

October 27, 2018

41st Expert Committee on Drug Dependence
WHO Secretariat
Geneva, Switzerland

Dear Hon. Committee Members,

We are writing as representatives of the Latin American Association for Palliative Care (ALCP for its Spanish acronym) and of the national palliative care associations in Latin America countries, in relation to the upcoming review of tramadol by the WHO 41st Expert Committee on Drug Dependence.

Tramadol is widely used in Latin America as an analgesic for moderate pain due to acute and chronic conditions. In many cases, in particular in resource poor settings and in rural areas, it is the only analgesic we have available for the treatment of severe, excruciating pain.

Tramadol has been extensively reviewed by previous WHO ECDDs several times, and consistently the experts have agreed that the reports of abuse and diversion do not merit international control and recommend that governments adopt national controls in countries where they deem it necessary.

We advocate for the rational use of medicines and support efforts taken to implement the necessary measures to prevent diversion and non-medical use, especially for substances that have abuse potential. However, we also meet thousands of patients who suffer in pain, who in spite of needing access to opioids for legitimate medical reasons, have to face a large number of regulatory and administrative barriers which hinder the availability and access to strong analgesics. For this reason, we congratulate the WHO Secretariat in undertaking a thorough evaluation of the extent of the use of tramadol throughout the world and thank the Secretariat for including participants from Latin American in this evaluation.

Tramadol has an extremely important role in palliative care and pain relief in countries throughout Latin America. Placing tramadol under international control would limit access to millions of patients to pain treatment, especially in countries where there is limited or no access to strong analgesics. We urge the members of the members of the 41st ECDD to consider the implications that placing such a medication under international control would have on the relief of suffering.

We suggest that the ECDD recommends not placing tramadol under international control and instead allow the Member States keep surveillance and monitoring at the national level based on their particular situation.

Sincerely,

Tania Pastrana
Chair
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