

Treated problem alcohol use in Ireland: Figures for 2007 from the National Drug Treatment Reporting System



**Alcohol and Drug Research Unit, Health
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Summary

Significant improvements in the NDTRS's data collection processes and procedures mean that the HRB is now able to report on the information collected from treatment centres on an a more regular basis. From 2009, the figures on the extent of treated drug and alcohol use will be published within a year of collection. Trends papers will also be published regularly to examine changes over time. The data presented in this paper provide a description of problem alcohol use in Ireland by HSE area of residence.

The total number of cases treated for problem alcohol use in Ireland increased from 5,876 cases in 2006 to 7,312 in 2007. This may be attributed to an increase in the number of people presenting for treatment, or it may reflect the increase in 2007 in the number of treatment centres participating in the NDTRS. (Table 2)

The number of new cases treated for alcohol as their main problem drug has risen by 9%, from 3,432 cases in 2006 to 3,736 cases in 2007. The number of cases who returned for treatment also increased, from 2,345 cases in 2006 to 3,110 in 2007.

As in 2006, the largest proportion (33%) of treated alcohol cases in 2007 lived in the HSE South region, and just over one-quarter (25.8%) lived in the HSE West region. (Table 4)

The incidence of treatment for problem alcohol by county for the period 2004 to 2007 was highest in Sligo, Carlow, Donegal, Waterford, Leitrim and Kilkenny (with over 200 cases per 100,000 of the 15–64-year-old population). The incidence rates were lowest in Mayo, Roscommon and Galway (with under 100 cases per 100,000). The lower incidence rates observed in Dublin, Kildare, Galway, Mayo, Roscommon and Wicklow are due to the fact that services in these counties did not participate in the NDTRS up to the end of 2006. (Figure 1)

The prevalence of treated problem alcohol use among 15–64-year-olds living in Ireland, expressed per 100,000 of the population, increased from 182.9 in 2006 to 222.6 in 2007. The incidence of treated problem alcohol use among 15–64-year-olds living in Ireland, expressed per 100,000 of the population, increased from 109.8 in 2006 to 118.3 in 2007. These increases in prevalence and incidence may be explained by an increase in problematic alcohol use in the population, an increase in reporting to the NDTRS, or a combination of both. (Figure 2)

One in five of those treated for problem alcohol use also reported using at least one other substance in 2007, a similar proportion to that observed in 2006. In 2007, the most common drugs used in conjunction with alcohol for treated alcohol cases were cannabis, followed by cocaine, ecstasy and benzodiazepines. This reflects a minor change since 2006, when amphetamines were the fourth most common additional drug. Use of more than one substance increases the complexity of cases and leads to poorer outcomes for the patient. Information about combinations of substances used is important in terms of individual clients' care plans. (Tables 6 and 7)

The NDTRS records the treatment intervention(s) provided when a client is first admitted to a treatment service. However, more than half of clients attending treatment receive more than one treatment, which means the number of treatments is greater than the number of clients. In 2007 40% of cases presenting for treatment received one type of intervention, while almost 16% received two types of intervention. Counselling remained the most common

initial treatment intervention, with three in every four cases receiving counselling. (Figures 4 and 5)

In 2007, the median age at which cases, both new and previously treated, began drinking was 16 years, similar to previous years. (Table 9)

The age profile of cases treated for problem alcohol use remained the same in 2006 and 2007. The median age for all treated cases was 39 years; for new cases, the median age continued to be younger (37 years). While the proportion of cases under the age of 18 remained small, the number of previously-treated cases and new cases in that age group continued to rise. (Table 10)

The socio-demographic characteristics of cases, both new and previously-treated, remained similar to previous years. The majority were male, with low levels of employment. The proportion of cases who were homeless rose slightly between 2006 and 2007: new cases from 2.4% to 2.9%, and previously-treated cases from 5.4% to 7.0%. Those who used additional substances with alcohol were more likely to be unemployed and live in unstable accommodation. (Table 10; Figures 6 and 7)

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Glossary of terms

The median is the value at the mid-point in a sequence of numerical values ranged in ascending or descending order. It is defined as the value above or below which half of the values lie. Unlike the mean (average), the median is not influenced by extreme values (or outliers). For example, in the case of five drug users aged 22, 23, 24, 24 and 46 years respectively, the median (middle value) is 24 years, whereas the mean is 27.8 years. While both the median and the mean describe the central value of the data. In this case, the median is more useful since the mean is influenced by the one older person in this example.

Incidence is a term used to describe the number of new cases of disease or events that develop among a population during a specified time interval. For example, in 2007, 10 opiate users living in a specific county sought treatment for the first time. The incidence is the number of new opiate cases treated divided by the population living in the county (say 31,182 persons in this example) expressed per given number of the population, i.e., per 100, per 1,000, per 10,000, per 100,000 etc.

The calculation in this case is as follows: $(10/31,182) \times 100,000$, which gives an incidence rate of 32 per 100,000 of the specific county population in 2007.

Prevalence is a term used to describe the proportion of people in a population who have a disease or condition at a specific point or period in time. For example, in 2007, 10 opiate users living in a specific county sought treatment for the first time, 20 opiate users returned to treatment in the year and five opiate users continued in treatment from the previous year; in total there are 35 people treated for problem opiate use in 2007. The prevalence is the total number of cases (35) divided by the population living in the county (31,182 persons) expressed per given number of the population, i.e., per 100, per 1,000, per 10,000, per 100,000 etc.

The calculation in this case is as follows: $(35/31,182) \times 100,000$, which gives a prevalence rate of 112 per 100,000 of the specific county population in 2007.

All cases treated describe all of the individuals who receive treatment for problem alcohol use (as a main problem substance) at each treatment centre in a calendar year. All cases treated will include: -

- **Previously treated cases** describes individuals who were treated previously for problem alcohol use (as a main problem substance) at any treatment centre and have returned to treatment in the reporting year; and
- **New cases treated** describes individuals who have never been treated for problem alcohol use (as a main problem substance); and
- **Status unknown** describes individuals whose status with respect to previous treatment for problem alcohol use (as a main problem substance) is not known.

Health Service Executive (HSE)

On 1 January 2005, the 10 health boards managing the health services in Ireland were replaced by a single entity, the Health Service Executive (HSE). The former health boards were responsible for health care provision to populations in specific geographical areas. In the interest of continuity of care, the HSE maintained these 10 areas for an interim period and called them HSE areas. The former Eastern Regional Health Authority was known as the HSE Eastern region for this interim period. The table below presents the past health board structure and the interim HSE areas structure:

Regional Health Authority	Health boards	HSE areas
Not applicable	North Eastern Health Board	HSE North Eastern Area
Eastern Regional Health Authority (ERHA*)	Northern Area Health Board	HSE Northern Area
Eastern Regional Health Authority (ERHA)	East Coast Area Health Board	HSE East Coast Area
Eastern Regional Health Authority (ERHA)	South Western Area Health Board	HSE South Western Area
Not applicable	Midland Health Board	HSE Midland Area
Not applicable	South Eastern Health Board	HSE South Eastern Area
Not applicable	Southern Health Board	HSE Southern Area
Not applicable	Mid-Western Health Board	HSE Mid-Western Area
Not applicable	North Western Health Board	HSE North Western Area
Not applicable	Western Health Board	HSE Western Area

*The ERHA was known as the HSE Eastern Region for the interim period

HSE Regions

Following a number of years of re-structuring, health care is now provided through four HSE regions and 32 local health offices (LHOs). The local health offices are based on the geographical boundaries of the former community care areas. The table below presents the current HSE structure:

HSE regions		Local health offices	
HSE Dublin North East	North West Dublin	North Dublin	Louth
	Dublin North Central	Cavan/Monaghan	Meath
HSE Dublin Mid-Leinster	Dublin South	Dublin South West	Wicklow
	Dublin South East	Dublin West	Longford/Westmeath
	Dublin South City	Kildare/West Wicklow	Laois/Offaly
HSE South	Cork South Lee	North Cork	Tipperary South
	Cork North Lee	Kerry	Waterford
	West Cork	Carlow/Kilkenny	Wexford
HSE West	Donegal	Mayo	Limerick
	Sligo/Leitrim/West Cavan	Roscommon	Clare
	Galway	Tipperary North/	
		East Limerick	

Introduction

Background

The figures and information in this document are based on data collected through the National Drug Treatment Reporting System (NDTRS). This is an epidemiological database on treated drug and alcohol misuse in Ireland. It is co-ordinated by staff at the Alcohol and Drug Research Unit (ADRU) of the Health Research Board (HRB) on behalf of the Department of Health and Children.

Established in 1990 to record drug misuse only, the NDTRS recorded problematic use of alcohol only in cases where it was an additional problem substance, that is, where the client's main reason for entering treatment was drug misuse but he/she also reported problematic use of alcohol (Department of Tourism, Sport and Recreation 2001; Hartnoll 1994; EMCDDA and Pampidou Group 2000).

However, it became increasingly evident that alcohol was the main problem substance in Ireland and that a large proportion of cases used both alcohol and drugs (Long *et al.* 2004a). In parts of the country, particularly outside Dublin, alcohol and drug treatment services are integrated. Failure to include alcohol data in reporting systems leads to an underestimation of problem substance use, and of the workload of addiction services (Long *et al.* 2004b). In recognition of this, the remit of the NDTRS was extended in 2004 to include cases where alcohol is recorded as the main or only reason for seeking treatment. The overlap between problem alcohol and other drug use has been identified in the current strategic plans of a number of drugs task forces, which have emphasised the need for treatment services that can address the many forms of polysubstance use.

Impact of information provided

The HRB supply service providers and policy makers with relevant data from the NDTRS to inform local and national substance misuse policy and planning. In recent years this information has central to drug strategy and policy decisions:

1996 NDTRS data were used to identify a number of local areas with problematic heroin use (Ministerial Task Force 1996). These areas were later designated as Local Drugs Task Force (LDTF) areas and are continuing to provide strategic responses to drug misuse in their communities.

2004 NDTRS data were used to describe treatment-seeking characteristics and behaviours of those aged under 18 years and to inform the deliberations of the working group on treatment of under-18-year-olds (2005).

2007 NDTRS data were used to inform some of the recommendations of the working group on drugs rehabilitation (2007), and by the working group on residential services (O'Gorman and Corrigan 2008) to help estimate the number of residential places required to address severe alcohol and drug problems in Ireland.

Alcohol consumption in Ireland

Ireland has one of the highest levels of alcohol consumption per capita in Europe. In 2007, 13.37 litres of pure alcohol were consumed in this country for every adult aged 15 years or older (Revenue Commissioner 2007; Central Statistics Office 2007). Alcohol is the third highest contributor to the total burden of disease in developed countries and is estimated to cause the deaths of 195,000 people per year in the European Union. It is associated with a range of chronic and acute medical conditions, including liver cirrhosis, various cancers, road traffic accidents and suicide. Alcohol-related harm has been shown to correlate with per capita alcohol consumption. Problem alcohol use is pervasive in Irish society, with men and women, the old and the young, experiencing its negative effects (Mongan *et al.* 2007).

The NDTRS collects alcohol data from outpatient services (including drug and/or alcohol treatment centres and some psychiatric services), inpatient specialised residential centres (for the treatment of addictions) and low-threshold services (which provide low-dose methadone

or drop-in facilities only).

Data collection and reporting

Significant improvements in the NDTRS's data collection processes and procedures mean that the HRB is now able to report on the information collected from treatment centres on an annual basis. From 2009, the figures on the extent of treated drug and alcohol use will be published within a year of collection. Trends papers will also be published regularly to examine changes over time.

The NDTRS requires that one form be completed for each new client coming for first treatment and for each previously-treated client returning to treatment for problem drug and/or alcohol use in a calendar year. Service providers at treatment centres throughout Ireland collect data on each individual who attends for first treatment or returns to treatment in a calendar year. ADRU staff in the HRB compile anonymous, aggregated data, which are analysed and reported at national and EU levels.

For the purpose of the NDTRS, treatment is broadly defined as 'any activity which aims to ameliorate the psychological, medical or social state of individuals who seek help for their substance misuse problems'. Clients who attend needle-exchange services are not included in this reporting system. As of 2004, clients who report alcohol as their main problem drug are included in this reporting system. Treatment options for alcohol cases include one or more of the following: brief intervention, alcohol detoxification, psychiatric treatment, medication-free therapy, counselling, family therapy, social and/or occupational reintegration, education/awareness programmes and complementary therapies. Treatment is provided in both residential and non-residential settings.

Interpretation of data

Three factors must be taken into consideration when interpreting the figures in this paper.

Firstly, not all alcohol treatment services in Ireland participate in the NDTRS. It may therefore be assumed that the data presented in this document underestimate the true extent of treated alcohol use in Ireland. However, the number of treatment services reporting problem use of alcohol has increased from 133 in 2006 to 174 in 2007. In 2007 the 174 treatment services who completed NDTRS forms with the HRB included 140 non-residential centres and 34 residential centres. This may also account for the increase in the numbers presenting for treatment in 2007.

The extent to which the number of treated alcohol cases is under-reported varies throughout the country. In particular, the coverage for cases reporting alcohol as their main problem substance is incomplete in the east (Dublin, Kildare and Wicklow) and the west (Galway, Mayo and Roscommon) of Ireland. Up to 2007, the alcohol services managed by the mental health services had never been invited to take part in the reporting system. The process of recruiting services that have not participated in the NDTRS to date is ongoing.

Secondly, the analysis in this report presents updated figures of a previous publication Fanagan *et al.* (2008). There is some variation in figures here compared to the previous publication. This is because the former publication used the criteria that cases who were treated more than once at the same centre during a calendar year were included as a single case. In this document each treatment recorded as a new episode, in line with the treated problem drug use figures. Therefore in the case of data for 'previously treated cases' there is a possibility of duplication in the database where a person received treatment at more than one centre or returns to treatment at the same centre in the reporting year.

The data presented in this paper provide a description of problem alcohol use in Ireland by HSE area of residence. Thirdly, there were 23,858 cases treated in Ireland between 2004 and 2007. Of these, 22,442 (94.1%) lived in Ireland, 148 (0.6%) did not live in Ireland, and 1,268 (5.3%) had no place of residence recorded. The tables presenting data on service

provision, treatment status and place of residence are based on the total number of 23,858 treated cases (Tables 1 – 3). The remainder of the tables is based on the 22,442 cases that lived and were treated in Ireland only.

Outline of document

The tables presented examine:

- service provision
- number of cases treated
- incidence and prevalence of treated alcohol use
- additional problem substances
- treatment provision
- age at which alcohol and other drug use started
- socio-demographic characteristics of treated cases.

Service provision

Table 1 Number and type of services providing treatment for problem alcohol use and number of cases treated (in brackets) in Ireland and reported to the NDTRS, 2004 to 2007

	2004	2005	2006	2007
All services	124 (5144)	123 (5526)	133 (5876)	174 (7312)
Outpatient (cases treated)	102 (2735)	99 (2836)	107 (3181)	135 (3691)
Residential (cases treated)	20 (2406)	23 (2686)	25 (2692)	34 (3569)
Low-threshold* (cases treated)	1 (1)	1 (4)	1 (3)	5 (52)
Prison-based (cases treated)	1 (1)	0 (0)	0 (0)	0 (0)

*Low-threshold services are services that provide low-dose methadone or drop-in facilities only.

Number of cases treated

Table 2 Number (%) of cases treated in Ireland, by treatment status, reported to the NDTRS, 2004 to 2007

Treatment status	2004	2005	2006	2007
	Number (%)			
All cases	5144	5526	5876	7312
Previously treated cases	2177 (42.3)	2230 (40.4)	2345 (39.9)	3110 (42.5)
New cases	2827 (55.0)	3228 (58.4)	3432 (58.4)	3736 (51.1)
Treatment status unknown	140 (2.7)	68 (1.2)	99 (1.7)	466 (6.4)

Table 3 Number (%) of cases treated in Ireland, by place of residence, reported to the NDTRS, 2004 to 2007

Place of residence	2004	2005	2006	2007
	Number (%)			
All cases	5144	5526	5876	7312
Specified HSE region	4839 (94.1)	5191 (93.9)	5538 (94.3)	6874 (94.0)
Ireland, address not recorded	284 (5.5)	310 (5.6)	298 (5.1)	376 (5.1)
Outside Ireland	21 (.4)	25 (.5)	40 (.7)	62 (.9)

From this point on tables exclude cases whose HSE region of residence is not known or cases who are not normally resident in Ireland.

Table 4 Number (%) of cases treated in Ireland, by HSE region of residence and by treatment status, reported to the NDTRS, 2004 to 2007

HSE region of residence	2004	2005	2006	2007
Number (%)				
All cases*	4839	5191	5538	6874
HSE Dublin North East	477 (9.3)	567 (10.3)	881 (15.0)	1267 (17.3)
HSE Dublin Mid–Leinster	1009 (19.6)	1077 (19.5)	1257 (21.4)	1311 (17.9)
HSE South	2162 (42.0)	2336 (42.3)	2197 (37.4)	2410 (33.0)
HSE West	1191 (23.2)	1211 (21.9)	1203 (20.5)	1886 (25.8)
Previously treated cases*	2001	2028	2140	2859
HSE Dublin North East	192 (8.8)	211 (9.5)	291 (12.4)	476 (15.3)
HSE Dublin Mid–Leinster	442 (20.3)	482 (21.6)	520 (22.2)	614 (19.7)
HSE South	858 (39.4)	862 (38.7)	848 (36.2)	1021 (32.8)
HSE West	509 (23.4)	473 (21.2)	481 (20.5)	748 (24.1)
New cases*	2706	3110	3318	3655
HSE Dublin North East	270 (9.6)	346 (10.7)	575 (16.8)	698 (18.7)
HSE Dublin Mid–Leinster	547 (19.3)	584 (18.1)	712 (20.7)	538 (14.4)
HSE South	1268 (44.9)	1465 (45.4)	1320 (38.5)	1350 (36.1)
HSE West	621 (22.0)	715 (22.1)	711 (20.7)	1069 (28.6)
Treatment status unknown	132	53	80	360

Table 5 Number (%) of cases treated in Ireland, by former health board area of residence and by treatment status, reported to the NDTRS, 2004 to 2007

Former health board area of residence	2004	2005	2006	2007
	Number (%)			
All cases*	4839	5191	5538	6874
Northern Area (of Dublin)	184 (3.8)	205 (3.9)	280 (5.1)	543 (7.9)
North Eastern	293 (6.1)	362 (7.0)	601 (10.9)	724 (10.5)
South Western Area (of Dublin and Wicklow and all of Kildare)	337 (7.0)	489 (9.4)	588 (10.6)	579 (8.4)
East Coast Area (of Dublin and Wicklow)	83 (1.7)	84 (1.6)	151 (2.7)	188 (2.7)
Midland	428 (8.8)	356 (6.9)	392 (7.1)	435 (6.3)
Southern	1022 (21.1)	1170 (22.5)	990 (17.9)	1222 (17.8)
South Eastern	1197 (24.7)	1251 (24.1)	1321 (23.9)	1282 (18.6)
Mid-Western	443 (9.2)	488 (9.4)	380 (6.9)	584 (8.5)
North Western	657 (13.6)	635 (12.2)	736 (13.3)	871 (12.7)
Western	91 (1.9)	88 (1.7)	87 (1.6)	431 (6.3)
Place of residence unknown	104 (2.1)	63 (1.2)	12 (0.2)	15 (0.2)
Previously treated cases*	2001	2028	2140	2859
Northern Area (of Dublin)	90 (4.5)	81 (4.0)	95 (4.4)	198 (6.9)
North Eastern	102 (5.1)	130 (6.4)	196 (9.2)	278 (9.7)
South Western Area (of Dublin and Wicklow and all of Kildare)	172 (8.6)	223 (11.0)	248 (11.6)	282 (9.9)
East Coast Area (of Dublin and Wicklow)	45 (2.2)	39 (1.9)	50 (2.3)	63 (2.2)
Midland	157 (7.8)	157 (7.7)	161 (7.5)	195 (6.8)
Southern	373 (18.6)	385 (19.0)	302 (14.1)	471 (16.5)
South Eastern	518 (25.9)	519 (25.6)	603 (28.2)	614 (21.5)
Mid-Western	169 (8.4)	164 (8.1)	140 (6.5)	222 (7.8)
North Western	303 (15.1)	270 (13.3)	311 (14.5)	343 (12.0)
Western	37 (1.8)	39 (1.9)	30 (1.4)	183 (6.4)
Place of residence unknown	35 (1.7)	21 (1.0)	4 (0.2)	10 (0.3)
New cases*	2706	3110	3318	3655
Northern Area (of Dublin)	85 (3.1)	118 (3.8)	180 (5.4)	288 (7.9)
North Eastern	185 (6.8)	228 (7.3)	395 (11.9)	410 (11.2)
South Western Area (of Dublin and Wicklow and all of Kildare)	157 (5.8)	258 (8.3)	327 (9.9)	203 (5.6)
East Coast Area (of Dublin and Wicklow)	37 (1.4)	45 (1.4)	97 (2.9)	90 (2.5)
Midland	264 (9.8)	197 (6.3)	224 (6.8)	214 (5.9)
Southern	624 (23.1)	777 (25.0)	669 (20.2)	734 (20.1)
South Eastern	667 (24.6)	730 (23.5)	707 (21.3)	642 (17.6)
Mid-Western	246 (9.1)	313 (10.1)	237 (7.1)	341 (9.3)
North Western	325 (12.0)	353 (11.4)	420 (12.7)	513 (14.0)
Western	50 (1.8)	49 (1.6)	54 (1.6)	215 (5.9)
Place of residence unknown	66 (2.4)	42 (1.4)	8 (.2)	5 (.1)

Incidence and prevalence of treated alcohol use

In order to adjust for variation in population size in each HSE area and county, the actual incidence of treated alcohol use in each area was calculated using the average number of new cases over the four-year period living in each of the 26 counties; this average was divided by the population aged 15 to 64 years living in the respective former health board areas and counties, using the census figures for 2002 and 2006 (CSO 2007). The 2007 figure is based on the 2006 census figure and an estimated growth rate of 2.65% per annum. The estimated growth rate was sourced from the CSO.

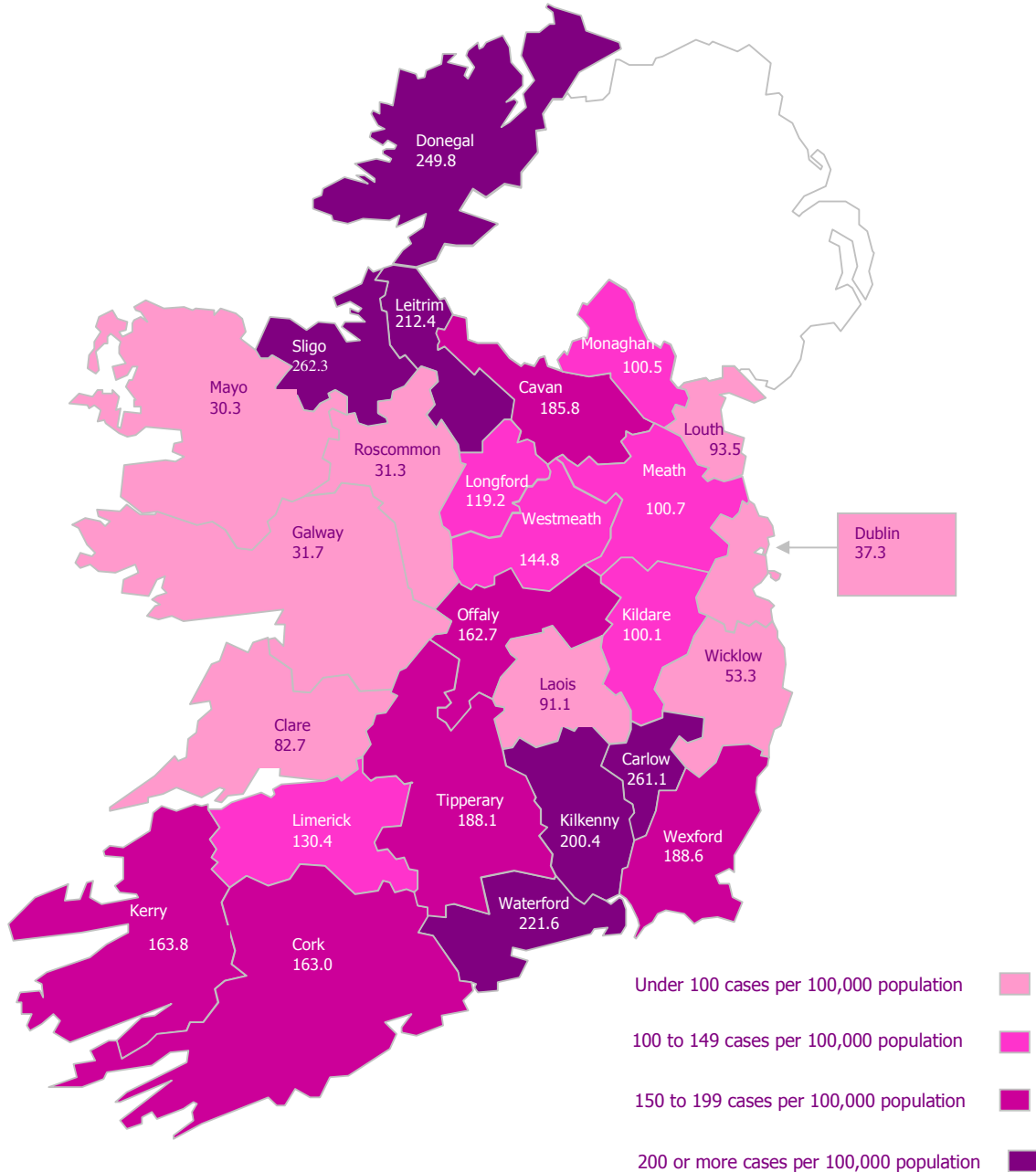


Figure 1 Average annual incidence of treated problem alcohol use among 15–64-year-olds living in Ireland, by county, based on returns to the NDTRS per 100,000 of the population, 2004 to 2007 (Central Statistics Office 2007)

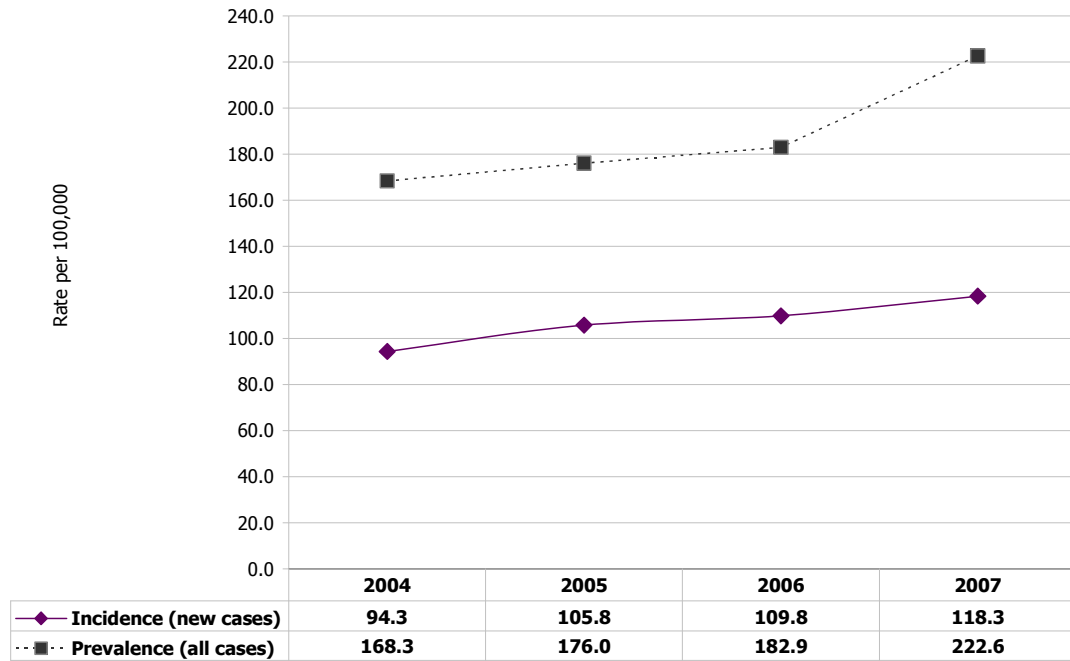


Figure 2 Incidence and prevalence of treated problem alcohol use among 15–64-year-olds living and treated in Ireland, based on returns to the NDTRS per 100,000 population, 2004 to 2007 (Central Statistics Office 2007)

Additional problem substances

Table 6 Number (%) of cases living and treated in Ireland who used more than one substance, by treatment status, reported to the NDTRS, 2004 to 2007

	2004	2005	2006	2007
Cases using more than one substance	Number (%)			
All cases	4839	5191	5538	6874
All cases using more than one substance	1002 (20.7)	1133 (21.8)	1101 (19.9)	1344 (19.6)
Previously treated cases	2001	2028	2140	2859
Previously treated case using more than one substance	377 (18.8)	395 (19.5)	402 (18.8)	533 (18.6)
New cases	2706	3110	3318	3655
New cases using more than one substance	599 (22.1)	724 (23.3)	676 (20.4)	783 (21.4)
Treatment status unknown	132	53	80	360

Table 7 Number (%) of problem substances used by cases living and treated in Ireland, by treatment status, reported to the NDTRS, 2004 to 2007

Number of problem substances used	2004	2005	2006	2007
	Number (%)			
All cases	4839	5191	5538	6874
One substance	3837 (79.3)	4058 (78.2)	4437 (80.1)	5530 (80.4)
Two substances	486 (10.0)	545 (10.5)	578 (10.4)	665 (9.7)
Three substances	263 (5.4)	279 (5.4)	255 (4.6)	362 (5.3)
Four substances or more	253 (5.2)	309 (6.0)	268 (4.8)	317 (4.6)
Previously treated cases	2001	2028	2140	2859
One substance	1624 (81.2)	1633 (80.5)	1738 (81.2)	2326 (81.4)
Two substances	164 (8.2)	188 (9.3)	214 (10.0)	276 (9.7)
Three substances	116 (5.8)	85 (4.2)	77 (3.6)	140 (4.9)
Four substances or more	97 (4.8)	122 (6.0)	111 (5.2)	117 (4.1)
New cases	2706	3110	3318	3655
One substance	2107 (77.9)	2386 (76.7)	2642 (79.6)	2872 (78.6)
Two substances	308 (11.4)	351 (11.3)	351 (10.6)	370 (10.1)
Three substances	142 (5.2)	190 (6.1)	174 (5.2)	215 (5.9)
Four substances or more	149 (5.5)	183 (5.9)	151 (4.6)	198 (5.4)
Treatment status unknown	132	53	80	360

Table 8 Additional problem substances used by cases living and treated in Ireland, by treatment status, reported to the NDTRS, 2004–2007

Additional problem substance(s) used*	2004	2005	2006	2007
All cases	4839	5191	5538	6874
Cannabis	770 (15.9)	896 (17.3)	839 (15.1)	975 (14.2)
Ecstasy	373 (7.7)	400 (7.7)	334 (6.0)	400 (5.8)
Cocaine	254 (5.2)	385 (7.4)	359 (6.5)	537 (7.8)
Amphetamines	107 (2.2)	109 (2.1)	116 (2.1)	94 (1.4)
Opiates	99 (2.0)	90 (1.7)	87 (1.6)	129 (1.9)
Benzodiazepines	83 (1.7)	99 (1.9)	104 (1.9)	147 (2.1)
Volatile inhalants	14 (0.3)	8 (0.2)	10 (0.2)	10 (0.1)
Other substances	47 (1.0)	27 (0.5)	32 (0.6)	35 (0.5)
Not recorded	4 (0.1)	0 (0.0)	0 (0.0)	0 (0.0)
Previously treated cases	2001	2028	2140	2859
Cannabis	266 (13.3)	301 (14.8)	300 (14.0)	369 (12.9)
Ecstasy	138 (6.9)	123 (6.1)	108 (5.0)	137 (4.8)
Cocaine	87 (4.3)	132 (6.5)	123 (5.7)	186 (6.5)
Opiates	53 (2.6)	45 (2.2)	51 (2.4)	76 (2.7)
Benzodiazepines	51 (2.5)	58 (2.9)	47 (2.2)	62 (2.2)
Amphetamines	42 (2.1)	49 (2.4)	49 (2.3)	47 (1.6)
Volatile inhalants	9 (0.4)	1 (0.0)	3 (0.1)	2 (0.1)
Other substances	25 (1.2)	11 (0.5)	15 (0.7)	22 (0.8)
Not recorded	1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)
New cases	2706	3110	3318	3655
Cannabis	481 (17.8)	586 (18.8)	526 (15.9)	581 (15.9)
Ecstasy	226 (8.4)	271 (8.7)	221 (6.7)	261 (7.1)
Cocaine	162 (6.0)	247 (7.9)	226 (6.8)	345 (9.4)
Amphetamines	63 (2.3)	59 (1.9)	65 (2.0)	47 (1.3)
Opiates	44 (1.6)	44 (1.4)	34 (1.0)	52 (1.4)
Benzodiazepines	29 (1.1)	40 (1.3)	52 (1.6)	82 (2.2)
Volatile inhalants	5 (0.2)	6 (0.2)	5 (0.2)	8 (0.2)
Other substances	22 (0.8)	15 (0.5)	17 (0.5)	11 (0.3)
Not recorded	3 (0.1)	0 (0.0)	0 (0.0)	0 (0.0)

* By cases reporting use of one, two or three additional substances.

[†] The percentages shown are the proportions of all problem alcohol users who used each additional problem substance.

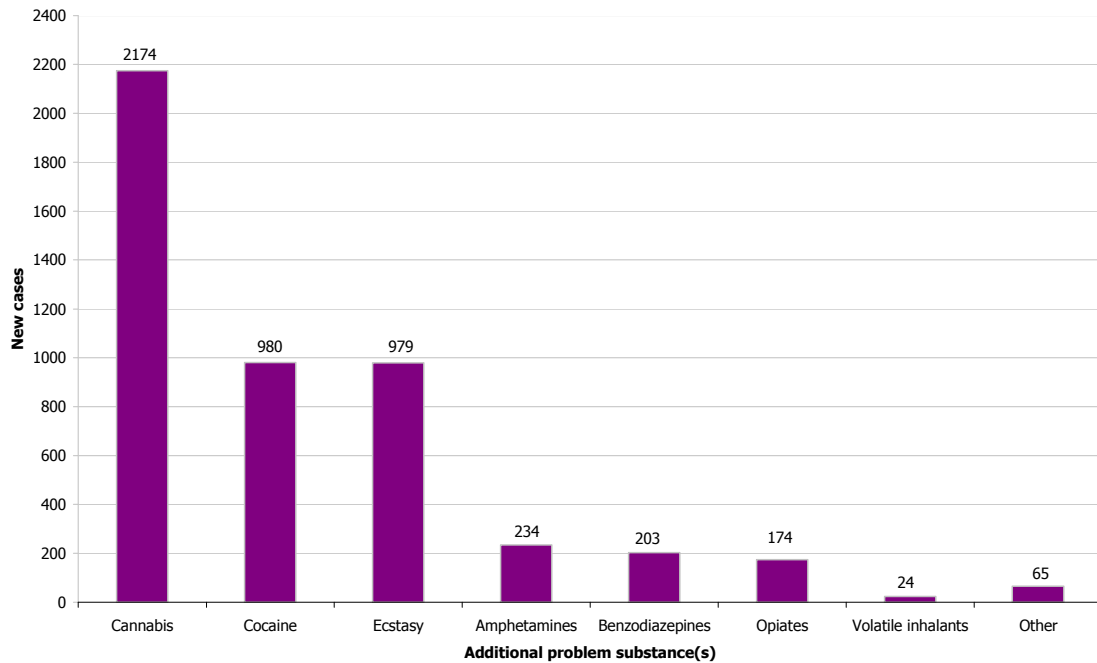


Figure 3 Additional problem substances associated with alcohol as a main problem substance, among new cases living and treated in Ireland and reported to the NDTRS, 2004 to 2007

Treatment provision

It is well recognised that there is no single treatment method to address alcohol problems. In practice, there are a number of effective treatments that may be provided in various treatment settings and which meet the needs of different types of problem alcohol users. Cases whose problems are more complex due to severe dependence, psychological morbidity or social disorganisation are likely to need more intensive treatments (Raistrick *et al.* 2006). A broad range of services covering treatment and rehabilitation is provided throughout the country. The NDTRS records the treatment intervention(s) provided when the client is first admitted to a treatment service.

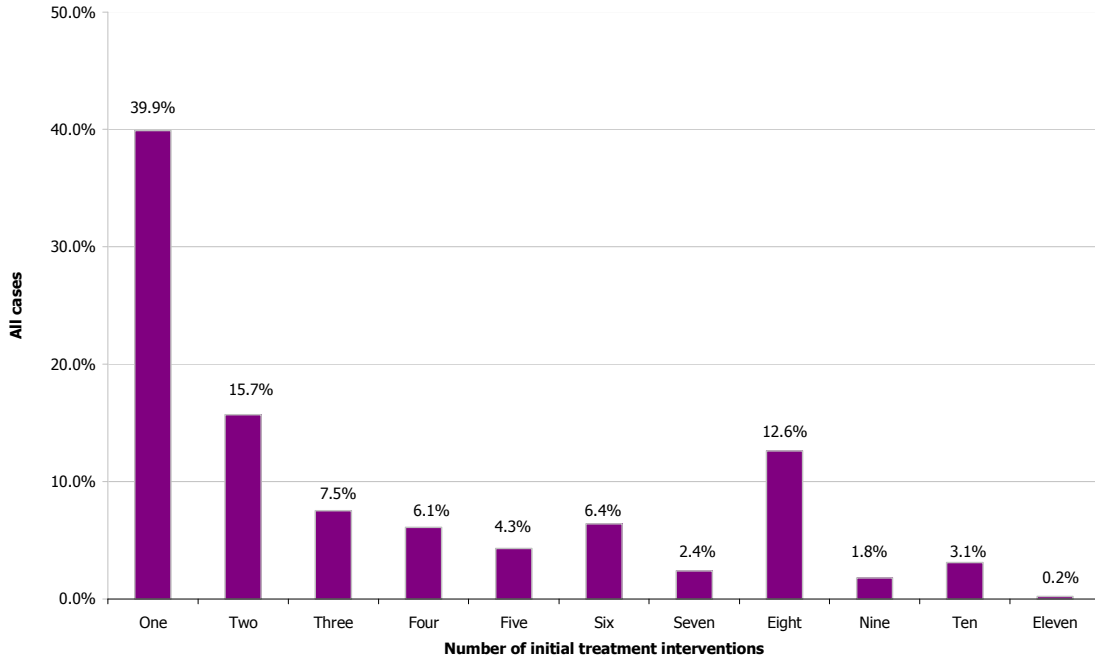


Figure 4 Percentage of cases living and entering treatment in Ireland, by the number of initial treatment interventions availed of, reported to the NDTRS, 2007

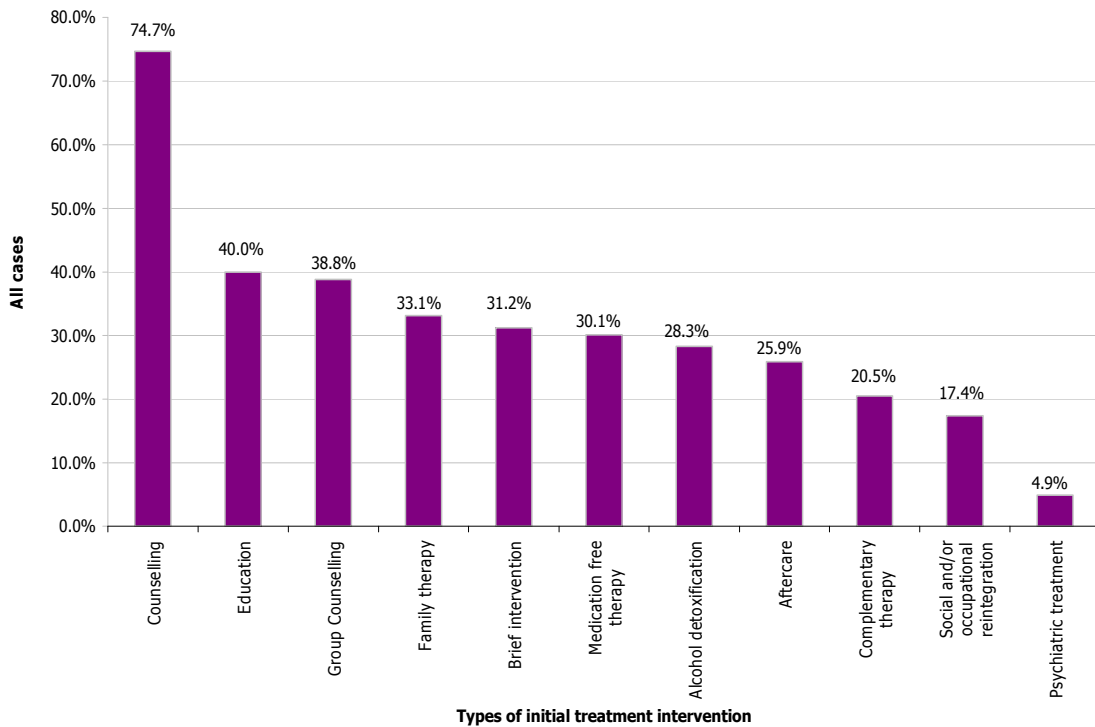


Figure 5 Percentage of cases living and entering treatment in Ireland who availed of each by type of initial treatment provided, reported to the NDTRS, 2007

Age at which alcohol and other drug use started

Table 9 Age at which alcohol and other drug use started, among cases living and treated in Ireland, by treatment status, reported to the NDTRS, 2004 to 2007

Age at which substance use commenced	2004	2005	2006	2007
All cases				
Number of responses for age first used any drug (excluding alcohol)	988	1225	1309	1645
Median age (range*) started use of any drug (excluding alcohol), in years	16 (12-28)	16 (12 – 29)	16 (12-29)	16 (12-28)
Number of responses for age first used alcohol	3365	3938	4123	4901
Median age (range*) started use of alcohol, in years	16 (12-22)	16 (12-23)	16 (12-23)	16 (12-23)
Previously treated cases				
Number of responses for age first used any drug (excluding alcohol)	368	432	502	680
Median age (range*) started use of any drug (excluding alcohol), in years	16 (12-30)	16 (12-30)	16 (12-34)	16 (12-28)
Number of responses for age first used alcohol	1271	1442	1546	2039
Median age (range*) started use of alcohol, in years	16 (12-23)	16 (12-23)	16 (12-24)	16(12-23)
New cases				
Number of responses for age first used any drug (excluding alcohol)	596	780	790	947
Median age (range*) started use of any drug (excluding alcohol), in years	16 (12-26)	16 (12-28)	16 (12-28)	16 (12-28)
Number of responses for age first used alcohol	2041	2468	2534	2831
Median age (range*) started use of alcohol, in years	16 (12-22)	16 (12-23)	16 (12-23)	16 (12-22)

* Age range presented is the 5th to 95th percentile (90% of cases are included within this range).

Socio-demographic characteristics of treated cases

Table 10 Socio-demographic characteristics of cases living and treated in Ireland, by treatment status, reported to the NDTRS, 2004 to 2007

Characteristics	2004	2005	2006	2007
All cases*	4839	5191	5538	6874
Median age (range†) in years	38 (18-61)	38 (19-62)	39 (19-62)	39 (19-61)
Number (%) under 18 years of age	169 (3.5)	133 (2.6)	163 (2.9)	216 (3.1)
Number (%) of males	3321 (68.6)	3559 (68.5)	3763 (67.9)	4603 (66.9)
Number (%) living with parents/family	1452 (30.0)	1520 (29.3)	1556 (28.1)	2006 (29.2)
Number (%) homeless	167 (3.5)	223 (4.3)	198 (3.6)	314 (4.6)
Number (%) Irish	4648 (96.1)	4962 (95.6)	5239 (94.6)	6456 (93.9)
Number (%) left school early (aged 14 years or under)	680 (14.1)	805 (15.5)	809 (14.6)	957 (13.9)
Number (%) employed (aged 16–64 years)	1911 (39.5)	1954 (37.6)	2073 (37.4)	2327 (33.9)
Previously treated cases*	2001	2028	2140	2859
Median age (range†) in years	42 (21-62)	41 (22-63)	41 (21-63)	41 (21-62)
Number (%) under 18 years of age	28 (1.4)	20 (1.0)	19 (.9)	43 (1.5)
Number (%) of males	1377 (68.9)	1393 (68.7)	1502 (70.2)	1935 (67.7)
Number (%) living with parents/family	475 (23.7)	465 (22.9)	498 (23.3)	717 (25.1)
Number (%) homeless	87 (4.3)	138 (6.8)	115 (5.4)	201 (7.0)
Number (%) Irish	1930 (96.5)	1927 (95.0)	2037 (95.2)	2693 (94.2)
Number (%) left school early (aged 14 years or under)	286 (14.3)	320 (15.8)	358 (16.7)	459 (16.1)
Number (%) employed (aged 16–64 years)	696 (34.8)	657 (32.4)	664 (31.0)	735 (25.7)
New cases*	2706	3110	3318	3655
Median age (range†) in years	35 (17-59)	36 (18-60)	37 (18-61)	37 (18-60)
Number (%) under 18 years of age	138 (5.1)	109 (3.5)	143 (4.3)	172 (4.7)
Number (%) of males	1853 (68.5)	2126 (68.7)	2206 (66.5)	2419 (66.2)
Number (%) living with parents/family	950 (35.1)	1037 (33.3)	1038 (31.3)	1187 (32.5)
Number (%) homeless	67 (2.5)	85 (2.7)	80 (2.4)	105 (2.9)
Number (%) Irish	2591 (95.8)	2984 (95.9)	3132 (94.4)	3413 (93.4)
Number (%) left school early (aged 14 years or under)	378 (14.0)	480 (15.4)	440 (13.3)	490 (13.4)
Number (%) employed (aged 16–64 years)	1179 (43.6)	1279 (41.1)	1383 (41.7)	1492 (40.8)
Treatment status unknown	132	53	80	360

* It is not possible to ascertain the percentage with each characteristic of interest from the total number because complete data were not reported in all cases.

† Age range presented is the 5th to 95th percentile (90% of cases are included within this range).

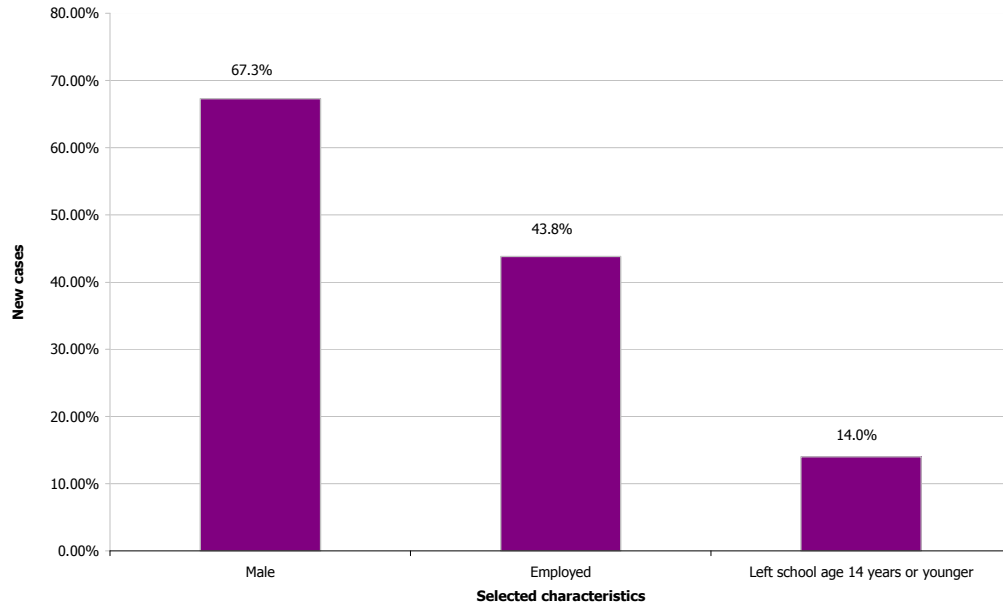


Figure 6 Characteristics of new cases living and treated in Ireland, reported to the NDTRS, 2004 to 2007

Relationship between alcohol and selected characteristics

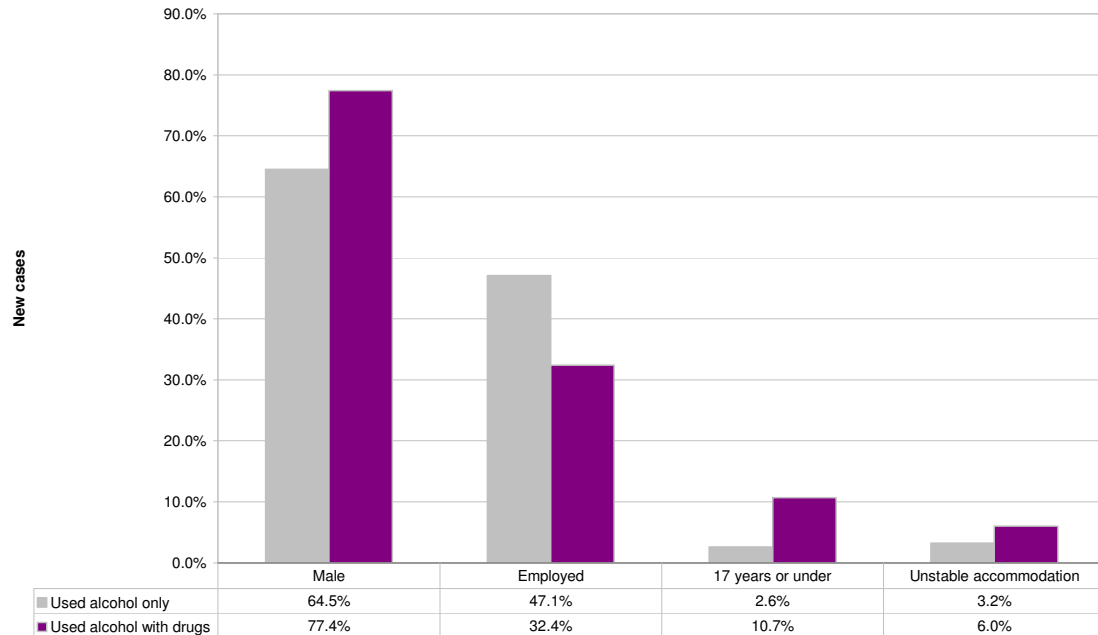


Figure 7 Characteristics of new cases living and treated in Ireland, reported to the NDTRS, by alcohol and other drug use status, 2004 to 2007

References

- Central Statistics Office (2007) Tables index. Available online at http://www.cso.ie/census/interactive_tables.htm
- Department of Tourism, Sport and Recreation (2001) *Building on experience: National Drugs Strategy 2001–2008*. Dublin: Stationery Office.
- EMCDDA (1998) *1998 Annual report on the state of the drugs problem in the European Union*. Luxembourg: Office for Official Publications of the European Communities.
- EMCDDA and Pompidou Group (2000) *Treatment demand indicator: standard protocol 2.0*. Lisbon: European Monitoring Centre for Drugs and Drug Addiction.
- Expert Group on Mental Health Policy (2006) *A vision for change*. Dublin: Stationery Office.
- Fanagan S, Reynolds S, Mongan D and Long J (2008) *Trends in treated problem alcohol use in Ireland, 2004 to 2006*. Trends Series 1. Dublin: Health Research Board.
- Hartnoll R (1994) *Drug treatment reporting systems and the first treatment demand indicator: definitive protocol*. Strasbourg: Council of Europe, Pompidou Group.
- Long J, Jackson T, Kidd M, Kelleher T and Sinclair H (2004) *Treatment demand for problem alcohol use in the South Eastern and Southern Health Board areas, 2000 to 2002*. Occasional Paper 10. Dublin: Health Research Board.
- Long J, Kelleher T, Kelly F and Sinclair H (2004) *Trends in treated problem drug use in the seven health board areas outside the Eastern Regional Health Authority, 1998 to 2002*. Occasional Paper 12. Dublin: Health Research Board.
- Ministerial Task Force (1996) *First report of the ministerial task force on measures to reduce the demand for drugs*. Dublin: Stationery Office.
- Mongan D, Reynolds S, Fanagan S and Long J (2007) *Health-related consequences of problem alcohol use*. Overview 6. Dublin: Health Research Board.
- O’Gorman A and Corrigan D (2008) *Report of the HSE Working Group on residential treatment and rehabilitation*. Dublin: Health Service Executive.
- Raistrick D, Heather N and Godfrey C (2006) *Review of the effectiveness of treatment for alcohol problems*. London: National Treatment Agency for Substance Misuse.
- Revenue Commissioners (2007) Annual Report. Available online at: http://www.revenue.ie/en/about/publications/annualreport_2007
- Working group on treatment of under 18 year olds (2005) *Report of the working group on treatment of under 18 year olds presenting to treatment services with serious drug problems*. Dublin: Health Service Executive.
- Working group on drugs rehabilitation (2007) *Report of the working group on drugs rehabilitation*. Dublin: Stationery Office.

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