

## CP1999/093 EN

Comité Permanent des Médecins Européens Standing Committee of European Doctors

### **Subject**

Contribution from the Standing Committee of European Doctors to the proposal for a European Union Action Plan to combat drugs (COM 1999/239 Final in CP Info 31-1999)

### <u>Sujet</u>

Contribution du Comité Permanent des Médecins Européens à la proposition d'un plan d'action de l'Union européenne en matière de lutte contre la drogue (COM 1999/239 Final dans le CP Info 31-1999)

Concerning / Concerne

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**Purpose / Objet** 

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Lutte contre la drogue

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# Contribution from the Standing Committee of European Doctors to the proposal for a European Union Action Plan to Combat Drugs (COM 1999/239 Final)

The Standing Committee (CP) has been interested to read the European Commission's proposal for an action plan to combat drugs. The CP has itself already taken a line on some aspects of the problem, and its General Assembly of 27 March 1999 adopted the accompanying report on medical practice requirements in care for drug addicts.

The CP's Preventive Medicine and Environment Subcommittee meeting on 18 September 1999 thought the CP should give its input to the consultation exercise launched by the European Commission.

#### Comparison with Standing Committee report CP 1999/002

- A. The proposals put forward in the action plan are broadly in line with various proposals and desirable improvements urged in CP Report 1999/002, especially as regards:
  - preventing drug abuse and drug abusing behaviour, where we argued at length that primary, secondary and tertiary prevention were priorities to be promoted,
  - achieving consistency and harmonization of criminal laws on the different types of harmful drug-abusing behaviour,
  - the overriding importance of social measures in the fight against drug abuse.
  - the importance of comparative research, actions and evaluations based on clinical study methods in the different European countries underpinned by information gathering.
- B. Some matters touched on in the CP's report are not convincingly addressed in the European Commission communication, and need expanding on:

1. Particular medical practice requirements in care for drug addicts

Notwithstanding the focus on setting up multidisciplinary networks, the communication fails to address the desirability of combining standard medical practice with specific forms of medical care for drug users, not to mention specific approaches to treating other forms of drug-abusing behaviour, alcohol, sports doping,...

Nor is there any focus on the specific responsibility of doctors, either in research activities, evaluation, or treatment. These are all matters in which doctors must exercise their independent professional judgement, especially in the choice of treatment prescribed, as part of coordinated multidisciplinary approaches, in which the various administrative, justice system, health and social welfare professionals must have an assured role.

2. The broad thrust of these proposals connects with medical training in this area.

The action plan's proposals for action on demand reduction include essential education and awareness-raising measures. Amongst these, it mentions the need for including and improving drug related training in postgraduate education for professionals who will have their future work in the health-, social- and law enforcement sectors.

These are welcome proposals, but could usefully be followed-up with the CP's suggestion for specialized training for practitioners caring for drug abusers, run as a cross-border European training scheme. This proposal could also fit in with the Commission's action plan proposals for stepping-up international cooperation.

3. Finally, aim five of the general aims and objectives of the action plan as worded - namely, "while not bidding for new resources, the successful implementation of the strategy and actions mentioned in this Action Plan will necessitate appropriate resources" - does not fully address proposal 7 of the CP report on the resources needed, which argues that the rise in drug dependence is making significantly heavier demands on financial resources and widening the needs/resources gap in the fight against harmful drugs, and concludes that channelling increased resources into the fight against illicit drugs and drug-abusing behaviour in general is a pressing public health priority for each country and Europe as a whole.