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## SENATE COMMITTEE ON PUBLIC SAFETY

Senator Jesse Arreguín, Chair  
2025 - 2026 Regular

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**Bill No:** AB 1152      **Hearing Date:** July 15, 2025  
**Author:** Patterson  
**Version:** June 23, 2025  
**Urgency:** No      **Fiscal:** Yes  
**Consultant:** SJ

**Subject:** *Controlled substances: human chorionic gonadotropin*

### HISTORY

**Source:** Author

**Prior Legislation:** AB 2589 (Bigelow), Ch. 81, Stats. of 2018  
AB 1591 (Condit), Ch. 567, Stats. of 1989  
AB 4029 (Condit), Ch. 1033, Stats. of 1986

**Support:** Unknown

**Opposition:** None known

**Assembly Floor Vote:** Not relevant

### PURPOSE

*The purpose of this bill is to remove human chorionic gonadotropin (hCG) from the list of Schedule III controlled substances.*

*Existing law* classifies controlled substances in five schedules according to their danger and potential for abuse. (Health & Saf. Code, §§ 11054-11058.)

*Existing law* classifies hCG as a Schedule III controlled substance. Provides an exception when possessed by, sold to, purchased by, transferred to, or administered by a licensed veterinarian, or a licensed veterinarian's designated agent, exclusively for veterinary use. (Health & Saf. Code, § 11056, subd. (f)(32).)

*Existing law* makes the possession of a non-narcotic Schedule III controlled substance a misdemeanor, unless upon the prescription of a physician, dentist, podiatrist, or veterinarian licensed to practice in this state, and punishable by imprisonment in a county jail for a period of not more than one year. Provides that a person may instead be sentenced to 16 months, two years, or three years in county jail if that person has one or more prior convictions for specified offenses. (Health & Saf. Code § 11377, subd. (a).)

*This bill* removes hCG from the list of Schedule III controlled substances.

## COMMENTS

### 1. Need For This Bill

According to the author:

Human chorionic gonadotropin (HCG) has been shown for years to be a safe and effective infertility treatment for both men and women. FDA regulations, which require a prescription, protect against the misuse of this medicine. However, California is the exception to the vast majority of states: it regulates HCG as a Schedule III controlled substance, in the same category as steroids, which means its possession can land someone in jail.

The federal government, and most states, do not classify it as a controlled substance because there is no public safety risk and the risk of personal abuse is near non-existent. AB 1152 removes this unnecessary inclusion.

### 2. Controlled Substance Schedules

Through the Controlled Substances Act (CSA) of 1970, the federal government regulates the manufacture, distribution, and dispensing of controlled substances. The CSA groups drugs into five schedules with decreasing potential for physical or psychological harm, based on three considerations: accepted medical use; potential for abuse; and, safety or dependency liability. Two goals of the CSA are “to ensure that patients have access to pharmaceutical controlled substances for legitimate medical purposes while also seeking to protect public health from the dangers of controlled substances diverted into or produced for the illicit market.” (Congressional Research Service, *Summary, The Controlled Substances Act: A Legal Overview for the 119th Congress* (Jan. 22, 2025) available at <<https://www.congress.gov/crs-product/R45948>>.) Consistent with those goals are the CSA’s provisions designed to prevent diversion and misuse of controlled substances. (*Id.* at p. 2.)

California’s controlled substances schedules largely follow the federal schedules and are codified in Health and Safety Code sections 11054 to 11058.

- Schedule I controlled substances, such as heroin, ecstasy, and LSD, have a high potential for abuse and no generally accepted medical use.
- Schedule II controlled substances have a currently accepted medical use, with significant risk to patient safety, and have a high potential for abuse and dependence. Schedule II drugs can be narcotics or non-narcotic. Examples of Schedule II controlled substances include morphine, oxycodone, codeine, and amphetamine.
- Schedule III controlled substances have a currently accepted medical use and potential for abuse leading to moderate physical dependence. Examples of Schedule III controlled substances include ketamine and anabolic steroids.
- Schedule IV controlled substances have a currently accepted medical use and low potential for abuse which may lead to limited physical dependence. Examples of Schedule IV controlled substances include benzodiazepines.
- Schedule V controlled substances have a low potential for abuse or dependence. Examples of Schedule V controlled substances include buprenorphine and narcotic drugs containing non-narcotic active medicinal ingredients.

### 3. Human Chorionic Gonadotropin (hCG)

hCG is a hormone produced by the placenta during pregnancy. The federal Food and Drug Administration (FDA) has approved hCG to treat female infertility and as a hormone treatment for men, including to treat low sperm count. (U.S. FDA, *Questions and Answers on HCG Products for Weight Loss* (May 4, 2016) available at <<https://www.fda.gov/drugs/medication-health-fraud/questions-and-answers-hcg-products-weight-loss>>.) A prescription is required to obtain hCG. (*Ibid.*)

Synthetic hCG is considered a performance-enhancing drug. (U.S. Anti-Doping Agency, *Effects of Performance-Enhancing Drugs* available at <<https://www.usada.org/athletes/substances/effects-of-performance-enhancing-drugs/>>.) Its use is generally prohibited in male athletes by various U.S. and international sports leagues, federations, and governing bodies.<sup>1</sup> hCG is strongly associated with anabolic steroids due to its restoration of natural testosterone production following a cycle of steroid use. (Stenman et al., *Gonadotropins in doping: pharmacological basis and detection of illicit use* (Apr. 2008) available at <<https://pmc.ncbi.nlm.nih.gov/articles/PMC2439513/>>; Lance Williams, *HCG helps steroid users restore testosterone* (May 8, 2009) available at <<https://www.sfgate.com/sports/article/hcg-helps-steroid-users-restore-testosterone-3162496.php>>; Mike Fish, *First Gibbons and Bell, now Manny* (May 7, 2009) available at <<https://www.espn.com/mlb/news/story?id=4150133>>.)

hCG is currently included in Schedule III of the controlled substance schedules along with anabolic steroids and testosterone. Anabolic steroids and hCG were added to Schedule III in 1986. (See AB 4029 (Condit), Ch. 1033, Stats. of 1986; Randy Harvey, *Weightlifter, Lobbyist Join Forces in Fighting Steroids* (Apr. 9, 1986) available at <<https://www.latimes.com/archives/la-xpm-1986-04-09-sp-3668-story.html>>.) This bill removes hCG from the controlled substances schedules. As such, obtaining hCG would still require a prescription but it would be subject to fewer restrictions and regulations. For example, prescribers and dispensers would no longer be mandated to report their prescribing and dispensing activities to the state's prescription drug monitoring program. Criminal liability under Health and Safety Code section 11377—which prohibits the possession of a non-narcotic Schedule III substance without a prescription—would also no longer apply. Removing hCG from Schedule III raises the question of whether there are other similarly situated controlled substances, such as testosterone, that should also be removed from the controlled substance schedules in order to maintain consistency across the controlled substance schedules.

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<sup>1</sup> The International Olympics Committee has banned hCG since 1987. The World Anti-Doping Agency, responsible for the World Anti-Doping Code which has been adopted by more than 650 sports organizations, includes hCG on its banned-substances list.