Ann Ist Super Sanità 2026 | Vol. 62, No. 4: 318-332
DOI: 10.4415/ANN_26_04_05

ORIGINAL ARTICLES AND REVIEWS

Legal responses to new psychoactive substances outside the REITOX network: regulatory models and their implications

[Early release]

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Abstract

Introduction. The rapid proliferation of new psychoactive substances (NPS) has exposed significant limitations in traditional scheduling, particularly in European countries operating outside the REITOX network (Réseau Européen d´Information sur les Drogues et les Toxicomanies). This study provides an analysis of four geopolitical trajectories, the Western Balkans, the United Kingdom, Moldova and Ukraine, and Russia and Belarus, to assess their regulatory responses and their alignment with European and international standards.

Objective. To provide a comparative overview of legislative frameworks and regulatory responses to NPS outside the REITOX network within Europe.

Methods. The analysis is based on a systematic review of primary legislation, regulatory instruments and institutional documentation to map classification models, update mechanisms and the presence or absence of risk assessment procedures across the selected groups of countries.

Results. Western Balkan countries show gradual convergence toward European Union inspired frameworks, though updates remain irregular and administratively constrained. The United Kingdom retains a structured model but faces reduced access to European information sharing mechanisms. Moldova and Ukraine are undergoing significant reforms aimed at harmonization, while Russia and Belarus rely on centralized, security oriented approaches characterized by rapid but limited risk assessment.

Key words

- new psychoactive substances
- national legislations
- European Union
- REITOX network
- NPS scheduling

INTRODUCTION

The rapid spread of new psychoactive substances (NPS) [1] over the past two decades had a relevant impact on the development of drug policies in Europe and its neighbouring countries. NPS are designed to evade classification systems through minimal structural modifications of molecules already subject to regulatory control. This characteristic makes them particularly difficult to detect, a challenge further compounded by their rapid emergence on the market. The toxicity level of NPS is often unknown, and their ability to rapidly replace already controlled molecules creates a continuous cycle of regulatory adaptation. As discussed in the article "Legal responses to new psychoactive substances in Europe: countries inside the Réseau Européen d´Information sur les Drogues et les Toxicomanies (REITOX network), Norway, and Türkiye" [2], the scheduling model provided by the three United Nations Conventions of 1961, 1971, and 1988 [3-5], while ensuring legal certainty, is structurally ill-suited to address the dynamic nature of this phenomenon [6]. In response to these challenges, the European Union (EU) has developed a system that integrates monitoring, risk assessment, and regulatory intervention at multiple levels. The EU Early Warning System (EWS) [7], coordinated by the European Union Drugs Agency (EUDA) and supported by the REITOX network, brings together the national focal points of the EU Member States, Norway, Türkiye and the European Commission. The risk assessment process, which combines toxicological data, clinical evidence, forensic information, and epidemiological indicators, enables the adoption of rapid and scientifically grounded control measures [8]. However, this mechanism for cooperation and regulatory

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harmonization does not extend to all the countries of the European continent. In fact, a significant portion of Europe remains outside the REITOX network and the decision-making processes of the European Union (EU), despite being deeply involved in the dynamics of production, trafficking, consumption, and regulation of substances of abuse.

The analysis is structured around four geopolitical trajectories, each corresponding to a group of countries characterized by a different degree of integration and/or distance from the model of the states belonging to the REITOX network. The first trajectory encompasses the countries of the Western Balkans: non-EU member states that maintain partnership relations with the EU and that are already beneficiaries of the Instrument for Pre-accession Assistance (IPA), whose purpose is supporting reforms with financial and technical assistance. This political orientation is reflected in a gradual alignment with European regulatory models, based on legislative reforms aimed at strengthening classification systems, improving mechanisms for updating schedules, and integrating risk assessment procedures inspired by the EU Early Warning System (EWS) [9]. Their intermediate position, between the commitment for alignment with the EU and the preservation of their institutional autonomy, makes this group of particular interest for this study. The second trajectory analyzed in this study concerns the United Kingdom, the only country that, after participating in EU mechanisms and the REITOX network, withdrew from them following the Brexit referendum. This country operates outside European information flows and decision-making processes, creating a form of separation following integration. Nevertheless, it maintains a well-organized and scientifically grounded substance control system. The third trajectory concerns Moldova and Ukraine, two Eastern European countries that have embarked on a path of regulatory alignment with the EU in recent years. Both are reforming their substance control systems. They have introduced specific categories for NPS, strengthened updating mechanisms, and are progressively adopting instruments specific to the REITOX model. Finally, the fourth trajectory concerns Russia and Belarus. Their regulatory frameworks are characterized by a high degree of centralization, specifically by a markedly security-oriented approach and by extremely rapid scheduling mechanisms that lack a transparent and scientifically structured risk assessment. In these contexts, the response to NPS relies primarily on the automatic extension of bans and the use of broad categories such as analogues. Analyzing these four trajectories allows understanding how the regulation of psychoactive substances is developing unevenly across Europe. The objective of this study is to provide a mapping of the regulatory systems in these countries and to assess the implications of regulatory differences on the ability to respond to the challenges posed by substances of abuse.

METHODS

The study is based on an analysis of the regulations and control mechanisms governing substances of abuse in the countries under investigation. In line with the approach adopted in the article "Legal responses to new psychoactive substances in Europe: countries inside the REITOX network, Norway, and Türkiye" [2], the methodology combines a systematic review of primary legislative sources with the consultation of institutional documents produced by international organizations. Data collection therefore involved studying the main legislation governing the classification, control, and updating of psychoactive substances in each country examined. For each legal system, the current regulatory texts, their subsequent amendments, and implementing instruments were examined, such as ministerial regulations, government decisions, annexed lists, and classification tables. The analysis also included regulations concerning precursors, licensing mechanisms, and risk assessment procedures. The primary sources were then supplemented with official documents from international organizations, in particular the European Union Drugs Agency (EUDA) and the United Nations Office on Drugs and Crime (UNODC). These materials made it possible to contextualize national systems and assess the degree of alignment with European standards and United Nations conventions. In several cases, legislative texts were available only in the official language of the respective jurisdiction. When no official English version existed, working translations of the original legal texts were produced solely to support the comparative analysis. These translations are not official and the original-laguage acts remain the authoritative sources.

The analysis was organized around four dimensions:

- creation of four categories of countries corresponding to the geopolitical trajectories identified in the introduction: the United Kingdom, the Western Balkan countries, Moldova and Ukraine, and Russia and Belarus;
- identification of relevant legislative instruments, including primary legislation and regulatory acts defining the lists of controlled substances;
- analysis of the classification models adopted, distinguishing between multiple-table systems, unified lists, controls on analogues, generic mechanisms, and temporary control measures;
- identification of the procedures and timelines for updating classification tables, with particular attention to mechanisms for including NPS and the presence or absence of formal risk assessment processes.

RESULTS

Western Balkan countries

An analysis of the legislation of the Western Balkan countries reveals a structured regulatory framework in evolution and characterized by a process oriented toward an alignment with European legislative trends. All legal systems in the region are based on United Nations (UN) conventions and adopt structured classification systems. What varies is the capacity for updating, the level of institutional coordination, and the integration of mechanisms such as risk assessment. These differences reflect diverse institutional and administrative paths, as well as varying levels of cooperation with the European Union (EU). The following findings derive from an ex-

amination of the attached comparative table, which systematically compiles the legislative provisions, classification structures, and updating procedures adopted in the Western Balkan countries [10-35] (*Table 1*).

In Albania, the Law n. 7975/1995 on narcotic, psychotropic and controlled substances [10] as comprehensively amended by the reform introduced by the Law n. 128/2024 [11] marked a step toward a more comprehensive system aligned with European standards. The country has transitioned from a system based on schedules stratified over time to a more linear classification system based on annexed lists that directly incorporate the schedules of the UN conventions. The inclusion of the new List A, which is not a standalone system but a category of controlled substances, reflects an attempt to streamline a regulatory framework that had become fragmented [36]. However, the absence of mandatory deadlines for updating the lists remains a critical issue. Changes occur only through legislative action, often driven by international pressure (International Narcotics Control Board – INCB, the World Health Organization – WHO, and the Commission on Narcotic Drugs – CND) or by toxicological emergencies identified in forensic laboratories.

Table 1
Legal framework of Western Balkan countries

Country	Legal text	Drug scheduling	Scheduling timelines/update mechanism
Albania	• *Law n. 7975/1995* on narcotic, psychotropic and controlled substances [10] (as comprehensively amended by *Law n. 128/2024* [11], introducing a unified classification system, replacing former tables with annexed lists and incorporating United Nations (UN) Convention schedules and *National List A*). • *Law n. 61/2023* [12] on controlled cultivation, production and circulation of cannabis for medical and industrial purposes (integrated via *art. 104/1 of Law 7975).* • *Law n. 8750/2001* [13] on prevention and fight against trafficking of narcotic or psychotropic substances. • *Law n. 8874/2002* on chemical precursors. • *Law n. 108/2014* on enforcement aspects; *Law on medicines and pharmaceutical services* on pharmaceutical dimension.	The classification system of controlled substances is organised through the lists annexed to *Law n. 7975/1995,* as subsequently amended. The system incorporates the international schedules directly into domestic legislation: • *List I* of the 1961 Single Convention on Narcotic Drugs* • *Lists I-IV* of the 1971 Convention on Psychotropic Substances** • *Law n. 128/2024* adds List A, covering substances exempted from specific rules governing substances in Tables II and III: list A is not a separate scheduling system.	No statutory deadlines or identifiable periodicity for scheduling decisions. Updates introduced through legislative amendments (e.g., *Law 128/2024*) following the International Narcotics Control Board (INCB), the World Health Organization (WHO) and the Commission on Narcotic Drugs (CND) recommendations and international scheduling decisions.
Bosnia and Herzegovina	• *Law on prevention and suppression of the abuse of narcotic drugs* (*Official Gazette BiH 8/06*) [14]: framework law implementing the UN drug control conventions; regulates classification, licit cultivation, manufacture, trade, possession, supervision and institutional architecture (Commission on Narcotic Drugs; Department for Narcotic Drugs). • *Criminal codes* (State, Entities, Brčko District) [15]: criminalisation of illicit manufacture, trafficking, possession and precursor offences. • *Decision of the Council of Ministers (Official Gazette BiH 6/26)* [16]: latest amendment reclassifying cannabis from Schedule I to Schedule II and addition of 112 new psychoactive substances (NPS). • *National strategy for the control of narcotic drugs, and the prevention and suppression of the abuse of narcotic drugs in Bosnia and Herzegovina (2018-2023)* [17] and subsequent strategic documents.	The national List annexed to the 2006 Law establishes four *Tables:* • *Schedule I:* Prohibited substances and plants (no cultivation, manufacture, possession or use, except for scientific/forensic purposes). It consists of three Lists: 1) List of narcotic drugs; 2) List of psychotropic substances; 3) List of plants from which narcotic drug could be obtained • *Schedule II:* Strictly controlled substances and plants (licensing regime for cultivation, manufacture, trade, possession and use). It is subdivided into 2 Lists: 1) List of narcotic drugs; 2) List of psychotropic substances • *Schedule III:* Controlled substances and plants (lower level of control; still subject to licensing). It is subdivided into two Lists: 1) List of narcotic drugs; 2) List of psychotropic substances. • *Schedule IV:* Precursors (manufacture, trade and possession allowed under licence) • The List includes all substances controlled under the 1961*, 1971** and 1988*** UN Conventions, plus additional substances designated nationally by the Council of Ministers.	• The Council of Ministers may amend the national List at any time, following consultation with the Commission on Narcotic Drugs and the Pharmaceutical Agency (*art. 16a Law 8/06*). • No statutory deadline or fixed periodicity for revisions. Amendments occur through ad hoc Decisions published in the Official Gazette (e.g., *Decision 6/26*). • Recent practice shows long intervals without updates (2011–2025), followed by comprehensive revisions (e.g., addition of 112 NPS and cannabis reclassification).

Continues

Table 1
Legal framework of Western Balkan countries

Country	Legal text	Drug scheduling	Scheduling timelines/update mechanism
Kosovo	• *Law n. 02/L-128 on narcotic medicaments, psychotropes and precursors (2008)* [18]: core statute regulating production, import/export, circulation, possession, use, and control; establishes licensing regimes and prohibitions. • *Criminal code of Kosovo (2019, Code n. 06/L-074)* [19]*:* criminalizes unauthorized cultivation, production, possession, trafficking, distribution, and facilitation of narcotics; includes aggravated forms and organized crime provisions. • *National strategy against narcotics and action plans (2009-2012; 2012-2017; 2018-2022)* [20]*:* strategic frameworks for demand reduction, supply reduction, coordination, and institutional capacity-building.	Kosovo applies a four-table classification system (Tables I–IV) established by Law n. 02/L-128 and aligned with UN drug control conventions (1961*, 1971**, 1988***): • *Table I*: Prohibited substances and plants with no medical use; all activities banned except for scientific, forensic, educational or police purposes • *Table II*: Narcotic medicaments and psychotropic substances of high risk but with medical/veterinary use; subject to strict licensing and control • *Table III*: Preparations and psychotropic substances used in medicine/ veterinary practice; controlled under medical prescription and institutional licensing • *Table IV*: Precursors classified in three categories (*European Commission Regulation 273/2004*); subject to licensing, reporting, and traceability obligations.	No statutory revision cycle is established. Until 2025, schedule amendments were issued irregularly through governmental decisions. Since February 2025, revisions follow a formal procedure whereby the Commission for Narcotics submits proposals. The Government adopts the corresponding amendments in line with international conventions; the latest update was promulgated in May 2025. *Kosovo Agency for Medicinal Products and Devices (KAMPD)*, which is the competent authority for licensing operators, determining annual national requirements, and reporting to INCB, is also responsible for identifying and monitoring substances, including NPS.
Montenegro	• *Law on prevention of drug abuse (Official Gazette of Montenegro n. 28/11, 35/13, 84/24)* [21]*:* framework law regulating prevention, treatment, production, circulation and control of narcotic drugs; establishes the national List of drugs, the National Strategy, the State Council for Prevention of Drug Abuse, municipal prevention offices and the Commission for Drugs. • *Criminal code of Montenegro (Arts. 300-301)* [22]*:* criminalisation of unauthorised production, possession, distribution and enabling use of narcotic drugs. • *Law on the supervision and control of the production and traffic of certain substances which can be used in the production of narcotic drugs and psychotropic substances (Official Gazette of Montenegro n. 003/26)* [23]: establishes the precursor control regime, licensing, categories I-III, reporting obligations and INCB compliance. • *Regulations on the list of substances that may be used in the illegal production of narcotic drugs and psychotropic substances* (Official Gazette of Montenegro, n. 022/26) [24] • *Drug strategy for the period 2024-2027 with the Action plan for 2024-2025* [25].	Montenegro applies a list-based classification that reflects UN drug control conventions (1961*, 1971** and 1988***), with the addition of a NPS category. The classification is the following: 1. List of drugs and plants from which drugs can be obtained Part I: • Group 1: Drugs in accordance with Schedule I of the 196* UN Convention. • Raw materials for intermediate processing • Group 2: Drugs in accordance with Schedule II of the 1961* UN Convention • Group 3: Drugs included in Schedule 4 of the 1961* UN Convention. Part II: Preparations for medical and pharmaceutical purposes containing drugs from Schedule II of the 1961* UN Convention that are exempt from certain provisions of the Convention. 2. List of psychotropic substances and plants: • Group 1: Psychotropic substances aligned with Schedule I of the 1971** UN Convention • Group 2: Psychotropic substances aligned with Schedule II of the 1971** UN Convention • Group 3: Psychotropic substances aligned with Schedule III of the 1971** UN Convention • Group 4: Psychotropic substances aligned with Schedule IV of the 1971** UN Convention. 3. New Psychoactive Substances	No statutory deadlines for scheduling decisions. Updates to the List of drugs occur through ministerial amendments (Rulebooks) issued by the Ministry of Health, based on: • forensic detection of new substances (NEWS); • recommendations from the Institute for Medicines and Medical Devices; • Police Directorate inputs; • international scheduling decisions from CND, WHO, European Union Drug Agency (EUDA). Precursor lists are updated by the Ministry of Health upon proposal of the Agency for Medicines and Medical Devices and the Police Directorate. National list of drugs was updated in 2018, 2021, 2023 and 2025.

Continues

Table 1
Legal framework of Western Balkan countries

Country	Legal text	Drug scheduling	Scheduling timelines/update mechanism
North Macedonia	• *Law on control of narcotic drugs and psychotropic substances (Official Gazette of the Republic of Macedonia n. 103/08, 124/10, 164/13, 149/15, 37/16, 53/16, 193/17, as amended)* [26]: comprehensive legislative framework regulating classification, licit cultivation, production, import/export, circulation, possession, use and supervision of narcotic drugs and psychotropic substances. It establishes licensing regimes and institutional coordination mechanisms. Defines cannabis for medical purposes, industrial hemp, controlled substances, precursors, and establishes licensing regimes for cultivation, manufacture and trade. • *Rulebooks on classification lists (e.g., Official Gazette n. 87/2016; n. 104/2021)* [27]: ministerial acts issued by the Ministry of Health establishing and updating the national Lists of narcotic drugs, psychotropic substances, plants and preparations, aligned with the UN Conventions. • *Rulebook on prescription forms and prescribing procedures (Official Gazette n. 79/2023)* [28]: regulates medical prescribing of controlled substances, including preparations containing cannabis for specific medical indications. • *Criminal code of North Macedonia (Arts. 215-216)* [29]*:* criminalisation of unauthorised production, processing, sale, possession, trafficking, facilitation and provision of premises for drug use; aggravated forms for minors and organised networks. • *Law on control of precursors* establishes monitoring and licensing for manufacture, import/export, transit and trade of precursors, aligned with the 1988 UN Convention and EU precursor legislation. • *National drugs strategy 2021-2025* and *Action plan 2021-2023* [30]*:* strategic framework for demand reduction, supply reduction, coordination, monitoring and international cooperation.	North Macedonia applies a list-based classification system for narcotic drugs, psychotropic substances and precursors, established under the *Law on Control of Narcotic Drugs and Psychotropic Substances* and further specified through ministerial Rulebooks issued by the Ministry of Health (e.g., *Official Gazette No. 87/2016; n. 104/2021*). The classification system is aligned with the UN drug control conventions (1961*, 1971** and 1988***), and the lists are periodically updated through ministerial Rulebooks, incorporating internationally controlled substances and newly identified compounds, including new psychoactive substances. The Rulebook defines two categories, which are "Narcotic Drugs" and "Psychotropic Substances", following the 1961* and 1971** UN Conventions, and for each of them 4 lists: • List I: substances and plants whose circulation is prohibited, except for strictly limited scientific, medical or forensic purposes • List II: substances with restricted circulation, permitted for medical use under strict control, including licensing, prescription and monitoring requirements • List III: substances and preparations with controlled but less restrictive circulation, including certain medicinal products subject to prescription requirements. Under the "Psychotropic Substances" category is also included a list IV, which includes substances subject to less restrictive measures, with lower risk and currently accepted and recognized therapeutic use. Precursors: are regulated separately under the Law on Control of Precursors, in accordance with the 1988*** UN Convention and relevant European Union (EU) legislation.	• No statutory deadlines for updating the classification Lists. The overall timeframe for scheduling new substances is not formally defined in legislation and varies according to administrative and regulatory processes. • Updates are introduced through ministerial Rulebooks issued by the Ministry of Health, based on: UN scheduling decisions (CND, WHO recommendations); forensic detection of new substances; proposals from national authorities (e.g., Agency for Medicines and Medical Devices, Ministry of Interior and Customs Authorities). • Amendments may include reclassification of existing substances, addition of new substances and technical updates to nomenclature and list structure.
Serbia	• *Law on psychoactive controlled substances (Official Gazette RS n. 99/2010, 57/2018)* [31]*:* core statute regulating classification, control measures, manufacture, trade, possession, import/export, precursor control, and the national early warning system (NEWS). • *Rulebook on the establishment of the list of psychoactive controlled substances (Official Gazette RS n. 12/2026)* [32]*:* latest comprehensive update of the national List, replacing the 2024 Rulebook. • *Law on substances used in the illegal production of narcotic drugs and psychotropic substances (Official Gazette of RS n. 107/05, 25/19)* [33]: regulates the conditions for the production and wholesale of precursors.	Serbia applies a multi-list scheduling system established by the *Rulebook on the establishment of the list of psychoactive controlled substances (2026),* aligned with the 1961*, 1971** and 1988*** UN Conventions: • Schedule I: Narcotic drugs used for therapeutic and scientific research purposes • Schedule II: Narcotic drugs which may cause impairment of human health; • Schedule III: Preparations containing narcotic drugs used for therapeutic purposes • Schedule IV: Psychotropic substances which may cause serious harm to human health	• *No statutory deadlines* for scheduling updates. • Amendments occur through new ministerial Rulebooks issued by the Ministry of Health that replace the previous ones. Updates follow: • national risk assessment by the Commission for Psychoactive Controlled Substances • NEWS notifications and analytical findings from NPCC, police forensics, customs, and the Security Information Agency • EUDA, WHO, CND scheduling decisions

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Table 1
Legal framework of Western Balkan countries

Country	Legal text	Drug scheduling	Scheduling timelines/update mechanism
Serbia	• *Rulebook on the establishment of the list of substances used in the illegal production of narcotic drugs and psychotropic substances (Official Gazette of RS n. 112/02, 09/20)*: latest list of precursors, establishes three categories. • *Criminal code of Serbia* [34]*:* criminalisation of unauthorized production, trafficking, possession, enabling use, and precursor-related offences. • *Early warning system protocol (2019)* [35]*:* defines NEWS structure, reporting obligations, national risk-assessment procedure, and cooperation with EMCDDA and Europol.	• Schedule V: Psychotropic substances used for limited therapeutic and scientific research purposes • Schedule VI: Psychotropic substances used for therapeutic and scientific research purposes • Schedule VII: Psychotropic substances used for therapeutic and scientific research purposes. Additional features: • NPS are added following a formal risk assessment by the Commission for Psychoactive Controlled Substances. • Lists include isomers, esters, ethers and salts when chemically possible.	• evidence of public-health risk, abuse patterns, or forensic detection of new substances. Recent practice: • 2018: amendments to the Law on psychoactive controlled substances • 2019–2023: strengthening of NEWS and risk-assessment procedures • 2024: major revision of the national List (Rulebook 77/2024), replacing the previous 2024 Rulebook.

*Single Convention on narcotic drugs, 1961; **Convention on psychotropic substances, 1971; ***United Nations Convention against illicit traffic in narcotic drugs and psychotropic substances, 1988.

Bosnia and Herzegovina has a particularly fragmented system that reflects the complex architecture of state institutions. The 2006 Framework Law establishes four schedules, each divided into internal lists, whose revision and management are influenced by the country's institutional structure: the central government, the Entities, and the Brčko District share responsibilities that do not always align seamlessly [37]. The most significant factor is the time gap between updates. In fact, after 2011, the country made no changes until 2025, when the Council of Ministers approved a major update adding 112 new psychoactive substances (NPS) and reclassifying cannabis from Schedule I to Schedule II [16]. This gap of over a decade, in a context where the market and production of substances of abuse, specifically NPS, are constantly evolving, reveals a structural vulnerability. Decisions are made through *ad hoc* measures, without a cyclical procedure or a fully operational early warning system, risking the exposure of entire categories of substances for years.

Kosovo's administrative system is more streamlined, based on four tables that reflect the structures outlined in the UN Conventions. A distinctive feature is the presence of the Agency for Medicines and Medical Devices (KAMPD). KAMPD plays a technical role, issues authorizations, estimates annual needs, and participates in the identification of new substances [18]. Updates used to be infrequent and lacked a formalized procedure, but what could be potentially considered a significative change occurred in 2025, with the introduction of a specific mechanism and the establishment of the Narcotics Commission, which has the mandate of submitting proposals for government approval. The May 2025 update appears to be moving toward greater stability.

Montenegro exhibits certain characteristics that bring it closer to European standards, particularly the existence of a national early warning system (NEWS) that enables the rapid identification of new substances detected in forensic laboratories and through police activities. The legislation reflects the classification of the UN conventions, distinguishing between narcotic drugs (UN Single Convention on narcotic drugs, 1961) and psychoactive substances (UN Convention on psychoactive substances, 1971), but introduces a third specific category for new psychoactive substances, defined as a substance not covered by the United Conventions, that may pose a risk to health or society similar to that posed by substances covered by those conventions [38]. New substances are added to the list through ministerial rulebooks, a more flexible instrument than ordinary laws, and the last updates were made in 2018, 2021, 2023 and in December 2025.

North Macedonia uses lists updated through ministerial rulebooks, a mechanism that allows for a certain degree of flexibility. The lists are organized into categories that distinguish between narcotics and psychotropic substances, replicating the subdivision set up by the 1961 and 1971 UN conventions, each divided into multiple control levels. Updates are based on international decisions as well as domestic forensic evidence, a factor that indicates a reasonable level of domestic technical capacity [26, 27]. In recent years, the Ministry of Health has intervened several times to introduce changes, including updates to the nomenclature, the addition of new substances, and the revision of certain procedures, particularly those related to cannabis-based preparations. However, there remains a lack of a defined review cycle, and the frequency of updates still depends on administrative capacity.

Serbia has the most comprehensive and dynamic system in the Balkan region [39]. Serbian legislation provides for seven distinct schedules, updated through ministerial rulebooks that fully replace previous versions. The process of listing NPS involves a formal risk assessment mechanism conducted by the Commission for Controlled Psychoactive Substances, which integrates data from the early warning system, forensic authorities, and security agencies. This multi-level approach allows for greater responsiveness in updating the lists. Serbia has, in fact, strengthened its Early Warning System (2019-2023) [35] and introduced substantial revisions to the national list, including the 2024 and 2026 Rulebooks.

The United Kingdom

The United Kingdom (UK) represents a unique case in Europe, as it is the only country to have fully participated in the regulatory and information mechanisms of the European Union and the REITOX network until its withdrawal from the European Union. This trajectory gives its system for controlling psychoactive substances a dual identity. On the one hand, it retains a highly developed regulatory framework shaped within a context of scientific and regulatory cooperation with the EU; on the other, it now operates under a regime of autonomy, outside EU information flows and decision-making processes, with implications for international cooperation and the management of NPS. The observations presented in this section are based on an analysis of the comparative table on the UK regulatory framework, which summarizes the main legislative provisions and scheduling mechanisms [40-44] (*Table 2*).

The UK's regulatory framework differs from that of other European countries in that it separates criminal classification from medical-regulatory classification. The Misuse of Drugs Act of 1971 (MDA) [40] defines three criminal classes (A, B, and C), regulating penalties based on relative risk, while the Misuse of Drugs Regulations of 2001 (MDR) [41] categorizes substances into five schedules that govern the medical use, prescription, possession, and conditions of use of controlled substances. This distinction allows for more targeted action: a substance may be strictly controlled under criminal law but have a more flexible regulatory regime if it has a recognized therapeutic use, or vice versa.

The Advisory Council on the Misuse of Drugs (ACMD) provides scientific advice, assesses substances-related harms, and supports classification decisions. The ACMD conducts structured analyses that integrate toxicology, clinical data, forensic evidence, epidemio-

Table 2
Legal framework the United Kingdom

Country	Legal text	Drug Scheduling	Scheduling timelines/update mechanism
United Kingdom	• *Misuse of Drugs Act 1971 (MDA 1971)* [40]*:* Primary criminal framework regulating controlled drugs. Establishes offences (production, supply, possession and import/export) and classifies substances into Class A, B, or C based on relative harm, which determines penalties. Establishes the Advisory Council on the Misuse of Drugs (ACMD), an independent statutory advisory body that provides scientific risk assessments and recommendations to the Home Secretary regarding classification and control measures. • *Misuse of Drugs Regulations 2001 (MDR 2001)* [41]: Secondary legislation under the MDA. Establishes Schedules 1-5, regulating lawful medical and scientific use, prescribing, storage, record-keeping, and licensing requirements. • *Misuse of Drugs (Designation) Order 2015* [42]*"language":"eng","title":"T he Misuse of Drugs (Designation:* designates substances as subject to import/export and supply prohibitions under the MDA regime. • *Temporary class drug orders (TCDO)* [43]*:* (introduced by the Police Reform and Social Responsibility Act 2011): allows temporary control (up to 12 months) of new psychoactive substances pending full harm assessment. • *Psychoactive Substances Act 2016 (PSA 2016)* [44]*:* Introduces a general prohibition on the production, supply, importation, and exportation of psychoactive substances not already controlled under the MDA.	*1. Criminal Classification (MDA 1971)* Substances are assigned to one of three Classes: • *Class A:* substances considered most harmful; highest criminal penalties • *Class B:* intermediate harm • *Class C:* lower relative harm. *2. Medical/Regulatory Scheduling (MDR 2001)* Substances are placed in Schedules 1-5: • *Schedule 1:* no recognized medical use; possession and supply permitted only under Home Office License for Research • *Schedule 2:* high control; recognized medical use; strict prescription and record requirements • *Schedule 3*: recognized medical use with slightly reduced controls • *Schedule 4:* divided into Part I (benzodiazepines) and Part II (anabolic steroids); lighter regulatory requirements • *Schedule 5:* preparations with low strength and reduced risk; minimal controls. *3. Temporary Control Mechanism* under a *Temporary Class Drug Order (TCDO)*: used for emerging substances posing immediate concern; valid for up to 12 months; criminalizes production, supply, and import/export during the temporary period; does not automatically assign an MDA Class (A/B/C); simple possession is not criminalized during the temporary period. *4. Psychoactive Substances Act (PSA) 2016 Mechanism* The PSA 2016 applies without scheduling. Any substance capable of producing a psychoactive effect (unless exempted or already controlled under the MDA) falls within its scope. This mechanism allows immediate regulatory intervention without formal classification.	The standard procedure under the MDA framework follows these stages: 1. Identification of a substance of concern 2. Scientific assessment by the ACMD 3. Recommendation to the Home Secretary regarding classification (Class A/B/C) and regulatory Schedule 4. Adoption of secondary legislation (Statutory Instrument amending the MDA 1971 and/or MDR 2001) 5. Parliamentary scrutiny 6. Entry into force on a specified date. Typical timeframe for permanent control measures ranges a few months up to 18 months in most complex cases, depending on complexity and parliamentary scheduling. In urgent cases, a TCDO may be adopted within weeks, providing temporary control for up to 12 months while a full risk assessment is completed. The PSA 2016 allows immediate intervention without requiring formal scheduling amendments. Amendments to classification and scheduling occur through ad hoc Statutory Instruments issued by the Home Office, often following ACMD recommendations and international scheduling decisions under the United Conventions.

logical models, and information from health services. It has driven significant changes in classification, as in the case of synthetic cannabinoids or cathinones, which in the 2010s required rapid and repeated interventions. This approach has contributed to making the UK one of the most advanced systems in the management of NPS, particularly in the period leading up to Brexit, when the country actively participated in the EU Early Warning System.

The UK has introduced specific measures to address the rapid emergence of NPS. Temporary class drug orders (TCDO) [43], introduced in 2011, allow for the imposition of temporary controls on a substance for a maximum period of twelve months, during which the ACMD conducts a comprehensive risk assessment. This tool enables very rapid intervention, often within a matter of weeks, bridging the gap between the identification of a new substance and its eventual permanent classification.

To complement this tool, the Psychoactive Substances Act of 2016 (PSA) [44], which introduced a ban on the manufacture, sale, and distribution of psychoactive substances regardless of their chemical structure not controlled by the MDA. Although its wide scope has been debated, it represents an attempt to overcome the limitations of the substance-by-substance model. Alongside these tools, the standard scheduling process remains relatively structured and timely, generally taking from a few months to around a year in more complex cases.

Despite the robustness of the domestic system, the UK's exit from the EU has resulted in a significant loss. The country no longer participates in the EWS information flows or in the risk assessment processes coordinated by the EUDA. As a result, access to timely data on NPS has become more limited, while information exchange with European partners is no longer systematic.

Moldova and Ukraine

Moldova and Ukraine are two examples of regulatory convergence toward the European model, despite starting from profoundly different legal foundations. In both countries, the process of aligning with the EU has taken on a strategic dimension, directly influencing the modernization of psychoactive substance control systems [45-55] (*Table 3*).

In Moldova, the regulatory framework is undergoing structural transformation. The 1999 law [45], which for over twenty years has formed the basis of substance control, will be repealed in 2026 with the entry into force of the new Law n. 201/2025 [46]. The latter introduces a more comprehensive and modern framework, expanding the scope of application to include not only narcotics, psychotropic substances, and precursors, but also new categories such as NPS, drug substitutes, medicines containing controlled substances, precursors, and ethnobotanical products. These categories were previously regulated in a piecemeal manner and incorporated through belated and sporadic government decisions (2006, 2009, 2010, 2011, 2014, 2016, 2017, 2024). The regulatory gap that has long limited the country's ability to respond promptly to the emergence of new psychoactive substances began to be addressed by the 2017 reform, which introduced specific categories for NPS for the first time and updated the quantitative thresholds used to distinguish between administrative and criminal liability. These thresholds, defined by Government Decision n. 79/2006 [47], will continue to be of particular importance in the new system, which will require the adoption of revised tables and criteria for risk assessment.

Ukraine has a more established system, based on the 1995 Law and Resolution n. 770/2000 [52], which establishes the national schedules of controlled substances. Unlike Moldova, Ukraine has maintained a steady pace of updating its schedules over the years, particularly since 2010, when the spread of NPS made it necessary to strengthen control mechanisms. The structure of the Ukrainian schedules, divided into four groups with separate internal lists for narcotics, psychotropic substances, plants, and precursors, clearly reflects a model inspired by the UN Conventions. The structure has since been progressively adapted to include new substances through amendments to Resolution 770 and orders from the Ministry of Health. Ukraine has also introduced a distinctive feature: the existence of defined quantitative thresholds for criminal and administrative liability, established by Order n. 188/2000 [55], which allows for greater predictability in the application of the regulations. Resolution n. 689/2019 [54] has certainly strengthened the role of forensic authorities and health services in detecting NPS by intensifying updates to the lists.

Despite differences in their development trajectories, Moldova and Ukraine share a growing focus on the need to integrate risk assessment mechanisms, although these processes are not yet as systematically formalized as in the European model. In Moldova, the new law provides that the government may update the schedules based on technical assessments and public health considerations, paving the way for a possible strengthening of risk assessment processes. In Ukraine, the frequency of updates and the growing role of forensic authorities indicate a growing awareness of the importance of a scientific approach to substance classification, even though the process remains predominantly administrative and unstructured according to a formal protocol.

Russia and Belarus

Russia and Belarus represent the approach that diverges most from the European model of psychoactive substance control, both in terms of regulatory structure and regulatory philosophy. In these two legal systems, drug control is embedded within a strongly security-oriented model, characterized by a high degree of centralized decision-making, extensive use of repressive measures, and limited integration of scientific risk assessment processes. An analysis of their legal framework [56-63] (*Table 4*) reveals an approach that prioritizes the speed and scope of control over transparency and consistency with international public health standards.

The Russian regulatory framework is based on Federal Law n. 3-FZ of 1998 [56] and Government Decree n. 681/1998 [57], which establishes the lists of controlled

Table 3
Legal framework of Moldova and Ukraine

Country	Legal Text	Drug Scheduling	Scheduling timelines/update mechanism
Moldova	• *Law n. 382-XIV of 6 May 1999 "On the circulation of narcotics drugs, psychotropic substances and precursor"* [45]: foundational framework regulating controlled substances, establishing the national control system, licensing requirements and classification tables. The law remains in force until 28 August 2026. • *Law n. 201/2025 "On the circulation of narcotic drugs, psychotropic substances, precursors, new psychoactive substances and drug substitutes"* [46]. Adopted on 10 July 2025 and published on 28 August 2025; it will enter into force on 28 August 2026, repealing *Law n. 382-XIV of 6 May 1999* and introducing an expanded regulatory framework covering new psychoactive substances (NPS), drug substitutes and ethnobotanical products. • *Government Decision n. 79/2006* (with amendments up to 2024) [47]: approving threshold quantities (small, large and very large) of narcotic, psychotropic substances and plants detected in illicit circulation. • *Criminal Code (art. 217)* [48] and *Contravention Code (art. 85-87)*: defining penalties based on quantity thresholds. • *National anti-drug strategy/Crime Prevention and Control Programme 2022-2025*: policy framework aligned with European Union (EU) acquis.	Scheduling under *Law 382-XIV of 6 May 1999* (current until 28 August 2026): *Tables I-IV* contained in the Annex to the law (approved and updated by Government for substances prohibited except for scientific use. • *Table I:* substances whose circulation is prohibited except for very limited scientific or research purposes. • *Table II-III*: substances allowed for medical or scientific use under strict control. • *Table IV*: precursors used in the manufacture of narcotic drugs and psychotropic substances. • Additional Government decision (notably *Government Decision n. 79/2006*) define threshold quantities used to determine the severity of criminal liability. Scheduling under *Law 201/2025* (in force from 28 August 2026): • New classification system will be introduced through *Annex 1 (Tables I-IV)* • The system explicitly incorporates narcotic drugs, psychotropic substances, plants, medicines, precursors, new psychoactive substances, drug substitutes and ethnobotanical products • The Government retains authority to amend the classification tables through secondary legislation, based on expert evaluation and public health considerations.	• *1999-2024: Law n. 382/1999* in force; tables updated periodically by Government decisions (notably 2006, 2009, 2010, 2011, 2014, 2016, 2017, 2024). • *2017 reform:* major update introducing NPS categories and quantities (*Government Decision n. 103/2017*). • *2024:* latest update to the 2006 list (*Government Decision n. 223/2024*). • *2025:* Parliament adopts *Law n. 201/2025* (10 July 2025), published on *28 August 2025,* introducing a comprehensive new regulatory framework covering NPS and related substances. The Law will entry in force on August 28, 2026, when *Law n. 382/1999* will be repealed and the new classification system will become operational. Following entry into force, the Government must adopt updated implementing regulations, including revised classification tables, threshold quantities, and procedural rules for scheduling new substances.
Ukraine	• *Law of Ukraine n. 60/95 "On narcotic drugs, psychotropic substances and precursors"* [49]: core framework regulating all controlled substances, licensing, circulation, and state oversight. • *Law of Ukraine n. 10/95 "On counteraction measures against illegal circulation of drugs, psychotropic substances and precursors" (1995)* [50]: defines anti-trafficking measures and institutional responsibilities. • *Criminal Code of Ukraine, Section XIII (articles 305-320)* [51]: *establishes* criminal liability for drug offences. • *Code of Administrative Offences (art. 44):* administrative liability for possession/ production in small amounts. • *Cabinet of Ministers Resolution n. 770/2000* [52]*:* central act approving the national lists of narcotic drugs, psychotropic substances, precursors, and controlled plants. • *Cabinet of Ministers Resolution n. 589/2009* [53]*:* procedure for activities involving controlled substances (cultivation, manufacture, import/ export, destruction). • *Cabinet of Ministers Resolution n. 689/2019* [54]*:* establishes national drug and alcohol monitoring system. • *Order of the Ministry of Health n. 188/2000* [55]*:* tables defining small, big, and especially big quantities for criminal/administrative thresholds.	Ukraine applies a four-table classification system aligned with United Nations (UN) conventions and established by *Resolution n. 770/2000*: *Table I, Lists 1-4*: • *List 1*: highly dangerous narcotic drugs (prohibited) • *List 2*: highly dangerous psychotropic substances (prohibited) • *List 3:* plants containing narcotic/ psychotropic substances allowed only for industrial use • *List 4:* plants allowed for educational/scientific/technical purposes. *Table II, Lists 1-2*: • Narcotic drugs and plants with restricted circulation • Psychotropic substances with restricted circulation *Table III, Lists 1-2*: • Narcotic drugs with limited circulation and partial exemptions • Psychotropic substances with limited circulation and partial exemptions. *Table IV, Lists 1-2*: • Precursors with limited circulation and control measures • Precursors subject to control.	• Initial lists adopted in 2000 (*Resolution 770*). • Quantities for criminal thresholds adopted in 2000 (*Order 188*). • Lists are regularly amended to add new substances, especially NPS (notably after 2010 and 2017). • Updates occur via amendments to *Resolution 770* and *Ministry of Health orders*. • No fixed update cycle, but frequent revisions driven by the emergence of new psychoactive substances; the alignment with UN scheduling; the national monitoring data (*Resolution 689/2019*).

Table 4
Legal framework of Russia and Belarus

Country	Legal Text	Drug Scheduling	Scheduling timelines/update mechanism
Russian Federation	• *Federal Law of 08.01.1998 n. 3-FZ "On narcotic drugs and psychotropic substances", 1998* [56]: foundational framework law regulating narcotic drugs, psychotropic substances and precursors. Establishes control measures, licensing systems, prohibitions and institutional responsabilities. • *Government Decree n. 681/1998* [57]**:** establishes the *List of narcotic drugs, psychotropic substances and their precursors subject to control in the Russian Federation* (Lists I-IV and precursor Tables I-III). Amended numerous times, including major amendments in 2024 and 2025 (*Decree n. 880*) [58]. • *Government Decree n. 1002/2012* [59]: defines "significant", "large", and "especially large" quantities of controlled substances for the purposes of criminal liability under Articles 228-229.1 of the Criminal Code. • *Administrative Code (arts. 6.8-6.13, 20.20-20.22)***:** administrative liability for minor offences including consumption, drug propaganda and public intoxication.	Four lists under *Federal Law of 08.01.1998 n. 3-FZ*: • *List I*: narcotic drugs, psychotropic substances and precursors whose circulation is *prohibited* (e.g., heroin, fentanyl analogues, synthetic cannabinoids, nitazenes) • *List II*: narcotic drugs and psychotropic substances with restricted circulation and full control measures, limited medical use permitted • *List III*: psychotropic substances with restricted circulation but partial exemptions from control measures (e.g., certain benzodiazepines) • *List IV*: precursors subject to restricted circulation, subdivided into: Table I (special control), Table II (general control), Table III (partial exemptions). *New psychoactive substances (NPS) Register* under the *art. 2.2 of the Federal Law of 08.01.1998 3-FZ* as amended by *the Federal Law of 03.02.2015 N 7-FZ*: the register was intended to provide a legal framework to temporarily control new psychoactive substances but according to academic and legal sources (2018-2021), it was not implemented in practice. As a result, most NPS are scheduled directly in List I through amendments to *Government Decree n. 681*.	• *Standard update procedure*: 1) Ministry of Health (MoH) and Ministry of Internal Affairs prepare a proposal inclusion based on toxicological, forensic and epidemiological evidence; 2) draft amendment submitted to Government; 3) Government adopts a decree amending *Government Decree n. 681*, • *Update frequency*: the lists are amended regularly through government decrees, sometimes several times per year, often adding groups of newly identified substances. • *Typical timing*: from initial detection of a substance to formal scheduling generally ranges from few months to a year, depending on forensic confirmation and administrative procedures. • *Fast-track behaviour*: although the law formally provides for an NPS Register intended for rapid control, this mechanism has not been implemented. In practice, rapid amendments to *Decree n. 681* are used to include new substances directly in *List I*. • Most recent update is *Government Decree No. 880/2025*. • *Criminal liability thresholds*: quantitative thresholds defined in *Decree No. 1002/2012* are periodically updated when new substances are scheduled, ensuring consistency between scheduling decisions and criminal liability provisions.
Belarus	• *Law n. 408-Z (2012) "On narcotic drugs, psychotropic substances, their precursors and analogues"* [60]*:* establishes legal definitions, the system of state control, the concept of analogues, and the List of the Republic of narcotic drugs, psychotropic substances and precursors. • *Presidential Decree n. 6 (2014) "On urgent measures to counteract drug trafficking"* [61]: strengthened national drug policy, expanded the control of analogues of controlled substances, increased criminal penalties and enhanced law-enforcement powers for rapid response to NPS. • *Council of Ministers Resolution n. 1446 (2011) "On issues of the Ministry of Health of the Republic of Belarus"* [62]: defines institutional responsibilities of the Ministry of Health and other authorities involved in drug control and scheduling procedures. • *Ministry of Health Resolution n. 19 (2015) "On establishing the List of the Republic of narcotic drugs, psychotropic substances and their precursors subject to state control in the Republic of Belarus"* [63]: establishes the current List of the Republic (Lists 1-5 and precursor tables) forming the core scheduling framework.	List of the Republic structured under *art. 3 of Law 408-Z*: • *List 1*: particularly dangerous narcotic drugs & psychotropic substances not used for medical purposes • *List 2*: particularly dangerous substances permitted for strictly controlled medical circulation • *List 3*: dangerous psychotropic substances allowed for controlled circulation • *List 4*: precursors (Table 1: substances forming drugs; Table 2: substances used in manufacture) • *List 5*: dangerous narcotic drugs not used medically • *Analogues*: substances structurally similar to scheduled narcotic drugs or psychotropic substances are controlled through the analogue concept established in *Law 408-Z* and strengthened by *Presidential Decree n. 6*. Identification and classification are based on forensic and toxicological assessments conducted by competent authorities. New substances are typically added to the List of the Republic following expert evaluation.	• *2014*: *Presidential Decree n. 6* introduces fast-track analogue control. • *2015*: major restructuring with *MoH Resolution n. 19* (creation of current Lists 1-5). • *2015-2025*: regular amendments by the MoH (approx. every few months to yearly), through ministerial resolutions, of the List of the Republic; the most recent amendments (e.g., *Resolution n. 69 of 7 August 2025*) expanded the lists with additional synthetic cannabinoids, nitazenes and precursor substances. • *Analogue scheduling*: legally required within 6 months after forensic classification. • *Latest update*: 7 August 2025 (*MoH Resolution n. 69*) adding new nitazenes, cannabinoids, and precursors.

substances. The system is divided into four main lists, supplemented by three tables dedicated to precursors, which are updated very frequently. The most recent amendments, including Decree n. 880/2025 [58], have further expanded List I to include new generations of synthetic cannabinoids, nitazenes, and fentanyl derivatives. Russia formally maintains a NPS Registry (introduced in 2015), designed to allow for temporary control of new substances. However, according to academic and legal sources, this mechanism has never been operationally implemented [64]. In fact, NPS are added directly to Schedule I through amendments to Decree 681, without going through an intermediate risk assessment mechanism. The update process is rapid; in some cases, it occurs within a few months of a substance's initial identification. Decisions to list a substance are based primarily on forensic evidence and public policy considerations, without the systematic involvement of toxicologists, clinicians, or academic institutions. While this approach ensures broad and timely control, it risks producing overly broad classifications that include entire families of compounds based on minimal structural similarities, with consequences for scientific research and access to substances used in medical or industrial settings.

Belarus has adopted a similar model, but with a greater emphasis on enforcement. Law n. 408-Z of 2012 [60] establishes five lists of controlled substances, supplemented by tables dedicated to precursors, and introduces the concept of an "analog" defined as any substance structurally similar to a narcotic or psychotropic substance already under control. This mechanism, reinforced by Presidential Decree n. 6/2014 [61], allows authorities to rapidly classify new substances based solely on chemical criteria. The legislation also stipulates that identified analogues must be included in the official lists within six months, a requirement that has led to a particularly rapid pace of updates, with frequent changes to the lists and the inclusion of numerous synthetic cannabinoids, nitazenes, and other emerging compounds. As in the Russian case, the update process in Belarus is also highly centralized and lacks a formal risk assessment system. Decisions are primarily made by the Ministry of Health, often based on reports from forensic authorities or law enforcement agencies, without the structured involvement of independent experts or academic institutions. The absence of a national early warning system and the lack of transparency in decision-making procedures further limit the system's ability to distinguish between high-risk substances and compounds with a less concerning toxicological profile.

DISCUSSION

A comparative analysis of the four groups of countries under study reveals an extremely heterogeneous European regulatory landscape, in which advanced models, models in transition, and approaches that diverge significantly from European Union (EU) standards coexist. This fragmentation is not solely due to legal or administrative differences but reflects political, institutional, and geopolitical trajectories that have, over time, influenced how each country approaches the regulation of psychoactive substances, particularly NPS. The heterogeneity observed in the results has a direct impact on the continent's ability to respond in a coordinated manner to a phenomenon that, by its very nature, transcends national borders and requires tools for multilevel cooperation.

The reforms implemented by the countries of the Western Balkans have brought about significant changes toward European regulatory standards, such as updating lists, introducing early warning mechanisms, and strengthening institutional coordination. However, critical issues remain that hinder response capabilities. The lack of regular update cycles, reliance on *ad hoc* political decisions, and, in some cases, institutional fragmentation make it difficult to ensure uniform application of the rules. Bosnia and Herzegovina is the region's most striking example of this complexity, as its heavy reliance on *ad hoc* political decisions limits its ability to provide the timely response necessary to address the NPS emergency. The trajectory of this geopolitical group is one of incomplete convergence, in which formal alignment with UN Conventions still remain a legal landmark for many countries, as reflected in the structure of national classification systems, while the process of alignment and European standards does not always result in equivalent operational capacity. Through the implementation of modern reforms, the region can look forward to potential future integration into the REITOX network and EU mechanisms, and consequently greater regulatory coherence.

The United Kingdom has one of the most structured models in Europe. The dual structure of the British system is well organized, encompassing an independent scientific body such as the Advisory Council on the Misuse of Drugs and innovative tools such as Temporary Class Drug Orders and the Psychoactive Substances Act of 2016. However, as explained in the findings, its exit from the EU has severed its connection with the European Early Warning System (EWS) and the REITOX network, depriving the United Kingdom of immediate access to European data and depriving the EU of an informational contribution. This decision can represent a liability even for such advanced legislation, since the lack of international cooperation can indeed be a source of vulnerability: in fact, missing integration into information-sharing networks might pose a significant risk to public health, that should not be underestimated.

Moldova and Ukraine, on the other hand, are experiencing accelerated convergence, driven not only by technical requirements but also by a geopolitical context that has made alignment with the European Union a strategic priority. Regulatory reforms in Moldova, culminating in the adoption of Law n. 201/2025 [46], and Ukrainian administrative practices, characterized by frequent updates to the tables and increasing involvement of forensic authorities, indicate a willingness to modernize control systems and integrate tools inspired by the European model. In both countries, however, the formalization of risk assessment processes and the administrative capacity to support regular updates remain areas in need

of consolidation. The direction taken is nonetheless clear and distinctly sets them apart from the more rigid and security-oriented models found elsewhere.

Russia and Belarus, on the other hand, represent a trajectory that diverges sharply from the European model. Their regulatory systems prioritize extensive and immediate control, based on chemical criteria and internal security considerations, rather than on a scientific risk analysis. The absence of transparent risk assessment processes, the systematic reliance on the concept of analogues and the centralization of decision-making in the hands of government authorities create a regulatory model that, while ensuring a rapid response to the emergence of NPS, presents significant challenges in terms of proportionality, public health protection, and international cooperation. The gap with European standards concerns not only regulatory instruments but also the regulatory approach, which focuses on enforcement rather than prevention and the protection of public health. While a convergence toward Europe seems highly unlikely due to the current international setting, it should be noted that there is a certain degree of integration with the other Member States of the Eurasian Economic Unions (EAEU) [65], with the existence of a regularly updated list of "Narcotic drugs, psychotropic substances, and their precursors" whose import and export is controlled. Although geographically part of the European continent, political, institutional and legal elements currently preclude a space of cooperation outside global platforms such as the CND.

A comparison of these four trajectories makes it clear that the degree to which countries are integrated into supranational cooperation mechanisms has a relevant impact on the ability to manage NPS. Systems that have structured risk assessment processes, early warning mechanisms, and regular updates to schedules, as is the case in the United Kingdom and, increasingly, in Serbia, Moldova, and Ukraine, demonstrate a greater capacity to respond to the dynamics of the NPS market. Conversely, systems characterized by institutional fragmentation or an exclusively repressive approach tend to be less effective in preventing the spread of new substances and mitigating public health risks.

CONCLUSIONS

This study paints a picture of a Europe that is far from homogeneous in its approach to managing new psychoactive substances. Alongside advanced and well-structured systems, there are models in transition and approaches that diverge significantly from European standards. This diversity directly affects the continent's ability to respond in a coordinated manner to a rapidly evolving phenomenon that knows no borders. Overall, the management of new psychoactive substances (NPS) in Europe depends largely on the degree to which countries are integrated into supranational mechanisms. Where early warning systems, reliable risk assessments, and regular updates exist, the response capacity is stronger. Where fragmentation or exclusively repressive approaches prevail, the system is more vulnerable. To reduce these vulnerabilities, strengthening international cooperation will be essential. The REITOX network and the European Early Warning System offer a proven model that could be expanded or adapted to involve third countries on a more permanent basis. Strengthening cooperation with countries on a converging trajectory, re-establishing structured channels for information exchange, and developing strategies for dialogue with countries on a diverging trajectory are essential steps toward improving Europe's ability to respond in a coordinated manner.

Authors' contributions

VA: investigation, conceptualization, validation, formal analysis, writing – original draft preparation; GR: investigation, conceptualization; methodology, writing – review and editing; SG: conceptualization, resources; MRV: conceptualization, resources; FPB: visualization; SP: supervision, project administration.

Acknowledgments

The Author Valeria Aquilina wishes to express her sincere gratitude to the Centro Nazionale Dipendenze e Doping, Istituto Superiore di Sanità, Rome, Italy, for the research fellowship established in collaboration with the Università Politecnica delle Marche, Ancona, Italy.

Funding sources

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Conflict of interest statement

The Authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Received on 8 June 2026.
Accepted on 14 July 2026.

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