Drug-related deaths and mortality among drug users
Preliminary summary and highlights of the annual expert meeting

EMCDDA, Lisbon 29–30 September 2016

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Background and objectives
On 29 and 30 September 2016, the EMCDDA brought together international experts for the annual meeting on the key indicator Drug-related deaths and mortality among drug users (DRD). The DRD indicator is one of the five key epidemiological indicators on which the EMCDDA bases its reporting on trends and developments in the EU drug situation. These indicators are also essential for any analysis of the coverage of responses or the assessment of the impact of policies and actions.

Attending the meeting were nominated experts of the 28 EU Member States, Norway and Turkey and invited speakers. Also attending were delegates from non-EU countries (Albania, Montenegro, Serbia), in the framework of the EMCDDA technical cooperation projects financed by the Instrument of Pre-accession Assistance and the European Neighbourhood Policy instrument.

The meeting provides a space for sharing and discussing new studies, new findings and experiences at regional, national and European level. It also aims to facilitate technical work around the collection and analysis of the different components of the DRD indicator.

This document presents a selection of highlights from the presentations and discussions at the 2016 DRD expert meeting.

More information on the DRD expert meeting and updates are available from http://emcdda.europa.eu/meetings/2016/drd, including:

- Agenda and list of participants
- ‘2016 national DRD updates’ (and abstracts of presentations)
- Experts’ presentations
- Supporting material, links, references

Further information on the key indicator (methods, sources and resources) can also be found on the EMCDDA DRD web pages (1). Most recent data are available on the Statistical Bulletin website (2) (under overdose deaths/methodology/overall situation and trends).

Main topics covered
The purpose of the meeting is to provide insights into the current situation and trends in drug-related deaths and mortality in Europe. It also explores cross-analysis with other indicators of drug use and harms, as well as prevention and treatment responses.

(1) http://www.emcdda.europa.eu/activities/drd
The meeting focused on important technical and public health issues including:

- the availability of post mortem toxicology findings
- the resurgence in heroin-related deaths in some European countries
- evidence from mortality cohort studies on all causes of deaths, in particular among ageing drug users
- harms related to synthetic opioids
- polydrug use (including the misuse of medicines)
- burden of disease, and
- updates on a range of responses from hepatitis C treatment to prevention of drug-related deaths in Europe with naloxone programmes.

The meeting was preceded on 28 September by a technical satellite event on DRD ICD (1) coding practices, trends and information flow between DRD sources within selected countries. The main findings were subsequently reported and discussed with all experts during the regular DRD meeting.

**Some key points and new issues**

- **Trends in drug-related deaths**
  - Provisional data suggest an increase in the total number of reported overdose deaths. There were at least 6,800 deaths reported in 2014, and the number will be higher in 2015, due to increases reported in several countries (including, so far, Austria, Cyprus, Germany, Lithuania, the Netherlands, the United Kingdom, Sweden and Turkey). Some other countries show stable figures in 2015 (Croatia, Hungary and Slovenia). Provisional national overdose data are still being validated and will be available in next year’s Statistical Bulletin.
  - Estonia, which has been reporting high rates of drug overdose mortality for several years (113 cases per million population in Estonia, compared to an EU average of 19 per million in 2014), observed a decrease in the number of deaths in 2015. This occurs in the context of an apparent decrease in the number of people using synthetic opioids (namely fentanyls), but also of a clear scaling up of treatment and prevention (including take-home naloxone programmes).
  - A resurgence in heroin-related deaths, reported in some parts of Europe (Scotland, England and Turkey), was discussed, highlighting the variety of national contexts and possible causes of the increases.
  - Lithuania and the Netherlands also report a clear increase in overdose deaths in 2015, the context of which is being investigated.

- **Mortality cohort studies and estimates of problem drug users/problem opioid users**
  - New data from cohort studies among drug users in France, Norway and the United Kingdom, presented and discussed during the meeting, add to the evidence that being in opioid substitution treatment reduces opioid overdose risk.

(1) The International Classification of Diseases (ICD) is the standard diagnostic tool for epidemiology, health management and clinical purposes. The ICD-10 (ICD tenth edition) is currently used to code the causes of deaths available from the deaths certificates. Based of a selection of codes indicated by the EMCDDA DRD protocol, the national annual figures for overdose deaths can be extracted and reported to the EMCDDA
Cohort studies are ongoing in other countries, including Slovenia and Poland. Estimates of the number of problem opioid users (those most at risk of drug-induced deaths) are old or not available in several countries and work in this direction is very much encouraged.

**New psychoactive substances**

Concerns were discussed around new synthetic opioids implicated in drug-related deaths, with a special focus on U-47700, a dangerous short-acting opioid that has caused deaths and severe intoxications in several European countries (Finland, 4 deaths; and Belgium, Sweden and the United Kingdom).

**Medicines**

Tramadol misuse in the context of polydrug use was explored, and some countries, primarily the United Kingdom, showed that numbers of deaths where tramadol is involved might have reached a peak in 2014.

**Prison**

Prison was once again reported as a key setting for interventions to reduce fatal overdoses. A recent study in Norway, conducted in 57 of the 63 Norwegian prisons, and based on 1,500 questionnaires, measured the patterns of drug use prior to and while in prison. A main finding was high rates of problem drug use prior to imprisonment. Another registry-based study examined overdose deaths following more than 100,000 prison releases and identified an immediate post-release increased risk. The researchers conclude that intervention on the days before release, on the day of release (an appointment, someone to call) and on the days immediately following release are urgently needed.

**Responses**

Many new local initiatives were reported on take-home naloxone programmes, including a low-threshold project aiming at reaching those out of treatment in Norway, and a feasibility evaluation in four sites in Ireland.

Supervised drug consumption rooms are available in a minority of European countries (87 official facilities in Europe, now distributed over 57 cities in eight countries: Denmark, France, Germany, Luxembourg, the Netherlands, Norway, Spain and Switzerland). New facilities were opened in Copenhagen in August 2016 and in Paris in October 2016 (confirmed after the meeting). There are also plans to open additional facilities in France, Luxembourg and Norway. A budget for such a facility was set aside in Slovenia, and a feasibility study is planned in Belgium in 2017.

**Methodological work**

In Sweden, a very detailed analysis of the recent drug-related deaths data showed the long-term increase reported can be partly explained by changes in coding for some substances, changes in reporting thresholds of others, and to an overall increase in the number of toxicological investigations carried out. Nonetheless, when these factors are taken into account and corrected for, the increase remains and needs to be urgently addressed.

An updated review of the flow of data between special mortality registers (SR) and general mortality registers (GMR) in Europe showed that data flows are complex and still insufficient in some countries. This places limits on the amount of information on fatal overdose cases that can be retrieved, and thus implies that some national figures are being underestimated.
The level of implementation of the ICD updates still varies between countries, and is limited when key elements (namely T codes) are not used (e.g. in France and Poland).

The IRIS software (automated cause of death coding system supported by Eurostat) should improve the comparability of mortality statistics across Europe. Bridge coding studies can explore the impact of its use on drug-related death statistics.

GMR data were explored and the limitations of this source were discussed: underestimation from this source is probable in some countries, but there are also probably some over-inclusions due to unspecific coding. Despite the limitations of the GMR data, the national experts agreed that these data (Selection B) should nonetheless be provided, in order to facilitate discussion on how to improve the quality of drug-related deaths data at national level.

- Assessment of the implementation of the five key epidemiological indicators
  - The rationale, methods and main results of the previous assessment of the implementation of the DRD indicator in the 30 countries were discussed. The experts were asked to comment on their involvement in the process and to reflect on how the utility and impact of this triennial exercise could be improved.
- Burden of disease
  - Beyond overdose, the high mortality related to other causes of death among drug users — including hepatitis C — was discussed. Broader views on the drug-related burden of disease were also presented, and implications for the European monitoring of drug-related deaths discussed.

Further information
DRD 2016 meeting steering group: Isabelle Giraudon (Coordination), Dagmar Hedrich, Julián Vicente, Eleni Kalamara, Roland Simon

DRD key indicator www.emcdda.europa.eu/activities/drd
Other recent activities and products
- Preventing opioid overdose deaths with take-home naloxone (EMCDDA Insight) http://www.emcdda.europa.eu/publications/insights/take-home-naloxone