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**Statement by Dr. Viroj Sumyai, President,
International Narcotics Control Board (INCB)**

Sixty-second session of the Commission on Narcotic Drugs

**Item 9 (d) International cooperation to ensure the availability of
narcotic drugs and psychotropic substances for medical and scientific
purposes while preventing their diversion**

18 March 2019, Vienna, Austria

Thank you Chair.

Distinguished delegates, ladies and gentlemen.

The 2018 Annual Report of the International Narcotics Control Board is accompanied by a Supplement on Availability titled "[Progress in ensuring adequate access to internationally controlled substances for medical and scientific purposes](#)".

The findings are based on data reported to INCB and an INCB survey which received responses from over 130 Government authorities, representing 78 per cent of the world population.

The results confirm the global disparity in availability of controlled medicines.

In 1961, the Governments drafting the Single Convention on Narcotics Drugs recognized the medical use of narcotic drugs and their indispensable role in the relief of pain. They also recognized that countries needed to ensure and make adequate provision for the availability of narcotic drugs.

Those principles were reaffirmed in the Convention on Psychotropic Substances of 1971, restricting the use of psychotropic substances to legitimate purposes and recognizing that their availability for medical and scientific purposes should not be unduly restricted.

Almost 60 years since the adoption of the Single Convention, the goal of ensuring the availability of and access to narcotic drugs and psychotropic substances for medical and scientific purposes is still far from being *universally* met.

People are still suffering: some people must undergo surgery without anaesthesia, others have no access to the medication they need, and people are dying in unnecessary, treatable pain.

The imbalance in the availability of and access to opioid analgesics is particularly troublesome: INCB is raising the alarm and calling for action. The prevalence of many of the conditions requiring pain management, including cancer, is increasing in low- and middle-income countries. Conditions are in place to alleviate the situation: knowledge exists and most of the medicines in their generic form are already available. Yet a number of obstacles that are described in the supplement to the INCB Annual Report make it difficult to ensure that those in need have access. At the other extreme, aggressive marketing of expensive synthetic opioids, over prescription and use without adequate medical supervision and oversight is having a grave impact on public health.

While the lack of access to opioid analgesics has been the focus of much attention, the availability for consumption of some essential psychotropic substances (diazepam, midazolam,

lorazepam and phenobarbital) has declined or has remained stable in the majority of countries for which data have been provided to INCB, regardless of an increasing number of people living with anxiety disorders and epilepsy. There is also a significant global disparity in the availability for consumption of those substances, with higher availability for consumption being reported in high-income countries, even though most of the people suffering from epilepsy live in low- and middle-income countries.

INCB brought this matter to the attention of the international community in the supplement to the 2015 INCB Annual Report and the importance of making internationally controlled substances available and accessible for medical and scientific purposes was reaffirmed in the outcome document of the 2016 special session of the General Assembly on the world drug problem.

To assist Governments in ensuring availability, [INCB reviewed progress made in implementation of the recommendations in the outcome document and in INCB's 2015 supplement](#). To this end, INCB invited Member States to inform it about the actions that they had taken.

The analysis of the data reported to INCB and survey responses received from Governments and civil society organizations shows promising developments in some areas. However, there are still important issues that require further action, not only by Member States but also by the international community. Based on this analysis, [INCB urges Governments to take further action](#). I will highlight these now, given their importance, and hope that you will translate them into action upon your return to your capitals:

1. Enable a broader range of health-care professionals, in particular specifically trained and certified nurses to prescribe controlled substances, especially in countries where the number of available doctors is limited.
2. Increase and strengthen the availability of training in the use and rational prescribing of controlled substances for health-care professionals.
3. Ensure that prescriptions are appropriate to the needs of patients, while also ensuring that monitoring and dispensing arrangements are adequate.
4. Mitigate the sanctions applicable in the case of unintentional errors made in the prescribing of controlled substances.
5. Offer low-cost palliative care services to patients.
6. Ensure that health concerns are prioritized when issuing licences relating to essential medicines.
7. Bolster the production of medicines, in their generic forms, in order to increase affordability.
8. Ensure that the pharmaceutical industry produces and makes available medicines containing controlled substances, such as morphine, that are affordable. Enforce the regulation of the pharmaceutical industry to deal with promotional campaigns.
9. Consider banning the advertising of medical products containing narcotic drugs and psychotropic substances to the general public.
10. Include palliative care in the national curricula of medical and nursing schools.
11. Expand the coverage of health services and ensure that substances in the WHO Model List of Essential Medicines are included in national lists of essential medicines.
12. Periodically review national estimates and assessments for narcotic drugs and psychotropic substances with a view to ensuring that they are adequate to meet medical needs, and the capacity to prescribe and dispense rationally.

13. And finally, establish tools for processing import and export authorizations, and join the electronic International Import and Export Authorization System ([I2ES](#)) developed by INCB and UNODC.

INCB stands ready to support your Governments in renewed efforts towards implementing the UNGASS recommendations related to ensuring adequate access to internationally controlled substances for medical and scientific purposes. Last year, at the margins of the Commission, I made a [pledge with the heads of UNODC and WHO](#) to support Member States to this end.

INCB is providing assistance to Member States, including through recommendations made subsequent to INCB missions, and since 2016 has been holding regional seminars to strengthen the capacity of Governments in the regulatory control and monitoring of the licit trade in narcotic drugs, psychotropic substances and precursor chemicals. Key to this is [INCB Learning](#), in collaboration with WHO, UNODC and other relevant entities to which I have referred in my earlier intervention, with the ultimate goal of supporting Governments in ensuring the adequate availability of controlled substances for medical use. To achieve that goal and to support your Governments, INCB relies on voluntary contributions.

There are clear indications of progress being made in the short time that has passed since 2016, and that Governments are committed to realizing the goal of ensuring adequate availability of and access to internationally controlled substances for medical and scientific purposes. That goal is at the heart of the international drug control conventions, is key to achieving sustainable development goal 3 on health and well-being and should also be at the heart of national drug control policy and practice.

I trust that the issue of availability will be given due attention at the first United Nations High Level Meeting on Universal Health Coverage to take place during the General Assembly this year.

Thank you.

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