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COMMISSION ON NARCOTIC DRUGS

Ninth Session

SUMMARY RECORD OF THE TWO HUNDRED AND TWENTY-SEVENTH MEETING

Held at Headquarters, New York,  
on Tuesday, 20 April 1954, at 2.45 p.m.

CONTENTS

Progress report of the Division of Narcotic Drugs (E/CN.7/264  
and Add.1) (concluded)

Abolition of opium smoking (E/CN.7/265)

Burmese proposal for co-ordinating the efforts of certain  
Far-Eastern Governments to suppress poppy cultivation and the  
smuggling of opium (E/1998; E/CN.7/222, 227/Rev.1, 246)

Report of the Permanent Central Opium Board on statistics of  
narcotics for 1952 and the work of the Board in 1953 (E/OB/9)

PRESENT:

<u>Chairman:</u>	Mr. VAILLE	(France)
<u>Rapporteur:</u>	Mr. KRISHNAMOORTHY	India
<u>Members:</u>	Mr. SHARMAN	Canada
	Mr. LIANG	China
	Mr. ISMAIL	Egypt
	Mr. PANOPOULOS	Greece
	Mr. ARDALAN	Iran
	Mr. LAZARTE	Peru
	Mr. KULAGA	Poland
	Mr. OZKOL	Turkey
	Mrs. VASILYEVA	Union of Soviet Socialist Republics
	Mr. WALKER	United Kingdom of Great Britain and Northern Ireland
	Mr. ANSLINGER	United States of America
	Mr. NIKOLIC	Yugoslavia
<u>Observers:</u>	U BA MAUNG	Burma
	Mr. POLNIKORN	Thailand
<u>Also present:</u>	Mr. MAY	Permanent Central Opium Board
	Dr. WOLFF	World Health Organization
<u>Secretariat:</u>	Mr. YATES	Director of the Division of Narcotic Drugs
	Mr. PASTUHOV	Secretary of the Commission

PROGRESS REPORT OF THE DIVISION OF NARCOTIC DRUGS (E/CN.7/264 and Add.1) (concluded)

In reply to a question asked by the Yugoslav representative at the previous meeting, Mr. YATES (Secretariat) said that seven States had supplied information on the measures taken to apply the provisions of the 1953 Protocol before its entry into force (Council resolution 505 G (XVI)). The existing legislation in Greece already ensured the application of the principal provisions of the Protocol. The same applied to Iran, and that country also proposed to take additional measures. The Government of Pakistan had instructed the governments of the provinces immediately to apply provisions for the abolition of opium smoking. The Government of the United States had listed the various measures already taken and those which it proposed to take when the Protocol entered into force. Cambodia was endeavouring to apply the provisions of the Protocol but had to take into account the situation in the neighbouring countries. The Yugoslav Government had reported that it was exercising very strict control and that new legislation was being prepared. India was already trying to apply the provisions of the Protocol, the broad outlines of which corresponded to the control measures already in force in that country.

ABOLITION OF OPIUM SMOKING (E/CN.7/265)

Mr. WALKER (United Kingdom) stated that opium smoking was prohibited in all the British territories except two. With regard to the State of Brunei (A/CN.7/265, page 12), the bill which had been prepared had not been promulgated because the Government had observed that legislation applied by neighbouring States seemed to be preferable. It had therefore been decided to postpone the matter and to draft a new law. In Aden, only registered drug addicts were authorized to smoke opium; there were only twenty-six of them and they were already advanced in age. No new authorizations had been issued and the health services exercised strict control. The Government believed that opium smoking would disappear completely in about ten years.

Mr. KRISHNAMOORTHY (India) pointed out that his country's report (E/CN.7/265, page 4) related to the situation on 31 December 1952. By 31 December 1953, however, it had seemed to be much more satisfactory. Opium smoking was regarded in India as a vice and was not widespread. Since 1946, the Government had completely prohibited opium smoking, except for persons who had already been addicted to drugs and who had had to be registered on the submission of a medical certificate. Nevertheless, since no time-limit had been fixed for the registration of drug addicts, the governments of states could continue to issue authorizations. The Indian representative to the United Nations Opium Conference had signed the 1953 Protocol but had made a declaration, in accordance with article 19 thereof, to the effect that the Government of India reserved the right to authorize the use of opium for quasi-medical needs until 31 December 1959 and the use of opium for smoking for drug addicts over 21 years of age who had been registered for that purpose by 30 September 1953 by the competent authorities. As a result of that declaration, the Indian Government had requested all the governments of states to take immediate legislative or administrative measures to announce that the registration of drug addicts would finally cease after 30 September 1953.

On 31 December 1953, the situation in the various states of India was as follows. In eight states the use of opium for smoking was completely prohibited. In eight other states authorization to smoke opium was issued only to drug addicts who had been registered by 30 September 1953, but since no one had been registered by that date, the prohibition in those states could be regarded as absolute. In twelve states, drug addicts registered by 30 September 1953 were authorized to smoke opium. The opium was issued to the registered drug addicts by licensed traders. The quantities supplied might be reduced if medical certificates submitted at the time of registration indicated that such a reduction was possible. It was difficult to determine the quantity of opium thus consumed, but the number of registered drug addicts was now known. The Commissioner of Narcotics of the Government of India had a list of all the opium smokers and was kept informed by the governments of states of any changes in their lists due to the death or cure of the smokers.

As a result of those energetic measures, there was every reason to believe that the time would soon come when the opium problem would cease to exist in India.

Dr. WOLFF (World Health Organization) asked for some details on the treatment given to drug addicts in India.

Mr. KRISHNAMOORTHY (India) said that there were no hospitals in his country which specialized in that kind of treatment. In view of the fact that the number of drug addicts in a country of several hundred million inhabitants was under 2,500, the Government had not considered it necessary to take special measures or to study the problem scientifically. In so far as India was concerned, the problem was only a temporary one.

Mr. ANSLINGER (United States of America) considered that the Government of India should be congratulated on its successful efforts to abolish opium smoking. The number of opium smokers in that country was barely one tenth of what it had been fifteen years earlier.

Mr. KRISHNAMOORTHY (India) believed the number of opium smokers in his country had diminished to an even greater extent. Before 1946, when the Government had prohibited opium smoking, the number of smokers had probably been very considerable.

Mr. ISMAIL (Egypt) asked the Indian representative what methods were used to register smokers and how control was exercised.

Mr. KRISHNAMOORTHY (India) explained that the state governments were responsible for the registration of drug addicts. In each state, the excise commissioner had under him district officers who carried out the operation. Drug addicts who wished to be registered had to submit medical certificates testifying that it was desirable for them to be authorized to smoke opium. When that authorization was granted, their names were communicated to a central organ. That centralization of statistics was a recent innovation.

Mr. NIKOLIC (Yugoslavia) asked whether the remark about the State of Bombay on page 5 of document E/CN.7/265 meant that only opium smokers had been registered and that opium eaters were not regarded as drug addicts.

Mr. KRISHNAMOORTHY (India) recalled that, in accordance with article 19 of the 1953 Protocol and the declaration made by the Indian representative when he had signed the Protocol, the use of opium for quasi-medical needs would be authorized in India until 31 December 1959. The opium used for those purposes was manufactured in State laboratories and distributed by a central organ. The Government was gradually decreasing the quantities made available to that organ, so that in 1959 it would possess only a very small quantity of opium reserved for scientific purposes. The registered drug addicts also drew their supplies from that source, so that if some addicts were still alive in 1959, they would have very little opportunity to obtain opium.

The State of Bombay had now set up a system of registration for opium smokers, but the situation was complicated by the fact that opium was still regarded as a remedy in certain backward regions. It was possible that some persons who obtained opium for medical purposes used it in some other way, but the law provided that they should be prosecuted and punished.

The CHAIRMAN considered that India represented a worthy example for countries which had the same problems but had not taken such energetic measures.

Mr. ANSLINGER (United States of America) recalled the period when the League of Nations had been deeply concerned with opium smoking and the Advisory Committee had held lively debates on the abolition of the habit. At that time, eight tons of opium for smoking had been seized in the illicit traffic. Now, according to the Secretary-General's report, opium seizures amounted to 710 kilogrammes for the whole world. Considerable progress had therefore been made since the war through international co-operation and action.

The CHAIRMAN proposed that the Commission should take note of document E/CN.7/265.

It was so decided.

BURMESE PROPOSAL FOR CO-ORDINATING THE EFFORTS OF CERTAIN FAR-EASTERN GOVERNMENTS TO SUPPRESS POPPY CULTIVATION AND THE SMUGGLING OF OPIUM (E/1998; E/CN.7/222, 227/Rev.1, 246)

The CHAIRMAN invited the Observer for Burma to submit his observations.

U BA MAUNG (Burma) reviewed the reasons which had led his Government to submit its proposal for the establishment of a United Nations committee to supervise and co-ordinate the efforts of certain Far Eastern Governments to suppress poppy cultivation and the smuggling of opium. His Government thought that with the co-operation and help of those countries good results could be obtained. That proposal had already been the subject of several resolutions and had been discussed in the Economic and Social Council. In the light of the discussions which had been held, the proposal seemed premature. The Commission should decide, therefore, whether it should keep the item on its agenda or postpone the discussion to a later date. His Government would not urge the Commission to decide one way or the other.

The CHAIRMAN said that the Commission could not consider the Burmese proposal at that meeting, as some members had not had time to study all the documents. The debate would therefore be continued at a subsequent meeting.

REPORT OF THE PERMANENT CENTRAL OPIUM BOARD ON STATISTICS OF NARCOTICS FOR 1952 AND THE WORK OF THE BOARD IN 1953 (E/OB/9)

Mr. WALKER (United Kingdom) said that his delegation attached great importance to the Permanent Central Opium Board's report. He therefore found it most regrettable that some Governments transmitted incomplete information or none at all even though they had signed the international conventions. If the members of the Commission shared his concern about the matter, they might wish to draft a recommendation designed to facilitate the PCOB's work.

Mr. ARDALAN (Iran) said that he had requested clarification of certain divergencies which had again occurred in the current year in the interpretation of the statistics. He reserved the right to revert to the matter.

The CHAIRMAN thought that the Commission would endorse the United Kingdom suggestion and request the Council to recommend that Governments should transmit complete and accurate statistics regularly to the Permanent Central Opium Board.

It was so decided.

In reply to the CHAIRMAN, Mr. MAY (Permanent Central Opium Board) said that Luxembourg had submitted the statistics which the Board had requested and he assumed that at the Board's suggestion the appropriate national body could enter into consultation with the Board to remedy any situations.

In reply to a further question by the Chairman, he confirmed that the Board would like to know how the producer countries determined the volume of stocks on hand. He had pointed out the previous year that the effectiveness of the control measures provided in the 1953 Protocol would depend on the accuracy of information on stocks, their method of computation, their place of storage, moisture content and the like. In the absence of complete and accurate information on those points, the Board could not accurately determine the amount of stocks, which should normally correspond to the difference between quantities produced and quantities exported and consumed. The transmission of information on methods of estimating stocks might make it possible to recommend the adoption by Governments of uniform methods of computation.

Mr. NIKOLIC (Yugoslavia) doubted whether Governments could satisfy the Board completely without unduly hampering trade and excessively complicating controls inasmuch as the moisture content of stocks varied during the period of storage.



He wondered what the Board meant by the statement in the report that the producer countries had declared figures which purported to represent the quantity of opium licitly produced in 1952 but that it was not in a position to decide whether the quantities in the possession of Government agencies were identical with the quantities produced.

Mr. MAY (Permanent Central Opium Board) said that the Board was concerned to find out whether there was a substantial difference between the two quantities and if so what had become of it. There was good reason to fear that it had supplied the illicit traffic in 1953 just as it had in 1952.

Mr. NIKOLIC (Yugoslavia) said that in Yugoslavia producers were compelled by law to sell their output to approved firms and that their entire production was actually sold to those firms.

Mr. MAY (Permanent Central Opium Board) was pleased to know that that was the situation in Yugoslavia. The Board wished that the same could be said of all the producer countries, but it had certain misgivings on the point.

Mr. KRISHNAMOORTHY (India) assured the Commission that in India there was no difference between production and the purchases by the State monopoly. Only an infinitesimal portion of the opium produced was diverted into the illicit traffic. He recalled that he had repeatedly asked the Board to determine what might be considered a normal moisture content. The agencies responsible for the control over stocks would then have no difficulty in estimating the volume of stocks on hand on the basis of the theoretical moisture content. Practically speaking, India had only a single storage warehouse, as the quantities held by the states were intended for immediate use.

Mr. OZKOL (Turkey) said that there was a monopoly in Turkey and that the producer had to deliver his supply to the State monopoly which was obliged to buy all the opium offered and to store it in its central warehouse. A licence was required for exports. There was no difference between the quantities produced and those delivered to the monopoly.

Mr. ARDALAN (Iran) said that Iran applied the same methods as India and Turkey. The Opium Division of the Ministry of Finance purchased the entire output and sent it first to provincial storage warehouses and then to the central warehouse. At a previous session he had described the various phases of control in detail.

Mr. NIKOLIC (Yugoslavia) thought it important to know the date when the stocks were assembled than when they were placed in storage.

Mr. PANOPOULOS (Greece) said that his country, although authorized to produce opium, had as yet issued no permits for that purpose, because it was anxious first to create an effective system of control. Greece had purchased the opium it needed for its medical needs from Italy.

It would be advisable to inform the Board not only of the moisture content of stocks but also of their morphine content, estimated preferably by the methods used in the United States or Germany.

The CHAIRMAN noted that the Commission seemed to view the sale of production to a monopoly as an effective means of eliminating the illicit traffic at the producing stage. The members seemed to agree on the need for submitting figures on actual stocks to the Board together with any information, such as place of storage, date of assembling, moisture and morphine content and the like, which would enable the Board to identify the stocks. It would be well to consider methods for overcoming the practical difficulties to which the Yugoslav representative had referred. Lastly, the Commission had apparently endorsed the Board's conclusion that strict control at the national level was the best guarantee of the effectiveness of international control.

Mr. ANSLINGER (United States of America) said that when the Commission had begun to discuss the Protocol relating to the limitation of the production of opium, the quantity of opium necessary to meet world requirements for medical purposes had been estimated at 450 tons, although some experts had felt that a figure of 500 tons would have been more appropriate. According, however, to the latest report of the Permanent Central Opium Board, a figure of 750 tons now seemed closer to the truth. The report showed (E/OB/9, Table III) that the world production of morphine had risen to over 72,000 kg. in 1951 and to over 75,000 kg. in 1952. It would therefore be advisable to re-appraise the world's needs for opium for medical purposes.

The CHAIRMAN asked the representative of the Permanent Central Opium Board whether he could state what effect the stability of world consumption of codeine (that consumption having, for the first time, shown no increase the past year) had on the world's real needs for opium, inasmuch as morphine was used mostly for the preparation of codeine. He also wished to know whether a figure of between 450 and 600 tons was justified for the licit consumption of opium for medical purposes, and what part was played by changes in stocks, which had also not increased during the year.

Mr. MAY (Permanent Central Opium Board) was unable to give exact information on the subject; he was, however, inclined to think that a quantity of between 600 and 700 tons would come closer to meeting the world's consumption needs for medical purposes than 450 tons. The real consumption had on occasion exceeded 700 tons.

#### Conversion of codeine into morphine

Mr. ISMAIL (Egypt) stressed the importance of the question of codeine (non-narcotic drug) into morphine (narcotic drug) and asked the representative of the Permanent Central Opium Board if any other quantities of codeine had been converted into morphine besides the 26 kg. of codeine mentioned. He hoped that the representative of the World Organization would give the Commission a scientific explanation of the possibilities of such conversion.

Dr. WOLFF (World Health Organization) confirmed the information given in chapter IV of the report. He had been informed by a highly reliable source that the morphine mentioned in the preceding report had been obtained not from codeine itself, but from the residues of its manufacture. The operation had been perfectly legal.

He drew the Commission's attention, however, to paragraph 3.2 of the fourth report of the Committee of Experts on Habit-Forming Drugs.<sup>1/</sup> The Committee admitted that attempts to convert codeine into morphine had been successful to some extent. The conversion had been effected in a 25 per cent ratio, but it was possible that with improved methods the ratio might go up to 50 per cent. The Committee had therefore taken the view that measures of codeine control should not be relaxed and that, when any future agreements on codeine control were drafted, account should be taken of the fact that the substance could be converted into morphine. Moreover, the Committee had recognized that the conversion of ethylmorphine into morphine should be no more difficult than that of codeine into morphine. Consequently, its remarks concerning codeine control applied also to the control of ethylmorphine.

#### Trends in the licit movement of narcotic drugs in 1952

Mr. NICOLIC (Yugoslavia) noted that in its report the Opium Board emphasized the considerable variations in the opium production figures declared by Governments and the fact that some Governments, instead of declaring actual production, declared only the amounts bought from producers by State monopolies. He felt that the information submitted to the Commission by the representatives of four producing countries refuted the Board's statement.

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<sup>1/</sup> WHO Technical Report Series, No. 76.

Mr. ARDALAN (Iran) explained that the Iranian Government bought up all the opium produced in the country. When the production exceeded consumption needs, the excess quantities of opium were systematically destroyed. Likewise, whenever the authorities discovered any opium that had been illicitly produced, the entire quantity of such opium was destroyed.

Mr. SHARMAN (Canada) noted that during 1950, 1951 and 1952 the annual world production of opium had exceeded 1,000 tons, but the export statistics for the same years showed exports amounting to only about 750 tons.

Mr. LAZARTE (Peru) said, with reference to coca leaf, that the Peruvian Government had not sent the requested production statistics to the Opium Board earlier because it had deemed it necessary first to undertake a detailed study of the regions in which the coca plant was cultivated. In order to control the cultivation of that plant, it had set up a Coca monopoly under the Minister of Finance. The study in question would take a long time, however, because the regions where the plant was cultivated were usually difficult of access. The Peruvian Government had therefore, to its great regret, been compelled to delay sending the production statistics. He was, however, in a position to state that the information would be communicated to the Opium Board in the very near future.

The Peruvian Government had sent in statistics of coca leaf exports for every year up to and including 1952. He would submit the export figures for 1953 when the Commission discussed the coca leaf problem. Peru had produced no cocaine since 1950, when manufacture permits granted to certain firms had been revoked. Since that time, cocaine production had become a State monopoly, but it had been entirely suspended in 1951, 1952 and 1953 and would be resumed only at the end of the current year. That might be one reason for the increase in coca leaf exports which the Peruvian Government had brought to the notice of the Opium Board.

He reserved the right to comment later on the gap between the export figures communicated by the producing countries and the import figures given by the consuming countries. The Commission might perhaps remedy the situation by improving the methods of compiling statistics and in particular, by furnishing the countries concerned with a common denominator for that purpose.

Mr. MAY (Permanent Central Opium Board) was happy to say that the Board had for 1952 received from Peru all the coca-leaf statistics it had asked for except with regard to seizures. The Board was now in possession of the Peruvian production figures, which were 8,189 tons in 1950, 9,014 tons in 1951, and 9,738 tons in 1952.

#### Diacetylmorphine

Dr. WOLFF (World Health Organization), speaking on behalf of the World Health Organization, thanked the Permanent Central Opium Board and the Supervisory Body for their assistance to WHO in the field of control of diacetylmorphine consumption.

#### Illicit traffic

The CHAIRMAN drew attention to the flexible manner in which that chapter, and in particular the last paragraph, had been drafted.

Mr. MAY (Permanent Central Opium Board) recalled, with regard to the case of illicit production of diacetylmorphine in Italy mentioned in the paragraph in question, that the Italian representative had explained in 1953 that the person responsible for the illicit traffic had not been arrested because the Italian law did not permit his arrest. Since then, that person had managed to leave Italy, and the Italian Government had asked the authorities of all other States to extradite him if he should be apprehended.

The CHAIRMAN felt that the Commission should await the imminent arrival of the observer of the Italian Government before continuing the discussion.

Retrospect: Twenty-five years of international control

The CHAIRMAN congratulated the Board on the remarkable summary of past international action given in that chapter. Although much remained to be done in the field of narcotics control, the chapter made comforting reading. Nevertheless, the report indicated that there was a definite increase in drug addiction and particularly in illicit traffic in narcotic drugs. Consequently, it was more necessary than ever to invite the Governments concerned to apply the conventions on narcotic drugs and to intensify their struggle against the illicit traffic. The Commission's most effective instrument was world public opinion, the support of which, as the Permanent Central Opium Board remarked, was essential. Lastly, the Commission still had before it the long and difficult task of completing the draft single convention.

He expressed to Mr. May and to the members of the Permanent Central Opium Board the Commission's gratitude for their excellent work.

The meeting rose at 4.50 p.m.