

## **Forty-fourth session of the Commission on Narcotic Drugs**

**20-29 March 2001**

**Vienna**

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

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Excellencies, Ladies and Gentlemen,

At the outset, I would like to congratulate the Chairman of the Commission, Ambassador Pavel Vacek of the Czech Republic and extend to him and all other members of the Bureau my best wishes for constructive and fruitful deliberations for this session of the Commission on Narcotic Drugs. Since Ambassador Vacek assumed the Chairmanship of the Commission about one year ago, the close relationship between the Commission and the International Narcotics Control Board has been further strengthened by several opportunities when you, Mister Ambassador, and myself have had to discuss matters of mutual importance. In particular, I was very grateful for your visit to the Board at its recent 70th session in February.

Mr. Chairman,

The latest annual report of the Board highlights in Chapter 1 the problem of overconsumption and excessive availability of controlled substances. By contrast as you will recall, the INCB report for 1999 recalled how the unavailability of opiates results in unnecessary pain and human suffering in many parts of the world. The Board, at that time, called attention to the unacceptable problems of access to morphine and other pain-relieving medicines in most countries, with ten countries accounting for eighty percent of world-wide morphine consumption. There is, however, another side to the equation. Unlimited or excessive availability of addictive medicines on national and international markets is also a cause for concern, since excessive availability of such medicines frequently results in suffering of a different kind, namely in unjustified overconsumption and dependence.

There is no country or region where the availability of medicines can be considered as the standard for others. Drug consumption figures always have to be viewed in the broader context of national drug supply, availability and management. There is thus no universal consumption standard that is applicable to all countries regardless of their social, demographic and economic situations. Small disparities in the consumption of drugs can thus be explained by differences in the national circumstances. However, the reality is that there are very big disparities between countries and regions.

These disparities are striking even in areas with similar economic development. There are large and consistent differences between consumption levels of countries in North America and those in Europe. For the past fifteen years, the consumption of amphetamines listed in Schedule II of the 1971 Convention has been about ten times higher in the North America than in any country in Europe. On the other hand the consumption of benzodiazepine-type sedative hypnotics and anxiolytics, on the other hand, is highest in European countries. Consumption differences do not only occur between continents but also within them. Consistently large differences have been recorded in European countries with otherwise similar economic conditions. In France, for example, the consumption level of benzodiazepines was for many years one of the highest in Europe, on average approximately three times that of Germany or of Norway. In recent years, however, the French authorities have succeeded in significantly reducing the consumption of benzodiazepines through serious efforts to promote a more rational use of such substances.

The French example proves that effective action can be taken by national authorities to reduce excessive consumption of controlled drugs. At the outset, Governments should keep the supply and the consumption of controlled drugs under close supervision, and a reliable system for monitoring consumption must thus be in place. Once overconsumption of substances has been identified, Governments need to act in concert with the other participants in the drug distribution chain, and particularly with members of the medical and health professions as well as the pharmaceutical companies and also through education of the general public.

Together with the medical profession, Governments should promote the use of culturally relevant and proven complementary or alternative treatment modalities, without limiting the availability of controlled drugs for therapeutic purposes and depriving patients of legitimate and efficacious treatment. Together with the professional medical associations, health authorities should also, 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 without compromising treatment outcome.

Monitoring the pharmaceutical companies, Governments must ensure that article 10 of the 1971 Convention 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. The measures that I have just briefly outlined are only a small range of the recommendations that the Board has made (paragraphs 38 to 49 of the 2000 report).

Mr. Chairman,

The annual report further reviews the operation of the international drug control system, in particular the action that Governments have taken to give effect to the international

drug control treaties. The Board has, for some years now, examined the impact of modern information technology on international drug control. The Internet has had a profound change on the way we do things. Internet shopping and mail deliveries have offered new possibilities for procuring items which are not readily available in one's own country or town of residence. The online sale of drugs can ensure a more adequate supply of medical provisions to all citizens in countries where geographical conditions make it difficult for traditional supply channels to adequately reach all parts of the country. The expansion of online shopping has also brought about online pharmacies which, unfortunately, illegally provide prescription drugs, including internationally controlled substances, to customers all over the world without the required prescriptions and import/export controls. The Board calls for closely coordinated activity among national authorities to counteract this problem.

In its third chapter, the annual report of the Board presents its views of the drug control situation in different regions of the world. Various sources are consulted in the drafting process. These sources include Governments, many of which provide information directly to the Board. The Board is also in constant contact with the various sections of UNDCP and its regional and country offices. Furthermore, the Board examines reports from international organizations with a drug control mandate such as the World Health Organization, Interpol and the World Customs Organization. Finally, the Board gathers important first-hand information during its missions. When all information has been collected and analysed, the most pertinent information is selected and the Board expresses its views if necessary. It is therefore not always possible to reflect every single important occurrence such as large drug seizures, apprehension of key drug traffickers, successes in the eradication of crops from which drugs are extracted or action taken by Governments concerning legislation or demand reduction.

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Mr. Chairman,

At its last session, the Commission adopted resolution 43/11 on provisions regarding travellers under treatment involving the use of medical preparations containing narcotic drugs. In the age of globalization and travelling, travellers want to carry legally obtained medications containing narcotic drugs in order to continue treatment no matter which country they are in. While the 1971 Convention on Psychotropic Substances expressly allows international travellers to carry small quantities of preparations containing psychotropic substances, provided they have been lawfully obtained and are for personal use, no similar provision exists for the 1961 Convention. At the national levels, legal and monitoring practices regarding such travellers vary widely from country to country and there are difficulties in determining the legality of carrying such medication.

The Board concluded that there should be a harmonization of practices. Patients should be allowed to carry pharmaceutical preparations containing narcotic drugs for their personal use with accredited documents, in the amount indicated in their medical prescription and for the length of treatment prescribed by their doctors. As the policy-

making body in international drug control, the Commission should foster a common approach on how Governments should deal with international travellers carrying legally obtained and prescribed narcotic drugs. In particular, the types of narcotic drugs allowed. The quantities and the documents required for the journey and stay in the country of destination should be standardized as far as possible. I look forward to discussing this issue with interested delegations inside and outside this meeting room.

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Mr. Chairman,

In line with the functions assigned to it under the 1961 Convention and the relevant resolutions of the Economic and Social Council, the Board regularly examines issues affecting the supply of and demand for opiate raw materials and the demand for opiates for licit requirements, and endeavours to maintain a lasting balance between the two. Although the level of opium stocks has increased, and will in all likelihood see a further increase, the Board found that the current stocks of concentrate of poppy straw continue to be below the current level of annual utilization. The Board requests the Governments concerned to ensure the continued availability of the raw material in years with unexpectedly poor harvest. The balance between supply and demand of opiates may also be affected by a variety of other factors. In order to discuss these and other issues, the Board yesterday convened informal consultations between the major producers and importers of opiate raw materials, pursuant to resolution 2000/18 of the Economic and Social Council.

Mr. Chairman,

In conclusion, I would like to reiterate to the members of the Commission that both INCB and the Commission as the main drug control and policy making bodies have to work closely together within their respective complementary functions.

The Board from its side will continue to closely monitor the implementation of the international drug control treaties and related resolutions and has and will continue to analyze whether content and spirit of the conventions are being respected and met. However, as you know, the ultimate masters of the conventions are the Governments themselves and the Commission on Narcotic Drugs as the main policy making body has a very significant role to play in keeping the convention alive and acceptable or initiating any changes you feel appropriate in line with the procedures established for such purpose.

Mr. Chairman and distinguished delegates,

As we stand at the beginning of this new century, let us all renew our efforts with the utmost determination to tackle this pandemic of drug abuse, and the international drug control treaties are the common denominator of control measures offering flexibility of action and encouraging a balanced approach, so that they can be implemented in different

socio-cultural settings, justifiably heavy upon traffickers and caring and compassionate towards the victims of addiction.

Thank you very much for your attention.

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Mr. Chairman,

I would now like to turn to the Board's report on the implementation of article 12 of the 1988 Convention and inform the Commission of our major findings and of the latest developments relating to precursor chemical control.

I would first like to refer to acetic anhydride, a critical chemical used in the illicit manufacture of heroin. In October 2000 the Board convened an international meeting, hosted by the Government of Turkey, with a view to commencing an intensive proactive monitoring programme for the substance. We invited all the major manufacturing, exporting, importing and transshipment countries and countries where illicit heroin manufacture takes place, as well as the competent international bodies. That meeting resulted in the initiation of a voluntary international operation, known as "Operation Topaz".

Since acetic anhydride is diverted both from international trade and domestic distribution channels, for subsequent smuggling into the areas where heroin is illicitly manufactured, the operation, therefore incorporates two distinct activities;

Firstly, under an intensive international tracking programme, participating countries will trace all individual shipments of over 100 kilogrammes of acetic anhydride, from the manufacturing countries to their final destinations to prevent diversions from international trade. The Board, through its secretariat, is expected to serve as the international focal point for real time information exchange. Secondly, structured law enforcement actions are planned to intercept smuggled consignments and to investigate seizures of smuggled acetic anhydride and seizures of the substance at illicit laboratories in order to track it back to its source and to identify traffickers and prosecute them. ICPO-Interpol and the World Customs Organisation will carry out the necessary analysis of seizures for the operation.

As you are aware, Operation Purple, a similar international tracking initiative has been preventing diversions of potassium permanganate from international trade since April 1999. We are pleased to note the continuing successes achieved under Operation Purple. In particular, the Colombian authorities have dismantled six laboratories where potassium permanganate was being illicitly manufactured, a phenomenon that has emerged for the first time during 2000 and which indicates that traffickers are no longer able to obtain potassium permanganate from their traditional sources. Furthermore, the Government of the United States has reported that the number of highly oxidised cocaine samples seized around the world is now at an all time low, and also that more adulterants are being found

in the cocaine being smuggled out of the South American region. This gives a further indication that traffickers are not able to obtain the oxidising agents, such as potassium permanganate, which they require for the purification of the cocaine.

In both Operation Purple and Operation Topaz a key component is the use of pre-export notifications to verify the legitimacy of individual shipments. During 2000, pre-export notifications also assisted Governments to identify attempts, and to prevent diversions, of other controlled chemicals. For example, the competent authorities of India and China were able to prevent the diversion of 12 tonnes of ephedrine and pseudoephedrine to Papua New Guinea, and diversions of 3,4-MDP-2-P have been prevented by the competent authorities of China. In a recent case, the competent authorities of France have effectively prevented a large-scale diversion of anthranilic acid, a Table II substance used in the illicit manufacture of methaqualone.

Mr. Chairman,

On the subject of pre-export notifications, we are pleased to note that between 1999 and 2000, the number of Governments formally requesting pre-export notifications in accordance with the provisions of article 12 paragraph 10 (a) has increased from 17 to 40. As more Governments invoke those provisions, the efforts of competent authorities to prevent diversions of controlled chemicals will be greatly enhanced.

I should like to emphasise that pre-export notifications can only be fully effective when the importing country can determine the licit requirements and ultimate end-use of the controlled substances being imported, and responds accordingly to the exporting country. We have identified disproportionately large increases of controlled substances to certain countries during 2000, indicating that adequate monitoring mechanisms are not in place in those importing countries. We have requested the Governments concerned to review those shipments to determine whether those countries have been targeted by traffickers. One example is a 17-fold increase in imports of pseudoephedrine to Canada. We have been assured by the Canadian authorities that thorough checks will be conducted and trust that appropriate actions will be taken as a matter of priority. The Board urges all Governments to thoroughly examine their domestic requirements for and distribution of controlled chemicals and to respond in a timely manner to pre-export notifications received from exporting countries.

While the Board has noted the successes achieved in preventing the diversion from international trade of the precursors used in the illicit manufacture of amphetamine-type stimulants, increasing reports have also been received of interceptions of smuggled consignments of these chemicals, particularly 3,4-MDP-2-P. In order to assist Governments strengthen their chemical control mechanisms to prevent these diversions, the Board intends, during 2001, to consult with concerned competent authorities in order to develop appropriate operating procedures at both the domestic and international levels.

Finally, Mr. Chairman, I would also like to refer to the transfer of acetic anhydride and potassium permanganate from Table II to Table I of the 1988 Convention. The Board has

thoroughly reviewed both substances in a process that was initiated in 1997 and is now pleased to note the Commissions' decision to transfer these two substances to Table I. The Board believes that this transfer is necessary to further reduce the diversions of both substances and will not place an undue burden either on the competent authorities or the industry trading in, or using, these materials.

Mr. Chairman,

The Board has been very pleased with the enormous efforts Governments have made in the implementation of article 12. The visible positive results in the area of chemical controls are quite evident. We can all proudly say that we are now capable of taking measures which, a decade ago, many experts thought to be non-feasible and non-practical.

The Board believes and I am sure that many of the distinguished delegations agree that chemical controls will and must remain a cornerstone of international drug control.

For heroin and cocaine and in particular for synthetic drugs, a most meaningful supply reduction strategy has become the control of its chemicals.

I thank you very much for your attention.

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In both Operation Purple and Operation Topaz a key component is the use of pre-export notifications to verify the legitimacy of individual shipments. During 2000, pre-export notifications also assisted Governments to identify attempts, and to prevent diversions, of other controlled chemicals. For example, the competent authorities of India and China were able to prevent the diversion of 12 tonnes of ephedrine and pseudoephedrine to Papua New Guinea, and diversions of 3,4-MDP-2-P have been prevented by the competent authorities of China. In a recent case, the competent authorities of France have effectively prevented a large-scale diversion of anthranilic acid, a Table II substance used in the illicit manufacture of methaqualone.

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Mr. Chairman,

The annual report further reviews the operation of the international drug control system, in particular the action that Governments have taken to give effect to the international drug control treaties. The Board has, for some years now, examined the impact of modern information technology on international drug control. The Internet has had a profound change on the way we do things. Internet shopping and mail deliveries have offered new possibilities for procuring items which are not readily available in one's own country or town of residence. The online sale of drugs can ensure a more adequate supply of medical provisions to all citizens in countries where geographical conditions make it difficult for traditional supply channels to adequately reach all parts of the country. The expansion of online shopping has also brought about online pharmacies which, unfortunately, illegally provide prescription drugs, including internationally controlled substances, to customers all over the world without the required prescriptions and import/export controls. The Board calls for closely coordinated activity among national authorities to counteract this problem.

In its third chapter, the annual report of the Board presents its views of the drug control situation in different regions of the world. Various sources are consulted in the drafting process. These sources include Governments, many of which provide information directly to the Board. The Board is also in constant contact with the various sections of UNDCP and its regional and country offices. Furthermore, the Board examines reports from international organizations with a drug control mandate such as the World Health Organization, Interpol and the World Customs Organization. Finally, the Board gathers important first-hand information during its missions. When all information has been collected and analysed, the most pertinent information is selected and the Board expresses its views if necessary. It is therefore not always possible to reflect every single important occurrence such as large drug seizures, apprehension of key drug traffickers, successes in the eradication of crops from which drugs are extracted or action taken by Governments concerning legislation or demand reduction.

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Mr. Chairman,

At its last session, the Commission adopted resolution 43/11 on provisions regarding travellers under treatment involving the use of medical preparations containing narcotic drugs. In the age of globalization and travelling, travellers want to carry legally obtained medications containing narcotic drugs in order to continue treatment no matter which country they are in. While the 1971 Convention on Psychotropic Substances expressly allows international travellers to carry small quantities of preparations containing psychotropic substances, provided they have been lawfully obtained and are for personal use, no similar provision exists for the 1961 Convention. At the national levels, legal and monitoring practices regarding such travellers vary widely from country to country and there are difficulties in determining the legality of carrying such medication.

The Board concluded that there should be a harmonization of practices. Patients should be allowed to carry pharmaceutical preparations containing narcotic drugs for their personal use with accredited documents, in the amount indicated in their medical prescription and for the length of treatment prescribed by their doctors. As the policy-making body in international drug control, the Commission should foster a common approach on how Governments should deal with international travellers carrying legally obtained and prescribed narcotic drugs. In particular, the types of narcotic drugs allowed. The quantities and the documents required for the journey and stay in the country of destination should be standardized as far as possible. I look forward to discussing this issue with interested delegations inside and outside this meeting room.

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Mr. Chairman,

In line with the functions assigned to it under the 1961 Convention and the relevant resolutions of the Economic and Social Council, the Board regularly examines issues

affecting the supply of and demand for opiate raw materials and the demand for opiates for licit requirements, and endeavours to maintain a lasting balance between the two. Although the level of opium stocks has increased, and will in all likelihood see a further increase, the Board found that the current stocks of concentrate of poppy straw continue to be below the current level of annual utilization. The Board requests the Governments concerned to ensure the continued availability of the raw material in years with unexpectedly poor harvest. The balance between supply and demand of opiates may also be affected by a variety of other factors. In order to discuss these and other issues, the Board yesterday convened informal consultations between the major producers and importers of opiate raw materials, pursuant to resolution 2000/18 of the Economic and Social Council.

Mr. Chairman,

In conclusion, I would like to reiterate to the members of the Commission that both INCB and the Commission as the main drug control and policy making bodies have to work closely together within their respective complementary functions.

The Board from its side will continue to closely monitor the implementation of the international drug control treaties and related resolutions and has and will continue to analyze whether content and spirit of the conventions are being respected and met. However, as you know, the ultimate masters of the conventions are the Governments themselves and the Commission on Narcotic Drugs as the main policy making body has a very significant role to play in keeping the convention alive and acceptable or initiating any changes you feel appropriate in line with the procedures established for such purpose.

Mr. Chairman and distinguished delegates,

As we stand at the beginning of this new century, let us all renew our efforts with the utmost determination to tackle this pandemic of drug abuse, and the international drug control treaties are the common denominator of control measures offering flexibility of action and encouraging a balanced approach, so that they can be implemented in different socio-cultural settings, justifiably heavy upon traffickers and caring and compassionate towards the victims of addiction.

Thank you very much for your attention.

Mr. Chairman,

I would now like to turn to the Board's report on the implementation of article 12 of the 1988 Convention and inform the Commission of our major findings and of the latest developments relating to precursor chemical control.

I would first like to refer to acetic anhydride, a critical chemical used in the illicit manufacture of heroin. In October 2000 the Board convened an international meeting, hosted by the Government of Turkey, with a view to commencing an intensive proactive

monitoring programme for the substance. We invited all the major manufacturing, exporting, importing and transshipment countries and countries where illicit heroin manufacture takes place, as well as the competent international bodies. That meeting resulted in the initiation of a voluntary international operation, known as "Operation Topaz".

Since acetic anhydride is diverted both from international trade and domestic distribution channels, for subsequent smuggling into the areas where heroin is illicitly manufactured, the operation, therefore incorporates two distinct activities;

Firstly, under an intensive international tracking programme, participating countries will trace all individual shipments of over 100 kilogrammes of acetic anhydride, from the manufacturing countries to their final destinations to prevent diversions from international trade. The Board, through its secretariat, is expected to serve as the international focal point for real time information exchange. Secondly, structured law enforcement actions are planned to intercept smuggled consignments and to investigate seizures of smuggled acetic anhydride and seizures of the substance at illicit laboratories in order to track it back to its source and to identify traffickers and prosecute them. ICPO-Interpol and the World Customs Organisation will carry out the necessary analysis of seizures for the operation.

As you are aware, Operation Purple, a similar international tracking initiative has been preventing diversions of potassium permanganate from international trade since April 1999. We are pleased to note the continuing successes achieved under Operation Purple. In particular, the Colombian authorities have dismantled six laboratories where potassium permanganate was being illicitly manufactured, a phenomenon that has emerged for the first time during 2000 and which indicates that traffickers are no longer able to obtain potassium permanganate from their traditional sources. Furthermore, the Government of the United States has reported that the number of highly oxidised cocaine samples seized around the world is now at an all time low, and also that more adulterants are being found in the cocaine being smuggled out of the South American region. This gives a further indication that traffickers are not able to obtain the oxidising agents, such as potassium permanganate, which they require for the purification of the cocaine.

In both Operation Purple and Operation Topaz a key component is the use of pre-export notifications to verify the legitimacy of individual shipments. During 2000, pre-export notifications also assisted Governments to identify attempts, and to prevent diversions, of other controlled chemicals. For example, the competent authorities of India and China were able to prevent the diversion of 12 tonnes of ephedrine and pseudoephedrine to Papua New Guinea, and diversions of 3,4-MDP-2-P have been prevented by the competent authorities of China. In a recent case, the competent authorities of France have effectively prevented a large-scale diversion of anthranilic acid, a Table II substance used in the illicit manufacture of methaqualone.

Mr. Chairman,

On the subject of pre-export notifications, we are pleased to note that between 1999 and 2000, the number of Governments formally requesting pre-export notifications in accordance with the provisions of article 12 paragraph 10 (a) has increased from 17 to 40. As more Governments invoke those provisions, the efforts of competent authorities to prevent diversions of controlled chemicals will be greatly enhanced.

I should like to emphasise that pre-export notifications can only be fully effective when the importing country can determine the licit requirements and ultimate end-use of the controlled substances being imported, and responds accordingly to the exporting country. We have identified disproportionately large increases of controlled substances to certain countries during 2000, indicating that adequate monitoring mechanisms are not in place in those importing countries. We have requested the Governments concerned to review those shipments to determine whether those countries have been targeted by traffickers. One example is a 17-fold increase in imports of pseudoephedrine to Canada. We have been assured by the Canadian authorities that thorough checks will be conducted and trust that appropriate actions will be taken as a matter of priority. The Board urges all Governments to thoroughly examine their domestic requirements for and distribution of controlled chemicals and to respond in a timely manner to pre-export notifications received from exporting countries.

While the Board has noted the successes achieved in preventing the diversion from international trade of the precursors used in the illicit manufacture of amphetamine-type stimulants, increasing reports have also been received of interceptions of smuggled consignments of these chemicals, particularly 3,4-MDP-2-P. In order to assist Governments strengthen their chemical control mechanisms to prevent these diversions, the Board intends, during 2001, to consult with concerned competent authorities in order to develop appropriate operating procedures at both the domestic and international levels.

Finally, Mr. Chairman, I would also like to refer to the transfer of acetic anhydride and potassium permanganate from Table II to Table I of the 1988 Convention. The Board has thoroughly reviewed both substances in a process that was initiated in 1997 and is now pleased to note the Commissions' decision to transfer these two substances to Table I. The Board believes that this transfer is necessary to further reduce the diversions of both substances and will not place an undue burden either on the competent authorities or the industry trading in, or using, these materials.

Mr. Chairman,

The Board has been very pleased with the enormous efforts Governments have made in the implementation of article 12. The visible positive results in the area of chemical controls are quite evident. We can all proudly say that we are now capable of taking measures which, a decade ago, many experts thought to be non-feasible and non-practical.

The Board believes and I am sure that many of the distinguished delegations agree that chemical controls will and must remain a cornerstone of international drug control.

For heroin and cocaine and in particular for synthetic drugs, a most meaningful supply reduction strategy has become the control of its chemicals.

I thank you very much for your attention.

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Excellencies, Ladies and Gentlemen,

At the outset, I would like to congratulate the Chairman of the Commission, Ambassador Pavel Vacek of the Czech Republic and extend to him and all other members of the Bureau my best wishes for constructive and fruitful deliberations for this session of the Commission on Narcotic Drugs. Since Ambassador Vacek assumed the Chairmanship of the Commission about one year ago, the close relationship between the Commission and the International Narcotics Control Board has been further strengthened by several opportunities when you, Mister Ambassador, and myself have had to discuss matters of mutual importance. In particular, I was very grateful for your visit to the Board at its recent 70th session in February.

Mr. Chairman,

The latest annual report of the Board highlights in Chapter 1 the problem of overconsumption and excessive availability of controlled substances. By contrast as you will recall, the INCB report for 1999 recalled how the unavailability of opiates results in unnecessary pain and human suffering in many parts of the world. The Board, at that time, called attention to the unacceptable problems of access to morphine and other pain-relieving medicines in most countries, with ten countries accounting for eighty percent of world-wide morphine consumption. There is, however, another side to the equation. Unlimited or excessive availability of addictive medicines on national and international markets is also a cause for concern, since excessive availability of such medicines frequently results in suffering of a different kind, namely in unjustified overconsumption and dependence.

There is no country or region where the availability of medicines can be considered as the standard for others. Drug consumption figures always have to be viewed in the broader context of national drug supply, availability and management. There is thus no universal consumption standard that is applicable to all countries regardless of their social, demographic and economic situations. Small disparities in the consumption of drugs can thus be explained by differences in the national circumstances. However, the reality is that there are very big disparities between countries and regions.

These disparities are striking even in areas with similar economic development. There are large and consistent differences between consumption levels of countries in North America and those in Europe. For the past fifteen years, the consumption of amphetamines listed in Schedule II of the 1971 Convention has been about ten times higher in the North America than in any country in Europe. On the other hand the consumption of benzodiazepine-type sedative hypnotics and anxiolytics, on the other hand, is highest in European countries. Consumption differences do not only occur between continents but also within them. Consistently large differences have been recorded in European countries with otherwise similar economic conditions. In France, for example, the consumption level of benzodiazepines was for many years one of the highest in Europe, on average approximately three times that of Germany or of Norway. In recent years, however, the French authorities have succeeded in significantly reducing the consumption of benzodiazepines through serious efforts to promote a more rational use of such substances.

The French example proves that effective action can be taken by national authorities to reduce excessive consumption of controlled drugs. At the outset, Governments should keep the supply and the consumption of controlled drugs under close supervision, and a reliable system for monitoring consumption must thus be in place. Once overconsumption of substances has been identified, Governments need to act in concert with the other participants in the drug distribution chain, and particularly with members of the medical and health professions as well as the pharmaceutical companies and also through education of the general public.

Together with the medical profession, Governments should promote the use of culturally relevant and proven complementary or alternative treatment modalities, without limiting the availability of controlled drugs for therapeutic purposes and depriving patients of legitimate and efficacious treatment. Together with the professional medical associations, health authorities should also, 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 without compromising treatment outcome.

Monitoring the pharmaceutical companies, Governments must ensure that article 10 of the 1971 Convention 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. The measures that I have just briefly outlined are only a small range of the recommendations that the Board has made (paragraphs 38 to 49 of the 2000 report).

Mr. Chairman,

The annual report further reviews the operation of the international drug control system, in particular the action that Governments have taken to give effect to the international

drug control treaties. The Board has, for some years now, examined the impact of modern information technology on international drug control. The Internet has had a profound change on the way we do things. Internet shopping and mail deliveries have offered new possibilities for procuring items which are not readily available in one's own country or town of residence. The online sale of drugs can ensure a more adequate supply of medical provisions to all citizens in countries where geographical conditions make it difficult for traditional supply channels to adequately reach all parts of the country. The expansion of online shopping has also brought about online pharmacies which, unfortunately, illegally provide prescription drugs, including internationally controlled substances, to customers all over the world without the required prescriptions and import/export controls. The Board calls for closely coordinated activity among national authorities to counteract this problem.

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Mr. Chairman,

In line with the functions assigned to it under the 1961 Convention and the relevant resolutions of the Economic and Social Council, the Board regularly examines issues affecting the supply of and demand for opiate raw materials and the demand for opiates for licit requirements, and endeavours to maintain a lasting balance between the two. Although the level of opium stocks has increased, and will in all likelihood see a further increase, the Board found that the current stocks of concentrate of poppy straw continue to be below the current level of annual utilization. The Board requests the Governments concerned to ensure the continued availability of the raw material in years with unexpectedly poor harvest. The balance between supply and demand of opiates may also be affected by a variety of other factors. In order to discuss these and other issues, the Board yesterday convened informal consultations between the major producers and importers of opiate raw materials, pursuant to resolution 2000/18 of the Economic and Social Council.

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Mr. Chairman and distinguished delegates,

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socio-cultural settings, justifiably heavy upon traffickers and caring and compassionate towards the victims of addiction.

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I would now like to turn to the Board's report on the implementation of article 12 of the 1988 Convention and inform the Commission of our major findings and of the latest developments relating to precursor chemical control.

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indication that traffickers are not able to obtain the oxidising agents, such as potassium permanganate, which they require for the purification of the cocaine.

In both Operation Purple and Operation Topaz a key component is the use of pre-export notifications to verify the legitimacy of individual shipments. During 2000, pre-export notifications also assisted Governments to identify attempts, and to prevent diversions, of other controlled chemicals. For example, the competent authorities of India and China were able to prevent the diversion of 12 tonnes of ephedrine and pseudoephedrine to Papua New Guinea, and diversions of 3,4-MDP-2-P have been prevented by the competent authorities of China. In a recent case, the competent authorities of France have effectively prevented a large-scale diversion of anthranilic acid, a Table II substance used in the illicit manufacture of methaqualone.

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On the subject of pre-export notifications, we are pleased to note that between 1999 and 2000, the number of Governments formally requesting pre-export notifications in accordance with the provisions of article 12 paragraph 10 (a) has increased from 17 to 40. As more Governments invoke those provisions, the efforts of competent authorities to prevent diversions of controlled chemicals will be greatly enhanced.

I should like to emphasise that pre-export notifications can only be fully effective when the importing country can determine the licit requirements and ultimate end-use of the controlled substances being imported, and responds accordingly to the exporting country. We have identified disproportionately large increases of controlled substances to certain countries during 2000, indicating that adequate monitoring mechanisms are not in place in those importing countries. We have requested the Governments concerned to review those shipments to determine whether those countries have been targeted by traffickers. One example is a 17-fold increase in imports of pseudoephedrine to Canada. We have been assured by the Canadian authorities that thorough checks will be conducted and trust that appropriate actions will be taken as a matter of priority. The Board urges all Governments to thoroughly examine their domestic requirements for and distribution of controlled chemicals and to respond in a timely manner to pre-export notifications received from exporting countries.

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pleased to note the Commissions' decision to transfer these two substances to Table I. The Board believes that this transfer is necessary to further reduce the diversions of both substances and will not place an undue burden either on the competent authorities or the industry trading in, or using, these materials.

Mr. Chairman,

The Board has been very pleased with the enormous efforts Governments have made in the implementation of article 12. The visible positive results in the area of chemical controls are quite evident. We can all proudly say that we are now capable of taking measures which, a decade ago, many experts thought to be non-feasible and non-practical.

The Board believes and I am sure that many of the distinguished delegations agree that chemical controls will and must remain a cornerstone of international drug control.

For heroin and cocaine and in particular for synthetic drugs, a most meaningful supply reduction strategy has become the control of its chemicals.

I thank you very much for your attention.