Commission on Narcotic Drugs

61st CND session

5(a) Changes in the scope of control of substances

- Control Regimes -

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Single Convention on Narcotic Drugs of 1961

SCHEDULE I

Substances liable to similar abuse and productive of similar ill effects as drugs in schedule I, or convertible into a drug

(e.g. heroin, cannabis, cocaine)

SCHEDULE II

Substances liable to similar abuse and productive of similar ill effects as drugs in schedule II (to a lesser extent than drugs in Schedule I) or convertible into a drug

(e.g codeine and its derivatives)

SCHEDULE III

Preparations which, because of the substances they contain, are not liable to abuse and cannot produce ill-effects, and in which the drugs therein cannot be readily recovered

(e.g preparations of codeine, dihydro-codeine)

SCHEDULE IV

Drugs listed in Schedule I that are particularly liable to abuse and to produce ill effects and whose liability to abuse is not offset by substantial therapeutic advantages

(e.g cannabis and heroin)

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SCHEDULE I

Substances liable to similar abuse and productive of similar ill effects as drugs in schedule I, or convertible into a drug

(e.g. heroin, cannabis, cocaine)

1) Carfentanil
2) Ocfentanil
3) Furanyl fentanyl
4) Acryloylfentanyl (Acrylfentanyl)
5) 4-Fluoroisobutyrfentanyl (4-FIBF, pFIBF)
6) Tetrahydrofuranyl fentanyl (THF-F)

SCHEDULE II

Substances that are less addictive and liable to abuse than those in Schedule I

(E.g. codeine and its derivatives)

SCHEDULE III

Preparations containing narcotic drugs that are intended for medical use and are unlikely to be abused

(E.g. preparations of codeine, dihydro-codeine, propriam)

SCHEDULE IV

Drugs listed in Schedule I that are particularly liable to abuse and to produce ill effects and whose liability to abuse is not offset by substantial therapeutic advantages

(e.g cannabis and heroin)

1) Carfentanil

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Convention on Psychotropic Substances of 1971*

SCHEDULE I	SCHEDULE II	SCHEDULE III	SCHEDULE IV
Substances whose liability to abuse constitutes an especially serious risk to public health and which have very limited, if any, therapeutic usefulness *(e.g. LSD, MDMA ["ecstasy"], mescaline)*	Substances whose liability to abuse constitutes a substantial risk to public health and which have little to moderate therapeutic usefulness *(e.g. amphetamine and amphetamine-type stimulants)*	Substances whose liability to abuse constitutes a substantial risk to public health and which have moderate to great therapeutic usefulness *(e.g. barbiturates, including amobarbital, buprenorphine)*	Substances whose liability to abuse constitutes a smaller but still significant risk to public health and which have a therapeutic usefulness from little to great *(e.g. sedative/hypnotics and stimulants including allobarbital, diazepam, aminorex, pyrovalerone)*

*WHO, Guidance on the WHO review of psychoactive substances for international control, 2010, p. 17-18, available from: http://www.who.int/medicines/areas/quality_safety/GLS_WHORev_PsychoactSubst_IntC_2010.pdf

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Convention on Psychotropic Substances of 1971

SCHEDULE I

Substances presenting a high risk of abuse, posing a particularly serious threat to public health, which are of very little or no therapeutic value

(E.g. LSD, MDMA ["ecstasy"], mescaline)

SCHEDULE II

Substances whose liability to abuse constitutes a substantial risk to public health and which have little to moderate therapeutic usefulness

(E.g. amphetamine and amphetamine-type stimulants)

7) AB-CHMINACA
8) 5F-ADB / 5F-MDMB-PINACA
9) AB-PINACA
10) UR-144
11) 5F-PB-22
12) 4-Fluoroamphetamine (4-FA)

SCHEDULE III

Substances presenting a risk of abuse, posing a serious threat to public health, which are of moderate or high therapeutic value

(E.g. barbiturates, including amobarbital, buprenorphine)

SCHEDULE IV

Substances presenting a risk of abuse, posing a minor threat to public health, with a high therapeutic value

(E.g. tranquilizers, analgesics, narcotics, including allobarbital, diazepam)

Control measures – 1961 Convention Sch. I

- Limitation to medical and Scientific use
  - Art. 4
- Requirements for use v Quantities available
  - Art. 19, 20, 21
  - Estimates, Statistical returns on production, manufacture, consumption, stocks, import/export
- Manufacture, Trade and Distribution
  - Art. 29, 30, 31
  - Licence/control – manufacture, trade and distribution, import/export
  - Medical prescription for supply/dispensing
- Special provisions relating to international trade
  - Art. 31, 32
  - Import/Export authorizations
  - Control of Consignments

Control measures – 1961 Convention Sch. IV

- All measures applicable under Schedule 1
- Enhanced Control Regime for Drugs in Sch. IV – Art. 2(5)
  - A Party shall adopt any special measures of control which in its opinion are necessary having regard to the particularly dangerous properties of a drug so included; and
  - A Party shall, if in its opinion the prevailing conditions in its country render it the most appropriate means of protecting the public health and welfare, prohibit the production, manufacture, export and import of, trade in, possession or use of any such drug except for amounts which may be necessary for medical and scientific research only, including clinical trials therewith to be conducted under or subject to the direct supervision and control of the Party.

Control measures – 1971 Convention Sch. II

- Limitation to Medical and Scientific use
  - Art. 5(2)
  - Limits manufacture, export, import, distribution and stocks of, trade in, and use and possession to medical and scientific purposes
- Manufacture, Trade and Distribution
  - Art. 8, 9
  - Licence/control – manufacture, trade and distribution, import/export [8]
  - Medical prescription for supply/dispensing [9]
- Records and reports
  - Art. 11 (2,3) & 16 (4)
  - Records on manufacture, acquisitions and disposal
  - Statistical reporting e.g. trends, seizures, trafficking, modus operandi
- Special provisions relating to international trade
  - Art. 12 & 13
  - Import/Export Authorizations
  - Restriction on import/export

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Timeline of Implementation following Scheduling Decisions