ÖBIG
Österreichisches Bundesinstitut
für Gesundheitswesen

Evolution of problem drug use to high risk drug use estimates: methodological challenges

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Problem Drug Use „old" definition

2004: problem drug use is

"injecting drug use or long duration/regular use of opiates, cocaine and/or amphetamines"

➢ What is "long duration/regular"?

➢ What does "problem" mean – the name of the indicator is somehow confusing?

➢ What´s about other (new) problematic forms of drug use (e. g. problem cannabis use, new drugs, etc.)?

➢ What´s about long term stabilised substitution treatment clients?

New definition (in preparation)

"High-risk drug use is measured as the use of psychoactive substances (excluding alcohol, tobacco and caffeine) by high risk pattern (e. g. intensively) and/or by high risk routes of administration in the last 12 months"

Different estimates

Common estimates (are to be derived on national level)

➢ High-risk opioid use

➢ Injecting drug use

➢ Frequent and high-risk cannabis use

Country specific estimates (are to be derived when relevant)

➢ High-risk cocaine use

➢ High-risk amphetamines use

➢ High-risk use of other substances

Elements to understand polydrug use

➢ Overlaps between above-mentioned groups

➢ Old definition

➢ ICD-10 code F19

Operationalisation of the new definition (examples)

High risk opioid use (always related to the last 12 months)

➢ Use of opioids including opioid medicines, weekly or more frequently for at least six months of the past 12 months (alternatively can be measured as 26 days or more in the past 12 months), not according to medical prescription.

OR

➢ A medical diagnosis according to current DSM or ICD criteria, e.g. harmful use or dependence on opioids or opioid use disorder (diagnosed in the past 12 months)

OR

➢ Any other best proxy of the above that can be collected at the level of the data source

Note: Opioid users who are stabilised on opioid substitution treatment are, if possible, reported separately

Operationalisation of the new definition (examples)

Frequent and high risk cannabis use (last 12 months)

➢ Use of cannabis daily or almost daily, in the preceding 12 months; for general population surveys or school surveys this will be approximated by use of 20 or more days in the 30 days preceding interview (or similar)

OR

➢ A medical diagnosis according to current DSM or ICD criteria, e.g. harmful use or dependence on cannabis or cannabis use disorder (diagnosed in the past 12 months)

OR

➢ Specific psychometric scales in general population surveys and school surveys

Other new aspects in the revised guidelines

Monitoring of characteristics of high-risk drug users and trends

➢ Characteristics of users (e. g. age, gender, other demographic data, drugs used, mental/physical health...)

➢ Incidence of high-risk drug use (long therm trends

Opioid substitution treatment

➢ Should (a part of) substitution treatment clients be included in high-risk drug use? – better documentation of national estimates concerning case definition and inclusion criteria (more research is needed)
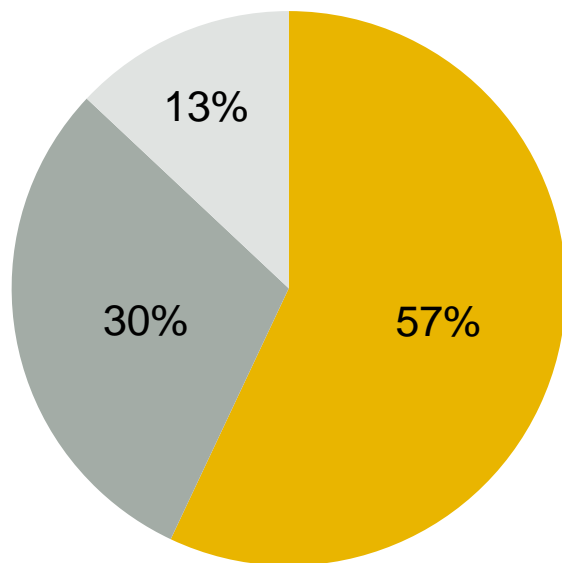
Some new methods

➢ Psychometric scales for high-risk cannabis use

➢ One source capture-recapture method

➢ Refinements of classical capture-recapture method

➢ ....

What does these new definitions mean in practice –
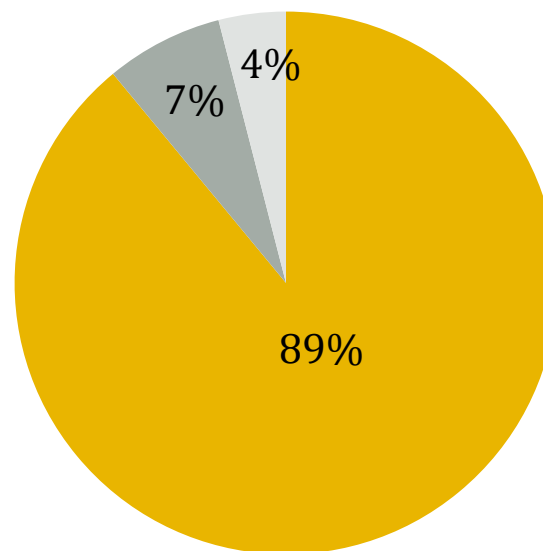# some examples from Austria

How does your drug–problem look alike?
Composition of treatment population
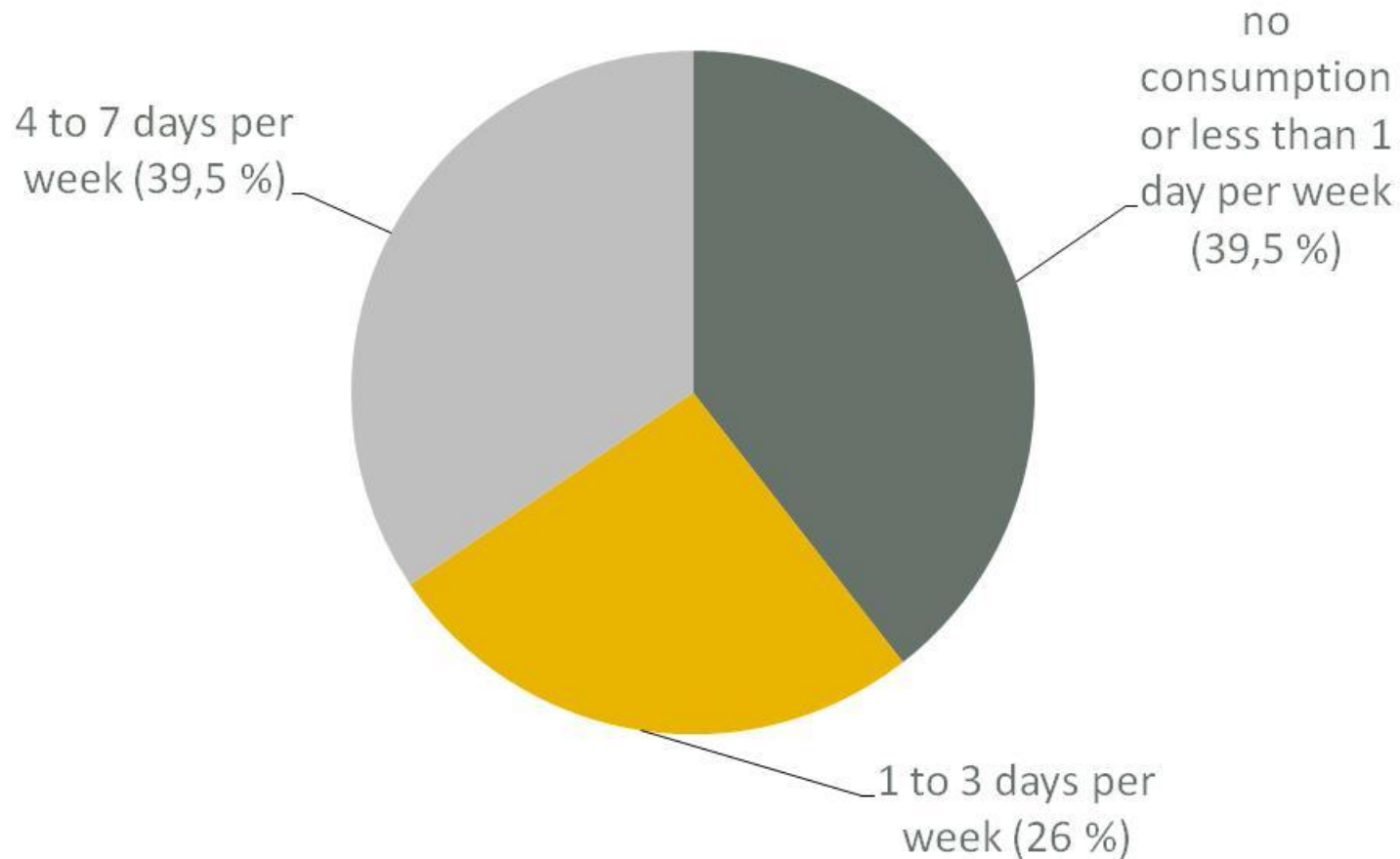
TDI outpatient
(all treatments n = 3.037)

TDI + Substitution treatment (all
clients in treatment n = 21.000)

13%

30%

57%

4%

7%

89%

■ (multiple substances including) opioids

■ Cannabis alone

■ other consumption patterns
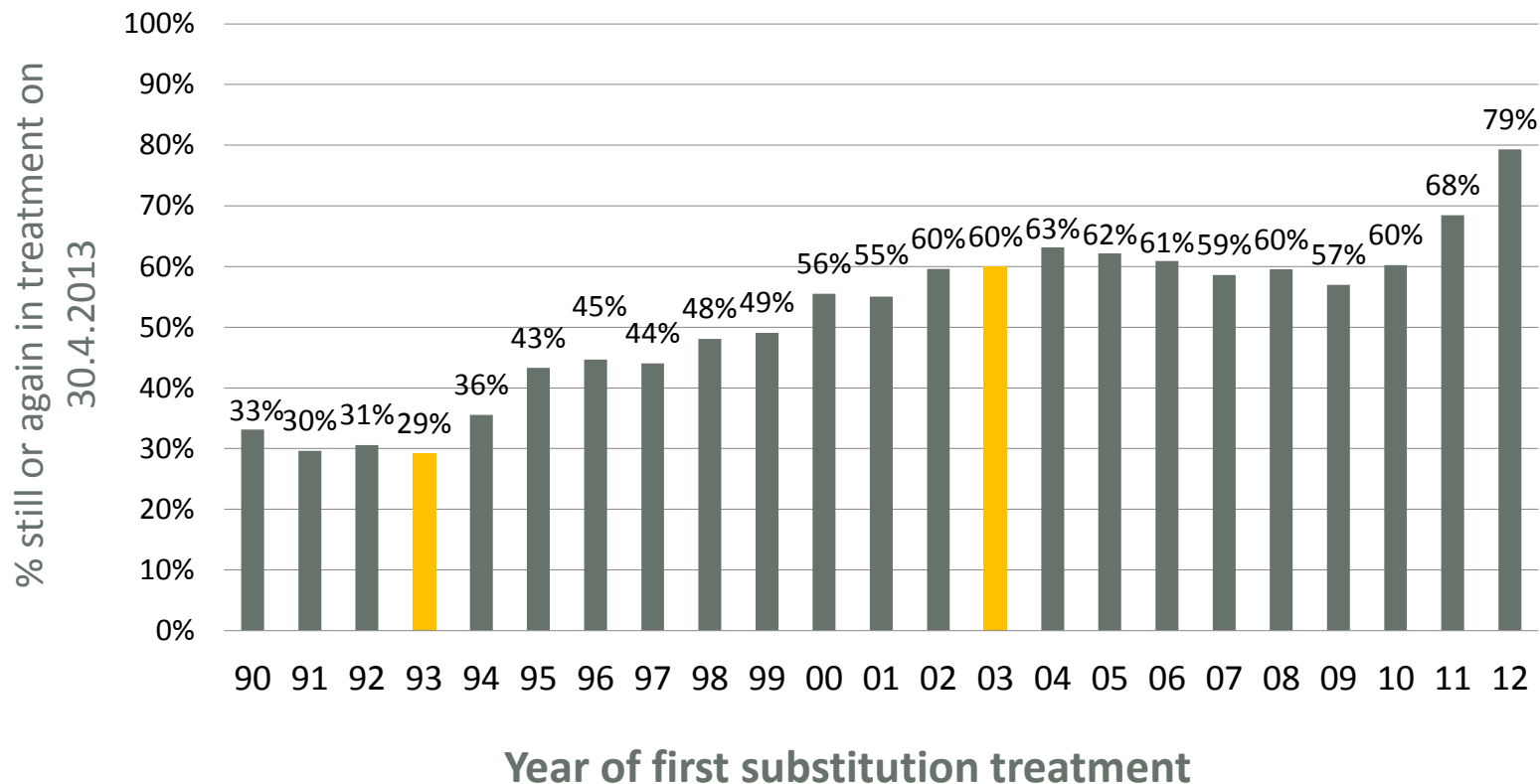
Problem: groups who do not (yet) show up in treatment population (e. g. new
psychoactive substances like mephedrone etc.)

The problem with problem (high-risk) cannabis use (TDI)

no consumption or less than 1 day per week (39,5 %)

4 to 7 days per week (39,5 %)

1 to 3 days per week (26 %)

3 groups of clients concerning consumption during the last 30 days before entering treatment

Long–term clients in opioid substitution treatment

% still or again in treatment on 30.4.2013

Values by year of first substitution treatment:

Year	90	91	92	93	94	95	96	97	98	99	00	01	02	03	04	05	06	07	08	09	10	11	12
%	33	30	31	29	36	43	45	44	48	49	56	55	60	60	63	62	61	59	60	57	60	68	79

Year of first substitution treatment

Should there be a threshold for high–risk opioid use – e. g. less than 5 years of OST?

Thank you very much for your attention