

Patterns of prescription drug use and misuse in Spain: The European Opioid Treatment Patient Survey

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ABSTRACT

The present study aims to evaluate the patterns of prescription drug misuse in a medication assisted treatment center (MAT) in Spain.

Launched in October 2014, this study uses patient self-report data collected at treatment program intake, during the past 90-day use and injection history for European-market prescription opioids, prescription stimulants, prescription cannabinoids, heroin, and other prescription drugs as well as basic demographic information, treatment history, and health care worker status.

A total of 101 surveys have been collected in Spain at this moment (69% males, 42±10 years). The main drug at intake was heroin (51%), cocaine (26%), cannabis (11%), amphetamines (4%), benzodiazepines (3%), prescription opioids (3%) and other substances (3%). The main route of administration was smoked (34%), injected (30%), snorted (27%), oral (7%), and 2 subjects used skin patches (2%). The majority of subjects (63%) abused more than one substance. Initial data shows that, in Spain, there is a concomitant abuse of prescription drugs, mainly benzodiazepines, prescription opioids and cannabis. The knowledge of drug use patterns can provide useful information to develop effective prevention and treatment.

INTRODUCTION

Governments and public health organizations worldwide are increasingly aware of drug abuse-related issues and eager to receive systematically-collected surveillance data, which may assist in formulation and solidification of their plans to address this emerging epidemic. The nonmedical use of prescription opioids is a major public health issue, both because of the overall high prevalence and because of marked increases in associated morbidity and mortality [1,2]. Through the coordinated research efforts of the Italian-based Associazione per l'Utilizzo delle Conoscenze Neuroscientifiche a fini Sociali (AU-CNS), Denver Health Rocky Mountain Poison and Drug Center (RMPDC) in the U.S., and European opioid treatment program physicians, a pilot study was previously launched which provided for proof of concept of the feasibility of an International drug surveillance System which will be presented in this study [3].

The present study aims to systematically obtain data on the use of prescription drug misuse in France, Germany, Italy, United Kingdom, Norway and Spain.In this report we present the patterns of prescription drug misuse in a medication assisted treatment center (MAT) in Spain, and the clinical characteristics depending on the main drug at intake.

METHODS

Patients aged 18-65 entering MAT were surveyed by self-report data collected at treatment program intake, during the past 90-day use and injection history for European-market prescription opioids, prescription stimulants, prescription cannabinoids, heroin, and other prescription drugs as well as basic demographic information, treatment history, and health care worker status. Data from October 2014 to May 2016 is presented. Descriptive statistics are presented; comparisons depending of the main drug at intake were performed with Chi-Square testand independent measures ANOVA with SPSS.

RESULTS

A total of 101 surveys have been collected in Spain at this moment (69% males, 42±10 years). The main drug at intake was heroin (51%), cocaine (26%), cannabis (11%), amphetamines (4%), benzodiazepines (3%), prescription opioids (3%) and other substances (3%). The main route of administration was smoked (34%), injected (30%), snorted (27%), oral (7%), and 2 subjects used skin patches (2%). The majority of subjects (63%) abused more than one substance; the sample characteristics are described in Table 1.

Subjects presented differences depending on the main referred drug at intake, those referring heroin as main drug, present more intravenous use, more polysubstance use and lower age at first treatment. Conversely, patients with prescription opioids as main drug of use were older than the rest (Table 2).

Also, the pattern of abused drugs is different depending on the main drug at presentation. In **Figure 1**, there are represented the total number of substances abused reported by patients.

Figure 1. Substances used to get "high" reported by patients, depending on the main drug (total numbers).

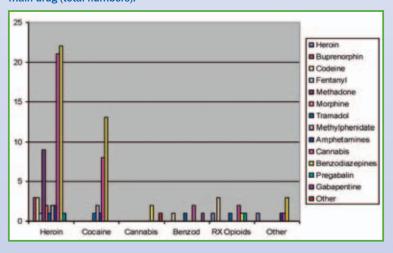


Table 2. Main characteristics of the sample depending on the main drug reported at intake

	Heroin N=51	Cocaine N=27	Cannabis N=11	Benzod N=3	Rx opioids N=3	Other N=7	р
Males, n (%)	39 (77)	16 (59)	7 (64)	0	2 (67)	7 (100)	0.033
Age, mean (SD)	43 (10)	40 (8)	36 (13)	40 (16)	55 (8)	45 (9)	0.044
Main route of administration, n (%) Smoked Injected Snorted Oral Sublingual Skin	13 (26) 28 (55) 10 (20) 0 0	9 (33) 1 (4) 16 (60) 0 0	11 (100) 0 0 0 0 0	0 0 0 3 (100) 0	0 0 0 1 (33) 0 2 (67)	1 (17) 1 (17) 1 (17) 3 (32) 1 (17) 0	<0.001
Age at 1 st treatment, mean (SD)	28 (10)	34 (9)	34 (15)	35 (18)	48 (4)	39 (13)	0.005
More than 1 substance n (%)	36 (70)	16 (60)	3 (27)	2 (67)	3 (100)	3 (43)	0.044
Number of substances used mean (SD)	2.3 (1.3)	1.9 (0.9)	1.3 (0.5)	2.7 (2.1)	4 (1.7)	1.8 (0.4)	0.009

SD: Standard deviation

Table 1. Main characteristics of the included sample

	N= 101		
Males n (%)	70 (69)		
Age mean (SD)	42 (10)		
Country of Birth, n (%)			
Spain	73 (72)		
Other European (EU)	12 (12)		
Other European (non-EU)	5 (5)		
North-Africa	4 (4)		
Sub-Saharan Africa	2 (2)		
America	2 (2)		
Asia	2 (2)		
Other	1(1)		
Health Worker, n (%)	5 (5)		
First treatment, n (%)	31 (31)		
Age of first treatment, mean (SD)	32 (11)		
Main Drug, n (%)	, ,		
Heroin	51 (51)		
Cocaine	27 (27)		
Cannabis	11 (11)		
Amphetamines	4 (4)		
Prescription Opioids	3 (3)		
Benzodiazepines	3 (3)		
Other	3 (3)		
Route of administration of main drug, n (%)	<u> </u>		
Smoked	34 (34)		
Injected	30 (30)		
Snorted	27 (27)		
Oral	7 (7)		
Sublingual	1(1)		
Skin	2 (2)		
Source of main drug, n (%)	_ (_/		
Dealer	80 (79)		
Friend/Relative	9 (9)		
Prescription	4 (4)		
Stolen	1(1)		
Other*	7 (7)		
More than one substance, n (%)	63 (63)		
Other substances used, n (%)			
Benzodiazepines	41 (41)		
Cannabinoids	34 (34)		
Methadone	9 (9)		
Codeine	7(7)		
Tramadol	4 (4)		
Buprenorphine	3 (3)		
Morphine	2 (2)		
Fentanyl	1(1)		
Heroin	1 (1)		
Methylphenidate	4 (4)		
Amphetamines (street)	4 (4)		
Amphetamiles (street)			
	2 (2)		
Pregabalin Gabapentin	2 (2) 1 (1)		

SD: Standard deviation; *Cannabis Associations

DISCUSSION

In Spain, the abuse and addiction to prescription opioids remains as a minor problem, being heroin use, still a major source of patients seeking treatment. However, patients that report at intake, use of prescription opioids as main problem, present a more severe profile: they are older and reported abuse of more type of drugs during the previous 90 days: benzodiazepines and cannabis mainly

Looking at use of prescription medications, benzodiazepines are reported to be used to get "high", by the 40% of the sample, mainly heroin and cocaine use disorders.

Another interesting point is that the majority of patients seeking treatment for cannabis addiction reported that the first source of the substance is through the cannabis associations.

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CONCLUSIONS

Initial data show that, in Spain, there is an important problem associated with heroin use. The abuse and addiction to prescription opioids remains as a minor problem often associated to the use of heroin.

Concomitant abuse of prescription drugs is associated mainly with benzodiazepines and cannabis.

The knowledge of drug use patterns can provide useful information to develop effective prevention and treatment.

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