

## Featured Article



Throughout the year, IAHPC board members contribute a range of opinion pieces and other thought-provoking articles to the IAHPC Newsletter. This month our Guest Writer is **Professor Rosa Buitrago** from the Republic of Panama.

*Rosa Buitrago is Professor of Pharmacology and Pharmaceutical Care in Cancer Pain Management and is currently Dean of the School of Pharmacy, University of Panama. She has trained hundreds of healthcare providers in the field of pharmacology and pharmacotherapy of pain management and palliative care. Her other areas of expertise include policy-making to improve access to opioids and pain management in Latin America, and curriculum planning in pharmacology, pharmacotherapy of pain, palliative care and quality of medicine.*

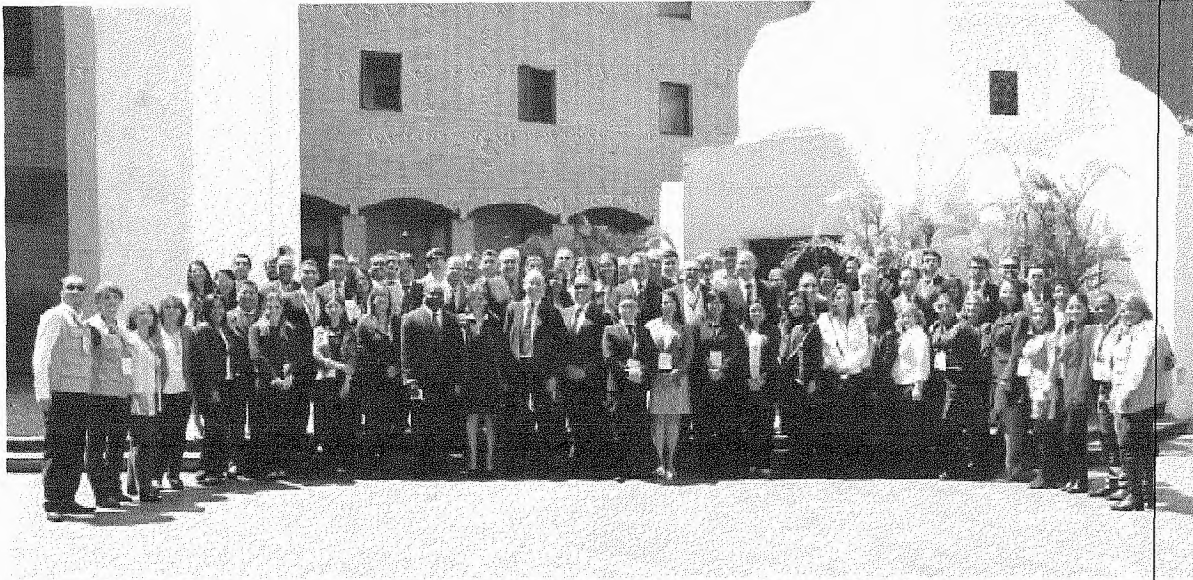
### New psychoactive substances: A new barrier to the provision of palliative care?

On 1-2 February, the United Nations Office on Drugs and Crime (UNODC) held the First Regional Meeting on New Psychoactive Substances (NPS) in the Western Hemisphere. Held in Bogotá, Colombia, the meeting brought together technical experts from countries and organizations in the region as well as international experts concerned by the emergence and use of NPS. Different topics were discussed including: legislation, early warning systems, trafficking and public health risks.

NPS are substances that can be misused that are not controlled by the International Drug Conventions but which may represent a public health threat. They may not necessarily be new but may have become available recently. They are associated with increased misuse, hospital admissions and also fatalities. Since they are not controlled substances they represent an alternative and inadvertently may place people at serious risk.

Most NPS identified to date resemble the effects of the six main groups of substances controlled under the international drug conventions: opioids, synthetic cannabinoid receptor agonists, dissociatives, classic hallucinogens, sedatives/hypnotics and stimulants.

Because of the rapid emergence of NPS, one of the major risks is the lack of information about the pharmacological and toxicological profiles of many of these substances when they appear on the market.



Group photo of the national, regional and international experts who took part in the First Regional Meeting on New Psychoactive Substances in the Western Hemisphere (Americas), held in Bogotá, Colombia. As a member of the World Health Organization Expert Committee on Drug Dependence, I attended the meeting to contribute a presentation on the topic of *Risks to health from NPS*. I also participated in a round table on the topic: *Identify the main issues involved, determine options for response and identify possible next steps for the region*.

The meeting led me to reflect that the gold standard for pain management in palliative care is morphine yet, unfortunately, we have not yet reached the goal of getting our patients to use this analgesic without the presence of barriers that label patients as 'addicts', or without the fear of prescription and dispensation of this substance. The appearance of NPS related to opioids emerges strongly to aggravate these barriers.

***One of the key decisions of the round table stated that efforts should be made to educate health professionals about the existence and dangers of NPS. I am confident that we may successfully teach both topics – in doing so this will help us to alleviate patients' pain as well as to care for people who are exposed to New Psychoactive Substances.***

## References

Global Smart update16: Post UNGASS 2016. NPS Trends, challenges and recommendations.

Conference Room paper CND 2016: New psychoactive substances: overview of trends, challenges and legal approaches.

## Links

- Prof. Rosa Buitrago, email: rebui\_@hotmail.com; rosa.buitrago@up.ac.pa
- Read Rosa's bio on the IAHPIC website.