Report highlights growing threats posed by new and established substances

Rising overdose deaths, the continued availability of new psychoactive substances and the growing health threat of highly potent synthetic opioids are among the issues in focus in the European Drug Report 2017: Trends and Developments launched on 6 June in Brussels (1). The EMCDDA’s annual overview on Europe’s drug situation also explores: signs of rising cocaine availability; developments in cannabis policies; and substance use among school students. As the drug problems facing Europe are increasingly influenced by developments occurring internationally, the analysis is placed in the global context.

Speaking on the occasion of the report launch, Dimitris Avramopoulos, European Commissioner for Migration, Home Affairs and Citizenship, said: ‘The impact of the drugs problem continues to be a significant challenge for European societies. Over 93 million Europeans have tried an illicit drug in their lives and overdose deaths continue to rise for the third year in a row. I am especially concerned that young people are exposed to many new and dangerous drugs. Already 25 highly potent synthetic opioids were detected in Europe between 2009 and 2016, of which only small volumes are needed to produce many thousands of doses, thus posing a growing health threat. The annual European Drug Report gives us the necessary analysis, guidance and tools to tackle this threat together across Europe, not just to protect the health of our citizens, but also to stop huge profits from drugs ending up in the pockets of organised crime groups in Europe and beyond.’

Chair of the EMCDDA Management Board Laura d’Arrigo added: ‘As the drug phenomenon continues to evolve, so too must Europe’s responses. The first step towards achieving this is an understanding of the challenges we face: the EMCDDA strives to provide the best possible evidence on the drug situation across Europe. The data presented this year in the European Drug Report compare national situations and clearly highlight emerging threats, helping decision-makers to act effectively. The EMCDDA’s analyses are crucial to ensure that the new EU action plan on drugs for the next four years remains relevant. Promoting an evidence-based culture in drug policymaking is a key contribution to a healthier and more secure Europe.’

The European Drug Report 2017 provides a rich and multi-layered analysis based on the most recent data and statistics provided by the EMCDDA’s partners. This year’s report is accompanied for the first time by 30 Country Drug Reports, presenting online summaries of national drug trends and developments in policy and practice across Europe (EU 28, Turkey and Norway) (see p. 7).

EMCDDA Director Alexis Goosdeel affirms: ‘In line with our objective to deliver high-quality services to our stakeholders, this latest report allows access to data that can be used for multiple purposes — from highlighting emerging issues and contextualising national drug situations to providing a baseline for policy and service evaluations’.

(1) Available in 24 languages at www.emcdda.europa.eu/edr2017
Overdose deaths on the rise for third consecutive year

The European Drug Report 2017: Trends and Developments (EDR 2017) highlights concern over the increasing number of drug overdose deaths in Europe, which has risen for the third consecutive year. A total of 8 441 overdose deaths, mainly related to heroin and other opioids, are estimated to have occurred in Europe in 2015 (28 EU, Turkey and Norway — Infographic, p. 77), a 6% increase on the estimated 7 950 deaths in the 30 countries in 2014. Increases were reported in almost all age groups (Figure 3.12). Rises in overdose deaths in 2015 were reported in Germany, Lithuania, the Netherlands, Sweden, the UK and Turkey. Europe’s 1.3 million problem opioid users are among the most vulnerable.

Opioids used in substitution treatment — primarily methadone and buprenorphine — are also regularly found in toxicological reports. Latest data show that the number of recorded methadone-related deaths exceeded heroin-related deaths in Denmark, Ireland, France and Croatia, underlining the need for good clinical practice to prevent diversion of these substances from their legitimate use.

Interventions to prevent overdoses in Europe include: supervised drug consumption room (DCRs) and the provision of ‘take-home’ naloxone (opioid overdose-reversal drug) to opioid users, their peers and families. DCRs now operate in six EU countries (DK, DE, ES, FR, LU, NL) and Norway (78 facilities in total in the seven countries). Take-home naloxone programmes now exist in nine EU countries (DK, DE, EE, IE, ES, FR, IT, LT, UK) and Norway.

NEW PSYCHOACTIVE SUBSTANCES

NPS emerging at a slower pace, but overall availability still high

New psychoactive substances (NPS/‘new drugs’) remain a considerable public health challenge in Europe. Not covered by international drug controls, they include a broad range of synthetic substances, including cannabinoids, cathinones, opioids and benzodiazepines.

In 2016, 66 NPS were detected for the first time via the EU Early Warning System (EWS) — a rate of over one per week (Figure 1.10). Although this number points to a slowing of the pace at which new substances are being introduced onto the market — 98 substances were detected in 2015 — the overall number of substances remains high. By the end of 2016, the EMCDDA was monitoring more than 620 NPS (compared with some 350 in 2013).

The slower rate of new detections in Europe may be attributed to a number of factors. New legislation in some Member States (e.g. blanket bans) has created a more restrictive legal environment, in which there may be less incentive for producers to engage in a ‘cat-and-mouse game’ with regulators, where innovation is used to keep ahead of controls. Law-enforcement operations and control measures targeting NPS laboratories in China may also be contributing to the slowdown.

EMCDDA Director Alexis Goosdeel commented: ‘Our latest findings suggest that responses to new psychoactive substances, such as new legislation and measures targeting the high-street shops that sell these products, may be having an impact on the emergence of NPS on the market. But despite positive signs of a slowdown in product innovation, overall availability remains high. We are seeing sales of these drugs becoming more clandestine, with transactions moving online or onto the illicit drug market, and we have witnessed the recent appearance of some highly potent substances, which have been linked to deaths and serious intoxications’.

In 2015, almost 80 000 seizures of NPS were reported through the EWS (Figure 1.11). Together, synthetic cannabinoids and synthetic cathinones accounted for over 60% of all seizures of new substances in 2015 (over 47 000). In July 2016, MDMB-CHMICA became the first synthetic cannabinoid to be risk-assessed by the EMCDDA after harmful effects (including around 30 deaths) related to its use were reported via the EWS. This resulted in a decision in February 2017 to subject the substance to Europe-wide control measures (1).

Accompanying the EDR 2017 is a new analysis of High-risk drug use and new psychoactive substances, which focuses on the problematic use of NPS among a range of demographic groups including: opioid and amphetamine injectors; prisoners; the homeless; and men who have sex with men. The report explores, in particular, the use of synthetic cathinones, synthetic cannabinoids and new synthetic opioids as well as related harms and responses.

EUROPEAN DRUG REPORT 2017

NEW SYNTHETIC OPIOIDS

Highly potent and a growing health threat

In Europe, as in North America, highly potent synthetic opioids, some of which mimic the effects of heroin and morphine, pose a growing health threat. While representing a small share of the market, there are increasing reports of the emergence of these substances and of the harms they cause, including non-fatal intoxications and deaths. Twenty-five new synthetic opioids were detected in Europe between 2009 and 2016 (18 of these were fentanils). With only small volumes needed to produce many thousands of doses, new synthetic opioids are easy to conceal and transport, posing a challenge for drug control agencies and a potentially attractive commodity for organised crime. They are found in various forms — mainly powders, tablets and capsules — with some now available as liquids and sold as nasal sprays.

Fentanils are subject to particular scrutiny. These exceptionally potent substances — some many times more potent than heroin — accounted for over 60% of the 600 seizures of new synthetic opioids reported in 2015. Eight new fentanils were reported through the EWS for the first time in 2016 alone. These substances pose a serious risk of intoxication, not only to users, but also to those who may be accidentally exposed to these drugs (e.g. via skin contact, inhalation), such as postal and customs workers and emergency service personnel.

Early in 2017, the EMCDDA carried out risk assessments of two fentanils (acryloylfentanyl and furanylfentanyl), after over 50 deaths associated with these substances were reported (1). These are now being considered for control at European level (2). The agency issued five health alerts in 2016 to its network across Europe related to these, and other, new fentanils.

(1) www.emcdda.europa.eu/publications/joint-reports/acryloylfentanyl

STIMULANTS

Signs of rising cocaine availability

Data from wastewater monitoring and on seizures, price and purity suggest that the availability of cocaine may be rising again in parts of Europe (Figure 2.4). Both the number of seizures and the quantity seized increased between 2014 and 2015 (Figure 1.6). Some 87 000 seizures of cocaine were reported in the EU in 2015 (76 000 in 2014), amounting to 69.4 tonnes seized (51.5 tonnes in 2014)(Infographic, p. 26). At city level, a study analysing municipal wastewater for cocaine residues showed a stable or increasing longer-term trend in most of the 13 cities with data between 2011 and 2016. Of the 33 cities with data for 2015 and 2016, 22 cities reported an increase in cocaine residues, four a decrease and seven a stable situation (1).

Around 17.5 million European adults (15–64 years) have tried cocaine at some time in their lives. Of these, around 2.3 million are young adults (15–34 years) who have used the drug in the last year. National surveys since 2014 show levels of cocaine use to be primarily stable.


CANNABIS

Global policy developments: what implications for Europe?

Recent changes in the regulatory framework for cannabis occurring in parts of the Americas have generated interest among policymakers and the public in Europe (1). There is a need to wait for robust evaluations before the relative costs and benefits of differing cannabis policy approaches can be assessed, states the report. Within the 28 EU Member States, current approaches to cannabis regulation and use are diverse, ranging from restrictive models to the tolerance of some forms of personal use (2). However, no national government in Europe (EU 28, Turkey and Norway) has currently expressed support for the legalisation of cannabis for recreational use.

Regardless of any wider impact on drug policy, the existence of a commercially regulated cannabis market in some countries outside Europe is fuelling innovation and product development (e.g. vaporisers, e-liquids, edible products), which may, in time, impact on patterns of use in Europe. Here the report underlines the importance of monitoring and the need to evaluate the potential health implications of any future changes.

(1) www.emcdda.europa.eu/topics/cannabis-policy
Monitoring substance use among school students offers valuable insight into youth risk behaviours and potential future trends. The EDR 2017 compares long-term patterns of substance use among European and American students (15–16 years), following the release of two major school surveys in 2016 (1). The surveys show smoking and drinking among school students in Europe and the US to be declining, while trends in cannabis use appear to be more stable.

Last-month cannabis use among the European school students surveyed (21 EU countries and Norway), was around half the level (8%) of that reported in the US (15%)(2). Last-month tobacco use was almost four times higher among students in Europe (23%) than in the US, where it was low at 6%. Tobacco use among US students was less than half the level of cannabis use in this group. The percentage of European students reporting last-month alcohol use was more than double (49%) that reported by their American peers (22%).

‘Further analysis of both the similarities and differences in the students’ substance use is needed to explore the relative influence of the social, contextual and regulatory factors on the choices made by young people’, states the report. ‘Understanding, for example, what has led to the reductions in cigarette smoking in both the United States and Europe may offer insights for addressing the use of other substances, such as cannabis’, it adds.

Experts examine the influence of cyberspace on criminal activities

Leading European and international experts met in Lisbon on 20–21 April to examine the theme of ‘The expanding influence of the internet, the exploitation of cyberspace and the transformational nature of new technologies’ (3). The event was hosted by the EMCDDA as current chair of the network of nine EU Justice and Home Affairs agencies (‘JHA agencies’ network’)(4).

The nine agencies work together on a wide range of issues, including combating organised crime — such as human and drug trafficking — as well as migration and border management. The network has chosen the use of cyberspace for criminal purposes as its overarching theme for 2017.

On 20 April, an expert meeting, gathering some 20 participants, focused on ‘The internet for criminal purposes — challenges and opportunities for the work of the JHA agencies’. Increasingly, migration and security issues are moving beyond classical, to digital, borders as the ‘digital dimension’ of criminal activity grows. The common interest of the agencies in the links between technology and security was translated into focused discussions on the relationship between the crime and cyber domains.

The event allowed participants to exchange experience on how cyberspace has influenced criminal activities and responses to them. In addition, it offered a basis for continued cooperation between the agencies on the exchange of information and good practice (e.g. technical expertise, methods, tools and data to support EU Member States in this critical area). Two working group sessions focused on cyber-enabled crime and law enforcement, and monitoring the internet (including darknet markets).

EMCDDA Director Alexis Goosdeel opened a larger conference on 21 April, which brought together over 100 participants. Seven keynote speakers addressed the conference across three sessions. In a session entitled ‘Internet — the big picture’, speakers introduced key concepts, aiding consensus on the terminology used to define the different parts of the web as well as a common taxonomy of cybercrime terms.

On the topic of ‘Cybercrime: clarifying the concept and shedding light on law-enforcement responses’, operational delivery issues were addressed in the rapidly evolving cyber-threat landscape. This session reviewed the links between cybercrime and traditional organised crime groups as well as the connections between terrorism and internet-facilitated communication and payment systems. Insights from ‘cyber-patrolling’ in Europe revealed practical challenges, but also growing expertise, in conducting online investigations.

Finally, on the topic of ‘Monitoring open source intelligence, darknet markets and social media’, participants shared key findings from a range of new analyses, including drug supply on darknet markets and the implications of cyberspace for migration.

The findings of the above events will be published later in the year when the agencies report on their annual JHA work programme activities. A joint publication with Europol — provisionally entitled ‘Drugs and darknet markets: perspectives for enforcement, research and policy’ — will be published in the last quarter of 2017 and will provide further insights on this topic.

Teodora Groshkova and Roumen Sedefov

(1) The nine agencies are CEPOL, EASO, EIGE, EMCDDA, eu-LISA, Eurojust, Europol, FRA and Frontex.
MoU with ISCTE-IUL

The EMCDDA and the University Institute of Lisbon (ISCTE-IUL) will be strengthening their cooperation in future thanks to a new Memorandum of Understanding (MoU) signed between the two bodies on 10 May in Lisbon (1). The signatories were Rector of ISCTE-IUL Professor Luís Antero Reto and EMCDDA Director Alexis Goosdeel.

The EMCDDA and ISCTE-IUL signed their first MoU in 2011 ahead of the first European drugs summer school (EDSS), organised in 2012. The organisations are currently preparing the sixth EDSS to take place in Lisbon from 26 June to 7 July.

Signed for a period of five years, the new MoU aims to: promote effective cooperation in academic and scientific activities in areas of common interest; and enhance the scientific, technical and human capacity and potential of the two organisations.

The MoU includes opportunities for: the exchange of scientific experts and university professors (for teaching and research purposes); the exchange of information, knowledge and expertise in areas of common interest; collaborative research, lectures, symposia and similar activities; joint academic programmes (including summer schools) and trainee exchanges.

The 2017 MoU is in line with the new EMCDDA Strategy 2025, which states that the EMCDDA’s partnerships with universities, research centres and scientific bodies, among others, allow the agency to maintain a close and ongoing understanding of developments in the research area.

Renate Hochwieser, Maria Moreira and Liesbeth Vandam


Cannabis legislation in Europe: an overview

At a time of increasing debate on the laws controlling the use of cannabis in the European Union, the EMCDDA released in March a new report addressing some of the issues most often discussed around cannabis legislation, using a simple question and answer format (2).

The first section — ‘What is cannabis and what are countries’ obligations to control it?’ — sets out basic definitions and the obligations of countries under international law. This section examines issues such as: the different versions of medical cannabis or cannabis derivatives; EU regulations on industrial cannabis; and the UN and EU laws governing cannabis.

Two subsequent sections ask: ‘What do the laws and associated guidelines say?’ and ‘What happens to cannabis offenders in practice?’. These sections examine the links and disparities between the content of the laws and their guidelines, on the one hand, and the actual implementation of the laws, on the other. Here the publication looks at: the different laws and guidelines applied around Europe; the difficulties of defining ‘decriminalisation’ objectively; the limits to personal use; attitudes to growing cannabis plants; trafficking penalties; and driving offences. The police focus on cannabis users is considered via the number of drug law offences registered. Also explored is the issue of diverting cannabis users from the justice system to treatment (and whether they appear to be in need of treatment).

The final section — ‘Where is cannabis legislation going?’ — considers the reasons why countries change their laws; whether such legislative changes have affected cannabis use rates; and how much public support for legal change exists. With several jurisdictions in the Americas choosing to legalise cannabis, it asks whether there is any movement towards full legalisation in European countries, either at national level, or as pilot projects in some cities or regions. The report states that no national government in Europe (EU 28, Turkey and Norway) has currently expressed support for the legalisation of cannabis for recreational use.

Brendan Hughes


Lisbon Addictions 2017 update

Lisbon Addictions 2017 — the second European conference on addictive behaviours and dependencies — has received an overwhelming response, with almost 600 presentations and posters already submitted. Many renowned speakers have confirmed their attendance and the first draft programme will be made available by the end of June. Registration is still open for the conference, which will take place in Lisbon from 24–26 October 2017, although places are limited (3).

But Lisbon Addictions 2017 is more than just one conference. The EMCDDA is partnering up with key European and international players in the drugs field to organise a variety of additional events in the margins of the conference. These include the ‘Third international symposium on drug-impaired driving’ — with a special focus on cannabis-impaired driving — which takes place on 23 October. Entry to the symposium is free of charge, but registration is required and on a first-come, first-served basis (4).

Leading European and international experts will also meet from 26–27 October to review the state of the art of wastewater-based epidemiology, a rapidly evolving scientific discipline (5). Participants of Lisbon Addictions 2017 may attend this event at a reduced fee.

Renate Hochwieser, Maria Moreira and Liesbeth Vandam

(1) For more, see www.lisbonaddictions.eu/lisbon-addictions-2017
(2) For more, see www.emcdda.europa.eu/meetings/2017/3rd-symposium-drug-impaired-driving
(3) For more, see http://score-cost.eu/network-activities/meetings/ttw2017

Marica Ferri

SPOTLIGHT

Communities that care

Communities that care (CTC): a comprehensive prevention approach for communities is the title of the latest edition in the EMCDDA Papers series published in March (1). Community coalitions are a strategy to coordinate activities and resources to prevent adolescent substance use and delinquent behaviour. They can bring together diverse community stakeholders to address a common goal and have the benefit of mobilising communities in prevention and health promotion initiatives.

Communities here refer to groups of individuals sharing common geographical and administrative settings (e.g. health services, schools and sport facilities). The CTC approach is based on the premise that the prevalence of adolescent health and behaviour problems in a community can be reduced by identifying strong risk factors and weak protective factors experienced by the community’s young people and by then selecting tested and effective prevention and early intervention programmes that address these specific risk and protective factors.

CTC are designed to generate community ownership of prevention initiatives by reducing duplication and fragmentation of resources, interagency competition and improving sustainability of prevention measures. The publication presents some evidence for the effectiveness of the CTC approach as a drug prevention initiative. As cultural factors are likely to play an important role in the implementation of this sort of community mobilisation approach, the review suggests that effectiveness still needs to be assessed in a European context.

Marica Ferri

(1) www.emcdda.europa.eu/publications/papers/communities-that-care

REITOX

NPS training for experts from forensic and toxicological laboratories

Through its IPA 5 project, launched in July 2015 (1), the EMCDDA is supporting candidate and potential candidate countries to the EU (CC and PCC) in developing their own national early-warning system (EWS) for the rapid exchange of information on new psychoactive substances (NPS).

Forensic and toxicological laboratories are at the core of a successful national EWS. The capacity and experience of these laboratories in the six IPA 5 beneficiary countries, however, is very diverse. From 4–6 April, the EMCDDA organised a training seminar for 15 experts from these laboratories aimed at promoting the EU experience and exchanging best practice. The event was organised in close cooperation with the Hungarian Institute for Forensic Sciences and the Hungarian national focal point.

During the lectures and site visits to the Institute’s toxicological and seized drug laboratories, the participants gained an insight into the criteria and diverse requirements to be met when performing an NPS analysis. The laboratory visits allowed the participants to familiarise themselves with the facilities, equipment and methodologies used in this field and encouraged discussions on possible future developments. The Hungarian experts introduced the chemistry of NPS and covered international guidelines and analytical techniques for their identification in seized and biological materials.

Issues of control and prevalence of NPS were also discussed, based on the Hungarian experience, with further examples from the participating countries. The training course helped initiate new partnerships among the CC and PCC countries and build closer cooperation on the exchange of information on NPS with the EU partners.

Ilze Jekabsone, EMCDDA and Tamás Csesztregi, Hungarian Institute for Forensic Sciences

(1) Instrument for Pre-Accession Assistance (IPA) programme. The IPA 5 beneficiaries are: Albania, Bosnia and Herzegovina, the former Yugoslav Republic of Macedonia, Kosovo*, Montenegro and Serbia. (* This designation is without prejudice to positions on status, and is in line with UNSCR 1244 and the ICJ Opinion on the Kosovo declaration of independence.) www.emcdda.europa.eu/about/partners/cc/ippa5

NEW PSYCHOACTIVE SUBSTANCES

EC proposes to subject acryloylfentanyl to control measures

On 6 April, the European Commission (EC) proposed to subject the new psychoactive substance acryloylfentanyl to control measures across the European Union. As outlined in the EMCDDA risk assessment report, acryloylfentanyl is a potent synthetic opioid; its high potency constituting a considerable risk of acute toxicity through respiratory depression. The substance is sold as a ‘research chemical’, typically as powder and ready-to-use nasal sprays, and can cause severe harm to health. At the time of the risk assessment, 47 deaths associated with acryloylfentanyl had been reported by three EU Member States.

Commissioner for Migration, Home Affairs and Citizenship Dimitris Avramopoulos said: ‘The number, type and availability of harmful new drugs are constantly evolving and their spread across Europe cannot be effectively addressed by Member States on their own. Our proposal to make sure one more new substance undergoes adequate control measures across the EU is part of our efforts to put in place the right safeguards and support Member States in their fight against the rise of these very dangerous substances.’

The Commission’s proposal will be discussed by the Member States in the Council of the EU, which, in consultation with the European Parliament, will decide in the coming months whether to adopt the measures.

Action on new drugs team

**EMCDDA Strategy 2025**

On 4 April, the EMCDDA published its new Strategy 2025, which sets out an ambitious course of travel for the agency over the next decade.

The agency’s vision, and the ultimate goal of its journey, will be to contribute to a healthier and more secure Europe, through better informed drug policy and action.


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**Programming document 2017–19**

The EMCDDA Single Programming Document for the period 2017–19 — which includes the 2017 work programme — is the first work programme to be implemented under the new EMCDDA Strategy 2025. Priority in 2017 will be given to improving core monitoring tasks and to operating the EU Early Warning System under a new regulation on new psychoactive substances.


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**MDMB-CHMICA risk assessment**

This publication presents the data and findings of the risk assessment on MDMB-CHMICA, carried out by the extended Scientific Committee of the EMCDDA on 22 July 2016. MDMB-CHMICA is the first synthetic cannabinoid receptor agonist to be risk-assessed by the EMCDDA.


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**Country Drug Reports**

The EDR 2017 is complemented for the first time by 30 Country Drug Reports, presenting summaries of national drug phenomena (EU 28, Turkey and Norway). Developed by the EMCDDA, in cooperation with the Reitox national focal points, these graphic-rich reports cover: drug use and public health problems; drug policy and responses; and drug supply. Key features include an ‘At a glance’ table, summarising the national drug problem in figures, and an ‘EU dashboard’, placing the country data in the European context.

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

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**Drugnet Europe subscriptions**

After 20 years of delivering you Drugnet Europe in print, this year the EMCDDA will phase out the print edition of the newsletter (at edition 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. Please visit the link below to fill in the subscription form.

Form available at [http://eepurl.com/coizO9](http://eepurl.com/coizO9)

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**Rapid communication**

A new EMCDDA analysis, *High-risk drug use and new psychoactive substances*, focuses on the problematic use of NPS among a range of demographic groups, including: opioid and amphetamine injectors; prisoners; the homeless; and men who have sex with men. The report — the latest in the EMCDDA Rapid communication series — explores, in particular, the use of synthetic cathinones, synthetic cannabinoids and new synthetic opioids, as well as related harms and responses.


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**European Drug Report 2017**

What do the latest data tell us about the European drug market? What are the new trends in drug use among European adults and school students? What are the harms associated with drug use and what is being done to counter them? These and other questions are explored in the *European Drug Report 2017: Trends and Developments*. This annual report on the European drug phenomenon provides a comprehensive analysis of the latest tendencies across the 28 EU Member States, Turkey and Norway. In print and pdf in 24 languages, the report examines: drug supply and the market; drug use prevalence and trends; and drug-related harms and responses to them. Accompanying the report is the 2017 Statistical Bulletin, containing the European dataset underpinning the analysis.

The EMCDDA scientific award, inaugurated in 2011 by the agency and its Scientific Committee, celebrates scientific writing and distinguishes high-quality research in the field of illicit drugs (1). The five nomination categories for this year are: basic biological, neurobiological and behavioural research; population-based and clinical epidemiology; demand reduction interventions; markets and drug cultures; and drug policy and supply reduction.

Meeting in Lisbon from 22–24 May, the EMCDDA Scientific Committee assessed the 45 articles submitted, on the basis of their scientific originality; scientific quality, clarity and quality of writing; and EU relevance. The papers were submitted by: research societies with a European focus; members of the EMCDDA Scientific Committee; Reitox national focal points; peer-reviewed journals; and EMCDDA staff members. The shortlisted articles will be acknowledged on the EMCDDA website and the winners invited to present their work during the Second European conference on addictive behaviours and dependencies (Lisbon Addictions 2017) in October (see p. 5).

Maria Moreira

(1) www.emcdda.europa.eu/activities/scientific-award

Hepatitis week

Hepatitis and other drug-related infectious diseases (DRID) will be the focus of a ‘Hepatitis week’ taking place in Lisbon from 12–16 June. On 12–13 June, the EMCDDA will host the 4th meeting of the hepatitis B and C network of the European Centre for Disease Prevention and Control (ECDC). This will be followed by a joint ECDC–EMCDDA network meeting (14 June) and by the annual EMCDDA DRID expert meeting (15–16 June).

For more, see: www.emcdda.europa.eu/meetings/2017/drid

Annual penal statistics published

The Council of Europe published its latest Annual Penal Statistics (SPACE I — Prison populations) on 14 March, based on a survey conducted in prison administrations in 47 of its 52 Member States (1). The report reveals that, in 2015, an estimated 770 000 people were detained in prisons in the 28 EU Member States, Turkey and Norway. The prison population rate (PPR) was around 125 prisoners per 100 000 inhabitants in these countries, lower than in other world regions (e.g. around 700 in the United States and around 500 in Russia) and stable or decreasing compared to 2014. An estimated 15% of sentences related to drug offences.

Linda Montanari

(1) Conducted by the School of Criminal Sciences of the University of Lausanne.