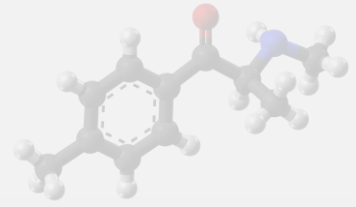


# Responses to New Psychoactive Substances (NPS) in prison

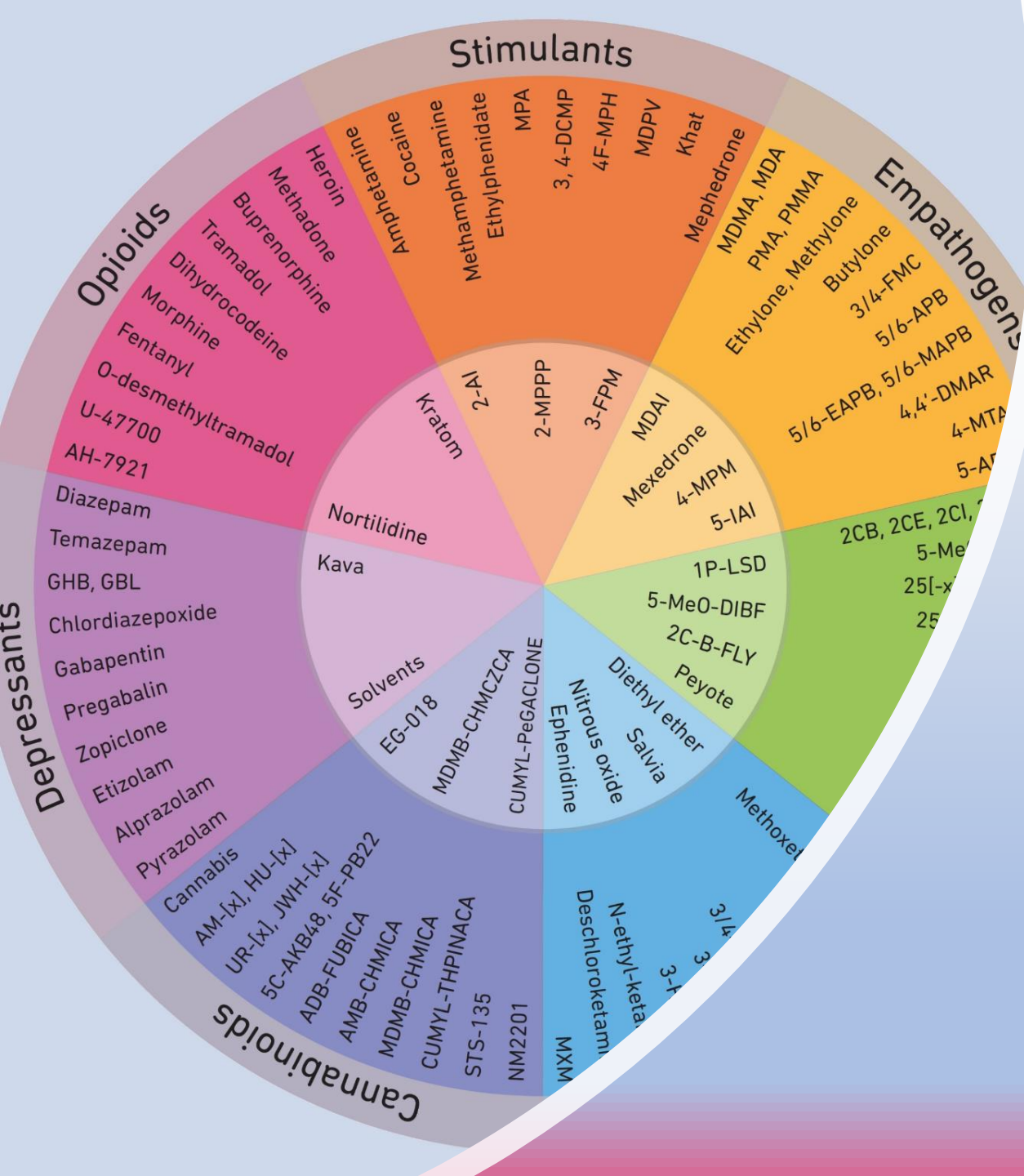
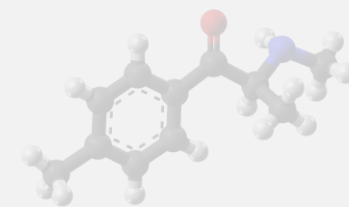
**Robert Teltzrow**, Principal Project Consultant,  
Pompidou Group, Council of Europe

25. November 2021, 3rd Conference on Drug Policy  
Support for implementation of the Ukrainian Drug  
Strategy

# Content of Presentation

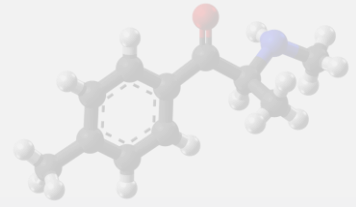


1. Definition of NPS
2. Prevalence of NPS in prison
3. Effects and harms of NPS
4. Responses to NPS use in prison
5. Conclusions



# Definition of NPS

# „Old“ PS and New PS

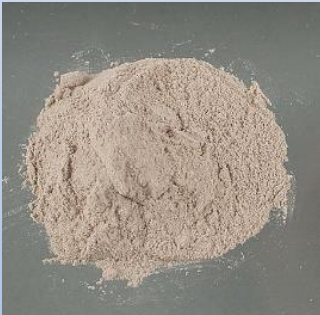


## „Traditional“ psychoactive substances

### Opium



### Heroin



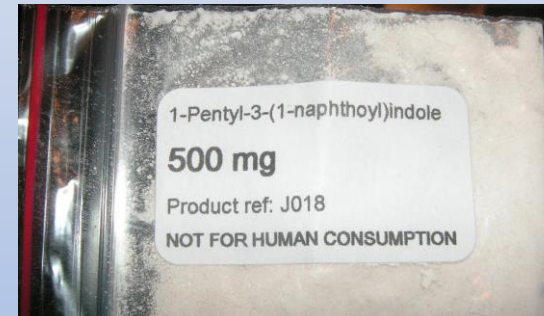
### MDMA / XTC



Derived from plants, semi-synthetic or synthetic

## New psychoactive substances

### JWH-018



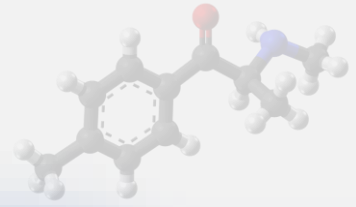
### Mephdrone



Synthetic

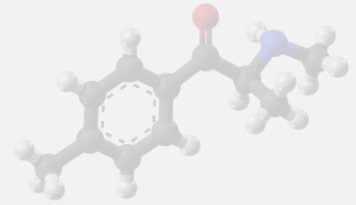


# Definition NPS

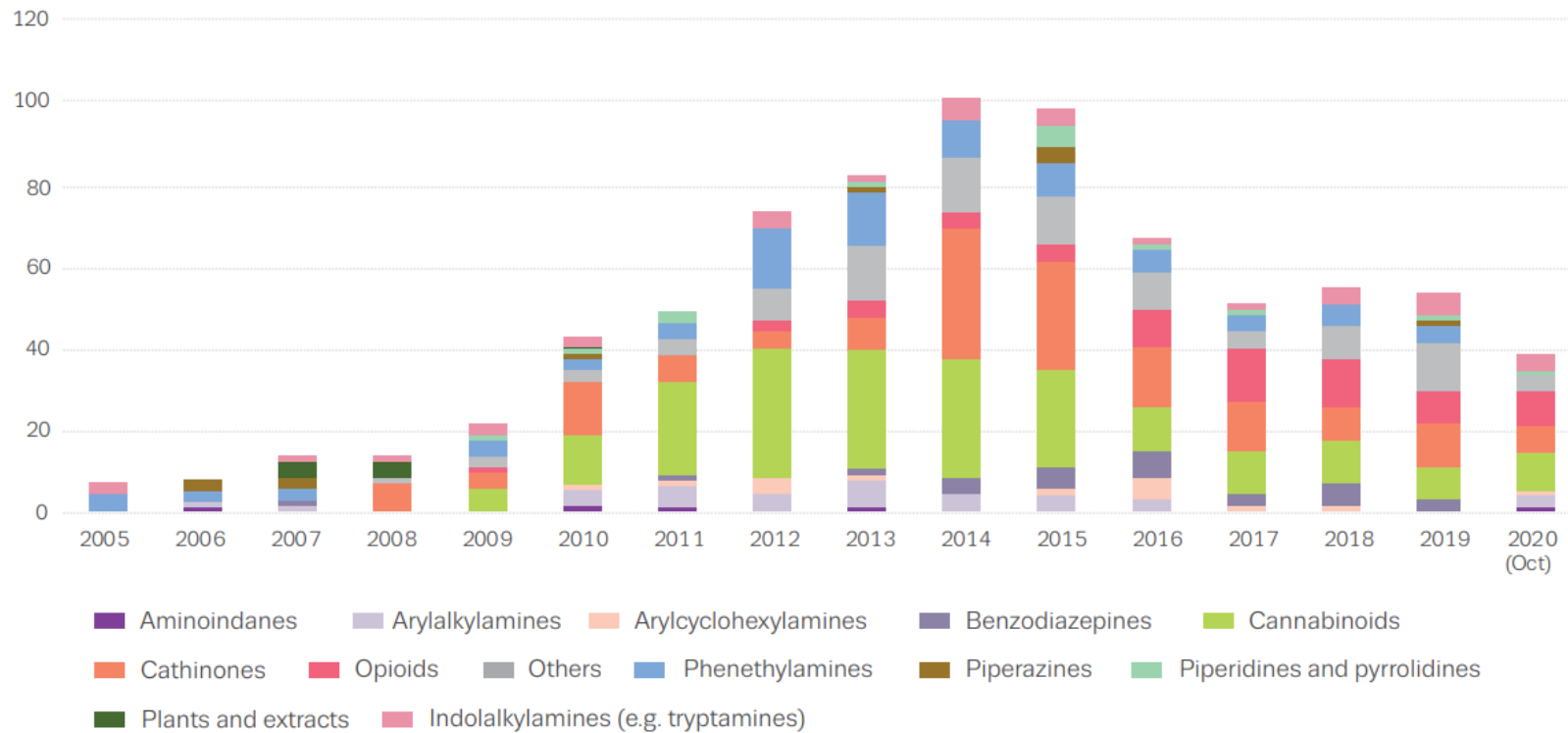


- *Narcotic drugs or psychotropic substances **made available or used from the early 2000s** for their psychoactive properties*
- ***Not scheduled** under the international drug control conventions of 1961 and 1971 **or have only been listed recently***
- *Could pose similar threats to public health as do substances scheduled under these conventions*
- ***Synthetic substances** rather than those derived from plants*

# NPS reported to EMCDDA

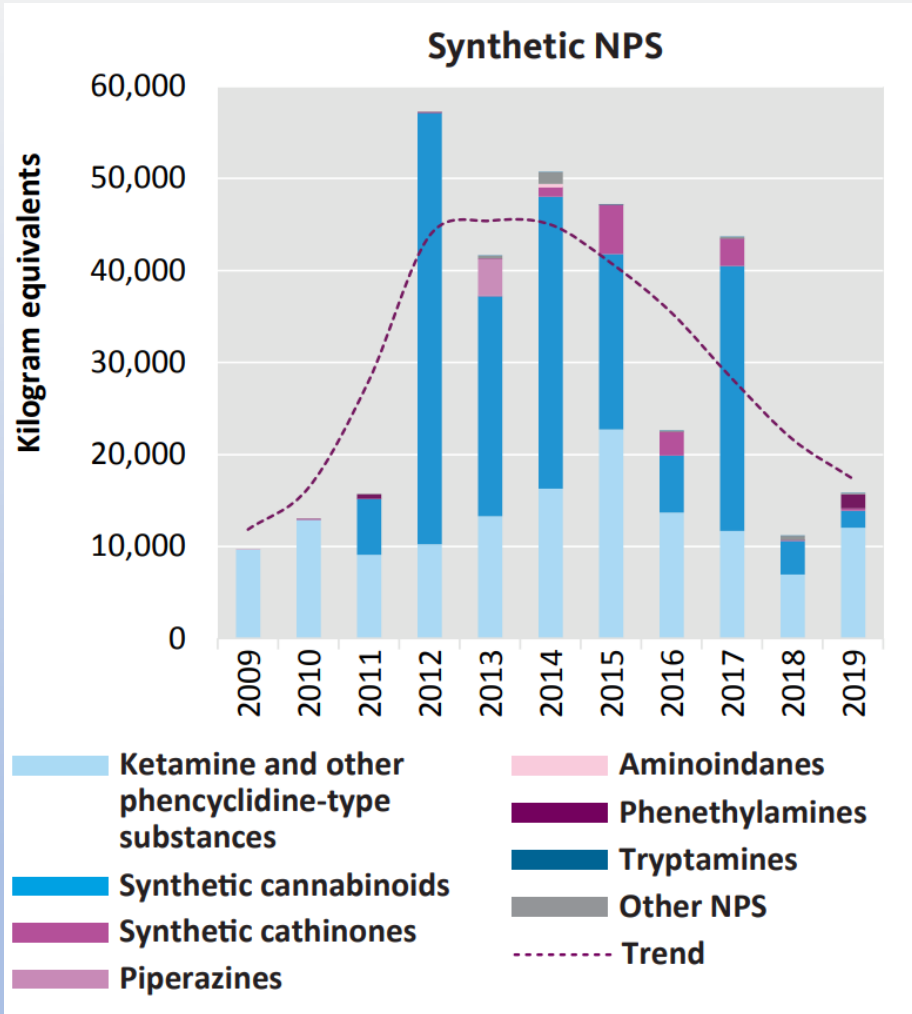
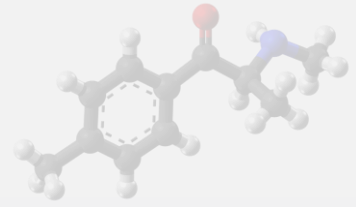


Numbers and categories of new psychoactive substances reported to the EU Early Warning System for the first time, 2005-2020 (up to 31 October)

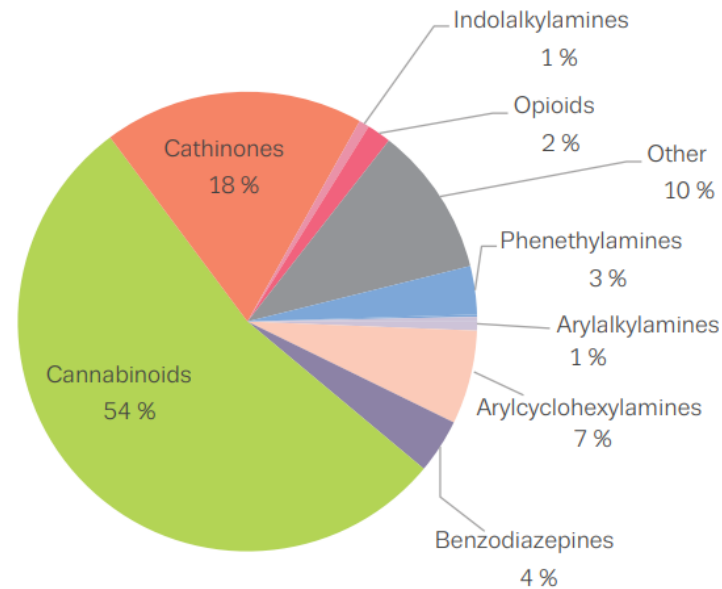


- By 31 Oct. 2020, the EMCDDA was monitoring more than 820 new psychoactive substances
- Decrease of new substances reported to EMCDDA since 2015
- Main class of substances reported are synthetic cannabinoids and cathinones

# Seizures of NPS

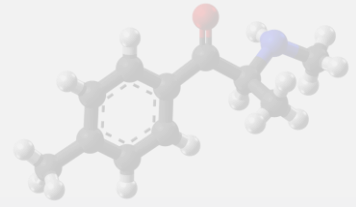


Seizures of NPS reported to the EU Early Warning System, 2005–2019: percentage per category (EU-27 + 2)

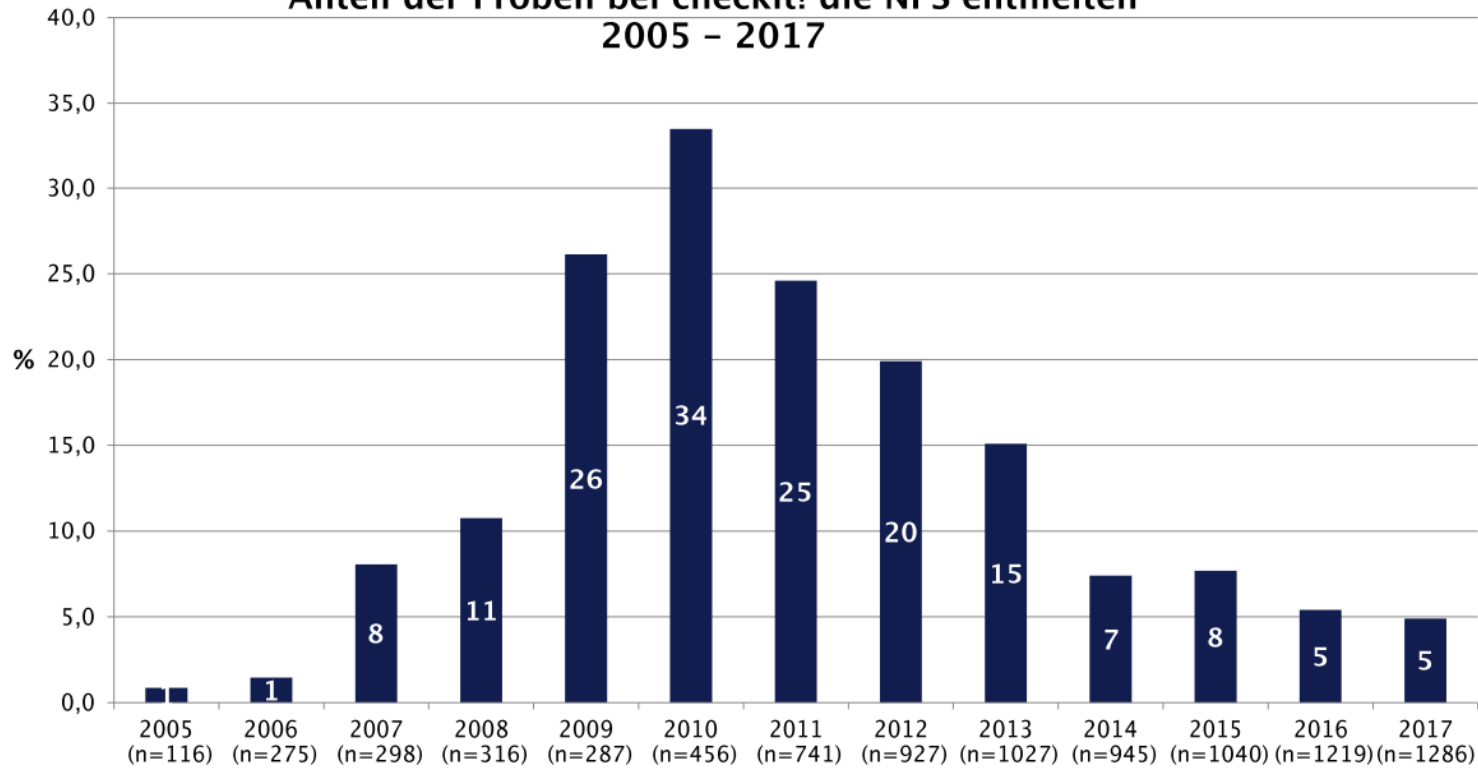


- NPS are often produced in bulk quantities in China and then shipped to the EU and US
- Mainly ketamine-type substances, synthetic cannabinoids and cathinones are seized

# Example Austria



Anteil der Proben bei checkit! die NPS enthielten  
2005 – 2017

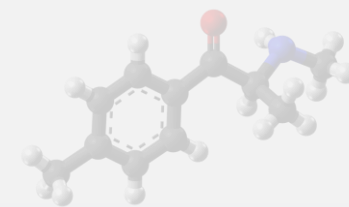


Source: *checkit!*, Suchthilfe Wien gGmbH

Number of probes containing NPS tested by drug checking service

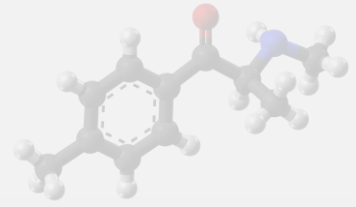
- 2008: Austrian health experts and authorities identify JWH-018 in herbal smoking mix.
- First regulation of legal highs via Medical Products act (around 2010)
- New law on NPS (1 December 2012) bans classes of psychoactive chemical substances



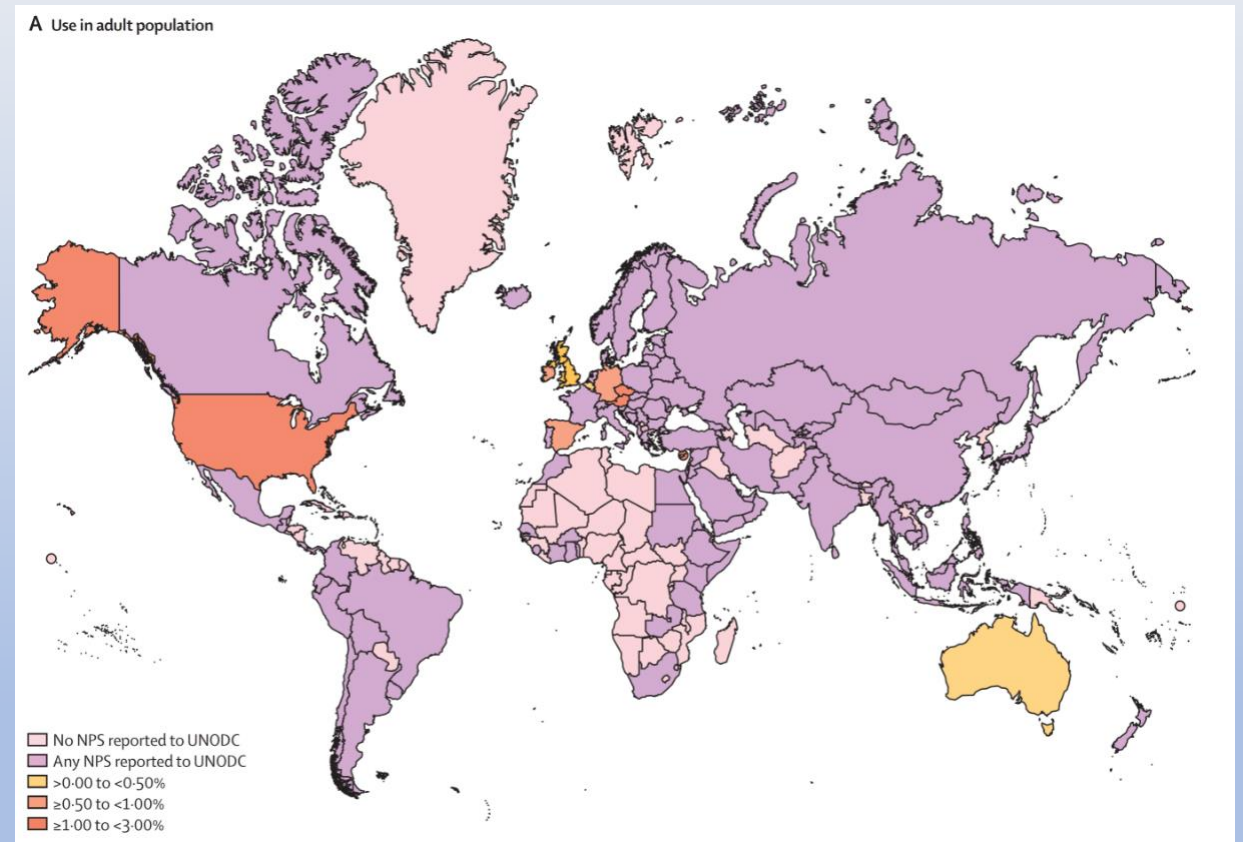


# Prevalence of NPS use in prison

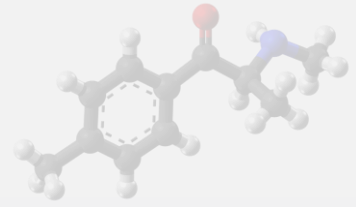
# Prevalence of NPS use



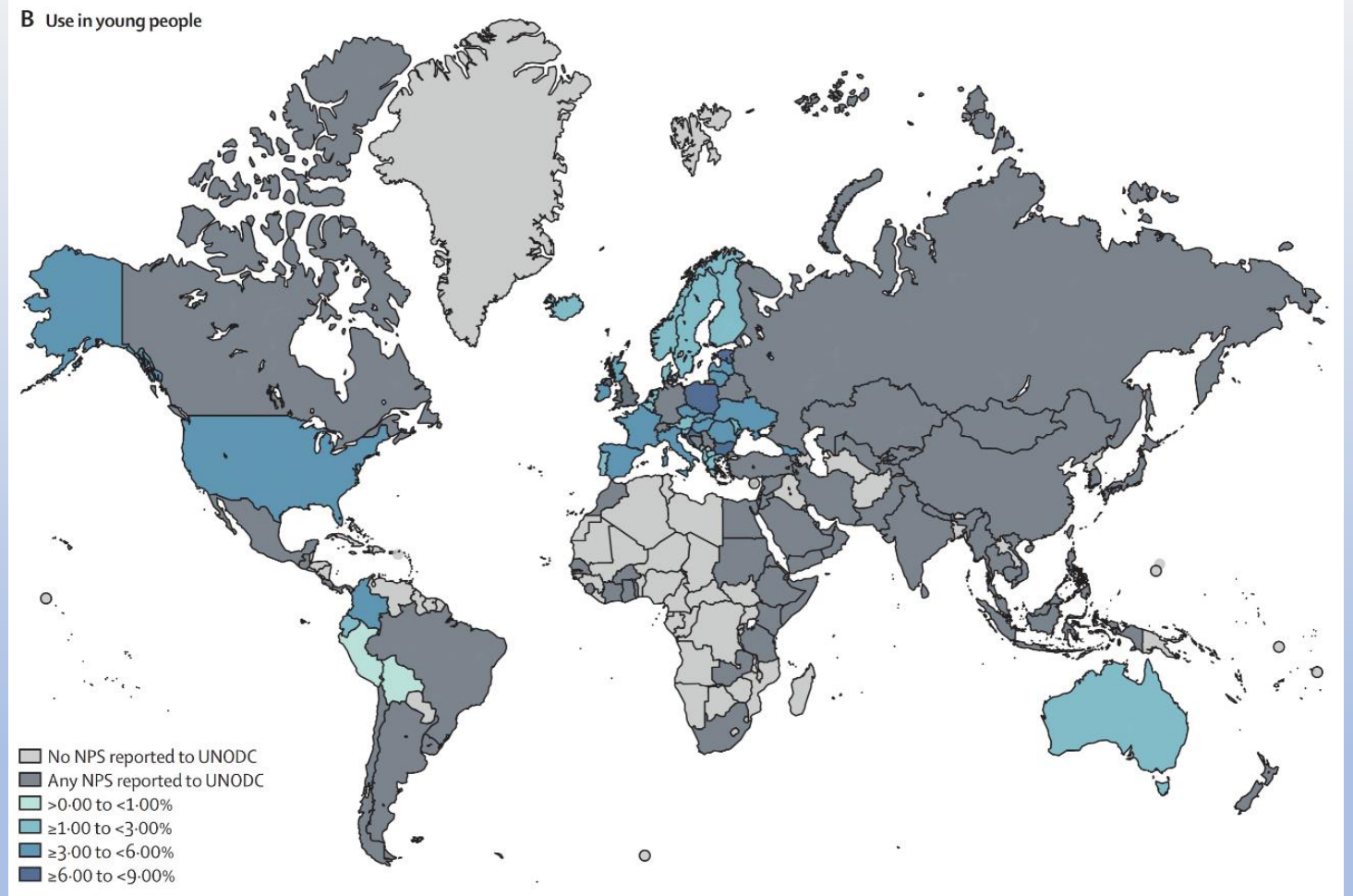
- Very low prevalence compared to other more established illicit drugs in the adult population: 0-3% (last 12 months)
- Higher prevalence of NPS use: Czech Republic, Austria, Ireland, Spain or US.



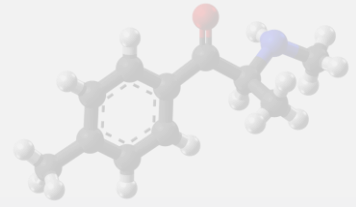
# Higher prevalence in some groups



- Young people (Prevalence 0-6%)
- People who are homeless
- People who inject drugs
- Men who have sex with men
- People who are incarcerated

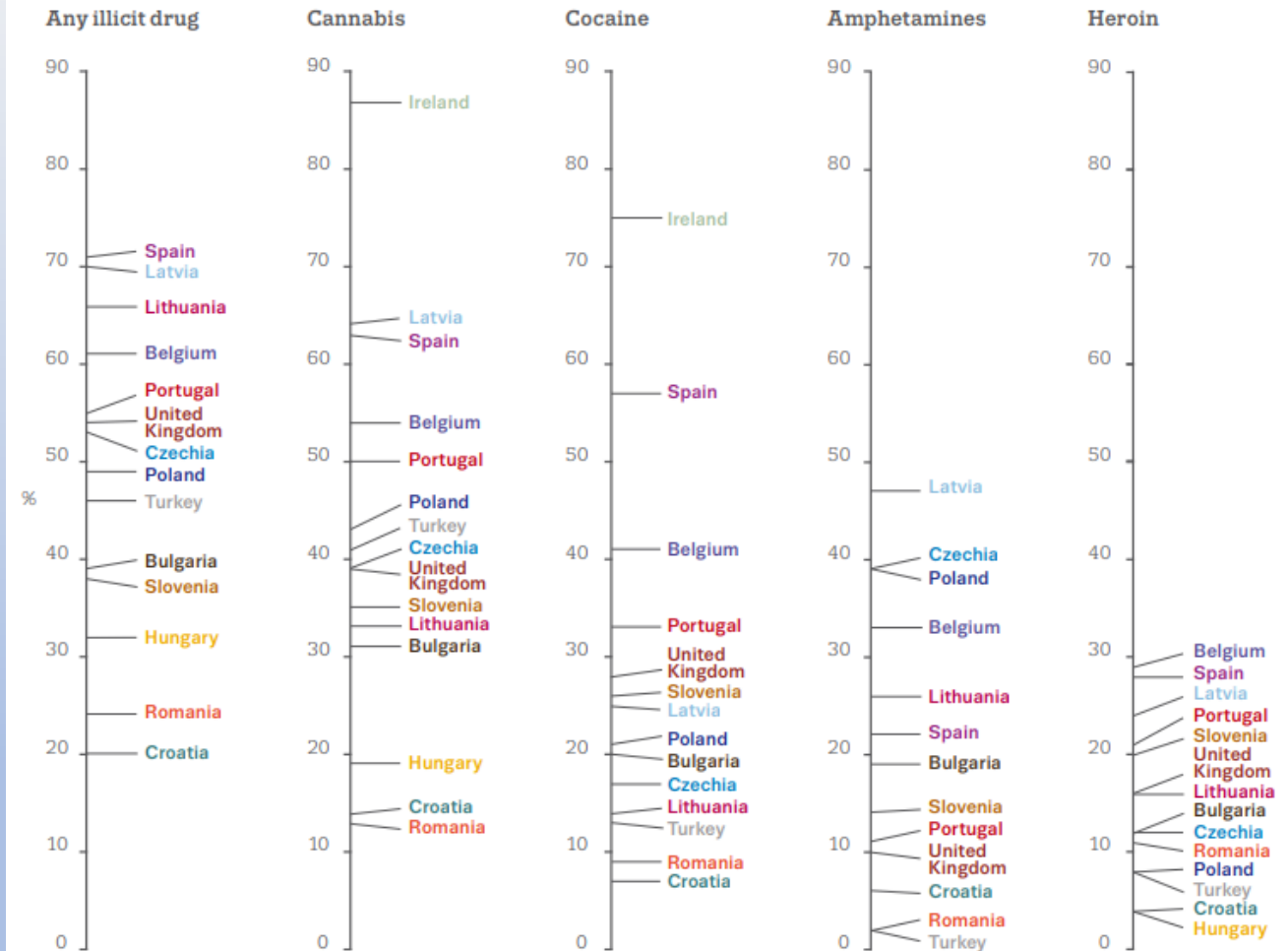


# Drug use in prison

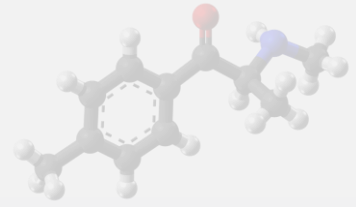


- People in prison higher lifetime rates and more harmful patterns of use
- More injecting drug use, co-morbidities and complex needs
- Illicit drugs are widely available in most prisons

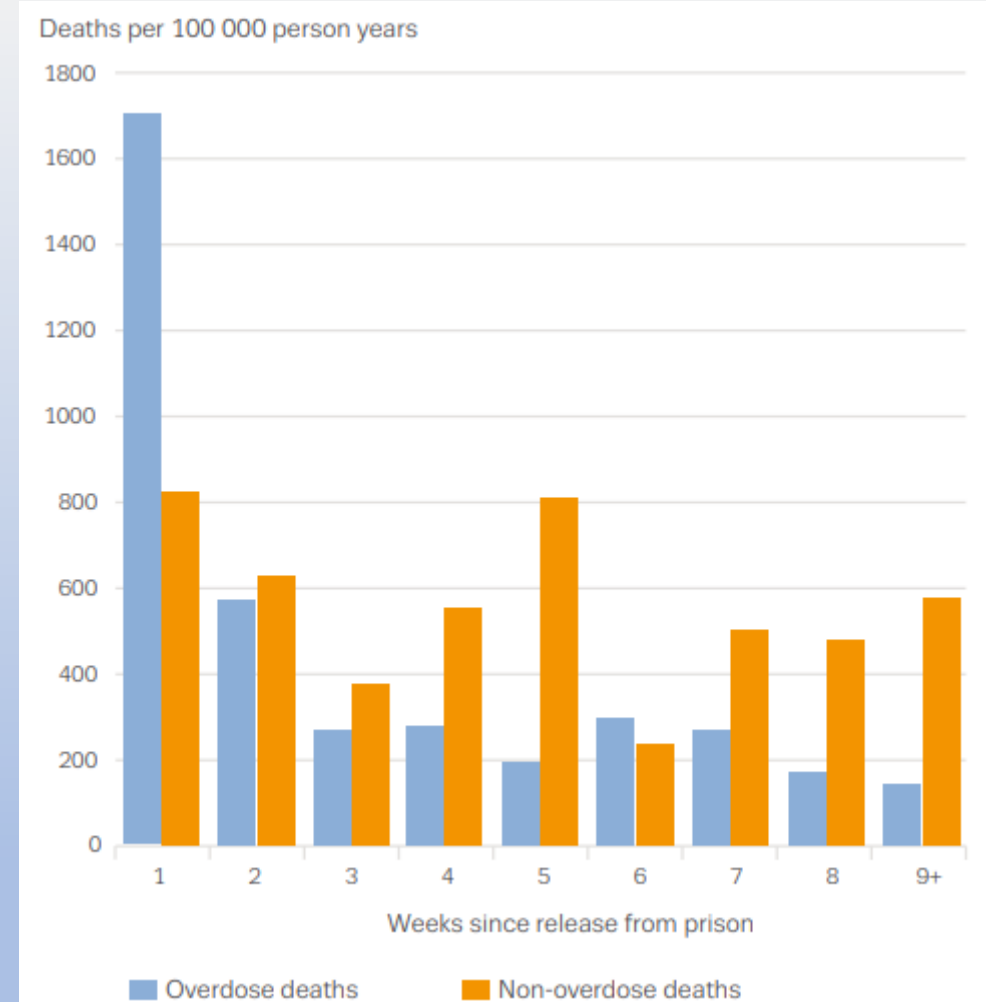
Lifetime prevalence of illicit drug use among people in prison before imprisonment in 13 EU Member States, Turkey and the United Kingdom in 2019 or most recent data available



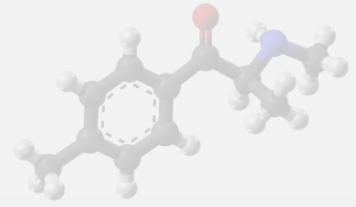
# Drug harms in prison



- Drug-related deaths (in prison and after release)
- Drug-induced cases of emergency
- Dealer hierarchies & debts
- Risks of infection (HIV, hepatitis) / Sharing of equipment
- Mixed and poor quality drugs/incalculable drug purity

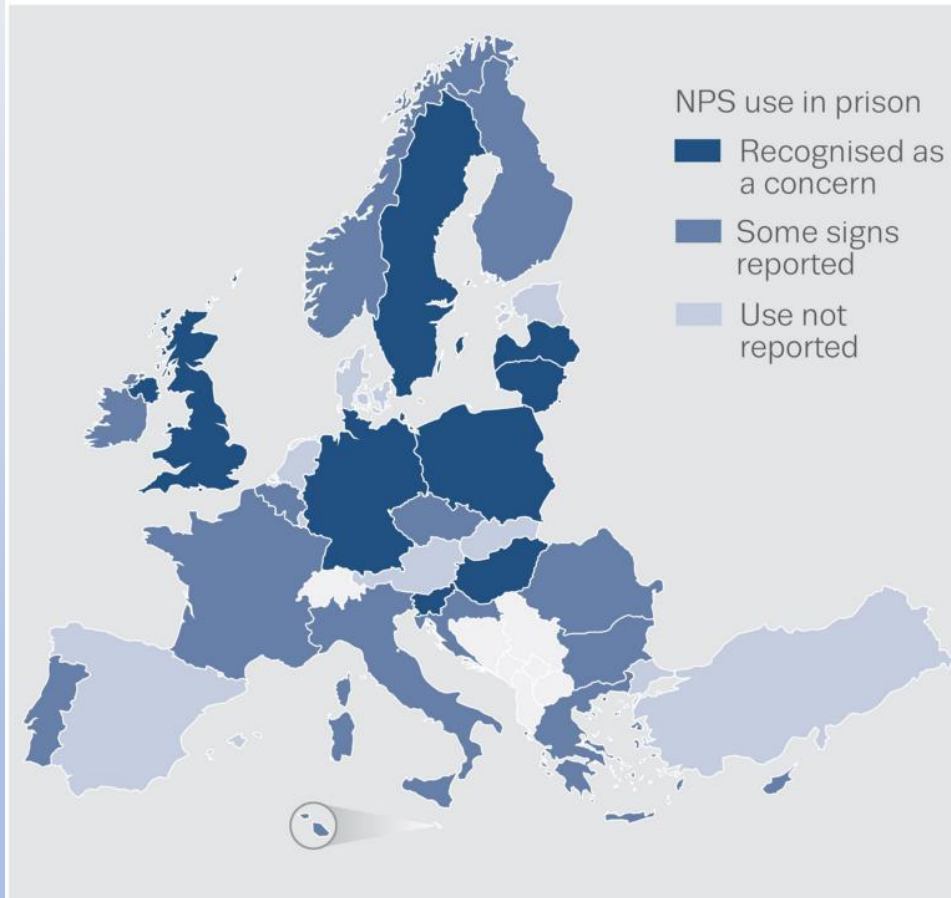






# NPS use in European Prisons

NPS use among prisoners in the European Union, Norway and Turkey

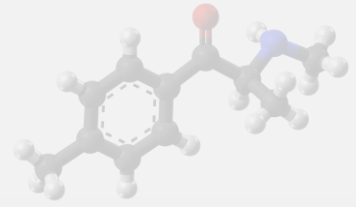


Infographic: EMCDDA 2018

- Reports about NPS use among prisoners in 22 European countries.
- NPS use in prison settings is an issue of concern in Germany, Hungary, Latvia, Lithuania, Poland, Slovenia and Sweden (8 countries).
- Anecdotal reports of NPS use in Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Finland, France, Greece, Ireland, Italy, Malta, Portugal, Romania and Norway (14 countries).
- For other European countries: either no use or no data



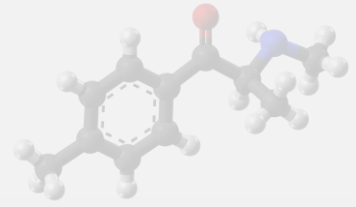
# Why do prisoners use NPS?



- Drug dependence, boredom, „self-medication“
- Strong & „new“ effects
- Difficult to detect in drug test
- Easy to smuggle
- Less expensive than most other drugs



# Types of NPS found in prison



**Synthetic cannabinoids (“spice”):** JWH-007, AM-2201, UR-144 etc

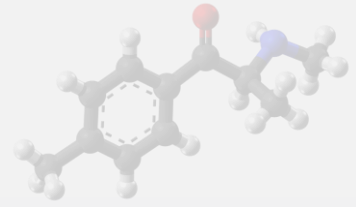
**Synthetic cathinones (“bath salts”):** MDPV, mephedrone, and methyldrone

**New synthetic opioids:** fentanyl derivatives and non-fentanyl derived novel synthetic opioids such as U4 or “Fake morphine”, AH-7921

**New benzodiazepines:** diclazepam, etizolam, flubromazolam, flunitrazolam and fonazepam



# Schmuggling into prison



Traditional routes to smuggle drugs into prisons:

- Visitors; guards; inmates (day-release)
- Throwing over the walls
- Hidden in goods being sold in shops
- Animals (rare)

Newer routes:

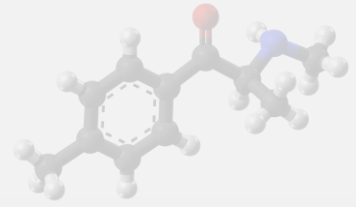
- Drones
- **Sprayed on papers, tobacco or cloth**



[http://www.emcdda.europa.eu/media-library/video-new-psychoactive-substances-prison-supply\\_en](http://www.emcdda.europa.eu/media-library/video-new-psychoactive-substances-prison-supply_en)



# Impregnation

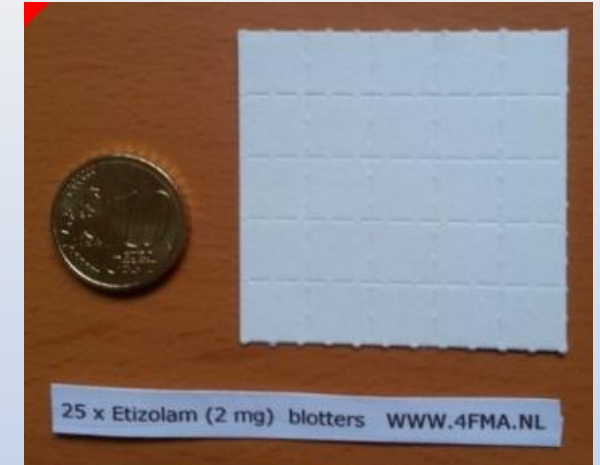


Many NPS are very potent:

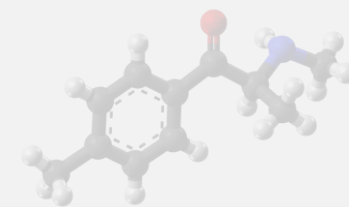
- 0,25 – 0,5 mg of AM-2201 have an effect (30–40 time more potent than THC)
- U-47700 7,5 times more potent than morphine; Carfentanyl: 10,000 times as potent as a unit of morphine (0.001 mg)
- Etizolam: 1-2 mg (equivalent to 10-20 mg of diazepam)



JVA Nürnberg



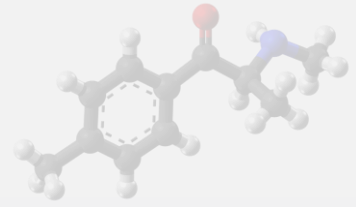
= easy to hide  
= risk of overdosing > if not evenly sprayed on paper there are hotspots with higher concentration



# Effects and harms of NPS



# Effects of NPS

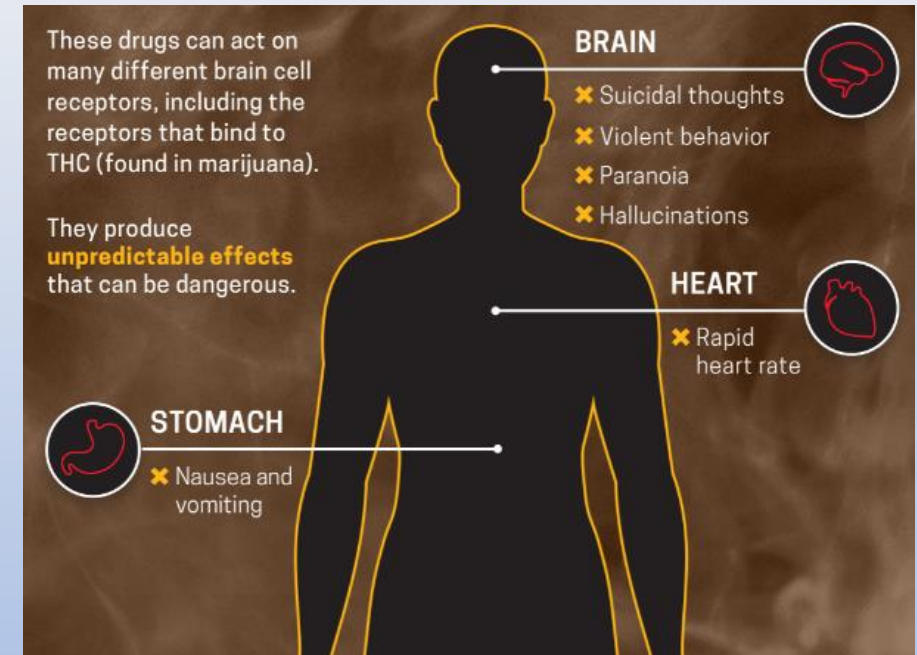


Very similar to analogue traditional drug:

- Tolerance and withdrawal
- Acute and chronic adverse effects

Differences:

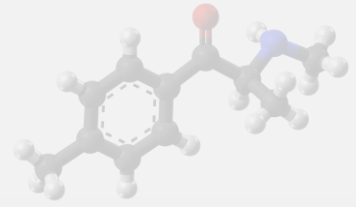
- Synthetic cannabinoids: faster build-up of tolerance, suicidal thoughts, extreme bizarre behaviour
- Synthetic opioids: potency may lead to stronger overdose reactions



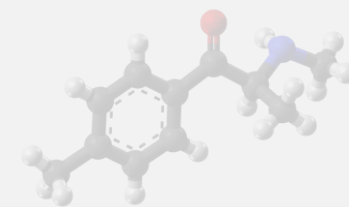
Nida: <https://www.drugabuse.gov>



# NPS problems in prison



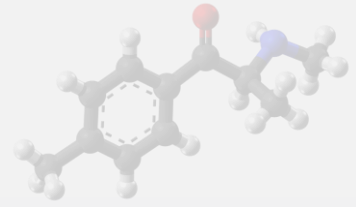
- Some of the extreme and long lasting effects of synthetic cannabinoids require an immediate response and require transfer to hospital.
- More overdoses and increase in injecting, including needle-sharing use of new synthetic opioids (for example in Latvia)
- Mental health harms, such as aggressiveness and anxiety, may be aggravated
- Some prisoners who use synthetic cannabinoids not see themselves as having a problem, so may be reluctant to engage SUD treatment



# Responses to NPS in prison



# Detection, repression & supply reduction



## Detection:

- New drug tests to identify the use of NPS

## Repression:

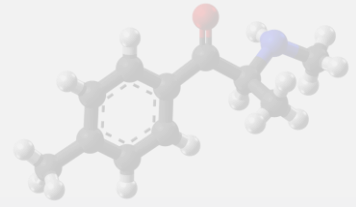
- Additional prison time (UK)
- Loss of privileges (UK) etc.

## Supply reduction:

- Photocopies of letters (UK, Germany)
- Training of drug detection dogs (Scotland)
- Specialised training of staff



# Emergency responses



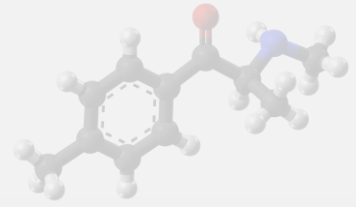
- NEPTUNE guidelines. Because it is often unclear, which substance has been used + polydrug use: „treat what you see“ = symptomatic care
- If substance is known: NPS toxicity is similar to equivalent pharmacological classes
- To be taking into account: higher potency in particular of synthetic opioids



„Treat what you see“



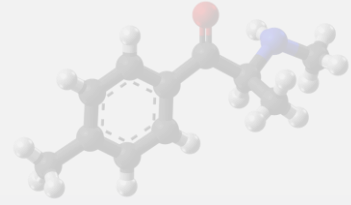
# Naloxone



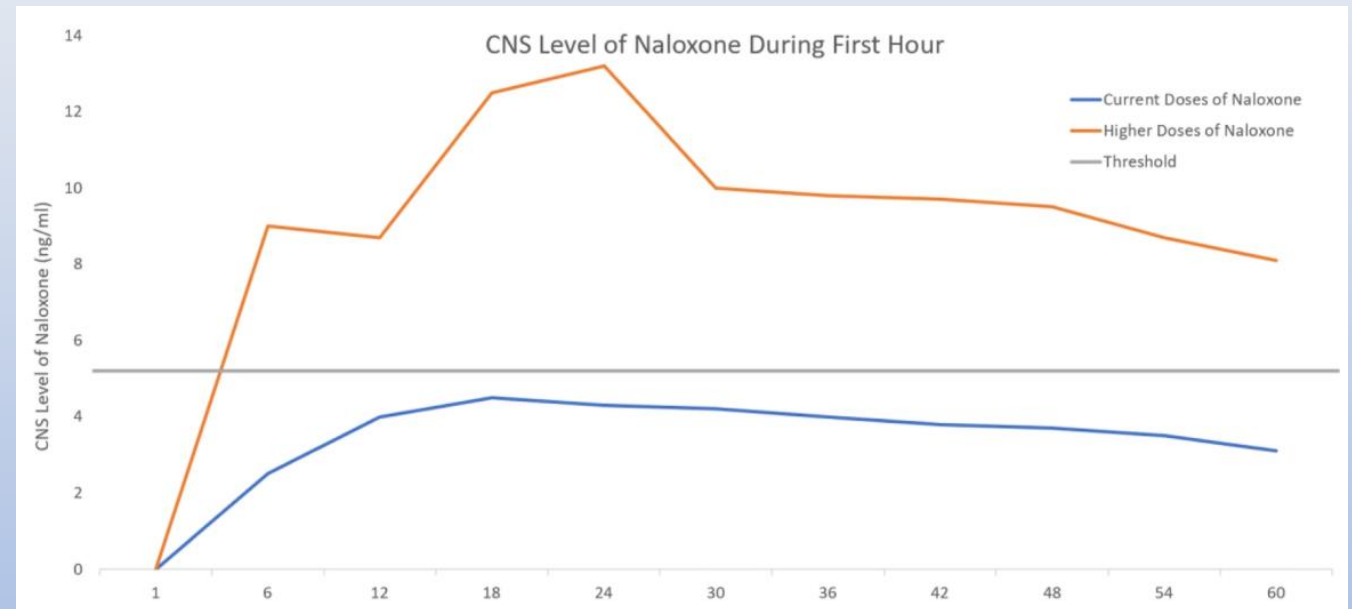
- Naloxone is a medication that reverses the effect of opioids
- 'Competitive antagonist' that displaces temporarily the opioids from the receptors in the brain to reverse the breathing difficulties
- Acute withdrawal syndrome are possible following naloxone administration



# Emergency: NPS-opioids

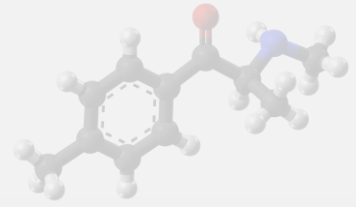


- Due to their high potency, synthetic opioids overdoses often more severe
- Rapid competition is required by naloxone to out-compete large numbers of opioid receptors occupied by strong opioids like fentanyl
- Multiple sequential doses of naloxone might be necessary





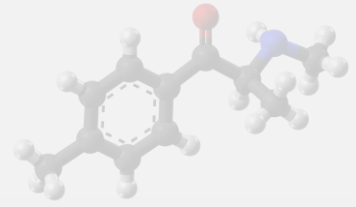
# Naloxone-on release Guidelines



- Increase the availability of naloxone to people likely to witness an overdose after release
- Increase awareness of the signs of an overdose and equip people to respond effectively
- Inform policy makers of the benefits of naloxone-on-release from prison



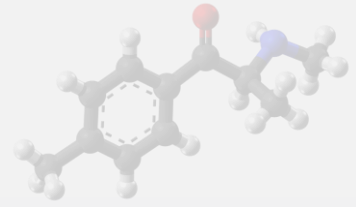
# Harm reduction & MAT



- Needle and syringe programmes
- Medication-assisted treatment (MAT)
- Diagnosis, treatment, and care for HIV, HCV, and tuberculosis
- Harm reduction information



# Specialised NPS Treatment



- In Europe: low demand for specialised NPS treatment
- Result: Not many specialised treatment services focussing on NPS
- Well-established evidence-based treatment approaches also effective for people who use NPS



**CLUB  
DRUG  
CLINIC**

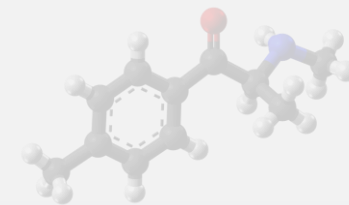
For confidential advice call 020 3315 6111  
or email [clubdrugclinic.cnwl@nhs.net](mailto:clubdrugclinic.cnwl@nhs.net)

Centr

Home Get help ATOM

**OVERDONE IT?**

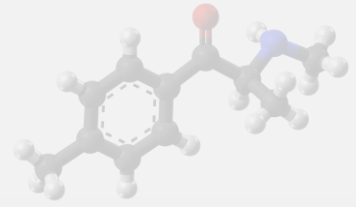
The **Club Drug Clinic** is a service for people who have begun to experience problems with their use of recreational drugs.



# Conclusions

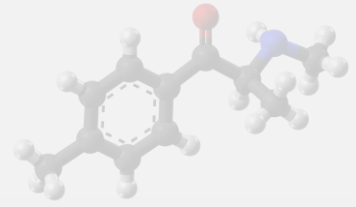


# Conclusions



1. Awareness and knowledge needed to monitor new phenomenon that may develop in a more widespread public and prison health issue.
2. Professionals lack of experience with NPS does not mean that they do not have the skills to support the users of these drugs.
3. The emergence of NPS may be another argument to invest more in high quality evidence-based treatment.

# Let's work together!



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