Pan American Health Organization

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Statement by Professor H. Ghodse,

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Mr. Chairman, Excellencies, Ladies and Gentlemen,

The World Health Organization (WHO) and its predecessor bodies, the Health Committee of the League of Nations and the Office International d'Hygiène Publique (OIHP), have played significant roles addressing the world drug problem. From the very beginning of the international drug control system, our two organizations have enjoyed a collaborative and fruitful relationship.

The Americas are a key region for international drug control because the continent is both a large supplier of illicit drugs and a large market for illicit drugs. When reviewing the world drug problem, however, we should also examine how drugs are used for medical purposes and I have come here to draw your attention to some of the most important developments in the region in this regard.

Mr. Chairman,

The United Nations drug control conventions recognize that the use of narcotic drugs and psychotropic substances for medical and scientific purposes is indispensable and that the availability of drugs for such purposes should not be unduly restricted. It is therefore one of the core responsibilities of the Board to ensure that drugs are available for medical and scientific purposes.

The insufficient availability of opioid analgesics for the treatment of pain in developing countries continues to be a matter of great concern for the Board. Opioids are used in particular for the treatment of pain in patients with cancer and other chronic diseases. In the Americas, there is a striking disparity in the availability of opioids. While opioid analgesics are widely available in Canada and the United States, many other countries in the Western Hemisphere consume only negligible amounts of opiods, leaving patients suffering from severe pain without appropriate treatment.

The disparity in the medical use of narcotic drugs is striking not just in the Americas but all around the world. Globally, the share of developing countries in the global consumption of morphine is only 5 percent although developing countries account for about 80 percent of the world's population.

INCB and WHO continue to cooperate to alleviate this untenable situation. Since 2004, our two organizations have been working on the development of a global strategy against pain which aims at providing assistance to developing countries in building capacity and raising awareness for the use of opioids in pain treatment. The Board and WHO will continue to work on the finalization of the strategy and its implementation.

The Board also welcomed the adoption of World Health Assembly resolution 58.22 on cancer prevention and control in May 2005. In accordance with that resolution, the Board will be examining, together with WHO, the feasibility of an assistance mechanism to countries which cannot afford to ensure access of their populations to opioid analgesics.

Governments themselves have to take steps to increase the medical use of opioid analgesics to meet the real needs for pain. Governments should examine the extent to which their health-care system and laws and regulations permit the use of opioids for medical purposes, identify impediments to such use and develop action plans to implement long-term and sustained pain management strategies, with the aim of facilitating the supply and availability of drugs for all appropriate indications. In this connection, I would like to draw your attention to the WHO guidelines for national drug control policy for pain management entitled "Achieving balance in national opioids control policy: guidelines for assessment."

Some countries have made commendable progress in improving the availability of narcotic drugs for pain management purposes. Once authorities recognize the need to seriously address health care policy, appropriate measures can be developed and implemented and, as a result, opioid analgesics can become more widely available.

Mr. Chairman,

While drugs are indispensable for the relief of pain and suffering, their abuse harms the individual and is fraught with social and economic dangers to society as a whole.

Prolonged consumption of narcotic drugs and psychotropic substances may result in drug dependency as well as other physical and mental suffering. The Board is particularly concerned that a considerable number of individuals are treated with psychotropic substances without having been diagnosed as having a real mental or physical disorder. Furthermore, substances with stimulant properties are often inappropriately prescribed, for example, for weight loss purposes.

There are many ways to address this problem. Once overconsumption of substances has been identified, Governments should act in concert with the other participants in the drug

distribution chain, and particularly with members of the medical and health professions and through education of the general public.

Together with the professional medical associations, health authorities should promote the continued education of physicians as well as the general public in this subject area. This will, in the long run, ensure a consistent and adequate therapeutic response to various mental conditions and will reduce the level of polypharmacy, the use of multiple medications, without compromising treatment outcome.

Using a combination of the above approaches, several countries in the Americas have been successful in reducing the consumption of stimulants. Others have recognized the problem and have started working towards a more rational use of drugs.

In order to achieve a sustained reduction in the overconsumption of drugs, Governments must ensure that article 10 of the 1971 Convention on Psychotropic Substances which prohibits the advertisement of psychotropic substances to the general public, is strictly enforced. Furthermore, Governments must ensure that all manufacturers of controlled drugs adhere to the ethical norms for medicinal drug promotion which have been developed by both the pharmaceutical industry itself as well as the World Health Organization.

Mr. Chairman,

Several billion of doses of medicines containing internationally controlled substances are sold illicitly over the Internet every year, posing potentially fatal health risks to consumers.

The Board has been studying the issue for five years and recently convened a series of expert group meetings to analyse the developments.

One of the results was that cooperation among health and regulatory authorities needs to be intensified if our endeavours are to be successful. Therefore, the Board has sent letters to the competent national authorities of all Governments to nominate focal points that can be contacted in cases of suspected illicit sales by Internet pharmacies. The objective is to create an international network of national agencies involved in control and in investigation of illicit sales by Internet pharmacies working together to counteract the global and cross-border activities of illegal pharmacies on the Internet. The Board also calls on Governments to cooperate with the pharmaceutical industry and Internet service providers in order to bring this trafficking to an end.

I ask you to cooperate with the Board and to nominate your focal points as soon as possible so that we can expedite action on this important issue.

Thank you for your attention.