Forum: World Health Assembly (WHA)

Issue: Measures to control the falsified medicines used for diabetes treatment and weight loss

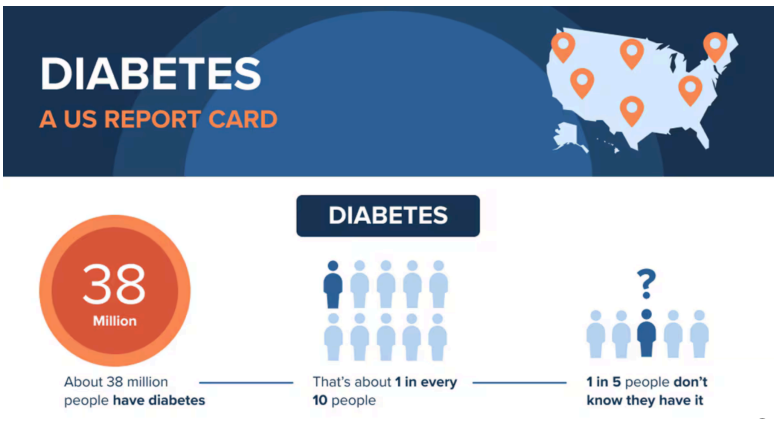
Student Officer: Şirin Pamir Şirikçi

Position: Deputy Chair

Introduction

Falsified medicines pose an urgent threat to global health. This issue is specifically dangerous for millions of those who have a chronic illness such as diabetes or an eating disorder, and even those who are just trying to lose weight. These counterfeit drugs usually contain illegal or non-regulated substances that risk the health and safety of their users. According to the World Health Organization (WHO), these medicines represent an important part of the pharmaceutical products in underdeveloped countries, which underlines the urgency of international cooperation to solve this problem. This is because, in such countries, the production of medicines and pharmaceutical products is unregulated or insufficient. Low control over medical product manufacturing puts patients' health in grave danger, or at least hinders their treatment.

Diabetes and obesity, two of the main chronic diseases, are on the rise right now more than ever. With falsified medicines, unhealthy nutrition habits, and a lack of access to quality healthcare, diabetes and obesity are a major threat to global health. As a result, millions of patients find themselves looking for low-quality solutions for a lower price. Considering the prevalence of these treatments, collective action on a global scale is crucial. An efficient solution requires collaboration between governments, international organizations, pharmaceutical companies, and non-governmental organizations (NGOs) in order to impose better regulations and inform the public. By detecting its sources and regulating measures, it is not too late to protect patients and guarantee equal health opportunities for everyone.



Picture 1: Diabetes in the United States of America

Definition of Key Terms

Falsified Medicines: These products are created by ill-intentioned people or companies for financial gain through not-so-legal ways. They often imitate the packaging or labeling of the authentic medicine in order to gain potential customers and do not contain the correct or intended amount of active ingredients. Such counterfeit drugs may contain incorrect substances, substandard ingredients, and harmful chemicals, which are extremely dangerous for the human body and are sold outside of legal frameworks that ensure the safety of genuine medicines.

Diabetes: A chronic medical condition that occurs when the body cannot properly regulate blood sugar levels, which could lead to nerve damage, kidney damage, and heart disease. Diabetes often happens when the body's insulin production is inefficient (insulin is a hormone that regulates blood sugar). Type 1 diabetes does not produce insulin at all, and Type 2 diabetes cannot use insulin effectively.

Obesity: A medical condition characterized by an excessive amount of body fat, measured by the body mass index (BMI), where a BMI of 30 or higher is classified as obese. Obviously, this vast accumulation of body fat poses significant threats, and increases the risk of serious diseases such as diabetes, cancer, and cardiovascular problems. Obesity is usually caused by a continuous poor diet and a lack of physical activities, but there are lots of genetic, environmental, and dietary factors that come into play.

Counterfeit Drugs: Just like falsified medicines, counterfeit drugs are also sold under fraudulent pretenses. These products are deliberately made to look like legitimate medicines but often contain dangerous substances instead of the intended ones. The production and distribution of counterfeit drugs are illegal and major concerns, especially in low- and middle-income countries, where regulatory oversight may be weak.

Pharmaceutical Regulation: This type of regulation checks the safety and legality of the manufacturing, distribution, and sale of medicines or pharmaceutical products. These regulations ensure that products are safe, effective, and high-quality, starting from the substance all the way to their distribution. Pharmaceutical regulations vary all over the world but are critical to protect customers from incorrect dosages, illegal products, falsified medicines, and counterfeit drugs.

Active Pharmaceutical Ingredient (API): An API is basically what makes a medicine, a medicine—the substance that gives the intended therapeutic effect. APIs are then combined with excipients (inactive substances) to make the product look like its final form, like tablets or injections. These substances are to be observed under strict pharmaceutical regulations, as they can be quite dangerous in the hands of fraudulent companies.

Supply Chain: This is the process of the entire system of production to distribution. The supply chain is the entirety of where a product is produced, transported, stored, and delivered to the end consumer. In the pharmaceutical industry, this includes raw materials, manufacturing of drugs, distribution to wholesalers or pharmacies, and ultimately delivery to healthcare providers. The regulation of the supply chain of a pharmaceutical product is essential to keep everything sterile, legal, and safe. Any minor disruption in the supply chain could potentially lead to exposing patients to substandard drugs.

Patient Safety: Patient safety ensures the provision of healthcare services, preventing patients from any harm. These measures reduce medical errors, avoid incorrect treatments, and prevent adverse reactions from medications. Ensuring this requires a healthcare system with protocols for monitoring and improving clinical practices. The safety of patients is directly linked to the quality of healthcare, which makes it critical in the fight against counterfeit products.

Drug Resistance: Drug resistance occurs when microorganisms (bacteria, viruses, or parasites…) become resistant to the effects of drugs that used to kill them. This resistance develops over time as these organisms evolve or adapt to the drugs used to treat infections. The rise of drug-resistant pathogens poses a serious challenge to public health because it limits the effectiveness of available medications and makes infections way harder to treat. The misuse or overuse of medications, including counterfeit drugs, is a key factor in accelerating the development of drug resistance.

General Overview

Falsified Medicines

The prevailing problem of falsified medicines, particularly those that are meant to treat diabetes and aim for weight loss, has become an expanding crisis on a global level. This type of medicine imitates actual medicines and contains altered active substances. Falsified medicines expose millions of people to extreme risks to their health, which makes this an international medical crisis. The great demand for treatments, the lack of regulation, and the multiplying online ways of distribution have paved the way for the rapid proliferation of these dangerous products.

Diabetes

The International Diabetes Federation (IDF) defines diabetes as a chronic disease that affects over 537 million people worldwide and necessitates ongoing medical care. Patients diagnosed with diabetes depend on treatments such as insulin or synthetic glucagon, which more often than not, are

unaffordable and inaccessible. Since the actual treatment of diabetes remains to be so out of reach to most patients, some try to find alternative solutions, which makes them way more vulnerable to falsified medication. Counterfeiters particularly target vital medication needed for the treatment of chronic diseases. Falsified insulin is aimed at type 1 diabetes patients, and certain type 2 patients. These versions contain incorrect doses or inactive substances, which are extremely dangerous. Results of usage may include severe hyperglycemia, diabetic comas, and even death. Falsified oral hypoglycemic agents replace metformin and DPP-4 inhibitors, targeted at type 2 patients. Unfortunately, these matters are replaced by toxic substances that worsen the situation of patients. It should also be kept in mind that the prevalence of these drugs is mostly due to the unavailability of actual medicines and treatments. Patients who do not have access to them feel that they have no choice but to turn to counterfeit versions, which is the main problem that should be addressed in discussions.

Weight Loss Treatments

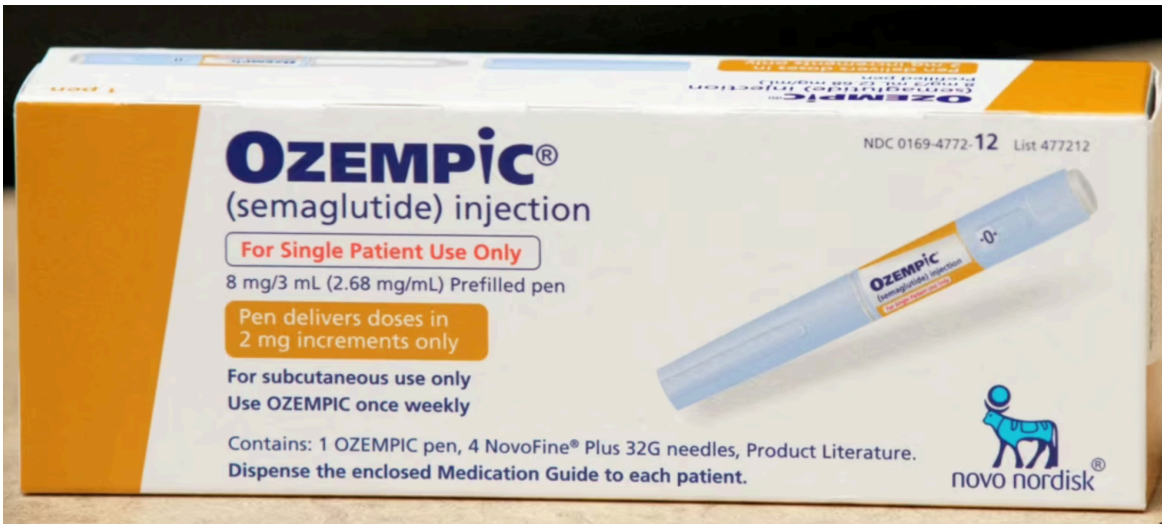
As beauty standards have reached an all-time high, people are trying to find new ways to lose weight nowadays. Falsified slimming treatments sold without a prescription are one of the alternative solutions. Obviously, as with any other falsified medicine, these can cause serious health problems such as gastrointestinal issues, hormonal imbalances, liver damage, and cardiovascular risks. Ozempic, a slimming "miracle" drug, has grown dangerously popular due to its widespread use by celebrities and social media influencers. Ozempic (semaglutide) was initially developed to treat type 2 diabetes, but it is now regarded as a quick weight loss solution. Misuse of this drug can have serious consequences, such as widespread organ and hormone damage, so it should not be used as a quick fix. These drugs are created in barely controlled factories, stored in unsuitable environments, contain toxic substances, or use an incorrect dosage. Ozempic is particularly in the spotlight right now because it is purchased online, popular amongst famous people, viral on social media platforms, and especially targeted towards young girls who are not confident in their bodies. Evidently, eating disorders play a significant role in the sale of these drugs. Anorexia, bulimia, hyperphagia, and disordered eating in general are usually caused by beauty standards and social pressure. Unfortunately, especially in vulnerable young people, the desire to lose weight leads to extremely unhealthy behaviors such as starving themselves, forcing themselves to throw up, and looking for quick weight loss drugs at the expense of their health. Generally, sociocultural factors amplify any kind of weight-based problem, as they do in this case as well. In addition, diseases such as diabetes and obesity, often stigmatized, push patients to seek discreet solutions, sometimes outside official channels. This stigma, combined with a lack of education about the dangers of falsified medicines, makes the situation even worse. Ozempic and other weight loss treatments are also prone to being falsified online, where many websites offer supposedly authentic products at unbeatable prices, often without requiring a prescription.

Production

Falsified medicines are produced in clandestine laboratories. These places do not respect pharmaceutical norms, which results in mediocre quality products that are potentially dangerous. On the scientific side, the main risk is active ingredients. Active ingredients are the primary substances responsible for the therapeutic effects of a medication. These products are made with cheap excipients (substances used as carriers for active ingredients) such as cellulose, lactose, and talc to dilute active ingredients, usually absent or present in the wrong quantities. Cellulose is a carbohydrate polymer commonly used as a filler or binder in tablets. Lactose is a sugar often used as a diluent in pharmaceuticals. Talc is a mineral used as a lubricant or filler in tablets. Also, toxic ingredients like lead—a heavy metal—and antifreeze—a substance like ethylene glycol—can be added in order to simulate certain effects or reproduce the appearance of authentic medication. Another problem is that the tags and packaging are also falsified to look like the original product. This process is illegal and based on the lack of regulation in certain regions.

Around the World

Falsified medicines pose a serious global threat affecting developing and developed nations. In Southeast Asia, a study found that between one-third and one-half of artesunate packages—an essential antimalarial drug—were counterfeit, containing no active ingredients. In Papua New Guinea, amoxicillin, a widely used antibiotic, is among the most counterfeited active ingredients, leading to significant treatment failures. In West Africa, a 2018 operation led to the seizure of over 12 million illicit healthcare products and the imprisonment of seven executives from a company involved in counterfeit malaria treatments (a mosquito-borne infectious disease). In Côte d'Ivoire, authorities confiscated nearly 400 tons of fake medicines, resulting in an estimated loss of 1 billion euros for the pharmaceutical industry. In Western Asia, fake medicines ranging from common painkillers to life-saving treatments make up more than a third of pharmaceutical products, worsening health challenges in already fragile healthcare systems. In the United Kingdom, a surge in fake Viagra pills, a medication used to treat erectile dysfunction and pulmonary arterial hypertension, led to the seizure of 3 million counterfeit doses in a single year. In 2024, the increasing popularity of anti-obesity treatments like Ozempic and Wegovy has led to widespread counterfeiting and black-market sales. The WHO has issued warnings after discovering fake Ozempic injector pens in multiple countries, some of which contained insulin, leading to many hospitalizations and life-threatening health complications.



Picture 2: Ozempic (semaglutide) injection

Major Parties Involved and Their Views

United States (FDA)

The United States manages to maintain regular oversight of pharmaceutical companies through the Food and Drug Administration (FDA). The FDA's primary job is to make sure products are manufactured and delivered safely and legally to customers. All the way from the beginning, the FDA conducts regular inspections of factories and facilities, ensuring the quality of products. They monitor online pharmacies and work closely with law enforcement. Their efforts are central to reducing in the influx of counterfeit drugs into the U.S. market.

European Union (EMA)

The European Medicines Agency (EMA) sets extremely high standards for any type of pharmaceutical product. Even though the EU is composed of different countries, the EMA ensures that every pharmaceutical industry in the EU adheres to these rules and regulations. They collaborate with national-level agencies and use advanced traceability systems, which systematically track companies. The EMA strives to keep falsified products outside of the EU market and protects public health all over EU borders.

United Kingdom (MHRA)

Despite the UK's departure from the EU, thereby no longer having access to the EMA, the Medicines and Healthcare products Regulatory Agency (MHRA) in the UK keeps ensuring that falsified medicines are kept away. The MHRA still collaborates with international organizations and enforces strict rules and regulations on pharmaceutical products. They conduct regular inspections and keep surveillance on both online and in-person pharmacies. These efforts are also aimed at mitigating the risks posed by counterfeit medicines, especially those falsely advertised for treating chronic diseases like diabetes.

Nigeria

Unfortunately, Nigeria serves as a prominent example of a national drug market full of falsified and counterfeit medicines. This is mainly due to the inefficient regulation of the newly developing nation, which makes Nigeria frequently exposed to counterfeit pharmaceuticals, especially those that are marketed as cures for chronic diseases. Even though the problem remains substantial, national authorities are collaborating with international agencies in order to strengthen oversight and also improve public awareness.

India

India somehow manages to be a major pharmaceutical hub for both legitimate and illicit drugs. This is caused by its extensive pharmaceutical manufacturing base, which is prone to being exploited by counterfeiters. Exploitation of facilities leads to a major problem of the circulation of these products domestically and internationally, without effective regulation over the supply chain. India is trying to preserve and safeguard its reputation, so efforts are being made to crack down on counterfeit products.

Australia (TGA)

Through the Therapeutic Goods Administration (TGA), Australia manages to effectively regulate its industry by ensuring that all products entering the Australian market are safe and high quality. The TGA implements strict control over imports, thorough inspections, and modern surveillance techniques. These measures are vital for Australia's healthcare industry and keep patients away from the usage of falsified medicines.

Japan (MHLW)

The Ministry of Health, Labor, and Welfare (MHLW) of Japan is known for its strict regulations. With the help of import controls and comprehensive post-market monitoring, the MHLW ensures the safety of medical products. These measures maintains confidence in the Japanese healthcare system and keeps patients away from any counterfeit product.

World Health Organization (WHO):

The WHO is inevitably the biggest actor on the global scale, and the organization on which the World Health Assembly (WHA) is based. This organization works with the UN and plays a pivotal role in addressing any type of medical issue, including the international challenge of falsified medicines. The WHO sets up strict international rules, regulations, and guidelines about the practice of medicine and the standards of drug safety. They also provide support to nations in times of outbreak, including outbreaks of falsified medicines. The WHO does research and publishes papers, facilitates data sharing, and helps countries strengthen their legal frameworks.

Interpol

Interpol is an essential organization for the dismantling of the network and distribution of counterfeit and illegal products. They engage with cross-border operations to stop the trade of these drugs, work with national law enforcement agencies, and conduct international investigations such as “Pangea”. For instance, these operations have resulted in the seizure of millions of doses of fake drugs. Their work is aimed at disrupting the supply chains that enable the proliferation of counterfeit medicines.

United Nations Office on Drugs and Crime (UNODC)

The UNODC is the organization of the UN that addresses the criminal dimensions of international problems, especially drugs. On this topic, they play a major role in the counterfeit medicine trade with the help of international legal corporations. Just like Interpol, the UNODC works to dismantle illicit networks involved in the manufacture and distribution of falsified drugs. Their efforts are aimed at stopping the trade of such products and holding those who benefit from compromising public health accountable on an international legal level.

Timeline of Events

2006	WHO issues a global alert on the dangers of falsified medicines, emphasizing their threat to public health worldwide.
2008	Significant seizures of counterfeit pharmaceuticals are reported across various regions, prompting early international collaborative efforts.
2012	Interpol launches its first major operation targeting counterfeit pharmaceuticals, particularly focusing on the growing issue of online sales.
2017	A landmark study in Southeast Asia reveals that up to 50% of certain antimalarial drug packages are counterfeit, raising concerns about similar vulnerabilities in other therapeutic areas.

2019	Incidents of counterfeit drugs affecting diabetes treatment emerge, with reports of falsified insulin and oral antidiabetics leading to treatment failures in several countries.
2020	The COVID-19 pandemic intensifies the spread of falsified medicines due to increased reliance on online pharmacies and disrupted global supply chains.
2022	Regulatory agencies in the United States and Europe tighten controls over online pharmaceutical sales and importation in response to the growing prevalence of counterfeit medications.
2024	Warnings are issued following the detection of counterfeit versions of Ozempic in multiple countries; these falsified products are linked to severe health risks, including hospitalizations.

UN Involvement

The United Nations has evidently played a crucial role in the global response to falsified medicines, with several key organizations leading the effort to safeguard public health, such as the ones mentioned previously. The World Health Organization (WHO) is among the most active in developing international guidelines and standards for drug safety and quality on a legal basis. The WHO has established global surveillance systems that monitor incidents of counterfeit pharmaceuticals, thereby providing a reliable source of data and early warning alerts for member states. The organization also provides various technical assistance and capacity-building programs to help countries in strengthening their own legal and regulatory frameworks. By publishing academic research reports, guidelines, and best practice documents, the WHO has facilitated a common understanding of the risks brought by falsified medicines and has helped organize national, multinational, and international efforts to combat this issue. Complementing the efforts of the WHO is the United Nations Office on Drugs and Crime (UNODC), which focuses on the criminal dimensions of the counterfeit medicine trade and actually holds people accountable. The UNODC is actively involved in dismantling the illicit networks responsible for producing and distributing falsified drugs inside the supply chain. Through international legal cooperation, intelligence sharing, and coordinated operations with national law enforcement agencies, they have contributed to several successful interdiction efforts that resulted in significant seizures of counterfeit goods. These actions not only disrupt the supply chains of fake medicines but also serve against the criminal exploitation of vulnerable health systems, especially in developing nations. The UNODC's work emphasizes the link between public health and security and that combating counterfeit pharmaceuticals necessitates both regulatory oversight and strong law enforcement measures. Some observers argue that the UN’s approach tends to be predominantly

advisory, relying heavily on the voluntary cooperation of individual member states, so not that effective. In regions with weak regulatory infrastructure and limited resources, WHO and UNODC guidelines and recommendations may not translate into effective on-the-ground actions. Despite their ambitious goals, these organizations' funding may fall short of addressing the rapid evolution of counterfeit markets, particularly with the rise of online (legal and illegal) pharmaceutical sales. Furthermore, some stakeholders recognize that the dynamic nature of the global pharmaceutical market, including technological advancements and the growth of e-commerce nowadays, presents new challenges that existing UN frameworks are only partially equipped to address and behind our times. The decentralization and this new comfort of anonymity offered by online platforms allow counterfeiters to exploit loopholes in regulatory systems, making it more difficult for international bodies to monitor and control the flow of falsified medicines. This has prompted calls for the UN to develop more targeted strategies towards cyber crimes, increased funding, and new technologies to better track and combat these criminal activities. Despite these, the United Nations evidently continues to be a central figure in the international dialogue. At the very least, its efforts have significantly raised global awareness about the dangers of falsified medicines and have fostered a spirit of cooperation. The UN’s role in facilitating cross-border collaboration, providing technical expertise, and setting shared standards remains irreplaceable in our current political landscape. However, the ongoing debate among experts and policymakers emphasizes the importance of continuous improvement in how these initiatives are implemented and enforced, ensuring that the UN's work lays the groundwork for future, more effective actions to combat the spread of counterfeit pharmaceuticals.

Relevant UN Documents

- Substandard and Falsified Medical Products (4 May 2016, WHA69.1)
- Enhancing Access to Safe, Quality, and Effective Medicines (15 September 2019, A/RES/74/180)
- Strengthening Pharmaceutical Supply Chains to Combat Falsified Medicines (10 November 2020, A/RES/75/210)
- Coordinated Global Action Against Substandard and Falsified Medical Products (18 February 2023, A/RES/77/33)
- Global Surveillance and Monitoring System for Substandard and Falsified Medical Products (27 May 2012, WHA65.23)
- Combating the Illicit Trade in Counterfeit Medicines (12 April 2017, UNODC Resolution 2017/04)
- International Cooperation on Medicine Quality (5 June 2021, A/RES/76/45)
- Global Initiative to Combat Falsified Medicines (20 July 2014, A/RES/67/152)
- Ensuring the Integrity of Pharmaceutical Markets (8 March 2018, A/RES/70/25)
- Protecting Public Health: A Global Response to Counterfeit Drugs (3 December 2015,

A/RES/68/198)

Treaties and Events

WHO Global Surveillance and Monitoring System for Substandard and Falsified Medical Products (2012): This initiative was launched by the World Health Organization (WHO) to track and report incidents of falsified and substandard medicines. It established a global database that helps nations monitor counterfeit drugs in real-time. While many countries have contributed data, some nations with weaker regulatory frameworks have not fully participated, limiting the system's effectiveness in certain regions.

Medicrime Convention (2011, Council of Europe): The Convention on the Counterfeiting of Medical Products and Similar Crimes Involving Threats to Public Health (Medicrime Convention) was the first international treaty to criminalize the production and distribution of counterfeit medicines. It was adopted by the Council of Europe and is open to all countries worldwide. However, key pharmaceutical markets like the United States and India have not ratified it, reducing its global enforcement potential.

TRIPS Agreement (1994, World Trade Organization - WTO): The Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) set international standards for protecting patents and trademarks in the pharmaceutical industry. While it plays a role in preventing counterfeit medicines, critics argue that its strict intellectual property laws may limit access to affordable generic drugs in developing countries. Some developing nations, such as Brazil and South Africa, have sought exceptions to these rules for public health reasons.

WHO Member State Mechanism on Substandard and Falsified Medical Products (2012): This mechanism was created by WHO to facilitate international collaboration in combating falsified medicines. It provides technical support, promotes data sharing, and assists in strengthening national regulatory systems. However, some countries, particularly those with underdeveloped healthcare infrastructures, have struggled to implement its recommendations.

Operation Pangea (Launched in 2008, INTERPOL & WHO Collaboration): This is an annual global law enforcement operation targeting illicit online pharmaceutical sales and counterfeit medicines. Led by INTERPOL in cooperation with WHO, it has resulted in thousands of arrests and the seizure of millions of falsified drugs. Despite its successes, counterfeiters have adapted their tactics, shifting operations to dark web marketplaces and encrypted platforms, making detection more difficult.

UNODC's Resolution on Combating Counterfeit Drugs (2017): The United Nations Office on Drugs and Crime (UNODC) adopted a resolution emphasizing the need for stronger legal frameworks

and international cooperation to combat pharmaceutical counterfeiting. However, enforcement remains inconsistent, as some countries lack the necessary legal infrastructure or resources to fully implement these measures.

WHO Prequalification Program (2001 - Present): This program was developed to ensure that medicines, vaccines, and diagnostics meet global safety and quality standards before reaching consumers. It has been instrumental in preventing the spread of falsified medicines, particularly in low-income countries where regulatory agencies are weaker. However, participation is voluntary, and some countries have not fully integrated WHO prequalification into their national drug approval processes.

Establishment of the International Medical Products Anti-Counterfeiting Taskforce (IMPACT) (2006): IMPACT was created by WHO to unite governments, enforcement agencies, and private-sector stakeholders against counterfeit medicines. Although it has raised awareness and encouraged collaboration, it has faced challenges due to disagreements over regulatory authority and conflicts of interest with the pharmaceutical industry.

United Nations Political Declaration on Antimicrobial Resistance (2016): Although this declaration primarily focuses on antimicrobial resistance, it also addresses the dangers posed by substandard and falsified antibiotics, which contribute to drug-resistant infections. However, its non-binding nature has limited enforcement, and many countries have not taken significant action in response to its recommendations.

International Conference on Harmonization of Technical Requirements for Pharmaceuticals for Human Use (ICH) (1990-Present): This initiative harmonizes drug regulations between the US, Europe, and Japan to ensure consistent quality and safety standards. However, many low- and middle-income countries have not been fully integrated into the process, leading to disparities in regulatory oversight that counterfeiters exploit.

Evaluation of Previous Attempts to Resolve the Issue

One of the most significant initiatives was the WHO's Global Surveillance and Monitoring System for Substandard and Falsified Medical Products, launched in 2012. While this system created a database for tracking counterfeit drugs, its effectiveness has been limited by the reluctance of some countries to share data due to legal and political concerns. Many low-income nations lack the infrastructure to detect and report falsified medicines, resulting in incomplete surveillance and an underestimation of the scope of the problem.

The Medicrime Convention, established in 2011 by the Council of Europe, was another attempt to criminalize the trade of counterfeit medicines. While it was groundbreaking in creating a legal

framework for prosecuting pharmaceutical fraud, its impact has been weakened by the refusal of key pharmaceutical markets, including the United States and India, to ratify the treaty. The lack of universal participation has hindered its effectiveness in shutting down global counterfeit networks.

The World Trade Organization's TRIPS Agreement (1994) was intended to regulate intellectual property rights and prevent the unauthorized production of pharmaceuticals. However, this agreement has been criticized for creating barriers to access to affordable generic medications while doing little to curb the production of falsified medicines. Some developing countries, such as Brazil and South Africa, have pushed for reforms to allow greater flexibility in enforcing intellectual property laws while addressing counterfeit drug distribution.

Interpol's Operation Pangea, launched in 2008, has been one of the most aggressive law enforcement operations against falsified medicines. This initiative has led to the seizure of millions of counterfeit drugs and the arrest of thousands of individuals involved in illegal pharmaceutical trade. However, despite its successes, counterfeiters have adapted by shifting their operations to the dark web and using encrypted communication channels, making their activities more difficult to detect. Additionally, resource limitations in many developing countries have prevented sustained enforcement efforts beyond the duration of the operation.

The WHO's Member State Mechanism on Substandard and Falsified Medical Products was introduced in 2012 to improve international coordination on combating counterfeit drugs. However, the mechanism has faced challenges due to differing national regulations and a lack of binding enforcement measures. While it has facilitated information-sharing and technical assistance, many countries still struggle with weak regulatory oversight and corruption within their healthcare sectors, allowing falsified medicines to continue circulating.

National and regional approaches have also fallen short. The US FDA has implemented measures such as the Drug Supply Chain Security Act (2013) to track pharmaceuticals from production to distribution. However, this system primarily affects legally manufactured drugs and does little to prevent counterfeit imports. Similarly, the European Union's Falsified Medicines Directive (2011) introduced stricter regulations and serialization requirements, but the growing complexity of global supply chains has made it difficult to fully eliminate the presence of falsified medicines.

In some cases, public awareness campaigns have been launched to educate consumers on the dangers of counterfeit medicines. However, these efforts have had limited success in countries where falsified drugs are often the only affordable or accessible option. Many patients, particularly in developing nations, remain unaware of the risks, and even when they are informed, economic necessity often compels them to continue purchasing cheaper alternatives.

Possible Solutions

Strengthening global regulations is critical in combating falsified medicines, as many countries have different laws, making it easy for counterfeiters to operate. A global agreement under the World Health Organization or the United Nations could ensure strict laws and penalties for those involved in Countries that fail to comply may face sanctions or trade restrictions for producing counterfeit drugs. Improving supply chain security is another critical measure to prevent fake medicines from entering the market. Governments and pharmaceutical companies should use tracking systems such as blockchain to monitor drugs from production to sale, and adding QR codes or serial numbers to packaging would make it easy for consumers and healthcare workers to verify the authenticity of a medicine. To disrupt counterfeit drug networks, international law enforcement cooperation must be strengthened. Expanding operations like Interpol's Operation Pangea and improving intelligence sharing between countries would help to apprehend criminals, whereas training special police units and implementing AI-powered border control systems could reduce illegal drug trafficking. Investing in better detection technology would also help detect counterfeit medicines more quickly and efficiently. Public awareness campaigns are critical in reducing demand for counterfeit medicines, as many people purchase them because they are less expensive or easier to get. Governments and health organizations should educate the public about the dangers of counterfeit medicine and encourage them to purchase from authentic sources. Pharmaceutical companies should take much greater responsibility for battling counterfeit medicines by implementing stricter quality control measures and collaborating with law enforcement agencies. Expanding drug donation programs could also help low-income countries access safe medicines, reducing reliance on horrible black market drugs. Regulating online pharmaceutical sales is necessary to combat the growing number of counterfeit drugs sold online. Many counterfeit medicines are purchased through unverified websites; therefore, governments should collaborate with e-commerce platforms to ensure that only licensed sellers operate. Supporting low-income countries in strengthening their drug regulations is important as well. International organizations like the World Bank could provide funding to help these countries improve their healthcare systems and invest in detection technology. Fighting corruption in regulatory agencies is an important step, as officials in some countries accept bribes to allow counterfeit drugs to circulate. Creating independent oversight bodies, protecting whistleblowers, and increasing regulatory officials' salaries and training could all help to improve accountability and reduce corruption. Solving the problem of falsified medicines requires a mix of legal reforms, better technology, international cooperation, and public awareness. A successful strategy must address the reasons people buy fake medicines while strengthening enforcement to stop counterfeit drug networks.

Notes from the Chair

A recent example in popular culture is The Substance (2024), which is speculated by viewers to talk about the effects of Ozempic and how beauty standards have gone so out of touch with reality that

people feel that they need to use such drugs.

Bibliography

"A/RES/62/156: Combating the Problem of the Illicit Trade in Counterfeit Medicines and Related Products." United Nations, 2007, https://undocs.org/en/A/RES/62/156.

"A/RES/67/152. Global Initiative to Combat Falsified Medicines", 20 July 2014, United Nations, https://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/67/152.

"A/RES/67/142: Measures to Improve the Global Regulatory Framework to Combat the Trafficking of Counterfeit Medicines." United Nations, 2012, https://undocs.org/en/A/RES/67/142.

"A/RES/68/198. Protecting Public Health: A Global Response to Counterfeit Drugs, 3 December 2015, United Nations", https://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/68/198.

"A/RES/70/25. Ensuring the Integrity of Pharmaceutical Markets, 8 March 2018, United Nations, https://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/70/25.

"A/RES/70/248: Combating the Trafficking of Counterfeit Medical Products." United Nations, 2016, https://undocs.org/en/A/RES/70/248.

"A/RES/72/225: Counterfeit Drugs and Their Impact on Global Health." United Nations, 2017, https://undocs.org/en/A/RES/72/225.

"A/RES/73/31: Counterfeit and Substandard Drugs." United Nations, 2018, https://undocs.org/en/A/RES/73/31.

"A/RES/74/180. Enhancing Access to Safe, Quality, and Effective Medicines, 15 September 2019, United Nations", https://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/74/180.

"A/RES/74/2: Counterfeit Medicines and Their Impact on Public Health." United Nations, 2019, https://undocs.org/en/A/RES/74/2.

"A/RES/75/106: The Role of International Cooperation in Combating the Illicit Trade of Counterfeit Medicines." United Nations, 2020, https://undocs.org/en/A/RES/75/106.

A/RES/75/210. Strengthening Pharmaceutical Supply Chains to Combat Falsified Medicines, 10 November 2020, United Nations, https://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/75/210.

"A/RES/76/138: Global Efforts to Combat the Illicit Trade of Counterfeit Medicines." United Nations, 2021, https://undocs.org/en/A/RES/76/138.

“A/RES/76/45. International Cooperation on Medicine Quality, 5 June 2021”, United Nations, https://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/76/45.

“A/RES/77/33. Coordinated Global Action Against Substandard and Falsified Medical Products”, 18 February 2023, United Nations, https://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/77/33.

"Behind the Science: Combating the Rise of Online Counterfeit Medicines." Pfizer, https://www.pfizer.com/news/behind-the-science/combating-rise-online-counterfeit-medicines.

"CDC Diabetes Statistics." Centers for Disease Control and Prevention, https://www.cdc.gov/diabetes/communication-resources/diabetes-statistics.html.

"Counterfeit Medicine Information." Centers for Disease Control and Prevention, https://wwwnc.cdc.gov/travel/page/counterfeit-medicine.

"Fake Drugs 101: Facts on Illegal Counterfeit Drugs." Pfizer, https://www.pfizer.com/news/articles/fake_drugs_101_facts_on_illegal_counterfeit_drugs.

"Falsified Medicines." World Health Organization, https://repub.eur.nl/pub/136193/.

"Health Systems." World Health Organization, 2020, https://www.who.int/news-room/fact-sheets/detail/health-systems.

"Hypoglycemia - Low Blood Sugar." Cleveland Clinic, https://my.clevelandclinic.org/health/diseases/11647-hypoglycemia-low-blood-sugar.

"How Johnson & Johnson is Fighting Medical Counterfeiting." Johnson & Johnson, https://www.jnj.com/innovation/how-johnson-and-johnson-is-fighting-medical-counterfeiting.

"L'Afrique de l'Ouest s'attaque aux faux médicaments contre le paludisme." ENACT Africa, https://enactafrica.org/enact-observer/l-afrique-de-l-ouest-s-attaque-aux-faux-medicaments-contre-le-paludisme.

"L'ONU s'alarme du trafic de faux médicaments dans des pays du Sahel." Le Monde, 1 Feb. 2023, https://www.lemonde.fr/afrique/article/2023/02/01/l-onu-s-alarme-du-trafic-de-faux-medicaments-dans-des-pays-du-sahel_6160083_3212.html.

"Le marché de faux médicaments: L'impact de la contrefaçon." Le Monde, 31 July 2019, https://www.lemonde.fr/afrique/article/2019/07/31/faux-medicaments-en-afrique-la-mort-au-bout-du-trafic_5495345_3212.html.

"Médicaments Contrefaits: Un Problème de Santé en Afrique." United Nations Africa Renewal, https://www.un.org/africarenewal/fr/magazine/mai-2013/médicaments-contrefaits-un-problème-de-san

té-en-afrique.

"Medicines and the Supply Chain." World Health Organization, 2021, https://www.who.int/news-room/fact-sheets/detail/medicines.

"Obesity - Diagnosis and Treatment." Mayo Clinic, 2022, https://www.mayoclinic.org/diseases-conditions/obesity/diagnosis-treatment/drc-20375749.

"Obesity - Symptoms and Causes." Mayo Clinic, 2022, https://www.mayoclinic.org/diseases-conditions/obesity/symptoms-causes/syc-20375742.

"Organized Crime Module 3 Key Issues: Falsified Medical Products." United Nations Office on Drugs and Crime, https://www.unodc.org/e4j/en/organized-crime/module-3/key-issues/falsified-medical-products.html.

"Substandard and Falsified Medical Products." World Health Organization, 2021, https://www.who.int/news-room/fact-sheets/detail/substandard-and-falsified-medical-products.

"Substandard and Falsified Medicines." World Health Organization, https://repub.eur.nl/pub/136193/.

"Treatments Anti-Obésité: Le Risque du Mésusage de la Contrefaçon et du Marché Gris." Le Monde, 5 Sept. 2024, https://www.lemonde.fr/economie/article/2024/09/05/traitements-anti-obesite-le-risque-du-mesusage-de-la-contrefacon-et-du-marche-gris_6304725_3234.html.

"United States Drug Administration: Active Pharmaceutical Ingredients." U.S. Food and Drug Administration, 2019, https://www.fda.gov/drugs/pharmaceutical-quality-resources/active-pharmaceutical-ingredients.