Guidelines and recommendations on national synthetic opioid preparedness in European countries

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Guidelines and recommendations for synthetic opioid preparedness

In Europe, highly potent synthetic opioids (SOs) and related overdoses are a growing public health and safety threat. This report provides guidelines and recommendations on preparedness related to synthetic opioids on the following topics:

- **Monitoring systems and rapid data collection**
- **Prevention and health systems' preparedness**
  - **Prevention of illicit use of prescription opioids**
- **Law enforcement sector and preparedness**
- **Local early warning systems**

Data collection and monitoring systems

There are many different monitoring and data collection tools and indicators, including surveys, drug checking services, scientific research, treatment indicators, and supply indicators for detecting the use of synthetic opioids. Increased investment in toxicological analysis provides a better understanding of drug trends. If the use of synthetic opioids increases in Europe, investing in enhanced monitoring and response capacity is crucial.

- Countries should invest in more scientific research on NPS and online drug markets and include synthetic opioids as a distinct category in surveys.
- There is a need for coordinated and comprehensive monitoring (with multiple sources and multi-sectoral input) of the availability and use of NPS, including SO, in different populations.
- Monitoring the dark web, clear web, and drug fora is a cost-effective method for monitoring drug use, distribution, and other trends. These technologies can also be used as a tool for harm reduction.
- Drug-checking services can provide valuable information on new substances and other changes in the drug market. The faster new or dangerous substances are identified, the sooner the public can be warned.

Health systems preparedness

Health systems play a fundamental role in preparedness for a potential opioid crisis: the opioid crisis in North America has shown that in a large-scale opioid epidemic, the response from the drug field is not enough, but more general health system involvement and response is necessary. Health systems preparedness consists of the capability of the public health and health care systems to prevent, quickly respond to, and recover from health emergencies. It involves a coordinated and continuous process of planning and implementation that relies on measuring performance and taking corrective action.

- Data from emergency services and hospitals can help detect the emergence of harmful substances on the drug market and increases in the use of harmful substances. However, information on the use of synthetic opioids is generally not mentioned in the emergency department or hospital databases. This should be addressed by creating new databases and better coding practices such that specific substances can be entered in databases with specific codes.
- Take-Home Naloxone should be widely and easily available to people who use opioids, their family members, significant others, and relevant professionals.
- Nurses and non-medical staff should be allowed to provide naloxone to enhance the availability.
- Education and training to prevent overdoses should be provided at a low threshold.
- Naloxone should be readily available to people released from prison.

Safe opioid prescription practices

Given that the first wave of the opioid epidemic started with increased prescribing of opioids, there is also a clear need for continuous and systematic monitoring of the over-prescription of opioids and the non-medical use of prescription opioids in European countries. Therefore, there is a need for responsible prescribing of opioid medications, prescription drug monitoring programs, and state-run electronic databases are essential means to respond to the SO threat.

➢ Health initiatives regarding the (illegal) use of prescription opioids are necessary, as problematic use of prescription opioids is expected to increase.
➢ Electronic prescription monitoring can help to identify patients who may be misusing prescription opioids.
➢ Improving prescription guidelines to prevent patients from getting dependent on prescription opioids in the first place.
➢ Providing appropriate assistance to long-term patients to wean them off prescription opioids.
➢ There is a need to develop measures to prevent the possible illegal diversion of prescription opioids.

Law enforcement

In recent years the increase of NPS on the European drug market has forced the public authorities' to rapidly respond to the threat. Drugs purchased online can be transported across Europe and delivered to consumers by post and parcel services. This creates new challenges for law enforcement.

The internet has changed the drug markets and the darknet provides an ideal environment for the distribution of all types of illicit commodities, including drugs. In addition to the darknet, there are also other marketplaces where people trade illegal substances, such as the surface web, including social media platforms and instant messaging tools.

➢ Law enforcement should focus on supply reduction, including disruption of drug trafficking and trade controls, and improving surveillance on fentanils and other SOs.
➢ There is a need to invest more in inter-institutional cooperation and composing multidisciplinary teams for detection, investigation, and prosecution.
➢ Law enforcement should collaborate with relevant parties, such as post and courier services, mobile service providers, payment providers, and technology companies.
➢ Law enforcement should pay attention to fentanyl precursor chemicals.

Local early warning systems

Although national, European, and even global Early Warning Systems (EWS) exist for drugs, these systems would benefit from further improvements. It is essential that these systems are agile and responsive to the threats and not hindered by bureaucracy. Moreover, the right stakeholders who have first-hand information about new drugs need to contribute to the EWS. Furthermore, EWS should be designed to respond to localized outbreaks of harmful or adulterated (synthetic) opioids.

As part of EWS, there is also a need to develop and strengthen real-time alert protocols within European countries to communicate risks from dangerous synthetic opioids as soon as they are found in circulation. Depending on the severity and scope of the situation, the alerts may be local, regional, or national. Their target audiences may include people who use drugs, health workers, outreach workers, harm reduction services, law enforcement, and other relevant populations.

➢ Enhancing the rapid flow and exchange of information is key to national and international SO-preparedness.

- Rapid alert systems are excellent ways to inform and warn the public of potentially harmful substances. Rapid information sharing is particularly key among at-risk groups. Digital interventions, such as 'apps,' could be used for alerting people who use drugs about highly potent or potentially harmful substances or adulterants.
- There is a need for national databases and digital platforms for rapid data exchange. Moreover, the coordination, implementation, evaluation, and reporting of data should be enhanced.
- Information from users and low-threshold services such as drug consumption rooms should be used in a preparedness system. This can provide rapid on-site information about new or harmful synthetic opioids or bad batches of drugs. Platforms for the collection of user-level information may be considered.
- Information should be disseminated to the public and all relevant stakeholders, such as health care professionals, first responders, and law enforcement officers. Educating individuals who may get into contact with people who use synthetic opioids is important to enhance response capacity at the individual level.