

## **Multi-national Panel at CND Side Event Reflects on Strategies to Improve the Availability of Controlled Medicines**

**Katherine Pettus, PhD**

The side event “Improving Access to Controlled Medicines in the Context of the SDGs,” was hosted by the Governments of Lithuania Panama, and Mexico, International Association for Hospice and Palliative Care (IAHPC), Human Rights Watch, and many partner NGOs. Dr. Lukas Radbruch, Chairman of the Board of IAHPC, and a palliative care physician himself, proved a skilful moderator, reflecting on the cruelty of being unable to provide morphine to patients in severe pain.

Dr. Marie Paul Kieny, Assistant Director General of the World Health Organisation, Health Systems and Innovation, opened with a powerful presentation on the WHO’s obligations regarding a proactive public health approach to drug policy, whose “new pillar” she said, was improved access to controlled medicines. Dr. Kieny emphasised the central role of oral morphine, the WHO’s “gold standard” for pain control, which is largely unavailable, unaffordable, and inaccessible, in more than 80% of the world as a result of unduly restrictive regulations and lack of healthcare provider training. She informed the audience that,

“Noncommunicable diseases, like cancer, are rising everywhere. In low- and middle-income countries, where cancer diagnosis often comes late, the demand for palliative care will also increase. Yet it is in these very countries that palliative care and pain relief are least available. As countries strengthen their health systems and move towards universal health coverage, they must pay special attention to the issue of controlled medicines and address the barriers to access through better legislation, evidence based policies and raising awareness of health professional and the public.”

Dr. Mabvuto Kango, representative of the African Union, presented a summary of the Common African Position for UNGASS, highlighting its explicit public health approach, which calls for

“Greater support to ensure the provision of opiates and other essential and controlled medicines for palliative care and pain relief, as enshrined in the international drug conventions; to remove barriers that prevent the import, distribution and use of these essential medicines. This includes ensuring functioning and effective supply systems through regulation, data management, access and reporting, and capacity building, in line with the African Common Position on Controlled Substances and Access to Pain Management Drugs.”

Dr. Kango said that, given that the AU “takes into account that the SDGs are founded on human rights and addressing inequalities, “this position is in line with the SDGs as it speaks to the issue of access to pain killers which is a human rights issue and inequality matter.”

Sergio Chaparro, presenting for the Colombian human rights organisation Dejusticia, emphasised the fact that access to controlled medicines for the treatment of pain, palliative care, and substance use disorder, is a human right, and that Article 103 of the UN Charter is effectively a “supremacy clause” which declares that human rights law prevails over other treaties, including the drug control treaties. Mr Chaparro stated that

“Drug control policy has two main objectives: to secure availability of narcotic drugs for medical and scientific purposes, and to prevent their misuse. However, very often, the second objective has received extreme focus to the extent of overshadowing the first - to the detriment of people’s basic rights. A drug policy that imposes extreme barriers to the accessibility of pain relief medicines clearly contradicts a human rights approach to access to medicines. ... An effective and just international regulation on drugs cannot escape the human rights framework.”

Dr. Olatz Aguirre, Deputy Executive Director for Health Promotion at the the Federal Commission Against Sanitary Risks in Mexico, spoke about implementing the National Strategy of Palliative Care and Pain Relief, which involves using QR codes for prescriptions, online applications for prescription pads, training and awareness courses, and other strategies. The result has been impressive so far:

“More than eight months after the strategy was launched, we have increased in 172% the number of physicians who have special prescription pads compared to 2014. The amount has increased gradually, which confirms that adjusting the access to this type of prescriptions is not diverting abuse. The number of prescriptions supplied in pharmacies has increased by 986% in the same period. Thanks to the process of validation, we know how many prescriptions have been provided and their specific location, allowing us for more targeted campaigns and surveillance. Furthermore, the system provides information on the most prescribed active substances; up to date, 39% of the opioids prescribed are morphine, followed by 37% of fentanyl.”

The Mexican government initiative was launched in response to the very critical 2014 Human Rights Watch Report .

Werner Sipp, President of the International Narcotics Control Board, briefly reviewed the new INCB Supplement on Ensuring Access to Controlled Medicines. One of the main findings of the Report discussed in an EAPC blog, is that member states identified “lack of training and awareness of health professionals” as the main barrier to availability of controlled medicines. UN member states with more resources and trained personnel can address the INCB recommendations to bridge this capacity building gap under the international law principle of mutual and shared responsibility. Dr Sipp also commented that "A comparative analysis by UNODC of the consumption of opioid analgesics and the prevalence of their misuse is reported by high-income countries such as Australia, Canada and the United States and by lower-middle-income countries such as Nigeria and Pakistan, which have the lowest per capita consumption of opioids for medical purposes. This suggests that the misuse of prescription opioids does not necessarily follow from

making opioids accessible or available for medical purposes."

Dr. Gilberto Gerra, Chief of the Drug Prevention and Health Branch at the United Nations Office on Drugs and Crime (UNODC), reviewed his office's work to raise the profile of lack of access to controlled medicines and presented a collaboration involving the governments of Australia and Belgium to support pilot programs in Ghana, Timor L'Este, and the Democratic Republic of Congo.

The packed, standing room only, side-event was attended both by representatives of member states as well as by employees of UN organisations and non-governmental organisations. For more information about International Association for Hospice and Palliative Care, including terrific membership benefits see <http://www.hospicecare.com>.

