

# Drugnet Europe

Newsletter of the European Monitoring Centre for Drugs and Drug Addiction

### In this issue...

- 2 Europe's divided stimulant market
- Drugs and vulnerable groups of young people
- Feature: National drug-related research in Europe
- Towards a new EU drugs action plan (2009–12)
- Country overviews:
  National drug
  situations 'at a glance'
- New EMCDDA products and services
- 8 Annual report 2008 (continued)

# October-December

## EMCDDA releases Annual report 2008

Opioids are still at the heart of Europe's drug phenomenon. And signs of change in our heroin and synthetic opioid problem mean that countries need to be vigilant and prepared to respond. These were among the key points stressed by the EMCDDA as it launched its *Annual report 2008:* the state of the drugs problem in Europe on 6 November in Brussels (see page 7).

Estimates show that there are between 1.3 and 1.7 million problem opioid users in the EU and Norway, with heroin responsible for Europe's largest drug-related health and social costs. New data published in the report call into question previous EMCDDA assessments of a slowly improving heroin situation and point to a 'stable, but no longer diminishing problem'. Record opium production in Afghanistan in 2007 has also heightened the agency's worries over a potential knock-on effect on Europe's heroin problem.

'Current evidence does not point to an epidemic growth in heroin problems as experienced by most of Europe in the 1990s', said EMCDDA Director Wolfgang Götz. 'Nonetheless, we cannot ignore the threat posed by the glut of heroin now available on the world market, the concerns raised by indicators of heroin use, or the warning signs that synthetic opioids may be a growing problem. Vigilance is clearly required. But to ensure that Europe is ready to respond rapidly, there is a critical need to improve the sensitivity of our information systems to changes in the availability and use of these most damaging substances'.

In most EU countries, opioid use accounts for between 50 % and 80 % of all treatment demands. At least 7 000 to 8 000 drug-induced deaths occur in Europe every year, with drug overdose one of the leading causes of death among young Europeans. Around 80 % of fatal overdoses are associated with opioid use, and the injection of these drugs is a major vector for spreading drugrelated infectious diseases. It is estimated that some 3 000 new cases of drug-related HIV occur every year in Europe, and countries report that typically over 40 % of injectors are infected with HCV (hepatitis C virus). Substitution treatment for opioid use is now available in all EU Member States, Croatia and Norway, with around 600 000 opioid users receiving it annually.

Continued on page 8



Signs that Europe's biggest drug problem may be worsening.

## Positive developments, future challenges

'Although drug use levels remain historically high, we appear to be entering a more stable phase', said EMCDDA Director Wolfgang Götz, in his message launching the *Annual report 2008: the state of the drugs problem in Europe.* 'Overall, for most forms of consumption, we are not seeing major increases, and, in some areas, trends appear to be downwards'. The report illustrates, for example, how indicators for amphetamine and ecstasy use suggest an overall steady or declining situation. And, in the most recent data, there are stronger signals that cannabis use is stabilising or decreasing in some countries among young people.

'While it is important to acknowledge these positive developments, we must also remember that the dynamic nature of the drug problem presents us with ongoing concerns and future challenges', added the Director. Highlighted in the report are: warning signs over heroin; continuing increases in cocaine use; high rates of drug-related deaths; and reports of diversion and illicit production of synthetic opioids, such as fentanyl. Special attention is also given to the potential risk of drug use problems among vulnerable young people in a review published alongside the report.

'It is gratifying to note that, by international standards, Europe now stands out as one of the parts of the world where drug monitoring capacities are most developed', said Mr Götz. 'Nevertheless, we remain fully committed to further improving the quality and relevance of the available data, in order to better inform policymaking and practice across the EU'.

See Annual report 2008 'Message from the EMCDDA Director' at http://www.emcdda.europa.eu/about/press/newsreleases/2008



## Annual report 2008

## Mixed picture on stimulant drugs

Stimulant drugs — such as amphetamines, ecstasy and cocaine — are the second most commonly consumed drug type in Europe today, after cannabis. But within this group, data reveal a very mixed picture in terms of prevalence, trends and market developments.

According to the *Annual report 2008*, some 12 million Europeans (15–64 years) have tried cocaine in their lifetime, compared with around 11 million for amphetamines and 9.5 million for ecstasy. While the latest European data confirm reports of a stabilising or even declining trend in the use of amphetamines and ecstasy, they point to a continued rise in cocaine use, albeit in a small number of countries.

Around 2 million young Europeans (15–34 years) have tried amphetamines in the last year and around 2.5 million have tried ecstasy. The report shows stable to falling trends in last-year amphetamine use in this group since 2003, with on average 1.3 % of young adults reporting annual use. Last-year ecstasy use among young adults also remained largely steady over the last five years, although with small increases and decreases reported. On average, 1.8 % of young adults reported using ecstasy in the last year, although this figure masks considerable inter-country variation. School survey data from the Czech Republic, Spain, Sweden and the UK also show a stable situation or decline, both in the use of amphetamines and ecstasy among 15–16-year-olds.

Around 3.5 million young Europeans (15–34 years) have used cocaine in the last year, and 1.5 million in the last month. Seven countries report a rising trend in last-year use in recent surveys (2005–07). In high-prevalence countries Denmark, Spain, Ireland, Italy and the UK, last-year prevalence figures among young adults ranged from around 3 % to 5.5 %. The upward trend in treatment demand for cocaine problems also continues. Between 2002 and 2006, the number of cases in Europe of new clients demanding such treatment rose from around 13 000 to almost 30 000. Some 500 deaths associated with cocaine use were registered by the EMCDDA in 2006

## Europe's divided stimulant market

Cocaine now dominates the illicit stimulant market in the west and south of Europe, while elsewhere use and availability remain generally low. In most northern, central and eastern Member States, particularly countries joining the EU since 2004, amphetamines retain a strona foothold as the prevailing stimulant (see map, Chapter 4 Annual report). Use of methamphetamine — a drug causing considerable problems outside Europe — remains limited within the EU to the Czech Republic and Slovakia, but its availability and use are sporadically reported by other countries.



Cocaine and amphetamines: 'competing products' on Europe's illicit drug market?

Due to similarities in the settings in which they are taken, and the rationales offered for their use, cocaine and amphetamines can, to some extent, be regarded as 'competing products' on the European illicit drug market. 'The interplay between different drugs with the same user appeal remains an important area for investigation', said EMCDDA Chairman Marcel Reimen. 'Today's picture of a divided market suggests that, rather than focus on individual substances, we must adopt a holistic approach to stimulants. There is a potential risk that gains made in reducing the availability of one drug, could simply result in consumers switching to another'.

# Cannabis: 'Stronger signals' of declining popularity



Nearly a quarter of all Europeans, or around 71 million (15–64 years), have tried cannabis in their lifetime, and around 7 % (23 million) have used it in the last year — making it still Europe's most commonly consumed illicit drug. But, in some important markets, there are now 'stronger signals' of the drug's waning popularity, reinforcing the analysis presented in last year's *Annual report*.

Around 17.5 million young Europeans (15–34 years) are estimated to have used cannabis in the last year. Latest national survey data on last-year cannabis use in this age group reveal a stabilisation or decline in the majority of reporting countries, with on average 13 % of young adults using the drug in the last year. Lifetime and heavy cannabis use among 15-year-old school students in most EU countries also appears to be stable or declining. In the UK, a country that used to stand out for its high levels of cannabis use, a steady downward trend is visible in population surveys, especially in younger cohorts.

'Trends in the numbers of regular and intensive cannabis users, however, may move independently of cannabis prevalence among the general population', said EMCDDA Director Wolfgang Götz. Some 4 million European adults (15–64 years) are estimated to be using cannabis on a daily or almost daily basis. Among the estimated 160 000 new demands for treatment for drug problems reported in 2006, cannabis clients represented the second largest group (28 %) after heroin (35 %).

## Annual report 2008

## Drugs and vulnerable groups of young people

EU Member States are increasingly prioritising 'vulnerable groups' in their drug and social policies in a move to reduce the risks of potential drug use problems where they are most likely to occur. But there is a visible gap between political will and practical implementation. This is according to the Selected issue publication *Drugs and vulnerable groups of young people*, published alongside the *Annual report 2008*.

The review finds that a broad consensus is emerging among Member States regarding groups of young people considered to be particularly vulnerable to drug use. These include: young offenders; young people in government care; early school leavers or students with academic problems; and young people who live in disadvantaged families or neighbourhoods. According to the review, some of these groups are more susceptible to early drug use than their mainstream peers and may experience faster progression to problem drug use. Knowing the profiles of these groups and where they are found can



Knowing the profiles of these groups and where they are found can serve as an important entry-point for drug prevention strategies and interventions

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The report examines the policies and interventions targeting vulnerable groups of young people (15–24 years) in 30 countries, and supplies numerous examples of promising programmes and models of best practice. Whilst most countries offer a mix of responses, there is a preference for office-based ('come') services over outreach work, and interventions for hard-to-reach groups are

still lacking. Some studies suggest that, rather than addressing drug use itself, interventions should tackle simple vulnerability factors for drug problems such as academic performance, effective parenting and coping mechanisms.

Three years after the EMCDDA last reported on vulnerable groups (1), Europe still has few large national and cross-national studies at its disposal that would allow for

comparable datasets. Comparative research on vulnerability factors and vulnerable groups is also scarce, as is the systematic monitoring of the coverage, adequacy and contents of interventions.

A summary on this Selected issue is available in 23 languages at http://www.emcdda.europa.eu/publications/selected-issues

(1) See *Drug use amongst vulnerable young people* at http://www.emcdda.europa.eu/publications/drugs-in-focus and EMCDDA *Annual report 2004* at http://ar2004.emcdda.europa.eu/en/page023-en.html

## Drugs in prisons — healthcare is crucial

According to the *Annual report 2008*, survey data show that the EU prison population on a given day is over 600 000, with numbers of prisoners rising in most countries (1). It is estimated that, in almost all Member States, over 10 % of prisoners are drug-law offenders. And studies show that the proportion of inmates who have used heroin, cocaine or amphetamines in their lifetime can, in some prisons, be as high as 50–60 %.

The fact that drugs find their way into prisons, despite measures taken to reduce supply, is recognised by policymakers and prison experts alike. A challenge for prison systems in Europe is therefore to respond to the specific healthcare needs generated by drug problems, such as the burden of drug-related infectious diseases (e.g. hepatitis B and C, HIV/AIDS). According to the report, there are some indications that prison health policies are being shaped to meet these needs, with more countries than five years ago now reporting prevention activities; infectious disease screening and vaccination; and treatment for drug dependence.

But despite these improvements, much remains to be done. The report states that few prisons, for example, address the acute risk of death among newly released prisoners through overdose. Raising awareness of these risks and providing a seamless transition to external drug treatment, can play a key role in reducing drug-related deaths in this high-risk group.

#### Dagmar Hedrich

(1) Council of Europe Annual Penal Statistics (SPACE), based on a prison population survey with reference to 1 9 2006

## Survey of online shops

Over 200 psychoactive substances are now being advertised by online retailers in Europe, according to a 2008 EMCDDA mini survey of 25 online shops published in the *Annual report 2008*. While many of these substances are implicitly advertised as 'legal highs', in some countries the contents are covered by the same laws as controlled drugs, and may incur the same penalties. Given the small sample, results should be interpreted with caution, but most of the shops identified appear to be based in the UK and the Netherlands and, to a lesser extent, Germany and Austria. Reports suggest that the number of online retailers of these products is growing and that they adapt rapidly to new attempts to control the market.

Among the most common substances being sold as 'legal highs' are: Salvia divinorum, kratom (Mitragyna speciosa); Hawaiian baby woodrose (Argyreia nervosa); hallucinogenic mushrooms and a variety of 'party pills' sold as alternatives to ecstasy (MDMA). Often the main ingredient of synthetic 'party pills' is advertised as benzylpiperazine (BZP), but these pills may contain a wide range of plant material, semi-synthetic or synthetic substances.

## **Bookshelf**

## McMafia Crime without frontiers



In this book, the reader is taken on a journey through the new world of international organised crime that has emerged since the fall of communism in eastern Europe and the deregulation of global markets. Moving across continents, the author tracks key players in this global underworld: from gun runners in the Ukraine to drug syndicates in Canada and money launderers in Dubai.

McMafia unveils the nature of crime in today's world, offering insights into the pitfalls of globalisation, where the rules dividing the legal from the illegal are often far from clear. The author relates that, such is the extent and variety of the shadow economy, that it may now be worth as much as 20 % of the world's GDP. And quoting research from the United Nations, he describes how some 70 % of the financial resources available to organised crime are derived from drugs. Finally, he argues that conventional policing methods are no longer appropriate to deal with a problem that has its roots in global poverty and the ever widening divisions between rich and poor.

**Author:** Misha Glenny **Publisher:** Bodley Head **Language:** English

Date: April 2008 (hardback); February 2009

(paperback)

ISBN: 978-0-224-07503-9 (hardback); 978-0-099-48125-6 (paperback) Price: GBP 20 (hardback); GBP 8.99

(paperback).

Further information: info@bodleyhead.co.uk http://www.bodleyhead.co.uk/mcmafia.asp

The EMCDDA is responsible for the selection of materials for the Bookshelf and for the text presented. However, responsibility for the content of these materials and the opinions expressed therein lies with the authors themselves.

## **Feature**

### National drug-related research in Europe

Drug-related research is crucial to Europe's understanding of its drug problems. Research enables Europe to learn lessons from the past, sharpens its awareness and monitoring of the present and helps countries prepare for the future. Yet building a picture of drug-related research in Europe remains challenging.

National drug-related research in Europe, published by the EMCDDA on 17 October, aims to respond to this challenge (1). The publication is based on reports compiled by 27 Reitox national focal points (NFPs) in 2007, which provide an outline of drug-related research at national level. Accompanied by a thematic website, it follows a 1996 overview of drug-related research in the then 15 EU Member States (2) and precedes a comparative analysis to be published by the European Commission in 2009 (3). The review examines three areas: current research actors in Europe: the broad themes/areas of ongoing research; and the channels used to disseminate research results



Research is now considered a priority in many EU Member States, being mentioned in the national drug policy documents of 20 of the 27 reporting countries

In total, over 70 key research structures were cited by the reporting countries, ranging from private research centres to universities and bodies hosting Reitox NFPs. Research was seen to have increased over the last decade in a number of areas, including: prevalence, incidence and patterns of drug use; the evaluation of interventions; and economic aspects. Among the diverse dissemination infrastructures identified, journals were considered a vital platform for communicating research. Some 27 drug research-specialised peer-reviewed journals were reported in 2007, over twice as many as in 1996.

The report concludes that European drug-related research has seen considerable improvements since 1996. Research is now considered a priority in many EU Member States, being mentioned in the national drug policy documents of 20 of the 27 reporting countries. Also, most countries report relatively stable funding at national level, although concerns about funding availability and sustainability are still expressed.

But despite some improvements, a number of issues remain unresolved. Well-functioning coordination among researchers, research centres and research areas, for example, continues to be a fundamental structural problem in most countries, as was the case in 1996. And, although most national drug strategies and action plans now refer to the need for evidence-based policies, the link between research results and policymaking is often difficult to make.

The vast majority of countries however state that, at least to a certain degree, research does have an influence on decision-making. Reports suggest that research specifically commissioned by the policymakers themselves has a greater chance of being taken into account in decision-making.

#### Margareta Nilson and Maria Moreira

(1) Available in English at http://www.emcdda.europa.eu/publications/selected-issues
Summary available in 23 languages. Thematic website: http://www.emcdda.europa.eu/themes/research

(2) Kenis, P. (1996) *Drugs. Research-related initiatives in the European Union, Comparative report,* European University Institute, Florence.

[3] A comparative analysis of research into illicit drugs in the EU, European Commission (forthcoming).

## **Partners**

## Towards a new EU drugs action plan (2009–12)

On 18 September, the European Commission adopted a Communication on 'An EU drugs action plan for 2009–12' to be implemented under the EU drugs strategy 2005–12. The Council of the EU will be invited to endorse the action plan by the end of 2008, following discussion with the 27 Member States.

The proposed plan includes wide-ranging measures to strengthen European cooperation to curb the adverse consequences of drug use and cut drug-related crime. It is conceived around five priorities: reducing the demand for drugs; mobilising European citizens; reducing supply; improving international cooperation; and improving understanding of the drugs phenomenon.

Vice-President of the Commission, Jacques Barrot, responsible for Justice, Freedom and Security, called on government bodies, public services and voluntary organisations to work together to prevent and reduce the harm caused by drugs in our society. In this context, Mr Barrot proposed the creation of a European Alliance on Drugs to mobilise citizens to play an active part in addressing the drugs issue and to disseminate information on successful initiatives. The proposed action plan reflects the focus of the EU drugs strategy which sets out a model for a drug policy based on a balanced approach (reducing both supply and demand for drugs).

For more, see news releases at: http://europa.eu/rapid/pressReleasesAction.do?reference=IP/08/1366&format=HTML&aged=0&language=EN&guilanguage=en

http://europa.eu/rapid/pressReleasesAction.do?reference=MEMO/08/571&format=HTML&aged=0&language=EN&guiLanguage=en

## **Conference 2009**

## Identifying Europe's information needs

The EMCDDA has been reporting on Europe's drug situation since the mid-1990s. Over this time, the drugs problem has evolved considerably, as have Member States' responses to it. To commemorate its 15 years of monitoring, the EMCDDA will organise a high-level conference in Lisbon from 6–8 May 2009 to reflect on past achievements and future challenges.

Entitled 'Identifying Europe's information needs for effective drug policy', the event will bring together some 300 policymakers, researchers and practitioners to focus on the themes of policy, practice, trends and horizons. The aim of the event will be to identify key questions arising from an evolving drug situation and set out Europe's information needs for the future.

Plenary sessions will map out the overall issues in each area and be supported by parallel sessions allowing for more focused discussions. The conclusions of the various sessions will then be drawn into a synthesis, highlighting the implications for the work of the EMCDDA and its national partners in monitoring the drug phenomenon in the coming years.

Margareta Nilson

## International

## High-level Andean visit to EMCDDA

Francisco Santos Calderón, Vice-President of Colombia, and Rómulo Pizarro, President of the Peruvian National Commission for Development and a Drug-free Life (DEVIDA), visited the EMCDDA on 22 September during a two-day visit to Portugal.

Colombia and Peru, the world's largest producers of the coca bush — the source of cocaine — have joined forces in a common strategy to tackle the cocaine problem, based on the principle of 'shared responsibility'. The strategy aims to raise awareness in Europe of the need for greater investment in combating the negative environmental impact of coca production and in reducing cocaine supply and demand. Europe is now among the biggest cocaine markets in the world, along with the US, Canada and Australia.

During the session at the agency, Director Wolfgang Götz stressed that cocaine ranked very highly on the European agenda, with the EMCDDA, Europol and MAOC-N all working actively on addressing the problem in their various areas of expertise. While financial support and technical assistance to the two countries is beyond the mandate of the agency, the EMCDDA remained fully open to both countries in exchanging information, methodology and expertise.

The EMCDDA already supports the establishment of national drug observatories and information networks in the Latin American region in the framework of its collaboration with the Inter-American Drug Abuse Control Commission (CICAD).

The Vice-President of Colombia embraced the prospect of future collaboration and underlined the value of science-based information on drugs. In this regard he welcomed moves to strengthen national observatories in Latin America in order to improve drug monitoring capacities. The President of DEVIDA presented the country's current drug policy (2007–11) which covers prevention and rehabilitation, supply reduction and alternative development. He estimated that around 70 % of the cocaine produced in Peru was destined for the European market.

The session ended with an agreement on the need for comparable drug data at global level and for joint efforts to bring the monitoring systems of Latin America and Europe closer together.



## **Spotlight**

## Country overviews: National drug situations 'at a glance'



Over 30 Country overviews, presenting national drug situations 'at a glance', are now available on the EMCDDA website. The overviews provide a structured synopsis of the latest trends and characteristics of national drug problems and consist of a summary, key statistics and a barometer illustrating the drug use prevalence position of each country.

The overviews provide concise information in 15 key areas (e.g. prevalence, prevention, legislation) and are available for the EU Member States, candidate countries to the EU and Norway. Several countries of the former Soviet Union are also included, following European Commission funded cooperation projects.

In the framework of the European Commission's CARDS project (1), the EMCDDA organised a national Reitox Academy in Belgrade (Serbia) from 15-17 October, dedicated to the Country overviews. Five Western Balkan countries participated in the event, namely: Albania; Bosnia and Herzegovina; the Former Yugoslav Republic of Macedonia; Montenegro and Serbia. The aim of the academy was to explain how the Country overviews are produced and to assist the countries in producing their own overviews by the end of 2008. This was the first event organised by the EMCDDA in the Western Balkans.

#### Xavier Poos

(1) Community Assistance for Reconstruction, Development and Stabilisation (CARDS).

Country overviews: published in English on 28 July 2008. National language versions will be available in the autumn:

http://www.emcdda.europa.eu/publications/countryoverviews

## **Meetings**

### Workshop: Illicit trade and globalisation

Every year the CESifo Institute (Germany) and the Venice International University host the 'CESifo Venice Summer Institute' to explore themes of current interest in European economic policy. The institute brings together international experts working on economic policy topics for workshops, panel meetings and discussion.

From 14–15 July, the EMCDDA organised a workshop at the event on the theme of 'Illicit trade and globalisation'. The workshop was designed to debate recent research on the diverse aspects of illicit trade in today's global society, with particular emphasis on the economic analysis of drug markets, drug policies and money laundering. The latest modelling techniques and empirical evidence on the drug problem were also discussed, as was improving the interface between drug analysis and drug policy. Contributions presented at the workshop will be published in the coming months in the CESifo series of Working papers (1). These papers will then be peer reviewed and published in a book by MIT press (Massachusetts Institute of Technology).

#### Claudia Costa Storti

[1] Working papers: http://portal.ifo.de/portal/page/portal/ifoHome/b-publ/b3publwp For more, see http://www.cesifo-group.de/portal/page/portal/ifoHome/c-event/c2conf/30confvsi

## **Experts explore treatment needs**

Over 50 European and international experts met at the EMCDDA from 15–16 September for their annual meeting to examine the profiles and characteristics of people seeking treatment for drug problems. The meeting focused on the state of progress of the EMCDDA indicator on treatment demand and dealt with issues of data-collection quality, methodology and adapting treatment monitoring to changes in the drugs problem. Particular attention was paid at the event to treatment needs assessment. These sessions looked at methods and guidelines to assess treatment needs in various countries and regions and explored initiatives to cater for the needs of specific drug-related problems and population groups (e.g. migrants, intravenous drug users, pregnant women).

#### Linda Montanari

A full meeting report can be found at: http://www.emcdda.europa.eu/?nnodeid=1420

## Global conference on methamphetamine

It is commonly agreed that methamphetamine is a dangerous drug that has caused extensive damage in North America, East and South-east Asia and Oceania. To address the problem, action is required on many fronts and strategies require careful development to meet the needs of affected populations. This was the rationale behind the '1st Global conference on methamphetamine: science, strategy and response', organised from 15–16 September in Prague.

Among the issues discussed at the event were: the extent and patterns of methamphetamine consumption in different parts of the globe; the harmful consequences of its use; and related treatment and harm reduction efforts. Also examined were: methamphetamine production (and its environmental impact); trafficking and law enforcement. In addition, current research and regional approaches were presented. The EMCDDA participated in the conference, presenting available data on the use, production and trafficking of methamphetamine in Europe.

#### Chloé Carpentier and Danica Klempová

For more, see http://www.globalmethconference.com/prague-08/index.php

## **Products and services**

## Annual report 2008 information package



The Annual report 2008 was launched at press conferences at the European Parliament and European Commission on 6 November. This followed a presentation the previous day to the EP Committee on Civil Liberties, Justice and Home Affairs (LIBE). Presenting the report to the media were: Vice-President of the Commission, Jacques Barrot, responsible for Justice, Freedom and Security; Chairman of the LIBE Committee Gérard Deprez; EMCDDA Chairman Marcel Reimen and Director Wolfgang Götz.

To mark the launch, the agency released a comprehensive, multilingual information package offering the latest findings on

the drug phenomenon across 30 countries. This package comprised the report itself (available in print and online in 23 languages), a Selected issue publication on *Drugs and vulnerable groups of young people* (in English); and an accompanying press pack and PowerPoint presentations in 23 languages. Also available on the day were the: 2008 Statistical bulletin, offering tables and graphs on the European drug situation; and Country overviews presenting national drug situations 'at a glance'. Finally, over a dozen countries marked the release of the report with national launches and events combining European and national drugs perspectives.

Information on, and links to, all *Annual report* products, Mp3 files, promotional items, services and events are available at: http://www.emcdda.europa.eu/events/2008/annual-report

## Fentanyl added to online 'drug profiles'

Highlighted in the *Annual report 2008* are increased problems related to synthetic opioids, such as 3-methylfentanyl (fentanyl). Fentanyl is considerably more potent than heroin and its use can be particularly risky. The EMCDDA released on 6 November a new online 'drug profile' on fentanyl. Other new releases in this series are profiles on benzodiazepine, hallucinogenic mushrooms, LSD and volatile substances.

Drug profiles, available in English, French and German at http://www.emcdda.europa.eu/publications/drug-profiles

## Monitoring the supply of cocaine to Europe

A new technical data sheet from the EMCDDA explores the production, routes, economics and logistics involved in trafficking cocaine to Europe. While just three source countries (Colombia, Peru and Bolivia) account for nearly all global coca production, the picture of trafficking cocaine to Europe is complex. Some countries (e.g. Spain, UK) have a long-established cocaine problem, while others (e.g. France, Portugal, Italy) have seen a rapid increase in cocaine use and seizures in recent years. Recent initiatives in Europe, such as the MAOC-N anti-trafficking centre in Lisbon, are beginning to orchestrate responses at the supranational level. Europe could benefit from a more detailed picture of cocaine supply, to build our understanding about how enforcement actions may affect availability and cocaine use. This technical data sheet follows a sister publication on heroin trafficking, published in September.

Technical data sheets, available in English at http://www.emcdda.europa.eu/publications/technical-datasheets

## Coming soon: new EMCDDA Insights

- Drug use, impaired driving and traffic accidents, EMCDDA Insights No 8, December 2008.
- Assessing illicit drugs in wastewater, EMCDDA Insights No 9, December 2008.

 $In sights, in \ print \ and \ downloadable \ in \ English \ at \ http://www.emcdda.europa.eu/publications/in sights$ 

## Resources

# Useful materials or events on the drugs issue

#### **EUCPN** survey

At the request of the European Commission, the UK-based Centre for Strategy and Evaluation Services (CSES), is carrying out an external evaluation on the European Crime Prevention Network (http://www.eucpn.org). The purpose of the exercise is to assess the effectiveness and impact of the EUCPN's activities since 2001, and to identify future priorities. The EUCPN was set up to help promote crime prevention activity in EU Member States and to share best practice.

Register your views at: http://www.cses.co.uk/survey/EUCPN/intro.htm

#### ISSDP conference 2009

The 3<sup>rd</sup> annual conference of the International Society for the Study of Drug Policy (ISSDP) will take place in Vienna from 2–3 March 2009 at the United Nations Office on Drugs and Crime (UNODC). The event will feature high-quality papers and plenary speakers on research issues relevant to the ongoing UNGASS review process. Deadline for registration: 19 February.

http://www.issdp.org/vienna2009/index.htm

### Publishing addiction science

The International Society of Addiction Journal Editors (ISAJE) has published the 2<sup>nd</sup> edition of *Publishing Addiction Science*, which advises potential authors on the opportunities for publishing their work in addiction journals. New chapters have been added on: how to write a publishable article; how to publish qualitative research and how to deal with conflicts of interest. The publication is available free online or in print (EUR 27).

http://www.parint.org/isajewebsite/isajebook2.htm

Organisations wishing to publicise their newsletters, magazines, websites, CD-ROMs or any other resources are invited to contact Kathryn.Robertson@emcdda.europa.eu **Drugnet Europe** is a newsletter published by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), Lisbon. Any item may be reproduced provided the source is acknowledged.

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## Calendar 2008

1 2 **3** 4 5 6 7 8 9 **10** 11 12 13 14 15 16 17 18 19 **20** 21 22 23 24 25 26 27 **28** 29 30 31

#### **EMCDDA** meetings

5 November: Presentation of Annual report to the

European Parliament, Brussels.

6 November: Annual report press launch, Brussels.

17-18 November: EMCDDA Scientific Committee

meeting, Lisbon.

19–21 November: Reitox heads of focal point meeting,

Lisbon.

27–28 November: Expert group on drug-related deaths

and mortality among drug users,

Lisbon.

3 December: Meeting of the EMCDDA budget and

executive committees, Lisbon.

3-5 December: EMCDDA Management Board, Lisbon.

#### **External** meetings

19-21 October: ESPAD meeting, Riga

(http://www.espad.org).

20-24 October: 4th CICAD Ibero-American meeting of

national drug observatories, Antigua,

Guatemala.

2-7 November: 51st International ICAA conference on

dependencies, Limassol (http://www.icaa.ch).

12-15 November: Conference on prisons and women's

health. Kiev

(http://www.euro.who.int/prisons).

#### **EU** meetings

11-13 December: International conference 'Drugs and

Culture', Paris

(http://www.droguesetcultures2008.com).

15-17 December: Horizontal working party on drugs,

Brussels.

## **Annual report 2008**

Continued from page 1

According to the report, although heroin use remains stable, indicators of opioid trends point to some worrying developments. For example, the number of heroin seizures in most reporting countries increased by over 10% in the period 2003–06. And the quantity of heroin seized in Turkey, an important transit country, more than doubled during this period. Overall, heroin seizures reached an estimated 19.4 tonnes (48 200 seizures) in Europe in 2006.

Also, across Europe, data suggest that new recruitment to heroin use is still occurring 'at a rate that will ensure that the problem will not decline significantly in the foreseeable future'. New demands for treatment with heroin as the primary drug increased in around half of the countries reporting data in 2006. Particular concern is raised by studies in some countries which suggest that initiation to opioid injection is still occurring. And in Estonia, Lithuania, Austria and Romania, over 40 % of injectors were under 25.

In contrast to an overall falling trend in drug-induced deaths between 2000 and 2003, data now suggest a static or even growing problem, with most Member States since reporting increases. Heroin is the drug most associated with drug-related deaths, but other opioids are also being reported. While, overall, the average age of those dying from overdose is rising in Europe (mid-30s), a number of countries report a relatively high proportion of overdose deaths among the under-25s.

Highlighted this year are also the increased reports of problems related to synthetic opioids. In Latvia and Estonia, for example, there are indications of a growing problem caused by the availability of 3-methylfentanyl (fentanyl). Due to the strength of this drug — it is considerably more potent than heroin — use can be particularly risky. This is reflected in the over 70 fentanyl-related fatal poisonings reported in Estonia in 2006 (see page 7).

Research shows that the risk of overdose decreases substantially when heroin users are in substitution treatment. Nevertheless, methadone is identified in the toxicological reports of some deaths in Europe. Evidence exists that good prescribing practices can reduce these deaths, highlighting the need for overdose prevention issues to be taken into account when developing clinical practice in this area. Methadone deaths do not appear to be directly related to overall levels of substitution treatment.

Wolfgang Götz said: 'Reducing drug-related deaths is an explicit goal of most national drug strategies but our actions are yet to match our words. We cannot tolerate the fact that one of our young citizens dies every hour from an overdose that could have been avoided. We must prioritise overdose prevention measures and target high-risk groups, such as those leaving prison or relapsing after treatment'.

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