



news release

from the EU drugs agency in Lisbon

No 9/2000 – 30 November 2000

World AIDS Day – 1 December

SUBSTITUTION TREATMENT FOR DRUG ADDICTS PLAYS KEY ROLE IN FIGHT AGAINST AIDS, SAYS EU DRUGS DATA CHIEF

Also boosts addicts' well-being and cuts crime

A substantial European consensus now exists on the benefits of substitution treatment for drug addicts, says a report out today from the **Lisbon-based EU drugs agency**, the **EMCDDA**.

Today's report comes on the eve of **World Aids Day**. **Drugs agency chief Georges Estievenart** says 'substitution treatment plays a key role in cutting HIV transmission'. The report adds that the indications are that such treatment can also improve psychological and social well-being and reduce criminality among addicts.

Estievenart describes substitution treatment, in which methadone plays a key role, as 'one of the most widely discussed drug-related topics in Europe today'. The **European drugs data chief** adds that it's also highly political in view of the debate in some countries around heroin prescription for very deprived drug addicts.

Estievenart says: 'In many countries, substitution treatment developed – often reluctantly – in response to the HIV risk associated with injecting opiates and other drugs. It has proved its worth: '...as a result, the latter half of the 1990s saw the containment of new HIV cases among injecting drug users in most countries.'

Today's report says substitution treatment has grown steadily in Europe since its introduction in the 1960s and is now more widespread and accepted than ever before. But, until now, up-to-date data at **EU** level on the evaluation or quality of this kind of treatment have been scarce.

The report adds that standardised data collection and improved evaluation are a priority for the **EMCDDA**, both in its mission to provide 'objective, reliable and comparable information' on drugs in the **EU** and to promote a 'culture' of evaluation to guide policy-makers.

This approach lies behind today's *Insights* publication, *Reviewing current practice in drug-substitution treatment in the European Union*, which offers an overview of latest patterns and trends. It also presents **national profiles** covering the period from 1995 to the new millennium. These map the key characteristics for each Member State, including the role of substitution treatment in national drug strategies.

Challenges for the next decade

The **EMCDDA** says that over the past five years there has been considerable convergence of drug-service delivery in most European countries, with a major expansion of substitution treatment, mainly using methadone. At the same time, the HIV epidemic among injecting drug users 'appears to have been momentarily contained'.

A broad range of accessible substitution-treatment programmes has been developed, with low-threshold programmes now quite widely delivered in many countries. Countries that have expanded methadone treatment more recently, such as **Greece** and **France**, have followed a more specialised high-threshold approach. However, in **France**, prescription of low-threshold buprenorphine by general practitioners (GPs) runs parallel to a high-threshold methadone service.

Some countries, such as **Denmark**, have moved to restrict the overall activity of general practitioners (GPs) in this field by focusing treatment in specialist regional centres. Others, such as **Ireland** and the **UK**, have taken significant policy initiatives to involve GPs in managing drug dependence.

*On future action...*the agency says that training for both generalists and specialists and good models of cooperation are necessary if services are to be developed and maintained to a high standard. It adds that pharmacists play an increasingly active role, with the potential to make a major contribution. Regular monitoring and improved communication among the various individuals involved in treatment 'could significantly improve services'.

The agency calls for further research to determine the role of substitution treatment in reducing hepatitis C transmission, which has become a major health problem among injecting drug users.

Diversion of methadone for illegal purposes and related methadone-related deaths 'continue to be a substantial problem in some countries'. But levels of diversion are extremely hard to quantify.

The **EMCDDA** concludes: 'It is now generally recognised that treatment for drug dependence requires multiple approaches that combine drug substitution with drug-free treatment. The challenge for the next decade is to determine the optimal methods for delivering high-quality treatment and ensuring this is provided in all settings. Also, evidence on the cost-effectiveness of drug treatment strongly supports the case for further investment in this activity in all countries. Current work in developing models for evaluating cost-effectiveness needs to be strengthened.'

Notes to editors

1. Drug users in substitution treatment are prescribed a 'substitute' substance either similar or identical to the drug normally consumed. A distinction is made between *detoxification* – gradually reducing the quantity of the drug to zero intake – and *maintenance*, which involves providing the user with a sufficient amount to reduce risk behaviour and other related harm over a longer period. Heroin or other opiate users are the primary clients, with non-opiate users more often prescribed substitution substances for detoxification.

2. The 2000 *Annual report on the state of the drugs problem in the European Union*, published by the **EMCDDA** on 11 October, revealed that **EU**-wide, the estimated average price per week of methadone treatment is EUR 20. This compares with EUR 65 for buprenorphine. The report carries a special chapter on substitution treatment (see <http://www.emcdda.org>).

3. For more on the latest **EU** AIDS data see news release 'Problem drug use: changing trends' at <http://www.emcdda.org/press/press.shtml>

4. *Reviewing current practice in drug-substitution treatment in the European Union* is published in the EMCDDA *Insights* series (No.3). For further information and ordering details see http://www.emcdda.org/publications/publications_insights.shtml
Press review copies are available from the EMCDDA.

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