Multi-agency cooperation

The Lisbon-based European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is the central source of comprehensive information on drugs in Europe. Its main task is to collect and disseminate data on the use of substances controlled by the United Nations drug conventions (1). However, in recent years, the Centre has become increasingly active in monitoring new substances not listed in these conventions, but which may pose health and social risks to our societies. Today this activity is carried out under the terms of a specific legal instrument adopted by the Council of the European Union in 2005.

The ‘Council Decision on the information exchange, risk assessment and control of new psychoactive substances’ (2) allows the EU institutions and Member States to act on all new and potentially threatening narcotic and psychotropic drugs (natural and synthetic alike) that appear on the European drug scene. It also enhances their capacity to detect and monitor new trends. Under the terms of the Decision, the EMCDDA and Europol, in collaboration with their respective networks and the European Medicines Agency (EMEA), play a central role in detecting new psychoactive drugs, assessing their characteristics and paving the way for eventual control measures.

The 2005 Council Decision broadens the scope of, and replaces, the 1997 Joint Action (3) which was devoted exclusively to new synthetic drugs. The Decision relates to end-products and not to chemical precursors used in the illicit manufacture of narcotic drugs and psychoactive substances (4).

A three-step approach

Particular dangers posed by new psychoactive substances require ‘rapid action by the EU Member States’, says the Council Decision. To facilitate this process, it sets out a three-step approach encompassing: information exchange/early warning, risk assessment and decision-making.

Step 1 – Information exchange/early warning: Once a new psychoactive substance is detected on the European drug scene, Member States ensure that information on the manufacture, traffic and use of the drug is transmitted to the EMCDDA and Europol via the Reitox national focal points (NFPs) and

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Europol national units (ENUs). The data are also submitted for information to the European Commission and the EMEA. Finally, if the EMCDDA and Europol consider that information collected on a new psychoactive substance merits active follow-up, a joint report is presented to the Council of the EU, the Commission and the EMEA, on the basis of which a decision may be taken on whether or not to launch a risk-assessment procedure.

**Step 2 – Risk assessment:** At the request of at least a quarter of its members, or the European Commission, the Council may decide (by majority vote) to launch a risk-assessment procedure. The EMCDDA’s Scientific Committee – extended by additional experts from the Member States, the European Commission, Europol and the EMEA – assesses the possible health and social risks of the newly identified drug and the implications of placing it under control. A risk-assessment report is presented to the Commission and the Council for consideration.

**Step 3 – Decision-making:** At the initiative of the European Commission or a Member State, and on the basis of the risk-assessment report, the Council may decide (by qualified majority) to adopt a decision defining the drug to be subjected to control measures. The control measures and criminal penalties in the EU Member States are decided in line with national laws, which in turn comply with the UN conventions. The Council Decision does not prevent individual Member States from unilaterally introducing national control measures they consider appropriate once a new substance has been detected.

The first EMCDDA–Europol joint report under the Council Decision (Step 1) was prepared in October 2005 on a new psychoactive substance 1-(3-chlorophenyl)piperazine (mCPP). For further details see http://www.emcdda.eu.int/?nnodeid=1346

**Previous risk assessments**

Between 1997 and 2004, nine new synthetic drugs underwent risk-assessment procedures under the Joint Action (MBDB, 4-MTA, ketamine, GHB, PMMA, 2C-I, 2C-T-2, 2C-T-7 and TMA-2). Of these, six substances (all except GHB, ketamine and MBDB) were subsequently controlled at EU level. The related risk-assessment reports are available in English at http://www.emcdda.eu.int/?nnodeid=431