

Ensuring availability of narcotic drugs for medical purposes

1. Some decades ago the international community made a solemn commitment with the Single Convention on Narcotic Drugs of 1961 and the Convention on Psychotropic Substances of 1971: to ensure the availability of drugs that were considered indispensable for medical and scientific purposes, to make adequate provision and not to unduly restrict the availability of those substances. Over the past decades that promise has not been fully met. Too many people suffer or die in pain or do not have access to the medications they need. Unnecessary suffering because of the lack of appropriate medication due to the inaction, lack of know-how or unnecessary administrative requirements is a scandal that shames us all.

2. Around 5.5 billion people still have limited or no access to medicines containing narcotic drugs such as codeine or morphine, leaving 75 per cent of the world population without access to proper pain relief treatment. Around 92 per cent of morphine used worldwide is consumed by only 17 per cent of the world population, primarily living in the United States, Canada, Western Europe, Australia and New Zealand. Inadequate access violates the Universal Declaration of Human Rights, which guarantees in article 25 the right to medical care, including palliative care.

3. The imbalance in the availability of opioid analgesics is particularly worrying as the latest data show that many of the conditions requiring pain management, particularly cancer, are prevalent and increasing in low- and middle-income countries.

4. This situation is caused by a variety of factors:

- Health care professionals (that means doctors and nurses) not receiving adequate education and training as part of their professional education,
- Lack of know-how and capacity of government authorities,
- Concerns about over-prescribing and addiction and
- Overly onerous regulatory and administrative requirements.

Many patients in most of the countries in Africa, Central America and the Caribbean, and South Asia - but also in other parts of the world - are affected.

5. Concrete steps and rapid action by Member States, the international community and the pharmaceutical industry can go a long way to remedy the situation. The most important and urgent actions would involve providing specialised training for health care professionals enabling them to prescribe and administer pain medication as well as training for the competent national authorities.

6. Governments must bring about partnerships with the pharmaceutical industry, which has a duty to act in a socially responsible manner, to ensure access to and availability of affordable medications, for example in placing emphasis on generics.

7. Governments need also ensure that the training curricula of doctors and nurses contain, ab initio, education on the prescribing and rational use of medicines containing controlled substances.

8. At the same time, where necessary, national legislation and regulations should be revised, prescribing practices brought up to day and the capacity of national agencies involved strengthened.

9. If Governments, together with the relevant international agencies, were to put together a sufficiently well-resourced plan of action, Member States could significantly contribute towards achieving a major element of Sustainable Development Goal 3 on Ensuring healthy lives and promote wellbeing for all at all ages.

INCB is the independent, quasi-judicial body charged with promoting and monitoring Government compliance with the three international drug control conventions: the 1961 Single Convention on Narcotic Drugs, the 1971 Convention on Psychotropic Substances, and the 1988 Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances.

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