

# Psychoactive substances, users and markets: recent trends (2017-2018)

Clément  
Gérome,  
Agnès  
Cadet-Taïrou,  
Michel  
Gandilhon,  
Maitena  
Milhet,  
Magali  
Martinez,  
Thomas  
Néfauf

Since 1999, the Emerging Trends and New Drugs (*Tendances récentes et nouvelles drogues* - TREND) scheme of the French Monitoring Centre for Drugs and Drug Addiction (OFDT) has been monitoring emerging trends and phenomena in the field of drugs in order to limit the time between their occurrence and their consideration by the public authorities. The TREND scheme therefore provides a focus on people with high uses of psychoactive products. It is mainly based on qualitative data collected by the TREND sites network, located in eight metropolitan areas (see box on p.7). Systematically putting information into perspective, both locally and nationally, that has been collected from different sources, guarantees the reliability of the phenomena, which have been described here in a necessarily synthetic way.

Firstly, this issue highlights the developments that have particularly marked 2017 and the beginning of 2018: the impact of the unprecedented accessibility to cocaine, including in the form of crack cocaine; the fluidity between techno scenes and the crossovers of different party populations; the increase in the visibility of GHB-GBL use in party settings with lots of incidences of intoxication; the trivialisation of poppers use in increasingly diverse user groups; and finally, the slowing down of the emergence of new psychoactive substances (NPS), while their distribution seems to be focused on specific user profiles. The second part is about continuing phenomena that have already been described in previous years, but that are still thriving: the integration of “chemsex” practices, the popularity of ecstasy tablets, the increase in the availability and visibility of ketamine use and the dynamic heroin supply.

## ■ Key issues

### Exceptional accessibility to cocaine

Since 2013–2014, there has been a significant increase in the accessibility to cocaine. This situation seems to result from the efforts of the traffickers to facilitate the most socially integrated users, but also the poorest, purchasing this product (sold in microquantities) [1, 2].

Latest data from observations of the network of TREND sites and the whole scheme.



Since 2016, there has been an inflation in the amount and purity of cocaine available, which corresponds to a historically high level of Colombian production [3] and the increasing use of the French Antilles-Guiana routes [4]. 2017 saw the price of a gram of cocaine decrease after eight years of it increasing (table 1). This year is marked by a record level in the amount seized with a figure of 17.5 tonnes, an average purity of the cocaine confiscated in the street at 59% (i.e. more than double that of 2011) and an increase in the dealing spots [2].

As in 2016, this boost in the supply is reflected by an increase in cocaine use among people who are already occasional users rather than by new users taking it up [2]. The increase and trivialisation of opportunities for use, irrespective of the degree of social integration of the users, lead to them using more regularly and, for some of them, becoming addicted. In the general population, this observation is confirmed by the data from the 2017 Health Barometer that shows an acceleration in the increase of current use (use in the last twelve months) (1.6% among 18–64-year olds in 2017 vs 1.1% in 2014) [5], even though the experimentation level remained stable at 5.6%.

1. Social integration is assessed in terms of housing situation, nature of resources, strength of social connections, access to social protection and link to the world of work.

2. i.e., the seizing of less than 10 grams that are supposed to contain the product to finally be consumed.

This phenomenon primarily concerns 30–45 years old and this is confirmed by the quantitative data [5]. Several TREND sites (Rennes, Lille, Bordeaux, Lyon) also report that some young people (students, even high school students) have tried cocaine or have a more noticeable interest than in previous years. However, the figures from the Health Barometer indicate that younger people, who usually consume less of the product, particularly given its price, are not affected by the increase in use [5].

Among drug users who are familiar with social and health systems, the unusual accessibility of the substance is accompanied not only by an increase in use, with repeated injections for the poorest, but above all by a large shift in use towards cocaine, particularly among previously almost exclusive opiate users. Relapsing back to uncontrolled use by people who were controlling their use, or had moved away from drugs, has been regularly observed.

The combination of the circulation of this product at high concentrations and the increase in use is the reason for unusual effects (hallucinations, tremors, etc.), that destabilise users. It also led to an increase in incidences of intoxication. The DRAMES (Death in relation to drug and substance abuse) scheme therefore shows a doubling in the cases where cocaine is involved in drug-related deaths between 2013 and 2016, which makes up 18% of the cases recorded [6]. The higher occurrence of addictions among recreational users, reported by health professionals, has led to a recent increase in the number of treatment demands related to cocaine use. In 2017, these demands concerned 8% of new patients in specialised drug treatment centres (CSAPA), increasing by 32% since 2015, after several stable years [7].

**Cocaine base, an identical finding**

The question of the visibility of environments open to crack cocaine use and sale in Paris re-emerged in the media at the end of 2017. This was mainly due to temporary factors: moving dealing spots and user camps linked to law enforcement actions, cold spells in winter that prompted users to take refuge in the metro and the closure of a care facility [8]. The striking phenomenon over the 2017–2018 period, highlighted by all TREND sites, is in fact the major circulation of the use of cocaine base among the poorest drug users.

Cocaine basing involves adding an alkaline compound to cocaine powder, resulting in a form of the smokable product that produces shorter, but more intense effects. Until recent years, the

crack cocaine market, where cocaine is already sold as a base, has remained concentrated in the north east of Paris and its immediate suburbs in Seine-Saint-Denis. Since the 1980s it has mainly been frequented by users in a situation of extreme poverty. At the same time, since the mid-2000s, there has been a steady increase throughout France in the use of cocaine by smoking it in its base form, among socially integrated cocaine users. They experiment with this form of taking the drug which comes from the alternative techno party scene, then they start using it to look for more intense effects or because they have built up a tolerance to cocaine. Users, or people in their circle, base their cocaine themselves and potentially deal on a small scale, as has been seen in Rennes and Lille in 2017. Since 2010, such user profiles have appeared on the Île-de-France crack market [8]. In the other French regions, it is still the traditional practice that persists. This spread in smoking cocaine can be seen among cocaine users who go to harm reduction facilities (CAARUD): in 2015, 55% of them used it in its base form, compared to 40% in 2008 [8, 9]. However, recent developments in the cocaine market directly affect the crack market, whose accessibility has greatly increased since 2016 [8]. In addition, while the crack cocaine market remains centred in Paris, corroborating reports (CAARUD, law enforcement officers) show a spreading of points of sale in the Île-de-France counties (notably Essonne and Yvelines), but also in Oise (Hauts-de-France) [1] and even in Lille and Rennes where these “spots” remain sporadic.

CAARUD thus observed an increase in use from previously occasional users, but above all many switched to using cocaine base, undoing any progress made in controlling use and leading to a rapid worsening of social and health situations, for both socially integrated and semi socially integrated users. The Paris and Lille sites also reported some cases where primary cocaine use was of cocaine base. If the opening in 2017 in Paris [10] of the supervised drug consumption room revealed a higher than expected level of crack use by injection, when an opiate user starts using crack, this is more likely to lead to a decrease or discontinuation of injection practices. A sign of this spread of uses, observed by all TREND sites, is that the amount of equipment used to smoke crack is reported to have risen sharply and it is still never enough for all the centres that distribute it to the users [1, 8]. A recent estimate indicates an increase in the number of cocaine users in metropolitan France, from 12,800 (12,000–14,000) individuals in 2010 to just over 27,000 (25,000–29,000) in 2017 [11].

**Redesigning party settings and renewing party practices**

The observations made in 2017 confirm two enhancing transformations of techno party settings initiated in previous years: the revitalisation of the alternative movement, on the one hand, and the growing fluidity between alternative and commercial areas, on the other hand [1].

The alternative movement is still benefiting from a new impetus from younger generations of “party goers” who want to uphold its counter-cultural values (autonomy, independence, solidarity, etc.). The TREND sites located in Auvergne-Rhône-Alpes, Île-de-France and Brittany, mentioned that many sound systems were put together. In Brittany, where the alternative party scene is usually very active, nearly 40% of the sound systems are less than two years old and many of them are created by young people aged 20–25 or even minors.

This dynamism occurs in a context of tightening governance of the alternative techno movement. Police pressure on the organisers persists, and is even intensifying in some areas, particularly in Brittany, Île-de-France and Lorraine, where there were frequent seizures of sound equipment or personal belongings. Brittany accounts for nearly a third of the total number of seizures made in a tense environment between “party goers” and law enforcement. This climate encourages closer ties between existing collectives that come together to address certain risks involved (to organise a free party with several sound systems to limit financial costs in the event of a fine) and collectively organise protest demonstrations.

3. Samples analysed as part of the SINTES monitoring system, often in cases where there were health problems or unintended effects, had an average substance level of 68% in 2017.  
 4. This allows poor users to access it because this solid form is sold in microquantities without the stress of the basing process (location, time, equipment, expertise, minimum quantity of cocaine required).  
 5. In other words, it is part of a movement driven by values that are intended to be at odds with the dominant culture, like free parties.  
 6. Need to increase the doses to feel the same effect.  
 7. The Parisian crack rock is available for 13 to 15 euros or for an exchange or even for sexual services.  
 8. Socially integrated users but who are struggling to get into or stay in the job market.  
 9. The sound equipment used at a free party and, by extension, the group of party organisers who use this equipment or make it available.  
 10. The Freeform association (association for mediation and reduction of organisational risks linked to the practice of partying) recorded around thirty seizures over three years (2014 to 2016), compared to around thirty in 2017 alone (<http://fr.traxmag.com/article/41875-free-party-les-saisies-de-sound-systems-grimpent-en-fleche-a-lapproche-des-legislatives>).  
 11. In March 2017, a day of national action was organised. “Demonstrations” were held in Marseille, Paris, Toulouse, Strasbourg, Nantes, Clermont-Ferrand and Lyon, bringing together more than 180 sound systems.

Table 1. Prices of the main substances as observed by the TREND scheme (price in euros for 1 gramme, unless stated otherwise)

|   | 2000<br><i>(in constant euros)</i> | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | General trend |
|---|------------------------------------|------|------|------|------|------|------|------|---------------|
| Heroin  | 76                                 | 40   | 43.5 | 46.5 | 42.5 | 40.5 | 40   | 40   | →             |
| Cocaine   | 108                                | 68   | 70.6 | 76.6 | 80   | 84   | 85   | 80   | ↘             |
| Ecstasy (tablets)                               | 19                                 | 7    | 10   | 8    | 10   | 10   | 10   | 10   | →             |
| MDMA powder                                     | NA                                 | 63   | 56   | 55   | 55   | 54   | 52.5 | 48   | ↘             |
| Cannabis resin                                  | NA                                 | 5.5  | 7    | 6.5  | 7.5  | 7    | 6.5  | 5    | ↘             |
| Herbal cannabis                                 | NA                                 | 8    | 9.5  | 10.5 | 10.5 | 10.5 | 10.5 | 10   | →             |
| Amphetamines                                    | 19                                 | 15.5 | 14   | 14   | 15.5 | 13   | 15   | 15   | →             |
| LSD (blotter)                                   | 11                                 | 10   | 10   | 10   | 10   | 10   | 10   | 10   | →             |
| Morphine sulphate<br>(tablets 100 mg or 200 mg) | 9                                  | 8.5  | 8.3  | 8.5  | 10   | 10   | 10   | 7.5  | ↘             |
| Buprenorphine (tablets)                         | 8                                  | 4.5  | 5    | 4    | 4    | 4    | 4.5  | 4    | →             |

Source: TREND data from ethnography / TREND-OFDT

NA: data not available

Notes: The value displayed is the median of the “central values” of each TREND site, rounded to the nearest 0.5. These central values either correspond to the current price (most frequent based on the predominant type of network/area), or to an average of the prices charged in several areas/networks if they cannot be ranked. The prices displayed for the year 2000 have been converted into constant euros (2017).

In addition, in 2017, a growing fluidity between alternative and commercial events was observed. This is due to the increase in the number of paid urban events that bring together several types of electronic music programming, thereby facilitating a mixture of the different sub-populations of the techno movement. On a night out, alternative movement regulars (party goers) rub shoulders with those who normally frequent the gay scene and fans of clubbing.

This phenomenon is particularly evident in Île-de-France, where an urban scene is developing at the crossroads of different party worlds. This new option adopts some of the codes from the alternative world (tolerance to psychoactive products, advanced musical programming), and others from the gay party scene (freedom to wear what you want and freedom in sexual behaviour), while keeping the commercial aspects of a commercial night out (you pay to get in and for your drinks, security, you can't bring your own alcoholic drinks on site, etc.).

Observations conducted in Lyon also reported these crossovers between different populations of the techno movement. Therefore, social groups that usually go to commercial venues (bars, clubs, concert halls and festivals) are looking for squat parties because of

the underground atmosphere (free, lack of security, freedom of use, easy to get substances). On the other hand, people who normally go to alternative scenes go to clubs, as the atmosphere and musical programming are similar to that which you would find at free parties.

However, with the mixing of social groups comes opposition and sometimes conflict “from distinction and differentiation strategies based on cultural affiliations: rejection of the clubber figure at squat parties, of the “party goer” and hallucinogens in clubs, “addicts” in the gay scene, injectors at chemsex parties” [12].

The overlapping of different social groups increases the availability of products that are typical to the alternative environment (hallucinogenic and dissociative drugs such as LSD and ketamine) or gay parties (GHB–GBL) for people whose culture is very different to one where psychoactive substances are used. When these people, who are not very well informed of the risks associated with the use of such substances, experiment, this can cause health problems, as is the case with GHB–GBL.

#### Spread of GHB–GBL outside of insider circles

GBL (gamma butyrolactone) is an industrial solvent, a precursor to GHB, and an anaesthetic substance, which, once

ingested, provides the same euphoric then sedative and amnesiac effects. This is why, although GBL is currently circulating, some users still talk about GHB [13]. Since the early 2000s, the TREND scheme has sporadically reported the use of GHB–GBL in clubs by a marginal group of users in the gay community [14]. The product is also very common during chemsex sessions held at home, which developed strongly in the late 2000s. It is now used to stimulate sexual desire and when looking for endurance and sexual performance [15, 16].

While GHB–GBL use is usually rare outside the gay party scene, 2017 was marked by the recurrent observation of practices that were sometimes repeated during conventional, alternative and gay electro nights out and festivals in several metropolitan areas, notably in Paris, Lyon and Bordeaux. In Lyon, GHB–GBL use was observed “at all stages of nights out: before the night out, on the night out, and at the after party, both in public dance areas and sexual areas” [17]. In Paris, use is gradually spreading “in the sub-areas of the techno party environment, whether it is at festivals, clubs, private parties or even free parties” [18].

12. Gay clubbing does not involve all gay people but gay people who frequent urban circles where a particular attention is paid to their body and to sexual encounters.

The population of users in a party context is rather young, both female and male and heterosexual and homosexual, and they are looking for effects that are similar to those of MDMA and/or alcohol (euphoria, increased perceptions, empathy, lower inhibitions). Indeed, some of these users report that GHB-GBL makes them feel intoxicated in a similar way to alcohol, for a much lower price. The product, which is available on the Internet at low prices, is very rarely resold in a party establishment (when this is the case, it is sometimes sold in doses for 10 or 20 euros). It is usually shared within the peer group. At free parties, use remains relatively marginal.

The ethnographic observations conducted in Paris highlight two mechanisms at the origin of this process of spreading GBL outside the gay party scene: people returning to France who have experienced and enjoyed GBL in clubs in Berlin or London, where the product is popular, and the development of an alternative techno party scene, where different sub-populations of party goers meet, notably gays and “party goers” (see above).

The increase in GHB-GBL use - in an MSM (men who have sex with men) sexual context since 2010 and in a party context in 2017 - has been accompanied by an increase in acute intoxication and loss of consciousness, commonly known as G-Hole. In Île-de-France, the number of comas recorded by the Regional Abuse and Dependence Monitoring Centre (CEIP-A) rose from 9 in 2014 to 30 in 2017, leading to a doubling in the overall number of comas related to drug use (without alcohol) between 2014 (13%) and 2017 (27%). In rare cases, this acute intoxication leads to death [19]. This increase in incidences of intoxication is explained by the lack of knowledge of the risks associated with GHB-GBL by new users, whether they use them in a sexual context or on an electro night out. Unfamiliar with the precise dosages required for “recreational” use, they also take GHB-GBL with other substances, particularly alcohol, which considerably increases the risk of losing consciousness.

G-hole or respiratory depression are not the only risks. GHB-GBL can be addictive when consumed regularly. In 2017, the Paris TREND site again reported an increase in treatment requests for GBL addiction from chronic users who use the product on a daily basis, outside of a party or sexual context.

**More visible use of poppers**

Over the last two years, several sites (Paris, Lyon, Rennes, Bordeaux, Lille) have reported an increased visibility

**The re-emergence of nitrous oxide?**

Nitrous oxide, more commonly known as “laughing gas” or “nitrous”, is used in the medical field for its anaesthetic and analgesic properties and as a compressed gas aerosol spray that is particularly used for food. Misuse of nitrous oxide has been intermittently observed at free parties since 1999 by the TREND scheme. But from 2015 onwards, it became readily available on alternative party scenes. Extracted from industrial cylinders, it is packaged in balloons that are sold for between 1 and 2 euros each. Valued for its fleeting and euphoric effects, it is mainly used to potentiate or control the effects of other products used.



Uses are also reported in other party settings: at a general festival in Île-de-France, at a student night out (this was particularly noted on “medicine” nights out in Bordeaux, Lyon, Paris and Lille) where the product is sought after and use is quickly trivialised (canisters ready to take at the bar on some nights out in Lyon).

In 2017, the prominence of nitrous oxide in public places increased in the Lille metropolitan area, where empty canisters littered the pavements of some districts, reflecting the mass scale of its use. The TREND site in Lille has identified different user profiles: young people involved in drug trafficking, prostitutes, poor people, but also secondary school pupils. However, further investigations are still required to confirm these observations.

The TREND sites in Lille and Bordeaux stress the lack of information for users, particularly for younger users, about how dangerous the product is. Providing information on nitrous oxide is all the more necessary as repeated and frequent use over too short intervals can lead to headaches, dizziness, and also serious heart rhythm disorders (especially if the gas is taken with stimulants) and a risk of asphyxiation (1 death in 2016).

in the use of poppers in commercial party establishments with techno music (clubs) and conventional music (bars, nightclubs). A sign of the trivialisation of the product is that ethnographic observers often reported a distinctive smell of poppers on club dance-floors and described use as completely accepted in public, with the bottles going around from hand to hand in a friendly atmosphere.

Various social groups use these drugs. When they first experience partying at a nightclub or a private space, high school students and college students take poppers in groups, as they look for the euphoric and hilarious effects that the product provides. Electro club regulars use them to potentiate the effects of other stimulants, mainly cocaine and MDMA, while people from the LGBTQ community who more specifically go to gay parties and gay sexual spaces (saunas, backrooms, private apartments, etc.) use the product to stimulate libido and for sexual practices. The observations made by all TREND sites show that these user groups do not consider poppers as a drug, but as a fun and friendly product that is safe, both due to its transient effects and its legal status.

The invalidation of the decree prohibiting the sale and transfer of poppers to the public has indeed increased their accessibility. Besides the Internet, poppers can also be bought directly at party venues (bars, clubs), in some tobacco shops, in specialised shops (sex shops, but also shops that sell electronic cigarettes, shisha, etc.). In 2017, the TREND sites in Lyon and Lille described manufacturers’ marketing strategies to make them more attractive to potential users, particularly younger users: personalising products, developing new brands, describing the different kinds of effects and their varying intensity based on the molecules in the liquid, highlighting the different flavours, etc.

13. GBL is not classified as a narcotic drug due to its widespread use in the industry, unlike GHB, which was banned in 2001.  
 14. Acute GHB-GBL intoxication can lead to losing consciousness to varying degrees and respiratory depression, with a risk of death.  
 15. The DRAMES survey identifies at least one death a year (ANSM - French National Agency for Medicines and Health Products Safety, CEIP-A).  
 16. Lesbian Gay Bi Trans Queer.  
 17. Room in certain establishments (bars, clubs) frequented by homosexuals, where users meet for sexual relations.  
 18. Decision of the Council of State n° 35248 (OJ 07/06/2013) which revokes the decree of 29 June 2011 prohibiting the sale and transfer to the public (OJ 07/07/2011).

The increasing accessibility of poppers and the growing visibility of their use are accompanied by new patterns of use: an extinguished cigarette is soaked in the product which is then sucked as it is; the poppers are mixed in a soft drink and the vapours are then inhaled, etc. Several TREND sites reported an increase in incident reports in 2017, in line with these new methods of use. These incidents are particularly due to inadvertent use or due to an advanced state of intoxication. Cases of dependency have also been reported by the monitoring network for serious adverse effects and the TREND scheme.

### NPS, a contained circulation

The increase in NPS seems to be slowing down, with only 15 new identifications in 2017 [20]. The information transmitted by the TREND sites is more and more focused on cathinones (mainly 3-MMC and 4-MEC), hallucinogens, psychedelics or dissociatives (DMT, 2C-B, 25x-NBOMe, 1p-LSD, MXE), and synthetic cannabinoids in e-liquid form (particularly 5F-AKB48).

However, 2017 was particularly marked by the health authorities' concern about the possible distribution of fentanyloid NPS. Some intoxication cases, some of which were fatal, were indeed recorded in 2016-2017 but were localised and isolated (particularly in Paris and Lyon). This situation helped prompt new rumours among urban users about the possible use of these substances as cutting agent, primarily for heroin. SINTES toxicological analysis and available forensic information have not demonstrated this on a national level. However, word of the use of NPS as cutting agent or as replacement for hallucinogens on the alternative party scene always seems to find its way back. In spite of the few studies that show their actual presence [21, 22], it is still impossible to assess the extent of this phenomenon without major drug checking survey. Nevertheless, SINTES results and reports from harm reduction facilities carrying out sample tests show that the main cathinones sought could be more easily substituted by others that are less well-known.

Cathinones' visibility, which have a positive image despite their higher death rate, remains associated with problematic MSM practices. A shortage of 3-MMC between summer and autumn 2017 led users to look for potential replacement cathinones (3-MEC and 4-CMC in particular) and to contact dealers outside their usual circle of friends and acquaintances. A few dealer arrests from less specific areas illustrate this point. Although it is not possible to establish a cause-and-effect relationship, three sites (Bordeaux, Lyon, Paris) report a

fragmented circulation of 3-MMC in other settings such as the heterosexual libertine environment, or the commercial clubbing party setting.

Hallucinogenic NPS are present on the alternative party scene and gradually seem to be retaining a market of their own. The most frequently cited products are still DMT, but also 2C-B and 25I-NBOMe. These are more widely available for sale than dissociative NPS. These dissociative NPS are still actively researched by some users, who are always willing to find an equivalent that is as close to ketamine as possible. Indeed, ketamine is still sometimes not available to meet the demand (see below). MXE, which since 2013 had almost disappeared, is now specifically dealt locally, via the darknet. Furthermore, on online forums, synthetic cannabinoids in e-liquid form continue to attract readers looking for information or to be dealt in small-scale trafficking aimed at high school students.

### ■ Lines of force still in effect

#### Chemsex: an embedding of practices

First reported by the Lille and Metz sites in 2017, chemsex practices continue to attract the attention of field observers at all the other TREND sites. Although a minority among all MSM, chemsex involves very diverse socio-demographic profiles and drug use [16].

Observations conducted in Lyon, Bordeaux and Paris underline the increasingly uncomplicated nature of exchanges around chemsex practices on social networks, attesting to their embedding among MSM who use dating apps for this purpose. Some of them talk about the expected drug use and sexual practices by using shared codes, but sometimes any form of discretion is abandoned, as the names of the products, the expected patterns of use and the supply methods are negotiated before they meet up.

At the same time, there is an increased visibility of products being trafficked to be used as part of chemsex on online dating platforms. The Parisian site has reported the emergence of specific user-dealer profiles acquiring large quantities of substances used in a sexual context (particularly cathinones) that are then dealt online. These traffickers are a part of the chemsex milieu themselves or they move in similar circles.

This year, observers alert about the lack of knowledge and control of harm reduction actions in these populations, in terms of injection (slam) but also on the ways products are used although they have long been consumed in sexual contexts, such as GHB-GBL.

Apart from a few experienced users, or people working as medics or paramedics, the sterility procedures and conditions necessary to reduce the risk of infection (bacterial and viral) and venous damage associated with drug injection are not observed among slammers. The Lyon site reported that when people started injecting, they referred to media sources that showed incorrect harm reduction steps: online tutorials or pornographic videos featuring slam sessions.

These signs are all the more worrying as some of the chemsexers, refusing to identify themselves as "traditional" drug users, are keeping away from harm reduction and addiction support facilities.

#### MDMA: a success for ecstasy tablets linked to the dynamic supply

Following on from observations made in previous years by TREND sites, the presence of MDMA (in its crystal/powder and/or tablet form) at all kinds of party events seemed to increase even further in 2017. There is a wide range of social profiles for regular users and experimenters: regular free party goers, clubbers, young workers, students, high school students, etc.

This ever-increasing distribution of the product, both geographically (areas of drug use) and sociologically (diversification of user profiles), is based on the dynamic supply and is explained more specifically by the commercial strategies and merchandising techniques of manufacturers targeting potential young users. In 2017, all TREND sites saw an abundance of ecstasy tablets in different colours and shapes. Their logos refer to the younger generations' popular culture: cartoon characters, characters from video games or series, logos for clothes brands, alcohol, luxury cars or football clubs, etc. For example, the TREND scheme identified 82 different ecstasy tablet logos on the party scene in Hauts-de-France in 2017. As a result of this marketing strategy, young users no longer refer to the substance they are using by name, but by the logos on the tablets.

The popularity of ecstasy tablets is growing at the expense of the crystal/powder form of MDMA. This other form is not as readily available, is used less and is less sought-after, as can be seen by the sharp decrease in "parachute" sales (a

19. Molecules similar to the fentanyl molecule, a potent opioid substance prescribed for severe pain and scheduled in the narcotics list.

20. According to DRAMES (CEIP-A/ANSM): 2 cases were directly linked out of 285 in 2013; 5 cases out of 243 in 2014; 15 cases out of 343 in 2015.

21. The darknet refers to the area of the deep web (not indexed by web search engines) dedicated to illegal activities.

small amount of MDMA in a sheet of cigarette paper) observed in 2017 by the Metz, Lyon, Paris, Lille and Rennes sites.

The very positive representation of MDMA in its tablet form is based on the fact that it meets users' expectations who are looking for physical sensations in a party setting (reduced inhibitions, euphoria, increased perception of music). Users interviewed would often insist on the quality and intensity of the effects. Many of these users (especially the youngest and first-time users) emphasised that they are interested in the product because of how it interacts with alcohol, due to the good balance between quality-effect and price and the fact they consider it to have a lack of side effects. The user perception of a good quality/effect/price ratio is corroborated by the toxicological analyses carried out by the SINTES scheme, which notes an increase in the average MDMA content of the tablets seized compared to eight years ago, while the average content has stabilised over the last three years or so [23].

Several TREND sites emphasise the varying levels of user knowledge about the effects of the product and the risks of taking it with other substances. The lack of information on MDMA content in ecstasy tablets is at the root of bad trips and intoxication that regularly require risk reduction teams to intervene in party environments. Feedback involving negative experiences and descriptions of unpleasant side effects (feeling "like your legs have been cut off", nausea and vomiting, agitation, difficulty expressing yourself, feeling paranoid) is not unusual. However, the serious health problems reported by the TREND scheme seem rare when compared with the level of MDMA use.

**Ketamine more popular on the alternative party scene**

Ketamine is a veterinary and human anaesthetic whose recreational use emerged on the alternative party scene (free parties, teknivals, etc.) during the 1990s. Since 2014, all TREND sites have reported a higher availability of the product in these areas, with only a small proportion of the product being of pharmaceutical origin. In 2017, ketamine was almost always accessible, while recurrent shortages and demand exceeding supply were previously reported.

With the higher availability of ketamine, driven by the emergence of small user-dealer networks, there was also an increase in the visibility of use, to be compared with the improvement of its image. By the beginning of the 2010 decade, for a minority of users, ketamine had lost all status as a drug, as it had radical adverse effects on party

spirit, leading to the user being isolated from the rest of the party "community". From 2015 onwards, the image of the product was "de-diabolised" [24], particularly after the decline in methoxetamine "scams", sold in the place of ketamine at the beginning of the 2010 decade [25]. Its popularity is growing among an ever-increasing number of users at the alternative party scene. Unlike their predecessors, the younger generations of "party goers" (under 25s) think of it as a "euphoric" and "playful" substance [24]. Therefore, at several TREND sites, ketamine has become "extremely present" [17], "fashionable" [26, 27] at a free party, or even "as popular and widely used as LSD, ecstasy, amphetamines or cocaine" [28].

Changes in representations of ketamine are driven by a "domestication" of its use: in 2017, the powerful dissociation and out of body effects (depersonalisation, an out of body sensation, introspection) induced by a high intake are now only sought by a minority of users. Most of them aim for an inebriated feeling and the slightly stimulating effects (loss of balance, temporary euphoria) induced by a moderate use of the product. The brevity of the effects (between 30 minutes and an hour) is valued because it allows you to take ketamine more easily with various other drugs throughout the night (stimulants such as cocaine and MDMA, but also other hallucinogens such as LSD at free parties). Controlling use in this way therefore transforms the temporality of ketamine use. Ketamine tends to be used throughout the night and it is no longer just taken in the early hours of the morning to manage the "coming down" from stimulants used throughout the night. Finally, from the users' point of view, the day after the party there are no undesirable effects and physical signs to indicate that they took the drug, combined with the fact that the product is (still) undetectable by saliva tests by the police, contribute to the product's popularity.

In addition, the sites in Lyon, Metz and Paris report a sporadic and occasional distribution of ketamine to commercial party venues (clubs and electro urban parties), with dealers offering ketamine near bars and clubs. The Paris site mentions cases of home delivery by networks that regularly sell cocaine and MDMA. This availability encourages user groups to experiment that are from a rather different socio-cultural background to the average user. Unfamiliar with hallucinogenic substances and more frequent users of stimulants (cocaine, MDMA), these clubbers only frequent free parties every once in a while. Reports of ketamine use in an MSM sexual context have also increased since 2016–2017 in Paris and Lyon, even if this is not a massive

phenomenon. The product is sold on some dating site apps. It is used with cathinones during chemsex sessions.

In connection with this spreading circulation, the Lyon site is seeing an increase on the party scene in the number of cases where risk reduction teams have had to take over because of this product. While those intervening sometimes insist on the seriousness of incidents related to use (loss of balance that can lead to injuries, memory difficulties, loss of consciousness with the risk of hypothermia, etc.), they point out that these cases are few and far between on the scale of its use. But the fact remains that in 2016 the first deaths related to ketamine use were recorded by the DRAMES survey [6].

**Heroin: towards an increased strain on supply?**

The new dynamic in heroin supply observed in 2016–2017 by certain TREND sites (Lyon and Toulouse) is confirmed this year. In Auvergne-Rhône-Alpes, where Albanian networks that have come from Switzerland have relocated since 2012, we are witnessing an expansion of their geographic location towards the west of the region. This development shows that, as in 2012, it is no longer simply a question of moving trafficking routes, but of a desire to conquer new markets. In this respect, it can be assumed that these networks benefit from the lower availability of heroin in Auvergne due to the poor structuring of the supply. The establishment of Albanian networks facilitates access to the product for a population of people undergoing opioid substitution therapy (OST) or morphine sulphate users.

This objective to expand the market can be seen not only geographically, but also sociologically. These networks, which until then mainly targeted people who were more socially integrated, who were able to pay 100 euros to buy five-gram bags of heroin, would now target a more modest clientele, as can be seen by a general decrease in the price of a 5g bag (80 euros vs 100 euros) and the emergence of half bags. It is not currently possible to determine whether these networks will succeed in changing the face of the opiate market in the Lyon metropolitan area. As in many other metropolitan areas, it is characterised by a dichotomy between relatively socially integrated users taking heroin and street users taking Skenan® and/or Subutex®.

22. In clubs, a glass of strong alcohol normally costs between 8 and 16 euros, for an effect that is both limited in intensity and time, while an ecstasy tablet will be sold for 10 euros and can be shared between several users.  
 23. That is, the rather abrupt end or decline in the effects.  
 24. The predominant form of heroin circulating in France is brown heroin, that is produced in Afghanistan.

In Toulouse, there is a certain boost in the supply in an environment that up until now was marked by a relatively poor accessibility to heroin. In 2016, a dealing spot was reported in the Mirail suburb, where trafficking networks, particularly for cannabis resin, are well established. In 2017, in another district, a second point of sale appeared before being disbanded by the police. More generally, the actors in the health sector refer to a product that “resurfaced”. There seem to be two prevailing user profiles: injecting Skenan® users, who frequent CAARUDs, and who occasionally snort or inhale it; people on OST that are back on heroin. More marginally, the site reports on people from the party scene using heroin, very rarely by injection, in order to regulate their use of stimulants or hallucinogens.

The Lille site emphasises the greater visibility of heroin trafficking on the streets and in the hallways of council housing in the south of the city. This situation is not new, as the Lille metropolitan area is particularly affected by trafficking because of its proximity to the Netherlands, which is a hub for the redistribution of heroin in Western Europe. However, it seems that the phenomenon is getting worse and that the metropolitan area itself is becoming an area where heroin is traded both wholesale and semi-wholesale, offering the lowest prices in France. The Toulouse and Rennes sites confirm this by reporting the trend, in the case of small networks, towards sourcing from northern France.

In the Paris region, heroin’s availability and accessibility remain highly contrasted. Not very visible in the inner-city of Paris, it seems to be confined to small inner networks. However, in Seine-Saint-Denis, Sevrans and Aulnay-sous-Bois, trafficking, along with injecting in public places, is becoming more and more apparent. The social groups concerned are made up of very marginalised homeless injecting users but also more socially integrated users who come to obtain supplies, who have sometimes come far and whose use is more discreet.

Therefore, heroin trafficking and use in France remain active and require special monitoring, particularly in an environment where the heroin supply, due to record opium production in Afghanistan, risks becoming more abundant [3].

## ■ Conclusion

The major phenomenon arising from this TREND 2017-2018 reporting period is the marked acceleration of the circulation of cocaine in powder and/

## TREND scheme

TREND relies on a network of eight local coordinating sites (Bordeaux, Lille, Lyon, Marseille, Metz, Paris, Rennes, Toulouse) with a common information collection and analysis strategy. The data collection tools used are mainly qualitative: continuous ethnographic observations conducted in urban areas and on the party scene, questionnaires are administered to structures or associations in contact with drug users, focus groups (“health”, “law enforcement”) that aim to rapidly establish overviews of the situation with professionals in the field.

TREND also relies on:

- SINTES (National Detection System of Drugs and Toxic Substances), an observation system geared towards detecting and analysing the composition of illegal substances on the national territory;
- the monitoring of virtual spaces and NPS;
- recurrent quantitative surveys, such as the ENa-CAARUD survey among drug users seen in French low-threshold structures certified as CAARUDs;
- information systems supervised by the CEIPs (Centres for evaluation and information on pharmacodependence) and the ANSM (National Agency for Medicines and Health Products Safety), the OCRTIS (Central office for the repression of drug-related offences) and the INPS (National forensic science institute) and finally, other OFDT surveys.

While these investigations reflect realities from the field that are mainly confined to metropolitan areas, the TREND scheme also carries out investigations that analyse changes in use in various contexts (rural areas, counties overseas, working-class areas, etc.), thanks in particular to the financial support from the Île-de-France, Auvergne-Rhône-Alpes and Indian Ocean regional health agencies (ARS) and as of 2019, the Provence-Alpes-Côte d’Azur and Hauts-de-France ARS.

For more information on the TREND and SINTES methodology, consult: <https://en.ofdt.fr/surveys/>

To consult the 2017 summaries of the TREND sites (in French): <https://www.ofdt.fr/index.php?cid=755>

or base form (crack/free base), which began at the end of the 1990s. This circulation seems to be driven by the fact the product is widely available and its unprecedented purity levels that are changing patterns of use or treatment pathways for many users of psychoactive substances.

This dynamic reflects observations from TREND data from recent years on the circulation of other substances. It seems that we are witnessing a gradual focusing on a socially integrated population seeking psychoactive effects in a recreational setting, a trivialisation of opportunities for use, a diversification of products consumed and, ultimately, an increase in use. Therefore, ketamine, which was still branded as the “horse drug” at the start of the decade, can now, like LSD, be seen to be used much more frequently and in much less exceptional circumstances than before (“with the aperitif” or even after work, on weekday evenings for example). Inhaled substances, such as poppers or

nitrous oxide, are consumed in a totally “harmless” way, while GHB-GBL has returned to the party scene.

The hybridisation of current party scenes certainly plays a role in this development, by promoting a certain fluidity between different social groups. Substances such as ketamine, GHB-GBL or poppers, which were originally circulated in restricted and very specific environments, and by people looking for radical experiences (dissociation, “extreme” sexual practices), are used by larger party populations. At the same time, dealers’ dynamic commercial approach (telephone reminders, promotional offers, approaching potential users on the street, etc.) constantly puts more pressure on users. As a result, the recreational use of multiple substances on the party scene, but not exclusively, appears to be providing increasingly more problems with use, as can be seen by the treatment demands related to cocaine, but also with products such as cathinones or GHB.

## bibliography

1. Cadet-Taïrou A., Gandilhon M., Martinez M., Néfau T. and Milhet M., [Psychoactive substances, users and markets: recent trends \(2015-2016\)](#), Tendances, OFDT, n° 115, 2016, 8 p.
2. Cadet-Taïrou A., Gandilhon M., Martinez M., Milhet M. and Néfau T., [Psychoactive substances, users and markets: recent trends \(2016-2017\)](#), Tendances, OFDT, n° 121, 2017, 8 p.
3. UNODC, World drug report 2018, New York, United Nations Office on Drugs and Crime, 2018.
4. Gandilhon M. and Weinberger D., [French Antilles and Guiana: on the international cocaine trafficking routes](#), Drugs, international challenges, OFDT, n° 9, 2016, 8 p.
5. Spilka S. et al., [Levels of illicit drug use in France in 2017](#), Tendances, OFDT, n° 128, 2018, 6 p.
6. CEIP-A Grenoble, DRAMES. Principaux résultats de l'enquête 2016, Saint-Denis, ANSM, 2018, 2 p.
7. Palle C., Brisacier A.-C. and Protais C., Workbook 3.2: Treatment, In: OFDT (Dir.), 2018 National report, Saint-Denis, OFDT, 2018.
8. Pfau G. and Cadet-Taïrou A., [Usages et vente de crack à Paris. Un état des lieux 2012-2017](#), Saint-Denis, OFDT, Théma TREND, 2018, 43 p.
9. Lermenier-Jeannet A., Cadet-Taïrou A. and Gautier S., [CAARUD client profiles and practices in 2015](#), Tendances, OFDT, n° 120, 2017, 6 p.
10. Avril E., Salle Jean-Pierre LHOMME - Espace GAIA, Paris. Bilan, enjeux et perspectives, Commission des stupéfiants, Saint-Denis, 05-04-2018, ANSM.
11. Le Nézet O., Néfau T., Gandilhon M., Cadet-Taïrou A., Janssen E. and Adès J.-E., Workbook 2: Drugs, In: OFDT (Dir.), 2018 National report, Saint-Denis, OFDT, 2018
12. Tissot N., Phénomènes émergents liés aux drogues en 2017. Tendances récentes sur le site de Lyon, CAARUD RuptureS ; ARS Auvergne-Rhône-Alpes ; OFDT, 2018, 105 p.
13. Cadet-Taïrou A., Gandilhon M., Toufik A. and Évrard I., [Phénomènes émergents liés aux drogues en 2006. Huitième rapport national du dispositif TREND](#), Saint-Denis, OFDT, 2008, 189 p.
14. Cadet-Taïrou A. and Gandilhon M., [Usages de GHB et GBL. Données issues du dispositif TREND](#). Memo n° 09-3, Saint-Denis, OFDT, 2009, 7 p.
15. Fournier S. and Escots S., [Homosexualité masculine et usages de substances psychoactives en contextes festifs gais](#). Enquête à Paris et Toulouse en 2007-2008, Saint-Denis, OFDT, 2010, 172 p.
16. Milhet M. and Néfau T., Chemsex, slam. Renouveau des usages de drogues en contextes sexuels parmi les HSH, Saint-Denis, OFDT, Théma TREND, 2017, 32 p.
17. Tissot N., Phénomènes émergents liés aux drogues en 2016. Tendances récentes sur le site de Lyon, Lyon, Association ARIA - CAARUD RuptureS, 2017, 69 p.
18. Pfau G., Francia M. and Péquart C., Phénomènes émergents liés aux drogues. Tendances récentes sur les usages de drogues à Paris en 2017, Saint-Denis, OFDT, Association Charonne, 2018.
19. Gérome C. and Chevallier C., [Surdoses de GHB/GBL](#). Memo n° 2018-01, Saint-Denis, OFDT, 2018, 11 p.
20. Martinez M., Néfau T. and Cadet-Taïrou A., [New psychoactive Substances - Ten-year overview of the situation in France](#), Tendances, OFDT, n° 127, 2018, 8 p.
21. Dumestre-Toulet V., et al., « NPS dans la salive de conducteurs aux abords de festivals de musique dans le sud-ouest à l'été 2017 », Toxicologie analytique et clinique, Vol. 30, n° 3, 2018, pp. 170-171.
22. Labadie M., et al., « Projet Musitox® : consommation de substances psychoactives lors des festivals de musique en Aquitaine en 2017 », Toxicologie analytique et clinique, Vol. 30, n° 3, 2018, pp. 171.
23. Néfau T., Le Point SINTES n° 4, Saint-Denis, OFDT, 2018, 13 p.
24. Gandilhon M., Cadet-Taïrou A. and Martinez M., [Use of ketamine in France: recent trends \(2012-2013\)](#). Memo 2014-7, Saint-Denis, OFDT, 2014, 8 p.
25. Lahaie E. and Martinez M., [Méthoxétamine](#). Memo of 5 December 2011 (Updated 24 October 2012), Saint-Denis, OFDT, 2012, 7 p.
26. Lose S., Phénomènes émergents liés aux drogues. Tendances récentes sur le site de Lille en 2017, Lille, CedrAgir ; OFDT, 2018.
27. Pavic G., Phénomènes émergents liés aux drogues. Tendances récentes sur le site de Rennes en 2017, Rennes, Liberté couleurs ; OFDT, 2018.
28. Duport C., Phénomènes émergents liés aux drogues. Tendances récentes sur le site de Marseille en 2017, Marseille, Addiction Méditerranée ; OFDT, 2018.

## tendances

Director of publication  
Julien Morel d'Arleux

Editorial Committee  
Christian Ben Lakhdar, Bruno Falissard, Virginie Gautron, Emmanuelle Godeau, Aurélie Mayet, Frank Zobel

Editor in chief  
Julie-Émilie Adès

Graphic designer / Frédérique Million  
Documentation / Isabelle Michot

### Acknowledgements:

To the TREND coordinators: Amandine Albisson, Fabienne Bailly, Jean-Michel Delille, Lionel Diény, Claire Duport, Marie Francia, Aurélie Lazes-Charmetant, Sébastien Lose, Aurélien de Marne, Guillaume Pavic, Catherine Pequart, Grégory Pfau, Guillaume Suderie and Nina Tissot. To Anne de l'Éprevier, Eric Janssen, Aurélie Lermenier-Jeannet, Ivana Obradovic, Antoine Philippon and Stanislas Spilka for their review work.

French Monitoring Centre for Drugs  
and Drug Addiction

69 rue de Varenne - 75007 Paris - France

Tel. : (+33) 1 41 62 77 16

e-mail : ofdt@ofdt.fr



www.ofdt.fr