

Episode 31: Inside the EUDA 2025 Report - Drug Trends Across Europe

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TRANSCRIPT

Hi everyone, welcome back to the Tox Lab. I'm Rebecca. I'm Rob. This week, we're going to be looking at the European Drug Agency drug report, which came out this week. EUDA drug report day.

Bit like Christmas, Rebecca? No. No? No.

This sense of anticipation, waiting for the report to drop. I don't think it's quite on the same level as Christmas, in my personal opinion. I guess you could be right. Do you do what I do?

This is what I want to know. Every year, when the report drops, the first thing you do, if people listening to this do the same as me, they'll understand exactly what I'm about to say. The first thing you do is you scroll down to the MPS section, click it and look for the graph. I can't say I have.

Okay, maybe it's just me. So this year marks the 30th anniversary of the European Drug Report. So the first report came out in 1995. I've managed to pull up a copy of that report and it is a huge contrast to today's report.

Yeah. Today's report is 300 pages. The report in 1995, how many pages do you think? Like 100.

Eight. Wow. Things have changed quite a lot since then. Just a smidge.

There was a few little nuggets of sentences that I wanted to point out in the 1995 report because I found them fairly amusing. Cocaine was described as rare, social and intermittent. Wow. Okay.

Three to 4% of young adults have tried ecstasy or LSD compared to about 10% now. Crack was described as an emerging issue. It's been an emerging issue every year for the last 30 years. When will it stop?

Nobody knows. And mass media campaigns were said to raise awareness but not change behaviour 30 years ago. So the plan for today is to look at this year's report and have a look at some of the sections. It's a huge report.

As I say, I do want to give a massive shout out to the EUDA and all the people that have worked really hard on this report because there is so much information. A 300 page headline report, plus countless background tables, data and graphs that you can pull out and look at independently. It's a huge amount of work that's gone into this.

So we're going to look at some of the highlights really. Before we jump into today's episode, if you want to stay up to date on our content or want to get in touch with us, you can find us on Instagram at [@the_tox_lab](#). We also have a LinkedIn page. And for those of you who don't use social media but still want to get in contact, you can email us at thetoxlab@gmail.com.

So where do we start with this report? Should we just jump in? I think so. So let's look at cocaine first of all.

So I think the headline with cocaine in this report really is basically everything is up. Yes. And what do I mean by that? Well, virtually all of the stats have shown an increase, haven't they?

More people have entered treatment looking for cocaine detox programs. The number of drug seizures involving cocaine and the volumes of drugs being seized have increased. So between 2013 and 2023, cocaine seizures have increased by 581%, which is mad. And for the seventh year in a row, EU member states have reported a record amount of cocaine being seized amounting to about 419 tons.

419 tons? Yeah. It's a huge amount. The purity on the street has gone up, hasn't it?

And the only stat I think that hasn't gone up is actually the price, which compared to everything else in line with inflation has actually gone down. So clearly a lot of cocaine making it through onto the streets. One surprise for me actually was the number of people attending hospital for cocaine related issues. And I think this is acute presentations, but this has actually now overtaken MDMA and heroin as being the number one drug implicated in hospital admissions across this dataset.

Oh, okay. Often actually combined with alcohol. And we've probably mentioned this before, that alcohol and cocaine in combination, you produce a different metabolite that is more active than cocaine itself. And so that could be partly responsible for this, some of the cocaine, alcohol, co-use.

They do talk a bit about crack cocaine as well. As I said, 30 years ago, it was an emerging issue. Today, it's still an emerging issue. They're seeing a lot more use in marginalised communities, again, increases in that.

And in general, looking at the drug related death stats as well, cocaine is showing an increase in its appearance in drug related deaths. Although typically detected alongside other drugs, opioids, benzodiazepines and things like that. There was one interesting nugget, which I picked up in there was about the seizure in Spain, the largest single drug seizure. 13 tons of cocaine seized, concealed in bananas.

Interesting. I can't picture that. I did try and find some pictures. I don't know whether it meant hidden under bananas in packages or whether they had actually packaged it within banana skins.

Yeah, I was thinking. I'm not sure. I was thinking the latter on that one. Okay, so let's move on to look at cannabis.

So this report states that 1.5% of adults in the EU use cannabis daily or almost daily, and with 8.4% having used in the last year, which equals about 24 million people. That's quite a chunk of the population. It really is. Interestingly, the cannabis market accounts for the largest share of the overall illicit drug retail market in the EU with an estimated value of 12.1 billion euros, which I thought was very impressive.

And of course, this is just the illicit market. We are now starting to see changes in drug legislation trends in some countries, not all in the EU. Quite a few have either decriminalized or completely legalized recreational use now. Yeah, so in February, 2024, Germany permitted limited home-growing possession and use of small amounts and nonprofit cannabis-growing clubs as well.

And the Netherlands are also experimenting with a closed cannabis supply chain across 10 municipalities to regulate the sale of cannabis in coffee shops. The Netherlands situation has always been a bit strange, hasn't it? Yeah. Because it's never been legal, but it has been tolerated for a long, long time, and it's always been this weird gray market.

So take us through some cannabis stats. What's changed or what hasn't? So looking at the potency of herbal cannabis, it seems to have stabilised in recent years, but the THC content of resin is sitting at about 23%, whereas within herbal material, THC is about 11%. So a lot higher than it has been previously, but it does seem to be evening out.

It's slightly weird, isn't it? Because resin used to be considered the lighter option. High potency flower was what was typically seen as the most potent option. Weirdly, that seems to have switched in recent years.

There is still quite a lot of high potency herbal cannabis available as well, though. Certainly some of the coffee shops in the Netherlands are selling what they claim to be about 24%, 25% THC, which is still huge. But that's a really interesting sort of switch, I guess, because I think without necessarily looking at the data, users might not actually be aware that resin potency has been going up that much relative to herbal cannabis. So looking at seizures, in 2023, EU states seized 551 tons of resin, which is an increase on 2022 where they seized 468 tons.

And in 2023, they seized 201 tons of herbal material, which is actually down from previous years. Although some of this decrease in seizures could be because places like Germany are perhaps now seizing less because of more tolerant legislation. Cannabis was also involved in 90% of all acute intoxication and poisoning presentations in 2022, and was the second most reported substance after cocaine. That probably matches its generally wide prevalence amongst users.

Yeah, and again, it was reported alongside other drugs. And it does also account for more than a third of all drug treatment admissions in Europe. About 45% of those are entering treatment on their own initiative with criminal justice and healthcare referrals accounting for about 25%. It does talk a bit about mental health issues driving some of this, doesn't it?

A lot of an increase in people presenting with anxiety, psychosis, insomnia. Yeah, which I guess is possibly to do with the increase in THC content. Possibly, yeah. So moving on then to heroin, there's a bit of a notable absence in the report of heroin actually.

It's not a huge amount of data compared to some of the other drugs. Heroin seizures appear to be decreasing. There is some shift in purity, but not really. We do know on a global level that Afghanistan's production has gone right down.

And so it doesn't really look like that reduction in production has necessarily made it to the stats yet. So it's possible we haven't quite felt the Afghanistan effect. This sort of suggests there's maybe some large existing stockpiles or a bit of a lag in the market disruption. There have been some shifts in the drug-related death cohort.

There seems to be a lot more co-use now with alcohol, benzodiazepines, methadone, cocaine than there was in the past. We've often mentioned polydrug use on this podcast, haven't we? That seems to be an ongoing and emerging trend. What I did find interesting was that there was a decline in people injecting heroin, but an increase in people snorting heroin.

Oh, okay. Wonder whether that's mirrored with any other drugs. I mean, I found it interesting that 436 kilos of heroin were concealed in cable machines and seized in Bulgaria, which I thought was an interesting way of trying to smuggle it in. Actually within the machines.

Yeah. I'm always impressed at how they managed to intercept some of these shipments. They must have Intel. They must do.

Should we jump into MDMA? Yeah, okay. Let's have a look at MDMA. So in some respects, things haven't changed huge amounts on the MDMA front, have they?

It's been relatively stable in terms of the numbers of people using it. We're still seeing very high potency tablets. So the average ecstasy tablet coming in at about 150 or so milligrams of MDMA, but some tablets going as high as 350, sometimes higher. Ooh.

Exactly, yeah. You know, 150 is for an inexperienced user, a fairly high dose anyway. 350 milligrams could easily be fatal. This trend we've seen over the last few years of MDMA tablets being effectively multiple doses in one tablet.

And my understanding is that this can stem from some of the legislation in that people can be prosecuted based on the number of tablets, not the actual milligrams of MDMA. And so it is lower risk to smuggle fewer tablets with higher MDMA content. It's quite scary though, because a 2024 ESPAD school survey showed that 10% of 15 to 16 year olds said that MDMA was easily obtainable with an average of 1.8% of the students having used this drug at least once in their lifetime. Yeah, it's a real problem.

I don't think we've actually talked much about MDMA on this podcast and maybe we should, but these high strength tablets and the fact that they're often quite inconsistently dosed does mean that it is very easily possible for people to overdose accidentally on them. There were a few interesting nuggets in the data set. It makes reference to edible MDMA products like lollipops and jellies, which I've not come across before. No, I've not seen anything about those.

And they do sound a bit worrying, don't they? We've talked a few weeks ago about Delta 8 THC gummies and how that led to a child presentation because they thought they were sweets essentially. That case resolved with no long-term harm, but MDMA in gummy form could be potentially fatal in a case like that. I think some of the other things that they've identified is that there's a lot of variation between similar looking tablets.

So visual identification doesn't tell you what's in the tablet or what the strength of it is. And there's quite a few mentions of things other than MDMA being sold as ecstasy, a lot of cathinones, which we'll come on to in a moment and things like that. In terms of drug-related deaths, MDMA is reported in a relatively small number. Most countries report fewer than one in 20 cases involving MDMA.

But Turkey is a slightly strange outlier with MDMA being identified in almost one in three drug-induced deaths in 2023. That's interesting. That really is quite an outlier, isn't it? Yeah.

I wonder why that is. Your most drug-related deaths in Turkey are amongst young people, often males. I don't know whether that reflects sorts of drugs that population are using versus the rest of Europe. Interesting.

There was one thing that I did pick up in this report that I hadn't really given much consideration to before. And that was actually the environmental impact of illicit production of MDMA. And it says that to produce one kilogram of MDMA, labs are producing about 58 kilos of illicit toxic waste. Wow.

Which was kind of a drug-related harm that I'd never thought about before. And obviously that waste has got to go somewhere and it's not being disposed of legally, I suspect. No, probably not. Possibly an under-discussed consequence of lots of synthetic drug production, in fact.

So let's look at the next category, synthetic stimulants. This isn't a term I've often used, but I guess it means stimulants that aren't cocaine. And we've talked about MDMA as a separate category. It seems to cover amphetamines, methamphetamine and cathinones.

So we talked about cathinones before on this podcast and the seizures of cathinones seem to be going up. So four and a half tonnes seized in 2021, 37 tonnes seized in 2023. So quite a jump in cathinone seizures. And this is about three times the combined quantity of amphetamine and methamphetamine that have been seized as well, which I thought was quite interesting.

So there's quite a lot more cathinone seizures than there are methamphetamine and amphetamine. That definitely seems to be a bit of an increase in cathinones actually. There's also reports of increasing cases of cathinones being mislabeled as traditional drugs. So MDMA, cocaine, and therefore users may just not know what they're taking.

They're also not necessarily gonna be picked up in a lot of toxicology testing. They're not necessarily compounds that everybody is looking for. So looking at amphetamine and methamphetamine, in 2023, amphetamine was the fourth most common substance reported in acute drug toxicity presentations and was present in about 11% of those. Methamphetamine, on the other hand, was present at about 2.4% of acute drug intoxications.

So amphetamines and methamphetamine are still present. There was an interesting bit in there, I think, about how methamphetamine seems to be being made in Europe, but actually being exported out. Oh, interesting.

Let's move on to the MPS section. The bit with the infamous graph. There's been quite a few developments on this front, hasn't there? So at the end of 2024, the EUDA was monitoring a thousand new psychoactive substances, 47 of which were first reported in Europe in 2024.

And that was kind of consistent with 2023, wasn't it? It did look like at one point, the general trend was downwards, but it does seem to have stabilised a bit year on year, doesn't it? New compounds being notified to the EUDA. Yeah, it definitely looked like it peaked in 2014 or 2015, but is creeping up again.

So a chunk of those were nitazene opioids, weren't they? We've talked about nitazenes before. So in 2024, seven new synthetic opioids, all of which were nitazenes, were reported to the EU early warning system, which is the highest number in a single year so far. So an increasing diversity in the numbers of nitazenes being reported.

Since 2019, at least 21 EU member states have reported nitazenes at some point, and seizures of nitazenes have also gone up quite a bit. So looking at powders, about 10 kilos were seized in 2023, which is triple what was seized in the previous year in 2022. In terms of tablets, 2,552 of those were seized compared to 430 in 2022. Preliminary data for 2024 shows over 50,000 tablets seized in nine EU member states.

So the problem is just growing and growing and growing. And that 10 kilos doesn't sound a lot, does it? But we've talked about nitazenes before. They are so, so potent.

And so a kilo could be a million doses. It's really terrifying. Ten kilos is quite significant. The sheer increase in the number of tablets being seized as well is even scarier actually.

It really is. And they seem to be mimicking legitimate prescribed meds, such as oxycodone, and mimicking some benzos like diazepam and alprazolam, especially where people are buying them thinking they're benzodiazepines and they're not. And that they're nitazenes, really potent ones, is a truly terrifying thought. Yeah, it is definitely.

A couple of surprises in this data were that Latvia and Estonia had more than 50% of their opioid deaths involving nitazenes. Yeah, I was quite surprised at that. So in Estonia, 62 out of 119 deaths were nitazenes. And in Latvia, 101 out of 154 deaths were related to nitazenes.

And the other issue with nitazenes, as we've talked about before, is that not everywhere's testing and not everywhere's screening. There's no consistent approach. Probably this is just the tip of the iceberg. We're probably not seeing all of the cases.

So let's move on to some of the other novel drugs then. So synthetic cannabinoids, they're still around. They're still a thing. I think perhaps a little bit less dominant, not quite as many SCRAS reported in this period, but still a few new ones still being reported.

So in 2024, the EU early warning system received reports of 20 new cannabinoids, which brings the total number they're monitoring to 277. Which is a huge number if you're trying to run a toxicology service testing for all these drugs. Yes. They still remain prevalent in places like prisons and things like that.

But in general, the trend, at least in terms of new compounds emerging, does seem to be on the decrease for now. But where we have seen an increase is semi-synthetic cannabinoids. So in 2024, 18 of the 20 new cannabinoids identified were semi-synthetics. So there are lots of different semi-synthetics that are available in Europe, including HHCO, HHC-P, delta-9-THCP, and HHCP.

Lots of acronyms. So as we talked about before, these are compounds that are made usually from CBD. It's a cannabidiol starting point and then chemically altered to produce psychoactive compounds. There is a

point in here actually about how they're seeing compounds based on this structure that they think are not being synthesised from CBD, but from other starting materials.

Although it doesn't really say what, so I need to do a bit more reading about that. And they also talk about the rapid spread of vapes and gummies, which is something we've touched on previously. In June 2024 in Hungary, there was a reported outbreak of 30 acute non-fatal poisonings linked to gummies containing two potent semi-synthetic cannabinoids. Although in this report, it doesn't actually say which ones they were.

I've got a feeling one was HHC, but I don't know why I think that. Yeah, the semi-synthetic cannabinoid market is a bit of a mess, isn't it? There's no clear legislation on a lot of it. Certainly across Europe, it's very different in different countries.

So it is a bit of a regulatory minefield. So let's quickly look at some of the other MPS that are being identified. So there's been a handful, hasn't there, of more niche things, a couple of novel dissociative drugs have been identified, a couple of new psychedelics have been picked up. These are all essentially completely novel compounds, no toxicology data out there.

We don't really know what we're dealing with if we ever see them, indeed, users don't know what they're dealing with if they take them. There were a couple of little surprising points in here, weren't there? There seems to be an increase in unregulated psychedelic retreats. Oh, okay.

Taking some novel psychedelics, 5-MeO-DMT or some psilocybin analogues are discussed. And again, I think some of these might be sort of regulatory nightmares, different countries having different banned compounds and things like that. There's a little bit in there about novel benzodiazepines, isn't there? Ongoing emergence of some new designer benzos reported.

It doesn't really say very much at all in this report about benzodiazepines. I was kind of surprised that there wasn't more on benzos. No, there's not much at all in here actually about things like diverted medications, which I think could perhaps be a problem area that isn't addressed by this report. When looking at seizures of MPS, in 2023, just four substances accounted for almost 90% of the quantity that had been seized across Europe.

And this included three cathinones, including 3CMC, 2MMC and N-ethyl norephedrine. And what was the fourth compound? Ketamine. Although I don't know how that comes under MPS.

I didn't write this report. Interesting. We'll move on to ketamine in a moment. I did just wanna touch on this note.

You've raised a really good point. There are hundreds of novel drugs that have been reported to the EUDA. Most of them are seen once somewhere and don't emerge in toxicology casework. And that makes life really hard, doesn't it?

Both from a testing perspective, but also interpretation. There's just no data out there on any of this. So going back to ketamine, we've talked about ketamine recently. Increasing seizures of ketamine reported across most of the EU, particularly Belgium, Spain and the Netherlands.

I don't know why it's being classed as an NPS because it's not an NPS. We're often seeing ketamine coming in from, presumably, factories that are producing ketamine legitimately some of the time for medical use. There has been an increase in some of the harms associated with ketamine use, hasn't there? So increases of bladder damage and ketamine dependency and things like that.

It used to be a bit of a niche substance. It's now a bit more mainstream. Nitrous oxide. We talked about that a little while ago, a few weeks ago.

This is still being used recreationally. A few countries have tried to ban it, control it. Doesn't really seem to be going away. Still seems to be quite a lot of it being reported.

I think that covers most of it, doesn't it? I think so. So say this is a really big report, 300 page report. A lot of content.

Definitely some really interesting nuggets of information in there. Were there any surprises in there beyond what we've talked about? What's your general feel for the drug situation? I mean, I was quite shocked by the number of nitazene tablets that are being seized and how that's just growing.

Yeah, I think the opioid section is probably the scariest, isn't it? In general, heroin purity is stable or going down, seizures are going down, but nothing compared to the reported drop in production. Are we in the next 12 months going to see a big drop in heroin followed by an increase in synthetic opioids? I think it's quite likely.

Certainly those countries reporting very high relative proportions of nitazene deaths are quite scary too. I think my overall feel for the data is that drugs really aren't going away, are they? Despite attempts at controlling something like cocaine, we've been trying to control cocaine for decades and it just seems to be going up and up and up. I think one thing that's quite noticeable throughout the report is the mentions of polydrug use and how lots of these drugs are found in combination with each other and how that complicates treatment options for a lot of people when going into treatment services.

Yeah, I think that's completely fair. So not only are we seeing an increase in the prevalence of drug use, but actually it's not like they're all separate populations, are they? There's a lot of overlap between these populations. I can see how that makes things like treatment, both acute treatment as well actually, acute hospital admission treatment and kind of drug dependence treatment, how that can complicate these things.

I think for me, the trends on the cannabis market are quite notable, the semi-synthetics, plus the fact that traditional cannabis is still a thing too and that seems to be increasing in potency. I think all the different forms that multiple drugs are coming in now is also quite worrying, like the prevalence of gummies and things like lollipops and things that could be mistaken for food or sweets in more like vulnerable populations is quite scary. Yeah, I mean, if there's anything drugs didn't need, it's marketing aimed at children, right? Exactly.

Yeah, it's definitely true and a real concern actually. Particularly, I was surprised by the MDMA gummies. Yeah. That shocked me.

Okay, Rebecca, so what are your top three predictions for the next year? We've been doing this podcast now for six months or so. Yep. I'm hoping we'll still be here in a year's time and we'll be able to see next year's report.

So what do you think is going to happen over the next year and we'll come back and review it in a year's time? I think cocaine is going to continue to go up. I think there are going to be more niche scenes or in general more synthetic opioids that are going to be hitting the market and causing us problems. What will my third prediction be?

It's a bit of a wild one, but I think we're going to see less of a variety of synthetic cannabinoids. Okay, so you think? I reckon there's going to be a couple core ones and all the little ones are just going to disappear. You think we're going to see a reduction in the number of semi-synthetic cannabinoids?

You think we've reached peak semi-synthetic cannabinoids? Not semi-synthetic, synthetic. Ah, okay, so fine. So completely synthetic.

Scrass, effectively. Okay, that's fair. What are your three predictions for next year? Good question.

I think we might start to feel the Afghanistan situation with regards to heroin seizures and purity. I think the cannabis market is going to get more complicated, particularly as more countries adapt different regulatory approaches. Yeah. And curveball, I think we're going to see an increase in ketamine analogs.

Ooh, okay. That's my prediction. We'll see if I'm right in a year's time. Well, I hope you've enjoyed listening this week and enjoyed our look at the European Drug Report.

Do get in touch if you've got any thoughts on what we've said about today. We'd really love to hear from you. If your response on the day that the drug report drops is to log in and go and look for the MPS graph first, let me know, because Rebecca thinks I'm weird for doing that. You can keep up to date with our episodes by following us on social media.

So you can find us on Instagram at @the_tox_lab. You can also find us on LinkedIn. For those of you who want to get in touch but don't use social media, you can email us at thetoxlab@gmail.com. I hope you all have an amazing week and we'll see you next time.

Bye.