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Drugnet Europe

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Drug problems have no age limits

'Substance use is generally associated with young people, but such problems have no age limits'. The statement comes in the latest edition of the EMCDDA's *Drugs in focus* policy briefing series, published on 3 April. Entitled 'Substance use among older adults: a neglected problem', it says: 'forecasts for the coming years are troubling'.

Europe is experiencing a pronounced ageing of its population, over a quarter of which will be aged 65 or over by 2028. According to the briefing: 'The number of older people with substance-use problems, or requiring treatment for a substance-use disorder, is estimated to more than double between 2001 and 2020'.

Illicit drug use among older adults may be less common than among young people, but its prevalence is rising, says the briefing. In Europe, between 2002 and 2005, the proportion of patients aged 40 or over in treatment for opiate problems more than doubled (from 8.6 % to 17.6 %). And estimates from the United States suggest that the number of over-50s needing treatment for drug problems could rise by up to 300 % between 2001 and 2020.

Commenting on the issue, EMCDDA Director Wolfgang Götz said: 'The increasing number of older adults with substance-use problems will place new and greater demands on treatment services. Programmes that are accustomed to dealing mainly with young populations will need to adapt to meet the needs of this older group'.

Ageing may lead to a number of problems that can put a person at risk of substance use, says the paper. These include: social problems (financial worries); psychological problems (depression) and physical problems (painful medical conditions).

Concerns outlined in the briefing include the problem use by older adults of prescribed or over-the-counter medicines, which may be 'intentional or unintentional' and may vary in severity. The over-65s consume around one third of all prescribed drugs in Europe, often benzodiazepines and opiate-based painkillers. Older women are at a higher risk of prescription drug misuse than other groups, yet their problems often go undetected.



Photo: istockphoto

The increasing number of older adults with substance-use problems will place new and greater demands on treatment services.

Report: emerging use of GBL

Concerns are increasing in the EU about the use of chemicals employed in the manufacture of the recreational drug GHB. This is according to the EMCDDA's new report *GHB and its precursor GBL: an emerging trend case study*, published on 17 March.

GHB (gamma-hydroxybutyric acid), often known as 'liquid ecstasy', surfaced on the recreational nightlife scene in parts of Europe in the 1990s, although its non-medical use began a decade earlier among body-builders consuming the drug for its hormone-growth effects. The EMCDDA and partners carried out a risk assessment of GHB in 2000, and the drug was placed under international control by the United Nations in March 2001.

According to the report: 'The new controls rapidly curtailed the previously open sale of GHB', but there are now concerns over the emergent use of its chemical precursor GBL (gamma-butyrolactone). GBL is easier to obtain and cheaper than many illicit drugs and is now being used and sold as a substitute for GHB. Unlike GHB, GBL and a second GHB precursor 1,4-BD (1,4-butanediol), are not controlled internationally.

Widely used in the chemical industry and commercially available, the two substances can be used to manufacture GHB with relative ease. But when ingested directly by the user, the precursors are also naturally converted in the body to GHB. There are already reports of direct consumption of GBL resulting in hospital emergency admissions, although to date there are no official reports relating to 1,4-BD.

See news release at <http://www.emcdda.europa.eu/?nnodeID=875>

Continued on page 8

April-June

2008

Drug situation

Estimating the total burden of drug-related mortality

The EMCDDA's key indicator on drug-related deaths collects information predominantly on drug-induced deaths (also described as poisonings or fatal overdoses). Increasingly, however, the EU Member States are supplementing this information with data from mortality studies of problem-drug-user cohorts that record all causes of death in these groups.



Several causes of death, besides fatal overdose, are found to be considerably higher in problem drug users than among their peers. These include diseases (e.g. HIV/AIDS, liver disease); trauma (e.g. accidents, homicide) and suicide. It was estimated that in the 1990s and early 2000s, 10–20 % of mortality among young adults in several European cities studied could be attributed, directly or indirectly, to opioid use ⁽¹⁾.

Two innovative approaches, applied to date in only a few studies, involve estimating the total burden of mortality related to drugs by:

- applying the information from cohort studies to national estimates of the prevalence of problem drug use ⁽²⁾; or
- estimating drug-attributable fractions ⁽³⁾ and applying them to general mortality registries.

Using these methods, the EMCDDA launched a project with Czech experts in 2007 to analyse data availability and the methodological possibilities for estimating the overall mortality of problem drug users in the EU. The project, running until the end of the year, will culminate in a report that will provide the basis for possible work on this issue at EU level in the future.

Danica Klemová and Julián Vicente

⁽¹⁾ Bargagli, A. M., Faggiano, F., Amato, L., Salamina, G. *et al.* (2006), 'VEdeTTE, a longitudinal study on effectiveness of treatments for heroin addiction in Italy: study protocol and characteristics of study population', *Substance use misuse* 41, pp. 1861–79.

⁽²⁾ Cruts, G., Buster, M., Vicente, J., Deerenberg, I. and Van Laar, M. (in press), 'Estimating the total mortality among problem drug users', *Substance use and misuse* 43.

⁽³⁾ The proportion of deaths due to different causes (e.g. AIDS, accidents) that could be attributed to problem drug use.

Towards new quality criteria for TDI data

New criteria for assessing the scientific quality of data obtained through the EMCDDA's treatment demand indicator (TDI) were proposed at a working group meeting held in Lisbon on 4 February. Attended by TDI experts from eight countries, the meeting included presentations on the quality tools currently used by the EMCDDA to assess TDI data as well as the results of an external project on assessing treatment data coverage. Also presented was the Dutch TDI data quality-control system.

The experts concluded that the evaluation of TDI data quality should be organised in two

categories: the assessment of activities relating to data collection on the one hand, and, on the other, the evaluation of the scientific quality of the data (validity, reliability, consistency).

The new criteria will be discussed in the coming months by a broader group of EMCDDA TDI experts and the national focal points as part of ongoing work to develop a new approach to quality assurance and the assessment of key indicator implementation.

Linda Montanari and Sandrine Sleiman

New challenges for mathematical and statistical modelling of HIV and HCV in IDUs

Injecting drug users (IDUs) not only drive blood-borne transmission of HIV and the hepatitis C virus (HCV) but are also likely to be driving sexual transmission of HIV in large parts of the world. Mathematical and statistical modelling techniques can provide important insights into these epidemiological processes and into the potential impact of responses and interventions. However, to date, they have been under-used.

In response, the European study group for mathematical modelling and epidemiological analysis of drug-related infectious diseases, set up by the EMCDDA in 2006, is currently exploring the potential areas in which to apply modelling techniques in the field of viral infections in IDUs. Among the first results of the group is a paper ⁽¹⁾ reviewing a selection of published modelling work relating to HIV and HCV in IDUs. The paper highlights recent developments in the epidemiology, diagnosis, treatment and prevention of these infections.

The authors found that a number of issues are changing the questions and decisions facing public health policy-makers who deal with drug-related infectious diseases. These include: new methods for diagnosing early HIV infection; new antiviral drugs for a more effective treatment of HIV, HBV and HCV; and new concepts in the design and surveillance of interventions for drug users. It is hoped that research that includes a mathematical modelling component will help policy-makers understand the impact of new diagnostic tools, new treatment options and combined intervention strategies on the epidemiology of viral infections in IDUs.

Mirjam Kretzschmar and Lucas Wiessing

⁽¹⁾ Kretzschmar, M. and Wiessing, L. (2008), 'New challenges for mathematical and statistical modelling of HIV and hepatitis C virus in IDUs', *AIDS* 2008, 22, pp. 1–10 (in press).

Responses

EMCDDA launches best practice portal

In the coming weeks, the EMCDDA will launch the first version of its Internet portal on best practice in the fields of drug-related prevention, treatment, harm reduction and social reintegration. Focusing on the topic of universal prevention, and based on reviews published since 2000, this first version presents evidence on the extent to which universal prevention interventions are effective.

The portal project was conceived to meet the needs of professionals, policy-makers and researchers. It offers an array of tools and standards designed to improve the quality of interventions and highlight examples of evaluated practice across Europe. Also available are links to further information sources and a glossary to help guide the user through the portal.

The portal is divided into four sections:

- evidence of efficacy;
- tools for evaluating practices;
- standards and guidelines for the implementation of practices; and
- examples of evaluated practices (Exchange on Drug Demand Reduction Action — EDDRA).

Evidence of how interventions work in real-life conditions can be found in the new edition of the EDDRA databank, now available through the portal. In 2007, EDDRA was reviewed and reclassified by the national EDDRA managers and by the EMCDDA in a move to improve the system's content and layout.

EDDRA is primarily designed to help professionals and policy-makers plan and implement interventions in response to drugs. The databank features examples of evaluated interventions in different countries and settings, thus helping to generate evidence of efficacy of demand-reduction projects.

www.emcdda.europa.eu/themes/best-practice

The EMCDDA's recast regulation, which entered into force in 2007, prioritises the provision of information on best practice in the EU Member States and the exchange of such practice between them. The current EU drugs action plan (2005–08) also calls for the 'effective dissemination of evaluated best practices'.

Jennifer Hillebrand

Expert meeting on indicated prevention

Specialists and programme developers in the field of indicated prevention met in Lisbon from 3–4 March to explore the practical implications of risk factor research. Indicated prevention aims to identify individuals who are exhibiting early signs of substance use, or preceding problem behaviours (risk factors), and to target them with special interventions ⁽¹⁾.

Although a relatively new field, it is one which is stimulating growing interest. Yet associated professionals, such as prevention workers, teachers and paediatricians, still know little about its theoretical foundations and the evidence base remains uncharted.

At the meeting, the EMCDDA and the University of Ulm ⁽²⁾ presented the findings of a forthcoming online literature review on indicated prevention (see p. 7). The review, compiled in 2007, aims to boost knowledge on the state-of-the-art of indicated prevention in the EU and to improve data collection for evaluating the EU drugs action plan (2005–08; targets 7 and 10) ⁽³⁾.

The meeting also allowed for discussion on the ways ahead in indicated prevention research, such as applying new neurobiological knowledge and better integrating the various sectors involved. Finally, examples of programmes that have had significant effects on reducing substance use, as well as on depression, delinquency and truancy in diverse settings (schools, hospital emergency rooms), were presented by participants from Germany, Spain, the Netherlands and the UK.

Gregor Burkhart

⁽¹⁾ For more, see <http://www.emcdda.europa.eu/?nnodelD=19259>. See *Drugnet Europe* No 58.

⁽²⁾ Contractor: The University of Ulm, Germany (*Klinik für Kinder- und Jugendpsychiatrie*).

⁽³⁾ Target 7: Improve coverage of, access to and effectiveness of drug-demand-reduction measures. Target 10: Improve methods for early detection of risk factors and early intervention.

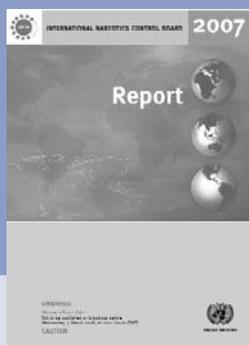
Further reading: http://ec.europa.eu/research/infocentre/article_en.cfm?id=/research/headlines/news/article_08_04_10_en.html&item=Infocentre&artid=6973



Indicated prevention aims to identify individuals who are exhibiting early signs of substance use, or preceding problem behaviours, and to target them with special interventions

Bookshelf

2007 INCB Annual report



Celebrities who violate drug laws should be made accountable for their offences, states the 2007 Annual report from the International Narcotics Control Board (INCB), launched in Vienna on 5 March. Celebrity drug offenders can profoundly influence public attitudes, values and behaviour towards drug abuse, the report says, particularly among young people, 'who have not yet taken a firm and fully informed position on drug issues'. When celebrities use drugs, they are breaking the law, adds the INCB. The perception that they are being treated more leniently than others may breed public cynicism, and may lead to young people adopting a more permissive attitude towards illicit drugs.

The INCB calls on governments to apply the law in equal measure when prosecuting drug offenders. Some countries still invest too much effort in tackling low-level offenders and not enough in identifying, dismantling and punishing those who control or organise major drug trafficking activities, it says. Other findings of the report include: a 17 % rise in illicit opium poppy cultivation in 2007 in Afghanistan; and increased cultivation of the coca bush in Peru and Bolivia, as crop-eradication programmes reduce production in Colombia.

Publisher: United Nations (INCB)

Languages: Arabic, Chinese, English, French, Russian and Spanish.

Date: 5 March 2008 • **Price:** USD 30

ISBN: 978-92-1-148224-9

Ordering information: <http://unp.un.org>

Press releases: http://www.incb.org/incb/press_releases.html

The EMCDDA is responsible for the selection of materials for the Bookshelf and for the text presented. However, responsibility for the content of these materials and the opinions expressed therein lies with the authors themselves.

Feature

Monitoring drug-facilitated sexual assault

Over the past 10 years, there has been a rise in the number of reports of drugs and alcohol being used to immobilise victims for the purpose of sexual assault. Population surveys carried out in six EU countries suggest that up to 20 % of women experience some form of sexual assault in their adult lifetime (1).

A lack of appropriate monitoring systems means that the full scale of drug-facilitated sexual assault (DFSA) remains unknown. In a study marking International Women's Day (8 March), the EMCDDA named better monitoring of the phenomenon as an 'essential first step in addressing the problem'.



Photo: istockphoto

A raft of new measures is needed to reduce the incidence of DFSA and to impact on conviction rates

Alcohol still the main hazard

According to the study, media reports of 'date rape' and 'drink spiking' have paid disproportionate attention to scenarios in which GHB (see p. 1) and the benzodiazepine Rohypnol® have been used covertly to incapacitate potential victims. However, it states that alcohol is the central nervous system depressant most commonly associated with sexual opportunism and assault in Europe, followed by a range of prescription drugs, including benzodiazepines.

Forensic studies show that only a very small proportion of reported sexual assaults involve the covert use of GHB, often referred to as the 'date rape' drug. However, the narrow time window of detection for GHB (6–8 hours in blood; 10–18 hours in urine) means that forensic analysis and monitoring are impossible unless the alleged assault is reported, and samples collected and processed in a timely way.

Amidst public health concerns about the burgeoning binge-drinking culture in Europe, policy-makers across the EU are developing strategies to reduce hazardous alcohol use by both sexes in recreational settings where sexual assaults are most likely to take place.

Signs of change

Public attitude surveys show that stereotyping and victim blaming around sexual assault remain prevalent and entrenched. But according to the paper, there are 'important signs of change', with recent responses to DFSA challenging 'stereotypical attitudes to this type of crime'. These include a broader definition in the UK, which shifts blame away from the victim, and a recommendation from the Council of Europe to raise awareness on 'date-rape drugs' across Europe and to provide appropriate assistance to victims of sexual assault linked to such drugs.

The paper concludes that a raft of new measures is needed to reduce the incidence of DFSA and to impact on conviction rates. These include: a revision of sexual assault legislation; better methods of forensic analysis; improved training for criminal justice and hospital emergency staff; and pressure on pharmaceutical firms to alter products used in such assaults.

(1) 'Sexual assaults facilitated by drugs or alcohol' (EMCDDA, 2008), EMCDDA Technical data sheet.

<http://www.emcdda.europa.eu/?nmodelID=7291>. Feature article at: <http://www.emcdda.europa.eu/?nmodelID=410>

International

EU-LAC interregional city forum on public policies in drug treatment

The first EU-LAC interregional city forum on public policies in drug treatment was held in Santo Domingo (Dominican Republic) from 2–5 April, with the technical and organisational support of the Inter-American Drug Abuse Control Commission (CICAD). The aim of the event was to help improve policy decisions at city level on the quality and coverage of drug treatment and rehabilitation services in the EU-LAC area. It was held in the framework of the EU-LAC drug treatment city partnerships project, funded by the European Commission (1).

The three main themes of the conference, taken up in plenary, were:

- public policies in drug treatment;
- treatment modalities and treatment targeting specific populations; and
- alternatives to incarceration and drug courts.

Discussion panels explored a range of issues including: inter-city cooperation; the relationship between national and local policies; measuring drug-treatment demand; and training and best practice. In a panel on drug-treatment policy and measuring demand, the EMCDDA presented its treatment demand indicator (TDI), the instrument employed in Europe to measure demand, track trends and identify the treatment needs and profiles of drug clients.

The conclusions of the meeting are available at www.eulacdrugs.org. Among others, the event resulted in the creation of twinning projects between cities on both sides of the Atlantic to help them mutually reinforce their knowledge, skills and experience in the three areas identified by the conference. Thematic meetings will be organised over the next two years and the next EU-LAC city forum will take place in Lugo (Spain) in 2010.

Linda Montanari

(1) For further information see: <http://www.eulacdrugs.org/eulac>; <http://www.cicad.oas.org>
http://www.cicad.oas.org/reduccion_demanda/eng/eu-cicad/principal.asp
EU-LAC: cooperation between the European Union and Latin America and the Caribbean.

Partners

Online research register

In 2007, the Pompidou Group of the Council of Europe, in association with the EMCDDA, set up an online register of current research on drugs to improve the exchange of information in this field. Following a pilot phase and user feedback, version 2 was launched on 3 April offering improved services.

The register enables users to: identify who does what in drugs research in Europe; trace individual researchers or research institutions and funding agencies; and obtain and register information on current projects.

By using a password, users can: introduce their own projects and update them; submit calls for tender and appeal for cooperation and partnerships.

Access the register at
<http://www.pgregister.coe.int/pompidou>
Feedback by e-mail to register-PG@coe.int



Photo: istockphoto

Drugs-Lex

BZP to be placed under control across the EU

Europe responded on 3 March to concerns over the use of the stimulant drug BZP by subjecting it to 'control measures' across the EU Member States. The decision of the Council of the EU (1) was adopted in the final stage of the three-step procedure designed to respond to potentially threatening new psychoactive drugs in the EU (2).

The Council Decision was based on the findings of the formal risk-assessment report on BZP, produced in 2007 by the EMCDDA's Scientific Committee, with participation of additional experts from the European Commission, Europol and the European Medicines Agency (EMA). The report, submitted to the European Commission and the Council of the EU in

May 2007, examined the health and social risks of the drug as well as information on international trafficking and the involvement of organised crime.

The Council Decision states that: 'due to its stimulant properties, risk to health, the lack of medical benefits and following the precautionary principle, there is a need to control BZP', through measures 'appropriate to the relatively low risks of the substance'.

EU Member States are now called on to take, within one year of the decision, the necessary measures to submit BZP to: 'control measures' and 'criminal penalties' in line with their national laws. Eight EU Member States (Belgium, Denmark,

Estonia, Greece, Italy, Lithuania, Malta and Sweden) already control BZP under drug control or equivalent legislation and two (Spain and the Netherlands) regulate it under their medicine-related legislation. An EMCDDA risk-assessment publication on BZP is currently in preparation and will be printed before summer.

Roumen Sedefov

(1) See news release at
<http://www.emcdda.europa.eu/?nnodelD=875>

(2) Council Decision 2005/387/JHA of 10 May 2005 on the information exchange, risk assessment and control of new psychoactive substances (*Official Journal* L 127, 20.5.2005). See two-page leaflet explaining the three-step procedure at <http://www.emcdda.europa.eu/?nnodelD=17869>

Spotlight

NFP success stories on working with the media



Photo: istockphoto

At the EMCDDA Reitox Academy on relations with the media (see opposite), NFPs presented successful communication activities. Three of these 'success stories' are presented below.

Turkey: Broadcasting guidelines

Protecting TV viewers, particularly children, from undesirable audiovisual content is the focus of an ongoing project between the Turkish NFP and the National Radio and Television Supreme Council (RTÜK). A handbook has been published in Turkish on 'The role of the audiovisual media in drugs and drug use' which includes a set of 20 guidelines for consideration by broadcasters, screenwriters and producers when creating drug-related programmes.

Hungary: Specialised journal of pharmacies

Raising awareness of syringe vending opportunities in pharmacies, and of how sterile kits can prevent communicable diseases, is the focus of an ongoing communication activity of the Hungarian NFP. The target media is the official monthly journal of the Hungarian Chamber of Pharmacists and Hungarian Association of Private Pharmacists (*Pharmacy Magazine*). Articles prepared by the NFP have been published on the journal's website, providing facts on HCV infections among injecting drugs users and on the national availability of syringe exchange programmes.

Czech Republic: Drugs and TV

The Secretariat of the Czech Council of Drug Policy Coordination (including the NFP) was among the sponsors of an 'International discussion forum on drugs and TV', organised in 2007 by the Standing Commission for the media of the Czech Parliament and Corona Communications. A Czech–English publication, *Drugs and TV*, is now available with the results. hana.drhovska@cor.cz. ISBN 978-80-903954-1-1. <http://www.coronaseminars.cz/index-en.htm>.

NFP contacts available at:
<http://www.emcdda.europa.eu/?nnodeID=403>

Reitox

Reitox Academy on relations with the media

Adapting communications to today's media and building fruitful relationships with journalists were among the issues covered at the latest EMCDDA Reitox Academy on relations with the media held from 28–29 February in Bucharest. Organised in cooperation with the Romanian national focal point (NFP), the event was opened by Professor Dr Pavel Abraham, Member of the EMCDDA Management Board and Head of the national anti-drug agency.

The Academy was preceded by a half-day working session for Romanian journalists on the products and services of the EMCDDA and the Romanian NFP and on practical tips for covering drug stories. Here, perceptions of drugs in the media were explored, as were common mistakes in interpreting scientific material on drugs and difficulties in achieving responsible coverage on the issue.

The two-day Academy was organised around four sessions led by three experienced journalists (1) from the written press and TV and by EMCDDA staff. A reflective session on how coverage of drugs issues has evolved over the last decade set the scene and was complemented by hands-on sessions on working with TV and tailoring products to today's fast-moving media. The final session explored NFP communication 'success stories' (see Spotlight), including discussions on national events coinciding with the launch of the EMCDDA *Annual report*.



Photo: istockphoto

The working groups following the sessions were designed to generate practical checklists on: communicating responsibly on drugs (terminology, imagery, definitions); best practice for working with TV (tips for preparing, pitching and performing); adapting outputs to different media (targeted strategies); and organising national launches of the EMCDDA *Annual report* and/or NFP national report. These checklists will be compiled in a final report of the event and offered to the participants for consideration in their daily media-relations work.

(1) Dr Daniel Deckers, political editor at the *Frankfurter Allgemeine Zeitung*; Thomas Christou, technical director at the Cyprus Broadcasting Corporation (CyBC); and Alain Lallemand, foreign correspondent at *Le Soir*. Julie-Emilie Adès of the French NFP gave a presentation in the session for Romanian journalists.

EMCDDA conference

15 years of monitoring

In 2009, the EMCDDA will commemorate 15 years of monitoring the drug phenomenon in Europe. To mark the occasion, the agency will organise a high-level conference in Lisbon in the spring to reflect on past achievements and future challenges.

The objectives of the two-day event are to: reinforce relationships and increase collaboration between the agency and the research and expert community; and analyse how the field of research science communicates with that of policy. Europe's information needs and key concerns for the next decade will lie at the heart of the discussions.

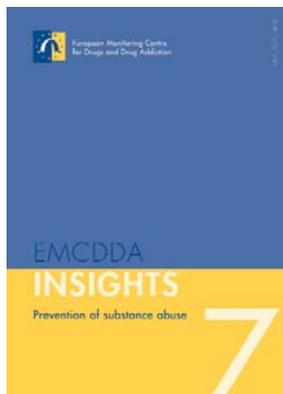
The event will bring together international organisations, EU institutions and experts active in the drugs field to share experience, knowledge and know-how. Targeted specifically at policy-makers, practitioners and researchers, this by-invitation event will combine plenary sessions and thematic breakout groups.

Maria Moreira

Products and services

EMCDDA Insights No 7

Prevention of substance abuse



This latest edition in the EMCDDA's Insights series provides information about best practice in drug prevention for all those working in the field, as well as those involved in planning and decision-making at European, national, regional and municipal level.

The publication is a translation of a German study commissioned by the Federal Centre for Health Education, Cologne. While, in some sections, reference is made in particular to Germany, the publication's conclusions are international and provide value for a pan-European and global readership. It is hoped that this publication will lead to a common European understanding of professional

standards in prevention work and will accelerate the development in Member States of quality standards for prevention projects and training requirements for prevention workers.

EMCDDA Insights, in print and downloadable in English at: <http://www.emcdda.europa.eu/publications/insights>

Online review of indicated prevention

An online review of international literature on the theory and evidence base of indicated prevention will be published in early summer. Entitled 'Preventing later substance abuse disorders in identified individuals during childhood and adolescence', the review summarises research results and places special emphasis on the expanding field of neurobiological knowledge on addiction. Also presented are existing indicated prevention programmes in the EU and recommendations for further steps.

Selected issue: drug-related public expenditure

Drug-related public expenditure in Europe is the title of the first of three EMCDDA Selected issues to be published in 2008. Scheduled for launch in June, the publication reviews issues of economic evaluation theory that are key to understanding the role of both labelled and unlabelled drug-related public expenditure.

Drugs in waste water

Assessing illicit drugs in waste water: potential and limitations of a new monitoring approach will be the focus of a forthcoming edition in the EMCDDA Insights series planned for release before summer. The publication provides insights from various viewpoints on what is recently becoming known as 'wastewater sampling for drugs', 'drug wastewater analysis' and 'drug sewage epidemiology'. Contributions will be made from the perspectives of analytical chemistry, physiology and molecular biology as well as sewage engineering, spatial epidemiology and conventional drug epidemiology.

Drug profiles

Following the launch of this series last spring, the profiles of an additional five substances are currently under preparation (GHB, hallucinogenic mushrooms, ketamine, LSD and volatile substances). The profiles on hallucinogenic mushrooms and volatile substances are scheduled for publication before summer.

For all new EMCDDA titles, see <http://www.emcdda.europa.eu/publications>

Resources

Useful materials or events on the drugs issue



International day against drug abuse and illicit trafficking

UNODC's three-year campaign 'Do drugs control your life?', launched on 26 June 2007, will focus this year on drug cultivation and production. Some countries struggle to contain cultivation of coca, opium or cannabis plants, whereas others face problems with clandestine manufacturing of synthetic drugs. The campaign's goal is to raise awareness on, and mobilise support for, drug control in a variety of contexts.

For more, see <http://www.unodc.org/unodc/en/aboutunodc/26June.html>

Perspectives on outreach work

'Reaching youth at risk — working towards social inclusion' is the focus of a European outreach work conference to be held in Oslo from 22–24 April. The Norwegian Directorate for Health and Social Affairs, the Directorate for Children, Youth and Family Affairs and the Norwegian Association for Outreach Workers are co-organising this conference with the City of Oslo's Agency for Alcohol and Drug Addiction Services' Competence Centre and its Department for Detached and Outreach Youth Service.

For more, see <http://www.outreachwork.no>

New scientific journal

Mental health and substance use: dual diagnosis is a recently launched peer-reviewed scientific journal, published by Routledge. It reflects the need for a forum to take account of the increased recognition of comorbidity and the growing body of research into the efficacy of interventions, treatment and service delivery.

For more, see <http://www.informaworld.com/MHSU>

Organisations wishing to publicise their newsletters, magazines, websites, CD-ROMs or any other resources are invited to contact Kathryn.Robertson@emcdda.europa.eu

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Calendar 2008

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15
16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

EMCDDA meetings

- 20 May: Estimating the number of clients in drug treatment, Lisbon.
- 21–23 May: 38th Reitox Heads of focal point meeting, Lisbon.
- 12–13 June: 8th Annual meeting of the Reitox early-warning system network, Lisbon.
- 26–27 June: EMCDDA expert meeting on the key indicator 'Prevalence and patterns of drug use among the general population', Lisbon.
- 2–4 July: EMCDDA Management Board, Lisbon.

External meetings

- 11–15 May: 19th IHRA international conference, Barcelona (<http://www.ihra.net/Barcelona/Home>).
- 15–17 May: HBCS international meeting, Seville (<http://www.hbcs.org>).
- 27–30 May: Annual meeting of the Society for Prevention Research, San Francisco (<http://www.preventionresearch.org>).
- 10–11 June: ECDC expert group on hepatitis surveillance for the EU, Stockholm.
- 23–26 June: Club Health 2008, Ibiza (<http://www.clubhealth.org.uk/conference>).
- 26 June: International day against drug abuse and illicit trafficking.

EU meetings

- 15–16 May: Horizontal working party on drugs, Brussels.
- 25–26 June: Horizontal working party on drugs, Brussels.

Scientific Committee: new Chair and Vice-chair

The new EMCDDA Scientific Committee established in December 2007, held its first meeting in Portugal from 14–15 February and elected its new Chair and Vice-chair. Dr Michael Farrell of the National Addiction Centre, London, now takes the helm, with Dr Marina Davoli of the Department of Epidemiology of the Lazio Region, Rome, as Vice-chair.

The main aim of the meeting was to come to a common understanding of the role of the Scientific Committee in relation to the mandate and tasks of the EMCDDA. In his opening speech, Director Wolfgang Götz expressed his intention to draw more on the expertise of the Committee, which had tended to be under-used in the past. During the discussions, the role of the Committee members as the guardians and advocates of the scientific integrity of the agency was underlined. The members also conveyed their expectations and interests regarding the tasks ahead, such as being involved early in work processes and offering advice on quality and outputs. It was noted that the data and information held at the EMCDDA could be optimised for scientific projects or publications and that the Committee could be used as a resource for generating research ideas.

Input to the next three-year work programme (2010–12) will be a priority of the Committee for the near future, along with a review of new guidelines for the risk assessment of new psychoactive substances.

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Figures show that older adults also have a relatively high risk of experiencing drinking problems. In Europe, 27 % of those aged 55 or over declare consuming alcohol on a daily basis. Combined use of alcohol and other drugs can cause problems among older persons (accidents, injuries), even when drinking is light or moderate.

Many older substance-using adults have regular contact with medical services due to their health problems. Yet healthcare professionals often miss or misdiagnose substance-use disorders in this group due to lack of training or unsatisfactory diagnostic criteria. Improved screening procedures could be introduced to detect substance use in this group, specifically the misuse of medications (e.g. multiple prescriptions; signs of tolerance).

'The realities of demographic change and the increasing service needs of ageing drug users are placing a financial strain on existing resources', says the briefing. 'Inaction itself incurs costs and may even lead to greater costs because of subsequent crises. Overall expenditure for this older age group may be reduced by providing timely, effective interventions in appropriate settings'.

Drugs in focus, available in 25 languages at:
<http://www.emcdda.europa.eu/publications/drugs-in-focus>