

**50th session of the Commission on Narcotic Drugs**

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**Statement by Dr. Philip O. Emafo,  
President of the International Narcotics Control Board**

Item 7 (b): International Narcotics Control Board

Distinguished Chairman of the Commission, Ambassador Hans Lundborg,

Your Excellencies,

Mr. Antonio Maria Costa, UNODC Executive-Director,

Distinguished Delegations,

Distinguished Ladies and Gentlemen,

First of all, I would like to congratulate, on behalf of the Board, Ambassador Hans LUNDBORG of Sweden on his election as Chairman of this 50<sup>th</sup> session of the Commission on Narcotic Drugs. Having had the privilege of knowing and working with you, Mr. Chairman, for several decades, I am confident that under your able leadership, this 50<sup>th</sup> session will be brought to a successful conclusion. I also look forward to welcoming you, Mr. Chairman, at the next session of the Board, for an exchange of views with the Board. Let me also use this occasion to extend my best wishes to the other members of the Bureau on their election.

Mr. Chairman,

It gives me great pleasure also to congratulate Dr. Antonio Maria Costa on his reappointment as the Executive Director of the United Nations Office on Drugs and Crime. I look forward to our continuing to work together to reduce the burden of the world drug problem.

Mr Chairman,

The first chapter of the Board's annual report for 2006 highlights the danger of unregulated markets for the distribution and sale of drugs in many parts of the world. Some of the main characteristics of these unregulated markets are: (i) unlicensed individuals or entities trade in drugs in contravention of applicable laws; (ii) the quality, safety, efficacy and sources of drugs sold are unknown or doubtful, (iii) the unregulated

markets become sources for obtaining pharmaceutical products containing internationally controlled drugs for abuse purposes.

Factors that often promote the existence and spread of unregulated markets include: limited access to health care facilities in countries, lack of public awareness and ignorance; health risks associated with their patronage; inadequate drug control regulations and weaknesses in enforcement; consumer demand for drugs

Mr Chairman,

Unregulated markets get their supplies of drugs from thefts or unauthorized sales, including through unlicensed Internet pharmacies. The Internet has now become a major distribution channel for drugs. Online sales of medicines containing internationally controlled substances have increased substantially over the past years. A recent global survey carried out by the National Center on Addiction and Substance Abuse at Columbia University in the United States revealed that a large majority of Internet pharmacies are unlicensed and unregulated and should therefore not be considered or called pharmacies but commercial drug-trafficking operations.

Most of these online outlets supply and sell internationally controlled drugs, particularly benzodiazepines and opioids, drugs that are highly sought after by drug abusers. Some 89 per cent of the Internet pharmacies surveyed did not require a prescription from their customers. Eight per cent accept prescriptions sent by telefax which not only carries a high risk of prescription falsification but also allows customers to re-use the same prescription to buy drugs from several Internet drug-selling outlets at a time. Only three per cent of online drug sellers operated in accordance with international standards and they only accepted mailed prescriptions or indicated that the prescribing doctor would be contacted. Moreover, with most Internet sales outlets, anybody with access to a credit card, including children, can easily obtain any medicine, including controlled drugs.

The risks of purchasing counterfeit medicines containing internationally controlled substances from unregulated markets are high. While the problem of counterfeiting is not new, the problem has now assumed significant proportions both in developing and developed countries. The World Health Organization estimates that 25 to 50 per cent of medicines used in developing countries may be counterfeit. The recent third Global Congress on Combating Counterfeiting and Piracy, held in Geneva in January 2007, in which I participated, noted the expansion of illegal trade in fake pharmaceuticals. Unscrupulous manufacturers, importers, exporters, pharmacists, distributors and brokers have been implicated in such operations.

Counterfeiting of drugs and medicines constitutes an economic crime which undermines national health care systems, results in loss of confidence of drug control systems and enforcement of drug laws. It also poses serious health risks to consumers.

Governments are therefore advised to

- establish a comprehensive legal framework that makes trading in drugs in unregulated markets, including unlicensed Internet pharmacies and the distribution, sale and supply of counterfeit drugs serious criminal offences;
- establish effective national drug regulatory authorities;
- build-up staff capacity of drug regulatory authorities to enforce existing drug laws through
- conduct of inspections (in accordance with article 34 of the 1961 Convention and article 15 of the 1971 Convention);
- correctly assessing requirements for narcotic drugs and psychotropic substances;
- assessing the effectiveness, safety and quality of drugs in the national drug distribution channels and ensuring that narcotic drugs and psychotropic substances are imported; exported, distributed and supplied in accordance with existing laws
- provide for severe penal sanctions for infractions
- implement effective policies to:
  - combat the manufacture, import, export, sale, supply and dispensing of counterfeit drugs
  - prevent the operation of unregulated markets for the sale, distribution and supply of drugs
  - prevent the operation of unlicensed Internet pharmacies

Mr. Chairman,

The Board urges Member States to support the Declaration of Rome adopted at the WHO International Conference "Combating Counterfeit Drugs: Building Effective International Collaboration", held in Rome in February 2006. Governments should also actively participate in the work of the new International Medical Products Anti-Counterfeiting Taskforce (IMPACT) as well as other regional initiatives.

Mr. Chairman,

Coca leaf is internationally controlled under the 1961 Convention.

Countries where coca leaf is cultivated have made sacrifices in the past and continue to make sacrifices to implement the provisions of the 1961 Convention. However, recently, a country announced its intention to use coca leaf for a wide range of products which may be exported. If that country were to proceed with its proposals to use coca leaf for industrial purposes, the Board is of the opinion that some of these planned activities would be in breach of the international drug control conventions.

Mr. Chairman,

Dialogue has been a key characteristic of the way the Board goes about its work. During its thirty-nine years of existence, the Board has discussed with Governments various treaty-related matters and has contributed, within the confines of its mandate, to ensuring that the treaties are accepted, ratified and implemented. In doing so, the Board reaches out to all States.

For some time, the Board has carried out a dialogue with the Democratic People's Republic of Korea (DPRK) and a mission visited the country in 2002 and made several recommendations to the Government to strengthen further its drug control system. In 2006, a follow-up visit took place and the Board noted that the Government has made progress in implementing the Board's recommendations and has taken important steps towards full compliance with the provisions of the international drug control treaties. The presence of a high-ranking delegation from that country at this very session of the Commission testifies to the country's effort and commitment to integrate itself into regional and international efforts to combat drug abuse and illicit trafficking.

Mr Chairman,

Unfortunately, the drug control situation in Afghanistan is not improving. The cultivation of opium poppy is at a record level and further increases in opium poppy cultivation are likely. One third of the Afghan economy is reported to be based on illicit opium. The Board urges the Afghan Government to take necessary measures to reduce drastically the cultivation of opium poppy within its territory and also calls on the international community to provide assistance to Afghanistan in its effort to eradicate illicit cultivation of opium poppy.

There have been calls by some civil society groups to legalize the use of opium illicitly cultivated in Afghanistan so as to increase opiate supply for medical purposes. The calls are based on the wrong premise and offer simplistic and not feasible solutions. In fact, there is no shortage of licit opiate raw materials for medical purposes. Total production of licit opiate raw materials has been in excess of global demand for medical and scientific purposes since 1999. The total stock of licit opiate raw materials in 2005 was sufficient to meet legitimate annual demand of opiates for almost two years. The Board is satisfied that the Government of Afghanistan has ignored the bait of those pushing for legalization of illicit cultivation of opium in Afghanistan. However, the Afghan Government and the international community must continue to be watchful of those organizations that want to undermine international drug control efforts.

Mr Chairman,

In the third chapter of the annual report, the Board analyses the world drug situation. Cannabis continues to be the drug most cultivated and abused worldwide. Cocaine and heroin abuse continue to be on the increase in a number of countries. In some countries, their abuse has stabilized and in others, declines in abuse have been reported. Currently, Europe is the second largest illicit market for cocaine in the world. Africa continues to be targeted by cocaine trafficking organizations operating from South America. Countries in Central America and the Caribbean continue to be used as transshipment point for cocaine destined to countries of abuse. Increasing abuse of and trafficking in cocaine have been reported in South Asia. The abuse of some prescription medicines containing narcotic drugs and psychotropic substances continues to rise in many parts of the world, including in Oceania.

Mr. Chairman,

The fate and future of drug-dependent persons should continue to be of concern to Governments, intergovernmental organizations and civil society and should be continuously addressed. Governments should be encouraged to provide adequate resources for drug demand reduction programmes and for human capacity building for such programmes if we are to achieve our goal of a drug-free society.

Mr. Chairman,

In 2005 both the Economic and Social Council as well as the World Health Assembly invited the World Health Organization and the Board to examine the feasibility of a possible assistance mechanism that would facilitate the management of pain using opioid analgesics. That examination has now been completed. A joint report of the Director-General of WHO and the President of the Board as well as a Framework for the Access to Controlled Medications Programme are before you at this session in document E/CN.7/2007/CRP.2. The Programme identifies the causes of underuse of controlled substances and outlines activities that should be taken to surmount the obstacles which prevent adequate pain management in many countries. The Access to Controlled Medications Programme will be implemented by the World Health Organization, supported by the Board as far as the use of opioid analgesics is concerned .

Mr. Chairman,

Let me say a few words about the sources of information in the annual report, which are mainly first-hand information that the Board collects during its onsite mission as well as information provided to the Board by Governments.

The United Nations Office on Drugs and Crime and its network of regional and country offices are also important sources. In addition, the Board examines reports from international organizations with a drug control mandate such as the World Health Organization, Interpol and the World Customs Organization.

Size is a constraint in the preparation of the report. The fact that a Government has not been mentioned in our report in no way diminishes its drug control achievements.

Another constraint is time. Our cut-off date for receiving information from Governments for inclusion in the annual report is 1 November of each year. This is to ensure that members of the Board adopt its report at its November session. Any information which is received after that date cannot be considered. Governments should, therefore, bear this in mind and submit very important information to the Board well in advance of the cut-off date.

Since the 2006 annual report has been available to Member States, the Board welcomes views that will be expressed on the report as such views will help in improving the quality of subsequent annual reports.

## Report of the International Narcotics Control Board on the implementation of article 12 of the 1988 Convention

Mr Chairman,

I would now like to introduce the International Narcotics Control Board's annual report on precursors.

During the reporting period, the Board and Governments have continued to give priority to maintaining practical and effective mechanisms for the rapid verification of transactions with precursors, particularly through the system of pre-export notifications. The Board, in cooperation with national authorities continues to monitor shipments of precursor chemicals in international trade with the ultimate aim of preventing their diversion into illicit channels.

In March 2006, the Board officially launched a new electronic system for the exchange of pre-export notifications called PEN Online. This initiative has met with broad support. Since March 2006, 71 countries and territories have registered for PEN Online; over 2,600 transactions have been communicated to importing countries and to the Board through the new system. PEN Online is now used by a growing number of Governments, including most major chemical exporters. More importantly, the system has greatly helped in the identification of new patterns and trends in trafficking in chemicals.

Estimates of national legitimate needs for precursors is an important tool for national authorities to determine, at an early stage, the legitimacy of shipments of precursor chemicals and to prevent the diversion of such chemicals. Therefore, the Board has responded to the request of the Commission on Narcotic Drugs and has published information available to it on some countries' annual legitimate needs for chemicals, which can be used in the illicit manufacture of amphetamine-type stimulants (ATS). The publication will provide the authorities in exporting countries with at least an indication of the legitimate requirements of importing countries. The Board thanks the Governments of the 80 countries and territories that have submitted such data and encourages all countries and territories that have not yet provided the requested information to do so and to contribute to this important initiative. The Board invites Governments to review their needs and advise it of any amendments that are necessary.

The Board convened its advisory expert group in 2006. On the basis of the review conducted by the advisory expert group, the Board has recommended the transfer of phenylacetic acid from Table II to Table I of the 1988 Convention to the Secretary-General. The Board also reviewed and updated the limited international special surveillance list of non-scheduled substances. Furthermore, in response to Commission on Narcotic Drugs resolution 49/7, entitled "Promoting a consistent approach to the treatment of safrole-rich oils", the Board has formulated the following definition; "safrole/safrole-rich oils are any mixtures or natural products containing safrole present in such a way that it can be used or recovered by readily applicable means".

Gabon, Montenegro and Vanuatu have become parties to the 1988 Convention since the 2005 report of the Board on article 12 was issued. The Board calls on the 14 States that have not yet acceded to the Convention to implement the provisions of article 12 and to become parties without further delay.

The Board is pleased to note that some Governments have introduced, or further strengthened, existing controls over precursor chemicals, as highlighted in chapter II of the report. In particular, the Governments of Australia, Mexico, the Philippines and the United States of America have introduced or strengthened controls over pharmaceutical products containing substances listed in Tables I of the 1988 Convention.

The Board commends the efforts of the Project Prism Task Force. Seizure reports for 2005 and 2006, as well as information on cases of diversion and attempted diversion gathered under Project Prism, illustrate again the magnitude of the problem related to illicit manufacture of ATS. A new development has been the use of Africa and West Asia as trans-shipment areas for trafficking in the relevant precursors. The Board particularly urges countries and territories in Africa and West Asia to take measures to monitor the import, manufacture, distribution and export of preparations of ephedrine and pseudoephedrine, to ensure that end-users of such preparations are legitimate and to prevent their diversion.

As was the case in 2004, none of the countries bordering Afghanistan reported seizures of acetic anhydride during 2005 and 2006. The absence of information on the sources of supply of acetic anhydride to Afghanistan raises concern over the controls exercised by Governments to prevent diversions of acetic anhydride into Afghanistan. Governments are therefore urged to ensure that the distribution and consumption of acetic anhydride are properly controlled. The Board invites the Project Cohesion Task Force to design specific activities to address the continuing problem of acetic anhydride being smuggled into Afghanistan. Similarly, fewer attempts to divert potassium permanganate, a key chemical used in the manufacture of cocaine from international trade are being uncovered. There is therefore an urgent need for Colombia and its neighboring States to identify the sources and routes used in smuggling potassium permanganate.

Mr Chairman,

Let me end by wishing you every success in the deliberations of this Commission.

I thank you for your attention.