HIV/AIDS infection were identified from January 1986 to March 2009, up to 7 per cent of those individuals being female. Drug abuse by injection remains the most prevalent factor in HIV transmission in the Islamic Republic of Iran (78 per cent), although the role of sexual transmission is now increasing. Given that 60 per cent of the country’s population of 71 million is under the age of 30, the Board is concerned of the danger of HIV infection spreading in the country.

670. In the Central Asian countries, HIV and other blood-borne infections are strongly associated with drug abuse by injection. According to UNODC estimates (for 2008), in Kazakhstan approximately 100,000 individuals aged 15-64 years abuse drugs by injection, compared with 80,000 in Uzbekistan, 25,000 in Kyrgyzstan and 15,000 in Tajikistan. In Central Asian countries, the lifetime prevalence of injecting drug abuse among problematic opiate users ranges from 68 per cent (in Uzbekistan) to 95 per cent (in Kyrgyzstan). Of that group, 90-99 per cent have injected opiates at least once in the past 12 months.

671. Official statistics provided by Governments of Central Asian countries showed 6,664 new HIV cases in 2008, for a cumulative total of 31,000 HIV cases. That represents an increase of 24 per cent in the total number of registered HIV cases in one year and a 19-fold increase since 2000. According to the most recent UNAIDS estimate, in 2005 approximately 52,000 people were living with HIV/AIDS in Central Asia, while UNODC estimates that more than 2,700 people died of HIV/AIDS during the period 2006-2008. The Board urges the Governments of Central Asian countries and the international community to take prompt action to stop this concentrated HIV/AIDS epidemic, focusing on persons who abuse drugs by injection.

D. Europe

1. Major developments

672. The Board notes that the Government of the United Kingdom reclassified cannabis in January 2009, which means that cases involving cannabis are subject to stricter law enforcement. The decision reflects the fact that highly potent forms of cannabis (such as “skunk”) have become dominant on the illicit drug market of the United Kingdom. In February 2009, the Government of the United Kingdom rejected the recommendation by the Advisory Council on the Misuse of Drugs that MDMA (“ecstasy”) should be downgraded (see paragraph 695 below).

673. The abuse of certain drugs appears to be stable or declining in some countries in Europe. Information from recent national surveys suggests that cannabis use is stabilizing in many countries in the region. Similarly, the most recent data available support reports that the abuse of amphetamines and MDMA (“ecstasy”) in Europe is stabilizing or even decreasing, after having increased in the 1990s. Data from some countries suggest that some drug abusers may be replacing amphetamines and “ecstasy” with cocaine. That may be the case in Denmark, Spain (to a limited extent) and the United Kingdom.

674. Europe has a large market for cannabis and is reportedly the only region into which cannabis herb from other regions is smuggled. Western Europe remains the largest market in the world for cannabis resin. The Western European country in which the largest amount of cannabis resin is seized is Spain, followed by Portugal and France. The main sources of the cannabis resin found in Western Europe are Morocco and countries in South-West Asia, notably Afghanistan.

675. In Western Europe, the number of cocaine seizures has decreased substantially, particularly in the main ports of entry. According to the World Customs Organization, most of the cocaine entering Western Europe has been smuggled out of the Bolivarian Republic of Venezuela. Central Africa and West Africa continue to be used by traffickers as storage and transit areas for cocaine, although a decline has been noted in both the total amount of cocaine seized and the number of cocaine seizures.

676. In 2008, cocaine arrived in Europe mainly by ship. Consignments of cocaine from Colombia and Ecuador were hidden in sea freight and sent to countries in Europe, mainly Croatia, followed by the Netherlands and Montenegro. The increasing number of shipments of cocaine from South America to countries in Eastern Europe reflects a fairly new development in cocaine trafficking: cocaine is frequently smuggled into Western Europe via the Balkan route, the route traditionally used for smuggling opiates.
677. The illicit market for opiates in Eastern European countries has continued to expand. In 2008, the abuse of opiates was reported to be increasing in most Eastern European countries, particularly Albania, Belarus, Croatia, the Republic of Moldova and the Russian Federation, as well as in countries along the Balkan route.

678. The United Kingdom, Italy, France and Germany (listed in decreasing order) account for most of the heroin seized in Europe. Heroin shipments bound for Western Europe leave mainly from the Netherlands, followed by Turkey, Belgium and Pakistan. Heroin from Central and Eastern Europe is increasingly being transported by air to Western Europe. Despite recent increases in the quantity of opium seized, seizures of that drug continue to be less significant than heroin seizures.

2. Regional cooperation

679. The second phase of the operation Channel 2008 was conducted by CSTO and the Federal Drug Control Service of the Russian Federation in November 2008, with the participation of Armenia, Belarus, Kazakhstan, Kyrgyzstan, the Russian Federation, Tajikistan and Uzbekistan. The goal of the operation was to build a system of enhanced collective security to prevent trafficking in drugs from Afghanistan and the entry of precursor chemicals into Central Asian countries and Afghanistan. Representatives of the law enforcement agencies of Afghanistan, Azerbaijan, Bolivia, Colombia, Estonia, Finland, Italy, Latvia, Lithuania, Poland, Spain and the United States took part in the operation. The joint operation resulted in the seizure of over 18.7 tons of drugs, including more than 2.4 tons of heroin, 1.6 tons of cocaine, 7.3 tons of cannabis resin, 6.8 tons of cannabis herb and 20.8 tons of precursor chemicals.

680. In December 2008, senior international drug control officials attended a meeting in Vienna to coordinate efforts to stem the supply of illicit drugs from Afghanistan. The meeting was organized by UNODC within the framework of the Paris Pact Initiative, aimed at countering trafficking in and abuse of opiates from Afghanistan. Specific topics discussed at the meeting included drug law enforcement; financial flows linked to the production of and trafficking in Afghan opiates; preventing and treating drug abuse and HIV epidemics in Afghanistan and neighbouring countries; and trafficking in precursors used to manufacture heroin.


682. The sixteenth European Cities against Drugs (ECAD) Mayors’ Conference and the Second World Mayors’ Conference were held in Göteborg, Sweden, in February 2009. The main theme of the joint conference was to offer stronger support of the international drug control treaties in preparation of the high-level segment of the fifty-second session of the Commission on Narcotic Drugs, held in March 2009.

683. On 27 March 2009, a special conference on Afghanistan, organized within the framework of the Shanghai Cooperation Organisation, was held in Moscow. The conference participants discussed the impact of the situation in Afghanistan on neighbouring countries and identified ways to combine efforts to fight drug trafficking and organized crime emanating from that country. The conference was dedicated to combating drugs and finding ways to resolve the serious drug control situation in Afghanistan. One important item on the agenda was the proposal by the Russian Federation to call on the international community to increase interaction for strengthening the security belts around Afghanistan. Twenty countries and eight international organizations were represented at the conference.

684. EMCDDA held a conference on the theme “Identifying Europe’s information needs for effective drug policy” in Lisbon in May 2009. The conference brought together some 300 policymakers, researchers and practitioners from Europe, North America and Oceania. The conference participants took stock of
progress in European drug control policy, considered future key issues in drug control in Europe and discussed the possible impact of those issues on the need for information.

685. Representatives of 33 countries participated in the Eighth Meeting of Heads of National Drug Law Enforcement Agencies, Europe, held in Vienna in June 2009. The participants reviewed trends, strategies and effective responses to drug trafficking, the importance of information in dismantling drug trafficking organizations and the influence of the Internet and other electronic media on drug trafficking.

686. The Board welcomes the Livestrong Global Cancer Summit, held in Dublin in August 2009. The Summit was a landmark event, bringing together world leaders, industry, non-governmental organizations and individuals to spotlight their collective commitment to the global fight against cancer. Several specialized agencies and other organizations in the United Nations system, such as WHO and the International Atomic Energy Agency, were also represented by high-ranking officials.

687. The Board takes note of the work of the Council of Europe’s Ad Hoc Committee on Counterfeiting of Medical Products and Similar Crimes Involving Threats to Public Health, which met in the course of 2009 to prepare a draft convention on the subject.

688. Several joint law enforcement operations in Western Europe have resulted in the interception of large quantities of illicit drugs. The operations required close cooperation with European agencies such as the Maritime Analysis and Operations Centre – Narcotics (MAOC-N), an intergovernmental task force set up to prevent drug trafficking by sea.

3. National legislation, policy and action

689. In Finland, Narcotics Act No. 373/2008 entered into force in September 2008. The Act aligns Finnish drug control legislation with the corresponding European regulations and is aimed at enhancing drug control by increasing cooperation among national authorities. The Act outlines the main principles of drug control and covers all substances controlled under the 1961 Convention, the 1971 Convention and the 1988 Convention. The Act prohibits the cultivation of coca bush, khat plants and psilocybin mushrooms, as well as the cultivation of opium poppy, hemp and cactus plants containing mescaline for use as drugs or raw material for drugs.

690. In November 2008, a series of referendums were held in Switzerland to decide on the national drug control policy. Voters decided in favour of offering prescribed heroin to drug abusers on a permanent basis but rejected the decriminalization of cannabis.

691. In Montenegro, the National Strategic Response to Drugs (2008-2012) and Action Plan 2008/2009 was adopted. The document includes comprehensive measures to reduce illicit drug supply and demand in the country. The national office on drugs is the coordinating agency for activities aimed at reducing the spread of drug abuse, especially among young people, and increasing the possibilities for the rehabilitation and social reintegration of drug addicts.

692. In January 2009, the Government of the Netherlands established an advisory committee on drug control policy to review the national drug control policy. In its conclusions, presented in June 2009, the committee stated that the national drug control policy was achieving its objective of limiting damage to the health of drug users. In addition, the committee identified areas where the policy was in urgent need of change, such as the use of drugs by minors. A memorandum on drug control policy, based partly on the recommendations of the committee, is expected to be issued.

693. In February 2009, the Government of Romania reorganized the Pharmaceutical Department of the Ministry of Health, creating a general directorate for strategies and medicine policy. The responsibilities of the general directorate include monitoring the national system for the distribution of narcotic drugs and psychotropic substances and overseeing activities to control the manufacture and import of controlled substances. The Board encourages the Government to continue improving the mechanism for controlling the manufacture and distribution of narcotic drugs and psychotropic substances used for medical and scientific purposes.

694. In Spain, the national drug control strategy for the period 2009-2016, which had been adopted by the Council of Ministers in January 2009, was published in the Official State Gazette in February 2009. The objectives of the strategy include delaying the age of initial drug abuse; reducing the use of licit and illicit
drugs; guaranteeing the provision of quality assistance to all people directly or indirectly affected by drug abuse; reducing or limiting the consequences, in particular the health consequences, of drug abuse; facilitating the integration of people into the rehabilitation process, through training, for example; and increasing the effectiveness of measures aimed at regulating the licit supply of and controlling the illicit demand for psychotropic substances. The strategy is also intended to optimize coordination and cooperation at the national, regional and international levels. The main elements of the strategy are prevention, supply reduction and training. The strategy has an evaluation component, for assessing the value of the strategy, determining whether the aims have been achieved and proposing corrective measures.

In February 2009, the Advisory Council on the Misuse of Drugs in the United Kingdom issued a report on MDMA (“ecstasy”), reviewing its harmfulness and classification under the Misuse of Drugs Act 1971. The report contained 13 recommendations to the Government, 11 of which were accepted. The Government rejected the recommendation that “ecstasy” should be downgraded, citing concerns that the downgrading of the substance could lead to an adverse impact on patterns of use and attitudes and that a change in classification might encourage the development of international trafficking in “ecstasy” by organized criminal groups. The Government also rejected the recommendation to explore a national scheme to enable “ecstasy” to be tested for individual use, stating that that might obscure the messages that “ecstasy” was harmful and should not be used. The Board welcomes those decisions by the Government of the United Kingdom.

In March 2009, the Government of Serbia adopted the National Palliative Care Strategy, which focuses on the use of opioids for pain relief. One important objective of the strategy is the revision of national laws regulating palliative care in Serbia.

In April 2009, the Government of Bosnia and Herzegovina established an agency for medicines and medical products in accordance with the law on medicines and medical products that had entered into force in July 2008. The law applies to medicinal products containing narcotic drugs and psychotropic substances, as well as the precursor chemicals used in their manufacture. In addition, the law covers areas such as licensing requirements, the maximum allowed substance content in doses of medication, the quality of drugs crossing borders, manufacturing methods, the use of equipment, transport and the required documentation for transportation. The new law is expected to strengthen control of the movement of narcotic drugs, psychotropic substances and their precursors within the country.

In May 2009, Germany’s lower house of parliament voted in favour of a law allowing the provision of diamorphine (pharmaceutically manufactured heroin) to severe drug abusers who failed to respond to other forms of treatment. The law is based on the results of a study by the Ministry of Health involving persons severely addicted to opiates, comparing their response to treatment with heroin with their response to treatment with methadone. The results showed that diamorphine-supported treatment was successful with respect to the person’s overall health condition, abstinence, drug abuse reduction and social reintegration. Diamorphine-supported treatment will be offered to about 1,500-3,000 drug abusers. Heroin-supported treatment is also offered in a few other countries in Western Europe.

In the United Kingdom, a curriculum on substance misuse in undergraduate medical schools has been developed and is now being implemented at all of the medical schools in England. One of the core aims of the curriculum is to enable doctors to assist in the prevention of substance misuse and management of substance dependence. The other core aims include: to enable schools to help future doctors and doctors in training to be aware of the risks posed by substance misuse to their own health and to their professional practice and conduct; and to promote the proper care and protection of the general public.

4. Cultivation, production, manufacture and trafficking

Narcotic drugs

Cannabis plants are illicitly cultivated in many countries in Europe. Albania, Bulgaria and Serbia have emerged as some of the main countries in Eastern Europe in which cannabis is illicitly cultivated. In 2009, as in 2008, the Federal Criminal Police Office (BKA) of Germany reported that the illicit cultivation of cannabis, both outdoors and indoors, had intensified. More than 500 illicit cannabis cultivation sites, ranging
from small indoor facilities to large outdoor plantations, were uncovered in Germany in 2008. In Switzerland, where there is significant illicit cannabis cultivation, there was a reduction in the total area under illicit cannabis cultivation and in the number of facilities illicitly producing cannabis on a smaller scale. In the Netherlands, intensified law enforcement efforts targeting the illicit cultivation of cannabis plants is said to have contributed to a decline in the quality and an increase in the prices of cannabis on the domestic market. While European cannabis cultivation sites appear to be the source of a growing proportion of the cannabis herb found in Europe, large quantities of cannabis herb continue to be smuggled into the region. Europe is the only region in the world into which significant quantities of cannabis herb from other regions, such as Africa or Asia, are smuggled.

701. Albanian cannabis is smuggled by land on a route leading through the former Yugoslav Republic of Macedonia and Bulgaria to Turkey and on another route leading to Croatia, Bosnia and Herzegovina, Montenegro, Serbia, Slovenia and countries in Western Europe. Illicit cannabis cultivation has also been reported in the Republic of Moldova, the Russian Federation and Ukraine; about half of the cannabis cultivated in those countries is for the domestic market.

702. Western Europe remains the largest market in the world for cannabis resin. Each year, Spain accounts for more than 70 per cent of the cannabis resin seizures reported in Western and Central Europe and accounts for the largest total amount of cannabis resin seized worldwide (628 tons in 2008). In some countries in Europe, there has been an increase in the amount of cannabis resin seized; in Portugal, for example, 61 tons of cannabis resin were seized in 2008. For consignments of cannabis resin, the most frequently cited European destination is France, followed by the Netherlands, Belgium, Portugal and Italy.

703. Trafficking in cannabis resin, though limited in most Eastern European countries, is slightly more widespread in the Russian Federation. In 2008, the total amount of cannabis resin seized in the Russian Federation was 329 kg. Most of the cannabis resin was found in motor vehicles or on-board trains. Most of the cannabis resin smuggled into Europe continues to be from Morocco or countries in Central Asia.

704. There continues to be a significant level of trafficking in cannabis herb in Eastern Europe and Central Europe. Most of the cannabis herb produced in those subregions originates in Albania, Montenegro, the Republic of Moldova, Serbia, the former Yugoslav Republic of Macedonia and Ukraine. In Albania, more than 145,000 cannabis plants were eradicated in about 360 operations and more than 3,941 kg of cannabis herb were seized in 2008. In Croatia, 220 kg of cannabis herb and 4 kg of cannabis resin were seized in 2008. In Bosnia and Herzegovina, more than 57 kg of cannabis herb were seized in 686 seizures in 2008. In Bulgaria, the Government reported that 14,806 kg of cannabis plants were destroyed and 1,026 kg of cannabis herb were seized in 2008. The Board urges the Governments of countries in Eastern and Central Europe to further intensify their efforts to counter cannabis trafficking.

705. European countries continue to account for virtually all cocaine seizures occurring outside the Americas. In 2008, the amount of cocaine seized in Europe declined considerably compared with previous years, which were characterized by record seizures. The considerable decrease in the total amount of cocaine seized in the region is primarily attributable to the fact that fewer seizures of cocaine were made in Portugal and Spain, two of the main entry points for the drug, for two consecutive years. The decrease is believed to also be the result of recent changes in the routes used for smuggling cocaine into those countries.

706. The smuggling of cocaine through Eastern European countries has significantly increased over the past few years. The most significant seizures made in 2008 were 381 kg of cocaine, seized at the port of Koper, in Slovenia, and liquid cocaine with a gross weight of 163 kg, seized by the customs authorities in Slovakia.

707. A new modus operandi for cocaine used by cocaine traffickers was uncovered in February 2008, when law enforcement authorities in Slovakia found 164 kg of cocaine in wine shipped from South America via Germany. The World Customs Organization reported that the cocaine had been dissolved to form a viscous fluid and poured into several bottles that were subsequently declared as “red wine”.

708. “Crack” cocaine continues to be of marginal importance in Western Europe. Nevertheless, the amount of “crack” cocaine seized in Germany increased from almost 5 kg in 2007 to about 8 kg in
2008. Most (96 per cent) of those seizures of “crack” cocaine were made in the city of Hamburg.

709. Heroin seizures increased in Western Europe in 2007 and 2008. The increase in heroin seizures in Europe as a whole was attributed to South-Eastern Europe and Eastern Europe, which are believed to be used as transit areas for opiates destined for Western and Central Europe. In Europe, most of the heroin seizures are made in France, Germany, Italy and the United Kingdom. In 2008, the amount of heroin seized in Germany fell by 53 per cent. The United Kingdom, Italy, France, Germany and Norway (listed in descending order) were the main countries of destination of heroin consignments entering Western Europe. The heroin is sent in consignments of 50-1,000 kg.

710. Almost all of the heroin on the illicit markets in Eastern Europe originated in Afghanistan. Turkey continues to be the starting point for the Balkan route, used for smuggling heroin into Europe. In addition, heroin continues to be smuggled along the “silk route”, through Central Asia into the Russian Federation, where it is abused or, to a lesser extent, smuggled further into other CIS member States.

711. Heroin is smuggled mainly by car and by train. According to the World Customs Organization, no heroin seizure was made along air traffic routes in Eastern and Central Europe during 2008. Train connections between the Russian Federation and the countries to the west of it — Belarus, Poland and Ukraine — are increasingly being used for smuggling heroin into Western Europe. Reports suggest that heroin is increasingly being smuggled into Western Europe along air routes from Eastern and Central European countries: more than 90 seizures of heroin, totalling 637 kg, were made in major airports in Western Europe in 2008.

712. In 2008, heroin accounted for 92 per cent of all the seizures of opiates effected in Eastern and Central European countries. In the Russian Federation, heroin accounted for approximately 42 per cent of all the seizures of opiates. In Eastern and Central Europe, major seizures of heroin were reported in Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Greece, Romania and Slovenia. Heroin seizures in Poland, Serbia and Ukraine decreased in 2008 compared with the previous year. In 2008, Bulgarian law enforcement authorities intercepted heroin consignments for the first time: four consignments of heroin, totalling 422 kg, were seized on a route used as an alternative to the classic Balkan route, leading from the Islamic Republic of Iran through Armenia, Azerbaijan and Georgia and then crossing the Black Sea by ferry boat from Poti, Georgia, to Burgas, Bulgaria.

713. In Western European countries, the total amount of opium seized was significantly lower than the total amount of heroin seized. The largest amount of opium seized was reported in Sweden.

**Psychotropic substances**

714. According to UNODC, the quantity of amphetamine seized in Eastern Europe increased significantly from 24 kg in 2007 to 129 kg in 2008. Poland accounted for more than 77 per cent of the seizures of amphetamine effected in Eastern Europe in 2008. More than 100 kg of amphetamine were seized by Bulgarian authorities. In Croatia, 15 kg of amphetamine were seized in 2008.

715. In Europe, the amount of amphetamine seized rose by 40 per cent, to 8.2 tons, in 2007. That was the highest total ever registered for Europe, representing more than one third of the world total in 2007. The increase in 2007 was mainly attributable to Western Europe and Central Europe, which together accounted for more than 90 per cent of the European total, for the first time since 2002. The largest increase was registered in the Netherlands, where 2.8 tons of amphetamine were reported to have been seized in 2007, more than four times the highest amount ever reported by a European country. The amount of amphetamine seized also increased in France, Germany and Norway but declined in Sweden.

716. In Germany, seizures of amphetamine and methamphetamine increased, together amounting to 1,283 kg in 2008. German authorities reported that by far the largest share of seized amphetamine of known origin came from the Netherlands. Amphetamine was also smuggled out of Belgium, Poland or, in smaller amounts, the Czech Republic.

717. Until now, illicit methamphetamine manufacture has often involved small groups of persons manufacturing the drug principally to meet their own needs. While that is still the case, EMCDDA has noted an increasing level of professionalization in illicit methamphetamine manufacture (and trafficking),
together with the possible involvement of organized criminal groups. Given the capacity of modern illicit production processes, that development could lead to methamphetamine becoming more widely available on illicit markets in Europe. There is recent evidence of more manufacturing and tableting, which might indicate that the methamphetamine manufacturing sites are increasing in size.

718. Although methamphetamine seizures made in Europe are small in comparison with those made in North America and East and South-East Asia, they increased from 187 kg in 2006 to 390 kg in 2007. The largest increase was registered in Norway, but methamphetamine seizures also rose in Lithuania and Sweden. In Belgium and the Netherlands, seizures of methamphetamine were reported in 2007 for the first time ever. In Germany, methamphetamine seizures are mostly made in areas bordering the Czech Republic.

719. Seizures of MDMA (“ecstasy”) declined in Western Europe in 2008, a development that is partly attributable to the fact that the drug is increasingly being manufactured in the countries in which it is abused — in Europe, as well as in North America and South-East Asia. The largest portion of the seized “ecstasy” with a known origin or transit route is from the Netherlands. The second most common source of “ecstasy” continued to be Belgium. As in the case of amphetamine, the “ecstasy” tablets were often seized while en route to Southern and Eastern Europe.

720. According to Europol, the illicit manufacture of methamphetamine takes place mainly in countries in Central and Eastern Europe, above all in the Czech Republic and the Russian Federation. In 2008, the Czech Republic accounted for 96 per cent (or 457) of the clandestine methamphetamine laboratories dismantled in Europe. The Russian Federation reported the seizure of 137 methamphetamine manufacturing sites. In addition, four such sites were seized in Slovakia and three were seized in Poland.

721. In Europe, seizures of MDMA (“ecstasy”) remained low in 2008, totalling 63 kg. The largest single seizure of “ecstasy”; amounting to 56 kg, was made by Bulgarian authorities.

722. According to UNODC, Bosnia and Herzegovina, Bulgaria, Montenegro and Serbia are emerging as countries used for the illicit manufacture of amphetamine. In Eastern European countries, seizures of precursors of amphetamine have increased in the past few years. According to information submitted to the Board, major seizures of P-2-P in 2007 were reported in Poland (a total of 241 litres), the Russian Federation (194 litres), Estonia (96 litres) and Bulgaria (32 litres).

723. Traffickers’ attempts to use countries in Europe as sources of acetic anhydride have continued. Large amounts of the substance have been seized in States members of the European Union. Investigations have determined that the seized shipments of acetic anhydride had been diverted from legitimate trade within the European Union (for more details, see the 2009 report of the Board on the implementation of article 12 of the 1988 Convention).

Substances not under international control

724. Khat, a substance not under international control, is often smuggled into Europe via the Netherlands and the United Kingdom, where it has not been placed under national control, and then shipped to other countries in Europe. Significant amounts of khat (more than 100 kg) have been seized in Belgium, Denmark, Finland, France, Germany, Italy, Norway, Sweden and Switzerland. In 2008, Estonian authorities seized khat for the first time.

725. The abuse of khat is often not noticed in countries in Europe. Khat is used almost exclusively in migrant communities in Finland, Sweden, the United Kingdom and other countries in the region.

726. In May 2009, the Government of the Czech Republic adopted an amendment to the act on dependency-producing substances, placing under national control the substance benzylpiperazine. The amendment to the national drug law is expected to strengthen further the control of the movement of precursors and chemicals.

psychotropic substances and precursors within the country.

5. Abuse and treatment

727. While cannabis resin remains the most commonly abused drug in Europe, the abuse of products containing cannabis herb has increased in the past few years. According to EMCDDA, the average annual prevalence of cannabis abuse among Europeans 15-64 years old is 6.8 per cent (more than 23 million persons). National figures range from 0.8 to 11.2 per cent, the lowest figure being in Malta, followed by Bulgaria, Greece and Sweden, and the highest being in Italy, followed by Spain, the Czech Republic and France. Lifetime prevalence of cannabis abuse is 21.8 per cent (or more than 71 million persons aged 15-64), national estimates range from 1.7 to 36.5 per cent. The lowest lifetime prevalence rate was reported in Romania, followed by Malta, Bulgaria and Cyprus, and the highest was reported in Denmark, followed by France, the United Kingdom and Italy.

728. In Europe, cannabis abuse appears to be stable or declining in a number of countries. Intensified prevention efforts and increased availability of information on the health risks may have contributed to that development. In the United Kingdom, a clear downward trend has been observed over the years; in England and Wales, for example, the prevalence of cannabis abuse among the population aged 16-59 fell from 10.9 per cent in the reporting year 2002/03 to 7.9 per cent in the reporting year 2008/09. In Spain, the prevalence of cannabis abuse among secondary school students aged 14-18 also declined, from a peak of 25.1 per cent in 2004 to 20.1 per cent in 2008. Those and other data suggest that a reversal of the strong upward trend of the period 1993-2003 has begun. That is confirmed by the results of the European School Survey Project on Alcohol and Other Drugs (ESPAD), which show that there was no increase in recent use of cannabis in any European country between 2003 and 2007.

729. The ESPAD results published in March 2009 reveal that, on average, 23 per cent of male students between 15 and 16 years of age and 17 per cent of female students in the same age group have tried illicit drugs at least once during their lifetime. Reported illicit drug use continues to vary considerably in all countries. In the Czech Republic, almost half of the students (46 per cent) reported illicit drug use, whereas in Cyprus, Finland, Norway, Romania and Sweden 8 per cent or less reported illicit drug use.

730. In Europe, the vast majority of students who tried illicit drugs used cannabis. Lifetime cannabis use was reported by 19 per cent of the students. That was followed by the use of MDMA (“ecstasy”), cocaine or amphetamines (about 3 per cent). LSD, “crack” cocaine and heroin were reported to have been used less frequently. The highest lifetime prevalence of “ecstasy” use was in Bulgaria, Estonia, Latvia, Slovakia and the United Kingdom (Isle of Man): 6-7 per cent.

731. The abuse of cocaine appears to be concentrated in a few countries in Western Europe, while the abuse of the drug is relatively low in most other European countries. A decline in cocaine abuse has been recorded in Spain and the United Kingdom. In Spain, a country with a high rate of cocaine abuse, the levels of lifetime, annual and last-month use of cocaine among secondary school students aged 14-18 years have declined; for example, annual prevalence of cocaine use among secondary school students fell from a peak of 7.2 per cent in 2004 to 3.6 per cent in 2008. In the United Kingdom, data from England and Wales also suggest a slight decline in the annual prevalence of cocaine use. Declining or stable cocaine abuse has also been reported in Austria, Germany and Switzerland, whereas an increase in cocaine abuse has been reported in France and Ireland.

732. Heroin abuse appears to be relatively stable in most countries in Western Europe. However, a substance abuse survey indicated an increase in the lifetime prevalence of heroin use among young people aged 17 years in France, from 0.7 per cent in 2005 to 1.1 per cent in 2008.

733. According to UNODC, the number of opiate users in Eastern Europe is estimated to be between 2 million and 2.5 million. According to the World Drug Report 2009, the Russian Federation is the largest market for opiates in the region, with an estimated 1.68 million opiate abusers. The second largest market for opiates in the region is Ukraine, with an estimated 323,000-423,000 opiate abusers. In 2008, the abuse of opiates was reported to be increasing in most Eastern European countries, particularly in Albania, Belarus, Croatia, the Republic of Moldova and the Russian
734. According to the Federal Drug Control Service of the Russian Federation, there are 2.5 million drug addicts and more than 5.1 million abusers of drugs other than heroin in that country, almost double the figures for 2002. The abuse of heroin and other opiates predominate. The Federal Drug Control Service estimates that 10,000 heroin addicts die from overdose each year. Almost 65 per cent of newly detected HIV cases in the Russian Federation are linked to the abuse of drugs by injection.

735. In the past five years, the reported demand for treatment related to methamphetamine abuse has been increasing in both the Czech Republic and Slovakia. In the Czech Republic, 61 per cent of all persons receiving treatment for drug abuse reported methamphetamine as their primary drug of abuse. Abusers of methamphetamine account for about two thirds of all problematic drug abusers. In 2008, methamphetamine abuse was reported in 26 per cent of all requests for treatment for drug abuse in Slovakia. In the Czech Republic, 82 per cent of patients in treatment for methamphetamine abuse reported having abused drugs by injection; in Slovakia, the figure was 41 per cent.

736. Methamphetamine abuse continues to be limited in Eastern Europe, especially in comparison with the abuse of other stimulants such as cocaine and amphetamine. In European countries, the highest prevalence of the abuse of methamphetamine, known locally as “pervitin”, is in the Czech Republic and Slovakia. Some data indicate increased availability of the drug in Hungary and Poland, although the overall level of abuse appears to have remained relatively low.

737. The Board notes the results of the survey on the prevalence of use of sedatives or tranquillizers and antidepressants in Ireland and Northern Ireland (in the United Kingdom). The survey revealed that older adults reported higher prevalence of use in their lifetime, in the past year and in the past month than younger adults for the use of sedatives or tranquillizers and antidepressants and that women reported higher prevalence rates than men for antidepressants. Lifetime prevalence rates for the use of sedatives or tranquillizers and antidepressants were higher among respondents who were separated, divorced or widowed. Various indicators of deprivation (lower socio-economic groups, not being in paid work and lower educational attainment) were associated with higher prevalence rates for sedatives or tranquillizers and antidepressants. The Board encourages the Governments of other countries in Europe to carry out similar surveys, as the excessive use of psychotropic substances is often under-diagnosed.

738. In 2008, according to the Ministry of Health and Social Development of the Russian Federation, of the 389,302 drug abusers registered in treatment centres, 46,976 (12.1 per cent) were HIV-positive. On average, 8,000 people die every year in the Russian Federation as a result of the toxic effects of narcotic drugs and psychotropic substances; about 1,000 of those people die of an overdose of drugs, mainly opiates.

739. The HIV epidemic in Eastern Europe is largely concentrated among persons who abuse drugs by injection. It is estimated that in Eastern Europe, 110,000 people became infected with HIV in 2007, while some 58,000 died of AIDS. A high level of HIV infection has been reported among persons who abuse drugs by injection in Belarus (52 per cent). The number of newly reported HIV cases is rising in Georgia and the Republic of Moldova.

740. In 2008, 1,449 drug-related deaths were registered in Germany, an increase of 3.9 per cent compared with the previous year; the reasons for the increase have not been established. In the United Kingdom, the National Programme on Substance Abuse Deaths reported that it had received from coroners in England and Wales, Northern Ireland, the Channel Islands and the Isle of Man notifications of 1,490 drug-related deaths occurring in 2008, a decrease of 3.2 per cent compared with the number reported in the previous year (1,539).

741. In December 2008, an analysis of drug-related deaths between 1998 and 2005 was published in Ireland. Of the 2,442 drug-related deaths recorded in that period, 1,553 were directly drug-related deaths (poisonings) and 889 were indirectly drug-related deaths (non-poisonings). The annual number of deaths by poisoning increased from 178 in 1998 to 232 in 2005. The majority of deaths by poisoning were males. Moreover, the majority of the cases of death by poisoning involved people aged 20-40 years. Of the 1,553 cases of death by poisoning, 714 (46.0 per cent) were attributable to a single drug or substance. Heroin and unspecified opiates accounted for 159 (22.3 per
cent) of the single-drug poisonings, analgesics containing an opiate compound accounted for 85 (11.9 per cent) deaths and methadone accounted for a further 61 (8.5 per cent) deaths. The number of deaths by poisoning in which cocaine was implicated rose from 5 in 1998 to 34 in 2005. Cocaine was implicated in 100 cases (6.4 per cent of all deaths by poisoning). Of the deaths where cocaine was involved, 29 per cent were attributable to cocaine alone. Prescription medication and over-the-counter medication were implicated in many of the deaths by poisoning. Benzodiazepines played a major role in poly-substance poisonings. Benzodiazepines were involved in 30 per cent of deaths by poisoning.

742. The Board takes note of the EMCDDA publication on Internet-based drug treatment interventions, a new and complementary approach to drug abuse treatment in some European Union member States. An Internet-based drug treatment intervention is defined as “an Internet-based programme that comprises a specially developed/adapted, structured and scheduled drug treatment intervention”. The report identifies several Internet-based drug treatment interventions designed for abusers of cannabis, cocaine and “club drugs” (such as MDMA (“ecstasy”)). Despite the need for further investigation and the evaluation of existing Internet-based drug treatment interventions, the available data show promising results for further research and development in the European Union. Internet-based drug treatment interventions may prove to be a useful option for reaching a population of drug users in need of support who are often not reached through more traditional approaches.

743. Access to opioid substitution treatment has expanded considerably over the past few years. According to EMCDDA, the total number of drug abusers receiving substitution treatment in member States of the European Union and in Norway in 2007 is estimated at 600,000, up from 570,000 in 2005 and 500,000 in 2003. The available data on the number of drug abusers in substitution treatment suggest an increase in all European countries except France, Hungary, Luxembourg, the Netherlands (countries in which the situation remained nearly stable) and Spain (where a decline that started already in 2002 has continued). The most rapid scaling up of such treatment was seen in Bulgaria (where in 2007 nearly 3,000 treatment places were available, compared with only 380 in 2003) and in Estonia (where the number of drug abusers in substitution treatment increased from 60 to more than 1,000 within five years). The number of drug abusers in substitution treatment more than doubled in the period 2003-2007 in the Czech Republic, Finland, Latvia and Norway. An increase in excess of 40 per cent was reported in Greece, Poland, Portugal, Romania and Sweden.

E. Oceania

1. Major developments

744. Demand for MDMA (“ecstasy”) in Australia has increased in recent years. According to the World Customs Organization, approximately 36 per cent of the total amount of “ecstasy” seized globally in 2008 was destined for that country, where widespread use and stable prices underpin demand for that drug. While Canada has remained a significant source of “ecstasy” destined for Australia, Mauritius was also identified as the country from which a shipment of “ecstasy” departed for Australia, an indication that traffickers are devising new routes for smuggling that substance into Australia.

745. In recent years, there has been a significant increase in the smuggling of pharmaceutical preparations containing pseudoephedrine into New Zealand, indicating continued illicit manufacture of amphetamine-type stimulants in that country. The number of pseudoephedrine tablets seized in 2008 was almost 13 times that seized in 2002. Most shipments of preparations containing pseudoephedrine appear to be organized by Asian organized criminal groups based in New Zealand that use Asian students studying in that country and other temporary visitors as “receivers” for those shipments. China has emerged as a major source of pseudoephedrine tablets seized at the New Zealand border. There have also been reports that pseudoephedrine tablets are smuggled into New Zealand from several countries in Oceania, including Fiji, Papua New Guinea and Tonga.

746. The annual prevalence rate of amphetamine and methamphetamine abuse in New Zealand is among the highest in the world; nevertheless, that rate declined gradually from its peaked level at 5 per cent in 2001 to 3.4 per cent in 2006. A recent survey suggested that among persons aged 15-45, the annual prevalence rate further decreased to 1.4 per cent in 2009.