New ESPAD survey findings released

Smoking and drinking among 15–16-year-old school students are showing signs of decline, but there are concerns over challenges posed by new drugs and new addictive behaviours. While, overall, illicit drug use is stable in this group after previous increases (1995–2003), it continues at high levels. These were among the findings released on 20 September in the latest report from the European School Survey Project on Alcohol and Other Drugs (ESPAD). The study, published in collaboration with the EMCDDA, is based on a 2015 survey in 35 European countries, including 24 EU Member States (1).

The 2015 survey is the sixth data-collection wave conducted by the ESPAD project since 1995. A total of 96,043 students participated, responding in school to an anonymous questionnaire.

The ESPAD Report 2015 features information on students’ experience of, and perceptions about, a number of substances including: tobacco, alcohol, illicit drugs, inhalants, pharmaceuticals and new psychoactive substances (NPS). Special attention is given in the new report to NPS, excessive internet use and online gaming and gambling, all of which were monitored for the first time in this survey round.

Positive changes are seen with regard to teenage smoking (lifetime use, last-30-day use and daily use). In the 2015 survey, over half of the respondents (54%; range: 34%–84%) reported that they had never smoked, while less than a quarter (21%; range: 6%–37%) reported that they were ‘current smokers’ (last 30 days).

Although alcohol use among adolescents in Europe remains high, temporal trends show positive developments. Lifetime use of alcohol decreased from 89% to 81% between 1995 and 2015 and last-30-day use from 56% to 47%, with a marked decrease seen in both patterns after a peak in 2003. After progressive increases from 1995 to 2011, the prevalence of ‘heavy episodic drinking’ decreased clearly from 2011 to 2015 (for boys 44% to 37%; for girls 38% to 33%) in some countries. Less positively, every third student (35%) reported heavy episodic drinking in the past month in the 2015 survey.

On average, 18% of students reported having used an illicit drug at least once in their life, but levels varied considerably across the ESPAD countries (range: 6%–37%). After an increase between 1995 and 2003, the prevalence of illicit drug use has remained rather stable, with 10 countries reporting levels in excess of 25% in 2015. The most prevalent illicit drug in all ESPAD countries was cannabis.

Across the ESPAD countries, 4% of the students reported lifetime experience with new psychoactive substances (NPS) (range: 1%–10%), while 3% said they had used them in the past year (range: 1%–8%). On average, NPS seem to be more commonly used than amphetamines, ecstasy, cocaine or LSD, all of which have lower lifetime prevalence rates.

Finally, students were found to use the internet, on average, on 5.8 days per week. Girls used social media regularly more often than boys (four or more days in the last week) (83% versus 73%). Online gaming was more prevalent among boys (39% compared to 7%) and considerably more boys than girls reported gambling experience in all forms (23% versus 5% on average) or gambling frequently (12% versus 2%) in the last year.

Julián Vicente, Ludwig Kraus and Håkan Leifman (1) For more, see www.emcdda.europa.eu/news/2016/10/espad-report
Lišbon Addictions 2017

Following the success of the First European conference on addictive behaviours and dependencies in 2015, the organisers are pleased to announce Lisbon Addictions 2017, to be held in the Portuguese capital from 24–26 October 2017 (1).

Once again, the conference will be jointly organised by the Portuguese General-Directorate for Intervention on Addictive Behaviours and Dependencies (SICAD), the journal Addiction, the EMCDDA and the International Society of Addiction Journal Editors (ISAJE).

This major event in the addictions calendar will provide an opportunity for a variety of networking and scientific events. In the margins of the conference, the EMCDDA will be co-hosting 'Testing the waters 2017', the third international conference on wastewater analysis, as well as the 'Third international symposium on drug-impaired driving' (2).

Registration for the conference opened on 27 October. Proposals for paper presentations and posters, as well as for symposia, workshops or panel discussions are invited by 28 February 2017. Some of the most renowned experts in the addictions and drug-related fields will provide guidance on the scientific content of the event as members of the conference scientific committee.

Renate Hochwieser, Maria Moreira and Liesbeth Vandam

(1) For more, see www.lisbonaddictions.eu/lisbon-addictions-2017

EMCDDA scientific award 2016

The four winners of this year’s EMCDDA scientific award were honoured in Lisbon on 10 November at the annual ceremony hosted by the agency (1).

The winners received a non-monetary prize for their articles at an event held in the margins of the 45th meeting of the EMCDDA Scientific Committee. The prize, inaugurated in 2011 by the EMCDDA and its Scientific Committee, celebrates scientific writing and distinguishes high-quality research in the field of illicit drugs. Scientific papers are nominated by members of the Scientific Committee, the Reitox focal points, scientific journals, research societies and EMCDDA staff. This year, over 50 eligible articles, published in peer-reviewed journals in 2015, were assessed by an award committee.

The winners (primary authors) and their corresponding categories are: Jennifer Murray (US), ‘Basic biological, neurobiological and behavioural research’; Heidi Grundetjern (Norway), ‘Drug Supply’; Angelos Hatzakis (Greece), ‘Population-based and epidemiology research’ and Laura Brandt (Austria), ‘Demand-reduction research’.

Maria Moreira

(1) For more, see www.emcdda.europa.eu/activities/scientific-award

GPS expert meeting update

The EMCDDA expert group on the key indicator ‘Prevalence and patterns of drug use among the general population’ held its annual meeting in Lisbon from 19–20 September and focused on the group’s latest achievements as well as recent methodological studies and developments (2). Among the topics discussed were: the revision of the European Model Questionnaire (EMQ) module on alcohol use; the link between traditional drug surveys and wastewater-based epidemiology; the European Web Survey on Drugs (3) and how drug use data can be used to assess emerging trends.

A special session of the meeting was dedicated to the launch of the ESPAD Report 2015 (see p. 1). A final joint session with the EMCDDA expert group on ‘Problem drug use’ — involving experts from Europe, Australia and the USA — focused on the link between the two key indicators (3). Among the topics addressed during the session were the challenges of monitoring high-risk cannabis use.

João Matias

(1) www.emcdda.europa.eu/meetings/2016/gps
(2) www.emcdda.europa.eu/activities/european-web-survey-on-drugs
(3) www.emcdda.europa.eu/activities/hrdu
New EMCDDA report sheds light on drug-related hospital emergencies

Data from hospital emergency departments show that, every year in Europe, thousands of individuals experience acute drug toxicity, resulting in emergency presentations to hospital. In a recent report, published on 4 August, the EMCDDA provides the latest findings on hospital emergency cases resulting from drug use. It reveals that those affected are mainly young adults (20–39 years), and predominantly male, and that heroin is still the most common drug involved. It also signals a recent rise in cases linked to new psychoactive substances (NPS) (1).

The report is based on an analysis by the European Drug Emergencies Network (Euro-DEN Plus), which monitors drug-related emergency presentations in 20 ‘sentinel’ hospitals in 14 European countries (2). The report reveals that, in its first two-year data-collection period (October 2013 to September 2015), the network recorded 10 956 drug-related emergency presentations, including 49 deaths.

Over two-thirds (70.2%) of the presentations were recorded in five of the centres — situated in Dublin, London (2 centres), Oslo and Paris — over half of them (61%) occurring in Oslo and London. Males dominated the presentations in all age groups (76%).

Data from hospital emergency units can provide a unique insight into acute health harms related to drug use

Emergency data can complement routine indicators of high-risk drug trends and related harms but also act as early-warning signals on new substances and patterns of use. Continued monitoring in these settings will help us assess the public health impact of acute drug toxicity in Europe, develop appropriate healthcare and prevention activities and provide crucial input to our risk assessments of new psychoactive substances.

Most of the presentations recorded in the study reportedly involved one (62%) or two (26%) drugs. Two-thirds of the substances recorded (64%) were established illicit drugs (e.g. heroin, cocaine, cannabis, amphetamine and MDMA) and one quarter (25%) prescription or over-the-counter medicines (e.g. opioids and benzodiazepines).

Over the two years, heroin was involved in nearly a quarter of presentations (24%), cocaine and cannabis both in 16%. Less commonly reported were NPS — often sold as ‘legal highs’ or research chemicals — representing 7% of drugs involved in hospital emergencies over the study period. But the report shows a rise in the proportion of NPS: from 6% of reported drugs in Year 1 to 8% in Year 2. There was a significant geographic variation in NPS presentations, with a greater proportion reported in centres in Germany, Ireland, Poland and the UK.

EMCDDA Director Alexis Goosdeel said: ‘Data from hospital emergency units can provide us with a unique insight into acute health harms related to drug use and can enrich our understanding of the drugs problem by broadening the scope of our monitoring.

The most common clinical feature reported was agitation/aggression (26%). Other severe features included chest pain (7%), psychosis (6%), seizures (3%), hyperthermia (1.4%) and cardiorespiratory arrest (0.5%). Of the 49 deaths recorded, 84% were in males (median age: 29 years). The deaths involved mainly opioids (23 deaths) and or stimulants (15 deaths). NPS were involved in nine deaths.

A number of time patterns emerge from the data, including clear seasonal variations. Over the two years, fewer than 800 presentations were recorded for the months of December, January and February, compared to over 1 000 per month for the months of June, July and August. More cases were recorded at the weekend than on weekdays, with 18% occurring on Saturdays compared with 12–13% during the week.

Cases of acute drug toxicity can constitute a significant burden and challenge to health services. The report states: ‘Overall, 68% of presentations arrived at the emergency department by ambulance, indicating significant utilisation of pre-hospital emergency services’.

David M. Wood, Isabelle Giraudon, Jane Mounteney and Paul I. Dargan

(1) For more, see Rapid communication www.emcdda.europa.eu/publications/rapid-communications/2016/hospital-emergencies

(2) The Euro-DEN network was set up in 2013 to improve knowledge at European level on acute drug toxicity relating to established illicit drugs and new psychoactive substances. It was funded by the European Commission from April 2013 to March 2015. After this, the network continued its work and renamed itself ‘Euro-DEN Plus’ as it grew from 16 to 20 centres. The EMCDDA has participated in the network’s Steering Committee since the outset and facilitates synergies between projects.
Grounds for hope in treating hepatitis C

Hepatitis C is an infectious disease of the liver caused by the blood-borne hepatitis C virus (HCV). Around 115 million people worldwide have been infected at some point in their life by HCV. Two-thirds of these are estimated to be chronically infected, over 5 million within the European Union. The infection is highly prevalent among people who inject drugs who can contract HCV through the sharing of needles, syringes and other injecting equipment. In a report published on World Hepatitis Day (28 July), the EMCDDA looks at new opportunities for the effective prevention and treatment of the disease, including the use of a new generation of medicines (1).

The report — *Hepatitis C among drug users in Europe: epidemiology, treatment and prevention* — provides a state-of-the-art review of the epidemiology of HCV infection in Europe and its estimated prevalence among people who inject drugs. HCV infection levels in this group range from 15% to 84%, with many studies showing 50% or more infected. There is also strong evidence of ongoing and, in some countries, high levels of transmission among young injectors, suggesting that infection can be acquired early in an individual’s injecting career.

**For the first time, a real opportunity exists to tackle the high prevalence of HCV infection at the level of injecting drug-user communities**

Initial infection with HCV is often asymptomatic and many people with an injection history are unaware that they are carrying the virus, leading to the disease being referred to as a ‘hidden epidemic’. If left unresolved, the infection can lead to chronic liver disease, cirrhosis, cancer and death.

Traditional treatment for HCV included the use of the drugs interferon and ribavirin. While these could be effective, they were often poorly tolerated, brought severe side effects and involved a lengthy treatment period (24–48 weeks). These factors often contributed to poor treatment uptake by drug users. ‘This situation is now changing however’, states the report, which provides an up-to-date overview of the new medicines currently available or in development. Following the appearance on the market of new antiviral drugs, it describes how these can be administered over a shorter period and with fewer side effects, improving chances of treatment retention.

‘The provision of HCV treatment has become less challenging’, states the report. The use of all-oral, interferon-free HCV treatment regimens makes them easier to administer, including in drug treatment and primary care settings. The report adds: ‘These developments now mean that, probably for the first time, a real opportunity exists to tackle the high prevalence of HCV infection at the level of injecting drug-user communities’.

Studies suggest that the combination of widespread hepatitis C treatment, supported by other primary prevention measures, has the potential to reduce HCV transmission. According to the report: ‘The challenge is to develop a comprehensive approach to care in this area that ensures that both prevention activities and treatment access are adequately resourced and proactively delivered’.

*Isabelle Giraudon and Dagmar Hedrich*

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See also page 7.
Commissioner for Health and Food Safety at EMCDDA

European Commissioner for Health and Food Safety, Vytenis Andriukaitis, visited the EMCDDA on 14 October for an update on the agency’s work in the area of public health. The Commissioner was in Lisbon for the final conference of the Joint Action on Reducing Alcohol-Related Harm (RARHA) project, funded under the second EU Health Programme (1). The EMCDDA is among RARHA’s collaborating partners and also a member of its Advisory Board.

During the visit, the Commissioner discussed, with the Director and staff, the issue of polydrug use in Europe, including the findings from the latest report from the European School Survey Project on Alcohol and Other Drugs (ESPAD). He was also presented with the agency’s latest work in the area of drug-related infectious diseases and monitoring harms related to new drugs in Europe.

The visit provided a valuable opportunity for an exchange of views and discussions on how the EMCDDA could further increase its contribution to activities falling under the areas of responsibility of the European Commission’s Directorate-General for Health and Food Safety (DG-SANTE).

EC proposes amendment to EMCDDA founding regulation

The European Commission (EC) proposed on 30 August an amendment to the EMCDDA’s recast founding regulation (1920/2006) that would allow for swifter and more effective EU action in the fight against new psychoactive substances (NPS) (1) (2). The proposal aims to further strengthen the EU Early Warning System and risk assessment on NPS by streamlining and speeding up data-collection and assessment procedures. It is part of the new approach agreed with the European Parliament and the Council to advance negotiations on a package of legislative proposals on NPS proposed in September 2013 (3).

Commissioner for Migration, Home Affairs and Citizenship Dimitris Avramopoulos said: ‘…our proposal to strengthen the EU’s early warning system and risk assessment… will allow for a more systematic and sophisticated monitoring and swifter decision-making on new psychoactive substances’.

Danilo Ballotta

(1) For more, see www.emcdda.europa.eu/news/2016/fs8/visit-commissioner-health-food-safety

EMCDDA to chair JHA agencies’ network in 2017

From 1 January to 31 December 2017, the EMCDDA will be chairing a network of nine EU Justice and Home Affairs agencies (JHA network) (1). The network was established in 2006 to foster bilateral and multilateral cooperation between these agencies and to explore and develop synergies in areas of common interest (e.g. operational work, training and external relations).

The EMCDDA is advancing with preparations, building on the achievements of the Vienna-based Fundamental Rights Agency (FRA) — this year’s chair — in strategic areas such as migration and security. The theme chosen by the EMCDDA for its mandate will be the internet.

At an expert meeting to be held in Lisbon from 20–21 April 2017, participants will address the challenges and opportunities posed by the expanding influence of the internet, and modern communication tools in general, and consider the impact of this on the JHA field and the work of the agencies in this area. Discussions will focus on: monitoring open source information; drug supply on the darknet; and online secure communication.

The results of the meeting will be presented in November 2017 to: the Heads of the JHA agencies; high-level officials from the European Commission’s Directorates-General for Home Affairs and for Justice; the European External Action Service (EEAS); the secretariats of the Council of the EU and the European Parliament’s Civil Liberties, Justice and Home Affairs Committee; and the European Anti-Fraud Office (OLAF).

In the course of the year, the EMCDDA will organise six other technical meetings designed to: provide useful fora for discussion; trigger relevant strands of cooperation between the agencies; and help coordinate joint actions.

Klaudia Palczak, Teodora Groshkova and Renate De Neve

(1) CEPOL, EASO, EIGE, EMCDDA, eu-LISA, Eurojust, Europol, FRA and Frontex.
For more, see brochure and video at http://ec.europa.eu/justice/about/files/jha_agencies_en.pdf www.youtube.com/watch?v=4LppnTJ3elA
Cooperation with candidate and potential candidate countries to the EU

The EMCDDA is continuing its active cooperation with candidate and potential candidate countries to the EU. On 23 September, EMCDDA staff and the national representatives from Albania, the former Yugoslav Republic of Macedonia, Kosovo* (1), Montenegro and Serbia met in Montenegro to discuss future activities.

The IPA 5 project, implemented by the EMCDDA, will finance general population surveys (GPS) in Montenegro and the former Yugoslav Republic of Macedonia, following GPS surveys already financed and executed through IPA 4 in Albania, Kosovo* and Serbia in 2014 (2).

Earlier this year, the EMCDDA performed a treatment system mapping exercise in the IPA beneficiary countries and is proposing to interested beneficiaries the implementation of a European Facility Survey Questionnaire (EFSQ). This instrument is designed to collect information on the characteristics, capacity, performance and quality of services provided to drug users within national or regional drug treatment systems.

Finally, with the support of national experts, the EMCDDA will help Albania, Bosnia-Herzegovina, the former Yugoslav Republic of Macedonia, Kosovo* and Serbia to develop national early-warning systems and to start collecting drug seizure data according to EMCDDA guidelines. The meeting in Montenegro allowed to plan and agree on future steps.

Cécile Martel

NEW PSYCHOACTIVE SUBSTANCES

MDMB-CHMICA: EU-level controls considered

Following a proposal from the European Commission on 31 August (1), the Council of the EU is considering whether to subject the new psychoactive substance MDMB-CHMICA (2) to EU-wide control measures, in the wake of a risk assessment conducted by the extended EMCDDA Scientific Committee in July 2016 (3).

MDMB-CHMICA is the first synthetic cannabinoid receptor agonist to be risk-assessed. It was first reported to the EU Early Warning System in 2014 and, since then, has been detected in 23 Member States, Turkey and Norway. It is sold as a ‘legal’ replacement for cannabis by chemical companies and online retail shops in a variety of forms (e.g. as a powder or as commercially branded ‘legal high’ products).

In 12 of the cases, MDMB-CHMICA was reported as, either the cause of, or likely to have contributed to, the death. In three cases, MDMB-CHMICA was the only substance detected.

Recognising the threats posed by this substance, a number of EU Member States have already taken steps to control it under their own drug legislation. If a decision to control MDMB-CHMICA is taken by the Council, the remaining Member States would have one year to introduce national control measures on the substance. The decision would enter into force on the day following its publication in the Official Journal of the European Union.

Ana Gallegos, Michael-Evans Brown and Roumen Sedefov

(1) For more on the EDSS and how to register, see www.drugsummerschool.cies.iscte-iul.pt
(2) Methyl 2-[[1-(cyclohexylmethyl)-1H-indole-3-carbonyl]amino]-3,3-dimethylbutanoate.
(3) Report available under risk assessments at www.emcdda.europa.eu/publications
Contingency management

Ahead of World Mental Health Day on 10 October, the EMCDDA published a new review on how contingency management (CM) can help treat those with substance use disorders. CM is a technique used across a range of mental health and related conditions which involves rewarding patients when they fulfill certain target behaviours. In the area of drug dependence, this motivational method forms part of a range of psychosocial interventions designed to retain people in treatment, weaken substance use and strengthen abstinence.


ESPAD Report 2015

This report presents the results of the sixth data-collection wave of the European School Survey Project on Alcohol and Other Drugs (ESPAD) and marks the 20th anniversary of ESPAD data collection (1995–2015). It is based on information provided by students from 35 European countries (see p. 1).

For more, see www.espad.org/report/home

Hospital emergencies

Data from hospital emergency units can provide a unique insight into acute health harms related to drug use and can enrich our understanding of the drugs problem. In a new Rapid communication, launched on 4 August (see p. 3), the EMCDDA provides an update on drug-related hospital emergency presentations in Europe. The report is based on an analysis by the European Drug Emergencies Network (Euro-DEN Plus), which monitors drug-related emergency presentations in 20 ‘sentinel’ hospitals in 14 European countries.


Hepatitis C

In the latest edition in its Insights series, published on World Hepatitis Day (28 July), the EMCDDA looks at new opportunities for the effective prevention and treatment of this disease, including the use of new generations of medicines (see p. 4). The study provides a state-of-the-art review of the epidemiology of HCV infection in Europe and its estimated prevalence among people who inject drugs.


Drugnet Europe subscriptions

After 20 years of delivering you Drugnet Europe in print, this year the EMCDDA began the process of phasing out the print edition of the newsletter (at edition No 100). 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 http://surveys.publications.europa.eu/formserver/emcdda/mailing_list.html
## CALENDAR 2016

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<td>10 November:</td>
<td>EMCDAA 2016 scientific award, Lisbon.</td>
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<td>10–11 November:</td>
<td>45th EMCDAA Scientific Committee meeting, Lisbon.</td>
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<td>22–25 November:</td>
<td>5th extended Reitox week and 55th Reitox Heads of national focal point meeting, Lisbon.</td>
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<tr>
<td>1–2 December:</td>
<td>Reitox regional academy for the Baltic countries on cannabis: recent trends and policy developments, Riga.</td>
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<td>14 December:</td>
<td>EMCDAA Budget Committee and Executive Committee meetings, Lisbon.</td>
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<td>15–16 December:</td>
<td>54th Management Board meeting, Lisbon.</td>
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<td>3–4 November:</td>
<td>HIPP conference on prisons and health, Copenhagen.</td>
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<td>7–11 November:</td>
<td>COPOLAD annual week on precursors, Barcelona.</td>
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<td>15 November:</td>
<td>Pompidou Group Symposium on NPS, Venice.</td>
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<td>16–17 November:</td>
<td>79th Permanent Correspondents meeting, Pompidou Group, Venice.</td>
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<td>23–24 November:</td>
<td>Narcotics: problems and solutions of this global issue, Vatican City.</td>
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<td>1 December:</td>
<td>World AIDS Day.</td>
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<td>5–9 December:</td>
<td>1st annual meeting, National Drugs Observatories, COPOLAD II, Kingston, Jamaica.</td>
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<td>8–9 November:</td>
<td>Horizontal working party on drugs, Brussels (Slovakian Presidency).</td>
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<td>9–10 November:</td>
<td>EU–USA Dialogue and Dublin Group, Brussels.</td>
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<td>14 November:</td>
<td>Heads of JHA agencies’ annual meeting, FRA, Vienna.</td>
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<td>7 December:</td>
<td>Horizontal working party on drugs, Brussels.</td>
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## PARTNERS

### EMCDAA Director pays official visit to Europol

EMCDAA Director Alexis Goosdeel paid an official visit to Europol on 12 October where he discussed with Director Rob Wainwright opportunities for further cooperation between the two agencies.

The agencies signed their first ‘Cooperation agreement’ in 2001, building on already strong links forged in the area of new synthetic drugs from 1997. Since then, the two bodies have strengthened their commitment through a series of agreements and collaborative activities in order to produce state-of-the-art analyses of the European drug market and its impact.

Speaking in The Hague, Alexis Goosdeel said: ‘For the past 15 years, the EMCDAA and Europol have been working closely together, pooling expertise and insight to contribute to a safer and a more secure Europe. By combining a holistic overview of the drug situation with strategic intelligence on trends in organised crime, we have delivered crucial analyses, such as the EU Drug Markets Report, informing policy and facilitating action at EU and national level. We collaborate on a daily basis, monitoring potentially threatening new psychoactive substances, in doing so helping to reduce harm and save lives. We will continue to work together in the area of security, producing threat assessments and using data-collection tools that help us separate important signals from the ever-present noise’.

Speaking on the challenges for law enforcement posed by drug-related crime, Europol Director Rob Wainwright said: ‘The cooperation between Europol and the EMCDAA has proved to be exemplary, in particular in combating illicit drug markets in the EU. Illicit drugs are one of the major threats to the health and security of EU citizens, with up to two million problem drug users. This strong collaboration demonstrates what Justice and Home Affairs agencies can achieve together when trusted relationships are established.’


### EMCDAA chairs SALIS

The EMCDAA’s Vaughan Birbeck is currently chairing the Executive Board of the organisation SALIS (Substance Abuse Librarians and Information Specialists) for the period 2016–17. He took up the role at the 38th International SALIS conference, held in Denver from 4–7 May (1). For the first time, SALIS joined forces with the US Association of Mental Health Librarians for an event dedicated to issues facing librarians in these closely connected fields.

(1) For more, see [http://salis.org/conference/conference.html](http://salis.org/conference/conference.html)