



# New psychoactive substances in Europe

## The market

### Legal highs

Marketed in bright and attractive packaging. Sold openly in head/smart shops and online. Aimed at recreational users.

### Research chemicals

Sold under the guise of being used for scientific research. Aimed at 'psychonauts' who explore the effects of psychoactive substances. Sold openly online.

### Food supplements

Sold under the guise of being food or dietary supplements. Aimed at people wanting to enhance their body and mind. Sold openly in fitness shops and online.

### Designer drugs

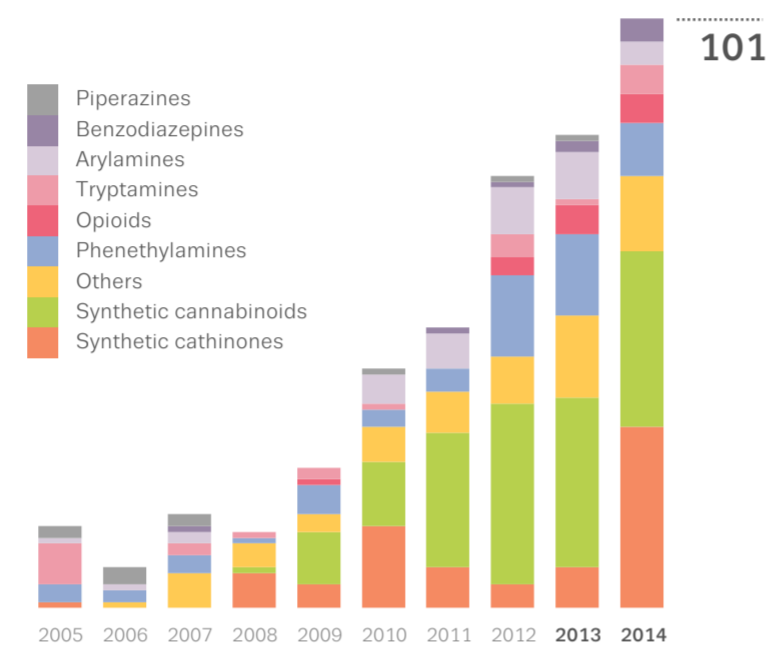
Passed off as drugs such as MDMA and heroin. Produced in clandestine labs by organised crime. Sold on illicit drug market by drug dealers.

### Medicines

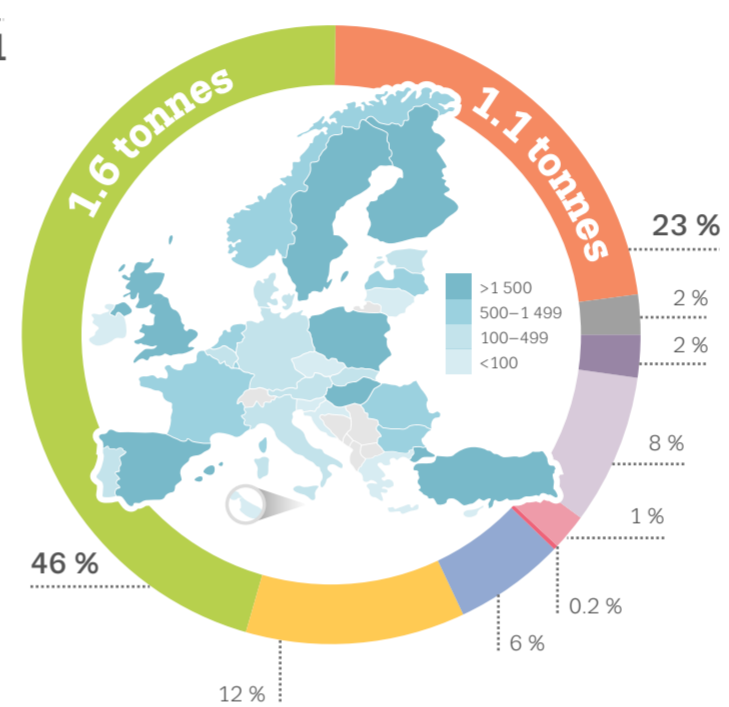
Medicines that are diverted from patients or illegally imported into Europe. Sold on illicit drug market by drug dealers.

## New psychoactive substances (NPS) — at a glance

Number of NPS reported to the EU Early Warning System, 2005–14



Number of NPS seizures and proportion of seizures by category of substance, 2013

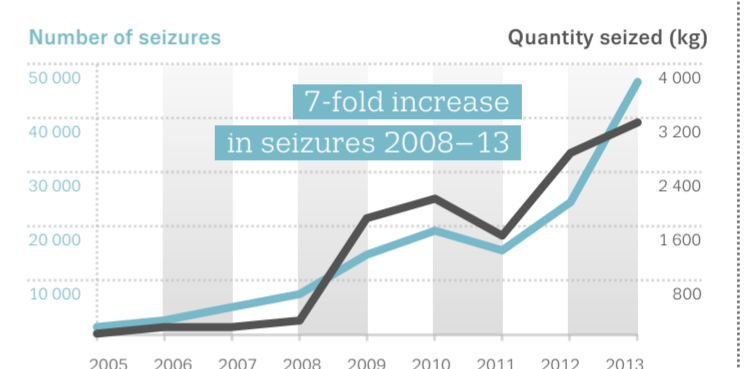


101 NPS reported for the first time in 2014

>450 NPS currently monitored

46 730 seizures amounting to more than 3.1 tonnes in Europe

Number of NPS seizures and quantity seized, 2005–13



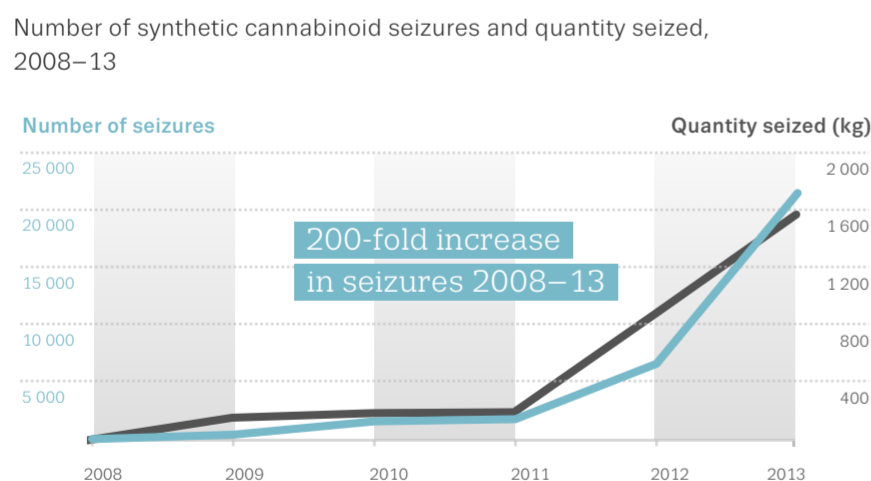
## From synthesis to consumer



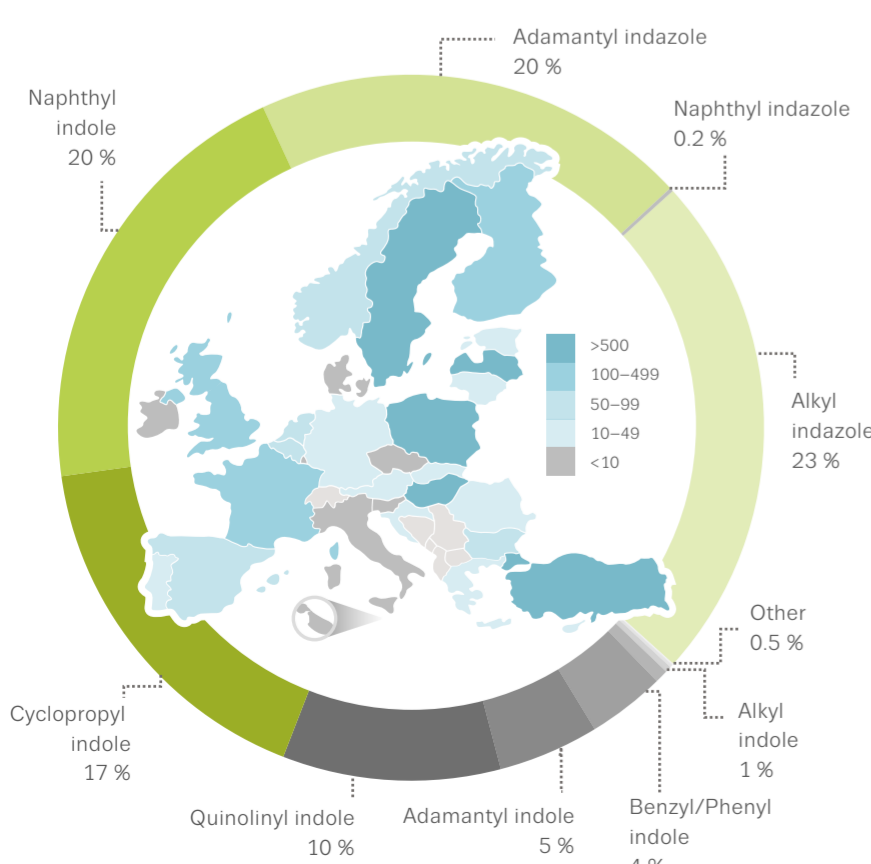
## Synthetic cannabinoids

Sold as 'legal' replacements for cannabis

21 495 seizures amounting to almost 1.6 tonnes in 2013



Number of synthetic cannabinoid seizures and proportion of seizures by sub-category, 2013



## EU Early Warning System

Since 1997, the EMCDDA has played a central role in Europe's response to new psychoactive substances. Its main responsibilities in this field are to operate the EU Early Warning System, with its partner Europol, and to undertake risk assessments of new substances when necessary. The EU Early Warning System works by collecting information on the appearance of new substances from the 28 EU Member States, Turkey and Norway, and then monitoring them for signals of harm, allowing the EU to respond rapidly to emerging threats.

Synthetic cannabinoids (left panel) and synthetic cathinones (right) make up the largest groups of new psychoactive substances monitored by the EMCDDA and, respectively, reflect the demand for cannabis and stimulants in Europe. However, the EMCDDA also monitors many new substances that come from a range of other groups, including phenethylamines, opioids, tryptamines, benzodiazepines, arylalkylamines and piperazines. All these substances require monitoring in order to identify signals of serious harms as early as possible. Opioids, for example, are of special concern for public health because they pose a very high risk of overdose and death. During 2014, serious harms that required urgent attention led to 16 public health alerts being issued by the EMCDDA, while 6 new substances — 25I-NBOMe, AH-7921, methoxetamine, MDPV, 4,4'-DMAR and MT-45 — required risk assessment by the EMCDDA's Scientific Committee.

Read the full report at

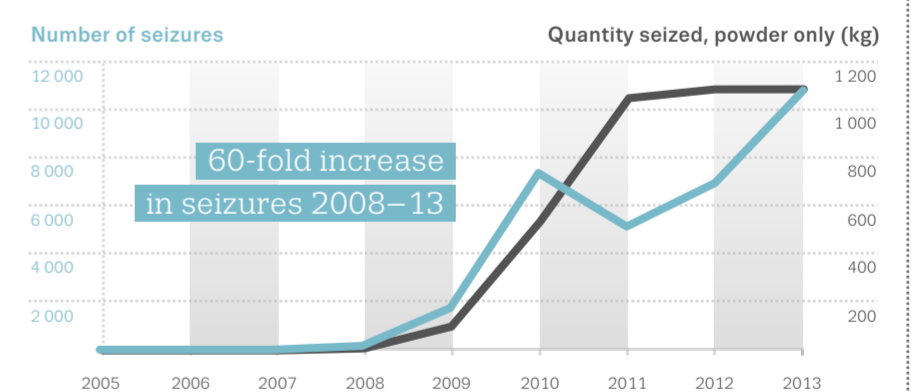
[emcdda.europa.eu/publications/2015/new-psychoactive-substances](http://emcdda.europa.eu/publications/2015/new-psychoactive-substances)

## Synthetic cathinones

Sold as 'legal' replacements for stimulants

10 657 seizures amounting to more than 1.1 tonnes in 2013

Number of synthetic cathinone seizures and quantity seized, 2005–13



Number of synthetic cathinone seizures and proportion of seizures by substance, 2013

