

EMCDDA Insights, No. 3

**Reviewing Current Practice in  
Drug-Substitution Treatment in the  
European Union**

European Monitoring Centre for Drugs and Drug Addiction,  
Luxembourg, 2000

This volume from the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) presents an overview of the development of substitution and maintenance treatment during the last 5 years. It is of particular importance for two reasons: substitution treatment has expanded enormously in Europe during the last 5 years, and this overview can serve as a discussion base for heroin-based treatment. The discussion on heroin-based treatment as a form of maintenance treatment is also a development of European addiction treatment and addiction policies of the last 5 years.

This otherwise well-written and clear overview has one serious shortcoming: it applies the term 'Europe' only to the territory of the European Community, leaving out Switzerland and the eastern European countries. Even if eastern Europe might be considered a special case, to disregard Swiss experience, procedures and data is really a serious sin, since it was Switzerland that led the way in many areas of substitution and maintenance treatment in Europe. It would have been desirable that, for once, the EMCDDA had made an exception and presented, at least in a table, the main experiences and results in Switzerland.

Returning now to the great variety of information contained in this volume. In the well-written introduction, Margareta Nilson gives an overview of the broad range of substitution treatment; she outlines, on the one hand, the various states of substitution treatment in Europe with their great variations in terms of type and extent of treat-

ment, and on the other hand, the variations ranging from sole methadone treatment to the prescribing of various substances such as LAAM, buprenorphine and even original substances. The evaluation and research approaches are equally diversified, rendering a comparison of data or results very difficult. Despite these limitations, the volume meets the set aims, which are: (1) to give an overview of the current trends of substitution and maintenance treatment including the substances used; (2) to name the characteristics of national strategies, and (3) to process this information to make it available for decision makers and politicians.

The introductory overview of the current state of substitution treatment in all the countries of the European Union shows the strengths and weaknesses of such an overview. Thus, a table informs us that methadone substitution is possible in all the member states, and that it is the only substitution substance allowed in Belgium, Greece, Ireland and Sweden, i.e. that no other substances are officially prescribed for substitution treatment.

In a further table, the difficulties of such an overview become apparent, showing estimated prevalence figures which are based on different kinds of data for each country.

The main interest of this volume, and also its main part – 225 pages out of 280 – consists of reports from the individual member states. These reports present detailed and clear information on the state of substitution treatment.

It remains for the reader to decide whether the perspectives vary from country to country; the German contribution at least is written from an optimistic point of view.

The EMCDDA report is an important contribution on the practice in drug substitution treatment; however, it does not succeed in contributing to a standardization of the concept of substitution treatment.

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