



Shani Reissour NRP

Mya's Mission Foundation Inc.

Dear Members of the House Judiciary Committee:

My name is Shani Reissour. I have lived in North Dakota my whole life and have served our state as a Nationally Registered Paramedic for 20 years! I am writing in strong support of HB1101, a bill that seeks to make Kratom a Schedule I drug in North Dakota. To understand why this bill is crucial, we must reflect on the long-standing cycle of drug abuse in our country. This history has created a devastating pattern that continues to plague our communities, particularly in light of the modern opioid crisis.

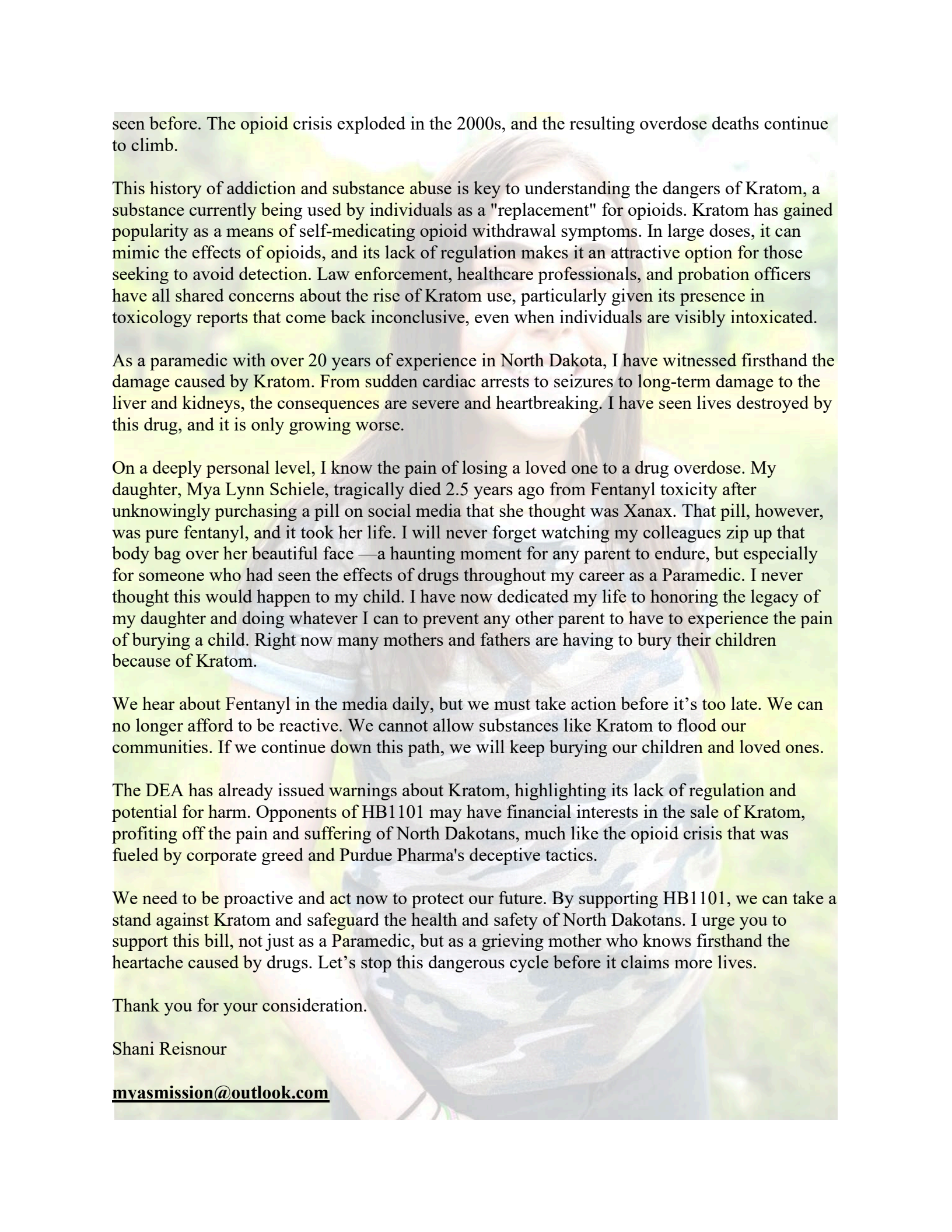
The history of opiate abuse in the United States stretches back to the 19th century. It began with opium and morphine, which flooded the market as trade with China and other regions expanded. Opium was used to treat a range of diseases, particularly respiratory and gastrointestinal ailments, during a time when medical knowledge was limited, and opiates were one of the few effective pain relievers available.

A pivotal moment came after the Civil War, when many veterans who had suffered amputations or traumatic injuries became addicted to opiates. Shockingly, nearly 60-70% of the morphine addicts of the late 19th century were women. In 1898, Bayer introduced heroin, marketed as a safer alternative to morphine, but by the early 1900s, the dangers of opiates became more widely recognized. Despite efforts to regulate opium, heroin remained legal for some time, leading to its widespread use and eventual proliferation on the black market.

By the 1920s, heroin addiction was rampant, and efforts to combat its use were unsuccessful. During World War II, the U.S. government stockpiled opium for strategic purposes, inadvertently driving up demand on the black market. By the 1950s, addiction surged again, and Congress introduced mandatory minimum sentences for drug-related crimes. However, despite these efforts, addiction continued to spread, particularly in impoverished neighborhoods.

Fast forward to the late 1990s, when a new chapter of the opioid epidemic began. Pharmaceutical companies, led by Purdue Pharma, aggressively marketed prescription opioids, particularly OxyContin, as a safe and non-addictive solution for chronic pain. Purdue's marketing campaign downplayed the risks of addiction, falsely assuring doctors and patients that the drug was not habit-forming. By the time the truth came to light, millions of Americans were already addicted. Purdue Pharma's deceptive practices fueled the current opioid crisis, contributing to the overdose deaths of hundreds of thousands.

As the crisis deepened, patients who were initially prescribed prescription opioids began to turn to illicit alternatives, such as heroin and, later, synthetic opioids like Fentanyl. This new wave of addiction devastated communities and led to the widespread use of opioids in ways we had not

A woman in a paramedic uniform is holding a young child. The woman has long dark hair and is wearing a white paramedic uniform with a blue and white patterned vest. The child is wearing a blue and white patterned shirt. The background is a soft-focus outdoor setting with green foliage.

seen before. The opioid crisis exploded in the 2000s, and the resulting overdose deaths continue to climb.

This history of addiction and substance abuse is key to understanding the dangers of Kratom, a substance currently being used by individuals as a "replacement" for opioids. Kratom has gained popularity as a means of self-medicating opioid withdrawal symptoms. In large doses, it can mimic the effects of opioids, and its lack of regulation makes it an attractive option for those seeking to avoid detection. Law enforcement, healthcare professionals, and probation officers have all shared concerns about the rise of Kratom use, particularly given its presence in toxicology reports that come back inconclusive, even when individuals are visibly intoxicated.

As a paramedic with over 20 years of experience in North Dakota, I have witnessed firsthand the damage caused by Kratom. From sudden cardiac arrests to seizures to long-term damage to the liver and kidneys, the consequences are severe and heartbreaking. I have seen lives destroyed by this drug, and it is only growing worse.

On a deeply personal level, I know the pain of losing a loved one to a drug overdose. My daughter, Mya Lynn Schiele, tragically died 2.5 years ago from Fentanyl toxicity after unknowingly purchasing a pill on social media that she thought was Xanax. That pill, however, was pure fentanyl, and it took her life. I will never forget watching my colleagues zip up that body bag over her beautiful face—a haunting moment for any parent to endure, but especially for someone who had seen the effects of drugs throughout my career as a Paramedic. I never thought this would happen to my child. I have now dedicated my life to honoring the legacy of my daughter and doing whatever I can to prevent any other parent to have to experience the pain of burying a child. Right now many mothers and fathers are having to bury their children because of Kratom.

We hear about Fentanyl in the media daily, but we must take action before it's too late. We can no longer afford to be reactive. We cannot allow substances like Kratom to flood our communities. If we continue down this path, we will keep burying our children and loved ones.

The DEA has already issued warnings about Kratom, highlighting its lack of regulation and potential for harm. Opponents of HB1101 may have financial interests in the sale of Kratom, profiting off the pain and suffering of North Dakotans, much like the opioid crisis that was fueled by corporate greed and Purdue Pharma's deceptive tactics.

We need to be proactive and act now to protect our future. By supporting HB1101, we can take a stand against Kratom and safeguard the health and safety of North Dakotans. I urge you to support this bill, not just as a Paramedic, but as a grieving mother who knows firsthand the heartache caused by drugs. Let's stop this dangerous cycle before it claims more lives.

Thank you for your consideration.

Shani Reissour

myasmission@outlook.com

