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January–March 2006

2006: priorities and budget

Underpinning the EMCDDA’s working framework for 2006 are key priorities outlined by the new Director on taking up his appointment. These are to improve the scientific quality of the Centre’s work and outputs; to enhance its scientific credibility; to provide leadership and apply good management practice; and to build and improve partnerships.

This year sees the completion of the 2004–2006 three-year work programme (1). The identification of high-priority activity areas took into account the assessment of the EMCDDA’s operational activities carried out by Management Board members during 2005.

The development of the electronic data processing tool (EDPT) is the central priority in 2006. This project aims to reorganise and rationalise the data collection process by better exploiting the potential of the Internet. It will also address how the Reitox national focal points provide their data to the EMCDDA as well as how the information is stored, retrieved, analysed and disseminated.

In parallel, maintaining and developing the existing instruments and mechanisms for data collection and analysis remains key. Continued attention will be paid to ensuring that the new Member States are fully included in EMCDDA activities and that the candidate countries receive the necessary preparatory support.

Improving data reporting and dissemination continues to be a core priority. For 2006, the newly established scientific coordination mechanism has elaborated five strategic goals to improve efficiency, outputs, tools and focus in the EMCDDA’s scientific work.

The EU action plan (2005–2008) explicitly recognises the value of the EMCDDA’s annual reporting exercise. In 2006, some aspects of the Centre’s work will be fine-tuned to align better to the needs of the plan. The EMCDDA will also assist the Commission in the first progress review of its implementation.

A budget of €12.1 million has been adopted for 2006.

(1) The 2006 work programme is available at: http://www.emcdda.eu.int/?nnodeid=378

Portuguese President visits EMCDDA

His Excellency the President of the Portuguese Republic, Mr Jorge Sampaio, visited the EMCDDA on 21 December for an insight into the latest trends and developments in the drug situation in Europe and in Portugal in particular.

Meeting with EMCDDA Chairman Marcel Reimen, Director Wolfgang Götz and the agency’s scientific staff, the President praised the important work of the agency in collecting, analysing and disseminating objective information on drugs in the European Union for the purpose of sound decision-making.

Commenting on the European and national drug situations, the President said: ‘The enlargement of the European Union has presented new challenges, new complexities, new borders and new drug prevalence patterns. To face these hurdles, decision-makers in Europe have now moved beyond responding to the problem in an ideological way, to formulating policies according to sound scientific bases, such as those offered by the EMCDDA’.

This was the President’s fourth visit to the EMCDDA. Previous visits took place in 1997 (EMCDDA Annual report launch) and in 1999, when he was accompanied by President Jacques Chirac of France and King Albert of the Belgians.

For a news release, please see http://www.emcdda.eu.int/?nnodeid=875
Drug situation

International meeting on drugs and driving

A conference focusing on the evaluation of instruments for testing those driving under the influence of drugs was held in Baltimore, USA from 5–6 December. Attended by some 50 professionals from Europe and the USA, the meeting was organised by the Walsh Group (http://www.walshgroup.org/) with the support of the National Institute on Drug Abuse (NIDA) (http://www.nida.nih.gov/). It presented findings from the Rosita-2 project (see article on this page).

Results highlighted related to: an analysis of the sensitivity and specificity of several roadside tests; an evaluation of different drug-testing instruments; and a comparison of oral fluid tests versus blood analysis.

Linda Montanari and Alain Verstraete

Rosita-2, a study on roadside drug testing

Rosita-2 (RoadSide Testing Assessment) is a joint EU–US project designed to evaluate on-site roadside drug-testing devices (http://www.rosita.org). Conducted in five EU countries (Belgium, Finland, France, Germany and Spain), Norway and four US states (Florida, Utah, Washington and Wisconsin), the study aims to evaluate the performance of 10 different saliva-based testing devices.

In comparison with the results of Rosita-1, carried out five years ago, the findings from Rosita-2 show an improvement in the reliability of the devices and a more acceptable level of specificity of the devices (i.e. few false positive results were recorded).

On the downside, 30% or more of the devices tested failed to give any result. Sensitivity to cannabis was particularly poor. Even the most sensitive devices could detect only 30–50 ng/ml of tetrahydrocannabinol (THC), the active ingredient in cannabis, which corresponds to 1–2 hours after last use. To be effective, a detection limit of 1–2 ng/ml of THC in the saliva would be needed. The final results of the project will be submitted to the European Commission in March 2006.

Alain Verstraete, Ghent University,
Co-ordinator of the EU part of Rosita-2

Promoting the analysis of data on drug-related deaths

Promoting the analysis of data on drug-related deaths, following several years of research into reporting procedures and methodology (1), was the focus of the annual EMCDDA expert group meeting on this key indicator held in Lisbon from 24–25 November.

The experts stressed the importance of making full use of existing data on this issue for public health purposes and stressed the need to link epidemiological data with the planning and evaluation of interventions and policies. They also underlined the need to view drug-related mortality in a broader perspective – e.g. in connection with conditions such as mental ill-health – and in the context of youth mortality, since deaths in this age group are often due to external causes, such as accidents, overdoses, and suicides.

A thematic workshop aimed to estimate the total burden of drug-related mortality, while a further session reviewed countries’ progress in assessing overall mortality among drug users via mortality cohort studies.

The analyses presented confirmed that drug-related mortality is a major cause of death among young European adults, accounting for 10–23% of all deaths in 15–49 year-olds in six European cities (based on cohort studies). In addition, a preliminary analysis showed that reported acute drug-related deaths (overdoses) account for around 3–10% of all deaths in most EU countries (14 out of 24 with information).

In conclusion, the participants emphasised the need to make further progress in the analysis of drug-related deaths by crossing information with that of mortality studies, and with data from other indicators, such as prevalence estimations or demand for treatment.

Julian Vicente

(1) Among the results of these efforts is a European standard protocol and case definition of drug-related deaths (http://www.emcdda.eu.int/?nodeid=1419).
Responses

Reitox Academy on drug prevention

Experts and policy-makers from some 30 European countries met at the EMCDDA from 13–15 December to explore the issue of drug prevention in hard-to-reach and high-risk groups. The meeting – the latest training course in the agency’s Reitox Academy programme – discussed new developments and the state of the art of ‘selective prevention’ in the European Union (1). One of the aims of selective prevention is to engage proactively with vulnerable communities, families and young people before members of these groups need to resort to drug treatment services (2).

The Academy was followed by a three-day conference on drug addiction prevention in the EU, co-organised by the EUDAP project (http://www.eudap.net) and the EMCDDA. The focus of this event was the effectiveness of school-based programmes in preventing substance misuse.

Funded by the European Commission, the EUDAP project, involving 7000 students, was implemented and cross-evaluated in 7 countries, 9 regional centres and 143 schools. The trial was presented in the form of the ‘Unplugged’ school programme, delivered by teachers as a classroom exercise and as activities involving peers and parents.

Components included: developing interpersonal skills and normative beliefs (realistic information on the drug use of peers); strengthening intrapersonal skills (coping, problem-solving); and improving knowledge on the risks of different substances.

EUDAP found that students in the trial had a 26% lower probability of smoking daily than the control group, a 35% lower probability of being frequently drunk, and a 23% lower probability of using cannabis. Detailed results will be continuously uploaded on the EUDAP website over the coming months.

Gregor Burkhart

Romanian training course on treatment demand data

Collecting and analysing data on the demand for drug treatment was the focus of a training seminar held by the EMCDDA and the Romanian national focal point in Sinaia from 13–14 December. Organised in the framework of the European Commission’s Phare programme (http://europa.eu.int/comm/enlargement/pas/phare/), the course brought together 40 professionals from the country’s drug treatment centres.

The aim of the seminar was to present a new national reporting system on individuals in treatment for drug use based on an electronic form submitted by treatment centres to the national focal point. By means of a personal anonymous code, double counting is avoided at national level and the client is followed throughout the treatment process. The reporting system fully respects European standards, such as the EMCDDA–Pompidou Group Treatment Demand Indicator Protocol relating to those in drug treatment in Europe (see http://www.emcdda.eu.int/?nnodeid=1420).

Linda Montanari

Database on health in prisons

The EMCDDA and the World Health Organisation (WHO) – Europe Division have joined forces to build a database on health issues in European prisons. The joint database, which will be accessible on the organisations’ websites by July 2006, aims to draw attention to serious health problems prevalent in these institutions, in particular extensive drug use.

The first step in this initiative is the ‘Inventory of social and health policies, measures and actions concerning drug users in prisons in the newly incorporated Member States of the EU’. The recently completed inventory, drawn up by the Scientific Institute of the German Medical Association (VIAD) in cooperation with the EMCDDA and the WHO – Europe Division, contains information on issues such as: prison demographics and capacity; the legal status of inmates; the influx of prisoners; and the profile of prison staff (see http://www.emcdda.eu.int/?nnodeid=2721).

Also presented in the inventory are data collected for the first time at EU level on the epidemiology of infectious diseases in prison settings (e.g. newly diagnosed cases of HIV; incidence rates of AIDS, hepatitis, tuberculosis and sexually transmitted diseases). The inventory also covers mental health indicators (e.g. ratios of suicide, homicide, self-inflicted injury) and presents data on the monitoring of interventions in this setting.

Petra Paula Merino

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(1) The EU drugs action plan (2005–2008) calls on countries to ‘set up, develop and improve selective prevention’ and ‘develop and improve prevention programmes for selected target groups (e.g. socially excluded children and families at risk)’. For more on ‘selective prevention’ see http://www.emcdda.eu.int/?nnodeid=1569

(2) For example see findings of the US National cross-site evaluation of high-risk programmes (http://www.health.org/govpubs/FO36/).
Drug dependence and psychological and somatic co-morbidity – especially infectious diseases such as HIV/AIDS, hepatitis and tuberculosis – affect a high proportion of the EU prison population and pose a major challenge to prison systems all over Europe.

The ‘First European Conference on Health Promotion in Prisons’ (October 2004) highlighted the important public health issues posed by prison settings and placed the complex issue of prisoner healthcare and the health burden of prison staff higher on the political and technical agenda.

A final report is now available at http://www.wiad.de/aktuelles/geschaft/Doku.pdf. It provides a detailed record of the conference proceedings including the results of working groups covering: health of female prisoners; occupational health promotion; HIV/AIDS and hepatitis prevention in prisons; and future models for care in prison.

Publisher: Deutsche AIDS Hilfe, Scientific Institute of the German Medical Association (WIAD) and akzept
Language: German
Date: May 2005
ISBN: 3-930425-58-0
Price: free of charge
Ordering information: Caren Weilandt, ENDIPP, Bonn, Germany
caren.weilandt@wiad.de

The Caracas meeting brought together drug experts and representatives from over 30 countries

The Venezuelan anti-drugs commission (CONACUID) hosted the first international meeting of drug observatories in Caracas from 28–30 November bringing together representatives from the European Union (EU), Latin America and the Caribbean (LAC) (http://www.conacuid.gob.ve/Evento_ovd.htm). The meeting took place in the framework of the EU-LAC cooperation and coordination mechanism on drugs and was chaired by Costa Rica and the United Kingdom.

The Caracas meeting, organised with the support of the UK Presidency of the EU and with financial backing from the European Commission, brought together participants from over 30 countries. Also present were representatives from European and international organisations and agencies, including the European Commission and its delegations in Venezuela and Peru, the EMCDDA and the Inter-American Drug Abuse Control Commission (CICAD, see also article on p. 5).

Presentations and discussions covered a wide range of issues related to the role and the functioning of drug observatories, such as: strategic models for drug observatories (e.g. minimum institutional requirements, tasks); the monitoring of the drug phenomenon in the framework of anti-drug policies; data collection, processing and analysis (e.g. sources, networks, methodologies, indicators); and the role of the observatories in evaluating and disseminating information.

Representatives from the EMCDDA and 11 Reitox national focal points participated in the event where they shared for the first time with other regions their experiences in running a national observatory. As one of the EU participants stated: ‘The meeting made us appreciate the significant results and achievements of the Reitox network to date’.

The exchange of best practice in establishing and operating drug monitoring centres was considered the most beneficial aspect of the event by participants.

Alexis Goosdeel
**Enlargement**

### Drug use in Serbia and Montenegro

Five EU agencies, among them the EMCDDA, were selected in 2003 to open their doors to participation from the countries of the Western Balkans (1). In this context, the Thessaloniki-based European Agency for Reconstruction (EAR) is managing an EU-funded project to assess the extent of drug use in Serbia and Montenegro (see the EAR’s website for more details: http://www.ear.eu.int/home/default.htm).

The project will be completed in 2006 and is expected to result in the first overview of drug use in Serbia and Montenegro. The EMCDDA attended a project workshop in the Serbian capital on 30 November, where it delivered a presentation on the EU drugs strategy 2005–2012 and perspectives for future cooperation with Serbia and Montenegro in the drugs field.

Experts participating in the project presented at the workshop their assessment of existing data and studies on drug use, treatment, prevention and policy in the country. Preliminary data were also revealed following a school survey launched in October 2005 in the cities Belgrade, Nis and Novi Sad. This survey, which applied tools developed by the European Survey Project on Alcohol and other Drugs (ESPAD), reveals that 13% of Serbian 16-year-old students have ever used cannabis and 12% have ever used tranquillisers or sedatives. Also emerging are signs that heroin use has been increasing in Serbia and Montenegro in recent years which will challenge those currently developing national supply- and demand-reduction initiatives.

Jennifer Hillebrand

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**Partners**

### Exploring inter-observatory cooperation in the Western hemisphere

Implementing an Inter-American Drug Observatory work programme was high on the agenda at the 38th regular session of the Inter-American Drug Abuse Control Commission (CICAD) held in Washington DC from 6–9 December. CICAD is a specialised Agency of the Organisation of American States (OAS) (http://www.cicad.oas.org). Delegates also debated how best to implement the Multilateral Evaluation Mechanism (MEM), a system set up in 1998 to assess the drug situation in all 35 OAS Member States. The purpose of the MEM is to strengthen mutual confidence, dialogue and hemispheric cooperation on drugs in order to deal with the problem more effectively.

In addition to representatives from the CICAD Member States, delegates from China, France, Italy and the Russian Federation attended the meeting as permanent observer missions to the OAS. A further 18 participants from international organisations and agencies were also present, including the EMCDDA, who made a presentation underlying the importance of increasing information exchange between both agencies at international forums. At the end of the meeting Bolivia and Brazil were elected respectively as CICAD chair and vice-chair for the next period of sessions. A full meeting report is available at http://www.cicad.oas.org/EN/Assemblies/cicad38/00index.asp

Ignacio Vázquez Molini

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**Drugs-Lex**

### New French study on drugs and driving

In November 2005, a French study on the issue of drugs and driving was published in the *British Medical Journal*. The purpose of the study was to evaluate the relative risk of being responsible for a fatal car crash while driving under the influence of cannabis. This was achieved by studying the total number of fatal crashes where drivers tested positive for cannabis and then comparing them to the driving population as a whole.

The study was launched in October 2003 following the adoption by the French government of a new law relating to driving under the influence of substances or plants classified as drugs (1). The study concludes that the risk of being responsible for a fatal car accident increases threefold when driving under the influence of cannabis. However, it reveals that the proportion of fatal car crashes attributable to cannabis use is significantly lower (2.5%) than that associated with alcohol (28.6%).

Driving under the influence of psychoactive substances is a hot topic in many EU Member States. The European Union drugs action plan (2005–2008) also stresses the crucial importance of undertaking work related to driving under the influence of alcohol, drugs and medicines.

In November 2003, the Council of the European Union adopted a Resolution on combating the impact of psychoactive substance use on road accidents. Meanwhile the EMCDDA is collaborating with the Pompidou Group of the Council of Europe and will update its legal report (2) on this issue in the coming months.

Finally, the EMCDDA will also publish a selected issue on drugs and driving in its Annual report 2007.

Cécile Martel

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(2) Loi n° 2003-87, 3.2.2003, ‘relative à la conduite sous l’influence de substances ou plantes classées comme stupéfiants’

(2) See http://eldd.emcdda.eu.int/index.cfm?fuse action=public.attachment download&nnodeid=9938
Reitox

Focal points discuss 2006 work programme

Introducing a lighter and more resource-efficient reporting cycle from 2007 onwards was one of the objectives set at the latest Heads of focal point meeting convened in Lisbon from 16–18 November.

At the meeting, the EMCDDA informed the focal points of its intention to revise a number of the existing reporting tools in the course of 2006, in particular some of the structured questionnaires introduced in 2004 to collect information in the field of demand reduction. Specifically the tools will start being revised in order to further improve the information collection process in this field.

The meeting also gave the focal points the chance to air their views on issues including the draft 2006 EMCDDA work programme, the guidelines for compiling their 2006 national reports and the newly revised organigramme presented by the EMCDDA Director. Comments from the focal points, namely on the 2006 work programme, were taken into account ahead of the January Management Board meeting where the programme was adopted (see p. 1).

Frédéric Denecker

New psychoactive substances

EMCDDA and Europol present joint report on mCPP

In late 2004 and throughout 2005, a new psychoactive substance, 1-(3-chlorophenyl)piperazine (mCPP), was increasingly found in recreational settings in most EU Member States, largely sold under the guise of the popular drug ecstasy. Although little evidence was available during that period on the public health or social risks of mCPP, 19 Member States and Norway reported numerous seizures.

In line with Step 1 (Information exchange/early-warning) of the 2005 ‘Council decision on information exchange, risk assessment and control of new psychoactive substances’ (1), data on the use and risks of mCPP were collected through the Reitox national focal points and the Europol national units. Meanwhile the European Medicines Agency (EMEA) collected information on whether or not the drug was used to manufacture legal medicinal products. An EMCDDA–Europol joint report on mCPP was drawn up in October 2005 on the basis of these findings (2).

One of the innovations of the Council decision is that, unlike the Joint action on new synthetic drugs, which it replaced in May 2005, it provides for the collection and exchange of information (but not risk assessment and control procedures) on medicinal products used illegitimately. It stipulates that no risk assessment shall be carried out on a new psychoactive substance if this substance is used to manufacture an authorised medicinal product.

Based on evidence from the EMEA that mCPP is used to manufacture at least one authorised medicinal product (trazadone, a prescription anti-depressant drug), the joint report underlines that no risk assessment can be carried out on mCPP. At this point, action now moves out of the scope of the Council decision and into the realm of an assessment by the European Commission and the EMEA, in close cooperation with the EMCDDA, of the need for further action on this psychoactive substance.

Roumen Sedelov

(2) The joint report can be downloaded from http://www.emcdda.eu.int/?nnodeid=1346
Products and services

Prevention and Evaluation Resources Kit

Recently launched on the EMCDDA website is the Prevention and Evaluation Resources Kit (PERK), a multilingual tool offering practical information on evidence-based principles of drug prevention and useful tips on the planning and evaluation of prevention programmes (http://www.emcdda.eu.int/?nnodeid=9930).

Targeting drug prevention professionals and local decision-makers across the European Union, PERK promotes the notion that the planning and evaluation of drug prevention activities are closely intertwined. It therefore helps users not only to define and establish working hypotheses (planning) but also to control for factors such as social, normative and cultural contexts (evaluation). Similarly it encourages the user evaluating the results of an intervention to take into account the contextual factors such as culture, social norms, etc.

Across the EU, there is now a common understanding of what constitutes good prevention work, both in terms of project design and content. PERK offers users a guided tour to this knowledge base through the provision of: research articles (abstracts); grey literature (reports in pdf format); examples of good practice [selected from EDDRA – http://eddra.emcdda.eu.int]; evaluation indicators [selected from the Evaluation Instruments Bank – http://eib.emcdda.eu.int]; and links to important sources of science-based prevention work, such as the UK’s National Collaborating Centre for Drug Prevention (NCCDP). The resource kit offers suggestions on how to design and evaluate an intervention, in line with the project setting and available resources. It is hoped that PERK will help Member States develop quality standards for prevention projects as well as training possibilities for those working in the prevention field.

Gregor Burkhart

EMCDDA Chairman and Director visit Baltic States

EMCDDA Chairman Marcel Reimen and Director Wolfgang Götz paid an official visit to Estonia, Latvia and Lithuania from 12–16 December where they met with national leaders and high-level officials working in the field of drugs. The purpose of the visit was to allow an exchange of views with the authorities in the three countries about the role of the EMCDDA and the countries’ participation in the Management Board and activities of the Centre. It was also an occasion to promote the recently published 2005 Annual report on the state of the drugs problem in Europe and to highlight the national drug situation in the European context.

In Lithuania, the Chairman and Director met with Prime Minister Algirdas Brazauskas and Minister of Health Zilvinas Padaiga and participated in a press conference on ‘Lithuanian drug policy in the context of the European Union’ at the Parliament.

In Latvia, in the presence of Prime Minister Aigars Kalvitis and Minister of Justice Solvita Abolins, the EMCDDA delegates presented the 2005 Annual report at a meeting of the governmental coordination council on drug control and the restriction of drug addiction.

Finally in Estonia, the Director was interviewed for television, and this was followed by meetings with Minister of Social Affairs, Jaak Aab, with the parliamentary committee for EU affairs, and with staff at the national focal point.

Monika Blum

Resources

Useful materials and events on the drugs issue

‘Tackling Drugs. Changing Lives’

The UK Home Office has recently launched a new and updated set of resources to help local drug action teams communicate to local communities and media the impact of the UK drug strategy. They include:

• a communication toolkit ‘Tackling Drugs. Changing Lives’, a campaign pack providing facts and figures and tips on how to run a local campaign;
• an image library, carrying over 250 specially commissioned photographs; and
• a new improved website (http://www.drugs.gov.uk), and a new ‘Talking shop’ user forum.

For more information see http://www.drugs.gov.uk/communications-and-campaigns/

European conference on drugs in prison

The ‘9th European conference on drugs and infections prevention in prison’ will be held in Ljubljana, Slovenia, from 5–7 October 2006 (http://ljubljana2006.endipp.net). For information contact cbrentari@cranston.org.uk Tel. (32) 2 538 01 71

Organisations wishing to publicise their newsletters, magazines, websites, CD-ROMs or any other resources are invited to contact David.Penny@emcdda.eu.int
EMCDDA meetings
30 January: Working group meeting on treatment demand indicator – continuous treatments, Lisbon.
9–10 February: EMCDDA Scientific Committee, Lisbon.

External meetings
16–18 January: 2nd NERUDA workshop, Helsinki.
10–11 March: Workshop on hepatitis C and drug use, Central and eastern European harm reduction network and AIDS action and integration project, Vilnius.
16–18 March: 2nd expert meeting of the Correlation network, Krakow.

EU meetings
10 January: Horizontal working party on drugs, Brussels.
16–17 February: EU drug coordinators meeting, Innsbruck.
23 February: EU–LAC technical committee, Brussels.
24 February: Horizontal working party on drugs, Brussels.
6–7 March: EU–LAC High-level meeting of the Cooperation and Coordination Mechanism on Drugs, Vienna.

UN meetings
13–17 March: 49th meeting of the Commission on Narcotic Drugs (CND).

High-level meetings
EU drug coordinators favour thematic debates

National drug coordinators from the EU Member States met in Brussels on 7 December to take stock of EU activities in the field of drugs carried out under the six-month UK Presidency (July–December 2005).

The coordinators expressed their support for the new approach, introduced by the UK Presidency, to address key drug policy issues in ‘thematic debates’ at the monthly meetings of the Horizontal working party on drugs (HGD) of the Council. The themes discussed were: ‘strengthening the EU evidence base’; ‘improving coordination between the HDG and the Customs cooperation working group’; ‘involving civil society’; ‘selective interventions aimed at young people’, and ‘intelligence-led drugs law enforcement’.

The progress of ongoing EU activities in the field of drugs with countries outside the Union was also addressed over the six months and important steps were taken to strengthen ties between the EU and Afghanistan, Iran, Russia, Turkey and the USA.

Danilo Ballotta
For more on the debates see http://register.consilium.eu.int/pdf/en/05/st15/st15776.en05.pdf. The thematic debate approach will be continued under the Austrian Presidency (January–June 2006).

Italian national conference on drugs

International experts and high-level Italian officials working in the field of drugs met in Palermo, Sicily, from 5–7 December for the IV National drugs conference organised by the Italian government (IV Conferenza nazionale sui problemi connessi alla diffusione delle sostanze stupefacenti e psicotrope).

The three-day conference, entitled ‘Building together’ (‘Insieme per costruire’), included interventions by, among others, EMCDDA Director Wolfgang Goetz, Executive Director of the United Nations Office on Drugs and Crime (UNODC) Antonio Maria Costa, Italian Foreign Affairs Minister Gianfranco Fini, and President of the Italian Parliament Pier Ferdinando Casini. Issues discussed at the event included: international cooperation against drug trafficking; drugs and prison; prevention; communication and information; comorbidity; new drug use patterns; treatment; and services for drug addicts. Also addressed were the EU drugs strategy (2005–2008) and current Italian drug legislation. The conclusions are available at http://www.politicheantidroga.it

Danilo Ballotta