

YOU DECIDE...

The following is a Supreme Court Case that was heard on October 5, 2005. A brief summary of the Federal Controlled Substances Act of 1970 follows. Using what you know about the case and the Controlled Substances Act, write a judicial opinion on a separate sheet of paper. Your decision should be AT LEAST one and a half pages long, citing the facts of the case, question presented, CSA, and any legal or moral precedent you feel is pertinent. You should try to give a clear, detailed and logical argument for your decision (“Because I said so...” or “Because death is cool...” are not good arguments). Good luck!

Gonzalez v. Oregon (2005)

FACTS OF THE CASE

In 1994 Oregon enacted the Death with Dignity Act, the first state law authorizing physicians to prescribe lethal doses of controlled substances to terminally ill patients. Attorney General John Ashcroft declared in 2001 that physician-assisted suicide violated the Controlled Substances Act of 1970 (CSA). Ashcroft threatened to revoke the medical licenses of physicians who took part in the practice. Oregon sued Ashcroft in federal district court. That court and, later the Ninth Circuit, held Ashcroft's directive illegal. The courts held that the CSA did not authorize the attorney general to regulate physician-assisted suicide, which was the sort of medical matter historically entrusted to the states.

QUESTION PRESENTED

Did the Controlled Substances Act authorize the attorney general to ban the use of controlled substances for physician-assisted suicide in Oregon?

SUMMARY OF THE FEDERAL CONTROLLED SUBSTANCES ACT OF 1970

The Federal Controlled Substances Act (“CSA”), Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970 regulates the production and distribution of controlled substances. The CSA prohibits the non-medical use of controlled substances and is “the legal foundation of the government’s fight against the abuse of drugs and other substances.”

The CSA classifies federally regulated substances into one of five schedules. This classification is based upon the substance’s medicinal value, harmfulness, and potential for abuse or addiction. Schedule I classification is reserved for the most dangerous drugs that have no recognized medical use. In contrast, Schedule V classification is used for the least dangerous drugs. The CSA also provides a mechanism for substances to be added to a schedule, rescheduled, or transferred from one schedule to another. Under the CSA, Congress has granted authority to the Drug Enforcement Administration (DEA) and the Department of Health and Human Services (HHS) to set the standards of production for certain opioids, stimulants, narcotics, and depressants.

The CSA states in part: “many of the drugs included within this title have a useful and legitimate medical purpose and are necessary to maintain the health and general welfare of the American people.” The Prescribing regulation notes, “This section is not intended to impose any limitation on a physician or authorized hospital staff to ... administer or dispense (including prescribe) narcotic drugs to persons with intractable pain in which no relief or cure is possible or none has been found after reasonable efforts.”

Schedule	Drug Descriptions
I	PCP, LSD, Heroine, Marijuana
II	Cocaine, Crack, Opium
III	Anabolex Steroids, Codeine (cough suppressant & pain relief)
IV	Valium (muscle relaxer, anxiety relief)
V	Robitussin A-C (cough syrup)



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