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Dear Colleagues,

As health professionals committed to the principles of public health and evidence-based care and treatment, we are writing to express our grave concern about the recent steps taken by the government of the Russian Federation to silence discussion about medically assisted therapy for the treatment of addiction.

In February, the Moscow Department of the Federal Drug Control Service (FSKN) ordered the blocking of the Russian-language website of a civil society organization, the Andrey Rylkov Foundation, for discussing the evidence based approaches to drug treatment applied around the world, including opioid substitution treatment with the goal to provide comprehensive and up to date information on drug treatment and health of people who use drugs. At this month's meeting of the Commission on Narcotic Drugs, the Director of FSKN, Victor Ivanov publicly — and incorrectly — stated that the website was being used to distribute an illegal drug. Furthermore, the Russian delegation country statement to this United Nations body stated – also incorrectly - that methadone is not a medicine. Indeed, methadone and buprenorphine are included on the World Health Organization Model List of Essential Medicines that should be made available in all countries.

These actions and distortions of fact put Russian people further at risk for contracting and spreading HIV and HCV and further isolate Russia from evidence-based practices followed by socially-responsible societies throughout the world. We urge you to allow doctors to provide methadone and buprenorphine, and not restrict the Russian people from even obtaining information about these essential medicines.

There are around 1.6 million people injecting opiates in the Russian Federation, representing around 80 percent of all HIV cases in the country. Three-quarters of them are living with the Hepatitis C virus (HCV). This population is also increasingly at risk of TB and multiple drug-resistant TB (MDR-TB) as a result of inadequate treatment. Medication-assisted drug treatment has proven to improve the adherence of people who inject drugs to HIV and to TB treatment. With a declining population in general, Russia continues to struggle with the highest rates of HIV, HCV, and MDR-TB in the developed world, with the resulting high mortality rates amongst the young population having inevitable long term consequences for Russian society and economic activity. These devastating epidemics can only be addressed by altering the government stance on the availability of methadone and buprenorphine for the treatment of long-term opioid addiction.

Methadone, which the World Health Organization classifies as essential medicine for the treatment of opiate dependence (along with buprenorphine), remains one of the most effective interventions for halting the spread of HIV/AIDS, HCV and TB in people who inject drugs. Medically assisted therapy with methadone and buprenorphine is recommended by the UN General Assembly, the Commission on Narcotic Drugs, the International Narcotics Control Board, the World Health Organization, the U.S. Office of National Drug Control Policy, the National Institutes of Health, National Institute on Drug Abuse, Centers for Disease Control, and numerous other national and international medical and scientific agencies.

Moreover, in 2011 in the Concluding Observation on progress in implementation of the Convention on Economic, Social and Cultural Rights, the UN Committee on Economic, Social and Cultural Rights stated that prohibiting harm reduction services and methadone maintenance treatment is a violation of people's social rights and recommended that the Russian Federation remove all barriers to implementation of opioid substitution treatment. The current policy approach of the Russian Federation is in conflict with the international law.

Drug dependency and addiction are medical problems that need medical treatment and should not be criminalized. We know from decades of scientific studies, from all over the world, that medication assisted treatment with methadone or buprenorphine is the most effective way of reducing drug use and the health problems associated with injecting opioid use.

Treatment with methadone or buprenorphine is administered by doctors and medical staff to over one million heroin or other opioid-dependent people in more than 60 countries worldwide, including China, India, Iran, and all of the European Union, North America and Australia. These treatments are delivered as part of an integrated system of treatment, which combines outreach efforts to engage with the target population, immediate support to address health and social risks, and encouragement to overcome addiction. The implementation of opiate substitution treatment supports the recovery process, as addicts are given the support and space to get out of the cycle of street drug use and crime. It is therefore impossible to understand why Russia does not allow its doctors and patients to have this long-proven tool — or even have information about it - to help reduce the epidemics of HIV/AIDS, HCV and TB in the nation.

As leading health and drug policy professionals, we urge you to reconsider these restrictions – starting with removing the ban on the Andrey Rylkov Foundation's Russian language website, and allowing Russian addiction treatment providers –and all Russian citizens - access to the extensive scientific

evidence on the safety and efficacy of medically assisted treatment in preventing further spread of death, disease and illnesses associated with injecting opioid use.

Sincerely,

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American Association of Addiction Psychiatry

American Psychiatric Association

Association for Medical Education and Research in Substance Abuse (AMERSA)

Deutsche Geselischaft für Suchtmedizin e.V.

Substance Misuse Management in General Practice