



ALAN WILSON
ATTORNEY GENERAL

April 23, 2026

Martin A. Makary
Commissioner
U.S. Food and Drug Administration
10903 New Hampshire Ave
Silver Spring, MD 20992

Dear Commissioner Makary,

I am writing to express my deep concern regarding cychlorphine, a newly emerging synthetic opioid that has already resulted in at least one confirmed death here in South Carolina and over 40 deaths in our neighboring state of Tennessee. Early reports indicate that cychlorphine possesses extreme potency, rapid onset, and could be significantly more deadly than fentanyl. Given these characteristics, I urge the FDA to move swiftly toward the appropriate scheduling of this substance under the Controlled Substances Act.

Scheduling cychlorphine is essential for several reasons. First, a formal scheduling designation would improve the legal framework necessary for law enforcement agencies to effectively prosecute trafficking, distribution, and illicit manufacturing.¹ As we have seen with

¹ Although South Carolina could seek to prosecute under the state controlled substances analogue statute, *see* S.C. Code § 44-53-110, a formal scheduling designation would solidify the toolkit available to state prosecutors. For example, the state statute requires an additional showing that the chemical structure is substantially similar or has a physical effect that is substantially similar to an existing controlled substance. Additionally, while the Federal Analogue Act permits “a controlled substance analogue” to be “treated, for the purposes of any Federal law as a controlled substance in Schedule I,” that statute also requires a separate determination as to whether a controlled substance analogue was intended for human consumption and provides a list of factors to be considered in that determination. 21 U.S.C. § 813(a)–(b). Thus, state and federal law enforcement would greatly benefit from a formal scheduling of cychlorphine as a Schedule I controlled substance.

other synthetic opioids, delays in scheduling create opportunities for rapid proliferation in illegal markets, making it significantly harder to contain the spread once it takes hold.

Second, scheduling is a critical tool for protecting community safety. The presence of a potent synthetic opioid in circulation poses an immediate threat not only to individuals struggling with substance use but also to first responders, healthcare providers, and the broader public. Clear regulatory status enables public health agencies to issue guidance, track emerging patterns, and coordinate responses before widespread harm occurs.

Our communities are continually facing the devastating consequences of synthetic opioid misuse. These drugs, often manufactured in China, are being distributed by cartels that do not care who they kill in their illegal efforts to turn a profit. Taking proactive regulatory action on cychlorphine now would represent a meaningful step toward preventing another wave of avoidable loss and give prosecutors the tools they need to hold these traffickers accountable.

Thank you for your attention to this urgent matter and for your continued commitment to safeguarding public health. I appreciate the FDA's leadership in addressing emerging drug threats and trust that cychlorphine will receive the prompt review and scheduling consideration it warrants.

Sincerely,



Alan Wilson
South Carolina Attorney General