



15 November 2016

The BMJ Press Release

The war on drugs has failed and doctors should lead calls for change, says The BMJ

- *Doctors should be central to the debate on alternative rational policies that promote health and respect dignity, says The BMJ's Editor in Chief*
- *Penalties for drug use should be scrapped and governments should regulate legal drug markets, says chair of Global Commission on Drug Policy*
- *Leading parliamentarians say changes to drug prohibition such as decriminalisation of drug use "could be good for the UK"*

The enforcement of prohibition - a ban on the production, supply, possession, and use of some drugs for non-medical purposes - causes huge harm, and doctors should lead calls for drug policy reform, argues **The BMJ** today.

Editor in chief, Dr Fiona Godlee, and features and debates editor, Richard Hurley, say prohibition laws, colloquially known as the "war on drugs," cost at least \$100bn annually but have failed to curb either supply or demand, reduce addiction, minimise harm, cut violence, and reduce profits for organised crime.

Far from diminishing over time, drug use has grown substantially worldwide - exacting a tragic toll on individuals and societies.

In 2014 a quarter of a billion adults - one in 20 worldwide - may have taken an illegal drug such as cannabis, cocaine, or heroin, while a quarter of UK 15 year olds may have taken illegal preparations of unknown quality and potency.

Calls for reform come as no surprise, then, and at a UN general assembly in April, many countries asked for health and human right to be prioritised over punitive responses.

Some have already removed criminal penalties for personal drug possession, explain Godlee and Hurley. For instance, Portugal replaced criminal sanctions for drug use with civil penalties and health interventions 15 years ago.

The UK's new Psychoactive Substances Act criminalises the supply but not use of synthetic drugs, while some US states like California have legal cannabis markets, and the Netherlands has tolerated regulated cannabis sales for decades.

A recent international evidence review concluded that governments should decriminalise minor drug offences, strengthen health and social sector alternatives to criminal sanctions, move cautiously, where possible, towards regulated drug markets, and scientifically evaluate the outcomes to build pragmatic and rational policy.

“Health should be at the centre of this debate, and so, therefore, should healthcare professionals,” they write. “Change is coming, and doctors should use their authority to lead calls for pragmatic reform informed by science and ethics.”

Ruth Dreifuss, former President of Switzerland and chair of the Global Commission on Drug Policy, says the need for more effective and humane drug policies is more urgent now than ever.

She argues for a pragmatic approach to drug policy reform, starting with the recognition that the idealised notion of a “society without drugs” is an unattainable fantasy. Reforms must then prioritise issues of public health, social integration, and security, while strictly respecting human rights and due judicial process, she writes.

Decriminalisation can and must go further, she adds. In its upcoming report, the Global Commission calls for governments to regulate all illicit drugs. This would curb a massive revenue stream for organised crime, worth an estimated US\$320bn.

Parliamentarians Baroness Molly Meacher and Nick Clegg MP say UK drug policy has been irrational for 55 years - and this is the right time to establish a wider review of drug policy.

They urge the government to reschedule cannabis for medical use and to review policy on heroin assisted treatment, which has already shown positive results in Switzerland, such as a decline in drug use and crime, and improvements in health and rehabilitation.

They also call for an end to criminal sanctions for the personal possession and use of all drugs. “British politicians should seriously consider introducing a version of the Portuguese model in the UK, involving a significant transfer of resources from criminal justice to treatment services,” they write.

They point out that steps towards decriminalisation in the UK have already begun, with the Psychoactive Substances Act 2016, and say changes to drug prohibition “could be good for the UK.”

Few UK medical organisations have a position on the issue, but this summer, the British Medical Association (BMA) voted for a move to prioritise treatment over punishment of individual drug users at its Annual Representative Meeting.

[Ends]

Note to Editors

Editorial: The war on drugs has failed: doctors should lead calls for drug policy reform

<http://www.bmj.com/content/355/bmj.i6067>

Observations: Non-violent drug users should face no penalty - a call from the Global Commission on Drug Policy

<http://www.bmj.com/content/355/bmj.i5921>

Analysis: How changes to drug prohibition could be good for the UK - an essay by Molly Meacher and Nick Clegg

<http://www.bmj.com/content/355/bmj.i6006>

About BMJ

BMJ is a healthcare knowledge provider that aims to advance healthcare worldwide by sharing knowledge and expertise to improve experiences, outcomes and value. For a full list of BMJ products and services, please visit [bmj.com](http://www.bmj.com).