



Home Office


Minister of State for Policing and
Crime Prevention
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Mr Brendan J Allen
Area Coroner
The Coroner's Office for the County of Dorset
Civic Centre
Bourne Avenue
Bournemouth
BH2 6DY





10 October 2025

Dear Coroner Allen,

Thank you for your Regulation 28 (Prevention of Future Deaths) report of 19 August 2025, which you sent to the Home Secretary, about the death of Ms Gemma Weeks, which was linked to her use of ketamine. You suggest that further action should be taken to prevent future deaths from ketamine. I am replying as the Minister of State for Policing and Crime.

I was very sorry to read of the death of Ms Weeks and I send my deepest sympathy to her family and friends. I have met with families who tragically lost loved ones to ketamine, and I recognised much of what you recorded about the circumstances of Ms Weeks' death in what I heard from them.

I know that you sent your report to the Secretaries of State for Education and Health and Social Care too. Ministers in those departments will be replying to your concerns about a lack of understanding of the dangers of ketamine, including among young people. I will therefore focus on your concern that ketamine's classification as a Class B drug under the Misuse of Drugs Act 1971 ('MDA') may give the impression that the dangers associated with its use are lower than those of Class A drugs.

As a Class B drug, the maximum penalty for supply and production for ketamine is up to 14 years in prison, an unlimited fine or both, and the maximum penalty for possession is up to five years in prison, an unlimited fine or both. These penalties are intended to reduce both the supply of, and the demand for, ketamine, and they contribute, along with other measures, to reducing the harms which result from its use. In 2024 there were 2,014 prosecutions and 1,507 convictions for offences relating to the possession and trafficking of ketamine, representing increases of 56% and 43% respectively on the figures for 2023.

Ketamine was moved from Class C to Class B of the MDA in 2014, in accordance with advice provided by the statutory Advisory Council on the Misuse of Drugs (ACMD). The ACMD's recommendation was based on evidence of ketamine's potential for harm at that time. The ACMD stated that *"although there is limited evidence of ketamine misuse causing social harm, evidence of physical harm (mainly chronic bladder toxicity but also an increase in acute toxicity) has increased"*.

This report is available at the following link:

https://assets.publishing.service.gov.uk/media/5a7ce1bbed915d7c849adce3/ACMD_ketamine_report_dec13.pdf.

Ministers have become concerned that the misuse of ketamine, particularly among young people, has grown since that report was published. Ketamine use in young people aged 16-24 years in England and Wales has increased by 231% since the year ending March 2013. In 2023/24, there were 3,609 new presentations to adult treatment services citing ketamine as a misused substance - the highest number since published records began in 2005/06. I share your concern that users may be underestimating the harms of ketamine, including its degree of addictiveness and the possibility of irreversible bladder damage.

Therefore, in January 2025 my predecessor as the Minister responsible for drugs wrote to the ACMD to ask them to provide an updated harms assessment of ketamine, and advice on reducing harms, in response to emerging evidence. She asked them in particular to advise on whether it should be moved to Class A. Her letter can be found here: <https://www.gov.uk/government/publications/updated-harms-assessment-of-ketamine-commissioning-letter/updated-harms-assessment-of-ketamine-commissioning-letter>

The ACMD has been working on that assessment, including conducting a public call for evidence in August. I expect to receive the report by the end of 2025, and I will give full consideration to all its recommendations before making any decisions relating to the classification of ketamine under the MDA.

While the ACMD report will be very important, the Government is, as I have noted, very concerned about the increasing harms of ketamine and is already taking a range of measures to tackle them. As the Department of Health and Social Care sets out in its response, we will shortly be launching a national media campaign on emerging drug threats, one of whose key areas of focus will be the harms caused by ketamine. The campaign will use a range of media to ensure that the messages reach as many people as possible. This sits alongside a range of existing measures, including our work with festival organisers to ensure that the risks to those attending festivals are minimised, improving the drug treatment response, and awareness raising initiatives led by local authority public health teams.

Thank you once again for your letter.

Very best wishes,



Minister of State for Policing and Crime