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Statement by Prof. Hamid Ghodse, President of the International Narcotics Control Board

High-level Meeting of the General Assembly on Non-communicable Diseases New York, 19 September 2011

Round table 2: Strengthening national capacities, as well as appropriate policies, to address prevention and control of non-communicable diseases

Honourable Chairmen, Excellencies, Ladies and Gentlemen,

I would like to commence by acknowledging the efforts of Dr. Margaret Chan, Director-General of the World Health Organization, and her staff in putting the important issue of non-communicable diseases onto the agenda, and the General Assembly for having placed this issue at the forefront of international affairs.

Controlled substances are necessary for the treatment of non-communicable diseases and relief of associated pain, and appropriate medical use can improve the quality of life of patients. For example, narcotic drugs such as opioids are essential in the palliative care of cancer patients while psychotropic substances are a fundamental element in the treatment of mental illnesses.

Mental illnesses are recognised non-communicable diseases that afflict millions of people around the world and that require adequate provision of health services. Substance use disorders are part of the spectrum of mental health problems and are a non-communicable disease requiring prevention and treatment globally. Substance abuse can also be a contributing factor to other non-communicable diseases. Some controlled substances are also used in the treatment of drug abuse.

The International Narcotics Control Board is mandated to monitor and promote the implementation of the international drug control conventions. The conventions can be thought of as having two primary aims. Firstly, the conventions require that the parties prevent substance abuse and provide treatment and rehabilitation. Secondly, the conventions aim at ensuring the availability of internationally controlled substances for medical and scientific purposes, while preventing their diversion. The medical use of controlled substances includes the treatment and management of non-communicable diseases, including cancer and mental illness, as well as painful conditions associated with other non-communicable diseases, such as diabetes.

The importance of controlled substances in the relief of pain and suffering is widely recognized yet there are significant disparities in the availability of these substances both within and between regions. Ninety per cent of the world's consumption of analgesics is consumed by a group of developed countries including Australia, Canada, New Zealand, the United States of America and some European countries. In some countries, there is even overconsumption of some controlled substances, which results in additional health risks and can cause additional conditions or further compound existing conditions. In contrast, eighty per cent of the world's population has no or limited access to these medicines, meaning that many individuals are suffering unnecessarily.

In order to ensure the availability at national level of controlled substances for medical uses, including the treatment of non-communicable diseases, countries need to have in place a well-functioning regulatory system. Yet many countries do not have a drug control regulatory system in place. The first steps that must be taken to establish a regulatory system are the development of a national drug control policy and the building of national capacity. Success in addressing the issue of non-communicable diseases will be constrained if countries lack the capacity and policies to ensure the availability of controlled substances, together with appropriate measures to prevent diversion to illicit use. And the condition for this is the proper implementation of the regulatory mechanism.

The Board is committed to promoting the building of government capacity in drug control and has taken a number of steps to draw attention to the need to establish or improve national regulatory systems. Earlier this year, I co-signed a letter with the Director-General of the World Health Organization and the Chair of the United Nations Development Group addressing this very issue. The letter called on the United Nations Resident Coordinators to integrate the issue of access to controlled medicines into health programmes.

In March this year, the Board launched a special supplement to its Annual Report for 2010 entitled, "Availability of Internationally Controlled Drugs: Ensuring Adequate Access for Medical and Scientific Purposes". The supplement reviews the major constraints to adequate availability that were identified by Governments and shows that economic issues are not the most significant concern, due to lower-cost generic medicines. The most prevalently perceived barriers to availability are concerns about addiction and resistance of health professionals to prescribe the medicines. The supplement makes recommendations to Governments and the international community and include education and training of health professionals, identification of overly-restrictive laws, developing distribution mechanisms, and identification of licit requirements for narcotic drugs and psychotropic substances. With regard to the latter point, the Board is working with the World Health Organization on joint guidelines to facilitate the availability and accessibility of controlled substances.

The Board is committed to promoting measures aimed at ensuring the effective functioning of the international drug control system and thereby ensuring the availability of internationally controlled substances, including within the area of non-communicable diseases. In this regard, the Board will continue to be at the disposal of governments to support their efforts to develop and implement national policies and to build capacity for effective drug regulatory systems at national level. The Board also calls for continued international cooperation and technical assistance in establishing national drug regulatory systems, so as to ensure adequate availability of controlled substances for the treatment of non-communicable diseases.

All people have a right to be free from the pain and suffering caused by non-communicable diseases. Ideally this should be achieved primarily through prevention, especially in the case of substance abuse. Controlled substances are essential in the treatment of non-communicable diseases, including for the relief of pain. Adequate availability of these substances is essential if the issue of non-communicable diseases is to be effectively addressed.

Let us work together – Governments, civil society, international organisations, including the Board – to ensure adequate availability of internationally controlled substances for the relief of the debilitating pain and suffering associated with non-communicable diseases.

Thank you.