

Drugnet Europe

Newsletter of the European Monitoring Centre for Drugs and Drug Addiction

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April-June

BZP under formal scrutiny

Europe has responded to rising concern over the use of the stimulant drug BZP by formally requesting an investigation into the health and social risks of the substance. The decision was announced by the Council of the EU on 23 March in line with a legal procedure created in 2005 to respond to potentially threatening new psychoactive drugs in the EU (1).

The risk-assessment exercise, which will result in a report by mid-June, will be undertaken by the EMCDDA's Scientific Committee, with participation of additional experts from the European Commission, Europol and the European Medicines Agency (EMEA). The exercise is part of a three-step procedure: information exchange, risk assessment and decision-making.

The March decision is based largely on the findings of a joint EMCDDA–Europol report on 1-benzylpiperazine (BZP) submitted on 23 February to the Council of the EU, European Commission and the EMEA in the initial information-exchange step of the process (²). This report, prompted by a rise in BZP notifications in 2006, featured information on the health effects of the drug, frequency and patterns of use, evidence of intoxications and available information on international trafficking and the involvement of organised crime.

BZP is a psychoactive drug belonging to the group of aryl-substituted piperazines which includes substances such as mCPP and TFMPP. Health risks associated with BZP may include: hypertension, tachycardia (rapid beating of the heart), seizures, anxiety and insomnia — with certain symptoms sometimes lasting for up to 24 hours.

BZP is reported by users to provoke similar effects to those of amphetamine. A recent study also showed that when combined with TFMPP, it may mimic some of the effects of ecstasy.

Over the last two years, BZP-containing products have been aggressively marketed by various retailers and websites as 'natural' or 'herbal' highs and as a legal alternative to ecstasy ('Legal E', 'Legal X'), wrongly leading potential users to believe the drug is safe.

Continued on page 8



In aquae veritas? Improved methods to detect consumed drugs in waste water.

In aquae veritas?

First European meeting on drugs and their metabolites in waste water

'Detecting and analysing drugs and their metabolites in surface and waste waters through analytical chemistry' was the focus of the first European interdisciplinary meeting on this issue held at the EMCDDA from 16–17 April.

The two-day meeting offered analytical chemists, epidemiologists, engineers and physicians the chance to review technological advances in this area and explore their potential for monitoring drug use in Europe.

Over the last three years, there has been growing interest in measuring biochemical residues of drugs in sewage systems. Considerable advances in mass spectrometry and high-performance liquid chromatography (1) in the last 30 years mean that scientists can today detect and quantify more accurately specific drugs and their metabolites appearing as excretion residues in waste water. Initial work has been undertaken with cocaine, methadone and THC and may be applied to other substances.

By sampling a known source of waste water — such as a sewage influent to a waste water treatment plant — it is possible to obtain precise estimates of the total quantity of drugs consumed by the associated population. According to experts, this novel method may offer a new tool for 'estimating drug abuse and consumption patterns in a community and monitoring trends and changing habits in real time, while preserving the anonymity of the individuals involved' (2).

Continued on page 8

Drug situation

Screening for problem or dependent cannabis use

Since the 1990s, cannabis use has risen markedly among general and school populations in many EU countries. While consumption patterns remain largely occasional, there are also signs of more intensive use which could cause health or social problems and in time lead to dependence.

At present, scientific information on the actual extent of problem or dependent cannabis use among the general population is limited. However, five countries — Germany, France, the Netherlands, Poland and



At present, scientific information on the actual extent of problem or dependent cannabis use among the general population is limited

Portugal — have recently started to incorporate brief scales into their population surveys to measure dependence or problem use of the drug (1). In 2006, the ESPAD school survey project (http://www.espad.org) also proposed an optional module (CAST) to assess this dimension in their ongoing data-collection process among adolescents.

A number of these new scales aim to screen for types of problem use (dependence, 'abuse'/DSM-IV, other forms of intensive use). Other scales meanwhile focus on the severity of dependence and have already been used on cannabis users, including adolescents, in some countries. The US national household survey on drugs has also incorporated a scale to assess cannabis dependence and abuse on the basis of DSM-IV criteria.

The EMCDDA has recommended that methodological studies be drawn up to better understand the results generated by the new scales implemented in these surveys. The studies would ideally lead to a common European model for monitoring problem cannabis use across the EU Member States and, as a first step, would facilitate interpretation and comparative analysis of the national survey results.

In collaboration with the EMCDDA, the State office of the Spanish national plan on drugs (Delegación del Gobierno para el Plan Nacional sobre Drogas), included three scales (CAST, SDS and the abuse sub-scale of the DSM-IV) in its 2006 'Estudes' survey of young people (14–18 years). The purpose is to gain an insight into the psychometric properties of the scales and the relationship between them as well as the link between the scales and other variables. Fieldwork has already been carried out and preliminary analytical results will be available before summer. The final available sample is 4,089 recent 14–18-year-old cannabis users (last 12 months) from seven Spanish regions, including 2,016 girls and 2,073 boys. The aim of this joint project is to better understand the measurement of more intensive forms of cannabis use as a step towards better and more rational planning and evaluation of responses and interventions in this field.

Amparo Sanchez and Danica Klempová (2)

(1) Germany: Severity of Dependence Scale (SDS); France: Cannabis Abuse Screening Test (CAST); the Netherlands: CIDI modified plus additional ad-hoc scale; Poland: Problematic Use of Marijuana (PUM); Portugal: Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV scale).

(2) For the project working group: Gregório Barrio, Antónia Domingo, Amparo Sanchez, Josep Maria Suelves (DGPNSD); Danica Klempová and Julián Vicente (EMCDDA).

New project to improve TDI data coverage

Assessing and improving data coverage in the area of treatment demand is the aim of a new EMCDDA project launched in April 2007. Oriented by proposals from an expert group meeting in February, the project will be carried out in eight volunteer countries and is scheduled for completion by summer (1). The results will be presented in September at the EMCDDA's annual treatment demand expert meeting in Lisbon.

Data on individuals attending drug treatment services in Europe are collected through the Pompidou Group–EMCDDA treatment demand indicator (TDI) standard protocol, an instrument designed to gather harmonised socio-demographic information on clients in treatment and data on their patterns of drug use (2).

Although the ultimate goal is to provide a complete European overview of those in drug treatment, the current data-collection process remains limited in terms of coverage. On the whole, data are currently reported by inpatient and outpatient treatment centres but less so by low-threshold agencies, prison treatment units and general practitioners. In addition, not all the actual treated population is included in the data-collection process.

Overall in Europe, data were reported to the EMCDDA in 2005 from 5,388 treatment centres and on around 330,000 clients. In countries where information on coverage was available, the data-collection process incorporated, on average, 80% of the countries' treatment centres and 70% of their clients. However, some countries are as yet unable to provide such estimates, calling for work to better understand the coverage of the TDI dataset.

Linda Montanari

(1) Germany, Malta, Hungary, Austria, Poland, Portugal, Sweden, Norway.

(2) EMCDDA (2000), Treatment demand indicator, standard protocol, 2.0, Lisbon. http://www.emcdda.europa.eu/?nnodelD=1420

For a final report on the February working group meeting, see

http://www.emcdda.europa.eu/?nnodeID=1420

Responses

Commission launches report on harm reduction in the EU

The European Commission launched a report in April on the prevention and reduction of health-related harm associated with drug dependence in the EU. The report assesses to what extent Member States have implemented a 2003 Council recommendation which aimed to reduce drug-related deaths and health damage by encouraging countries to develop specific services and facilities (1).

The Commission report, drawn up with the technical support of the EMCDDA, is based on a background document by the Trimbos Institute presenting details on existing policies and practices across Member States and their effectiveness. The document takes into account international research results, information from field organisations and comprehensive datasets on the prevention of health-related harm collected by the EMCDDA through the Reitox network.

In its conclusions, the Commission report states that all Member States have now installed policies and actions reflecting proposals set out in the 2003 recommendation, but the level of implementation varies within and between countries. And while high-quality data exist on the availability of harm-reduction services, data on their accessibility and utilisation, especially by high-risk groups, should be improved. The report identifies the prison setting as an area where service provision is lagging behind and calls on countries to adapt prison-based harm-reduction activities to meet the needs of drug-using inmates. Finally, the report urges countries to develop standardised approaches and tools for collecting objective, reliable and comparable information in this field.

The Commission will repeat this reporting exercise during the next EU drugs action plan (2009–2012) to examine how implementation has progressed. The current report will serve as an important baseline measurement.

Dagmar Hedrich

(1) http://ec.europa.eu/health/ph determinants/life style/drug/drug rec en.htm#1

Literature review on indicated prevention

The EMCDDA has commissioned a literature review on indicated prevention to improve information collection for evaluating targets 7 and 10 of the EU drugs action plan (2005–2008) (1). Indicated prevention aims to identify individuals who are exhibiting early signs of substance abuse or preceding problem behaviours and to target them with special interventions (2).

Indicated drug prevention for children, adolescents and families is a relatively new field and one which is stimulating growing interest. However, associated professionals, such as child and adolescent psychiatrists, teachers and paediatricians, still know little about its theoretical foundations and the evidence base remains uncharted. The aim of the literature review, due for completion by the end of the year, is therefore to boost knowledge on the state of the art of indicated prevention in the EU, inform policy-makers and professionals and stimulate future information collection in this area.

Initial findings and next steps were discussed during a project kick-off meeting in Germany in March (3). The review will cover early mental health risk predictors of drug abuse, as well as indicated prevention interventions delivered through programmes and treatment protocols for children and adolescents (e.g. for attention deficit disorder) and initiatives targeting vulnerable families.

Gregor Burkhart

(1) 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.

(2) For more, see http://www.emcdda.europa.eu/?nnodelD=19259

(3) The University of Ulm, Germany (Klinik für Kinder- und Jugendpsychiatrie).

New-look EDDRA

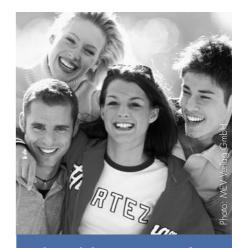
The 616 evaluated demand reduction projects in the EMCDDA's online information system, EDDRA, are currently being reviewed and reclassified by the agency and its national EDDRA managers in a move to improve the system's content and layout.

In a bid to better identify best practice in evaluation, projects will be structured according to a 'logic model' (1) and classified according to type of intervention and level of quality. This reclassification takes place in the context of the EU drugs action plan (2005–2008) which calls for the 'effective dissemination of evaluated best practices' and the EMCDDA's new mission statement which prioritises the provision of such information.

The new-look EDDRA will be migrated to a new technical environment allowing for an improved online presentation of its projects. It will also be integrated into a broader EMCDDA portal offering an array of resources on science-based practice. The first section of the portal, integrating the new EDDRA and covering universal prevention, is scheduled for launch at the end of the year.

Jennifer Hillebrand

(1) http://www.emcdda.europa.eu/?nnodeid=9714 Exchange on drug demand reduction action – http://www.emcdda.eu.int/?nnodeid=1580



Indicated drug prevention for children, adolescents and families is a relatively new field and one which is stimulating growing interest

Bookshelf

2006 INCB Annual report



The flood of counterfeit medicines now available in many countries could have fatal consequences for consumers, according to the 2006 Annual report from the International Narcotics Control Board (INCB). Launched in Vienna on 1 March, the report states that the existence of unregulated markets means that sub-standard and often lethal medication is being sold to unsuspecting consumers. The WHO estimates that 25%-50% of medicines consumed in developing countries are counterfeit. The Board calls on countries to enforce legislation to ensure that narcotic drugs and psychotropic substances are not illegally produced or diverted from licit manufacture to unregulated markets.

The INCB also warns that deaths related to overdoses of prescription drugs are on the rise and that the abuse of these drugs in some parts of the world has already surpassed that of traditional illicit substances. Further concerns highlighted are the abuse of anorectics for slimming and corruption in Afghanistan which is hindering progress to eradicate illicit opium production.

Publisher: United Nations (INCB) **Languages:** Arabic, Chinese, English,

French, Russian and Spanish.

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Danas de la constant //

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

EMCDDA supports 2008 UNGASS review

In June 1998, the 20th UN General Assembly Special Session (UNGASS) convened in New York to debate the world drug problem. Dubbed the UN 'drug summit', it marked a critical new juncture in the global fight against drugs and set the agenda for international drug control on the eve of the 21st century (1).

UNGASS set a series of benchmarks for the international community in the form of three key documents (2): a political



UNGASS review will be presented at next CND in 2008.

declaration; the *Declaration on the guiding principles of drug demand reduction*; and a five-part resolution with action plans to enhance international cooperation.

In adopting the political declaration, UN Member States committed themselves to achieving measurable results in reducing the illicit supply and demand for drugs by 2008. They were also asked to adapt their national drug strategies accordingly and report to the UN Commission on Narcotic Drugs (CND) on their progress in meeting UNGASS targets. A special monitoring instrument — the biennial reports questionnaire (BRQ) (3) — was developed for this purpose by the United Nations Office on Drugs and Crime (UNODC).

In the run-up to the final UNGASS review in 2008, the EMCDDA is contributing to an exercise to improve the understanding of information gathered through the BRQ. This follows the 2003 mid-term UNGASS review, and the results of four biennial reports, which highlighted certain difficulties in interpreting BRQ data due to low response rates in some countries and insufficient detail provided through some parts of the questionnaire.

In order to tackle these difficulties ahead of the final review, Resolution 49/1 was adopted at the CND in 2006 asking UNODC to collect complementary data and expertise to support the global assessment of countries' implementation of UNGASS goals. An expert group was subsequently set up and held its first meeting from 6–8 February 2007 in Vienna involving delegates from several regional and international organisations (CICAD, EMCDDA, Europol, Interpol, UNAIDS, UNODC regional offices, WHO).

At the meeting, organisations compared their data-collection systems with the BRQ and considered other datasets that might feed the 2008 review process. The EMCDDA informed that the drug demand reduction measures mentioned in the UNGASS declaration and action plans are also monitored at EU level. In this context, it proposed to draft a report on the 10-year evolution of drug-related problems and responses in the EU to support the final review.

The February expert meeting produced a report, submitted to the 50th session of the CND in March, which led to the adoption of Resolution 50/12. This resolution called on UNODC to invite intergovernmental, international and regional organisations to make available supplementary information to facilitate deliberations at the 51st session in 2008. A second expert consultation is therefore scheduled for this autumn to gather such information. This will contribute to UNODC's final UNGASS review to be presented at the CND in 2008 and further discussed by UN Member States at the CND in 2009.

Frank Zobel

(1) http://www.unodc.org/adhoc/gass/gassbro.htm

(2) http://www.un.org/ga/20special/poldecla.htm http://www.unodc.org/pdf/resolution_1998-09-08_1.pdf http://www.unodc.org/unodc/en/resolution_1998-09-08_3.html

(3) http://www.unodc.org/unodc/en/cnd_questionnaire_brq.html

International

EMCDDA and UNODC reinforce partnership

Cooperation between the EMCDDA and the United Nations Office on Drugs and Crime (UNODC) took a further step forward in Vienna on 14 March with the adoption of a new joint work programme and the launch of a practical toolkit to help collect data on people seeking treatment for drug problems.

EMCDDA Director Wolfgang Götz and UNODC Executive Director Antonio Maria Costa approved the five-part work programme as they met in the margins of the 50th session of the Commission on Narcotic Drugs (CND). The work programme enhances cooperation in: epidemiology; demand reduction; supply reduction; legal information systems; and new drug trends, synthetic drugs and amphetamine-type stimulants.

The UNODC-EMCDDA toolkit (see *Drugnet Europe* No 57) is the first volume co-published by the organisations and is designed to help countries compile comparable data on the demand for treatment for drug problems. Entitled *Guidance* for the measurement of drug treatment demand, the publication is targeted at drug treatment experts and practitioners throughout the world and is the eighth toolkit module of UNODC's Global assessment programme on drug abuse.

For more on the joint work programme, see http://www.emcdda.europa.eu/ $\protect\ensuremath{\text{nnodelD=1581}}$

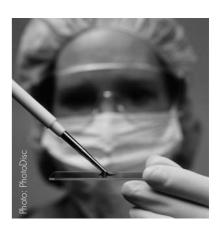
For more on the toolkit, see http://www.emcdda.europa.eu/?nnodelD=26895 For a news release see http://www.emcdda.europa.eu/?nnodelD=875

For more on the CND 50th session, see http://www.unodc.org/unodc/en/cnd_session_50.html

Partners

EMCDDA and ECDC to sign cooperation agreement

Joint projects to prevent and control drug-related infectious diseases may soon be drawn up thanks to a cooperation agreement about to be signed by the EMCDDA and the European Centre for Disease Prevention and Control (ECDC). The Management Boards of the two agencies examined the text in December 2006 and mandated the Directors to sign the agreement in 2007.



The Stockholm-based ECDC was set up in 2004 and aims to strengthen Europe's defences against infectious diseases such as SARS and HIV/AIDS. The new accord will enhance cooperation on drug-related issues between the two agencies, particularly through knowledge exchange and the sharing of best practice. Among others, the agencies will cooperate in the collection, analysis and dissemination of data and in the exchange of expertise via technical meetings and contacts between staff.

Areas of mutual interest will be identified by the agencies and implemented through specific projects relating to epidemiology and disease prevention and control. Initiatives will be guided by the principles of appropriateness, common interest, reciprocity and complementarity, while efforts will be made to avoid duplication of work and ensure optimal use of available resources. A signing ceremony between the two Directors is scheduled for 29 June.

Ignacio Vázquez Moliní

Evaluation

Have your say in the evaluation of the EMCDDA

Drugnet Europe readers have the chance to express their views on the performance of the EMCDDA as part of an ongoing evaluation of the agency launched in January (see *Drugnet Europe* No 57). The evaluation, undertaken by the UK-based Centre for Strategy and Evaluation Services (CSES), at the initiative of the European Commission, will run until the end of the year. A final report of the findings will then be presented to the EMCDDA Management Board with recommendations for follow-up.

The overall purpose of the evaluation is to determine the effectiveness of the

EMCDDA and to examine ways to improve and enhance its operations. The evaluation covers the last two EMCDDA work programmes 2001–2003 and 2004–2006.

The exercise is organised in three phases. The preparatory phase (preliminary discussions with staff, desk research, methodology) ended with an inception report in March. This paved the way for the second fieldwork phase which takes the form of internal and external surveys and interviews among the EMCDDA's staff and main stakeholders (Management Board members, national focal points) and is

scheduled for completion during the summer. An interim report will be discussed at a steering committee meeting in Brussels at the end of May. The final phase in the process will involve a detailed analysis of the evaluation findings and lead to the final report in December.

The survey addressed to *Drugnet Europe* recipients is available at http://www.cses.co.uk/survey/emcdda.htm. Readers wishing to receive the questionnaire by e-mail or fax are requested to contact CSES.
Tel./Fax ++ 44 1959 52 51 22.
E-mail: scook@cses.co.uk

Spotlight

Turkish focal point opens new documentation centre



The Turkish national focal point (TUBIM) inaugurated a new documentation centre on 27 March on the premises of its hosting institution, the Turkish Academy against Drugs and Organised Crime (TADOC).

The documentation centre, the first public drug-specialised information repository in Turkey, provides visitors with an extensive collection of drug information and scientific publications which will be further enriched in the coming years.

The opening ceremony, chaired by Mr Emin Arslan, Deputy General Director of the Turkish national police, brought together high-ranking Turkish officials, EMCDDA staff, a representative of the EU delegation in Ankara and Member State representatives from Belgium, France, the Netherlands and the UK.

At the event, TUBIM presented to the public its first national report on the state of the drugs problem in Turkey (2006), published in Turkish and English. The report was prepared with the support of a Reitox twinning project in 2005-2006 between Spain, Greece and Turkey and in accordance with EMCDDA guidelines.

The EMCDDA welcomes these positive developments and the participation of Turkey in the work of the agency.

Alexis Goosdeel

Please contact: Head of TUBIM, Mustafa Pinarci Tel. ++ 90 312 412 75 37. Fax ++ 90 312 412 75 05.

E-mail: mpinarci@kom.gov.tr

Reitox Academy

Cannabis prevention and treatment

Early detection of risk factors and early intervention — both emphasised in Target 10 of the current EU drugs action plan — are crucial when it comes to the prevention of cannabis use, as initiation often occurs at a young age.

As regards treatment, where programmes have traditionally focused on opiate dependence, rising problems related to cannabis use are of growing concern in almost all EU Member States and a lack of specific interventions for primary cannabis users is now felt. Research studies and projects are already ongoing or have been completed in many countries as a step towards meeting this need.

These were among the issues discussed at the latest Reitox Academy on cannabis prevention and treatment held in Berlin from 29-30 March in cooperation with the German Presidency of the EU and German national focal point. The academy provided the opportunity for around 90 experts from 28 countries to exchange experiences in these fields and to foster a common understanding of specific and innovative concepts for the prevention and treatment of cannabis-related disorders and disturbances.

Speaking at a press conference on 30 March, Roland Simon, EMCDDA Head of unit for Interventions, law and policies, said that the academy had allowed professionals from different backgrounds to work in synergy on these issues, bringing together as it did the researchers who are developing new approaches in the Member States with the practitioners and policy-makers who would be implementing them. It is hoped that the outputs of the academy, to be presented to the national drug coordinators on 14-15 May in Berlin, will help policy-makers better target and plan future European activities on the prevention and treatment of cannabis-related disorders.

Xavier Poos

Visits

EMCDDA hosts MAOC meeting

The EMCDDA hosted a meeting on 20 March of the Maritime Analysis and Operation Centre-Narcotics (MAOC-N), an operational body being set up to tackle maritime drug smuggling into Europe.

MAOC-N, which will be fully established in Lisbon later in 2007, is an informal inter-governmental working group or taskforce comprising seven EU Member States: Spain, France, Ireland, Italy, the Netherlands, Portugal and the UK.

MAOC-N's mission will be to enhance criminal intelligence and coordinate police action on the high seas, with a view to intercepting vessels carrying cocaine and cannabis. Naval and law-enforcement bodies (police, customs) participate in MAOC-N, although the latter will lead the operations.



Enhancing criminal intelligence and coordinating police action on the high seas

The European Commission and Europol attended the meeting as observers. The US also has observer status in MAOC-N meetings, represented by its Miami-based 'Joint interagency taskforce-South' (http://www.jiaffs.southcom.mil). In hosting the meeting, the EMCDDA took another step forward in its cooperation with other international bodies working in the drugs field. Lisbon is now the seat of the EMCDDA, the European Maritime Safety Agency (EMSA) and MAOC-N.

Products and services

Drugs in focus No 15



'Hallucinogenic mushrooms: the challenge of responding to naturally occurring substances in an electronic age' is the title of the latest edition (No 15) in the EMCDDA's policy briefing series Drugs in focus.

The briefing reviews use of hallucinogenic mushrooms in the EU and identifies factors that either encouraged consumption trends during the late 1990s and early 2000s or acted as barriers to more widespread

Hallucinogenic mushrooms grow wild in many parts of Europe, but the information available suggests that most mushrooms used for their psychoactive properties are cultivated. The sale of hallucinogenic mushrooms by 'smart shops' and market stalls in the Netherlands and the UK appears to have played an important role in facilitating the use of mushrooms during the late 1990s. In addition to retail outlets, there has also been an increase in the number of online smart shops. In 2006, the EMCDDA identified a total number of 39 online shops selling 'magic' mushroom products. Many sites are multilingual and the majority offer international shipping.

Six EU Member States have tightened their legislation on hallucinogenic mushrooms since 2001 in response to concerns about prevalence of use: Denmark (2001), the Netherlands (2002), Germany, Estonia, the UK (2005) and Ireland (2006).

Drugs in focus No 16



To mark International day against drug abuse and illicit trafficking on 26 June, the EMCDDA will be launching the next issue of Drugs in focus (No 16) entitled 'Drugs and crime — a complex relationship'. The current EU drugs action plan lists the adoption of a 'common definition' of the term as an explicit action to 'step up work on prevention of drug-related crime'. The briefing will explore four types of offence falling under this heading as a step towards facilitating comparisons and as a prerequisite for evaluation.

The policy briefings are available in the 23 EU languages, Turkish and Norwegian at http://www.emcdda.europa.eu/?nnodelD=439

Scientific publishing seminar

Tom Babor, Professor in Public Health and Community Medicine at the Connecticut School of Medicine, visited the EMCDDA on 16 March to deliver a seminar on scientific publishing.

As one of the co-editors of Publishing Addiction Science: A guide for the perplexed, and regional editor of the international journal Addiction, he presented an array of opportunities for publishing EMCDDA findings in addiction journals. Among others, he gave hands-on advice on how to choose the most appropriate journal; explored practical and ethical issues, such as authorship; and explained what lies inside the black box of editorial decision-making. Professor Babor is one of the leading members of the International Society of Addiction Journal Editors (ISAJE) (see Drugnet Europe No 56). Available on the ISAJE website is a wide range of resources, including a downloadable version of the above-mentioned guide.

Margareta Nilson

http://www.parint.org/isajewebsite/isajebook/isajewebbook.htm

Resources

Useful materials and events on the drugs issue

Do drugs control YOUR LIFE? Your life. Your community.

No place for drugs.

International day against drug abuse and illicit trafficking

'Do drugs control your life' is the slogan of an upcoming campaign (2007-2009) to be launched by the United Nations Office on Drugs and Crime (UNODC) on 26 June, International day against drug abuse and illicit trafficking. The campaign will have a special focus on drug abuse in 2007, on drug cultivation and production in 2008, and on illicit drug trafficking in 2009.

With this campaign, UNODC aims to raise awareness of the major problem that illicit drugs represents to society. The campaign's goal is to inspire people and mobilise support for drug control in a variety of contexts. These include: artistic events (Do drugs control your creativity?), sporting events (Do drugs control your game?) and a 'T' shirt promotion (Do drugs control your body?).

For more, see http://www.unodc.org/unodc/event 2007 06 26 1.html

Tackling drugs to reduce poverty

ld21, a knowledge service offered by the UK Institute of Development Studies (IDS), at the University of Sussex, publishes thematic overviews on recent policy-relevant findings in its Insights series.

In the latest edition, entitled 'Tackling drugs to reduce poverty', authors look at a range of issues including: the khat industry in East Africa, law-enforcement interventions in the Caribbean; tobacco farming in Asia; and opium production in Afghanistan.

IDS: http://www.ids.ac.uk/ids Download: http://www.id21.org/insights/insights-h10/ Subscriptions: id21@ids.ac.uk

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 2007

EMCDDA meetings

Reitox Academy on public expenditure 11 May:

analysis in the field of drugs, Luxembourg.

European Perspectives on Drugs (E-POD) 21-22 May:

expert meeting, Lisbon.

36th Reitox focal point meeting, Lisbon. 23-25 May:

30 May: Extended Scientific Committee risk

assessment meeting on BZP, Lisbon.

31 May-1 June: EMCDDA Scientific Committee, Lisbon.

14-15 June: 7th annual meeting of the Reitox early-

warning system network, Lisbon.

28-29 June: Annual expert meeting on prevalence

and patterns of drug use among the

general population, Lisbon.

4-6 July: EMCDDA Management Board, Lisbon.

External meetings

13-17 May: 18th International conference on the

> reduction of drug-related harm, Warsaw (http://www.harmreduction2007.org).

5th European workplace drug testing 24-25 May:

symposium, Stockholm.

31 May-2 June: Taipas 20th anniversary conference,

Lisbon.

10-15 June: 50th International ICAA conference on

dependencies, Stockholm

(http://www.icaaconference.se/icaac).

International day against drug abuse 26 June:

and illicit trafficking.

EU meetings

14-15 May: National drug coordinators meeting, Berlin.

31 May: Horizontal working party on drugs,

Brussels.

20 June: Horizontal working party on drugs,

Brussels.

BZP under formal scrutiny

Continued from page 1

In addition to evaluating the health and social risks of BZP, the forthcoming report will look at the implications for placing the drug under control in the EU, potentially the final stage in the process. On the basis of the report — and at the initiative of the European Commission or a Member State — the Council may decide (by late July) for the drug to be subjected to control measures throughout the EU. The Member States would then be required to introduce such controls in line with national laws no later than one year after the Council's decision.

In 2006, 13 EU Member States and non-member Norway reported to Europol and/or the EMCDDA seizures of BZP in powder, capsule or tablet form, ranging from single small seizures (Belgium and Greece) to up to 64,900 tablets (UK). Five EU Member States (Belgium, Denmark, Greece, Malta and Sweden) control BZP under drug control or equivalent legislation and two (Spain and the Netherlands) regulate it under their medicine-related legislation. The Italian Ministry of Health has recently started a procedure to bring BZP under control as a narcotic drug. In Ireland sales are prohibited to the under-18s. BZP is currently not under assessment by the UN drug control system.

Roumen Sedefov

(1) 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 also description at \$http://www.emcdda.europa.eu/?nnodelD=17869(2) The joint report is available on the EMCDDA website at:

http://www.emcdda.europa.eu/?nnodelD=1346. See also news release at

http://www.emcdda.europa.eu/?nnodeID=875

BZP was first synthesised in 1944 by Wellcome Research Laboratories (UK) as a potential anthelmintic (to treat intestinal parasitic worms) for livestock. However, it was not used as it was found to be relatively ineffective and caused adverse effects, such as seizures, in mammals. BZP has no known medical use (human or veterinary) in the EU.

In aquae veritas?

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While such methods do not provide the type of individual consumption data currently yielded by drug surveys (e.g. lifetime, recent, current use), their ability to pinpoint total consumption rates in a given population make them a useful complement to existing methods for studying drug use trends in Europe.

The results of the meeting will be presented to a leading scientific journal later in 2007. The EMCDDA will be releasing a detailed report on the topic over the coming year.

Norbert Frost

(1) http://en.wikipedia.org/wiki/Mass_spectrometry http://en.wikipedia.org/wiki/High_performance_liquid_chromatography

(2) Castiglioni, S., Zuccato, E., Crisci, E., Chiabrando, C., Fanelli, R., Bagnati, R. (2006), 'Identification and measurement of illicit drugs and their metabolites in urban wastewater by liquid chromatography-tandem mass spectrometry', Analytical Chemistry 78, pp. 8421-8429.

