

*As delivered*

**Statement by Mr. Cornelis P. de Joncheere, President,  
International Narcotics Control Board (INCB)**

**Sixty-fourth session of the Commission on Narcotic Drugs:**

**Item 5(d): International cooperation to ensure the availability of narcotic drugs and psychotropic substances for medical and scientific purposes while preventing their diversion.**

**13 April 2021**

Madam Chair, Excellencies, Ladies and Gentlemen,

Availability of narcotic drugs and psychotropic substances for medical and scientific purposes is a prime aim of the conventions.

From the start of the Covid-19 pandemic the global supply chain of medicines has been affected both by the disruption in the manufacturing of key starting materials and active pharmaceutical ingredients as well as disruptions to land, maritime and air transport, and due to the logistical challenges arising from border closures.

In addition, the demand for controlled medicines necessary for the treatment of patients with COVID-19 sharply increased, for example for fentanyl and midazolam needed to provide pain relief and sedation for patients admitted into intensive care.

Various actions were taken by the Board and the international community in order to maintain the availability of controlled medicines: the Board assisted countries in facilitating swift import and export authorizations; in April 2020 INCB joined a call made in The Lancet, one of the leading medical journals in the world, to extend palliative care during and after the COVID-19 pandemic. On 14 August 2020, the Board issued a statement, together with UNODC and WHO, on access to internationally controlled substances during the pandemic. Most recently, last month, INCB organized an online expert group meeting to facilitate the sharing of experiences and expertise on how to deal with these supply problems – with participants from manufacturing and recipient countries, international humanitarian organizations and related UN agencies. The meeting proposed a set of recommendations to facilitate the application of simplified control measures during emergency situations, and to improve countries' emergency preparedness and response.

Apart from medicines for the treatment of patients with COVID-19, there is also the need to ensure access to medicines for the treatment of people with cancer, pain, mental health conditions and people with drug use disorders who were severely affected by the policies to stop the pandemic.

Many countries have seen a steep rise in the number of people with mental health problems, due to social distancing measures. Already before the pandemic, INCB had expressed its concern over this treatment gap and low levels of medical use of psychotropic substances in many parts of the world.

To ensure uninterrupted manufacture and supply, INCB in its Annual Report put forward a set of recommendations, including the review of the forecasted demand and the streamlining of import and export authorizations and other administrative and logistical requirements.

The INCB data on manufacturing, supply and consumption over the last many years illustrate the persistent problem of an enormous global inequity in the availability of controlled medicines for medical use, both among regions and countries, but also within countries.

An analysis of the main trends in the manufacture, export, import and consumption of the main opioid analgesics shows that the highest consumption of these drugs is in high income countries, especially Europe and North America.

The global consumption of fentanyl – a drug used for pain relief and in anaesthesia, but also widely present in the illicit market - peaked in 2018, but decreased in 2019, especially in North America. However, there were significant increases in several countries in other regions.

Oxycodone consumption has also been increasing and it replaced morphine as the second most-consumed opioid. INCB has repeatedly called for strict policies on the prescription and use of these medications, in view of the dramatic opioid epidemic and overdose deaths in North America; it is critical to prevent this from happening in other countries.

Assessing availability of psychotropics substances on an annual basis remains a challenge. The 1971 Convention does not oblige State Parties to submit national data, and the Board relies on countries that submit this data on a voluntary basis pursuant to resolutions of the Commission. We are very pleased that an increasing number of countries is supplying those data, and we call on all countries to follow, so we can construct a more comprehensive picture on the use of psychotropics.

That said, on the basis of data received, phenobarbital and methylphenidate were among the most consumed psychotropic substances under international control with alprazolam and diazepam being the most consumed benzodiazepines. The recently developed compilation of methodologies on collecting consumption data will assist competent national authorities to supply this information in future.

There is still a long road ahead towards achieving the goal of equitable access to controlled substances for medical purposes for all. INCB reiterates its commitment to provide assistance through its secretariat as requested to Member States. Since 2016, INCB Learning, in collaboration with WHO, UNODC and other relevant entities, and in response to United Nations General Assembly and CND resolutions, has been strengthening the capacity of Governments in the regulatory control and monitoring of licit trade in narcotic drugs, psychotropic substances and precursor chemicals.

Adequate availability of controlled substances for medical use is at the heart of the international drug control conventions and should also be at the heart of national drug control policies. The Board is committed to work with countries to achieve that goal.

Thank you.