SYNTHETIC DRUGS AND NEW PSYCHOACTIVE SUBSTANCES IN LATIN AMERICA: 
NEW FINDINGS AND CHALLENGES
MARTIN RAITHELHUBER, UNODC
Synthetic drugs and new psychoactive substances in Latin America:
New findings and challenges
*CICAD 55 (2014)*

Martin Raithelhuber, Illicit Synthetic Drug Expert
Global Synthetics Monitoring: Analysis, Reporting, Trends (SMART) Programme

United Nations Office on Drugs and Crime
Content

- Amphetamine-type stimulants in Latin America
- ATS and ecstasy use
- New psychoactive substances – the global situation
- New psychoactive substances – challenges for Latin America
Data constraints in Latin America

- Outdated information on amphetamine-type stimulants (ATS) use prevalence in many countries (10+ years)
- In many drug use prevalence surveys, still no distinction between prescription stimulants and ATS or between methamphetamine and amphetamine
- Recently some countries started to differentiate between the use of amphetamines (amphetamine and methamphetamine) and non-medical use of prescription ATS in their surveys
- The UNODC-CICAD cooperation is leading to better prevalence data and greater awareness of ATS in the region
Amphetamine-type stimulants in Latin America
Estimulantes de tipo anfetamínico en América Latina
ATS use in the general population (annual prevalence)

- Uruguay (2011): 0.06%
- Argentina (2010): 0.1%
- Peru (2010): 0.11%
- Mexico (2011): 0.12%
- Ecuador (2007): 0.2%
- Chile (2010): 0.27%
- Venezuela (2011): 0.47%
- Bolivia (2007): 0.5%
- Colombia (2011): 0.67%
ATS use (youth)

- Higher ATS than cannabis and cocaine use among high-school students in Ecuador (7.2% ATS lifetime), Honduras (3.0% ATS annual) and Venezuela (2.6% ATS lifetime)
- In Brazil (1.7% ATS annual compared to 1.8% for cocaine), El Salvador (1.1% ATS annual same as cocaine), Paraguay (2.6% ATS annual, higher than cocaine at 0.7%) and Peru (1.5% ATS annual compared to 0.9% for cocaine) the use of non-specified ATS was reported to be higher or comparable to cocaine use among high-school students
Ecstasy use

• Prevalence among the general population low
• Ecstasy-type substances are widely used among students in the region
• Some countries show relatively high prevalence

Annual prevalence of ecstasy use among undergraduate students in selected countries, latest year available

<table>
<thead>
<tr>
<th>Country</th>
<th>Year</th>
<th>Prevalence Rate (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bolivia</td>
<td>2012</td>
<td>0.01</td>
</tr>
<tr>
<td>Ecuador</td>
<td>2012</td>
<td>0.27</td>
</tr>
<tr>
<td>Peru</td>
<td>2012</td>
<td>0.28</td>
</tr>
<tr>
<td>Colombia</td>
<td>2012</td>
<td>0.75</td>
</tr>
<tr>
<td>Brazil</td>
<td>2010</td>
<td>3.1</td>
</tr>
</tbody>
</table>
ATS seizures in Latin America: almost exclusively Mexico

- Methamphetamine
- Other ATS (except methamphetamine)

Year | Methamphetamine | Other ATS (except methamphetamine) |
--- | --- | --- |
2007 | 0.64 | 0.9 |
2008 | 0.56 | 0.4 |
2009 | 6.1 | |
2010 | 12.9 | |
2011 | 30.9 | 0.15 |
2012 | 31.6 | 0.12 |
Methamphetamine use in treatment

- Prevalence of methamphetamine use is only available for the undergraduate students in Bolivia, Colombia, Ecuador and Peru), Brazil (among high-school students) and Mexico (among high-school students, only State of Mexico).
- Treatment data related to methamphetamine from 8 countries (Argentina, Chile, Colombia, Guatemala, Mexico, Panama, Peru and Venezuela).
- High figures from Mexico (7,668 admissions in 2011), others much lower, some reported on methamphetamine treatment for the first time in 2012 (Colombia, Panama).
Amphetamine and ecstasy seizures in Latin America

![Graph showing the weight (kilograms) of seizures from 2007 to 2012 for amphetamines and ecstasy-type substances. The graph shows a decrease in seizures from approximately 523 kg in 2007 to 18 kg in 2012 for amphetamines, while ecstasy-type substances show a more gradual decline.]
Global emergence of NPS

December 2013 - over 90 countries
Global emergence of new psychoactive substances: What are new psychoactive substances (NPS)?

UNODC definition:

- Substances of abuse
- Not controlled by the 1961 or 1971 Conventions
- May pose a public health threat
- Which have recently become available
What are the effects of NPS?

Mimic the effect of traditional drugs:

• Synthetic cannabinoids (‘spice’) -> cannabis-like effects
• Synthetic cathinones (mephedrone) -> stimulants like amphetamines
• Aminoindanes, piperazines -> entactogens like ecstasy
• Tryptamines, phenethylamines (‘NBOMe’) -> hallucinogenics like LSD

➢ Sold with correct or incorrect substance declaration, or (wrongly) under the name of controlled drugs
➢ Associated with serious health risks
By 2013, 348 NPS were reported to UNODC, none of which is currently under international control.
NPS emergence in Latin America

- Until Dec 2013, 9 countries in Central and South America reported NPS
- Total of 26 different NPS reported
- Highest number of reports received from Chile, Colombia and Costa Rica

![Graph showing number of countries reporting NPS in different categories]

25B-NBOMe
25C-NBOMe
25I-NBOMe
2C-I
Legislative responses to NPS early-2014

Country: Mexico
Region: Americas
Subregion: North America
System in place: Drug laws/individual listing
Description: The 2010 General Health Law contains the list of controlled narcotics and psychotropic substances, based on five schedules. In 2014 a Decree of 07 January 2014 amended the law to include the synthetic cathinone mephedrone, the piperazine TFMPP as well as the general category of synthetic cannabinoids in Schedule I, i.e. substances with low or no therapeutical use which pose a serious threat to public health.
Legislation/Bills name: General Health Law, article 245 (ES)
Challenges resulting from the NPS emergence in Latin America

• **Drug users:** may not be aware that they are taking an NPS instead of LSD, ecstasy or 2C-B: possible overdose, severe negative health effects, effects on the body not yet fully understood

• **Health services:** may not be aware of range of NPS on the market, their pharmacology and toxicology, how to identify them, how to best help emergency cases

• **National drug laboratories:** may not be in a position to identify the range of NPS already available to users

• **Law enforcement:** may not have the means to detect NPS with current methods

• **Legislative systems:** may not offer sufficient tools for interventions
What does the Early Warning Advisory Offer?
UNODC Support to Member States

Training on portable device for rapid NPS detection
Guidelines for NPS identification in forensic laboratories

(available in English, French, Russian and Spanish)
Summary

• While cannabis is the most popular drug, ATS play an important role among the younger population along with cocaine.
• Data collections tools in many countries need further improvement to reflect ATS and NPS use.
• Low level of ATS seizures in most countries: absence of ATS, lack of enforcement capacity, different priorities (cocaine)?
• NPS are emerging in several countries, targeting existing synthetic drug markets.
• Drug problem in the region needs approaches which include ATS and NPS.

➤ ATS/NPS Identification and awareness
Thank you!

globalsmart@unodc.org

www.unodc.org