

The Honorable Jim Jordan  
Chairman, House Judiciary Committee  
2138 Rayburn House Building  
Washington, DC 20515

Dear Chairman Jordan and Members of the Committee,

We write to you as a coalition of consumer advocacy groups, free market organizations, drug policy reformists, and public policy advocates to express our strong opposition to efforts that would prohibit and practically outlaw kratom derivative products like 7-hydroxymitragynine (7-OH). Such measures are misguided and would undermine public safety rather than improve it.

Hundreds of thousands of Americans depend on 7-hydroxymitragynine (7-OH) to support wellness and reduce illicit substance use in a safe and responsible manner. For many, 7-OH, like kratom, serves as a vital harm reduction tool, keeping them away from harmful alternatives that carry far greater risks. Prohibition would criminalize these individuals and drive them toward unsafe, unregulated markets with no guardrails, undermining years of progress in combating the illicit foreign drug trade that this Committee has long sought to address, while reigniting a new war on drugs that would devastate communities across the country.

History teaches us that prohibition does not eliminate demand. It drives demand underground, creating greater risks from untested products, contamination, and unchecked criminal distribution networks. Public safety demands a smarter, evidence-based approach.

As you may know, in July, the Food and Drug Administration (FDA) recommended that 7-OH be listed as a Schedule I substance under the Controlled Substances Act. Notably, authorities presented no compelling evidence or data demonstrating that this popular compound constitutes a public health emergency. Over a [million](#) Americans have consumed more than one billion servings of 7-OH, yet the FDA's own [data](#) show only about 40 adverse health events – hundreds fewer than are associated with soap – and not a single confirmed death from 7-OH ingested in isolation.

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.

Rather than permitting a policy of “ban first, ask questions later,” Congress should exercise its authority to pursue a regulatory framework that prioritizes consumer protections for 7-OH products. That means strict age verification, licensing requirements, clear labeling standards, independent testing, and transparent reporting of potency and ingredients. It also requires investment in public education so families and communities can make informed choices with the latest science.

The regulation of 7-OH would constitute a scientific and evidence-based path forward that allows for appropriate quality control, further research, and consumer protection, while preserving access to safer and more affordable options for those seeking wellness or struggling with addiction. Responsible oversight and rigorous standards can address any genuine risks without criminalizing law-abiding consumers or erasing years of progress in the fight against the foreign drug trade.

We urge the Committee to reject sweeping prohibitionist measures and instead enact evidence-based regulation that protects both public health and consumer autonomy.

Thank you for your leadership and attention to this important issue.

Sincerely,

