Resolution 57/10

Preventing the diversion of ketamine from legal sources while ensuring its availability for medical use

The Commission on Narcotic Drugs,

Recalling the Political Declaration adopted by the General Assembly at its twentieth special session¹ and the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem,²

Recalling also its resolution 49/6 of 17 March 2006, in which it called upon Member States to pay particular attention to the emerging problem of widespread abuse of and trafficking in ketamine and encouraged Member States to consider adopting a system of import and export certificates for use by their government agencies,

Recalling further its resolutions 52/8 of 20 March 2009 and 53/7 of

12 March 2010, in which it expressed concern for the scale of the problem of the use of substances, including ketamine, to commit drugfacilitated sexual assault ("date rape"),

Recognizing that ketamine is included in the World Health Organization Model List of Essential Medicines, and recalling the Joint Ministerial Statement adopted at the high-level segment of the fifty-seventh session of the Commission on Narcotic Drugs, in which ministers and government representatives called upon Member States to ensure the availability of essential medicines, while simultaneously preventing their diversion from legal sources,

Recognizing also that, in recent years, the International Narcotics Control Board has repeatedly drawn the attention of Member States to the abuse, diversion and international trafficking, as well as seizures, of ketamine,

Recognizing further that, in its report for 2012, the International Narcotics Control Board reaffirmed the widespread abuse of ketamine, particularly among youth, in East and South-East Asia and in the Americas, the critical volume of ketamine seized in Asia and the trafficking in ketamine in all regions of the world,³ and welcoming the timely agreement among members of the Association of Southeast Asian Nations during the thirty-fourth Senior Officials Meeting on Drug Matters, held in Yangon, Myanmar, regarding the increasing demand for international control of ketamine.

¹ General Assembly resolution S-20/2, annex.

² See Official Records of the Economic and Social Council, 2009, Supplement No. 8 (E/2009/28), chap. I, sect. C.

³ Report of the International Narcotics Control Board for 2012 (United Nations publication,

Sales No. E.13.XI.1), paras. 316-322.

Concerned by the threat to the well-being of people and society posed by the diversion of ketamine and by the rising trend in the abuse of and trafficking in that substance,

Noting the critical review of ketamine by the World Health Organization in 2012, in which the Organization affirmed that, owing to the difficulty of the chemical synthesis of ketamine, that substance is obtained mostly through diversion of legal commercial sources, noting also that information has been provided to the World Health Organization through the United Nations Secretary-General on the production of ketamine for abuse, and noting further that the diversion of ketamine from legitimate sources provides significant amounts of ketamine to the illicit market,⁴

Acknowledging that the Internet serves as a key source for the supply of new psychotropic substances, including ketamine,

Alarmed by the potential opportunities for transnational organized criminal groups to profit from the non-medical sale and domestic and international diversion and trafficking of ketamine,

Reaffirming its resolution 50/3 of 16 March 2007, in which it encouraged Member States to consider adopting a system of precautionary measures for use by their government agencies to facilitate the timely detection of the diversion of ketamine,

Mindful of the licit use of ketamine as an anaesthetic in both human and veterinary medicine, noting that, in some parts of the world, ketamine is the only means of providing anaesthesia, and noting also that in its 2012 critical review of ketamine the World Health Organization stated that international control measures could have an adverse impact on its availability and accessibility,

Noting that 48 Member States have placed ketamine under control in their national legislation,

Noting also that a notification regarding the proposed scheduling of ketamine has been submitted to the Secretary-General, also noting that, in accordance with the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol⁵ and the Convention on Psychotropic Substances of 1971,⁶ Member States play a role in notifying the Secretary-General on issues related to changes in the scope of control of substances, bearing in mind the economic, social, legal, administrative and other factors they may consider relevant to adding substances to Schedule I, II, III or IV of the 1971 Convention, noting further the critical reviews that the World Health Organization Expert Committee on Drug Dependence has so far made of ketamine, and affirming the importance for all Member States to submit to the Secretary-General information regarding medical use and misuse of ketamine,

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⁴ *Ketamine Critical Review Report* (report of the World Health Organization Expert Committee on Drug Dependence, Thirty-fifth Meeting, 4-8 June 2012), sect. 16.

⁵ United Nations, Treaty Series, vol. 976, No. 14152.

⁶ Ibid., vol. 1019, No. 14956.

- 1. *Invites* Member States to pay special attention to the problem of the diversion of ketamine from licit medical use, where it persists, to monitor emerging trends in the abuse, diversion, illicit manufacture, illicit domestic and international non-medical distribution of ketamine and to assess the extent of this problem within their own national borders;
- 2. Also invites Member States, where the domestic situation so requires, to consider controlling the use of ketamine by placing it on a list of substances controlled under their national legislation, while simultaneously ensuring access to ketamine for medical and scientific purposes, consistent with the international drug control conventions;
- 3. Urges Member States, where appropriate, to pay special attention to the need to adopt comprehensive measures to ensure adequate availability of and access to ketamine for medical and scientific purposes, especially for surgery and anaesthesia used in human and veterinary care, while simultaneously preventing its abuse, diversion and trafficking;
- 4. Also urges Member States to adopt appropriate comprehensive measures aimed at detecting and countering the diversion and trafficking of ketamine, including trafficking through the Internet, in accordance with national legislation;
- 5. Encourages Member States to consider adopting an import and export authorization system for licit international trade in ketamine while ensuring access to ketamine for medical and scientific purposes;
- 6. Calls upon Member States, on the basis of the principle of common and shared responsibility, to share information and to cooperate at the bilateral, regional and international levels with a view to detecting and controlling the diversion of ketamine from the licit market, in particular by strengthening cooperation in law enforcement activities and by fostering cooperation among the relevant national health authorities;
- 7. Requests the Executive Director of the United Nations Office on Drugs and Crime to submit to the Commission on Narcotic Drugs at its fifty-eighth session a report on the implementation of the present resolution.