

Opioide Substitution Treatment (OST) in Europe – The Users View

Dear Friends of EURONPUD

The Data of the European Drug Report show that the potentials of substitution treatment are not used sufficiently. For example, we have a very low prevalence of treated opioid users as well as a limited number of prescribed Medications in Europe. With a few exceptions, many substances, who have already shown good effects and results in substitution treatment are not offered or only offered for a very small group of patients. There may be the impression that in many countries are particular reservations or prejudices about the use of some OST medications, such as levomethadone, morphine, diamorphine, etc. We can see that people who use opioids are influenced in choosing their medications.

To prepare a presentation for a OST conference in Austria in May, i would like to ask you, as well informed members of the drug user community in europe, a few questions about OST in your country.

It would be very helpfull if you and some other well informed community members who have an overview of the situation in your country could answer the following questions.

For me it would be very important to get back questionnaires from different European Countries

You will need only a few minutes to make your X

Please sent the questionnaire back before 15th April to Dirk.Schaeffer@dah.aidshilfe.de or use the Fax +49 30 69008742

Thanks for your support

Dirk Schäffer

1. In which country do you live?

2. How long are you already in substitution treatment (OST)

More than 10 years

7 to 10 years

3 to 6 years

Less than 3 years

3. Which medications for opioid substitution treatment are available in your country?

Medication	YES	NO
Methadone		
Buprenorphine		
Injectable Methadone		
Codein /Dihydrocodein		
Morphine		
Buprenorphin/Naloxon		
Levomethadone		
Diamorphin (Heroin)		

4. What are the reasons that some medications are not available in your country? (several answers possible)

some OST medications are not allowed in my country

There are reservations or prejudices about some medications

Doctors/authorities think that the OST medication that are prescribed are sufficient

There are economic reasons (medications are too expensive)

5. Do you think that people in OST get their OST medication of choice or the doctor chooses which drug he/she prescribes?

Yes, patients can choose their medication of choice

No, it's doctors choice

6. Here you will find some myths about OST medications we have heard in drug user communities in Europe. Do you know one or more of these myths/ statements about OST medications in your country?

a.) buprenorphine is the Mercedes among the OST medications

yes no

b.) diamorphin/morphine should be used by users who cannot stand their clear head

yes no

c.) with diamorphin/morphine patients can only work for a few hours

yes no

d.) buprenorphine is given to patients who want to be abstinent again

yes no

7. Do you think users can be treated more individually with more diverse medications?

Yes No

8. Do you think the treatment results will improve if a wide range of medications would be available?

Yes No

9. Which OST medication do you miss most in your country? max. 2 medications

1. _____

2. _____