

Final Report

Scientific review of national drug treatment guidelines

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Executive summary

Introduction

The development of drug treatment guidelines increasingly attracts attention in Europe. A number of guidelines have been produced in the last three years, and some countries such as Cyprus and Norway are expecting their first guidelines in 2009. The importance of guidelines is closely related to their intention to assist healthcare professionals in making decisions about appropriate and effective care for their patients. Guidelines, defined as systematically developed statements on appropriate health care, are designed to assimilate and evaluate the increasing amount of evidence and opinion on best current practice, and to provide recommendations on basis of evidence for effective practice.

From this background a project on behalf of the EMCDDA has been carried out aimed at identifying, collecting and evaluating national drug treatment guidelines existing in the European Union Member States, Norway and Turkey(...): The first purpose was to collect drug treatment guidelines from European countries and to compile a synthetic overview of the collected guidelines. (...)

With regard to the methods major efforts were put in the collection of national drug treatment guidelines. To collect drug treatment guidelines existing in the 27 European Member States, Norway and Turkey three approaches had been used. First of all the EMCDDA SQ 27, part 2 has been checked to identify national drug treatment guidelines. Furthermore systematic searches in literature databases such as MEDLINE had been carried out. In addition national experts of the 29 European countries have been contacted to collect existing drug treatment guidelines. In this respect a questionnaire has been developed to ask for information on existing drug treatment guidelines in a systematic way. The questionnaire is based upon a classification system created to achieve comprehensive and comparable data on drug treatment guidelines. (...).

Results for the collected national drug treatment guidelines existing in Europe

Until mid July 2009 the national experts of 22 countries responded to the questionnaire, and provided information on their national drug treatment guidelines. Out of 69 national guidelines reported altogether 60 complied with the definition for drug treatment guidelines and have been included in the analyses. When comparing the 60 guidelines collected by the national experts with those collected by the SQ 27 it became apparent that there is an overlap of 45 guidelines. Thus the use of the questionnaire resulted in the identification of 15 “new” guidelines. Through the database search - which was not limited by any specification of the date of publication - 16 guidelines have been found which are identical with the guidelines collected by the questionnaire. Only two further national drug treatment guidelines have been identified through the database search. The national experts of five countries stated not to have developed any drug treatment

guideline so far. Consequently, the database for the overview consists in 62 national drug treatment guidelines which cover 17 European countries.

- The majority of the countries have developed one or two national drug treatment guidelines. Most of the existing guidelines are quite specific and are focussed on one or two different interventions. The interventions predominately covered by the drug treatment guidelines are psychosocial treatment (n=29) and substitution maintenance treatment (n=28). Second most often are guidelines for detoxification (n=22). In general the results show that about 80 % of the existing guidelines in Europe are concerned with medically assisted treatment.

- Most of the existing drug treatment guidelines are also specific as regards the substances they are focussed on. More than half of the 62 guidelines specifically address one substance which in 58 % of the cases is opiates. Apart from Slovenia, in all countries there is at least one guideline dealing with opiates. Thus, European Member States give priority to the development of guidelines for the treatment of opiate use disorders. Furthermore eight countries have developed a guideline addressing stimulants, and respectively seven countries reported a guideline covering the use of cocaine and/or cannabis.

- In half of the guidelines the client group addressed with the treatment guideline is not specified. If the guidelines provide a specification of the client group, then longterm addicts present the client group most often named (n=23). Second most often national drug treatment guidelines are directed specifically at young drug users and addicts with co-occurring disorders (n=13 each).

- In Europe, drug treatment guidelines primarily intend to be of practical use for individuals and organisations involved in providing drug services. In 53 of the 62 guidelines the major aim is to provide recommendations for appropriate interventions related to a specific health problem or target group (88 %). In all of the 17 European countries the target audience of the national guidelines are both service providers and professionals. Eight countries reported of drug treatment guidelines directed to health care planners; Politicians or clients very rarely belong to the target audience of the guidelines.

- All but one guideline from Hungary comprise aspects of treatment processes, and the majority of 53 out of 62 treatment guidelines include aspects of treatment evaluation. Whether these quality criteria of drug treatment are exposed in the guidelines, does not depend on the type of intervention the guidelines is about. Moreover, the analyses show that the inclusion of quality aspects depends on the standards a country has established for developing national guidelines.

- 38 guidelines are based on both scientific evidence and expert consensus (65 %). At the same time professionals are involved in the development of almost all of the existing drug treatment guidelines, while researchers belonged to the guideline development group only in about half of the guidelines. With regard to evidence, half of the guidelines have been developed in recent years from 2006 onwards, and present evidence was reported to have been considered.

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