



**EMBARGO: 3 March 2004
00:01 hours GMT**

USE OF ESSENTIAL NARCOTIC DRUGS TO TREAT PAIN IS INADEQUATE, ESPECIALLY IN DEVELOPING COUNTRIES

Essential narcotic drugs used for medical purposes are insufficiently available in many countries around the world, warns the International Narcotics Control Board (INCB) in its Annual Report released today (3 March 2004).

While narcotic drugs are not sufficiently available in many countries, the stocks of opiate raw materials which are used for the manufacture of some opioids¹ destined for medical use continue to grow at the global level, indicating that additional quantities of narcotic drugs could easily be manufactured should worldwide demand rise.

The availability and consumption of some essential narcotic drugs, particularly opioids, which are used for pain treatment, including palliative care, remains extremely low in many countries worldwide. Ten countries account for almost 90 per cent of the total world consumption of morphine. In terms of population share, about 80 per cent of the world population living in developing countries consume only 6 per cent of the morphine distributed worldwide. Though the global consumption of morphine has been rising steadily over the past two decades, the increase occurred to a large extent in developed countries. This has resulted in the gap between developing and developed countries widening further. Morphine is on the Model List of Essential Drugs established by the World Health Organization (WHO) as one of the analgesics for severe pain.

A similar situation has been observed with regard to some other opioids, such as fentanyl, hydromorphone and oxycodone, for which new treatment forms (transdermal patches, controlled-release tablets) have been developed in recent years. The consumption of these drugs is limited almost entirely to industrialized countries, mainly due to the high costs of the new preparations. In 2002, the United States alone accounted for 54 per cent of global consumption of fentanyl, 51 per cent of global consumption of hydromorphone and 88 per cent of global consumption of oxycodone.

According to WHO projections, two thirds of the estimated 15 million new cancer cases per year will occur in developing countries by the year 2015. Some 70-80 per cent of cancer patients suffer severe pain, whether acute or chronic, in the late stages of the disease. Opioids and above all, morphine, are indispensable for the treatment of severe pain related to cancer, due to their analgesic efficacy and relative affordability.

The highest level of per capita consumption of licit narcotic drugs has been recorded in the United States where it is two-three times higher than in many countries in Western Europe. The availability of essential narcotic drugs used for medical purposes is particularly low in Africa. The per capita consumption of narcotic drugs, in the eight African countries with the highest consumption (Algeria, Mauritius, Morocco, Namibia, Senegal, South Africa, Zambia and Zimbabwe) is only 2 per cent of the per capita consumption of the United States and less than 7 per cent than that of Western Europe. The consumption of narcotic drugs in the majority of African countries is even lower. Thirty-two countries have almost no medical consumption of narcotic drugs. This is particularly worrisome as some narcotic drugs are also essential in the treatment of HIV/AIDS patients.

¹ For example, morphine, codeine, hydromorphone, hydrocodone and oxycodone.

The availability of narcotic drugs for medical treatment is also insufficient in many countries in Asia. The lowest consumption levels have been recorded in Bhutan, Indonesia, Lao PDR, Myanmar and Tajikistan. In some cases, even economically well-off countries, such as Japan, Republic of Korea, Singapore and at the Arabian peninsula, have a relatively low consumption level.

Some countries in Europe, especially Eastern Europe, also report a very low use of narcotic drugs. The per capita consumption in the 10 highest-ranking countries in Eastern Europe is less than 30 per cent of that in Western Europe.

The establishment of the international drug control system as reflected in the 1961 Convention on Narcotic Drugs was guided by the principal objective of ensuring that the medical needs of drugs were met worldwide in an efficient manner, in order to provide optimal medical help including pain relief. At the same time, it was meant to protect the individual and societies from drug abuse and its detrimental consequences.

Nevertheless, many countries worldwide continue to have only minimal access to essential narcotic drugs, making treatment of pain and other diseases highly inefficient.

The Board has identified that the low availability of certain types of medicine can be related to at least three different factors. First, unnecessarily strict rules and regulations have created an impediment for providing adequate access of populations to certain controlled drugs in some countries. Second, the negative perception about controlled drugs among medical professionals and patients in many countries has limited their rational use. Third, lack of economic means and insufficient resources for health care has resulted in inadequate medical treatment, including the use of narcotic drugs.

The current global production is ample enough to meet a significant increase in the demand for narcotic drugs for the world population. The Board encourages manufacturing countries, in cooperation with the pharmaceutical industry, to explore ways to make narcotic drugs, in particular opioids, used for the treatment of pain, more affordable for countries with scarce financial resources and low levels of consumption.

Further, in order to increase the rational use of narcotic drugs in developing countries, the Board encourages manufacturing countries, in cooperation with the WHO, to provide assistance to those countries in training their health authorities and medical community on the establishment or improvement of national pain treatment policies. The Board also calls on the Governments in developing countries, particularly in Africa, where the consumption of narcotic drugs for the treatment of pain is critically low, to work closely with WHO on identifying ways to improve pain management in their countries.

The Board appreciates efforts by the international community in seeking ways to provide medicines to HIV/AIDS patients in developing countries and welcomes the fact that WHO has renewed its emphasis in providing assistance to poor countries. The Board also hopes that focused attention on HIV/AIDS treatment will contribute to improving the availability of drugs essential for the treatment of pain.