

Cocaine – the current situation in Europe (European Drug Report 2023)

Cocaine is, after cannabis, the second most commonly used illicit drug in Europe, although prevalence levels and patterns of use differ considerably between countries. On this page, you can find the latest analysis of the drug situation for cocaine in Europe, including prevalence of use, treatment demand, seizures, price and purity, harms and more.



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Historically high cocaine seizures highlight threats to health

Cocaine is, after cannabis, the second most commonly used illicit drug in Europe, although prevalence levels and patterns of use differ considerably between countries (see the <u>Prevalence of cocaine use in</u> <u>Europe</u> dashboard, below). Cocaine is usually available in two forms in Europe. The most common is cocaine powder (the salt form) and less commonly available is <u>crack cocaine</u>, a freebase form of the drug that can be smoked.

Cocaine is produced from the coca plant, grown in South America. It enters Europe through various channels, but the trafficking of large volumes of cocaine through Europe's seaports in intermodal commercial shipping containers is considered a significant factor in the high availability of this drug observed today. Cocaine trafficking by this route is also associated with rising in levels of drug-related crime, including the corruption of staff along supply chains, intimidation and violence. More generally, there are concerns that in some EU countries competition within the cocaine market, both at the wholesale and retail level, is now an important driver of drug-related crime including gang-related violence and homicides.

A record 303 tonnes of cocaine was seized by EU Member States in 2021. Belgium, the Netherlands and Spain continue to be the countries reporting the highest volumes of seizures, reflecting the importance of these countries as entry points for cocaine trafficking to Europe. In 2022, the quantity of cocaine seized in Antwerp, Europe's second-largest seaport, rose to 110 tonnes from 91 tonnes in 2021, with volumes seized increasing annually since 2016.

As interdiction measures have been scaled up at major known entry points for this drug, it appears that cocaine trafficking groups are also now increasingly targeting smaller ports in other EU countries and countries bordering the European Union, which may be more vulnerable to drug trafficking activities.

This may help explain the fact that despite the large seizures, cocaine purity at the retail level remains high by historical standards and its price is stable. Additionally, there is now a well-established secondary cocaine production industry in Europe, with 34 cocaine laboratories dismantled in 2021, an increase on the previous year. These include large-scale secondary extraction and cocaine hydrochloride manufacturing sites and an additional 14 cutting and packaging locations. The existence of these laboratories is indicative of innovation in trafficking practices where cocaine may be incorporated with other materials creating significant challenges for its detection in commercial shipments.

The historically high seizures of cocaine are an indicator of its widespread availability and raise concerns that this could potentially contribute to increasing levels of consumption and associated harms. Cocaine is the second most frequently reported drug, both by first-time treatment entrants and in the available data on acute drug toxicity presentations to sentinel hospital emergency departments. European drug checking services, although not nationally representative, reported that cocaine was the most common substance they screened in 2021. The available data also suggest that the drug was involved in about a fifth of overdose deaths in 2021. While not representative of the general population, the detection of cocaine residues in wastewater analysis increased in 37 out of 65 cities with data for both 2022 and 2021. Increased availability also appears to be associated with some signs of a possible diffusion of cocaine use into more marginalised groups, with cocaine injection and the use of crack cocaine reported in some countries. An estimated 7 500 clients received treatment for crack cocaine use in 2021, and this figure appears to be increasing. Stimulants, such as cocaine, are associated with a higher frequency of injection and have been involved in localised HIV outbreaks among people who inject drugs in some parts of Europe over the last decade.

Treating people with different patterns of cocaine use is challenging, whether they are clients that are more socially integrated and involved in casual or episodic use of powder cocaine or more marginalised groups injecting the drug or smoking crack cocaine. Although our understanding of what constitutes effective treatment for stimulant problems is growing, it remains relatively limited. The current evidence available is indicative of the use of psychosocial interventions, including cognitive behavioural therapy and contingency management. Currently, there is insufficient evidence to strongly support any pharmacological treatment, although some potentially useful new pharmacotherapies are in development. Treating cocaine problems among more marginalised groups is often particularly challenging, as clients may also be experiencing problems with a range of other drugs, including opioids or alcohol. For injecting cocaine and smoking crack, existing harm reduction responses, to a large extent those originally developed for opioid problems, still require both further development and scaling-up.

Key data and trends

Prevalence and patterns of cocaine use

• In the European Union, surveys indicate that almost 2.3 million 15- to 34-year-olds (2.3 % of this age group) used cocaine in the last year. Of the 11 European countries that have conducted surveys since 2020 and provided confidence intervals, 5 reported higher estimates than their previous comparable survey, 5 reported a stable trend and 1 a lower estimate.

Dashboard. Prevalence of cocaine use in Europe

This data explorer enables you to view our data on the prevalence of cocaine use by recall period and age range. You can access data by country by clicking on the map or selecting a country from the dropdown menu.

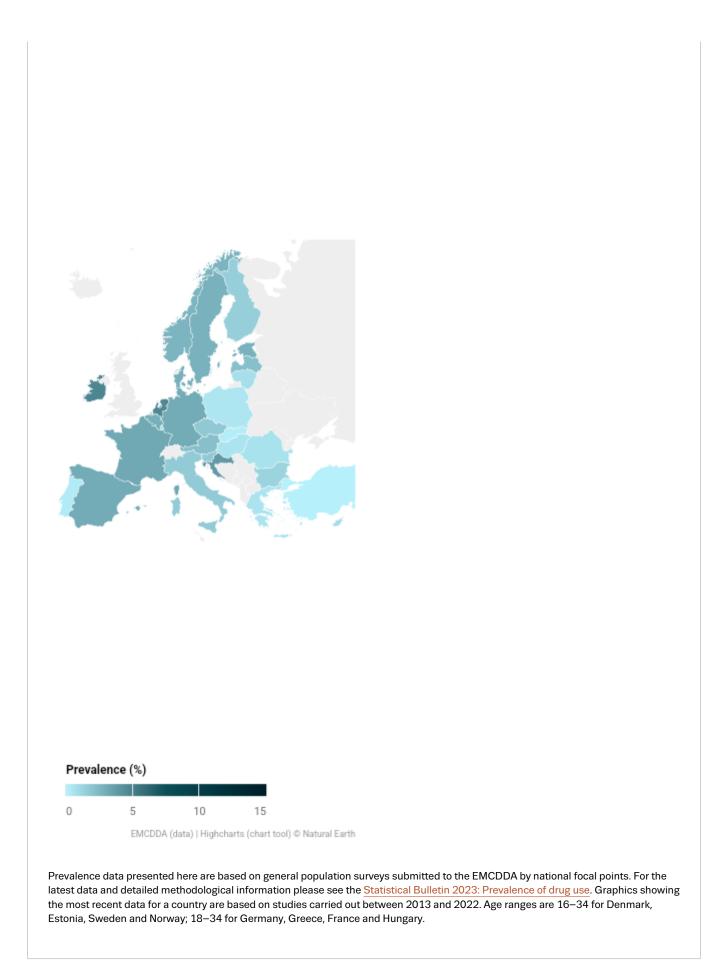
Recall period

Age

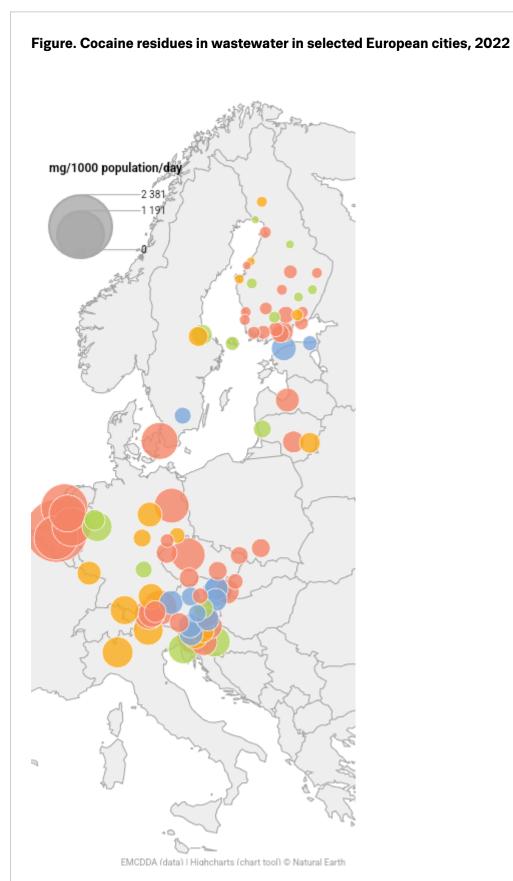
Last month Last year Lifetime

Young adults (15-34) Adults (15-64)

Country



• In 2022, cocaine residues in municipal wastewater increased in 37 out of 65 cities with data compared with 2021, while 18 cities reported no change and 10 cities reported a decrease.



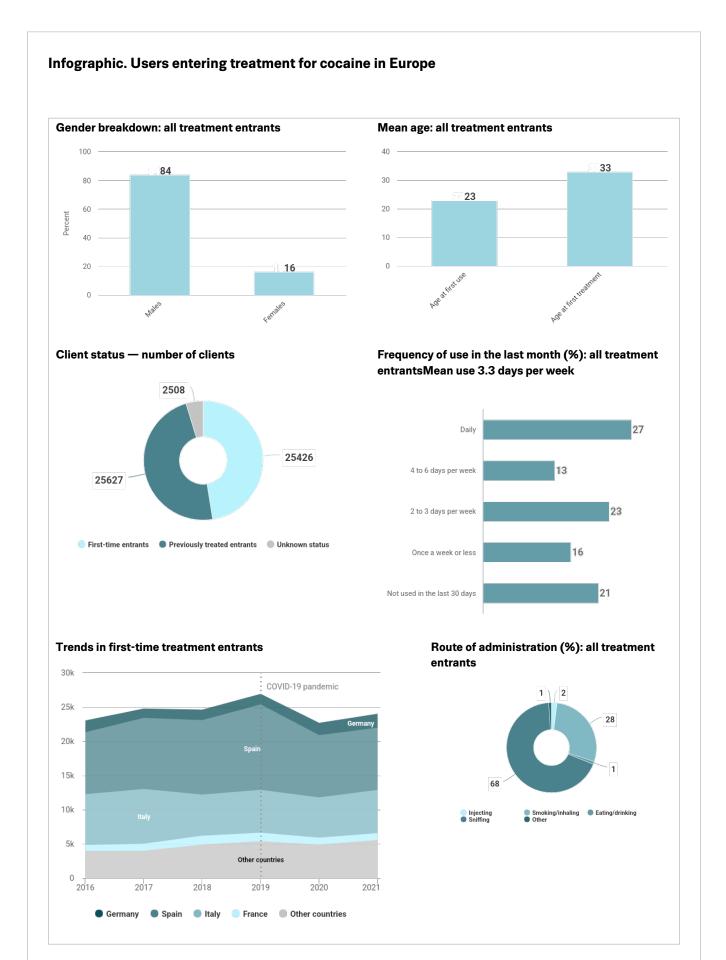
Red = increase | Green = decrease | Yellow = stable, with respect to previous value | Blue = no previous data

Mean daily amounts of benzoylecgonine in milligrams per 1000 population. Sampling was carried out over a week in March and April 2022. Taking into account statistical errors, values that differ less than 10% from the previous value are considered stable in this figure. Source: Sewage Analysis Core Group Europe (SCORE).

 Analysis of 1 849 used syringes by the ESCAPE network of 12 cities in 11 EU Member States between 2021 and 2022 found that, overall, a third of syringes contained residues of two or more drug categories, indicating frequent polydrug use or re-use of injecting paraphernalia. The most frequent combination was a mixture of a stimulant and an opioid. Cocaine was detected in over 50 % of syringes analysed in Athens, Cologne, Dublin and Thessaloniki, with a mixture of cocaine and heroin being the most frequent combination found.

Treatment entry for cocaine use

- Cocaine was the second most common problem drug among people entering specialised drug treatment for the first time in their lives, cited by an estimated 25 000 clients or 21 % of all first-time entrants (see the Users entering treatment for cocaine infographic, below).
- The latest European data reveal a time lag of 10 years between first cocaine use, on average at the age of 23, and first treatment for cocaine-related problems, on average at the age of 33.



Data are for all treatment entrants with cocaine as the primary drug - 2021 or the most recent year available.

Trends in first-time entrants are based on 25 countries. Only countries with data for at least 5 of the 6 years are included in the trends analysis. Missing values are interpolated from adjacent years. Because of disruptions to services due to COVID-19, data for 2020 and 2021 should be interpreted with caution. Missing data were imputed with values from the previous year for Spain and France (2021) and Germany (2019).

Harms related to cocaine use

- Cocaine was the most common substance reported by Euro-DEN Plus sentinel hospitals in 2021, mentioned in 27 % of acute drug toxicity presentations. Presentations involving cocaine increased by 11 % between 2020 and 2021, with notable increases in both Antwerp (from 167 cases in 2020 to 245 cases in 2021) and Dublin (from 78 in 2020 to 137 cases in 2021). Where recorded, most presentations were associated with co-ingestion of alcohol.
- Among those using the drug, the combined use of cocaine and alcohol is common. The presence of the two substances in the body leads to the formation of cocaethylene in the liver. This increases the potential for adverse health effects, including agitation, psychosis, tachycardia (rapid heartbeat), hypertension (high blood pressure), arrhythmia (abnormal heart rhythm), chest pain due to acute coronary syndrome and stroke. Chronic cocaine use has been associated with an increased risk of coronary artery disease, cardiomyopathy (deterioration in heart muscle function) and stroke.
- Beyond the risks associated with acute toxicity, cocaine is a highly addictive stimulant that can lead to tolerance and dependence. Use of the drug is also associated with an increased risk of death. A recent review of mortality among people with regular or problematic cocaine use found that the risk of death by suicide, accidental injury, homicide and AIDS-related mortality were all elevated compared with age and sex peers in the general population.
- Among 20 European countries providing data for both years, cocaine, mostly in the presence of opioids, was involved in 420 (16.5 %) overdose deaths in 2021 (378 or 13.5 % in 2020). The currently available number of deaths with cocaine involved in 2021 is an underestimate. In Germany, provisional analysis of the data for 2021 suggests that at least one in five drug-induced deaths may involve cocaine, which would add around 370 fatalities to the provisional number for 2021. There are major limitations in the German data, and this number should be interpreted with caution. Recent data are also missing for some countries, including Spain (where 461 cases were reported in 2020) and France (130 cases reported in 2020). This limits the insights on recent developments at a European level.

Crack cocaine

- Just six EU countries accounted for more than 90 % of the estimated 7 500 crack-related treatment entries in 2021, of which 2 600 were first-time entrants. A caveat here is that the term 'crack' may not be used consistently by all countries.
- Data from drug consumption rooms in 2022 in Lisbon and Porto, Portugal, indicated that crack cocaine, either alone or with heroin, accounted for a significant proportion of the drug consumption episodes facilitated. In both services, half of all crack cocaine consumptions involved smoking and the other half involved injecting crack, alone or with heroin. In Paris, only a small proportion of the facilitated episodes in drug consumption rooms, which only allow injecting and not smoking, involved crack cocaine alone or with another drug, mostly morphine or methadone. No crack cocaine use was

reported by drug consumption rooms in Barcelona, Athens or Bergen in 2022.

• A 2021 analysis of municipal wastewater in 13 European cities, by the EU-funded EUSEME project, found crack residues in all cities on all sampling days, with the highest loads reported in Amsterdam and Antwerp.

Cocaine market data

- In 2021, EU Member States reported 68 000 seizures of cocaine amounting to a historically high 303 tonnes (up from 211 tonnes in 2020). Belgium (96 tonnes), the Netherlands (72 tonnes) and Spain (49 tonnes) accounted for almost 75 % of the total quantity seized (see the <u>Cocaine market</u> infographic, below).
- The average purity of cocaine at the retail level ranged from 48 % to 85 % across Europe in 2021, with half of the countries reporting an average purity between 56 % and 75 %. The purity of cocaine has been on an upward trend over the past decade, and in 2021 reached a level 43 % higher than the index year of 2011 (see the Cocaine market infographic, below).
- Spain reported dismantling 16 cocaine laboratories, Belgium reported 11 sites related to cocaine processing and the Netherlands dismantled 7 cocaine secondary extraction laboratories (some of which were large-scale sites). An additional 14 cutting or packaging sites were discovered in the Netherlands. Large seizures of the precursor chemical potassium permanganate were reported by the Netherlands (637 kilograms) and Belgium (387 kilograms).
- In 2021, cocaine was cited in 65 800 use or possession offences, about 9 % of all such offences for which the drug is known, continuing the upward trend observed over the previous 5 years. After cannabis, cocaine was the second most frequently cited drug in offences related to use or possession.

Infographic. Cocaine market in Europe

Geographical coverage (selected graphs)

