

Drug counter culture

Rising levels of seizures of Class A drugs and deaths through drugs overdoses have provoked a call from the chief constable of Tayside Police for heroin to be prescribed for drug addicts. Kay Smith reports

Chief Constable John Vine is calling for the establishment of Scotland's first heroin prescribing service for addicts – one he has volunteered to head up.

Tayside has 4,500 known addicts of which 1,500 are in contact with services, according to Tayside Substance Misuse Services.

“The Tayside picture is being reflected throughout Scotland. But seizing drugs on the street and arresting dealers is merely tackling the supply side of the drugs problem. We've also got to tackle the demand side.

“Now is the time to consider innovative ways - such as the prescribing on the

NHS of heroin to chaotic drug users - if we are going to make an impact on both dealing as well as the acquisitive crime in the community committed by the users seeking to feed their habit,” Mr Vine tells *Police* magazine.

The chief constable is renewing a call made in 2004 by the Scottish Drugs Forum to the Scottish Executive to explore the heroin prescription method and is now having talks with the Executive of the NHS in Scotland and with Tayside's Community Justice Authority. He hopes that a conference will be held later this year which would pull together experts to discuss

the possibility of a Tayside pilot. He has sent his proposal to the Scottish Executive's new Cabinet Secretary for Justice Kenny MacAskill. “We need to engage our elected members in this debate,” says Mr Vine.

The signs are he is on the right track as SNP MSP Bill Wilson is to help ensure the issue comes to the attention of the Scottish Parliament through a motion calling for the method to be investigated.

Mr Vine admits the public may find his proposal to give free heroin to addicts “unpalatable”, but is taking heart from the 8,500 people who have



so far registered their approval for the idea on the force's website – and from a healthy postbag of letters showing further support.

He stressed: "Tayside Police will continue with its law enforcement efforts and with taking drug dealers off the street. But unless we tackle the demand side more effectively we will still be doing that in ten years time."

The force is already proactive in adopting a preventative approach towards illegal drugs use by facilitating an arrest referral scheme for addicts.

The scheme is run by the charity NCH Scotland and now sees a 1,000 clients a year. The initiative gives them support at the point of their initial detention for a drugs related crime then helps ensure they are seen by the health service's substance misuse service as soon as possible. It goes on to provide thorough care over social and psychological issues. "The point of arrest is when drug misusers are most motivated to change. Our service then helps reduce the chance of relapse," explains manager Val Darroch.

Det Insp Wendy Symington, Tayside Police's drugs co-ordinator, says: "The referral scheme is very different from the punitive approach the public might expect the police to adopt but we do see the value – as do others – of harm reduction."

The prescription of heroin would not be a case of addicts pitching up at their GPs surgery or local community pharmacists looking for shots. Rather it would be administered in highly controlled clinical settings where there would also be intensive contacts with professionals. Only the most intractable of cases such as those that have not been maintained on oral methadone programmes, would be involved.

Clinics are already being run in Switzerland and in the Netherlands. A study of services in six Dutch cities involving 430 heroin addicts published in the *British Medical Journal* in 2005 concluded that although costs of the services were high, a reduction in drugs related crimes resulted in a net saving of £8,600 per patient per year.

In the same year two Home Office sponsored pilot projects, one in London and one in Manchester, were set up. These are currently assessing a variety of regimes to include injectable methadone as well as injectable heroin to assess any impact on the illicit use of heroin, criminal behaviour and general health.

Brian Kidd, lead clinician for Tayside Substance Misuse Services, is a consultant who has experience of a heroin injecting service formerly run by the NHS in Devon and Cornwall. One problem the service encountered was securing the supply of medically available diamorphine - as well as its high cost.

He said: "What we need to invest in first and foremost is a properly funded methadone programme together with more focus on wrap around care aimed at helping users change their psychological approach to drugs."

Mr Vine, however, wants to suck it and see. "The idea of a heroin clinic has potential. Unless we get past the hand wringing, do nothing stage, there will be no progress."

