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COMMISSION ON NARCOTIC DRUGS

Fifth Session

SUMMARY RECORD OF THE HUNDRED AND SECOND MEETING

Held at Lake Success, New York
on Saturday, 2 December 1950, at 10 a.m.

CONTENTS:

Annual reports for 1948 and 1949 drawn up in accordance with the provisions of article 21 of the convention of 1931 amended by the Protocol of 1946 (E/NR.1948/Summary and all reports appearing under the symbols E/NR.1948 and E/NR.1949).
Drug addiction (No. 21, Technical Reports Series of the World Health Organization (E/CN.7/189, E/CN.7/196, E/CN.7/196/Corr.1, E/CN.7/196/Add.1)).

Chairman: Mr. SATTANATHAN

India

Rapporteur: Mr. HOARE

United Kingdom of Great Britain
and Northern Ireland

/Members:
E/CN.7/SR.102

Members:

Colonel SHARMAN	Canada
Mr. HSIA)	
Mr. TSAO)	China
Mr. LABIB	Egypt
Mr. BOURGOIS)	
Mr. VAILLE)	France
Mr. AMINI	Iran
Mr. RABASA	Mexico
Mr. KRUYSSSE	Netherlands
Mr. AVALOS	Peru
Mr. OR	Turkey
Mr. ZAKUSOV	Union of Soviet Socialist Republics
Mr. ANSLINGER	United States of America
Mr. NIKOLIC)	
<u>later</u> Mr. KRASOVEC)	Yugoslavia

Also present:

Mr. MAY	Permanent Central Board
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Secretariat:

Mr. STEINIG	Director of the Narcotics Division, representative of the Secretary-General
Mr. ROXTON	Secretary of the Commission

ANNUAL REPORTS FOR 1948 AND 1949 DRAWN UP IN ACCORDANCE WITH THE PROVISIONS OF ARTICLE 21 OF THE CONVENTION OF 1931 AMENDED BY THE PROTOCOL OF 1946 (E/NR.1948/SUMMARY AND ALL REPORTS APPEARING UNDER THE SYMBOLS E/NR.1948 AND E/NR.1949).

The CHAIRMAN opened the discussion on the annual reports, taking as the working document the Summary of Reports for 1948 (E/NR.1948/Summary). He asked those members of the Commission who wished to comment on the original reports of Governments to inform the Chair so that the Secretariat could distribute the necessary documents in time.

Colonel SHARMAN (Canada) informed the Chairman that he would like to ask several questions on the 1948 reports of Australia, Haiti and Iran, and the 1949 reports of Germany under American occupation and Egypt.

Mr. ANSLINGER (United States of America) told the Chair that he would ask questions on the 1949 reports for Argentina, China, India and Kuwait.

Mr. AMINI (Iran) wished to make two corrections in the report submitted by the Government of Iran (E/NR.1949/91). In part A on page 6, 196,650 grammes should read 196,650 kilogrammes, and in paragraph 6 on page 8, the receipts from the sale of opium should be given as representing 4 per cent and not .4 per cent of the budget.

Mr. VAILLE (France) drew the attention of members of the Commission to the result of the observations carried out in France and noted in the annual report for 1949, which had made it possible to reach fairly precise conclusions with regard to drug addiction. It might be of advantage for other countries to conduct their investigations in the same way, so that general conclusions might be arrived at whenever possible. In 1948, 773 cases of drug addiction had been listed in France. In 1949 the figure had fallen to 586. 53 per cent of the listed drug addicts were female and 47 per cent male. The incidence of drug

/addiction

addiction was strongest in men between 45 and 49 years of age and in women in the group from 35 to 39. In the higher age groups, there was a decrease in the number of cases which was on a parallel with the deaths caused by diseases engendered by drug addiction and with the results of drug addiction itself.

In 545 out of the 687 cases studied, it had been possible to determine the origin of the addiction; 66 cases had originated in an illness which had been cured, and 54 cases from a treatment still being followed.

Generally speaking, drug addiction originating in some form of therapy was more wide-spread than was usually realized and it had been noted that in the vast majority of cases the drug was administered by injection.

Of 374 of the 687 drug addicts whose cases had been studied were persons of no occupation, 87 were members of the liberal professions and 32 were artists. It had been noted that there were no drug addicts among the peasant classes.

With regard to the products used, he drew particular attention to the fact that an increase had been noted in the use of synthetic drugs, which wiped out the results achieved with regard to natural drugs.

Mr. HOARE (United Kingdom) commented upon the interest of the French representative's remarks. The information on drug addiction supplied by the Government of the United Kingdom had always been analysed by age groups and drugs employed. The information collected in the United Kingdom would probably lead to similar conclusions. Most drug addicts certainly belonged to the educated and professional class.

He then expressed his regret that a strike of printing workers had delayed the printing of the United Kingdom report for 1949. The report had now reached the Secretariat, however, and he hoped that it would be possible to distribute it shortly.

The CHAIRMAN suggested that the Secretariat should study the method used in France for collecting information on drug addicts, with a view to preparing a standard form which could be used by other Governments.

/Mr. AVALOS

Mr. AVALOS (Peru) said that his Government had originally intended to submit a summary report for the years preceding 1949. More recently, he had been instructed to have distributed a report prepared by the appropriate branch of the administration, but the report was still awaiting the addition of some statistical tables.

He then mentioned the report of the 1947 United Nations mission and emphasized the importance of the mission's recommendations, which had been of great utility to the Peruvian Government during its administrative re-organization.

The CHAIRMAN opened the discussion on the Summary of Annual Reports of Governments (E/NR.1948/Summary).

Mr. VAILLE (France) congratulated the Secretariat on its work in preparing the summary, which was in the nature of a general report.

The CHAIRMAN opened the discussion on the part entitled "General".

Mr. ANSLINGER (United States of America) said that as regarded India (page 9), some very important decisions had apparently been taken since the report was published. He asked the Indian representative whether he could report on them to the Commission.

The CHAIRMAN, speaking as the representative of India, explained that certain constitutional and administrative decisions had been taken, which made it possible to settle questions concerning the production and use of opium at the federal level. In the past those questions had been under the jurisdiction of the various Indian States; it was in the princely States in particular that the production of opium and drug addiction had been widespread. The Central Government of India had already closed down two opium factoriesⁱⁿ exercise of the rights it had just acquired. Moreover, a conference in which representatives of all the Indian States had taken part had recommended the adoption of a programme which would eliminate the non-medical consumption of opium within ten years.

Some foreign observers had felt that the measure was too radical to be applied successfully, but India had already applied a prohibition of alcoholic beverages and the Indian Government did not expect the new recommendation to encounter serious difficulties of application.

As soon as the new regulations had had their effect and the re-organization of the administration was successfully completed, India would submit a report to the Narcotics Commission.

Mr. ANSLINGER (United States of America) asked whether the sale of opium had been prohibited at Bombay.

The CHAIRMAN, speaking as the representative of India, said that the conference had recommended the prohibition of the sale of drugs in the coastal areas so that sailors could not obtain drugs with which to supply the illicit traffic. He could not say whether the recommendation had already been applied in Bombay although a strict policy of suppressing opium was being pursued there.

At the suggestion of the Chairman, the Commission decided to study those parts of the Summary of Annual Reports dealing with drug addiction and the illicit traffic when the time came to examine those two questions.

The CHAIRMAN opened the discussion on that part of the report entitled "Raw Materials".

Mr. ANSLINGER (United States of America) noted that the report of the Government of Argentina for 1948 said that opium production had just begun in that country. He asked the Secretary-General's representative to ask the Argentine Government for details regarding that new source of opium.

Mr. STEINIG (Secretariat) said that he would take the necessary steps, if the desired information was not given in the Argentine report for 1949.

Mr. ANSLINGER (United States of America) pointed out that the Permanent Central Board had sent the Government of Iran a letter regarding opium production in that country. He asked whether the Iranian Government had sent a reply and, if so, what was its content.

/Mr. STEINIG

Mr. STEINIG (Secretariat) explained that the Annual Report of the Permanent Central Board contained a chapter on the exchange of correspondence with the Iranian Government. The Board did not seem to have been fully satisfied by the information supplied by the Government of Iran. He would obtain the necessary details for the Commission's information.

Mr. AMINI (Iran) wished to wait for the above-mentioned documents before making any reply.

Mr. ANSLINGER (United States of America) drew attention to document E/CN.7/211 which said that 500 tons of opium had been offered for sale at Hongkong by the Communist Government of China, and asked when the Commission would discuss that matter.

Mr. AMINI (Iran) said that such an offer would be contrary to the treaty in force and that the opium was obviously from an illegal source in view of the fact that poppy-growing was prohibited in China.

Mr. KRASOVEC (Yugoslavia) thought that the matter should be examined during the consideration of the illicit traffic.

Mr. HSIA (China) said that the origin of the opium was unknown and that according to all probability it came out of the illicit traffic; it must have been cultivated in Manchuria under Japanese occupation and imported into China since then, as the reference to Jehol seemed to show.

The CHAIRMAN proposed that the case should be included in the discussion on the illicit traffic.

It was so decided.

Mr. ANSLINGER (United States of America) said that according to reports reaching his Government, seven and a half tons of morphine had been offered for sale at Kuwait. He asked the Secretary-General's representative to obtain all the necessary details from the Kuwait Government.

/Mr. STEINIG

Mr. STEINIG (Secretariat) asked the representative of the United States of America to be good enough to tell him what his sources of information were so that he could have the necessary investigation carried out.

Mr. ANSLINGER (United States of America) asked the Secretary-General's representative to obtain information on the work of an Inter-departmental Committee of Enquiry set up in the Union of South Africa to investigate the abuse of dagga (page 109 of the Summary of Annual Reports).

Colonel SHARMAN (Canada) said that a ^{package of} so-called "headache" powder of Finnish origin, containing diacetylmorphine, had been shipped to Canada. The Secretary-General had brought this fact to the attention of the Finnish Government and the latter had submitted apologies for the mistake that had been made when an export licence was issued for that product. He felt that it should be explained to the Finnish Government that according to the conventions in force, export licences should not be issued unless an import certificate had first been obtained, and also in the case of heroin a separate request from the importing Government.

The CHAIRMAN instructed the Secretariat to draw the Finnish Government's attention to that fact.

There being no further comments on the Summary of Annual Reports (E/NR 1948/Summary) he closed the debate on that document and suspended the meeting for ten minutes.

The meeting was suspended and resumed.

The CHAIRMAN said that the Annual Reports on which the Canadian representative wished to comment had been distributed. On the other hand, the reports on which the United States representative wished to comment had not yet been published and would have to be discussed at a later date.

Colonel SHARMAN (Canada) said that heroin had apparently been exported from Australia. Canada had long since forbidden the export of heroin in all forms in accordance with the provisions of the 1931 Convention and therefore protested against the action of Australia which was a violation of the treaties in force.

/He drew

He drew attention to the increase in the number of seizures of opium and hashish in Egypt. He also pointed out that the report of Haiti for 1949 seemed to show that the laws and regulations governing the traffic in narcotic drugs and their cultivation had not been changed since 1922. The attention of the Haitian Government should therefore be drawn to all the international measures that had been taken in that field since that time. He also made enquiries regarding the cultivation of the opium poppy in Germany and the manufacture of drugs.

Mr. STEINIG (Secretariat) said that he would verify the points raised by Colonel Sharman, and was awaiting a reply from Australia with regard to the diacetylmorphine. With regard to Germany, the manufacture of morphine extracted from the leaf of the opium poppy had increased, but no morphine from such sources had yet appeared on the international market.

Colonel SHARMAN (Canada) then said that the number of seizures carried out in Iran was still very large. That was all the more surprising since he understood that the Iranian Government had prohibited the cultivation of the opium poppy.

Mr. AMINI (Iran) explained that the Iranian Government had prepared a draft law prohibiting the cultivation of the opium poppy but that Parliament had not ratified it. However, cultivation was slackening and Iran had taken comprehensive measures to make the campaign against the illicit traffic more effective.

DRUG ADDICTION (NO. 21, TECHNICAL REPORTS SERIES OF THE WORLD HEALTH ORGANIZATION (E/CN.7/189, E/CN.7/196, E/CN.7/196/Corr.1, E/CN.7/196/Add.1))

Mr. VAILLE (France) said that his Government disagreed with the conclusion of the Expert Committee given at the top of page 5 of their report. In classifying morpholylethylmorphine in sub-group b of Group I, the Committee seemed to have let itself be guided exclusively by legal considerations. He drew attention to article 11 of the 1931 Convention which provided that in the case of the

/manufacture

manufacture of a new product, the WHO would be responsible for finding out whether the new product was capable of producing addiction. The WHO Expert Committee had therefore been called upon to give a technical and not a legal opinion. The French Government urged that paragraph 4 of article 11 of the 1931 Convention should be applied in order to determine definitively the classification of the product in question.

Mr. KRUYSSÉ (Netherlands) recalled that Article 11 of the 1931 Convention had given rise to difficulties in interpretation with regard to the classification of drugs. For example, codeine, which could be converted into morphine, had been classified in Group II as it could not produce addiction. Later it became clear that even codeine is an addiction-forming drug and the distinction between the two groups vanished therefore to a certain extent. He did not think that the problem could be solved and he wondered whether it would not be wiser to wait until a unified Convention had come into force before taking any ^{definite} action.

Mr. VAILLE (France) could not agree with the Netherlands representative and maintained his request with regard to the application of the measures provided for in paragraph 4 of article 11 of the 1931 Convention.

He then referred to the position concerning diacetylmorphine (heroin) (paragraph 4 (4) of the WHO document -- Technical Report Series, No. 21, page 5).

In 1946, the annual legal consumption of heroin in France had been 70 kg.; following an administrative reorganization the legal consumption had fallen to 24 kg. in 1948 and 1949; consumption was now regarded as stabilized at a level corresponding to the real needs of patients. The Academy of Medicine and the professional institutions were opposed to any prohibition of the medical use of heroin for such a step would deprive patients of an irreplaceable medication without affecting the drug addicts' sources of supply.

Moreover, in practice, those countries which had prohibited the drug were often called upon to face a large illicit traffic.

With regard

With regard to synthetic substances (part 5 of the WHO document), France had prohibited the use of all those products, save one: however, there was an increase in the demand for those substances which counterbalanced the decrease in the demand for morphine and heroin. He felt that sufficient attention had not been given to the effects of synthetic narcotic drugs from the point of view of drug addiction and he urged that the international agencies should study the matter in greater detail.

Mr. KRUYSSIE (Netherlands) agreed with the French representative regarding the use and prohibition of heroin. It had to be proved that in certain cases, heroin is the only drug that can finally give the desired relief to patients. He had made his previous remarks, however, with regard to the application of the 1931 Convention and not concerning morpholyethylmorphine specifically.

The difficulty of applying the conclusion of the report of the WHO expert committee was again illustrated by the case of acetyldihydrocodeine. With regard to that product, the Committee confined itself to confirming its opinion regarding the habit-forming properties of that product (paragraph 4 (2) of the document referred to above). Yet in 1949, the Committee had not expressed any opinion on the drug's habit-forming possibilities (Official records of the WHO, No. 19, page 30).

Mr. ANSLINGER (United States of America), Mr. AVALOS (Peru) and Mr. RABASA (Mexico) explained that since the use of heroin had been prohibited in their respective countries, no member of the medical profession had ever requested permission to employ the drug.

Mr. VAILLE (France) asked the Peruvian representative whether, in spite of the prohibition of heroin, the Peruvian authorities had ever found persons addicted to the drug.

Mr. AVALOS (Peru) replied in the negative.

Mr. OR (Turkey) said that his country had prohibited the use of heroin and had decided not to continue to estimate stocks; in 1949, those stocks had been 800 grammes. The Turkish Government hoped that they would be exhausted by the end of 1950 and had no intention of renewing them.

/Mr. HOARE

medical opinion
Mr. HOARE (United Kingdom) said that/in the United Kingdom regarded heroin as having advantages over any other known drug in the case of certain diseases; moreover, cases of drug addiction through heroin and cocaine were relatively rare in England and did not justify such a radical measure as prohibition.

Mr. ANSLINGER (United States of America) said that British and French experts had participated in the work of the Expert Committee which recommended the prohibition of heroin.

Mr. ZAKUSOV (Union of Soviet Socialist Republics) asked the French representative why French physicians felt it necessary to use heroin when there were better products which could be used in its place. Physicians in the Soviet Union had completely abandoned its use.

Mr. VAILLE (France) said that in France medicine was regarded as an art rather than a science and that freedom of healing was the practice. A doctor was free to administer the drug he chose. Planned medicine could have disastrous results.

A committee of experts should not be so positive, when strict supervision was sufficient to bring excellent results; the decrease in annual consumption in France from 70 to 24 kilogrammes proved that.

He would be glad to transmit to the medical profession in France any information the USSR representative could give him on substitutes for heroin which gave better results.

Mr. ZAKUSOV (Union of Soviet Socialist Republics) said that medicine in the Union of Soviet Socialist Republics was a science, not an art, and that doctors there had ceased the use of that drug of their own accord.

He enumerated several products which could be substituted for heroin, such as eucodal, dicodide, dilaudide and the synthetic drugs pethidine, amidon and metadon.

Mr. ANSLINGER

Mr. ANSLINGER (United States of America) observed that there was no reason why the medical profession should not be supervised by society. In that connexion, he cited the case of keto-bemidon which was sometimes more potent than morphine and had been found so dangerous that a decision had been taken in the United States that it should not be made available to the medical profession.

Mr. VAILLE (France), in reply to the USSR representative, said that, although some of the drugs the latter had cited could act as substitutes for heroin, they were liable to cause addiction. It was certainly to be regretted that the substances most effective for relieving pain were the most dangerous from the point of view of addiction; but there should be the same attitude towards the drug and its substitutes until the findings of scientific research made possible the elimination of that disadvantage while retaining their analgetic properties.

He agreed with the United States Representative concerning the supervision of the medical profession; freedom of healing did not mean license; doctors should respect regulation by society.

Mr. ZAKESOV (Union of Soviet Socialist Republics) explained that he had merely wished to stress the fact that a substitute could easily be found for heroin without giving any substantive opinion on such substances as analgetics.

Mr. MAY (Permanent Central Board) informed the Commission that the question of diacetylmorphine had been taken up at a meeting of the joint Committee of the Permanent Central Opium Board and the Narcotic Drugs Supervisory Body and that the Secretariat would distribute to the members of the Commission in due course a copy of that Committee's report.

Mr. STEINIG (Secretariat) returned to the question of the request of the French Government concerning morphoylethylmorphine (homocodeine). He reminded the Commission in that connexion that the provisions of Article 11 of the 1931 Convention had been drawn up to ensure, where necessary, the supervision of all new products placed on sale; he went on to consider whether that request was in order. Under Article 11, paragraph 4, the question whether homocodeine

/fell into

fell into sub-group (b) of Group I or in Group II could only be submitted to a body of three experts if the WHO decided that although the product was not itself a drug capable of producing addiction it was convertible into such a drug; but the Expert Committee appointed by the WHO was of the opinion, first, that there was insufficient evidence to permit a decision on the addiction-producing properties of that substance, and secondly, in the absence of specific evidence to the contrary it was considered probable that that substance was convertible into morphine. If the Commission decided that it would be necessary to take steps subsequently, despite the opinion of the WHO, Article 11, paragraph 4, which provided for the appointment of a body of three experts would have to be applied: the first to be selected by the French Government, the second by the Commission on Narcotic Drugs and the third by the two members first selected. Owing to the opinion of the WHO, however, the Secretariat hesitated to recommend that that should be done.

Colonel SHARMAN (Canada) emphasized that, in the opinion of the Expert Committee appointed by the WHO, homocodine, one of the ester-oxides of morphine was by definition in sub-group (b) of Group I of the 1931 Convention.

Mr. STEINIG (Secretariat) thought that the French Government could refrain from requesting the immediate implementation of Article 11, paragraph 4, and adopt the procedure laid down in paragraph 1 of the same article.

Mr. VAILLE (France) noted the fact that the Secretary-General's views had altered since he had sent his unofficial letter of 13 October to the French Government informing it that its request had been taken into consideration.

The Expert Committee appointed by the WHO had stated that there was insufficient evidence with regard to the question whether homocodine was liable to produce addiction. Before making that decision, the Committee should have asked the French Government to supply all the documentation it had in its possession. The Committee had then said that, in the absence of specific
/evidence.

evidence to the contrary, homocodeine would be by definition in sub-group (b) of Group I of the 1931 Convention. In brief, while the Expert Committee had been requested to give a technical opinion, it had avoided a definite opinion on the technical point by basing its opinion on the legal point.

If strict regulations were applied to products which were not narcotic drugs, such regulations would have little weight with medical opinion. The French Government, because it had pledged itself to respect international conventions, insisted that a body of three experts should be appointed and selected Mr. René Fabre to sit on that body.

Mr. KRUYSSER (Netherlands) also regretted that the Expert Committee had not been able to make a more specific statement with regard to the conversion of homocodeine into morphine, for want of making a simple laboratory investigation.

Mr. ANSLINGER (United States of America) agreed that the representative of France with regard to the automatic classification of homocodeine in sub-group (b) of Group I as an ether-oxide of morphine; on that consideration alone, codeine, itself, and ether-oxide of morphine ought to be classified in the same group.

Mr. STEINIG (Secretariat) emphasized that a distinction must be drawn / between a decision based upon scientific data and one based upon the legal point of view. A body of experts always took a decision based solely on scientific data with the greatest caution. The French Government could not blame the WHO Committee for such caution; but that Committee ought not to have stated an opinion that homocodeine was by definition in sub-group (b) of Group I for the simple reason that that product was an ether-oxide of morphine, since two of such ether-oxides, codeine and dionine, had been classified in Group II. A decision with regard to the classification of homocodeine could only be taken by the body of three experts, as laid down in Article 11, paragraph 4.

/The CHAIRMAN

The CHAIRMAN said that it was for the Commission to decide whether the French Government was correct in requesting the application of the measures set forth in Article 11, paragraph 4, of the 1931 Convention despite the opinion of the WHO Expert Committee.

Mr. ROARE (United Kingdom) feared that if a body of three experts was appointed, its decision would not be binding ^{upon} the High Contracting Parties, since, as the representative of the Secretary-General had observed, the conditions laid down by Article 11, paragraph 4, were not fulfilled. He therefore proposed that the question should be referred back to the WHO; the Expert Committee of that organization would be able to take a decision with all the facts at its disposal when it had received the documentation in the possession of the French Government.

Mr. VAILLE (France) accepted the United Kingdom representative's proposal. The Expert Committee should, however, be asked to take a definite stand with regard to the question whether buprocaine was liable to cause addiction and whether it could be converted into morphine. After that, Article 11, paragraph 4, could be brought into play.

It was so decided.

The meeting rose at 1.25 p.m.