

January–March 2016

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## New EMCDDA Director takes up post



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Alexis Goosdeel takes up post of Director as agency enters its third decade.

Alexis Goosdeel (Belgium) took up the post of EMCDDA Director on 1 January 2016, having been formally appointed by the agency's Management Board in October 2015 for a five-year term<sup>(1)</sup>.

Speaking on his appointment, Mr Goosdeel said: 'It is with great enthusiasm and motivation that I take up the post of EMCDDA Director, as the agency enters its third decade. I sincerely believe that the EMCDDA has an exciting future ahead of it; a future in which it will

continue to build on its strengths and adapt and transform itself within the boundaries of its remit.'

He added: 'During its first 20 years, the agency has witnessed great changes in the drug phenomenon but also in the priorities of decision-makers and their information needs. In tune with these developments, and to remain policy-relevant and useful to its stakeholders, the agency will move progressively from an information-centered model to a service-oriented model, providing tailored analysis to its customers'.

Mr Goosdeel joined the EMCDDA in 1999 as a project manager working in the area of EU enlargement and international relations. From 2005, he headed the agency's Reitox and international cooperation unit. In this capacity, he played a central role in: coordinating a network of 30 national drug monitoring centres; preparing EU candidate and

potential candidate countries for membership of the EMCDDA; developing cooperation with neighbouring countries to the EU; and nurturing relations with countries beyond the Union (Central Asia, Latin America and Russia).

Mr Goosdeel has spent much of his 30-year career working in the field of public health at national, European and international level. He was one of the founders of *Modus Vivendi*, a Belgian NGO working in the area of harm reduction. Before joining the agency, he directed *Alizés*, a Brussels-based, European association working for development and cooperation in public health. Mr Goosdeel holds a Master's degree in clinical psychology and a special diploma in advanced management.

<sup>(1)</sup> The EMCDDA Director is the legal representative of the agency and is accountable to its Management Board. For more, see [www.emcdda.europa.eu/news/2016/fs1/alexis-goosdeel-at-helm-eu-drugs-agency](http://www.emcdda.europa.eu/news/2016/fs1/alexis-goosdeel-at-helm-eu-drugs-agency)

## EMCDDA Management Board elects new Chair and Vice-Chair

On 3 December 2015, the EMCDDA Management Board held elections for Chair and Vice-Chair of the Board. Laura d'Arrigo (France) was elected Chair for the next three years and Franz Pietsch (Austria) Vice-Chair<sup>(1)</sup>.

Laura d'Arrigo is Diplomatic advisor at the French Interministerial Mission for Combating Drugs and Addictive Behaviours (*Mission interministérielle de lutte contre les drogues et les conduites addictives*). She has been member of the Board since December

2013 and is the first woman to hold the position. Ms d'Arrigo took over the role from João Goulão (Portugal) who served as Chair for two terms (2010–12 and 2013–15).

Franz Pietsch (Austria), member of the Board since 2002, is representative of Austria regarding international matters of addiction and drug issues and Deputy Director-General and Head of Department for Tobacco, Alcohol, Non-substance-related Addictions and International Affairs of Addiction.

He took over from Claude Gillard (Belgium) who held the position from 2010.

Former EMCDDA Director Wolfgang Götz congratulated the new Chair and Vice-Chair and paid tribute to João Goulão and Claude Gillard for their 'inspiration, collaboration and untiring commitment to steering the Board over the past six years'.

<sup>(1)</sup> For more, see [www.emcdda.europa.eu/news/2015/11/management-board-elections](http://www.emcdda.europa.eu/news/2015/11/management-board-elections)

See also page 8.

## NEW STUDIES

## COMORBIDITY

## New report explores mental health and substance use disorders



Psychiatric comorbidity is highly prevalent among those with substance use problems.

The co-existence of mental illness and psychoactive drug or other substance use problems — otherwise known as ‘comorbidity’ or ‘dual diagnosis’ — is an issue which has been on the EMCDDA’s radar for over a decade <sup>(1)</sup>. As concern around the issue grows, the EMCDDA published on

27 November the most comprehensive analysis of the topic to date at European level: *Comorbidity of substance use and mental disorders in Europe* <sup>(2)</sup>.

Psychiatric comorbidity is highly prevalent among those with substance use problems. It can lead to increased risk of hospitalisation, suicide and criminal behaviour and is difficult to manage and treat. The new literature review provides policymakers and practitioners working in the drugs field with a detailed and timely overview of the concept and the tools available for its assessment.

The link between substance use and mental health problems is a complex one and interaction between the two can play out on many levels. In some cases, the psychiatric disorder may be a risk factor for substance use, while in others it is the substance use that triggers the mental health disorder. Co-existence of the two raises a number of challenges such as chronicity, poor treatment outcomes, increased morbidity and, in some cases, more criminality.

Some of the most common combinations of drug use and mental health disorders are presented in the publication, along with the corresponding clinical recommendations and response measures implemented in treatment settings across Europe. The most usual form of comorbidity is the combination of a substance use disorder with depression; while anxiety is also frequent.

The report sets out the range of instruments available today to assess psychiatric comorbidity in those with substance use disorders and presents a selection of tools used for screening and diagnosis. It also presents an overview of existing treatment options (and current gaps) for comorbid disorders in 30 European countries (28 EU Member States, Norway and Turkey) and calls for a more in-depth review of service organisation across Europe.

**Linda Montanari**

<sup>(1)</sup> For more, see [www.emcdda.europa.eu/publications](http://www.emcdda.europa.eu/publications) (search ‘comorbidity’).

<sup>(2)</sup> For more, see [www.emcdda.europa.eu/news/2015](http://www.emcdda.europa.eu/news/2015) See also EMCDDA Insights 19 at [www.emcdda.europa.eu/publications/insights/comorbidity-substance-use-mental-disorders-europe](http://www.emcdda.europa.eu/publications/insights/comorbidity-substance-use-mental-disorders-europe)

## NALOXONE

## New insights into the overdose antidote that can help save lives



Many opioid overdose deaths can be prevented.

Between 6 000 and 8 000 drug-induced deaths are reported in Europe every year, with opioids, such as heroin, found in most overdose cases. Yet with adequate intervention, including use of the overdose-reversal drug naloxone, many of these deaths can be prevented.

This issue is explored in a new EMCDDA report, launched on 18 January, entitled *Preventing opioid overdose deaths with take-home naloxone* <sup>(1)</sup>. Naloxone — a medication used to reverse respiratory depression caused by opioid overdose — has been used in emergency medicine since the 1970s.

### Can naloxone provided in the community help reduce the thousands of drug-induced deaths recorded in Europe every year?

Research shows that many opioid overdoses occur in the presence of bystanders, who, if trained and equipped adequately, would be able to intervene and save lives while waiting for emergency services to arrive at the scene. This has led to the emergence since the 1990s of harm-reduction programmes providing training on overdose response and the use of naloxone. However, only in recent years has the distribution of take-home naloxone kits to opioid users, and those likely to witness opioid overdoses, been stepped up <sup>(2)</sup>.

The new report provides practitioners and policymakers with a comprehensive, up-to-date review of the evidence base on the issue. In Europe, take-home naloxone initiatives currently operate at city level in Denmark, Germany, Estonia, Ireland, Italy, the UK (England) and Norway, and at regional level in Spain (Catalonia) and the UK (Scotland and Wales). A number of other EU countries are also exploring the practice and considering adding take-home naloxone to the existing range of interventions to prevent drug-related deaths.

‘Each of the lives lost every day in Europe to opioid overdose is worth all our efforts to improve prevention and responses’, says EMCDDA Director Alexis Goosdeel. ‘Empowering bystanders to deliver a potentially life-saving intervention is an important step in a diversified European response to drugs’.

**Dagmar Hedrich**

<sup>(1)</sup> For more, see [www.emcdda.europa.eu/news/2016/1/preventing-opioid-overdose-naloxone](http://www.emcdda.europa.eu/news/2016/1/preventing-opioid-overdose-naloxone) See also EMCDDA Insights 20 at [www.emcdda.europa.eu/publications/insights/take-home-naloxone](http://www.emcdda.europa.eu/publications/insights/take-home-naloxone)

<sup>(2)</sup> For more, see [www.emcdda.europa.eu/events/2014/meetings/naloxone](http://www.emcdda.europa.eu/events/2014/meetings/naloxone) [www.emcdda.europa.eu/publications/emcdda-papers/naloxone-effectiveness](http://www.emcdda.europa.eu/publications/emcdda-papers/naloxone-effectiveness) [www.emcdda.europa.eu/topics/pods/preventing-overdose-deaths](http://www.emcdda.europa.eu/topics/pods/preventing-overdose-deaths)

## NEW STUDIES

## DRUG MARKETS

## The internet and drug markets

The speed with which the internet is transforming drug markets poses a major challenge to law enforcement, public health, research and monitoring agencies. In a forthcoming edition of its Insights series — *The internet and drug markets* <sup>(1)</sup> — the EMCDDA aims to unravel some of the complexities surrounding online drug markets: what they are; how they operate; the technologies underlying them; and how they interact with the traditional drug market.

Online drug markets today operate on various levels, from the 'surface web' (accessible via common search engines) to the 'deep web' (inaccessible via standard browsers). The report explores 'dark net' markets on the 'deep web' — otherwise known as 'cryptomarkets' — that allow goods and services to be exchanged between parties who use digital encryption software to conceal their identities.

The fruit of the EMCDDA's first detailed exploration of this subject, the report collates the most recent evidence from a range of experts — from academia, journalism and frontline practice. In doing so, it adds to the collective knowledge available on this part of the supply chain and highlights gaps for future research.

Jane Mounteney and Alessandra Bo

<sup>(1)</sup> Coming soon in the EMCDDA Insights series. See *Drugnet Europe* 94 for more.

## WASTEWATER

## Assessing illicit drugs in wastewater



Over the past eight years, wastewater-based drug epidemiology has demonstrated its potential to become an important complement to established drug monitoring tools. This spring, the EMCDDA will update its 2008

report *Assessing illicit drugs in wastewater* with a new edition in its Insights series dedicated to the topic <sup>(1)</sup>.

Wastewater-based epidemiology can deliver near real-time data on geographical and temporal trends in drug use and allow for a better identification of the true spectrum of substances being consumed. The forthcoming report will present a comprehensive overview of the different aspects of wastewater-based epidemiology, covering the latest developments and research results in the domain.

Liesbeth Vandam

<sup>(1)</sup> Coming soon in the EMCDDA Insights series. See *Drugnet Europe* 94 for more.

## TRIBUTE

## Tribute to outgoing Director Wolfgang Götz



Wolfgang Götz will represent the European Parliament on the EMCDDA Management Board for the next three years.

It is hard to talk about the EMCDDA without mentioning Wolfgang Götz, who ended two mandates as Director of the agency on 31 December 2015. Mr Götz joined the agency in December 1996,

just over a year after it became operational and when this newsletter was on issue No 2. He was recruited to head the agency's then Information unit, overseeing, among others, the early editions of the *Annual report on the state of the drugs problem in Europe*.

In February 2001, Wolfgang Götz moved to the Reitox unit. Here he played a pivotal role in strengthening relations between the EMCDDA and the network and — in the framework of the 2004 EU enlargement — in integrating national focal points from 10 new EU Member States in the work of the agency. The manner in which Wolfgang managed the Reitox network granted him a great deal of prestige beyond the walls of the agency and most likely impacted on the decision of the EMCDDA Management Board in April 2005 to appoint him as the new EMCDDA Director for an initial five-year term. In 2009, the Management Board unanimously renewed his mandate for a second five-year term from 1 May 2010, a challenge he took up with renewed energy and a strong commitment to boosting the agency's scientific performance and independence.

After 19 years working at the agency, and over 10 years as Director, Mr Götz's legacy is clear to see. The EMCDDA is now a mature and acclaimed agency, dedicated to scientific excellence and efficiency.

Throughout his tenure as Director, Wolfgang fought hard to: attract and secure the best possible personnel and budget for the agency; empower staff; build sound working relations with the Management Board and Scientific Committee; and improve the quality and relevance of EMCDDA products and services.

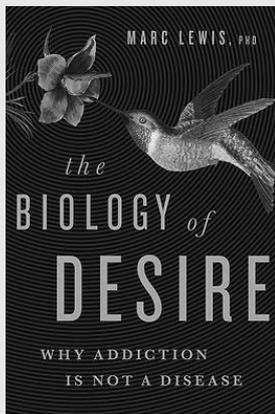
Given these achievements, it is hardly surprising then that, in December 2015, the European Parliament (EP), in a letter from President Martin Schulz, decided to appoint Mr Götz as one of the two EP representatives on the EMCDDA Management Board for the next three years. We congratulate Wolfgang on this appointment and look forward to working with him in this new role. We also await news on his candidature to be member of the International Narcotics Control Board (INCB) for the mandate starting on 1 March 2017 <sup>(1)</sup>.

Gonçalo Felgueiras

<sup>(1)</sup> For more, see [www.incb.org/incb/en/about/membership.html](http://www.incb.org/incb/en/about/membership.html)

## BOOKSHELF

## The Biology of Desire



In *The Biology of Desire: Why addiction is not a disease*, controversial cognitive neuroscientist Dr Marc Lewis refutes the conventional 'disease model' of addiction, arguing that it is a behavioural problem that requires willpower and motivation to change. Through the real-life stories of five people who journeyed into and out of addiction, Lewis aims to show why the disease model poses an obstacle to healing.

Lewis argues that treatment based on the disease model can often fail and may be retooled to achieve lasting recovery, given the realities of brain plasticity. Combining human stories with scientific explanation, he covers a wide range of ideas on addiction from behavioural neuroscience and clinical perspectives.

Lewis describes addiction as an unintended consequence of the brain 'doing what it is supposed to do: seek pleasure and relief'. His theory has divided both the medical profession as well as those suffering from addiction.

**Author:** Dr Marc Lewis

**Publisher:** Public Affairs

**Language:** English

**Date:** 2015

**ISBN:** 978-1-61039-437-6 (hardcover)

**Further details:**

[www.publicaffairsbooks.com/book/hardcover/the-biology-of-desire/9781610394376](http://www.publicaffairsbooks.com/book/hardcover/the-biology-of-desire/9781610394376)

*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

## New EMCDDA strategy and work programme



EMCDDA strategy and work programme 2016–18: now available online.

The EMCDDA strategy and work programme 2016–18, which includes the annual work programme 2016, was published on the EMCDDA website on 21 January <sup>(1)</sup>. The document, adopted by the Management Board in December 2015, follows a comprehensive consultation of the agency's key stakeholders and partners as well as an exhaustive internal strategic thinking and programming exercise.

At the heart of the new strategy and work programme is the EMCDDA's vision to contribute to a more secure and a healthier Europe. This overarching commitment will drive the agency in the coming years and guide it in delivering added value to its stakeholders. Knowledge-transfer, strategic analysis and threat assessment will be the main drivers to achieving this goal.

**Ensuring the security of the EU is now, more than ever, a top priority — tackling drug-related threats is an integral part of this effort**

Ensuring the security of the EU is now, more than ever, a top priority. Tackling drug-related threats is an integral part of this effort, as highlighted by the recently adopted European Agenda on Security 2015–20. Here the EMCDDA will provide EU policymakers with timely information and analysis to support prompt and

sound responses. One example of this contribution will be the publication of the second *EU Drug Markets Report*, a comprehensive strategic analysis of illicit drug markets in the EU, to be published with Europol on 5 April 2016.

Better understanding of the global dimension of the drug phenomenon is vital for tackling threats to the EU. To this end, the agency will continue to support the European Commission in its endeavour to provide technical assistance to candidate, potential candidate and neighbouring countries to the EU, with the aim of informing sound drug policies.

Fulfilling the agency's vision for 2016–18 also means contributing to the health of EU citizens. This will include continuing the successful collaboration with partners in the prevention of infectious diseases among people who inject drugs, focusing in particular on HIV and hepatitis C, which remain major public health concerns.

**Fulfilling the agency's vision for 2016–18 also means contributing to the health of EU citizens**

A new top-level publication, the *EU Drug Responses Report*, will be launched in 2017. This will provide a state-of-the-art overview of the responses to drugs across the EU

as well as recommendations for action. The *EU Drug Responses Report*, the *EU Drug Markets Report* and the annual *European Drug Report: Trends and Developments*, together will provide the complete picture of the drug phenomenon and an essential information and analysis package for policymakers from the EU and beyond.

Finally, the EMCDDA will continue to play a central role in Europe's response to new psychoactive substances, which represent one of the most rapidly growing threats to the health of EU citizens. The agency will ensure that the EU Early Warning System, which it operates together with its partners, is able to meet the challenges ahead and provide a rapid response to protect public health.

**Narcisa Murgea**

<sup>(1)</sup> Available in English at [www.emcdda.europa.eu/publications/work-programmes-and-strategies/2016-work-programme](http://www.emcdda.europa.eu/publications/work-programmes-and-strategies/2016-work-programme)

## INTERNATIONAL

## Promoting evidence-based drug prevention in Morocco

A national Reitox Academy on 'Best practice in prevention' was organised by the EMCDDA and the Moroccan National Drug Observatory (ONDA) from 8–9 December 2015 in Rabat <sup>(1)</sup>. Some 40 prevention professionals attended the event from non-governmental organisations as well as from the education, health and law enforcement sectors. The aim of the meeting was to look at prevention from the perspective of evidence-based approaches to the drugs problem and to promote information exchange on the tools available to help develop and implement prevention programmes.

The meeting provided a unique opportunity for professionals from various regions of the country to present their work, network and exchange information. Those attending showed particular interest in EMCDDA methodological guidelines and standards in view of an ongoing national debate on the development of national prevention standards.

Stronger cooperation between the EMCDDA and ONDA will allow for a more regular exchange of information and practices with Moroccan professionals in the future.

**Ilze Jekabsone and Marica Ferri**

<sup>(1)</sup> Organised in the framework of the European Commission-funded EMCDDA technical cooperation project 'Towards a gradual improvement of ENP partner countries' capacity to monitor and to meet drug-related challenges' [www.emcdda.europa.eu/html.cfm/index233016EN.html](http://www.emcdda.europa.eu/html.cfm/index233016EN.html)

## PARTNERS

## EMCDDA collaborates with HA-REACT

A new EU Joint Action on HIV and co-infection prevention and harm reduction (HA-REACT) held a kick-off partnership meeting in Vilnius from 14–15 January. The Joint Action was set up to address existing gaps in the prevention of HIV and other co-infections among people who inject drugs (PWID). It aims to significantly contribute to the elimination of HIV and to reductions in cases of tuberculosis (TB) and hepatitis C among PWID in the EU by 2020.

The three-year project — which began on 1 October 2015 and receives 80% of its funding from the EU Health Programme — is coordinated by the Finnish National Institute for Health and Welfare. It is currently being implemented by 23 partners in 18 EU Member States, with a focus on Latvia, Lithuania and Hungary and on the preparation of toolkits and guidelines that will benefit the entire EU.

Twelve collaborating partners contribute additional expertise to the project, including the European Centre for Disease Prevention and Control (ECDC) and the EMCDDA. The two EU agencies also sit on the HA-REACT Advisory Board, together with a representative of the EU Civil Society Forum on Drugs.

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For more, see [www.HAREACT.eu](http://www.HAREACT.eu)  
Twitter: #HAREACT

## UNGASS 2016

## EU Member States' common position for UNGASS 2016

The UN General Assembly Special Session (UNGASS) on drugs, taking place from 19–21 April 2016 in New York, is a major political moment and an opportunity for the international community to review and address the world drugs problem <sup>(1)</sup>. At UNGASS, the EU will stand united in reaffirming its commitment to the UN international drug control conventions, which provide sufficient scope and flexibility to accommodate a wide range of approaches to drug policy in accordance with national and regional specificities.

In its common position, adopted on 11 November 2015 <sup>(2)</sup>, the EU reiterates the need for countries to respect human rights when implementing the international conventions. In this context, it calls for the abolition of the death penalty for drug-related crimes and for proportional sentencing and alternative measures to conviction or punishment.

Protecting the health and welfare of mankind is an integral part of the international response to the global drugs problem. In this context, the EU calls for the rebalancing of drug policy towards health-oriented approaches.

In the paper, the EU stresses that international cooperation needs to be strengthened in order to identify, disrupt and dismantle transnational organised criminal groups involved in any illicit activities relating to drug trafficking. It also strongly advocates the use of reliable monitoring, best practice and scientific evidence in informing drug policy.

The last UNGASS took place in New York in 1998, marking the 10<sup>th</sup> anniversary of the 1988 UN Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances. On that occasion, countries committed to reducing illicit supply and demand for drugs by 2008. Their 10-year commitment was renewed in a Political Declaration and Plan of Action in 2009. In 2012, the UN General Assembly decided to convene UNGASS 2016 following a proposal from Mexico, Guatemala and Colombia <sup>(3)</sup>. The aim would be to review the progress of the 2009 Declaration and assess ongoing achievements and challenges in countering the world drugs problem.

**Danilo Ballotta**

<sup>(1)</sup> [www.unodc.org/ungass2016/en/about.html](http://www.unodc.org/ungass2016/en/about.html)

<sup>(2)</sup> [www.unodc.org/documents/ungass2016/Contributions/IO/EU\\_COMMON\\_POSITION\\_ON\\_UNGASS.pdf](http://www.unodc.org/documents/ungass2016/Contributions/IO/EU_COMMON_POSITION_ON_UNGASS.pdf)

<sup>(3)</sup> Resolution 67/193 [www.un.org/en/ga/search/view\\_doc.asp?symbol=A/RES/67/193](http://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/67/193)

## SPOTLIGHT



## Registration opens for fifth European drugs summer school

The University Institute of Lisbon (ISCTE-IUL) and the EMCDDA will be joining forces again this summer to hold the fifth European drugs summer school (EDSS) on 'Illicit drugs in Europe: demand, supply and public policies' <sup>(1)</sup>. Registration opened on 7 January for the two-week course, which will take place in the Portuguese capital from 27 June to 8 July. The initiative is also supported by the US National Institute on Drug Abuse (NIDA).

Through a multidisciplinary and interactive approach to the drugs problem, EMCDDA scientific experts, leading academics, guest speakers and policymakers, will prepare participants to meet the complex policy challenges in this field. This year, the focus of the course will be on the evidence base for policymaking on drug-related issues. Keynote speakers will consider the outcomes of the United Nations General Assembly Special Session on Drugs (UNGASS), taking place in New York in April 2016.

Week 1 of the summer school focuses on 'Drug policies and the production of evidence' and Week 2 on 'Policymaking for drug-related issues'.

The course will conclude with an analysis of the link between evidence and decision-making and will feature an open debate.

### Marica Ferri

<sup>(1)</sup> For more on the European drugs summer school (EDSS), see [www.drugsummerschool.cies.iscte-iul.pt/np4/home](http://www.drugsummerschool.cies.iscte-iul.pt/np4/home) and [www.emcdda.europa.eu/news/2016/fs2/registration-fifth-european-drugs-summer-school](http://www.emcdda.europa.eu/news/2016/fs2/registration-fifth-european-drugs-summer-school)

Follow the EDSS on Twitter at <https://twitter.com/edsslisbon>. Subscribe to the EDSS update (newsletter) at <http://eepurl.com/L7Au1>.

A promotional flyer is available (<http://tinyurl.com/j648qu8>).

## NEW PSYCHOACTIVE SUBSTANCES

## Risk assessment of $\alpha$ -PVP

Last year was another exceptionally busy year for the EU Early Warning System with no signs of a slowdown in the growth of the market.

On 18 November, the extended Scientific Committee of the EMCDDA met to assess the risks of the synthetic cathinone  $\alpha$ -PVP, after over 100 deaths and 30 non-fatal poisonings associated with the substance were reported to the agency (see page 8). While  $\alpha$ -PVP is mainly imported from China, clandestine laboratories manufacturing the substance inside Europe have also been dismantled. This is the third cathinone to be assessed by the Scientific Committee, following MPDV in 2014 and mephedrone in 2010 <sup>(1)</sup>.

Also in 2015, 32 deaths linked to the potent opioid acetylfentanyl — typically sold online as a 'research chemical' — led the EMCDDA and Europol to produce a Joint Report on the substance <sup>(2)</sup>.

### Rachel Christie and Michael Evans-Brown

<sup>(1)</sup> For more, see [www.emcdda.europa.eu/activities/action-on-new-drugs](http://www.emcdda.europa.eu/activities/action-on-new-drugs)

<sup>(2)</sup> For more, see [www.emcdda.europa.eu/publications/joint-reports/alpha-pvp](http://www.emcdda.europa.eu/publications/joint-reports/alpha-pvp)

## Upcoming NPS conference

Registration is now open for the 4<sup>th</sup> International Conference on Novel Psychoactive Substances, which will take place in Budapest from 30–31 May 2016 <sup>(1)</sup>. The conference is jointly organised by the University of Hertfordshire, the EMCDDA, Sapienza University of Rome, the World Anti-Doping Agency (WADA) and the University of Chieti-Pescara.



The conference promises to continue the high standard set over the previous three events and will include presentations from key experts in the NPS field.

The conference will cover an array of topics, including: sharing accurate, evidence-based information on NPS latest trends; improving understanding of treatment and management approaches; and socio-cultural factors underlying risky behaviours.

<sup>(1)</sup> [www.novelpsychoactivesubstances.org](http://www.novelpsychoactivesubstances.org)

## REITOX

## First Czech–Slovak seminar on drug monitoring

The Slovak national focal point (NFP) hosted the first Czech–Slovak seminar on drugs and drug addiction monitoring from 8–9 December in Bratislava.

The purpose of the meeting was for the two NFPs to exchange experience on the coordination of national drug information systems as well as the practical aspects of data collection, analysis and the dissemination of results.

Following the division of Czechoslovakia in 1993, the two countries continued to experience similar drug problems, which had heavily affected their societies after the fall of Communism in the region in 1989. Today, the countries still share high prevalence of injecting

metamphetamine (pervitin) — as well as its domestic production — relatively low drug-related mortality and low HIV prevalence among people who inject drugs (PWID). On the other hand, the independent development of the two countries over the past 20 years has seen the emergence of different responses to these issues.

Discussions at the meeting focused on: coordination mechanisms; networking in data collection; monitoring interventions; implementing the EMCDDA's key epidemiological indicators; preparing outputs and routine reports; and publishing results. Both sides agreed to organise regular information exchange meetings in the future, with the option of opening up participation to other neighbouring countries.

### Imrich Šteliar and Viktor Mravcik

# PRODUCTS AND SERVICES

## EMCDDA strategy and work programme



The EMCDDA strategy and work programme for 2016–18 and annual work programme 2016 — adopted by the Management Board in December 2015 (see pp. 4 and 8) — is based on the EMCDDA’s vision to contribute to a more secure and a healthier Europe. A proactive approach, combined with a greater emphasis on knowledge-transfer, strategic analysis and threat assessment will be the main drivers to achieve this goal. The document was published on the EMCDDA website on 21 January.

Available in English at: [www.emcdda.europa.eu/publications/work-programmes-and-strategies/2016-work-programme](http://www.emcdda.europa.eu/publications/work-programmes-and-strategies/2016-work-programme)

## Emergency department-based brief interventions



Brief interventions are psychosocial techniques designed to help recipients recognise harmful patterns of substance use and motivate and support them to address that use. Studies suggest that brief interventions in an emergency department setting maximise the benefit of a unique ‘window of opportunity’ for engaging with people with substance use problems who do not necessarily receive assessment, referral or intervention. A new edition in the EMCDDA Papers series explores five systematic reviews and 16 randomised controlled trials and points to the potential benefits of brief interventions.

Available in English at: [www.emcdda.europa.eu/publications/papers/2016/emergency-department-based-brief-interventions](http://www.emcdda.europa.eu/publications/papers/2016/emergency-department-based-brief-interventions)

## Drugnet Europe subscriptions



After 20 years of delivering you *Drugnet Europe* in print, this year the EMCDDA will begin the process of phasing out the print edition of the newsletter. To ensure that you keep up to date with EMCDDA activities, events, products and services, we would like to offer you the opportunity to switch to an electronic subscription. To update your data, or cancel your current subscription, please visit the link below to enter the subscription number appearing on the postal address label.

Update at [www.emcdda.europa.eu/publications/drugnet/93](http://www.emcdda.europa.eu/publications/drugnet/93)

## EU Drug Markets Report 2016

The EMCDDA and Europol are joining forces again this year to launch the second *EU Drug Markets Report*. The report will be launched in Brussels on 5 April by Dimitris Avramopoulos, European Commissioner responsible for Migration, Home Affairs and Citizenship. The Commissioner will be joined at the press conference by EMCDDA Director Alexis Goosdeel and Europol Director Rob Wainwright.

For a full update, see *Drugnet Europe* 94.

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# EVENTS



## Euro-DEN network meeting

The EU-funded European Drug Emergencies Network (Euro-DEN) project was established in 2013 to collect data from hospital emergency rooms across Europe on acute recreational drug toxicity. From 7–8 April, the EMCDDA — member of the Euro-DEN Steering Committee — will host a meeting of the ‘Euro-DEN Plus’ network of 20 sentinel specialist hospitals responsible for collecting the data. The meeting will gather clinical toxicologists and specialist emergency physicians from the sentinels in 15 countries. The event will look at new data on drug-related emergencies and discuss the future Euro-DEN strategy.

The network is now an essential tool for monitoring acute drug toxicity in Europe, complementing more established drug indicators.

For more, see [www.emcdda.europa.eu/activities/emergencies](http://www.emcdda.europa.eu/activities/emergencies)

## Lisbon Addictions 2017

Following the success of the First European conference on addictive behaviours and dependencies, held in Lisbon in September 2015 (see *Drugnet Europe* 92), the organisers are following up with Lisbon Addictions 2017, to be held in the Portuguese capital from 24–26 October 2017. The conference will again be organised by the Portuguese General-Directorate for Intervention on Addictive Behaviours and Dependencies (SICAD), in collaboration with the scientific journal *Addiction*, the EMCDDA and the International Society of Addiction Journal Editors (ISAJE).

This time, the event has the capacity to accommodate over 800 participants, compared to 600 in 2015.

Subscribe to the conference newsletter at <http://bit.ly/1PB5iZ4>

Follow on [twitter.com/lxaddictions](https://twitter.com/lxaddictions)

## EMCDDA meetings

- 4 February: Visit to the EMCDDA of the Justice Affairs Directorate of the General Secretariat of the Council of the EU, Lisbon.
- 18 February: Kick-off meeting with new Chair and Vice-Chair of the EMCDDA Management Board, Brussels.

## External meetings

- 9 February: MedSPAD committee, Pompidou Group, Paris ([www.coe.int/T/DG3/Pompidou/Calendar\\_en.asp](http://www.coe.int/T/DG3/Pompidou/Calendar_en.asp)).
- 16–17 February: Regional roundtable on new psychoactive substances, Organisation for Security and Cooperation in Europe, Minsk (<http://polis.osce.org>).
- 17 February: 1<sup>st</sup> HCV policy summit on the elimination of HCV in Europe, Hepatitis B and C Public Policy Association, Brussels ([www.hepbccpa.org](http://www.hepbccpa.org)).
- 17–18 February: ALICE RAP: The A-Debate: U-Turn on Addictions. Biological and social science to reframe addictions policy, Barcelona.
- 17–19 February: 2<sup>nd</sup> International urban drug policy conference 2016, Warsaw (<http://urbandrugpolicies.com>).
- 14–22 March: UN Commission on Narcotic Drugs (CND), UNODC, Vienna.
- 19–21 April: United Nations General Assembly Special Session on Drugs 2016, New York.

## EU meetings

- 11–12 February: Network meeting of the EU Justice and Home Affairs (JHA) agencies, Fundamental Rights Agency (FRA), Vienna.
- 17 February: Horizontal working party on drugs, Brussels (Dutch Presidency).
- 18 February: Heads of agencies meeting, Dublin.
- 2–3 March: Horizontal working party on drugs, Brussels.

## Management Board update

The EMCDDA Management Board adopted at its meeting on 3–4 December 2015 the agency's strategy and work programme for 2016–18, which includes the annual work programme 2016 (see p. 4). The Board also adopted the EMCDDA 2016 budget totalling some EUR 15.4 million (EUR 14.8 million EU subsidy, plus a contribution of some EUR 390 000 from Norway and EUR 210 000 from Turkey). It also adopted the preliminary draft budget for 2017.

A high point on the agenda were the elections for Chair and Vice-Chair of the Board, with Laura d'Arrigo (France) and Franz Pietsch (Austria) being elected to the positions (see p. 1). Claude Gillard (Belgium) was re-elected as member and Chair of the Budget Committee for the next three years, while João Goulão (Portugal) and Susan Scally (Ireland) were elected as members of the Executive Committee. The Board agreed to formalise the EMCDDA's cooperation with Switzerland through an exchange of letters outlining specific areas for scientific cooperation. It also took note of an assessment on implementing the EMCDDA key epidemiological indicators in Europe.

**Monika Blum**

## Scientific Committee update

The EMCDDA Scientific Committee met in Lisbon from 18–20 November, where it undertook the risk assessment of synthetic cathinone  $\alpha$ -PVP (see p. 6). Following the meeting, on 18 December, the European Commission published a proposal for a Council Decision subjecting  $\alpha$ -PVP to control measures (<sup>(1)</sup>).

The meeting provided the opportunity for a last exchange of views with outgoing Director, Wolfgang Götz, and outgoing Chair of the Management Board, João Goulão. The Committee also welcomed new Director, Alexis Goosdeel, who presented his vision for the agency. The concept of the new EMCDDA multi-annual programming was also discussed, along with the Committee's contributions to the EU action plan on drugs (2013–16).

In line with the agency's new policy on the prevention and management of conflicts of interest, members' declarations have now been published on the EMCDDA website. As decided by the Management Board in December, the mandate of the Scientific Committee and reserve list has been extended for the period 2017–19.

**Maria Moreira**

(<sup>1</sup>) <http://eur-lex.europa.eu/legal-content/EN/TXT/?qid=1454346800343&uri=CELEX:52015PC0674>

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