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UN DRUG CONTROL BODY CONCERNED OVER INADEQUATE MEDICAL SUPPLY OF NARCOTIC DRUGS TO RELIEVE PAIN AND SUFFERING

Morphine and other opiates which are used to alleviate severe pain are often not available in hospitals in many countries around the world or, if available, are in very short supply. An adequate supply of narcotic drugs for medical purposes is still far from being universally achieved, warns the International Narcotics Control Board (INCB) in its latest annual report released in Vienna on 23 February 2000.

The INCB, which regularly surveys the international drug scene, has in the past few years stressed the dangers of growing drug trafficking and abuse and the oversupply of narcotic drugs and psychotropic substances fuelling illegal use. In the lead chapter of its report for 1999, the Board expresses its concern over a troubling undersupply of narcotic drugs for licit purposes. The report also points to an uneven supply of psychotropic substances with certain developed regions of the world recording alarming levels of overprescription while developing countries are being left in dire need of those substances.

The Board stresses that there is still a consensus among Governments to regard the medical use of narcotic drugs as indispensable for the relief of pain and suffering. In fact, as the Board points out, the international drug control regime currently in force has the dual purpose of ensuring that (a) narcotic drugs are not trafficked illegally or abused and (b) an adequate supply of narcotic drugs for medical purposes is available in each and every country. It is this dual imperative of preventing abuse and providing relief from pain and suffering that has guided the work of the Board and its predecessor bodies since the beginning of the 20th century.

The number of people worldwide affected by health problems requiring treatment with a narcotic drug or a psychotropic substance is difficult to estimate. National health surveys conducted in mainly developed countries over the past 20-30 years show that large segments of society are affected.

Research shows that 75-90 per cent of opioid treatment of patients with cancer-related pain can be effective. Codeine is the most widely used opioid, used as a cough suppressant and as an analgesic.

Opioids, including morphine, which are essential pain relievers, do not necessarily reach those who need them most in many countries. A number of developing countries have to give priority to other social and health problems, such as malnutrition and infectious diseases.

While supply of narcotic drugs for medical purposes remains inadequate, the consumption trends recorded by the Board indicate improvement. The global consumption of morphine has been practically doubling every five years since 1984. In 1998 it reached a level of 21 tonnes. This trend is, however, mainly due to increasing consumption and overmedication in developed countries.

According to the WHO, by the year 2015 two-thirds of the estimated 15 million new cancer cases per year will occur in developing countries. Some 70-80 per cent of cancer patients suffer severe pain in the late stages of the disease. In precisely these countries the supply of opioids is inadequate due to lack of economic resources, the quality of health care and socio-cultural impediments.

International Narcotics Control Board

The INCB stresses that it is mainly the responsibility of concerned Governments and of the medical profession to improve the situation. Among the most frequent reasons for the unavailability of opioids in many developing countries are over-restrictive regulations; difficult administrative procedures; concerns about diversion and the consequences of unintentional errors; concerns about unintended addiction and inadequate or insufficient training of health personnel.

New medicines of higher quality and the better management of their availability can make the relief of pain and suffering more universal and qualitatively better, the Board reports. Considerable advances have been made in developing new medicines and as a result, higher specificity and greater effectiveness and safety have been achieved. However, the dependence liability is noticeable during large-scale therapeutic use, which makes specific administrative restrictions on manufacture, trade and medical use necessary.

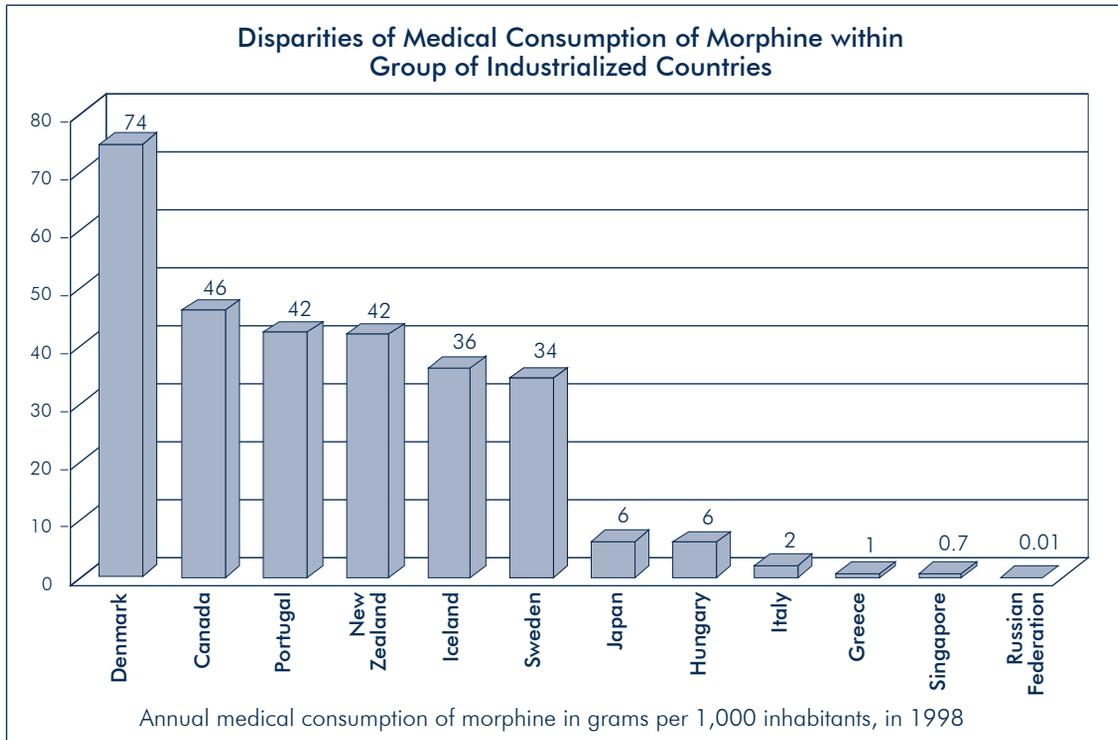
The INCB urges Governments worldwide to ensure that narcotic drugs are available so that patients do not suffer unnecessarily. However, strict control procedures must be in place so that narcotic drugs reach hospitals, doctors and patients and are not diverted to illicit markets. The Board calls for a flexible, humanitarian approach that aims at ensuring the availability of controlled drugs for medical purposes especially in developing countries, where resources for public health are extremely limited.

Access of developing countries to essential drugs must be improved through establishing more solid and reliable assessment of medical needs, encouraging preferential conditions from international suppliers for developing countries, developing non-profit mechanisms for the use of otherwise unused narcotic products, encouraging donations of much needed drugs on the part of international aid organizations and making essential drugs more affordable.

All countries should aim at maintaining or establishing a well-functioning drug supply management system that ensures safe delivery of affordable drugs to patients who need them and prevents those drugs from ending up in illicit channels, by having comprehensive registration and authorisation measures in force. Such a system should encourage high standards of ethics and professional and business practices on the part of drug companies, as well as the development and use of better and safer drugs which have less dependence liability.

Overmedication in many developed countries is another issue of great concern to the INCB. In its report for 1999, the Board once again draws attention to the fact that pharmacotherapy is not a universal panacea, although this seems to be the perception in a number of developed countries. There, actual availability tends to be in excess of actual needs and is strongly influenced by the marketing practices of pharmaceutical companies. Overmedication leads to pain and suffering of a different kind to that seen in undersupplied countries. This will be the main theme of next year's INCB report.

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Levels of Medical Use of Morphine in 1998

Countries with high per capita consumption *	Countries with very low per capita consumption *	Countries with almost no medical use of morphine *
Denmark (74.4)	Cuba (1.4)	Mozambique (0.01)
Canada (46.1)	Colombia (0.7)	Algeria (0.007)
Portugal (42.2)	Saudi Arabia (0.5)	Venezuela (0.007)
New Zealand (41.9)	Iran, Islamic Rep. of (0.3)	Bolivia (0.006)
Iceland (36.1)	Turkey (0.3)	Viet Nam (0.006)
Sweden (34.3)	Thailand (0.2)	Indonesia (0.003)
Austria (33.8)	Peru (0.2)	Côte d'Ivoire (0.002)
USA (31.1)	China (0.09)	Angola (0.001)
Australia (30.4)	Egypt (0.08)	Ethiopia (0.0001)
Norway (28.5)	India (0.02)	Madagascar (0.0001)

* Annual medical consumption of morphine in grams per 1,000 inhabitants.