**Press Release**

HRB publish latest drug treatment figures

HRB compares the Irish drug situation with the rest of Europe

EMBARGO: 31 May 2016, 10.00 am: Latest drug treatment figures from the Health Research Board show that 9,523 cases were treated for problem drug use in Ireland in 2014, increasing from 8,684 in 2013. Opiates continue to be the main problem drug with 4,745 cases presenting for treatment. Cannabis was the most common main problem drug for new entrants to treatment. A total of 1,696 (45.0%) new cases identified cannabis as their main problem drug. The number of cases reporting a benzodiazepine as their main problem drug was 914 in 2014, increasing from 773 in 2013.

These figures are included in the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) ***European drug report 2016: trends and developments* published** today. The European report summarises the latest trends across the 28 EU member states, and Norway and Turkey. The HRB provides the Irish figures for the EMCDDA report.

Graham Love, Chief Executive of the Health Research Board (HRB) said, ‘Demand for drug treatment continues to rise. By monitoring demand for drug treatment and the types of drugs people are taking, we can provide essential input for service planning. Cooperation at a European level also allows us to identify emerging trends, understand drug markets better and inform decision-making. It is encouraging to see Government commitment to complete a new National Drugs Strategy within a year. The Health Research Board will continue to work with the Department of Health and other agencies in developing a strategy that is informed by solid evidence’.

***The content below outlines the drug situation in Europe and where possible, provides comparisons with the situation in Ireland.***

The EMCDDA reports highlights the increasing use of MDMA following a period of decline in recent years and greater levels of production have been helped by new sources of precursors and production techniques. The drug’s popularity with existing stimulant users has grown and a new generation of users is emerging. MDMA is no longer confined to the dance scene but is used in a wide range of nightlife settings. Powders, crystals and tablets with high doses of MDMA are among the high-potency products presenting greater health risks and new problems for those developing prevention and harm reduction responses.

Harms related to new psychoactive substances (NPS) are monitored via the EU Early Warning System (EWS),which has issued 34 public health alerts to EU Member States since 2014. The EWS currently monitors over 560 NPS and in 2015, 98 new substances were reported, including 24 synthetic cannabinoids and 26 synthetic cathinones. The growing number of new synthetic opioids is a cause for concern and may indicate that producers are targeting existing opioid users. Several deaths associated with NSP and stimulants have been reported in Europe but most of the 6,800 overdose deaths in 2014 were related to heroin and other opioids, a slight increase from 2013. Increased heroin availability, higher purity, ageing users and changing consumption patterns may be factors in this increase. Just over half of the 1.2 million people who received treatment for illicit drug use in the EU in 2014 received substitution treatment for opioid use.

Use of cannabis among young Europeans (15-34) does not appear to have fallen and there have been increases in use in some European countries. Potency levels of herbal cannabis are historically high presenting health and social risks particularly to the 1% of European adults who are estimated to be daily or almost daily users. The numbers of those entering treatment for the first time for whom cannabis is their main problem drug has increased steadily since 2006, indicating greater levels of use, higher potency products and greater availability of treatment services.

Dimitris Avramopoulos, European Commissioner for Migration, Home Affairs and Citizenship, says: ‘Europe faces a growing problem with drugs. New psychoactive substances, stimulants, heroin and other opioids continue to be in high demand and supply, with major impacts on public health. That is why the 2016 European Drug Report is an important addition to our evidence base on the drugs problem and a helpful tool for European policymakers to shape policies and actions to address it. With this knowledge in hand, we will continue to call on EU Member State authorities, third countries, internet companies and civil society to redouble cooperation in fighting this global challenge’.

The situation with respect to Europe and Ireland is presented below under a series of headings. The information regarding drug prevalence in Ireland is taken from the 2010/11 general population survey.

A new general population survey was completed in 2015. Findings from this survey will be published by the National Advisory Committee on Drugs and Alcohol (NACDA) at the end of June.

**Cannabis**

***European situation***

* The EMCDDA estimates that around 16.6 million (13.3%) of young Europeans (15–34) used cannabis in the last year, 9.6 million of whom (16.4% of this age group) are aged 15-24 years.
* The most recent survey results show different trends in last year cannabis use. Surveys for relatively high-prevalence countries, such as Germany, Spain and the United Kingdom, all show decreasing or stable cannabis prevalence over the past decade, while France shows increases in prevalence after 2010. Countries which have historically reported lower cannabis use have seen a range of increases in recent surveys.
* Levels of lifetime cannabis use in 2013/14 among school-aged children ranged from 5 % among girls and 7 % among boys in Sweden to 26 % among girls and 30 % among boys in France.
* The number of first-time treatment entrants for cannabis as their main problem drug increased from 45,000 in 2006 to 69,000 in 2014, 55% of whom reported daily use.
* In 2014, 682,000 seizures of cannabis were reported in the European Union (453,000 of herbal cannabis, 229,000 of cannabis resin). There were a further 33,000 seizures of cannabis plants. The quantity of cannabis resin, transported in large quantities and over long distances, seized in the European Union is much higher than that of herbal cannabis (574 tonnes versus 139 tonnes).

***Irish comparison***

* The NACD 2010/11 general population survey reported that 10.3% of young adults (15-34) used cannabis in the year prior to the survey (recent use).
* The survey used two instruments to determine cannabis abuse and dependence. Of recent users 9% were classified as cannabis dependent. Dependence was higher among men (11%) and among young adults (15–34 years) (10%).
* Since 2004 cannabis has consistently been reported as the second most common problem drug for those entering treatment. The number of cases entering treatment with cannabis as their main problem drug in 2014 was 2,645 (27.8%). The corresponding figure for 2013 was 2,511 (28.9%).
* In 2014, 1,696 (45.0%) cases entering treatment for the first time identified cannabis as their main problem drug. Cannabis was the most common main problem drug for first time entrants into treatment. Since 2009 only a very small number of cases (n=113) have reported synthetic cannabinoids as their main problem drug.
* Just less than 10% of 13-17 year olds report having used cannabis in the last 12 months. The Health Behaviour in School-aged Children (HBSC) survey of 2014 also reported that cannabis use increased with each year of age and was more common among boys. One in twenty (5.5%) of this cohort reported cannabis use in the previous 30 days
* Garda and Revenue Customs officers reported that 15,463 cannabis plants were seized in 2014 from a total of 394 cultivation sites, a much reduced number from the 2013 figure but still indicative of significant domestic cultivation activity. The Garda reported that 157 grow houses were detected during 2013.

**Opioids (mainly heroin)**

***European situation***

* The number reporting opioids as their primary drug who entered specialised treatment for the first time dropped from 59 000 in 2007, when they accounted for 36 % of all new clients, to 23,00 in 2013 (16 % of new clients). The trend seems to have levelled off. Of the 185,000 opioid clients entering treatment in Europe in 2014, 34,000 were first-time entrants.
* In 2014, 19 European countries reported that more than 10 % of all opioid clients entering specialised services presented for problems primarily related to opioids other than heroin including methadone, buprenorphine, fentanyl, codeine, morphine, tramadol and oxycodone.
* Among first-time clients entering drug treatment in 2014 with heroin as their primary drug, 36 % reported injecting as their main route of administration, down from 43 % in 2006.
* The EMCDDA estimates that at least 6,800 overdose deaths occurred in the European Union in 2014, an increase from 2013.
* Viral hepatitis, particularly infection caused by the hepatitis C virus (HCV), is highly prevalent among injecting drug users across Europe with 6 of the 13 countries with national data reporting a prevalence rate in excess of 50 %. Drug injection is a risk factor for other infectious diseases including hepatitis B, tetanus and botulism.
* The quantity of heroin seized within the EU had been declining steadily from 2002 until 2013 when 5.6 tonnes were seized. A total of 8.9 tonnes were seized in 2014. The reversal in trends is largely due to an increase in large seizures (above 100 kg ) in several countries.

***Irish comparison***

* Opiates (mainly heroin) were the most common main problem drug reported by cases entering treatment in 2014. There were 4,745 cases (49.8%) in 2014, a continuation of the steady decrease in the proportion of the total number entering treatment since 2004 (64.6%).
* The number of those entering treatment for the first time in 2014 for whom heroin was the main problem was 1,036, the equivalent of 27.5% of new cases in treatment.
* In 2014 there were 27 newly-diagnosed HIV cases among intravenous drug users, the highest number since 2009. Forty-one per cent of newly diagnosed cases of HIV in 2014 were recent infections, having had previous negative HIV tests in either 2013 or 2012.
* There were 710 notifications for hepatitis C virus (HCV) in 2014, a decrease of 16% on 2013 when there were 847 notifications. The trend in hepatitis C notifications has been downward since the peak of 1,541 notifications in 2007
* In 2013 there were 86 deaths where heroin was implicated, compared to 64 in 2012. This is the first increase in heroin-related deaths since 2009, an increase of 34%.
* Methadone (alone or with another drug) continues to be the opiate most commonly implicated in poisoning deaths. In 2013, there were 93 deaths where methadone was implicated, compared to 89 deaths in 2012. This is compared to a peak in 2011 when there were 119 deaths where methadone was implicated.
* The number of cases involving heroin seizures increased from 690 in 2013 to 954 in 2014

**Cocaine**

***European situation***

* Cocaine is the most commonly used illicit stimulant drug in Europe, although its use is more prevalent in the south and west of Europe. It is estimated that about 2.4 million young adults aged 15 to 34 (1.9% of this age group) used cocaine in the last year. Only three countries report last year prevalence of cocaine use among young adults aged 15 to 34 of 3 % or more.
* The decreases in cocaine use reported since 2008 had not been observed in the most recent surveys; of the countries that have produced surveys since 2013, six reported higher estimates, two reported a stable trend and four reported lower estimates than in the previous comparable survey.
* Overall, cocaine was cited as the primary drug by 59,000 clients entering specialised drug treatment in 2014 and by 27,000 first-time clients. After a period of decline, the overall number of cocaine first time treatment entrants has been stable since 2012.
* In 2014, almost 5,500 clients entering treatment in Europe reported crack cocaine as their primary problem drug, with the United Kingdom accounting for more than half of these (3,000), and Spain, France and the Netherlands most of the remainder (2,000).
* In the United Kingdom, deaths involving cocaine increased from 169 in 2013 to 247 in 2014. In Spain, where cocaine-related deaths have been stable for some years, the drug continued to be the second most often cited drug in overdose deaths in 2013 (236 cases).
* In 2014, around 78,000 seizures of cocaine, amounting to 61.6 tonnes, were reported in the European Union. The situation has remained relatively stable since 2010, although both the number of seizures and the quantity seized are at levels considerably lower than in the peak years, 2006 –08

***Irish comparison***

* The 2010/11 general population survey reported last-year prevalence of cocaine use among 15–34-year-olds at 2.8%, lower than the 2006/07 figure of 3.1%.
* A total of 828 cases entering treatment in 2014 (8.7%) reported cocaine as their main problem drug. The corresponding proportion in 2012 was 8.5% and 7.8% in 2013.
* During 2013 there were 31 deaths where cocaine was implicated (alone or with another drug), a small increase on the 26 reported in 2012.
* In 2014, 405 seizures of cocaine were reported in Ireland, accounting for around 9% of all drug seizures.

**Other stimulants and new psychoactive substances**

***European situation***

* Data on new psychoactive substances (NPS) are based on notifications by Member States to the EU Early Warning System (EWS). In 2015, 98 new substances were reported for the first time (101 in 2014). Once again, the list of new substances reported was dominated by synthetic cannabinoids and synthetic cathinones (24 and 26 reported respectively).
* In 2014, almost 50 000 seizures of new substances, weighing almost 4 tonnes (3 990 kg), were made across Europe. Together, synthetic cannabinoids and cathinones accounted for almost 80 % of the total number of seizures and over 60 % of the quantity seized during 2014. Other groups included non-controlled benzodiazepines and potent narcotic analgesics, such as fentanyls.
* Some insight into the use of new drugs are provided by respondents to the 2015 Flash Barometer on young people and drugs, a survey of young adults aged 15-34, 8% of whom reported lifetime use of these substances, with 3% reporting use in the last year. This represents an increase from the 5 % reporting lifetime use in a similar survey in 2011. Of those reporting use in the last year, 68 % had obtained the substance from a friend.
* Despite drug injecting having declined in Europe overall, stimulant injecting is now a concern. Nearly half (47%) of new clients entering treatment in 2014 with amphetamines as their primary drug reported injecting as their main route of administration.
* Latest survey data points to increased use of MDMA in Europe following a period of decline. Around 2.1 million young adults (15–34 years) report having used MDMA in the last year (1.7 % of this age group). (Figure 2.4). There are also signs that the drug is moving out of niche or sub-culture dance clubs into mainstream nightlife settings, such as bars and house parties.

***Irish comparison***

* Amphetamines and ecstasy make up a very small proportion of the main problem drugs reported by treated cases in 2014; there were 45 (0.6%) amphetamine cases, 56 (0.6%) MDMA cases and 35 (0.4%) cathinone cases.
* In 2013, MDMA (alone or with other drugs) was implicated in 12 deaths, the same number as in 2012.
* There was a very small number of entrants to treatment in 2014 for whom an NSP (other than synthetic cannabinoids or cathinones) was the primary problem drug. The proportion of cases treated for this type of drug peaked in 2010 at 0.4% of all treatment episodes, but dropped to 0.07% in 2013 and 0.06% in 2014.
* There was an increase in notifications of recently acquired HIV among people who inject drugs (PWID) in Dublin during 2014 and 2015. This increase has been linked to injection of a synthetic cathinone PVP, with the street name ‘Snow Blow’.
* The 2010/11 general population survey reported 3.5% of adults and 6.7% of young adults (15-34) used new psychoactive substances, such as herbal smoking mixtures, party pills or herbal highs, or powders such as cathinones during the year prior to the survey.

**Sedatives and tranquillisers**

***European situation***

* The EMCDDA does not routinely report sedative and tranquilliser prevalence or treatment data in member states.

***Irish situation***

* The number of cases entering treatment and reporting a benzodiazepine as their main problem drug was 914 in 2014, compared to 773 in 2013.
* Benzodiazepines were implicated in 160 poisoning deaths in 2013, an increase of 24%, from 129 deaths in 2012. Two fifths (41%) of poisonings in 2013 involved benzodiazepines.
* There were 234 poisoning deaths involving more than one drug (polydrug use) in 2013, an increase on the 197 deaths reported in 2012.

Accompanying the European Drug Report 2016 will be **Perspectives on drugs** (PODs), online interactive articles providing insights into specific issues in the drugs field. The three themes in focus this year are: cocaine trafficking to Europe; comorbidity of substance use and mental health disorders in Europe; and strategies to prevent diversion of opioid substitution treatment.

**For more information contact:**

Gillian Markey, Communications Manager, Health Research Board

**m** +353 87 2288514 **e** gmarkey@hrb.ie