


## Opioid Crisis: The African Perspective

Mohammed Adinoyi Usman, MBBS, MSc pharmacology **Key Words:** codeine, opioid crisis, opioid misuse, prescription opioid, tramadol

Palliative care and pain relief are an important cause of world sufferings, and about 80% of these sufferings are thought to occur in low-income countries.<sup>1</sup> Opioids are very important in pain management, and, unfortunately, they are the second most abused psychoactive drugs and present the greatest harm to the health of users.<sup>2</sup> Tramadol and codeine are the most abused opioids in Africa.<sup>2</sup>

Only about 1% of the opioids used worldwide is distributed to low-income countries, hence the clamour for increased opioid use in Africa in recent years; however, these efforts may not be sustainable since these drugs are not readily available.<sup>1,3</sup> If not properly managed, this well-intended effort could worsen the abuse of opioids in Africa and, resultantly, pharmaceuticals may see Africa as a new profit-making ground.

Tramadol and codeine are affordable, less expensive, highly available, and may be abused for their analgesic, perceived calming and anti-fatigue effects to improve physical, intellectual, and working performances in Africa.<sup>2</sup> In predominantly Muslim countries with a strong injunction against psychoactive substances and where public codes of morality tend to condemn “intoxication” as unacceptable, an opportunity opens up for moderately powerful substances such as opioids with a medical alibi.<sup>4</sup>

African opioid crisis, evident mainly in the abuse of tramadol and codeine prescription opioids, is fueled by cheap prescriptions, drug racketeering, Medicrime, drug trafficking, and high-level involvement in drug-related offenses.<sup>2,4,5</sup> Obstacles to controlling the crisis include absence of quality data, weak public health response, poorly motivated drug law enforcement agencies, and health care workers often crippled by a lack of skills, resources, and efficient coordination.<sup>4,5</sup>

A cursory review of the fight against cannabis misuse has revealed that restrictive legislations tend to encourage adulterated drugs, increase drug trafficking, and drug misuse.<sup>4</sup> Nonetheless, the continent should be cautious with the liberalization of opioid use to avoid the mistakes of the West.<sup>2</sup> There is thus a need for a balanced approach to solving the African opioid crisis

without undermining the care of patients in need of these medications.

Quality evidence-based data from epidemiological and aetiological studies should be available for policy formation and interventions that suit the African peculiarities. Where there is drug use disorder, attention should be more on prevention and interventions. Authorities should ensure appropriate legislation to streamline the prescription process tracking system, to prevent people from collecting multiple prescriptions, and to ensure appropriate sanctions for violators. Drug law implementation by medicine standards authorities should ensure the availability of opioids by focusing more on other aspects of the fight against opioid misuse such as Medicrime.<sup>4</sup> Authorities and non-governmental organizations should scale up oversights of institutions involved in implementing drug laws and relevant guidelines to reduce the social costs of well-intended measures.<sup>4</sup> Also, China and India should be persuaded to increase crackdown on African-bound opioids using diplomacy, since most of the seized drug consignments originate from these countries.<sup>2</sup>

In conclusion, despite the current African opioid crisis on the continent, licit opioid use can be encouraged with caution and strong political will.

**About the Author**

*Department of Anaesthesiology and Intensive Care, Usmanu Danfodiyo University Teaching Hospital, Sokoto, Nigeria.*

*Correspondence and reprint requests to Mohammed Adinoyi Usman, Department of Anaesthesia and Intensive Care, Usmanu Danfodiyo University Teaching Hospital, P.M.B 2370, Sokoto, Nigeria, Post code: 23401 (e-mail: doctormohagcon@gmail.com).*

**Conflict of Interest Statement**

The author has no conflict of interest to declare.

**REFERENCES**

1. Bhadelia A, De Lima L, Arreola-Ornelas H, et al. Solving the global crisis in access to pain relief: lessons from country actions. *Am J Public Health.* 2019;109:58-60.
2. United Nation Office on Drugs and Crime. World drug report 2019. Vienna. 2019. <https://wdr.unodc.org/wdr2019/>. Accessed January 12, 2020.

## Opioid Crisis in Africa

3. O'Brien M, Schwartz A, Plattner L. Treat the pain program. *J Pain Symptom Manage*. 2018;55(2S):S135-S139.
4. Klein A. Drug problem or Medicrime? Distribution and use of falsified tramadol medication in Egypt and West Africa. *J Illicit Econ Dev*. 2019;1:52-62.
5. Global Commission on Drug Policy. West Africa commission on drugs. Not just in transit: drugs, the state and society in West Africa an independent report of the West Africa commission on drugs. *West Africa Comm Drugs*. 2014; epub, 34-35. <http://www.wacommissionondrugs.org/wp-content/uploads/2014/11/WACD-Full-Report-Eng.pdf>. Accessed January 12, 2020.