



European Union

**Statement on the occasion of
the 63rd Session of the Commission on Narcotic Drugs
Vienna, 2 - 6 March 2020**

Agenda Item 5 (d): Implementation of the international drug control treaties:
International cooperation to ensure the availability of narcotic drugs
and psychotropic substances for medical and scientific purposes
while preventing their diversion

Distinguished Chair,

I have the honour to speak on behalf of the European Union and its Member States.

The EU and its Member States insist on the importance of the access to and availability of controlled substances, whilst also acknowledging the potential for the diversion and misuse of these medications.

The Single Convention on Narcotics Drugs of 1954 as amended by the 1972 Protocol as well as the Convention on Psychotropic Substances of 1971 recognizes the medical use of narcotic drugs and psychotropic substances and their indispensable role in pain relief for which countries need to ensure their availability and make adequate provision: the use of narcotic drugs and psychotropic substances for medical and scientific purposes is indispensable and their availability for such purposes should not be unduly restricted.

The importance of making internationally controlled substances available and accessible for medical and scientific purposes was reaffirmed in the Outcome Document of the special session of the General Assembly on the world drug problem held in 2016: an entire section of the document is dedicated to ensure the availability of and access to controlled substances exclusively for medical and scientific purposes, while preventing their diversion. The UNGASS Outcome Document contains specific operational recommendations to do so.

Last year, the Ministerial Declaration on *“Strengthening Our Actions at the National, Regional and International Levels to Accelerate the Implementation of Our Joint Commitments to Address and Counter the World Drug Problem”* reiterates its resolve to ensure access to and the availability of controlled substances for medical and scientific purposes, including for the relief of pain and suffering, and the need to address existing barriers in this regard, including affordability.

Furthermore, ensuring the availability and accessibility of controlled substances was called for by the Commission on Narcotic Drugs, the World Health Assembly and the Economic Social Council in a number of their resolutions and by the INCB reports and UNODC technical guidance on the topic.

Despite the efforts made, and the work of the United Nations System Coordination Task Team, the document circulated at the sixty second session of the Commission on Narcotic Drugs entitled *“What we have learned over the last ten years: a summary of knowledge acquired and produced by the UN system on drug related matters”* draws attention to the large burden of untreated pain around the world and specifically mentions the limited capacity of healthcare professionals, due to the lack of university curricula on the use of pain medicines that are evidence based, as a barrier to the accessibility of controlled medicines.

The imbalance in the availability of and access to opioid analgesics is particularly troublesome. The use of internationally controlled substances such as methadone and buprenorphine is still limited in some countries, and the availability of and access to narcotic drugs and psychotropic substances show considerable disparities among countries and regions of the world. Still not all people who are in need of treatment requiring the use of narcotic drugs and psychotropic substances, are receiving the treatment or medicines that can help alleviate their health conditions. On the other hand, inadequate prescription practices, unjustified promotion and unregulated availability of controlled substances result in negative consequences and their non-medical use has become detrimental to public and individual health in several sub regions worldwide.

Applying the spirit of the international drug control conventions calls for the removal of barriers that can limit the availability and accessibility of controlled substances for medical and scientific purposes. Legal and regulatory frameworks and clinical guidelines based on rational prescription practices can help increase accessibility to controlled substances, including pharmaceutical opioids, while reducing the risk of their diversion. However, the inadequate interpretation of the international drug control systems in place may inadvertently limit the availability of and access to these medicines.

Based on the views of Member States' national authorities and civil society organisations, it is evident that the barriers to the availability of controlled substances for medical and scientific purposes arising from cultural issues and biases are gradually being reduced; and there are more obstacles such as lack of training or awareness of healthcare professionals, problems with funding sources and limited financial resources.

The resolution proposed by the European Union and co-sponsored by Australia for this 63rd session of the CND "*Promoting awareness-raising, education and training as part of a comprehensive approach to ensuring to and the availability of controlled substances for medical and scientific purposes and improving their rational use*" is a testimony of the EU's commitment on those important issues.

Mr Chair, Efforts to achieve the Sustainable Development Goals and to effectively address the world drug problem are complementary and mutually reinforcing. Increasing access to controlled substances for medical and scientific purposes is included in Sustainable Development Goal 3.8, focusing on access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all. We encourage Member States to further develop national drug control policies in line with that.

Thank you very much, distinguished Chair.
