THE GREAT HEROIN CRASH

- Five month drought the longest on record
- Purity drops to record low from 32 per cent to 13 per cent
- Rogue high purity batches may already have triggered several overdose deaths, as treatment services around the country brace themselves for more fatalities.

EXCLUSIVE
By Peter Simonson and Max Daly

A snapshot Druglink survey carried out among frontline drug services, senior DAT staff, police and service users in 18 towns and cities across the UK has found the heroin drought is widespread, ongoing and the most severe of its kind on record.

All areas covered in the survey – Penzance, Torbay, Bristol, Cardiff, London, Canterbury, Birmingham, Manchester, Liverpool, Stoke, Sefton, Manchester Redcar, Leeds, Middlesbrough, Newcastle, Blackpool, Glasgow and Edinburgh – reported that street heroin was of an unusually low quality.

According to unpublished figures gathered by the Forensic Science Service, the average purity of street heroin is the lowest since 1984. From an average purity of between 30 and 40 per cent over the last 26 years, heroin seized by police on Britain’s streets plummeted to 13.6 per cent in December and 13.1 per cent in January. By February it rose slightly to 14.5 per cent.

In most places the drought began in October last year, accelerated in December and is still present. In some areas, batches of good quality heroin have appeared and may have been responsible – because of users’ reduced tolerance levels – for drug-related deaths.

Police believe that three heroin users who died in the space of one hour in east Lancashire may have overdosed on the same batch of high purity heroin. There have also been six reported heroin-related deaths in the last two weeks of February in Ireland, where a drought has also hit.

Across the board, those working with heroin users have expressed concern over the vulnerability of drug users when, and if, the current drought lifts. Many services have put up posters warning of the risks of overdose.

Most users have continued to use heavily cut heroin while compensating for this by ‘topping up’ with illicit tranquillisers, pharmaceutical opiates, alcohol and stimulant drugs such as speed and crack cocaine. In London crack has been offered by dealers at bargain rates alongside poor heroin to attract customers.

Figures released in February by drug testing firm Concateno, revealing that positive tests for heroin had dropped among users in treatment by more than 50 per cent in the last year, were matched by test on arrest figures in Lancashire and Cleveland, which showed similar dramatic falls.

Druglink’s research has revealed that it is likely a significant number of those negatives did not mean that people are no longer using heroin – they may have used some of such low purity that it did not register within the test’s parameters.

The use of illicit diazepam has, increasingly since the start of the heroin drought, become a major problem in some areas. In Stoke on Trent there have been two reports of heroin users injecting nail varnish remover.

A detailed intelligence report into the drought’s impact, compiled by Cleveland Police over three months, found that during the drought, which began with an almost total disappearance of heroin in October last year, positive test on arrest figures for heroin nearly halved, while the numbers doubled for cocaine and crack cocaine.

Drug-related deaths averaged between zero and three a month in Cleveland up to November last year, when the figures jumped to eight deaths and six deaths in December. The report, seen exclusively by Druglink, said the average heroin purity was 21 per cent and there has been no increase in people going onto methadone programmes.

Although Cleveland police, believed to be the only force to carry out such an investigation, were expecting a rise in crime in the area as users needed to find more money to get the drug and dealers battled over good batches of heroin, burglary, violence and theft have fallen. There have been none of the expected raids on pharmacies. The report said some users travelled outside Cleveland, to other areas such as Northumbria, to seek out better quality heroin.

Cleveland Police said that high end dealers in the area were cutting their product as a result of having to pay higher than usual wholesale prices. Dealers have chosen to ride the drought out rather than offer their customers alternative drugs because, the report says, they did not have time to source new product lines.

But Det. Insp. Paul Tait, who compiled the report, said he believed there were signs the drought was becoming less severe in Cleveland. But he added that dealers were likely to keep purity as low as possible because they now realise most users will continue buying it at the same price as higher purity heroin.

The Druglink survey found that many areas described the heavily cut heroin as reddish in colour, and when it is smoked, smells of TCP. It doesn’t ‘run’ as normal street heroin does. When prepared for injection, the heroin crystallises and...
coagulates when it cools, blocking the needle.

Kath Tallboys from Blackpool’s Drugline charity, who had reports of poor quality heroin from November, stated that this was corroborated by test on arrest statistics from the local DIP which showed a lower level than normal of heroin positive samples.

A number of areas in our survey reported clients who were turning up for services after having used heroin and testing negative. Michael Linnell at Lifeline in Manchester had heard of users presenting to services wanting to get onto some form of prescribed treatment and being refused as they’d tested negative for heroin use despite claiming to have used the day before. In Tower Hamlets, a current service user claimed to have used £60 worth of heroin the previous day and still tested negative.

The investigation found little evidence of the expected increase in users accessing treatment services, whether they are offering methadone and Subutex or rehab and detox.

A senior drugs worker from an agency covering the south coast of England stated: “Contrary to expectations, we haven’t seen a deluge of people seeking treatment because they can’t get gear.”

David Prescott, the senior practitioner at Lifeline in Manchester, said that “despite the ongoing promotion of detox and treatment, there has been no noticeable increase in referrals”.

This was a situation also seen in Merseyside and Staffordshire. Peter Sheath, of CRI, who manages two large prescribing services in Sefton and Stoke on Trent, said there had been no increase in users coming onto scripts. The absence of an increase was also noted in Southwark and Camden in London, Torbay, Blackpool, Edinburgh and Cardiff.

In Leeds and Bristol drug services experienced falls of around 50 per cent in the number of syringe packs and foil handed to drug users.

There were exceptions. Cliff Askey, service manager at Lifeline in Tower Hamlets said the service saw an increase in people attending prescribing services of 40 per cent from October and stated that the neighbouring borough of Hackney had seen big increase in new clients wanting to access prescribing services.

But the usual networks of information among users about ‘good’ heroin dealers has in some areas broken down, as some buyers are keeping this information close to their chest. This makes it harder for drug services to access important knowledge about the arrival of higher purity batches of heroin. Services are bracing themselves for a spike in heroin overdoses and deaths when, or if, purer heroin makes its way back to UK streets after users have become less tolerant to the drug.

Jill Cole of Cardiff Community Drug Team told of the increased use of black market diazepam pills, branded as ‘MSJs’ and thought to be from south east Asia. “We think these pills may have been responsible for a number of recent local deaths in Cardiff, initially thought to be heroin overdoses, but the use of naloxone by emergency staff had no effect. These pills vary in strength and appear to make people aggressive and black out more often than diazepam. And due to their low price and easy availability, users are taking them by the handful. The service user group in Cardiff is so concerned about the use of MSJs they are producing a warning poster,” said Coles.

There has also been increased use of street tranquillisers in the North East, where one brand has been given the street name of ‘charge sheets’ for the propensity of the drug to cause black outs during which users wake up to find they’ve been arrested for some unknown crime. He states that the drought meant that users were swallowing 20-30 10mg tablets after using heroin.

Several services said that the drought had been a positive thing for some drug users, who have become so fed up with the poor quality goods on sale that they have ditched street heroin and stabilised on methadone and Subutex.

**WHAT SPARKED THE DROUGHT?**

There are several theories – pinpointing causes from the production end of the heroin trail in Afghanistan to the distribution side managed by high level dealers in the UK – as to why Britain is experiencing this dearth in heroin.

**Poppy Blight**

The UNODC reported in May 2010 that opium production would be severely affected by a poppy blight affecting most of the major poppy growing areas. The fungus, macrosporium papaverus, causes capsule rot, resulting in little to no opium latex being available for extraction by farmers. However, a shortage of heroin has not been noted in other countries across Europe.

**Enforcement**

SOCOA have said that recent law enforcement operations against heroin wholesalers in Turkey and the dismantling of UK distribution networks had had a considerable impact on the amount of heroin entering the UK reported. SOCA accepted that other factors, such as the blight, may also be involved.

**Stockpiling**

This theory argues that there is not a production problem, but that wholesalers are stockpiling heroin to increase the price within the UK. Price of heroin has dropped lower than any other drugs over the last ten years.

**Russian market**

There is a market of upwards of three million heroin users in Russia who pay more per gram than in Britain. Also, the logistics of getting the drugs to Russia are easier. Why face the trouble of getting heroin to the UK for so little return when you can export direct to Russia over a porous border?