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COMMISSION ON NARCOTICS

FIRST SESSION

DRUG ADDICTION

Item 11 on the Amended Agenda

Memorandum Prepared by the Secretariat

Note by the Assistant Secretary-General in Charge of the Department of
Social Affairs

In order to assist the Commission in its discussions on Item 11 of the amended provisional Agenda, the Secretariat has prepared this memorandum which contains an historical exposee of the work accomplished under the auspices of the League of Nations in the sphere of drug addiction.

I

The struggle against drug addiction is one of the principal tasks of the permanent international organization dealing with the control of narcotics. The international agreements and conventions are concerned directly or indirectly with the question of drug addiction. It is mentioned, for example, in the preamble to the 1912 Convention and to the 1925 Agreement. The conference for the Suppression of Opium Smoking held at Bangkok introduced into its Final Act signed on 27 November 1931, Recommendation X which reads as follows:

"Considering that if the work of the Governments in dealing with the practice of opium-smoking would be facilitated if more complete and authoritative information were available on certain questions - namely:

- (1) The effects, physiological and psychological, on the individual of the practice (a) of smoking opium, (b) of smoking opium dross;

What are the constituents of opium which produce those effects, and whether and how it is possible to eliminate,

/replace

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replace by some harmless substance, or otherwise render harmless such constituents;

- (iii) Methods of cure of addiction to opium-smoking;
- (iv) Provision of a test which can be readily applied for determining the character of gross brought in - e.g. whether it has already been resmoked, or is adulterated, or is the product of other than Government opium;

Recommends that arrangements should be made for research into these questions on a plan to be agreed between the Governments concerned, and that the assistance of the Advisory Committee and of the Health Committee of the League should be obtained in preparing a programme for such research and supervising its execution."

Article 15 of the 1931 Convention specifically recognizes the responsibility of Governments to conduct a systematic campaign against the development of drug addiction. The struggle against drug addiction is one of the tasks of the "special administration" mentioned in this Article. This Article reads as follows:

"The High Contracting Parties shall, if they have not already done so, create a special administration for the purpose of:

- (a)
- (b)
- (c) Organizing the campaign against drug addiction, by taking all useful steps to prevent its development and to suppress the illicit traffic."

In Article 15 of the Final Act of the 1931 Convention, the conference recommended:

"That the League of Nations be enabled to give prizes as a reward for results obtained by research work for the purpose of discovering medicines which, although producing the same therapeutic effects as the drugs, do not give rise to drug addiction."

II

In 1930 the League of Nations began a systematic approach to the problem of drug addiction. On the proposal of the Fifth Committee the Eleventh Assembly requested the Advisory Opium Committee:

"To study and report to the Council upon the question whether Governments should be asked to indicate, as far as it is possible for them to do so, either in their annual reports or by means of an answer to a special questionnaire, the approximate number of persons in their country addicted to each type of drug, the approximate amounts of such drugs consumed, and the method of treatment employed."

/Following

Following on the discussions on this resolution, the Advisory Committee at its Fourteenth Session, (January - February 1941) decided that it was necessary on the one hand to ask for the opinion of the Health Committee of the League of Nations on this matter, and on the other, to ask the Governments, if not to undertake a special inquiry, at least to provide as far as possible all the information which they had on the subject.

This proposal of the Advisory Committee was approved by the Council, and the Secretary-General, in his circular letter CL294.1931.XI of 23 November 1931, asked governments to provide the Secretariat with all information which they considered useful. The replies from the Governments received by the Secretariat were embodied in the document O.C.1408(1) of 28 October 1933 which was passed to the Advisory Committee.

At its Seventeenth Session in May 1931, the Health Committee took the initiative in the study of the methods of treatment of drug addicts. Having received a report of an expert advising the establishment of a Committee for the study of the treatment of drug addicts, the Health Committee at its Eighteenth Session decided to obtain the comments of a certain number of experts from different countries, before setting up this Committee. These comments were communicated to the members of the Opium Advisory Committee in confidential document O.C.1461 of 17 January 1933. The Health Committee at its Twentieth Session in October 1933 studied these comments which had been made the object of a general study (document C.H.1075 (a)), and adopted the following resolution:

"The Health Committee

"In accordance with the resolution adopted during its Seventeenth Session having taken note of the documentation collected since that date in the form of reports supplied by certain experts, concludes:

"1. That this documentation provides in a general way an adequate account of the question of the direct treatment of drug-addicts, with the exception of opium-smokers;

"2. That this problem is of special importance in the Far East because of the great number of drug-addicts to be found there;

/"3. That

"3. That the methods of treatment recommended by most experts for the countries of Western civilization are difficult to apply in certain Far Eastern countries;

"Considers that the problem, as arising in the Far East, should be further studied, particularly in connection with the question of the methods of treatment applicable to opium-smokers;

"And decides, before appointing the Committee mentioned in its previous resolution, to establish a scheme of work in collaboration with the Advisory Committee on Traffic in Opium."

It will be seen from this resolution that before pursuing its enquiries the Health Committee decided to co-ordinate its work with that of the Opium Advisory Committee.

It is appropriate to add that the decision of the Health Committee in so far as it concerns the study of the methods of the treatment of drug addicts, is inspired with the desire to give effect to the Recommendation X of the final Act of the Bangkok Conference, which deals with the treatment of drug addicts.

As far as the other points of the enquiry mentioned in the resolution of the Assembly are concerned, namely the approximate number of drug addicts in the different countries and the approximate quantities of the different drugs consumed by them, the Health Committee advised the Opium Advisory Committee in its letter of 30 April 1932 that it was not in possession of information on these two problems, and that it would be appropriate to await the results of the enquiry undertaken by the Advisory Committee in order to state an opinion based on this information.

The results of this enquiry contained in document O.C.1408(1) mentioned above, did not appear to be sufficient to enable the Health Committee to express an opinion based on this information.

However, the answers given were sufficient to draw the attention of the Committee to the fact that the problem of drug addiction was a very lively concern of the authorities of certain countries. They also raised the important question of the relation of drug addiction to criminal behaviour.

The Opium Advisory Committee continued the study of the general aspects of drug addiction during its Twentieth Session in 1935. It asked the Secretariat to submit to it a study giving all the statistical information on drug addiction on the registration of drug addicts and the extent of drug addiction in the different countries which it had at its disposal. At its Twenty-First Session in 1936 the Committee took formal notice of a memorandum prepared by the Secretariat which was based on the information supplied by the Governments in their annual reports. The Committee decided to send the questionnaire mentioned below to the Governments with the request that they should supply for a few years, beginning in January 1937, to the Secretariat of the League of Nations, annual information on the extent of drug addiction, the institutions concerned with the treatment of drug addicts and the number of drug addicts in certain professions.

The Committee was of the opinion that the enquiry opened on this subject should be limited to cases of drug addiction caused by opium, morphine, heroin, cocaine and cannabis.

QUESTIONNAIRE ON DRUG ADDICTION*

From January, 1937,** Governments are requested to supply the Secretary-General of the League of Nations annually with information

/on the following

* Note by the Secretariat. The Advisory Committee, when adopting this questionnaire, decided that Governments which sent in separate annual reports on prepared opium should not be required to answer the questionnaire, but should be asked to supply similar information in such annual reports.

For the purpose of this questionnaire, it has been agreed to define an addict as a person, who, as the result of repeated use of a drug, has acquired an overpowering desire for its continuance.

It is not intended to include in this definition persons who are suffering from any medical condition (not including withdrawal symptoms) requiring for its treatment the administration of drugs. (This definition is inserted for guidance in answering this questionnaire and must not be taken to commit the Opium Advisory Committee from either a medical or legal point of view.)

** Any Government in possession of information in respect of the period 1930-1936, or any part of it, is requested to include such information in its reply.

on the following points:

I. Extent of Addiction

1. Approximate number of addicts in the country.*
2. Number of addicts who obtain their supply:
 - (a) from legitimate sources,
 - (b) from illicit sources.
3. Methods employed to ascertain the approximate number of addicts in the country.

II. Establishments for the Treatment of Addicts

1. Number and nature of public establishments for the treatment of addicts.

III. Addiction and the Professions

1. Total number of:
 - (a) Doctors
 - (b) Dentists
 - (c) Pharmacists
 - (d) Veterinary surgeons
2. The number of known addicts in each of the above classes.
3. The number of each of the above classes convicted of violation of the narcotic laws.

At its Twenty-Fourth Session in 1939 the Advisory Committee on Opium discussed the answers received and at the conclusion of its discussion it adopted with a few amendments, the following resolution which was submitted by the representatives of Switzerland and Poland:

"The Advisory Committee has taken note of document O.C.1769 containing the replies of Governments to the questionnaire on drug addiction annexed to Circular Letter No. 193.1936.XI.

"After a full discussion of the problem, it has instructed the Secretariat:

"(a) To draw the attention of Governments to the discussion on drug addiction held at the Advisory Committee's twenty-fourth session and to request them to supply in their annual reports, or in a special report, any observations or fresh information on this question.

/"(b) To carry

* Including opium-smokers, whether smoking Monopoly opium or obtaining supplies of prepared opium illicitly.

"(b) To carry out a comparative study of the legal and practical standpoint taken at present in the various countries regarding drug addiction and the addict, such study to include both addiction to manufactured drugs and addiction to prepared opium.

"In carrying out this task, the Secretariat, shall have recourse to official sources of information and to scientific studies, and shall have power to consult experts who, in so far as countries represented on the Advisory Committee are concerned, shall be selected in agreement with the respective members of the Committee."

At the same session, the Opium Advisory Committee asked the Health Committee to study the question of the prevention of drug addiction, especially the methods of mental hygiene. This question was submitted in March 1940 to the special Sub-Committee of the Health Committee which did not consider itself in a position to undertake at that time the study of a new problem but which, nevertheless, expressed its interest in the inquiry in the following passage of its report:

"After referring, at its session in May-June 1939, to the research undertaken by the Health Organization into the treatment of drug addiction, the Opium Advisory Committee expressed the desire that this research should be extended to include the prevention of addiction and more particularly, methods of mental hygiene.

"The Sub-Committee would have been glad to accept this additional task, but, while it appreciates the Advisory Committee's proposal, it must unfortunately, declare that it is unable to do so in present circumstances." (Document C.H.1449, dated 11 March 1940.)

In accordance with the decision taken by the Committee in 1939 the Secretariat submitted to the Opium Advisory Committee at its Twenty-Fifth session (13-17 May 1940) the draft of a questionnaire on the attitude in law and in fact adopted in the different countries in regard to drug addiction and drug addicts.* The following is the text of the questionnaire.

/QUESTIONNAIRE

* See League of Nations document C.125 M. 114, 1940 XI of 14 August 1940, page 17.

QUESTIONNAIRE REGARDING LEGAL AND PRACTICAL STANDPOINT
TAKEN UP REGARDING DRUG ADDICTION AND DRUG ADDICTS

(Manufactured-Drug Addiction)*

(The answers to the following questionnaire should be followed, where appropriate, by references to the relevant laws).

1. (a) Is non-medical consumption of manufactured drugs punishable by law as such, or is it punishable only in certain circumstances, and if so, in which?

(b) Is the fact of habitual recourse to manufactured drugs, or the fact of addiction, punishable by law?

(c) How are drug addiction and the drug addict defined in the laws or in the various administrative regulations? Are addicts classed as sick or vicious persons or as delinquents, etc.? (The penalties, if any, which are applicable under (a) and (b) above should be mentioned).
2. Is non-medical and public consumption of manufactured drugs or the inducing of others to consume such drugs a punishable offence? (State penalties, if any).
3. Are the various acts covered by the generic term "illicit traffic in narcotic drugs" held to be aggravated if committed under the influence of a pathological condition induced by the consumption of narcotics?
4. Does the drug addict come within the scope of preventive, administrative or judicial measures of various kinds, such as:
 - (a) Registration by the public health or administrative authorities. (Describe the organization and purpose of the registration system).
 - (b) Compulsory institutional internment. (Is this merely a measure of security - i.e. internment designed to effect the segregation of drug addicts, or is it internment for purposes of cure and rehabilitation? Where the latter type of system exists, a description should be given).
 - (c) Compulsory or voluntary treatment. (Describe the organization of the administrative system for compulsory, voluntary home, institutional, or out-patient (ambulatory) treatment).
 - (d) Supervision by the police authorities, local banishment, or other similar subsidiary penalties.
5. Are doctors entitled to treat drug addicts with narcotic drugs?
6. What limits are set to the treatment of a drug addict by a doctor:

/(a) Are

* The term "manufactured drugs" should be understood to mean drugs, preparations, and specialities falling within the scope of the International Conventions on Narcotic Drugs.

(a) Are doctors compelled to make addicts take a course of disintoxication treatment, and is the patient allowed to be treated at home or must he enter a closed institution?

(b) Has the doctor discretionary powers in prescribing drugs for his addict patient, or is he obliged to prescribe doses decreasing to the point of complete withdrawal?

(c) Is the doctor obliged to notify any public health or administrative authority of each case of addiction he is called upon to treat?

(d) Give particulars of any other measures which are compulsory for doctors treating addicts.

7. What are the rights and responsibilities of doctors as regards the treatment of sick persons with narcotic drugs?*

Is the administration of sedatives (manufactured drugs) to patients suffering from painful diseases of various kinds or subjected to operative procedures left to the discretion of the attending physician, or does the law on the practice of medicine set limits and enforce supervision, in such a way that certain maximum doses cannot be exceeded, that prescriptions must be renewed, that the administration of high doses is subject to administrative approval; or are any other methods of supervision applied which limit the discretionary powers of medical practitioners?

It should, in particular, be stated whether the doctor is entitled to keep a supply of narcotic drugs in his own consulting rooms, and what measures of supervision are applied to him.

The Advisory Committee considered that circumstances did not permit such a questionnaire to be addressed to the governments, but it instructed the Secretariat to pursue as far as possible its studies in relation to this matter.

With regard to drug addiction in respect of prepared opium, the Advisory Committee in the same session took formal notice of the following account submitted by the Secretariat:

/The 1912

* In its enquiry into drug addiction, the Advisory Committee excluded from the category of drug addicts persons suffering from any medical condition (not including withdrawal symptoms) which is medically recognized as calling for treatment by the administration of narcotic drugs. This question has, therefore, not been put for the purpose of studying cases of narcotic treated severe chronic diseases as such, but merely in order to gain an idea of the amount of latitude which is left to the medical practitioner in administering narcotic drugs, since many cases of chronic addiction may develop as a result of some acute disease in which narcotic drugs had to be administered.

The 1912 International Opium Convention and the 1925 Geneva Agreement make it incumbent upon the contracting parties to take measures for the gradual and effective suppression of the use of prepared opium. The total and immediate prohibition of the use of prepared opium constitutes an alternative scheme which must also be kept in view in order that an idea may be formed of the effect that both these systems may produce in reducing, or on the contrary increasing, addiction to prepared opium.

The majority of Governments have followed the line of gradual suppression. In the case of all territories (whether following the policy of abolition or that of toleration), a mass of documentary information was collected by the Commission of Enquiry into the Control of Opium Smoking in the Far East (see document C.635.M.254.1930 XI) and has been supplemented year by year by the special annual reports on prepared opium which are supplied by the various Governments. In the circumstances, the general legal and practical standpoint taken is well known to the Advisory Committee. A comprehensive questionnaire on the whole of these questions is therefore not required, but a specialized enquiry bearing on certain particular aspects of the question might be contemplated.

As the report of the Commission of Enquiry into the Control of Opium Smoking in the Far East says: "It is an essential part of any control system aiming at gradual suppression to register, license and ration smokers." It would be perfectly possible to contemplate a special enquiry dealing with these three factors, especially that of rationing. Since the Secretariat already possesses abundant material on the subject, no questionnaire would be required for such an enquiry. Another specialized enquiry into the preventive and curative measures referred to points III (Activities with a view to combating the use of prepared opium: education, propaganda, medical and social services) and IV (Treatment and after-care of addicts) of the annual reports sent to the League might also yield interesting results. Further to this, having in view the discussion which took place at the twenty-fourth session of the Advisory Committee (15 May to 12 June 1939) a special enquiry might be made into the policy adopted by monopolies in the matter of opium prices. These prices play an important part in counteracting or fostering the contraband traffic. This is therefore a factor of outstanding importance in increasing or decreasing addiction.

Lastly, a special investigation might be conducted into the substitution of one addiction for another - that is to say, the ousting of prepared opium in monopoly territories by manufactured drugs.

In view of the abundance and complexity of the information available to the Advisory Committee on the subject of addiction to prepared opium it would seem preferable for the Committee itself to decide what specialized enquiries should be pursued. In most cases, no new questionnaire to be answered by Governments would be necessary, since the data on prepared opium which are in the Secretariat are already fairly complete.

/The United

The United Nations Commission on Narcotics might wish to examine the problem of drug addiction due to prepared opium in the light of the new situation created by the prohibition of opium smoking in certain territories of the Far East. (See document E/C.S.7/7)

It might be useful that the Commission should obtain from the interested Governments information concerning the number of smokers in their respective territories, the treatment of smokers with a view to their disintoxication, the after care of addicts, and the measures taken to prevent smokers from turning to illicit supplies. It should be mentioned that the report presented to the Council of the League of Nations in November 1930 by the Commission of Enquiry into the control of opium-smoking in the Far East contains important information on the question of drug addiction in the Far East. This report summarizes the information collected by the Committee in the course of its enquiry during the period 24 September 1929 to 11 April 1930.

III

At its sixteenth session (September 1935) the Assembly of the League of Nations approved the report of the Fifth Committee which contains the following passage:

"It has already been said that the League, on account of new developments, must intensify its campaign against the abuse of narcotic drugs. This is a necessity not only on account of the development of the clandestine manufacture, but also in view of the intensity of the illicit traffic. Already in the Advisory Committee the representative of Poland had pointed out that drug addiction could be counteracted, not only by suppressing the illicit traffic, but also by an intensive educational campaign and propaganda against the abuse.

"The necessity for attacking the problem from this angle was

/perhaps

perhaps the most notable feature of this year's discussions in the Fifth Committee. Almost every delegate who spoke made some contribution on this point. The delegates for China, France, the United Kingdom and the Netherlands furnished highly interesting information as to educational and propaganda measures undertaken by their Governments in China, in the Union of Indo-China, and in Malaya and the Netherlands Indies. According to this information, it appears that the use of opium among the youth is to a great extent decreasing.

"The Fifth Committee was convinced of the urgency of measures of this kind being taken and would request the Advisory Committee to discuss this matter at the first opportunity and to endeavour to outline a constructive plan for organizing on an international basis the campaign of education and propaganda against the abuse of narcotic drugs. It is realized that, in some countries, important steps have already been taken in this direction; but the Fifth Committee is of the opinion that, on this particular point - as on most others in the field of narcotic drugs - it is necessary to develop a common plan and to co-ordinate the work to carry the plan into effect. It earnestly hopes that Governments will facilitate the Advisory Committee's task by furnishing information as to measures already taken and experience gained as to their effectiveness".

The information on these matters supplied to the League of Nations by the interested Governments was communicated to the members of the Advisory Committee in the document O.C. 1642 of 18 May 1936.

In furtherance of its work of propaganda against the abuse of narcotics, the Advisory Committee adopted at its twenty-first session (May-June 1936) the following resolution:

"The Advisory Committee has carefully examined the request of the Sixteenth Assembly relating to education and propaganda against

/the abuse

the abuse of narcotic drugs. After studying information supplied by Governments and summarized in document O.C. 1642, it is of opinion that propaganda in schools and other direct propaganda should only be practiced in certain countries where addiction is a substantial problem. In other countries where addiction is, on the contrary, sporadic, such propaganda would be evidently dangerous. It would not accordingly seem desirable to frame a constructive plan on an international basis in this field.

"The Committee, however, would insist on the utility of propaganda of this kind organized within the medical profession and among pharmacists, nurses, etc., and considers that special courses on addiction should be organized in the medical faculties and in establishments training persons for the auxiliary medical services.

"The Advisory Committee asks the Council to instruct the Secretary-General to forward this resolution to Governments, asking them to furnish all useful information concerning propaganda among medical and auxiliary medical circles."

The Council of the League of Nations took notice of the above mentioned resolution on 19 September 1936, and the Secretary-General transmitted its contents to the Governments in the circular letter C.L. 192 1936 XI of 7 November 1936, asking them to furnish all useful information concerning the organization of propaganda against the abuse of narcotics in the medical profession, amongst chemists, hospital assistants, nurses, etc., as well as in the faculties of medicine and pharmacology and other institutions training persons for the auxiliary medical services.

The replies of the Governments to this circular are contained in document O.C. 1686 of 18 May 1937 and O.C. 1686 (a) of 27 April 1939.

IV

The International Labour Conference adopted on 16 April 1932, at its sixteenth session the following resolution:

/"Whereas

"Whereas the report submitted to the Council of the League of Nations by the Commission of Enquiry into the control of opium-smoking in the Far East contains evidence that the opium-smoking habit is widespread among immigrant Chinese workers and exists to some extent among workers of other races, that the habit has harmful effects on the health, welfare and earning power of such workers, and that in some cases the habit may have repercussions on the conditions of their recruitment and employment; and

"Whereas it is desirable to secure as full information as possible regarding the effects of opium-smoking on the conditions of the workers concerned, with a view to the consideration of measures for the suppression of such abuses as may be found to exist;

"The Sixteenth Session of the International Labour Conference requests the Governing Body of the International Labour Office to consider the question of instructing the Office to undertake a documentary investigation, with the assistance of the competent bodies of the League of Nations and of the Governments of the Members concerned, into the extent of opium-smoking among workers, and the effects of opium-smoking on the conditions of recruitment, engagement and employment, and on the efficiency, welfare, sickness and death rates of such workers, and to report to the next Session of the Conference".

The report concerning the enquiry undertaken in accordance with the above mentioned resolution of the International Labour Conference was published by the International Labour Office in 1935 under the title "Opium and the Worker" (Studies and Reports, Series B, Social and Economic Conditions, No. 22)

/LIST

LIST OF THE PRINCIPAL DOCUMENTS CONCERNING DRUG ADDICTION
COMMUNICATED TO THE ADVISORY COMMITTEE ON TRAFFIC IN OPIUM AND
OTHER DANGEROUS DRUGS OF THE LEAGUE OF NATIONS

(The asterisk indicates that the document is exhausted in both languages. An asterisk followed by the letter "F" indicates that only the French edition is exhausted; when it is followed by the letter "E", only the English edition is exhausted.)

1. O.C.291* 17 August 1925 Note of the Secretary of the Advisory Committee on the replies of Governments on the proposal of the Government of the South American Union to consider Indian hemp as a substance with addictive properties.
2. O.C.341(b) 4 June 1926 Note by the Professor Knaffl-Lenz on the strychnine and caffeine pills as new opium substitutes.
3. O.C.341(c) 1 September 1926 Note by the Professor Knaffl-Lenz on the Chemical and Pharmacological Examination of Anti-Opium pills.
4. O.C.951* 20 March 1929 Notes on Peyote and Mescaline.
5. O.C.1124 14 January 1930 The treatment of Opium and Morphine addicts in Japan.
6. O.C.1167 10 February 1930 Cases of Codeine Addiction. Article by Dr. Hans Schwartz.
- O.C.1167(a) 15 September 1930 Cases of Codeine Addiction. Letter from the German Representative.
7. O.C.1188 20 March 1938 The Curing of Drug Addicts by Vesicatory Serum. Dr. P. Modinos' method.
O.C.1188(a)
O.C.1188(b)
O.C.1188(c)
8. O.C.1308 12 December 1930 Treatment of Morphinism. Letter from Dr. Bruno Schultz, Austrian representative.
9. O.C.1317 19 December 1930 Regulations governing Grants for the Treatment of Opium Addicts in the Netherlands Indies.
10. O.C.1408(1)*^F 27 October 1933 Enquiry into Drug Addiction. C.L.294.1931.XI of 23 November 1931.

/O.C.1408(1)(a)

10. O.C.1408(1)(a) 26 January 1934 Employment of visiting nurses in the Netherlands Indies.
- O.C.1408(1)(b)* 7 March 1934 Treatment of opium smokers
and addendum 20 May 1935 in Formosa: report on statistical research.
- O.C.1408(1)(c) 7 March 1934 Report by the Government Clinic for Treatment of Opium and Drug Addicts in Kwantung Leased Territory (Dairen).
- O.C.1408(1)(d) 7 March 1934 Treatment of Drug Addicts in Chosen.
- O.C.1408(1)(e) 22 May 1934 Brief note on the present state of the question: Enquiry into Drug Addiction.
- O.C.1408(1)(f) 23 November 1934 Activities of the Anti-Opium Clinic maintained by Chinese Residents in Singapore.
- O.C.1408(1)(g)*^F 25 May 1936 Enquiry into Drug Addiction.
(revised)
11. O.C.1421 31 May 1932 Article on morphine esters and morphine ethers as narcotic drugs, by Prof. Hermann Emde, of Basle and Konigsberg; published in "Deutsche Medizinische Wochenschrift" No. 52 of 1931.
12. O.C.1450 26 October 1932 State Laws in the United States
and annexes of America relating to the
1 et 2 control of narcotic drugs and the treatment of drug addiction.
13. O.C.1453* 1 November 1932 Formulae for the anti-opium pills used by the Persian Government in treating drug addicts.
14. O.C.1460 and 12 January 1933 Connection between crime and
O.C.1460(a) 26 July 1933 drug addiction. Comments by the United States of America.
15. O.C.1461 17 January 1933 Enquiry into drug addiction.
16. O.C.1473 27 April 1933 Documentary investigation
O.C.1473(a)*^F 24 May 1933 into opium-smoking among
O.C.1473(b) 13 January 1936 workers requested by the
O.C.1473(c) 18 March 1936 International Labour Office.
O.C.1473(d) 22 July 1936
O.C.1473(e) 10 February 1937

17. O.C.1490* 26 May 1933 Letter from the Italian Representative regarding a proposed investigation of the value of the legitimate trade in drugs and of the cost of addiction.
18. O.C.1496 24 July 1933
O.C.1496(a) 7 May 1934
O.C.1496(b)
O.C.1496(c) Recommendation X of the Final Act of the Bangkok Conference: Scientific research into certain questions connected with the opium-smoking problem.
19. O.C.1499 1 November 1933 Measures against drug addiction in Colombia.
20. O.C.1539*^F 15 May 1934 Measures taken by Governments against the abuse of narcotic drugs and for the purpose of preventing further development of such abuse.
21. O.C.1548 24 May 1934 Value of the legitimate trade in dangerous drugs and financial losses sustained by the community as a result of drug addiction.
22. O.C.1549 25 May 1934 Measures taken by Governments against the abuse of narcotic drugs and for the purpose of preventing the further development of such abuse. (Item XXI on the Agenda).
23. O.C.1551 25 May 1934 Measures taken by Governments against drug addiction and for the purpose of preventing further development thereof.
24. O.C.1570 24 October 1934 Control of drug addiction in Chosen.
O.C.1570(a) 18 May 1936 The Treatment of Drug Addicts in Kokaido Province, Chosen.
25. O.C.1571 30 October 1934 Addiction liability of codeine.
26. O.C.1583 9 March 1935 Regulations governing the admission of persons to a United States Narcotic Farm.
27. O.C.1586 29 March 1935 Information regarding the action taken and the methods adopted by international associations and missionary organizations in the campaign against narcotic drugs.

28. O.C.1591 27 April 1935 "Manchukuo's" opium policy and measures taken for the treatment of opium smokers and drug addicts in "Manchukuo".
29. O.C.1602 18 May 1935 A comfortable and spontaneous cure of the opium habit by a lecithin diet.
30. O.C.1605* 29 May 1935 Dedication of the new United States Narcotics Farm at Lexington, Kentucky, 25 May 1935.
- O.C.1605(a)* 19 March 1936 Dedication and opening of the new United States Narcotics Farm at Lexington, Kentucky.
- O.C.1605(b)* 17 March 1937 Symposium on Drug Addiction entitled "Hospital News".
- O.C.1605(c)* 23 August 1937 Activities of the United States Public Health Service in connection with the treatment of drug addiction.
- O.C.1605(d)* 19 July 1938 Information concerning the work of addict hospitals in the United States.
31. O.C.1611 19 July 1935 Article published in "The Lancet" of 6 April 1935 relating to a case of intoxication from cannabis grown in England.
32. O.C.1614 22 October 1935 Experience in the United States of America with the plan of selling drugs to addicts at low prices.
33. O.C.1616 22 November 1935 Dilaudide (dihydromorphinone): a review of the literature and a study of its addictive properties: Supplement No. 113 to the Public Health Reports of the United States.
34. O.C.1622*^F 3 March 1936 Enquiry into the measures taken by Governments and by national and international associations to organize the campaign against drug addiction and the illicit traffic in narcotic drugs.
O.C.1622(a) 1 September 1936
O.C.1622(b) 17 November 1937
35. O.C.1638 18 May 1936 Tables showing the number of registered smokers in the various Provinces and Municipalities in China.

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| 36. | <u>O.C.1642</u> | 18 May 1936 | Anti-Narcotic Education and Propaganda. |
| 37. | <u>O.C.1645</u> | 26 May 1936 | Note on anti-opium propaganda among school pupils in Indo-China. |
| 38. | <u>O.C.1660</u>
<u>O.C.1660(a)</u> | 28 August 1936
1 April 1937 | Statistical study in regard to opium addiction in Formosa. |
| 39. | <u>O.C.1661</u>
(together
with O.C.1453) | 24 July 1936 | Formula for the anti-opium pills used by the Government of Iran in treating drug addicts. |
| 40. | <u>O.C.1686</u> | 18 May 1937 | Anti-narcotic education and propaganda in medical and auxiliary medical circles. |
| 41. | <u>O.C.1688</u> | 17 May 1937 | Desomorphine as a habit-forming drug. |
| 42. | <u>O.C.1689</u> | 17 May 1937 | Recommendation X of the Bangkok Conference concerning Scientific Research. |
| 43. | <u>O.C.1692</u> | 18 May 1937 | Drug addiction among infant children born of addict mothers. |
| 44. | <u>O.C.1695*</u> ^F | 21 May 1937 | Codeine addiction. |
| 45. | <u>O.C.1705</u> | 7 June 1937 | Opium-smoking among workers. Resolution adopted by the International Labour Conference. |
| 46. | <u>O.C.1710</u> (1) | 27 August 1937 | Clinical studies of drug addiction, published by the United States Public Health Service; I. The Absence of Addiction Liability in "Perparine" by C.K. Himmelsbach, and II. "Rossium" Treatment of Drug Addiction, by C.K. Himmelsbach together with a Report on the chemistry of "Rossium" by Lyndon F. Small. |
| 47. | <u>O.C.1713</u> | 1 November 1937 | Investigation of the possibility of substituting cobra-venom for narcotic drugs as an analgesic in certain cases. |
| | | | /48. <u>O.C.1732</u> |

(1) To obtain the clinical studies mentioned under (1), application should be made to the Public Health Service of the United States of America.

48. O.C.1732⁽¹⁾

14 May 1938

Clinical studies of drug addiction communicated by the Representative of the United States of America:
III. "A Critical Review of the Withdrawal Treatments with Method of Evaluating Abstinence Syndromes". IV. "Suggestibility in Narcotic Addicts".
"Suggestibility in Delinquent and non-delinquent adult males."

(1) To obtain the clinical studies mentioned under (1), application should be made to the Public Health Service of the United States of America.

LIST OF DOCUMENTS PREPARED FOR THE HEALTH COMMITTEE
IN CONNECTION WITH THE ENQUIRY INTO DRUG ADDICTION

1. C.H.1075: ON VARYING METHODS OF TREATMENT OF DRUG ADDICTION, PRELIMINARY REPORT, by Dr. P. WOLFF.
2. C.H.1085: ETUDE DES DIVERSES METHODES DE TRAITEMENT DE LA TOXICOMANIE, Note du Directeur médical.
3. C.H.1085(a): SUR LES METHODES DE TRAITEMENT DE LA TOXICOMANIE. CONSIDERATIONS PAR LE Dr. B.J. LOGRE, Médecin de la Préfecture de Police du Département de la Seine
4. C.H.1085(b): A NOTE ON THE TREATMENT OF DRUG ADDICTION IN INDIA, by Lieut. Col. R.N. CHOPRA, M.A., M.D., (Cantab), I.M.S., Professor of Pharmacology, School of Tropical Medicine, Physician, Carmichael Hospital for Tropical Diseases, Calcutta. Officer-in-charge, Drug Addiction and Indigenous Drug enquiries, Indian Research Fund Association.
5. C.H.1085(c): NOTES ON Dr. WOLFF'S REPORT "ON VARIOUS METHODS OF TREATMENT OF DRUG ADDICTION", by G.F. McCleary, M.D., A Deputy Senior Medical Officer, Ministry of Health, London.
6. C.H.1085(d): DRUG ADDICTION AND MEASURES FOR ITS PREVENTION IN THE UNITED STATES, by Assistant Surgeon General Walter L. Treadway, United States Public Health Service, Division of Mental Hygiene, Washington, D.C.
7. C.H.1085(e), (f) et (g): ETUDE DES DIVERSES METHODES DE TRAITEMENT DE LA TOXICOMANIE, Memoranda du Professeur Karl BONHOEFFER, Directeur de la Clinique des maladies mentales et nerveuses de l'Hôpital de la Charité de Berlin, du Dr. Bonebakker, Directeur médical de l'Hôpital de la Mission Immanuel à Bandoeng et du Dr. Fred.H. MACKAY, du "Montreal General Hospital" du Canada.
8. C.H.1085(h): STUDY OF THE VARIOUS METHODS OF TREATING DRUG ADDICTION, Memorandum on the Preliminary Report "Various Methods of Treatment of Drug Addiction" (Confidential League Document C.H.1075, 14 April 1932), by Assistant Surgeon General Walter L. Treadway, U.S.A., Public Health Service, Division of Mental Hygiene, Washington, D.C.
9. C.H.1085(i): THE TREATMENT OF DRUG ADDICTION, a review by E.W. Adams, O.B.E., M.D., a Medical Officer of the Ministry of Health.

/SYNTHETIC

SYNTHETIC TABLE GROUPING DOCUMENTS RELATING TO DRUG ADDICTION

1. General information on drug addiction and the combating of drug addiction.

- Enquiry into drug addiction (general information and comparative studies for all countries) O.C.1408(1)(g)
O.C.1408(1)revised.
- Measures taken by governments against the abuse of narcotic drugs and for the purpose of preventing further development of such abuse O.C.1539*F
O.C.1549
O.C.1551
- Anti-narcotic education and propoganda O.C.1642
- Anti-narcotic education and propoganda in medical and auxiliary medical circles O.C.1686
- Action taken by international associations and missionary organizations in the campaign against narcotic drugs O.C.1586
O.C.1622*F
O.C.1622(a)(b)

2. Information on addiction in various countries.

- Various information on drug addiction and its treatment supplied by a certain number of countries and territories:
- China: O.C.1638
- Colombia: O.C.1499
- United States: O.C.1450 and Annexes 1 and 2.
O.C.1583
O.C.1605
O.C.1605(a)(b)(c)(d)
O.C.1614
O.C.1710
O.C.1732
- Netherlands Indies: O.C.1317
O.C.1408(1)(a)
- Indo-China: O.C.1645

/Iran:

Iran:	O.C.1453*
	O.C.1661
Japan:	O.C.1124
Korea:	O.C.1408(1)(d)
	O.C.1570
	O.C.1570(a)
Formosa:	O.C.1408(1)(b)*
	O.C.1660
	O.C.1660(a)
Kwantung:	O.C.1408(1)(c)
"Manchukuo":	O.C.1591

3. Methods of treatment.

Method of Dr. Modinos	O.C.1188
New method communicated from Austria	O.C.1308
Treatment by a lecithin diet	O.C.1602
Treatment by "Rossium"	O.C.1710
(See, moreover, the series of documents CH.1035(a)(b)(c)(d)(e)(f)(g)(h)(i) and CH.1075 of the Health Organization, as well as the information given country by country.	

4. Studies relating to certain substances with addictive properties.

Cannabis ⁽¹⁾ :	O.C.291
	O.C.1611
Codeine:	O.C.1167
	O.C.1167(a)
	O.C.1571
	O.C.1595
Morphine esters and morphine ethers:	O.C.1421
Dilaudide:	O.C.1616
Desomorphine:	O.C.1688
Perparine:	O.C.1710
Peyot and Mescaline:	O.C.95i

5. Various questions.

Scientific research into certain questions connected with the opium-smoking problem.	O.C.1496 and series a, b, c.
	O.C.1689

(1) Cannabis is already studied by a special sub-committee of the Advisory Committee, and document C.237.M.136.1938.XI.- Annex II - page 26 should therefore be consulted.

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Note by Prof. Knaffl-Lenz on
anti-opium pills

O.C.341(b)
O.C.341(c)

Opium-smoking among workers

O.C.1473 and
series a,b,c,d,e.
O.C.1705

Substituting cobra venom for morphine

O.C.1713

Criminality and drug addiction

O.C.1460
O.C.1460(a)

Drug addiction among children

O.C.1692

Value of the legitimate trade in
drugs and of the cost of addiction
to the community

O.C.1490
O.C.1548