
THIRD READING

Bill No: AB 1152
Author: Patterson (R)
Amended: 9/2/25 in Senate
Vote: 21

SENATE PUBLIC SAFETY COMMITTEE: 6-0, 7/15/25
AYES: Arreguín, Seyarto, Caballero, Gonzalez, Pérez, Wiener

ASSEMBLY FLOOR VOTE: Not relevant

SUBJECT: Controlled substances: human chorionic gonadotropin

SOURCE: Author

DIGEST: This bill removes human chorionic gonadotropin (HCG) from the list of Schedule III controlled substances.

Senate Floor Amendments of 9/2/25 correct a drafting error.

ANALYSIS:

Existing law:

- 1) Classifies controlled substances in five schedules according to their danger and potential for abuse. (Health & Safety (Saf.) Code, §§ 11054-11058.)
- 2) 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).)
- 3) 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.

Background

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.

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. 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.

FISCAL EFFECT: Appropriation: No Fiscal Com.: Yes Local: No

Senate Rule 28.8

SUPPORT: (Verified 9/2/25)

None received

OPPOSITION: (Verified 9/2/25)

None received

Prepared by: Stephanie Jordan / PUB. S. /
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