Statement by Prof. Jallal Toufiq,
President of the International Narcotics Control Board (INCB)
67th session of the Commission on Narcotic Drugs
High-Level Side-Event “On the Road to 2029: how to accelerate our efforts to ensure a safe access to essential controlled medicines for all patients in need while ensuring a rational use and preventing diversion”
Thursday 14 March 2024
13:00 – 14:30

Distinguished Chair, Ms. Waly, Dr. Nakatani, Excellencies, ladies and gentlemen,

As President of the International Narcotics Control Board, which monitors the implementation of the international drug control conventions with a view to ensuring the availability of controlled substances, it is a great pleasure for me to participate in this side-event.

Being a psychiatrist myself specialized in the treatment of substance use disorders, the issue of safe access to and rational use of essential controlled medicines is close to my heart. Over the years, I have witnessed the pain and suffering in various communities which have either inadequate access or an oversupply of controlled medicines. Both situations can be detrimental, yet the problems are avoidable.
Over half a century ago, in adopting the 1961 and 1971 Conventions, the international community made a commitment to ensure - and not unduly restrict - the availability of drugs considered indispensable for medical and scientific purposes.

When it comes to the controlled substances listed in WHO’s Model List of Essential Medicines, the issue of availability is even more important, as these medicines are vital to meeting priority health care needs. Controlled substances included in emergency health kits, like morphine, diazepam and phenobarbital, are critical for saving lives during emergency situations.

Since the publication of its first report on availability of controlled substances for medical purposes back in 1989, INCB has continuously assessed and monitored the availability of controlled substances across the globe.

Our latest such report, the supplement to the 2022 INCB annual report, which shares the same title as this side-event’s hashtag, “No patient left behind: progress in ensuring adequate access to internationally controlled substances for medical and scientific purposes”, shows that there remains a considerable regional imbalance in the global availability of controlled substances.

This imbalance not only goes against the aims of the drug control conventions to promote the health and welfare of humankind, but also contradicts numerous human rights instruments that contain the right to health.

Specifically, the regional imbalance is notable in the following three aspects.

(i) One, the consumption of morphine, along with other opioid analgesics, remains very low in most of Africa and parts of Asia. This trend, together with the continued decline in the global manufacture of morphine in 2022, which first started in 2015, remains a major concern.
(ii) Two, consumption of anti-epileptic drugs, including phenobarbital, is low in Africa, Asia and Oceania, despite the relatively high prevalence of epilepsy in these regions and phenobarbital being one of the most-used psychotropic substances listed in the essential medicines list.

(iii) And three, consumption of methadone and buprenorphine is concentrated in a limited number of countries, while in other countries with high prevalence of people injecting drugs, their use for opioid agonist therapy is limited or non-existent.

These disparities highlight the multiple and structural challenges faced by many low-and middle-income countries, which include:

- a lack of reliable data on the prevalence of conditions that require controlled medicines,

- a lack of reliable data on supply and consumption chains to estimate the national requirements for controlled medicines,

- limited financial resources, and

- problems in procurement and sourcing.

Affordability of controlled medicines is another key concern for patients in the global south. As pointed out in our previous reports, most of the morphine produced globally is converted into other drugs with higher profit margins, such as codeine for cough medicine, instead of being used for palliative care in low-income regions.

While low and middle-income countries struggle to obtain affordable controlled substances and thus might have been hard-hit, countries in North America continue to battle the dire consequences of the opioid overdose epidemic. When inadequate
controls contributed to the exponential increase in the prescription of strong opioids, such as oxycodone and fentanyl, the result was an enormous increase in overdose deaths and the number of people dependent on opioids.

Given such extremes in global distribution of internationally controlled essential medicines and the increasing economic hardship faced by most economies, what are some of the actions that Governments, and us, the international community, can take to accelerate our efforts in improving this situation?

INCB recommends that Governments consider allocating sufficient resources to ensure the adequate availability of controlled substances and encourages countries to review pricing and production policies of medicines for low-and middle-income countries.

Furthermore, the Board also invites countries to increase the amount of morphine destined for palliative care use and to give low- and middle-income countries the possibility of purchasing affordable morphine instead of expensive synthetic opioids.

To reduce dependence on imports and increase the affordability of controlled substances, INCB also recommends the strengthening of national and/or regional production of pharmaceuticals in their generic forms, so that cheaper procurement with shorter delivery time can be possible for more countries.

When it comes to people who inject drugs, governments and medical authorities should also consider using methadone and buprenorphine in opioid agonist therapy programmes.

There is no doubt that some progress has been made since 2019, when our shared commitment to ensuring equitable access and rational use of controlled substances was reaffirmed in the 2019 Ministerial Declaration. However, it is necessary to
accelerate efforts in this regard to ensure that this goal is enshrined in all national drug control policies and practices.

INCB is committed to continuing to work with and assist Member States and the international community towards ensuring safe access to and rational use of controlled medicines while preventing diversion.

Coming together is a beginning, staying together is progress, and working together is success.

I look forward to more learning among countries and stronger inter-agency collaboration, as demonstrated in today’s event, for a greater impact of our work.

Thank you and I wish you all good health.