

---

## Appendix 3: Taking controlled and prescription drugs to other countries

---

For patients living in the UK, because the regulations may change, it is advisable to check for the latest Home Office guidance by contacting them directly or visiting their website:

The Home Office  
Drugs Licensing Section  
6th Floor, Peel Building  
2 Marsham Street  
London SW1P 4DF  
Tel: 020 7035 0484  
Fax: 020 7035 6161  
e-mail: [licensing\\_enquiry.aadu@homeoffice.gsi.gov.uk](mailto:licensing_enquiry.aadu@homeoffice.gsi.gov.uk)  
[www.drugs.gov.uk/drugs-laws/licensing/personal/](http://www.drugs.gov.uk/drugs-laws/licensing/personal/)

Some patients receiving palliative care travel to other countries and need to take medication with them. Two sets of law need to be considered, that of the UK and the law of the country or countries to which they are travelling. Detailed advice can be obtained from the regulatory authorities, embassies or consulates in the relevant countries. A list of embassy contact details is available from the Home Office Drugs website.

The UK customs regulations were simplified in 2008. For UK residents, the main limitation is now likely to be the legislation of the country/countries to which they are travelling. For example, some countries do not allow the importation of **codeine**, **dihydrocodeine** or **diamorphine**.

### Away for ≤3 months

A covering letter from the prescribing doctor is sufficient, even for controlled drugs (Box A3.A). The letter should state:

- the patient's name, address and date of birth
- the destination(s) and dates of outward and return travel
- the names, forms, strengths, doses and total amounts of the drugs being carried.

Controlled drugs should be contained in their original packaging and carried in the patient's hand luggage (together with the covering letter) in case the UK Customs want to examine them.

### Away for >3 months

If a patient is planning to stay away for >3 months, they should be advised to make contact with a doctor in the country where they will be staying, and to obtain prescriptions for further supplies from that doctor.

**Box A3.A UK Controlled Drug Schedules<sup>a</sup>** (Royal Pharmaceutical Society of Great Britain 2006)<sup>1</sup>

**Schedule 1 (CD Lic)**

Drugs with high abuse potential and no accepted medicinal use in the UK. Production, possession and supply illegal except for specially licensed individuals (e.g. researchers, police officers). Includes hallucinogens (e.g. lysergic acid diethylamide/LSD, 3,4-methylene-dioxymethamphetamine/ecstasy, cannabis).

**Schedule 2 (CD POM)**

Drugs with high abuse potential but recognized medical uses. Generally subject to full UK controlled drugs regulations. Includes most opioids (e.g. codeine<sup>b</sup>, dihydrocodeine<sup>b</sup>, morphine<sup>b</sup>, diamorphine, methadone), major stimulants (e.g. amphetamines and cocaine) and secobarbital.

**Schedule 3 (CD No Register)**

Drugs with less abuse potential than those in Schedules 1 and 2, and considered less harmful if abused. Includes most barbiturates, some opioids (e.g. buprenorphine, pentazocine), some minor stimulants (e.g. benzfetamine), appetite suppressants, meprobamate, midazolam and temazepam.

**Schedule 4 Part I (CD Benz)**

Benzodiazepines (*except* midazolam and temazepam), ketamine and zolpidem.

**Schedule 4 Part II (CD Anab)**

Hormones liable to abuse (e.g. androgenic and anabolic steroids, chorionic gonadotrophin, clenbuterol and growth hormone analogues).

**Schedule 5 (CD Inv)**

Some formulations of controlled drugs in other Schedules (e.g. morphine, codeine, dihydrocodeine, pholcodine, cocaine) which, because of their low strength, are exempt from virtually all UK controlled drugs regulations. Also includes co-codamol and co-dydramol.

a. see referenced source for complete list of drugs in each Schedule

b. some formulations with strengths below specified limits are classified in Schedule 5.

### Travelling to or through other countries

It is important to fulfil the controlled drug import/export requirements for *all* the countries in which the patient will have to pass through Customs, otherwise entry may be refused. The International Narcotics Control Board has produced a list of suggested maximum quantities for personal import/export of internationally controlled substances (Table A3.1), and a model import/export certificate (Box A3.B). It is also advisable to carry a duplicate copy of the prescription, preferably stamped by the pharmacy from which the drugs were obtained. *However, patients should check the exact legal details and the quantities they are allowed to import with the relevant embassies or consulates before travelling.*

**Table A3.1** Suggested maximum quantities of controlled substances for international travellers (International Narcotics Control Board 2004)<sup>2,a</sup>

<i>Drug</i>	<i>Quantity</i>
Buprenorphine	300mg
Codeine	12g
Diazepam	300mg
Dihydrocodeine	12g
Fentanyl transdermal patches <sup>b</sup>	100mg
Fentanyl (other formulations)	20mg
Hydromorphone	300mg
Lorazepam	75mg
Methadone	2g
Morphine	3g
Oxycodone	1g

a. this is not a complete list; see referenced source for more details

b. approximately, this adds up to 6 fentanyl 100microgram/h patches, and 8, 12, 24, 48 of the 75, 50, 25, 12microgram/h patches, respectively.

**Box A3.B** Model certificate for personal import/export of internationally controlled substances(International Narcotics Control Board 2004)<sup>2</sup>

<p><b>Country and place of issue</b>  Country of issue  Place of issue  Date of issue  Period of validity<sup>a</sup></p> <p><b>Prescribing physician</b>  Last name, first name  Address  Telephone (including country code)  Professional licence number</p> <p><b>Patient</b>  Last name, first name  Sex  Place of birth  Date of birth  Home address  Passport or identity card number  Intended country of destination</p>	<p><b>Prescribed medical preparation</b>  Trade name of drug (or composition)  Formulation (ampoules, tablets, etc.)  Number of tablets, etc.  rINN of the active substance  Concentration of the active substance  Total quantity of the active substance  Instructions for use  Duration of prescription in days  Remarks</p> <p><b>Issuing authority</b>  Official name of the authority  Address  Telephone (country code, local code, number)  Official seal of the authority  Signature of the responsible officer</p>
--	--

a. the recommended duration is 3 months.

- 1 Royal Pharmaceutical Society of Great Britain (2006) *Medicines, Ethics and Practice. A guide for pharmacists and pharmacy technicians*. Royal Pharmaceutical Society of Great Britain, London, pp. 23–31.
- 2 International Narcotics Control Board (2004) *Guidelines for travelers*. University of Wisconsin Comprehensive Cancer Center. Available from: [www.incb.org/incb/guidelines\\_travellers.html](http://www.incb.org/incb/guidelines_travellers.html)