Europe’s drugs problem in ‘state of flux’

Europe’s drugs problem is in a ‘state of flux’, with new threats emerging that challenge current models of policy and practice. This is according to the European Drug Report 2013: Trends and developments, released on 28 May in Lisbon (see below). This annual EMCDDA review describes positive developments in relation to the more established drugs, such as fewer new users of heroin, less injecting and declining use of cannabis and cocaine in some countries. But these are offset by concerns over synthetic stimulants and new psychoactive substances, offered both on the illicit, and so-called ‘legal highs’, market.

Commenting on the results, European Commissioner for Home Affairs Cecilia Malmström said: ‘I am both encouraged and concerned by the findings in the EMCDDA’s European Drug Report 2013. I am encouraged by the fact that, thanks to robust drug policies and record levels of treatment, use of heroin, cocaine and cannabis appears to be waning in some countries and drug-related HIV continues to decline. But I am also concerned that a quarter of European adults — or 85 million people — have used an illicit drug and that, by historical standards, drug use in Europe remains high. Emerging challenges add to my concerns — we are faced with an even more complex stimulant market and a relentless supply of new drugs which are increasingly diverse. The fact that over 70 new drugs have been detected in the last year is proof in itself that drug policies need to adapt to changing drug markets.’

‘Signs that current policies have found traction in some important areas must be viewed in the light of a drugs problem that never stands still’, said EMCDDA Director Wolfgang Götz, launching the report. ‘We will need to continue to adjust our current practices if they are to remain relevant to emerging trends and patterns of use in both new drugs and old. The new EU drugs strategy 2013–20 will need to address a drugs problem in a state of flux and a dynamic and rapidly-evolving drugs market. I believe that this report provides a valuable resource for responding to the challenges that lie ahead’.

New product, new look

The EMCDDA has reshaped the way in which it reports on Europe’s drugs problem via a new information package designed to be ‘more timely, interactive and interlinked’. (1)

Central to the package is the European Drug Report 2013: Trends and developments, which replaces the former Annual report on the state of the drugs problem in Europe, traditionally published in the autumn. Released six months earlier, the shorter, graphic-rich report summarises the latest trends across the 27 EU Member States, Norway, Croatia and Turkey. The package is presented in a refreshed corporate image to be carried across all EMCDDA products over the coming year.

The above changes take place in the context of the EMCDDA’s latest three-year strategy (2013–15) which is based on the guiding principles of: relevance and timeliness; efficiency and value; and communication and customer focus. The developments are designed to keep pace with the rapidly shifting drug phenomenon and the changing expectations of the agency’s audiences.

The European Drug Report package was launched at a press conference at the EMCDDA on 28 May which opened with a video message from European Commissioner Cecilia Malmström. On the panel presenting key developments and findings were Chairman of the EMCDDA Management Board João Goulão, EMCDDA Director Wolfgang Gotz and Scientific Director Paul Griffiths.

(1) For more, see page 7 and www.emcdda.europa.eu/news/2013/3
See also www.emcdda.europa.eu/edr2013
A robust and diverse market, concerns over high-risk use

Over the past 10 years, the number of seizures of herbal cannabis in Europe has overtaken that of resin. That cannabis use remains high by historical standards and that a ‘large and relatively robust market’ exists for this substance, with a greater diversity of cannabis products available.

Latest data show how herbal cannabis (‘marijuana’), sometimes of high potency, is becoming more common in Europe, with almost all of the EMCDDA countries now reporting some domestic cultivation of this product. Over the past 10 years, the number of seizures of herbal cannabis in Europe has overtaken that of resin and now represents more than half of all cannabis seizures (Figure 1.3). And in 2011, herbal cannabis accounted for 41% of all drug seizures in Europe, while cannabis resin accounted for 36% (Figure 1.1).

Trends in cannabis consumption need to be viewed alongside different patterns of use, with public health concerns greatest for the estimated 3 million Europeans (15–64 years) who use the drug on a daily, or almost daily, basis (around 1% of European adults). Europe has seen the numbers of clients entering treatment for the first time for cannabis problems rise by around one third in recent years, from an estimated 45 000 reported in 2006 to 60 000 in 2011, making cannabis now the most frequently mentioned drug among first-time clients.

Declining use and supply

The EDR describes how latest data on demand for treatment and on seizures point to a downward trend in the use and availability of heroin. Across Europe, the number of those entering specialist drug treatment for the first time for heroin problems fell from a peak of 59 000 in 2007 to 41 000 in 2011, with reductions most apparent in western European countries. Understanding heroin use trends is a priority due to the public health impact of this drug. A new analysis of long-term trends in heroin use released alongside the report (see Perspectives on drugs/POD) confirms a decrease in first-time demand for treatment for heroin use over the last decade.

Data from treatment clients also continue to show a decline in injecting the drug. Between 2006 and 2011, there was an ‘overall decrease in the proportion of injectors among heroin clients entering drug treatment for the first time’. Along with the impact of interventions (e.g. substitution treatment) this fall in injecting is likely to have contributed to the decline in new drug-related HIV infections in Europe. But recent HIV outbreaks in Greece and Romania have interrupted this positive trend, underlining the need to provide adequate harm-reduction and treatment services (Figure 2.10).

Latest figures on seizures reveal that the quantity of heroin seized in the EU and Norway in 2011 (6.1 tonnes) was the lowest reported in the last decade and equivalent to about half the quantity seized in 2001 (12 tonnes). The number of seizures reported in this period also fell, from 63 000 in 2001 to an estimated 40 500 in 2011.

Use and seizures down, trafficking routes diversifying

Over the last decade, cocaine has established itself as the most commonly used illicit stimulant drug in Europe, although most users are found in a small number of western EU countries. Around 14.5 million Europeans (15–64 years) have tried cocaine in their lifetime; around 3.5 million reporting to have used it in the last year. But the report shows that, overall, cocaine use and supply are now both trending downwards.

While some countries still report rises in estimated cocaine consumption, recent surveys show signs of falling use among young adults (15–34 years) in the five highest-prevalence countries (Denmark, Ireland, Spain, Italy and UK) (Figure 2.4). And fewer users are seeking treatment for cocaine problems. The number of clients reported to be entering treatment for primary cocaine use for the first time fell from 37 000 in 2009 to 31 000 in 2011. Yet acute and chronic problems related to cocaine use continue to be reported (see POD).

On the supply side, dramatic decreases are reported in the quantity of cocaine seized (Figure 1.7). In 2011, 62 tonnes of the drug were intercepted, an almost 50% drop from the 120 tonnes of cocaine seized in the peak year 2006. The number of cocaine seizures has also fallen from a peak of 100 000 in 2008 to 86 000 in 2011 (Figure 1.7).
SYNTHETIC STIMULANTS

Growing importance, new challenges

According to the EDR: ‘Understanding overall trends in the use of synthetic stimulant drugs is complicated by the fact that they are often substituted for each other, as consumers make choices influenced by availability, price and perceived quality’. Amphetamines and ecstasy remain the most commonly used synthetic stimulants in Europe, competing to some extent with cocaine.

Around 12.7 million Europeans (15–64 years) are estimated to have tried amphetamines in their lifetime (a term encompassing amphetamine and methamphetamine), around 2 million reporting to have used them in the last year. Recent data show use of amphetamines to be stable or declining among young adults. Of the two drugs, amphetamine has been more common in Europe, but there are now signs of rising availability and use of methamphetamine.

Methamphetamine seizures, although still small both in number and quantity, rose between 2002 and 2011, suggesting increased availability of the drug. (Amphetamine seizures in 2011 returned to levels found in 2002). Methamphetamine use, historically low in Europe and mainly limited to the Czech Republic and Slovakia, now appears to be spreading, with indications of problem use noted in Germany, Greece, Cyprus and Turkey.

An estimated 11.4 million Europeans (15–64 years) have tried ‘ecstasy’ (MDMA) in their lifetime, around 2 million reporting to have used it in the last year. In recent years, the popularity of this drug appears to have declined, probably reflecting the poor ‘quality’ (purity or MDMA content) of tablets sold as ‘ecstasy’. This appears now to be changing, with some evidence that greater MDMA availability is encouraging renewed interest in this drug.

Synthetic drug production is examined in a new EMCDDA analysis (see POD). This looks at the main producing areas in Europe, the precursors and pre-precursors used to make synthetic drugs and current trends in production.

NEW DRUGS

A fast moving market, substances more diverse, concerns over ‘synthetic cannabis’

In 2012, 73 new psychoactive substances were officially notified for the first time via the EU Early warning system (EWS) (Figure 1.14). Of these substances, 30 were synthetic cannabinoids, which mimic the effects of cannabis. According to the report: ‘These products, which can be extremely potent, have now been reported in virtually all European countries’. A new EMCDDA analysis released with the report (see POD), provides an update on the current knowledge on these substances, which now represent the largest group of compounds monitored by the EWS.

Of the other compounds detected in 2012, 19 substances were from ‘less known or more obscure chemical groups’. Also of note were the 14 new substituted phenethylamines (the chemical group that includes amphetamine and ‘ecstasy’), the highest number reported since 2005.

For more on new drugs, see page 4.

RESPONSES

Record levels of treatment, but still a need to invest in new interventions and social reintegration

An estimated 1.2 million Europeans received treatment for illicit drug use in 2011

Record levels of treatment provision for Europe’s drug users are among the positive changes seen in the current European drug landscape, according to the EDR. Yet, considerable challenges remain for treatment services. Although the number of heroin users entering treatment for the first time continues to fall, the long-term nature of heroin problems means that many of these users will remain in need of help for years to come. And the report underlines that, with a large number of drug users now in contact with services, there is a growing need to focus on continuity of care, social reintegration and building consensus on what constitute realistic, long-term outcomes for recovery. Among the issues highlighted is the need to invest in new interventions, such as those developed to treat hepatitis C and prevent overdose. A strong message from the report is that drug treatment is likely to be a cost-effective policy option, even at a time of economic austerity.

Continued on page 8

For more on these stories, see www.emcdda.europa.eu/news/2013/6 and www.emcdda.europa.eu/news/2013/7
War and drugs: the role of military conflict in the development of substance abuse explores the relationship between military incursions and substance use and abuse throughout history. It describes how, for centuries, drugs have been used to weaken enemies, stimulate troops to fight and quell post-war trauma. It also shows how they have served as a source of funding for clandestine military and paramilitary activity.

From the Opium Wars through the wars in Iraq and Afghanistan, the author — addiction specialist Bergen-Cico — argues that colonialism, capitalism and anticommunism have laid the foundations of the ‘current crisis of international drug trafficking and addiction’.

In addition to offering detailed geopolitical perspectives, the book explores the ‘intergenerational trauma’ that follows military conflict and the rising tide of substance abuse among veterans, especially from the Vietnam and Iraq–Afghan eras. The author raises important questions about the past and considers new approaches for the future.

Author: Dessa K. Bergen-Cico
Publisher: Paradigm Publishers
Language: English
Date: June 2012
Price: USD 25.46 (paperback)

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.

Latest EMCDDA–Europol report on new drugs entering market

The number, type and availability of new drugs in Europe continued to increase in 2012, according to a report released on 28 May by the EMCDDA and Europol (1). Driven by globalisation, technological advancement and the Internet, an open market for new drugs has now developed which presents significant challenges to public health, law enforcement and policymaking.

Over 280 new psychoactive substances are currently monitored by the EWS

Until around 10 years ago, most new psychoactive substances appearing on the European drug scene were produced in underground laboratories or sourced from diverted medicines and sold directly on the illicit drug market. While this still occurs, the emergence of a thriving ‘legal highs’ business on the Internet and in specialised shops in urban areas has marked a fundamental shift in the drug market. Today, these substances, often produced in China and India, are now imported into Europe in bulk where they are processed, packaged and sold as ‘legal highs’. They may also end up on the street where they are sold as substitutes for amphetamine, ecstasy, heroin or cocaine.

Seventy-three (73) new psychoactive substances were officially notified for the first time in 2012 via the EU Early warning system (EWS) (2). This continues the upward trend of substances reported in a single year: from 49 in 2011, 41 in 2010 and 24 in 2009. In 2012, the list of substances reported was dominated by 30 synthetic cannabinoids, which mimic the effects of cannabis (3). Over 280 new psychoactive substances are currently monitored by the EWS, the number of substances notified in the last two years accounting for over half of the total number reported since 2005.

Via the EWS, the agencies collect and analyse information on all of these substances, allowing them to identify harms, assess the extent of involvement of organised crime and ensure prompt action, when necessary, to protect public health. Such information, provided by the EU Member States, led to risk assessments of two very different substances in 2012 which were linked to over 40 deaths in Europe. The first, 4-MA (a stimulant) was being sold as amphetamine on the illicit market, while the second, 5-IT (reported to have both stimulant and hallucinogenic effects), was being sold both on the ‘legal high’ and illicit market (4). In addition to the risk assessments, the EMCDDA issued a number of public health alerts to the EWS network in 2012, highlighting harms related both to new substances and controlled drugs.

In 2012, the list of substances reported was dominated by 30 synthetic cannabinoids, which mimic the effects of cannabis.

EMCDDA Director Wolfgang Götz said: ‘Monitoring new drugs is about more than just counting numbers. This report clearly demonstrates that the early warning system plays an essential role in ensuring that the EU and the Member States have access to state-of-the-art information on new psychoactive substances including the harms that they may cause. This helps ensure that, across the Union, appropriate action can be taken to protect public health’.

Andrew Cunningham and Roumen Sedefov

(2) For more, see: www.emcdda.europa.eu/themes/new-drugs/early-warning
(3) For more, see: www.emcdda.europa.eu/publications/drug-profiles/synthetic-cannabinoids
(4) In March 2013, the Council of the EU decided that 4-MA should be subjected to controls across the EU. See www.emcdda.europa.eu/news/2013/2
Greece and Croatia modify penalties for drug offences

Earlier this year, two countries made significant changes to their drug control legislation, reducing penalties for several offences (while increasing others) and broadening the possibility of alternatives to punishment.

In Greece, the new drug law 4139/2013, published on 22 March, reduced penalties for a variety of offences. The minimum penalties were reduced as follows: from 10 to 8 years for trafficking; from 15 to 10 years for aggravating circumstances; and from life to 10 years for recidivism. The penalty for users’ trafficking small amounts was also reduced to a maximum of three years, replacing the previous range of six months to five years.

A proposal for the full decriminalisation of offences relating to use was rejected, but the maximum penalty for use, possession for use and personal cannabis cultivation was reduced from one year to five months’ imprisonment. Previous maximum quantities for personal use have been abolished under the new law, being now left to the judge’s discretion based on substance properties and use patterns. As before, if the offence is deemed unlikely to be repeated, it does not enter the offender’s criminal record and punishment may be waived. Furthermore, those judged dependent will not be punished. Examination for dependence may now take place at any stage of the procedure, when previously it had been limited to 48 hours after arrest.

In Croatia, the new Criminal Code came into force on 1 January. Supply-related offences are punishable by 1–12 years in prison, reducing the minimum sentence from three years. The new Criminal Code now defines aggravating circumstances for a crime, including the involvement of children, organised groups or serious health damage, in which stricter punishments may be given. Production of drugs without the intention to sell is now defined as a distinct offence punishable by six months to five years in prison.

The possession of small quantities of drugs for personal use is no longer a criminal offence but a misdemeanour under the Law on Combating Drug Addiction, punishable by a fine of EUR 650–2 600. Assessment of the ‘small’ quantity is left to the state prosecutor or court(1). Meanwhile, the new Criminal Code urges the court to use a number of alternative measures to imprisonment (e.g. fines, community service, probation, treatment) for cases when a prison sentence of up to six months is prescribed.

Brendan Hughes, Mata Markellou and Sanja Mikulic

(1) For more on threshold quantities, see European Legal Database on Drugs www.emcdda.europa.eu/html.cfm/index99321EN.html

Focus on Croatia

On 1 July 2013, Croatia will become the 28th EU Member State. The EMCDDA began its cooperation with Croatia back in 2006. Since then, four technical cooperation projects, financed by the European Commission (1), Croatia and the EMCDDA have worked together to prepare the country for full participation in the agency’s work. Following EMCDDA guidelines, Croatia submitted its first annual National report on the drug situation in Croatia to the EMCDDA in 2008, initiating the inclusion, on an ad hoc basis, of Croatian data in the agency’s annual reports. The recent European Drug Report 2013 was published for the first time in Croatian.

Cooperation between the EMCDDA and Croatia has helped improve the quality and quantity of the datasets submitted to the agency and boost the timeliness of reporting processes at national level. Technical cooperation via the above-mentioned projects has also supported the strengthening of the Croatian drug information system and focal point. Croatian experts have been regular visitors to the EMCDDA since 2006, attending the EMCDDA’s expert meetings on the five key epidemiological indicators and participating in the network of the EU early warning system on new psychoactive substances. The Head of the Croatian National Drugs Observatory has also attended the bi-annual Reitox Heads of focal point meetings and a Croatian representative will sit on the EMCDDA Management Board for the first time this July.
Testing the waters

Leading European and international experts met in Lisbon from 6–8 May to review the state of the art of a rapidly-developing scientific discipline known as ‘drug wastewater analysis’. The event, ‘Testing the waters: the first international multidisciplinary conference on illicit drugs and wastewater’, was organised by the EMCDDA, in collaboration with: the EU-funded SEWPROF project; the Italian Mario Negri Institute; and the Norwegian Institute for Water Research (1).

Over 100 participants from 20 countries attended the event and explored the potential of this new technology for: estimating consumption of illicit drugs in the community; assessing the value of drug control interventions; and complementing more conventional methods of monitoring drug use. Future opportunities and challenges presented by this rapidly-developing field were discussed by a panel of experts. Discussions revealed the need for new pharmacokinetics data, the comparison of epidemiological and wastewater findings and improved data to estimate the size of the population served by the sewer system.

The conference concluded that wastewater analysis can provide a clear picture of the quantities of illicit drugs consumed by a given population and make a major contribution to monitoring drug trends in Europe. Offering reliable data on spatial and temporal trends in illicit drug use, the technique can reveal what drugs are being used, where they are being consumed and even on which days of the week.

Liesbeth Vandam


EMCDDA hosts second Reitox week

Candidate, potential candidate and neighbouring countries of the EU, preparing to collaborate with the EMCDDA, participated in the second ‘Reitox week’ held in Lisbon from 22–23 May. This annual event, initiated in 2012 and enlarging the regular Heads of focal point session, brought together representatives of over 40 nations including: the current 30 members of the network, Russia and a number of beneficiaries of the European Instrument for Pre-Accession Assistance (IPA) (1) and the European Neighbourhood Policy (ENP) (2).

The meeting of the ‘extended Reitox network’ featured four workshops where participants exchanged information and experience on understanding the drug situation and bridging the gap between monitoring and interventions. Bilateral coordination meetings were also held on the ongoing IPA 4 cooperation project (3) and the upcoming ENP technical cooperation project, due to kick off at the end of 2013. These allowed interested country representatives to discuss cooperation with the EMCDDA.

The meeting of the extended network was followed by the regular meeting of the 30 Reitox members from 24–25 May in its new format of forum gathering the focal points and EMCDDA staff around content-related issues (4).

Arthur Baghdasaryan, Secretary of the National Security Council of the Republic of Armenia and Head of the country’s inter-ministerial commission on the fight against drug abuse and drug trafficking, participated in Reitox week. Mr Baghdasaryan discussed with EMCDDA Director Wolfgang Götz perspectives for future collaboration, including the creation of an Armenian national focal point and a Memorandum of Understanding between the country and the EMCDDA.

Frédéric Denecker

(1) See http://ec.europa.eu/enlargement/instruments/overview/index_en.htm
(2) See http://ec.europa.eu/world/enp/index_en.htm
(3) See: http://www.emcdda.europa.eu/about/partners/cc
(4) For more, see www.emcdda.europa.eu/events/2013/2-reitox-week

NEW PSYCHOACTIVE SUBSTANCES

Scientific Committee assesses risks of 5-IT

The extended Scientific Committee of the EMCDDA — which includes representatives from the European Commission, Europol and the European Medicines Agency — met in Lisbon on 11 April to conduct a risk assessment of the new psychoactive substance 5-(2-aminopropyl)indole — commonly known as ‘5-IT’. The exercise is the crucial second stage of a three-step legal procedure through which Europe monitors and acts on new drugs (1).

The risk assessment critically examined data provided by the Member States as well as other scientific evidence compiled by the EMCDDA and Europol. The latter included: a Joint report (2), a specially-commissioned scientific study on the effects of 5-IT on human monoamine oxidase and Internet monitoring activities.

5-IT, a synthetic stimulant, appears to have been available since around November 2011 and has been linked to 24 fatalities which occurred over a period of five months in 2012. This raises the concern that, if this substance were to become more widely available and used, the implications for public health could be significant.

The risk-assessment report was submitted to the Commission and Council on 16 April. On the basis of the report, the Council of the EU may decide to subject the drug to control measures throughout the EU in the final stage of the process.

Andrew Cunningham and Roumen Sedefov

(1) www.emcdda.europa.eu/activities/action-on-new-drugs
(2) www.emcdda.europa.eu/publications/joint-reports/5-IT
European Drug Report 2013

On 28 May, the EMCDDA released a comprehensive, multilingual information package offering the latest findings on the drug phenomenon across Europe. Central to this package is the European Drug Report: Trend and developments, now available in 23 languages (see page 1). In four chapters, the report explores: drug supply in Europe; drug use and drug-related problems; responding to drugs; and drug policies. The information package is completed by the online Perspectives on drugs (see below); the annual Statistical bulletin (providing tables and graphs on the European situation) and Country overviews (presenting national drug situations ‘at a glance’).

Information on, and links to, all European Drug Report products, promotional items and events is available at www.emcdda.europa.eu/edi-2013

Perspectives on drugs

The EMCDDA’s new Perspectives on drugs (PODs) are online analyses providing insights into a selection of important issues. Eleven PODs were released alongside the European Drug Report, covering as many issues, including: new treatment approaches for hepatitis C; high-risk cannabis use; cocaine-related emergencies; and the control of increasingly available new psychoactive substances. The PODs, which incorporate video and interactive features, offer key content in user-friendly summaries downloadable in pdf.

Available in English at www.emcdda.europa.eu/topics/pods

Health and social responses profiles

How are countries in Europe responding to drug use in the areas of treatment, harm reduction, social reintegration and the prison environment? The EMCDDA’s country-by-country Health and social responses profiles (HSRs) aim to answer this question. The profiles include interactive maps and timelines showing the year in which key treatment and harm reduction measures were introduced in Europe. Also included are key source data and a glossary of terms.

Available in English at www.emcdda.europa.eu/countries/hsr-profiles

European summer school on illicit drugs

The University Institute of Lisbon (ISCTE) and the EMCDDA are currently collaborating on their second summer school project entitled: ‘Illicit drugs in Europe: supply, demand and public policies’. A wide variety of academics, researchers and professionals from various EU Member States, the US and Latin America have enrolled in the course which takes place in the Portuguese capital from 1–12 July. Scholarships are being provided to eligible students by ISCTE and the International Programme of the US National Institute on Drug Abuse (NIDA).

Over the two weeks, EMCDDA scientific experts, along with leading academics and policymakers, will prepare participants to meet the complex policy challenges in this field. Week 1 of the summer school focuses on ‘Defining the problems’, while Week 2 explores ‘Understanding drug policies and interventions’.

For more, see www.drugsummerschool.cies.iscte-iul.pt/home and www.emcdda.europa.eu/news/2013/fs1

Third international forum on new drugs

Leading European and international experts will meet in Lisbon from 27–28 June for the Third international multidisciplinary forum on new drugs, organised by the EMCDDA. The event follows the Second interdisciplinary forum co-hosted by the EMCDDA and NIDA in Palm Springs in June 2012, which focused on the global nature of the phenomenon and the importance of international cooperation in this area. It will also build on the results of the First international multidisciplinary forum on new drugs, held in Lisbon in May 2011.

For more, see www.emcdda.europa.eu
**CALENDAR 2013**

**EMCDDA meetings**

**6 June:** Presentation of the European Drug Report 2013 to the Justice and Home Affairs Council, Luxembourg.

**18–19 June:** EMCDDA expert meeting on general population surveys (GPS), Lisbon.

**27–28 June:** EU early warning system network and 3rd International multidisciplinary forum on new drugs, Lisbon.

**1–12 July:** Summer school on illicit drugs in Europe, ISCTE–EMCDDA, Lisbon.

**4 July:** EMCDDA Budget Committee and Executive Committee meetings, Lisbon.

**4–5 July:** 47th EMCDDA Management Board meeting, Lisbon.

**18–19 July:** Visit to the EMCDDA of a delegation of MEPs of the LIBE Committee of the European Parliament, Lisbon.

**External meetings**

**5–7 June:** 30th International Drug Enforcement Conference (IDEC), FDCS–DEA, Moscow.

**9–12 June:** Harm reduction, international conference 2013, Vilnius, www.ihra.net/conference

**11–12 June:** COPOLAD conference, Quito.

**14–15 June:** 2013 NIDA International forum: Building collaborative research on drug abuse, San Diego.

**26 June:** International day against drug abuse and illicit trafficking.

**EU meetings**

**12 June:** Standing Committee on operational cooperation on internal security (COSI), Council of the European Union, Brussels.

**26 June:** Horizontal working party on drugs, Brussels.

**27 June:** EU–Pakistan meeting, Irish presidency, Brussels.

**28 June:** Dublin group meeting, Irish presidency, Brussels.

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**Scientific Committee helps identify research priorities**

The EMCDDA Scientific Committee met in Lisbon from 11–12 April to prepare its contribution to the Annual dialogue on research of the Council of the EU, to be held on 26 June under the Irish presidency. The Committee provided the Council’s Horizontal working party on drugs with input for EU research priority-setting on the basis of an agreed approach, piloted by the EMCDDA, which includes a framework for decision and a gap-analysis exercise.

During the meeting, the Committee undertook the risk assessment of new drug 5-IT (see p. 6) and prepared the next steps for the 2013 EMCDDA Scientific paper award, for which 32 eligible articles have been nominated.

The Scientific paper award ceremony will take place in the margins of the Scientific Committee being held in Lisbon from 7–8 November.

The current members of the Scientific Committee will complete their mandate in December 2013. A new Scientific Committee will be appointed by the EMCDDA Management Board from 5–6 December, following a call for expressions of interest in membership for the period 2014–16, published in the Official Journal of the European Union in February.

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**Maria Moreira**

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An estimated 1.2 million Europeans received treatment for illicit drug use in 2011. Opioid users represent the largest group undergoing treatment, followed by cannabis and cocaine users (Figure 3.5). Substitution treatment remains the ‘first choice’ for treating opioid dependence, says the report. Some 730 000 Europeans now receive this type of treatment — up from 650 000 in 2008 — representing around half of the estimated 1.4 million problem opioid users in Europe today.

‘With Europe still facing negative economic growth, increasing unemployment rates and reductions in government spending, available budgets for health, public order and safety measures run the risk of being affected’, said Chairman of the EMCDDA Management Board João Goulão. ‘We are already receiving reports from a number of European countries of cuts in drug-related services. We need to reinforce the message that drug treatment remains the most cost-effective policy option, even in difficult economic times’.

For more on hepatitis C, drug-related deaths, social reintegration and drugs in prisons, see www.emcdda.europa.eu/news/2013/7