UNITED NATIONS

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LAWS AND REGULATIONS

PROMULGATED TO GIVE EFFECT TO THE PROVISIONS OF
THE INTERNATIONAL TREATIES ON NARCOTIC DRUGS

NORWAY

Communicated by the Government of Norway

NOTE BY THE SECRETARY-GENERAL – In accordance with the relevant Articles of the International Treaties on Narcotic Drugs, the Secretary-General has the honour to communicate the following legislative texts.

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E/NL.1966/51

ACT OF 20 JUNE 1964

relating to Medicaments and Poisons, etc.

PART I

Scope of the Act-Definitions

Article 1. This Act relates to:

(1) Medicines and certain other goods for medicinal use.

(2) Poisons and other harmful substances.

This Act does not relate to goods which are governed by special legislation relating to measures to combat plant diseases.

Article 2. Medicines under this Act mean substances, drugs and preparations which are designed or stated to be for the prevention, alleviation or treatment of human or animal illness or pain, or for internal or external use for the purpose of diagnosing illness. The Crown may issue more detailed regulations governing what shall be deemed to be medicines. It may be stipulated in the regulations that certain substances, drugs or preparations shall always be deemed to be medicines, irrespective of whether they can also be used for other purposes, and that certain substances, drugs or preparations, although coming under the provision in the first sentence, shall not be deemed to be medicines.

The Crown may issue regulations with respect to what shall be deemed to be poisons and harmful substances.

Regulations as mentioned in the first and second paragraphs in this article shall be issued on the recommendation of the Committee mentioned in Article 3. Such regulations shall be reviewed at least every five years for the purpose of revision. During the intervening period the Ministry may make alterations and amendments to the regulations on the recommendation of the Committee.

In cases of doubt the Ministry decides whether an article shall be deemed to be a medicine, poison or harmful substance under this Act and regulations.

Article 3. The Crown shall appoint a committee of five members for a 4-year period, which shall be the advisory body when issuing provisions in accordance with Article 2. One member of the Committee shall be a pharmacist and two shall be representatives of commerce and industry.

PART II

Manufacture of Medicines other than in a Pharmacy

Article 4. The Crown may issue regulations stipulating that the commercial manufacture of certain medicines may only be carried out in a pharmacy. Pursuant to the provisions contained in the regulations, the Ministry may on specified conditions make exceptions by granting special permission to manufacture such medicines elsewhere than in a pharmacy.

When not otherwise stipulated pursuant to this Act, any one who, for commercial purposes, wishes to manufacture medicines other than in a pharmacy must obtain a licence from the Ministry concerned, which may stipulate special conditions for such licence.

The manufacture of such goods shall be conducted by a responsible person approved by the Ministry. This person shall have the training and experience required to become a pharmacist, or must otherwise prove that he has the necessary professional training.

The Ministry may issue more specific regulations relating to the manufacture of medicines other than in a pharmacy, and may demand the details and information deemed necessary for the purpose of supervising and controlling such preparations.

Article 5. A licence pursuant to Article 4 may be cancelled by the Ministry:

1. When manufacture has not commenced, or has been stopped and is not resumed within a time-limit determined by the Ministry.
2. When the person to whom a licence has been granted dies or retires, or approval is withdrawn.
3. When other conditions on which a licence has been granted are not observed or manufacture is not carried out in accordance with the provisions in force and in a proper professional manner.

Approval pursuant to the third paragraph of Article 4 may be withdrawn by the Ministry if, in spite of a warning, the responsible person breaks or neglects his obligations or must be regarded as permanently unsuitable to be in charge of such manufacture.

PART III

Sale, Import and Export of Medicines

Article 6. Medicines, with the exceptions stipulated by or pursuant to the law, may only be sold by pharmacies and the Norwegian Medical Depot. Articles deemed to be medicines according to this Act may be sold by manufacturers and merchants for technical, scientific and other non-medical use in accordance with the provisions of Part XI.

The Crown may decide that certain commonly used medicines for which no prescription is required, may be sold by merchants without special licence in accordance with regulations issued by the Ministry. Before such a decision is made the opinion of the Committee mentioned in Article 3 shall be obtained.

Article 7. The Norwegian Medical Depot has the sole right to:

1. Sell to pharmacies medicines and other substances, drugs and preparations which are to be used for the preparation of medicines;
2. Import and export medicines.

The Ministry may, by issuing general regulations or in individual cases, make exceptions to such sole right of the Norwegian Medical Depot.

The Norwegian Medical Depot has the right to sell other articles used for health and nursing purposes or which are normally sold by pharmacies.

Article 8. The Norwegian Medical Depot may only sell medicines to:

1. Pharmacies.
2. Manufacturers having a licence pursuant to Article 4.
3. Merchants having a licence to sell the same articles in accordance with the second paragraph of Article 9.
4. Public and officially approved laboratories and scientific institutions and similar institutions or industries as specified by the Ministry.

Subject to rules issued by the Ministry the Norwegian Medical Depot may sell articles deemed to be medicines under this Act to purchasers other than those mentioned above, when it is established that the articles are to be used for technical, scientific or other non-medical purposes.

The Ministry may grant permission to the Norwegian Medical Depot to sell certain medicines direct to hospitals or other medical institutions.

Article 9. Manufacturers having a licence pursuant to Article 4 may sell medicines which they have manufactured to the Norwegian Medical Depot.

The Ministry may grant permission to manufacturers and merchants to sell certain medicines to pharmacies as well as to other purchasers mentioned in Article 8 when this is deemed expedient. The Ministry may specify further conditions for such sales.

Article 10. The Crown shall issue general regulations governing the import and sale of medicines, including regulations for declarations, statements or certificates to be produced or submitted by purchasers or importers and relating to precautionary measures which shall be observed when delivering such articles.

Article 11. The Crown may forbid the sale of medicines which must be regarded as ineffective, obviously useless or harmful. Before a decision is made the matter shall be submitted to the Specialities Committee mentioned in Article 19 for its opinion.

PART IV

Pharmacopoeia

Article 12. Regulations governing the purity, production, handling and storing, etc. of medicines shall be stipulated in a Norwegian Pharmacopoeia approved by the Crown. The Pharmacopoeia shall also include rules relating to the name and description of medicines and dosage forms (nomenclature).

The Pharmacopoeia, as well as alterations and amendments to same, shall be prepared by the Pharmacopoeia Commission appointed by the Crown. The Crown may issue further regulations relating to the functions of the Committee and to the contents of the Pharmacopoeia.

The directions contained in the Pharmacopoeia shall apply to all persons permitted to manufacture or sell medicines, but not to merchants who sell medicines for which no prescription is required according to the second paragraph of Article 6. In individual cases the Ministry may make exceptions to these provisions.

PART V

Pharmaceutical Specialities

Article 13. Pharmaceutical specialities in the sense of this Act are medicines which are not produced in pharmacies and which are marketed or sold in a wrapper designed for the individual consumer (including doctors, dentists, veterinary surgeons or hospitals).

The Crown may decide that certain medicines which are produced in pharmacies and are sold to other pharmacies shall also be deemed to be pharmaceutical specialities when this is deemed to be expedient.

Article 14. A pharmaceutical speciality must not be marketed or sold until it has been approved by the Specialities Committee (see Article 19).

Approval is granted on the basis of an evaluation of the nature of the preparation, its contents, quality and keeping quality. Approval shall only be given for preparations which are medically justified and which are considered to be needed.

Article 15. Approval as required for pharmaceutical specialities shall not be given for simple preparations which can without difficulty be produced in a pharmacy or for preparations consisting of unmixed drugs or chemicals.

Nor shall approval be given for preparations for which the existing Pharmacopoeia, or other approved collections of medicinal formulae, contain definite directions for production.

Exceptions to the first and second paragraphs of this Article may be made when it is considered to be an obvious advantage that the preparation is made and sold as a speciality, when the preparation represents a new medical principle or when there are other special reasons for doing so.

Article 16. Before a pharmaceutical speciality is marketed or sold the name, price, size of packet and wrapping must be approved by the authority empowered by the Crown.

When approving the price of a pharmaceutical speciality it must be taken into consideration that the price shall not be disproportionate to its value. The price of similar preparations produced by other manufacturers, and available information about the cost of manufacturing the preparation must also be taken into consideration.

It may be required that the price be amended before the period of registration has expired should altered circumstances or new information indicate such action.

Information having a bearing on the determination of the price may be requested when application for approval is submitted, and later when the matter of price-amendment is taken up for consideration.

Article 17. Approval given for a preparation applies for a period of five years. Renewal may not be refused for the reasons mentioned in the first and second paragraphs of Article 15. Provisional approval may be granted for a shorter period.

Approval may be made conditional on the preparation being only for the use of certain hospitals and doctors when this is deemed expedient.

Approval may be withdrawn before the expiry of the stipulated five years if:

1. The preparation is no longer regarded as being medically justified.
2. The preparation is not placed on the market.
3. The composition of the preparation differs from the composition registered.
4. A request for reduction in price is not complied with within a specified period.
5. The regulations governing pharmaceutical specialities are not complied with.

Article 18. The Crown may issue more detailed regulations governing the approval, sale and control of pharmaceutical specialities.

The Crown may make exceptions to the claim for approval according to Articles 14 and 16.

The regulations may stipulate special fees for covering expenses incurred in approving, controlling and examining pharmaceutical specialities.

Article 19. The Ministry shall appoint a Specialities Committee to decide all cases relating to approval of specialities and the withdrawal of approval granted in accordance with Articles 14 and 17. The Committee shall consist of five members. The Director-General of Health shall be the chairman, one member shall be a physician and one a person whose qualifications comply with those required for obtaining a pharmacist's licence. The Ministry shall issue further regulations governing the functions of the Committee.

The decisions of the Specialities Committee cannot be appealed against. Appeals as to the interpretation of the law must be submitted to the Ministry within one month.

PART VI

Narcotics, etc.

Article 20. The Crown shall determine which substances, drugs or preparations (narcotics, etc.) shall be subject to the provisions of this Part, and shall issue regulations governing the manufacture, marketing (sale, purchase, other transfer and brokerage), import, export, (transit), delivery, dispatch and storing of same, as well as regarding cultivation of plants to be used for the manufacture of such articles.

The regulations may prohibit the preparation, marketing, import, export and transit of certain narcotics, etc. Such regulations shall also apply to free ports and bonded and transit warehouses.

Article 21. Narcotics, etc. may only be manufactured as expressly provided for in the licence granted according to Article 4 or Article 33.

Unless otherwise stipulated in the regulations narcotics, etc. may only be imported, exported or carried in transit by special permission granted in each individual case and under the conditions stipulated in the permit or regulations. Permission shall be granted by the authority empowered by the Crown.

Marketing, delivery and dispatch of narcotics, etc. may only be permitted for medical and scientific use in accordance with the regulations in force.

Manufacturers and merchants shall be obliged to give the reports and information required by the Ministry.

Article 22. It is forbidden to be in possession, without legal access, of narcotics etc. or to obtain such articles under false pretences, e.g. false name, address, illness or symptoms of illness.

Such articles may not be used for purposes other than those for which they are supplied, and may not, without legal consent, be surrendered to or acquired by any person other than the one to whom the prescription or requisition is issued. Prescriptions or requisitions may not be surrendered to or acquired by persons other than those to whom they are issued.

Article 23. Statutory professional secrecy shall not be a bar to informing the Director-General of Health of the possible abuse of narcotics, etc.

Doctors, dentists, veterinary surgeons, pharmacists and managers of pharmacies, temperance committees and the police shall on request give the Director-General of Health information about persons suspected of abuse of narcotics, etc. or of certain alleged cases of abuse or contravention of legal provisions or regulations governing these articles. In criminal cases or actions for confiscation owing to the contravention of such provisions the Court may accept evidence relating to such circumstances irrespective of Article 178 of the Criminal Procedure Act.

Information regarding abuse given to the Director-General of Health in accordance with this section, or with which he has otherwise become acquainted, may be passed on by him without regard to professional secrecy, to doctors, pharmacies and temperance committees, and also to the police if there is reason to suspect that an illegal act has been committed.

PART VII

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PART VIII

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PART IX

Certain Goods which are not Medicines

Article 28. The Crown may decide that articles which are not deemed to be medicines according to this Act, but which are sold for special medical purposes, or for other special health and nursing purposes, shall be subject to special control in order to ensure that such articles comply with regulations made to safeguard life and health.

Regulations for such control may be issued by the Crown. The regulations may stipulate the requirements with which the goods must comply, and lay down that manufacturers and merchants shall be approved by the Ministry or some other authority.

PART X

Advertising of Medicines etc.

Article 29. Advertising of medicines must be sober and true and must be approved in advance by the authority empowered by the Crown.

The Crown may issue general regulations concerning the advertising of medicines, including the distribution of samples for advertising purposes. The regulations may prohibit certain forms of advertising.

Article 30. It is forbidden, in advertising, etc., to state directly or indirectly by means of the wording or illustrations that a product is recommended for prevention, alleviation or treatment of human or animal illness or pain, when the commodity is marketed in a manner other than that prescribed for medicines. The Ministry may make exceptions to this provision in special cases.

[1] Note by the Secretariat: The sections which are not relevant to narcotics control have been omitted.

In the event of violation of this provision the Ministry may direct the manufacturer or advertiser to issue or publish an approved correction in the same manner in which the illegal advertisement has been issued or published.

If, in spite of a warning, the commodity continues to be advertised in contravention of the provisions contained in the first paragraph, the Court may prohibit such article to be sold under the name used in the illegal advertisement.

Article 31. An advertisement must not, in wording or illustration, or in any other manner, directly or indirectly, give false, misleading or deceptive information regarding the medical effect or properties of an article. The last two paragraphs in Article 30 similarly apply.

The Crown may, by regulations, or in individual cases, prohibit the advertising to the public of an article or group of articles, when there are special reasons for so doing.

PART XI

Poisons and other Harmful Substances

Article 32. With the exceptions stipulated by or pursuant to the law, the provisions of this Part shall apply to all poisons and harmful substances for technical, scientific and other non-medical use.

The provisions in Parts II - X apply to poisons and harmful substances which are to be used as medicines.

Article 33. Any person wishing, for commercial purposes, to manufacture poisons must obtain a licence from the Ministry, which may stipulate further conditions for such licence.

The manufacture of such articles shall be conducted by a responsible person approved by the Ministry. This person must prove that he has the required professional training.

The provisions contained in Article 5 governing the withdrawal of a licence or approval similarly apply.

Article 34. Poisons may be sold only by:

1. Licenced pharmacies.
2. The Norwegian Medical Depot.
3. Manufacturers who have a licence in accordance with Article 33. The right of sale applies only to articles which they have manufactured themselves.
4. Merchants who have a licence from the Ministry. The licence may be made subject to further conditions.

The Ministry may stipulate by general regulations, or in the licence pursuant to items 3 and 4 above, to whom poisons may be sold.

Sale by merchants shall be under the management of a responsible person approved by the Ministry and who must prove that he has the necessary professional training or experience. The provisions in Article 5 relating to the withdrawal of a licence or approval similarly apply.

Article 35. Poisons may be imported only by:

1. The Norwegian Medical Depot.
2. Merchants who are licensed to sell the same articles pursuant to Article 34.
3. Manufacturers who are licensed to manufacture medicines or poisons pursuant to Article 4 or Article 33.
4. Other manufacturers, industrialists or artisans for the purpose of using them as raw materials or technical aids in their industries.
5. Other industries, institutions or persons granted special permission by the Ministry to import such articles.

Those mentioned in items 1, 2, 3 and 5 above may also export such poisons.

Article 36. The Crown may decide that the Norwegian Medical Depot shall have the sole right to import, export and sell certain poisons.

The Ministry may, by general regulations, or in individual cases, make exceptions to such sole right of the Norwegian Medical Depot to sell poisons.

Article 37. The Crown may issue regulations governing:

1. Manufacture, import, marketing, storing and dispatching of poisons,
2. Storing, dispatching and marketing of harmful substances which are not deemed to be poisons, and
3. The supervision of such substances.

The regulations may stipulate that certain harmful substances shall be subject, in whole or in part, to the same provisions as poisons.

Article 38. Poisons and harmful substances may not be imported or marketed unless the type and quantity of poisonous or harmful substances are stated on the wrapping, or are in some other way labelled in accordance with the regulations.

The regulations may include exceptions from the provision in the first paragraph and may stipulate provisions governing labelling, warnings, directions for use and other information, etc. which shall be stated on the wrapping or enclosed with the article when placed on sale.

PART XII

Miscellaneous Provisions

Article 39. Where there is any doubt as to whether an article which is to be imported or marketed contains substances governed by the provisions of this Act, the Ministry may request information from the manufacturer or importer regarding the substances contained therein where necessary for the purpose of deciding the matter.

The Ministry may forbid the import or sale of an article until such information has been supplied.

Article 40. Any person having medicines, poisons or harmful substances in his possession must keep them in a safe place and handle them with care and caution.

If the label or other information indicates that an article contains poisonous or harmful substances, the user is obliged to acquaint himself with the directions for use and warnings printed on the label or enclosed with the article and to comply with same.

Article 41. Any person who, by virtue of his position or assignment, in accordance with this Act obtains knowledge of any industrial or commercial secrets or of any person's physical or pathological condition, or knowledge or any other circumstances not generally known, must not disclose such information, subject however to the limitations which ensue from his duties according to the Act. Anyone who becomes acquainted with such information shall not make use of it for business purposes.

Article 42. Any person who is granted a licence or permission under this Act to manufacture, sell, import or export medicines or poisons must conform to the rights or obligations which he has or acquires in accordance with this Act, being amended by a new Act or by new general regulations issued by virtue of an Act.

Licences and permits may be granted for a limited period.

PART XIII

Penalties - Confiscation

Article 43. Any person who intentionally or by negligence violates this Act, or regulations, prohibitions or orders issued by virtue of this Act, is punishable by fines, or by imprisonment of up to three months, or both.

The same applies with regard to aiding and abetting. Attempted infringement is punishable as an accomplished offence.

If the punishable offence relates to narcotics, etc. which are governed by Part VI of this Act, the offender is punishable by fines, or by imprisonment up to two years, or both.

Article 44. The Court may decide that goods or the value of goods which are, or are attempted to be manufactured, sold, handed over, acquired, imported, exported or dispatched in violation of this Act, or contrary to provisions issued by virtue of this Act, may, by judgment of a Court, be confiscated from the offender or from the person on whose behalf he has acted or who has benefited therefrom. Such goods may be confiscated irrespective of criminal proceedings having been instituted or the possibility of instituting such proceedings against any person.

If such violation concerns narcotics, etc. the article with its appurtenant wrapping shall be confiscated, irrespective of who possesses it or owns it. Claim for confiscation of such article may be made effective against the offender or the holder thereof without the owner being made a part to the proceedings.

Article 45. The Ministry shall decide what shall be done with confiscated medicines, poisons and harmful substances.

The Ministry shall also decide what shall be done with narcotics, etc. deemed to be lost property.

PART XIV

Entry into Force - Transitional Provisions

Article 46. This Act shall come into force from the time the Crown shall decide*/. On the same date the following Acts shall be repealed:

Article 47. Amendments in other Acts.

Article 48. Regulations issued in accordance with the Acts mentioned in Articles 46 and 47 shall continue to be in force so far as they are not incompatible with the provisions of this Act, until they are repealed or superseded by provisions issued in accordance with this Act.

Licences, permits and approvals given in accordance with the Acts mentioned in Articles 46 and 47 shall continue to be valid insofar as they are not incompatible with the new Act and regulations. The Ministry may decree that licences, permits and approvals shall be renewed in accordancce with the new Act, and that applications for renewal must be submitted within a set time-limit and made known by the Ministry.

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*/ In force from 1 April 1965.

E/NL.1966/52

NARCOTIC DRUGS REGULATIONS 1965

Contents.

ROYAL DECREE

of 6 January 1965

I. Pursuant to articles 20 and 21 of the Medicaments and Poisons etc., Act of 20 June 1964[2/], regulations concerning narcotic drugs, etc., shall be prepared in accordance with a draft submitted.

II. The regulations shall enter into force on 1 April 1965. From that date the regulations of 30 December 1930 concerning the import of, trade in, dispatch, carriage in transit, export and manufacture of opium etc., shall cease to apply.

REGULATIONS CONCERNING NARCOTIC DRUGS ETC.

6 January 1965

(Issued pursuant to articles 20 and 21 of the Medicaments and Poisons, etc., Act of 20 June 1964)

Article 1

Scope of the Regulations.

1. The provisions of chapter VI of the Medicaments and Poisons, etc., Act of 20 June 1964 shall apply to the substances, drugs and preparations which are considered to be narcotic drugs for the purposes of the international Conventions on narcotic drugs. (cf. Schedule I).

2. The Ministry may make the provisions likewise applicable, either in whole or in part, to other substances and preparations readily liable to abuse, e.g. amphetamine[3/] and the like.

3. The Ministry may exempt particular substances or preparations from the application of the provisions if it considers that such exception entails no risk.

4. The manufacture, import, export and carriage in transit, trade in, possession and use of the narcotic substances listed in Schedule II are prohibited. The Ministry may, in individual cases, make exceptions in respect of specific quantities of the said substances for the purposes of medical or other scientific research.

2/ Note by the Secretariat: E/NL.1966/51.

3/ Note by the Secretariat: Proposed or recommended international non-proprietary names of drugs are underlined.

5. The relevant provisions of the legislation concerning medicaments and poisons shall, save as may be provided otherwise, govern the manufacture of, trade in and import, export, carriage in transit, supply, dispatch and storage of narcotic substances.

Article 2

Import.

1. The import of narcotic substances as referred to in article 1 may be effected solely under a separate authorization issued by the Ministry of Social Affairs for each occasion and each individual consignment. The application for an import authorization shall specify:

(a) The name and address of the applicant and of the exporter concerned;

(b) The nature and quantity of the goods and, in the case of preparations, the nature and quantity of the narcotic substance they contain;

(c) The Customs post through which, and the estimated time at which, import is to take place.

Before an authorization is issued, the applicant shall satisfy the Ministry that the narcotic substance which he seeks to import will be used solely for lawful, medical or scientific purposes.

2. The authorization shall be made out in conformity with a model established by the Ministry. The Ministry shall send a copy of the authorization to the Customs post through which import is to take place. The import authorization shall be valid for three months from the date of its issue. In special cases the Ministry may agree to extend the period of validity.

3. A package containing narcotic substances shall, when imported, bear a label specifying the nature and quantity of the contents. The label shall not be affixed to the outer packaging.

4. When the consignment reaches the country, the Customs authority shall satisfy itself that the narcotic substances are as stated in the import authorization and that they are intended for and are delivered to the party to whom the authorization was issued. The Customs authority shall certify on the copy of the import authorization received by it from the Ministry that the substances have been imported, cleared through the Customs and delivered to the importer, and shall then return the copyto the Ministry.

5. The importer shall, immediately after receiving the narcotic substances, notify the Ministry specifying the exact quantities he has received.

6. When the import has been effected or the prescribed time-limit has expired, the Ministry shall return the export authorization received from the competent authority of the exporting country with an endorsement showing the quantity actually imported.

7. A traveller carrying narcotic medicaments for his personal use shall, when so required by the Customs authority, produce a medical certificate attesting to his need of such medicament unless the label on the package shows that the medicament has been prescribed for his personal use as a patient. The quantity of narcotic substance carried by the traveller shall not exceed one week's consumption at the stated dosage.

Article 3

Export.

1. The provisions of article 2 shall apply 'mutatis mutandis' to the export of narcotic substances. Before an export authorization is issued, the applicant shall produce the

corresponding import authorization for the same substance and quantity issued by the competent authority of the importing country. The export authorization shall specify the number and date of the import authorization and the authority which issued it. A copy of the export authorization shall be sent to the competent Customs post and to the competent authority of the importing country.

2. The Customs authority shall endorse the authorization when the consignment has been exported and shall return to the Ministry, with an endorsement certifying the export, the copy of the authorization received by it from the Ministry.

3. The export of narcotic substances to a customs warehouse is prohibited unless the Government of the importing country certifies on the import authorization that it has approved the import for deposit in a customs warehouse. In such a case the export authorization shall specify that the consignment is being exported for deposit in a customs warehouse.

4. When the consignment is withdrawn from the Customs warehouse, the authorities having jurisdiction over the warehouse shall produce an import authorization issued by the country of destination. For every consignment thus withdrawn or exported, the competent authority shall issue a special authorization which shall take the place of the export authorization referred to in paragraph 1 above.

5. Exports of consignments to a post-office box, or to a bank to the account of a Party other than the Party named in the export authorization, shall be prohibited.

Article 4

Carriage in Transit

1. Subject to such limitation as may derive from international agreements on goods in transit, narcotic substances may not be conveyed through Norwegian territory otherwise than under an authorization issued by the Customs authority. Such an authorization shall not be issued until a copy of the export authorization has been produced and the Customs authority shall prevent the goods from being forwarded to a place other than that specified in the export authorization unless the Ministry so permits. The permit which shall state the name of the original exporting country shall not be issued until the Ministry has received, from the competent authority of the country to which it is desired to re-route the consignment, the import authorization referred to in article 3, paragraph 1. If a permit is granted, the Ministry shall return to the foreign authority which issued the authorization, with particulars of the changed destination, the copy of the export authorization or of the permit.

2. The provisions of paragraph 1 above shall not apply to postal consignments which are under the control of the Post Office and which are sent on to a destination abroad immediately after arrival. Moreover, the said provisions shall not apply to a consignment by air unless the aircraft lands on Norwegian territory. In such a case the said provisions shall be applied so long as the circumstances so require.

Article 5

Bonded warehouses and transit warehouses.

1. The Medicaments and Poisons Act of 20 June 1964 and these Regulations shall apply as appropriate to free ports, bonded warehouses and transit warehouses.

2. When in transit or in a Customs warehouse, the substances must not be subjected to any process which may change their nature. The packing must not be altered without the permission of the competent authority.

Article 6

Special provisions concerning narcotic substances in first-aid kits of vessels or aircraft engaged in international traffic.

1. If a vessel or aircraft in international traffic carries limited quantities of narcotic substances intended for first-aid purposes or for use in an emergency during the voyage or flight, this shall not be deemed to constitute import, export or carriage in transit within the meaning of these Regulations.

2. Narcotic substances carried by a vessel or aircraft in accordance with paragraph 1 above shall be subject to the laws and regulations of the country of registry without prejudice however to access for the purpose of carrying out checks, inspections or other control measures on board the vessel or aircraft.

3. The use in an emergency of narcotic substances as referred to in paragraph 1 above shall not be considered as a violation of the provisions of the Medicaments and Poisons Act of 20 June 1964 or of these Regulations.

Article 9

Control (book-keeping).

1. Every person who imports, exports, purchases, sells or wholesales any of the narcotic substances referred to in article 1, paragraph 1, shall keep books or records thereof in accordance with detailed provisions laid down by the Ministry. The books shall record the date of import, export, purchase, sale or supply and exact description of the substances, their net weight and the names of the purchaser and of the vendor.

2. In respect of supplies to the public from a pharmacy on a physician's, dentist's, or veterinary surgeon's prescription, in respect of permitted over-the-counter sales and in respect of supplies to the public by physicians and veterinary surgeons who are entitled to dispense medicaments, the pharmacy, physician or veterinary surgeon concerned shall keep books or records in the manner prescribed by the Ministry.

3. The Ministry may require hospitals or scientific institutions to keep books or records showing the quantities of narcotic substances purchased and used.

4. Excerpts from the books or records shall be communicated to the Ministry if and when required. The books or records shall be produced for inspection when so required by the Ministry or by a person authorized thereto by the Ministry. In addition, the persons concerned shall be under a duty to furnish such reports and information as the Ministry may deem necessary.

Article 10

Cultivation.

1. The opium poppy may not be cultivated for the production of opium or opium alkaloids otherwise than by virtue of a special licence from the Ministry of Social Affairs. The licence shall specify the extent of the area in which the cultivation is permitted.

2. The cultivation of the cannabis plant and the coca bush is prohibited.

Schedule I

Acetylmethadol[3] (3-acetoxy-6-dimethylamino-4,4-diphenylheptane)

Allylprodine (3-allyl-1-methyl-4-phenyl-4-propionoxypiperidine)

Alphacetylmethadol (alpha-3-acetoxy-6-dimethylamino-4,4-diphenylheptane)

Alphameprodine (alpha-3-ethyl-1-methyl-4-phenyl-4-propionoxypiperidine)

Alphamethadol (alpha-6-dimethylamino-4,4-diphenyl-3-heptanol)

Alphaprodine (alpha-1,3-dimethyl-4-phenyl-4-propionoxypiperidine)

Anileridine (1-para-aminophenethyl-4-phenylpiperidine-4-carboxylic acid ethyl ester)

Benzethidine (1-(2-benzyloxyethyl)-4-phenylpiperidine-4-carboxylic acid ethyl ester)

Benzylmorphine (3-benzylmorphine)

Betacetylmethadol (beta-3-acetoxy-6-dimethylamino-4,4-diphenylheptane)

Betameprodine (beta-3-ethyl-1-methyl-4-phenyl-4-proprionoxypiperidine)

Betamethadol (beta-6-dimethylamino-4,4-diphenyl-3-heptanol)

Betaprodine (beta-1,3-dimethyl-4-phenyl-4-propionoxypiperidine)

Cannabis and cannabis resin and extracts and tinctures of cannabis

Clonitazene (2-para-chlorobenzyl-1-diethylaminoethyl-5-nitrobenzimidazole)

Coca leaf

Cocaine (methyl ester of benzoylecgonine)

Concentrate of poppy straw (the material arising when poppy straw has entered into a process for the concentration of its alkaloids)

Desomorphine (dihydrodeoxymorphine)

Dextromoramide (d-2,2-diphenyl-3-methyl-4-morpholino-butyryl-pyrrolidine)/[(+)-4-(2-methyl-4-oxo-3,3-diphenyl-4-(1-pyrrolidinyl)butyl)morpholine/ [4]

Diampromide (N-(2-(N-methylphenethylamino) propyl) propionanilide)

Diethylthiambutene (3-diethylamino-1,1-di-(2'-thienyl)-1-butene)

Dihydromorphine

Dimenoxadol (2-dimethylaminoethyl-1-ethoxy-1,1-diphenylacetate)

Dimepheptanol (6-dimethylamino-4,4-diphenyl-3-heptanol)

Dimethylthiambutene (3-dimethylamino-1,1-di-(2'-thienyl)-1-butene)

Dioxaphetyl butyrate (ethyl-4-morpholino-2,2-diphenylbutyrate)

Diphenoxylate (1-(3-cyano-3,3-diphenylpropyl)-4-phenylpiperidine-4-carboxylic acid ethyl ester)

Dipipanone (4,4-diphenyl-6-piperidino-3-heptanone)

Ecgonine, its esters and its derivatives which are convertible into ecgonine and cocaine

Ethylmethylthiambutene (3-ethylmethylamino-1,1-di-(2'-thienyl)-1-butene)

Etonitazene (1-diethylaminoethyl-2-para-ethoxybenzyl-5-nitrobenzimidazole)

Etoxeridine (1-(2-(2-hydroxyethoxy)ethyl)-4-phenylpiperidine-4-carboxylic acid ethyl ester)

Furethidine (1-(2-tetrahydrofurfuryloxyethyl)-4-phenylpiperidine-4-carboxylic acid ethyl ester)

Heroin (diacetylmorphine)

4/ Note by the Secretariat: The words in square brackets have been inserted by the Secretariat.

Hydrocodone (dihydrocodeinone)

Hydromorphinol (14-hydroxydihydromorphine)

Hydromorphone (dihydromorphinone)

Hydroxypethidine (4-meta-hydroxyphenyl-1-methylpiperidine-4-carboxylic acid ethyl ester)

Isomethadone (6-dimethylamino-5-methyl-4,4-diphenyl-3-hexanone)

Ketobemidone (4-meta-hydroxyphenyl-1-methyl-4-propionylpiperidine)

Levomethorphan* ((-)-3-methoxy-N-methylmorphinan)

Levomoramide ((-)-4-(2-methyl-4-oxo-3,3-diphenyl-4-(1-pyrrolidinyl)-butyl)morpholine)

Levophenacylmorphan ((-)-3-hydroxy-N-phenacylmorphinan)

Levorphanol* ((-)-3-hydroxy-N-methylmorphinan)

Metazocine (2'-hydroxy-2,5,9-trimethyl-6,7-benzomorphan)

Methadone (6-dimethylamino-4,4-diphenyl-3-heptanone)

Methyldesorphine (6-methyl-delta 6-deoxymorphine)

Methyldihydromorphine (6-methyldihydromorphine)

1-methyl-4-phenylpiperidine-4-carboxylic acid [Pethidine-intermediate C]

Metopon (5-methyldihydromorphinone)

Morpheridine (1-(2-morpholinoethyl)-4-phenylpiperidine-4-carboxylic acid ethyl ester)

Morphine

Morphine Methobromide and other pentavalent nitrogen morphine derivatives

Morphine-N-oxide

Myrophine (myristylbenzylmorphine)

Nicomorphine (3,6-dinicotinylmorphine)

Norlevorphanol ((-)-3-hydroxymorphinan)

Normethadone (6-dimethylamino-4,4-diphenyl-3-hexanone)

Normorphine (demethylmorphine)

Opium

Oxycodone (14-hydroxydihydrocodeinone)

Oxymorphone (14-hydroxydihydromorphinone)

Pethidine (1-methyl-4-phenylpiperidine-4-carboxylic acid ethyl ester)

Phenadoxone (6-morpholino-4,4-diphenyl-3-heptanone)

Phenampromide (N-(1-methyl-2-piperidinoethyl)-propionanilide)

Phenazocine (2'-hydroxy-5,9-dimethyl-2-phenethyl-6,7-benzomorphan)

Phenomorphan (3-hydroxy-N-phenethylmorphinan)

Phenoperidine (1-(3-hydroxy-3-phenylpropyl)-4-phenylpiperidine-4-carboxylic acid ethyl ester)

Piminodine (4-phenyl-1-(3-phenylaminopropyl)piperidine-4-carboxylic acid ethyl ester)

Proheptazine (1,3-dimethyl-4-phenyl-4-propionoxyazacycloheptane)

Properidine (1-methyl-4-phenylpiperidine-4-carboxylic acid isopropyl ester)

Racemethorphan ((±)-3-methyoxy-N-methylmorphinan)

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* Dextromethorphan ((+)-3-methoxy-N-methylmorphinan) and dextrorphan ((+)-3-hydroxy-N-methylmorphinan) are excluded from this Schedule.

Racemoramide ((±)-3-methyl-2,2-diphenyl-4-morpholinobutyryl-pyrrolidine)/(±)-4-(2-methyl-4-oxo-3,3-diphenyl-4(1-pyrrolidinyl)butyl)morpholine/

Racemorphan ((±)-3-hydroxy-N-methylmorphinan)

Thebacon (acetyldihydrocodeinone)

Thebaine

Trimeperidine (1,2,5-trimethyl-4-phenyl-4-propionoxypiperidine)

All isomers, unless specifically excepted, of the substances listed in this Schedule, whenever the existence of such isomers is possible.

The esters and ethers of these substances, unless appearing in another Schedule, whenever the existence of such esters or ethers is possible.

The salts of the substances listed in this Schedule, including the salts of esters, ethers and isomers, whenever the existence of such salts is possible.

Schedule II

Cannabis and cannabis resin

Desomorphine (dihydrodeoxymorphine)

Heroin (diacetylmorphine) and

The salts of these substances, whenever the formation of such salts is possible.

PROVISIONS CONCERNING NARCOTIC DRUGS, ETC.

13 March 1965

(Issued by the Ministry of Social Affairs pursuant to the Regulations of 6 January 1965 concerning narcotic drugs, etc.; (c.f. Medicaments and Poisons, etc., Act of 20 June 1964[2]))

A. The substances, drugs and preparations which are considered to be narcotic drugs for the purposes of the international conventions on narcotic drugs are, for the time being (cf. article 1, paragraph 1, of the Regulations) :

1. Those listed in Schedule I to the Regulations;
2. The following new substances, which are to be inserted in alphabetical order in Schedule I:

   Fentanyl[3] (1-phenethyl-4-N-propionylanilinopiperidine)

   Methadone-intermediate (4-cyano-2-dimethylamino-4,4-diphenylbutane)

   Moramide-intermediate (2-methyl-3-morpholino-1,1-diphenylpropane carboxylic acid)

   Noracymethadol ((±)-alpha-3-acetoxy-6-methylamino-4,4-diphenylheptane)

   Noripapanone (4,4-diphenyl-6-piperidino-3-hexanone)

   Pethidine-intermediate A (4-cyano-1-methyl-4-phenylpiperidine)

   Pethidine-intermediate B (4-phenylpiperidine-4-carboxylic acid ethyl ester)

   Pethidine-intermediate C (1-methyl-4-phenylpiperidine-4-carboxylic acid)
3. The following substances:

   Acetyldihydrocodeine

   Dihydrocodeine

Ethylmorphine (3-ethylmorphine)

Pholcodine (morpholinylethylmorphine)

Codeine (3-methylmorphine)

Nicocodine (6-nicotinylcodeine)

Norcodeine (N-demethylcodeine)

and

isomers of these substances unless specifically excepted;

the salts of these substances, including the salts of the possible isomers.

4. Preparations containing the substances and drugs listed in sub-paragraphs 1, 2 and 3.

B. In accordance with article 1, paragraph 2, of the Regulations, the Ministry of Social Affairs hereby determines that:

Amphetamine, methylphenidate and pipradrol, their possible isomers and salts, and preparations thereof, shall be subject to the provisions of the law concerning narcotic drugs, etc., save that articles 2 to 5 of the Regulations shall not apply.

C. In accordance with article 1, paragraph 3, of the Regulations, the Ministry of Social Affairs hereby determines that the following preparations shall be exempted from the application of articles 2 to 5 of the Regulations:

1. Preparations of:

Acetyldihydrocodeine,

Codeine,

Dihydrocodeine,

Ethylmorphine,

Norcodeine, and

Pholcodine

when:

(a) Compounded with one or more other ingredients in such a way that the preparation has no, or a negligible, risk of abuse, and in such a way that the substance cannot be recovered by readily applicable means or in a yield which would constitute a risk to public health; and

(b) Containing not more than 100 milligrammes of the substance per dosage unit and with a concentration of not more than 2.5 per cent in undivided preparations.

2. Preparations of cocaine containing not more than 0.1 per cent of cocaine calculated as cocaine base and preparations of opium and morphine containing not more than 0.2 per cent of morphine calculated as anhydrous morphine base and compounded with one or more other ingredients in such a way that the preparation has no, or a negligible, risk of abuse, and in such a way that the substances cannot be recovered by readily applicable means or in a yield which would constitute a risk to public health.

3. Solid dose preparations of diphenoxylate containing not more than 2.5 milligrammes of diphenoxylate calculated as base and not less than 25 microgrammes of atropine sulphate per dosage unit.

4. 'Pulvis ipecacuanhae opiatus' (Dover's powder)
10 per cent opium in powder
10 per cent ipecacuanha root, in powder well mixed
with
80 per cent of any other powdered substance containing no narcotic drugs.

5. Preparations conforming to any of the formulae listed above and mixtures of such preparations with any material which contains no narcotic drugs.

E/NL.1966/53

EXTRACT FROM THE
MEDICAMENTS AND POISONS, ETC. ACT
OF 20 JUNE, 1964

PART VI

Narcotics, etc.

.....5/

INSTRUCTIONS ON THE PRESCRIPTION OF SUBSTANCES
WHICH MAY PRODUCE ADDICTION

(addressed to Norwegian medical practitioners)

Drawn up by the Director of Public Health
in April 1958 (as amended in December 1958,
February 1962 and July 1965)

The number of drug addicts has been on the increase in recent years. The country's physicians are in a position to counteract this trend. Even where there is protracted suffering, the prevention of drug addiction is a problem that, given due care, can be solved. To treat addiction once it has been acquired is, with our present resources, a much worse problem, and even the most experienced practitioner will sometimes have to admit failure to solve it.

It must always be borne in mind that, in every single case, ill-considered or careless prescription of addiction-producing substances may involve a serious risk of addiction, with all its tragic consequences for the patient himself, his family and those around him.

The word "addiction" is used to describe a condition which is brought about by the frequent and persistent intake of an addiction-producing substance, and which is characterized by:

(a) A pronounced feeling of well-being after intake of the substance, particularly in the initial stage;

(b) A craving for the substance and discomfort in various forms when the supply is interrupted;

(c) A tendency to increase the dose, which in some cases is a symptom of habituation, i.e. of increased tolerance on repeated use;

(d) A tendency to relapse after treatment.

Drug addiction often stems from a personality defect, which may be one of a number, but which most frequently takes the form of inability on the part of the individual to adapt himself to the realities and demands of life.

Consequently persons who require morphine or similar drugs for their pain-killing properties need not necessarily become addicts even if they acquire the drug habit to the extent of needing steadily increased doses to kill the pain.

The instructions cover the following groups of substances:

(a) Morphine and preparations containing morphine (including thebaicin) and synthetic substances with similar effects, including hydromorphone (Dilaudid), levorphanol, oxycodone (Eucodal), pethidine (Dolantine, Pethinal), methadone, ketobemidone (Cliradon, Ketogan), normethadone (Ticarda), phenoperidine (Lealgin) and dextromoramide (Palfium). These substances are hereinafter referred to as "morphine, etc.".

5/ Note by the Secretariat: Please refer to E/NL.1966/51 of this document.

(b) Tincture of opium.

(c) Codeine, ethylmorphine, dihydrocodeine and pholcodine.

(d) Hydrocodone (Dicodid, Nyodid).

(e) Cocaine.

(f) Amphetamine, dexamphetamine, phenmetraline, methylphenidate (Ritalin) and pipradol (Gerodyl, Meratran).

(g) Barbituric acid derivatives, meprobamate and meprobamate preparations.

The use of diacetylmorphine (heroin) is prohibited.

All the substances mentioned can produce addiction.

The danger of addiction is always greatest when the substances are administered by injection.

With the exception of those in group (c), prescriptions for the medicaments mentioned in groups (a) to (f) above must show the patient's full name (first name and surname) and full address. The quantity of the medicament must be written both in figures and in letters. Prescriptions are valid for one supply only (cf. Royal Decree of 19 February 1965 on the ordering of medicaments and their supply by pharmacies). The following guide-lines have been drawn up to cover other points relating to medicinal prescriptions.

I

Prescription for persons other than regular patients
(including prescription by medical officers at first aid posts)

1. There is no justification whatsoever for prescribing morphine, etc., hydrocodone or amphetamine, etc. (groups (a), (d) and (f)), especially by issuing a prescription to the patient.

The risk that withdrawal symptoms may endanger the life and health of morphine addicts and of other persons who are clearly drug addicts is very slight by comparison with the harm caused by supplying addicts with the above-mentioned drugs.

In certain cases the medical indication may be so clear as to make it necessary for the physician, after an on-the-spot examination, to give a person unknown to him a SINGLE injection of morphine, etc. (group (a)) or a prescription for one or a few doses, 'per os' or in suppository form, of morphine, etc. (a) or of hydrocodone (d), but not of amphetamine (f).

Caution is particularly necessary when persons hitherto unknown to the physician visit him in his surgery in order to obtain addiction-producing substances. Proof of identity must be demanded if the patient is not known to the person issuing the prescription.

2. Tincture of opium, codeine and ethylmorphine, etc., cocaine eye-drops and hypnotics (groups (b), (c), (e) and (g)):

These preparations may, according to circumstances, be prescribed for persons other than regular patients. However, they should be prescribed only in very limited amounts, only where there is a reasonable indication in favour of their use (cf. section II) and, as a general rule, only after the patient has been examined and has identified himself.

II

Prescriptions for non-addicted regular patients

Group (a): morphine, etc.

In cases of acute or recurrent pain, morphine, etc. should be prescribed on each occasion in quantities small enough for the physician to keep an accurate check on consumption and to counteract any risk of addiction.

In cases of menstrual pain, migraine and similar conditions, the use of morphine, etc. should normally be avoided.

In illnesses complicated by 'cor pulmonale' (asthma and other pulmonary conditions) and after large quantities of alcohol or hypnotics have been taken, morphine, etc., in doses of over 1 cg may endanger the life of the patient.

The experience gained in recent years has shown that morphine in doses of 2 to 3 cg has not infrequently caused the death by poisoning of persons who had previously taken alcohol or hypnotics without being affected by them to any noticeable extent. Experience has also shown that the administration, particularly by intravenous injection, of large quantities of barbituric acid derivatives to persons under the influence of alcohol may expose them to the danger of death by poisoning.

In chronic illnesses, repeated prescription of morphine, etc., should as a rule be avoided UNLESS the disease is expected to prove fatal within a measurable period.

In certain chronically painful conditions with a favourable prognosis 'quo ad vitam' (e.g. tabes, causalgia, arachnoiditis or angioneurotic pains), however, morphine, etc., may be indicated, but the physician should keep the patient's consumption of morphine as low as possible. It may be useful to switch to other drugs, e.g. chlorpromazine. In such cases the physician must consider how far the addiction so induced may be regarded as a lesser evil for the patient than unbearable pain. In that event the physician should have the patient examined by a specialist.

Group (b): tincture of opium:

In treating chronic diarrhoea with tincture of opium, the risk of drug addiction should be borne in mind. The same applies to cases of depression.

Group (c): codeine, ethylmorphine, etc.:

Antitussive doses of these drugs not infrequently produce addiction, and caution should be exercised if the patient often asks for them in large amounts.

Group (d): hydrocodone (Dicodid, Nyodid):

This drug should be used only in acute cases and for brief periods.

Group (e): cocaine:

Cocaine eye drops should be prescribed only for patients with a diagnosed eye disease for which cocaine is indicated, and then only in suitably small amounts. A SECOND PRESCRIPTION of cocaine for the patient's own use should not be issued.

Group (f): amphetamine, etc.:

The use of ampoules of these preparations is contra-indicated in normal practice. If a patient requests a prescription for such ampoules, this virtually always means that the person concerned is either addicted to the drugs himself or intends to pass the preparations on, or sell them, to addicts.

Narcolepsy is, practically speaking, the only medical indication for oral administration of the substances in question. Furthermore, in this country, where there is a good deal of abuse of amphetamine, the utmost caution should be exercised in the use of dextrorotatory derivatives (dexamphetamine) for such purposes as slimming treatments. The prescription of amphetamine, etc., for lassitude and asthenia must be regarded as contra-indicated.

Group (g): barbituric acid derivatives, meprobamate, etc.:

Barbituric acid derivatives are the most commonly abused drugs in Norway. It is extremely dangerous to use hypnotics, such as chloral or bromine, especially in the treatment of alcoholics, and preference should be given to tranquillizers. Furthermore, the administration of bromine and barbituric acid derivatives to old people may lead to chronic intoxication accompanied by pseudodemention and anxiety, and should therefore be avoided. Abuse of hypnotics is frequently combined with addiction to amphetamine and similar substances. Apart from the prescription of hypnotics for the violently insane and of phenemal for epileptics, REPEATED prescription of hypnotics should be accompanied by care to ensure that the patient receives only such doses as are considered reasonable for the treatment of insomnia.

If the physician comes to suspect that a person is using abnormally large quantities of hypnotics, he should keep an exact record of the date and quantity of the prescription. An endorsement renewing a prescription for medicaments containing barbituric acid derivatives is not valid unless it specifies the length of time which must elapse between supplies.

III

Prescriptions for regular patients who are both chronically ill and addicted to drugs

The guide-lines for treatment of such patients are, in essentials, the same as those given in section II for chronically sick but non-addicted patients. Here, however, the situation will vary according to whether the patient is suffering from a protracted, or a chronic, condition or from a disease which will be fatal within a comparatively short time, such as inoperable cancer. In cases of the latter type, the physician will have a wider freedom of choice. However, he should always endeavour to keep the patient on the lowest possible dose of morphine and, for preference, change to a different preparation or combine it with others, such as chlorpromazine.

IV

Prescriptions for regular patients who are assumed to be suffering from drug addiction alone

1. Morphine, etc., tincture of opium and hydrocodone (groups (a), (b) and (d))
   The prescription of these substances for morphine addicts and other drug addicts must, generally speaking, be regarded as unjustified.

Henceforth these substances (including those in ampoule form) should be prescribed only in individual cases where there is a clear and definite understanding between the physician and the patient that the latter will be committed to hospital for an agreed period of treatments. If, for reasons connected with his employment or his means, or for other practical reasons, the patient cannot enter hospital immediately, the physician must, in the meantime, endeavour to keep the dose as low as possible and keep an exact record of the date and quantity of the prescription.

The prescription of drugs to be administered by the patient himself should be avoided so far as possible. If the patient fails to comply promptly with his agreement to enter hospital, or otherwise refuses to obey the instructions given by the physician in virtue of the foregoing, the physician should decline to prescribe the substances in question for him, in accordance with the general rule that any patient who refuses to follow a doctor's orders concerning his treatment must take responsibility for the consequences.

2. Codeine and ethylmorphine, cocaine and amphetamine, etc. (groups (c), (e) and (f))

An abrupt cessation of the intake of these substances by addicts may cause severe discomfort but produce no really significant withdrawal symptoms, so that a lengthy, gradual withdrawal process is not needed with these drugs.

It should therefore be taken as a general rule that the prescription of these substances (groups (c), (e) and (f)) for persons assumed to be suffering from addiction alone must be regarded as unjustified in all cases.

3. Hypnotics (group (g))

The relevant rules given in section IV, sub-section 1, apply to persons addicted to hypnotics.

Particular vigilance should be exercised with regard to patients who have been committed to hospital for treatment for drug addiction and who have been discharged as cured. It must be considered a gross error to start such patients on morphine, etc.

E/NL./1966/54

Ministry of Social Affairs,
Jnr.2047/66.H.dir.7
A.nr.4/66.

Circular No.5/1966
29 January 1966

To pharmacies, 'et al', in Norway

PROVISIONS CONCERNING NARCOTIC DRUGS, ETC.

Pursuant to article 20 of the Act of 20 June, 1964, relating to Medicaments and Poisons[2] (cf. article 1, paragraphs 1 and 2, of the Regulations concerning narcotic drugs, etc., issued by Royal Decree of 6 January 1965[6]), the Ministry of Social Affairs hereby determines that:

1. The following substance shall be considered to fall within the category of narcotic drugs, etc., and shall be inserted in alphabetical order in Schedule I to the above-mentioned Regulations (cf. section A of the Provisions issued by the Ministry of Social Affairs on 13 March 1965):

   Piritramide[3] (1-(3-cyano-3,3-diphenylpropyl)-4-(1-piperidono) piperidine-4-carboxylic acid amide)

2. The following substances shall be considered to fall within the category of narcotic drugs, etc., and shall be inserted in section B of the Provisions issued by the Ministry of Social Affairs on 13 March 1965:

   Bufotenine
   Phenmetraline (d, l-2-phenyl-3-methylmorpholine)
   Lysergic acid diethylamide (LSD)
   Mescalin
   Psilocybin

Oslo, 29 January 1966
By authority
(Signed) Karl Evang B. Jøldal