine pseudoindoxyl products. June 11, 2024.

7 The FDA 7-Hydroxymitragynine (7-OH): An Assessment of the Scientific Data and Toxicological Concerns Around an Emerging Opioid Threat:

8 U.S. Food and Drug Administration, Hiding in Plain Sight: 7-OH Products

9 FDA communications (2025) distinguishing natural kratom leaf from concentrated synthetic 7-hydroxymitragynine products

Enforcement Administration because after a thorough safety review was deemed by FDA Commissioner Makary "not of agency concern." See here.

Consistent with the scientific evidence, the scheduling policy of the U.S. Food and Drug Administration, and the requisite standard for analysis under Ohio Revised Code § 3719.44, the Board of Pharmacy should exclude **natural kratom leaf** from its scheduling order, as did FDA, and should proceed with the scheduling under Schedule I of all **synthetics**, i.e., all isolated alkaloid concentrates of the kratom plant, of which concentrated 7-hydroxymitragynine is one.

The Board of Pharmacy proposed rule relies on evidence drawn from extracts, tablets, isolates and other engineered delivery formats, while applying those findings to mitragynine generally, without identifying serving size, formulation, or botanical context.

The available scientific evidence, including human safety data, pharmacokinetic studies, toxicological assessments, and population-level observations, does not support treating **natural kratom leaf** as a Schedule I substance.[10] Where risk signals appear in the literature, they are consistently associated with **synthetics** or with polypharmacy (wherein subjects consume not only kratom products but also other narcotics, thus preventing a causal nexus to kratom alone).

IV. Prior Scheduling and Safety Determinations.

The regulatory treatment of kratom leaf has been repeatedly examined over the past decade by federal, international, and academic bodies. That record reveals repeat decisions not to schedule **natural kratom leaf**.

2016–2018 - The **U.S. Drug Enforcement Administration (DEA)** initiated emergency scheduling proceedings related to kratom. Following scientific review and extensive public input, those proceedings were withdrawn and no scheduling action was taken.[11]

2018 - The **World Health Organization (WHO)** Expert Committee on Drug Dependence conducted an international review and declined to recommend kratom for international control, instead recommending continued surveillance.[12] That same year, Henningfield et al. published an updated eight-factor analysis concluding that **natural kratom leaf** did not meet the statutory criteria for Schedule I classification and recommending regulation rather than prohibition[13].

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[10] Henningfield, J.E. et al., Abuse potential of kratom according to the 8 factors of the Controlled Substances Act, Drug and Alcohol Dependence (2018)

[11] U.S. Drug Enforcement Administration, Withdrawal of Notice of Intent to Temporarily Place Mitragynine and 7-Hydroxymitragynine into Schedule I, 83 Fed. Reg. 30339 (July 2, 2018)

[12] World Health Organization Expert Committee on Drug Dependence, Forty-First Report of the ECDD, WHO Technical Report Series 1026 (2019)

[13] Henningfield, J.E. et al., Abuse potential of kratom according to the 8 factors of the Controlled Substances Act, Drug and Alcohol Dependence (2018)

2022–2024 - The **U.S. Food and Drug Administration** (FDA) conducted a Single Ascending Dose (SAD) Clinical trial that showed **natural kratom leaf** is tolerable in humans at all dose levels.[14]

2022–2025 - During this period, the scientific record evaluating **natural kratom leaf** expanded substantially. As reflected in peer-reviewed publications now at least eighteen human clinical studies have been published examining **natural kratom leaf** or leaf-equivalent preparations, including studies evaluating safety, tolerability, pharmacokinetics, and drug–drug interaction potential. These studies were conducted in controlled settings and published in peer-reviewed scientific journals, further distinguishing **natural kratom leaf** from substances typically classified as Schedule I.

2024 - The American Herbal Products Association maintained its existing botanical safety classification for **natural kratom leaf**, continuing to treat it as a non-high-risk botanical based on available evidence.[15]

2025 - Federal agencies, including FDA, HHS and DEA, publicly distinguished **natural kratom leaf** from concentrated or synthetic 7-hydroxymitragynine products, reflecting a narrowing of regulatory concern toward non-leaf derivatives.[16]

2025–2026 - Against this backdrop, the Ohio Board of Pharmacy has proposed Schedule I classification of mitragynine based on an 8-factor analysis that does not distinguish between naturally occurring mitragynine in kratom leaf and mitragynine present in chemically modified derivatives.

This chronology is relevant to the Board's evaluation of proportionality, scientific consistency, and adverse impact under Senate Bill 2, as it reflects repeated scientific review in which categorical scheduling of **natural kratom leaf** was considered and rejected.

V. Comparison of the Board's 8-Factor Assessment and the Henningfield 8-Factor Analysis including the 2026 update.

Ohio law requires consideration of the same eight statutory factors that have been evaluated repeatedly by federal, international, and academic bodies when assessing whether **natural kratom leaf** warrants Schedule I controls. Those prior evaluations, most notably the comprehensive 2021 eight-factor analysis conducted by Henningfield et al., reached a consistent conclusion that

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[14] FDA Single Ascending Dose clinical studies, as reflected in ClinicalTrials.gov records

[15] American Herbal Products Association (AHPA). Botanical Safety Handbook, 3rd ed., entry for Mitragyna speciosa. Silver Spring, MD: American Herbal Products Association; updated 2024

[16] FDA communications (2025) distinguishing natural kratom leaf from concentrated synthetic 7-hydroxymitragynine products

natural kratom leaf does not warrant Schedule I classification.[17] Presumably this same kind of consideration led Governor DeWine to exclude kratom in its "vegetation form" (i.e., **natural kratom leaf**) from his emergency scheduling order.

On January 24, 2026, Henningfield et al. submitted an updated eight-factor analysis to the Ohio Board of Pharmacy prepared specifically to inform the Board's current deliberations. That updated analysis applies the same eight statutory factors required by Ohio Revised Code § 3719.44 and evaluates kratom, mitragynine, and 7-hydroxymitragynine as distinct substances rather than as a unitary drug category. Consistent with prior federal and international reviews, the Henningfield et al. updated analysis concludes that **natural kratom leaf,** and mitragynine as it occurs in **natural kratom leaf,** do not meet the statutory criteria for Schedule I classification, while concentrated 7-hydroxymitragynine does (**Exhibit 1**).

In terms of abuse potential, pharmacology, and scientific knowledge, the Henningfield et al. analysis evaluates mitragynine in the context of **natural kratom leaf** as consumed, drawing on functional outcomes, receptor signaling behavior, dose-response characteristics, and available human data. The analysis recognizes that mitragynine differs substantively from classical opioids in its pharmacological profile, including partial agonist activity and the absence of respiratory depression at leaf-equivalent exposures.

The Board's assessment evaluates mitragynine as a unitary drug substance divorced from botanical form. The analysis repeatedly references kratom extracts, beverages, tablets, and high-potency commercial products as evidence of abuse potential and harm, without establishing that those products are the same in composition, structure, and biochemical effect as **natural kratom leaf**, which they are not.

The Henningfield et al. analysis situates **natural kratom leaf** use within decades of documented use in the United States without evidence of demonstrable harm or population-level impacts characteristic of Schedule I substances. The Board's assessment places disproportionate weight on anecdotal and self-reporting sources that are not scientific, are not reliable, and do not establish prevalence, causation, or representativeness.

Regarding public health risk and dependence liability, the Henningfield et al. analysis acknowledges that **natural kratom leaf** may produce a degree of physical dependence in some users but characterizes that dependence as mild to moderate and distinct from serious, compulsive use patterns associated with Schedule I substances and with the **synthetics**. It also recommends that regulations should prohibit products with 7-OH concentrations greater than occur in **natural kratom leaf**. The Board's assessment presently relies heavily on anecdotal reports, self-reported

[17] Henningfield JE, Wang DW and Huestis MA (2022) Kratom Abuse Potential 2021: An Updated Eight Factor Analysis. Front. Pharmacol. 12:775073. doi: 10.3389/fphar.2021.775073

testimonials, media accounts, and online forum excerpts, none of which are scientific, statistically significant, establish prevalence, causation, or representativeness for **natural kratom leaf**.

Mitragynine in **natural kratom leaf** is not an immediate precursor to any controlled substance. The Henningfield et al. analysis explicitly recognizes that fact. While concentrated isolated mitragynine can be chemically transformed into other compounds under laboratory conditions, the Board does not identify any evidence that **natural kratom leaf** functions as a precursor in commerce or consumer use.

There is a clear divergence between the Board's assessment and the Henningfield et al. eight-factor analysis in evidentiary framing and product definition. When the statutory factors are applied to **natural kratom leaf**, prior reviewers reached consistent conclusions that do not support **natural kratom leaf** Schedule I classification.

VI. Clarification of GKC's Position Regarding Synthetic Compounds and Natural Kratom Leaf.

Consistent with the scientific evidence, the prior evaluations and refusals to schedule **natural kratom leaf** by other federal and international scheduling bodies, and the Food and Drug Administration's scheduling recommendation limited to 7-OH concentrates, GKC supports the Board's adoption of OAC 4729:9-1-01.1, which classifies **synthetic** kratom-related compounds as Schedule I controlled substances. That rule was intended to focus on compounds that are materially altered from **natural kratom leaf** to isolate alkaloids and concentrate them, turning substances that lack a serious opioid addiction profile into ones through manipulation that have that profile, the **synthetics**. Addressing **synthetic** substances through scheduling conforms with science and the law.

However, **natural kratom leaf** does not meet the eight factor statutory criteria for Schedule I classification. As demonstrated throughout this submission, when the eight statutory factors are applied to **natural kratom leaf**, the available pharmacological, toxicological, human clinical, and population-level evidence does not support a finding of high abuse potential or inherent danger under common use.

GKC therefore urges the Board not to schedule **natural kratom leaf.**

GKC does urge the Board to schedule the **synthetics**.

VII. Updated Eight-Factor Evidence Submitted to the Board.

On January 24, 2026, an updated eight-factor analysis prepared by Henningfield et al. was submitted to the Ohio Board of Pharmacy for the express purpose of informing the Board's scheduling deliberations (Exhibit 1). That analysis applies the same statutory eight-factor framework required by Ohio Revised Code § 3719.44, incorporates more than 300 scientific

references since 2022 including multiple controlled human clinical trials, and reaches the same conclusion as prior federal and international reviews: **natural kratom leaf** and mitragynine as they occur in **natural kratom leaf** do not meet the criteria for Schedule I classification, while the synthetic kratom alkaloid concentrates and isolates, such as concentrated 7-hydroxymitragynine, do.

The updated analysis finds that mitragynine exhibits low abuse liability in animal self-administration and conditioned place-preference models, while 7-hydroxymitragynine demonstrates robust opioid-like reinforcement at substantially lower doses.

The analysis further concludes that mitragynine's pharmacology is characterized by partial μ-opioid receptor agonism with ceiling effects and additional non-opioid signaling, whereas 7-hydroxymitragynine displays a morphine-like opioid profile.

The analysis warns that scheduling **natural kratom leaf** or mitragynine would foreseeably increase public-health risk by driving some consumers toward more dangerous opioids.

Finally, the updated eight-factor analysis confirms that neither mitragynine nor **natural kratom leaf** functions as an immediate precursor to any controlled substance in commerce or consumer use.

VIII. Failure to Distinguish Natural Kratom Leaf from Synthetics.

Natural kratom leaf contains a complex alkaloid matrix occurring at relatively low concentrations. Mitragynine is the predominant alkaloid, typically present at low single-digit percentages by dry weight, with total alkaloids comprising a modest fraction of the leaf.[18][19]

The science confirms that mitragynine is not a classical opioid and exhibits partial agonist activity across multiple receptor systems, producing pharmacological effects that differ fundamentally from traditional opioids.[20] In **natural kratom leaf**, mitragynine is present within

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[18] Leksungnoen N, Andriyas T, Ngernsaengsaruay C, Uthairatsamee S, Racharak P, Sonjaroon W, Kjelgren R, Pearson BJ, McCurdy CR, Sharma A. Variations in mitragynine content in the naturally growing Kratom (Mitragyna speciosa) population of Thailand. Front Plant Sci. 2022 Oct 27;13:1028547. doi: 10.3389/fpls.2022.1028547. PMID: 36388525; PMCID: PMC9648690.

[19] Sharma A, Smith KE, Kuntz MA, Berthold EC, Elashkar OI, Guadagnoli N, Kanumuri SRR, Mukhopadhyay S, Panlilio LV, Epstein DH, McCurdy CR. Chemical Analysis and Alkaloid Intake for Kratom Products Available in the United States. Drug Test Anal. 2025 Oct;17(10):1974-1984. doi: 10.1002/dta.3906. Epub 2025 May 16. PMID: 40377101.

[20] Kruegel AC, Gassaway MM, Kapoor A, Váradi A, Majumdar S, Filizola M, Javitch JA, Sames D. Synthetic and Receptor Signaling Explorations of the Mitragyna Alkaloids: Mitragynine as an Atypical Molecular Framework for Opioid Receptor Modulators. J Am Chem Soc. 2016 Jun 1;138(21):6754-64. doi: 10.1021/jacs.6b00360. Epub 2016 May 18. PMID: 27192616; PMCID: PMC5189718.

a complex botanical matrix comprising at least 50 additional alkaloids,[21] as well as non-alkaloid constituents such as fiber, which together influence absorption, bioavailability, and functional outcomes.[22][23]

The Board's 8-factor analysis acknowledges the existence of this alkaloid complex, yet does not evaluate how the botanical context alters rates of and extents of absorption, exposure, signaling, or risk. Instead, the analysis treats mitragynine concentration in isolation and extrapolates harms from products that materially alter or remove the botanical matrix. The failure to draw that distinction is directly contrary to and in contrast with the FDA's decision not to recommend scheduling of **natural kratom leaf** and to instead recommend the scheduling of **synthetic** 7-hydroxymitragynine.

IX. Human Exposure and Safety Context.

Human clinical studies conducted in controlled settings have shown that escalating oral doses of **natural kratom leaf** or leaf-equivalent preparations were generally well tolerated and did not produce serious adverse effects. To date, at least eighteen (18) peer-reviewed human clinical studies have been published examining **natural kratom leaf**, including studies evaluating safety, tolerability, pharmacokinetics, and drug–drug interaction potential. This body of controlled human research supports the conclusion that typical leaf-based consumption, occurring within a complex botanical matrix, has none of the significant adverse effects, such as serious addiction potential, associated with substances placed in Schedule I.

Independent botanical safety authorities have reached consistent conclusions. Based on available toxicological, pharmacological, and human use data, such authorities have determined that **natural kratom leaf** does not meet criteria for classification as a highly toxic botanical when used as traditionally prepared.

1. **2026 – Huestis et al.**

Title: Safety and tolerability of single and multiple daily oral doses of dried **natural kratom leaf** powder in a randomized trial in healthy volunteers

Summary: Participants (n=48) consumed up to 4 grams of **natural kratom leaf** per day for 14 days with no significant adverse events. All doses showed good tolerability, with up to 2 grams daily showing no difference from placebo.

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[21] Adkins JE, Boyer EW, McCurdy CR. Mitragyna speciosa, a psychoactive tree from Southeast Asia with opioid activity. Curr Top Med Chem. 2011;11(9):1165-75. doi: 10.2174/156802611795371305. PMID: 21050173.

[22] Chanjula, P.; Wungsintaweekul, J.; Chiarawipa, R.; Rugkong, A.; Khonkhaeng, B.;Suntara, C.; Cherdthong, A. Effect of Feed Supplement Containing Dried Kratom Leaves on Apparent Digestibility, Rumen Fermentation, Serum Antioxidants, Hematology, and Nitrogen Balance in Goats. Fermentation 2022, 8, 131. https://doi.org/10.3390/ fermentation8030131.

[23] Phesatcha, K.; Phesatcha, B.; Wanapat, M.; Cherdthong, A. Mitragyna speciosa Korth Leaves Supplementation on Feed Utilization, Rumen Fermentation Efficiency, Microbial Population, and Methane Production In Vitro. Fermentation 2022, 8, 8.https://doi.org/10.3390/ fermentation8010008.

2. **2025 – Reissig et al.**

Title: A pilot, placebo-controlled, dose-finding, pharmacodynamic and pharmacokinetic study of orally administered **natural kratom leaf** in non-dependent recreational polydrug users with opioid experience

Summary: Participants (n=12) consumed single ascending doses of up to 12 grams of **natural kratom leaf** powder with good tolerability at all doses.

3. **2024 – Dufour et al.**

Title: The safety of multiple-dose liquid blend containing kava and kratom in healthy adults

Summary: Participants (n=40 per group) consumed different doses of Feel Free Classic (which contains **natural kratom leaf**) for 6 days, showing no difference in adverse event profile compared to placebo.

4. **2024 – Mongar et al.**

Title: Effects of itraconazole on pharmacokinetics of mitragynine and 7-hydroxymitragynine in healthy volunteers

Summary: CYP3A4-mediated metabolism of mitragynine to 7-hydroxymitragynine was demonstrated using 2 grams of kratom leaf in tea (n=16), with and without CYP3A4 inhibition. The dose was well tolerated and CYP3A4 involvement was apparent.

5. **2024 – Huestis et al.**

Title: Human mitragynine and 7-hydroxymitragynine pharmacokinetics after single and multiple daily doses of oral encapsulated dried kratom leaf powder

Summary: Participants (n=48) consumed up to 4 grams of kratom leaf per day for 14 days. Steady state was achieved in 7–11 days with extensive pharmacokinetic characterization.

6. **2023 – Tanna et al.**

Title: Clinical assessment of the drug interaction potential of the psychotropic natural product kratom

Summary: The interaction potential of 2 grams of kratom leaf in tea with CYP3A4, CYP2D6, and CYP3A receptors was assessed in 12 participants. Some CYP3A inhibition was observed.

7. **2022 – Tanna et al.**

Title: Clinical pharmacokinetic assessment of kratom (Mitragyna speciosa), a botanical product with opioid-like effects, in healthy adult participants

Summary: Clinical pharmacokinetics of 2 grams of **natural kratom leaf** in tea were evaluated in 6 participants.

8. **2021 – Leong Bin Abdullah et al.**

Title: Assessment of cardiovascular functioning among regular kratom (Mitragyna speciosa Korth.) users: a case series
Summary: Regular kratom users (n=9) who were not polysubstance users showed no increased cardiovascular risk, except for prolonged QT interval in participants with the highest mitragynine concentrations.

9. **2021 – Leong Bin Abdullah et al.**

Title: Is kratom (Mitragyna speciosa Korth.) use associated with ECG abnormalities?
Summary: Regular kratom users (n=100; estimated >400 mg mitragynine/day) showed no statistically significant QT or ECG abnormalities compared to non-users, though higher rates of sinus tachycardia were observed.

10. **2020 – Vicknasingam et al.**

Title: Kratom and pain tolerance: a randomized, placebo-controlled, double-blind study
Summary: A kratom concoction (**natural kratom leaf** in water) significantly increased pain tolerance one hour post-dose compared to placebo.

11. **2019 – Leong Bin Abdullah et al.**

Title: The prevalence of psychotic symptoms in kratom (Mitragyna speciosa Korth.) users in Malaysia
Summary: Among 150 regular kratom users assessed, psychotic symptoms were rare and not significantly associated with kratom consumption.

12. **2019 – Singh et al.**

Title: Long-term cognitive effects of kratom (Mitragyna speciosa Korth.) use
Summary: Seventy-five regular kratom users showed no impairment in motor function, memory, attention, or executive function.

13. **2018 – Singh et al.**

Title: Brain magnetic resonance imaging of regular kratom (Mitragyna speciosa Korth.) users: a preliminary study
Summary: Long-term kratom consumption was not associated with altered brain structures on MRI (n=14).

14. **2018 – Singh et al.**

Title: Severity of kratom (Mitragyna speciosa Korth.) psychological withdrawal symptoms
Summary: Among 160 regular kratom users, 70–80% reported only minor withdrawal symptoms. Higher use was associated with longer withdrawal duration but not increased severity.

15. **2018 – Singh et al.**

Title: Assessment of gonadotropins and testosterone hormone levels in regular Mitragyna speciosa users
Summary: Prolonged kratom tea or juice consumption (>2 years) was not associated with testosterone-impairing effects in humans (n=14).

16. **2018 – Singh et al.**

Title: Evaluating the hematological and clinical-chemistry parameters of kratom (Mitragyna speciosa) users in Malaysia
Summary: Long-term and heavy kratom consumption did not significantly alter hematological or clinical chemistry parameters (n=58).

17. **2015 – Trakulsrichai et al.**

Title: Pharmacokinetics of mitragynine in humans
Summary: Clinical pharmacokinetics were assessed in regular kratom users after consuming kratom tea.

18. **2014 – Singh et al.**

Title: Kratom (Mitragyna speciosa) dependence, withdrawal symptoms and craving in regular users
Summary: Nearly half of 293 surveyed regular kratom users reported moderate dependence and withdrawal, consuming approximately 270 mg mitragynine per day.

X. Public Safety and Lethality Context.

Available mortality and adverse-event data consistently show high rates of polysubstance abuse and do not demonstrate a reproducible pattern of lethality attributable to **natural kratom leaf** alone. When kratom is identified in death investigations, other substances are almost always present, and causation cannot be established.

As reported by the Centers for Disease Control and Prevention in its review of 27,338 overdose deaths across 27 U.S. states, kratom was detected in 152 cases (0.56%). Of those cases, the CDC identified only seven in which kratom was the sole substance detected and expressly cautioned that "the presence of additional substances could not be ruled out" due to incomplete or variable toxicology testing.[24]

The U.S. Food and Drug Administration has similarly acknowledged that reported fatalities overwhelmingly involve polysubstance use. In its public statements regarding kratom, FDA has noted that although deaths have been reported where kratom was present, "kratom was often used

[24] Olsen, E. O. Notes from the Field: Unintentional Drug Overdose Deaths with Kratom Detected — 27 States, July 2016–December 2017. MMWR Morb Mortal Wkly Rep 2019.

in combination with other drugs," and that such reports do not establish kratom as the cause of death.[25]

Peer-reviewed medical examiner and postmortem analyses reinforce this conclusion. In a review of FDA-cited cases, authors in the New England Journal of Medicine found that instances involving mitragynine alone were exceedingly uncommon and that most fatalities involved opioids, benzodiazepines, alcohol, or other central nervous system–active substances.[26]

More recent systematic evaluations of adverse event case reports have reached the same conclusion. A peer-reviewed analysis published in *Frontiers in Pharmacology* determined that, due to incomplete toxicology data, missing information on serving size and use patterns, and the frequent presence of other substances, the evidence that natural kratom leaf alone causes severe acute adverse effects is insufficient and unlikely.[27]

Schedule I classification is reserved for substances presenting inherent danger at typical exposures. The available mortality and adverse-event record does not support such a finding **natural kratom leaf**.

XI. Adverse Impact on the Business Community.

While the proposed rule in relation to mitragynine is framed as a public-health intervention, market data provides a useful proxy for identifying where intensity of use, consumption frequency, and economic concentration are occurring. When market size is evaluated alongside consumer prevalence and time in market, a clear divergence emerges between natural kratom leaf products and recently introduced synthetic products. This divergence is relevant to the Board's assessment of business impact because it illustrates how regulatory actions directed at natural kratom leaf would disproportionately affect a long-standing, low-intensity consumer market while leaving largely unaddressed a newer, highly concentrated product category that exhibits markedly different economic characteristics.

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25 FDA and Kratom website.

26 Gershman K, Timm K, Frank M, Lampi L, Melamed J, Gerona R, Monte AA. Deaths in Colorado Attributed to Kratom. New England Journal of Medicine. 2019;380(1):97–98

27 Smallets, S.; Litvin, S.; Abele, G.; Kirsh, S.; Paustenbach, D. The Acute Adverse Health Effects of Kratom: An Evaluation of Case Reports. Frontiers in Pharmacology 2025, 16.

Figure 1. Market Revenue, Consumer Concentration, and Time in Market: Natural Kratom Leaf vs. Synthetics.[28][29]

Figure 1 illustrates the relationship between market revenue, number of consumers, and time in market for natural kratom leaf products compared to novel synthetic products. **Natural kratom leaf** demonstrates a broad consumer base developed over several decades with comparatively low per-user annual spending. By contrast, synthetic alkaloid products, introduced only recently, generate substantially higher total revenue from a significantly smaller user population, indicating markedly higher per-user spending and consumption intensity.

1. **<u>Consumer Prevalence:</u>**

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[28] *Senator Mullin and DEA Announce Action to Protect Americans from Synthetic Opioids - verifies synthetic market size at $9bn*, U.S. Senate Press Office (Jan. 6, 2026), https://www.mullin.senate.gov/newsroom/press-releases/release-senator-mullin-joins-secretary-kennedy-to-announce-bold-action-to-protect-americans-from-synthetic-opioids/.

[29] Legislative Analysis and Public Policy Association, "Kratom Facts: Natural Botanical Products," October 2022, https://legislativeanalysis.org/wp-content/uploads/2022/10/Kratom-Fact-Sheet-FINAL.pdf.

Available prevalence data indicates that natural kratom is consumed by a substantial number of adults in the United States. Based on published prevalence analyses, an estimated 23.9 million U.S. adults report natural kratom consumption.[30] Applying Ohio's approximate 3.5% share of the U.S. population yields an estimated 850,000 kratom consumers in Ohio.

These estimates are consistent with standard population-share methodologies used in regulatory impact assessments.

2. Retail Footprint and Lawful Commerce.

The lawful natural kratom market is supported by an established retail and distribution infrastructure. At least one nationally compliant distributor reports supplying approximately 1,661 retail locations in Ohio, which shows the breadth of lawful retail distribution and impact that a ban would have on retailers.

This retail presence reflects lawful commerce involving convenience stores, specialty retailers, distributors, testing laboratories, and logistics providers operating in compliance with existing state and federal requirements. A ban on natural kratom will affect business across these verticals.

3. Market Size and State Revenue Impact.

Industry market analyses estimate the U.S. natural kratom market to be approximately $2.5 billion in revenues annually.[31] Applying a conservative population-based allocation, Ohio's proportionate share of this market is approximately $87.5 million per year.

Ohio imposes a statewide sales tax rate of 5.75%, exclusive of local taxes. Based on conservative in-state retail sales estimates, Ohio currently derives approximately $5 million per year in state sales tax revenue from kratom-related commerce. This estimate does not include local sales taxes or taxes on any ancillary economic activity.

A Schedule I classification of mitragynine would eliminate this lawful tax base, reducing state revenue while increasing enforcement and compliance costs borne by the State and its political subdivisions.

4. Enforcement and Criminal Justice Cost Implications.

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[30] *Prevalence and Use Patterns of Kratom (Mitragyna speciosa Korth.) in a US Nationally Representative Sample,* Oliver Grundmann et al., *J Psychoactive Drugs*, PMID: 40022554, DOI: 10.1080/02791072.2025.2474249; https://pubmed.ncbi.nlm.nih.gov/40022554/

[31] Maximize Market Research, *Kratom Market Size, Share & Trends Analysis Report* (U.S. kratom market estimate), https://www.maximizemarketresearch.com/market-report/kratom-market/216883/

In addition to lost tax revenue from natural kratom sales, Schedule I classification would generate significant enforcement and criminal justice costs. Because Ohio-specific natural kratom enforcement data does not exist, potential costs can be evaluated using conservative, assumption-based modeling consistent with approaches used in other state fiscal analyses.[32]

Based on publicly reported data from the Ohio Department of Rehabilitation and Correction,[33] the average cost to incarcerate an individual in Ohio is approximately $38,598 per person per year. Pre-trial detention costs associated with arrest and case processing are estimated at approximately $3,150 per person, assuming a 60-day pre-trial period.

Using conservative enforcement assumptions:

- Annual case volume modeled at 0.1% to 1.0% of consumers which equates to approximately 850 to 8,500 individuals per year.
- Incarceration applied to approximately 25% of cases.
- Average incarceration time of six months.

Under these assumptions, estimated annual enforcement and incarceration costs associated with imposition of a Schedule I ban on natural kratom range from approximately $6.7 million per year at the low end to approximately $67 million per year at the high end. These estimates exclude additional costs associated with law enforcement investigations, crime laboratory testing, prosecution, public defense, court administration, probation, parole, and local jail overcrowding.

5. <u>Relevance to Senate Bill 2 Adverse Impact Analysis.</u>

Senate Bill 2 requires agencies to assess and justify adverse impacts on the business community. The proposed rule would:

a. Eliminate lawful natural kratom commerce serving hundreds of thousands of Ohio consumers.
b. Disrupt established retail and distribution infrastructure.
c. Reduce state sales tax revenue.
d. Impose significant and recurring criminal justice costs on state and local governments.

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[32] Tennessee General Assembly, Fiscal Review Committee, *Fiscal Note for SB 1655 / HB 1647 (114th General Assembly)* (Jan. 16, 2026), https://www.capitol.tn.gov/Bills/114/Fiscal/SB1655.pdf

[33] Ohio Legislative Service Commission, "Fiscal Note & Local Impact Statement" (citing the ODRC December 2024 Fact Sheet and stating the average institutional cost is $105.75/day or $38,598.75/year), available at: https://www.legislature.ohio.gov/download?key=26769

These impacts are material and foreseeable and warrant careful consideration before imposing categorical Schedule I controls that do not distinguish between natural kratom leaf and synthetic alkaloid isolate product categories.

XII. Requested Action.

GKC respectfully requests that the Board exclude **natural kratom leaf** from its scheduling order, revise definitions to clearly distinguish **natural kratom leaf** from **synthetics** and adopt a regulatory framework consistent with proposed Senate Bill 2 requirements.

Respectfully submitted,

m lowe

Global Kratom Coalition

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