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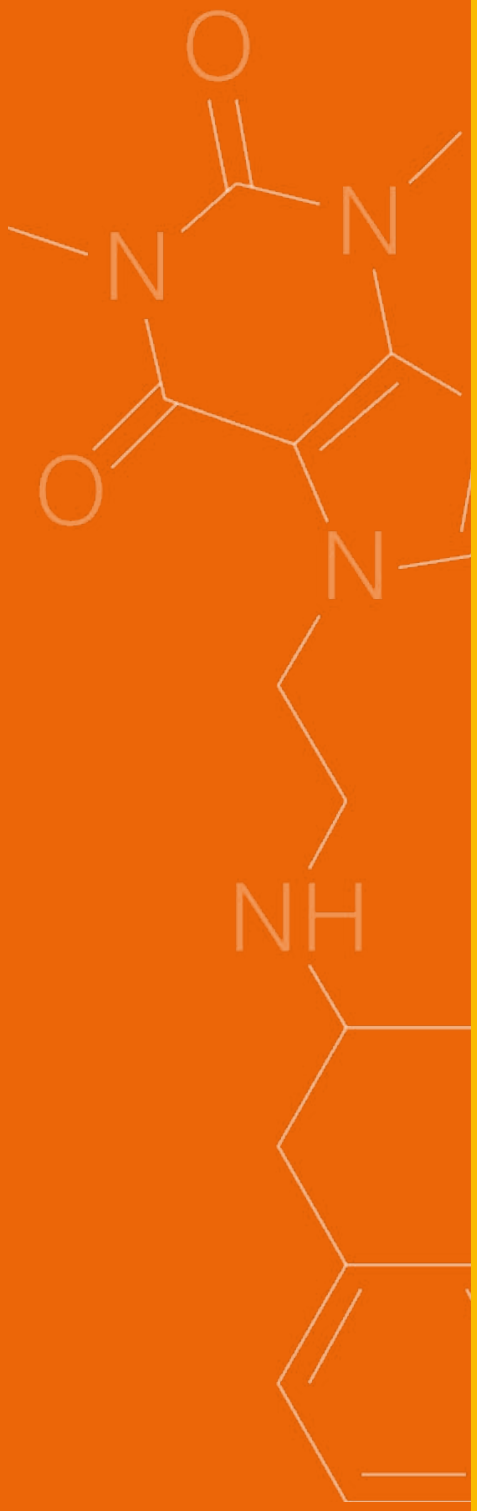

PRODUCTION AND TRAFFICKING OF CAPTAGON AND METHAMPHETAMINE

ALONG THE SOUTHERN ROUTE AND IN THE NORTH AFRICA REGION

Caroline Rose

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ABBREVIATIONS

AFP	Agence France-Presse
ANF	Pakistan Anti-Narcotics Force
ATS	Amphetamine Type Stimulant
AIMC	Arab Interior Ministers Council
BKA	The German Federal Criminal Police Office
BMK / (P2P)	Benzyl methyl ketone or phenyl-2-propanone, referred often as 'P-2-P'
CEPOL	The European Union Agency for Law Enforcement Training
CFSR	The Center for Forensic Science Research
CNS	Central nervous system (depression)
DEA	The U.S. Drug Enforcement Administration
EU-ACT	EU Action Against Organized Crime and Terrorism
EUDA	European Union Drugs Agency
EUROPOL	The European Union Agency for Law Enforcement Cooperation
HTS	Hayat Tahrir al-Sham
INTERPOL	International Criminal Police Organisation
JAF	Jordanian Customs
LAF	The Lebanese Armed Forces
MENAHRA	Middle East and North Africa Harm Reduction Association
MIT	The Turkish National Intelligence Organization
NARKOKIM	A project by Turkish General Directorate of Security
NDO	National Drug Observatories
OSI	The Open Systems Interconnection model
ScP	SureChem Products
TR	Türkiye
UMEP	Turkish National Strategy Document and Action Plan
UNODC	United Nations Office on Drugs and Crime

EXECUTIVE SUMMARY

This report was prepared by an independent researcher, Caroline Rose, in the framework of the European Union´s Action against Organised Crime and Terrorism (EU-ACT) project, with the support of the European Union Drugs Agency (EUDA), as part of the implementation of the new International Cooperation Framework as well as through the EU4MD II project funded by the European Union. It assesses the production, trafficking and consumption of captagon and methamphetamine along the Southern route and in North Africa and identifies areas for further regional collaboration and support. To this end, the report provides an overview of the illicit captagon and methamphetamine markets in the region from 2020 to 2024.

The report reflects the rise in prominence of synthetic drugs like captagon and methamphetamine in the so-called Southern route–a prominent heroin trafficking route to Europe that extends from the Makran coast of Iran and Pakistan into the Middle East and East Africa– and on North Africa. However, the significant gaps that exist in the available data represent a major barrier to developing a better understanding of the current situation and trends. As a result, the report's findings should be interpreted with caution.

CAPTAGON

The report identifies several findings related to the production, trafficking, and consumption of captagon tablets, which has been steadily on the rise in the Middle East and North Africa in the last ten years.

Out of the eleven countries that completed the questionnaire, only two, Iraq and Türkiye, reported domestic mid-scale production, while the rest reported no detected domestic production. This, combined with open-source indications that production occurs in countries that participated in the assessment such as Lebanon and Egypt, as well as countries that did not such as Kuwait, Syria and Sudan, indicates an expansion of production to countries where it was previously not reported or detected.

Forensic analysis of captagon samples indicate that while amphetamine is the main active substance in captagon tablets, the composition of captagon tablets varies widely, with producers using different precursor chemicals and cutting agents for different brands. However, routine evidence of captagon tablets' contents remains sparse due to lack of forensic testing capacity and collaboration, hindering the ability to monitor how the tablet content is evolving over time and how this could potentially affect users.

While illicit laboratory interdictions have offered a window into the chemicals and equipment used in the captagon production process, little is known about the dumping of the waste. If producers dispose of chemical waste through burial and disposal through wastewater, there would be a series of potential negative impacts to local communities and the environment.

The recent string of industrial scale captagon laboratory seizures conducted after the removal of the Assad regime in Syria helped expose chemical inputs that trade's biggest manufacturers used, helping fill in key gaps in literature and confirm suspicions about the composition of captagon tablets.

Seven out of the 11 participating countries in the strategic assessment confirmed that they had seized captagon in the last five years. While this questionnaire did not include responses from the captagon trade's primary largest consumer markets in the Arabian Peninsula, it reflects a growing list of existing production hubs, transit countries, and potential new destination markets that represent an increasingly complex picture of captagon interdiction.

Six out of 11 responding countries self-identified as a transit country, with only Iraq identifying as a dual origin and transit country for captagon. Open-source analysis of seizures between 2020 and 2024 identify 24 countries and territories in total affected by Captagon illicit trafficking: Austria, Egypt, Germany, Greece, Iraq, Italy, Jordan, Kuwait, Lebanon, Malaysia, Morocco, Nigeria, Netherlands, Oman, Palestine,[1] Qatar, Romania, Saudi Arabia, Syria, Sudan, Türkiye, the UAE, Libya and Yemen.

Both quantitative and qualitative analysis of captagon seizures captured in the EU questionnaire indicate that the volume of captagon in circulation increased significantly among questionnaire participants in 2022 and 2024. However, when compared with open-source data that accounts for more countries not represented in the questionnaire, such as Saudi Arabia and the United Arab Emirates, the volume of captagon pills in circulation drops in 2024 and 2025. Regardless, seizures of captagon tablets suggest that the size of the captagon trade is significantly larger than it was in 2020.

The number of captagon seizures have steadily increased between 2020 and 2024, though with different rates of growth each year. There is a dearth of information about captagon consumption, with only 27.3% of respondents indicating they have information about consumption levels in their countries: Iraq, Jordan, and Palestine.

Two countries, Jordan and Lebanon, reported that consumption has increased over the five year period, with a 27% increase in Jordan between 2023 and 2024, a 2% increase in Lebanon between 2020 and 2021 then 6% between 2023 and 2024. In contrast, Iraq reported an unquantified decrease. Palestine stated that over the four-year period, its consumption levels remained stable.

Captagon's profile of usage is complex, transcending beyond recreation, with some using captagon as a 'tool' to bolster productivity, battlefield performance, and maintain job security, in addition to staving food insecurity and relief from post-traumatic stress (PTSD) syndrome and trauma.

Captagon pills typically contain amphetamine, and dependence is primarily treated though psychosocial treatment approaches, such as one-one and group therapy, cognitive behavioral therapy, and contingency management. With long-term use, the drug can induce a range of symptoms such as marked tachycardia, hypertension, seizures, vasoconstriction, psychosis, as well as withdrawal symptoms. However, not all captagon usage is problematic, with most use characterized by short-term, low-harm, recreational consumption.

Though open-source literature indicates that captagon pill prices can range between a few cents and up to 21 € in consumption markets and between 1 000 € and 2 500 € for wholesale prices,[2] [3] there remains an information gap that is reflected by 54.5% of strategic assessment respondents that indicated they do not have any information about captagon's wholesale or retail pricing within their country.[4]

1. This designation shall not be construed as recognition of a State of Palestine and is without prejudice to the individual positions of the Member States on this issue

2. This rate was converted from $25 to 21 €, using the conversion of $1,16 = 1 €

3. (Data compiled from the EU ACT Questionnaire results)

4. (Alexander, 2025)

METHAMPHETAMINE

Countries that participated in the EU questionnaire indicated that a total of 55 laboratories were identified within their jurisdictions, largely small laboratories for crystal methamphetamine production, with just 11.1% of respondents reporting domestic production between 2020 and 2024.

Four countries in the strategic assessment submitted data about origin countries for methamphetamine, with 37.5% identifying Afghanistan and Iran as production hubs, followed by 12.5% for Iraq and Pakistan. Only one country, Iraq, self-identified as an origin country for methamphetamine, with Egypt, Iraq, Pakistan, Palestine and Türkiye self-identified as transit countries. Jordan and Pakistan self-identified as destination markets for methamphetamine. Open-source information identified methamphetamine production in Bahrain, Iraq, Kuwait, Türkiye and Yemen, and attempts to set up laboratories in Jordan.

The EU questionnaire found that methamphetamine was seized often in participating countries, with 9 of 11 countries confirming they had seized methamphetamine between 2020 and 2024. Open-source information of seizure data reflects increasing activity in this time period, with Bahrain, Egypt, Jordan, Iraq, Kuwait, Lebanon, Oman, Qatar, Saudi Arabia, Syria, Türkiye, the United Arab Emirates and Yemen, and having conducted raids on illicit laboratories, seizures, and arrests related to the methamphetamine trade. Even countries well outside the region, such as Australia and Malaysia, seized methamphetamine that either originated from or was transited through the Southern route and North Africa region.

The number of crystal methamphetamine seizures have steadily increased over time among countries along the Southern route and North Africa region, with the highest number of seizures in Türkiye in 2022, followed by a 22% decline in 2024 in Türkiye. In the same three-year period between 2022 and 2024, there were slight increases in the number of crystal methamphetamine seizures in Egypt, Iraq and Pakistan. Open-source analysis of seized volume in 2025 indicates that there was a sharp increase in interdicted methamphetamine throughout the year, suggesting a potential surge in production and availability in the region.

Strategic assessment answers for the 2020-2024 period indicate that the amount of seized crystal methamphetamine, as measured in kilograms, has broadly increased among production and transit countries like Iraq, Pakistan and Türkiye, while fluctuating in Jordan.

There is a significant gap in available data from seizures on transit and origin sites, due to sensitivities about a particular consignment of methamphetamine or an agency's lack of investigative capacity. As a result, reporting agencies rarely cite a confirmed or suspected transit route or origin. Only 10% of publicly reported seizures contain information about a confirmed or suspected transit route, with less than one percent citing a confirmed or suspected country of origin.

The Southern route and the North Africa region's methamphetamine trade has gradually expanded its footprint well outside of the region, reflecting coordination between regional criminal actors and global syndicates. Several methamphetamine consignments sent to Middle Eastern countries like Bahrain and Kuwait, have originated from or transited through the United Kingdom, Thailand, the United States, and Nigeria. This observed trend in seizure data indicates that Middle East-based illicit actors engaging with the methamphetamine trade have diversified smuggling routes, posing a challenge to law enforcement detection and interdiction capabilities.

There is a significant data gap in prevalence of use, availability and coverage of treatment, for consumption and rehabilitation rates for methamphetamine in the region at large, with most government agencies unable to characterize the scale and scope of addiction and treatment accessibility.

Seven out of the eleven countries surveyed in the strategic assessment confirmed they had consumption information available. Of the five countries that responded to a question inquiring whether consumption levels had increased, decreased, or had stayed the same over the course of the five-year period, three countries confirmed increased levels: Iraq, Jordan, and Lebanon. Palestine responded that consumption levels have remained stable over time, while Türkiye indicated that there was no study assessing consumption rates.

Many national programs in the region have placed a central focus on enhancing interdiction capacity through the acquisition of new detection technology, intelligence and collection techniques. An interdiction-heavy approach can affect how smugglers shift trafficking routes and how they operate but often cannot influence the size of the drug market and may inadvertently lead to increases in violence. Only a handful of national programs have also adopted a focus on demand-reduction strategies and treatment for consumers of methamphetamine, with the adoption of awareness campaigns, establishment or expansion of rehabilitation facilities, and other methods to reduce captagon and methamphetamine spread.

INTRODUCTION

In the last ten years, the spread of captagon and methamphetamine, both illicit amphetamine-type stimulants (ATS), has introduced new challenges to the Middle East and North Africa. Regional instability, conflict, limited state control, and corruption have collectively created conducive conditions for illicit trades like captagon and methamphetamine to thrive, while dependence for consumers and illicit actors alike has perpetuated these realities.

This report situates the challenges associated with captagon and methamphetamine in the context of regional geopolitics, identifying some of the political and socio-economic drivers behind supply and demand of both drugs. The primary focus of the report is on captagon, as amphetamine in a tablet form with a common logo, and methamphetamine, primarily found in crystal form in the region, while also accounting for methamphetamine in powder, tablet, as well as liquid form. Drawing from identified patterns and information gaps, this report offers tailored interventions and policy recommendations to countries either at risk or currently afflicted by the production, spread, and consumption of captagon and methamphetamine. It assesses national and region-wide capacities across countries' law enforcement, health care, justice, and political governance, as well as options for region-wide and cross-regional collaboration.

Reliable data about illicit drug use in the Middle East and North Africa region is largely absent, including for captagon and other illicit substances. This creates a major barrier to broader understanding about the scale and scope of substance use and problem drug use, as well as introducing challenges for public health institutions and public security. There have been studies that have identified illicit drug consumption rates broadly or localized usage levels,[1] [2] however, they fail to accurately characterize the extent to which captagon, and methamphetamine is consumed across the Southern route and North Africa region. The region also experiences a dearth of harm reduction responses to captagon and methamphetamine consumption and misuse. This is partly due to the reality that ATS strategies and interventions are limited, compounded by reduced capacity and political stigmas associated with problem drug use that have hindered public awareness about effective demand reduction and rehabilitation strategies.

This report presents policy options to counter the harmful impact of captagon and methamphetamine on public security, public health and governance, taking into account intelligence gaps and expert consultations. The report calls for national law enforcement, public health and intelligence agencies to work collaboratively to enhance regional law enforcement cooperation, advance health care sector responses and anticipate how the trade of captagon and methamphetamine will change over time.

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1. (United Nations Office on Drugs and Crime 2024)
2. (Bizri et al. 2024)

EXPLANATORY NOTE

This report draws upon replies to a questionnaire disseminated by the EUDA and EU ACT to a set of key partner countries located along the Southern route and in North Africa. These partner countries represent critical nodes within emerging and established trafficking corridors that are increasingly vulnerable to the spread of captagon and methamphetamine. The assessment sought to generate a standardized, comparative overview of the scale, nature and dynamics of captagon and methamphetamine production, trafficking and consumption across these jurisdictions.
In total, eleven countries—Algeria, Egypt, Iraq, Jordan, Lebanon, Libya, Morocco, Pakistan, Palestine[1], Tunisia, and Türkiye—submitted responses to the questionnaire. These countries, plus Syria, participated in the strategic assessment expert meeting held in Tunis, Tunisia, to engage on the findings of the questionnaire. Submissions provided varying levels of detail concerning the availability of national data, institutional mechanisms for drug control, and observed trends in relation to captagon and methamphetamine markets. While several countries submitted comprehensive and data-driven responses, others reported limited or incomplete information, thereby creating notable information gaps in the dataset. Furthermore, in the course of data validation, certain submissions were found to be inconsistent, absent, or incorrect, necessitating follow-up clarification. In a number of cases, supplemental datasets and explanatory materials were subsequently submitted by national focal points and have been fully integrated into the graphics, statistical tables, and analytical text of this report.

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EXPERT MEETING

This report additionally includes contextual information, data, and insights exchanged between its author and representatives from the Interior Ministries of the assessment's participating countries, regional civil society organizations, and intergovernmental organizations such as the European Drug Agency, European Union, United Nations Office on Drugs and Crime, and Arab Interior Ministers Council.

From July 17-18, 2025, in Tunis, Tunisia, the organizers of the joint EUDA-EU ACT assessment convened representatives from Egypt, Tunisia, Jordan, Lebanon, Pakistan and Syria, to present the preliminary findings of the assessment, share insights about the captagon and methamphetamines trades in the region, and coordinate potential policy responses. The presentations largely focused on annual seizure statistics, needs assessments, pricing data, technology used in trafficking operations, popular smuggling routes, national counter-drug strategies, and available information about illicit drug consumption within each respective country. Civil society organizations from Iraq, Lebanon, Tunisia, and other regional countries, were also invited to receive a briefing on the report's preliminary findings and share lessons-learned in a private sideline workshop with the report's author, primarily focused on demand and harm reduction efforts. Experts identified data on poly-substance use, the status of public health infrastructure, lack of services, and lack of response mechanisms that fail to meet increased demand levels for captagon and methamphetamine. Security-heavy responses were attributed as contributing to stigma and deterring self-referral for treatment.

Experts identified outdated and overly repressive legislation, poor infrastructure, lack of services, and lack of response mechanisms that fail to meet increased demand levels for captagon and methamphetamine. Civil society leaders identified that consumption patterns could be better assessed if overdose cases were registered in clinics and hospitals, as well as with better surveys about poly-substance use where captagon and methamphetamine are being used amongst a variety of other illicit drugs. Experts confirmed that further research and evidence-based methods are needed to address non-injected synthetic drug usage, with new technical and non-technical responses. This informational gap also contributes to a lack of culturally sensitive harm reduction kits for non-injecting stimulant users, and civil society organizations without proper evidence-based prevention tools. Experts recommended training for law enforcement, legal professionals, religious leaders and media on health and harm-reduction-based approaches. They also proposed increasing the representation of women in law enforcement roles.

The findings gleaned through the strategic assessment's questionnaire have been complemented and reinforced by the insights exchanged with both governmental agencies and civil society organizations during the expert meetings held in Tunis in July 2025. The recommendations are further informed by regional workshops which brought together representatives of the responding countries, as well as regional and national civil society.

INTEGRATION OF OPEN-SOURCE AND SECONDARY DATA

Beyond the official questionnaire responses, the analytical framework of this report incorporates a range of academic literature and open-source materials related to captagon and methamphetamine markets in the Middle East, North Africa, and adjoining regions.

The report integrates peer-reviewed academic research that examines the socioeconomic, political, and governance drivers of stimulant production and consumption. It also relies upon peer-reviewed academic articles that assess the socioeconomic and political drivers of captagon and methamphetamine consumption, consumption patterns, and potential harm reduction and demand reduction strategies that could be employed throughout the region. Particular attention has been paid to studies that assess how systemic instability, economic dislocation, and conflict dynamics contribute to the expansion of drug economies in affected regions. Additional emphasis has been placed on literature evaluating harm-reduction, demand-reduction, and public health strategies that may be adapted to regional contexts, especially where treatment and prevention infrastructures remain limited or fragmented.

Key quantitative inputs were derived from the New Lines Institute's Captagon and Methamphetamine Databases, which compile publicly available data on laboratory raids, seizures, and arrests. These datasets serve as a unique open-source repository for cross-referencing official reporting with publicly available records of interdiction events. However, given that the New Lines databases only compile what is publicly reported, the databases are limited, lacking interdictions that are not publicly released.

DATA LIMITATIONS AND ANALYTICAL CONSTRAINTS

Despite the inclusion of data from multiple sources, significant knowledge gaps persist in the collective understanding of captagon and methamphetamine markets in the Southern route and North Africa. There is no comprehensive source for data on interdictions, such as laboratory raids, seizures of drug consignments, arrests, as well as consumption rates at national or regional levels. Several structural factors contribute to these issues. First, underreporting remains a recurrent challenge, particularly regarding seizures, arrests, and dismantling of laboratories that occur at subnational levels but are not systematically recorded or transmitted to centralized authorities. Second, variations in data submission formats, classification criteria, open-source information, and coverage across participating countries, make regional comparisons difficult. Third, the absence of comprehensive national databases or mandatory reporting mechanisms for drug-related incidents in certain jurisdictions further limits the depth and consistency of available information.

Furthermore, it should be noted that there remains a gap in understanding about the methamphetamine trade's most major production sites in Afghanistan and Iran, even with the use of both the questionnaire and open-source primary and secondary literature. A combination of an inability to conduct field research, safety concerns on the ground, and an absence of reliable governmental reporting, collectively inhibit efforts to glean information about how methamphetamine is produced, the scale of manufacturing, who it is produced by, and how it is trafficked out of origin countries. A similar information gap exists about consumption patterns, with information about national consumption rates largely absent. The same applies to statistics and supplemental information about what drives different demographics to consume methamphetamine.

This challenge of obtaining a comprehensive picture of the situation is further compounded by the social and political stigma surrounding drug use, which can restrict the willingness of individuals and institutions to participate in surveys or academic studies. Consequently, while production and trafficking data are somewhat more visible through law enforcement and interdiction channels, drug market information concerning patterns of consumption, demographic profiles of users, and the public health consequences of stimulant use, remains underdeveloped. The report author acknowledges an information imbalance between supply and demand. From the questionnaire it was possible to glean greater intelligence and quantitative trends related to captagon and methamphetamine interdictions, rather than information and patterns related to consumption.

OBSERVATIONS ON DATA IMBALANCE

The report's findings highlight a pronounced information asymmetry between supply-side and demand-side indicators. Questionnaire responses and open-source materials collectively yielded far greater insight into interdiction-related metrics—such as seizures, laboratory raids and arrests—than into consumption dynamics or treatment outcomes. This imbalance reflects a broader structural emphasis within the region on enforcement and interdiction as primary counternarcotics strategies, often at the expense of developing robust public health and demand-reduction responses. As a result, while the data permit reasonably detailed mapping of trafficking routes, manufacturing hubs and seizure trends, they offer comparatively limited insight into the social, behavioral and epidemiological dimensions of stimulant consumption.

In recognition of these limitations, the report advocates for enhanced regional data harmonization, increased investment in epidemiological research, and improved cross-border information sharing to foster a more holistic understanding of drug markets. Strengthening these data ecosystems will be essential for the formulation of balanced, evidence-based responses to address both supply and demand challenges confronting the Middle East and North Africa.

THE CAPTAGON TRADE

Since the early 2000s, the production and availability of 'captagon' has been on a steady rise in the Middle East, with a particular surge since 2015. The captagon trade features an increasingly-complex, multifaceted market, but also has a licit history. It is important to note that this report refers to captagon with a lower-case 'c', as opposed to "Captagon" with a capital 'C'. The report does this in order to distinguish between the former, licit drug fenethylline produced by German pharmaceutical company "Degussa Pharma Group" under the patented name "Captagon®" before it was internationally controlled and modern-day captagon produced on the illicit market that is composed of different chemical inputs that will be later explored in this report.[1]

After fenethylline was listed in 1981 as a controlled substance and later scheduled under the U.N. Convention on Psychotropic Substances (1971) in 1986, marking the official transition of "Captagon®" into "captagon" as an illicit substance. Illicit actors in Europe and the Middle East soon began producing and trafficking captagon in local illicit markets, relying upon Soviet-era factories that produced the drug in Bulgaria, Montenegro, Serbia and Slovenia and for supply lines throughout the mid-1980s to early-1990s, until Balkan countries enacted a series of law enforcement crackdowns on illicit networks. Traffickers of captagon soon shifted production and trafficking operations to Türkiye and then the Levant region of the Middle East in Lebanon and Syria, exploiting governance gaps, corruption, and favorable conditions for small-scale manufacturing operations. Syria's 14-year-long civil war provided particularly conducive conditions for illicit captagon production, trafficking, and consumption, with deteriorating economic and security conditions increased demand for ATS like captagon and shaped the drug trade into a lucrative alternative revenue stream.

Until December 2024, the trade was primarily facilitated and administered by both state and non-state actors alike in Lebanon and Syria: a combination of prominent tribes and armed groups, militia networks, and illicit networks sponsored directly by the Syrian state under Assad rule. It is important not to conflate the disruption of major, industrial scale captagon manufacturing sites following the ousting of the Assad regime, with the eradication of the captagon trade in Syria. However, small-scale producers both inside Syria and across the region, will seek to meet sustained demand levels and create new opportunities, particularly given the drug's cheap production process and rising pill prices in transit and consumption hubs like Jordan. Data obtained through the EU strategic assessment questionnaire and open-source intelligence identifies that the volume of captagon in circulation in the region experienced a sharp rise between 2020 and 2024, with large-scale consignments largely via maritime routes. The volume of captagon in circulation in the region remains larger than what it was over five years ago, with industrial-scale consignments continuing to occur frequently across the region

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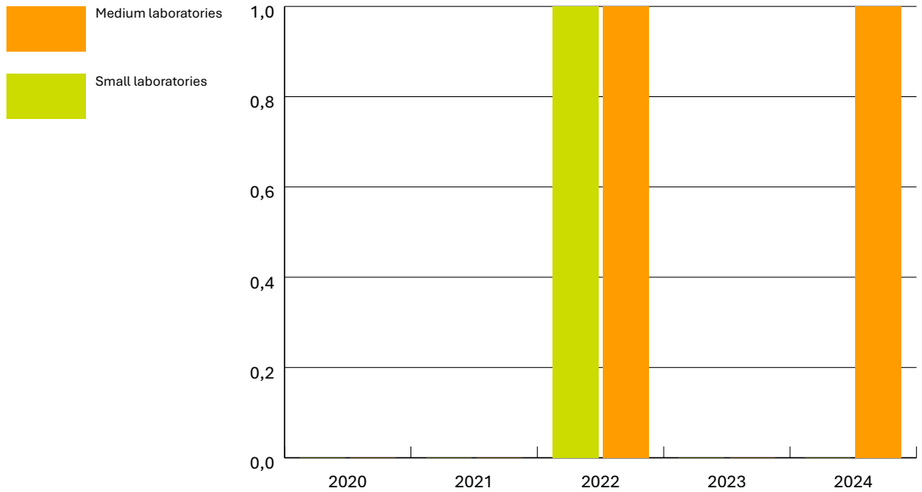
1. (Laniel, 2017)

SEIZED LABORATORIES FROM 2020-2024

It is notable that captagon production has persisted outside of the largest hub of production, Syria. Of the submitting countries in the strategic assessment, Iraq and Türkiye reported domestic mid-scale production, while the remaining respondents reported no detected domestic production.[1] However, open-source reporting indicates a different reality in the same time period of the EU strategic assessment. Open-source media outlets have reported laboratories in Egypt, Iraq, Kuwait, Lebanon, Türkiye, and Sudan.[2] Large-scale production has primarily been anchored in the Levant, in Lebanon and Syria, though producers have tried to diversify their modus operandi and evade interdiction risks by establishing small-scale and on-demand manufacturing operations outside the region in Europe, along with production sites closer to destination markets in the Gulf in Iraq or across the Red Sea in Sudan.[3] Iraq and Türkiye both reported domestic production in the questionnaire, which is confirmed through open-source intelligence. However, through open-source reporting, we also know of other, additional labs seized in Lebanon, between 2020 and 2024, but they were not identified in the strategic assessment.



EU questionnaire participant responses reporting captagon domestic production between 2020 and 2024

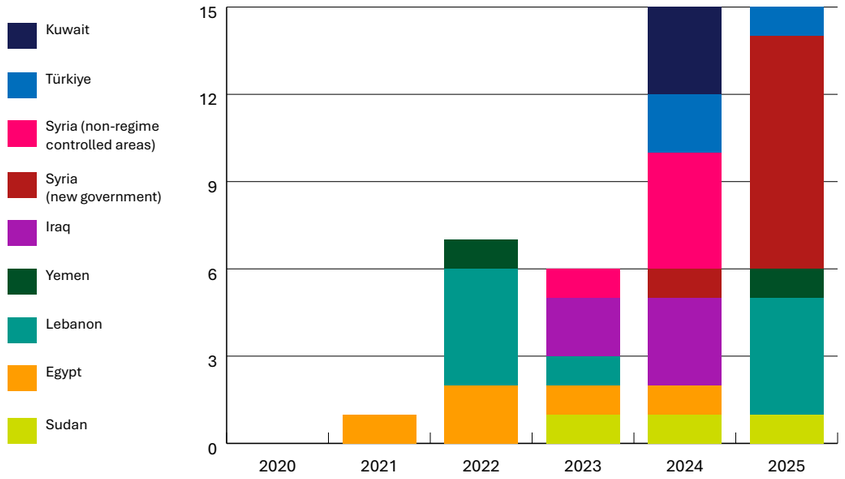
Türkiye was the only country to report size and scope of laboratories and identified both small and medium tableting-only production operations

1. (Data compiled from the EU ACT Questionnaire results)
2. (Compiled from the New Lines Institute Comprehensive Captagon Seizure Database; EUDA 2023)
3. (Rose, Lipschitz, 2025; Agence France-Presse, 2023; EUDA, 2023)

In Lebanon, most captagon manufacturing sites have been identified in the Bekaa Valley and along the border with Syria, key strongholds of the Lebanese paramilitary terrorist group, Hezbollah. In the country, one laboratory in 2023 and four aboratories in 2022 were identified through open-source reporting.[4] In March 2022, Lebanese authorities raided a farm in Al-Jamalia, Baalbek district, and in June 2022 residential areas in the Sharawneh neighborhood of Baalbek, where they seized ammunition, captagon pills, precursor chemicals, and manufacturing machinery.[5] In October 2022, the Lebanese Army and Air Force identified a captagon factory during clashes in Brital in the Bekaa Valley, where caffeine, a common substance found in captagon, was also seized.[6] A month later, the Lebanese Army raided a farm in Haouch Barada, Baalbek district, and identified a large captagon laboratory.[7] In January 2023, the Lebanese Armed Forces (LAF) reported a violent raid on a warehouse in Dar al-Wasiha where captagon pills and production equipment were seized along with hashish and ammunition.[8]

In July 2023, Iraq seized its first captagon laboratory, in the southern Munthanna province, just along the border with Saudi Arabia.[9] In 2024, several laboratories were seized in Iraq, much further north than previous captagon production sites in previous years that were set up close to the border with Saudi Arabia.[10] In Sulaymaniyah, two captagon laboratories were raided in September and November 2024,[11] as well as a laboratory that was reportedly controlled by the Patriotic Union of Kurdistan (PUK) in Aawbar Village just south of Sulaymaniyah.[12] And notably that year, Iraqi forces thwarted an attempt to set up a laboratory in Munthanna province – a previously-used location for captagon production close to the border with Saudi Arabia. In the questionnaire response, Iraq's Ministry of Interior General Directorate for Combating Drugs and Psychotropic Substances reported that simple equipment and devices used for the production of captagon were seized in the provinces of Najaf, Muthanna and Basra. The agency also reported an additional laboratory seizure in Sulaimaniyah Governorate during 2023.

4. (Compiled from the New Lines Institute Comprehensive Captagon Seizure Database)
5. (The Lebanese Army Command, 2022a; The Lebanese Army Command and Guidance Directorate, 2022)
6. (MTV Lebanon, 2022)
7. (The Lebanese Army Command, 2022)
8. (The Lebanese Army Command, 2023)
9. (Agence France-Presse, 2023)
10. (Agence France-Presse, 2023)
11. (Al Rabiaa News, 2024; Zagros News, 2024)
12. (Mazouri, 2024)



Open-source intelligence assessment of identified captagon laboratories seized between 2020 and 2025

In Türkiye, signs of production began in 2022, with one small laboratory and one medium laboratory, both for captagon tableting only, inside the country.[1] In March 2024, Turkish police and the National Intelligence Organization (MIT) raided a hideout in Gaziantep, near the border with Syria, used as a laboratory and seized 193 000 captagon pills.[2] Later that year in December, police raided another production facility in Hatay province, where 38 000 pills and small weapons were seized.[3] In its questionnaire response, Türkiye reported one large tableting-only laboratory for the year 2024.

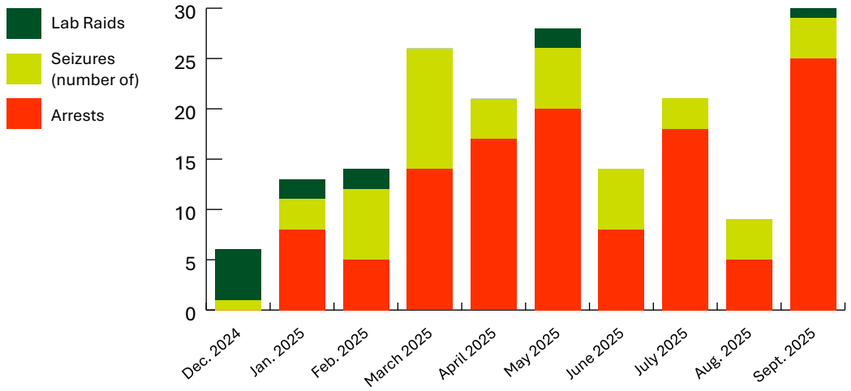
Egypt did not report any domestic laboratories seized; however, open-source information indicates that there were at least four captagon production sites dismantled in the country between 2020 and 2024. In 2021, Egyptian law enforcement seized two manufacturing operations. The first incident was in January, in Ismailia, where forces conducted a raid on a remote farm that served as a captagon laboratory staffed by ten individuals and containing 25 000 captagon pills, along with quantities of «ice» (crystal meth), Tramadol, and hashish.[4] The second incident of 2021 was in November, in Sharqia Governorate, where forces raided a captagon manufacturing operation and found 505 000 pills and 800 kg of what was reported to be 'captagon paste' (very possibly amphetamine paste).[5] In 2022, an interagency initiative led to the arrest of two captagon and tramadol producers in Egypt inside a makeshift factory, seizing 170 000 captagon pills, 125 000 Tramadol pills, manufacturing and packaging tools, and 290 kg of raw materials.[6] In 2024, Egypt's General Administration for Combating Drugs, Weapons and Unlicensed Ammunition disrupted a group involved in captagon production, identifying production materials, equipment, and amphetamine powder.[7] These seizures are notable, reflecting an increased prevalence of the captagon trade inside Egypt as well as an intersection between the trafficking of illicit opiates like Tramadol and the production of stimulants like captagon among the same criminal networks.

1. (Data compiled from the EU ACT Questionnaire results)
2. (Siirt News, 2024)
3. (Al Jadeed TV, 2025)
4. (Egyptian Ministry of the Interior, 2021)
5. (Youm Saba, 2021)
6. (Egyptian Ministry of the Interior, 2022)
7. (Compiled from the New Lines Institute Comprehensive Captagon Seizure Database)

CAPTAGON PRODUCTION HUBS BEYOND 2024

The EU questionnaire was conducted in late 2024 and therefore did not include data for 2025, however, it is important to account for major geopolitical events and escalation in the Levant that will impact both supply and distribution of captagon in the region, as well as affect criminal networks' modus operandi and consumption trends.[1] Through analysis of both the questionnaire results and open-source reporting, the report finds that a total of 45 captagon laboratories were seized between 2020 and 2025, with particular upticks in 2024 and 2025 internationally. Notably, the list of countries identifying domestic captagon production diversified in this time period, indicating that more criminal syndicates are seeking to manufacture the drug outside of traditional production hubs like Lebanon and Syria. Three significant geopolitical developments have been noted that are likely to have impacted the development of captagon production in 2024, shaping a more complex landscape for 2025 and beyond:

1. The collapse of the Assad regime in December 2024;
2. Israel's military campaigns and escalation with Iran and Iran-sponsored networks across the Middle East;
3. Major interdictions by the new Syrian interim authorities and potential 'balloon effect' beyond Syria and the Levant.



Post-regime Syrian counternarcotics operations, compiled through open-source intelligence

1. Since the outbreak of the war in Gaza after October 2023, the Middle East, in particular the Levant region, has experienced immense geopolitical change. In particular, the authority and operational capacity of long-standing armed actors such as Hezbollah in Lebanon and the wider Iranian-aligned militia network, have been significantly degraded, while Israel has adopted a more proactive role in shaping the region's security architecture and conducting strikes against perceived Iran-backed actors. As a result, illicit economies in the region may encounter shifts in border control regimes, disruptions to supply-and-route control by non-state actors, new inter-state security cooperation, and greater emphasis on state-led interdiction may change the operational environment for trafficking, production and transit of illicit substances.

The fall of the Assad regime in late 2024 marked a decisive rupture in Syria's modern political history, precipitating profound political, security, and economic consequences with enduring implications for organised crime. Longstanding criminal networks – many once embedded within the regime's patronage system and its Fourth Armored Division – fragmented or were reconstituted under emergent local authorities, intensifying narcotics production, arms trafficking, and smuggling across porous borders. In this fluid environment, organised crime has both adapted to and shaped post-Assad power dynamics, entrenching itself within transitional governance structures and exploiting the governance gaps in contested territories. The trajectory of Syria and the resilience of its illicit economies will depend largely on the capacity of the new interim government and international partners to re-establish credible institutions, secure borders, and integrate economic reconstruction with anti-corruption and counter-trafficking measures.

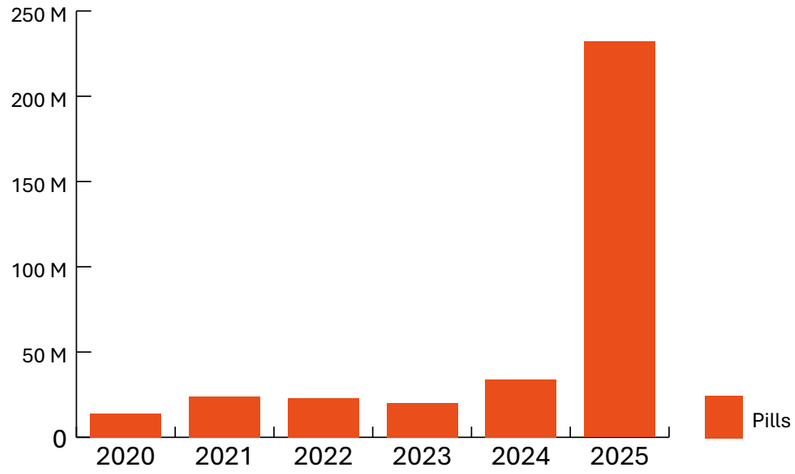
Analysis of open-source information shows there has already been a shift towards a more complex picture of captagon production in the region. As the new Syrian interim government publicly committed to reduce Syria's role as a hub for the captagon trade, there were a series of five laboratory raids in Syria, in December 2024, and eight laboratory raids, in 2025.[2] Interior Ministry forces under the new Syrian administration have seized over 231 000 000 captagon pills, an almost 6-fold increase from the year before when the Assad regime held Syria.[3] Furthermore, the Syrian administration has conducted a series of arrests against key smuggling networks that had engaged in industrial-scale production under the previous regime. In 2025, the Interior Ministry conducted operations with the help of regional neighbors like the Iraqi and Turkish governments, to arrest key criminal traffickers like Amr al-Sheikh, Wassim Badia al-Assad, Namir Badi al-Assad, as well as counter key smuggling entities in neighboring Lebanon, such as members of the Zeaiter family that partnered with the former regime and its Fourth Armored Division.

2. (Alfurat News Agency, 2025; Al Jadeed TV, 2025; Dr. Al-Nassar, 2024; Al-Wasl, 2024; Halab Today TV, 2025; Ibrahim, 2024; Shaam News, 2025; Syrian Ministry of the Interior, 2025a, 2025b; Syria TV, 2025)
3. (Compiled from the New Lines Institute Comprehensive Captagon Seizure Database)

In neighboring Lebanon, particularly along the Syrian Lebanese border's Qalamoun Mountain rang, a complex dynamic has unfolded around captagon production and smuggling linked to the fall of the Assad regime and weakening of Hezbollah. Lebanon has entered a period of profound political and security recalibration against non-state security actors like Hezbolla. This renewed capacity has enabled the LAF to mount coordinated operations against Hezbollah-linked trafficking networks, particularly those involved in narcotics and arms smuggling that had previously flourished under the militia's protection and had coordinated with the former Assad regime in neighboring Syria. The weakening of Hezbollah and the parallel strengthening of state security functions have opened an unprecedented opportunity for the reconstitution of Lebanese sovereignty and the gradual dismantling of illicit economies intertwined with Hezbollah's financial architecture.

Smuggling syndicates that had operated with the protection of the Assad regime's Fourth Armored Division and its intelligence apparatus, reportedly, moved across the border into northern Lebanon after the December 2024 opposition offensive that ousted the Assad regime. Many of these groups, alongside notable Lebanese smuggling syndicates, were involved in kinetic clashes that ensued in February 2025 along the Lebanese-Syrian border, where criminal actors vied for control over key cross-border routes and engaged in crossfire with both the Lebanese and Syrian Army.[1] Key smugglers and former Assad regime-aligned actors also sought safe haven in Lebanon, with the potential to resume illicit operations from the Mediterranean coast.[2] A significant uptick in laboratory raids in Lebanon – four laboratories, largely in the Baalbek region, seized in 2025 – may be construed as a sign that production has shifted from neighboring Syria to Lebanon. However, it is more likely due to an increase in the capacity of the Lebanese security forces to access Hezbollah-controlled areas of Lebanon and disrupt their preexisting illicit operations. Additionally, the Lebanese authorities have intercepted captagon production equipment smuggled from Syria into Lebanon's Hermel region and have arrested a key captagon production network, in May of 2025, in the Bekaa Valley.[3]

1. (Durgham, 2025)
2. (Rose, 2025)
3. (MTV Lebanon, 2025; National News Agency, 2025)



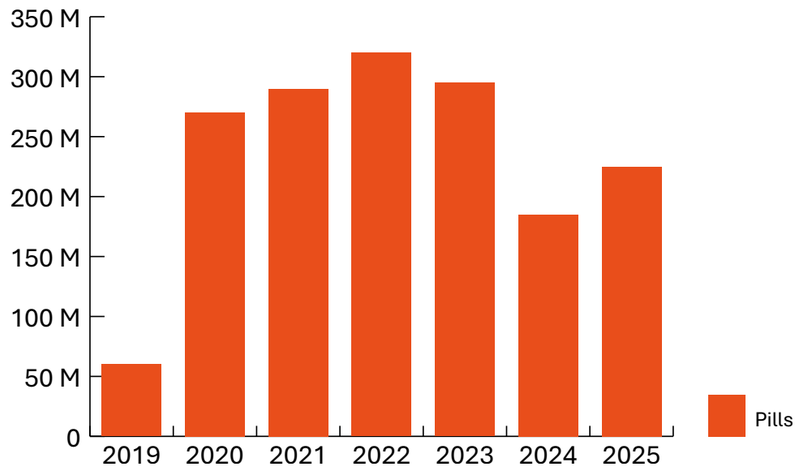
Seized volume of captagon by year in Syria, compiled through open-source intelligence

While we have seen a significant crackdown against production sites in Syria and a potential shift of operations into neighboring Lebanon, there has been an uptick in detected production sites outside of Syria, the Levant, and even the Middle East. Even before the offensive in Syria began in December 2024, there were signs of manufacturing shifts primarily into neighboring Türkiye and Iraq, as well as new production in Egypt, Kuwait, and even in the EU, in Germany and the Netherlands.[4] While it is not possible to determine the precise reason for the sudden spillover of small-scale production operations from Syria, it was likely due to the Assad regime's broader campaign for economic normalization and rapprochement with its regional counterparts. Seeking to dispel reports that the regime harbored industrial-scale production, the Assad regime conducted a campaign of small-scale seizures and arrests to create an impression that it was cracking down on the captagon trade, although large-scale manufacturing sites continued to receive regime protection until later that year when the regime fell and laboratories were dismantled. Furthermore, producers likely saw opportunity in engaging in new sites for production, such as cooperation with international criminal syndicates like Dutch amphetamine manufacturers, as well as increased proximity to destination markets in Iraq, Kuwait and Sudan.[5] [6] In 2024, outside of predominant captagon production hubs like Syria and Lebanon, Türkiye seized two manufacturing sites,[7] Kuwait seized three,[8] Egypt seized one,[9] Sudan seized one,[10] and Iraq seized three.[11]

4. (EUDA, 2023; The New Arab, 2023; Rose, 2023; Kuwait Ministry of the Interior, 2024)
5. (EUDA, EU Drug Market: Amphetamine — Trafficking and supply. 2023)
6. (Shaar, 2025)
7. (Caparoglu, 2024; Siirt News, 2024)
8. (Al Jarida News, 2024; Al Rai, 2024; Kuwaiti Ministry of the Interior, 2024)
9. (Omran, 2024)
10. (Al Arabiya Sudan, 2024)
11. (Al Rabiaa News, 2024; Mazouri, 2024; Zagros News, 2024)

While 2025 has yielded a high level of laboratories seized primarily in Syria and Lebanon as security forces have moved against existing manufacturing syndicates, there has been a smaller list of countries that have flagged captagon production sites. The same amount of laboratories were seized in 2025 as in 2024, however, there is less diversification among countries. Whereas in 2024, six countries were identified as production sites through open sources, just five –, Lebanon, Sudan, Syria, Türkiye and Yemen –were reported as possessing laboratories in 2025.[1] As major crackdowns have taken place in the Levant, it is likely that producers have sought to downsize operations and seek new sites closer to destination markets to produce captagon, characterizing post-Assad 2025 as a period of transition for captagon production and trafficking. Furthermore, the extension of Israel's military campaign beyond Gaza over the last two years into countries like Lebanon and Syria, where it has targeted Iran-backed networks, has further created an incentive for producers to seek out new areas further away that are less likely to be targeted by Israel and its partners, such as Egypt and Sudan.

It is unclear whether the disruption of major captagon laboratories inside Syria and Lebanon has imposed a captagon supply shortage within regional markets. While volume of captagon in circulation in 2025 was notably lower than levels reported in 2022 and 2023 – when the trade was at its peak and smuggled consignments were at their largest – there was an uptick in seizure volume between 2024 and 2025. Even when discounting consignments seized in Syria, given the country's role as the major production hub, seized captagon volume remains slightly higher in 2025. This is likely due to efforts by traffickers in Lebanon and Syria seeking to quickly export stockpiled captagon pills, anticipating interdiction by local authorities – reports confirmed by the Syrian Interior Ministry.



Captagon volume seized globally (excluding Syria), compiled from open-source intelligence

Despite greater visibility into some of the largest manufacturing and smuggling operations after the fall of the Assad regime in Syria, information gaps remain. For example, there is little available and evidence-based information regarding the flow and acquisition of precursor materials to producers. One investigation conducted by the Syrian Observer identified customs documents confirming that 400 barrels of diphenhydramine, a substance often found in captagon pills, were dispatched from Gujarat, India to a Syrian pharmaceutical company via the Port of Beirut – barrels that were later identified inside a regime-affiliated production site in Yarfour.[2] Another key information gap concerns the methods used by criminal syndicates to acquire precursor materials and other ingredients and move financial assets, either through the hawala system, front companies, offshore bank accounts, or other means.

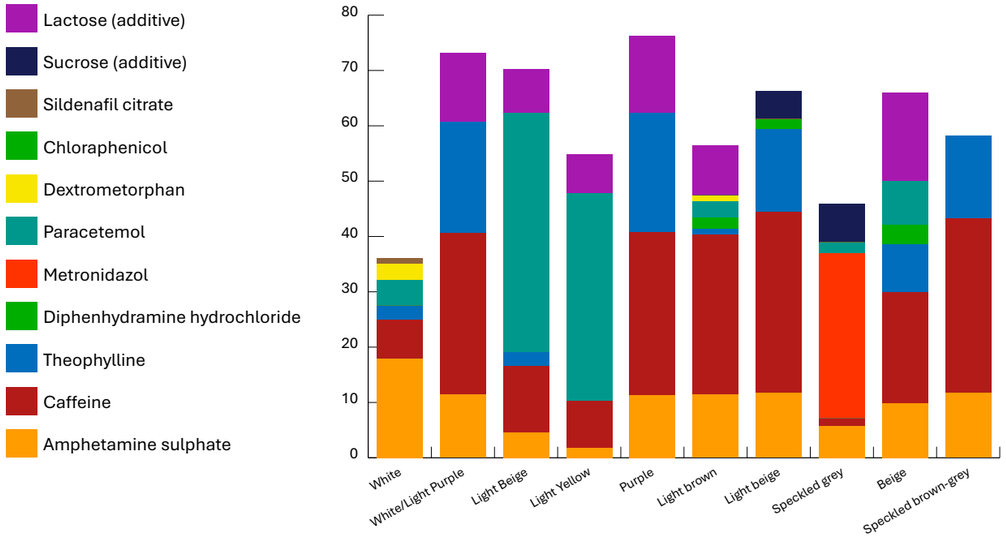
1. (Sudan Platform, 2025; YEŞİLMEN & ŞAHİN, 2024)

2. (The Syrian Observer, 2025)

CHEMICALS USED IN PRODUCTION OF CAPTAGON

As illicit production of captagon has spread outside of traditional production hubs in Lebanon and Syria, limited evidence of tested captagon pills has indicated diversification among the chemical inputs used in the manufacturing process. This has accompanied a surge in variants of captagon pills that are associated with different precursor materials, cutting agents, and amphetamine-content that produce different effects for its users.

Despite some laboratory investigations about captagon's composition, there is a deficit of available information about captagon's chemical inputs across the drug's primary destination markets and the potential impact on the consumer. Due to either an inability to carry out forensic testing or a lack of strategic focus and administrative capacity to coordinate with governmental agencies that can conduct laboratory analysis, most seizing agencies simply discard interdicted captagon pills. However, some seizing agencies have conducted routine testing with results available in both the EU questionnaire results and open-source, though there is a wide range in the information provided.



Captagon's composition, compiled from samples tested in Germany

Only a limited number of participants that frequently seized captagon were able to provide information about purities. Some participating countries were able to provide a range or an average, while others identified purity levels based on one sample that was tested. In its questionnaire responses, Egypt indicated that one testing identified captagon pills as comprising 24% of amphetamine.[1] Iraq's forensic testing identified a range of 40% to 95% of amphetamine as well as an unspecified amount of phenethylamine in captagon pills.[2] Lebanon listed an unspecified amount of caffeine and amphetamine in pills, along with an unnamed amount of lidocaine.[3] Türkiye provided the average amphetamine purity of captagon pills tested in 2023 –10.3%- along with the average of 10% in 2024, indicating that amphetamine content in captagon pills transited through Türkiye had slightly declined.[4]

Jordan's government has also coordinated with the U.S. Drug Enforcement Administration (DEA), the Center for Forensic Science Research (CFSR), and the German Federal Criminal Police Office (BKA) to conduct testing of captagon samples sourced from separate seizures. One laboratory analysis conducted by the German BKA, seized by Jordanian customs/JAF along the border with Syria conducted testing across different 'brands' and colours of captagon pills seized from different consignments, filling in key data gaps on how different logos and colours have different combinations of chemical inputs. The test, indicates the broadening spectrum of materials used and how they correspond to different colours and brands such as the 'Lexus' or 'Zero-One' (bright white), 'Ya Masharni' (pink), 'Capti' (yellow and/or brown), though challenging to compare to other conducted tests that did not account for or publicize different brands of pills. Notably, the sample of captagon tested in Germany illustrates how theophylline–often thought as a consistent, primary chemical input for captagon–is not present in all pills tested and varied widely between 1% and 21% among pills that did contain theophylline. Amphetamine levels were more stable with the majority of samples between 4% and 11%, while caffeine was consistently incorporated into all pill colours but varied widely between 1% and 32%. Paracetamol varied greatly across tested samples between 2% and 43%. Jordan's government also submitted forensic results in the EU questionnaire, identifying different chemical compositions across popular captagon brands, like the 'Lexus', 'Crescent Moon', and 'Spartan' logos.[5] While the questionnaire answers did not disclose the sample size and whether these pills came from separate seizures across Jordan, the results disclosed that tan pills with an "LX" (Lexus) logo contained 28.1% (47 mg) of amphe-

1. (Data compiled from the EU ACT Questionnaire results)
2. (Data compiled from the EU ACT Questionnaire results)
3. (Data compiled from the EU ACT Questionnaire results)
4. (Data compiled from the EU ACT Questionnaire results)
5. (Data compiled from the EU ACT Questionnaire results)

tamine, along with caffeine, paracetamol, lidocaine, and theophylline.[1] Captagon pills with the typical two crescent moons or 'c's'--often referred to as 'Abu Hilalain'--contained 4.3% (7 mg) of amphetamine with caffeine, lidocaine, theophylline, and diphenhydramine.[2] Some pills of that same brand were also found by Jordanian forensic tests to contain 32.7% (53 mg) of amphetamine, caffeine, paracetamol, lidocaine, and theophylline.[3] And pills with a Spartan head logo and 'LX' on the reverse side of the pill had 19.7% (35 mg) amphetamine, caffeine, paracetamol, lidocaine, and theophylline.[4]

Testing conducted collaboratively by the CFSR and the Jordanian Public Security Directorate's Forensic and Laboratories Department confirmed similar results to that of the BKA testing, with pills containing varied levels of caffeine, paracetamol, diphenhydramine, quinine, methamphetamine, ephedrine, chlorpheniramine and 8-Chlorotheophylline–and some with no amphetamine included whatsoever.[5] Notably, these components do not appear in pills tested by the German BKA, indicating the wide chemical spectrum for captagon pills.

To understand the phenomenon properly, forensic testing of pills seized in origin hubs (Syria and Lebanon), transit and emerging production countries (e.g.) Iraq and Kuwait, and main consumer markets (like Saudi Arabia and the United Arab Emirates) is essential. Furthermore, laboratory analysis results often do not disclose different forms of captagon pills, either by colour or by brand, to indicate the spectrum of chemical combinations of active ingredients and cutting agents. There have been additional, though limited, tests conducted on captagon pills, largely in destination markets in the Gulf like Saudi Arabia, though limited open source information exists. A forensic test of captagon pills seized in Saudi Arabia in 2021, reported samples containing between 16% and 41% amphetamine, along with small amounts (<0.5%) of methamphetamine.[6] In a separate forensic analysis of 30 captagon pills seized in three Saudi Arabian cities, Jazan Province, Ahad Al Masariha, Al-Darb and Gizan, pills were found to contain higher levels of amphetamine than the recommended dose of 5-10 mg per day for patients with ADHD.[7] The study found that some captagon pills contained 0.12 to 0.24 mg of methamphetamine, though the rate of amphetamine to methamphetamine was 57:1 to 110:1, signaling that methamphetamine could potentially be an impurity in the pills.[8] In Yemen, a notable laboratory raid in Al-Marah revealed joint captagon and methamphetamine production, indicating that producers were either seeking to produce the two stimulants side-by-side or include methamphetamine in the production process of captagon.[9] The potential inclusion of amphetamine and methamphetamine in captagon pills – though only confirmed in two separate reports in Saudi Arabia – represents a potential nexus between captagon and methamphetamine production in the Middle East.

Captagon's chemical inputs have been largely determined through intermittent forensic analysis results testing seized pill samples; however, laboratory and precursor seizures have been useful to help supplement public knowledge about the precursor chemicals and additives that criminal actors have used. The recent string of industrial-scale laboratory seizures conducted after the ousting of the Assad regime helped expose chemical inputs that the trade's biggest manufacturers used, helping fill in key gaps in literature and confirm suspicions about captagon's composition. Open-source analysis of the laboratories seized by opposition forces in December 2024 and January 2025 in former-regime held Douma, Damascus, and Yarfur identify a series of chemicals found within the production facilities, often alongside or next door to captagon production equipment. Video footage and photos of the manufacturing sites indicate the following chemicals, though not confirmed through formal testing: chloroform, potassium iodide 1 kg, acetic acid glacial 2.5 l, chloroform formaldehyde solution, hydrochloric acid, petroleum ether, and ethyl acetate, lead acetate, titanium dioxide, lactose, acetone, caffeine (Anhydrous), formic acid, Sodium Hydroxide Flakes (caustic soda).[10] [11] [12]

1. (Data compiled from the EU ACT Questionnaire results)
2. (Data compiled from the EU ACT Questionnaire results)
3. (Data compiled from the EU ACT Questionnaire results)
4. (Data compiled from the EU ACT Questionnaire results)
5. (Colombo Plan Health Alert: Counterfeit Captagon, 2023)
6. (Logan, 2023)
7. (Alhazmi, et al., 2020)
8. Id.
9. (Barran Press, 2025)
10. (Al-Hasaan, 2025; Blomfield, 2024; Christou, 2024; Levant24, 2024; MSN, 2025; Organized Crime and Corruption Reporting Project, 2023; Rose, 2024; Roya News, 2025; Shikhibra, 2024; Warfare Analysis, 2024)
11. (Roya News, 2025)
12. (Maher Akraa, 2024)

EQUIPMENT USED IN CAPTAGON PRODUCTION

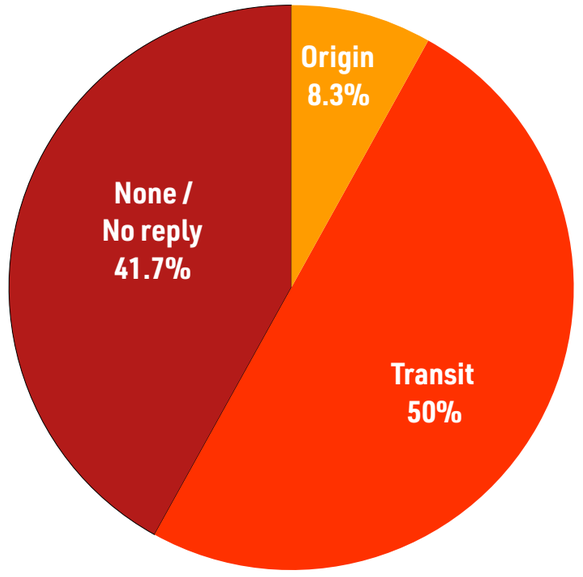
Captagon production typically features two stages, sometimes conducted at the same facility: the chemical synthesis of amphetamine and the subsequent process of pill tableting. In the synthesis phase, producers combine a range of precursor chemicals with cutting agents to manufacture amphetamine in powder or paste form. Once synthesis is complete, the amphetamine product is either transported to a separate facility dedicated to tableting or tableted at the facility it was synthesized in. At this stage, pill processing machines compress the material into tablets and imprint them with identifying logos, most commonly the two interfacing "c" symbols traditionally associated with captagon, though alternative brand markings, such as the Lexus logo, are also frequently used. These imprints serve both as a form of branding within illicit markets and as a signal of perceived quality or origin to consumers and traffickers alike.

In some of the largest captagon production sites, such as in former factories and industrial facilities, producers are able to separate the different stages of production into different segments or rooms, establishing areas for the storage of vats of precursor chemicals, an area for synthesis, an area for tableting, and an area for packaging pills and storing packaging materials like machinery, clothing, fake and real produce, and cleaning products. These expanded sites were found in seized laboratories in 2024 and 2025, at sites such as Douma and Yarfour in Syria. Open-source analysis of laboratory equipment identified at many captagon manufacturing sites in, Lebanon, Sudan and Syria, indicate that some of the materials, such as mixers, are custom-made. Footage of facilities in Douma, Yarfur, and Damascus showed voltage stabilizers, rotary evaporators, tablet compressing machines, dough and food processing mixers, tumble blenders, hydraulic presses, stainless steel industrial reactors that expressed brand names from companies across the globe, such as commercial entities in Germany, Türkiye and China.[1] [2] [3] Some retroactive investigations, such as one conducted by reporters for Daraj, have been able to identify the source of chemical storage containers found in major production sites like the laboratory in Yarfour, Syria, and trace its origins through customs documents.[4] However, no such investigation has been done in the open-source regarding captagon laboratory equipment to identify how producers acquired and transported the tools required to manufacture captagon, representing yet another information gap.

1. (Al-Hasaan, 2025; Blomfield, 2024; Christou, 2024; Levant24, 2024; MSN, 2025; Organized Crime and Corruption Reporting Project, 2023; Rose, 2024; Roya News, 2025; Shikhibra, 2024; Warfare Analysis, 2024)
2. (Roya News, 2025)
3. (Maher Akraa, 2024)
4. (The Syrian Observer, 2025)

There were not many countries that responded to the EU questionnaire, that identified specific pieces of equipment in captagon production sites or trends observed. Two countries however, Iraq and Lebanon, indicated that their security and law enforcement agencies have encountered equipment often designed for civilian, everyday use that can be easily obtained.[5] Iraq noted that their forces seized "simple equipment and devices" for captagon manufacturing seized in the provinces of Najaf, Muthanna and Basra. Lebanon identified that their forces have found "several machines" along with chemical inputs.[6]

Law enforcement agencies do not always identify the specific pill type, such as colour or branded logo, affiliated with specific types of equipment during laboratory raids or release photos of the production facility, often for security reasons. However, the recent string of seizures conducted by the new Syrian interim government, uncovering former regime-operated captagon laboratories, and the subsequent multimedia content that followed, has shone a light on some of the large-scale equipment that captagon manufacturers used.

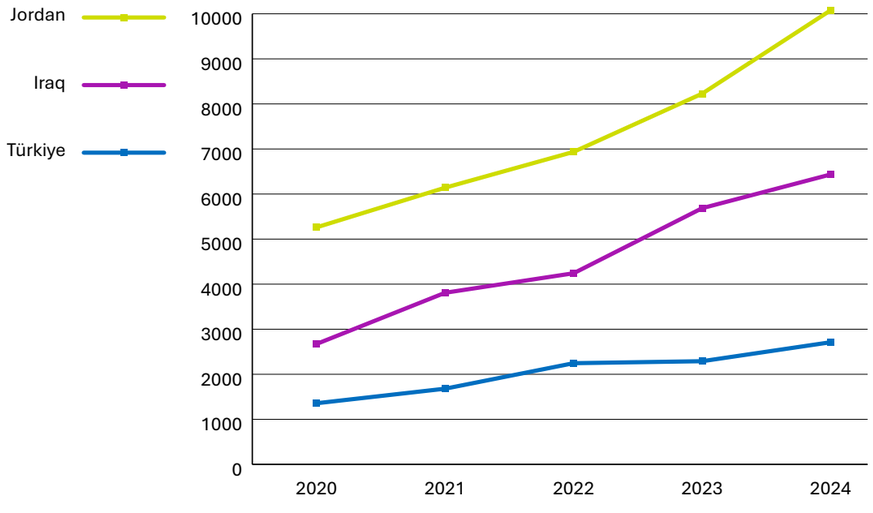


EU questionnaire participants' claimed status in the captagon trade.
Note that Iraq self-identified as two statuses: both a transit and origin country.

5. (Data compiled from the EU ACT Questionnaire results)
6. (Data compiled from the EU ACT Questionnaire results)

CAPTAGON INTERDICTION TRENDS

Among the eleven countries that submitted questionnaire answers to the joint EUDA and EU ACT strategic assessment, seven confirmed that they had seized captagon in the last five years. While this questionnaire did not include responses from the captagon trade's primary largest markets in the Gulf region, it reflects the prevalence that captagon has in the region.

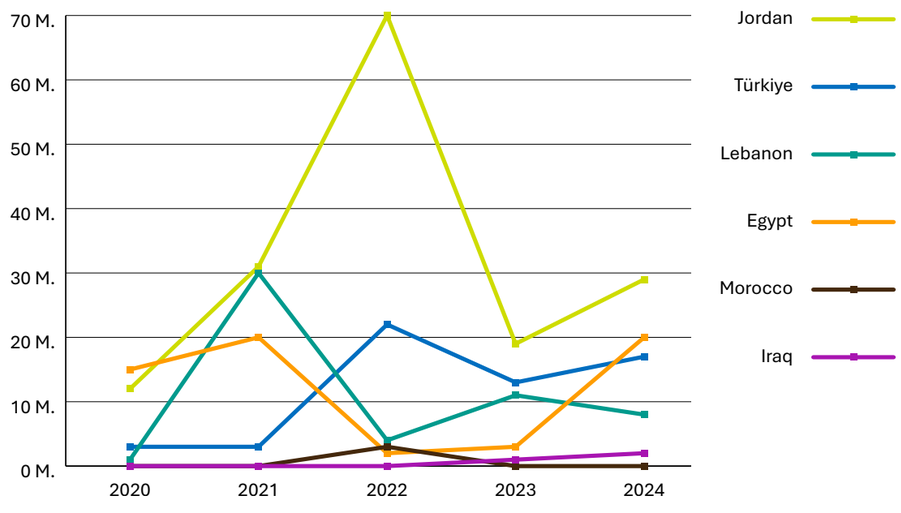


Number of Captagon seizures amongst EU questionnaire participants between 2020 and 2024
(countries over 200 interdictions)

More than half – 6 out of 11 – responding countries in the EU questionnaire self-identified as a transit country, with only Iraq identifying as a dual origin and transit country for captagon.[1] Open-source analysis of seizures between 2020 and 2024 identify 25 countries and territories affected by captagon illicit trafficking, seizing captagon upon or within their borders: Austria, Egypt, Germany, Greece, Iraq, Italy, Jordan, Kuwait, Lebanon, Libya, Malaysia, Morocco, Netherlands, Nigeria, Oman, Palestine, Qatar, Romania, Saudi Arabia, Syria, Sudan, Türkiye, the UAE and Yemen.[2] This list has gradually expanded over time, particularly after criminal actors began to rely upon commercial maritime shipping lanes for captagon consignments that often involved transshipment sites in southern European, North African and even Southeast Asian ports.

1. (Data compiled from the EU ACT Questionnaire results)
2. (Compiled from the New Lines Institute Comprehensive Captagon Database)

Through analysis of the EU questionnaire results provided by countries like Egypt, Iraq, Jordan and Türkiye, it is clear that the rate of captagon seizures has steadily increased betwenn 2020 and 2024.[3] Countries experienced different rates of growth between each year, with Jordan experiencing a dramatic 22.5% spike in seizure incidents between 2023 and 2024 and Iraq experiencing a similar spike of 13% between 2022 and 2023.[4] Only Egypt experienced a slight downturn in seizure rates, from 196 incidents in 2023 to 150 incidents in 2024, a 23.5% reduction.[5]



Volume of captagon pills seized amongst EU questionnaire participants 2020-2024
(countries seizing over 1 million pills)

Submitting countries' reported interdiction levels over the course of the four-year period between 2020 and 2024 indicate that the volume of seized captagon spiked in 2022, particularly in Jordan and Türkiye.[6] Notably that same year, seized volume of captagon drastically fell in Lebanon and across the region overall, with 345 695 735 captagon pills seized in 2022 and a 16.6% decrease from 2021.[7] In Egypt between 2023 and 2024, rates of seizures decreased but volume of pills increased by 483%, indicating that traffickers were enlarging the size of trafficking operations into Egypt while reducing the rate of small-scale smuggling incidents.[8] Across a majority of countries seizing over 1 million pills each year such as Egypt, Jordan, Iraq, Lebanon and Türkiye, the EU questionnaire revealed that the volume of seized captagon increased steadily between 2023 and 2024.[9]

3. (Data compiled from the EU ACT Questionnaire results)
4. (Data compiled from the EU ACT Questionnaire results)
5. (Data compiled from the EU ACT Questionnaire results)
6. (Data compiled from the EU ACT Questionnaire results)
7. (Data compiled from the EU ACT Questionnaire results)
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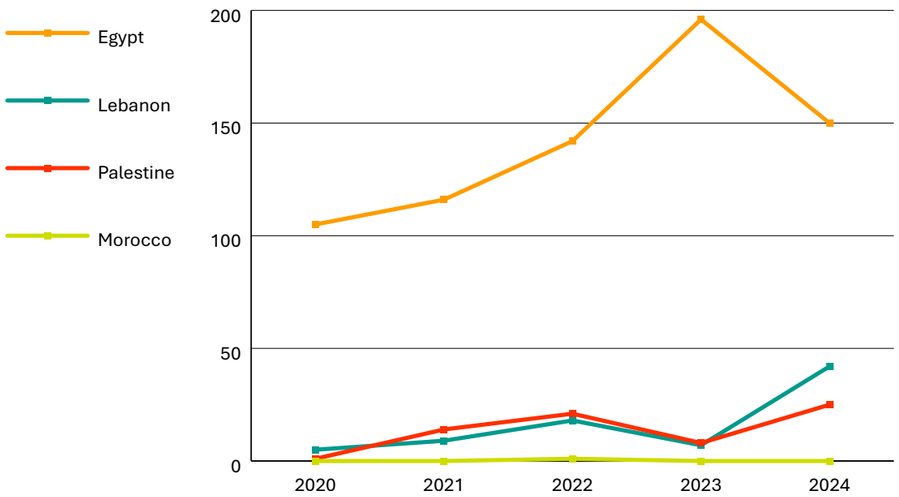
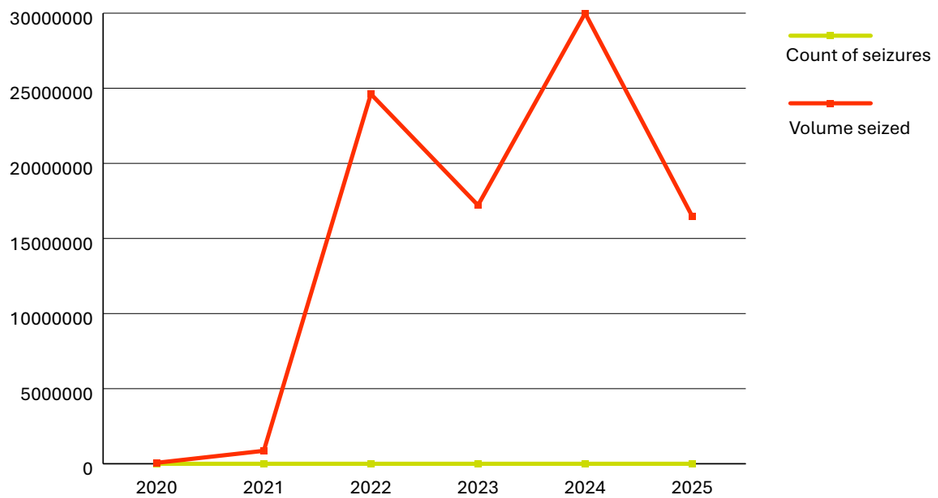


Number of captagon seizures amongst EU questionnaire participants between 2020-2024
(countries under 200 interdictions)

The spike in captagon volume in 2022 among countries that participated in the strategic assessment was likely due to increased reliance on large-scale trafficking via maritime vessels and commercial shipping lanes, as smugglers have used Mediterranean and Red Sea ports as transshipment sites in Egypt, Lebanon, Libya, Sudan and even EU-based ports in Italy, Greece and Romania, reducing suspicions over consignments originating from ports like Latakia and Beirut.[1] Notably, the volume of interdicted captagon rose once again from 2023 to 2024 by 15.4% total among reporting countries.[2] However, when accounting for open-source analysis of seizing countries that did not submit to the EU questionnaire, a different picture emerges. The volume of seized captagon actually fell dramatically in 2024, particularly when accounting for reduced volume seized among Gulf countries.[3] This coincided with the former Syrian regime's efforts to achieve normalization agreements and resume trade with its Gulf Cooperation Council (GCC) counterparts–many of them top destination markets for the captagon trade–and followed reports that the Syrian regime had sought to reduce the flow of captagon into Gulf markets to achieve goodwill, while maintaining production levels and redirecting the flow of the trade to alternative markets.[4]

1. (Shaar et al., 2025; EUDA, 2025)
2. (Data compiled from the EU ACT Questionnaire results)
3. (Compiled from the New Lines Institute Comprehensive Captagon Database)
4. (Shaar et al., 2025)



Open-source data on Iraqi captagon seizures from 2020 to 2025

The number of seizures of captagon, however, increased in 2024, along with volume across the majority of countries reporting in the EU questionnaire.[5] Countries that submitted data indicated that the interdiction rate gradually increased across 2020, 2021, 2022, 2023 and 2024, particularly among Jordan, Iraq and Türkiye, despite the COVID-19 pandemic.[6] In Iraq particularly, the UNODC reported that seizures of captagon increased by 3 380% from 2019 to 2023, though the report does not identify whether this increase is in seizure rate or volume.[7] Open source analysis identifies that in the period between 2020 and 2025, the country conducted 144 seizures, with 2024 yielding both the most amount of seizures (64) and volume (29 997 666 pills) in that five-year period.[8] This data indicates that smugglers shifted their trafficking methods, relying not on industrial-scale, commercial maritime shipping lanes but instead smaller-scale, overland smuggling routes. This is further supported by a spike in trafficking through Jordan from 2023 to 2024.

5. (Data compiled from the EU ACT Questionnaire results)
6. (Data compiled from the EU ACT Questionnaire results)
7. (UNODC, 2024a)
8. (Compiled from the New Lines Institute Comprehensive Captagon Database)

CAPTAGON ORGANISED CRIMINAL SYNDICATES AND METHODS

The structure of the organised criminal structure behind the captagon trade is a hybridized picture of political and criminal syndicates in which formal security organisations, armed units and state-adjacent commercial structures became mutually reinforcing elements of production and distribution. Elements of the former Assad regime – most conspicuously, units associated with the Fourth Armored Division and the regime's security apparatus, such as the Military Intelligence and Air Force Intelligence Directorates – were found to provide protection to manufacturing sites, securing supply chains of precursor chemicals, and using state logistics nodes (air bases, military-controlled warehouses and port facilities) to expedite consignments destined for Gulf, African and European markets. Furthermore, the former regime's patronage system of family members and businessmen complemented production processes, by providing commercial ships, airlines, and shell companies to both smuggle captagon and launder the proceeds.[1] The Fourth Armored Division's close ties to Lebanese Hezbollah factions and prominent smuggling kingpins further reinforced operations by unlocking access to Lebanese Mediterranean ports and small-scale production sites in areas under Hezbollah control in the Beqqa Valley and Qalamoun Mountain range.[2] These relationships converted territorial control and military capacity into instruments of economic extraction and patronage, permitting the co-location of military authority and illicit manufacture that underpinned industrial-scale production.

The militarized production system, therefore, was embedded within transnational organised-crime networks and an array of deliberate financial concealment techniques. Investigations and sanctions actions have documented repeated tactical alliances between Syrian actors and Italian organised-crime groups (including Camorra networks implicated in high-profile port interdictions such as the July 2020 seizure in Salerno, Italy), while contemporaneous reporting traces maritime transshipment pathways through Libya and West Africa that relied upon both local political leadership and customs systems to mask origin and recipient chains.[3] To convert illicit proceeds into usable capital, traffickers have systematically used shell companies, layered commercial invoices and front-line trading firms – often in the aviation, freight and tourism sectors – to launder revenues and obscure beneficial ownership. Carriers and travel agencies that have been named in sanctions or investigative reporting (including Cham Wings and firms connected to Air Mediterranean and allied travel agencies) served as logistical enablers and commercial façades which permitted the movement of people, cargo and hard currency across jurisdictions while complicating due diligence and interdiction.[4] These mechanisms were complemented by cash-intensive trade and trade-based money-laundering techniques such as over and under-invoicing, bulk cash couriers, and the use of diaspora commercial networks and informal value transfer systems, that recycled proceeds through legitimate-looking import–export flows and hospitality businesses. It was estimated by the Observatory for Political and Economic Networks that regime-aligned actors–family members, Fourth Armored Division commanders, and businessmen with heavy roles in production and trafficking–earned at least $2.4 billion annually from engaging in the captagon trade.[5]

Following the fall of the Assad regime, criminals in the captagon trade have diffused and altered their modus operandi. As the monopoly over production and industrial-scale smuggling from the regime has dissipated and the Syrian patronage order fragmented, a broader constellation of armed and criminal actors moved to capture rents and provide transit – ranging from Iran-aligned militia elements in Iraq and Yemen, to rebel elements in Sudan.[6] In Iraq, the Popular Mobilisation Forces have been reported to extract levies at checkpoints and exploit southern ports such as Basra for onward movement.[7] More recently, conflict actors that expanded territorial control after the fall of the Assad political order – most notably in Houthi and non-Houthi-controlled areas of Yemen and areas under the Rapid Support Forces in Sudan – have been reported to exploit coastal and overland corridors for trafficking and engage in captagon manufacturing into destination markets in the Gulf.[8] Information gaps remain regarding these new captagon trade actors' ties to former Assad regime networks, how much they have generated from production and trafficking, and laundering methods, creating a need for further investigation and analysis.

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1. (Rose, et al., 2024a)
2. (Rose, 2025c)
3. (Rose, 2023b)
4. (Assad, 2024)
5. (Shaar, 2023)
6. (Rose, 2023a; Hilton, et al., 2025; YemenOnline, 2025)
7. (Kulić, et al., 2023; BONGARRÀ, 2021)
8. (Rose, et al., 2025b)

CAPTAGON CONSUMPTION LEVELS AND DATA

Captagon's profile of usage is complex, transcending beyond recreation. It is primarily consumed in pill form through swallowing, rather than injected. A normal dosage is considered between one to two pills per day, though some users exceed that number with greater dependency. Some consumers have touted captagon's functional use, enhancing productivity and job performance, with taxi drivers, university students, hospitality workers and lorry drivers often using the drug to allow them to stay up for hours at a time and support multiple shifts. Particularly in educational settings in countries like Jordan and Saudi Arabia, students have flocked to captagon usage as an aid to improve classroom performance. In a study about non-medical stimulant usage conducted on 8 739 senior high school and university students in Jordan in 2022, captagon was found to be the most popular – representing 2.6% of participants.[1] Filling stations in Jordan, Syria and Lebanon have been reported to crush captagon pills into coffee cups, commonly called "qahwa mazbouta," on the street, to help sustain customers' attention for long drives.[2] The drug has also been commonly used to stave off hunger, particularly among communities facing food insecurity and conflict with frequent disruptions to humanitarian supply lines. Many living through insecurity in the region have also sought out captagon for relief from post-traumatic stress (PTSD) syndrome imposed from civil wars and frequent insecurity in Syria, Lebanon and Palestine. Consumption of captagon has also been reported among state and non-state armed fighters, aiding in battlefield performance and for confidence against adversaries.[3] A popular narrative of captagon is that it served as a "jihadi drug"-a substance consumed by terrorists in Syria – however, captagon has a broad spectrum of use that transcends jihadist groups.[4]

While captagon is a substance widely used across different age groups, income levels, and social grades, the region's framework of strict drug laws and broader prohibition of drugs has created a culture of stigmatization, particularly when it comes to seeking treatment for captagon dependence. Within the region, Iran, Iraq, Libya, Syria and Saudi Arabia, maintain some of the harshest penalties, prison sentences, and in some cases, the death penalty, for captagon traffickers, producers and consumers.[5] Some countries, like Algeria, Jordan, Lebanon, Tunisia, UAE, as well as Saudi Arabia, have made exceptions for those addicted to captagon and have expanded treatment options.[6] This is particularly the case for individuals that seek out harm reduction and treatment services for captagon dependence.

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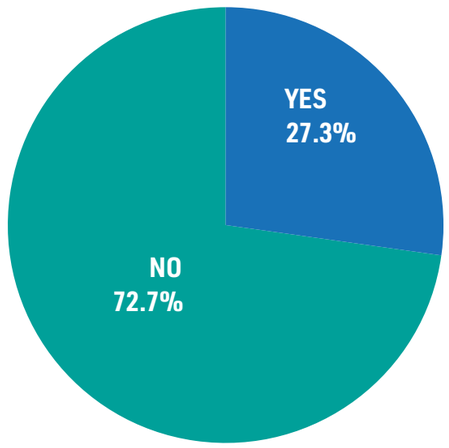
1. (Abdulfattah, 2024)
2. (Caesar, 2024).
3. (Pergolizzi Jr. et al., 2024; Goodley, 2025)
4. (Laniel, 2017).
5. (Amnesty International, 2025a; Shafaq News, 2025; Amnesty International; 2025b; EUAA, 2020)
6. (Rahimi-Movaghar et al., 2012, p.39)

Despite the captagon trade's quick rise in the Southern route and North Africa region, there have been stagnant levels of available information about captagon consumption levels and patterns. The lack of data and awareness about captagon consumption stems from a broader pattern in the Middle East and North Africa, where there is a large-scale lack of comprehensive information about illicit drug consumption and misuse, exacerbated by increased usage levels as conducive conditions for both supply and demand, such as mass displacement from conflict, gaps in governance and law enforcement, and insecurity, have further inhibited data collection and investment into comprehensive surveys. Furthermore, some of the available data on captagon consumption is often grouped in with other ATS or all illicit drugs, more broadly, making it difficult to assess captagon consumption rates.

This trend is well represented in the EU questionnaire responses, where submitting countries indicated little to no information available about captagon consumption within their countries Only three respondents that participated in the questionnaire indicated they had information about consumption levels in their countries: Iraq, Jordan and Palestine.[7] Open-source data compiled from the New Lines Institute's Comprehensive Captagon Seizure Database indicates that additional countries both inside and outside the region did seize captagon between 2020 and 2024, such as Bahrain, Egypt, Germany, Greece, Iraq, Italy, Jordan, Kuwait, Lebanon, Malaysia, Morocco, Nigeria, Oman, Palestine, Qatar, Romania, Saudi Arabia, Sudan, Syria, Türkiye, the United Arab Emirates, Yemen.[8] This paints a broader picture of regional players affected by the captagon trade, as well as non-existing or weak national reporting capacities among countries that hinder intelligence exchange and institutional collaboration.



EU questionnaire participant responses to whether there is captagon consumption information available

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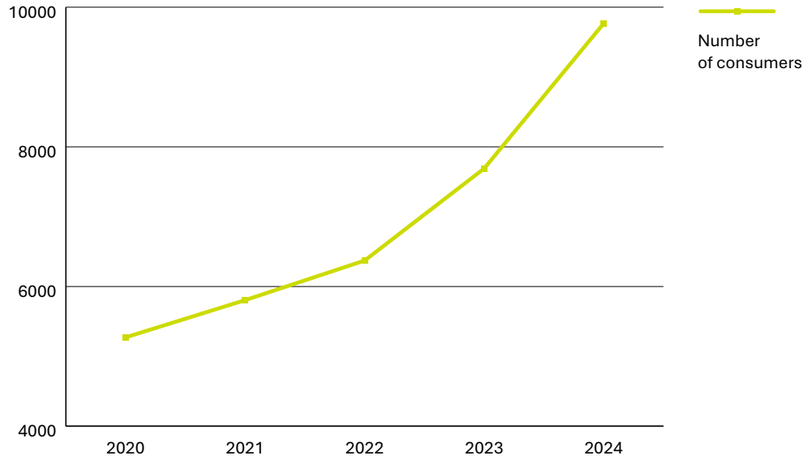
7. (Data compiled from the EU ACT Questionnaire results)
8 (Compiled from the New Lines Institute Comprehensive Captagon Database)

Iraqi authorities noted that use of captagon was most prevalent among a demographic of 35% of adults aged 18-30, while being less common among both younger and older age groups.[1] Jordan submitted data from compiled police records identifying 5 272 total consumers in 2020, 5 805 total consumers in 2021, 6 372 total consumers in 2022, 7 690 total consumers in 2023, and 9 768 total consumers in 2024.[2] Palestine indicated that while it had information about the presence of domestic consumption, it was of "limited prevalence" as it was a new substance introduced to local Palestinian illicit drug consumption markets.[3] Four countries in the study responded to a question assessing whether consumption levels had increased, decreased, or have stayed neutral between 2020 and 2024.[4] In the EU questionnaire, two countries, Jordan and Lebanon, reported that consumption increased over the five year period.[5] Jordan indicated that consumption levels jumped by 27% between 2023 and 2024, from 7 690 consumers to 9 768 captagon users.[6] Lebanon stated that its consumption rates initially increased from 2020 to 2021 by 2%, only to stabilize in 2022, 2023, and 2024 by approximately 6%, though it did not specify the exact number of captagon consumers.[7] Iraq reported consumption levels had decreased, though without exact numbers or percentages, citing an increase in their interdiction operations as a potential cause.[8] Palestine stated that over the four-year period, its consumption levels remained largely neutral.[9] Both the absence of consumption data and lack of standardization among questionnaire participants reflect a broader information gap regarding use, illustrating a key challenge in capturing the scale of fluctuating consumption that can be compared and analyzed with regional counterparts.

1. (Rahimi-Movaghar et al., 2012, pp.22-23)
2. (Rahimi-Movaghar et al., 2012, pp.22-23)
3. (Rahimi-Movaghar et al., 2012, pp.22-23)
4. (Rahimi-Movaghar et al., 2012, pp.22-23)
5. (Rahimi-Movaghar et al., 2012, pp.22-23)
6. (Rahimi-Movaghar et al., 2012, pp.22-23)
7. (Rahimi-Movaghar et al., 2012, pp.22-23)
8. (Rahimi-Movaghar et al., 2012, pp.22-23)
9. (Rahimi-Movaghar et al., 2012, pp.22-23)



Captagon consumption levels in Jordan between 2020 and 2024, reported through the EU questionnaire

This lack of data is echoed in other reports and literature, such as MENAHRA's 2024 report assessing drug use and its harms in the Middle East and North Africa, where the organisation cites a lack of systematic reporting and the grouping of Arab and non-Arab nations that can "distort" regional analysis and understanding.[10] MENAHRA also identified Bahrain, Iran, Iraq, Jordan, Kuwait, Oman, Palestine, Qatar and Yemen as countries where synthetic stimulants are the most commonly used, however, captagon usage was only specifically noted in Jordan, Palestine and Syria.[11] Some of the top countries that admitted patients for treatment for synthetic stimulants were Algeria, Egypt, Iraq, Jordan, Lebanon, Oman, Saudi Arabia, and the UAE.[12]

10. (Rahimi-Movaghar et al., 2012, pp.22-23)
11. (Rahimi-Movaghar et al., 2012, pp.22-23)
12. (Rahimi-Movaghar et al., 2012, pp.22-23)

TREATMENT AND OTHER RESPONSES TO CAPTAGON USE

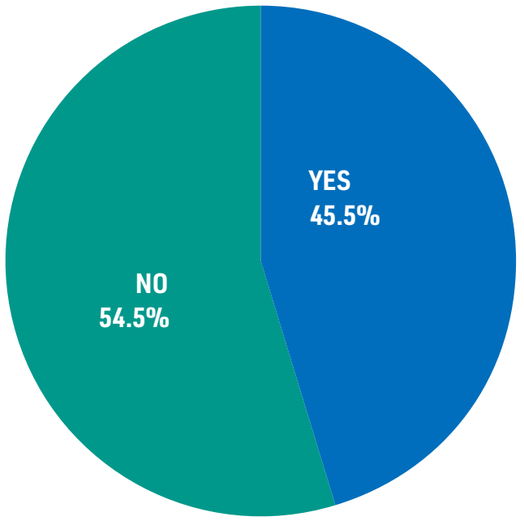
Rehabilitation pathways for captagon dependence have proved challenging for regional actors. Captagon, as with amphetamine more broadly, is highly addictive and can cause serious short-term and long-term health implications. As recreational users begin consuming captagon, they can experience a range of effects such as euphoria, rapid speech, rapid flight of ideas, marked motor restlessness, tachycardia, and hypertension. For long-term users, there have been serious effects reported such as high blood pressure, rapid heartbeat, seizures, vasoconstriction, and even paranoia, panic attacks, and psychosis. With long-term use often comes dependence on amphetamines that can include withdrawal characterized by lethargy, psychomotor agitation, nightmares, increased appetite, insomnia and hypersomnia, central nervous system (CNS) depression, anergia, and anhedonia. This, combined with increased consumption rates, has led to greater regional demand for rehabilitation and recovery services for captagon and ATS.

Captagon treatment does not often feature medical treatments like Naltrexone, used for opioid dependence, or bupropion, used for nicotine dependence. Rather, treatment for captagon dependency includes counselling and psychosocial treatment approaches, such as one-to-one and group therapy, cognitive behavioral therapy, and contingency management. These treatment pathways have had limited accessibility in the region, with many captagon-dependent individuals claiming to seek rehabilitation options abroad, such as in Switzerland, Malaysia or the United Kingdom.[1] For many in the region, travel restrictions and resources prevent international travel to receive treatment, leaving some to seek out private facilities licensed by governments in Gulf countries, such as Saudi Arabia.[2] However, these private facilities remain limited and constrained largely to urban locations, restricting access to treatment. Some countries in the region, such as Saudi Arabia, Syria, Iraq and Jordan, have launched national awareness campaigns to highlight the dangers of drug addiction and increase public awareness about illicit drugs' prevalence.[3] However, universal prevention campaigns have been shown to have limited effectiveness against experimentation and long-term use of illicit drugs. Furthermore, many of these campaigns have included a greater emphasis on governments' own counternarcotics efforts as opposed to treatment accessibility, addressing the causes of drug addiction, and community, family, and educational interventions. Furthermore, there have been few regional awareness campaigns that have specifically focused on stimulants like captagon and methamphetamine, despite their increasing popularity. This creates a greater need for evidence-based prevention approaches and training that governments can rely upon instead of awareness raising efforts that may not achieve substantial demand reduction.

1. (Callaghan, 2023; Solace Asia; Hunt)
2. (Pourahmadi, 2022)
3. (Basalom, B., 2021).

CAPTAGON PRICES IN TRANSIT AND DESTINATION MARKETS

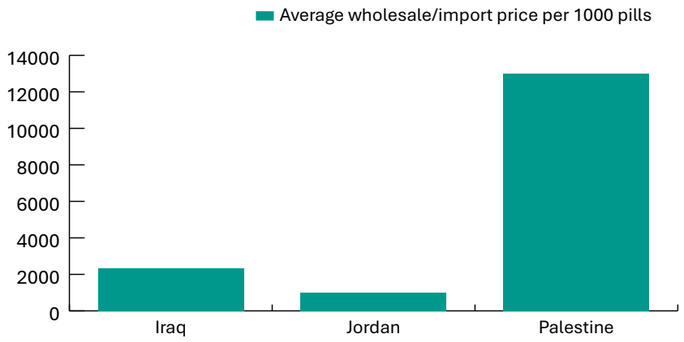
Captagon's cheap prices have made the substance highly accessible and competitive compared to other illicit drugs. The range of captagon pill prices has varied widely across the region between just a few cents to up to $25, with prices cheapest close to production hubs and most expensive in Gulf destination markets.[4] Open-source analysis of these individual pill prices, combined with seizure data, has enabled some limited assessments of the captagon trade's total value. In 2022, the Center for Operational Analysis and Research (COAR) conducted a study that determined the value of seized captagon to be $3.46 billion in 2020.[5] The following year, a New Lines Institute report assessed that the same trade value had risen to $5.7 billion in 2021.[6] And in late 2022, Agence France-Press (AFP) assessed that the total value of the captagon trade–accounting for both seized and unseized consignments,was roughly $10 billion annually, a value that will likely become affected by major disruptions to industrial-scale captagon manufacturing facilities and trafficking syndicates in traditional production hubs like Syria.[7]



Captagon pricing available in surveyed countries

4. (Alexander, 2025; Kravitz, et al., 2016; Foltyn, 2022)
5. (COAR, 2021)
6. (Rose, Solderholm, 2022)
7. (Anagha, Eymard, 2025)

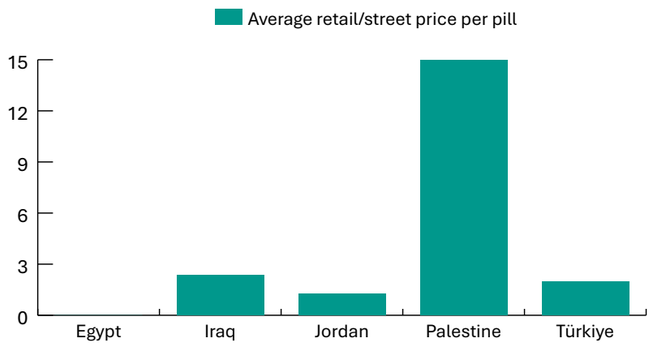
Still, there is a major gap in data about captagon pill pricing, particularly following the sudden crackdown on laboratories and production networks in Syria, the trade's largest manufacturing hub. This is reflected by 54.5% of respondents that indicated they do not have any information about captagon's wholesale or retail pricing within their country. Furthermore, open-source reporting on captagon pill pricing does not disclose sample sizes, creating a significant information gap. The results of the EU questionnaire help narrow this information gap on pricing, particularly in countries like Iraq and Palestine that have been underreported in the open source. However, the results are limited and cannot present a comprehensive picture of captagon pricing across the region, with just three out of eleven participating countries, Iraq, Jordan and Palestine, having submitted pricing data via the questionnaire about both in-bulk wholesale/import prices (€ per 1 000 pills) and retail/street prices per individual captagon pill.[1] Türkiye contributed data about the average price per pill.[2] Egypt submitted the minimum retail/street price for a captagon pill.[3] The results confirmed that captagon overall is at its cheapest closer to traditional production hubs, such as Syria and Lebanon, with the lowest prices in neighboring Jordan and Türkiye, with the exception of Egypt which reported a minimum street price of 0.88 € per pill–comparable to Iraqi street prices.[4] Notably, prices were on average 47.2% higher in Iraq at 2.35 € per pill – despite its role as a burgeoning production site for captagon – than in Jordan where the average price per pill is 1.42 €. Iraq's average pill price was also higher than in Türkiye's by 15%, with the average price per pill at 2 € in the Turkish illicit market.[5]



EU questionnaire participant responses identifying ranges of captagon wholesale/import prices per country

1. (Data compiled from the EU ACT Questionnaire results)
2. (Data compiled from the EU ACT Questionnaire results)
3. (Data compiled from the EU ACT Questionnaire results)
4. (Data compiled from the EU ACT Questionnaire results)
5. (Data compiled from the EU ACT Questionnaire results)

Of note were the significantly higher wholesale and street prices of captagon in Palestine. In Palestine, the average wholesale price of captagon in-bulk was 7 500 € per 1 000 captagon pills, 88.4% higher than Jordan's average and 64.1% higher than Iraq's average, while its street price was significantly higher than all contributing countries with the average being 15 € per pill.[6] This high price is likely due to increased difficulty with smuggling routes due to ongoing conflict throughout the Palestinian territories, incentivizing traffickers to increase costs, as well as the drug's reduced prevalence as compared with other drug markets in the region



EU questionnaire participant responses identifying ranges of captagon retail/street prices per country (of those surveyed)

6. (Data compiled from the EU ACT Questionnaire results)

THE METHAMPHETAMINE TRADE

Methamphetamine has steadily risen along the Southern Route and North Africa region in the last five years, exacerbating concerns for public health and security. A more addictive, harmful illicit drug than captagon, methamphetamine is a synthetic stimulant that can share the same precursor substance, and a similarly cheap production process, and demand market as the captagon trade. Particularly popular is the highly pure, smokeable crystal form of methamphetamine – commonly referred to as either "shabo," "Shisheh" (meaning "shattered glass" in Farsi), "ice," or "yaba" (often in relation to methamphetamine-caffeine tablets in Thailand). Crystal methamphetamine is known for its glass-shard appearance with greater potency and concentration of methamphetamine than other forms, providing users with stronger, long-lasting effects. While there remain information gaps hindering comprehensive pictures of demand levels and production capacity, interdiction data and limited consumption data compiled through both EU questionnaire results and open-source information indicates that methamphetamine availability has grown in the Southern Route and North Africa between 2020 and 2025, affecting more countries each year.

Geopolitical developments have greatly impacted where methamphetamine is produced and the routes through which it is trafficked into the Middle East and North Africa. Methamphetamine has captured the illicit synthetics market of the Middle East and North Africa, introducing challenges to rule of law, public health and public security. This report identifies three recent geopolitical developments with implications for the methamphetamine trade in the Southern route and North Africa region:

1. The Taliban's April 2022 drug ban in Afghanistan
2. The collapse of the Assad regime in Syria, in December 2024
3. The effects of the 2024 and 2025 Israeli military campaigns across the region and escalation with Iran

The 2021 U.S. withdrawal from Afghanistan and introduction of a Taliban-controlled government was followed in 2022 by a ban on all poppy cultivation and all types of narcotics in the country. The ban's announcement and enforcement led to a severe cut in poppy cultivation and ephedra harvesting in Afghanistan, a country that has historically served as the world's top producer of heroin, providing nearly 90% of global supply. The Taliban's ban has been executed inconsistently, however, the effects have been a large reduction in methamphetamine and heroin production.[1] The ban has not yet led to a large-scale heroin deficit and synthetic opioid surge in traditional consumption markets, due to traffickers' stockpiling heroin supply, however, it has driven up costs of methamphetamine chemical inputs, has pushed and fragmented processing laboratories closer to ephedra cultivation hubs in Afghanistan's southwestern mountainous and borderland regions, as well as driven methamphetamine production out of Afghanistan into neighboring countries.[2] Notably, as identified in a recent assessment by the EUDA, opiates and methamphetamine continue to be interdicted in large amounts and cross-border trafficking remains high, with traffic along borderland routes increasing dramatically.[3] The Taliban's poppy ban has resulted in a surge in synthetic methamphetamine manufacture, both inside and outside Afghanistan, with production recently noted in Pakistan and Iran. Illicit actors in these areas have been able to divert chemicals from the booming pharmaceutical industries in India and Pakistan for the production of methamphetamine and other synthetic substances. Furthermore, liquid methamphetamine has been smuggled outside of Afghanistan to be processed into consumable crystal or powder forms elsewhere in the region, such as Türkiye. As a result, neighboring countries such as Türkiye and Iraq, as well as key ports along the Gulf and Red Sea, have been targeted as transit sites for methamphetamine trafficking. The Southern route and North Africa region have been heavily impacted, serving as transit areas, as well as emerging production and consumption hubs for the drug, as the demand for synthetic stimulants surge in the region.

1. (EUDA, 2025, p.6)
2. (EUDA, 2025, p.6)
3. (EUDA, 2025, p.7)

Secondly, the fall of the Assad regime and collapse of the captagon trade's largest-scale laboratories in late 2024, have also likely imposed implications for the methamphetamine trade in the Middle East and North Africa. The sudden disruption to regime-sponsored industrial-scale manufacturing sites created a large deficit in captagon supply on the market, perhaps creating an opening for methamphetamine to be introduced as a more competitive, lucrative illicit substance. Methamphetamine and captagon are not identical drugs, as methamphetamine's addictiveness and potency is much higher than captagon, mainly due to the route of administration – crystal methamphetamine can be smoked, whereas amphetamine cannot. However, methamphetamine and amphetamine-based captagon are clearly similar and can even share some of the same precursors and synthesis processes. For example, both substances can be made from BMK (also known as P-2-P), which makes methamphetamine a financially enticing and chemically feasible alternative to illicit actors seeking to fill the void of captagon supply in illicit markets. With a potential shortage of captagon, given large-scale production disruption in traditional origin hubs such as Syria and Lebanon, it is possible that methamphetamine may be offered as a key alternative drug of choice in the region.

Thirdly, the advent of October 7, 2023, and the conflicts that followed in Gaza, Lebanon, Syria and Yemen, introduced instability across the region as well as a need for alternative revenue generation. Methamphetamine production and trafficking has proved to be a cheap, lucrative form of income for existing criminal actors, as well as civilian and militarized actors seeking out income sources amidst regional insecurity. The surge in region-wide escalation and insecurity, has coincided with a notable increase in consignment and laboratory seizures in Yemen, Türkiye, Oman and Iraq, as evidenced through open-source analysis.[4] Israel's multi-front military campaign against Iran-aligned militant networks has incapacitated much of the influence and operational capacity of actors like Hamas, Hezbollah and Iran-sponsored militia networks across Palestine, Lebanon, Yemen and Syria, with the threat of consistent strikes driving many underground with a new need for alternative revenue generation.[5] This is particularly the case among Iran-backed proxy networks that have been weakened by continual Israeli strikes and escalation in Lebanon, Iraq, and Yemen, as well as actors in Iran – one of methamphetamine's largest production hubs. The surge of small-scale methamphetamine production and large-scale distribution across the region has coincided with the advent of conflict across the Middle East and North Africa and should be closely monitored.

4. (Compiled from the New Lines Institute Comprehensive Methamphetamine Database; Felbab-Brown, 2024)
5. (Jacopo, et al., 2024)

METHAMPHETAMINE PRODUCTION TRENDS

Countries reporting data indicated that there were 55 laboratories identified within their jurisdictions, largely small laboratories for crystal methamphetamine production, with just one respondent reporting domestic production between 2020 and 2024. Four countries in the questionnaire submitted data about origin countries for methamphetamine, with 37.5% identifying Afghanistan and Iran as production hubs, followed by 12.5% for Iraq and Pakistan.[1] However, the data compiled from the questionnaire only tells a part of the greater story of methamphetamine's prevalence in the region, with additional, potential production hubs beyond those identified by participating countries.

Türkiye has, notably, dismantled an increasing amount of illicit laboratories between 2020 and 2024, indicating that illicit actors are seeking out a foothold inside the country to further develop methamphetamine manufacturing. For example, in 2022, Turkish law enforcement seized a manufacturing site that contained 20 kg of crystal methamphetamine, 100 kg of liquid methamphetamine, 9 kg of powder methamphetamine, and 40 kg of chemical inputs used in the production process.[2] Türkiye interdicted several sites where methamphetamine would be extracted from licit goods, along with conversion factories for liquid methamphetamine, often trafficked into the country from Iran, in crystal form.

In August 2022, the Jordanian Public Security Directorate announced that they had thwarted an "attempt" to produce crystal methamphetamine in Amman, arresting three individuals.[3] While it is not certain that the laboratory was operational, it shows that Jordanian law enforcement agencies have encountered attempts to set up production sites inside of their kingdom.

Open-source information analysis has also identified Bahrain as having conducted two raids on illicit laboratories within its borders, indicating that it is a potential hub for small-scale production, as producers from larger manufacturing hubs like Iran seek out smaller operations close to destination markets in the Gulf. Bahrain's security forces conducted a laboratory raid in a residence where crystal methamphetamine was produced in August 2023, arresting two individuals of "Asian nationality" and seizing 20 kg of the drug.[4] In September of that same year, Bahrain's Customs Authority thwarted an attempt from an illicit actor in an "Asian country" that tried to send methamphetamine manufacturing equipment through a postal package along with 1.5 kg of methamphetamine.[5]

Kuwait has identified four labs within its territory between 2020 and 2024, compiled through open-source reports of seizures and arrests. In September 2020, authorities seized a methamphetamine production site in an undisclosed location that was operated by a Kuwaiti citizen and an "Arab and Asian resident."[6] In September 2022, forces once again conducted a laboratory raid in an undisclosed location, seizing 3 kg of crystal methamphetamine and arresting one individual.[7] One month later, in October 2022, authorities conducted another laboratory raid on a laboratory managed by two individuals, where 4 kg of methamphetamine were seized.[8] Kuwaiti officials conducted another lab seizure in March 2023, discovering a manufacturing syndicate run by six brothers that produced both methamphetamine in powder and tablet form, in addition to trafficking captagon, heroin and hashish.[9]

Yemen has also hosted methamphetamine manufacturing. In March 2020, Yemeni forces conducted a raid in Al Mukalla, where a criminal group was manufacturing methamphetamine in a hotel.[10] Just two months later in June 2022, Yemeni forces disrupted an illicit methamphetamine production laboratory in the Hadramout Governate's Al-Qatn District.[11]

While Iraq did not officially report methamphetamine production inside its country and stated that it was a transit country for methamphetamine flows, a recent string of laboratory raids in the country indicate that Iraq could be a potential production hub for methamphetamine. Open-source reports identify a series of illicit laboratories in both north and south Iraq – Kirkuk and Tuz Khurmatu, and Al Muthanna – similar to flagged captagon production facilities between 2023 and 2024. Iraq's first sign of methamphetamine production in this four-year time period was in January 2022, when its Internal Security Forces in Iraq's northern province of Kirkuk conducted a seizure of 95 pills of "Yoonavit" which are used for the manufacture of crystal methamphetamine.[12] That same month, authorities in Baghdad conducted a raid on a residence in the upscale neighborhood of Karkh in al-Qadisiyah, that was likely a major captagon and crystal methamphetamine laboratory. An impressive 15 tons of narcotics and chemical inputs used for the production process were seized.[13]

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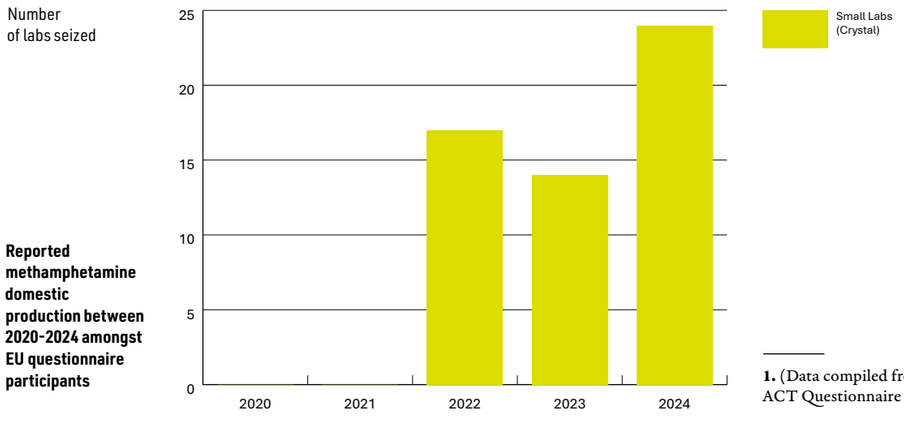
1. (Data compiled from the EU ACT Questionnaire results)
2. (Daily Sabah, 2022)
3. (Jordanian Anti-Narcotics Department, 2022)
4. (Al Watan News, 2023a)
5. (Al Watan News, 2023b)
6. (Kuwaiti Ministry of the Interior, 2020)
7. (Al Anbaa, 2022)
8. (New Kuwait, 2022)
9. (Al Anbaa, 2023)
10. (Shamsan Net, 2022)
11. (Al-Ayyam News, 2022)
12. (Iraqi Monitor, 2023)
13. (Alaraby, 2023)

METHAMPHETAMINE PRODUCTION MATERIALS AND MODUS OPERANDI

The production process for methamphetamine has become more compartmentalised over time, with criminal actors breaking down different stages of production across different geographical areas, as a way to both avoid the risk of interdiction and position operations closer to destination markets. As a result, there has been an increase in extraction and synthesis laboratories identified in transit areas like Türkiye, along with seizures of liquid methamphetamine closer to destination markets, that reinforce this multi-level production process. The two primary methods of production are either ephedrine/pseudoephedrine reduction through the diversion or extraction of tablets containing ephedrine or bulk ephedrine/pseudoephedrine, followed by chemical reduction – and the BMK (also known as P2P, phenyl-2-propanone) process that converts ketone to methamphetamine. Facilities that refine liquid methamphetamine into a crystal form, and operations that handle bulk precursors have been identified in Türkiye, suggesting the country's role as both a transit and conversion point for Afghan methamphetamine oil and Iran-sourced precursors.[1]

In some transit and destination markets, some countries have reported seizures of finished crystal or tablet products and occasionally small clandestine conversion labs. By contrast, reporting on Iraq highlights a substantial flow of crystal meth, often linked to production hubs further east in Iran and Afghanistan. The two production pathways have allowed producers along the Southern Route and North Africa to be adaptive when regulations and interdiction campaigns are introduced. For example, when controls tighten on ephedrine or pseudoephedrine, local criminal syndicates can then shift to precursor substitution through the use of BMK or alternative precursors. And when BMK inputs are restricted, these same actors can rely upon tablet or bulk ephedrine or pseudoephedrine-extraction from precursor-containing products available in licit markets. Scarce information exists about the purity levels of seized methamphetamine tablets along the Southern Route and North Africa, pointing to a key information gap and lack of firm knowledge about the chemical components of methamphetamine.

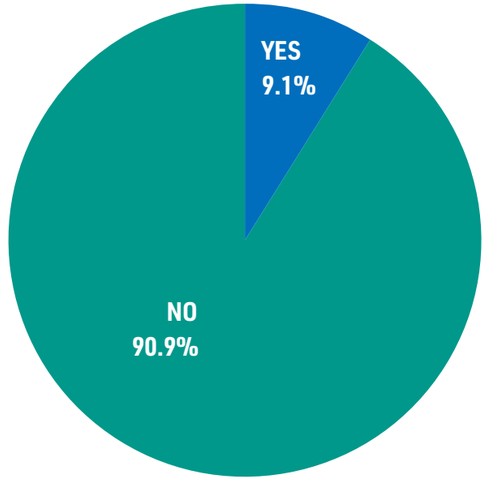


Reported methamphetamine domestic production between 2020-2024 amongst EU questionnaire participants

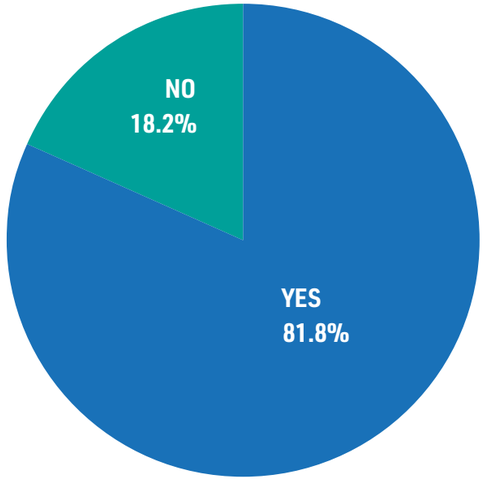
1. (Data compiled from the EU ACT Questionnaire results)

METHAMPHETAMINE INTERDICTION PATTERNS

Analysis of both the EU questionnaire and open-source information shows that seizures of methamphetamine, particularly crystal methamphetamine, are more common amongst countries along the Southern route, particularly when accounting for Pakistan, Türkiye, and Iraq. This can be attributed to the fact that there are more production hubs, established trafficking routes, and steady demand levels for methamphetamine, particularly in the wake of a potential captagon shortage linked to disruption in Syria. Furthermore, seizure analysis reveals a return to the trafficking of liquid methamphetamine, particularly in Türkiye, with an increase in liquid methamphetamine seizures in 2024 and 2025.[2] This indicates that criminal syndicates have adopted additional stages to avoid interdiction, establishing extraction and synthesis sites further away from production hubs and closer to destination markets. In order to comprehensively assess the methamphetamine trade in the Southern Route and North Africa, it is essential to account for both results submitted in the EU questionnaire and open-source information. This is primarily due to the fact that key countries affected by the methamphetamine trade, such as origin sites like Iran and transit and destination hubs in the Arab Gulf, are absent from the questionnaire results.



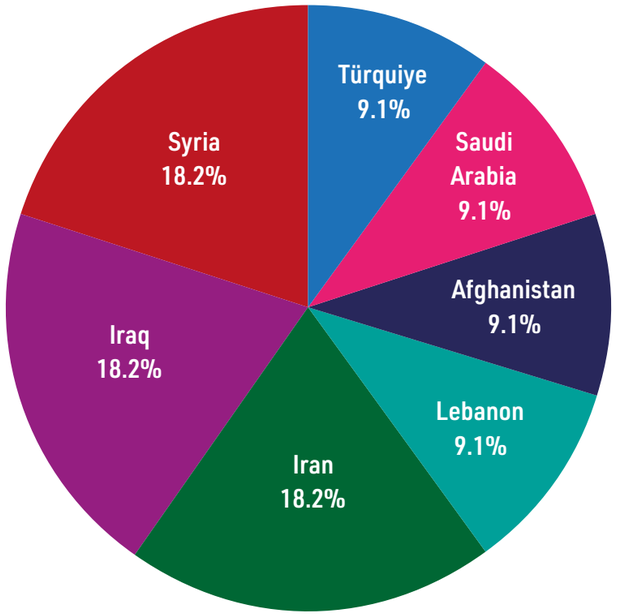
Reported methamphetamine domestic production between 2020-2024 amongst EU questionnaire participants



Reported methamphetamine seizures between 2020-2024 amongst EU questionnaire participants

2. (Data compiled from the EU ACT Questionnaire results and the New Lines Methamphetamine Comprehensive Database)

The EU questionnaire found that methamphetamine seizures were much more common among submitting countries than compared with captagon, with 81.8% of countries confirming they had seized methamphetamine – whether in powder, tablet, or crystal form – between 2020 and 2024.[1] Only Morocco and Tunisia did not indicate that they had seized methamphetamine in this period.[2] Open-source analysis of available seizure data confirms this trend. Within the same time period of the EU questionnaire between 2020 and 2024, Bahrain, Egypt, Iraq, Jordan, Kuwait, Lebanon, Oman, Qatar, Saudi Arabia, Syria, Türkiye, the United Arab Emirates and Yemen, conducted raids on illicit production laboratories, seizures and arrests related to methamphetamine.[3] Even countries well outside the studied region, such as Australia, have encountered methamphetamine that either originated from or was transited through the Southern route and North Africa region.[4]



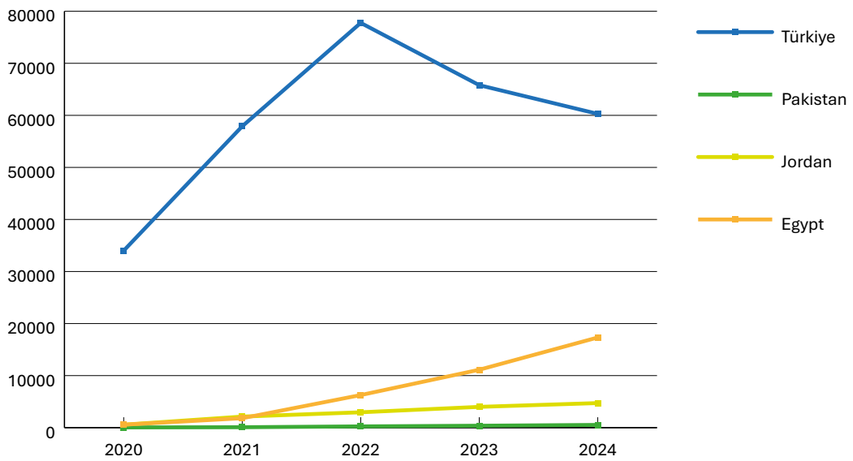
Reported methamphetamine transit countries amongst EU questionnaire participants

1. (Data compiled from the EU ACT Questionnaire results)
2. (Data compiled from the EU ACT Questionnaire results)
3. (Data compiled from the EU ACT Questionnaire results)
4. (Euronews, 2022)

SEIZED CRYSTAL METHAMPHETAMINE

Notably, the number of crystal methamphetamine seizures have steadily increased over time among countries along the Southern route and North Africa region. Among countries that submitted data about methamphetamine seizure statistics, the number of seizures in Türkiye was highest and steadily increased from 2020 to 2022, then slightly declined between 2022 and 2024.[5] Notably, 2022 was the same year that captagon volume surged in the region. Questionnaire results showed that methamphetamine seizures have been steadily rising in Jordan, a country that has intercepted crystal methamphetamine along its northern border. Most of these consignments have been routed through Syria and Iraq, likely stemming from Türkiye, Iran, Pakistan, and Afghanistan, though few seizures have officially confirmed the origin of consignments.[6]

Questionnaire results for the 2020-2024 period indicate that the volume of seized crystal methamphetamine, as measured in kilograms, has broadly increased among production and transit countries like Iraq and Türkiye, while fluctuating in Jordan. Questionnaire responses show that Iraq experienced a steady rise in seized volume of crystal methamphetamine between 2020 and 2024 in Iraq.

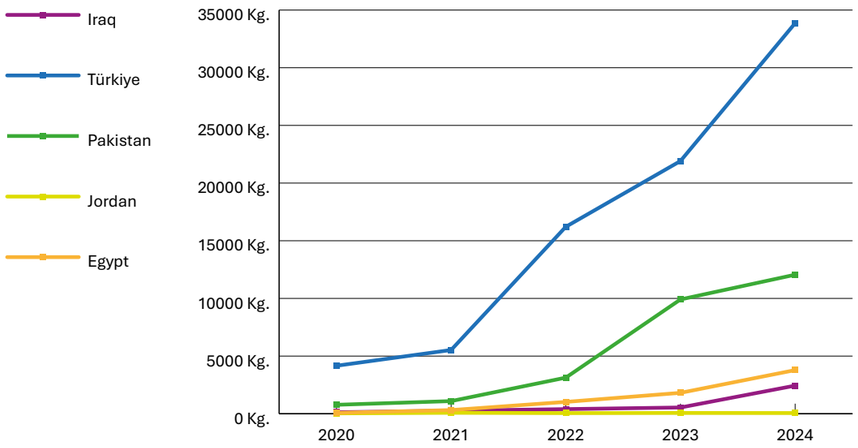


Number of crystal methamphetamine seizures amongst EU questionnaire participants 2020-2024

5. (Data compiled from the EU ACT Questionnaire results)
6. (Data compiled from the EU ACT Questionnaire results)

Notably, the questionnaire indicates that Türkiye has experienced a steady rise in the size of seized volume of crystal methamphetamine along with a decrease in seizure rates in the last two years of the monitoring period, between 2022 and 2024.[1] This trend confirms that smugglers have increased the size and weight of crystal methamphetamine consignments trafficked through Türkiye – a sign that Türkiye is becoming a more prominent transit and potential consumption market.

Questionnaire results show that the volume of seized crystal methamphetamine in Jordan has greatly fluctuated. Seized methamphetamine volume initially spiked between 2020 and 2021 by 171%, only to fall in 2022 – despite a spike in seizure rates that year in Türkiye – and then increased in 2023.[2] Between 2023 and 2024, the volume of seized crystal methamphetamine in Jordan fell slightly by 11.8%. Pakistan increased its seized volume of methamphetamine between 2022 and 2023 by 216%, but the levels largely stabilized between 2023 and 2024.[3] However, overall, the total volume of seized methamphetamine in the four-year period has increased, with 2024 seizure volumes 96.2% larger than values seized in 2020. Iraq also experienced a boom in the volume of methamphetamine seized between 2023 and 2024, with a 1 777% increase from 2020 seized volume to 2024. Similarly to Türkiye, Iraq experienced a large spike in seized methamphetamine from 2021 to 2022, as well as between 2023 and 2024.[4] However, Iraq's seized volume of methamphetamine is much lower than its neighbors, Jordan and Türkiye, which seized 2 448% and 1 289% more than Iraq had respectively in 2024.[5]



Volume of crystal methamphetamine seizures amongst EU questionnaire participants 2020-2024

1. (Data compiled from the EU ACT Questionnaire results)
2. (Data compiled from the EU ACT Questionnaire results)
3. (Data compiled from the EU ACT Questionnaire results)
4. (Data compiled from the EU ACT Questionnaire results)
5. (Data compiled from the EU ACT Questionnaire results)

ROUTES, METHODS AND TRENDS IN METHAMPHETAMINE TRAFFICKING

Methods and Materials

Methamphetamine traffickers have employed creative smuggling materials used in trafficking operations, such as hiding methamphetamine in tailor-made fodder bags, fire extinguishers and industrial equipment stuffed into bags carefully hidden inside of fish and livestock, barley, cotton, and the use of technology like commercial aerial drones that can support methamphetamine's lighter payload.[6] [7] [8] These evolving smuggling methods and strategies to transport methamphetamine through the Southern route and North Africa region have introduced new challenges to local law enforcement agencies, particularly those that lack the proper detection technologies and training to identify illicit consignments containing crystal, powder, or tableted methamphetamine.

Much like the captagon trade, and in fact most illicit commodities, traffickers use licit goods to smuggle methamphetamine. Illicit actors have used tea bags,[9] industrial equipment like metal cylinders, solar panels, and iron pipes,[10] hidden inside livestock and seafood,[11] in food containers,[12] cleaning products, articles of clothing,[13] and sometimes ingested for internal concealment (in corpore). Some smuggling operations have shown increasing sophistication of materials used, with some equipment, such as towels impregnated with crystal methamphetamine or inside man-made crevices in marble slabs, tailor-made for trafficking operations.[14]

During overland smuggling incidents across border checkpoints, methamphetamine is often hidden inside the parts of a truck or car.[15] Some criminal cross-border actors operating along Syrian, Jordanian, Iraqi, and Turkish border regions, sometimes bury consignments of methamphetamine in the ground for local illicit syndicates to dig them back up for additional trafficking operations or distribution to local markets.[16] This is a trend that has also been flagged in captagon trafficking operations, with particular prevalence along the Syrian-Jordanian border region.

6. (Al Madina, 2020)
7. (Data compiled from the New Lines Comprehensive Methamphetamine Seizure Database)
8. (Directorate for Combating Narcotic Crimes Türkiye, TRT Haber, 2023)
9. (Qatar Customs, 2020)
10. (Directorate for Combating Narcotic Crimes Türkiye, 2020; Sky News Arabia, 2022; Qatari Ministry of the Interior, 2020)
11. (Al-Madina News, 2020; Al Watan News, 2021b; Emarat Al Youm, 2020)
12. (Al Watan News, 2021a)
13. (Qatar Customs, 2021)
14. (Euro News, 2022; Qatar Customs, 2022)
15. (Al Ameen Press, 2020; Al Ghad, 2020)
16. (Directorate for Combating Narcotic Crimes Türkiye, 2021; Iraqi Ministry of the Interior, 2022)

Transit Routes and Transshipment points

The Southern route and North Africa region's methamphetamine trade has gradually expanded its footprint well outside of the region, reflecting coordination between regional criminal actors and global syndicates. Methamphetamine has been detected along traditional trafficking routes stretching from South Asia into the Middle East and into Europe, sharing the same routes with other illicit drugs like opiates. Four seizures of crystal methamphetamine in the region, conducted between 2017 and 2019, identified Thailand as a transit country for Middle East-originated methamphetamine, with drug consignments seized in Bahrain's International airport.[1] It is also possible that Middle Eastern countries could be serving as transshipment sites for methamphetamine emanating from key production sites such as the Golden Triangle.[2] There have also been individual incidents of methamphetamine consignments sent to Middle Eastern countries like Bahrain and Kuwait, originating from or transiting through the United Kingdom,[3] the United States,[4] and Nigeria.[5] This observed trend in seizure data indicates that Middle East-based illicit actors engaging with the methamphetamine trade have adopted increasingly sophisticated smuggling tactics and have sought out new, extra-regional collaborative partnerships, posing a challenge to law enforcement detection and interdiction capabilities.

Questionnaire results from the EU assessment capture multiple regional and extra-regional countries as transit sites for methamphetamine trafficking. According to the nine countries that submitted responses, Iran, Iraq and Syria were identified by 18.2% of respondents as some of the top transit sites, followed by Afghanistan, Türkiye, Lebanon, Saudi Arabia and Kuwait by 9.1%. Yet there is a significant gap in available data from seizures about determined transit and origin sites, due to sensitivities about a particular consignment of methamphetamine or an agency's lack of investigative capacity. As a result, reporting agencies rarely cite a confirmed or suspected transit or origin site. Only 10% of publicly reported seizures contain information about a confirmed or suspected transit site, with only 0.56% citing a confirmed or suspected origin site.[6]

1. (Al Watan News, 2017a, 2017b, 2019a, 2019b, 2021a; Data compiled from the New Lines Institute Comprehensive Methamphetamine Database)
2. (Lipschitz, 2025)
3. (GDN Online, 2025)
4. (Kuwait Customs, 2024)
5. (Al Watan News, 2020)
6. (Data compiled from the New Lines Institute Comprehensive Methamphetamine Database)

Iran has been a prominent origin and transit site for both heroin and methamphetamine flows, given its geographic proximity between historical production hubs in Afghanistan and host to trafficking routes into Türkiye, Iraq, and maritime trade access to the Persian Gulf. Iran was cited twice in the EU questionnaire as an origin country for methamphetamine, and was identified in 23 crystal, liquid, and powder methamphetamine seizures as a confirmed or suspected transit site – most frequently in 2022 – and twice as an origin site in open-source reporting of seizures across the region between 2017 and 2025.[7] The countries that frequently cited Iran in the as a transit site for methamphetamine consignments in the New Lines Institute's Comprehensive Methamphetamine Seizure Database were Bahrain, Iraq, Kuwait, Türkiye and Yemen, seizing methamphetamine through air, maritime and land customs checkpoints.

It is worth noting that Iraq has become both a transit and destination country for methamphetamine flows, while serving as a transit, destination and even origin country for the captagon trade. The country's proximity to transit routes and origin hubs has complicated its law enforcement interdiction efforts, creating a long-term challenge for the country.[8] A 2024 UNODC report cited a six-fold increase in methamphetamine seizures from 2019 to 2023, in parallel with an increase in methamphetamine production site seizures.[9] Open-source reporting of seizures and raids on illicit laboratories in Iraq show a total of 139 incidents between 2018 and 2025 – a number that represents 15.5% of all the methamphetamine seizures, arrests, and laboratory raids conducted in or originated from the Middle East and North Africa over a ten-year period between 2015 and 2025, as recorded in the New Lines Institute Comprehensive Methamphetamine Seizure Database. And among seizures conducted in the region – the majority in Bahrain, Kuwait, and Türkiye – Iraq was cited as a known transit point for six seizures between 2017 and 2025.[10]

The UAE is one of the most-cited transit countries for methamphetamine in publicly-available seizure reporting.[11] The country was cited 13 times as a transit country in seizures conducted largely in Saudi Arabia, in addition to three large consignments seized in Sydney, Australia.[12] Methamphetamine consignments dispatched through the UAE to destination markets in Saudi Arabia often transit through the Al Batha border crossing point.[13] The consignments of methamphetamine have often been hidden in vehicle parts, like inside fire extinguishers in commercial truck's,[14] inside a car's ceiling,[15] or inside of a truck's tires.[16]

7. (Data compiled from the New Lines Institute Comprehensive Methamphetamine Database)
8. (UNODC, 2024b)
9. (UNODC, 2024a)
10. (Data compiled from the New Lines Institute Comprehensive Methamphetamine Database)
11. (Data compiled from the New Lines Institute Comprehensive Methamphetamine Database)
12. (Data compiled from the New Lines Institute Comprehensive Methamphetamine Database)
13. (Data compiled from the New Lines Institute Comprehensive Methamphetamine Database)
14. (Zakat, Tax and Customs Authority Saudi Arabia, 2023a)
15. (Zakat, Tax and Customs Authority Saudi Arabia, 2023c)
16. (Zakat, Tax and Customs Authority Saudi Arabia, 2023b)

Syria has served as a transit site for methamphetamine being trafficked into Lebanon, Türkiye, Iraq and Jordan, although there is no sign of domestic production, despite the fact that the country is a major manufacturing hub for captagon. In open-source seizure data compiled by the New Lines Institute's Middle East Methamphetamine Project, Syria was formally confirmed as a transit route in six incidents between 2020 and 2024 along the Syrian-Jordanian border, though there are 19 more seizures that were likely transited through Syria given their location along the Jordanian border region.[1] Notably, smuggling groups situated in Syria's southern Dara'a and Suwayda provinces – some that were affiliated with armed state and non-state militant groups like the Syrian regime's Fourth Armored Division and Hezbollah – used a variety of smuggling tactics to dispatch methamphetamine across the border into Jordan. Smugglers would often bribe the drivers of commercial trucks, taxis or private vehicles to hide consignments of methamphetamine under the hood, in the tires, or under the frame of their vehicle before transiting through the Jaber-Nassib border crossing from Syria. There were frequent reports that some militant groups even attached illicit drug consignments to private and commercial vehicles at checkpoints without the drivers' knowledge.[2] Syria-based criminal networks also utilized drones to fly consignments of methamphetamine over the border into Jordan – attempts that were frequently shot down by Jordanian Armed Forces (JAF) in the country's northern military district.[3]

For smaller transit sites, Oman, Saudi Arabia, and Yemen have provided traffickers with key maritime, air and land routes for trafficking methamphetamine. Oman has notably been used as a corridor for smuggling methamphetamine into Bahrain, Saudi Arabia and Yemen, with eight seizures between 2022 and 2025 citing Oman as a transit site.[4] These seizures were primarily conducted at the overland Rub' Al-Khali Port, along the Yemen-Saudi Arabia border, and in Yemen's Al Ghaydah city that sits on the coast of the Red Sea.[5] Saudi Arabia has also occasionally been identified as a transit site, with open-source reporting identifying at least five seizures citing the kingdom as a corridor for methamphetamine – primarily crystal methamphetamine – seized in air and border customs checkpoints in Kuwait, Bahrain and Yemen.[6] Yemen, too, has been cited as a transit site for at least three seizures between 2020 and 2024 in Egypt and Saudi Arabia.[7]

1. (Data compiled from the New Lines Institute Comprehensive Methamphetamine Database)
2. (Haid, 2024)
3. (Al Jazeera, 2023)
4. (Data compiled from the New Lines Institute Comprehensive Methamphetamine Database)
5. (Al Mashhad, 2023, 2024; Data compiled from the New Lines Institute Comprehensive Methamphetamine Database; Yemen Future News, 2023; Zakat, Tax and Customs Authority Saudi Arabia, 2022, 2024, 2025a, 2025b)
6. (Al Majhar, 2024; Al Watan News, 2023a, 2023b; Data compiled from the New Lines Institute Comprehensive Methamphetamine Database; Kuwait News Agency, 2025; Sarmad News, 2021)
7. (Al-Rashad Press, 2024; Data compiled from the New Lines Institute Comprehensive Methamphetamine Database; Youm Saba, 2020; Zakat, Tax and Customs Authority Saudi Arabia, 2024b)

Trends in Liquid Methamphetamine Seizures

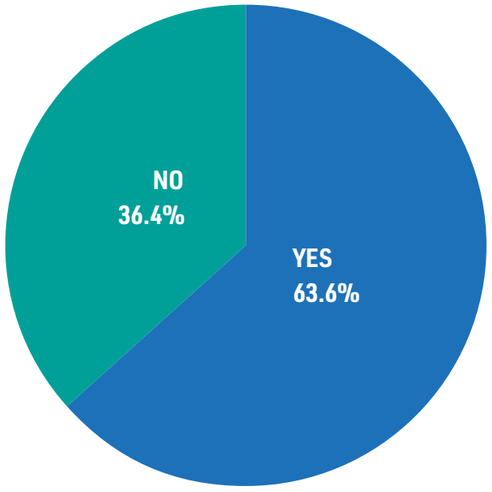
Between 2009 and 2020, methamphetamine intercepted in Türkiye was almost exclusively in crystal form, reflecting the dominance of finished-product trafficking from Iran and Afghanistan toward European markets. However, a notable phenomenon emerged in 2020: the smuggling of liquid methamphetamine into Türkiye, where it is subsequently crystallized in illicit laboratories.[8] This trend represents both a functional and structural transformation in the regional stimulant economy – one that situates Türkiye not merely as a transit country, but as a secondary processing and production node. It also reflects the traffickers' objective of fragmenting the production and trafficking process in order to minimise the risk of interdiction. The conversion process typically occurs in remote rural areas, often under the supervision of chemists with expertise in synthesis and crystallization. Such facilities are inherently hazardous; authorities record between fifteen and twenty explosions or fires annually linked to methamphetamine conversion, underlining the volatile and unregulated nature of the trade. Law enforcement actions illustrate the scale of operations, including record individual seizures of 3 tonnes of methamphetamine in 2022 and 4.5 tonnes in 2024, both at such conversion sites.[9]

Since 2023, traffickers have diversified their concealment and transportation techniques, incorporating more sophisticated smuggling methods to evade detection. Law enforcement agencies have identified multiple consignments in which methamphetamine was impregnated or chemically bonded within ostensibly legitimate goods such as textiles, cotton, plastic, rye, and even paintings – requiring subsequent extraction and crystallization in local illicit laboratories.[10] These developments suggest an increasing technical adaptation of trafficking networks and an expansion of Türkiye's role as both a processing and redistribution hub within a broader regional stimulant economy. The persistence of liquid methamphetamine, the presence of skilled foreign chemists, and the establishment of rural conversion clusters collectively indicate that the country's methamphetamine problem is not only escalating in scale but also evolving in sophistication – facilitating illicit manufacturing within Türkiye's rural peripheries and supply chains in a manner that mirrors captagon production models in the region.

8. (Data compiled from the EU ACT Questionnaire results)
9. (Data compiled from the New Lines Comprehensive Methamphetamine Seizure Database)
10. (Data compiled from the EU ACT Questionnaire results)

METHAMPHETAMINE DEMAND AND CONSUMPTION RATES

As methamphetamine has become more prevalent across the region, national agencies have mobilized to help identify key data that can help better understand the scale and scope of methamphetamine demand levels, as well as treatment and rehabilitation availability, accessibility and uptake. Almost two-thirds of respondents (63.6%) in the EU questionnaire confirmed they had consumption information available, though the depth of consumption information differed among the participating agencies.[1] Of the five countries that responded to an EU questionnaire query assessing whether consumption levels had increased, decreased, or had remained stable between 2020 and 2024, 60% confirmed that consumption levels had risen over the four-year period: Iraq, Jordan, and Lebanon. Palestine reported that consumption levels have remained stable over time, while Türkiye indicated that there was no prevalence study assessing consumption rates.[2]



Countries' response to whether there is methamphetamine consumption information available amongst EU questionnaire participants

The gap in data on consumption can be supplemented by outside studies; however, information remains limited or geographically constrained, due to a lack in resourcing and political will for studies examining consumption rates and rehabilitation options. Fatalities associated with methamphetamine consumption have risen sharply in the region. In Iraq, methamphetamine-related deaths rose from 4.6% to 37% of drug-related deaths between 2014 and 2018, though no further data exists on methamphetamine-related deaths after 2018, even amidst rising methamphetamine spread in Iraq.[3]

1. (Data compiled from the EU ACT Questionnaire results)
2. (Data compiled from the EU ACT Questionnaire results)
3. (Al-Asmari et al., 2024; Rahimi-Movaghar et al., 2012, p.19)

TREATMENT OPTIONS

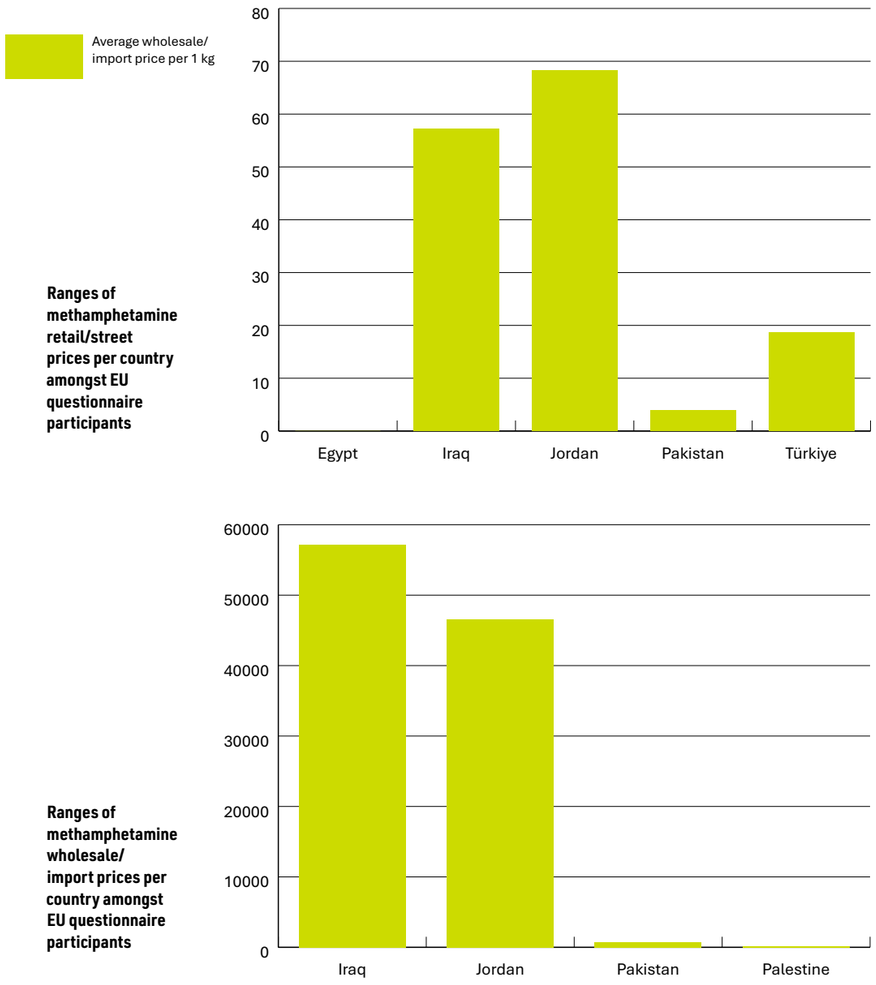
Methamphetamine is a potent and addictive stimulant that can cause serious, even fatal implications. Long-term methamphetamine use has been cited to cause structural and neurochemical changes to users' brains, which can contribute to severe, long-term and potentially fatal health consequences.[4][5] As a result, treatment accessibility and availability has become increasingly pivotal in the Southern route and North Africa region amidst increasing usage and trafficking rates.

Public health agencies around the world have struggled to identify sustainable, effective treatment pathways that can address both methamphetamine dependence and the associated health implications. There has been no evolving evidence base that showing convincing results for the treatment of methamphetamine dependence.[6] Studies have shown that treatments such as extended-release Naltrexone and bupropion deliver some relief to the withdrawal symptoms such as cravings and dysphoria, as well as reduce usage rates, however, results become inconsistent in effectively treating methamphetamine use disorder.[7] Some treatment options have featured concurrent behavioral therapy to reinforce positive behaviors while addressing other concurrent issues such as mental health conditions, through mechanisms like contingency management that uses a combination of incentives and tangible rewards, and has been regarded as one of the most effective interventions for stimulant-use disorders. However, many of these treatment mechanisms have rarely been implemented in routine clinical practice in the Middle East and North Africa, particularly due to lack of resources for staff and training and a broader stigma towards drug consumption. There have been initiatives introduced to bridge information gaps on treatment systems and characteristics through reports submitted to the EU4Monitoring Drugs (EUMD II) via the European Treatment Facility Survey (EFSQ). Nevertheless, key information deficits still remain regarding the prevalence of use, availability and coverage of treatment, and rehabilitation rates in the region at large, with government agencies unable to characterize the scale and scope of addiction and treatment accessibility.[8]

4. (Darke, 2008)
5. (Mooney et al., 2009)
6. (Siefried, et al., 2020)
7. (Trivedi et al., 2021)
8. (EUDA, 2019)

METHAMPHETAMINE PRICES

Just over half (54.5%) of participating countries in the EU questionnaire noted that they had data about prices of methamphetamine, both wholesale/import and retail/street prices.[1] Three countries submitted data for both wholesale/import and retail/street prices, while Türkiye submitted data for retail/street prices only, Egypt submitted minimum street/retail prices, and Palestine submitted wholesale/import prices.[2] This indicates how the value of methamphetamine has fluctuated in the region, at a critical time when demand has been steadily increasing and trafficking has become more frequent.

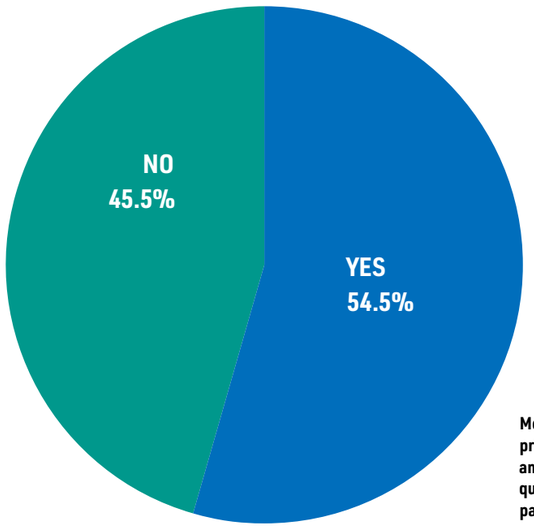


Ranges of methamphetamine retail/street prices per country amongst EU questionnaire participants

Ranges of methamphetamine wholesale/ import prices per country amongst EU questionnaire participants

1. (Data compiled from the EU ACT Questionnaire results)
2. (Data compiled from the EU ACT Questionnaire results)

Notably, Iraq presented the highest wholesale/import prices for methamphetamine compared to Jordan and Palestine, while Jordan presented the highest retail/street prices per 1 gram of methamphetamine.[3] This could potentially be explained by an uptick in local, small-scale production in Iraq's northern and southern provinces that has made methamphetamine more accessible and cheaper for local consumers, while imported, large-scale consignments routed through Iran are more expensive. Türkiye's retail/street price per gram of methamphetamine was substantially lower than that of Jordan and Iraq, with an average price of 18.6 €–67.37% lower than Iraq's average price of 57 € and 78% lower than Jordan's average price of 87 €.[4] However, the prices recorded by Egypt and Pakistan were substantially lower. Egypt reported only a minimum street/retail price of 8.8 € per gram, while Pakistan reported an average of 3.8 € per gram of methamphetamine.[5] Pakistan's average price was 132.14% lower than Jordan's and 175% lower than Iraq's.[6] Pakistan's status as the lowest rate on this scale is very likely due to its proximity to production sites along the border with Afghanistan, reducing costs affiliated with smuggling operations. Iraq represented the highest average wholesale/import price for methamphetamine, with 57 139.02 € per 1 kg of methamphetamine reported.[7] Jordan reported 46 558.99 € per 1 kg, followed by Pakistan's reported 691.8 € per kg of methamphetamine.[8]



Methamphetamine pricing available amongst EU questionnaire participants

3. (Data compiled from the EU ACT Questionnaire results)
4. (Data compiled from the EU ACT Questionnaire results)
5. (Data compiled from the EU ACT Questionnaire results)
6. (Data compiled from the EU ACT Questionnaire results)
7. (Data compiled from the EU ACT Questionnaire results)
8. (Data compiled from the EU ACT Questionnaire results)

ENVIRONMENTAL IMPACT OF CAPTAGON AND METHAMPHETAMINE PRODUCTION AND TRAFFICKING

Raids on illicit laboratories have offered a window into the chemicals and equipment used in the captagon and methamphetamine production process, however, little is known about the disposal of the waste. If producers are disposing of chemical waste through burial or directly into wastewater there are a series of potential negative impacts to local communities and the environment. Inadequate disposal could introduce harmful impacts like deforestation, soil degradation, and compromising local water supplies jeopardising public health and the climate.[1]

In captagon production, making amphetamine using the Leuckart synthesis method involves chemicals like formaldehyde and formic acid, estimated by the Conflict and Environment Observatory to generate "40 kg of highly acidic toxic chemical waste per 1 kg of amphetamine."[2] There is no official estimate of the level of toxic chemical waste and degree of environmental damage in Syria and across the region, given the unknown production capacity of laboratories and different scales of manufacturing. It is possible that many, if not all captagon manufacturing sites engage in improper disposal practices, such as dumping or burning, introducing several public health and environmental concerns. The location, method, and degree of dumping sites – particularly in Lebanon and Syria where several labs have been discovered in 2025 – remains a considerable information gap (although it is acknowledged that this is also an information gap in many EU Member States where synthetic drug production takes place).

For methamphetamine, it is estimated that the manufacturing process can generate between 2.3 to 3.2 kg of toxic waste for every kilogram of methamphetamine produced.[3] Chemical inputs, such as acetone, can be highly flammable or explosive, as well as cause serious respiratory, cardiac, and even fatal effects if ingested or inhaled in large amounts.[4] Operators often dispose of this waste improperly, simply by dumping it near the laboratory. This can cause contamination of the soil and nearby water supplies. Chemical waste from methamphetamine laboratories often feature illegal dumping, where corrosive chemicals and heavy metals are either dumped into local water reservoirs, buried, or flushed through local plumbing – all with great potential to degrade the local environment and harm to public health.[5]

For both captagon and methamphetamine, disposal methods used by interdicting authorities, such as the new Syrian government, have also raised public health concerns. Following the discovery of many regime-associated production and storage sites, forces affiliated with Hayat Tahrir al-Sham (HTS) and the new interim authority, often burned captagon pills in open air after their seizure.[6] In areas like Latakia, where local community members identified key captagon trafficking hubs, captagon pills were thrown down street drains – something that could compromise a community's drinking water.[7] These recent actions call for safe disposal procedures and mechanisms among law enforcement agencies that often encounter captagon consignments.

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1. (Rahimi-Movaghar et al., 2012, p.12)
2. (Moreland, 2025)
3. (U.S. Department of Justice, 2006)
4. (U.S. Department of Justice, 2006)
5. (Kates, et al., 2023)

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6. (Feng, 2025; France24, 2025)
7. (Al-Amari, 2024)

CONCLUSION ACTION AND POLICY

Participant Recommendations and Development of a Capacity-Building Program

Equal Focus on Demand Reduction: There has been an overwhelming focus on interdiction and a law enforcement response to the spread of captagon and methamphetamine in the region, with a much narrower focus on demand levels and treatment. This is reflected in the responses of regional actors that participated in the questionnaire, where data on consumption and treatment levels is significantly limited. With an increased focus on the provision of treatment and rehabilitation options, regional public health agencies should seek out a combination of effective treatment routes for stimulant users, particularly concurrent behavioral therapy and contingency management strategies. Agencies can explore remote and virtual options for stimulant dependence through the provision of behavioral therapy through digital technologies, helping alleviate the staffing, training, and operational burden that comes with in-person supervision.

Safe Storage and Disposal: It is also vital that national agencies, governmental partners, and civil society organisations seek to fill critical capacity gaps, such as safe disposal of seized drugs, their chemical waste and precursor materials, and production equipment. As countries like Syria are beginning to seize large quantities of captagon and interdict industrial-scale labs that had belonged to regime-aligned syndicates, there have been signs of inadequate disposal mechanisms, such as throwing captagon pills down street drains or incinerating pills in-bulk. There have also been countries like Kuwait and Iraq that have experienced a sudden, abrupt surge in seized laboratories for captagon and methamphetamine. Partner countries and international agencies should seek to collaborate on safe disposal and storage procedures with countries experiencing a boom in laboratory interdictions and seized consignments. Partner governments and organisations can also encourage the new administration in Syria to explore pathways for routine chemical analysis of seized captagon consignments, through offering available laboratory facilities abroad for forensic investigation. By developing a new standard of routine collaboration, sharing of best practices, and forensic testing, agencies would help fill in key data gaps about the scope of methamphetamine and captagon's chemical variability, identify how different labs produce them, and advance public knowledge about the health implications for users.

Reporting Mechanisms: With a prominent rise in the spread of synthetic drugs in the region, there is an urgent need for enhanced counternarcotics policy, targeted interventions, harm and demand reduction measures, and a collaborative mechanism across the region. The European Union's recent regional strategic assessment of the production and trafficking of captagon and methamphetamine reflects these policy and capacity gaps, particularly comprehensive detection and reporting mechanisms among relevant law enforcement and public health agencies. The increased production, trafficking, and consumption of captagon and methamphetamine along the Southern route and North Africa region has introduced key short-term and long-term challenges that can be best addressed collaboratively, building upon existing mechanisms to foster better dialogue, intelligence exchange, and sharing of best practices.

Establishing a Regional Fora: While there are existing mechanisms to counter the spread of captagon and methamphetamine along the Southern route and North Africa region, they are either tucked into broader counter-drug initiatives, do not encompass a balanced approach, accounting for both supply and demand, or only partially involve regional stakeholders. Three out of ten of the surveyed participants indicated interest in establishing a regional forum established for countering synthetic stimulants, Iraq, Jordan and Palestine, with many countries indicating interest in expanding regional cooperation with the governments of GCC countries, Egypt, Lebanon, Jordan, Iraq, and the new administration in Syria. The Iraqi Interior Ministry's General Directorate for Combating Drugs and Psychotropic Substance indicated interest in modeling this specialized regional fora after INTERPOL and EUROPOL in order to facilitate information exchange and ensure rapid communications between member states to dismantle criminal syndicates engaging in the production and smuggling of these drugs.

During the interministerial consultation held in Tunis, in July 2025, participating countries expressed a shared recognition of these shortcomings and articulated strong interest in the establishment of a regional mechanism to coordinate and implement evidence-based responses to counter the spread of captagon and methamphetamine along the Southern Route and across North Africa. Several delegations noted that, while bilateral, trilateral, and multilateral channels for intelligence sharing and joint investigations have occasionally proven useful, their impact has remained limited. A more institutionalized and policy-driven framework, therefore, is required—one that consolidates fragmented efforts, ensures policy coherence, and fosters sustained regional engagement under a common strategic vision.

In light of these findings, it is important for the Arab Interior Ministerial Council (AIMC) jointly with Arab Ministries of Health and Justice, in partnership with the European Union Drug Agency (EUDA) and other relevant international and regional stakeholders, to consider the formal establishment of a Regional Framework on ATS Control and Cooperation. This framework should serve as a platform for intelligence and information exchange, coordination of national responses, and the setting of measurable annual and potentially multi-annual objectives focused on reducing both the supply and demand of captagon and methamphetamine. The mechanism should promote structured coordination between Ministries of Interior, Justice and Health, to ensure comprehensive interventions that address enforcement, prevention, and treatment in an integrated manner. Beyond enforcement, the framework should also facilitate the development of shared analytical capabilities, early-warning systems, and targeted capacity-building programs for law enforcement and health professionals.

Finally, the establishment of a regional observatory, specifically focused on the spread of synthetic stimulants, potentially supported by the EUDA and regional partners, could be considered. The observatory would function as a central hub for research, data collection, and policy analysis—monitoring the security, socio-economic, and political impacts of the expanding synthetic stimulants market across the Middle East and North Africa. By fostering evidence-based policymaking and proactive engagement, such a mechanism could represent a decisive step toward mitigating the threats posed by captagon and methamphetamine, while promoting regional stability, resilience, and public health and security.

Existing National Programs

As the spread and availability of captagon and methamphetamine has increased across the Southern route and North Africa region in the last five years, regional actors have installed national programs to address challenges related to supply and demand. Many of these programs have placed a central focus on enhancing interdiction capacity through the acquisition of new detection technology, intelligence and reconnaissance collection techniques. Some of these national programs have also adopted a focus on demand-reduction strategies and treatment for consumers of synthetic stimulants, with the adoption of awareness campaigns, establishment or expansion of rehabilitation facilities, and other methods to reduce the spread of captagon and methamphetamine use.

Algeria, Iraq, Jordan, Lebanon, Pakistan, Palestine, Tunisia and Türkiye, all reported in the 2024 questionnaire that their governments implemented specific policies to address different challenges related to the spread of captagon and/or methamphetamine in their countries. Algeria reported it had adopted measures to increase its intelligence collection capabilities and establish cooperation with source countries.[1] Lebanon stated that it had increased its focus on border security through the Lebanese Army Command and Customs system, authorizing further investigations into identifying drug operations and increasing information exchange with its regional coun-

1. (Data compiled from the EU ACT Questionnaire results)

terparts.[1] Palestine reported it has sought to increase community guidance and public awareness about the spread of stimulants in domestic drug markets.[2] Tunisia reported it had increased interdiction capacity, adopting a 100% container and passenger inspection policy, while improving data analysis and investigative tools.[3] Pakistan's ANF stated it has adopted a dual demand and supply reduction strategy, through stringent precursor controls, awareness campaigns, rehabilitation and reintegration, and cooperation at regional and global level.[4]

Iraq, Jordan, Palestine, and Türkiye reported the establishment of comprehensive, national strategies in response to the challenge of synthetic stimulants.[5] Iraq reported the adoption of a "national anti-drug strategy" that sought to reduce both supply and demand of all drugs.[6] To address challenges related to supply, the Iraqi government's plan includes the adoption of a specific database recording criminal syndicates, bolstering border security measures, and identifying synergies with regional counterparts for intelligence exchange.

The plan's demand reduction strategy includes awareness and education campaigns in schools, governmental and non-governmental organisations, and religious communities, as well as conducting surveys to research the causes of drug consumption in Iraq and assess the scope of demand. Jordan has implemented a multi-year interagency national strategy with its law enforcement and armed forces to increase seizure capacity and reduce both supply and demand.[7] The plan includes a greater focus on trafficking and promotion operations through the acquisition of new electronic and technological systems and training, with a special focus on Jordan's northern desert region, along with the establishment of a dedicated team for pursuing drug-related investigations and identifying vulnerable smuggling locations.[8] Jordan's strategy also encompasses a plan for demand-reduction through prevention, awareness and education programmes targeting Jordanian youth. Türkiye's DG Customs Enforcement agency has adopted a mission to address supply, "Preventing Illicit Drug Supply at the Point of Entry," which has invested in interdiction capacity at land and sea customs gates and ports through new technologies, canine detection teams, and administrative capacity.[9] Since 2018, the Turkish government has sought to expand its counternarcotics programming, with the establishment of the Counter Narcotics Department and specialized NARKOKIM units for all regional customs enforcement hubs.[10] Türkiye has also sought to improve forensic testing capabilities, with its Gendarmerie Forensic Department conducting additional drug profiling and palynology training to determine the origins of illicit substances.[11] These efforts have culminated in a four-year national plan from 2024-2028, the "National Strategy Document and Action Plan (UMEP)," with a special focus on interdicting methamphetamine through increased seizures, training and seminars for provincial gendarmerie commands, and awareness among law enforcement units.

Some countries have sought to expand national programming to achieve greater bilateral or multilateral cooperation with regional counterparts. Lines of collaboration have largely been between Iraq, Egypt, Lebanon, Jordan, and GCC states, and occasionally, Syria, given its role as a hub of captagon production. Iraq's national "anti-drug strategy" includes the commitment to security memoranda of understanding with neighboring and regional countries, though the countries were not specified in its questionnaire response. Iraq has hosted two annual drug control conferences in Baghdad, in 2023 and 2024, that included the establishment of a regional coordination center for drug intelligence exchange.[12] [13] Jordan, too, has arranged a number of bilateral and trilateral working groups on counternarcotics with neighbors like Iraq and Syria, in response to the spread of illicit stimulants along its border regions.[14] [15]

Iraq has also collaborated in information exchange with INTERPOL through the Baghdad office in pursuing criminal syndicates and issuing international red notices, resulting in 85 international arrest warrants issued by the Iraqi judiciary and the arrest of 22 major drug dealers.[16] Additionally, the Arab Bureau for Narcotics Affairs under the Council of Arab Interior Ministers has launched a "cooperation cell" to respond to the spread of drugs in the region in March 2024, which currently includes Jordan, Egypt, Lebanon, Saudi Arabia, Syria, and Iraq.[17] A few countries that participated in the questionnaire –, Algeria, Jordan Iraq, and Türkiye—have confirmed participation in regional and extra-regional capacity-building programs to broadly improve capacity among their law enforcement, security, and public health agencies. Algeria reported participation in the European Union Agency for Law Enforcement Training (CEPOL)'s EUROMED Police V July 2022 "EU4MONITORINGDRUGS (EU4MD)" webinar that focused on the regional evolution of captagon trafficking, where capacity-building strategies were shared.[18]

1. (Data compiled from the EU ACT Questionnaire results)
2. (Data compiled from the EU ACT Questionnaire results)
3. (Data compiled from the EU ACT Questionnaire results)
4. (Data compiled from the EU ACT Questionnaire results)
5. (Data compiled from the EU ACT Questionnaire results)
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7. (Data compiled from the EU ACT Questionnaire results)
8. (Data compiled from the EU ACT Questionnaire results)
9. (Data compiled from the EU ACT Questionnaire results)
10. (Data compiled from the EU ACT Questionnaire results)
11. (Data compiled from the EU ACT Questionnaire results)
12. (Channel 8, 2024)
13. (Shafaq News, 2023)
14. (Reuters, 2025)
15. (Enab Beladi, 2024)
16. (Data compiled from the EU ACT Questionnaire results)
17. (Data compiled from the EU ACT Questionnaire results)
18. (Data compiled from the EU ACT Questionnaire results)

Türkiye reported involvement in an extra-regional capacity-building program with the European Union to improve forensic profiling capacity and laboratory testing in December 2017.[1] This initiative provided Ankara with new technological devices to aid forensic profiling of ATS that next year, preparing the country for the spread of captagon and methamphetamine anticipated at that time. Türkiye and the EU also collaborated in a 2019 capacity-building training to improve law enforcement examination methods and method validation.[2] The government of Iraq has also reported engagements with the United Nations Office on Drugs and Crime (UNODC), the European Union Anti-Narcotics Advisory Mission, the Japan International Cooperation Agency, and Naif Arab University for Security Sciences, as well as through specialised training courses with Jordan, the United Arab Emirates, France, and Italy, with plans to improve capacity-building exercises with the United Kingdom, the United States of America, Egypt and Iran.[3] Tunisia, Libya, Morocco, Palestine, and Lebanon did not confirm participation in any capacity-building exercises or training, however, it is known that they have been involved in several such activities in the EU4MD and EU4MDII projects.[4]

Despite all this, outside of bilateral information exchange and extra-regional capacity-building exercises, consistent collaboration has been limited. The former Assad regime's role in the sponsorship of captagon production and trafficking complicated cooperative efforts, often frustrating its regional counterparts with a lack of intelligence provision or leveraging its role in the trade during normalization negotiations. Morocco cited Syria's security conditions preventing direct collaboration, while other regional counterparts like Jordan and Iraq noted limited cooperation with Syria along bilateral or trilateral lines.[5] Additionally, the role of armed, malign non-state actors in synthetic drug production and smuggling in Iraq, Lebanon, Syria, and Türkiye, has further complicated trust and collaboration initiatives between regional neighbors.

1. (Data compiled from the EU ACT Questionnaire results)
2. (Data compiled from the EU ACT Questionnaire results)
3. (Data compiled from the EU ACT Questionnaire results)
4. (Data compiled from the EU ACT Questionnaire results)
5. (Data compiled from the EU ACT Questionnaire results)

Remaining Information and Capacity Gaps:

While the spread of ATS in the Southern route and North Africa region has elicited increased attention and programming to respond, there remain gaps in countries' law enforcement, security, legal, and health sectors to sufficiently respond to respective challenges.

The findings from the distributed strategic assessment and open-source information analysis also point to key gaps in available information, primarily concerning:

1. Production methods for captagon and methamphetamine
2. The spectrum and sources of precursor chemicals used for captagon and methamphetamine production
3. Destination markets for methamphetamine
4. Equipment used in production
5. Financial flows
6. The chemical composition of synthetic drugs identified through routine forensic analysis
7. Data on prices and purity

This strategic assessment report additionally identified that while there have been bilateral and trilateral working groups established to coordinate intelligence-exchange, collaboration has been largely limited to occasional coordination over network identification and interdiction. In questionnaire responses, countries indicated a desire to improve capacity in the following thematic areas:

Addressing Capacity Gaps

1. **Focus on health and harm-based approaches to reduce the scale and harm of captagon and methamphetamine markets**
   a. Support legislative reform to update drug policies across the region, and ground them in more effective health and harm reduction-based approach to drugs;
   b. Promote alternatives to coercive sanctions (particularly for minors) as well as probation in place of pre-trial detention and judicial discretion in sentencing;
   c. Reduce stigma connected to captagon and methamphetamine usage, to encourage self-referral for treatment;
   d. Provide training to law enforcement on harm reduction, vulnerable populations, stigma, overdose, mental health and other relevant topics; to lawyers, judges and prosecutors on alternatives to coercive sanctions; and to religious leaders and media to decrease stigma of drug addiction and promote harm reduction and treatment;
   e. Support greater availability of drug addiction treatment and harm reduction, in particular in prisons.

2. **Intelligence collection and investigation:**
   a. Establish stronger data collection and reporting mechanisms;
   b. Improve monitoring of precursor trafficking and diversion;
   c. Implement consistent and collaborative forensic profiling across a broader scope of seized samples;
   d. Initiate backtracking investigations that can identify equipment and materials used in the production of captagon and methamphetamine, primarily seizing on a string of recent laboratory raids conducted in Syria, Sudan, Kuwait, Türkiye, Iraq, and elsewhere in the region.

3. **Detection technologies and capabilities:**
   a. Improve cynophile training and availability of narcotic detection dogs for law enforcement;
   b. Provide training and develop protocols for the safe disposal of illicit laboratories;
   c. Translate the EUDA law enforcement training materials into Arabic;
   d. Encourage the use of digital and cellular communications in detection and intelligence-collection, particularly the digitalization of seizure records;
   e. Establish better forensic analysis and detection equipment at key checkpoints, airports, border crossings, and other sites that have been popular for captagon and methamphetamine trafficking.

4. **Equal focus on demand and supply reduction:**
   Caution against an interdiction-heavy approach to captagon and methamphetamine use, as arrests, crackdowns, and criminalization can drive broader insecurity without affecting the size of drug markets.

5. **Regional mechanisms**
   a. Build a platform for comprehensive law enforcement data collection;
   b. Establish a framework for communication and intelligence exchange that can support tip-offs for seizures, precursor tracking, investigative analysis of criminal syndicates, production methods, trafficking routes, and other key pieces of information;
   c. Support forensic analysis efforts through routine testing, encouraging regional stakeholders to send seized samples of captagon and methamphetamine to facilities, such as Germany's Federal Criminal Police Office (BKA) laboratory facilities, and share data on chemical inputs;
   d. Revive the MENHARA regional law enforcement working group and encourage dialogue between civil society and governments on effective drug policies;
   e. Share best practices for treatment pathways, demand and harm reduction strategies, intelligence collection, interdiction methods, and information about prevention, treatment, harm reduction, rehabilitation and social re-integration responses.

6. **Reduce the information gap on consumption:**
   a. Improve available data on consumption rates and patterns through collaboration with national drug observatories (NDOs) and national drug information systems;
   b. Work with NDOs and information systems and encourage countries to establish respective programs to improve availability of data on prevalence and patterns of drug use via studies, comprehensive surveys, and shared information;
   c. Encourage countries to establish routine and innovative monitoring methods and make information publicly available about prevention, treatment, harm reduction, rehabilitation and social reintegration responses;
   d. Support data availability about the prevalence of drug use in the region through established studies, surveys, reports, assessments and waste-water testing.

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