

TRENDS IN METHAMPHETAMINE USE AND HARMS IN NSW, 2010 TO 2018

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Introduction: NSW Health conducts ongoing surveillance on drug and alcohol use and related harms. Methamphetamine-related harms are an increasing community concern. We prepared a surveillance report that presents the latest information on patterns of methamphetamine use, and related health and social harms in NSW.

The report considered a broad range of data sources, including national behavioural surveys; health service data; data from other government agencies including police and justice; and forensic toxicology and deaths data.

Key findings: Methamphetamine use in the general community remained low in NSW in 2016, at 0.7%. However in people reporting recent use, an increasing proportion reported frequent use and injection as the method of use.

Methamphetamine-related emergency department presentations in NSW increased three fold from 2011-12 to 2017-18, with a peak in 2015-16. Methamphetamine-related hospitalisations increased around ten fold from 2010-11 to 2017-18, with the highest rate of hospitalisation seen in 2016-17. Methamphetamine-related harm was higher in 25-44 year old people, males, Aboriginal people, and people who live outside metropolitan areas of NSW. Psychostimulant-induced deaths and deaths where methamphetamine was detected in forensic toxicology tests have increased over time, again with a peak in 2016. Psychostimulant induced deaths increased four fold between 2010 and 2016 in NSW.

Discussion and conclusion: Despite the reduction in general community use, health harms from methamphetamine increased rapidly from approximately 2010 onwards, with a peak in harms in 2016-17 in NSW. Harms appeared to stabilise at high levels in 2017-18. This suggests that people with higher risk patterns of use have experienced rapidly increasing harms from methamphetamine in NSW.

Implications for practice or policy: Consolidating all available surveillance information allows a more complete understanding of the evolution and impacts of the methamphetamine epidemic, supporting evidence-based policy and programs.

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