

Press Briefing



12 July 2007: No embargo

Conservatives risk adopting flawed drug policy

Although the Social Justice Policy Group have spent much time and effort gathering opinions, anecdotes and case studies for their recent weighty report 'Breakthrough Britain', they have not taken sufficient account of the scientific evidence of 'what works' to tackle the UK's drug problems.

This has led to some distorted analysis using selected and partial evidence, particularly in two key areas: methadone prescribing and drug treatment.

Despite a cursory acknowledgement that methadone prescribing can have a positive role, overall the report vilifies such programmes (dubbed 'methadone madness') and concludes they have "*contributed to the growth of the problem rather than lessened it*". In doing so they ignore the robust body of evidence which demonstrates that harm reduction and treatment programmes including methadone prescribing have over many years contributed significantly to reducing deaths and other drug-related harms in the UK.(1)

In looking at drug treatment programmes the Group notes that one size does not fit all, but again contradicts itself by putting far too much reliance on abstinence, claiming: "*abstinence is the most effective method of treatment and the only appropriate one for many addicts*". This sidelines some of the best available research. For example, NICE has comprehensively endorsed a range of treatment programmes including substitution drugs such as methadone and buprenorphine as well as residential rehabilitation.(2)

Roger Howard, chief executive, said:

"The UK Drug Policy Commission urges the Conservative Party to look carefully again at the scientific evidence before accepting the proposals outlined in the Social Justice Policy Group's report. The Addiction's Working Group which produced the proposals has been selective and partial in its analysis and interpretation of significant research findings across many areas of its work. Consequently, the Conservatives risk adopting flawed drug policy advice."

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Notes to Editors

(1) As noted in the independent report we commissioned: *An Analysis of UK Drug Policy* written by Professor Peter Reuter and Alex Stevens, April 2007. The full report and executive summary can be downloaded at the UKDPC website: www.ukdpc.org.uk.

See also NICE technology appraisal (2007) *Methadone and buprenorphine for the management of opioid dependence*.

(2) In draft guidance published by NICE and currently being consulted on, they state: "Opiate misuse is often characterised as a long term, chronic relapsing condition with periods of remission and relapse, so although abstinence may be one of a range of long term goals of treatment, it is not always achieved." [*National Institute for Health and Clinical Excellence – Drug Misuse: Psychosocial management of drug misuse: Draft guidelines January 2007*].

NICE has also undertaken rigorous studies of the available evidence, which endorse a variety of treatment approaches.

About the UKDPC

The UK Drug Policy Commission (UKDPC) was launched in April 2007 and its objectives are to:

- Provide independent and objective analysis of drug policy in the UK
- Improve political, media and public understanding of the implications of the evidence base for drug policy; and
- Improve political, media and public understandings of the options for drug policy.

The UKDPC is independent of government and is grateful to the Esmee Fairbairn Foundation for its support.

The UKDPC Commissioners are:

Dame Ruth Runciman (Chair) Chair of the Central & NW London Mental Health NHS Trust & previously Chair of the Independent Inquiry into the Misuse of Drugs Act 1971

Professor Haleh Afshar OBE Professor of Politics & Women's Studies, University of York

Professor Colin Blakemore Chief Executive of the Medical Research Council

David Blakey CBE QPM formerly HM Inspector of Constabulary

Annette Dale-Perera Director of Quality at the National Treatment Agency for Substance Misuse

Daniel Finkelstein Comment Editor at "The Times"

Baroness Finlay of Llandaff is a Professor of Palliative Medicine at Cardiff University and President of the Royal Society of Medicine.

Jeremy Hardie CBE Trustee of Esmee Fairbairn Foundation

Professor Lord Kamlesh Patel OBE Head of the Centre for Ethnicity & Health at University of Central Lancashire & Chairman of the Mental Health Act Commission

Adam Sampson Chief Executive of Shelter

Professor John Strang Director of the National Addiction Centre (Institute of Psychiatry, Kings College London)

Observer Dawn Austwick OBE (Director, Esmee Fairbairn Foundation).

Chief Executive Roger Howard, former Chief Executive of Crime Concern and Drugscope.