Claim: It may make you sick. In addition to the FDA-reported deaths associated with kratom, the Centers for Disease Control and Prevention says that poison-control centers across the country logged a ten-fold increase in kratom-related calls (from 26 cases in 2010 to 263 in 2015). Those calls included reports of nausea, vomiting, drowsiness, and irritation.

Response:
Kratom has been documented (by Dr. Jack Henningfield in testimony and an 8-point analysis and by others) to have a favorable safety profile and “very low” toxicity: (http://speciosa.org/8-factor-analysis-of-kratom-performed-by-dr-hennigfield-submitted-the-dea/). Many things taken in excess have the potential to cause nausea and induce vomiting, including legal consumable substances such as alcohol and caffeine.

The majority of consumers use kratom responsibly, as a supplement, and have no interest in over-consuming. The effects of overconsumption can be mitigated with proper packaging, labeling (including ingredients and recommended use), and education from kratom vendors.

The 10x uptick in kratom-related poison control center calls over the five-year period in question could simply be attributed to the growing popularity of kratom.


Claim: It may be adulterated with other chemicals. According to the DEA, kratom powders have been found to be laced with other opioids, like hydrocodone and tramadol. "There’s a lot of mixing that goes on with these products," says Danica Lee, director of public health inspections in Denver. "Businesses will try to boost the potency of their product by adding other chemicals."

Response:
No responsible or reputable kratom vendor would ever adulterate products or sell adulterated products. Responsible kratom vendors test their products for purity and potency, which would identify any contamination or adulteration, and should be able to provide certificates of analysis from an accredited testing lab for all their products.

Claim: It can be dangerous when taken with other drugs. The FDA says fatality reports indicate that some consumers are mixing kratom with other drugs, both legal and illicit. There is no research yet to say what the risks of such combinations might be.

Response:
Kratom alone has never been found to have caused death, and there have been relatively few reports of serious adverse events or death associated with kratom. There have been a handful of cases where kratom was found in combination with other drugs (most often prescription drugs like opioids and
benzos) in the system of a deceased individual. This is clearly an area where more research is needed. The FDA should be promoting research into kratom, both its effects alone and in combination with other drugs, rather than promoting a kratom ban, which would eliminate the possibility of further scientific research.

Claim: It can be addictive. According to the DEA, kratom was banned decades ago in its native Thailand because of its high propensity for abuse. And some U.S. users have reported that after turning to kratom to help kick an existing opioid addiction, they eventually became hooked on the plant itself.

Response:
The addiction profile of kratom-containing products is similar to that of caffeine: just like your morning cup of coffee, kratom can cause mild physiological and/or psychological dependence in some individuals. Kratom’s pharmacological effects are generally mild, and it does not typically interfere with work, family, or social life and obligations. Incidentally, many believe kratom was criminalized in Thailand because it undercut the lucrative opium trade there; in any case, the Thai government has indicated that they have plans to drop the ban on kratom as early as this year.