Media Release

RACP supports changes to codeine scheduling

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Addiction specialists from the Royal Australasian College of Physicians (RACP) reaffirm their support to make codeine-based medications available only with a prescription.

From 1 February 2018, the Therapeutic Goods Administration (TGA) will upschedule codeine products from Schedule 2/3 to Schedule 4, meaning a prescription will be required for these products to be sold in chemists.

“Codeine addiction has become a major public health issue and we believe that the TGA’s decision to place greater restrictions around the sale of medicines containing codeine is based on good medical evidence,” RACP President Dr Catherine Yelland said.

“Australia is one of the few countries where codeine products can be bought over the counter. In most of Europe, the United Arab Emirates and Japan these medicines can only be sold with a prescription.

“We believe these changes, which are being led by the TGA, are proportional to the problem that has emerged and align with the approach taken by other jurisdictions.”

Data shows that use of over the counter codeine containing analgesics is widespread with more than 6.3 million Australians, aged 14 years or more, using them each year. A significant number of Australians using these products are opioid dependent.

There have been many reports about misuse, addiction, and secondary harm due to high dose exposure to the non-opioid analgesic with which codeine is combined. This can result in conditions like gastric ulcers with complications of haemorrhage, renal tubular acidosis. Some of these cases proved fatal.

President of the Chapter of Addiction Medicine, A/Prof Adrian Reynolds said the harms caused by codeine addiction are significant.

“Addiction is a serious medical condition which should be avoided at all costs,” A/Prof Adrian Reynolds said. “Addiction alters life choices, life chances and life trajectory. Addiction specialists have seen the number of patients with addiction to over the counter codeine grow at an alarming rate.

“People with persistent pain should talk to their doctor to develop an appropriate treatment plan. This may include a referral to see a pain specialist or pain management clinic to manage their condition on an ongoing basis.”

The RACP’s position is aligned with recommendations made by other medical organisations including the Royal Australian College of General Practitioners (RACGP), the Royal Australian and New Zealand College of Psychiatrists (RANZCP), and the Faculty of Pain Medicine, a faculty of the Australian and New Zealand College of Anaesthetists (ANZCA).

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About The Royal Australasian College of Physicians (RACP): The RACP trains, educates and advocates on behalf of more than 25,000 physicians and trainee physicians across Australia and New Zealand. The College represents a broad range of medical
specialties including general medicine, paediatrics and child health, cardiology, respiratory medicine, neurology, oncology, public health medicine, occupational and environmental medicine, palliative medicine, sexual health medicine, rehabilitation medicine, geriatric medicine and addiction medicine. Beyond the drive for medical excellence, the RACP is committed to developing health and social policies which bring vital improvements to the wellbeing of patients. The College offers 60 training pathways. These lead to the award of one of seven qualifications that align with 45 specialist titles recognised by the Medical Board of Australia or allow for registration in nine vocational scopes with the Medical Council of New Zealand