

# IFRC position on adding ketamine on the list 1 of the 1971 Convention on Psychotropic Substances

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## Background

A notification to the United Nations Secretary-General has been made by China under the International Drug Control Convention, Convention on Psychotropic Substances, 1971, concerning a proposed recommendation for international control of ketamine.

## Ketamine

Ketamine (INN<sup>1</sup>) is a pharmaceutical used for the induction and maintenance of anaesthesia and as an analgesic in specific clinical situations. Ketamine is different from all other drugs in modern anaesthesiology with its different mechanism of action and its effects on respiratory and circulatory systems. Most of these effects are desirable and beneficial in the specific clinical situations where ketamine is preferred. Ketamine – when used alone - induces a so-called “dissociative” anaesthesia – “disconnecting the brain from the body” - where the patient appears to be in a trance-like state, with maintained eye reflexes and breathing. Patients recovering from a ketamine anaesthesia frequently experience drowsiness and lively, hallucinatory dreams.

## Abuse potential

The illicit use of ketamine typically includes consumption at sub-anaesthetic doses as a party drug for its hallucinogenic effects mainly in club environments and sometimes as a date rape drug. Due to the complex manufacturing process, most ketamine on the illegal market comes from legitimate medical sources, although some reports of illicit industrial scale synthesis of the drug have been presented.<sup>2</sup> Most ketamine users snort, smoke or swallow the drug and intravenous use is uncommon. Thus, ketamine addiction does not contribute to the spread of HIV or HBV/HCV through shared hypodermic needles.

## Ketamine in humanitarian assistance

Ketamine is the anaesthetic of choice when reliable manual and mechanical ventilation equipment is not available or when advanced airway management (tracheal intubation) is not possible (e.g. in mobile clinics, road-traffic accidents with crushed vehicle and trapped persons). Ketamine has a very

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<sup>1</sup> International Nonproprietary Name

<sup>2</sup> World Drug Report 2014. <http://www.unodc.org/wdr2014/>

favourable safety profile in clinical use and is particularly useful in healthcare settings where task-shifting is required due to a lack of skilled anaesthetic staff.

In resource poor hospital settings without anaesthetic machines, often without oxygen and sometimes even without electricity, ketamine is the only anaesthetic drug that allows even major surgery being performed. Its usability in traumatology makes it the preferred drug in mass casualty situations, such as earthquakes.

## **IFRC position on placing ketamine under international control**

Ketamine has an undisputable role in humanitarian assistance and in prehospital and disaster medicine. There are no available alternatives to ketamine to provide safe anaesthesia in some of the most challenging clinical situations and emergency settings.

Ketamine has a very specific but not insignificant – thus not “limited” – value for humanitarian assistance. Ketamine’s clinical benefits and safety profile, coupled with its usability and importance in some of the most vulnerable and fragile countries far outweigh the risks associated with its misuse. In our view, the addictive potential and the scope of misuse of ketamine does not support its inclusion as an internationally controlled substance as defined by the 1971 schedules of International Drug Control Conventions.

IFRC with all its 189 National Red Cross and Red Crescent Societies is a dedicated promoter of healthy lifestyles, free from addiction that limits the resilience of individuals and communities. IFRC acknowledges the health and social consequences of drug use and drug-related crime globally. We promote universal access to healthcare and see universal access to treatment of addiction as part of it. Due to the limited scope of misuse of ketamine globally we don’t believe that international control of the substance would have a significant impact on global health; hence we recommend control based on national protocols where the illicit use constitutes a significant public health problem.