

Briefing for decision

Temporary Class Drug Order for etomidate

Date due to MO:	24/11/2024	Action required by:	N/A
Security level:	IN CONFIDENCE	Reference:	H2025075477
To:	Hon Simeon Brown, Minister for Health		
Copy to:	Hon Casey Costello, Associate Minister for Health		
Consulted:	Health New Zealand: ☐		
Proactive release:	This title is proposed by the Ministry of Health for proactive release: ☐		

Contact for telephone discussion

Name	Position	Telephone
Jennie Kerr	Acting Deputy Director-General, Regulatory Services	s 9(2)(a)
Chris James	Group Manager, Medsafe, Regulatory Services	

Minister's office to complete:

- | | | |
|---|------------------------------------|--|
| ☐ Approved | ☐ Decline | ☐ Overtaken by events |
| ☐ Needs change | ☐ Seen | |
| ☐ See Minister's Notes | ☐ Withdrawn | |

Comment:

Briefing for decision

Temporary Class Drug Order for etomidate

Security level: IN CONFIDENCE **Date:** 24 November 2024

To: Hon Simeon Brown, Minister of Health

Purpose of report

1. The purpose of this report is to seek your agreement to issue a Temporary Class Drug Order (TCDO) for etomidate following detections of illicit use within vapes.

Summary

2. The Ministry of Health has received a TCDO request for etomidate from the National Drug Intelligence Bureau (NDIB) (See Annex 1).
3. The TCDO, if agreed, means that etomidate must be treated as if it were a Class C1 controlled drug for a period of up to 12 months (renewable once).
4. This would provide Police with greater enforcement powers, such as warrantless search and surveillance, as well as increased penalties, which will help tackle illicit use.
5. Etomidate detected in illicit vapes across New Zealand and linked to some instances of acute drug harm, including a small number of hospitalisations.
6. Some of the most common 'street' names for etomidate vapes are space oil, k-pods, space vapes, or 'eto' (short for etomidate).
7. Etomidate is a prescription medicine used for general anaesthesia and sedation. There are no approved etomidate-containing medicines in New Zealand, however it is used by clinicians and is an important medicine of choice in certain clinical situations.
8. In order for a substance to be a temporary class drug, you must be satisfied that it poses, or may pose, a risk of harm to individuals or to society.

Recommendations

We recommend you:

- | | |
|---|---------------|
| a) Agree that etomidate should be specified as a temporary class drug under the Misuse of Drugs Act 1975 | Yes/No |
| b) Sign the attached Temporary Class Drug Order (TCDO) if you agree to recommendation a) | Yes/No |
| c) Note that the TCDO will be published in the form of the attached Gazette Notice, in the New Zealand Gazette and on the Ministry of Health's website | Yes/No |

- d) **Note** the Ministry of Health will publish a Gazette Notice giving approval to prescribe / supply / administer etomidate in order to ensure continuation of legitimate therapeutic use
- e) **Note** that the Ministry of Health will work with your office, to ensure the TCDO is presented to the House no later than the 16th sitting day after the day on which it is made.

Yes/No

Yes/No



Jennie Kerr
Acting Deputy Director-General
Regulatory Services
Date: 21 November 2025

Hon Simeon Brown
Minister of Health
Date:

PROACTIVELY RELEASED

Temporary Class Drug Order for etomidate

Background

Temporary Class Drug Order

9. Under Section 4C of the Misuse of Drugs Act 1975 (the Act), the Minister of Health (the Minister) may issue Temporary Class Drug Orders (TCDOs) to enable control of potentially harmful substances without significant delay.
10. A TCDO can be issued in a much shorter timeframe than the Order in Council (OIC) scheduling process under the Act. A TCDO immediately classifies a substance for a temporary period whereas the OIC scheduling process involves cross-party consultation, a select committee process, and affirmation by the House of Representatives.
11. While a TCDO is in effect, the substance is treated as if it were a Class C1 controlled drug under the Act and the penalties for import, manufacture, supply, possession and use of Class C1 controlled drugs will apply.
12. A TCDO expires one year after it comes into force, unless, before this date:
 - the substance is classified under the Act; or
 - the Minister revokes the order; or
 - the Minister renews the order for a further year (can only be done once).
13. Prior to the expiry of the TCDO, the Minister must seek advice from the Expert Advisory Committee on Drugs (EACD) on the substance and its appropriate permanent classification under the Act, if any.
14. A TCDO request for etomidate was received by the Ministry of Health (the Ministry) on 6 November 2025 from the National Drug Intelligence Bureau (NDIB) (see Annex 1). The request includes evidence for you to consider whether etomidate should be specified as a temporary class drug.

Etomidate classification

15. Etomidate is classified as a prescription medicine under the Medicines Regulations 1984. There are no approved etomidate-containing medicines in New Zealand however it is used by anaesthetists and critical care physicians for sedation and anaesthesia in surgical procedures. It is especially useful for patients with limited cardiac reserve or impaired hepatic or renal function, and those requiring intubation and mechanical ventilation. It is imported then supplied under Section 29 of the Medicines Act 1981 which allows for the sale and supply of unapproved medicines under specific conditions.
16. If a TCDO is issued for etomidate, it would not be able to be supplied, prescribed or administered without specific Ministerial approval each time. To ensure continuation of clinical use, a blanket Ministerial approval will be given via a Gazette Notice. This approval process has been delegated to the Group Manager, Medsafe, and would be effective at the same time as the TCDO.
17. In addition, from the effect date of the TCDO, relevant stakeholders must meet all controlled drug requirements outlined in the Regulations, specifically licencing, prescribing, labelling, storage and recording of transactions and regular stocktakes.

18. Etomidate has not previously been scheduled as a controlled drug, precursor substance, or a restricted substance under the Act.

Illicit use of Etomidate

19. Etomidate has recently emerged as a substance of concern due to its misuse in illicit vaping products. Etomidate-containing vapes are described as producing a dissociative effect.
20. Etomidate is being sold in liquid form in vape pods. Vaping devices with refillable liquid chambers are legal and readily available in New Zealand, and the contents of a pod/vape cannot be identified by sight. Powdered etomidate has also been identified but is likely being used to manufacture the liquid for vape pods.
21. There have been a number of instances in New Zealand where New Zealand Police (Police) have attended scenes where people are producing vape pods containing etomidate. They are also being detected by drug checking services, and illicit consignments intercepted at the border. This suggests a growing market of domestic supply of these products.
22. Internationally, there is a growing concern about the use of vapes containing etomidate. Singapore and Hong Kong have seen a significant increase in the use of etomidate in vape form in recent years. The United Nations Office on Drugs and Crime (UNODC) reporting suggests there has been an increase in the illicit manufacture of etomidate and its analogues, especially within the Southeast Asia region.

Etomidate risk of harm

23. The evidence required to demonstrate that a substance poses, or may pose, a risk of harm to individuals or to society is not specified in the Act. However, section 4B(2) of the Act sets out a number of matters that the EACD must consider when providing advice to the Minister on the risk of harm of a particular substance and whether it should be scheduled under the Act.
24. The table below summarises evidence against the matters set out in section 4B(2) of the Act.

Section 4B(2) matters the EACD must consider	Etomidate risk of harm
Likelihood or evidence of abuse, including prevalence, seizure trends, and potential appeal to vulnerable populations	In early 2025 High Alert identified vape pods being sold on the domestic dark web advertised as containing etomidate. Since then, multiple consignments of etomidate have been seized at the border. s 6(c) Between January and October 2025, 15 samples of vape pods containing etomidate were submitted to drug checking services.

	Prior to 2025, etomidate has never been presented to a drug checking clinic. The numbers have been increasing and as liquids in general are difficult to test 'on-site' the cases may under-represent how many people are accessing these products. These increased detections indicate the potential for a rapid uptake in use of this substance.
Specific effects of the drug	Etomidate enhances the activity of gamma-aminobutyric acid (GABA), a neurotransmitter that inhibits neural activity in the brain. By binding to GABA-A receptors, etomidate amplifies the calming effects of GABA, leading to sedation and loss of consciousness. Etomidate is commonly used for induction of anaesthesia in emergency and surgical settings due to its rapid onset and short duration of action. Common side effects of etomidate include injection site pain, skeletal muscle movements (e.g., myoclonic, averting, tonic, or ocular movements), and postoperative nausea while serious side effects can involve respiratory depression and adrenal suppression. Improper use of Etomidate can lead to symptoms such as dizziness, and instability in standing, and can result in irreversible brain damage and various mental disorders. In recent years, studies have shown that drug abuse can also change the structure of the intestinal microbiota and affect intestinal function potentially leading to various nervous system diseases such as depression, anxiety, and schizophrenia.
Risk to public health	A small number of hospitalisations associated with etomidate vapes have occurred in New Zealand. Alongside these, multiple less-serious harm events have been identified through High Alert's scanning and monitoring of acute drug harm. There is a risk of overdose by people who vape etomidate because vape devices release the contained substance at different rates, so it is hard to dose accurately. Additionally, user reporting suggests that vaping etomidate produces a strong drive to re-dose, likely due to the short acting effect of etomidate and the ease of consuming more. While etomidate does not appear to consistently result in acute harm when taken on its own, when taken alongside other substances the risk of harm increases. If etomidate, to be used in vapes, continues to enter the country, acute harm will likely continue to occur.
Therapeutic value	Etomidate is a prescription medicine, used for sedation and anaesthesia since the 1970's.

Potential for death	Singapore has reported a number of deaths related to the misuse of etomidate. China has also reported one death following oral ingestion of etomidate in 2024.
Ability for physical or psychological dependence	Addiction treatment providers have reported cases of people with addiction to etomidate attending services in New Zealand. Internationally, addiction to etomidate has been reported, with a typical withdrawal syndrome identified following abstinence. Withdrawal can pose serious health risks if not supported by medical professionals.
International classification and experience in other jurisdictions	In most countries etomidate is classified as a prescription medicine. In Singapore etomidate is classified as a Class C drug under their Misuse of Drugs Act due to the burgeoning abuse of etomidate in vapes. Hong Kong has similarly rescheduled etomidate following increased detections in illicit etomidate-containing vape products. It is also included in the 'second category of psychotropic drugs' list in China. Over the past few years, multiple countries across the globe have reported detections of etomidate in illicit drug samples and toxicology cases, suggesting the use of the substance for non-medical purposes. Internationally, harm is increasing with the growing availability of etomidate.

Police powers

25. As etomidate is currently classed as a prescription medicine under the Medicines Regulations 1984, this limits the powers Police have to respond to incidences involving etomidate. There are existing provisions under the Medicines Act 1981 for supply and possession of a prescription medicine, but these are limited.
26. s 9(2)(g)(i)
27. If a TCDO is issued, it will provide Police with greater enforcement powers with increased penalties for the illegal procurement, manufacture, possession, use and supply of etomidate, which will help reduce illicit use and prevent this becoming established in the New Zealand recreational drug landscape.

Equity

28. Due to the lack of data on illicit use of etomidate in New Zealand, it is difficult to say with certainty which particular groups are most likely to be impacted by its misuse or its classification as a controlled drug.
29. Māori and Pacific people have higher rates of recreational drug use and are at higher risk of drug-related harm.
30. Māori are disproportionately impacted by drug offences. The reasons behind these differences are complex and long-standing.

31. In 2019, the Act was amended to affirm Police's discretion to prosecute for the use and possession of a controlled drug, whereby a prosecution should not be sought unless it is in the public interest, and preference should be given to a health-based approach. Data collected to date by Police has shown that there is a decrease in the prosecutions for Māori for personal possession and use of drugs.

Next Steps

32. If you agree that there is sufficient evidence to demonstrate that etomidate poses a risk of harm, and you have signed the TCDO, the Ministry will arrange for it to be published in the New Zealand Gazette (see Annex 2) and on the Ministry's website.
33. The TCDO comes into force on the date specified within the order and will remain in force for one year, unless revoked prior.
34. The Ministry will also prepare a blanket approval for etomidate to continue to be supplied, prescribed and administered, to be published at the same time to ensure legitimate therapeutic use is not disrupted. Medsafe will also communicate with relevant stakeholders to ensure all appropriate measures are implemented (e.g. controlled drug storage).
35. While the TCDO is in place, etomidate will be assessed by the EACD within 12 months of the order being published for its risk of harm and whether scheduling permanently under the Act is appropriate.

ENDS.

Annex 1: TCDO request form



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Request for a Temporary Class Drug Order

Misuse of Drugs Act 1975

Please forward completed form to: tcdo@health.govt.nz. An email will be sent to acknowledge receipt of this request within two working days.

Date: 4/11/2025
 Requestor name: s 9(2)(a)
 Organisation: National Drug Intelligence Bureau
 Phone: s 9(2)(a) S
 Email: [REDACTED]

Name of substance, mixture, preparation or article: Etomidate

Has the substance (or mixture, preparation or article) been identified by PHF Science?

Yes ☒
 No ☐

The Minister of Health must not make an order unless satisfied that the substance, preparation, mixture, or article that is to be specified in the order poses, or may pose, a risk of harm to individuals or to the public.

Supporting information should include at least one of the below examples.

- Evidence of drug abuse eg, prevalence of the drug, levels of consumption, drug seizures, and/or potential appeal to vulnerable populations

In early 2025, High Alert identified vape pods sold on the domestic dark web which were advertised as containing etomidate. Since then, multiple shipments of etomidate have been intercepted by New Zealand Customs Service (NZCS) and sent to the New Zealand Institute for Public Health and Forensic Science (PHF Science) for analysis. Similarly, between January and October 2025, 15 samples of vape pods presumed to contain etomidate have been submitted to drug checking services across the country. Prior to 2025, etomidate has never been presented to a drug checking clinic in any form.¹ These increased detections indicate the potential for a rapid spread of this substance.

Etomidate is typically sold in liquid form in vape pods. Powdered etomidate has also been identified but is likely being used to manufacture the liquid for vape pods. Vaping devices with refillable liquid chambers are legal and readily available in New Zealand, so the contents of a pod/vape cannot be identified by sight. There have been a number of instances in New Zealand where Police have attended scenes where it appears people are producing vape pods containing etomidate suggesting a growing market of domestic supply of these products.

Internationally, there has been growing concern about the use of vapes containing etomidate especially among young people. Countries like Singapore and Hong Kong have seen a significant increase in the use of etomidate in vape form in recent years. United Nations Office

¹ Due to difficulties analysing the contents of the vape liquids with the tools available to drug checking services, the presence of etomidate in these samples was confirmed by testing performed by PHF Science.

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on Drugs and Crime (UNODC) reporting suggests there has been an increase in the illicit manufacture of pharmaceutical products, especially etomidate and its analogues, occurring within the Golden Triangle region (Southeast Asia).²

Please provide supporting information to demonstrate that this substance poses, or may pose a risk of harm to individuals or the public below

- Specific effects of the drug *eg, behavioural effects (disorientation, aggression, violence), toxicological effects (adverse health effects such as vomiting or seizing) or pharmacological effects (intoxication).*

A small number of hospitalisations associated with etomidate vapes have occurred in New Zealand. Alongside these, multiple less-serious harm events have been identified through High Alert's scanning and monitoring of acute drug harm. If etomidate vapes continue to enter the country, acute harm will likely continue to occur.

There is a significant risk of overdose by people who vape etomidate. All vape devices release the contained substance at different rates, so it is hard to dose accurately. Additionally, anecdotal user reporting suggests that the vaping of etomidate produces a strong drive to re-dose. This is likely influenced by the short acting nature of etomidate and the ease of consuming more of the substance.

While etomidate does not appear to consistently result in acute harm when taken on its own, when taken concurrently or alongside other substances the risk of harm increases. Acutely, etomidate may result in rapid development of effects including impaired coordination, sedation and hypoventilation.

Addiction treatment providers have reported cases of people with addictions to etomidate attending services in New Zealand. Internationally, addiction to etomidate has been reported, with a typical GABA-related withdrawal syndrome identified following abstinence. Withdrawal can pose serious health risks if not supported by medical professionals.

Internationally, with the growing availability of etomidate vapes harm is also increasing. Singapore has reported a number of deaths related to the misuse of etomidate.³

General comment for justification

As etomidate is currently controlled under the Medicines Act, this limits the powers Police have to respond to incidences involving etomidate. Currently, Police have no powers for warrantless search under the Search and Surveillance Act.

It is possible importation and distribution in New Zealand is at least partially incentivised by its status as a prescription medicine under the Medicines Act 1981, and the lower accompanying penalties relative to the Misuse of Drugs Act 1975.

² <https://www.unodc.org/roseap/en/2025/05/regional-synthetic-drugs-report-launch/story.html>

³ <https://www.mha.gov.sg/mediaroom/press-releases/whole-of-government-efforts-to-tackle-vaping/>

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Annex 2: TCDO

Temporary Class Drug Order

Pursuant to section 4C of the Misuse of Drugs Act 1975, I, the Honourable Simeon Brown, Minister of Health, specify the substance **etomidate** as a temporary class drug for the purposes of sections 4C and 4D of the Misuse of Drugs Act 1975 ("the Act").

I am satisfied that the substance specified:

- a. poses, or may pose, a risk of harm to individuals or to society; and
- b. has not been classified under this Act.

Date of Order

This Temporary Class Drug Order will take effect from 9th December 2025 and will expire on 8th December 2026, unless otherwise revoked or renewed as specified in section 4F of the Act.

Terms and Conditions

This Temporary Class Drug Order is subject to terms and conditions as specified under sections 4D and 4E of the Act. Etomidate will be treated for all purposes as if it were a controlled drug that is specified or described in Part 1 of Schedule 3 of the Act (Class C1).

Dated at Wellington this xxth day of xx 2025.

Hon SIMEON BROWN, Minister of Health.