#KetamineIsMedicine

Ketamine Campaign

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Ketamine is an essential medicine

In many parts of the world, there is no choice: **ketamine is often the only anaesthetic at hand**. Unlike other anaesthetics, ketamine does not require reliable electricity supply, oxygen, highly trained staff, or monitoring systems to administer. That makes it the only safe form of anaesthesia in many poorly resourced hospitals and medical centres and in conflict and disaster zones.

Ketamine is very safe because it does not depress breathing or blood pressure, which means it is relatively easy to administer and ideal for patients who have lost a lot of blood or who have dangerously low blood flow due to septic shock. **A recent study found that ketamine is available in 70% of LMIC health care facilities, making it more accessible than any other drug or piece of anaesthetic equipment.**

**Ketamine abuse, dependence and harm**

Ketamine abuse has been documented since at least the 1980s, but it is not routinely included in many national surveys on recreational drug use, as abuse levels are generally low. In the 2014 Global Drug Survey, ketamine was 16th in popularity on a list 20 illicit drugs most used in the twenty countries surveyed, in several countries it did not appear on the top 20 list at all.

**Ketamine in global reports and legislation**

Ketamine has been on the World Health Organisation’s Essential Medicines List since 1985, it is included in ‘International Standards for Safe Practice in Anaesthesia’ 2010, and is the anaesthetic of choice for major surgery in the International Committee of the Red Cross (ICRC)’s War Surgery guide.

Ketamine is also a controlled substance under national laws in many countries. These laws may impose restrictions on its storage, distribution and use to prevent theft or non-medical use. However, ketamine is not scheduled under the UN Commission for Narcotic Drugs’ International Drug Control Conventions and so the drug can still be accessed for medical purposes in the places that need it most.

The UN Commission on Narcotic Drugs (CND) will decide in meetings in December 2015 and March 2016 whether or not to ‘schedule’ ketamine under the 1971 Convention on Psychotropic Substances. The UN General Assembly Special Session (UNGASS) on the world drug problem in April 2016 will also discuss the international classification of ketamine.

As medical professionals we know that ketamine has huge therapeutic value, however it is important that we make it clear to the UN Commission and the wider public just how valuable it is. Scheduling the drug would have a catastrophic effect on safe medical care across the world, so we must work together to ensure this does not come to pass.

When a drug becomes scheduled, only government run hospitals may import ketamine, which means staff in many medical centres around the world will not be able to access the drug - particularly affecting low resource institutions in rural areas who are already the most in need.

The medical centres that are able to access ketamine will face their own problems as they must keep detailed records of how scheduled drugs are used. But it’s easy to keep records, right?

In a well-equipped hospital in a high income country, where ketamine is used relatively less often than other anaesthetic drugs, it is quite easy to keep records. In a makeshift hospital in a war zone, with constant streams of injured men, women and children with traumatised families, the constant threat of danger and access to the bare minimum of equipment, keeping exact records in not quite so simple.

International scheduling risks a chain of events that result in the manufacture and distribution of essential ketamine drying up.

When morphine was similarly scheduled in India, staff became afraid of the possible legal repercussions of giving morphine to their patients, and so stopped proscribing it —resulting in medical use dropping 97%. As morphine was no longer given it was no longer manufactured, creating a chronic shortage of this essential medicine. With no safe alternative to ketamine available we simply cannot allow this to happen.

That is why it is so important to join the campaign. The more voices explaining the importance of ketamine, the stronger case we can make against scheduling it.

Anaesthesiologists around the world are united in what they do and the impact they have on patients, families and communities. On Tuesday 1st and Wednesday 2nd December 2015 we ask that you share how important ketamine and global heath is to you by posting on social media your location and #KetamineIsMedicine. Tag us @WFSAorg on Twitter and @WFSA - World Federation of Societies of Anaesthesiologists on Facebook.

Safe anaesthesia saves lives, united anaesthesiologists create change.
KETAMINE IS MEDICINE

BECAUSE SAFE ANAESTHESIA SAVES LIVES.

TOGETHER FOR THE NEGLECTED SURGICAL PATIENT.

www.wfsahq.org/ketamine
#KetamineIsMedicine
What can you do?

There are so many ways to become involved with the Ketamine campaign. Whether you would like to give two minutes to show your support, or spend more time campaigning to stop the scheduling of ketamine, we hope you will consider contributing.

Tell us your story

Most people don’t know about the importance of ketamine. From ketamine’s use in low resource settings to provide safe anaesthesia during surgery, to ketamine use postoperatively to relax the patient and reduce pain, it is so important to patient care - and medical practitioners are the best people to share these facts with a wider audience!

Do you have an inspiring story where ketamine made a huge difference to a patient’s life? Maybe ketamine helps you do your job better? Please click here to write a short paragraph telling us about it!

Social Media

Never before in human history have we been this globally connected, and never before have individuals and organisations had the ability to engage, teach, learn and influence change.

With this campaign we are asking you to do just that. Simply print out the poster on the next page, write your location (e.g: hospital, city, country)

Take a photo of you and your colleagues. Upload this onto social media with the #KetamineIsMedicine

These images will show the widespread use of ketamine as a medical drug around the world, and will show decision makers just how important medical access to ketamine is.
@WFSAorg

#KetamineIsMedicine
Words demonstrating support for the Ketamine campaign and the importance of access to ketamine as a medical treatment are so important. There are many outlets where you can share your voice and opinion. Two of the best ways of sharing this information in a meaningful way is to write to a local or international news outlet and/or write to a political representative in your area.

Example letter to a political representative

Please feel free to edit this letter as necessary and send to your MP, Ministry of Health, Congressman etc. Optional text, or text that may require customization, is outlined in brackets below. If you are sending the letter on behalf of an organization, please use your letterhead.

Dear […],

As a citizen living in [area, country] I am writing to inform you about the current threat to safe surgical care worldwide. Already more than 5 billion people do not have access to safe and affordable anaesthesia and surgical care when needed. 16.9 million people are dying every year due to lack of access to safe and affordable anaesthesia and surgical care.

However, these figures could increase if a motion to ‘schedule’ ketamine is approved by the UN Commission on Narcotic Drugs (CND).

Ketamine is absolutely vital when performing surgery in countries with limited hospital resources, including emergency treatment centres in conflict and disaster areas. It is also used after surgery to reduce the pain and psychological trauma of the injury or condition.

There is simply no alternative to ketamine and its scheduling would mean that millions more patients will go without safe anaesthesia during surgery and trauma.

I would like to urge you and your fellow decision makers to get involved with the WFSA’s Ketamine is Medicine campaign. [I would also like to encourage you to work to develop policy to ensure that [country] makes medical access to ketamine a priority in discussions on global health.]

I believe strongly that the [country] government needs to take a lead in putting forth policy initiatives to avert the current global crisis in anaesthesia and surgical care. I also believe that your position as a political representative makes you able to act as a stronger advocate to stop the scheduling of ketamine.

I look forward to hearing back from you as to what action plans you have come up with to address the [country] and global threat to ketamine and safe surgical care.

Thank you for your time and consideration.

Yours Sincerely,
Many publications have a ‘write to the editor’ section where you can submit a written piece that may be published in the newspaper or website.

Additionally, if you happen to know a journalist or editor it can be very beneficial to send them a short email outlining the issues.

Dear [...],

[Country] needs to do more to stop a huge threat to safe surgical care worldwide

Globally 5 billion people do not have access to safe and affordable anaesthesia and surgical care when needed. This figure is set to increase if ketamine is ‘scheduled’ by the UN Commission on Narcotic Drugs (CND). As a medical drug that is used to treat millions of trauma and surgical patients around the world, scheduling ketamine would make it much harder, if not impossible, for many hospitals and medical organisations to access ketamine for medical use.

Ketamine is absolutely vital to performing surgery in countries with limited hospital resources, including emergency treatment centres in conflict and disaster areas. It is also used after surgery to reduce the pain and psychological trauma of the injury or condition.

Ketamine is used widely in natural disaster and conflict zones. It is used on adult and child burn victims in order to make the pain of changing bandages bearable, it is used in amputations, both during the procedure to manage pain but also in the recovery stage to manage the physical trauma and phantom limb pain. There is simply no safe alternative in many of these situations.

I believe that if more people were aware of the threat to medical ketamine access and the danger it poses to the already huge global surgical crisis, it would allow more voices to raise their concerns about scheduling ketamine. I hope that this would encourage policy change securing access to medical ketamine on an international level, which will ultimately save lives.

I would appreciate it if you would consider sharing this information with your readership as it is a topic that affects billions of people [including many in [country]].

Yours sincerely,
If you are interested in reading more about ketamine, its role in global health, and the current threat to medical access there are a number of high quality publications that explain the subject in detail.

**Journal Publications:**


**Other Materials:**

- [World Health Organisation List of Essential Medicines (Amended August 2015)](#)
- [Factsheet on Ketamine (English)](#)
- [Hoja informativa ketamina (Español)](#)
- [Note d’information sur la ketamine (Français)](#)
- [WFSA Letter to the WHO Expert Committee on Drug Dependence (ECDD) in April 2014](#)
- [Full report of the WHO Expert Committee on Drug Dependence (ECDD) in December 2014](#)

For more information on the Ketamine Campaign and how you can help, please email Niki at comms@wfsahq.org.

Don’t forget to link with us on social media!

[facebook.com/wfsahq](http://facebook.com/wfsahq) | [twitter.com/wfsahq](http://twitter.com/wfsahq) | [linkedin.com/company/wfsa](http://linkedin.com/company/wfsa)