



March 2, 2026

Hon. Chuck Grassley

Chair

Senate Judiciary Committee

Hon. Dick Durbin

Ranking Member

Senate Judiciary Committee

Hon. Jim Jordan

Chair

House Judiciary Committee

Hon. Jamie Raskin

Ranking Member

House Judiciary Committee

Hon. Brett Guthrie

Chair

House Energy & Commerce

Hon. Frank Pallone

Ranking Member

House Energy & Commerce

Re: Combating Illicit Xylazine Act (H.R. 1266/S. 545) and Nitazene Control Act (H.R. 5415 /S. 3076)

Dear Chair Grassley, Ranking Member Durbin, Chair Jordan, Ranking Member Raskin, Chair Guthrie, Ranking Member Pallone, and Honorable Members of the U.S. Congress:

We, the undersigned national organizations, urge you to oppose the Combating Illicit Xylazine Act (H.R. 1266/S. 545) and the Nitazene Control Act (H.R. 5415 /S. 3076). These bills criminalize the unauthorized use and distribution of xylazine, nitazenes, and nitazene analogues. However, the bills will not meaningfully prevent or reduce overdose deaths or address problematic drug use. Instead, we implore Congress to invest in health-based strategies and interventions that heal people and save lives.

Xylazine is a non-opioid sedative used as a veterinary tranquilizer.¹ In humans, xylazine can slow down brain functioning and breathing, reduce heart rate and blood pressure, and cause soft tissue wounds that can become infected.² Nitazenes are a group of synthetic opioids that first significantly emerged in the drug supply in 2019.³ Nitazenes are used for their similarity with other synthetic opioids and can

¹ CDC. (2024). *What You Should Know About Xylazine*. [://www.cdc.gov/overdose-prevention/about/what-you-should-know-about-xylazine.html](https://www.cdc.gov/overdose-prevention/about/what-you-should-know-about-xylazine.html).

² Ibid.

³ Schwarz, E. S., Dicker, F., Lothet, E., Spungen, H., & Levine, M. (2025). Nitazenes: An Old Drug Class Causing New Problems. *Missouri medicine*, 122(4), 329–333. <https://pmc.ncbi.nlm.nih.gov/articles/PMC12331301>.

cause respiratory depression and arrest. Both substances became more common in the drug supply after the federal crackdown on fentanyl.

People who use drugs are not seeking out these substances; rather, drug criminalization has led to a chaotic and dangerous drug supply that people are trying to survive.⁴ This means that criminalizing xylazine, nitazenes, and nitazene analogues will impact many people who do not know they possess the substances. Further, these substances are typically found in combination with other illicit drugs. Xylazine, for instance, is predominantly found in conjunction with fentanyl, for which criminal penalties already exist.⁵ In fact, 99.5% of xylazine-involved deaths in 2021 also involved illicitly manufactured fentanyl or fentanyl analogues, substances that are already criminalized.⁶ Similarly, nitazenes are often found in combination with other illicit substances, like fentanyl, cocaine, or methamphetamine.

In the era of synthetic drugs, what people need are health and evidence-based solutions that help people understand the supply, deal with the harms of drug use, and put them on a path to recovery, not the failed policies of criminalization.

Recent overdose death declines were primarily due to health interventions.

After decades of climbing overdose deaths, recent years have finally brought a reduction. In 2024, drug fatalities fell by 27%, and in 2025 they declined by another 21%.⁷ Some emerging evidence does indicate that China's increased regulation of precursors played a role by reducing the supply of fentanyl.⁸ However, history tells us that such wins are likely temporary, as they incentivize the introduction and proliferation of new, often more potent drugs, such as nitazenes.⁹ As a result, most experts agree that the recent decline in overdose deaths is not attributable to harsher sentencing, but to the expansion of health-based interventions—like increased access to medications for opioid use disorder, naloxone distribution, expanded drug checking, and prevention programs.¹⁰ Meanwhile, decades of punitive drug

⁴ Los Angeles County Department of Public Health. (June 2023). *Xylazine in Illicit Drugs: Increased Overdose Risks in Los Angeles County*. PDF. Los Angeles County, California.

<http://publichealth.lacounty.gov/sapc/docs/public/overdose-prevention/XylazineLACounty.pdf>; Cohen, A., Vakharia, S. P., Netherland, J., & Frederique, K. (2022). How the war on drugs impacts social determinants of health beyond the criminal legal system. *Annals of medicine*, 54(1), 2024–2038. <https://doi.org/10.1080/07853890.2022.2100926>.

⁵ Kariisa, M., O'Donnell, J., Kumar, S., Mattson, CL., Goldberger, BA. (2023). Illicitly Manufactured Fentanyl—Involved Overdose Deaths with Detected Xylazine — United States, January 2019–June 2022. *MMWR. Morbidity and Mortality Weekly Report*, 72(26). <https://doi.org/10.15585/mmwr.mm7226a4>.

⁶ Ibid.

⁷ Stobbe, Mike. (Jan. 19, 2026). “U.S. overdose deaths fell through most of 2025, federal data reveal,” *Los Angeles Times*. <https://www.latimes.com/science/story/2026-01-19/us-overdose-deaths-fell-2025>.

⁸ Vangelov, Kasey, et al. (2026). “Did the illicit fentanyl trade experience a supply shock?” *Science*, 391: 6781. <https://www.science.org/doi/10.1126/science.aea6130>.

⁹ McKenna, Stacey. (Feb. 11, 2025). *An Ever-Changing, Increasingly Toxic Drug Supply Makes Harm Reduction Essential*. R Street Institute Policy Study No. 315. <https://www.rstreet.org/research/an-ever-changing-increasingly-toxic-drug-supply-makes-harm-reduction-essential>.

¹⁰ CDC. (2025). *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>.

policies have contributed to increasing drug potency, leading to record overdose deaths. For example, after the federal classwide scheduling of fentanyl-related substances in 2018, overdose deaths surged, rising from 67,367 in 2018 to 107,941 in 2022.¹¹ Additionally, new substances like xylazine and nitazenes were introduced into the drug supply.

Criminalization endangers lives and undermines demand reduction efforts.

Criminal penalties not only fail to deter drug use, they also disproportionately target sellers at the lowest levels of the supply chain, who are often struggling with a substance use disorder.¹² Threats of prosecution and the associated risks of job loss, housing insecurity, or child custody loss deter individuals from seeking treatment, taking actions to reduce their own overdose risk, or calling 911 if they witness an overdose.¹³

Furthermore, incarceration provides inadequate access to gold standard treatment and severs needed support systems, setting people back and exacerbating cycles of harm.¹⁴ Consequently, in the first two weeks after leaving prison, individuals are 27 times more likely to die of opioid overdose than the general population.¹⁵

Criminalization perpetuates racial and economic injustice.

Drug enforcement practices and their associated harms play out differently according to people's race and class. Black Americans—despite using illicit drugs at rates similar to white Americans—comprise a disproportionate share of those arrested and sentenced for drug offenses.¹⁶ Moreover, Black, Latino, and Native Americans face steep barriers to finding help with limited access to education, tools, supplies, and medications that can aid a person's recovery.¹⁷ In addition, poor individuals and

¹¹ Drug Policy Alliance. *Reduce Harms of Fentanyl*. <https://drugpolicy.org/issue/reduce-harms-of-fentanyl/>.

¹² U.S. Sentencing Commission. (2011). *2011 Report to the Congress: Mandatory Minimum Penalties in the Federal Criminal Justice System*, Chapter 8. <https://www.usc.gov/research/congressional-reports/2011-report-congress-mandatory-minimum-penalties-federal-criminal-justice-system>.

¹³ McKenna, Stacey. (Sept. 29, 2025). "Why Laws that Equate Drug Distribution to Murder are Counterproductive," R Street Institute Analysis. <https://www.rstreet.org/commentary/why-laws-that-equate-drug-distribution-to-murder-are-counterproductive>.

¹⁴ SAMHSA. (2019). *Substance Abuse and mental Health Data Archive, National Survey on Drug Use and Health, 2019*. https://datatools.samhsa.gov/#/survey/NSDUH-2019-%20DS0001?column=UDPYILL&control=TXYRPRIIL&filter=NOBOOKY2%21%3D0%26UDPYILAL%3D1&results_received=true&row=NOBOOKY2&run_chisq=false&weight=ANALWT_C; Wdira, Emily. (2024). *Addicted to punishment: jails and prisons punish drug use far more than they treat it*. Prison Policy Initiative. <https://www.prisonpolicy.org/blog/2024/01/30/punishing-drug-use>.

¹⁵ Hartung, D.M., McCracken, C.M., Nguyen, T., Kempany, K., & Waddell, E.N. (2023). Fatal and nonfatal opioid overdose risk following release from prison: A retrospective cohort study using linked administrative data. *Journal of substance use and addiction treatment*, 147, 208971. <https://doi.org/10.1016/j.josat.2023.208971>.

¹⁶ Neath, Scarlet, et al. (2024). *Redesigning Public Safety*. Center for Policing Equity. <https://policingequity.org/wp-content/uploads/2024/04/CPE-WhitePaper-SubstanceUse.pdf>.

¹⁷ Drug Policy Alliance. (2024). "The Impact of the Overdose Crisis on Black Communities in the United States." DPA Fact Sheet. <https://drugpolicy.org/wp-content/uploads/2024/06/DPA-ImpactOnBlackCommunitiesFactSheet->

communities are often policed more closely than wealthier ones, increasing the likelihood of arrest for drug-related activities.¹⁸

Criminal records create lifelong barriers to employment, housing, and economic mobility. Formerly incarcerated individuals are 10 times more likely to experience homelessness than the general public. Misdemeanor convictions reduce annual earnings by 16%, and incarceration slashes income by more than 50%.¹⁹ These penalties make recovery, stability, and reintegration nearly impossible for many.

Invest in health policies to address the harms of drug use.

Addiction is a chronic, complex health condition that can involve multiple recovery attempts.²⁰ Yet, the Trump administration and this Congress have already made considerable cuts to addiction treatment, overdose response, research, and public health surveillance funding.²¹ It is precisely the moment to assess the scope of these reductions and the gaps they may create or exacerbate. If government is to be more limited, it must also be more effective. We therefore urge you to ensure that remaining funds are directed to frontline organizations delivering evidence-based treatment and care coordination. This is not the time to close off pathways to treatment and recovery.

Congress can help promote pathways to recovery, further stem overdose deaths, and minimize the public health consequences of drug use by:

- **Reducing barriers to Medications for Opioid Use Disorder (MOUD):** Medications like methadone and buprenorphine are gold standard treatments that save lives, promote stability,

[InDesign-Interactive.pdf](#); Drug Policy Alliance. (2024). “The Impact of the Overdose Crisis on LatinX Communities in the United States.” DPA Fact Sheet. <https://drugpolicy.org/wp-content/uploads/2024/08/DPA-ImpactOnLatinXCommunitiesFactSheet-InDesign-Interactive.pdf>; Drug Policy Alliance. (2024). “The Impact of the Overdose Crisis on Native American Communities in the United States,” DPA Fact Sheet. <https://drugpolicy.org/wp-content/uploads/2024/08/DPA-ImpactOnNativeCommunitiesFactSheet-InDesign-Interactive.pdf>.

¹⁸ Garriott, William. (2011). *Policing Methamphetamine: Narcopolitics in Rural America*. NYU Press. <https://nyupress.org/9780814732403/policing-methamphetamine>; Campbell, Walter, et al. (2022). “The behavior of police: class, race, and discretion in drug enforcement.” *Police Practice and Research*, 23: 3. <https://www.tandfonline.com/doi/abs/10.1080/15614263.2021.2022482>.

¹⁹ Brennan Center for Justice. (2020). *Conviction, Imprisonment, and Lost Earnings: How Involvement with the Criminal Justice System Deepens Inequality*. https://www.brennancenter.org/sites/default/files/2020-09/EconomicImpactReport_pdf.pdf

²⁰ Kelly, J.F., et al. (2019). “How many recovery attempts does it take to successfully resolve an alcohol or drug problem? Estimates and correlates from a national study of recovering U.S. adults,” *Alcoholism: Clinical and Experimental Research*, 43: 7. <https://pubmed.ncbi.nlm.nih.gov/31090945>; Cloud, W. and Granfield, R. (2009). “Conceptualizing recovery capital: expansion of a theoretical construct,” *Substance Use and Misuse*, 43. <https://pubmed.ncbi.nlm.nih.gov/19016174>.

²¹ Drug Policy Alliance. (2025). *Tracker: Federal Cuts to Overdose Prevention & Addiction Treatment*. <https://drugpolicy.org/resource/federal-cuts-threaten-overdose-prevention/>

and cut illicit drug use.²² However, they are overregulated and over-surveilled, deterring health providers and institutions (including jails and prisons) from offering them.²³

- **Supporting health services:** Life-saving health services—for example, naloxone distribution, case management, and mental health services—reduce drug use, connect individuals to treatment, and slash the public health impact of substance use (e.g., reducing transmission of communicable disease).²⁴ Overregulating and defunding these services prevents communities from tailoring interventions to keep their populations as safe and healthy as possible.²⁵
- **Facilitating research and public health surveillance:** To better promote treatment and save lives, research must understand the shifting U.S. illicit drug supply. Scheduling, especially classwide scheduling, can hinder the development of novel medications for treatment or overdose reversal, and make it more difficult to collect and disseminate information about the state and dangers of the ever-changing drug supply. We must invest in and reduce barriers to such research, especially solutions that are proven to work, like community drug checking and forensic and toxicology review.

Congress is at a crucial point in history—at a time when overdose numbers have finally begun to decline from their peak, and in the midst of historic cuts to our country’s health infrastructure, we must prioritize an approach to drug policy that is proven to reduce demand while saving lives.²⁶ For any questions about this letter, please contact Maritza Perez Medina at mperez@drugpolicy.org and Stacey McKenna at smckenna@rstreet.org.

Sincerely,

American Civil Liberties Union
Blacks in Law Enforcement
Broken No More
Challenges Inc SC (SC)
Doctors for Drug Policy Reform
[Dream.org](https://dream.org)
Drug Policy Alliance
Due Process Institute

²² Committee on Medication-Assisted Treatment for Opioid Use Disorder et al. (2019). Medications for Opioid Use Disorder Save Lives, ed. Alan I. Leshner and Michelle Mancher. *National Academies Press*, 25310, <https://doi.org/10.17226/25310>.

²³ McKenna, Stacey. (Nov. 7, 2023). *How Red Tape Limits Access to Medications for Opioid Use Disorder*, R Street Institute Explainer. <https://www.rstreet.org/research/how-red-tape-limits-access-to-medications-for-opioid-use-disorder>.

²⁴ Pridgen, Bailey E., et al. (2025). “U.S. substance use harm reduction efforts: a review of the current state of policy, policy barriers, and recommendations.” *Harm Reduction Journal*, 22: 101. <https://pmc.ncbi.nlm.nih.gov/articles/PMC12147315/>.

²⁵ Ibid.

²⁶ CDC. (2025). *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>; Drug Policy Alliance. (2025). *Tracker: Federal Cuts to Overdose Prevention & Addiction Treatment*. <https://drugpolicy.org/resource/federal-cuts-threaten-overdose-prevention>.

End It For Good
Fair and Just Prosecution
Faith in Harm Reduction
Federal Public and Community Defenders
Florida Harm Reduction Collective (FL)
Harm Reduction Action Center (CO)
Impact MN (MN)
JustLeadershipUSA
Law Enforcement Action Partnership
MATSA Org.
NASTAD
National Association of Criminal Defense Lawyers
National Harm Reduction Coalition
National Health Care for the Homeless Council
National Homelessness Law Center
Prison Policy Initiative
Reframe Health and Justice
Students for Sensible Drug Policy (SSDP)
The Network for Public Health Law
The Porchlight Collective SAP (IL)
The Sentencing Project
Vera Institute of Justice
Vilomah Foundation
VOCAL-KY (KY)
VOCAL-NY (NY)
VOCAL-TX (TX)
R Street Institute
Washington Office on Latin America
Whose Corner Is It Anyway (MA)
Wren Action Group
Yaya Por Vida (FL)
Young People in Recovery YPR

cc:

Members of the Senate Judiciary Committee
Members of the House Judiciary Committee
Members of the House Energy & Commerce Committee