



ANZCA
FPM

4 February 2021

Advisory Committee on Medicines Scheduling
Therapeutic Goods Administration
PO Box 100
WODEN ACT 2606
Attn: Scheduling & Committee Support Section

Email: Medicines.Scheduling@health.gov.au

Dear Advisory Committee members,

Feedback on proposed amendments to the Poisons Standard – Nitrous Oxide

Thank you for inviting the Australian and New Zealand College of Anaesthetists (ANZCA) to provide feedback on the Therapeutic Goods Administration's (TGA's) proposed amendments to the Poisons Standard (ACMS, ACCS and Joint ACMS/ACCS meetings, March 2021) and for granting an extension until 5 February to enable the college to respond.

ANZCA, including the Faculty of Pain Medicine, is committed to setting the highest standards of clinical practice in the fields of anaesthesia, perioperative medicine and pain medicine. As one of the largest medical colleges in Australia, ANZCA is responsible for the postgraduate training programs of anaesthetists and specialist pain medicine physicians, in addition to promoting best practice and ongoing continuous improvement that contributes to a high quality health system.

The college's feedback on the proposed amendments is specifically in relation to [Item 3.3 - Nitrous oxide](#).

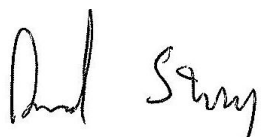
ANZCA recognises the serious risk associated with the recreational use of nitrous oxide in small canisters or 'nangs' and supports the creation of a new Schedule 10 entry for nitrous oxide for non-therapeutic purposes.

In relation to prescription use of nitrous oxide, while ANZCA is concerned to ensure that no unnecessary limitations are placed on its routine use in anaesthesia, we would like to reiterate concerns first communicated to the Advisory Committee on Medicines (ACM) Secretariat - Prescription Medicines Authorisation Branch in March-May 2019. In a number of emails, ANZCA expressed serious concerns relating to hand-held nitrous oxide delivery devices being marketed to dentists. These devices are loaded with small canisters of nitrous oxide and deliver the gas via nasal prongs with no added oxygen. As stated in that email correspondence, even when used as directed this has the potential for delivery of hypoxic concentrations of the gas. Whilst an inability to scavenge nitrous oxide and the potential for diversion are also important shortcomings of these devices, the possibility of hypoxia poses the greatest individual risk for a patient. No response was received to the college's correspondence and these devices appear to still be available for purchase, for example [here](#).

On a minor point, we also note that the “Key uses/expected use” is listed as “Medicines (inhalant anaesthetic)”. This is inaccurate as nitrous oxide is an analgesic rather than an anaesthetic when administered in non-hypoxic concentrations.

Thank you again for the opportunity to comment on the proposed amendments. Should you require any further information, please do not hesitate to contact the ANZCA safety and quality policy staff in the first instance at sq@anzca.edu.au

Yours sincerely

A handwritten signature in black ink, appearing to read 'David Story'.

Professor David Story
Chair, Safety and Quality Committee