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The drug was removed from Schedule I last September by the U.S. Court of Appeals in Boston, which ruled on technical grounds in favor of a petition filed in January 1987 by Harvard psychiatrist Lester Grinspoon, who would like to see ecstasy and other similar drugs be available for experimental research in psychiatry. "This could be an important area of study in psychiatry," he says.

Last week, DEA ruled that it will, for the second time, "permanently" list ecstasy, as a Schedule I compound. To meet provisions in the court's ruling, the DEA has redefined its criteria for establishing that ecstasy has no accepted medical use and that its safety has not been demonstrated. The agency's new action relies on evidence presented at its 1985 and 1986 hearings on ecstasy and on its survey of the scientific literature, which failed to identify any published information about the therapeutic benefits of the drug. 

D.M.B.

## Italy Back in Space

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## Ecstasy Returns to Schedule I

After a 6-month hiatus in its legal life, the designer drug known as "ecstasy" is again back on the Drug Enforcement Agency (DEA) list of substances that cannot legally

be used for either recreational or medical purposes, unless the Food and Drug Administration specifically grants permission

for the latter. Ecstasy or MDMA (3,4-methylenedioxymethamphetamine) has been a focus of controversy because of its increasing use among college students, recent scientific findings that the drug may damage certain nerve cells in the brain, and disagree-

whether it has any value in psychotherapy (Science, 19 February, p. 864).

The DEA first listed ecstasy as a Schedule I hallucinogenic controlled substance—its

ment within the psychiatric community as to

most restrictive category—on an emergency basis in 1985, and on a permanent basis in 1986, because it determined that while the drug has a high potential for abuse, it has no currently accepted medical use and has not