

SUMMARY OF KEY FINDINGS

VICTORIAN DRUG STATISTICS HANDBOOK: PATTERNS OF DRUG USE AND RELATED HARM IN VICTORIA FOR THE PERIOD JULY 2006 TO JUNE 2007

Alcohol: Alcohol remained the most widely used drug in Victoria, particularly among males, with the majority (83%) of people aged 14 years and over identified as current drinkers and almost half drinking regularly in 2007. A large number of Victorians continued to drink alcohol at an at-risk level. The number of alcohol-related cases attended by Ambulance Victoria rose in Melbourne by 28 per cent compared with the preceding year. Alcohol-related mental and behavioural conditions accounted for the largest proportion of hospitalisations (39%) and bed days (35%). Motor vehicle accidents in 2006–07 continued to be a major cause of alcohol-related morbidity and mortality, although alcohol-related inpatient hospitalisations and alcohol-related deaths remained stable as in 2005–06. In 2006–07, the number of assaults reported to Victoria Police during high alcohol hours (Fridays and Saturdays, 8:00 pm to 6:00 am) and the number of alcohol-related family incidents attended by Victoria Police increased by eleven per cent and four per cent respectively from the preceding year. Alcohol was also the most common drug of concern among clients of government-funded specialist alcohol and other drug (AOD) treatment services, accounting for 46% of all clients and 43% of all courses of treatment.

Cannabis: In 2006–07, cannabis was the second most common drug of concern among clients of Victorian government-funded AOD treatment services (23% of COT and 26% of clients), after alcohol, although cannabis-related calls to the DirectLine telephone counselling service fell by five per cent in 2007. The number of cannabis-related ambulance attendances remained stable in 2007, while the number of cannabis-related hospitalisations declined during 2006–07. While arrests pertaining to the use and possession of cannabis continued to make up a large proportion of all drug-related arrests in Victoria (54%) as in 2005–06, cannabis-related arrests declined in 2006–07.

Methamphetamine and other stimulants: Evidence from population-based surveys suggests that in 2007, methamphetamine use tended to decline among Victorians, while the recent use of ecstasy and cocaine unchanged. Drug treatment clients with stimulants as primary drugs of concern represented only seven percent of all courses of treatment or eleven per cent of clients in Victoria in 2006-07. During 2006–07 stimulant-related hospitalisations increased (by 19%), although hospital admissions related to stimulants only accounted for six per cent of drug-related hospitalisations and eight per cent of drug-related hospital bed days. Law enforcement data indicates that the number of stimulant seizures detected by police in Victoria increased in 2006–07 by 7% compared with the previous year, although the total amount of stimulants being seized decreased dramatically by 95% from the preceding year.

Benzodiazepines and other minor tranquillisers: Legal use of benzodiazepines was common in Victoria in 2006-07, but the prevalence of non-medical, illicit use reported by the survey population was low (2%), accompanied by the low level of benzodiazepine-related courses of treatment (2%) for problematic benzodiazepine use. However, benzodiazepine-related ambulance attendances accounted for almost one-fifth of drug-related cases attended by Ambulance Victoria during 2007, and more than one-quarter of drug-related hospitalisations in 2006–07, with females over-represented in both.

Hallucinogens: The prevalence of hallucinogen use remained very low in Victoria, with less than one per cent of the general population reporting recent use in 2007; only 60 COT (less than 1%) delivered by Victorian specialist AOD treatment services to people with hallucinogens as the primary drug of concern; only 94 hospitalisations being attributed to hallucinogen use; no hallucinogen-related cases attended by Ambulance Victoria; and no hallucinogen-related deaths being recorded by the Australian Bureau of Statistics.

Heroin and other opioids: In 2007, population surveys continued to indicate a very low prevalence of heroin use among the Victorian general population. However, there was evidence to suggest that heroin and other opioid-related harms were gradually increasing in Victoria in 2007, with the number of non-fatal heroin overdoses attended by Ambulance Victoria increasing from 486 cases in 2006 to 992 in 2007, or 104 per cent; and heroin-related deaths rising from 37 in 2006 to 76 in 2007, or 105 per cent. During 2006–07, opioid-related hospitalisations increased by 22 per cent, opioid-related bed days increased by 25 per cent, and hospitalisations for heroin overdose increased by 34 per cent.

In 2006–07, treatment for heroin constituted 14 per cent of all courses of government-funded AOD treatment in Victoria, while other opioids represented five percent. Needle and syringe program distribution continued to increase from 2006 to 2007 (by five per cent), and enrolment in pharmacotherapy stabilised at approximately 10,700 clients as at January 2007. Hepatitis C continued to be a major health concern among people who injected drugs in Victoria – 73 per cent of Victorian respondents to the National NSP Survey tested positive to hepatitis C antibodies in 2007. By comparison, HIV transmission attributable to injecting drug use represented only two per cent of HIV notifications during this time.

Inhalants: The prevalence of inhalant use remained very low in Victoria in 2006–07, parallel with the very low levels of inhalant-related courses of treatment (1%), ambulance attendances (1%) and hospitalisations (n=36). No inhalant-related deaths were recorded in 2006.

Steroids: The prevalence of steroid use in Victoria remained extremely low, with less than one per cent of the general population reporting lifetime or recent use of steroids in 2007. Treatment and morbidity data continue to suggest very little acute steroid-related harm in 2006–07, with steroids only comprising six episodes of Victorian AOD specialist drug treatment and one hospitalisation. No steroid-related arrests were made in Victoria during 2006–07.

Tobacco: Approximately one-fifth of the Victorian general population were regular smokers in 2007, with the highest prevalence of daily use reported among adults aged 20 to 29 years and 40 to 49 years. Female secondary school students continued to show a consistently higher rate of tobacco smoking than their male peers, although both the female and male rates of smokers have been decreasing among all secondary school students since 1996.

In 2006–07, tobacco continued to account for a large proportion of drug-related harm in Victoria, representing 59 per cent of all Victorian drug-related hospitalisations and 69 per cent of bed days, representing a two per cent increase in the number of admissions from the previous year. In 2006–07, hospital admission rates continued to be higher among males, and remained largely unchanged for the past ten years. However, in 2006, tobacco-related deaths declined by two per cent, down to 12 per cent of all Victorian deaths for the year.