AMERICAN KRATOM ASSOCIATION
Protecting Consumer Access to Safe, Natural Kratom
press@americankratom.org | americankratom.org

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American Kratom Association Calls on Senator Grassley to Produce the Forensic Evidence Behind Deaths He Attributes to Kratom

AKA disputes death classifications that rest on mitragynine-only testing, cites NMS Labs' own warning that mitragynine alone no longer tells the story, and invites reporters to cover Americans who use natural kratom safely

WASHINGTON, D.C. — November 18, 2026 — The American Kratom Association challenged the claims made by Senator Chuck Grassley (R-Iowa) at his event today with families who have lost loved ones, disputing the reliability of the death classifications at its center. AKA said a finding of "mitragynine toxicity" reached through mitragynine-only testing cannot be accepted as proof that natural botanical kratom killed anyone, and called on the Senator to produce the full forensic record before using those deaths to justify federal policy.

"Every family that has lost a loved one deserves compassion, respect, and, above all, the truth about what caused that death that has been reported as a kratom death," said Mac Haddow, Senior Fellow on Public Policy for the American Kratom Association.

Each of these deaths is a complicated situation, and complicated situations deserve accurate answers, not politicization and demagoguery.

"In each of the cases of the mothers who participated with Senator Grassley in his event, we know there are significant, legitimate questions that have now been raised about the role, if any, that kratom played in the death," Haddow said.

"In the Strang case, we now know, based on the federal prosecutor's records, that the product cited as purchased by the student was a federally controlled MGM-15 product that is not kratom," Haddow said. "In the Rustici case, we now know that the daughter had failed to comply with the prescription medications for a serious underlying health condition that was ignored by the medical examiner because it was convenient to call it a kratom death. There is no legitimate justification for that conclusion. In the Eppard case, we know that the autopsy identified a very serious underlying health condition that had caused multiple seizures with this individual that was ignored by the medical examiner."

Federal court filings in the Mississippi case report that toxicology found MGM-15 and MGPI, both Schedule I controlled substances, in the student's blood alongside mitragynine, and that the product recovered was labeled as containing MGM-15.

NMS Labs, one of the nation's leading forensic toxicology laboratories, has now put the underlying problem in writing. Its advisory, "Mitragynine Alone No Longer Tells the Story: Rethinking Kratom Testing," warns that laboratories working with older or limited methods can overlook the compounds actually driving toxicity or get the exposure wrong entirely. It reports that many commercial products

contain far more 7-OH than natural leaf, that mitragynine pseudoindoxyl and MGM-15 have turned up in toxicology casework, and that deaths involving kratom are often complicated by other drugs. AKA said that warning applies with full force to deaths already on the books: cases previously recorded as kratom-involved must now be re-evaluated through a more detailed analysis of what actually caused each death.

“The title of that advisory says it all: ‘Mitragynine Alone No Longer Tells the Story,’” Haddow said. “NMS Labs says a mitragynine-positive result by itself may no longer adequately describe what a person was actually exposed to, and that sorting out the role of any one substance takes a careful evaluation of the complete toxicology. If mitragynine alone does not tell the story in the laboratory, it does not tell the story on a death certificate either. A classification built on that single finding should not be presented to the public, or to the United States Senate, as settled fact.”

AKA’s compassion for these families is unqualified. Its confidence in the conclusions they were handed is not. For each death cited, AKA is asking Senator Grassley to answer four questions. Was 7-hydroxymitragynine (7-OH) identified and quantified? Was the sample tested for mitragynine pseudoindoxyl (MGPI), MGM-15, and MGM-16? Was the product the person actually consumed recovered and analyzed? Were other substances and underlying medical conditions fully evaluated? Until those questions are answered, AKA said, the assertion that mitragynine caused these deaths is an unproven claim, not an established fact.

A mitragynine finding is not proof of a kratom death

The claim that these deaths were caused by natural kratom does not withstand scrutiny. A peer-reviewed 2016 study led by Alicia Lydecker in the Journal of Medical Toxicology documented commercial products marketed as kratom that contained 7-hydroxymitragynine (7-OH) at levels far above the trace amounts found in natural kratom leaf, in some cases more than 500% above natural-leaf reference levels. The researchers concluded the findings strongly suggested adulteration. Adulterated products were being sold as kratom at least a decade ago, years before chemically manipulated 7-OH was widely recognized as a public health threat.

AKA’s position follows directly: detecting mitragynine alone is not sufficient to establish that natural botanical kratom caused or contributed to a death. That determination requires a complete evaluation of the toxicology, the medical history, the circumstances of death, and, whenever possible, the actual product consumed. Any death classification that skipped those steps is open to challenge, and AKA is challenging it.

“As scientific knowledge advances and new forensic testing methods become available, it is essential that previous conclusions attributing deaths to kratom be evaluated in light of that new evidence,” Haddow said. “Recent research has identified significant limitations in older toxicology methods, particularly their ability to distinguish natural botanical kratom from products containing elevated concentrations of 7-OH and other potent opioid compounds.”

“The pursuit of truth requires that medical examiners, coroners, and public health officials remain willing to reconsider past conclusions when new scientific evidence raises legitimate questions about their accuracy,” Haddow continued. “This is not about dismissing past findings or minimizing the tragedy of any death. It is about ensuring that families receive the most accurate answers science can provide and that public health policies are based on reliable, up-to-date evidence.”

AKA is calling on medical examiners, coroners, forensic laboratories, and public health agencies to apply modern quantitative testing standards and to reassess historical kratom-associated fatalities where the original testing did not distinguish these compounds and retained evidence permits meaningful review. Some medical examiners plainly got it wrong, and in doing so compounded a family's grief with an inaccurate account of how a loved one died. Others reached conclusions without information now recognized as essential. Neither kind of finding is a sound basis for federal law.

The real danger, and the policy that addresses it

AKA recognizes the serious risks posed by chemically manipulated products containing 7-OH, MGPI, MGM-15, and MGM-16, including respiratory depression, dependence, overdose, and potentially death. The Drug Enforcement Administration temporarily placed MGPI, MGM-15, and MGM-16 in Schedule I on August 26, 2026. AKA strongly supports Connor's End Gas Station Heroin Act (S. 5383 and H.R. 10272), which would remove these products from the marketplace, and the Kratom Consumer Protection Act, which sets age restrictions, labeling, and testing standards for natural kratom.

When death classifications fail to separate natural kratom from these products, lawmakers end up banning the botanical on the strength of unverified findings while the products responsible for the greatest harm go untargeted.

"Senator Grassley and his colleagues need to base public policy on that truth, not the grief of a family that might be misplaced because of inadequate testing or inaccurate conclusions of a medical examiner," Haddow said.

An invitation to reporters: cover the other families in this story

AKA encourages journalists covering today's news from Senator Grassley to also report on the Americans who use natural kratom safely and responsibly, including veterans, people living with chronic pain, and people who credit kratom with helping them leave far more dangerous substances behind. Their stories belong in any complete account of this issue, and they are available on the record:

Interviews with participants in AKA's October 2026 Congressional Briefing: https://youtube.com/playlist?list=PLMDa15vhWxLU&si=2i3apoAFg39SfFls

Christian's story, in his own words, on how kratom saved his life: https://youtu.be/48RvccjSvc0

AKA will arrange interviews with kratom consumers, scientists, and policy experts on request.

Scientific references

Lydecker et al. (2016). Suspected Adulteration of Commercial Kratom Products with 7-Hydroxymitragynine. Journal of Medical Toxicology, 12, 341–349. https://pubmed.ncbi.nlm.nih.gov/27752985/

NMS Labs (2026). Mitragynine Alone No Longer Tells the Story: Rethinking Kratom Testing. nmslabs.com

Drug Enforcement Administration (August 26, 2026). Temporary Placement of Mitragynine Pseudoindoxyl, MGM-15, and MGM-16 in Schedule I. govinfo.gov

About the American Kratom Association

The American Kratom Association is a consumer advocacy organization committed to protecting access to safe, natural kratom leaf products and advancing science-based consumer protection standards. AKA supports age restrictions, accurate labeling, contaminant testing, good manufacturing practices, and strong enforcement against adulterated, mislabeled, synthetic, semi-synthetic, concentrated, fortified, or chemically manipulated products falsely marketed as kratom.

Media Contact

Mac Haddow
Senior Fellow on Public Policy, American Kratom Association
press@americankratom.org
+1 571-294-5978