Lisbon addictions
Second conference on addictive’s behaviours and dependencies

Social cost of drugs in France

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AIMS OF THE STUDY

- OFDT 2004 : 2014
- How to weight a social problem
- Give a value, in euro of all the consequences of drugs for society (deaths, illness, life quality loss, loss of production public finance....)
- Facilitate policy managing
METHODOLOGY

- Open source, academic papers
- Cost of Illness
- Exclude of the individual spending
- Exclude some intangible costs
- Commensurability, \( r = 4\% \) following Lebègue (2005).
- Quinet, 2013
  - \( VVS = 3 \text{ M€ (en 2010)} \)
  - \( VAS = 115\ 000 \text{ € (en 2010)} \)
- Quality loss (OMS 2004)
- Marginal cost of public fund = 20\% (Quinet 2013)
• Value of production loss given by the flow of discounted income l’INCa (2007)
• Prevalence based = cost of a mid 90 year of the choices done previously
• CS=CE+ (I+\alpha) * \Delta G
• Attributable fraction and « Long term illness » (ALD)
• First diagnostic and second diagnostic are taken in account
## RESULTS

### Table - Health data 2010

<table>
<thead>
<tr>
<th></th>
<th>Alcohol</th>
<th>Tobacco</th>
<th>Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of death</td>
<td>63</td>
<td>71</td>
<td>53</td>
</tr>
<tr>
<td>Years in treatment</td>
<td>6</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Nb. years lost</td>
<td>17</td>
<td>9</td>
<td>27</td>
</tr>
<tr>
<td>Nb. patients</td>
<td>1 407 137</td>
<td>683 396</td>
<td>121 560</td>
</tr>
<tr>
<td>Nb. of death</td>
<td>49 051</td>
<td>78 966</td>
<td>1 605</td>
</tr>
<tr>
<td>Nb. of years lost</td>
<td>810 117</td>
<td>664 125</td>
<td>43 325</td>
</tr>
<tr>
<td></td>
<td>Alcohol</td>
<td>Tobacco</td>
<td>Drugs</td>
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<tr>
<td>Nb. Illness</td>
<td>1 407 137</td>
<td>683 396</td>
<td>121 560</td>
</tr>
<tr>
<td>Nb. Problematic users</td>
<td>3 800 000</td>
<td>13 400 000</td>
<td>300 000</td>
</tr>
<tr>
<td>External cost (Mds€)</td>
<td>-114 762</td>
<td>-105 391</td>
<td>-5 909</td>
</tr>
<tr>
<td>Nb. Lives lost</td>
<td>-66 218</td>
<td>-65 057</td>
<td>-2 719</td>
</tr>
<tr>
<td>Life quality loss</td>
<td>-39 530</td>
<td>-31 695</td>
<td>-2 655</td>
</tr>
<tr>
<td>Production loss</td>
<td>-9 014</td>
<td>-8 639</td>
<td>-535</td>
</tr>
<tr>
<td></td>
<td>Alcohol</td>
<td>Tobacco</td>
<td>Drugs</td>
</tr>
<tr>
<td>--------------------------------</td>
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<td>-----------</td>
</tr>
<tr>
<td><strong>Public finance (Mds€)</strong></td>
<td>-3 918</td>
<td>-13 881</td>
<td>-2 327</td>
</tr>
<tr>
<td><strong>Health costs</strong></td>
<td>-8 565</td>
<td>-25 887</td>
<td>-1 459</td>
</tr>
<tr>
<td><strong>Pension savings</strong></td>
<td>1 726</td>
<td>1 791</td>
<td>45</td>
</tr>
<tr>
<td><strong>Prevention and enforcement</strong></td>
<td>-283</td>
<td>-182</td>
<td>-913</td>
</tr>
<tr>
<td><strong>Taxation</strong></td>
<td>3 204</td>
<td>10 397</td>
<td>0</td>
</tr>
<tr>
<td><strong>Welfare (Mds€)</strong></td>
<td>-4 701</td>
<td>-16 658</td>
<td>-2 792</td>
</tr>
<tr>
<td><strong>CSSocial cost (Mds€)</strong></td>
<td>-119 463</td>
<td>-122 049</td>
<td>-8 701</td>
</tr>
<tr>
<td><strong>By user. By pb user (€)</strong></td>
<td>31 438</td>
<td>9 108</td>
<td>29 002</td>
</tr>
</tbody>
</table>
DISCUSSION

A—Analysis

• External cost = 95.1%, 85.2% et 67.6% of social cost
• Life loss = 55.4%, 53.3% et 31.2%
• Quality of life loss, second position
• Heath cost, 3rd
• Production loss, 4rd
• Taxes are lower than health costs

• *Alcool*
  
  Taxes : 3 Mds€ ; health : 8,5 Mds€
  
  Taxes 37% of health cost

• *Tobacco*
  
  Taxes : 10,3 Mds€ ; health cost : Mds€ 25,9 Mds€)
  
  Taxes tobacco = 40 % du health cost

• Drugs worsen public finance
  
  Alcohol : balance - 3918 Mds € euros
  
  Tobacco : balance - 13 881 Mds € euros
  
  Illicit drugs -2 327 Mds € euros
B—Discussion

First

• Btw 2000 and 2010 drug social cost has been multiplied by 3.

• With no negative inflexion in the field.

• But better data’s and new rules of calculation.

  42 000 against 78 966 tobacco death
  44 000 against 49 051 alcohol death
  547 against 1 605 death illicit drugs

• Quinet (2013) multiplies VVS by 2

  VVS en 2006 1,5 Mds and 3 Mds€ euros en 2010.
• New discount rate:
  6% (Boiteux 2001) and 4% (Quinet 2013)
• Loss of quality life was not included in en 2006
Deuxièmement

• There is a consensus to avoid international comparisons (Reuter, 1999) because parameters are very country based
• Ex : Mielecka-Kubień et al. (2014) social cost in Catalogne, Pologne et Portugal.
• This study does’ not include an estimate of the value of life lost but only of the production loss
• Logically the social cost is 4 or 5 time lower than in our study where death toll is 60% à 85% of social cost.

Thanks