This bill repeals provisions governing the prescription, administration, and regulation of amygdalin to treat cancer.

**Fiscal Summary**

**State Effect:** The bill does not substantively change State activities or operations.

**Local Effect:** None.

**Small Business Effect:** None.

**Analysis**

**Current Law:** A physician may prescribe or administer amygdalin to treat cancer. A hospital or health facility may not restrict or prohibit the use of amygdalin that a physician, with the consent of a patient, prescribes for or administers to the patient. The Maryland Department of Health (MDH) may restrict or prohibit the use of amygdalin if, after a hearing, MDH finds that the way amygdalin is prescribed or administered is harmful to the patient. MDH must adopt rules and regulations for such hearings. MDH and the State Board of Pharmacy must regulate the manufacture, distribution, and sale of amygdalin for use in Maryland, but only to ensure that the amygdalin is not adulterated, contaminated by microorganisms, or misbranded. The bill repeals these provisions.

Amygdalin (also known as laetrile, a purified form of amygdalin) is a bitter substance found in fruit pits, such as apricots, raw nuts, lima beans, clover, and sorghum. In the 1950s,
laetrile began being promoted as a cancer treatment, although the U.S. Food and Drug Administration (FDA) viewed it as an unapproved new drug. In 1977, the U.S. District Court for the Western District of Oklahoma issued a decision permitting the importation of laetrile for the treatment of terminally ill cancer patients through a physician’s affidavit system. The decision was reversed in 1986, and the importation of laetrile under a physician’s affidavit was no longer permitted as of 1987. FDA has never approved amygdalin/laetrile as a treatment for cancer or any other medical condition. As a result, amygdalin/laetrile continues to be treated by the FDA as an unapproved new drug product.

Additional Information

Prior Introductions: None.

Designated Cross File: None.

Information Source(s): National Cancer Institute; U.S. Food and Drug Administration; Department of Budget and Management; Maryland Department of Health; Maryland Insurance Administration; Department of Legislative Services

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