

Illegal Drugs: the 2009 observations of the TREND system

The 11th year for the TREND system (Emerging Trends and New Dugs) helped analyse new trends and the most striking phenomena in drug use throughout France.

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The national TREND system was implemented by the OFDT in June 1999 to identify and describe changes in trends and phenomena related to illegal or misused substances. This issue of *Tendances* provides a summary of the main results for 2009 - the year that marks the eleventh consecutive observation year for the TREND network¹. This presentation is mainly based on the reports of the system's seven coordination sites [1] and integrates the information generated by partner information systems (see box) for the purposes of cross checking information. It is broken down into three main parts: the first is devoted to the striking phenomena specific to the observation year in question; the second reiterates the distinctive features of the last few years; finally, the third reviews some of the substances monitored by the system. The data from the SINTES scheme (National Detection System of Drugs and Toxic Substances) that pertain to the toxicological composition of illegal substances complete and shed light on these observations. As in previous years, the TREND observations focused on groups with particularly high frequency use and cannot be extrapolated to the population as a whole.

The building blocks of the TREND system

To fulfil its observational mission, TREND relies on:

- qualitative, ongoing collection tools (ethnographic observations, questionnaires) coordinated by the OFDT and run by a network of **seven local coordinating entities** (Bordeaux, Lille, Marseille, Metz, Paris, Rennes and Toulouse) that share a joint information collection and analysis strategy;
- **focus groups** (e.g., "health", "law enforcement"), that aim to rapidly establish overviews of the situation with professionals in the field;
 - qualitative or quantitative **thematic studies** to acquire more information on a given subject;
 - recurrent **quantitative surveys**, such as the OFDT/DGS ENa-CAARUD² survey conducted biennially since 2006 on clients seen in French low-threshold structures certified as CAARUDs (Support Centre for the Reduction of Drug-related Harms);
 - the SINTES scheme, an observation programme geared towards detecting and analysing the toxicological composition of illegal substances;
 - the use of **data from the information systems managed by the CEIP network** (Centre for Evaluation and Information on Pharmacodependence), particularly those describing the consumption of users followed up by the healthcare system and the monitoring of drug and substance abuse-related deaths; the **OCRIS** (Central Office for the Repression of Drug-related Offences) for statistics related to police activity in this area; and finally **OFDT surveys** to monitor people seeking treatment and general population surveys.

¹ A retrospective of the trends observed over the previous 10 years was published in January 2010: *Les usages de drogues illicites en France depuis 1999, vus au travers du dispositif TREND*, COSTES, J.-M. (Dir.), Saint-Denis, OFDT, 2010, 192 p.

² Which replaced the surveys among drug users attending low threshold services (PRELUD) performed until 2006.

Striking phenomena in 2009

Three striking phenomena were observed in 2009. Two of these phenomena pertained to party scene³ use, with the disturbance in the synthetic drug market following the MDMA shortage and the development of ketamine use outside of its "standard" use. The third phenomenon is related to the urban setting and the geographical expansion of crack use.

MDMA shortage and strong presence of mCPP in 2009 in a changing synthetic drug market

In 2009, the synthetic drug market experienced a severe shortage of MDMA both in "powder" and "tablet" forms. This shortage, which seemed to be the result of the massive destruction in Cambodia⁴ of safrole - a precursor needed to produce the drug - caused the powder to nearly disappear for two-thirds of the year and led to a new process where a new active ingredient, mCPP (meta-Chlorophenylpiperazine)⁵, not classified as a narcotic in France, has at least partially substituted for MDMA in tablets sold as "Ecstasy". As noted by the EMCDDA (European Monitoring Centre for Drugs and Drug Addiction) in its latest annual report⁶, this change also affected other European countries.

Subsequently, according to 2009 SINTES data, mCPP is found in 70% of the tablets presented as Ecstasy and 10% of the powders presented as MDMA. This phenomenon only heightened the trend that had been observed for several years, and which showed an ever-increasing number of consumers losing interest in MDMA tablets. This disinterest was particularly evident in the OCRTIS statistics, since the quantities of Ecstasy tablets seized in France were at their lowest level in a decade, with 107,000 tablets seized versus 343,000 in 2008. The ESCAPAD survey (Survey on Health and Use on Call-up and Preparation for Defence Day) conducted in 2008 among French 17-year-olds also showed a substantial decrease (from 3.5% to 2.9%) over a three-year period in lifetime use among young people [2].

In addition to factors related to the life cycle of a substance, and especially the fact that a product can go out of style [3], the decrease in product quality explains why users are abandoning the substance. Toxicological analyses⁷ show that, in fact, the average levels of the active ingredient are slowly dropping each year. In 2009, the observed substitution by another active ingredient did not produce the effects - and particularly, the empathic, so-called "love" effects and slower high - sought by MDMA users. This led to the belief that the tablet form, and perhaps even the powder form, will be increasingly abandoned. MDMA once again became available in the last quarter of 2009 and in early 2010. However, it also seemed to be increasingly less "reliable" to the users. A switch to the use of amphetamines (speed), cocaine and other synthetic stimulants, such as 2C-B (2.5-dimethoxy-4-bromophenethylamine) - a substance that produces both hallucinogenic and empathic effects similar to those of Ecstasy - was observed, and these drugs became increasingly present on the party scene. In the wake of mCPP and 2-CB, already familiar drugs, new synthetic molecules, rarely sold under their own name, started to appear with increasing frequency (see box on page 3). Although accessible via Internet, direct purchasing still seemed to be relatively limited in France. According to the observers of the TREND network, it would

³ Regarding "settings" or "scenes", see the box on page 2.

⁴ According to the United Nations Office on Drugs and Crime (UNODC), in 2007, Cambodia decided to prohibit the production and marketing of safrole, a vegetable oil used in producing Ecstasy. In 2008, this ban gave rise to massive campaigns to destroy this product.

⁵ It was in December 2004 that mCPP was first identified in France in tablets sold as Ecstasy.

⁶ See <http://www.emcdda.europa.eu/events/2010/annual-report>

⁷ Certain sources of concordant data (OCRTIS, SINTES) have reported a steady decline over the past decade in the average level of MDMA in Ecstasy tablets. In 2009, the data showed that the level of active ingredient was 21%, or just over 30 mg versus 54 mg in 2003 and 74 mg in 2000.

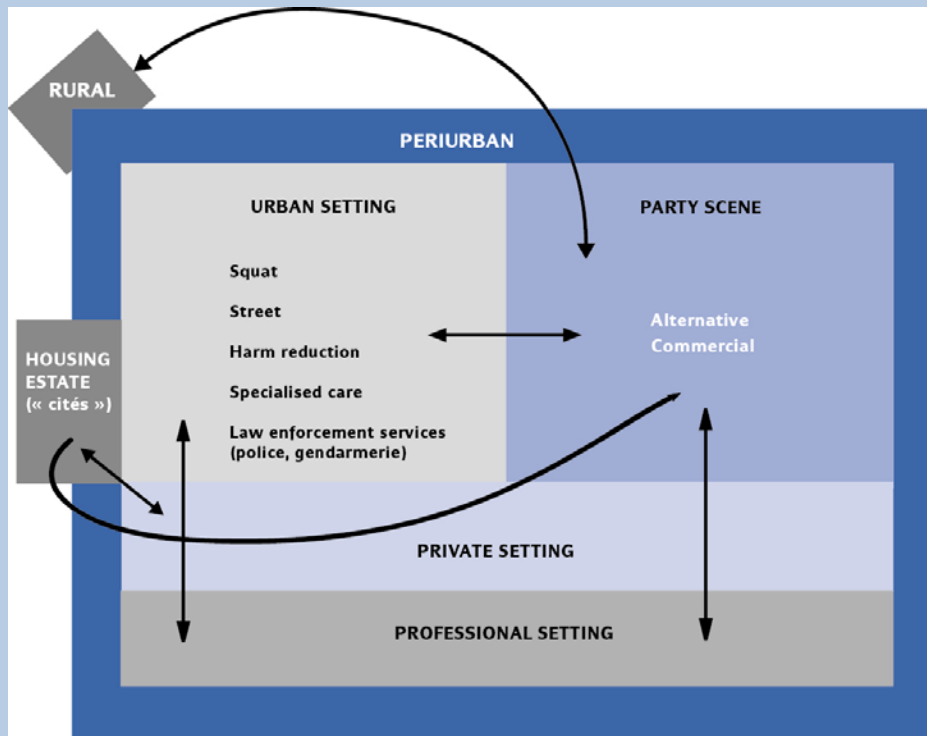
take a media phenomenon, like what surrounded mephedrone in early 2010, to arouse greater curiosity in this type of product and cause people to really seek it and make it available on the party scene⁸.

The specific areas observed by TREND

For ten years, TREND has been focusing on observing the French urban setting and the party scene (primarily the techno party scene). The French urban settings defined by TREND primarily refers to low-threshold harm reduction centres ("drop ins", needle exchange programmes that became CAARUDs in 2006) and open spaces (e.g., streets, squats and dealing sites). Most of the people met in these settings were problem users of illegal drugs living in highly precarious conditions.

The party scene refers to places where events are organised around the "techno" music trend. It encompasses the so-called "alternative" scene (e.g., free parties, teknivals and alternative party areas within more general festivals) as well as commercial settings (clubs, discos and even private events).

The different TREND use and observation settings



⁸ See the SINTES memo (March 2010) by Emmanuel Lahaie and Agnès Cadet-Taïrou, "Méphédronne et autres nouveaux stimulants de synthèse", available on the OFDT website: http://www.ofdt.fr/BDD/sintes/ir_100331_mephedrone.pdf

These two social settings were originally chosen due to the high likelihood of finding new or never-before-seen phenomena, even though these two settings do not characterise the full reality of drug use in France. At the same time, since it was established, the system has always questioned the evolution of its fields of observation. Subsequently, TREND was able to observe free movement between these settings and user groups, namely by highlighting the transit role played by errant youth in making substances specific to the party scene available to the most precarious users in the urban setting, and vice-versa.

Furthermore, a spread of drug use towards increasingly wider societal spheres (particularly the socially integrated population) and geographical areas (rural and suburban) was also recently observed.

The TREND network was able to identify these trends despite not specifically observing rural areas or peripheral towns for several probable reasons: the settings, and particularly the urban one, are transit areas for a significant population of drug users, which includes socially integrated users. Frequenting the party scene, which TREND strives to cover, despite the scene's constantly changing scope, also represents a particularly frequent phase experienced by socially integrated users (even though their drug use sometimes only spans a very short period). Similarly, while TREND has never covered all of the actual or potential drug use settings, such as private or professional settings, the system has been able to describe the practices that take place in such settings in part through the testimony of users temporarily frequenting the observed settings.

Moreover, some of the system's tools, such as focus groups or CAARUD-based information systems, provide access to a wide range of use situations and settings. The availability of the increasingly diverse CAARUD harm reduction measures also helped reveal user groups that had previously been invisible. Finally, to support its efforts, TREND conducts *ad hoc* studies on special populations and sites. This was the case in 2001 with the rock party scene and in 2007-2008 with the gay party scenes in Toulouse and Paris. In 2011, there will be a specific study on socially integrated users likely to buy psychoactive substances via Internet.

The new, "legal" synthetic psychoactive substances (SINTES)

Two substance families are concerned:

- **The cannabinoid agonists:** In 2008, the toxicological analyses of Spice-type herb mixes sometimes presented as "incense" on web-based sales sites revealed the presence of cannabinoid agonists. The three agonists identified by the system were classified as narcotics in February 2009. They were the first of a list that continued to lengthen until there were 18 entries by the end of 2010.
- **Psychostimulants:** At the same time, the 2009 SINTES survey on synthetic substances helped identify new psychostimulants, such as mephedrone (prohibited in June 2010), in some products acquired on the party scene presented as amphetamines or Ecstasy. However, there was minimal interest in these so-called "legal high" substances, and they remained unfamiliar to partygoers frequenting the party scene. The early 2010 media coverage of the widespread use of mephedrone among English youth seems to have piqued curiosity in these stimulants, for which availability and demand have increased. The interest in these "legal high" substances nevertheless remained less enthusiastic than the infatuation with "traditional" amphetamine stimulants (Ecstasy, amphetamines), whose effects the "legal high" substances are supposed to imitate, despite the ease with which the "legal high" substances can be obtained by Internet and the variety of available substances.

Among the hypotheses proposed to explain this French "resistance" is the language barrier: the majority of the online sales sites and user forums are in English. Consequently, higher numbers of products and increasingly varied prices can discourage certain potential buyers. Conversely, buyers find sellers they can see more reassuring and trust them more than impersonal websites offering products of unknown origin. In addition to mephedrone, products identified by SINTES included methylone, flephedrone (or 4-FMC), FMP, DOB and DOC, 1-PEA, 2C-D and 2C-E (legal 2C-B analogues) or pFPP. In contrast, MDAI and MDPV, characterised by the British press as probable "new mephedrones", have not been identified in France. These substances all have psychostimulant properties, and some of them are associated with hallucinogenic ingredients. Their overall structure is similar to that of better-known stimulants, such as Ecstasy or amphetamines, with variations that amateur chemists can conjugate *ad infinitum*⁹. As a result, prohibiting them is difficult, both nationally and on a European level. Furthermore, with the exception of mephedrone since October 2010, there is currently no proposed EU27-wide legislation.

A geographic extension of mainland France crack use

Historically, the use of crack cocaine (base form) appeared in France in the '80s, but its use had always been limited to Inner Paris and, to a lesser extent, certain peripheral (Seine-Saint-Denis) and overseas French departments (French Guiana, Guadeloupe and Martinique) [4].

Since the '90s, there have been two, distinct, coexistent spheres of use for crack cocaine in France: one is the base form that circulates under the name "crack", and the other one is the powder (hydrochloride) form that is turned into its base form right before use that circulates under the name "freebase". Even though the active substance is the same in both of these cases, the fact remains that the user profile and distribution methods are different for each.

"Crack" cocaine has been used in a very marginalised population that is developing in the northeast of Paris and, since about 2008, in the peripheral Seine-Saint-Denis department. These low-income users acquire this product, which is cheaper than powder cocaine, from professionalised crack cocaine dealing structures. "Freebase" cocaine is used by a very different population comprised mainly of people frequenting the alternative party scene. They supply themselves on the powder cocaine market and transform the powder cocaine themselves.

Until the past few years, the "crack"/"freebase" difference therefore covered different user groups and, in particular, had antagonistic representations. While "crack" had been portrayed in an extremely negative fashion, associated with the most marginalised of drug users, "freebase" conveyed a less unfavourable image related to the party scene and self-production. Self-production promoted a user myth that it is a "purer" and even "healthier" product.

The cocaine base therefore spread under the name "freebase" and escaped the stigmatisation of the term "crack".

In a context of increasingly widespread basing of cocaine, the new 2009 phenomenon was the further extension of the use of crack, openly sold as crack despite its bad reputation, to areas outside of Greater Paris [5]. Subsequently, the Rennes and Toulouse sites observed new points of sale for based "crack" cocaine, while Metz also reported the appearance of points of sale. Furthermore, in Greater Paris, new points of crack sale emerged, particularly in the Hauts-de-Seine department.

⁹ Molecules with effects similar to THC - the active ingredient in cannabis.

In Toulouse, like in Paris, it would seem that the phenomenon affected a small Caribbean minority population that purchased crack on the streets from the dealers who produce it. In contrast, in Rennes, even though there was also a small, emerging crack market, the local observers report a clientele that frequently comes from disadvantaged *cités* (French housing estates). The Metz site also reported the establishment of a point of sale, but it would seem that the phenomenon was rather contained and intermittent, since it came directly from Greater Paris.

In 2009, the Paris site, which had been witnessing crack use for about thirty years, experienced the return of users who had been chased from the northeast of the capital city by the police in previous years and fled to the town of Saint-Denis in the Seine-Saint-Denis department. Also in 2009, the change that had been observed since 2007 on the Parisian crack market was confirmed with the eviction of "*modous*" (traditional dealers from West Africa) from the crack market by cannabis dealers in certain working-class housing estates of the region¹⁰.

The particularity of crack, other than being more addictive than cocaine, is that it can be sold in much smaller quantities than powder cocaine sold by the gram. While a gram of powder cocaine costs €50 to €60 on average, crack can be acquired for €15 to €20 per large "rock" and for five euros for small "rocks"; these prices have contributed to making it widespread among the most disadvantaged populations.

However, it is still premature to draw any definitive conclusions about "crack" use sustainably spreading outside of Greater Paris. These trends will be monitored closely in future observation years and in 2011, they will be the subjects of a special investigation.

Cocaine basing

Transforming cocaine hydrochloride (powder) into its base form (crack or freebase) is a multi-step process. The cocaine is crushed and deposited into a spoon or the bottom of a can. The product is then mixed with ammonia (most commonly) or sodium bicarbonate. The mixture is then heated to transform the cocaine into a solid base form. The excess liquid is eliminated with absorbent paper. The obtained rock is then rinsed with water and broken up into small pieces ready for smoking.

Ketamine being used outside groups of regular users

In France, the abuse of ketamine (a human and veterinary anaesthetic) for its hallucinogenic and dissociative¹¹ properties is not a novelty [6].

Every year since 1999, the TREND network has been reporting the existence of a certain kind of drug use that rarely goes beyond the well-defined, minority domain of the alternative party scene (namely "travellers", who are generally experienced substance users). Ketamine is especially sought for its more or less radical dissociative effects, which depend on the dose and user tolerance. Users sometimes use it in search of more or less extreme mystical episodes, such as "outer body" experiences (the impression of being outside one's own body) or "K-hole" experiences of total immobility and loss of temporal spatial references with maintained consciousness. It therefore seems that ketamine's nefarious image associated with its radical effects, which are sometimes experienced without being sought after, has a tendency to dissuade potential users and drive them towards substances considered to be more controllable, like LSD. While in 2006 the first increases in availability were reported in Paris and

¹⁰ HALFEN S, VINCELET C, *Toxicomanie et usages de drogues à Paris: état des lieux en 2007 et évolutions*, ORSIF, OFDT, June 2008

¹¹ Dissociation is one of the aspects of a psychotic state and involves a breakdown of the conscious unit.

Marseille, it seems that the situation began to change in the last two years. An increasing number of sites (Bordeaux, Marseille, Toulouse, Metz) observed that on the alternative party scene, ketamine use has extended beyond the regular group¹² and spread to younger users, and especially young, itinerant drug users. Moreover, the use did not only concern the alternative party scene. It was also starting to reach other settings, such as clubs, particularly with homosexual clubbing and private events. Certain sites (Rennes, Bordeaux, Toulouse) also reported the emergence of use among highly precarious urban users.

In addition to increased availability, that is sometimes insufficient to meet demands (Metz), the most widely accepted explanation for this phenomenon would be the change in image related to a process of "domesticating" use. It seems that, as time passes, users gain an increasingly better understanding of the substance and, consequently, improve their management of the dose-effect relationship. For small doses in particular, ketamine rids people of their inhibitions and provokes a strange sense of intoxication as well as a feeling of soaring and being muffled. Health-wise, in addition to acute problems (bad trips that can be traumatic or comas), the effects of regular use have become evident, with the appearance of tolerance, dependency and psychiatric problems in certain individuals.

In any event, although ketamine use in France today is minimal and geographically limited to a few regions, the recent dissemination of the substance should be closely monitored.

Distinctive, enduring features

In contrast to the emerging phenomena, which may be temporary, the distinctive features have endured and are confirmed every year. Since 2000, the spread of cocaine use in France has continued and heroin is increasingly present again after its relative disappearance at the end of the '90s following the development of substitution treatments in France.

Drug users: younger, precarious, and more feminine

In addition to the aforementioned sociological and geographical spread of use (see box on page 1), many harm reduction centres mention that the generations of drug users are renewing themselves, and these centres are seeing increasingly younger users (16-25 years old), a significant number of whom are young women usually in very precarious situations. These young women seem to be frequenting the CAARUDs in increasingly higher numbers. These younger users, some of whom are following the techno trend, are characterised not only by high numbers of women, but also by high-risk behaviours, such as prostitution and sharing injection equipment. The intensified instability of the preceding generation (30 years) and more frequent errant behaviours ("*punk à chiens*", which is what the French call young homeless people who panhandle on the streets with their dogs in tow), with these users moving from city to city, have also been reported. Finally, newly established squatter groups of Eastern European drug users have been reported in several French regions¹³. These observations can also be noted in the Ena-CAARUD 2008 results¹⁴.

¹² With respect to the issue of the spread of a given product from a group of regular users, refer to the TREND report published in March 2000 by the OFDT.

¹³ Regarding the issues related to the emergence of new use behaviours in the urban setting, refer to the chapter entitled, "Les nouveaux visages de la marginalité", written by Anne-Cécile Rahis, Agnès Cadet-Taïrou and Jean-Michel Delile in *Les usages de drogues illicites en France depuis 1999, op cit.*

¹⁴ CAARUD: client profiles and practices in 2008, Agnès Cadet-Taïrou, et al., Tendances no. 74, to be issued in December 2010, 4 pages.

Changes in median prices (in euros)

	TREND 2000	TREND 2008	TREND 2009	OCRTIS 2009	Evolution 2000-2009	Evolution 2008-2009
Heroin	59	45	45	40	↘	→
Cocaine	84	65	62	60	↘	↘
Ecstasy	15	5	6.8	5	↘	↗
Cannabis resin	NA	5	5	5	-	→
Herbal cannabis	NA	7	7,5	7	-	↗
Amphetamines	15	15	14	NA	→	↘
LSD	8.5	10	11	NA	↗	↗
HDB/Subutex®/8mg	6.25	5	4.5	NA	↘	↘

NA: not available

Sources: TREND/OFDI and OCRTIS

Cocaine increasingly available geographically and socially

As in the preceding years, all TREND sites described cocaine hydrochloride as always being very available both sociologically (by opening up to new social strata in the population), and geographically (through development in rural areas in particular). This observation was confirmed by the OCRTIS [7] in a general context where drug seizures in France, although on the decline in 2009, remained at a historically high level with over five tonnes confiscated [8].

Sociologically, some observations were reinforced in 2009, and particularly the development of the use of the substance within young populations in poor, periurban areas, especially around Paris and Marseille. This phenomenon is significant because it is the expression of the breaking of a taboo in these populations regarding the use of so-called "hard" drugs. For a very long time, the universe of the housing estates ("*cités*" in French) remained branded by the health consequences (overdoses, HIV/HCV contamination) of the heroin epidemic of the '80s. This evolution is mainly the result of a recent proximity of these youths to cocaine. In fact, the widespread network of housing estate cannabis resin importers increasingly tends to add cocaine to the range of products being sold. Furthermore, the observers of certain sites, like Marseille and Paris, report that the population involved in the dealing networks is getting younger. It is no longer rare to see minors involved in structured drug dealing organisations not only as lookouts or in soliciting customers, but also as dealers.

"Cocaine", a name that sells (SINTES)

Drug trafficking exploits cocaine's positive image. The analysis of a product called "Coca Pep" circulating in Eastern France revealed that it was lidocaine (a product also reported under its own name). Likewise, a product collected under the name, "Subcocaine" was comprised entirely of 4 FMC (a different "legal high"). An "organic cocaine" was revealed to be ketamine. According to the EMCDDA, subcoca I has also been used as a name for mephedrone since 2008, and subcoca II has been used as the name for ethcathinone (another "legal high").

This phenomenon can be explained by the desire of those running these networks to replace people who have been arrested on the one hand and by the supposed lower incarceration risk run by minors on the other hand. This situation contributes to allowing cocaine hydrochloride supply and use to take root in the poor neighbourhoods of large French cities in a context where the prices tend to adapt to the limited financial resources of the customers coming from such neighbourhoods.

In fact, although the average price of a gram of cocaine has remained quite stable for the past five years (see the table on page4) at around €60, nearly all of the TREND sites reported a perpetuation of the specific markets for poor customers, namely the young population from at-risk neighbourhoods and the marginalised street users. This was demonstrated by the much lower prices offered in these markets - €40 to €50 a gram - compared to the "city centre" prices, and of course the lower product quality compared to the better neighbourhoods. In relation to this, it is noteworthy that in 2009, the analyses performed by the French Institute for Health Promotion and Health Education (INPES) on cocaine seizures of under 1 gram revealed a significant decrease in the purity of the samples compared to previous years (30% on average versus 35% in 2008 and 2007) [9].

Sociologically, several sites, and Lille and Marseille in particular, reported that cocaine users were getting considerably younger, with use among high school or even junior high school students. The most recent data on cocaine use among 17-year-olds revealed a threefold increase in experimentation between 2000 and 2008 (3.3% in 2008 versus 1% in 2000).

Geographically, the level of use in the periurban and rural areas of the French territory was confirmed in 2009. This phenomenon was related mostly to the emigration of the most disadvantaged people towards the far periphery of large urban centres and the frequent contact with these substances on the party scene frequented by young city dwellers and young rural inhabitants alike¹⁵. The availability of the product was enabled by the observed increase over the past few years of "micro-networks" of user-dealers that supply directly, either through local wholesalers or through networks of dealers mainly in Spain, the Netherlands and Belgium (countries that represent ports of entry and storage areas for cocaine arriving to the European market) [10].

Results for 2009 of heroin collection and analysis (SINTES)

- Important variability of the purity of heroin sold to users¹⁶, favouring overdoses;
- Identification of new cutting products of heroin in small quantities: alprazolam¹⁷, dextrometorphan¹⁸ or phenacetine¹⁹. The first two can potentiate respiratory depression (although this is a marginal phenomenon at national level).
- Diffusion of a heroin gelling either in the spoon just after the dilution of the powder, or a little later inside the syringe (with the risk of injecting before the user can see the gelation of the solution).

¹⁵ Regarding the changes in the occupation of the scene in France in the past few years and the resultant social repercussions, see the work by geographer Christophe Guilluy, *Fractures françaises*, published in 2010 by editions François Bourin.

¹⁶ <http://www.ofdt.fr/BDD/publications/docs/cp091216heroine.pdf>

¹⁷ Active substance in the proprietary drug Xanax® (a benzodiazepine)

¹⁸ Opioid substance used for its antitussive properties

¹⁹ Analgesic withdrawn from the market in 1994 due to its toxicity. Since used as a cocaine cutting agent. See the SINTES memo on: http://www.ofdt.fr/BDD/sintes/ir_071129_phen.pdf

Heroin continues its slow return to the drug use landscape

Since 2006, all of the TREND observers in urban settings (except for Marseille) have reported a steady increase in the perceived availability of brown heroin. In 2009, this trend was confirmed by sites such as Rennes, Paris and Lille, and by OCRTIS, which observed "the availability of heroin increase throughout metropolitan France" [7].

In any event, drug seizures remained at a high level since they reached nearly a tonne (970 kg), which is the third highest level since 1995. Like for cocaine, this increased availability and accessibility is encouraged by the dynamic importer networks, which are becoming progressively more diverse, and micro-networks that directly penetrate the border countries where heroin is stored (Belgium, the Netherlands). Heroin is becoming more visible through local trafficking at sites like Lille or Paris, and through more numerous drug seizures involving less than five grams. The sharp decrease in the average price of a gram of heroin, which today is stable at €45 versus €60 in 2000, also bears witness to the increased availability of the product in France.

While use is on the rise in "traditional" opiate-using populations, the TREND network observers reported more widespread use in increasingly heterogeneous groups: party-scene users [11] in whom heroin "eases the coming down from stimulants", young users in working class neighbourhoods described by the Rennes site, and socially integrated users who take the drug specifically for its effects and try to manage dependency on their own.

These phenomena are largely promoted by a context in which the product image is improving and product use is becoming less dramatic. For the new generations who started using the substance by sniffing, the representations of heroin (dependency, overdose and AIDS, wrongly associated with injection) seem to be less meaningful. Certain observers thus reported that dealers at free parties and teknivals are increasingly abandoning use of the name "rabla" (a name intended to "mask" the real nature of the product) to sell heroin. Therefore, it appears that heroin use is increasingly accepted and no longer requires the semantic euphemisation still needed for freebase/crack. It is appropriate to note that even though the new heroin user generations start using the substance through sniffing and continue to do so once they have started, injection remains high among the most precarious populations, including young wanderers.

The increase in use was also revealed through the increase in the number of overdoses, confirmed by the quantitative data until 2008 and seen through the files that mobilised the health authorities throughout 2008 and 2009. Hence, heroin appears to have been present in 45% of the 2007 overdoses, while it was only present in 36% of the 2006 overdoses and 26% of the 2004 overdoses [12]. Two main factors come into play to explain this phenomenon. The first comes from the users themselves, as shown through the aforementioned progression of use in settings that are relatively different from those of traditional drug addiction. These users are fairly young and most often are unaware of the risks of heroin and lack experience with the substance. The second is related to the quality of the product itself: high dose heroin batches are increasing in frequency - between 2008 and 2009, drug seizures of highly concentrated heroin doubled and the high level of heterogeneity of the powders in circulation represented a certain risk of overdose in a market largely dominated by poor quality heroin, as evidenced by the concomitant increase in very low purity batches and decrease in moderately dosed products.

Furthermore, the national SINTES survey conducted between March 2007 and June 2008 demonstrated that the "price" factor is not a relevant indicator for the potential quality of a given product, and that the situation is relatively complex. In fact, the results revealed that a high retail price in no way guarantees a product of high purity. [13].

Focus on some other substances

Here we present the observations on other substances monitored by the system.

High-dose buprenorphine: stability and continuity

Despite its decreased availability at times, buprenorphine in its proprietary form (Subutex®) remained highly available on the parallel market. Even the generics, which appeared in 2006 and 2007, seemed to be excluded from this black market. Even though buprenorphine inspired less interest in the users encountered through TREND, as a "drug", it retained its basic functions ("the poor man's opiate", withdrawal management and "crutch" for heroin use). Moreover, buprenorphine acquired new fringe users, or even primo-users, especially among poor workers or socially integrated users who are visible to the treatment system when they become dependent.

Methadone, still fairly controlled

Its black market progressed weakly, but it remained discreet and dispersed. One site (Lille) observed "Doctor shopping" (users who find multiple prescriptors to increase the doses received). The demand on the parallel market is often limited to temporary fixes, withdrawal management and self-substitution. However, Paris is an exception, since we observed non-substitution use in people in highly unstable social situations or, in contrast, people who are gainfully employed. The gelcap form, which has been marketed since 2008, had a positive image as a treatment. It was not visible on the black market.

GHB/GBL: a return to discretion

GBL is an industrial solvent that is a precursor to GHB, into which it transforms after absorption. Its dissemination from the gay party clubbing scene to young groups of "partygoers" seeking experimentation as a change from their usual alcohol or popper consumption gave rise in 2009 to a series of rather mediated comas in Montpellier. In the TREND network, this same phenomenon of dissemination towards young users, especially through the crossing of populations in gay-friendly settings, was also seen in Toulouse (since 2008), Bordeaux and Paris, where use had long been confined to the gay party scene. Elsewhere, with the exception of the north of France, where the product has long been used in Belgian megadance parties frequented by the French, the phenomenon was not observed. In any event, it seems that in 2009, problems following GHB/GBL use became more visible. This may be due to a regression in experimentation or better dose control within former or new user populations.

LSD, a limited phenomenon

LSD, which had become more readily available in 2008 in the alternative party scene for some sites, remained quite present at these same sites in 2009, but without further accentuation of the 2008 presence. Only Metz, which had reported a lower supply than demand in previous years, reported an increase in availability in 2009. LSD was nearly nonexistent on the traditional party scene.

Ritalin, a localised phenomenon

Ritalin® (methylphenidate) remained a localised phenomenon. Its misuse by some of the most disadvantaged drug users started emerging in 2004 in the Marseille area, and reached such proportions in 2009 that the CPAM (French national health insurance agency) started verifying prescriptions. This affected its availability, and the lower availability heightened the pressure on prescribing physicians by patients who became aggressive due to what was described as a particularly painful withdrawal effect. Prescription trafficking was also used.

Nearly invisible methamphetamine

There was no reported diffusion of this substance in France, despite the SINTES analysis of two methamphetamine-containing samples moving in highly confidential circles in Toulouse and Lyon in 2010. Customs carried out several drug seizures of methamphetamine-containing batches that were, for the most part, not intended for the French market (two in 2010, four in 2009). In fact, the use of methamphetamine remained confined to the gay party scene, which is supplied independently (through travel) and to low-visibility users from the Philippine community.

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