

## Emerging phenomena linked to the use of drugs in France in 2001

This edition presents a summary of the data and results obtained from running the TREND (*Tendances récentes et nouvelles drogues*) [Recent trends and new drugs] device of the OFDT (*Observatoire français des drogues et des toxicomanies*) [French observatory of drugs and drug addiction] in 2001. This device is aimed at identifying and describing in the shortest time possible the emerging phenomena linked to drugs. The highlighting of these phenomena must allow objective reflection, on several levels, on the need to adapt the behaviours and actions of everybody in order to reduce any possible harm.

The two principal, but not exclusive, observation scenes are the urban scene and the techno party scene. *The urban scene* covers primarily the system of reception structures known as "low-threshold" (syringe exchange centres and programmes), the care centres and the "open" places (roads, squats, etc.) frequented by opiate and cocaine users. *The techno party scene* corresponds to the places where "techno" culture party events take place, whatever the type of event. The choice of this scene was guided in particular by the fact that many of these players, involved for the most part in prevention strategies, were available for the objective observation of this environment. In this instance, the real observation field is that of the users of illicit drugs who frequent the techno party scene within which non-users are also encountered. This remark must be seen in the context of the observations that will be put forward throughout the report so as not to make the incorrect interpretation of associating techno party scenes with drug use.

The choice of continuous observation of these scenes and of the individuals who move in them allows the early highlighting of changes or phenomena (positive or negative) that often concern only a limited number of individuals. *The focus of the observations must not make the reader lose sight of the often limited numbers of the populations observed.* The majority of the phenomena presented in this report are only not very or not at all quantifiable on the general population scale. It is for this reason that, at the beginning of the sections devoted to the "products" and the "users", there is a reminder of the general trends on illicit drug use in France (see *Drogues et dépendances: indicateurs et tendances* [Drugs and dependence: indicators and trends], 2002 edition, OFDT), in order to give a better perspective on the changes or phenomena detected and described by the TREND device in 2001.

### 1. THE USES AND THE PRODUCTS

#### Reminder on the uses in the general population

Experimentation (use at least once in one's life) with and, even more so, actual use (use during the past 12 months) of *illicit drugs* is marginal. Apart from cannabis, the use of which developed considerably during the 80's with one French person in five having already experimented with it, the other products concern only a small section of the population. It seems however that the general trend is upwards (in particular for cocaine and the amphetamines-ecstasy pair), with the notable exception of heroin.

**Frequency as a percentage of experimentation with illicit drugs among 18 year-olds, 18-75 year-olds, 18-25 year-olds and 26-44 year-olds in 2000, by age**

	18 year-olds*	18 year-olds*	18-75 year-olds**	18-25 year-olds**	26-44 year-olds**
	Boys	Girls			
Cannabis	55.7	45.2	21.6	46.8	31.7
Glues and volatile solvents	5.8	3.7	2.7	5.7	4.0
Cocaine	2.5	1.3	1.5	2.2	2.5
LSD	2.3	1.3	1.5	2.9	2.3
Amphetamines	2.5	1.2	1.4	1.6	1.8
Ecstasy	5.0	2.7	0.8	2.8	0.9
Heroin	1.0	0.8	0.7	0.9	1.2
Hallucinogenic mushrooms	6.9	2.5	0.4	0.6	0.5
Opium, morphine	—	—	0.3	0.1	0.3
<i>Poppers</i>	5.7	3.4	0.1	0.1	0.2

<sup>(1)</sup> Terms used during the survey.

**Source\*:** ESCAPAD 2001

**Source\*\*:** Baromètre Santé [Health Barometer] 2000, CFES, OFDT statistical handling

The use of illicit drugs affects *young people* first and foremost. Thus, half of young people at the age of 18 and more than a third of the 18-44 year-olds have already used cannabis at least once during their life. This proportion of experimenters decreases with age: it does not reach more than 2.5 % of the 55-75 year-olds. Moreover, since they involve uses at the end of adolescence more specifically, as measured by the ESCAPAD survey (carried out among 12 512 young people aged 18 attending their *Journée d'appel à la défense* [Call for Preparation of Defence Day]), the levels observed in 2001 are similar to those in 2000. Apart from alcohol, tobacco, cannabis and psychotropic medicines, it can be observed that products for inhaling, poppers and ecstasy are experimented with by 5 % to 6 % of boys and around 3 % of girls.

Experimentation with illicit drugs is a behaviour that is clearly more *masculine* than feminine. With the exception of amphetamines, for which the difference according to sex is not significant, there are, for all the illicit drugs, two to three times more men than women who have already used them during their life.

## Opiates

The observations from the network of sites report the emergence of heroin users with a noticeably different profile to that of the traditional heroin addict. On the whole, these users are younger and more socially marginalised. The recent heroin users (who have been using for less than 5 years) inject less but sniff and inhale more than the older ones. Alongside this population, the return to use by former users is also reported.

In the techno party scene, the use of heroin is growing noticeably but remains very much in the minority. It retains, in fact, a taboo product image. The users resort above all to sniffing or inhaling; injection remains rare.

The majority of the users of high-dose buprenorphine (Subutex®) observed within the urban scene appear to use it within the context of a medical protocol. Nevertheless, this product is increasingly available on the black market and its price is falling compared with the previous year. Its image among the users is deteriorating compared with the two previous observation years. Corroborating elements from various information sources confirm the existence of opiate users who began their use of opiate substances with high-dose buprenorphine.

Methadone retains a good image among the users. It seems to be used most often within the context of a medical protocol. A study of the data from the CNAMTS [*Caisse nationale d'assurance maladie*

*des travailleurs salariés* -the National Salaried Workers' Health Insurance Fund], in five of the ten TREND sites in metropolitan France, shows differences in access according to place, age and sex. All else being equal, women and people over 30 have a higher probability than men or those under thirty of being treated with methadone rather than with high-dose buprenorphine.

## Stimulants

The increase in the frequency of cocaine use both in the urban scene and the party scene is confirmed. Its price is decreasing compared with the year 2000. Cocaine and crack continue to be distributed within these two scenes. This distribution is leading to an increasing heterogeneity in the user profile. The recent cocaine users appear to use different methods of administering it: they inject less, but sniff and inhale more than the older users.

The smokeable form of cocaine (called crack or free-base) is observed across a growing number of sites as well as in the party scene. The name "crack" is primarily used in Paris, Guyana and the Antilles.

In the urban scene, the use of ecstasy and amphetamines is increasingly frequent. For the most part it is occasional. It involves a mainly young and diversified population which ranges from the user in the low-threshold structure to the "integrated" person. This observation conveys the increasing porosity between the party scene and the urban scene for the use of products.

According to SINTES [*Système d'identification nationale des toxiques et substances* – National identification system for drugs and toxic substances] and the field observers, the prices of ecstasy tablets and powder samples are falling. The level of MDMA per tablet (63 mg) is also falling in 2001. The diversity of the logos is increasing (more than 200 in SINTES in 2001). A logo is not the guarantee of a composition. In 2001 and at the beginning of 2002, PMA, DXM and tiletamine were all identified for the first time within SINTES.

### The SINTES database

In 2001, 1 876 samples were collected, in other words about the same quantity as in 2000 (1 872, see the summary table below). MDMA is the molecule found most often in the samples in the SINTES base. It is present in 80% of the samples in tablet form.

The products presented as synthetic drugs usually contain molecules from the amphetamine family. This is the case in more than three-quarters of the samples collected and seized in 2001.

Medicines are frequent (9 %) and are increasingly diversified. Around a hundred different medicinal specialities have been identified since the monitoring system was set up.

It is not rare for an active principle to be absent. In fact, one sample in eight does not contain one.

**Table 1: Form and content of the samples in the SINTES base collected and seized in France in 2001**

	Tablets	Capsules	Powders	Liquids	Blotting Paper	Total
<b>MDMA</b>	80 %	27 %	24 %	12 %	30 %	69 %
<b>Amphetamines</b>	4 %	6 %	17 %	0 %	0 %	6 %
<b>Ephedrine et Pseudoephedrine</b>	1 %	20 %	3 %	0 %	0 %	2 %
<b>All amphetamines*</b>	84 %	47 %	41 %	12 %	30 %	76 %

<b>Cocaine</b>	< 1 %	3 %	9 %	0 %	7 %	2 %
<b>Caffeine</b>	7 %	13 %	31 %	12 %	0 %	10 %
<b>Anaesthetics **</b>	< 1 %	0 %	11 %	10 %	0 %	2 %
<b>Hallucinogenics ***</b>	0 %	0 %	0 %	0 %	30 %	< 1 %
<b>Medicinal substances</b>	5 %	28 %	24 %	18 %	26 %	10 %
<b>Absence of psychoactive substance</b>	8 %	25 %	24 %	41 %	22 %	12 %
<b>Total number</b>	1388	71	230	17	27	1733

- \* MDMA, MDEA, MDA, amphetamines, ephedrine and pseudoephedrine

- \*\* Ketamine, lidocaine, Gamma OH

- \*\*\* LSD, psilobin, psilocibin

For the first time, information, which is still to be confirmed, has been reported on the limited availability in France of substances sold under the names of *ice* and *yaba*. The reported use seems to be confined to a very small circle in the party scene.

#### Definition of the new substances identified by SINTES

**PMA** (para-methoxyamphetamine): possesses hallucinogenic properties which are five times more significant than mescaline (calibration substance, used to measure the effects of other psychedelic substances), as well as stimulant properties. PMA, which is often sold instead of ecstasy, appears to be more toxic (hypothermia, agitation, hypertension, etc.).

**DXM** (Dextromethorphan): opiate cough-mixture whose misuse has been known about and described for 25 years in the United States (misused for its euphoric, hallucinogenic and dissociative effects).

**Tiletamine** (2-ethylamino-2-thien-2-cyclohexanone): veterinary anaesthetic with a chemical structure similar to PCP and ketamine.

**Ice** (Dexamphetamine): smokeable form of methamphetamine. This substance owes its name to its appearance. It resembles transparent crystal. Its effects are said to be more powerful than those normally recognised in amphetamines. They engender aggressive and paranoid behaviour as well as auditory hallucinations. These last for 8 to 24 hours.

**Yaba**: amphetamine derivative which has been known about in Thailand for more than thirty years. This substance appears in tablet form and produces intense hallucinogenic effects which are likely to be accompanied by severe psychiatric problems.

## Hallucinogenics

One can observe, within the urban scene, an increase in the use of hallucinogenic products (LSD and ketamine). This still appears to affect only a limited and mainly young public who are very much polyusers. Primarily, this involves occasional use.

In the party scene, the situation differs depending on the products. There is no change to be seen compared with the previous year for LSD, mushrooms and GHB. The use of ketamine is extending to new regions while being less present in those regions where it was already reported.

The use of azote protoxyde is becoming rare. This change is reported across all the sites and appears to be linked, in particular, to the action of the organisers of techno party events.

The demand for hallucinogenic substances of natural origin that are well-known (mushrooms) or new (*Salvia divinorum*, ayahuasca) appears to be on the increase. This phenomenon is apparently linked to the fear of the unwanted effects of synthetic drugs, a partial consequence of the prevention campaigns and, conversely, to the "healthy" image of the products of natural origin.

## Psychotropic drugs

Flunitrazepam (Rohypnol®), of which several sites report a slight reduction in availability, remains the most misused psychotropic medicine in the urban scene. There is a shift from supply by prescription towards the unofficial market. The overall number of users seems to be declining. An investigation which is underway (14 interviews to date) is identifying three main user profiles: the passive users, the polyusers and the occasional users. The "passive users" are included in a substitution programme and comply with their medical prescriptions. The "polyusers" are people who use unprescribed benzodiazepines on a daily basis. The "occasional users" are people who use benzodiazepines on an occasional basis. These are generally substitutes. Rohypnol® may be used as a sedative, an uninhibitor or finally as a "reducer" of the effect of another product.

Trihexyphenidyle (Artane®) continues to be a product that is little used. Apart from the sites in Paris and Réunion Island where a tradition of use already existed, there are reports that use is beginning in certain sites.

The party scene appears to be little affected by the misuse of psychotropic medicines. Only the Paris site reports a use of alprazolam (Xanax®) and bromazepam (Lexomil®) with the aim of managing, in particular, the decline in cocaine.

## 2. THE USERS

Most of the data relating to drug users collected by the TREND device, specific surveys carried out by the device or data from the various health measures, concerns individuals who move in the urban scene, those who frequent the health centres and the "low-threshold" structures. We currently have only a little data on the users who move in the party scene.

### The users in the urban scene

#### General data

It is necessary to make a clear distinction between the "illicit drug users", who are mainly concerned with a recreational type of use, and the "illicit drug users with problems", who are likely to suffer considerable harm on a health, social or criminal level. These are mainly linked to the use of opiates and cocaine. The OFDT gives an estimated range of *150 000 to 180 000 opiate or cocaine users with problems*.

The problematic consequences of using *illicit drugs* are largely due to the use of heroin, which remains the principal product behind the health and social treatment of illicit drug users, even if the users in question are very often polyusers, who combine in particular cocaine, benzodiazepines and alcohol.

The vast majority of the opiate users who are receiving treatment have already used the *intravenous method* (73 %). The use of this method of administration is, nevertheless, on the decline.

The setting up of the *substitution treatments* and their rapid increase in the middle of the 1990s profoundly altered the treatment of opiate users. Today, many of them receive substitution treatment. At the beginning of 2001, it was estimated that there were 84 000 opiate users receiving substitution treatment, with buprenorphine (74 000) being prescribed more often than methadone (10 000).

Our current knowledge does not allow us to draw up a complete inventory on the morbidity and mortality of illicit drug users with problems. Although mortality linked to illicit drug use and HIV and hepatitis infection are well documented, the other areas are not currently described. It is therefore impossible to determine any trend in the changes in the psychiatric comorbidity of drug addicts even though one may presume it to be considerable.

The *declared prevalence of HIV* for users who inject continues the decline that started at the beginning of the 1990s: 16 % in 1999 as opposed to 23 % in 1994. On the other hand, the *declared prevalence of HCV* for users who inject is increasing and is at a very high level: 63 % in 1999 as opposed to 51 % in 1994.

The number of *deaths linked to drug use*, tracked by the health system or the police service, has dropped sharply since 1994. Thus, the number of deaths by overdose reported by the police fell by nearly four-fifths between 1994 (564 deaths) and 2000 (120 deaths). The portion of these deaths linked to heroin is falling but is still the majority (6 out of 10).

The positive changes observed in the second half of the 1990s are to be seen in the context of the strong growth in the number of users receiving substitution treatment, the improvement in the accessibility of injection equipment and the reduction in intravenous injection practices during the same period.

The users observed within the urban scene are principally young men with difficult living conditions (resources, housing and Social Security cover). Among these, the majority have used several products during the past month. Significant consumption of alcohol, more than ten glasses per day, is very frequent (more than 27 %).

## The methods of administration

Several sources agree in indicating a global reduction, in France, in the use of injection by drug users in the urban scene in 2001. This leads one to think that a significant portion of the concomitant fall in the use of syringes is linked to this change in the users' practices. Among the young users (aged under 25), the declared prevalence of HIV is low (2 %) and that of HCV remains high (30 %). They are, however, clearly lower than the figures for the older users. This positive change should not make us lose sight of the fact that the practice of injection is still frequent. The diversification, within the urban scene, of the procedures for administering the products appears to be primarily in favour of sniffing and inhaling. It appears to be the result of the combination of several factors:

- The impact of the risk-reduction actions and messages carried out by the public authorities or the authorised associations in the field: injection appears to be a less "emphasised" practice than it was previously. The perception of the risk of contamination by the AIDS or the hepatitis B or C viruses linked to injection and the stigmatisation of the syringe have encouraged some of the users who inject to reduce or give up injection.
- The greater accessibility of the substitution products has freed at least some of the opiate users from the constraints of injection. The use of substitution products means one can wait. The user avoids having to buy and inject very poor quality heroin.
- The techno sub-culture promotes primarily non-injectable methods of administration, in particular sniffing and, to a lesser extent, inhaling. With its influence broadening, both among young people and beyond the techno party scene, it can influence the new users of products and the users in the urban scene.

## Health problems linked to use

Viral infections remain the pathologies diagnosed most often among the drug addicts treated by general practitioners. In 2001, among the users in the low-threshold structures, the majority of the individuals declare that they have had tests for HIV (82 %), HCV (70 %) and HBV (64 %). Among the users who have had a test and know their results, the declared prevalence is 14 % for HIV, 49 % for HCV and 18 % for HBV.

The health problems linked to use observed in 2001 seem to be related primarily with precarious living conditions (tuberculosis, dermatosis, pneumopathies), the practice of injection (viral infections, dermatological symptoms) and taking products (acute or chronic psychiatric symptoms).

## The users in the party scene

There is no significant change to be seen in favour of the users in the party scene compared with the previous years. More specifically, the ESCAPAD survey has highlighted the correlation between the polyuse of alcohol, tobacco and cannabis on the one hand, and the frequency of going out during the year on the other, whether to music events or otherwise. It is the user whose going-out profile is characterised by intensive frequenting of techno parties and discotheques who proves to be the most frequent user, in particular of synthetic substances (ecstasy, amphetamines and LSD).

## The methods of administration

Sniffing and inhaling remain the dominant methods of administration in the techno party scene, way ahead of injection. This is still clearly a minority, or even a marginal, practice.

## Health problems linked to use

Problems with nose-bleeds, nasal necrosis and instances of inflammation of the mucous membranes are reported owing to the development in sniffing in this scene. The appearance of or increase in the observation of psychiatric-type problems among users of synthetic drugs are reported with increasing frequency.

## Conclusion

Five trends emerge from this year's running of the TREND device:

- the increase in the availability and use of cocaine, in line with previous years, in both the party scene and the urban scene. This is conveyed by a drop in the price of this substance and an increasing heterogeneousness in the users;
- the reduction, confirmed by several sources, in the use of injection among the users in the urban scene in favour of sniffing and inhaling;
- the presence of the use of ketamine across the majority of the observation sites in the party scene and the existence of a use by a small but not inconsiderable section of the individuals who frequent the low-threshold structures;
- the reduction in the availability and use of flunitrazepam (Rohypnol®) following the new regulatory framework for prescription. However, Rohypnol® is still the psychotropic medicine that is most misused;
- the development in the use of ecstasy in the urban scene. Among the synthetic products collected, MDMA is the molecule that is found most often (80 % of the samples in tablet form). It is important to note the frequency (9 % of the samples contained in the SINTES base) and the not inconsiderable array (around a hundred specialities) of medicinal substances.

## For further information

Bello (P.-Y.), Toufik (A.), Gandilhon (M.), Giraudon (I.), *Phénomènes émergents liés aux drogues en 2001 – Rapport Trend* [Emerging phenomena linked to drugs in 2001 – Trend Report], OFDT, June 2002

## Methodological indicators

### The TREND device

The collection device relies on particular collection tools, specific investigations and partner information systems. The particular collection tools are the network of thirteen sites, the SINTES system (pharmacological analyses of synthetic drugs) and the media watch (analysis of the content of young adult media). The specific

investigations focus on an in-depth examination of a particular problem or the investigation of a population. This year, the rock music party environment and the professional environment were investigated while in-depth examinations were carried out on the new heroin users and the users of flunitrazepam (Rohypnol®). The partner information systems are the OPPIDUM survey (*Observation des produits psychotropes ou détournés de leur utilisation médicamenteuse* [Observation of illicit psychotropic substances or misused medicines]), the CEIPs (annual description principally of the users of the CSSTs [drug addiction treatment centres]), the SIAMOIS system (*Système d'information sur l'accessibilité au matériel officinal d'injection et à la substitution* [Information system on the accessibility of medical injection equipment and substitution]) of the InVS (trends in sales of injection equipment and substitution products]), the ESCAPAD survey by the OFDT (annual description of use among eighteen-year-olds) and the observation of substitution products by the CNMATS (*Caisse nationale d'assurance maladie des travailleurs salariés* [the National Salaried Workers' Health Insurance Fund]) and the OFDT.