



# HSE PERSPECTIVE ON DRUG USE IN IRELAND

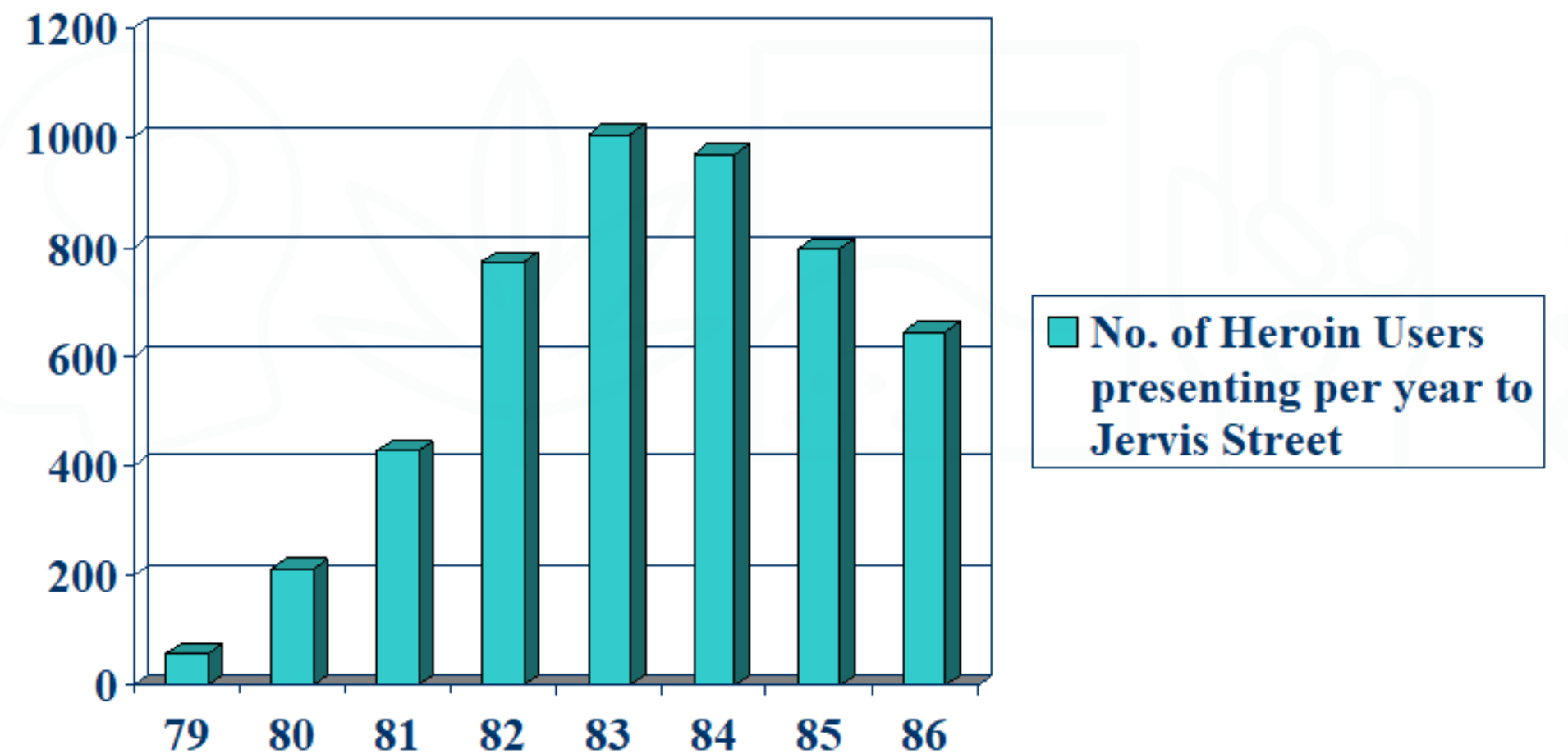
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CITIZENS' ASSEMBLY  
16TH APRIL 2023

# THE DEVELOPMENT OF METHADONE FOR THE TREATMENT OF OPIOID USE (esp. HEROIN) IN IRELAND

- 1971 – First use of methadone to treat heroin addiction at Jervis Street Hospital
- 1977 – Only 6 patients per month presented using heroin
- 1981 – Emergence of Dublin Opioid Epidemic

Response: Methadone detoxification and abstinence approach

## DUBLIN OPIOID EPIDEMIC



# DUBLIN OPIOID EPIDEMIC HEALTH CONSEQUENCES

- **93% using intravenously**
- Hepatitis B rates in drug users began to rise dramatically
  - 1970-74 – 2 per year
  - 1975-79 – 10 per year
  - Jan-Aug, 1981 – 158 cases reported
- In 1985 Jervis Street began routine testing for HIV
  - Over first two years 19% of Drug Users tested were diagnosed HIV positive
  - Methadone maintenance (MMT) substitution for heroin offered to HIV patients at moderate doses (usually < 60mgs), as detoxification approach was not impacting rates of HIV



# 1990'S RESPONSES TO OPIOID EPIDEMIC & HIV

- HIV drove Eastern Health Board towards establishing MMT as a public health response, since it had proven efficacy in reducing HIV rates
- Communities devastated by drug use and deaths of young people supported a harm reduction response to treatment
- After the Rabbitte Report (1996), Task Forces established in communities of most need to provide a comprehensive response to the problem of heroin use

## Principles of Harm Reduction

- 1** Focuses on consequences of harmful behaviours
- 2** Accepts alternatives to abstinence such as needle exchange and MMT
- 3** Based on consumer input and demand
- 4** Supports low threshold access to treatment
- 5** Based on compassionate pragmatism and not moral idealism

# METHADONE PROTOCOL

Established in 1998 to regulate the prescribing and dispensing of methadone:

- Central register (operated by HSE)
- Treatment card
- Special Prescription
- Only designated, trained GP's and Pharmacists were approved to treat patients in HSE clinics and primary care settings



# TODAY: HEROIN/OPIOID EUROPEAN MARKET

- Europe: 1.3 million high risk users. Synthetic opioids a developing concern
- Irish Prevalence in 2019/20: 19,875 problematic opioid users
- Currently 11,359 people on replacement therapy (methadone & buprenorphine)
- Buprenorphine products available since 2017
- Service delivered via HSE Clinics, Community GPs (Level 1 & 2) and Community Pharmacies
- End of March 2023:
  - 94 HSE Clinics
  - 278 Level 1 GPs
  - 748 Community Pharmacists
  - 89 Level 2 GPs
- These services work in conjunction with local & regional Drug and Alcohol Taskforces





## DECLINING HIV INCIDENCE IN IRELAND

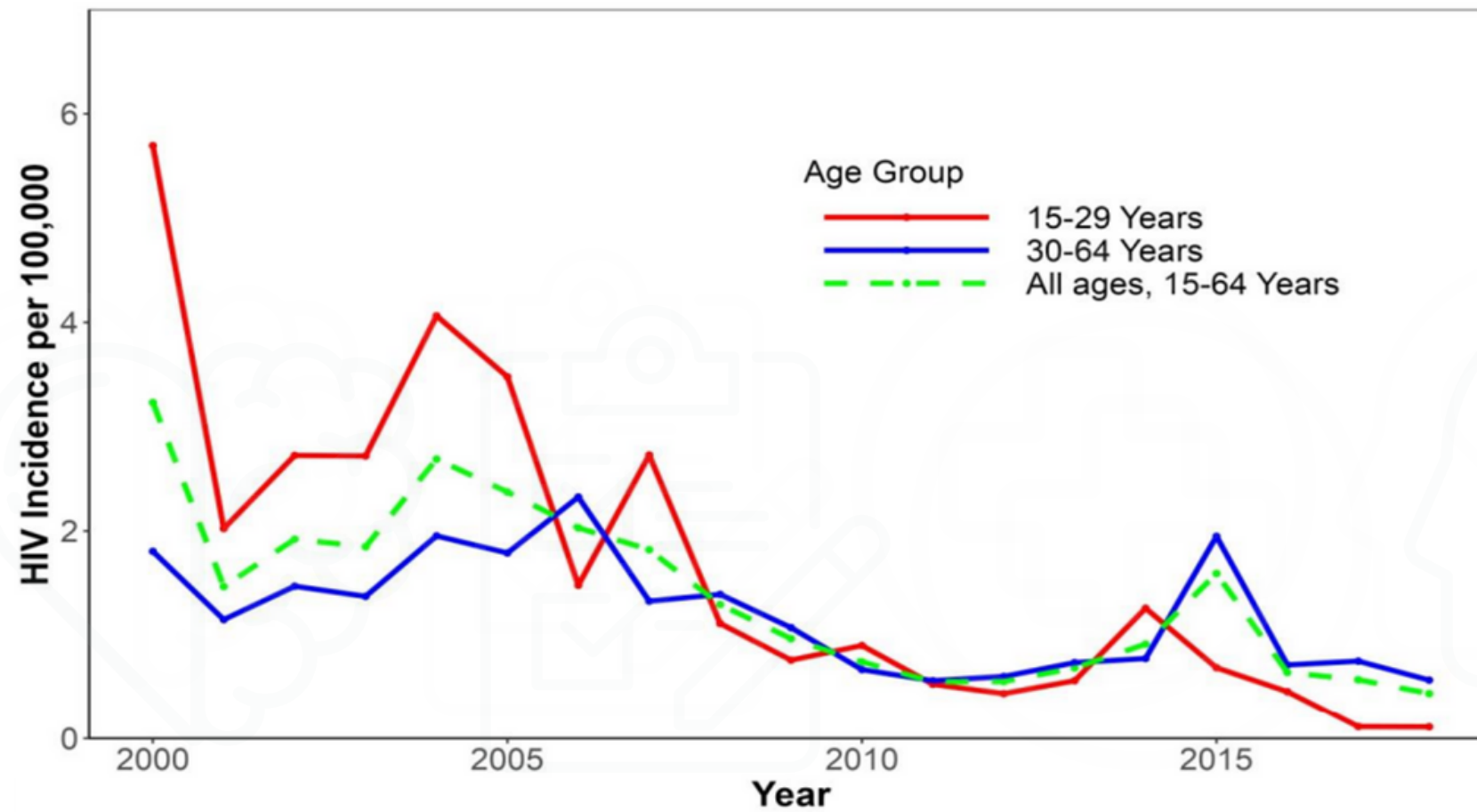


Figure 1. HIV Incidence among PWID in Ireland by Age Group from 2000-2018

McCarron P, Smyth BP. Addiction 2023 <https://orcid.org/0000-0002-4367-035X>

## DECLINING PROBLEM OPIOID USE AMONG YOUNG PEOPLE

Estimated number of problematic opioid users aged 15–24 years decreased by

**46% ▼**

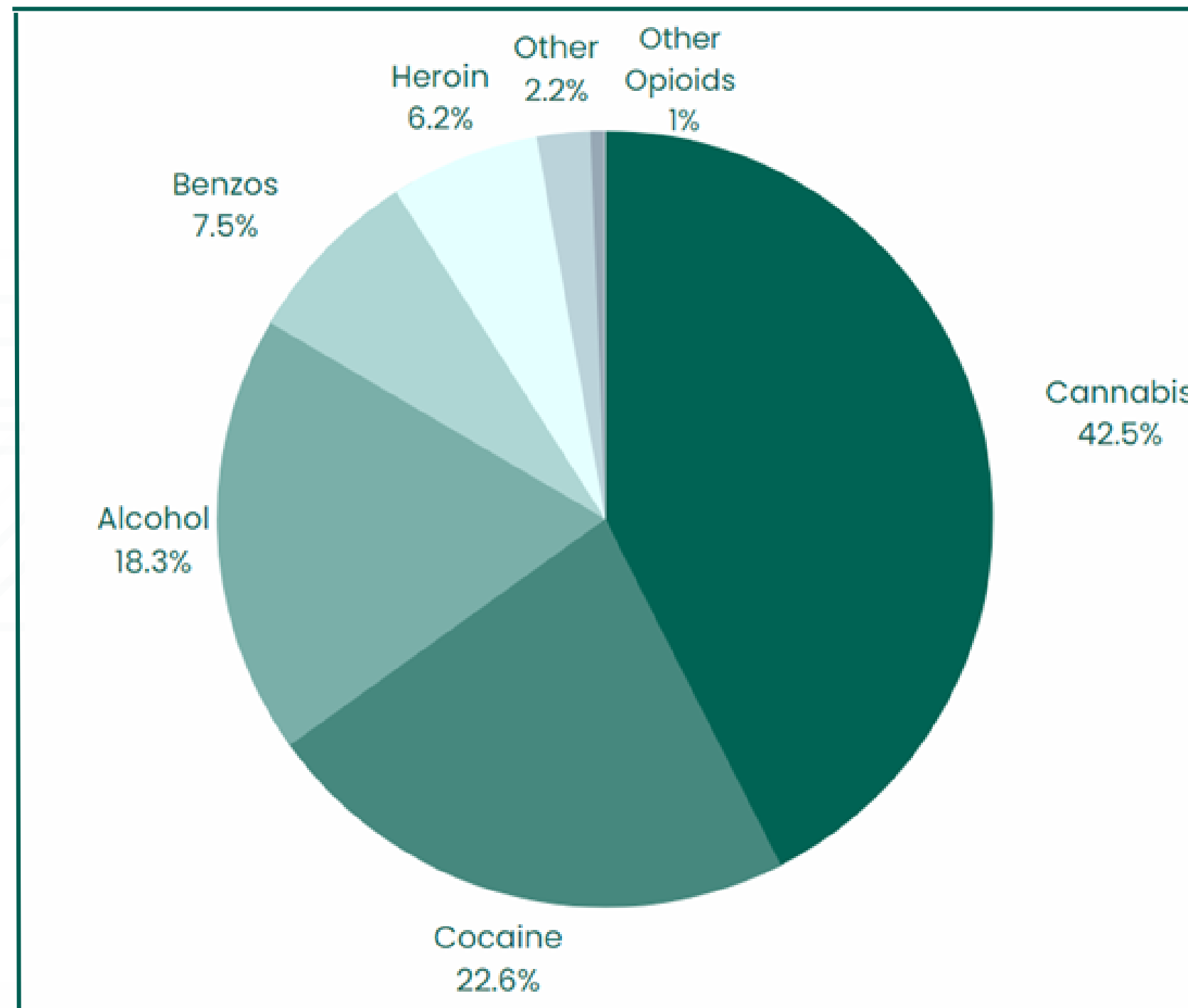
between 2015 and 2019.

Significant decrease in the number of problematic opioid users aged 25–34 years



Source: HRB, Problematic opioid use in Ireland, 2015–2019

# SUBSTANCES NOW GENERATING DEMAND FOR ADDICTION TREATMENT IN IRELAND IN 2021 IN PEOPLE UNDER 25YO (N=3100)





# COCAINE: EUROPEAN & IRISH MARKETS

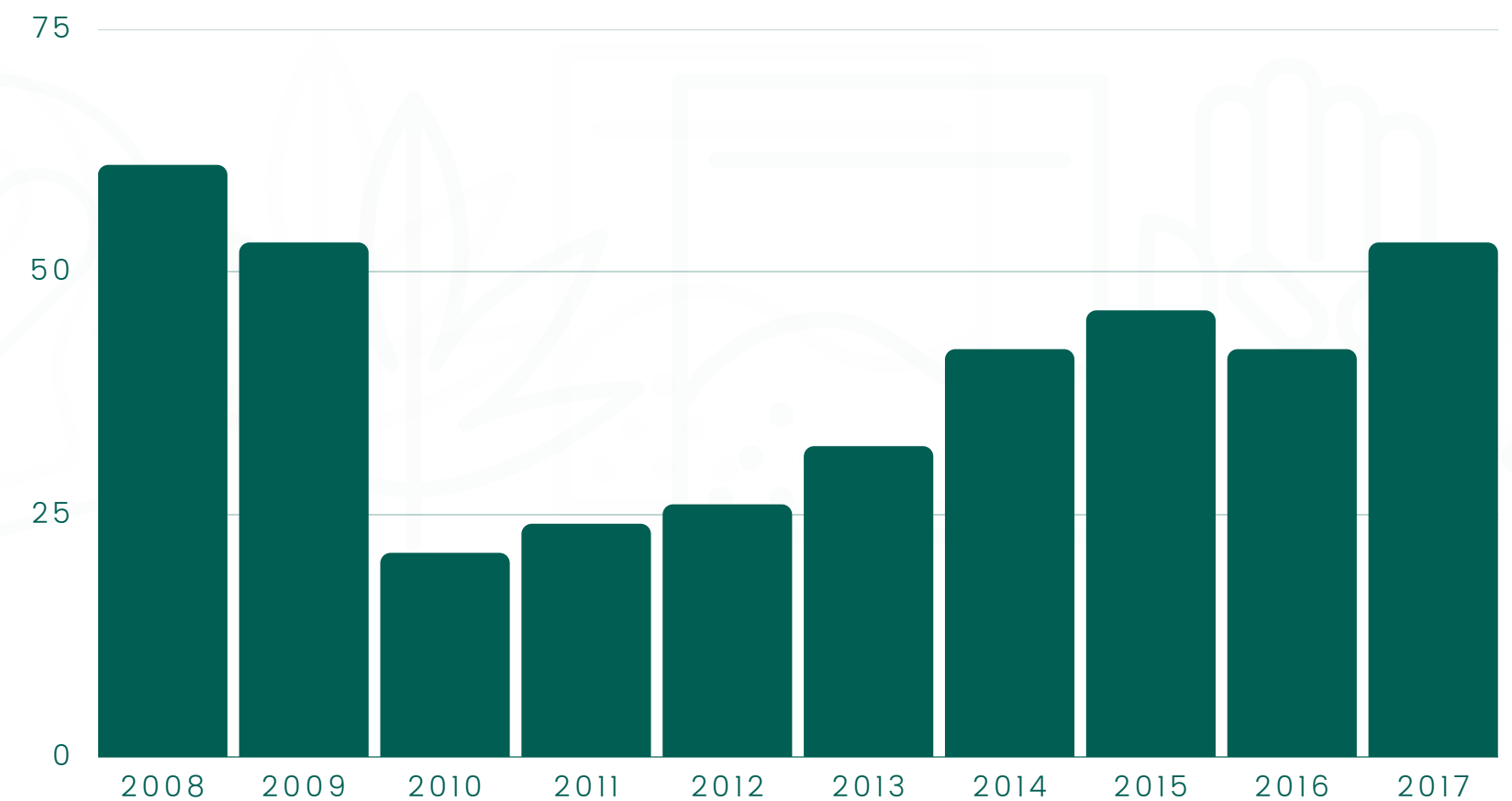
## EU

- 4.0 million users in the last year
- 2.6 million users in young adult group

## Ireland

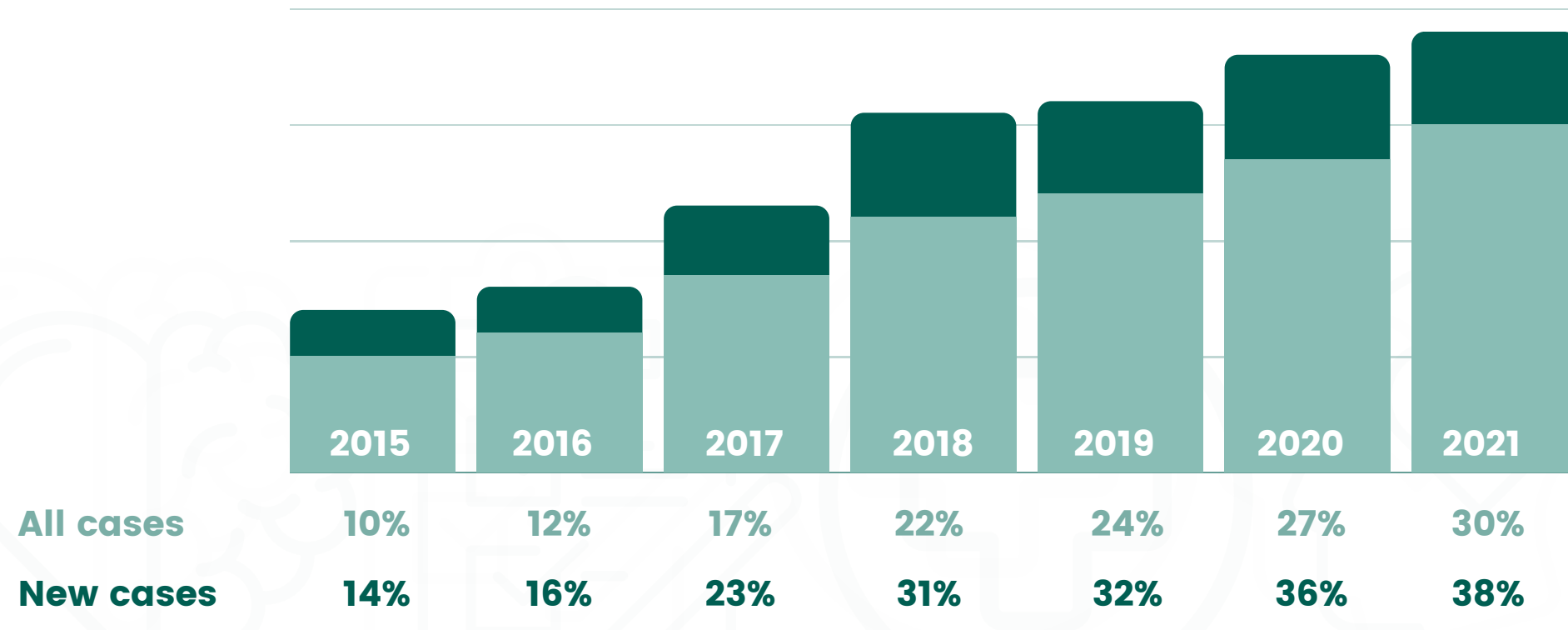
- Rates of cocaine use increasing across all age groups
- Recent cocaine use among 15–64-year olds increased from 1.1% to 2.3% between 2002–03 and 2019–20
- Significant increase in recent use in females aged 15–24 (now 4.5%)
- 'Crack cocaine' use has also emerged as a problem in disadvantaged communities

## COCAINE POISONING DEATHS IN IRELAND



Data Source: NDRDI, HRB, 2019

# COCAINE TREATMENT IRELAND



## INCREASE IN COCAINE TREATMENT

**3,248**  
cocaine  
cases

**25%**  
females

**31+**  
31 yrs  
median age

**34%**  
employed

## 2021 TREATMENT FIGURES FOR COCAINE

Source: NDTRS, HRB, 2022

# CANNABIS EUROPEAN MARKET

- 24.7 million using cannabis in the last year in ages 15-64
- 17.5 million young adults, in ages 15-34
- Irish Prevalence in 2019/20 was 7.1% last year use with 16.3% in young adults

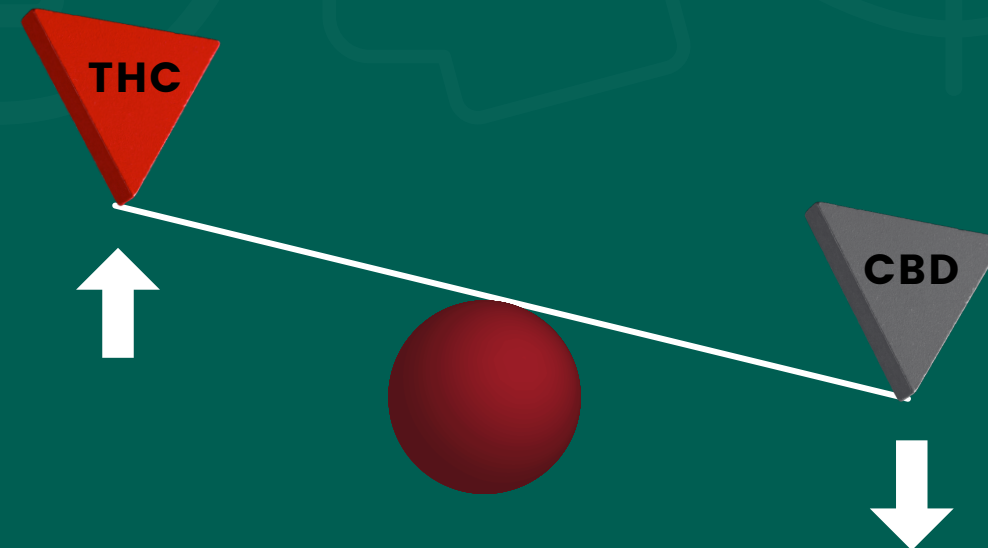


## RECENT DEVELOPMENTS WITH CANNABIS POTENCY

### TETRAHYDROCANNABINOL (THC)

Produces psychoactive effect, but can cause:

- Impairment of attention, memory and learning
- Hallucinations and paranoid ideas



### CANNABIDIOL (CBD)

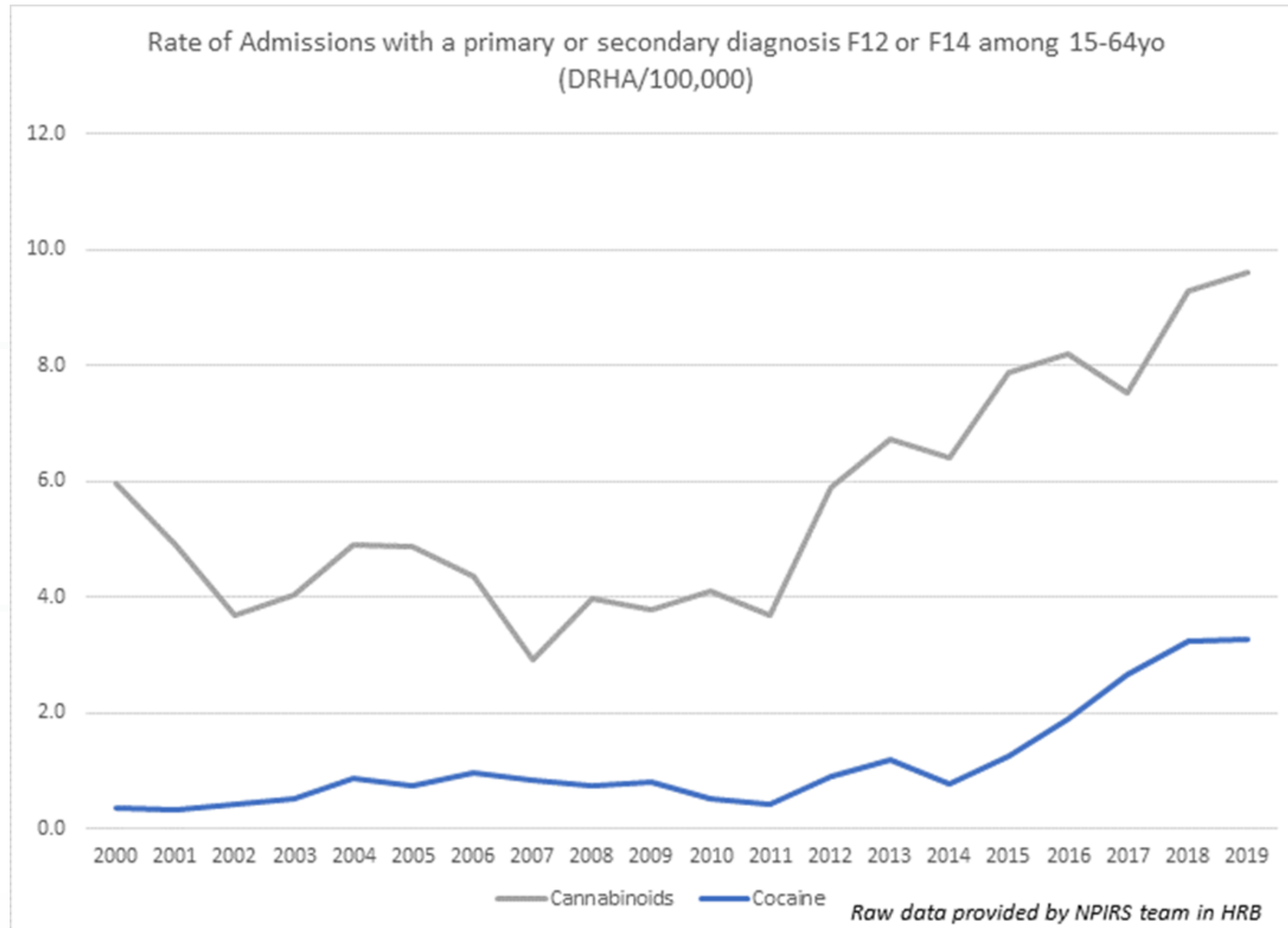
- Is not hallucinogenic
- Has anxiety relieving properties
- No adverse effect on cognition

# NEW CANNABIS PRODUCTS

- Since Covid: emergence of cannabis edibles, vapes and syrup in Ireland
- Cannabis 'edibles': food products infused with cannabis (sweets, gummies, and baked products)
  - THC content variable and unknown.
  - Effects take longer to manifest, person may ingest more
  - Products infused with synthetic cannabinoids have also been identified in Ireland
- Emergency department attendances reported with ingestion of these new products, as well as traditional cannabis
  - Often mental health problems are reason for attendance



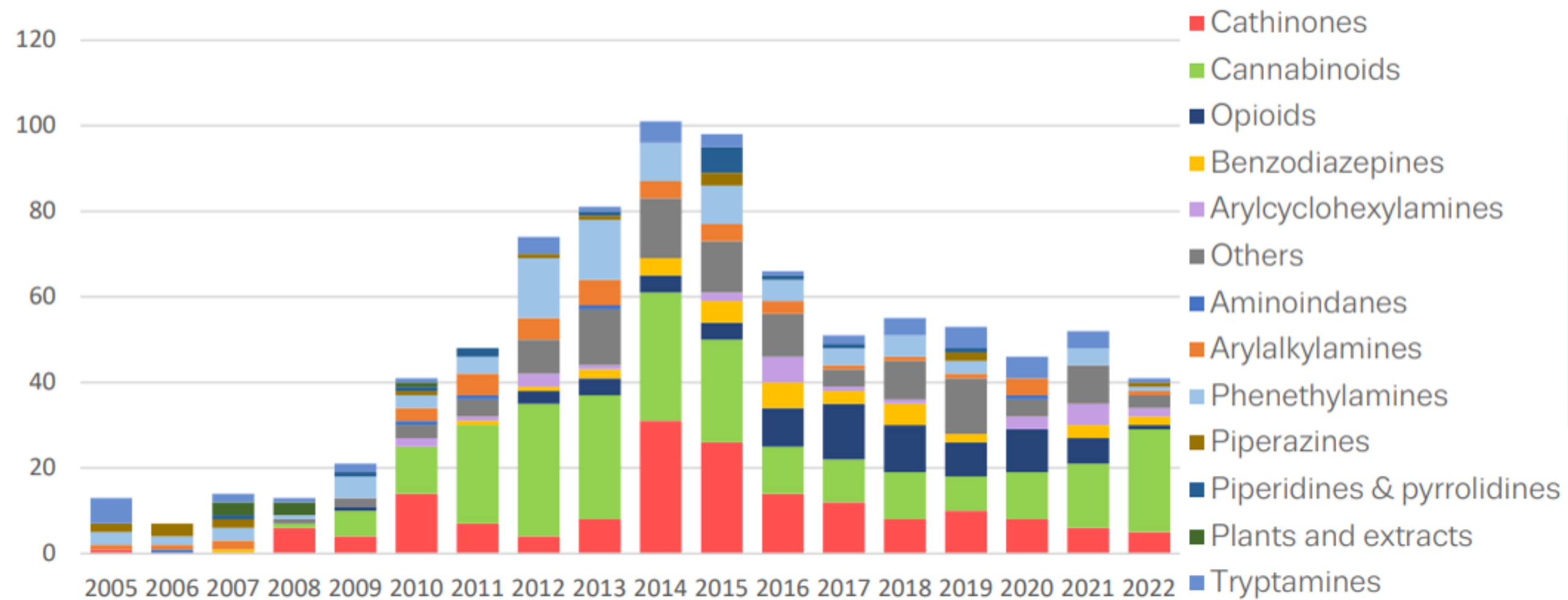
# Psychiatric Hospital Admissions 2000–2019 for cannabis and cocaine related problems





# NEW PSYCHOACTIVE SUBSTANCES 2005 -2022

Number of NPS notified for the first time, 2005 – 2022 (EU 27, Turkey and Norway)



**> 920 NPS**  
currently monitored

**41 NPS**  
reported for the first time  
in 2022

Source: EMCDDA



# HEALTH DIVERSION: HSE PERSPECTIVE

- Health Diversion is recommended by Working Group (2019) for people caught in possession of **any drug** for personal use
- Possession remains a criminal offence but response to this will change:
  - 1st** Referral by AGS to health for screening & brief intervention (**no conviction**)
  - 2nd** Adult Caution (**no conviction**)
  - 3rd** Enters Criminal Justice System
- Current status:
  - Progressing via engagement with Dept of Health, Dept of Justice, HSE and AGS
  - HSE structures are established with dedicated practitioner in each area to carry out brief intervention and onward referral for treatment if necessary



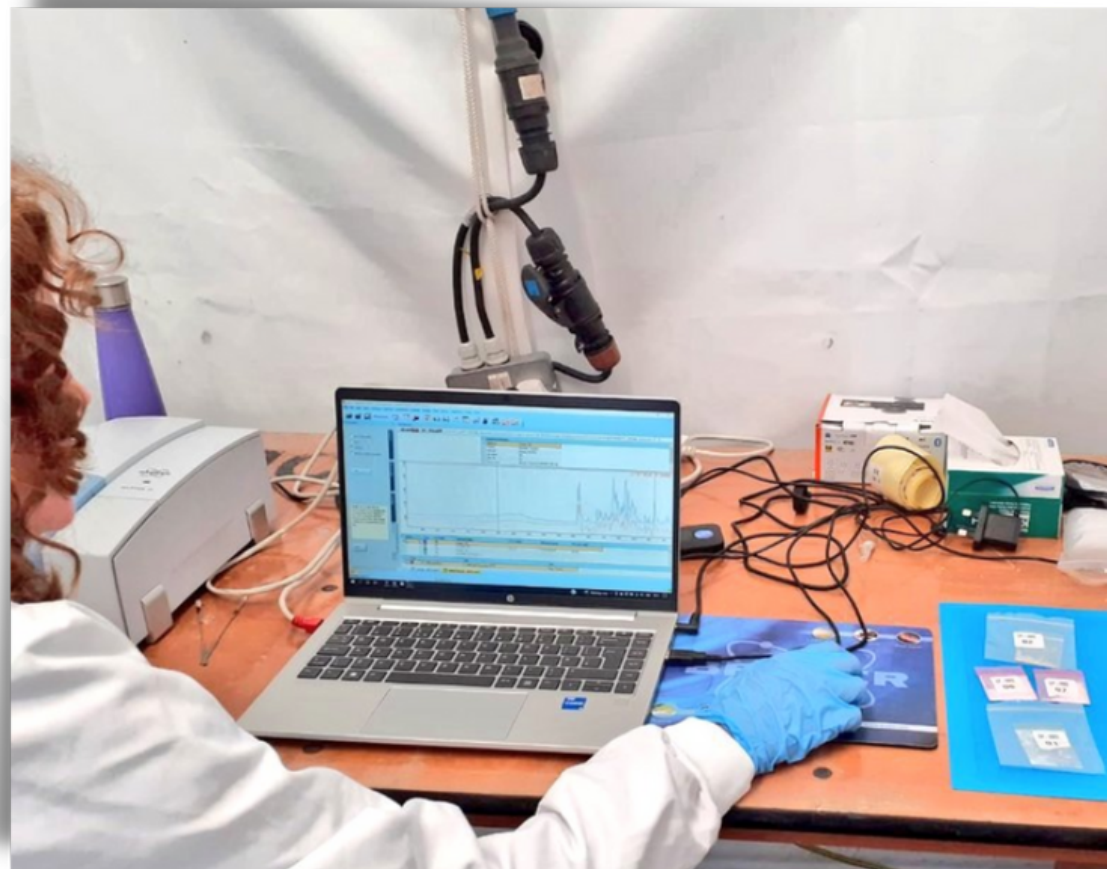
**Awaiting  
legislative process  
to allow initiation**



# HSE & AN GARDA SÍOCHÁNA INITIATIVE: HEALTH RESPONSE TO DRUG USE



## Pilot 'back-of-house' drug monitoring programme at Electric Picnic 2022:




**Caution: High Strength MDMA**

Mybrand purple skull identified as **high strength MDMA** at HSE drug monitoring lab at Electric Picnic, which is a cause for concern.

Contents are approximately **two times the average adult dose**.

Please exercise caution and remember it's safer not to use drugs at all.

Chat with HSE harm reduction teams onsite for more information. Don't be afraid to get medical help.



**HSE** #ReduceTheHarm **DRUGS.ie**  
Drug and Alcohol Information and Support



# KEY POINTS



Opioid problem is stabilising, population on treatment is ageing



Cocaine and cannabis presentations increasing. Increasing potency, mental health impacts and problem drug use among young people, including new psychoactive substances



Emphasis now is on a health-led approach, with drug monitoring a key element to inform harm reduction responses and service development



Prevention needs to be prioritised as per recent initiative from DoH



Recovery approaches should be at the core of strategies, implemented across all government departments and integrated into a whole of society response to drug use



Importance of sustained investment in health services including community and residential services