

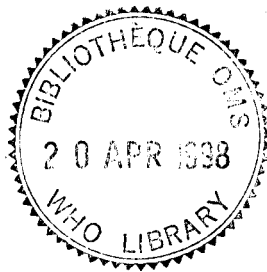
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# Amphetamine-type Stimulants

A report from the WHO Meeting on Amphetamines,  
MDMA and other Psychostimulants  
Geneva, 12-15 November 1996



Programme on Substance Abuse  
Division of Mental Health and Prevention of Substance Abuse  
World Health Organization  
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## **ABSTRACT**

This report on amphetamine-type stimulants (ATS) summarizes both: the findings of a World Health Organization Meeting on Amphetamines, MDMA and other Psychostimulants, held at the WHO Headquarters in Geneva, Switzerland from 12 to 15 November 1996; and background papers prepared for that meeting and subsequently revised.

This report presents key issues relating to amphetamine-type stimulants: epidemiology and social context; pharmacology and toxicology; health effects and social consequences; treatment approaches; prevention approaches and policy responses.

The report concludes with recommendations regarding WHO providing assistance in the development of strategic responses to amphetamine-type stimulant use.

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# Introduction

## 1. BACKGROUND

Between 12-15 November 1996 expert participants from fifteen countries, observers from six international organizations and representatives of the Swiss Federal Office of Foreign Affairs and the Swiss Federal Office of Public Health met at the Headquarters of the World Health Organization (WHO) in Geneva, Switzerland, to discuss amphetamines, MDMA<sup>a</sup> and other psychostimulants.

The meeting was opened by Dr Hiroshi Nakajima, Director-General of the World Health Organization. He expressed great concern about the use of amphetamines, MDMA and other psychostimulants as a public health issue. While amphetamine-type stimulants<sup>b</sup> (ATS) have been available and used for many years, in the last ten years their manufacture, trafficking and use have been increasing in many countries. The use of MDMA and other amphetamine analogues is a relatively new international phenomena and it is timely that WHO review the broader issues. In many countries the use of these drugs is widespread. Health risks and other problems associated with amphetamine-type stimulant use are poorly understood. This lack of understanding presents obstacles to prevention, treatment and policy responses.

Reflecting these concerns the World Health Organization's Programme on Substance Abuse (PSA), with the support of the Swiss Federal Office of Public Health and the Swiss Federal Department of Foreign Affairs, have set about to review: epidemiology and social context of ATS use; pharmacology; health risks and other consequences of use; prevention; treatment of users; and policy responses to ATS use.

Dr Nakajima reported that following the Geneva meeting it was proposed that a second phase (Phase II) of studies would be developed which: contribute further to an understanding of the extent and nature of the health and social consequences of amphetamine-type stimulant use; and identify and test promising prevention treatment and

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<sup>a</sup> methylenedioxyamphetamine - MDMA or 'ecstasy'

<sup>b</sup>The term '**amphetamine-type stimulants (ATS)**' was adopted by the meeting participants to describe amphetamines, MDMA and other psychostimulants. This term is used in this report and is recognized by the United Nations International Drug Control Programme. ATS include: amphetamine (INN: amfetamine), methamphetamine (INN: metamfetamine), MDMA (and other amphetamine analogues of the MDA-type). It excludes cocaine, nicotine and certain herbal stimulants. (See also Part 3 of this report which describes the pharmacology of the substances under discussion.)

policy approaches in different settings. In this second phase WHO, in collaboration with the United Nations International Drug Control Programme (UNDCP) and other partners, will disseminate evidence-based practice for prevention and treatment options for ATS use. WHO's work should be considered in the broader context of initiatives and activities undertaken by the international community in this field, for instance the United Nations International Drug Control Programme's (UNDCP) expert meetings on countermeasures against abuse of ATS held in Vienna (February, 1996) and Shanghai (November, 1996) which, with the assistance and expert knowledge of WHO representatives, resulted in a set of recommendations forming the basis of an *Action Plan Against Manufacture, Trafficking and Abuse of Amphetamine-type Stimulants and their Precursors*. This Action Plan is likely to be adopted by the special Session of the General Assembly of the United Nations in June 1998. WHO sees this as a long term project and the review in Phase I as a vehicle for further epidemiological, prevention, treatment and policy activities. The first phase of the project comprises a 'state of the art' review of the nature, extent, context and consequences of amphetamine-type stimulant use.

## 2. OBJECTIVE

The stated objective of the meeting was:

*To provide a 'state of the art' review of: the nature; extent; context and consequences of psychostimulant use. With particular reference to: public health; prevention; treatment and policy response.*

## 3. SCOPE

A wide range of drugs fell within the scope of the meeting and the review. The main drugs under discussion are listed below. The term 'amphetamine-type stimulants' or ATS was adopted by the meeting. This term is also used by other international organizations such as the United Nations International Drug Control Programme. 'Amphetamine analogues of the MDA-type' was the term adopted to describe the type of drugs which includes MDMA, popularly known as 'ecstasy'.

- (i) Illicit amphetamines and MDA-type amphetamine analogues:
  - (a) Amphetamine-like stimulants including: amphetamine, methamphetamine, methcathinone, aminorex, etc.
  - (b) Amphetamine analogues of the MDA-type, including: MDA, MDMA ('ecstasy'), MDEA, MBDB, etc.



- (ii) Licit stimulants (anorectics, broncho-dilators etc.) with medical and non-medical use:  
amfepramone, ephedrine, fenetylline, fenfluramine, methylphenidate, pemoline, phenmetrazine, pseudoephedrine, etc.

The review did not include: cocaine, nicotine, caffeine or 'herbal' stimulants and these drugs were not discussed at this meeting.

#### **4. TOPICS FOR DISCUSSION**

The meeting sought to cover a broad range of topics but with a particular emphasis on public health and prevention. The main topics for discussion and review were as follows:

- Epidemiology and social context
- Pharmacology and toxicology
- Health effects and social consequences
- Treatment approaches
- Prevention approaches
- Policy responses

For each of these topics participants were requested to: (1) identify key issues and gaps in knowledge; and (2) recommend future directions and priorities. The process was assisted by the preparation of background papers which are summarized in this report.

This report summarizes both the findings of the meeting and background papers prepared for the meeting, and subsequently revised, on the key issues related to: the epidemiology and social context of ATS use in different countries; the pharmacology and toxicology of ATS; the health and social consequences of ATS use; treatment approaches to ATS use and prevention and policy responses to ATS use.

