

# Addictions – the future

Dr Emily Finch

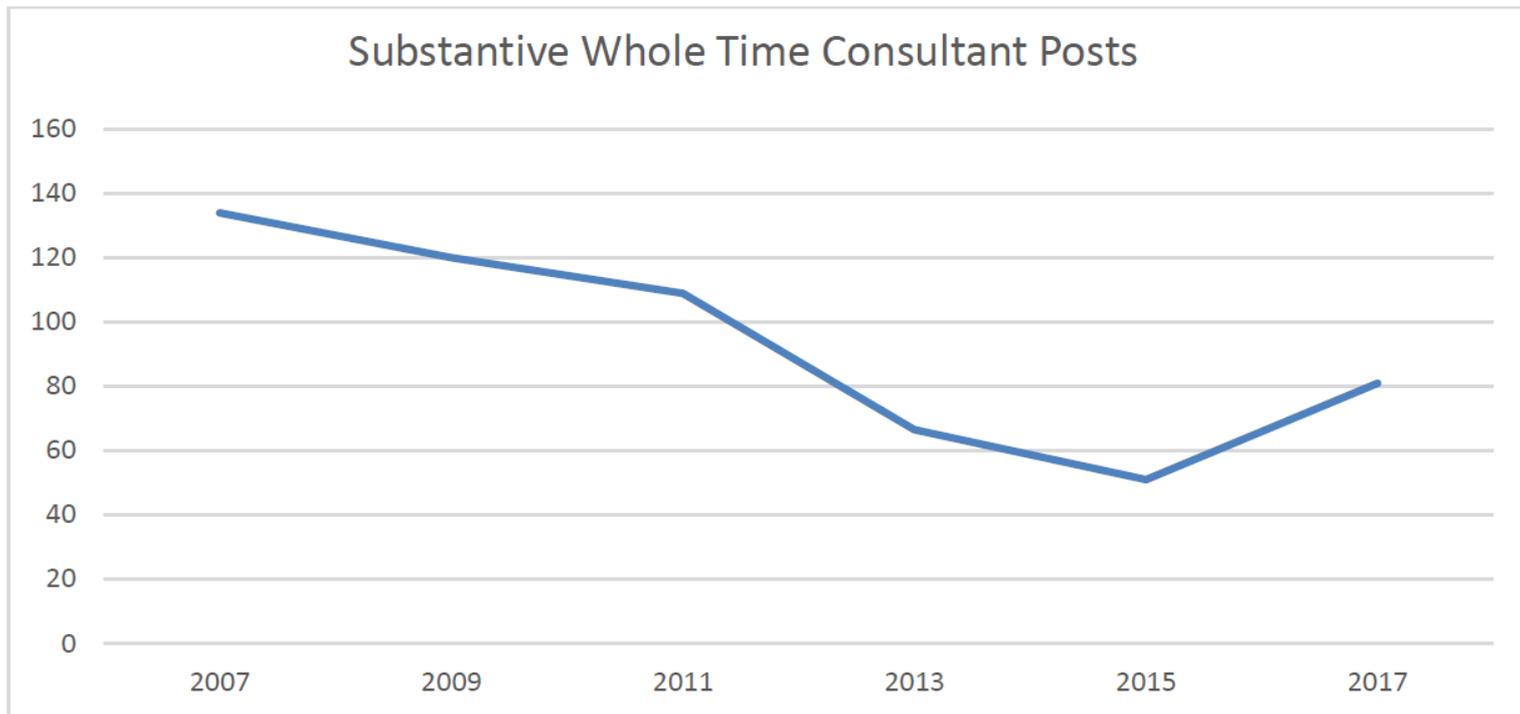
Clinical Director Addictions South  
London and Maudsley NHS Trust, Vice-  
chair, Addictions faculty RCPsych

# What's happening now?

- Dramatic reduction in funding for addiction services – estimates approximately 30% since 2015
- Funded from public health grant through LA commissioning structures.
- Poor links with health structures – failure to integrate with STP and new ICS structures.
- Regular retendering encourages instability
- NHS providing fewer services – estimates vary 13 trusts in England still involved.
- NHS and third sector partnerships are successful in some areas
- Few large 3<sup>rd</sup> sector organisations dominating the market.

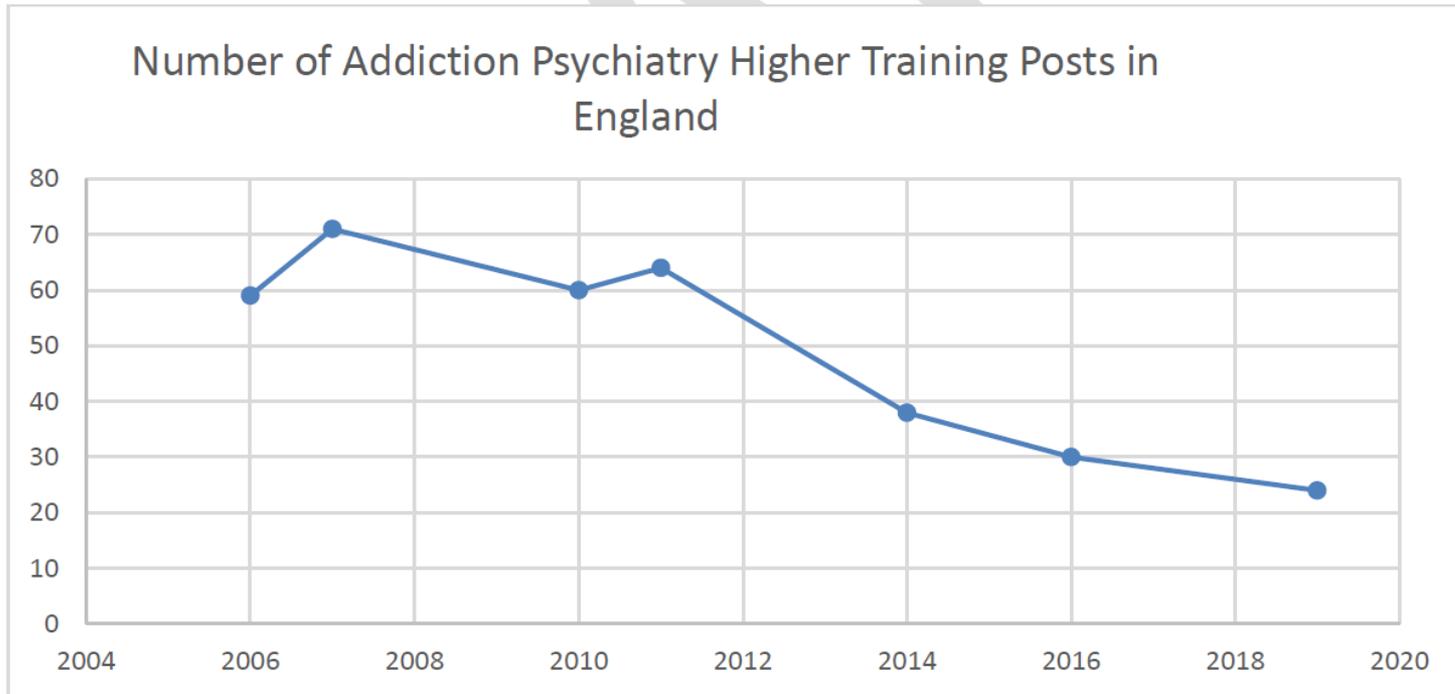
# Consultant workforce

Figure 1<sup>x</sup>



# Higher trainees

Figure 2<sup>xi</sup>



# Unfilled posts

Table 1

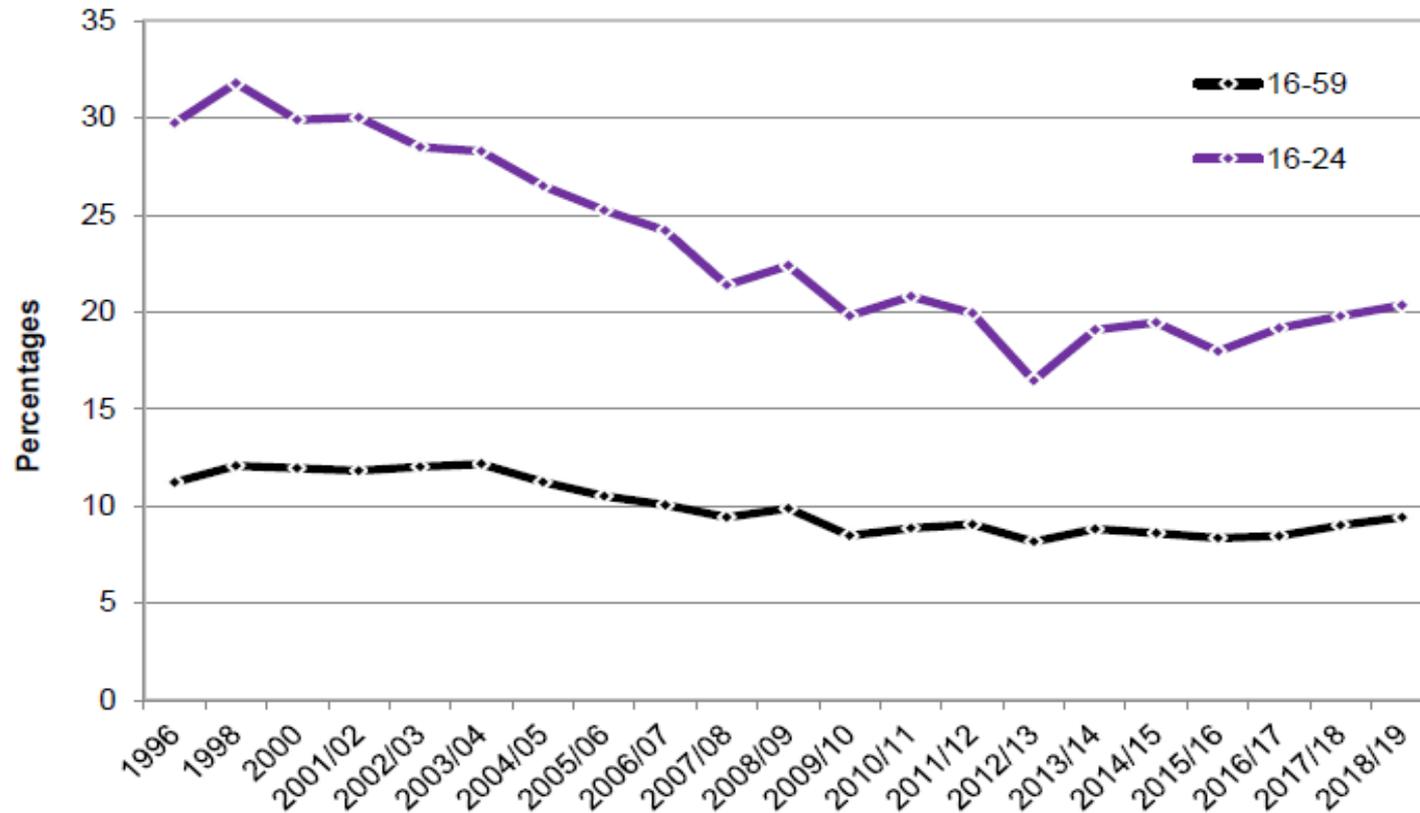
Region	Reported Post Numbers		No. Filled Aug 19 *	
	Core	Higher	Core	Higher
East Midlands	3	3	3	2
East of England	0	3		2
KSS	1	0	1	
London North Central	3.5	1		
London North West	1	3	1	1.5
London North East	0	2		0
London South East	2	4	2	4
London South West	1	0	1	
Northern Ireland	4	2	4	2
North East	1	2	1	2
North Scotland	1	1	0	1.5
North West	3	1	3	1
Severn	2	3	1	0
South East Scotland	1	3	1	1
South West Peninsula	0	0		
Thames Valley	0	0		
Wales	7	6		
Wessex	1	0	1	
West Midlands	2	3	1	2
West Scotland	15	8	2	3
Yorkshire and Humber	2	2	2	2
<b>Totals</b>	<b>50.5</b>	<b>47.0</b>	<b>24.0</b>	<b>24.0</b>

# Consequences of this situation (and loss of other staff groups)

- Difficulty in filling posts
- Loss of skills/expertise
- Reducing skills in addictions for psychiatrists
- More consultants in the voluntary sector
- New ways of working with the voluntary sector – developing guidelines/referral criteria

# Drug use is increasing?

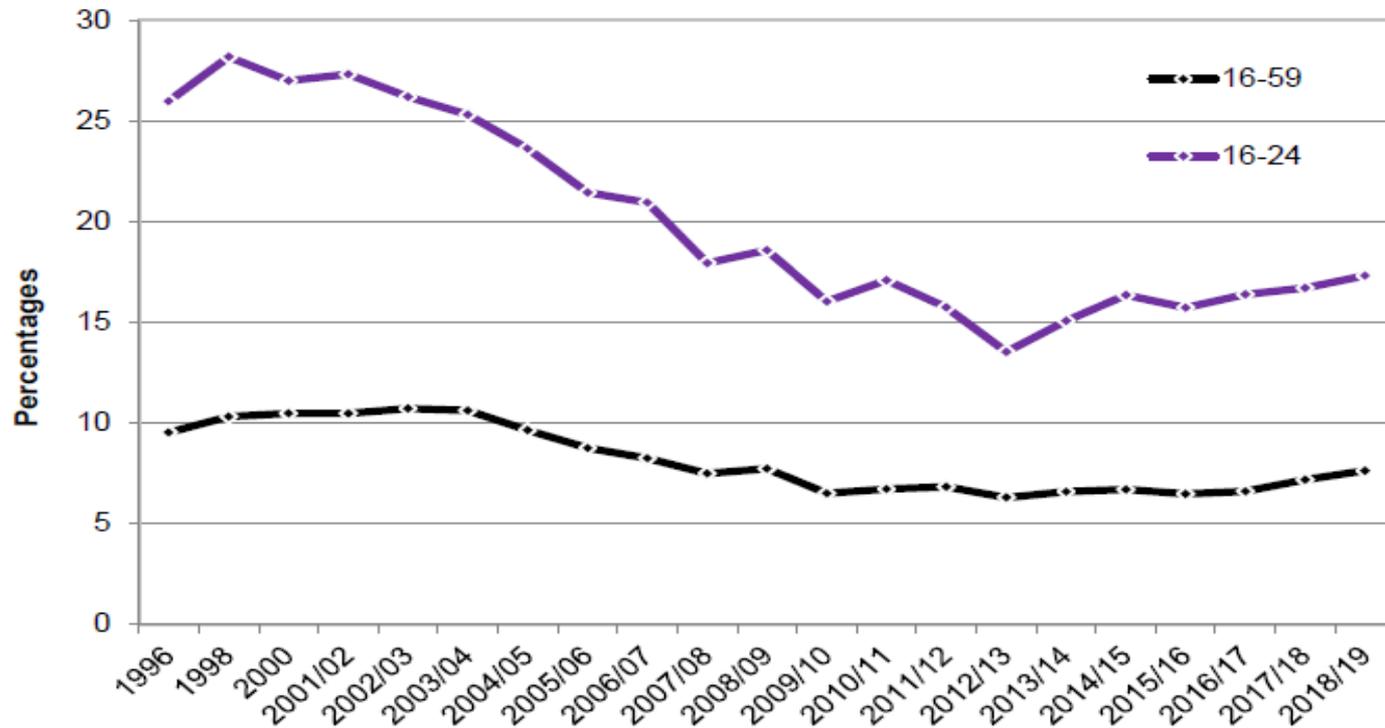
Figure 1.1: Trends in 'any drug' use in the last year among adults, 16 to 59 and 16 to 24 year olds, 1996 to 2018/19 CSEW



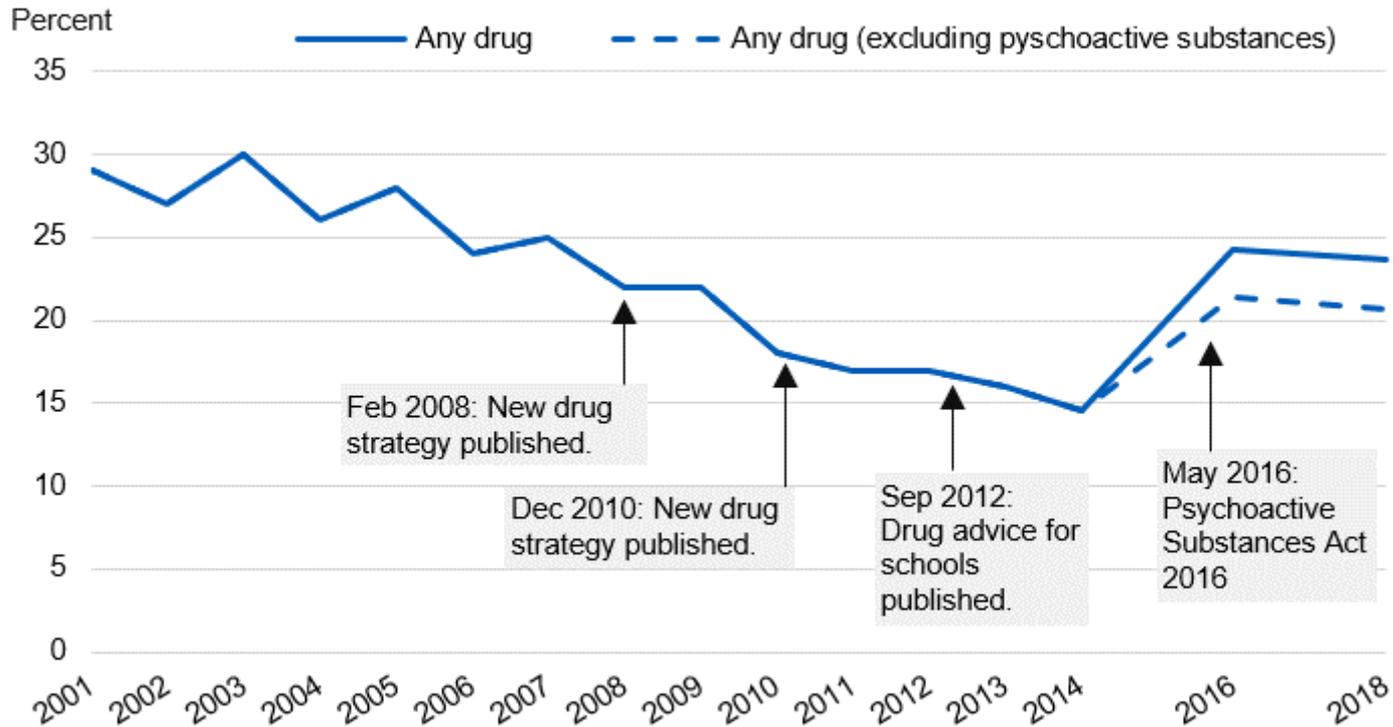
Source: Home Office. [Appendix Tables 1.02 and 1.06](#).

# Cannabis use is rising?

Figure 1.4: Proportion of adults using cannabis in the last year, 16 to 59 and 16 to 24 year olds, 1996 to 2018/19 CSEW



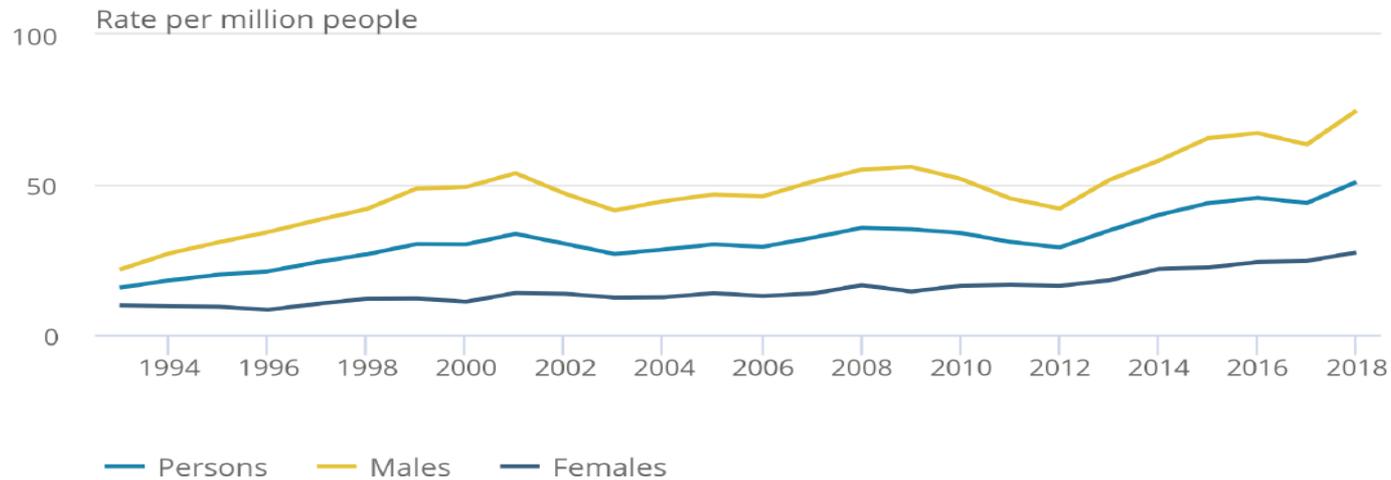
# Pupils who have ever taken drugs, by year



# Drug related deaths 2019

Figure 2: The rate of male drug misuse deaths is over two and a half times greater than the female rate

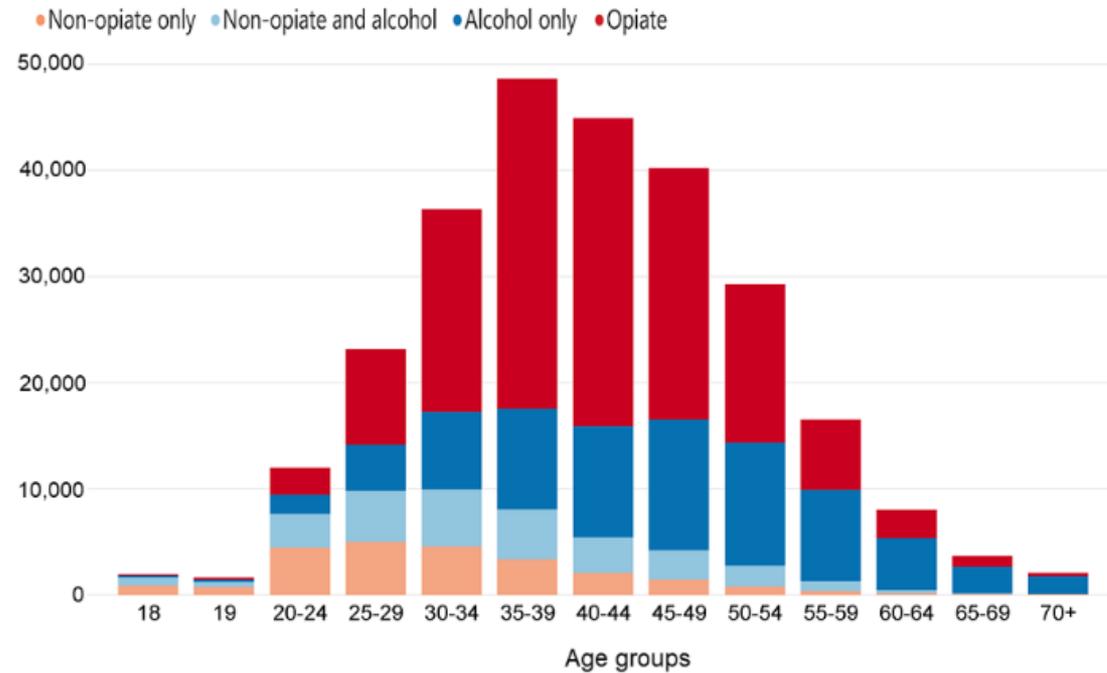
Age-standardised mortality rates for deaths related to drug misuse, by sex, England and Wales, registered between 1993 to 2018



Source: Office for National Statistics

# Ageing drug misusers

## 2.4 Age groups

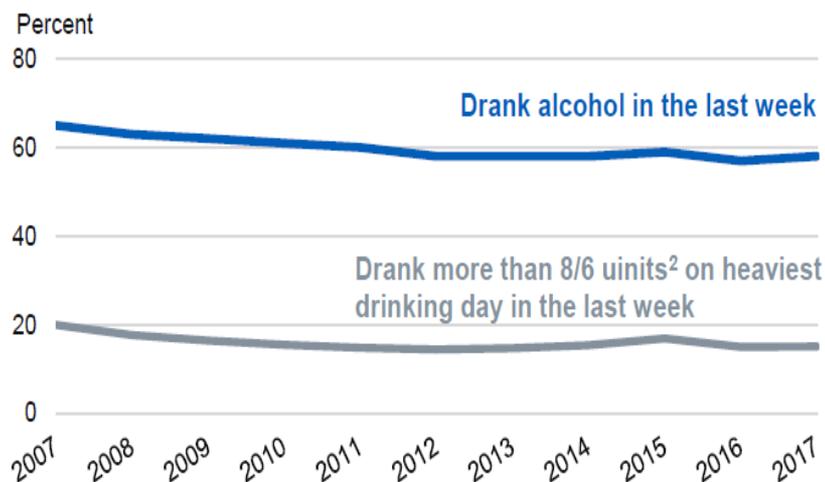


# Drinking prevalence for adults

## Drinking prevalence – last 10 years

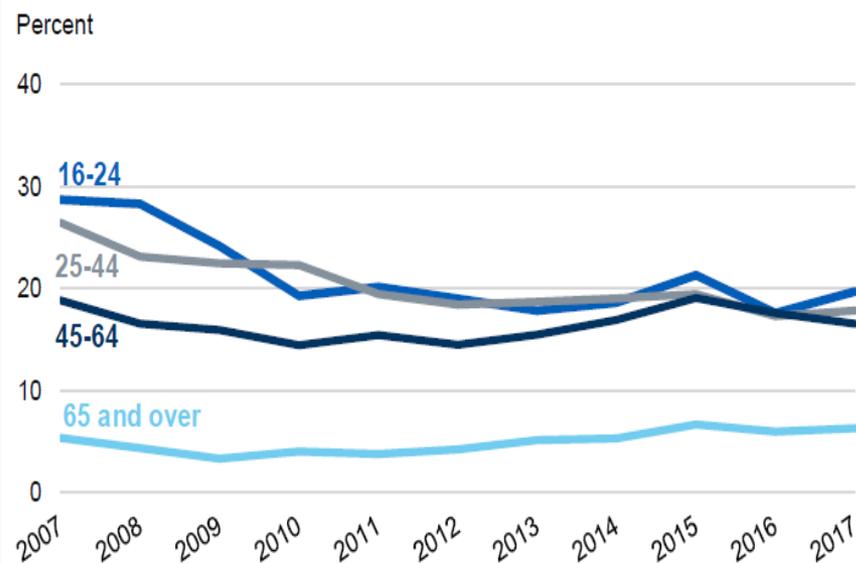
58% of survey respondents reported drinking alcohol in the previous week in 2017 which is a fall from 65% in 2007.

This equates to 25.6 million adults in England. Those who drank more than 8/6 units<sup>3</sup> on their heaviest day in the last week fell from 20% to 15%.



## Drinking more than 8/6 units<sup>3</sup> by age – last 10 years

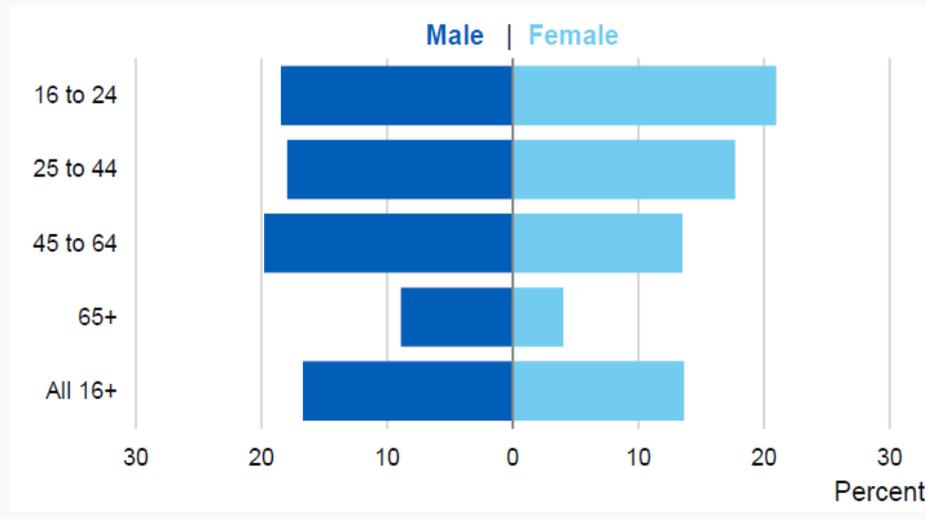
The proportion drinking more than 8/6 units on their heaviest drinking day has fallen in the last 10 years for those aged 16-24 and 25-44. There has been little change for those aged 45-64 and 65 and over.



# Drinking prevalence for adults

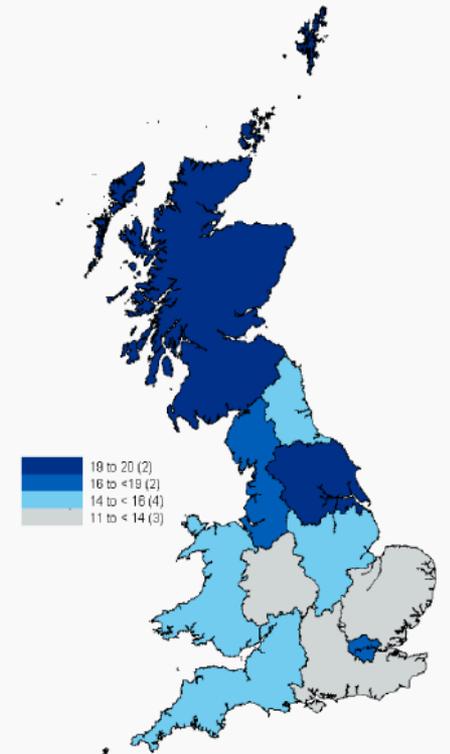
## Drinking more than 8/6 units<sup>2</sup> on heaviest drinking day in the last week by sex and age

The proportion of men drinking more than 8/6 units was similar by age apart from 65 and over where it was significantly lower. For women the proportion decreased with age.



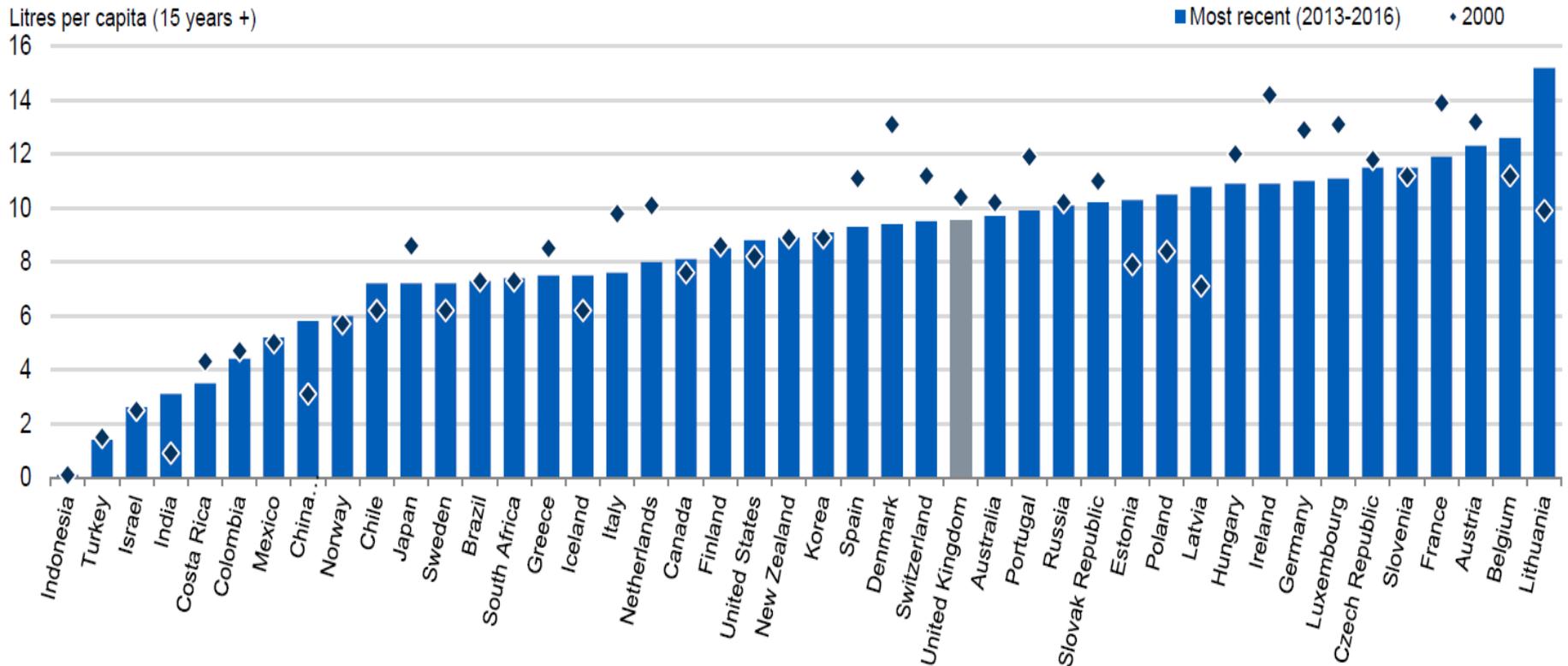
## Drinking more than 8/6 units<sup>2</sup> on heaviest drinking day, by region and country

A higher proportion of drinkers in northern regions drank at least 8/6 units in one day on their heaviest drinking day of the previous week.

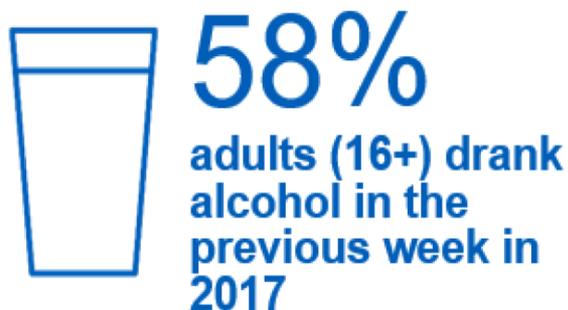


# International comparisons

UK alcohol consumption has decreased between 2000 and 2015. Lithuania and Belgium have the highest alcohol consumption.



# Alcohol related hospital admissions



Similar to 2016 but lower than 2007.



Admissions primarily due to alcohol consumption (narrow measure).



But 17% higher than 2006/07.

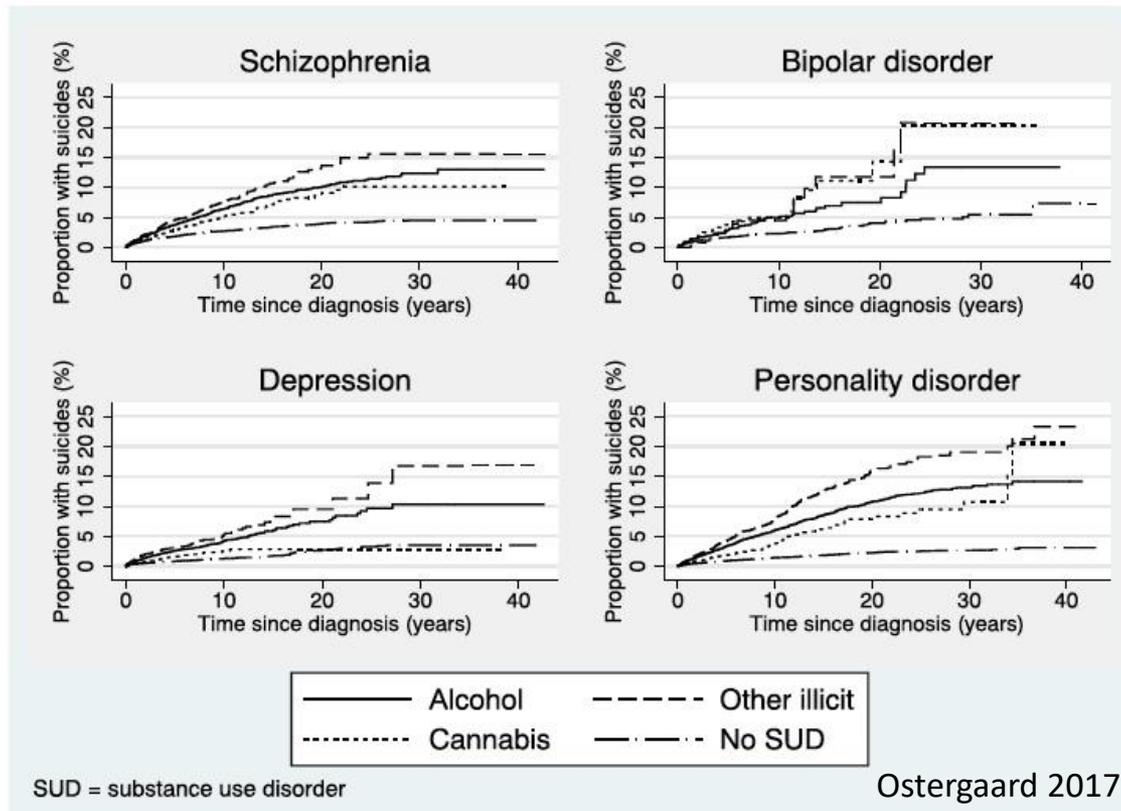


4% higher than 2015 and an increase of 11% on 2006.

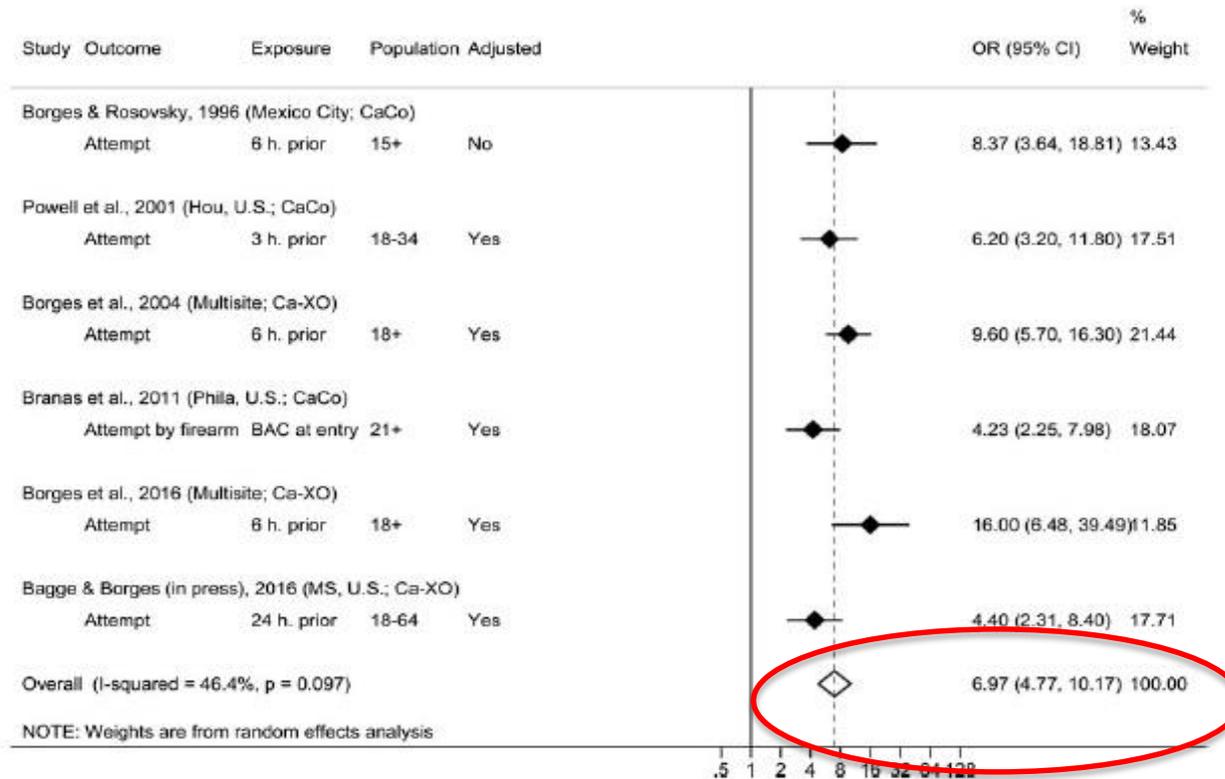
# Trends in treatment

- Numbers in treatment  141,000 (England)
- Opiate and alcohol stable
- Crack users  32% since 2013 to 2014.
- Successful completions stable

# Alcohol dependence is associated with increased suicide in patients with psychiatric disorders



# Acute alcohol intoxication is associated with an increase in risk of suicide attempt



Borges et al 2017

And don't forget....



# PHE Prescribed medicines review: summary

## Published - September 2019

2017 to 2018,

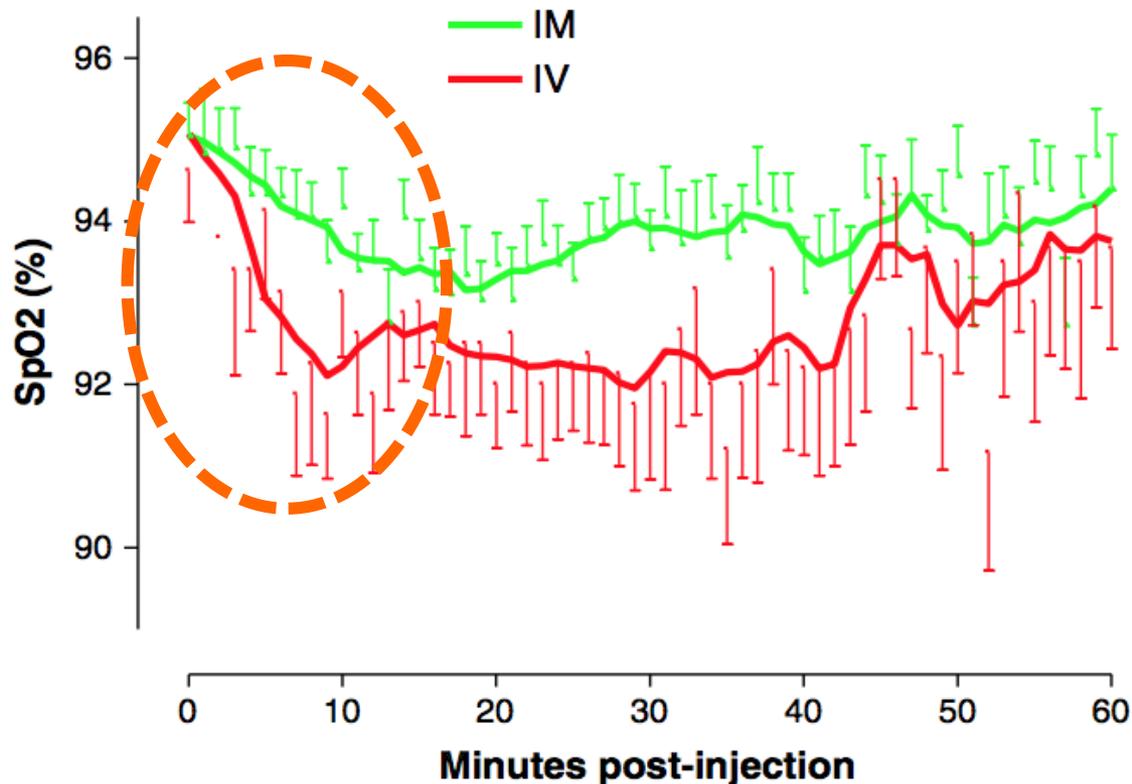
- antidepressants 7.3 million people (17% of the adult population)
- opioid pain medicines 5.6 million (13%)
- gabapentinoids 1.5 million (3%)
- benzodiazepines 1.4 million (3%)
- z-drugs 1.0 million (2%)

Increases in antidepressants and gabapentinoids

All associated with risk of addiction and dependence – but evidence is poor

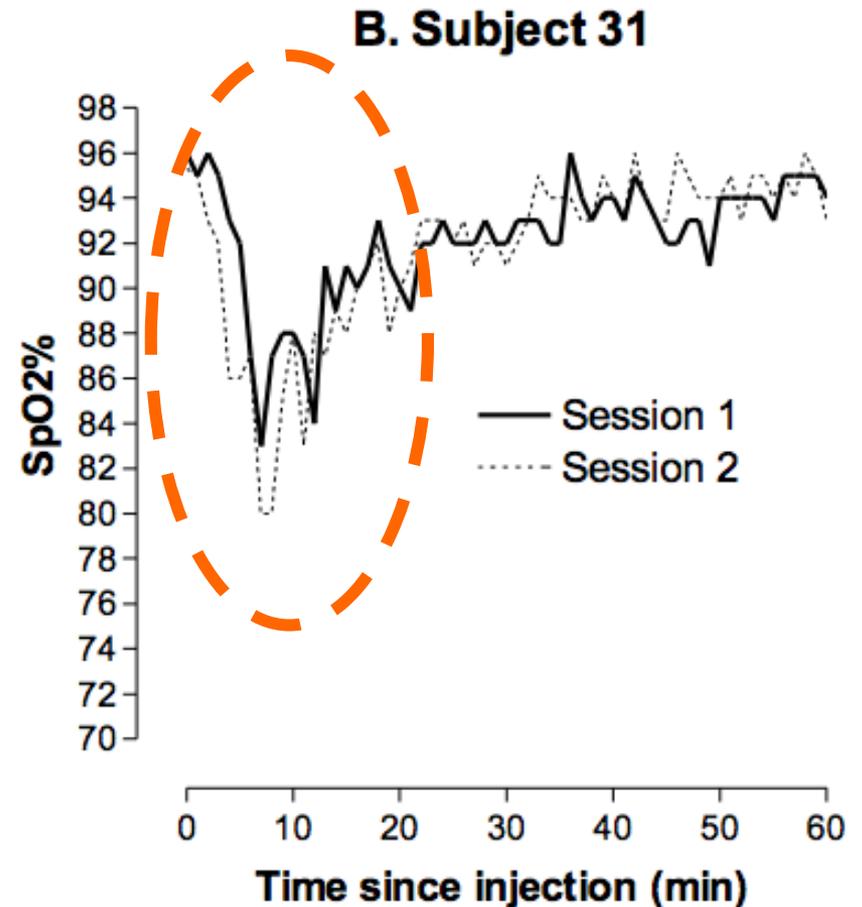
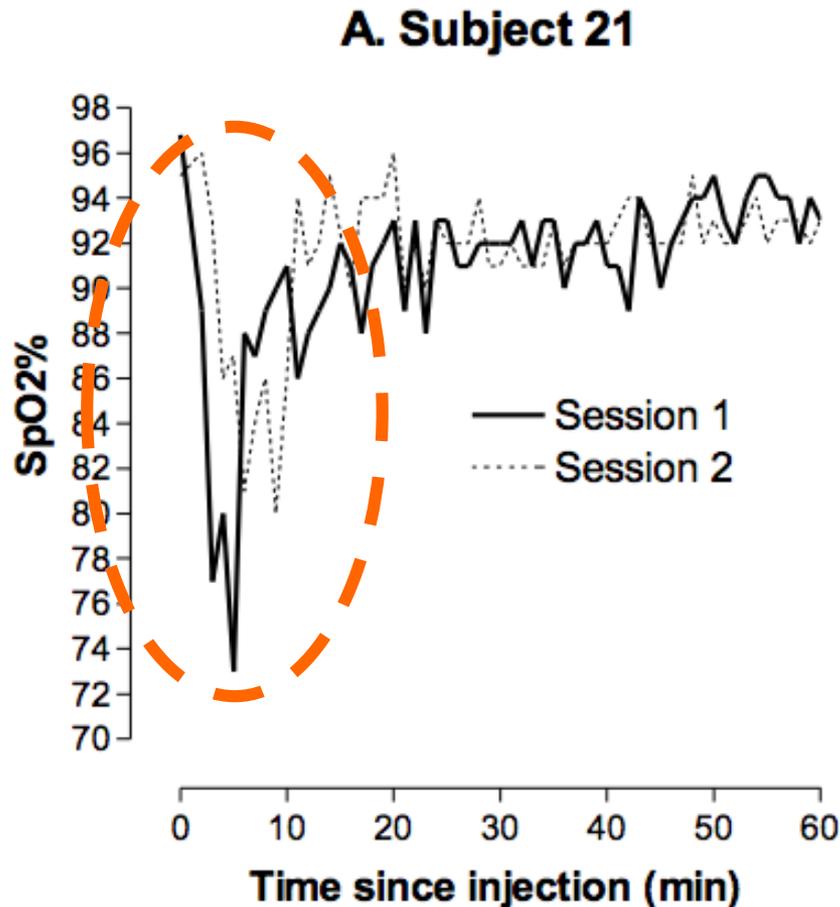
# Innovations – drug related deaths

## Oxygen saturation: IV versus IM



**Figure 1** Oxygen saturation after intravenous (IV) and intramuscular (IM) injection of heroin

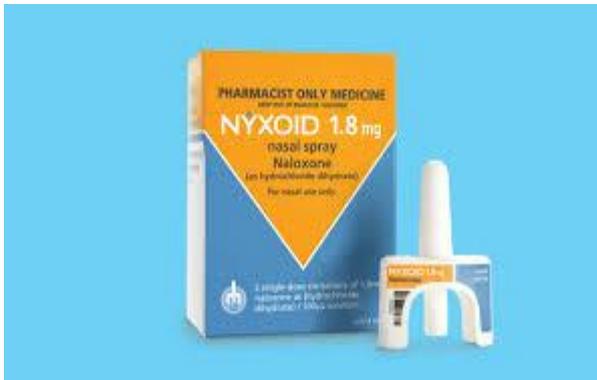
# Oxygen saturation: case study



Subject 21 (41 year old male) injected 180mg heroin intravenously on both occasions.  
Subject 31 (42 year old female) injected 150mg intramuscular heroin in session 1 and 160mg heroin in session 2. (unpublished)

# Take home naloxone

## Peer led initiatives and first responders,



**You Can**  
**STOP**  
**Overdose**  
**Death**

Get Naloxone **Save A Life**

Naloxone reverses and stops an opioid overdose. It saves lives and is legal to have. Naloxone is now available **FREE** of charge (limited supply) at the Tooele County Health Department (435)277-2301.





European Monitoring Centre  
for Drugs and Drug Addiction

*Naloxone Monograph from EMCDDA  
(European Monitoring Centre on  
Drugs and Drug Addiction) (2016)*

INSIGHTS

EN

20

264

# Preventing opioid overdose deaths with take-home naloxone

(2016)

## Editors

John Strang and Rebecca McDonald

*National Addiction Centre, Addictions Department, Institute of Psychiatry,  
Psychology & Neuroscience, King's College London, United Kingdom*

## EMCDDA project group

Dagmar Hedrich and Roland Simon

<http://www.emcdda.europa.eu/news/2016/1/preventing-opioid-overdose-naloxone>

# Innovation

## Long acting buprenorphine

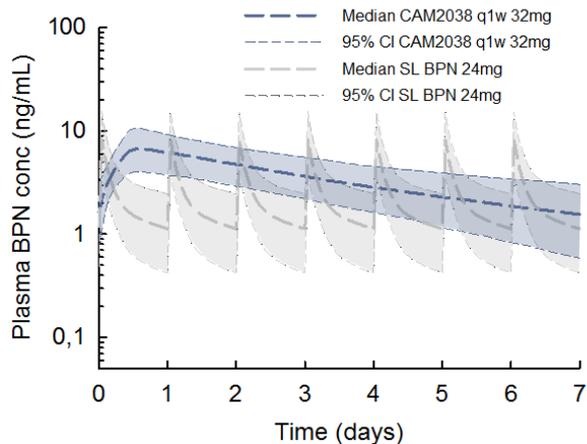
- Potentially game changing
- Weekly or monthly dosing
- No abuse potential
- Reduces need for supervision
- Questions about patient acceptability
- Price may be an issue



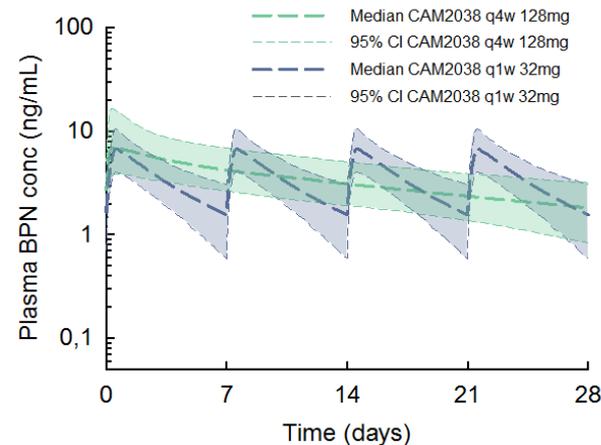
# Buvidal<sup>®</sup> delivers prolonged release of buprenorphine over one week or one month<sup>1,2</sup>

- Illustration of population pharmacokinetic profiles for Buvidal (CAM2038) and SL BPN

## Weekly Buvidal – Daily SL BPN



## Monthly Buvidal – Weekly Buvidal



Population PK analysis and modelling based on data from four clinical studies (N=236). Diagnostic testing demonstrated predictive BPN concentrations and good agreement between observed and predicted data percentiles. Steady state data. BPN, buprenorphine; SL, sublingual

1. Abstract presented at the Annual conference of the Society for the Study of Addiction- November 2018 <https://www.addiction-ssa.org/symposium/presentation/cam-2038-a-new-liquid-lipid-crystal-depot-buprenorphine-a-dose-ranging-study>;
2. Albayaty M, Linden M, Olsson H, Johnsson M, Strandgard K, Tiberg F. Pharmacokinetic Evaluation of Once-Weekly and Once-Monthly Buprenorphine Subcutaneous Injection Depots (CAM2038) Versus Intravenous and Sublingual Buprenorphine in Healthy Volunteers Under Naltrexone Blockade: An Open-Label Phase 1 Study. *Adv Ther.* 2017;34(2):560–575.

# Innovation

## Assertive outreach for alcohol frequent attenders

- 3+ alcohol-related admissions per year
- Multiple unmet physical, mental and social care needs
- Rarely access community addiction services
- Represent 9% of people with alcohol dependence but 59% of alcohol admissions
- 1.4 million bed days per year = £848 million
- Identified 324 ARFA patients in Lambeth and Southwark, with £5m annual cost

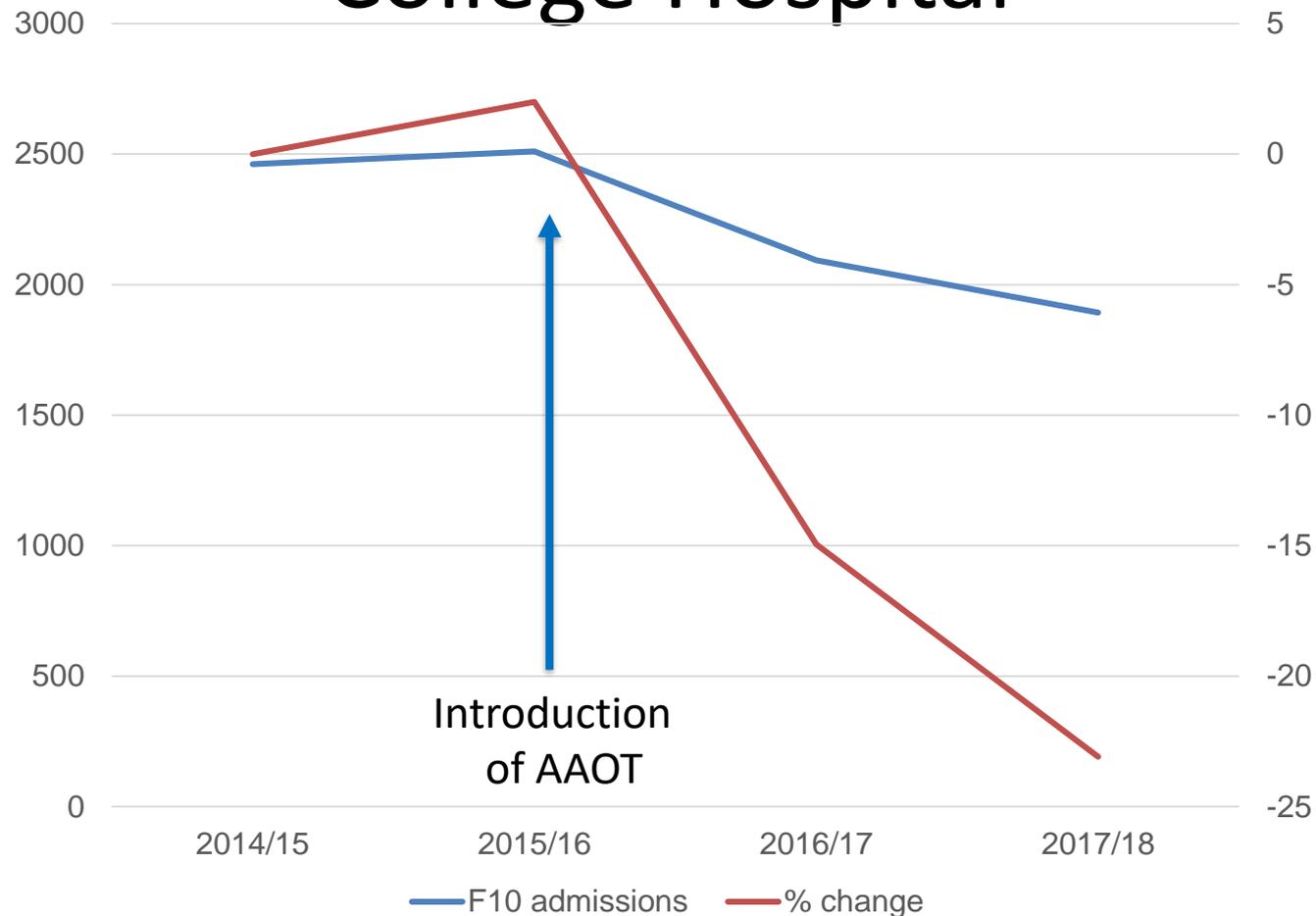
# A new model?

- Worked with patients and clinicians to adapt an Assertive Outreach Treatment model used in severe mental illness → training manual
- AAOT much more intensive and prolonged than standard alcohol care
- AAOT clinical team for Lambeth and Southwark
- Created partnerships with hospital and community teams
- Identified ARFA patients through hospital e-records
- Recruited 174 ARFA patients into a trial of AAOT versus Care as Usual, 87 per treatment group

# What is Alcohol Assertive Outreach Treatment?

- Minimum weekly contact for 12 months
- Small keyworker caseloads  $\leq 15$
- Persistent, assertive engagement
- Home-based or community setting
- Working across traditional professional boundaries
- Patient-led agenda
- Engagement with families, carers and professionals
- Supporting patients to attend addiction and health services
- Volunteers provided practical help and support

# Change in alcohol admissions via Emergency Department in King's College Hospital



# New models

## Alcohol care teams



- Alcohol care teams – in high prevalence areas
- Building on examples of good practice
- But – no attention to community services
- Range of implementation models

# Can we solve the workforce problem?

- ADDICTION PSYCHIATRY TRAINING INITIATIVE
  - In draft
  - 16 recommendations

Review of all possible mechanisms to preserve/increase number of training posts

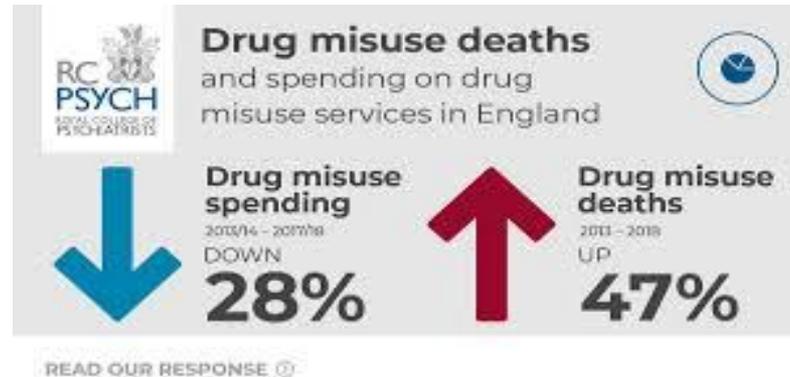
Training in the voluntary sector

Consider other ways to train psychiatrists

Supporting general psychiatrists

Credentialing?

# Finally – make fuss RCPsych comms campaign



water, and to introduce a five-day week, as a 'truly lightning' would take 316,800 years the annual GDP of Denmark. Continued on page 24 The champion box exclusive interview

## Aged 90 and still taking cocaine

**Andrew Gregory**  
Health Editor

Pensioners aged 90 and over are being admitted to hospital after taking cocaine. Ten men and women were admitted with mental disorders 'due to the use of cocaine' last year, compared with two a decade ago, NHS Digital figures reveal.

A decade ago, 41 people a year aged 60 or over were treated in hospital in England for cocaine-related disorders. The number treated has soared to 379.

Experts say the rise in the number of older people taking drugs and ending up in hospital was due to existing users living longer, the increasing purity of the drug as well as falling prices.

In Emily Finch of the addiction faculty at the Royal College of Psychiatrists described the rise as 'deeply worrying'.

She added: 'Many people don't realise that cocaine use can cause mental health problems, resulting in people becoming so unwell they need to be admitted to hospital.'

There has also been a stark rise in admissions for cocaine-related mental health disorders among people in their fifties. The numbers treated are up by more than 800%, from 300 in 2008-09 to 1,460 in 2018-19.

Karen Byard, from the drug charity Addiction, said: 'We need to shift the narrative to let people know that it's OK to ask for help or support at a much earlier stage.'

But cocaine is addictive, and regular cocaine use can change the way the brain releases dopamine, a chemical that makes people feel happy.

@andrewgregory

**NEWMAN'S VIEW**

IF ONLY SWAG WERE HELD TO WHAT IS