

SACENDU

South African Community Epidemiology Network on Drug Use

UPDATE
NOVEMBER 2016
 ALCOHOL AND OTHER DRUG USE TRENDS
 JANUARY - JUNE 2016

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PHASE 40

BACKGROUND

The SACENDU Project is an alcohol and other drug (AOD) sentinel surveillance system operational in 9 provinces in South Africa. The system, operational since 1996, monitors trends in AOD use and associated consequences on a six-monthly basis from specialist AOD treatment programmes. The 1st half of 2016 (i.e. 2016a) saw 10540 patients across 82 centres/programmes. This review period saw an increase in the number

of patients admitted for treatment (from 9679 in 2015b to 10540 in 2016a).

LATEST KEY FINDINGS BY SUBSTANCE OF ABUSE (UNLESS STATED OTHERWISE THE FINDINGS RELATE TO THE 1ST HALF OF 2016)

Alcohol is the dominant substance of abuse in the EC and the CR; while Cannabis is the most common substance of abuse in GT, KZN and the NR. Between 17% (NR) and 50% (CR) of patients

in treatment reported alcohol as a primary drug of abuse. A slight increase in the CR region from 42% to 50% has been noticed compared to the previous period (Table 1). A significant decrease in KZN from 37% to 29% was also noticed during this reporting period. Treatment admissions for alcohol-related problems in persons younger than 20 years are generally less common. Between 1% (EC) and 11% (WC and NR) of patients under the age of 20 reported alcohol as their primary substance of abuse.

Table 1: Primary drug of abuse (%) for all patients and patients under 20 years – selected drugs (2016a)

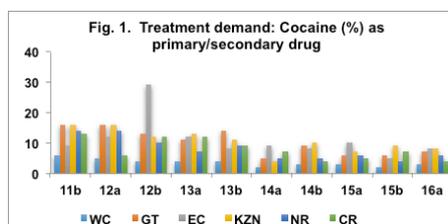
| Source | Age | WC | KZN | EC | GT | NR ¹ | CR ² |
|------------------------|-----|------|------|-----|------|-----------------|-----------------|
| # centres | | 39 | 11 | 8 | 14 | 5 | 5 |
| # patients | | 2977 | 1247 | 638 | 3989 | 1026 | 663 |
| Alcohol | All | 22 | 29 | 30 | 18 | 17 | 50 |
| | <20 | 11 | 10 | 1 | 2 | 11 | 6 |
| Cannabis | All | 28 | 39 | 22 | 38 | 39 | 28 |
| | <20 | 71 | 70 | 58 | 77 | 58 | 69 |
| Methaqualone (Mandrax) | All | 5 | 3 | 6 | 4 | 4 | 6 |
| | <20 | 3 | 2 | 5 | 4 | 3 | 7 |
| Cocaine | All | 1 | 5 | 6 | 5 | 2 | 2 |
| | <20 | <1 | 1 | 1 | 2 | 1 | 1 |
| Heroin | All | 11 | 15 | 2 | 12 | 26 | 2 |
| | <20 | 2 | - | - | 5 | 19 | - |
| Methamphetamine | All | 32 | 1 | 23 | 5 | 1 | 4 |
| | <20 | 12 | - | 33 | 2 | - | 1 |

1-Northern Region (MP & LP) 2-Central Region (FS, NW, NC)

Across sites between 36% (EC) and 52% (KZN) of patients attending specialist treatment centres had cannabis as their primary or secondary drug of abuse, compared to between 5% (NR) and 20% (WC) for the cannabis/mandrax (methaqualone) aka 'white-pipe' combination. In 2016a the proportion of treatment admissions for cannabis as a primary drug slightly increased in the WC, CR and KZN while it decreased in the EC. In all sites cannabis is reported as the primary substance of abuse by the majority of patients who are younger than 20 years.

Treatment admissions for cocaine-related problems show a decrease over the past few reporting periods and remain low across sites, although cocaine is more often reported as a secondary substance. Approximately 3% (WC)

and 8% (KZN) of patients in treatment have cocaine as a primary or secondary drug of abuse, (Fig.1). Relatively few patients younger than 20 years are admitted for cocaine-related problems.



Compared to the previous period, treatment admissions for heroin as a primary drug of abuse remained stable across all sites, except in KZN

where it significantly increased from 7% to 15% this period (Fig. 2). Mostly, heroin is smoked, but across sites between 4% (KZN) and 50% (CR) of patients who reported heroin as their primary drug of abuse injected it. Injection use of heroin has remained fairly stable in the WC compared to the previous period, but decreased slightly in the CR (from 56% to 50%). A significant increase in the proportion of patients injecting heroin in GT (from 26% to 38%) was also noticed during this period.

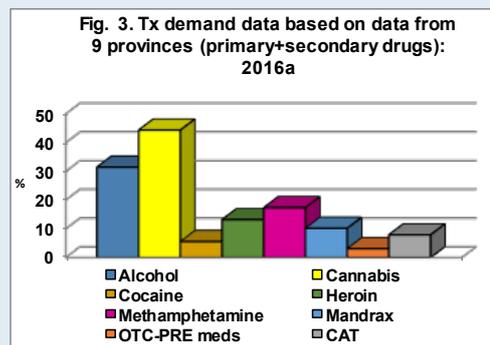
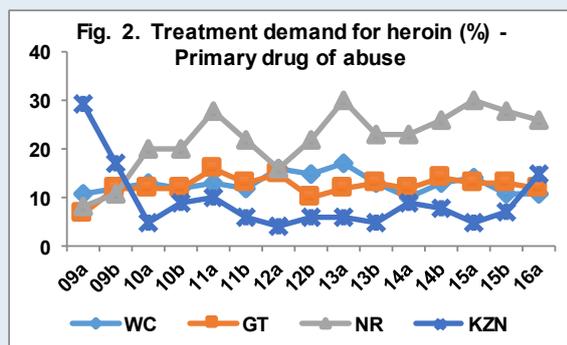
The proportion of heroin patients across all regions (except WC and EC) were Black African and these proportions decreased slightly to 3% in the WC (from 6%), and remained stable in other sites. In the NR, KZN and GT regions the majority of heroin patients younger than 20 years were

* We also acknowledge the input of our provincial coordinators and participating treatment centres

Black/African, 98%, 92% and 88% respectively. Heroin is also used as a secondary substance of abuse with 2% of patients in the CR, 27% in the NR, 16% in KZN and 14% in GT reporting heroin as both a primary or secondary substance of

abuse. The use of nyaope (low grade heroin and other ingredients smoked with dagga), continues to pose a problem, with 4% of patients in KZN (and GT) admitted for nyaope use. In the NR 6% of patients reported nyaope as their primary

substance of use. The majority of patients who were admitted for nyaope use in KZN (52%), NR (95%) and GT (94%) were Black/African.



Methamphetamine (MA) - Treatment admissions for MA as a primary drug of abuse is low except in the WC and in the EC. MA (aka 'Tik') remained the most common primary drug reported by patients in the WC in 2016a, although the proportion decreased slightly from 37% in 2015b to 32% in this period. Among patients under 20 years the proportion reporting MA as a primary or secondary substance of abuse was 17% (compared to 35% in 2014b). Treatment admissions related to MA abuse as a primary or secondary drug remain low in most other sites except in the EC (30%) and WC (42%).

Methcathinone ('CAT') use was noted in most sites, especially in GT and CR where 16% and 13%, respectively, of patients had 'CAT' as a primary or secondary drug of abuse.

Poly-substance abuse remains high, with between 24% (NR) and 50% (EC) of patients indicating more than one substance of abuse.

The abuse **Over-The-Counter (OTC) and Prescription Medicines** such as slimming tablets, analgesics, and benzodiazepines (e.g. diazepam and flunitrazipam) continues to be an issue across sites. Treatment admissions for OTC and prescription medicine, as a primary or secondary drug of abuse, were between 1% (NR) and 10% (EC). During this reporting period, 263 (2.5%) patients across all sites reported the non-medical use of codeine, with the majority of patients coming from GT (N=85).

Overall, and across all regions 13% of patients presented with a **dual diagnosis** at treatment admission. The majority of patients reported mental health problems at the time of admission (39%), followed by hypertension (21%) and respiratory diseases (14%). A higher proportion of patients suffering from mental health problems were found in the KZN, accounting for 56% of admissions. On the

contrary, patients in the CR were more likely to suffer from hypertension, accounting for 26% of admissions.

OTHER KEY FINDINGS

The **proportion of patients under 20 years** ranged from 24% (CR) to 37% (KZN). In all sites the **proportion of Black African patients in treatment** is still substantially less than would be expected from the underlying population demographics; however, these proportions have remained higher among young patients in GT and the NR over time. In GT, 73%, in the NR 89%, KZN 83%, and in CR 75% of patients younger than 20 years were Black African in 2016a. An overall picture of drug treatment admissions in South Africa based on information combined over the 75 treatment centres in 9 provinces is given in Fig. 3.

Between 39% (EC) and 66% (WC) of patients reported that they had been **tested for HIV in the past 12 months**, showing a significant increase over time but still lower than desirable.

SELECTED IMPLICATIONS FOR POLICY/PRACTICE

- Consider addressing common NCDs experienced by clients in treatment (e.g. mental health problems).
- Give more attention to phenomenon of teens buying codeine containing cough syrups and taking it with alcohol.
- Increase HIV testing among persons coming to treatment in Gauteng (GT) and Northern Region (NR).
- Address gaps in access to treatment for Black Africans in Western Cape (WC)

SELECTED ISSUES TO MONITOR

- Increase in Fentanyl abuse in SA.
- Increase in heroin/nyaope use, including in <20s.

- Increase in injection use of heroin in GT and elsewhere.
- Decrease in age of people coming to treatment in NR and KZN
- Sharing of needles (containing blood) to get a high in GT.
- Decrease in Black African patients coming to treatment in GT.
- Availability of synthetic cannabis (Spice/K2) in KZN.
- Treatment demand by 15-19 years olds related to codeine use in WC.

SELECTED TOPICS FOR FURTHER RESEARCH

- Extent of people moving from smoking to injecting heroin in GT and precipitating factors.
- Suitability of treatment modalities for very young patients.
- Directionality of linkage between NCDs and drug use.
- Investigate prevalence of HCV among drug users.
- What types of mental health comorbidity are experienced by drug users and how is it being addressed?
- How is cannabis use affecting the lives of teenagers?
- To what extent are medical aids being used to cover substance abuse treatment. Is it falling short of the need?
- Impact of employment on rehabilitation of patients.
- Need for and access to treatment by whoonga users in KZN.
- Gaps in substance abuse treatment among older persons.
- Should we increase provision of female only treatment programmes/centre?
- What is the effect on treatment retention and outcomes?

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