Interpreting trends:
New heroin clients

- Apparent increases in new heroin clients
  - 16 countries with a recent increase
- Real trend or artefact of the data?

Interpreting trends:
New heroin clients

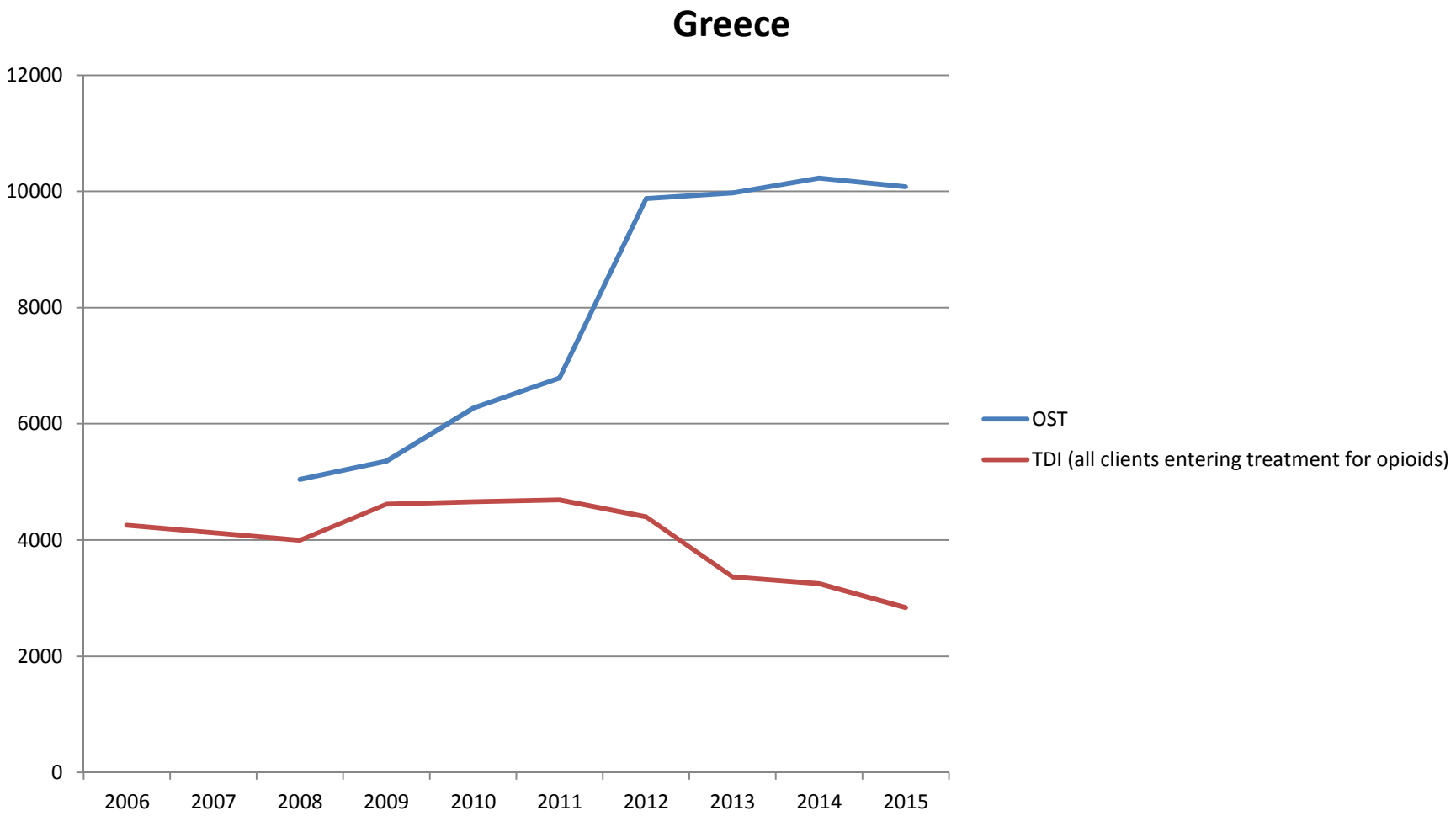
- Presentations – Latvia, Lithuania, Italy, UK
- All identified an artefact to explain their increase
  - Discussion identified similar issues across EU
- Two competing issues
  - Decreasing prevalence of heroin use / TDI clients
  - Increase in coverage, data quality

Interpreting trends:
New heroin clients

- Methods to correct for this to identify trends
  - Go back and get previous years (i.e. when new unit reports)
  - Examine the % heroin clients, not absolute numbers
- Opiate-related deaths increasing
  - Increase in opiate prevalence, OR
  - Ageing cohort experiencing elevated mortality

Interpreting trends:
Comparing TDI with OST

- Simple models to describe
  - Numbers in TDI
  - Numbers in OST
- Existing clients + New clients – Exits
- OST is preferred treatment for opiate use
  - OST trends should follow TDI trends
- Greece as main example, table discussion


Greece
12000
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OST
TDI (all clients entering treatment for opioids)

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Interpreting trends:
Comparing TDI with OST

- Data aggregated over one year
- TDI and OST different systems
  - TDI has protocol, OST does not
- Difficult to measure exits in OST
- Can client access OST without being part of TDI?

Interpreting trends:
Comparing TDI with OST

My thoughts -

- TDI is complicated!
- Differences across countries
- Data on opiate use can be messy
  - Comparing OST with TDI might double the ‘mess’
- Clients know what they want
  - OST is the preferred option
  - Difficulty in comparing TDI with OST via models