

COUNCIL OF EUROPE
CONSEIL DE L' EUROPE

**CO-OPERATION GROUP TO COMBAT DRUG ABUSE
AND ILLICIT TRAFFICKING IN DRUGS
(POMPIDOU GROUP)**

Strasbourg, 25 October 1990

Restricted
P-PG/Epid (90) 10

13TH MEETING OF EPIDEMIOLOGY EXPERTS IN DRUG PROBLEMS

(Strasbourg, 27-30 November 1990)

Multi-City Study Sub-Group

UPDATE ON THE DRUG SITUATION IN DUBLIN

prepared by

Ms Aileen O'HARE
Sociologist

Health Research Board
Dublin

Introduction

This report provides an update of information contained in earlier reports of the “Multi-city Study of Drug Misuse” for the years 1986 and 1989. Information already presented showed the occurrence of an opiate epidemic in Dublin, which commenced in the late 1970s reaching a peak in 1983. Data since then particularly relating to the indicators, first treatment demand, viral hepatitis, police arrests and seizures of illicit drugs point to a reduction and stabilisation of drug misuse in the city. Heroin remains ‘the preferred drug of misuse.

1. First Treatment Demand

In the context of treatment provision in Dublin for drug misuse first treatment demand refers to first treatment received. Information for 1988 from the Drug Treatment Centre (the former National Drug Advisory and Treatment Centre which moved to new premises in October 1988) showed that 265 clients made a first treatment contact and 494 a re-contact representing rates of 0.7 and 1.3 respectively per 1,000 of the population aged 15-39. Fifty-four percent of first contacts were opiate/opioid misusers and 91% of re-contacts. The first treatment demand figure for 1988 of 265 represents an annual decrease from a high of 650 in 1983, the year in which the heroin epidemic in Dublin peaked. The re-contact figure for 1988 has likewise stabilised at a lower level. While heroin remained the drug of choice heroin substitutes in tablet form, such as, dihydrocodeine and buprenorphine were also widely misused.

For the first time ever two persons were treated at the Drug Treatment Centre during 1988 for crack misuse - both having acquired the habit in New York.

As a consequence of plans to re-organise their computer system treatment data for 1989 are not yet available from the Drug Treatment Centre. In their place data will be supplied from the newly established Dublin Drug Reporting System. This system commenced operation in August 1989 as part of the Dublin/London Drug

Research Project. Information reported here refers to the period August to November 1989 and covers both persons in treatment when the project commenced on August 1st and those who entered treatment subsequently, providing unduplicated information for persons who received treatment for their drug misuse at specified centres in the catchment area. Two hundred and thirteen persons made a first ever contact for treatment for the four month period August to November 1989, of whom 148 or 69.5% reported that their primary drug of misuse was an opiate or opioid. Heroin again remained the drug of choice but morphine sulphate tablets replaced dihydrocodeine and buprenorphine in popularity. It is premature to draw conclusions from this figure of first ever contacts which if extrapolated from for a year's data would suggest a higher number of first ever contacts than reported previously. While the Drug Treatment Centre remains the primary and largest treatment centre in Dublin, the fact that an additional 19 centres are now participating in the reporting system will inevitably have an effect.

2. Hospital Admissions

Data have already been presented in earlier reports for general hospital discharges and psychiatric admissions, employing ICD 9 codes for primary and secondary diagnoses for drug psychosis, drug dependence and non-dependent abuse for Dublin city residents for the years 1981 to 1985. The rate per 1,000 for the catchment population aged 15-39 for both sexes was either 0.3 or 0.2 for the psychiatric admissions, while the range for the general hospital discharges was between 0.6 and 0.9. It was noted then that in-patient treatment, apart from detoxification, was not commonplace in Dublin for persons with drug-related problems and therefore hospital admissions could not be regarded as a useful indicator of drug activity.

When difficulties emerged concerning the collection of such in-patient information for the years 1986 and 1987 (the most recent available) regarding the coverage of the

available data and the cost in accessing them it was decided not to pursue the inclusion of such information here.

3. Viral Hepatitis

Results of HBsAg tests from drug misusers have been available from the Virus Reference Laboratory, University College Dublin since 1979. The rate for hepatitis B per 1,000 of the catchment population aged 15-39 rose from 0 in 1979 to peak in 1981, remaining on a plateau during 1982 and 1983 and declining since then.

Dr. A. Shattock who kindly supplies these data for the study has expressed problems associated with the high proportion of 'unknown' in the groups he studies. Following information gained from enquiries into the 'unknown' proportion for 1979 to 1983 inclusive has had the effect of increasing the numbers originally identified, for example, from 168 to 217 in 1981, but the trend remains the same. From 1984 to 1987 inclusive the data presented contain a substantial but unknown number of IVDU which pressure of work has so far precluded from further refinement.

There appears to have been a very substantial fall in the number of hepatitis B cases in recent years among IVDU caused, Dr. Shattock believes, by fear of HIV infection, but also possibly the result of not all new attenders at the Drug Treatment Centre being screened. The revised figures are as follows.

	1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989
N	14	42	217	168	165	98	91	74	85	13	18
Rates 1,000 pop. 15-39	0.0	0.1	0.6	0.5	0.4	0.3	0.2	0.2	0.2	0.0	0.1

4. Drug Related Deaths

The complete and accurate collection of information on drug-related deaths has so far not proved feasible in Dublin. An earlier approach in accessing such data requested the Central Statistics Office for a print out of deaths in the catchment area

with specified ICD 9 codes associated with drug deaths. This was discontinued as the principle behind that method of data collection in recording the underlying cause of death resulted in not all drug-related deaths being included. In recent years an annual list of deaths of drug users known to the former National Drug Advisory and Treatment Centre and to the Garda Drug Squad in Dublin was utilised. As the interest in drug-related deaths as an indicator of drug activity waned this liaison between the two institutions ceased. The source of information for 1988 and 1989 is the Dublin Garda Squad only. In 1988 the Gardai or police were aware of five such deaths in 1988. For 1989 the number was two.

5. Police Arrests

Information in Ireland relates to the number of persons charged, not those arrested for drug offences. The number of persons charged in the Dublin Metropolitan area peaked in 1983 (the year of the heroin epidemic) at 1,389 and has been declining since to reach a low of 904 in 1987. A slight increase has been occurring in the past two years showing 919 persons charged in 1988 and 1157 in 1989.

6. Imprisonment

Data are not routinely available for persons imprisoned in Ireland for drug offences. It is hoped that in the future this type of output will be made available for persons sentenced to imprisonment in the Dublin area. Findings from a study of drug abusers in Mountjoy prison - the only committal prison in Dublin - already reported on, showed a six fold increase in the proportion of male prisoners with a history of serious drug misuse from 1981 to 1986. It was also noted that only about 20% of the drug misusing offenders were sentenced for specifically drug related offences, most were serving sentences for one or another form of theft.

7. Seizures of Illicit Drugs

The total number of seizures of controlled drugs in 1988 showed an increase of 6% over 1987. There was a significant increase in the amount of cannabis resin seized. Seizures for heroin were up from 52g. in 1987 to 400g. in 1988; cocaine up from 30g. to 40g. for the same period. The most noted increase occurred in the seizures of narcotic analgesics. Many of these tablets, such as, dihydrocodeine and buprenorphine were readily available in the UK and Northern Ireland where they were bought for as little as 23p each and re-sold in Ireland for between IR£ 3 - 5 each. Both drugs mentioned are now on the controlled list in Ireland. It is interesting to note the association between the wide availability of these drugs and the 1988 treatment figures for their misuse.

In 1989 preliminary unpublished information shows a slight decrease in the amount of heroin seized. The figure for cocaine was a startling 3kg., but we already know that this figure represents two large seizures of the drug, which was not destined for the Irish market; only .7 of a gramme was seized on the Dublin streets. The seizure of over 20,000 morphine sulphate tablets (MSTs) representing one fifth of the amount stolen from a warehouse, clearly demonstrates the association between the availability of MSTs (sold on the streets for IR£20 each with a strength of 100mls) and their subsequent abuse - see section on first treatment demand. Likewise the seizure of 10,000 dihydrocodeine tablets known to have come from the North of Ireland highlights their availability and subsequent treatment for their misuse during 1989.

8. Price/Purity of Illicit Drugs

There is no change in the street price returned by the Garda Drug Squad for heroin, cannabis, cannabis resin and amphetamines for 1988 and 1989 from prices recorded for earlier years. The price for cocaine has recently been revised downward to between IR£ 100 - 150 per gramme. It is difficult, the police say, to come up with

an accurate street price for cocaine because so little is available on the streets. The price for all drugs in Dublin is very much in excess of that paid in other European cities which encourages users to buy their supplies from London and other UK city markets.

There was a slight, but not significant, increase in the purity of drugs analysed during 1988 over former years. Purity of heroin averaged 33%, cocaine 51% and amphetamines 18%.

The seizure of three kilos of cocaine during 1989 resulted in an increase in the average purity level of 80%.

9. Survey Data

The findings from the third phase of "A study of smoking, drinking and other drug use among Dublin post-primary school pupils" by Grube and Morgan should shortly be available. This phase addresses questions about the major factors that predict initiation and changes in smoking, drinking and other drug use.

The Methadone Maintenance Research Programme involving the Eastern Health Board and the Drug Treatment Centre which commenced in 1988 continues to make favourable progress.

A sample of 100 drug misusers with HIV was initially selected for the programme according to certain criteria - this number has now been expanded to 136. The objectives of the programme are:

- to achieve a diminution or cessation of IV drug use and to improve awareness by the drug misusers of their health status in relation to IV drug use.

Preliminary collaborative work has commenced between the AIDS Resource Centre and the Drug Treatment Centre regarding the provision of methadone. The

methadone provided is not a maintenance dose, rather a lower doseage but enough to enable selected clients to structure their day. It is also envisaged that this programme will prevent the use of dirty needles, mugging and other adverse consequences associated with the acquisition of illicit drugs.

10. Comments on AIDS

The following information provides some detail of AIDS and HIV cases on 12/4/89 and 12/4/90 respectively.

	1989		1990	
	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
Homosexuals/Bisexuals	34	39	54	38
IV drug users	30	34	49	34
Homosexual/Bisexual IVDU	5	6	7	5
Haemophiliacs	10	11	16	11
Heterosexuals	3	3	5	4
Babies born to IV drug users	4	5	7	5
Undetermined	<u>2</u>	<u>2</u>	<u>4</u>	<u>3</u>
	88	100	142	100

In April 1989 there had been 36 AIDS deaths, by April 1990 the number had risen to 61.

The total number of persons tested for HIV by 12/4/89 was

24,823,
814 tested positive
of whom 474 (58%) were IVDC.

Up to the same date 3/268 IVDU had been tested for HIV of whom 474 (15%) were positive.

The total number of persons tested for HIV by 12/4/90 was

33,971,
922 tested positive
of whom 528 (57%) were IVDU.

Up to the same date 3,850 IVDU had been tested for HIV of whom 528 (14%) were positive.