

Psychoactive substances, users and markets: recent trends (2016-2017)

**Agnès
Cadet-Taïrou,**

**Michel
Gandilhon,**

**Magali
Martinez,**

**Maitena
Milhet,**

**Thomas
Néfau**

Since 1999, the OFDT TREND scheme (Emerging Trends and New Drugs) has been monitoring current trends and those concerning emerging phenomena in the field of drugs. Based on the network of eight local TREND coordination schemes (see text box on p. 8), it aims to identify, but also to understand the changes at work affecting user profiles, patterns and contexts of use and sale, together with the characteristics of substances and harms associated with their use.

This overview presents the key findings of the seventeenth observation period, which focuses on 2016 and early 2017. Three aspects are highlighted as these correspond to new or recurrent situations which are a cause for concern on a health and social level: the purity and new-found accessibility of cocaine in France; the specific problem relating to unaccompanied minors¹, who are made even more vulnerable by substance use behaviours; and the growing geographical areas with renewed heroin trafficking, now with a substance more appealing to users. The second part will touch on the continuation of phenomena already described in previous years: the spread of chemsex practices²; the extreme poverty facing homeless users; the newly blurred boundaries between diverse populations liable to facilitate the diffusion of psychotropic substance use; the ever-increasing violence in trafficking; the continuing changes in cannabis supply and, lastly, an update on new psychoactive substances. Other aspects will finally be touched on more briefly; these concern cannabis, fentanyl derivatives and the continuing growth in demand for paraphernalia for smoking crack.

■ Striking phenomena

Cocaine, a new impetus

An increasingly accessible substance

Beginning in the second half of the 1990s, the relentless spread of cocaine use towards diverse populations is continuing [1]: it accounted for 0.3% of users in 2000 among 18-64 year olds, compared to 1.1% in 2014 [2]. In 2016 and 2017, several signals appeared to indicate the

Latest data from observations by the eight TREND site network and the whole scheme



intensified development of cocaine use, despite an ever-increasing average price (see table p. 7). Most sites report the exceptionally diffuse presence of cocaine in all settings monitored by TREND (bars, clubs, festivals, free parties, housing estates or city centres), and half (Bordeaux, Lille, Metz, Rennes) have specifically observed an increase in sales points, "plans"³ and dealers. At the Brittany site, apparently showing the greatest impact along with the Aquitaine site, potential purchasers are now approached directly in the street, around or even inside bars. Supply is becoming very insistent at times and may even be combined with gifts (Lille) from dealers attempting to build up a client base. Regarding substance use, rather than a growing number of users, the increase in opportunities for substance use and its greater visibility are primarily highlighted by the sites: in settings where this used to be discreet, snorting has been shown to be more accepted, commonplace, and takes place in full view. Occasional users who kept cocaine only for celebrations may now use it on more common occasions, in the week, with pre-dinner drinks, for instance.

The switch from occasional use to more regular use is also evident among the most disadvantaged populations. Although this phenomenon is already known, particularly among patients receiving opioid substitution treatments (OST) [3], professionals report a more common swing

1. Or isolated foreign minors.

2. Substance use to enhance sexual activity.

3. Place or person allowing access to the substance.

from opioids to cocaine, facilitated by pre-existing polydrug use and injecting practices. In Bordeaux, Eastern European migrants, who are normally amphetamine (and Subutex[®]) users, appear to have opted for cocaine.

These qualitative observations are supported by the upturn, between 2015 and 2016, in the proportion of clients attending addiction treatment and prevention centres (CSAPA), who use cocaine (from 23.4% to 25.7%). This observation is based on at least eight years of continuous hindsight (27.0% in 2007) (RECAP/OFDT data, not published).

This situation primarily stems from the restructuring of supply channels which has taken place for several years. Further to the increase in the number of access channels, driven by the development of user-dealer micro-networks in the 2000s [4], then entry into housing estate trafficking networks initially specialising

in cannabis, cocaine is at the centre of the movement to "modernise" drug supply, which is bringing dealers to users rather than the opposite [5] in an increasingly competitive drug market. Hence, cocaine, ordered via mobile phone, is now delivered to the home address or to the party venue, notably with the emergence of cocaine call centres in Paris [5], or is picked up via housing estate drive-throughs, without purchasers needing to leave their cars. Clients often receive reminders and promotional texts. While these endeavours have primarily targeted credit-worthy users, dealers have also adapted to the lowest incomes and younger populations. They cater to these users by fractionating sales units, to half a gram, a quarter of a gram, or even per "shoot" (injected unit dose), or even the equivalent to €20 (or even €10) notes, which is much easier to generate than the amount necessary for sales per gram. These adjustments have considerably facilitated access to the substance.

Purer-grade substance sourced from the French Antilles-Guiana

The intensified supply directly from the French Antilles-Guiana overseas regions [6] is primarily responsible for the latest developments in the market. This transfer is based on the growing volume of postal deliveries from these territories, but also stems from the increase, particularly apparent in 2016, in drug mules carrying cocaine either in their luggage, or in their bodies (up to 1 kg). These individuals, often vulnerable and not always aware of the risks they are taking, are recruited in Surinam, Guiana and, to a lesser extent, in the French Antilles. Hence, smuggler arrests in Guiana increased five-fold (from 67 to 356) between 2011 and 2016. The law enforcement services thus estimate that ten people are subjected to control measures each day, i.e. 3,500 to 4,000 people per year. Based on one kilogram per smuggler on average⁴, the quantity of cocaine arriving in mainland France via Guiana could amount to nearly 4 tonnes, i.e. approximately 20% of the French market [7]. These mules supply a number of secondary networks mainly located in medium-sized cities, and contribute to the high availability of the substance in France, together with the increase in average purity. These supply channels, with fewer middlemen and opportunities to add cutting agents, have led to very pure cocaine imports and, moreover, intensified competing pressure to further increase the average potency of the substance in circulation (see text box opposite). Trafficking is still extremely profitable, since 1 kg of cocaine purchased for €3,500 or thereabouts in Guiana can be cut and sold (based on 50% purity) for €120,000 to €150,000 retail. Supply channels via the emerging darknet⁵ are also said to be opening up access to highly pure substances, but remain on the fringes of conventional trafficking.

An appreciable increase in potency

A particularly large number of cocaine sample collections were carried out as part of the SINTES monitoring scheme in 2016, evidencing unusually high potencies. Out of the 50 cocaine samples collected, for which a quantitative analysis was performed, nearly 6 out of 10 had a purity level of more than 70%, whereas this proportion had never been more than 4 out of 10 in previous years. Certain samples were shown to be practically pure [8]. In a context of constant growth, analyses of police seizures also evidence a new increase in the mean purity level of street cocaine (batches < 10 g), rising from 47% in 2015 to 51% in 2016 (STUPS[®], French National Forensic Science Institute).

Figure 1 - Changes in the average price and mean annual purity of cocaine based on seizures and SINTES collection campaigns



Source: INPS, SINTES, TREND

A reduction in the number of different cutting agents present in the samples is also observed, levamisole still being primarily responsible, detected in 74% of seizures (all seizures combined). In 2016, one in twenty collected samples contained no detectable psychoactive cutting agents. There also appears to have been a marked reduction in the number of non-psychoactive substances used to dilute the substance (such as sugar) since the start of the decade.

Changes in user views

In 2016, the observers also reported revived discussions among users, focusing on cocaine, and above all a change in their tone. While these touch on accessibility and the growing number of varieties (fishscale, HQ⁶, compact, oily, etc.), discussions mainly focus on the quality of the substance in circulation. Breaking with the extremely derogatory views on its low purity, a number of users, including the most socially disadvantaged, highlight the growing possibility of

4. The average dose carried in the body is 600 g, while larger doses are carried in luggage.

5. The darknet is a part of the deepweb reserved for illegal activities. The deepweb is a part of the Internet which is not indexed by conventional search engines.

6. For High Quality.

accessing a substance with higher than usual purity, on the standard cocaine market⁷, to such an extent that certain users would be inclined to reduce the doses. The circulation of these highly concentrated substances, confirmed by tests, is not, however, always favourably viewed, as other users describe the circulation of cocaine with unrecognisable effects, perceived as unusual, not procuring the expected sensations.

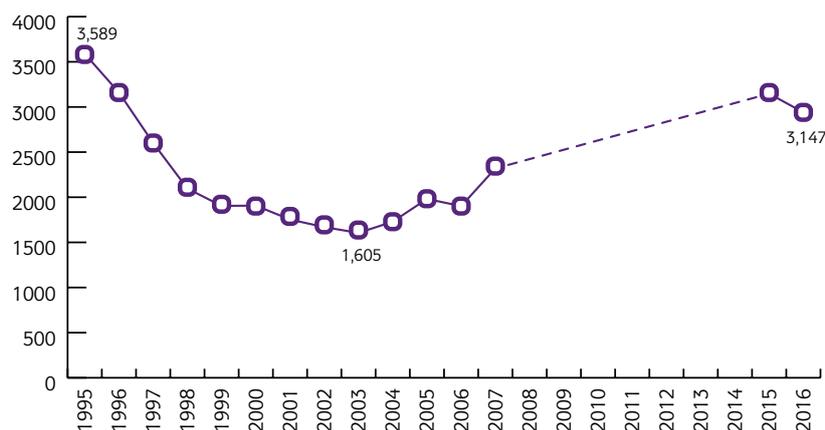
Health signals

This phenomenon is associated with a growing number of emergency medical care signals for cardiovascular, neurological and even psychiatric symptoms. Reports of cocaine intoxications received by the regional abuse and dependence monitoring centres (CEIP-A), having doubled between 2015 and 2016, led the ANSM (French National Agency for Medicines and Health Products Safety) to issue a statement to healthcare professionals, alerting them to the possibility of such cases [9]. These risks are particularly exacerbated by combination with alcohol, in almost all cases⁸. While certain sites report an increase (although still very gradual) in the number of people seeking treatment for cocaine use, awareness of the problematic nature of cocaine use is often slow in coming, and rarely suggested spontaneously, even during an acute incident.

Dynamics of heroin supply

The buoyancy of the heroin market in France is strongly determined by the proximity of the Netherlands and Belgium, two key countries in Western Europe where heroin arriving via the Balkan route is stored. The market is therefore considerably regionalized, with the substance being widely available in north/north-eastern France and to a lesser extent in the south. This year, trafficking appears to be changing in structure, with a number of signals showing that supply is gaining a foothold in the south-western and south-eastern France. Hence, the Toulouse site reports the emergence of a heroin sales point in the Mirail district, while several stakeholders in the health field mention "a substance which is resurfacing" [10]. Moreover, in Bordeaux, some professionals working in the harm reduction (HR) field fear a resurgence of the substance among disadvantaged users. This apparently relates to the decline in the diversion of Skenan[®] following pressure from the National Health Insurance Fund on prescribers, in a context in which Subutex[®] also tends to be less visible on the black market. The Marseille site reports greater visibility of heroin sales in certain housing estates in the northern districts. However, the most spectacular changes in terms of heroin supply are observed in the Lyon region with

Figure 2 - Changes in the number of heroin seizures less than 5g



Note: No data are available from 2009 to 2015.

Source: OCRTIS

the emergence of new stakeholders, Albanian-speaking networks, in the past three or four years. Hence, according to the Lyon site, nearly 90% of the heroin circulating in the region is distributed by these networks via street sales in a large number of cities such as Annemasse, Annecy, Villeurbanne, etc. Although the opioid market targeting the most disadvantaged users is still largely dominated by Subutex[®] and Skenan[®], heroin targets more socially integrated clients, with the substance being sold for around a hundred euros per 5-g dose [11].

These emerging findings of the TREND scheme are confirmed by the OCRTIS (Central office for the repression of drug-related offences), which reports "a revival of supply in the south and south-east (Aquitaine, Rhône-Alpes, Bouches-du-Rhône, Vaucluse, and also Corrèze)" [12]. These trends fall within the general context of a very significant rise in seizures (1,080 kg) compared with the low point in 2013 (570 kg). Furthermore, the number of seizures less than 5 g, an indicator of local trafficking, has reached very high levels with respect to the past twenty years (Figure 2), especially considering that these newly available data do not include seizures by the law enforcement services, unlike those prior to 2008⁹.

Monitoring heroin diffusion cycles is proving crucial insofar as the latter generally appear to be associated with the recruitment of new opioid users, but also a resurgence in overdoses.

Drug use among unaccompanied minors on the streets

The arrival in France of unaccompanied foreign minors has been reported in recent years; however, for the first time in 2016 and 2017 groups of sometimes very young disaffiliated, homeless

children (from 9 years of age) or adolescents have been settling in public spaces. All have the shared experience of a long journey and life on the street, having begun in their country of origin, usually in Morocco or Algeria. Since 2015, the Rennes site has described the ostensible and relatively menacing presence of these minors (or young adults claiming to be minors) in city centres, firmly rooted in criminality, and drug dealing in particular.

"The kids can be as young as 13. Those who get themselves arrested have nothing left to lose; when they go to prison, their embassy does not know them; they have scanned papers which are worthless. Half of them are stateless and have nothing; they were already homeless in their home country, already street children; they have nothing left to lose. Prison is perhaps the only place they can settle for a little (...) they are in survival mode. No concept of the future, simply in the present, in the moment" (HR professionals, Rennes).

In 2016, the Paris site reported the widely publicised occupation of certain zones in the north of the capital by very young populations, facing extremely precarious living conditions. Exposed to the violence in the streets (prostitution, sexual assault, exploitation, etc.), they themselves can be threatening and suffer from extreme deterioration in health in every respect. According to

7. As opposed to a much narrower market for cocaine which is normally of higher purity, but only accessible to wealthier users in the right social circles.

8. This combination leads to the formation of cocaethylene, with cardiovascular, neuronal and hepatic toxicity.

9. As the law enforcement services accounted for 34% of overall heroin seizures in 2016, the probable level of seizures less than 5g can be assessed as more than 4,000 by extrapolation. This is the highest total since 1995, the year which, prior to the introduction of OST, marked a peak in the heroin epidemic in the 1980s.

workers attempting to build contact with these minors, these young people suffer from a strong sense of rejection and psychiatric disorders, particularly depression. They usually tend to only measure human relations in terms of monetary exchanges and avoid any kind of support by organisations, only seeking a response to their primary needs. Furthermore, they remain fairly mobile, travelling within and between cities. Some stay in groups, while others, in contrast, are very isolated.

Psychotropic substance use in groups appears to be highly visible, and abusive behaviour among the youngest individuals is more apparent. This notably involves the use of neoprene glue or equivalent solvents, inhaled "with their head in the bag", all day long, until their supplies dry up. Alcohol and cannabis are also extremely visible. Older individuals often turn to medicinal benzodiazepines in addition¹⁰. The effects of substance use (disorientation, aggressiveness, etc.) limit communication which is already very difficult. Substances are financed by criminal acts (muggings, assault, drug dealing, etc.) and, probably in Paris at least, by prostitution.

■ Ongoing developments

Chemsex practices still on the increase

As a continuation of the trend described in recent years [5, 13], all sites (aside from Lille and Metz) describe the even greater visibility of men who have sex with men (MSM) experiencing difficulties following sex parties accompanied by polydrug use involving stimulant substances, which remove inhibitions (cocaine, MDMA/ecstasy, GHB, cathinones) or seeking paraphernalia or guidance on injecting practices. Despite being a taboo subject and strongly rejected in general, slamming¹¹ has gained notoriety and seems to be becoming more commonplace in certain circles. CAARUD professionals report an increase in attendance, often outside consulting times, by individuals who are not among the usual clients, and who seek very large quantities of syringes. The sites also report a resurgence in MSM attending infectious diseases departments (recurrent endocarditis, reinfection with HCV, requests for tritherapy further to accidental exposure to blood), for acute somatic and/or psychiatric incidents or approaching community health workers.

Observers in Lyon and Paris describe the development of private parties combining substance use and sexual relations, but also chemsex practices in establishments. In Rennes, these practices appear to be reserved for private parties with

a limited number of participants, while sex parties, on a larger scale, are held over weekends organised outside Brittany, in rented apartments.

In all recreational settings frequented by homosexuals, substance use is described as being very present, although somewhat discreet. Only after party venues¹² and sex clubs which attract a specifically gay audience harbour more specific substance use (cathinones and GHB/GBL) in addition to that usually observed in a general club or gay friendly setting (cocaine, ecstasy/MDMA, poppers). The Lyon observers point out that syringes, indicating slamming practices, are sometimes found in establishments authorising sexual activities on site and exclusively hosting homosexuals.

Socially isolated users, increasingly difficult to reach

The extreme vulnerability of user populations in the urban setting is repeatedly observed, year after year, based on ethnographic observations and accounts from teams working among these populations¹³. The proportion of users attending CAARUDs, particularly young people showing signs of extreme social vulnerability, remains high [14]. Furthermore, situations of extreme vulnerability are reported by ethnographic observers, concerning user populations not frequenting these organisations. In addition to the limited resources and difficulties in terms of access to employment and social rights among these users, an alarming deterioration in health is reported over the whole country, including serious diseases as well as somatic and psychiatric disorders. In 2016, Lyon-based CAARUDs observed a large number of user deaths resulting from their living conditions and delayed treatment of disorders (septicaemia, generalised cancer, staphylococci infections), with associated pain masked by substance use for pain relief. Furthermore, the emergency housing crisis has, as in the previous year, led to "hierarchical poverty", where homeless drug users, often accompanied by dogs, are not a priority for being allocated housing [10].

The Rennes observers also report abandonment by certain homeless users who no longer visit support facilities. Although not a new phenomenon, this aspect appears to be affecting more individuals. More generally, it is difficult to refer extremely disadvantaged users to HR when their primary needs are not being met. Furthermore, as some of these users become dispersed in small groups, to peripheral urban areas or to the countryside, they become more difficult to reach by HR teams.

Increasingly diverse profiles and substance use among disadvantaged young people

As regards young people in vulnerable situations, the observers report growing similarities between the traveller population, using substances symbolising the alternative recreational scene, who temporarily experiment with the urban nomadic lifestyle – particularly in the summer – and more permanently disadvantaged young people in and on the outskirts of cities. The Rennes and Bordeaux sites, in particular, point out that a fraction of seasonal backpackers, apparently more numerous than previously (including some very young people, in their 20s) seems to be shifting, persistently embracing the latter lifestyle, organised in squats or isolated on the streets.

"Young travellers are converging on Bordeaux... very young, under 25 year-olds, who usually arrive as seasonal workers but have stayed. They are still there. They are living in squats; this is an extremely disadvantaged population, many have no or limited social rights, and, in any case, no income [...] This is truly a new phenomenon; there were very few of them in the past, but now there really is a large population" [Bordeaux].

At the same time, several sites report the convergence, in these disadvantaged areas, of a new groups which adhere to anti-authoritarian movements, set up in squats and who take few or no drugs aside from alcohol and cannabis, and homeless polydrug users who are more known to the CAARUDs. The Marseille and Lyon sites notably report new deep-rooted forms of solidarity among some of these disadvantaged young people, with those more able to manage their insecurity sharing survival strategies with the most vulnerable. Substance use appears to be recreational and social in nature among young people who are collectively managing to tolerate their living conditions, transforming their situation into an alternative lifestyle resembling a community approach. Aside from these social networks, substance use aims to help them face up to the difficulties of survival from day to day. However, as diverse profiles of disadvantaged young people are brought together, this is associated with the potentially increased transfer of habits in terms of use.

10. Rivotril, which is no longer prescribed in France, has been cited, although could not be verified.

11. Refers to intravenous substance use in the context of sexual relations.

12. Evening events or parties taking place after the initial evening event.

13. Qualitative ASA-CAARUD data (unpublished).

Trafficking: more commonplace violence

Violence surrounding drug trafficking reported by a number of sites in 2015 became more marked in 2016-2017. Changes in supply, observed in France in recent years, appear to be an aggravating factor. Hence, violence no longer seems to be confined to highly organised trafficking in "housing estates". The growth in secondary networks, established in medium-sized cities, or in outlying suburbs or rural areas, appears to result in greater competition, which leads to violence. This is confirmed by the increase in the number of narcotics cases where drug seizures are accompanied by the confiscation of firearms (Bordeaux, Marseille, Rennes), which aim to protect the owners from attacks (theft in particular) by other small gangs. The rise in the number of indoor and outdoor herbal cannabis production units, across France, run by fairly disorganised networks, is one of the factors behind this trend. Hence, break-ins characterised by the theft of equipment, plants and herbal cannabis are prompting growers to arm themselves, either for self-defence, or for raids aiming to recover stolen equipment or substances, or to enact revenge.

These findings are supported by the legal authorities.

"We are facing "the rule of crooks", the rule of drug delinquents [...], criminality caused by narcotics is not insignificant, and is growing in severity and impact, all that is theft, burglaries, theft with violence inflicted on a population perceived as vulnerable, i.e. the elderly or minors, and all that is criminal, gangland killings, kidnapping, imprisonment, violence with acts of torture, is a consequence" (law enforcement focus group, 2016, Rennes).

At the same time, in the more familiar field of large-scale trafficking in housing estates, violence was seen to increase in 2016 (Lille, Marseille, Toulouse). In the Bouches-du-Rhône department, gangland killings related to narcotic trafficking reached their highest level in thirty years¹⁴. This resurgence is apparently explained by wars aiming to take over properties left vacant after dismantling networks. While 27 deaths were reported in Marseille in 2016, homicidal violence now affects other cities, such as Toulouse where, between 2016 and 2017, three people died and another three were seriously wounded in the Mirail district in gangland killings. This is also the case in the south of Lille where the strong presence of heroin trafficking has led to increased rivalry between trafficking gangs, particularly for controlling sales points directly located in the streets, in the context of the circulation of firearms.

Vulnerability is also reaching trafficking networks in housing estate

Connected to the impoverishment of certain districts in major cities, there are numerous junior work "opportunities" at sales points, for the least qualified positions (lookouts, touts, etc.). Labour supply, mainly involving the very young, and even minors, is such that several TREND sites describe a genuine flexible employment market, recruiting temporary workers by the day, which is becoming established in the most active trafficking zones. Hence, the Rennes site describes the highest visibility of the "Kleenex" dealer phenomenon, referring to individuals recruited by the day or by the week. This phenomenon also exists in Marseille, with morning recruitment sessions: "The candidates for the day line up, the network leader says, "I'll take you, but not you"" (Marseille). Turnover in the lowest levels of the networks does not appear to present a problem, indeed the reverse may even be true, since these "foot soldiers", often from outside the districts, barely have time to truly acquaint themselves with the operations, which reduces the risk of denunciation in the event of arrests by the police. The Toulouse site also reports this phenomenon, highlighting the scale of the recruitment of individuals without papers or having arrived very recently.

Shift in the MDMA market

In 2016, and totally in keeping with the previous two years, the growing presence of ecstasy tablets is continuing throughout the recreational settings (clubs, discotheques, free parties). This form is particularly appealing among young people, attracted by larger, colourful tablets, with higher drug substance concentrations, decorated with logos – over a hundred have been recorded. These may refer to sports (Barcelona FC), movies (Transformers), the Internet (Twitter), luxury brands (Rolex, Porsche, Armani), or even politics (Anonymous), etc. Now largely back "on trend", the tablet form has prompted the emergence of collectors and has led to renewed interest in the substance among those in their forties, who experienced the beginning of the techno wave at the end of the 1990s. Furthermore, despite the very high average potencies, the tablet offers a reassuring dimension to users, in contrast to MDMA parachutes¹⁵, as it can be broken to divide the doses. In 2016, the serious health problems reported by the TREND scheme seem rare given the scale of the phenomenon. In 2015, however, the DRAMES scheme (drug and substance abuse-related deaths) operated by the CEIP-A reported 27 deaths¹⁶ involving MDMA (in crystal or ecstasy form). While MDMA crystals are still a sought-after substance, certain sites appear to indicate a clear shift in the market towards the tablet form.

An ever-growing herbal cannabis market

The herbal cannabis market is continuously gaining ground. At certain sites (Bordeaux, Lille, Metz, Toulouse), the supply is tending to replace resin. The two main sources of herbal cannabis consumed in France are imports, from the Netherlands, Belgium and Spain (major European producers) and domestic production, reported for most sites. Indoor and outdoor cultivation, which is ever expanding, ranges from industrial plantations, as seen in the north of the country (from 1,000 to 4,000 plants), run by organised criminal networks ("housing estates", Asian networks, etc.)¹⁷, to more modest plantations (100-200 plants),

mainly run by a somewhat younger generation of growers, very familiar with the techniques and increasingly "professional" (Rennes). This situation is sustaining major supplies, which are tending to become more organised. The Toulouse site, for example, mentions the creation of cooperatives of growers, similar to "cannabis social clubs", based

14. A period in which, following the death of Tony Zampa in 1984, the Marseille circles (Corsicans, Sicilians) were fighting for hegemony.

15. Method of ingestion which involves swallowing the substance, powder or crystal, coated in a cigarette paper.

16. Out of 343 deaths reported to the scheme in 2015, mainly related to opioid substances.

17. Like in Hem (Nord department), where 4,000 plants were seized from a disused warehouse. The network received guidance from a Dutch national [12].

on those in neighbouring Catalonia, but which are still illegal, and sell their produce to sellers. Sales may also be direct, from the grower to users, as observed by the Metz site in the techno alternative recreational scene, as well as the Marseille site. A micro-business selling herbal cannabis, created by young home delivery employees, was dismantled in Paris.

These various findings are supported by the OCRTIS, which, in 2016, mentions the high availability of herbal cannabis in more than 9 out of ten departments in mainland France [12]. Moreover, the quantities seized by the police forces and customs have reached an unprecedented level of 18 tonnes, while plant seizures (126,400) are still at historically high levels. This general situation could accelerate the changes in resin supply to a niche market, offering increasingly diverse substances with higher THC content, as suggested by the average level observed by the National Forensic Science Institute (INPS) which, in 2016, reached a new record of 23%, versus 6.5% in 2000 and 11.1% in 2010 [15]. The sites indicate a kind of "top-down standardisation" of the cannabis quality expected by users (Lille) [16, 17].

Hence, housing estate supply is tending to adapt by diversifying the substances offered and increasingly including herbal cannabis in the available substances. The Marseille site, for instance, reports the supply of northern districts originating from plantations located inland.

New psychoactive substances (NPS): gaining a very gradual foothold

Recent findings, based on monitoring online forums, confirm the relative persistence of the range of synthetic compounds in circulation, particularly those with stimulant and psychedelic effects. The 2016-2017 period reflects an increase in the audience on user forums, indicating growing curiosity, although this cannot be interpreted as a rise in substance use. This interest initially turns to leading NPS, which still have a foothold in the drug market, such as 3-MMC, a cathinone for which the average number of daily views doubled between April and July 2017. However, this increase also concerns long-standing compounds, not necessarily perceived as NPS by users, such as DOC, 2C-B or DMT, to which the NPS phenomenon has given a new boost, and substances with similar names (DOB, 5-MEO-DALT), which are "piggybacking" this trend. These trends are confirmed by the TREND sites which primarily mention the latter compounds.

Voluntary NPS use still appears to be relatively confined to circles with

limited visibility among conventional observation schemes (e-psychonauts) and chemsex enthusiasts [5, 18]. Nevertheless, the TREND sites describe lesser reservations among populations who have, until now, been reluctant to use these substances or unaware of how to access them. Users have an ambiguous relationship with these substances, based on curiosity but also fear stemming from the widespread information on the health complications they can cause, psychiatric disorders in particular.

The Marseille, Bordeaux, and Lyon sites report experimentation with synthetic cannabinoid purchased from online sales sites by high school students between the ages of 15 and 17 years, but also by adults who are generally heavy cannabis users, followed up by a CSAPA. Harmful consequences, sometimes resulting in hospital admission, reinforce the hazardous image of these substances among these populations.

"We also have users who smoke synthetic cannabis. They purchase Spice on the Internet. Just occasionally, rarely regularly; just to get high, for recreational use. They don't recover easily in general. They suffer from psychotic effects, paranoia, hallucinations, over a longer period. The profile corresponds to 35-year old patients, who are isolated, however not on the fringes of society. Substance use is solitary, in a private setting" (CSAPA nurse, Marseille 2016).

Particular interest, on forums, in the inhalation of synthetic cannabinoids presented as "e-liquids"¹⁸, which had already been reported, has intensified since August 2017. Now, this no longer only concerns 5F-AKB-48, sold under the brand name Buddha Blue, but, as a general rule, all conversations relating to this form and synthetic cannabinoids.

As regards disadvantaged populations in an urban setting, some of whom attend CAARUDs, until now, only the Bordeaux site observed noteworthy NPS use. The Rennes, Marseille and Paris sites are now seeing the emergence of users who appear to be taking the plunge, or show a better understanding of these substances. Lifetime use of NPS among these populations, recently identified at these sites or, indeed, more regular use (particularly as injections) among young travellers observed in Bordeaux is fortuitous, as use is dictated by the presence or absence of these compounds on the market. Furthermore, the multiplicity of substances, their names which are complicated to remember and Internet access remain obstacles preventing these populations from actively searching for these substances (Lille, Lyon). In contrast, for NPS users occasion-

ally encountered in urban alternative recreational settings (Lyon, Bordeaux, Rennes), online purchase is perceived as a guarantee of substance quality, which may be a motivation for use.

All of these signals point to the possible diversification of NPS user profiles which should be monitored. However, except in circles of seasoned users, which are still very confined, NPS, when known, still have limited appeal, namely due to their effects which are considered to be too potent and give rise to unpleasant or anxious experiences.

■ A few points to be noted

The growing visibility of cannabis-related health problems

In 2016, almost all sites report growing health problems resulting from regular cannabis use via meetings with professionals working in CSAPAs and Youth Addiction Outpatient Clinics (CJC). These affect groups which tend to be well socially integrated (high school students, higher education students, salaried workers). Two types of cases are mentioned:

- dependent persons, who wish to stop their substance use or who started withdrawal by themselves, but find themselves unable to see it through to the end due to various problems (sleep disorders in particular) (Lille, Marseille);
- regular users facing various health problems. This is notably the case for daily users accumulating many years of substance use, who develop "cannabinoid" syndrome¹⁹, characterised by violent abdominal pain accompanied by nausea and vomiting, or for those who are no longer able to manage their substance use, despite memory and concentration disorders or amotivational syndrome (Bordeaux, Marseille, Rennes, Toulouse).

Cannabis vaping gaining ground

The trend, identified two years ago, in the development of artisan production, using herbal cannabis, wax and oil, is continuing, but still appears relatively marginal. However, a number of sites (Bordeaux, Lille, Lyon, Marseille) indicate the higher visibility of cannabis use via vaping²⁰ or e-cigarettes.

18. Liquids for use in electronic cigarettes.

19. This syndrome is defined by the symptoms described above, while its pathophysiology remains unclear.

20. Vaping involves heating cannabis until it reaches the boiling point of the components to be inhaled (cannabinoids transformed to vapour form) without reaching combustion temperature. The absence of combustion avoids the formation of numerous carcinogenic agents produced during combustion.

Prices in euros of the main substances as observed by the TREND scheme (price for 1 gramme, unless stated otherwise)

	2000	2010	2011	2012	2013	2014	2015	2016	General trend
Heroin	59	42	40	43.4	46.5	42.5	40.4	40	↘ since 2013
Cocaine	84	67	68	70.6	76.6	80	84	85	↗ since 2010
Ecstasy (tablets)	15	7.7	7	10	8.2	9.7	10	10	↗ since 2013
MDMA powder	NA	60	63	56.3	54.7	54.7	54	52.5	↘ since 2010
Cannabis resin	NA	5	5.4	6.9	6.6	7.3	7.2	7	→ since 2014
Herbal cannabis	NA	8	8	9.6	10.4	10.4	10.6	10	↗ since 2010
Amphetamines	15	16	15.5	14.3	13.8	15.5	13	15	→ over the long term
LSD (blotter)	8.5	10	10	10	9.8	10.3	10	10	→ since 2010
Morphine sulphate (tablets)	7	8.3	8.5	8.3	8.5	10	10	10	→ since 2014
Buprenorphine (tablets)	6	5	4.5	5	4	4	4	4	→ since 2013

Source: Price Barometer / TREND-OFDT

NA: data not available

Fentanyl and derivatives, limited impact in France

Few reports in France involve fentanyl, an opioid analgesic medication, or its derivatives purchased over the Internet, which as a whole form "fentanyloids". From January 2012 to May 2017, 16 cases of fentanyloid poisoning, including two fatal overdoses (ocfentanyl) were reported by the CEIP-A network. Only 8 of these cases involved fentanyl [19]. While occasional signals indicating diversion by drug users, particularly in the form of patches, are reported by the TREND scheme, the presence of other fentanyloids is not particularly observed and only 5 samples from this substance family (4 for furanylfentanyl and 1 for metafluoro-fentanyl) have been collected as part of the SINTES monitoring scheme in 2016. Lastly, despite the slight increase in synthetic opioid seizures in 2016 (including fentanyloids, but also other molecules) from individuals, these only account for 1% of total NPS seizures by the customs services and police forces.

A greater impact is observed in other European countries, as highlighted in the recent report by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) [20], even though the European situation still bears very little resemblance to North America in terms of the level of use and the consequences. The low use of fentanyl in the context of drug use stems from both the extremely cautious prescription of these pain medications by practitioners, and

the fairly broad access of drug users to OST. Furthermore, their potency and their implication in the many cases of poisoning outside our borders have given fentanyloids a poor reputation in France.

Higher demand for crack smoking kits

A large proportion of French CAARUDs report a major increase in demand for crack smoking kits or pipes, to which they often cannot respond. This phenomenon started with the supply of these materials in the 2000s, notably attracting population not as yet known to these support facilities, who were not socially isolated and often only interested in procuring equipment for smoking. These findings are consistent with the continuous growth in freebase cocaine use²¹, particularly visible among CAARUD users since this concerned 32% of the latter in 2015 *vs.* 26% in 2012. However, the use of base kits is reported for other substances, such as cannabis, and may not only be related to crack/freebase use. The situation in the Ile-de-France region will be described in detail in a specific publication.

Conclusion

Despite the significant changes in drug use and drug markets since the beginning of the 2000s, the already established phenomena seem particularly worrying. In particular, contrary to expectations at the beginning of the decade, NPS have

not yet revolutionised the drugs sector in mainland France. The long-term use of some of these substances has, however, become established, notably with the radical increase in high-risk behaviours related to chemsex practices.

The 2016-2017 period is notably characterised by "classical" substance use and problems driven by contextual factors, which are always difficult to control, whether concerning the profitability of trafficking or the socio-economic crisis. Hence, the growing proportion of the herbal cannabis market; intensified cocaine diffusion; the changes in the heroin market; or the renewed popularity of ecstasy tablets among younger populations, as well as the precarious living conditions facing the homeless display a certain degree of continuity compared to previous years. The permanent nature of certain findings should not, however, be construed as lessening the acute nature of the resulting problems, both in terms of the populations and health/social consequences.

21. Crack or freebase. Crack originates from the cocaine base market, whereas freebase is produced on a small scale by users themselves or their friend/family circles.

The building blocks of the TREND scheme

To fulfil its observation mission, TREND relies first and foremost on a network of eight local coordinating sites (Bordeaux, Lille, Marseille, Metz, Paris, Rennes, Toulouse and Lyon since 2016) with a common information collection and analysis strategy. The data collection tools used are mainly qualitative: continuous ethnographic observations conducted in urban areas and on the party scene, qualitative questionnaires are administered to structures or associations in contact with drug users (CAARUDs), focus groups (“health”, “law enforcement”) that aim to rapidly establish overviews of the situation with professionals in the field.

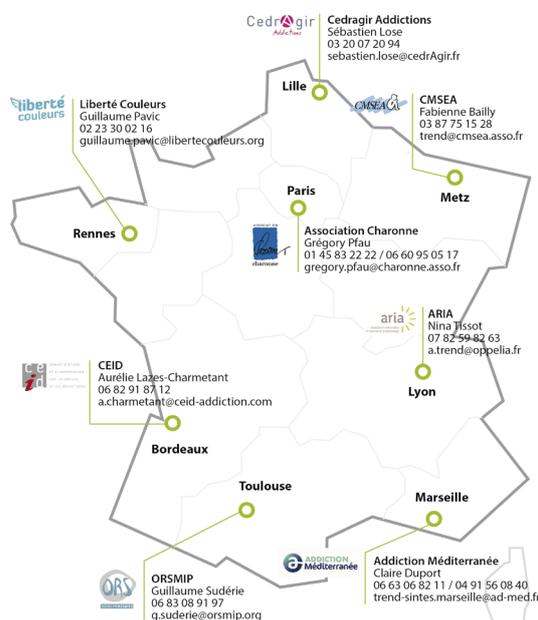
Against this background, quantitative and qualitative thematic investigations are also conducted to acquire more information about a particular subject and retail selling prices of the main illegal drugs are regularly collected.

TREND also relies on:

- SINTES (National Detection System of Drugs and Toxic Substances), an observation system geared towards detecting and analysing the toxicological composition of illegal substances;
- I-TREND (Internet Tools for Research in Europe on new Drugs), monitoring scheme targeting virtual spaces and NPS. This scheme particularly includes monitoring of user forums and analysis of online supply targeting the French market;
- recurrent quantitative surveys, such as the ENa-CAARUD survey conducted since 2006 among drug users seen in French low-threshold structures certified as CAARUDs;
- the qualitative elements mentioned by CAARUDs in their activity reports;
- the use of the results of information systems supervised by the CEIP-A network and the ANSM, the OCRITIS and the INPS and finally, other OFDT surveys.

The 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 encountered in these settings are problem users of illegal drugs living in highly precarious conditions.

Techno party settings refer to places where events are organised around this music. They encompass the so-called “alternative” scene (free parties, “teknivals”, alternative party areas within more general festivals) as well as commercial or more conventional locations (clubs, discotheques, private parties). This setting now tends to cover the party scene in general, in line with the spread/dilution of the techno movement into the more general population.



bibliography

1. POUSET M. (Dir.), *Cocaine, données essentielles*, Saint-Denis, OFDT, 2012, 232 p.
2. BECK F., RICHARD J.-B., GUIGNARD R., LE NÉZET O. and SPILKA S., *Levels of drugs use in France in 2014*, Tendances, OFDT, n° 99, 2015, 8 p.
3. BELLO P.-Y., TOUFIK A. and GANDILHON M., *Tendances récentes - Rapport TREND 2000*, Paris, OFDT, 2001, 167 p.
4. GANDILHON M., *Cocaine small-scale dealing in France*, Tendances, OFDT, n° 53, 2007, 4 p.
5. CADET-TAÏROU A., GANDILHON M., MARTINEZ M., NÉFAU T. and MILHET M., *Psychoactive substances, users and markets: recent trends (2015-2016)*, Tendances, OFDT, n° 115, 2016, 8 p.
6. GANDILHON M. and WEINBERGER D., *French Antilles and Guiana: on the international cocaine trafficking routes*, Drugs, International Challenges, OFDT, n° 9, 2016, 8 p.
7. OCRITIS, « Le trafic de cocaïne en la Guyane et la métropole française », Note DEASRI, n° 33, 2017.
8. NÉFAU T., *Le Point SINTES n° 3*, Saint-Denis, OFDT, 2017, 12 p.
9. ANSM, Augmentation du nombre et de la sévérité des intoxications liées à la consommation de cocaïne - Point d'Information (11/08/2017). <http://ansm.sante.fr/S-informer/Points-d-information-Points-s-d-information/Augmentation-du-nombre-et-de-la-severite-des-intoxications-liees-a-la-consommation-de-cocaine-Point-d-Information> [accessed 29/11/2017].
10. SUDÉRIE G., *Phénomènes émergents liés aux drogues. Tendances récentes sur le site de Toulouse en 2016*, Toulouse, ORSMIP, 2017.
11. TISSOT N., *Phénomènes émergents liés aux drogues en 2016. Tendances récentes sur le site de Lyon, Lyon, Association ARIA - CAARUD RuptureS*, 2017, 69 p.
12. OCRITIS, *Les prix des stupéfiants en France. État des lieux 2016*, DCPJ / SDLCOF / OCRITIS, 2017, 15 p.
13. MILHET M. and NÉFAU T., *Chemsex, slam. Renouveau des usages de drogues en contextes sexuels parmi les HSH*, Saint-Denis, OFDT, Théma TREND, 2017, 32 p.
14. LERMIENIER-JEANNET A., CADET-TAÏROU A. and GAUTIER S., *CAARUD client profiles and practices in 2015*, Tendances, OFDT, n° 120, 2017, 6 p.
15. INPS (INSTITUT NATIONAL DE POLICE SCIENTIFIQUE), *Application STUPS, Bilan 2016 - Synthèse*, 2017.
16. LOSE S. and SPIRITEK, *Phénomènes émergents liés aux drogues. Tendances récentes sur le site de Lille en 2016*, Lille, Cèdre bleu, 2017.
17. PAVIC G., *Phénomènes émergents liés aux drogues. Tendances récentes sur le site de Rennes en 2016*, Rennes, Liberté Couleurs ; OFDT, 2017, 63 p.
18. CADET-TAÏROU A., *New psychoactive substances: user profiles and practices*, Tendances, OFDT, n° 108, 2016, 8 p.
19. CEIP-A OF PARIS, « Nouveaux produits de synthèse : zoom sur les fentanylloïdes », *Addictovigilance - Bulletin de l'Association des centres d'addictovigilance*, n° 5, 2017, 2 p.
20. EMCDDA, *European Drug Report 2017: Trends and developments*, Luxembourg, Publications Office of the European Union, 2017, 93 p.

Acknowledgements

To Aurélie Lazès-Charmetant, Jean-Michel Delille (Bordeaux) ; Sébastien Lose, Spiritek (Lille) ; Étienne Zurbach, Claire Dupont, Emmanuelle Hoareau (Marseille), Fabienne Bailly, Aurélie de Mame, Lionel Diény (Metz) ; Grégory Pfau, Catherine Pequart (Paris), Guillaume Pavic, Yannick Poulain (Rennes), Guillaume Sudérie, Amandine Albisson (Toulouse) and to Nina Tissot and Florent Martel (Lyon).

To Aurélie Lermenier-Jeannet and Christophe Palle for their review work.

The Metz and Paris sites received financial assistance from ARS Lorraine and Île-de-France for 2017. The Lyon site is funded by ARS Rhône-Alpes.

tendances

Director of publication

Julien Morel d'Arleux

Editorial Committee

Henri Bergeron, Emmanuelle Godeau, Bruno Falissard, Aurélie Mayet, Isabelle Varescon, Frank Zobel

Editor in chief

Julie-Émilie Adès

Graphic designer / Frédérique Million

Documentation / Isabelle Michot

French Monitoring Centre for Drugs and Drug Addiction

3, avenue du Stade-de-France
93218 Saint-Denis La Plaine cedex
Tel. : (+ 33) 1 41 62 77 16
Fax : (+ 33) 1 41 62 77 00
e-mail : ofdt@ofdt.fr



www.ofdt.fr