



**South African Community  
Epidemiology Network on Drug Use  
(SACENDU)  
Update (May 2003)**



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**ALCOHOL AND DRUG ABUSE TRENDS: JULY-DECEMBER 2002 (Phase 13)**

**Background**

The SACENDU Project is an alcohol and other drug (AOD) sentinel surveillance system operational in Cape Town, Durban, Port Elizabeth (PE), Mpumalanga, and Gauteng (Johannesburg/Pretoria). The system, operational since July 1996, monitors trends in AOD use and associated consequences on a six-monthly basis from multiple sources. Data are collected from over 50 specialist treatment centres, psychiatric hospitals, mortuaries, and the police Forensic Science Laboratories (FSL). Other data sources (e.g. community studies) are included when available.

**Latest key findings by substance of abuse (unless stated otherwise the findings relate to the 2<sup>nd</sup> half of 2002)**

**Alcohol** remains the dominant substance of abuse across sites. Between 47% (Cape Town) and 68% (Mpumalanga) of patients in treatment have alcohol as their primary substance of abuse. Increases in the percentage of patients under 20 years of age having alcohol as a primary drug of abuse were reported in Gauteng and PE. A community survey of adolescents (12-17 years) conducted in Cape Town in the 2<sup>nd</sup> half of 2002 found that over two-thirds of those who had consumed alcohol reported binge drinking in the past month. A national study commissioned by the National Agricultural Marketing Council in 2002 found that over half of drinkers reported drinking problems. The study highlighted various problems associated with the use of cheap white wine and among the users of such products, including high levels of drinking to intoxication, verbal and physical abuse, and problems associated with work and money.

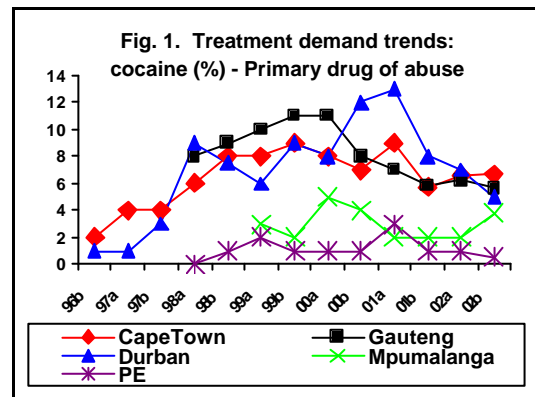
Use of **cannabis** (“dagga”) and **Mandrax** (methaqualone) alone or in combination (“white-pipes”) continues to be high. Across sites between 13% (PE) and 26% (Durban) of patients attending specialist treatment centres had cannabis as their primary drug of abuse, compared to between 2% (Mpumalanga) and 25% (PE) for Mandrax. Over time treatment demand for cannabis has gone up in all sites. Between 40% (Cape Town) and 61% (Gauteng) of patients under 20 years of age had cannabis as their primary drug of abuse. In Cape Town 28% of patients had Mandrax as a primary or secondary drug of abuse, compared to 13% in Gauteng.

Mandrax seizures recorded by the FSL were generally down except in the Western and Eastern Cape. Nationally a big drop off in Mandrax seizures has been noted over the past

two reporting periods (from the equivalent of almost 13 million tablets to 750 000 tablets).

The increases in treatment demand for **cocaine** related problems over time reported earlier for Cape Town, Durban and Gauteng have not continued and there has been a leveling off in treatment demand in these sites (Fig. 1). Treatment demand for cocaine remains low in PE, but showed a sharp increase in Mpumalanga. Overall, 11%-14% of patients in treatment in Cape Town and Gauteng have cocaine as a primary or secondary drug of abuse. There are indications of an increase in cocaine use among Black Africans in Gauteng.

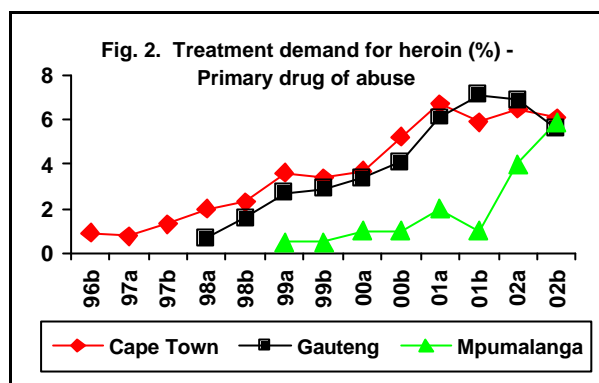
Seizures of cocaine HCL declined in all sites and nationally in the last reporting period (from 376 kg to 67 kg).



Over time, there has been a large increase in treatment demand for **heroin** as a primary drug of abuse in Cape Town, Gauteng and Mpumalanga (Fig. 2), but this has leveled off in Cape Town and Gauteng. Of patients in treatment under 20 years old in Cape Town, 50% are female. Most heroin is smoked (“chasing the dragon”), but of patients with heroin as their primary drug of abuse in Cape Town and Gauteng 34% and 48% respectively report *some* injection use.

Between 7% (Gauteng) and 8% (Cape Town) of patients in treatment have heroin as a primary or secondary drug of abuse. A large increase in the proportion of heroin patients in Gauteng and Cape Town who were Black African was reported (7% of all heroin patients were Black African in Gauteng and 5% in Cape Town, as compared to only 1% in the 2<sup>nd</sup> half of 2001 for both sites). In Cape Town 22% of all

heroin patients were coloured in the 2<sup>nd</sup> half of 2002, as compared to 2% in the 1<sup>st</sup> half of 2001).



Heroin seizures showed a large increase nationally (6.3 kg to 77.0 kg), with increased seizures being especially noted by the Pretoria FSL (73.5 kg).

**Club drugs** - Treatment demand for Ecstasy, LSD or Speed (methamphetamine) as primary drugs of abuse is low. These drugs more often appear as secondary drugs of abuse. Roughly 1 in 10 patients in treatment in Cape Town had Ecstasy as a primary or secondary drug of abuse, compared to 6% for Gauteng. Ecstasy use is greater among patients under 20 years of age. An increase in the proportion of coloured patients who have Ecstasy as a primary drug of abuse was noted in Cape Town. There were anecdotal reports of an increase in Ecstasy use among Black Africans in PE. Across sites indicators for LSD use were low.

A large increase in both cases and seizures involving amphetamine type stimulants (ATS) were noted nationally by the FSL (from 150 324 to 275 362 tablets). The largest increase was noted in KwaZulu Natal. Only 1 303 units of LSD were analysed nationally in the 2nd half of 2002.

The abuse of **over-the-counter (OTC) and prescription medicines** such as slimming tablets, analgesics (especially products containing codeine), and benzodiazepines (e.g. diazepam and flunitrazepam) continues to be an issue across sites, but treatment demand indicators are stable (2%-4% of patients have OTC or prescription medicines as a primary drug of abuse). Many patients, however, report these substances as secondary drugs of abuse (e.g. 8% of patients in Gauteng). IV use of paragoric (an opiate used to treat diarrhea) was noted in Mpumalanga.

**Inhalant/solvent** use among young persons continues to be an issue across sites. There were also reports of increasing availability and use of the synthetic stimulant **methcathinone** (aka "CAT"/"KAT") in Cape Town and Gauteng.

**Poly-substance abuse** remains high (and increasing), with 38% of patients in specialist treatment centres in Gauteng reporting more than one primary substance of abuse (21%, 9% and 4% respectively reporting two, three and four substances of abuse). The corresponding percentages for Cape Town were 39% reporting more than one substance of abuse, with 21%, 11% and 8% respectively reporting two, three and four substances of abuse.

### Other key findings

All sites for which age data are available have shown an increase over the past few years in treatment demand by persons less than 20 years of age over time (Table 1). Four of the 5 sites have shown an increase in the proportion of Black African patients in treatment (Table 1) since the first half of 2000, but across sites the percentage of Black Africans in treatment is still substantially less than would be expected from the underlying population demographics.

Table 1. Changes in age and race of patients over time

	% of patients in treatment < 20 years of age		% of patients in treatment who are Black African	
	2000a	2002b	2000a	2002b
Cape Town	17	24	7	14
Durban	19	22	17	31
PE	N/a	23	23	25
Gauteng	17	25	27	34
Mpumalanga	7	15	43	33

### Selected implications for policy/practice

- Substance abuse prevention approaches need to target children at a young age. Particular attention should be given to alcohol, tobacco, cannabis and M andrax. The focus should also include sexual risk behaviour.
- We need to develop a culture of responsible drinking.
- Interventions are required to address the problems associated with cheap, bulk alcohol (particularly wine).
- Increase the accessibility and utilization of substance abuse treatment facilities, especially by young persons and persons from historically disadvantaged areas.

### Selected issues to monitor

- The use of heroin, and particularly intravenous use.
- The contaminants mixed in with synthetic drugs.
- The decrease in referrals to treatment from health professionals.
- Demographic/social class shifts in patterns of drug use (especially heroin use among Africans (Gauteng and Cape Town) and Coloureds (Cape Town)).

### Selected topics for further research

- The complexities of the relationship between substance use and sexual risk behaviour.
- The role of parental, community and setting influences on alcohol/drug use among adolescents.
- The reasons for an increase in referrals to treatment by persons less than 20 years of age.
- Extent of substance abuse among people going to general practitioners.

**We acknowledge the financial support of the National Department of Health & Gauteng's Department of Social Services and Population Development**

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