## Opioid medications: indispensable to alleviate human suffering. Accessible and not unduly restricted.

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Untreated pain has a devastating impact on the quality of life of the patient and leads to changes in their physical, psychological and social circumstances. The World Health Organization indicates that according to international human rights laws, countries must provide pain treatment medication as part of their core obligations under the right to health. Similarly the 1961 Single Convention on Narcotic Drugs obligates countries to make narcotic drugs, necessary to alleviate pain and suffering, available and accessible. Yet, despite the existence of inexpensive and effective pain relief medicines, tens of millions of people around the world continue to suffer from moderate to severe pain each year without treatment. A number of barriers have been identified including lack of capacity of healthcare professionals, fear and stigma associated with using controlled medicines, and weak legislation and policies that do not protect both the patient and the healthcare workers. The UNODC-WHO-UICC Joint Global Program, in existence since 2013, works at the national level in three areas, 1) strengthen legislation and policies, 2) build capacity of physicians, pharmacists and other healthcare professionals and 3) increase community awareness and reduce stigma. Activities in the field are tailored to meet the needs of the country and include things such as developing a National Policy for Controlled Medicines in Nigeria, training physicians and nurses in Timor-Leste to assess each patient for pain and document similar to other vital signs, and finally, building a strong relationship between patient, physician and caregivers to allow for proper medical monitoring and assessment of risks such as current or past drug use behaviors. A strong control system, with a focus on protecting both patients and doctors from harm, which allows for the ethical medical and scientific use of controlled substances is indispensable to alleviate human suffering. Using a brief screening tool, studies have shown that 94% of patients defined as low risk did not display aberrant behaviors while those patients in the high risk category 90% did display aberrant behavior suggesting that screening tools are essential to prevent misuse and abuse.