

News release

from the EU drugs agency in Lisbon



Cocaine seizures at record levels in a competitive drug market

(6.6.2019, LISBON — EMBARGO 11.30 CET/10.30 WEST/Lisbon time) Europe is seeing signs of an increase in cocaine availability, with seizures of the drug at record levels. This is according to the *European Drug Report 2019: Trends and Developments*, released by the EU drugs agency (EMCDDA) today in Brussels (1). In its annual overview, the agency also explores: the challenges associated with heroin and new synthetic opioids, the latest developments in the cannabis market, Europe's growing role in synthetic drug production and the use of digital technologies for health benefits in the drugs field.

Dimitris Avramopoulos, European Commissioner for Migration, Home Affairs and Citizenship, says: 'Today's report shows the complex nature of Europe's drug phenomenon. Drugs remain a constantly evolving, multi-faceted threat to our societies, affecting the life of millions of citizens around the world. We need a more coordinated approach that tackles both supply and demand. Our efforts are bearing fruit with our new rules to ban psychoactive substances and our enhanced cooperation with international partners. But we also need to look at the role of digitalisation in the drug market. We have no time to spare. We need to be coordinated at the national, European and international levels. Together with our EU drugs agency, we will continue to play a leading role in this effort.'

The **EMCDDA** report highlights the continuing high availability of most illicit substances. The latest data show that in Europe (EU-28, Turkey and Norway), over 1 million seizures of illicit drugs are reported annually. Around 96 million adults in the EU (15–64 years) have tried an illicit drug in their lifetime and an estimated 1.2 million people receive treatment each year for illicit drug use (EU-28). In 2018, 55 new psychoactive substances (NPS) were detected in the EU for the first time, bringing the total number monitored by the agency to 730.

EMCDDA Director Alexis Goosdeel says: 'The challenges we face in the drugs area continue to grow. Not only are there signs of increased availability of established plant-based drugs like cocaine, but we are also witnessing an evolving market where synthetic drugs and drug production within Europe are growing in importance. This can be seen in problems associated with the use of highly potent synthetic opioids, in new production techniques for MDMA and amphetamines, and in recent developments in the processing of morphine into heroin inside Europe's borders'.

Cocaine: record seizures, new distribution methods and evidence of growing health problems

Latest data on cocaine show that both the number of seizures and quantities of cocaine seized are at record levels. Over 104 000 cocaine seizures were reported in the EU in 2017 (98 000 in 2016), amounting to 140.4 tonnes, around double the quantity seized in 2016 (70.9 tonnes) (Figure 1.6). Although the retail price of cocaine remained stable, its purity at street level reached its highest level in a decade in 2017 (Infographic, p. 26). Cocaine enters Europe through numerous routes and means, but the growth in large-volume trafficking, using maritime shipping containers, stands out as a major challenge.

There is evidence that the use of social media, darknet marketplaces and encryption techniques are playing an increasing role in enabling smaller groups and individuals to engage in drug dealing. Looking at the cocaine market, entrepreneurship can be seen in innovative distribution methods. One example is the existence of

cocaine 'call centres', with couriers providing fast and flexible delivery. Such methods — reflecting a potential 'uberisation' of the cocaine trade (²) — are indicative of a competitive market in which sellers compete by offering additional services beyond the product itself.

Cocaine is the most commonly used illicit stimulant drug in the EU, with around 2.6 million young adults (15–34 years) having used it in the last year (2017 estimate). A recent study of drug residues in municipal wastewater revealed that, between 2017 and 2018, there were increases in cocaine metabolites in 22 of the 38 cities with data for this period, confirming the upward trend also reported in 2017. In 2018, the highest residues standardised per 1 000 people per day were recorded in cities in **Belgium**, **Spain**, the **Netherlands**, and the **UK**. In some cities in **Eastern Europe**, recent data show an increase, albeit from a low level (see Figure 2.4).

There are signs that the increase in cocaine supply is associated with more reported health problems. The latest estimates show that around 73 000 clients now enter specialised drug treatment for cocaine-related problems. Of particular concern are the 11 000 of these who entered treatment for crack cocaine-related problems, a particularly damaging form of cocaine consumption. The number of 'new' clients reported as requiring treatment for a cocaine problem for the first time rose by 37% between 2014 and 2017, suggesting treatment needs are growing. Cocaine was also the illicit drug most commonly reported in drug-related hospital emergency presentations recorded by a network of 26 sentinel hospitals in 18 European countries in 2017 (Euro-DEN Plus)(Figure 3.8).

Heroin: indications of market changes

Heroin is still the most common illicit opioid on the drug market in Europe and is a major contributor to drug-related health and social costs. The quantity of heroin seized in the EU increased by over a tonne in 2017 to 5.4 tonnes, with an additional 17.4 tonnes seized by Turkey (some of which would have been destined for the EU market). A worrying development is the 81 tonnes of the heroin precursor chemical acetic anhydride seized in the EU in 2017 and the 243 tonnes of it in stopped shipments (Table 1.2). Additionally, laboratories producing heroin from morphine using this precursor have been discovered in recent years in EU countries (**Bulgaria, Czechia, Spain** and the **Netherlands**). Heroin purity remains high and the retail price relatively low (having fallen over the last decade) (Infographic, p. 24).

Europe aims to combat viral hepatitis as a public health threat in line with the global **2030 Agenda for Sustainable Development**. Providing people who inject heroin, or other drugs, with greater access to prevention, testing and treatment for HBV and HCV is central to achieving this objective, as they are the people with the highest burden of disease and at highest risk of transmission. The **EMCDDA** report highlights the need to scale up measures to address viral hepatitis, particularly in parts of **Eastern Europe**.

New synthetic opioids: a growing concern

The current opioid epidemic in the **United States** and **Canada** is largely driven by the use of synthetic opioids, particularly fentanyl and its derivatives. While these substances currently represent only a small share of the drug market in **Europe**, they are a growing concern, with use linked to poisonings and deaths. Eleven new synthetic opioids were detected in Europe in 2018, usually in the form of powders, tablets and liquids. With only very small volumes needed to produce many thousands of street doses, these substances are easy to conceal and transport, representing a challenge for law enforcement and customs.

Fentanyl derivatives make up the majority of the 49 new synthetic opioids monitored by the **EMCDDA**. Six fentanyl derivatives were detected in Europe for the first time in 2018 (34 detected since 2009). In the most recent data, these highly potent drugs accounted for 70% of all seizures of the new synthetic opioids (Figure 1.12). Over 300 seizures of carfentanil were reported, one of the most potent drugs in this family. A total of 4.5 kg of a precursor chemical for the manufacture of fentanyl derivatives (*N*-phenethyl-4-piperidone) was also seized in the EU (Table 1.2).

Data from drug treatment monitoring shows that one in every five clients (22%) entering drug treatment for an opioid-related problem now reports a licit or illicit synthetic opioid, rather than heroin, as their main problem

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drug (Figure 2.13). This indicates that opioid-containing medicines are also now playing an increasingly important role in the European drugs problem.

Cannabis: new developments for Europe's most established drug

Cannabis remains the most widely used illicit drug in Europe, as evident in data on prevalence, seizures and new treatment demands. Some 17.5 million young Europeans (15–34 years) are estimated to have used cannabis in the last year (EU-28 — 2017 estimate).

In 2017, EU Member States reported 782 000 seizures of cannabis products (herb, resin, plants and oil), making it Europe's most-seized drug. The quantity of cannabis resin seized is more than double that of herbal cannabis (466 versus 209 tonnes). A recent **EMCDDA** study (³) found that herbal cannabis and resin had doubled in typical tetrahydrocannabinol (THC) (⁴) content over the last decade, raising concerns about potential harms. In the case of resin, the drivers of increasing average potency are likely to include the introduction of high-potency plants and new production techniques in **Morocco**, the main producer of resin for the EU market.

Around 1% of adults (15–64 years) in the EU are estimated to be daily, or almost daily, cannabis users. In 2017, some 155 000 people entered drug treatment in Europe for problems related to this drug, of those around 83 000 were entering treatment for the first time (Infographic, p. 44). Cannabis is now the substance most often named by new entrants to specialist drug treatment services as their main reason for contact.

Cannabis: new products add to challenges in a complex policy area

The creation of legal recreational cannabis markets outside the EU is driving innovation in product development (e.g. e-liquids, edible products and concentrates), some of which are now appearing on the European market where they pose a new challenge for drug detection and control.

Cannabis contains many different chemicals, the best known being tetrahydrocannabinol (THC) and cannabidiol (CBD). One example of rapid developments in the cannabis market is the appearance of low-THC products sold in specialist or health food shops in some EU countries (⁵). Sales take place on the claim that these products have less than 0.2% or 0.3% THC, and therefore have little, or no, intoxicating effects, and do not fall under existing drug control laws. The CBD content of the products is sometimes highlighted, with claims that this substance may have beneficial qualities. A range of products is now available including plants, smoking mixtures, pills, lotions and creams. These raise regulatory issues, with some countries subjecting sales of low-THC products to criminal penalties, and others allowing them to be traded without a licence.

Europe's growing role in synthetic drug production

Synthetic drug production in Europe appears to be 'growing, diversifying and becoming more innovative', states the report. New substances are being used to make the chemicals needed to produce synthetic drugs. This aims to avoid detection, but also involves more complex processing (that can create additional hazardous waste). This is reflected in an increase in the seizures of alternative precursors, for both MDMA and amphetamine and methamphetamine, with seizures of APAA and glycidic derivatives of PMK both increasing in the most recent data (Table 1.2).

In 2017, 21 MDMA laboratories were dismantled in the EU, up from 11 in 2016, all in the **Netherlands**. Dumping of chemical waste was reported in **Belgium**, suggesting MDMA production occurred. The latest data show that MDMA content in 'ecstasy' tablets reached a 10-year high in 2017. The **EMCDDA** reports an estimated 6.6 million MDMA tablets were seized in the EU in 2017, the highest number since 2007. Monitoring of open source information and darknet activity indicates that Europe plays an important role in the global supply of MDMA. This is also suggested by seizures in EU neighbouring countries. **Turkey** seized more MDMA tablets (8.6 million) and more amphetamine (6.6 tonnes) than all the EU Member States combined that year. Furthermore, it seized an exceptionally large volume (658 kg) of methamphetamine, close to the total seized in the EU (662 kg).

The purity of methamphetamine and amphetamine is higher than a decade ago, with 0.7 tonnes of methamphetamine and 6.4 tonnes of amphetamine seized in the EU in 2017. Methamphetamine production is concentrated in **Czechia** and the border areas of neighbouring countries, with some production also taking

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place in the Netherlands. Wastewater and other data suggest that methamphetamine use, generally low and historically concentrated in Czechia and Slovakia, now appears to be present also in Cyprus, the east of Germany, Spain, Finland and Norway (Figure 2.11). As regards amphetamine, in cities with wastewater data for 2017 and 2018, 21 out of 38 cities reported an increase in amphetamine detections (Figure 2.10).

M-health: geo-location and virtual reality, new tools in responding to drug problems

The widespread use of mobile devices today means that m-health 'apps' (mobile health applications) have a vast potential to expand the reach of drug-related health services. According to the report, novel digital solutions of this kind are increasingly being used in drug prevention, treatment and harm reduction.

The report presents a range of m-health apps with different primary aims — from disseminating information (e.g. access to services) to supporting interventions (e.g. drug-use diaries) and recovery (e.g. self-help apps) (Figure 3.2). One innovative example is the use of geo-location to help people who inject drugs find needleand syringe-exchange points. Also under analysis is the use of virtual reality technology (headsets) to recreate immersive drug-related environments that induce cravings and help patients develop resilience. A large number of m-health apps developed in Europe focus on disseminating harm reduction information aimed at young users, especially partygoers. Although there are now many m-health apps available, a recent EMCDDA study found that they are not always accompanied by robust quality standards, data protection rules and evaluation (6).

Chair of the EMCDDA Management Board Laura d'Arrigo concludes: 'The European Drug Report 2019 arrives at a critical time for reflection on drug policy developments as next year will see the final evaluation of the EU drugs strategy (2013–20). Over this period, Europe has faced some dramatic changes in the drug phenomenon, including the appearance of scores of non-controlled substances. The understanding of current drug problems allows us to prepare for future challenges in this fast-changing and complex area. This is why the role played by the EMCDDA in providing evidence-based analyses of Europe's drug situation today is so crucial'.

Notes

- (1) The European Drug Report 2019 package is available at www.emcdda.europa.eu/edr2019. The reference period for all graphics, analysis and data included in this report is the drug situation up to the end of 2018. Figures and graphics cited in this news release appear in the report itself. Additional figures and tables may be found in the 2019 Statistical Bulletin (www.emcdda.europa.eu/stats/2019).
- (2) Uberisation: the act or process of changing the market for a service, by introducing a different way of buying or using it, especially using mobile technology (Collins English dictionary).
- (3) https://onlinelibrary.wiley.com/doi/10.1111/add.14525 (4) Tetrahydrocannabinol (THC) is largely responsible for the intoxicating effects of cannabis.
- (5) www.emcdda.europa.eu/news/2018/low-thc-cannabis-products-being-sold-in-the-EU%E2%80%93key-legal-issues
- (6) www.emcdda.europa.eu/publications/emcdda-papers/m-health-applications-for-responding-to-drug-use

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