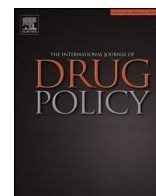




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Response

The utility of drug checking services as monitoring tools and more: A response to Pirona et al.



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Europe was the first continent to implement health responses to the NPS phenomenon and Pirona et al. (2017) have carried out an excellent job reviewing these responses in their paper. But Europe has also been a pioneer in conducting harm reduction interventions, not only facing the challenges posed by NPS, but also stimulants and other substances in nightlife settings.

The NPS phenomenon presents a real challenge for harm reduction projects that historically have targeted ecstasy users in electronic dance music scenes. These projects have used several strategies, many of them identified by the authors: peer education, information delivery, drug checking services, counselling (face-to-face and online), etc. However, there are multiple issues regarding drug checking services that Pirona et al. may be unaware of, or, at least, did not mention in their paper, that we believe should be considered when assessing the effectiveness of such services.

Firstly, the utility of drug checking services in monitoring drug markets, including those for NPS, is critical. Drug checking services have the added value of identifying discrepancies between what drug users think they are using and what they actually consume (Barratt & Ezard, 2016). Giné, Espinosa, & Vilamala (2014) showed how NPS were increasingly used to adulterate traditional

substances like MDMA or LSD, using this unique kind of data from drug checking services. Forensic testing on site at festivals and nightclubs over the last 3 years in the UK by The Loop has identified NPS filtering into the illegal market. Two examples include methylone (beige crystals) that users bought believing they were MDMA crystals, and methoxetamine that users believed to be ketamine (Fiona Measham, personal communication). Others, also utilising data from drug checking services, have described the same phenomenon and highlighted its relevance (e.g., Hondebrink et al., 2015). Although this issue was described as a “worrying phenomenon” (Giné et al., 2014), the use of drug checking services to monitor adulteration of traditional substances with NPS was not mentioned by Pirona et al. On the other hand, and more broadly, drug checking services work as monitoring systems of the evolution of NPS (Brunt & Niesink, 2011; Brunt et al., 2017). As an example, the drug checking service operated by the project Energy Control of the Welfare and Development Association (ABD, Asociación Bienestar y Desarrollo) has made 50 and 82 notifications reporting the identification of new NPS to the Spanish Early Warning System (EWS) in 2015 and 2016, respectively. The same applies to most other European drug checking services that report their information on NPS directly to the European EWS. Lastly, drug checking services can monitor adulteration in hard-to-reach markets, like cryptomarkets and

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webstores, as demonstrated by Quintana et al. (2017) and van der Gouwe, Brunt, van Laar, and van der Pol (2016).

Other positive aspects of drug checking services include their utility for obtaining extended information directly from users (e.g., on patterns of use, effects, negative consequences, harm reduction practices, etc.), for facilitating contact of NPS users with harm reduction services, and for delivering health warnings and advice in a rapid way, sometimes faster than those coming from Health Authorities. Drug checking services come across as trustworthy to young drug users: the drug checking service, comprised of individually tailored harm-reduction coupled to scientifically sound test results, serves the needs of this group better than other policy measures, like governmental scare tactics that promote abstinence (Fernández-Calderón et al., 2014; Gamma, Jerome, Liechti, & Summell, 2005). Top-down measures, like law enforcement and negative advertisements, are often considered by this population as untrustworthy (Ritter, 2010). In this sense, reports from Energy Control and The Loop show that a great majority of drug checking users have never been in touch with drug services before so these services are able to access a new and “hidden” user group from a service perspective. Moreover, the contents of illicit drugs corresponds more closely to what is expected in countries with drug checking services than in countries without such systems, indicating that their presence acts as a form of quality control regulation in an otherwise unregulated drug market (Kriener, 2001; Parrott, 2004).

While we acknowledge that drug checking services need to be scientifically assessed in order to obtain evidence of their effectiveness in achieving their objectives or impacting on drug users, as harm reduction practitioners involved in these services, we regret this issue has received scant attention from researchers or funding from research bodies when compared with other harm reduction interventions (e.g., for opioid or injecting drug users). This relative lack of attention by researchers has made it more difficult to argue persuasively for the benefits of drug checking services.

Pirone et al. write that one challenge for drug checking services is “the lack of evidence of these interventions in reducing harmful use or changing risk behaviours”. The focus by many only on the capacity of drug checking services to prevent drug use or change the individual behaviours by its clients ignores the much stronger research evidence about the utility of these services as monitoring tools. However, recent data from The Loop show that 18% of UK service users disposed of their drugs in the bins provided after receiving their tests results. We now have more concrete evidence that drug checking does result in behavioural modifications that undoubtedly reduce harm, if particularly suspect drug samples are discarded instead of consumed.

In conclusion, although recognising the limitations of self-evaluation of drug checking services conducted in a constrained funding environment, we believe that a more balanced view of these services could better inform readers of the International Journal of Drug Policy.

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