



# International Treaties Compliance

Diversion Control Division  
United Nations Reporting and Quota Section (DRQ)  
Supply Chain Conference  
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# Drug Control Treaties

To discuss the general requirements of three international drug control treaties that shapes DEA's implementation of the US Controlled Substances Act.

✓ **1961 Convention**

✓ **1971 Convention**

✓ **1988 Convention**



# Three International Conventions

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- ❖ Single Convention on Narcotic Drugs, 1961
- ❖ Convention on Psychotropic Substances, 1971
- ❖ Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988
- ✓ The United States is a party to all three treaties

Goal: to limit the use of narcotic drugs, psychotropic substances, and their precursors to legitimate medical and scientific purposes.





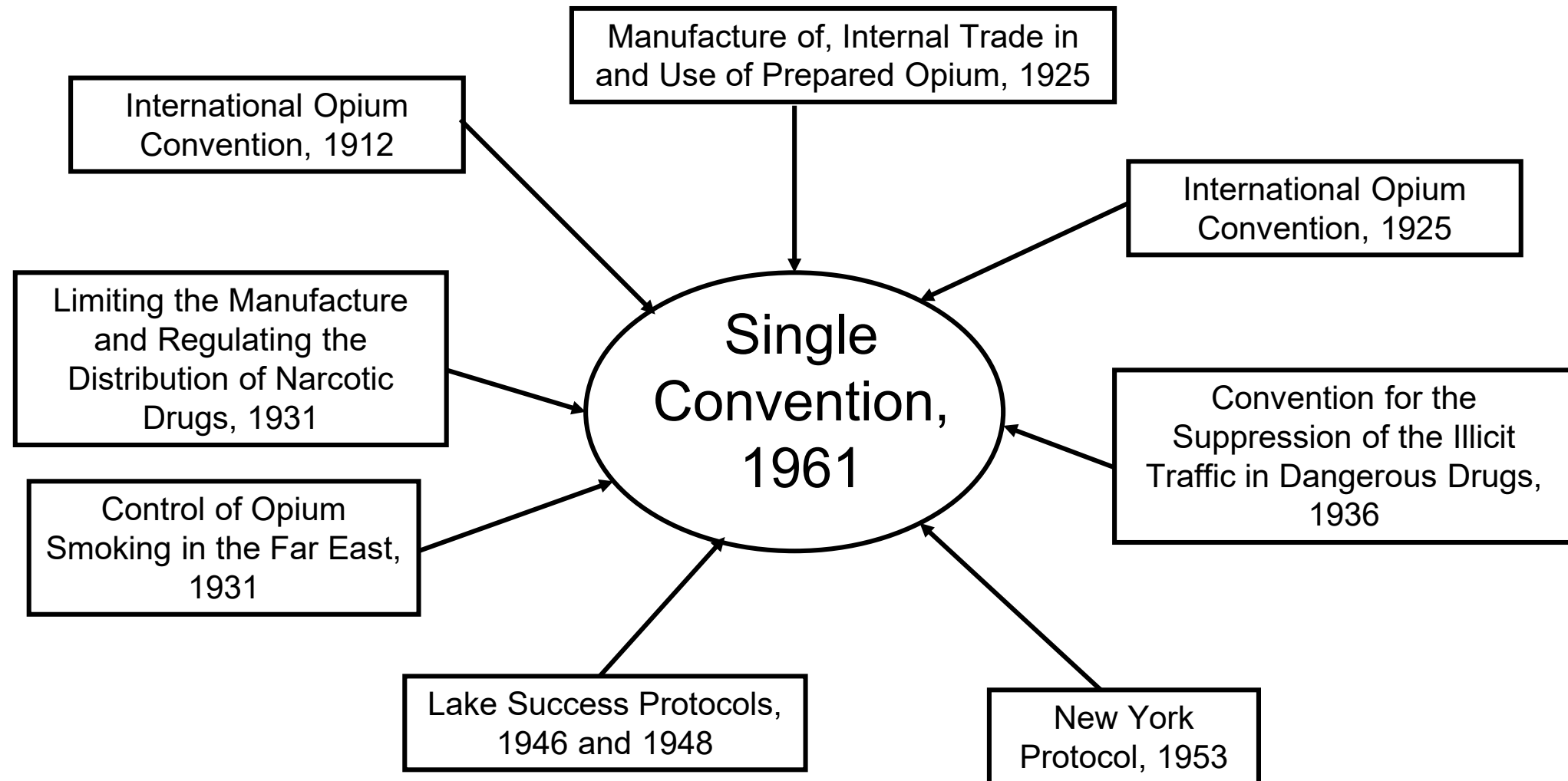
# The Single Convention

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- Adopted March 30, 1961
- Entered into force 1964
- Replaced previous treaties on opiates, cannabis, and cocaine
- 186 countries are Parties
- Specifically mentioned in preamble and other parts of the CSA
  - CSA puts U.S. in compliance with the Single Convention
- Also referred to as the “61 Convention”
- **List of Controlled Substances: “Yellow List”**



# Single Convention - Historical Perspective: Agreements, Conventions, and Protocols





# The Single Convention

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## Substances Covered

- **141** specific Narcotic drugs internationally controlled
  - Includes **opium** and its derivatives
    - ex. morphine, codeine, heroin
  - Includes **synthetic opiates**
    - ex. meperidine, methadone
  - Includes **cannabis** and **coca**
    - ex. cocaine/ecgonine
- Legal, not pharmacological definition of narcotic
- Drug controls extend to isomers, esters/ethers, salts thereof, whenever existence is possible





# '61 Convention: Four Schedules

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- Schedule I: drugs liable to significant abuse and to produce ill effects, but have potential therapeutic uses
  - *e.g.* cocaine, heroin, morphine, fentanyl
  - Majority of substances under control as Schedule II under the CSA
- Schedule II: drugs with somewhat lower abuse liability
  - *e.g.* codeine, dihydrocodeine
  - Only 10 substances listed





# '61 Convention: Four Schedules

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- Schedule III: exempt **preparations** of drugs in Schedules I or II - specifically listed formulations
  - *e.g.* codeine preparations when compounded with one or more ingredients and containing not more than 100 mg of the drug per dosage unit
- Schedule IV: drugs in Schedule I which are particularly liable to abuse and to produce ill effects. Such liability is not offset by substantial therapeutic advantages
  - etorphine, heroin, fentanyl analogues





# Single Convention -Types of Control



| <b>TREATY- BASED OBLIGATION:</b>               | Article |
|--|---------|
| Limit to medical and scientific purposes       | 2, 4    |
| Authorization of imports and exports           | 31      |
| Record-keeping                                 | 34b     |
| Medical prescriptions required                 | 2, 30   |
| Prevent Accumulation of Stocks                 | 29      |
| Licensure of manufacturers and distributors    | 30      |
| Quotas   | 29      |
| Possession of drugs under legal authority      | 33      |
| Security and Inspection                        | 35 - 38 |
| <b>DEA OBLIGATIONS AS COMPETENT AUTHORITY:</b> |         |
| Import/Export Statistics (Form A)              | 20      |
| Narcotic Estimates (Form B)                    | 19      |
| Narcotic Annual Statistics (Form C)            | 20      |



# Controls under 1961 Convention

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## Special Provisions:

- Schedule IV - parties may prohibit / limit manufacture or import
- Opium / Cannabis / Coca cultivation
  - special estimates, reports and controls
  - government agency in control of entire operation from cultivation to distribution
  - limitation on manufacture and import
- Poppy cultivation for seed
- Cannabis for industrial purposes
- Coca leaves for flavoring
- Extracts, CIII preparations exempt from some controls





# The Psychotropic Convention

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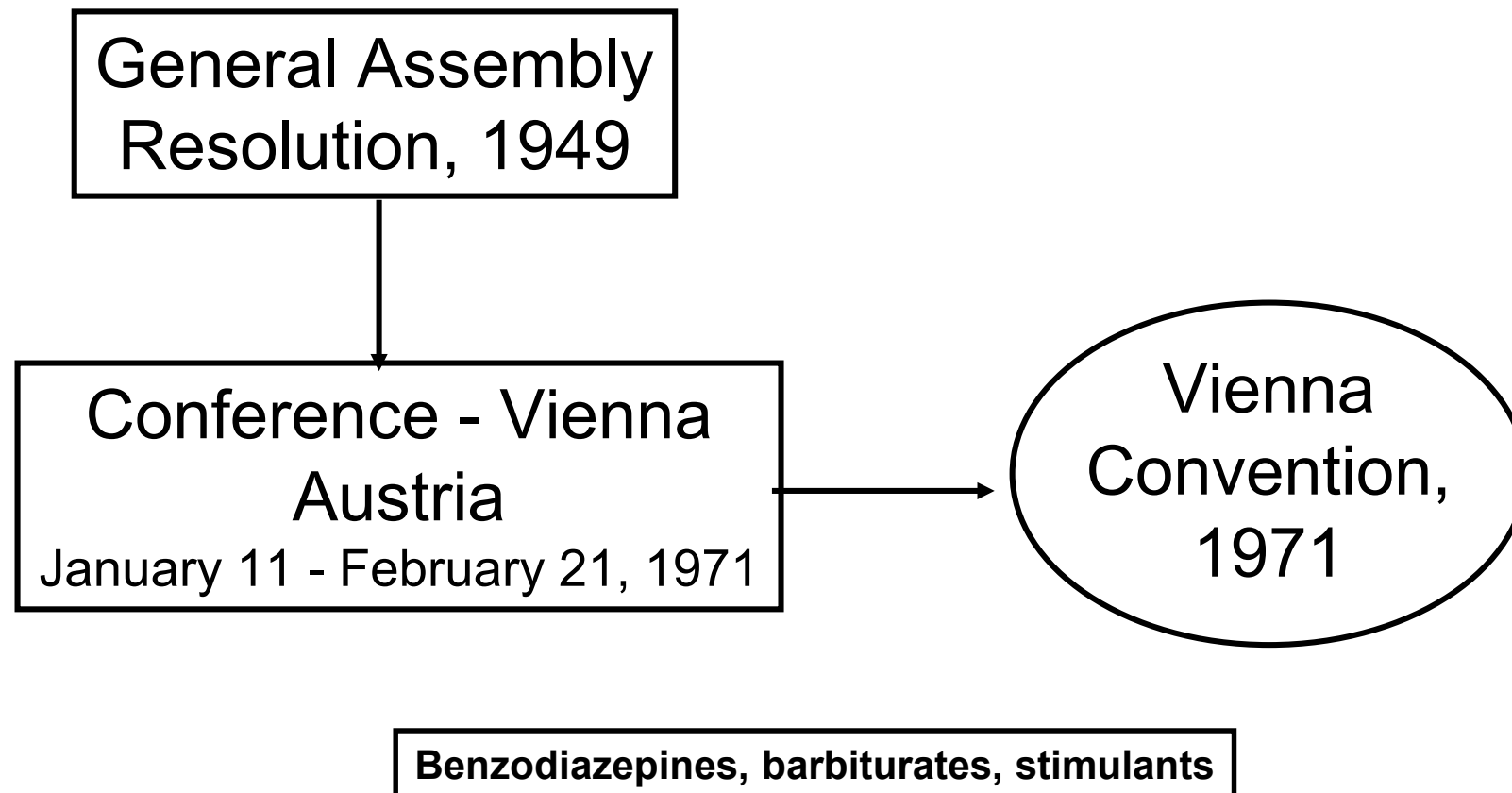
- Convention on Psychotropic Substances 1971
- Adopted in 1971 (Vienna, Austria)
  - US was one of the 34 signatories
- Entered into force, August 16, 1976
  - Presently 184 parties
- Ratified by US in 1980
- Referred to as the “71 Convention”

**List of Controlled Substances:**

**“Green List”**



# '71 Convention - Historical Perspective





# The Psychotropic Convention

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- Four Schedules
- Placement is based upon the relative therapeutic value and risk of abuse of each substance
- Schedule I is the most restrictive (*e.g.* LSD)
- Schedule IV is least restrictive (*e.g.* diazepam)
- Generally less stringent controls than the Single Convention
- Substantial difference in controls of CI/II vs. CIII/CIV
- Listing of substance is often stereospecific – not extended to esters, ethers, or derivatives





# '71 Convention: Schedules

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- Schedule I: Substances whose abuse liability constitutes an especially serious risk to the public health and which have very limited, if any, therapeutic usefulness
  - MDMA, LSD, 2,5-DMA
  - specific isomers and stereochemical variants of tetrahydrocannabinol





# '71 Convention: Schedules

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- Schedule II: Substances whose abuse liability constitutes a substantial risk to the public health and which have little to moderate therapeutic usefulness
  - amphetamine, methylphenidate
  - *delta-9*-tetrahydrocannabinol (dronabinol)
  - Amphetamine, dextroamphetamine, and levamphetamine are listed separately





# '71 Convention: Schedules

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- Schedule III: Substances whose abuse liability constitutes a substantial risk to the public health and which have moderate to great therapeutic usefulness
  - e.g. buprenorphine, butalbital, pentobarbital
- Schedule IV: Substances whose abuse liability constitutes a small but still significant risk to the public health and which have therapeutic usefulness from little to great
  - diazepam, mazindol, pemoline





# '71 Convention - Types of Control



| <b>TREATY-BASED OBLIGATION:</b>                                 | <b>Article</b> |
|---|----------------|
| Import/Export Authorizations or Declarations                    | 12             |
| Record-keeping  | 11             |
| Medical prescriptions required                                  | 9              |
| Licensure of manufacturers and distributors                     | 8              |
| Security and Inspection   | 8,15           |
| Restrict import/export of certain drugs                         | 13             |
| <b>DEA OBLIGATIONS AS COMPETENT AUTHORITY:</b>                  |                |
| Import/Export Statistics (Form AP)                              | 16             |
| Assessment of Medical Need (Form BP) – req'd. for I and II only | Resolution     |
| Annual Statistics (Form P)                                      | 4,16           |



# 1988 Convention

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- It provides the legal basis for the international control of precursors and essential chemicals used in the illicit manufacture of drugs
- Each party shall put control mechanisms in place in order to engage in manufacturing activities and distribution of these chemicals.
- Presently 191 parties

**List of Controlled Chemicals:**

**“Red List”**





# International Organizations

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- Commission on Narcotic Drugs (CND)
  - <http://www.unodc.org/unodc/en/commissions/CND/index.html>
- International Narcotics Control Board (INCB)
  - <http://www.incb.org>
- World Health Organization (WHO)
  - [www.who.org](http://www.who.org)
- United Nations Office on Drugs and Crime (UNODC)
  - <http://www.unodc.org>





# Commission on Narcotic Drugs

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The central policy-making body of the United Nations in drug related matters:

- Monitors and supports Member States' implementation of the three international drug control conventions
- Empowered to consider all matters pertaining to the aim of the conventions
- Decides, on the basis of recommendations by the World Health Organization (WHO), to place, remove, or transfer narcotic drugs and psychotropic substances under international control into a schedule
- 53 voting members, who meet annually





# International Narcotics Control Board

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Works on behalf of the CND:

- Promotes compliance with treaty provisions
- Ensures that adequate supplies of drugs are available for legitimate purposes
- Seeks to limit diversion into illicit traffic
- Identifies weaknesses in international / national control of drugs and provides assistance to Member States to strengthen those areas
- Maintains assessment and estimate systems
- Receives / analyzes statistical data from Parties





# World Health Organization

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The directing and coordinating authority for health within the United Nations system:

- The WHO Expert Committee on Drug Dependence (ECDD) plays a central role in the international drug control system
- Carries out medical and scientific evaluations of the abuse liability of dependence producing drugs falling within the terms of the conventions





# UN Office on Drugs and Crime

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Mandated to assist Member States in their struggle against illicit drugs, crime, and terrorism:

- Compiles statistics on illicit drug manufacturing and transportation
- Publishes an annual report to help Member States address the threat posed by drugs, crime, and terrorism





# The Controlled Substances Act

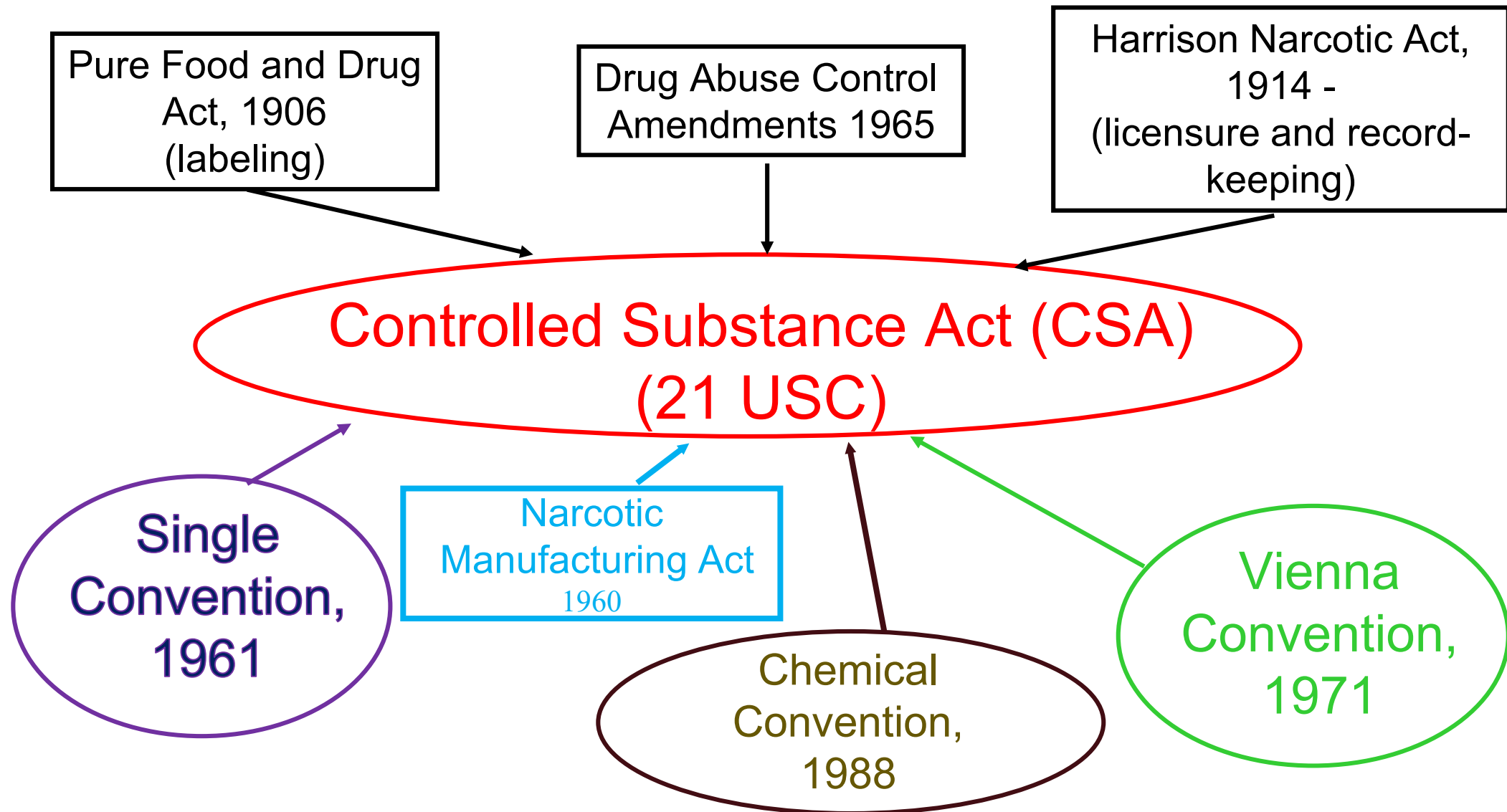
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- Enacted in 1970
- Substances Covered:
  - All substances on the “yellow” and “green” lists
  - Anabolic Steroids
  - “...**derivatives**, its salts, isomers, and salts of isomers.”





# CSA - Historical Perspective





# The Controlled Substances Act

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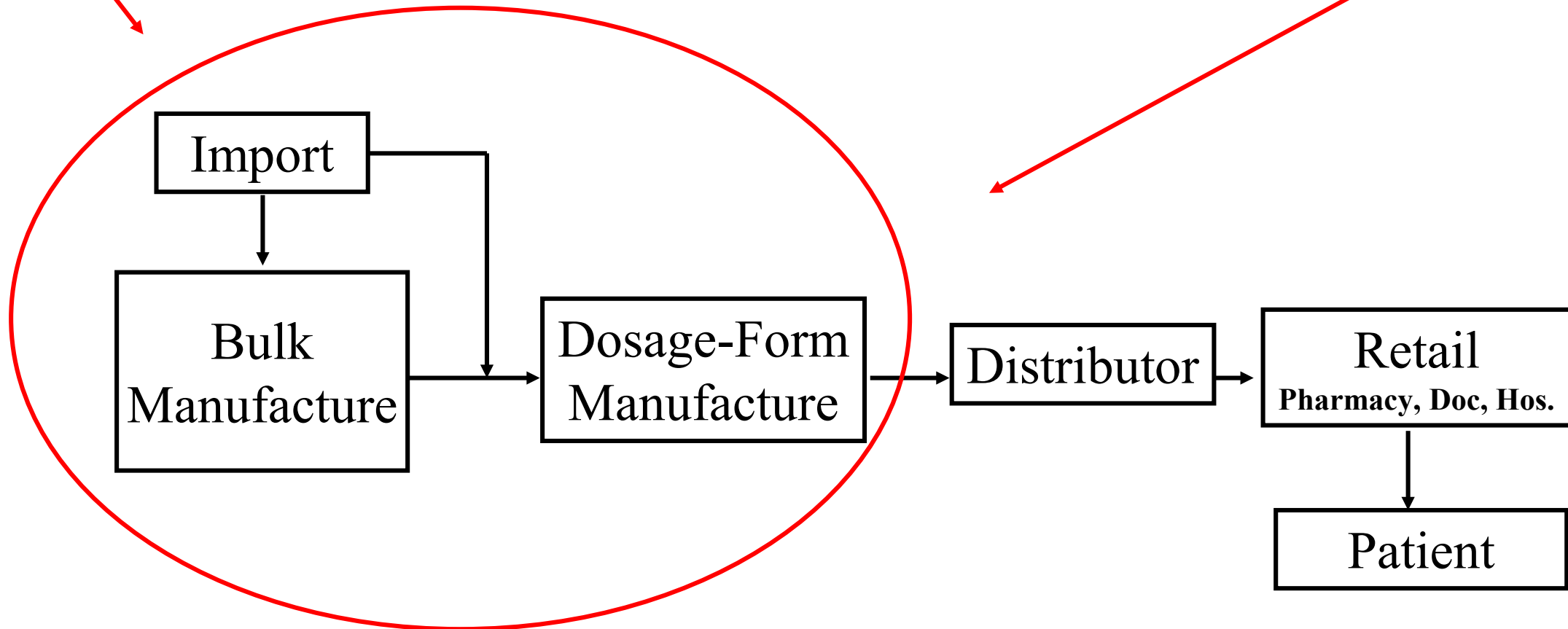
- Five Schedules, placement based upon (21 USC 812(b)):
  - Potential for abuse
  - Currently accepted medical use
  - Psychological or physical dependence
- Schedule I is most restrictive
  - *e.g.* LSD, heroin, MDMA
- Schedule V is least restrictive
  - *e.g.* some codeine preps



# The CSA creates a tightly controlled “closed system” of drug distribution.



Preventing diversion at this level of drug distribution is paramount to the success of the Diversion Program





# Code of Federal Regulations (CFR)

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“Codification of the general and permanent rules published in the Federal Register by the executive departments and agencies of the Federal Government.”

- The CFR is the “**how to**” guide for both the public and the Federal Government
- Individual agencies make additions or changes to the code
- Updated once per year (total of 50 titles)
- *[www.gpoaccess.gov/cfr/index.html](http://www.gpoaccess.gov/cfr/index.html)*





# What is the Federal Register (FR)?

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“The Federal Register is the official publication for rules, proposed rules, and notices of Federal agencies and organizations, as well as executive orders and other presidential documents.”

- Communicated to the public
- Published daily
- *[www.gpoaccess.gov/fr/index.html](http://www.gpoaccess.gov/fr/index.html)*





# Summary

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- International drug control system based on three treaties
- As a world leader in drug control efforts, the U.S. has consistently supported the requirements and spirit of the treaties
- Treaties form the basis for the statutory framework of the CSA and much of our drug control policy
- The CSA (and Congressional changes to the CSA) are implemented through the CFR, as communicated to the public in the FR





# Questions?

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