



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
Ministro per la Cooperazione Internazionale e l'Integrazione  
**Dipartimento Politiche Antidroga**

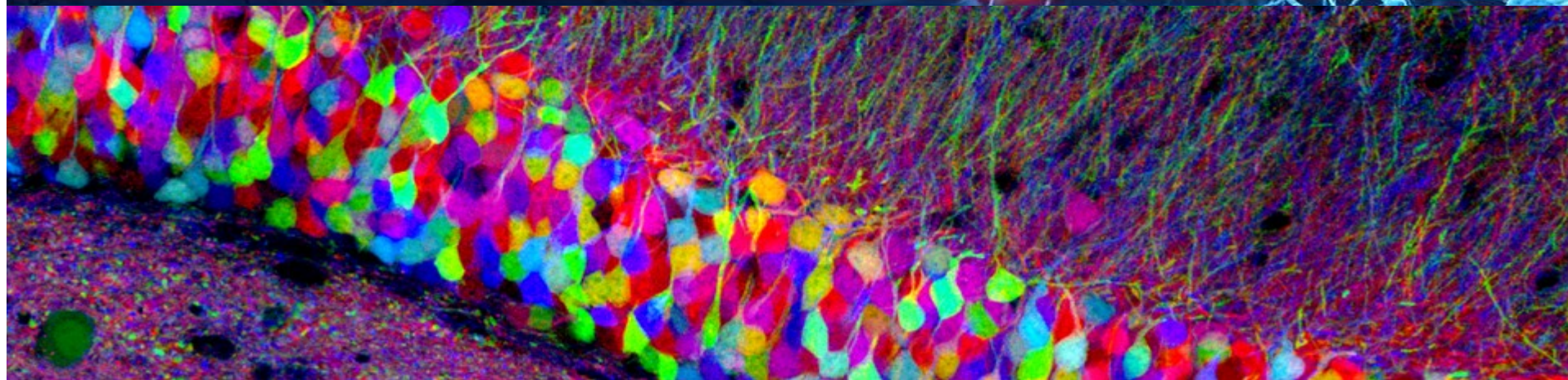
# NEUROSCIENZE e DIPENDENZE



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
Ministro per la Cooperazione Internazionale e l'Integrazione  
**Dipartimento Politiche Antidroga**



Regione del Veneto - Azienda ULSS 20  
**Dipartimento delle Dipendenze**



3° Congresso internazionale

## **ADDICTION:** new evidences from Neuroimaging and Brain Stimulation

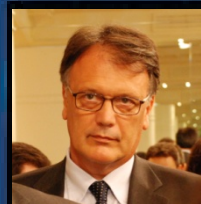




**Giovanni Serpelloni – M.D.**  
Head Antidrug Policy Department  
Presidency of the Council of Ministers



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
Ministro per la Cooperazione Internazionale e l'Integrazione  
**Dipartimento Politiche Antidroga**



**Giovanni Serpelloni – M.D.**  
**Head Antidrug Policy Department**

[g.serpelloni@governo.it](mailto:g.serpelloni@governo.it)



# NEUROSCIENZE e DIPENDENZE

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Dipartimento Politiche Antidroga

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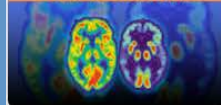
## Le neuroscienze



## Neuroscienze e dipendenze



## Tecniche di indagine



## Ricerca scientifica



**Giovanni Serpelloni**  
Capo Dipartimento Politiche Antidroga,  
Presidenza del Consiglio dei Ministri



**Nora Volkow**  
Direttore National Institute  
on Drug Abuse

Nell'ambito dell'accordo internazionale di collaborazione scientifica tra il Dipartimento Politiche Antidroga, della Presidenza del Consiglio dei Ministri e il National Institute on Drug Abuse (NIDA) degli Stati Uniti siglato a Roma nel luglio del 2011, è stato definito un obiettivo che riguarda la promozione e la realizzazione di studi e ricerche applicate nel settore delle neuroscienze delle dipendenze, ed in particolare del neuroimaging.

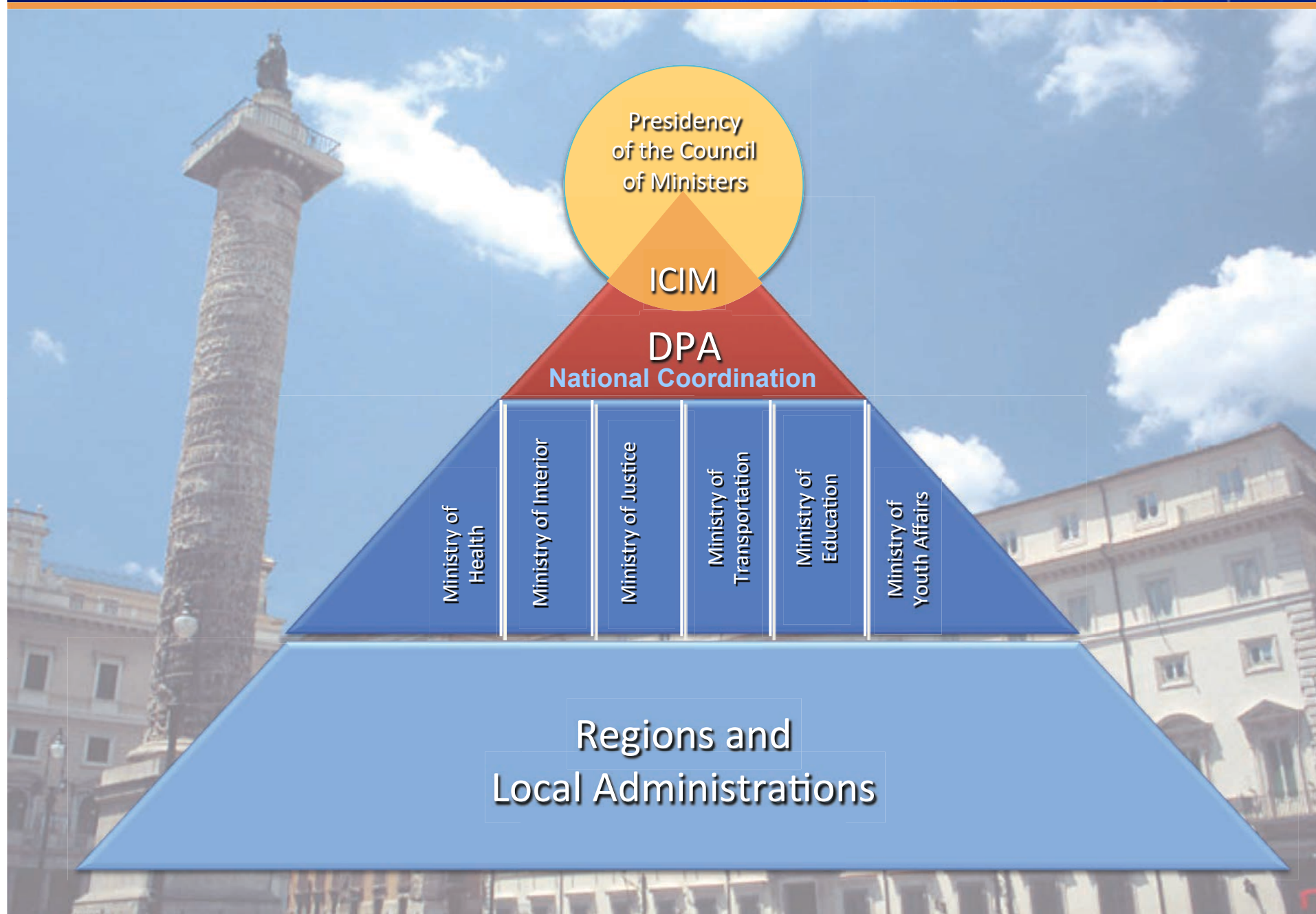
A tale scopo, il Dipartimento Politiche Antidroga, in collaborazione con il NIDA, l'United Nations Office on Drugs and Crime (UNODC) ed il Dipartimento delle Dipendenze ULSS 20 di Verona, ha organizzato un convegno internazionale che ha l'obiettivo di offrire ai professionisti che operano nell'ambito delle dipendenze, sia dei servizi pubblici che del privato sociale, e ai ricercatori che lavorano nell'ambito universitario, informazioni scientifiche sul ruolo del neuroimaging delle dipendenze nella pratica diagnostica e clinica e quali possibili prospettive tali evidenze possano comportare per il trattamento delle dipendenze.



Vai al sito Dronet - Network Nazionale sulle Dipendenze









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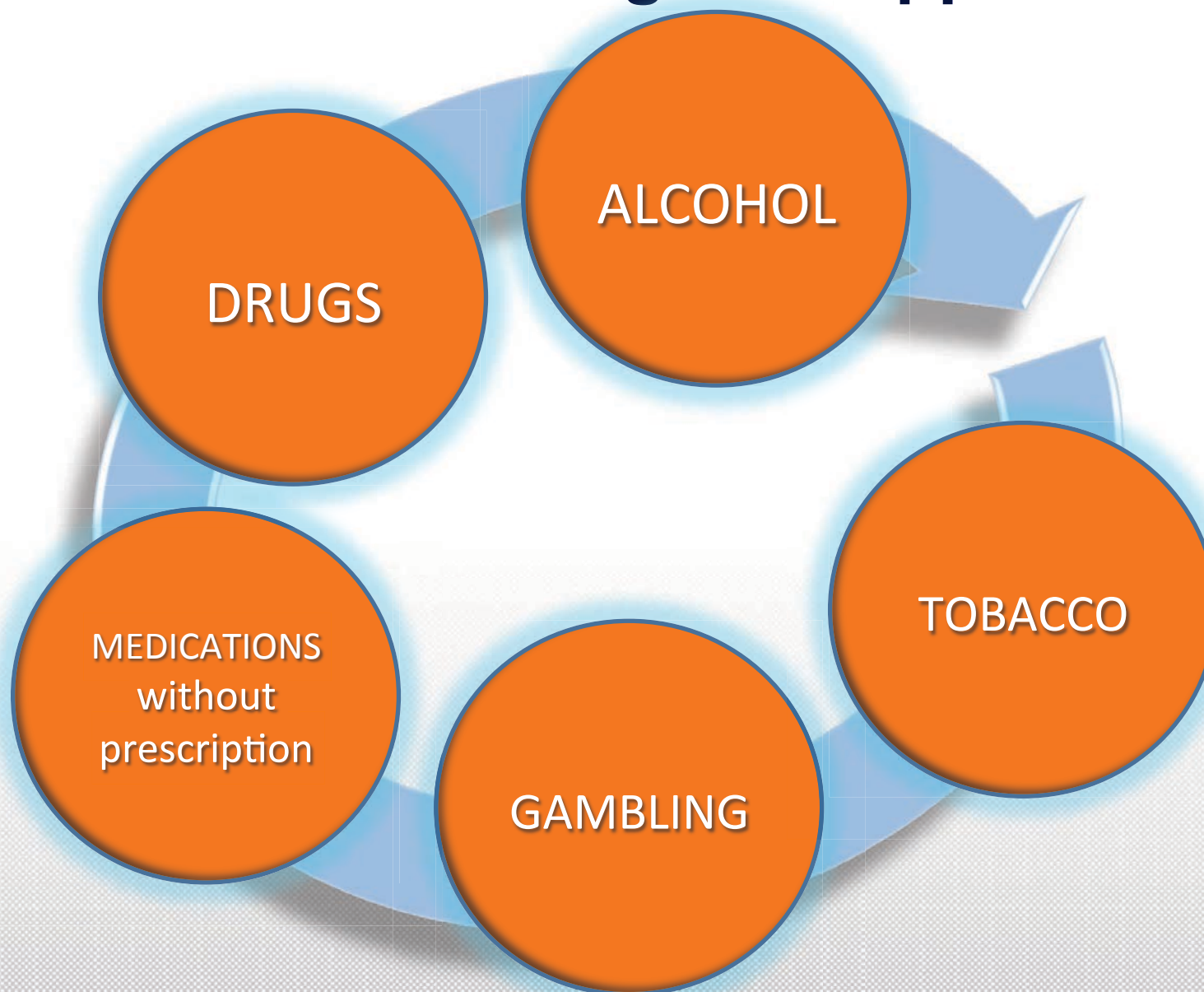
# National Drug Action Plan 2010-2013





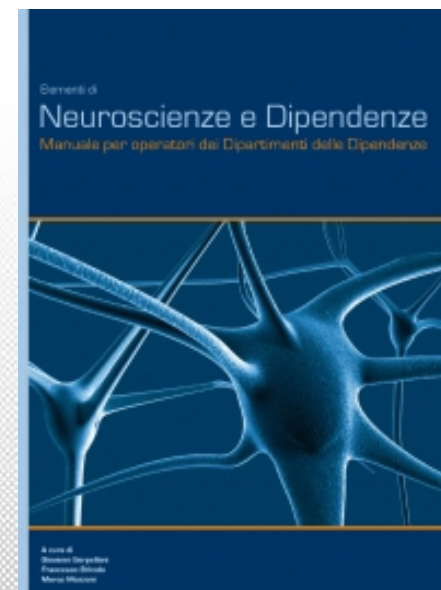


# Global and integrated approach





[www.politiche antidroga.it](http://www.politiche antidroga.it)







# **DPA: international collaborations and scientific research activities on neuroscience**

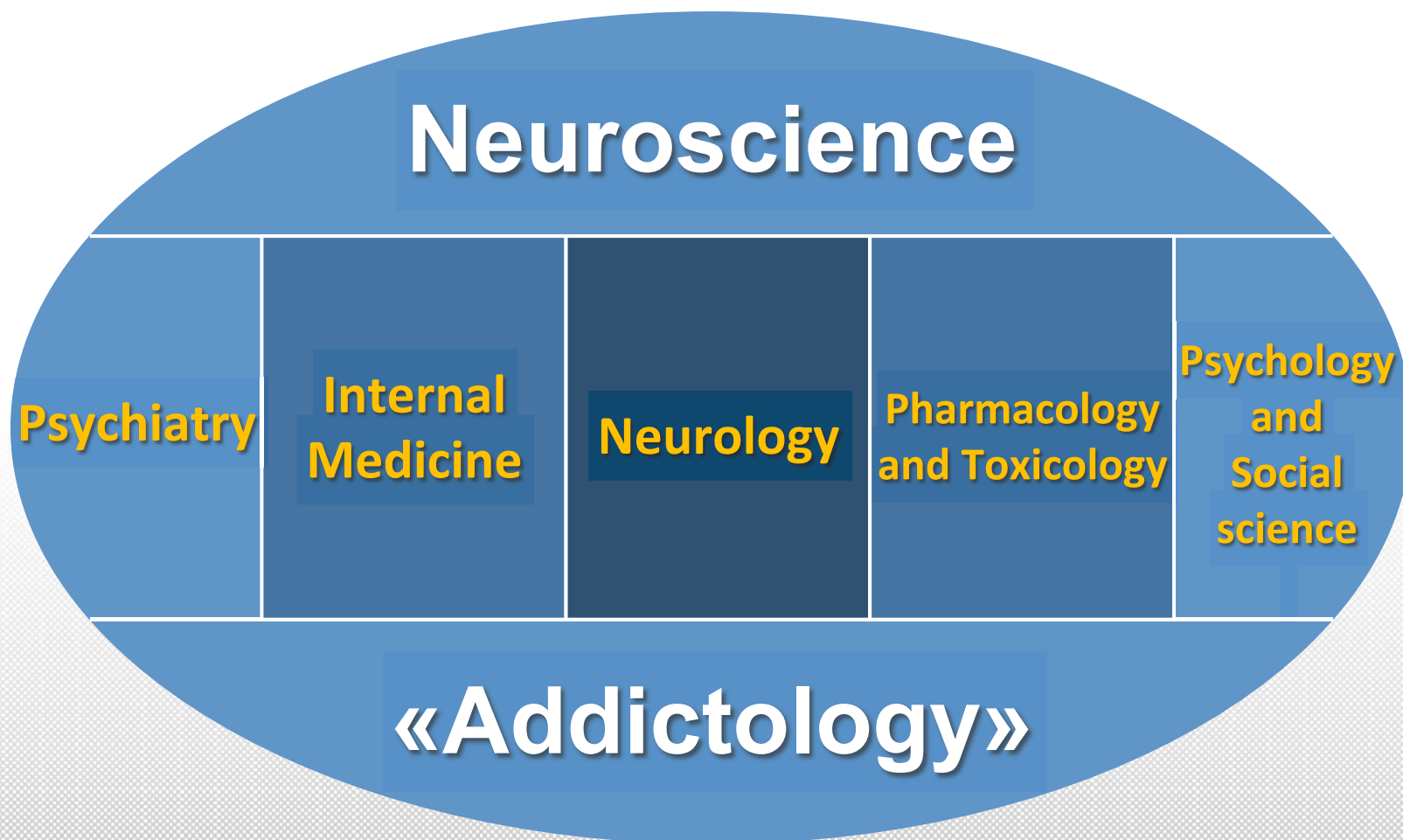


**Giovanni Serpelloni – M.D.**  
**Head Antidrug Policy Department**  
**Presidency of the Council of Ministers**

[g.serpelloni@governo.it](mailto:g.serpelloni@governo.it)



# New Addiction Approach: «Neuroscience, a master key»

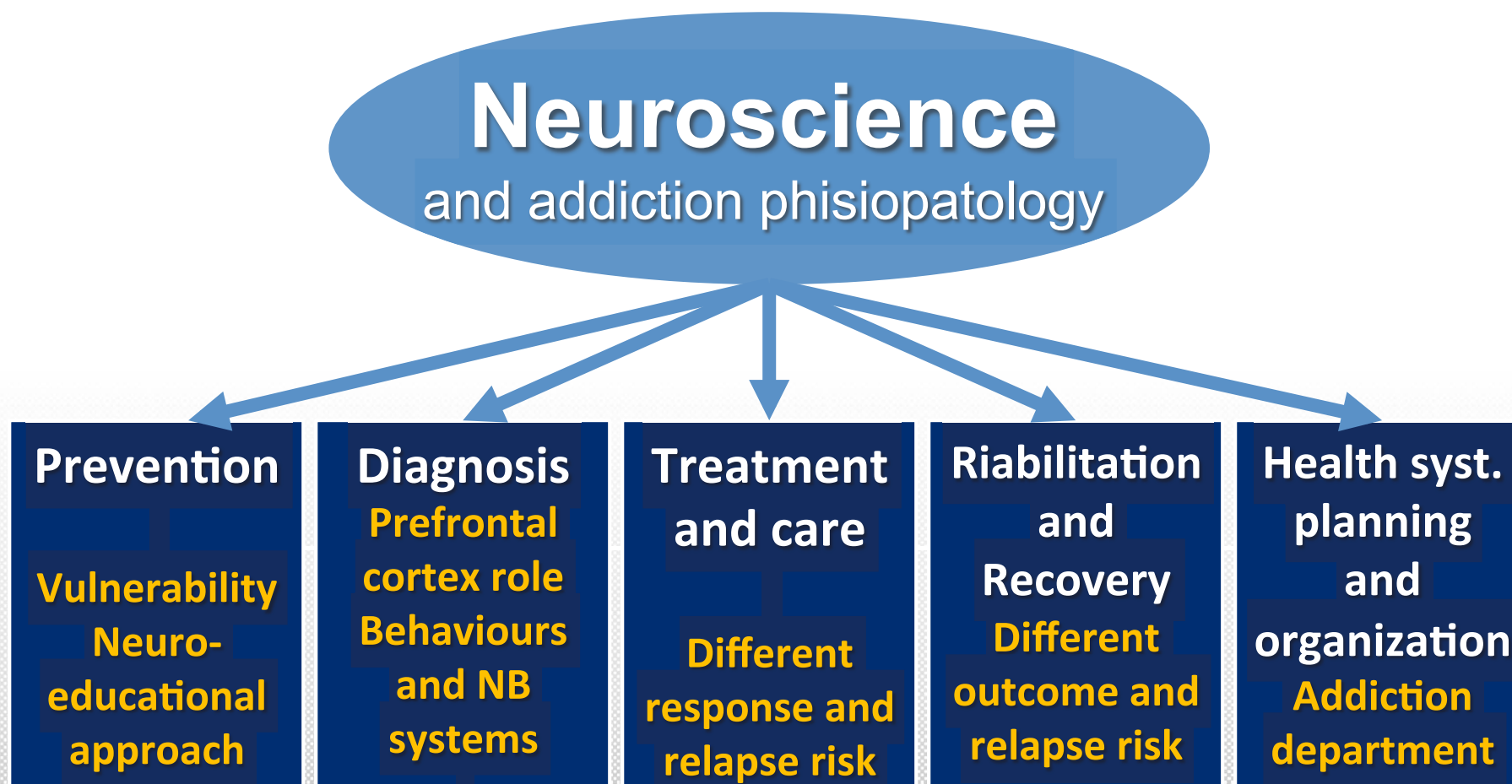


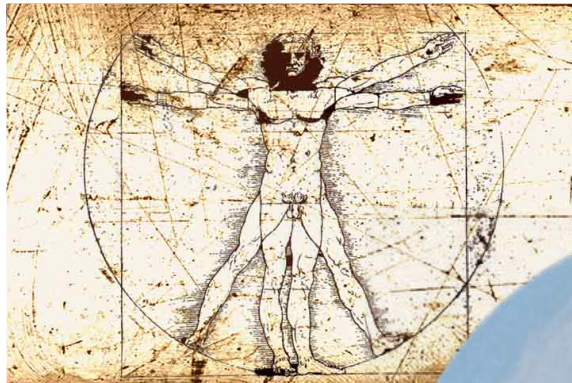




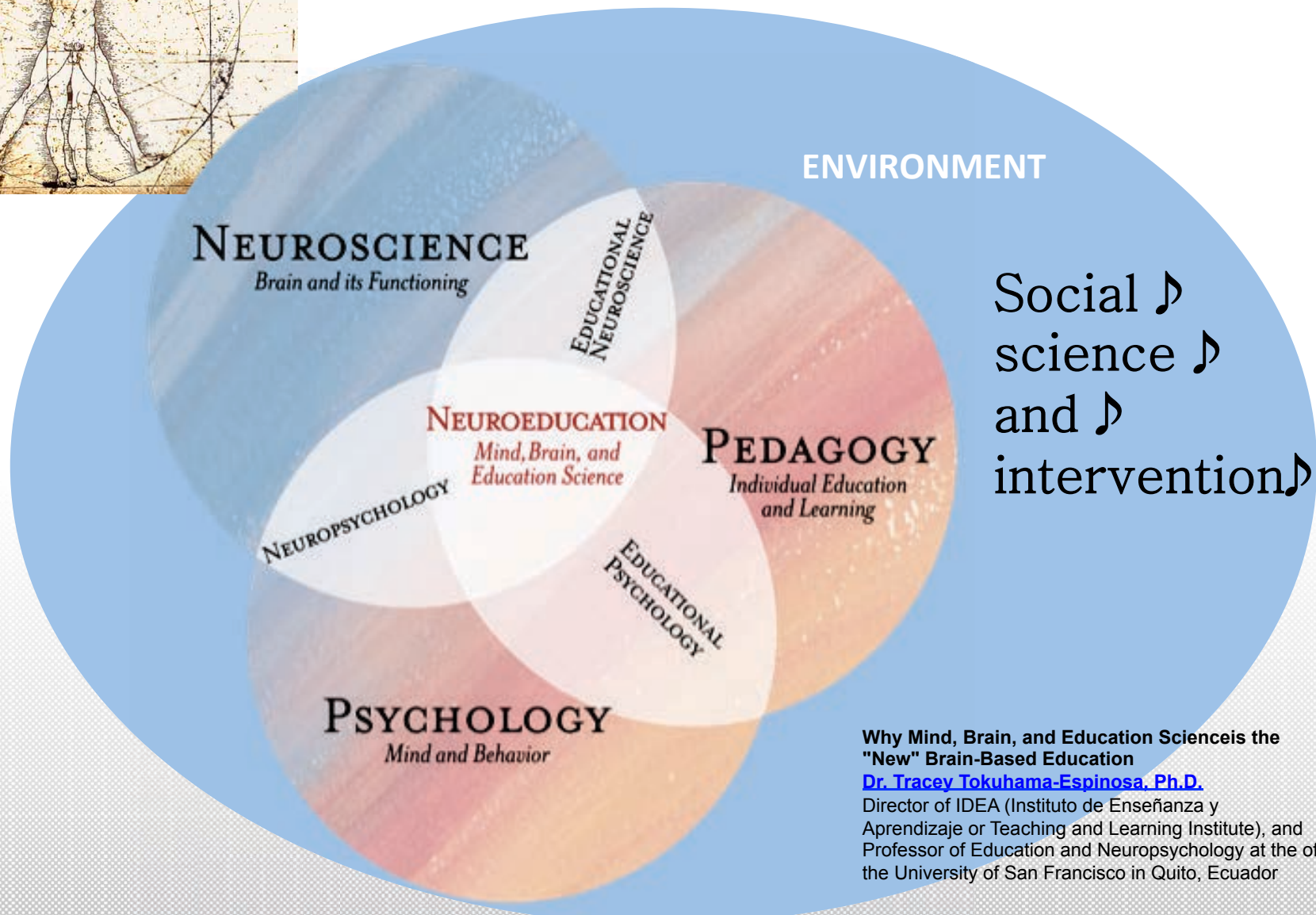
# **New Addiction Approach:**

**reorient the reading of the phenomenon  
and the organization of public health systems**





# Transdisciplinarity







# New Addiction Approach:

reorient the clinical model, budgeting and the organization of public health systems

**Neuroscience**  
and addiction phisiopatology

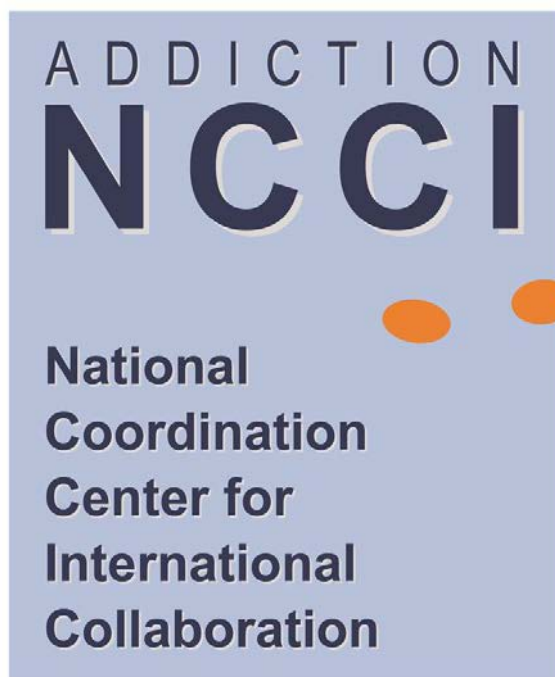
**Research**

**Clinic and  
Recovery**

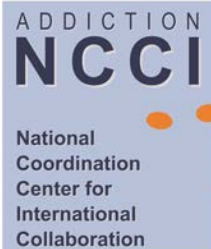
**Budgeting  
and health  
Organization**



## DPA project: activation of 2 new centers







# Ongoing International collaborations



Brain Laboratory of Neuropsychology  
and Brain Imaging, Milwaukee, USA



**IOWA STATE UNIVERSITY** Media Research Lab,  
Department of Psychology



**u<sup>b</sup>** University Hospital of Psychiatry,  
University Bern, Svizzera  
<sup>b</sup> UNIVERSITÄT  
BERN





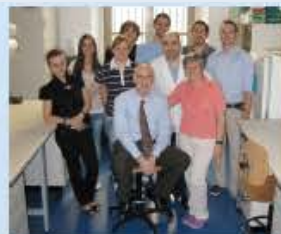
# DPA ITALIAN COLLABORATIVE CENTRES



**Ariadrugs**



**Caino**



**Citos**



**DTLR**



**ECS-Emotion**



**Edu.Care**



**Generisk**



**Integra**



**Mesi**



**Outcome**



**Outcome**



**Outcome**



**Outcome**



**Outcome**



**Outcome**



**PDU**



**Promo Eurodrugs**



**Ricostruire**



**Schizca**



**Smart Search**



**Vulcan**



**Zero Coca**







### 1. BrainSearch

Mappatura cerebrale delle aree del craving e del resisting e identificazione dei danni cerebrali in soggetti tossicodipendenti: uno studio con risonanza magnetica funzionale ad alto campo.

**Ente affidatario:** Dipartimento delle Dipendenze ULSS 20 Verona



### 2. Neurotraining

Progetto nazionale per l'integrazione di interventi psicoeducativi e neuropsicologici nella prevenzione e nella gestione delle recidive in soggetti tossicodipendenti "no o low responder" ai trattamenti convenzionali: utilizzo di tecniche di stimolazione magnetica transcranica (rTMS e tDCS) a bassa intensità e neurotraining.

**Ente affidatario:** Dipartimento delle Dipendenze ULSS 20 Verona



### 3. La rTMS sulla DLPFC sinistra in soggetti alcolodipendenti e/o tossicodipendenti in trattamento

Valutazione dell'efficacia dell'inserimento di sedute di rTMS in un programma di ricovero per il trattamento della dipendenza da alcol e/o droghe.

**Ente affidatario:** Dipartimento delle Dipendenze ULSS 20 Verona



### 4. Comet Study

Valutazione di effetti citotossici e genotossici precoci in soggetti esposti a D9 tetraidrocannabinolo (THC).

**Ente affidatario:** Università degli Studi di Verona. Dipartimento di Medicina e Sanità Pubblica, Sezione di Farmacologia



### 5. D-TMS

Studio e ricerca sulla stimolazione transcranica magnetica nel supporto alla cura della tossicodipendenza e alla prevenzione delle recidive.

**Ente affidatario:** Università degli Studi di Sassari. Dipartimento di Scienze del Farmaco, Laboratorio di Neuroscienze Cognitive



### 6. Caino

Alterazioni cerebrali indotte dall'uso di cannabinoidi e cocaina in età adolescenziale: studio dei meccanismi molecolari in modelli sperimentali.

**Ente affidatario:** Università degli Studi di Milano. Centro di Neurofarmacologia, Dipartimento di Scienze Farmacologiche



### 7. ECS - Emotion

Il sistema endocannabinoide nelle regolazioni emozionali: identificazione di fattori di rischio e protezione in fasi precoci dello sviluppo.

**Ente affidatario:** ISS - Istituto Superiore di Sanità. Dipartimento di Biologia Cellulare e Neuroscienze, Reparto di Neuroscienze Comportamentali



### 8. Farmagen

Caratteristiche farmacogenetiche e psicobiologiche e risposta ai trattamenti farmacologici con metadone e buprenorfina.

**Ente affidatario:** Regione Piemonte. ASL di Biella - Dipartimento delle Dipendenze



### 9. Generisk

Valutazione di vulnerabilità genetica. Individuazione di fattori a rischio relativi all'abuso di cannabinoidi e di disordini psichiatrici correlati.

**Ente affidatario:** Università degli Studi di Parma. Dipartimento di Genetica, Biologia dei Microrganismi, Antropologia, Evoluzione



### 10. Impact

Progressione tossicomane: effetto dell'esposizione a cannabinoidi ed alcol in periodo adolescenziale in modelli animali di dipendenza.

**Ente affidatario:** Università di Camerino. Dipartimento di Medicina Sperimentale e Sanità Pubblica



### 11. MeSi

Impatto a breve e a lungo termine dell'assunzione di marijuana in età adolescenziale sulla funzionalità immunitaria. Studio traslazionale nell'animale da esperimento e nell'uomo.

**Ente affidatario:** Università degli Studi di Milano. Dipartimento di Farmacologia, Chemioterapia e Tossicologia Medica



### 12. Schizca

Caratteristiche cliniche, personologiche, neuropsicologiche e biologiche della schizofrenia indotta dall'uso di cannabis.

**Ente affidatario:** Seconda Università degli Studi di Napoli. Dipartimento di Psichiatria



### 13. THC - Gate

Influenza della sensibilizzazione indotta dall'esposizione al tetraidrocannabinolo durante l'adolescenza sull'acquisizione di un comportamento di autosomministrazione endovenosa di eroina e sull'induzione di disturbi cognitivi a lungo termine in un modello animale di predisposizione genetica.

**Ente affidatario:** Università degli Studi di Cagliari. Facoltà di Farmacia, Dipartimento di Tossicologia



### 14. Vulcan

Valutazione della condizione di vulnerabilità all'uso di cannabis ed allo sviluppo della dipendenza: correlati neuroendocrini e aspetti quali-quantitativi.

**Ente affidatario:** Alma Mater Studiorum - Università di Bologna. Facoltà di Farmacia, Dipartimento di Scienze Farmaceutiche







## 1. BrainSearch

Brain mapping of the areas of craving and resisting and identification of brain damage in drug-dependent subjects: a study with functional magnetic resonance imaging at high field. **custodial authority:** *Department of Addiction ULSS 20 Verona*



## 2. Neurotraining

National Project for the integration of neuropsychological and psychoeducational interventions in the prevention and management of relapse in drug addicts "no or low responder" to conventional treatments: use of techniques of transcranial magnetic stimulation (rTMS and tDCS) low intensity neurotraining. **Agency Trustee:** *Department of Addiction ULSS 20 Verona*



## 3. On the left DLPFC rTMS in patients dependent on alcohol and / or drug addicts in treatment

Evaluation of the effectiveness of the insertion of rTMS sessions in a program of hospitalization for the treatment of addiction to alcohol and / or drugs. **custodial authority:** *Department of Addiction ULSS 20 Verona*



## 4. Comet Study

Assessment of cytotoxic and genotoxic early in subjects exposed to D9 tetrahydrocannabinol (THC). **custodial body:** *University of Verona. Department of Medicine and Public Health, Section of Pharmacology*



## 5. D-TMS

Study and transcranial magnetic stimulation research in supporting the care of drug addiction and relapse prevention. **custodial Body:** *University of Sassari. Department of Pharmaceutical Sciences, Laboratory of Cognitive Neuroscience*







## 6. Cain

Changes in the brain caused by the use of cannabis and cocaine during adolescence: molecular mechanisms in experimental models. **custodial body:** *University of Milan. Center of Neuropharmacology, Department of Pharmacological Sciences*



## 7. ECS - Emotion

The endocannabinoid system in emotional adjustment: identification of risk factors and protective in the early stages of development. **custodial authority:** *ISS - Institute of Health. Department of Cell Biology and Neuroscience, Department of Behavioral Neuroscience*



## 8. Farmagen

Pharmacogenetic and psychobiological characteristics and response to drug treatment with methadone and buprenorphine. **custodial authority:** *Piedmont Region. ASL Biella - Department of Addiction*



## 9. Generisk

Evaluation of genetic vulnerability. Identification of risk factors relating to abuse of cannabis and related psychiatric disorders. **custodial body:** *University of Parma. Department of Genetics, Biology of Microorganisms, Antopologia, Evolution*



## 10. Impact

Addictive progression: effect of exposure to cannabis and alcohol in adolescence in animal models of addiction. **custodial body:** *University of Camerino. Department of Experimental Medicine and Public Health*



## 11.MeSI

Impact in the short and long-term intake of marijuana in adolescence on immune function. Translational studies in animal models and humans. **custodial Body:** *University of Milan. Department of Pharmacology, Chemotherapy and Medical Toxicology*





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## 12. Schizca

Clinical features, personological, neuropsychological and biological schizophrenia induced by the use of cannabis. **Trustee Board:** Second University of Naples. Department of Psychiatry

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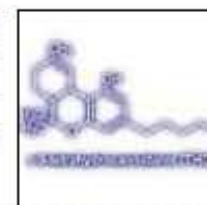


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## 13. THC - Gate

Influence of sensitization induced by exposure to THC during adolescence on the acquisition of intravenous heroin self-administration behavior and induction of long-term cognitive impairment in an animal model of genetic predisposition. **custodial Body:** University of Cagliari . Faculty of Pharmacy, Department of Toxicology

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## 14. Vulcan

Assessment of vulnerability to cannabis use and the development of addiction-related neuroendocrini and qualitative and quantitative aspects. **custodial authority:** Alma Mater Studiorum - University of Bologna. Faculty of Pharmacy, Department of Pharmaceutical Sciences







# DPA Action and Research Projects



**National projects**  
**Italian Regions**



**European projects**



**International projects**  
**United Nations Organisations**  
**(UNICRI- UNODC)**



## DPA - Research Funds 2010 – 2012 (Projects Master Plan)



### Long term projects:

The plan containing the Research projects that Italy has financed in 2010 – 2012 with activity **until 2015**. The projects that have been activated based on their implementation priority.



### DPA Collaborative Centers Network:

The responsibility of the projects has been given to highly qualified agencies and organizations with whom the Department of Anti-drug Policies has stipulated conventions and collaboration agreements that determine their relationship.





# Investment areas for 2010 - 2012



**Prevention\***



**Alert system and  
technological innovation**



**Prevention of related  
diseases**



**Clinical Management  
and organization**



**Treatment: Addiction  
Department**



**Neuroscience  
Research**



**Recovery**



**Training and update  
courses**



**Epidemiology and  
evaluation**



**International activity**

\* Prevention in teens, family and schools and women; Prevention for workers in risky jobs; Prevention of alcohol and drug related traffic accidents.



## Projects Master Plan of DPA 2010: 26,500.000 euro

### Research

- Brainsearch
- Caino
- CiTos
- Comet Study
- D-TMS
- ECS-Emotion
- Farmagen
- Generisk
- Impact
- MeSi
- Neurotraining
- Schizca
- Smart Search
- THC Gate
- VulCan

### Planning & organization

- Integra
- Ricostruire

### Early Warning System & technological innovation

- Droga & Internet
- N.E.W.S. 2010
- N.E.W.S. Area Biotossicologica
- N.E.W.S. Area Clinico-Tossicologica
- Rave Party Prevention

### Epidemiology & evaluation

- Aquadrgs
- Ariadrgs
- DRDS
- GPS-ITA
- Monitoraggio PAN
- NIOD
- Outcome
- PDU
- SIND Support
- SPS - ITA

### Training & updating

- Drog@news

### International activities

- MedNET
- Promo Eurodrugs
- UNODC-WHO

### Prevention

#### Worker

- DTLR

#### Teenagers School & Family

- A.PR.I
- Edu.Care
- Edu
- DAD.NET

#### Road accidents

- NNIDAC
- SGS
- Tox Test

### Prevention of drug-related diseases

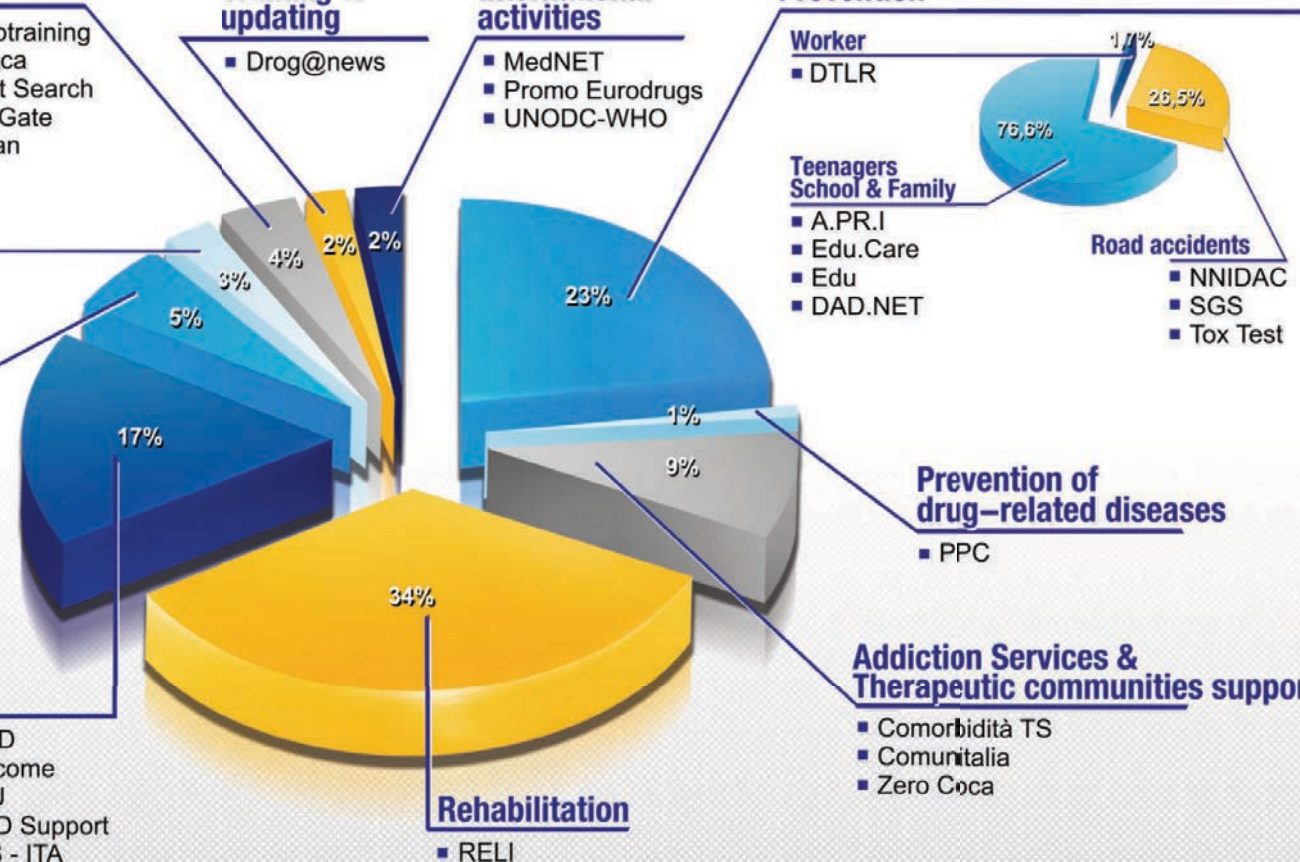
- PPC

### Addiction Services & Therapeutic communities support

- Comorbidità TS
- Comunitalia
- Zero Coca

### Rehabilitation

- RELI







# Projects Master Plan of DPA 2011-2012: 17,000.000 euro

## Epidemiology & evaluation

- PDU 2010
- SPS 2011
- DB-I
- Drug prices
- Aquadrugs 2011-2012
- Monitoraggio Incidenti stradali
- Outcome Comunità

## Rehabilitation

- FUBOD - Fuori dall'oblio

## Addiction Services & Therapeutic communities support

- Riabilitiamo

## Prevention of drug-related diseases

- DPTI

## Early Warning System & technological innovation

- ALLERT 2011

## Planning & organization

- PAN 2010-2013

## Research

- ADOCANNABIS
- MIRNA

## Training & updating

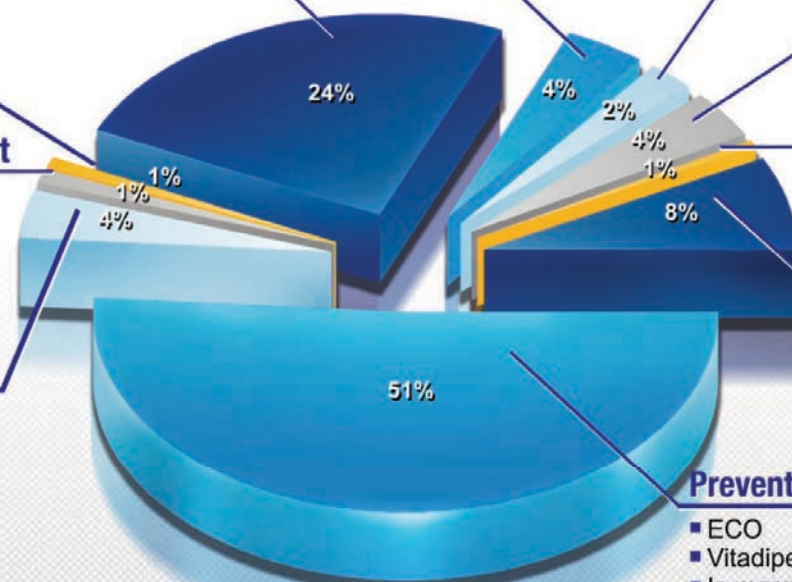
- Institute

## International activities

- MedNET
- Scientific Community on Addiction
- Glok 32

## Prevention

- ECO
- Vitadipendenti
- In marcia per la vita
- Libera la scuola
- VARD
- Radici e ali
- Dream on Italia
- IPIB
- SAFE
- Non è mai troppo presto
- Sballati da morire
- NNIDAC 2011



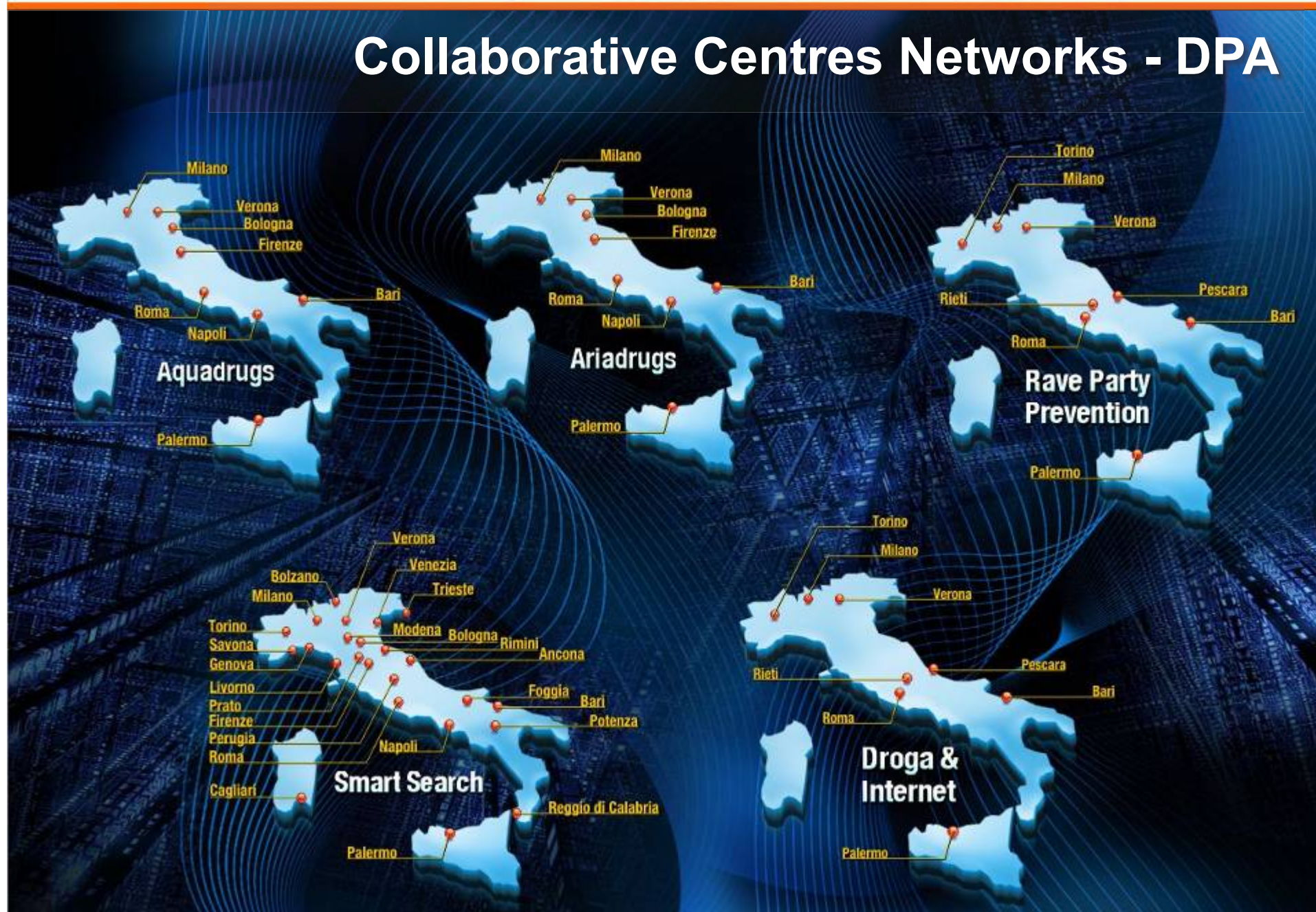


# Collaborative Centres Network - DPA





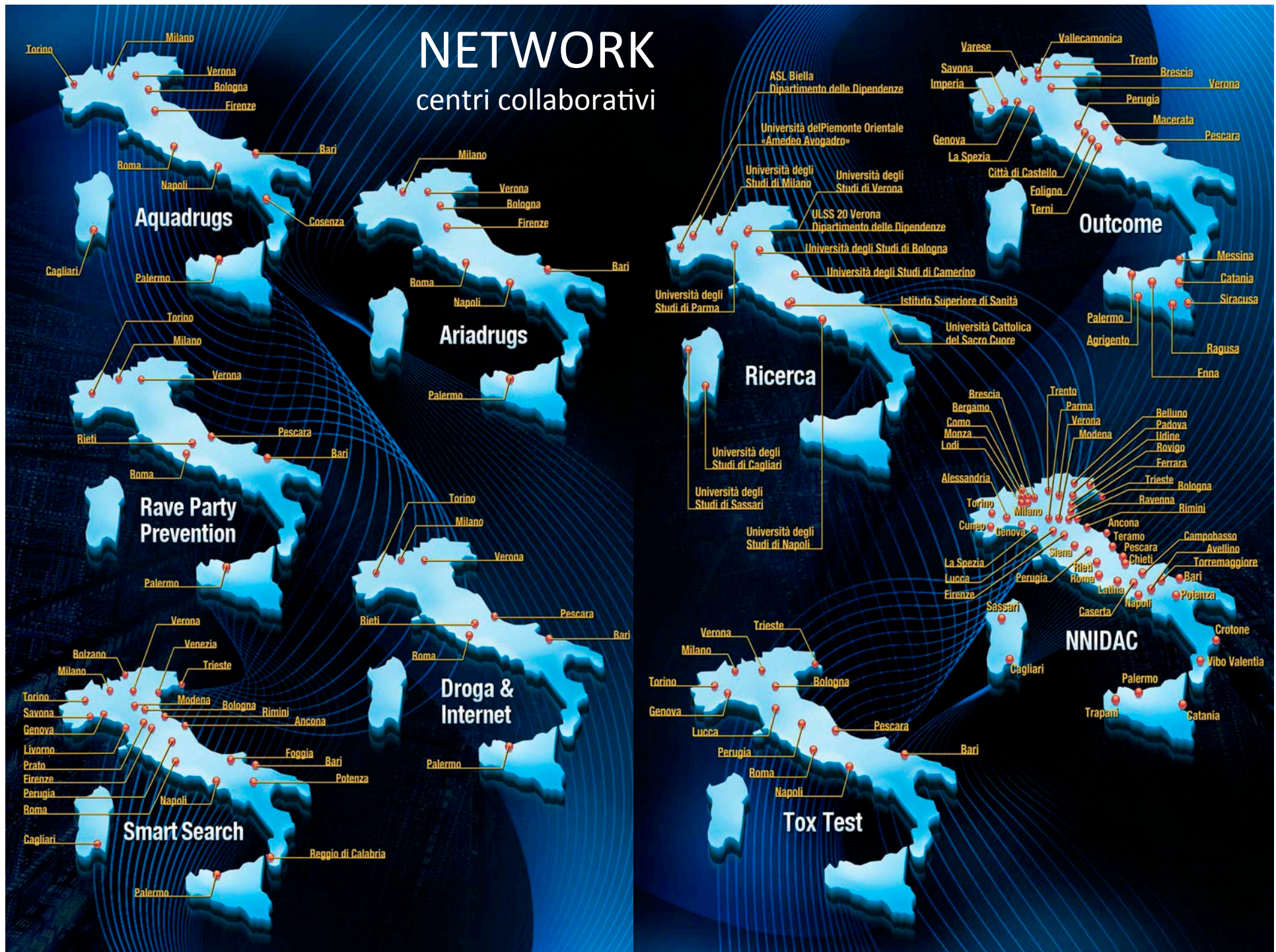
# Collaborative Centres Networks - DPA



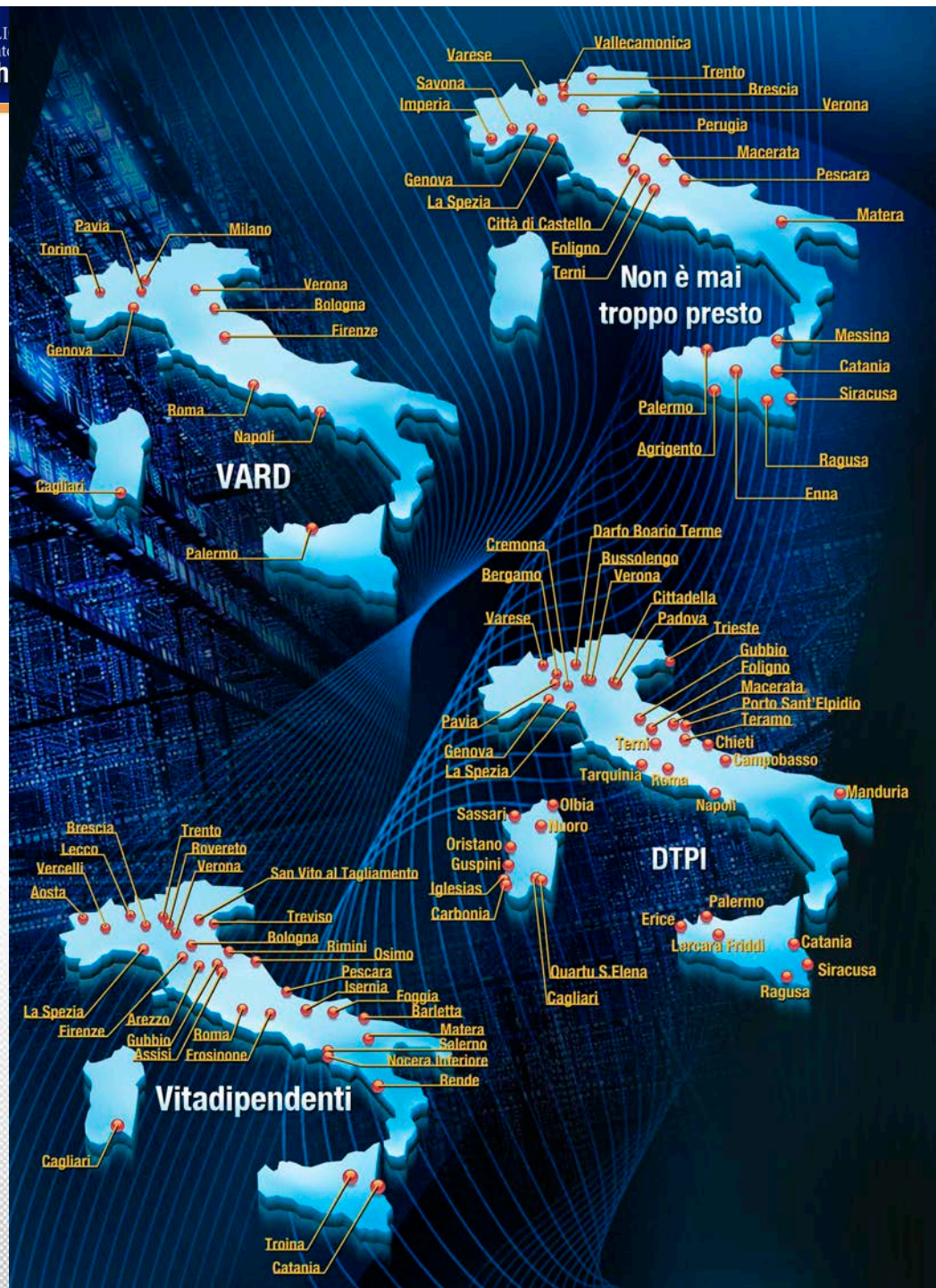


# NETWORK

centri collaborativi











# MedNet - International Working Group

## Participating Countries:

Algeria  
Cyprus  
Egypt  
France  
Greece  
Israel  
Jordan  
Lebanon  
Libia  
Morocco  
Spain  
Tunisia



Rome  
Meeting  
2012



European Monitoring Centre  
for Drugs and Drug Addiction





ONDCP 11 july 2011 WDC

NIDA 25 july 2011 Rome



**ONDCP**  
WHITE HOUSE  
OFFICE OF NATIONAL DRUG



Accordi intergovernativi per sviluppare progetti e interazioni comuni nell'area della ricerca, della cura, della prevenzione e della riabilitazione delle dipendenze.



11 luglio 2011



25-26 luglio 2011





# Memorandum of intent

(Washington 11 July 2011)



**NIDA** NATIONAL INSTITUTE  
ON DRUG ABUSE







ONDCP

Memorandum of Intent  
between Italy and the United States of America  
in Drug Demand Reduction Research, Services, and Policy Strategies

ITALY - USA

Washington - July 11, 2011

Memorandum of Intent  
between Italy and the United States of America  
in Drug Demand Reduction Research, Services, and Policy Strategies

ITALY - USA

*The Parties*

*Recalling* the Political Declaration adopted by the United Nations General Assembly at its twentieth special session and the Political Declaration and Plan of Action on International Cooperation toward an Integrated and Balanced Strategy to Counter the World Drug Problem,

*Recalling also* the Single Convention on Narcotic Drugs of 1961, that Convention as amended by the 1972 Protocol, the Convention on Psychotropic Substances of 1971 and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic substances of 1988.

*With a common goal* of developing national models geared toward preventing drug use before it begins among our youth, and to that end strengthening cooperation among the different levels of government, and between the government and various community partners;

*Bearing in mind* that socially based disapproval, as it has been scientifically shown, can lead to a decrease in consumption, especially of marijuana, and in particular among young persons;

*Recalling* the need to highlight the damages that drugs cause and emphasize the benefits of a drug-free life to young people and to their families, via national anti-drug campaigns in schools, workplaces, faith-based communities, community centers, and places where young people gather;

*Affirming* that proposals to legalize drugs do not present an effective solution to the problem;

*Affirming* that drug use leads to serious health and safety problems, and that it takes a grave toll on human life physically, socially, and economically, undermining our communities' present and future;

*Convinced* that all policies and strategies must be implemented bearing in mind that addiction presents a serious concern, not only to social well-being and to public safety, but on a public health level as well, regarding not only those individuals addicted to drugs, but third parties, too, who may be adversely affected by drug users' risky behavior;

*Resolved* that drug use must be addressed as a public health concern, and recognizing that drug addiction is a preventable, treatable disease, and one from which recovery is possible, and that best practices in the field are the ones based on scientific evidence;

*Identifying* their two main goals as reducing drug consumption and reducing the consequences associated with drug use;

*Focused* on creating increasingly effective models for prevention, early intervention, treatment, rehabilitation, recovery, and re-integration into society for drug users;

*Convinced* that services must be sharply focused on the patient's total recovery, and must always be coupled with the prevention and treatment of related diseases;

*Convinced* of the need to improve the quality, reach, and variety of care available to decrease the demand for drugs, including those related to prevention, early intervention, treatment, rehabilitation, recovery, and re-integration as part of a continuum of social services and medical treatment;

*Believing* the development of an increasingly efficient system of interoperable data related to drug use trends, service delivery, program outcomes, and peer-reviewed research programs, to be fundamental;

*Considering* that dialogue and discussion may be of mutual benefit both for social issues, prevention, and especially for research into neuroscience and pharmaceutical and clinical trials,

*hereby agree to the following:*

1. The goal of this Memorandum is to provide a foundation for increased collaboration, cooperation, and partnership between the Parties in the fields of addiction research, clinical best practices, and drug policies;
2. To activate international collaborative groups to engage in discussions and to delve into the issues and strategies aimed at improving and strengthening each nation's respective drug control efforts, and to give rise to mutually beneficial partnerships to address the problem of drug addiction with increasing efficiency;
3. To create bilateral agreements by each nation's public health research institutes and clinical centers related to prevention, early intervention, treatment, rehabilitation, recovery, and re-integration. The specific details for such agreements would be posited in future agreements;
4. Research and programs implemented must be compatible the aims specified in the two countries' respective drug policies;
5. This Memorandum of Intent bears no additional financial burden for the budgets of the respective States.

Signature

Sen. Carlo Giovanardi  
Undersecretary to the Prime Minister charged  
with structuring policies on the family,  
community service, and the campaign against  
drugs

Signature

R. Gil Kerfikowski  
Director, White House Office of  
National Drug Control Policy

Presidenza del Consiglio dei Ministri  
DPA 0003598 A-4.35.14  
del 29/07/2011



0000479





# Memorandum of Intent between NIDA and DPA

Roma, 25 Luglio 2011







**Memorandum of Intent between the  
National Institute on Drug Abuse  
National Institutes of Health  
U.S. Department of Health and Human Services  
and the  
Department for Anti-drug Policies  
Presidency of the Council of Ministers  
Italy**

Roma, 25 Luglio 2011



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
**Dipartimento Politiche Antidroga**

U.S. Department of  
Health and Human Services  
NATIONAL INSTITUTES OF HEALTH  
**NIDA**  
NATIONAL INSTITUTE  
ON DRUG ABUSE

**Memorandum of Intent between the  
National Institute on Drug Abuse  
National Institutes of Health  
U.S. Department of Health and Human Services  
and the  
Department for Anti-drug Policies  
Presidency of the Council of Ministers  
Italy**

The National Institute on Drug Abuse (NIDA), an agency of the National Institutes of Health (NIH), part of the United States Department of Health and Human Services (DHHS), and the Department for Anti-drug Policies (DPA), Presidency of the Council of Ministers of the Italian government (hereinafter referred to as the "Participants"), share an interest in establishing cooperation between the two countries in areas of research on drugs and drug addiction. Activities conducted under this agreement are also consistent with the Memorandum of Intent between Italy and the United States America in Drug Demand Reduction Research, Services, and Policy Strategies (signed 7/11/11 by the Director, White House Office of National Drug Control Policy of the United States and the Undersecretary to the Prime Minister of Italy for Family, Drugs and Civil Service).



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
**Dipartimento Politiche Antidroga**

U.S. Department of  
Health and Human Services  
NATIONAL INSTITUTES OF HEALTH  
**NIDA**  
NATIONAL INSTITUTE  
ON DRUG ABUSE

This agreement has the intent to foster the conduct of mutually beneficial research and research training to improve the diagnoses and treatment of drug abuse and addiction. Areas of particular interest include research to develop new medications for the treatment of addictive disorders, research to improve early detection, screening, referral to treatment and brief interventions (SBIRT) for addictive disorders particularly among adolescents and young adults, and research to increase the number of HIV-infected drug users who seek treatment for HIV infection and addiction (the Seek, Test, Treat, and Retain strategy). Cooperation may include, subject to mutual decision, activities designed to further scientific and academic interactions between the Participants; to complement their respective areas of expertise; and to enhance their missions, particularly as they relate to the advancement of drug abuse research. Such activities may include:

1. Collaborative activities between DPA and NIDA's Clinical Trials Network related to clinical trials of new medications, including but not limited to sharing of expertise and experiences, participation in protocol development, and coordinated conduct of independent protocols of mutual interest.
2. Cross national training activities to enhance the sharing of expertise, including short term visits of Italian scientists to NIDA-supported research labs in the U.S., including NIDA's Intramural Research Program, and visits of U.S. scientists to Italy; participation by U.S. scientists in training programs such as the National School on Addiction at the Scuola Superiore di Formazione della Pubblica Amministrazione in Rome; and activities related to medical education such as those developed under NIDA's Centers of Excellence for Physician Education including developing innovative drug abuse and addiction curriculum resources with the goal of helping to fill the gaps in medical students/resident physician curricula.
3. The exchange of information, joint planning activities, and progress review through joint workshops and other means, as well as sharing of research materials, subject to the terms of a material transfer agreement and all applicable laws, regulations, and policies.
4. Other forms of research cooperation, as agreed upon and encouraged by the Participants.



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
**Dipartimento Politiche Antidroga**

U.S. Department of  
Health and Human Services  
NATIONAL INSTITUTES OF HEALTH  
**NIDA**  
NATIONAL INSTITUTE  
ON DRUG ABUSE

Any specific collaborative activities identified under this Memorandum of Intent will be characterized and agreed to in separate implementation plans and other documents as necessary. These should include objectives, time lines, reciprocal cost estimates, and projected products or results as necessary. Each Participant intends to support the costs of these activities to the extent that they are consistent with its mission and are agreed to in subsequent agreements.

The Participants may modify this Memorandum of Intent by mutual written statement. Either participant may cease cooperation under this Memorandum of Intent at any time, and should endeavor to provide six (6) months written notice to the other Participant. This agreement is intended to remain in effect for five years and may be renewed.

Nothing in this Memorandum of Intent is intended to create any binding obligations under the laws of the Participants nor under international law. Activities under this Memorandum of Intent are intended to be subject to the availability of personnel, appropriated funds and other resources of the Participants.

Signed and agreed to on this date: 25<sup>th</sup> July, 2011

Giovanni Serpelloni  
Department Head  
Department for Anti-drug Policies  
Presidency of the Council of Ministers

Nora Volkow  
Director  
National Institute on Drug Abuse  
U.S. National Institutes of Health

Sen. Carlo Giovanardi  
Undersecretary to the Prime Minister of Italy for Family, Drugs and Civil Service





## DPA STATEMENT ON SCIENTIFIC INTERNATIONAL COLLABORATIONS

Rome July 26, 2011

### CONTENTS

1. INTRODUCTION
2. DPA GENERAL PRINCIPLES
3. GENERAL AIMS OF THE AGREEMENTS ON SCIENTIFIC COOPERATION
4. SCIENTIFIC SCOPE OF PARTICULAR INTEREST FOR DPA
5. CONCRETE ACTIVITIES TO BUILD COOPERATION
6. ORGANIZATIONAL ARRANGEMENTS OF THE COOPERATIVE RELATIONSHIP
7. PERMANENT WORKING GROUPS
8. FINANCING AND COSTS
9. GENERAL PROVISIONS
10. ANNEXES

effectiveness and safety and therefore the applicability of this technique in clinics. It is in fact possible that this could be a further form of support to be added to normal treatments and education interventions in order to improve their effectiveness.

- 4.8. **HIV/AIDS infectious diseases, testing & counselling and antiretroviral treatment for drug addicts:** one key area to address in the HIV/AIDS epidemic is early (as soon as possible) identification and taking into treatment of all people who are HIV positive. This could help interrupt the HIV epidemic and will help HIV positive individuals achieve improved outcomes as well. In particular, the DPA want to study how to increase the percentage of drug addicts to be tested for HIV and how to increase treatment adherence.

### 5. CONCRETE ACTIVITIES TO BUILD COOPERATION

- 5.1. **Scientific Cooperation** between the DPA and others Centers will be implemented in concrete terms by means of specific clinical projects and trials. Joint scientific research projects can be activated and developed which are supported bilaterally in financial terms to be approved project by project.
- 5.2. **Training programs:** the possibility is envisaged to promote common training programmes, provide teaching and seminars in reciprocal training initiatives. In particular, it is desirable to rely on the presence of teachers from organizations, which collaborates within the national training program of the DPA, at the *Scuola Superiore di Formazione della Pubblica Amministrazione* (Public Administration Training School) in Rome.
- 5.3. **Cross-national training opportunities** (sharing expertise). Training of Italian researchers needs to take into account the Italian academic and clinical environment. It is desirable to develop a concrete sharing and a possible exchange of professional in the field of research and clinics in order to gain best practises and innovative ways of research and clinical treatment as well as prevention modalities, in the field of education interventions and recovery.
- 5.4. **Workshops and congresses:** it is useful to organise conferences and workshops in Italy, with the participation of foreign guests, on issues which will be jointly agreed to be of interest, in order to encourage cooperation and the analysis of specific scientific issues within the scope of the areas of interest set out above. These events are also aimed at encouraging good practices.

### 6. ORGANIZATIONAL ARRANGEMENTS OF THE COOPERATIVE RELATIONSHIP

In order to make cooperation concrete, possible and effective, the following means of organisation and planning have been identified:

#### 6.1. National network

The DPA will promote involvement in the studies by the national networks of the pre-existing cooperative centres, by encouraging the voluntary adherence of research and clinical units, as well as Regions, and by selecting the units interested in the projects which will be activated on the basis of the interest shown and the real operational and technical scientific capacities.

its offered by the Italian public healthcare of the related infectious diseases (in particular HIV/AIDS). The Italian strategy is, therefore, based on prevention, treatment/rehabilitation,

### 4. SCIENTIFIC SCOPE OF PARTICULAR INTEREST FOR DPA

On the basis of the National Drugs Action Plan, the following areas of interest are considered as priority by the DPA:

- 4.1. **Clinical trials of promising medications:** The Italian healthcare system has outstanding facilities to develop new medication trials with a good access of patients to medical facilities and a good presence of nursing and support staff. It is reasonable and possible to begin to plan multicentric trials to realize useful studies of cocaine, opiate, tobacco and also marijuana addicts.
- 4.2. **Studies on Early Detection, drug testing and brief interventions:** it is important to enhance and to emphasize early detection and brief intervention. A serious problem is in fact the strong delay of diagnosis of drug use especially in the youth.
- 4.3. **Natural history studies of drug abusers** (taking advantage of the Italian data systems - SIND): through SIND system natural history studies could help us understand the long-term trajectories of people who have been treated. There is surprisingly little knowledge about the medical and social outcomes of drug addicts following treatment. The existing information systems in Italy should allow follow up of treated drug addicts to fill this gap in knowledge of phenomenon.
- 4.4. **Italian Electronic Medical Record (SIND system) and assessment of the outcome:** the Italian system for data gathering through individual patient records enables the carrying out of a series of statistical and epidemiological analyses, but they need correct data collection and processing and interpretation of information. It is necessary to foster activities for maintaining such a system and improving quality of data collection of the existing system as well as its processing. Of particular interest is improving the existing online system (MFP) at Addiction Departments to assess the effective outcome in clinical practice.
- 4.5. **Clinical neurosciences** with in-depth analysis above all of the cognitive-behavioural aspects and their changes during treatment. Scientific cooperation in this field should also focus training and possible studies on the assessment of the effects of initiatives (educational, psychological and social support) for the brain and its functioning, above all in relation to the development of the ability for the prefrontal control of abusive behaviour and the possible interference of drugs on brain development processes in adolescents.
- 4.6. **Neuroimaging of addiction:** The development and application of neuroimaging techniques in the field of addiction and Spectroscopic Magnetic Resonance are important in better understanding the mechanisms and grounds for addiction. Also in Italy some preliminary studies have shown the possibility and potential of these research programs which it is thus intended to promote and encourage at national level. It is necessary to share experiences and direct Italian researchers into this innovative and experimental field, also on the basis of the experiences which have already been accumulated by other research Centers abroad.
- 4.7. **Transcranial Magnetic Stimulation:** this new electromagnetic stimulation technique may find interesting applications also in the field of the various forms of addiction. Preliminary studies have shown the sense in studying and activating clinical trials on drug addicts in order to assess the real





## SCIENTIFIC SCOPE OF PARTICULAR INTEREST FOR DPA

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## CONCRETE ACTIVITIES TO BUILD COOPERATION

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# Joint Statement

## For a human and balanced drug policy

Stockholm 20 May 2012



**Maria Larsson**

*Minister for Children and the Elderly  
Ministry of Health and Social Affairs,  
Sweden*



**Viktor Ivanov**

*Director, Federal Narcotic Service of  
Russian Federation*



**Gus Jaspert**

*Deputy Director at the Home Office,  
United Kingdom*



**Gil Kerlikowske**

*Director of National Office of Drug  
Control Policy, USA*



**Giovanni Serpelloni**

*Head of Department for  
Antidrug Policies, Italy*





**UNODC**  
United Nations Office on Drugs and Crime

## International Cooperation Project

In collaboration with:



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
Ministro per la Cooperazione Internazionale e l'Integrazione  
**Dipartimento Politiche Antidroga**

# Prevention Strategy and Policy Makers

**“A solidarity consortium”**

**Rome 9<sup>th</sup> –10<sup>th</sup> October, 2012**

In collaboration with:



Scuola Superiore della  
Pubblica Amministrazione

In collaboration and with the support of:



European Monitoring Centre  
for Drugs and Drug Addiction



**unicri**  
United Nations  
International Crime and Justice  
Research Institute



# **Solidarity Consortium for prevention strategies and intervention of drug use**



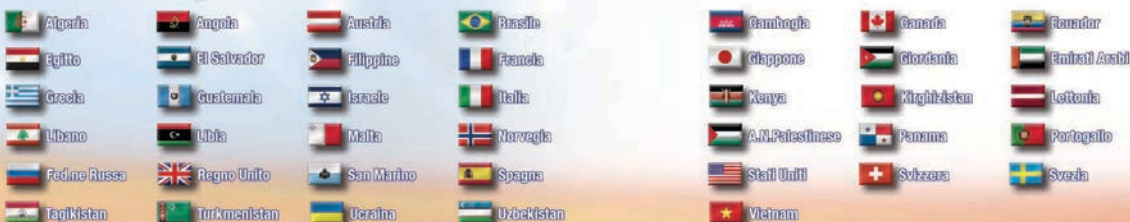
# Paesi ed organizzazioni partecipanti all'incontro



In collaborazione con:



**ONDCP**  
Office of National Drug Control Policy  
White House





# Partecipating Delegations



Mohamed Zouggar, Graca Ana Da Conceicao, Claudia Rafling, Paulina Duarte, Angelo Fernandes Gioia, Gen. Neak Yuthea, Aaron Coe, Carlos Vallejo, Rodrigo Velez Valarezo, Rafael Parreno Navas, Amr A. Osman, Ali Hassan Amer, Andres A. Ramirez Medrano, Daniel J. Menninger, Laura D'Arrigo, Minerva Melpomeni Malliori, Luky Veronica Lopez Angulo, Yair Geller, Akihiro Nakamura, Firas S. A. Al Khateeb, William Okedi, Alymbai Sultanov, Janis Bekmanis, Mounir Abdel Kalek, Adel Machmouchi, Auob Alashegam, Marilyn Clark, Brekke Torbjorn K., Safa Arafat, Ramon Bartoli, Rommel Garcia, Viveca Catalig, Jose Aurelio, Manuel Cardoso, Ana Sofia Santos, Mikhail Kiyko, Vladimir Vysotskiy, Platon Ratskevich, Alexander Zezyulin, Mauro Fiorini, Maria Sofia Aragon, Francisco de Asis Babin Vich, Ruth Jacoby, Emil Wannheden, Isabelle Widmer, Alisher K. Tashripov, Mammetdurdy Sopyyev, Volodymyr Tymoshenko, Abdul Rahman Alowais, "Maj. Gen. Abdul Jaleel Mahdi", Mohammad Al Asmawi, Paul Chandwani, Bora Dushku, Richard Baum, Iladar R. Shigabutdinov, Duc Guyen Cuu, Viet Trung Tran, Kien Nguyen, Patrick Penninckx, Danilo Ballotta, Andr s Finguerut, Alessandra Liquori O'Neil, Daniela Salvati, Arthur T. Dean, Susan R. Thau, Giovanni Tamburino, Kjell Erik Oie, Viktor Ivanov, Jeffrey Lee, Zili Sloboda, Giovanna Campello, Yea - Rin Cha, Giovanni Tamburino, West Huddleston, Robert G. Rancourt, Douglas B. Marlowe, Lindsay Wood, Kevin Sabet, Raymond Yans, Jonathan Lucas, Yury Fedotov, Gilberto Gerra, Roberto Arbitrio

## Bureau



**Yury Fedotov**  
*Executive Director of the United Nations  
Office on Drugs and Crime*



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
Ministro per la Cooperazione Internazionale e l'Integrazione  
**Dipartimento Politiche Antidroga**



**Giovanni Serpelloni**  
*Capo Dipartimento Politiche Antidroga  
Presidenza del Consiglio dei Ministri*



**unieri**  
United Nations  
Interregional Crime and Justice  
Research Institute



**Jonathan Lucas**  
*Director of the United Nations  
Interregional Crime and Justice Research*



**Giovanni Serpelloni**



**INCB Head: Raymond Yans**





Italian Scientific Community on Addiction



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- Farmacologia e tossicologia
- Neuroscienze
- Prevenzione
- Strategie e management
- Tecniche analitiche**



Italian Journal On Addiction Drog@News National School on Addiction International Collaboration Groups

### Presentazione

I Gruppi di Collaborazione Internazionale sono costituiti da professionisti che operano nelle diverse aree d'intervento e di studio nel campo delle dipendenze.

I Gruppi promuovono rapporti e collaborazioni internazionali sia con gli Stati dell'area europea e mediterranea che con grandi Paesi come gli Stati Uniti, la Federazione Russa, la Repubblica Popolare Cinese. Per lo scambio delle "good clinical practices", delle più recenti scoperte della ricerca scientifica e delle istanze politiche, sociali ed economiche legate al fenomeno della droga, saranno attivate collaborazioni con istituti di ricerca nazionali e con organismi internazionali quali:

Office of National Drug Control Policy (ONDCP)

Impostare Internet Explorer come browser predefinito?

tration (SAMHSA);





# Drog@news

in collaborazione con:



Ministero della Salute



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NEUROSCIENCE  
of ADDICTION VIDEO e DOCUMENTI

CANNABIS  
E DANNI ALLA SALUTE

Focus On



**Droga e carcere:  
misure alternative,  
opportunità di rinascita  
per i tossicodipendenti**

La tossicodipendenza è una malattia prevenibile, curabile e guaribile e che deve trovare soluzioni fuori dal carcere.

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Editoriale



**La Scuola del DPA getta  
le basi per la  
formazione di giovani  
professionisti**

*Farmacologia e Tossicologia* 05-11-2012

## Il catinone sintetico MDPV utile per la comprensione degli effetti dei "sali da bagno"

di *Redazione Drog@news* - fonte *Neuropsychopharmacology*

Uno studio realizzato dal Nida ha approfondito il meccanismo attraverso il quale il catinone sintetico MDPV, venduto sotto forma di "sali da bagno" ma utilizzato come sostanza stupefacente stimolante, agisce sui neurotrasmettitori dopamina e la norepinefrina.

[continua a leggere l'articolo >>](#)



**Allerte attive - Sistema Nazionale di Allerta Precoce - National Early Warning System**

**N.E.W.S.**



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Martedì 20 Settembre 2011

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Dipartimento Politiche Antidroga

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Numero corrente

Colophon

Presentazione > C. Giovanardi

Presentazione > J. Lucas

Intervista > N. Volkow

Editoriale > G. Serpelloni

Contributi originali

Rassegne della letteratura

Ricerche, progetti, iniziative

Forum

**Vol 1, n° 1-2 (2011)**  
L'Italian Journal On Addiction è lo strumento di informazione scientifica dell'Italian Scientific Community on Addiction, dedicato alle dipendenze e ai fenomeni ad esse correlate, ai meccanismi neuro-psico-biologici e agli aspetti psico-educativi ed epidemiologici. È orientato alla promozione del confronto tra i ricercatori e i professionisti del settore con l'obiettivo di individuare gli interventi, di cura e contrasto del fenomeno, più validi, riconosciuti a livello internazionale.  
  
In questa prima uscita poniamo all'attenzione dei nostri lettori il tema dei danni derivanti dal consumo di cannabis, quello sulle nuove strategie di prevenzione e sulle nuove modalità di consumo delle sostanze legali.  
  
Per la lettura dell'IJA potete consultare l'indice delle rubriche posizionato alla sinistra del vostro schermo, il servizio è completamente gratuito e non richiede la registrazione al sito.

Sfoglia il fascicolo

**IJA**  
è lo strumento di informazione scientifica della

**ITALIAN SCIENTIFIC  
COMMUNITY  
ON ADDICTION**

INTERVISTA  
ALLA PROF.SSA  
**NORA VOLKOW**  
NIDA  
NATIONAL INSTITUTE ON DRUG ABUSE

Articoli in pubblicazione

Buprenorfina nella terapia di disassuefazione da oppiacei  
M. A. Raggi, M. A. Sara...

Utenti

Accedi

Registrati

Esci

Vedi le notifiche

Gestisci le notifiche

Modifica il profilo

Impostare Internet Explorer come browser predefinito?

SI

No

X





PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
Ministro per la Cooperazione Internazionale e l'Integrazione  
**Dipartimento Politiche Antidroga**

# THE ITALIAN SCHOOL ON ADDICTION



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
Ministro per la Cooperazione Internazionale e l'Integrazione  
**Dipartimento Politiche Antidroga**



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SCUOLA SUPERIORE  
DELLA PUBBLICA AMMINISTRAZIONE



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Scuola Superiore  
della Pubblica Amministrazione

FORMAZIONE DI ECCELLENZA PER I DIRIGENTI E I FUNZIONARI DELLA PA







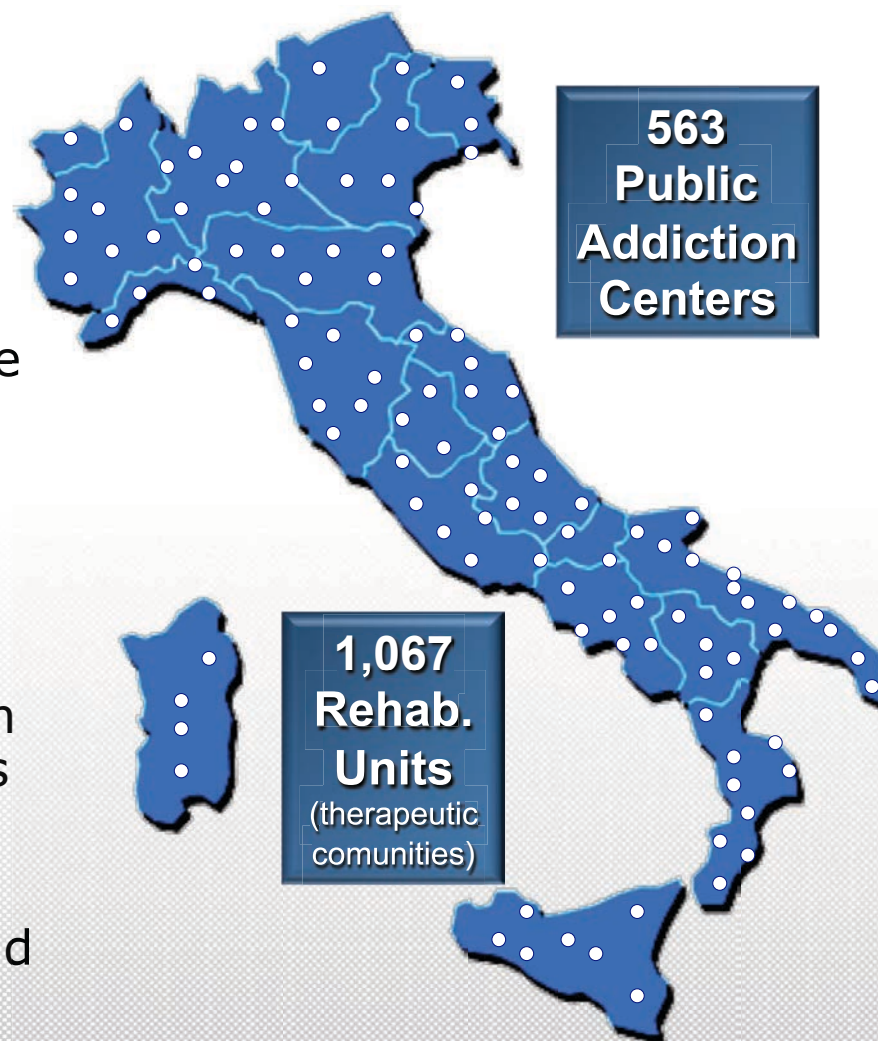
# Drug use and addiction in Italy: a Brief epidemiological report





## Main Characteristics of the Italian Public Health System for drug addicts

- Funded by national and local governments
- Distributed throughout the whole Italy
- **Free** assistance - no charge to the patients
- Provide treatment for
  - substance and alcohol abuse
  - infectious diseases (HIV, STD, hepatitis, etc.) in collaboration with infectious diseases clinics
- Integrated treatment: pharmacological, psychological and social support







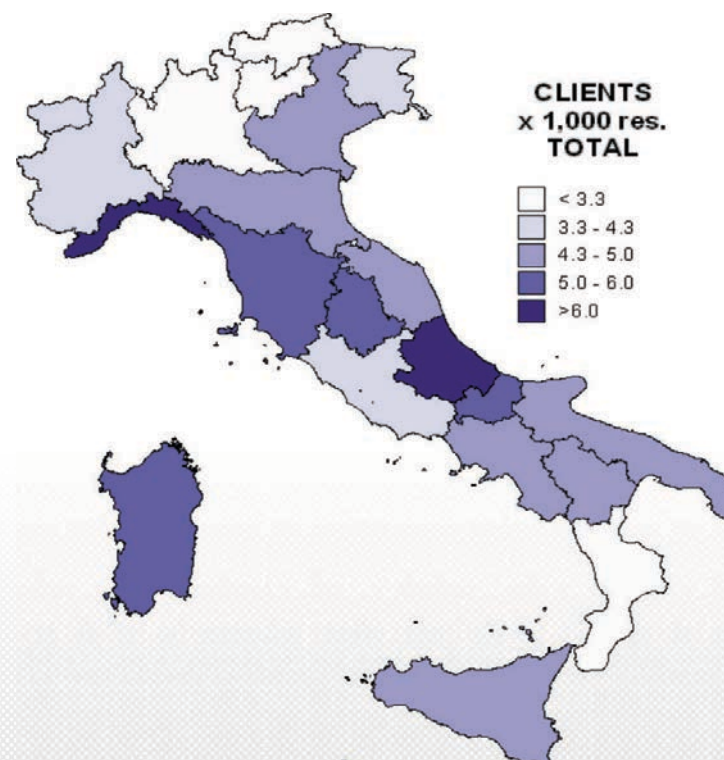
# Italian Public Health System Treated Population and Need of Treatment (2011)

## 2011 NATIONAL DATA

**520.150** Estimated number  
of addicts needing  
treatment

**172.211** Total treated clients

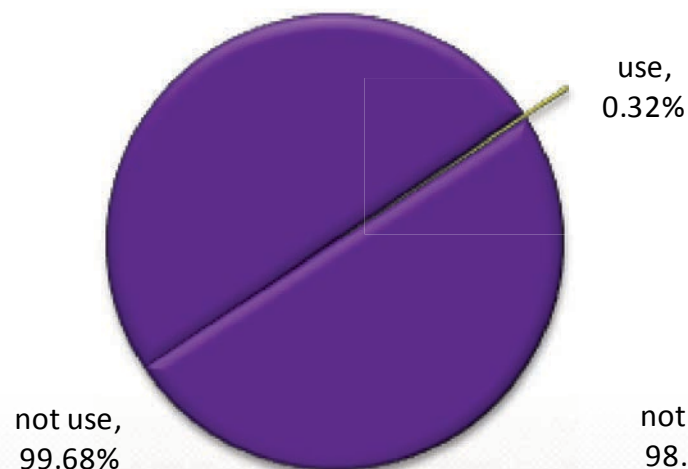
**33.1%** are in treatment





## Drug use (% prevalence) in the student population aged 15-19 over the 12 months prior to the survey. The years 2012

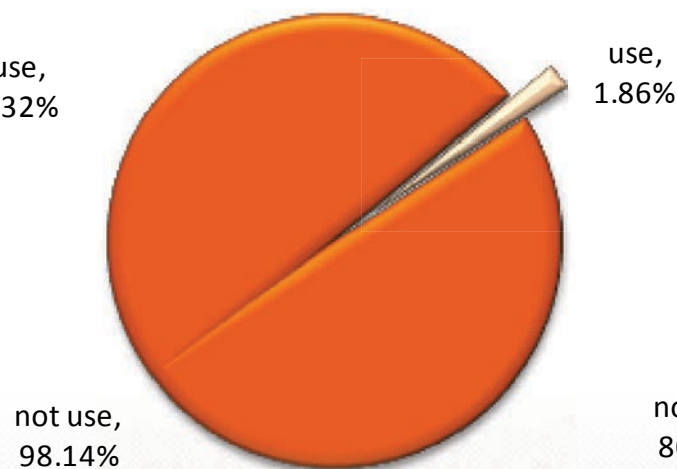
HEROIN



**0.23%** over the 30 days prior to the survey

2011: 0.4%

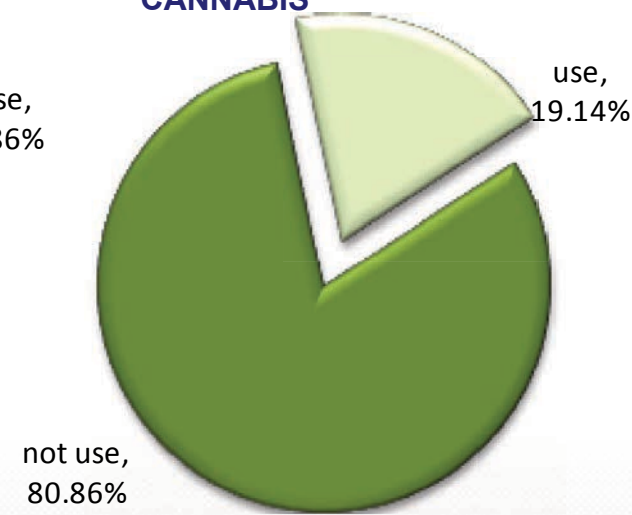
COCAINE



**1.06%** over the 30 days prior to the survey

2011: 2.0%

CANNABIS



**12.95%** over the 30 days prior to the survey

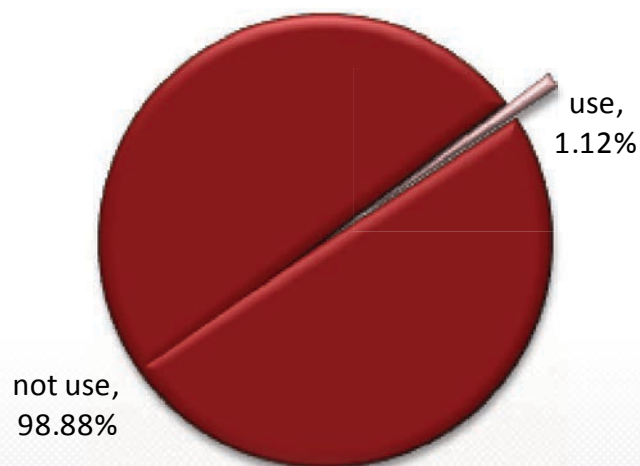
2011: 17.9%





## Drug use (% prevalence) in the student population aged 15-19 over the 12 months prior to the survey. The years 2012

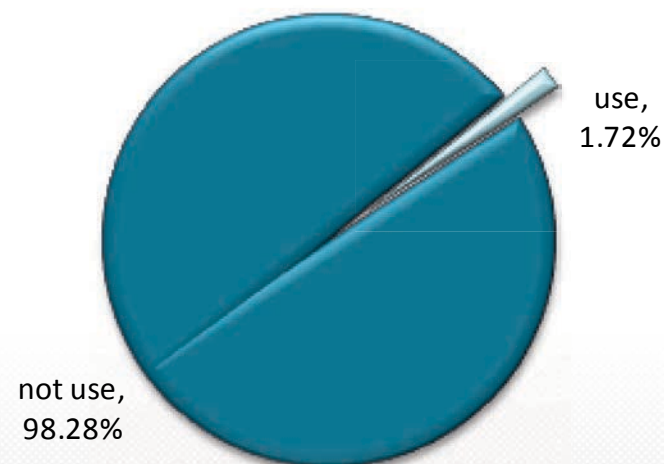
STIMULANTS



**0.57%** over the 30 days prior to the survey

2011: 1.0%

HALLUCINOGENS

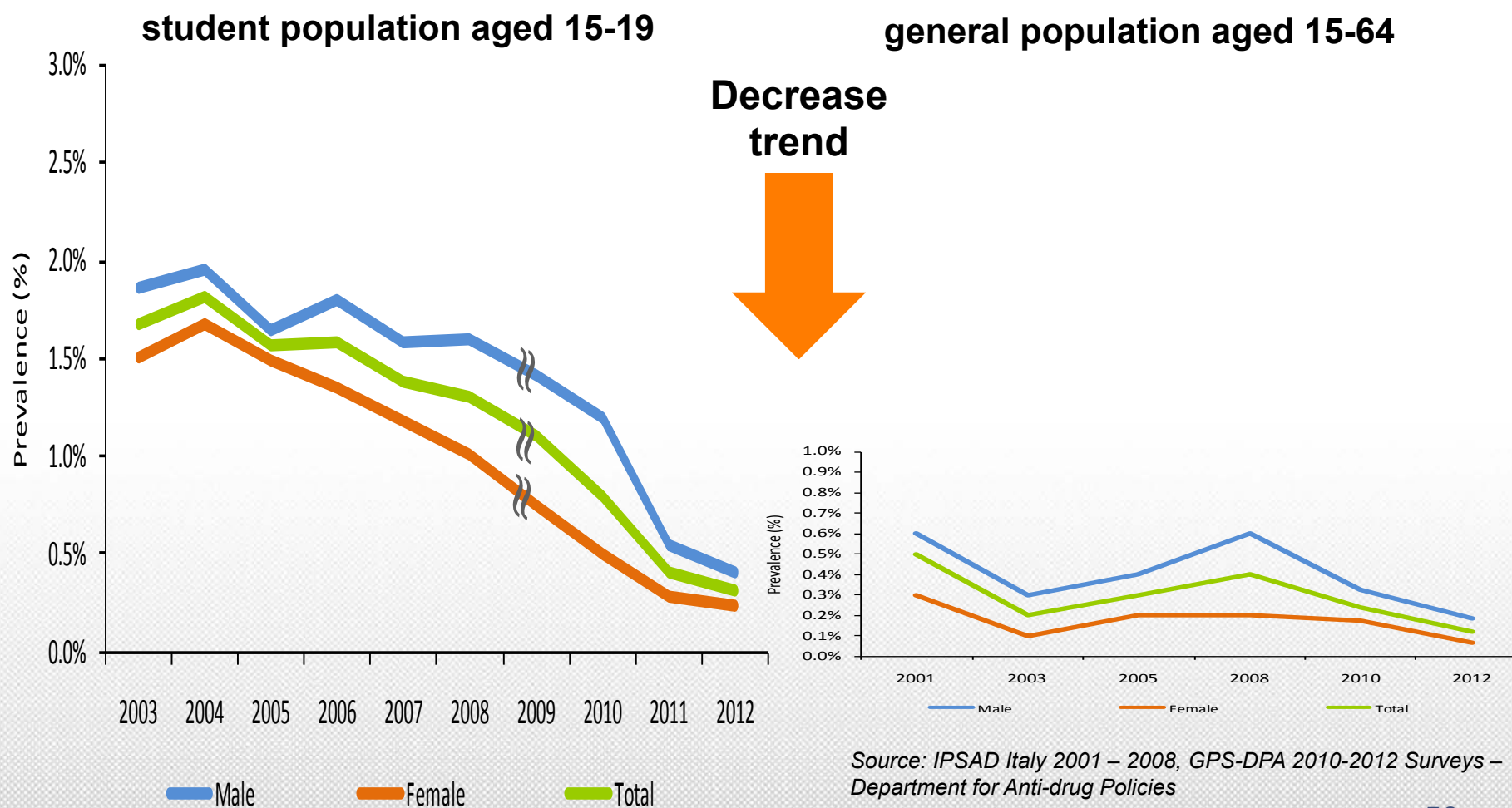


**0.86%** over the 30 days prior to the survey

2011: 1.9%



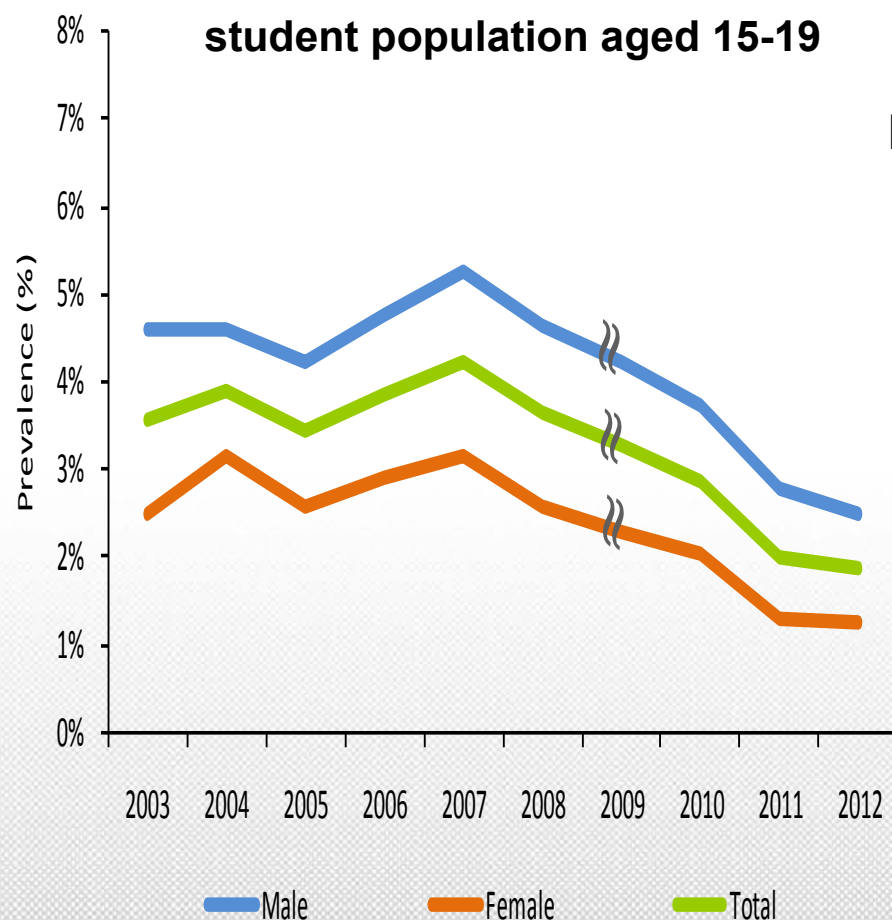
# Heroin use (% prevalence) in the over the 12 months prior to the survey. 2003-2012





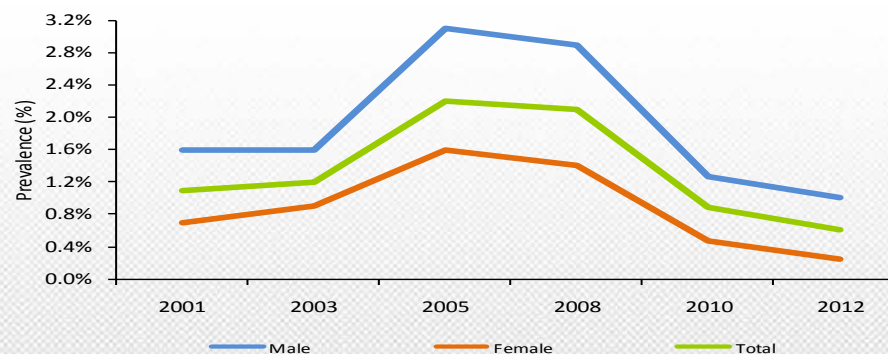


# Cocaine use (% prevalence) over the 12 months prior to the survey. 2003-2012



Source: ESPAD Italy 2003-2008 – SPS-DPA Surveys 2010-2012 –  
Department for Anti-drug Policies

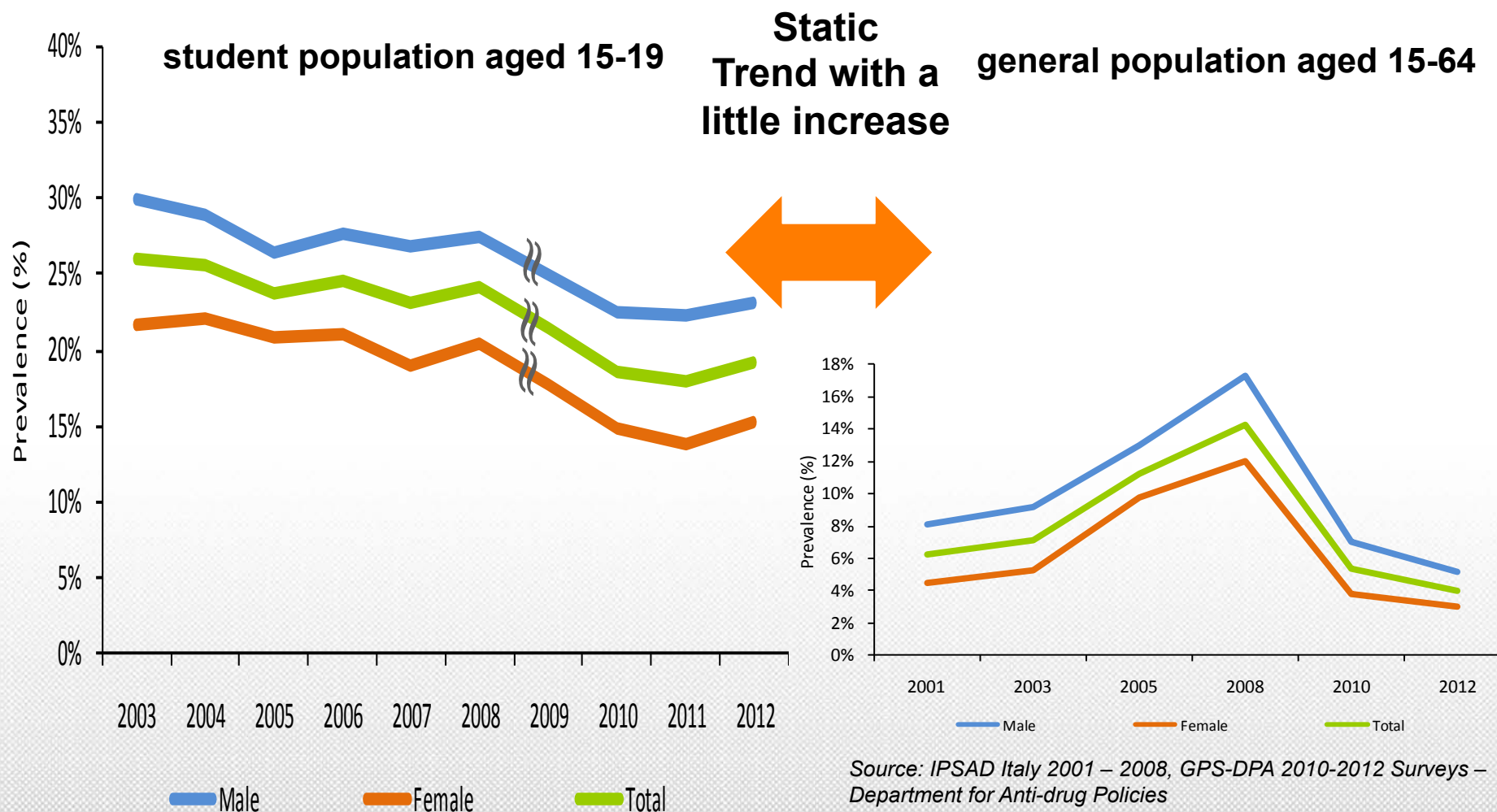
**Decrease  
trend**



Source: IPSAD Italy 2001 – 2008, GPS-DPA 2010-2012 Surveys –  
Department for Anti-drug Policies



# Cannabis use (% prevalence) over the 12 months prior to the survey. 2003-2012



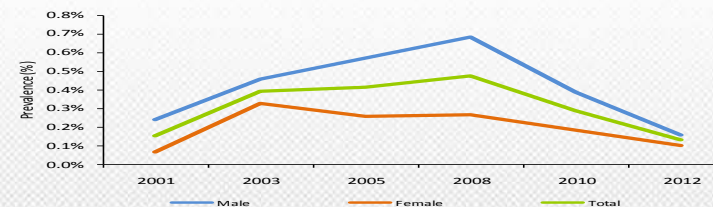
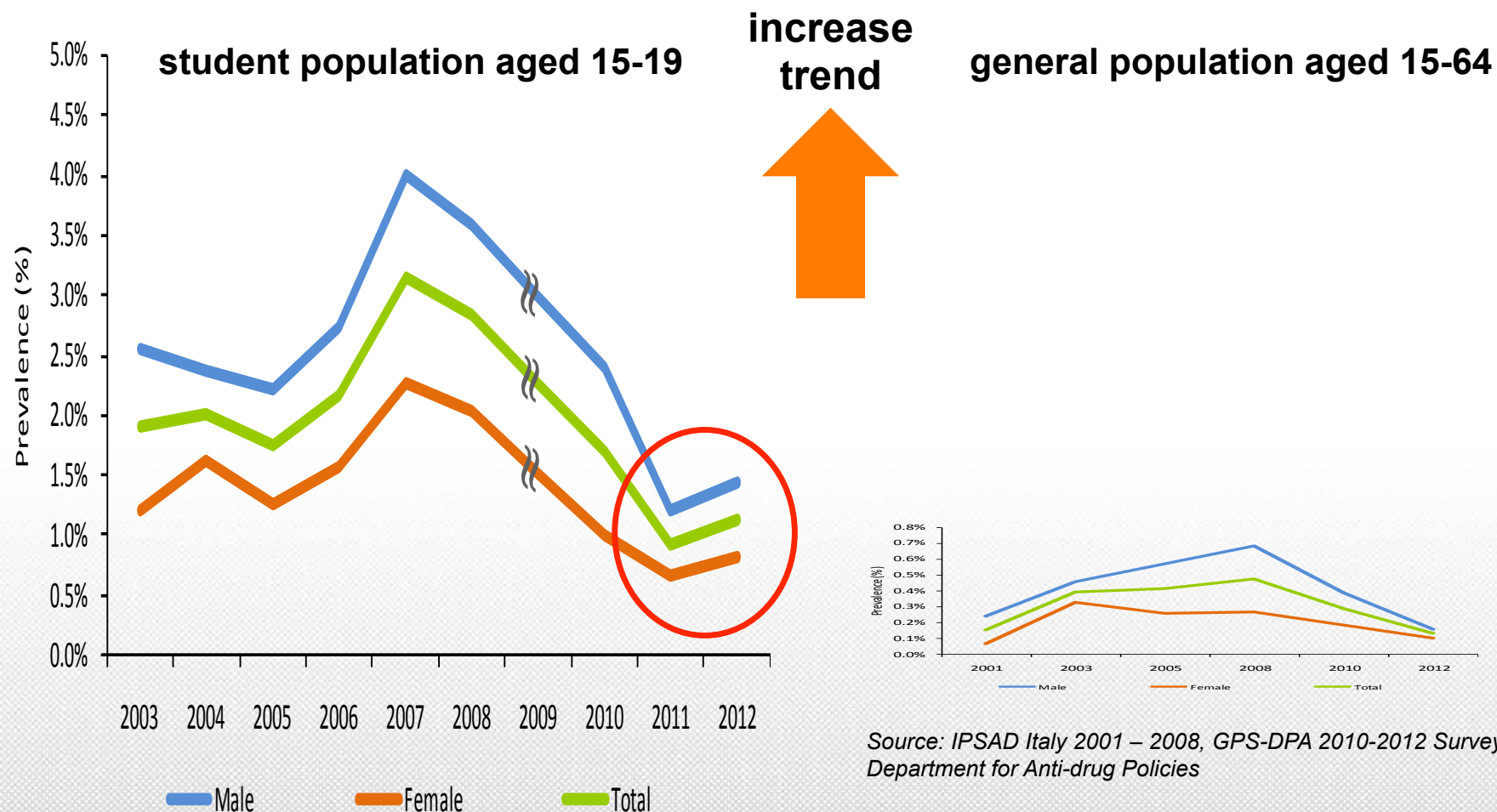
Source: ESPAD Italy 2003-2008 – SPS-DPA Surveys 2010-2012 –  
Department for Anti-drug Policies

Source: IPSAD Italy 2001 – 2008, GPS-DPA 2010-2012 Surveys –  
Department for Anti-drug Policies





# Stimulant use (% prevalence) over the 12 months prior to the survey. 2003-2012



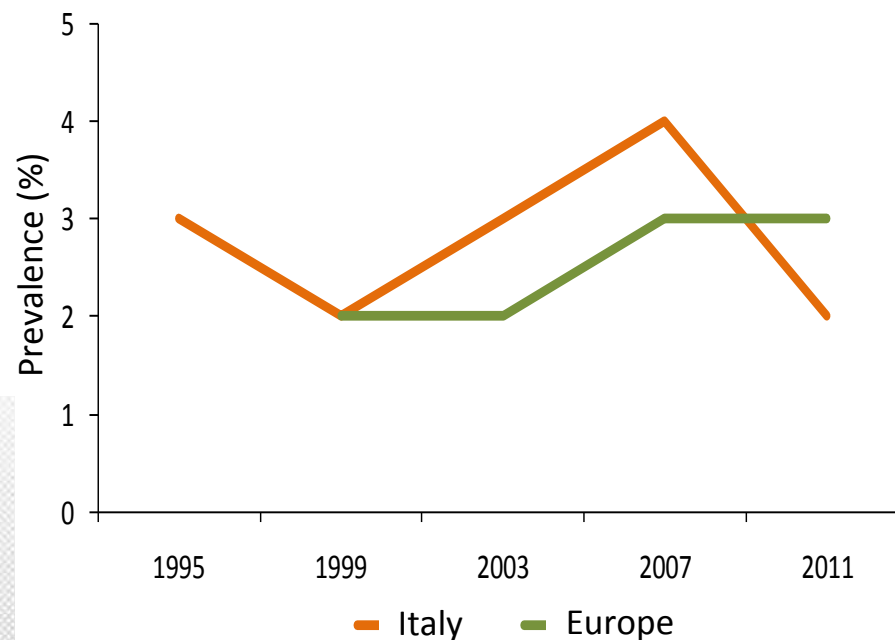
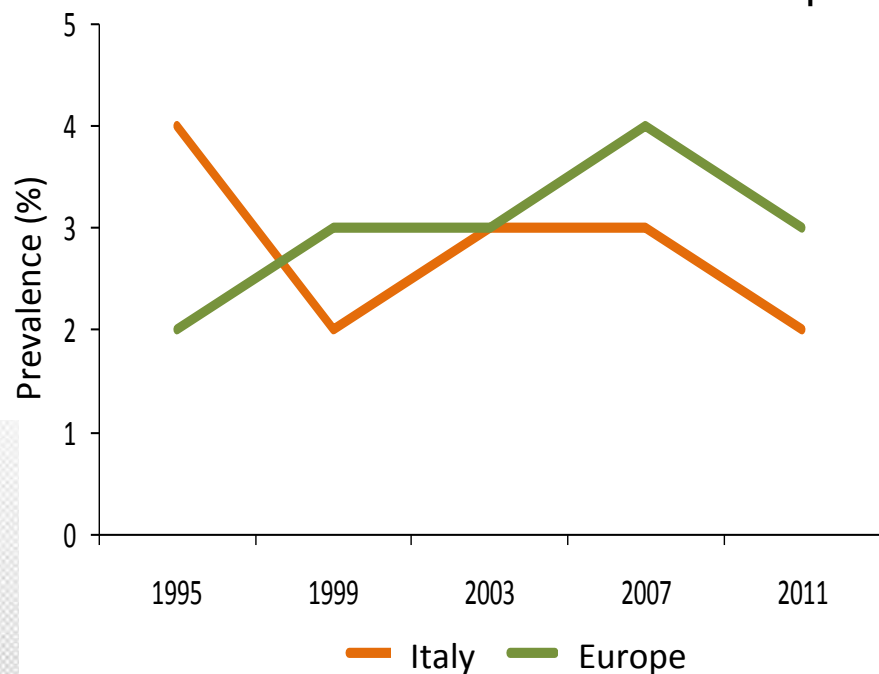
Source: IPSAD Italy 2001 – 2008, GPS-DPA 2010-2012 Surveys – Department for Anti-drug Policies



## Comparison ITA – UE: use of Ecstasy (prevalence %) in the 16 year student population – lifetime. Years 1995-2011

## Comparison ITA – UE: use of amphetamines (prevalence %) in the 16 years student population –lifetime. Years 1995-2011

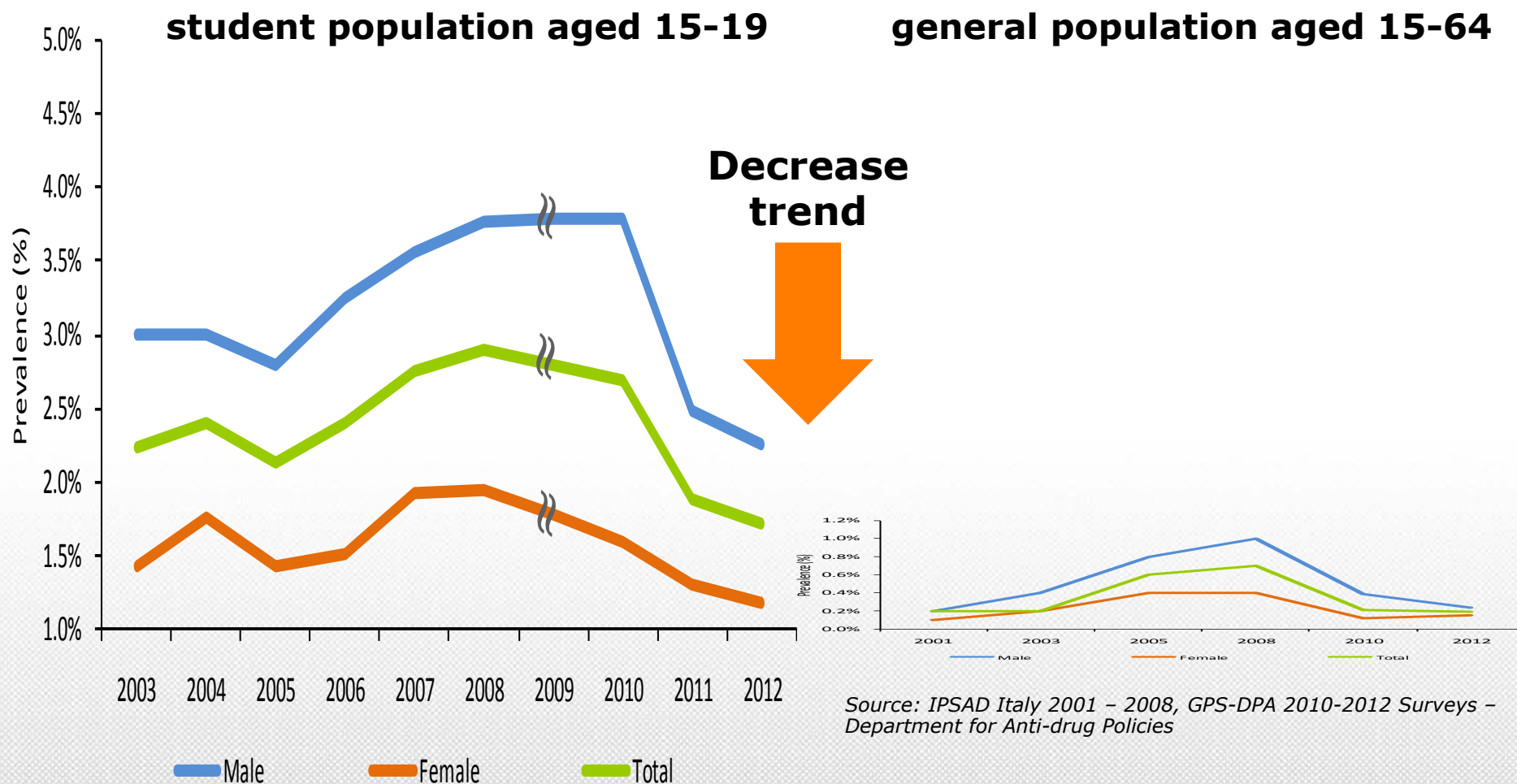
Different between Italy and EUROPE:  
a much larger use of MDMA and  
Amphetamines





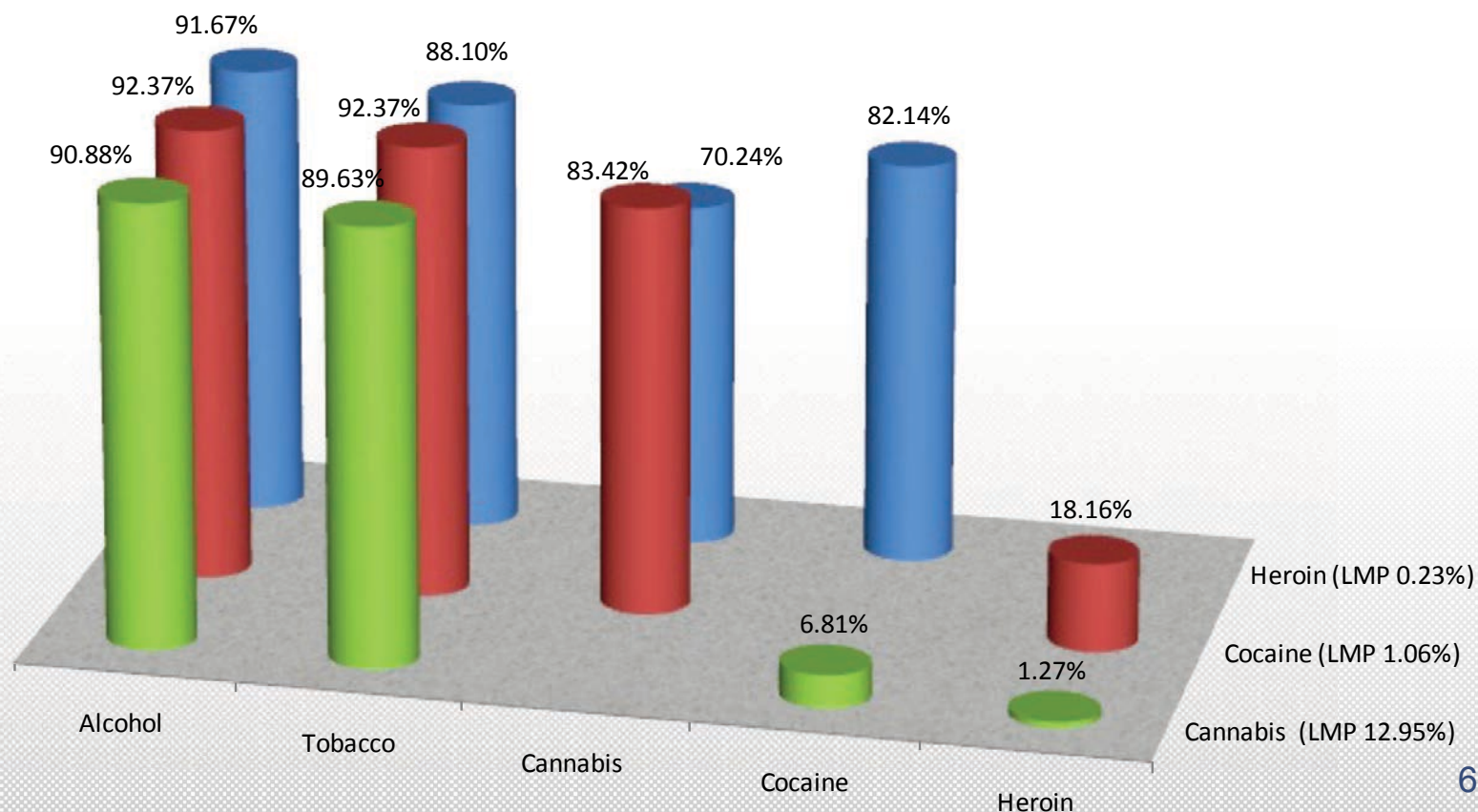


# Hallucinogen use (% prevalence) over the 12 months prior to the survey. 2003-2012





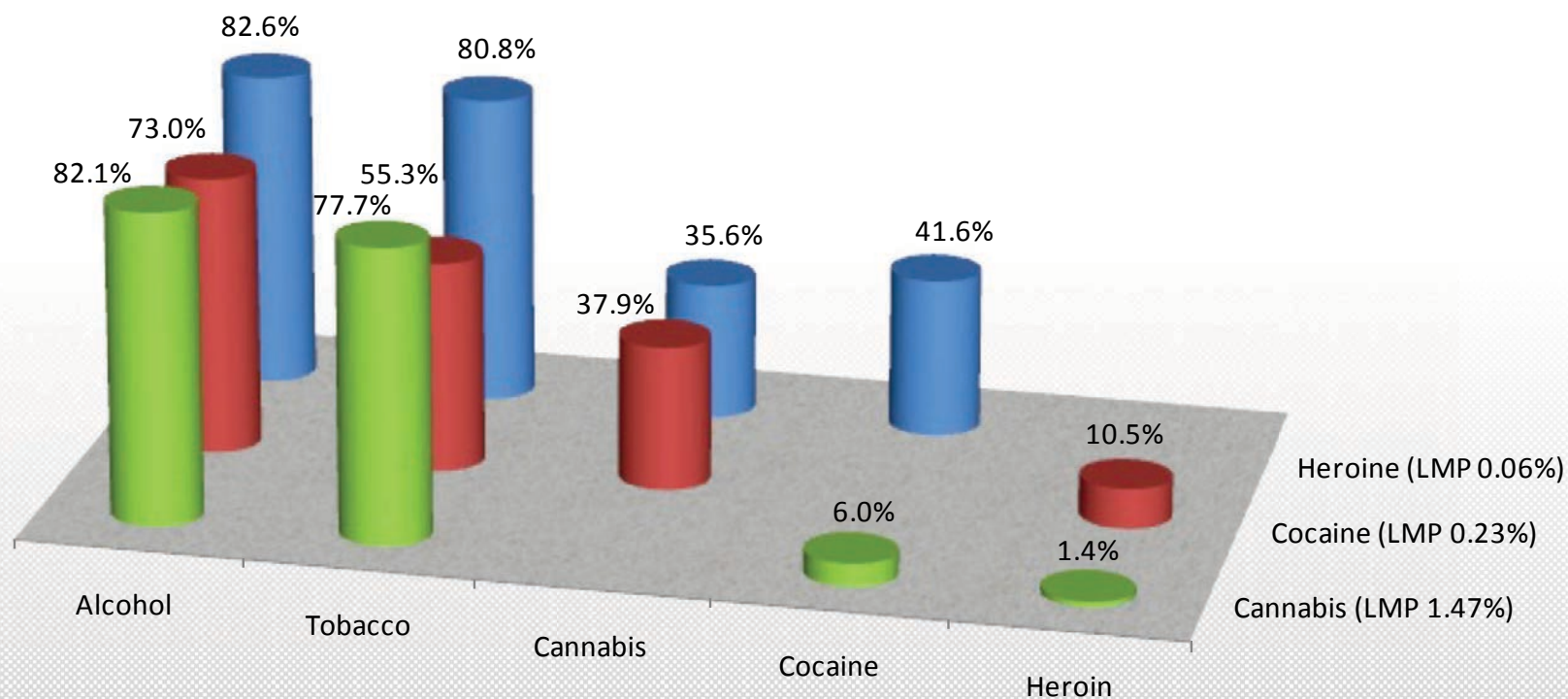
## Distribution of poly drug use in the student population aged 15-19 in the last 30 days, related to primary use of cannabis, cocaine and heroin. Year 2012







## Distribution of poly drug use in the general population aged 18-64 in the last 30 days, related to primary use of cannabis, cocaine and heroin. Year 2012





# Wastewater analyses DPA network





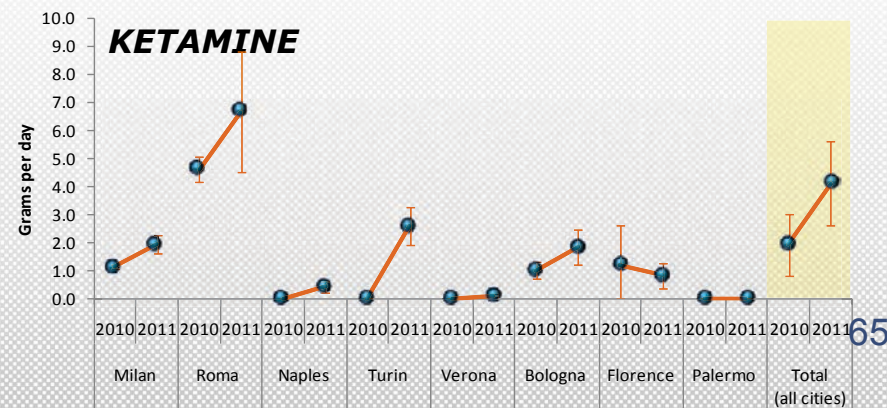
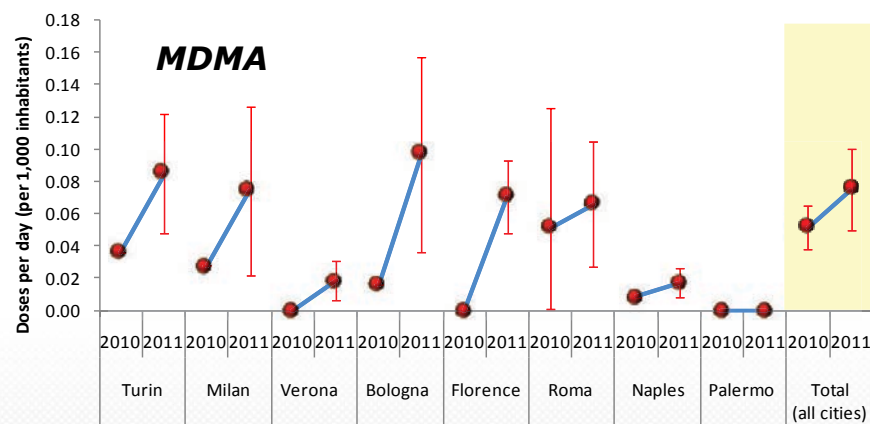
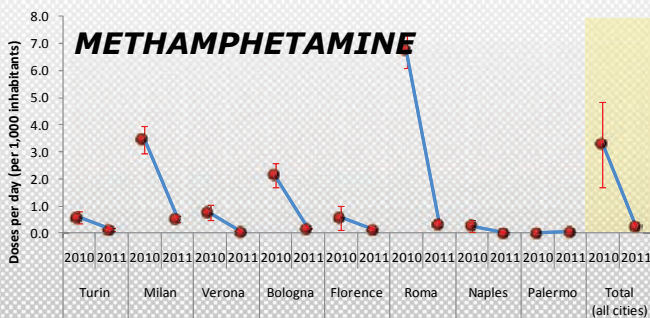
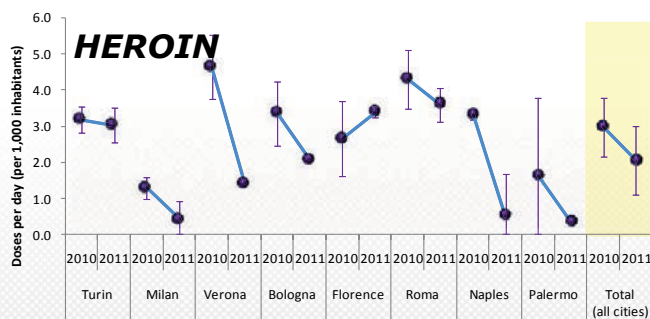
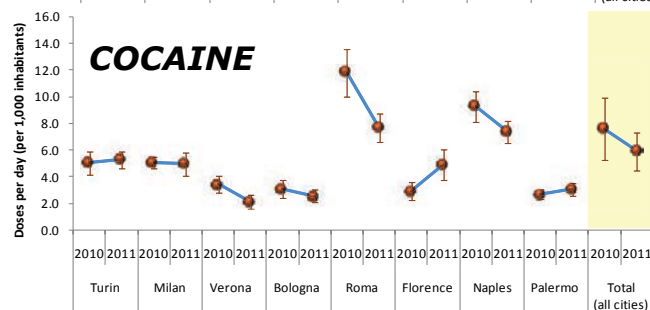
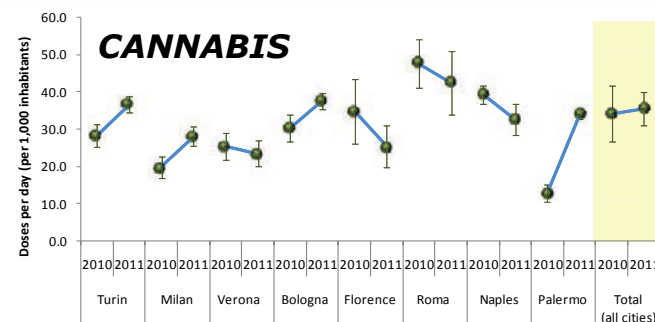


# Wastewater analyses

Distribution of the average number of doses of drugs consumed per day (per 1,000 inhabitants) in each city

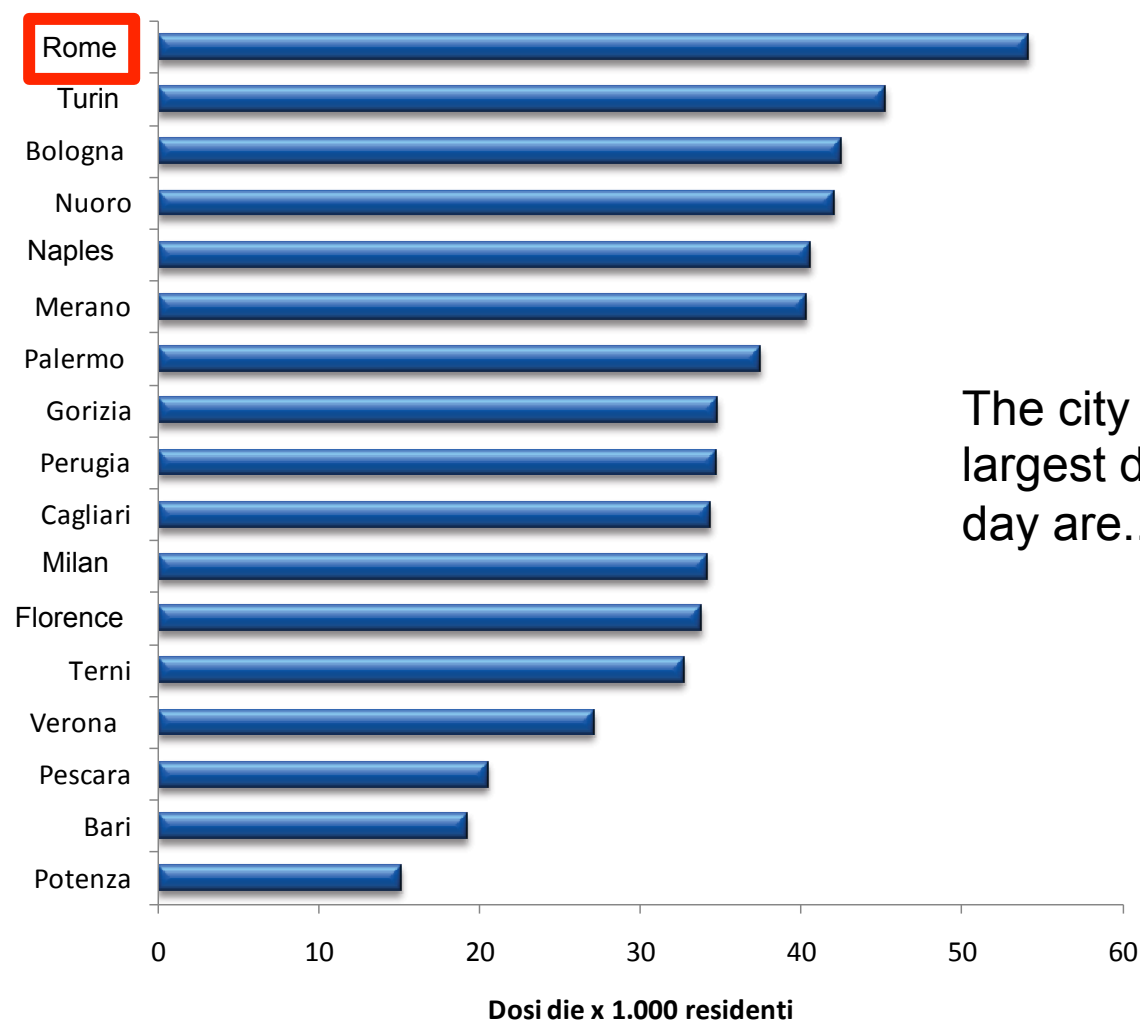
2010-2011

“THERE IS A COHERENCE with the survey data”





## Distribution of consumption of drug substances (g/day per 1,000 residents) recorded in urban centers selected for the study. Year 2011



The city with the largest dose per day are...



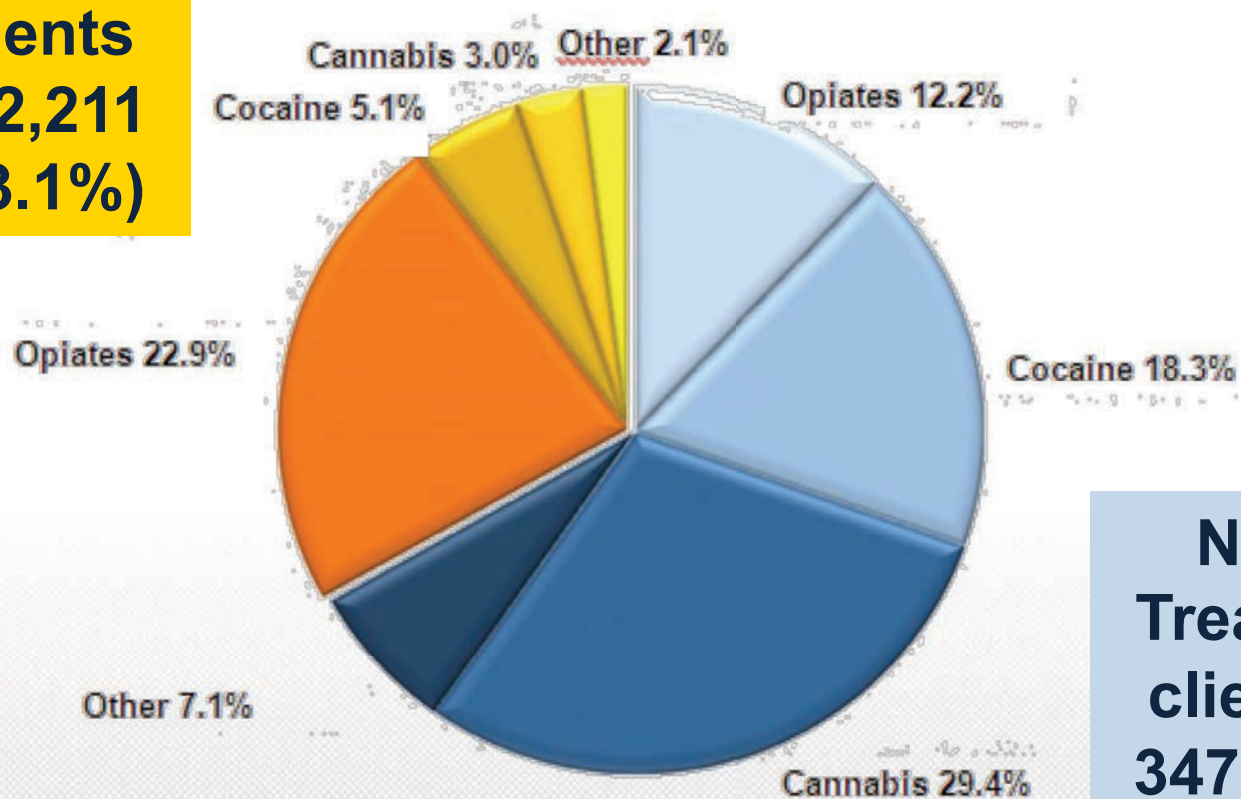


# Drug Addicts Treatments



## Treated clients and Not Treated clients – Years 2011

**Treated  
clients  
172,211  
(33.1%)**

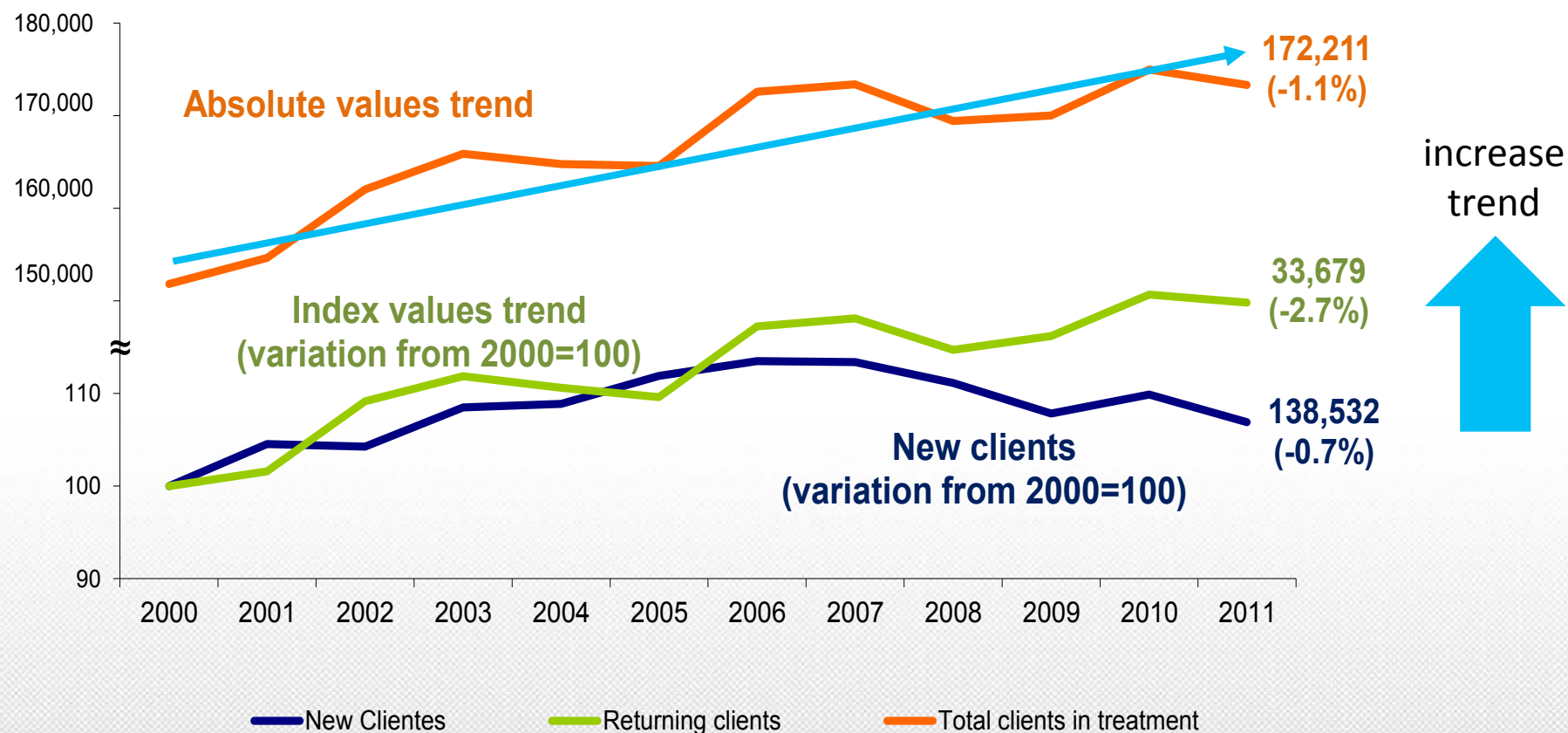


**Not  
Treated  
clients  
347,939  
(66.9%)**





## Characteristics of subjects in treatment – 2000 - 2011

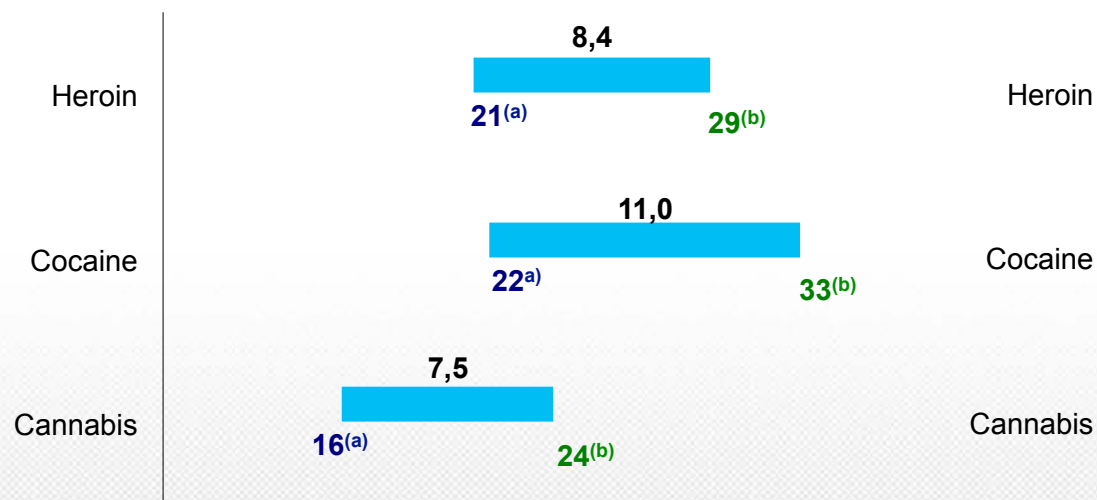




## Latency period: Age at first use - age at first treatment

A Big and serious delay because is a critical period for infectious disease risk, for overdose risk and for criminal risk.

### Men

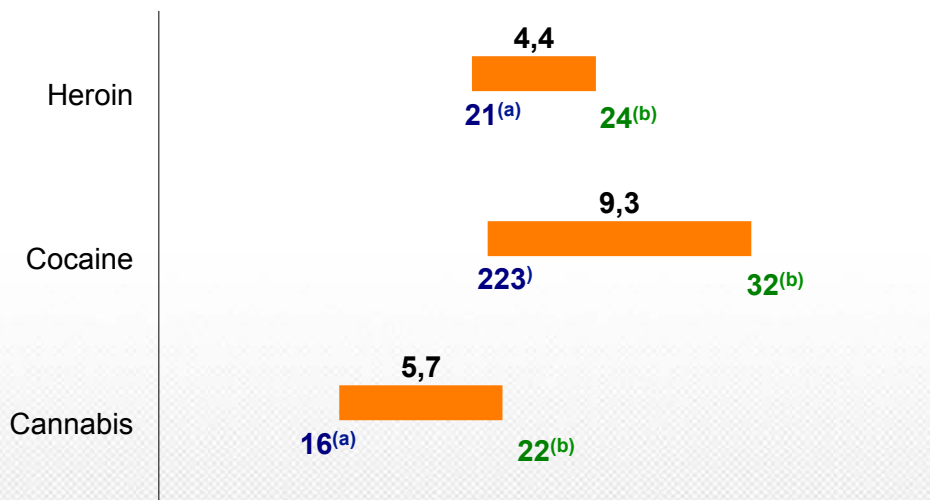


(a) = Age at first use

(b) = Age at first treatment

■ Latency period (years)

### Women



(a) = Age at first use

(b) = Age at first treatment

■ Latency period (years)

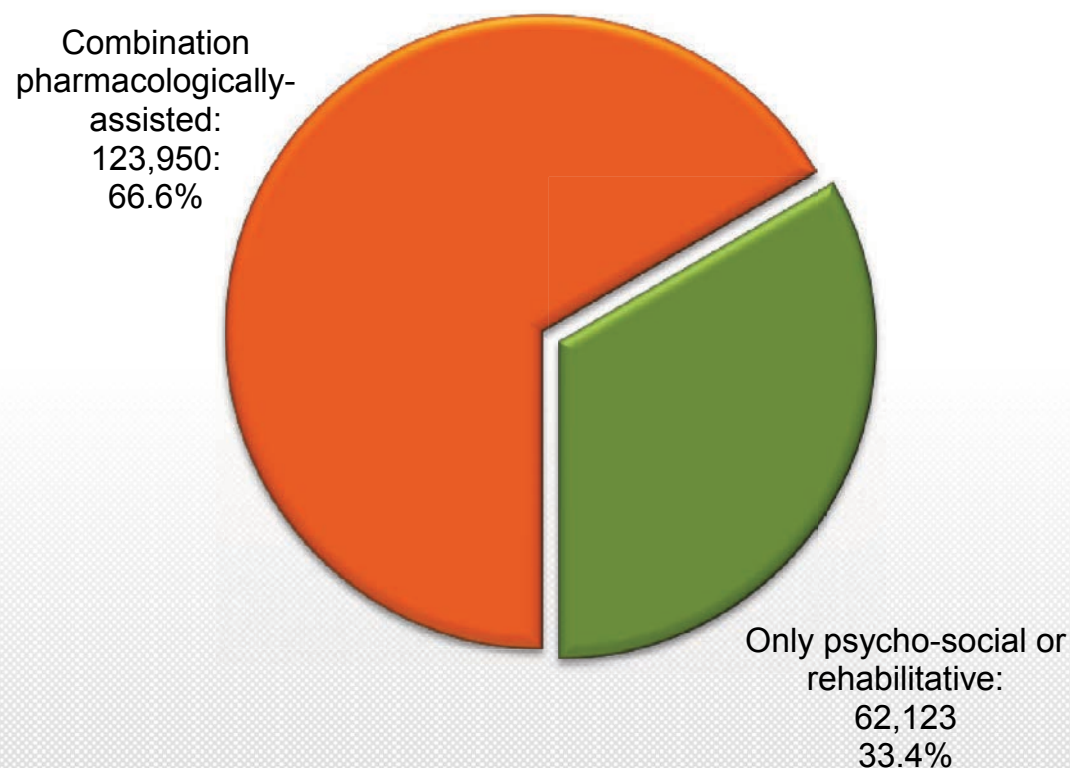




## Total Treatments provided. – Year 2011

**186.213**

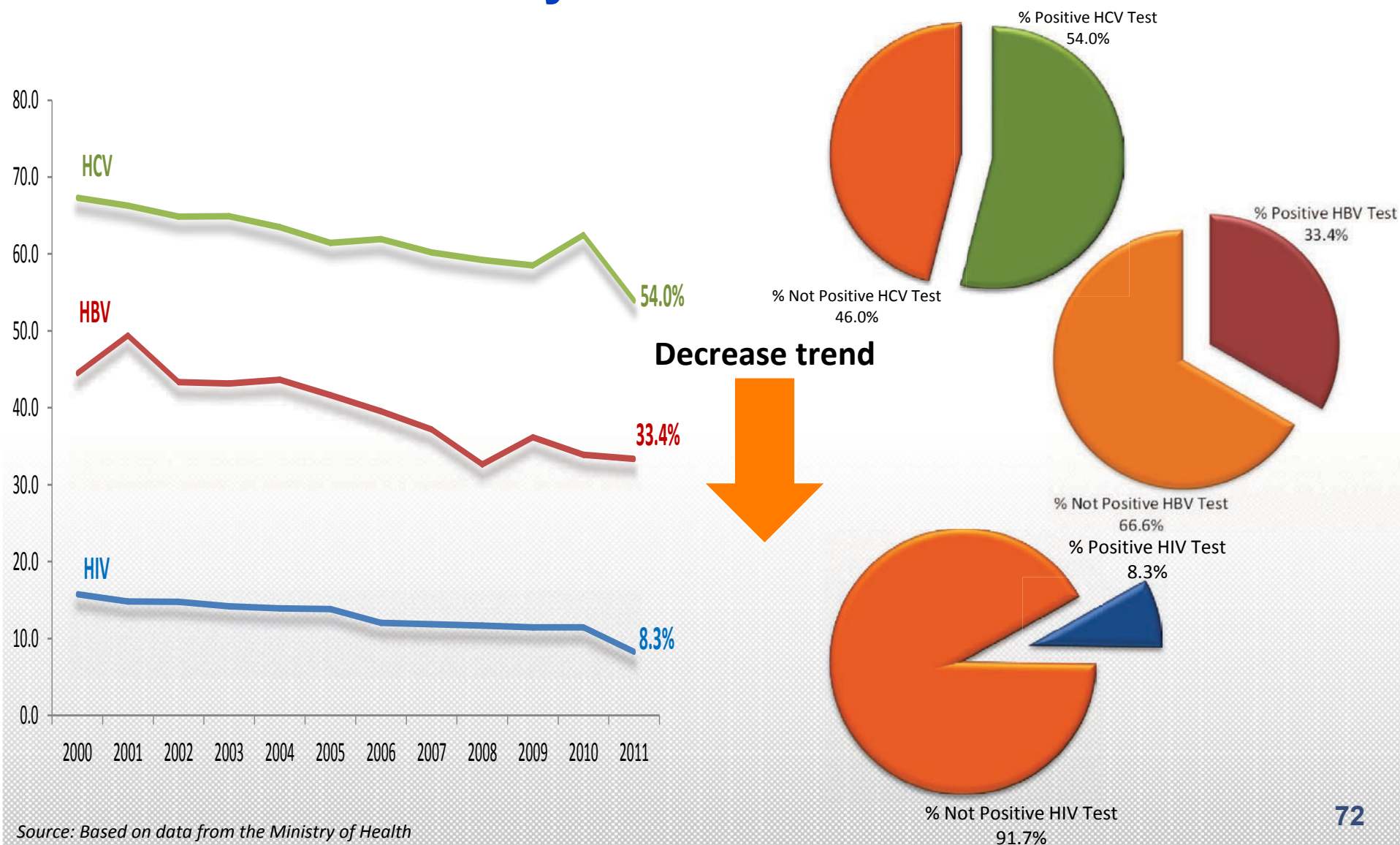
Treatments provided in 2011



*The same subject may have accessed more than one type of service more than once*



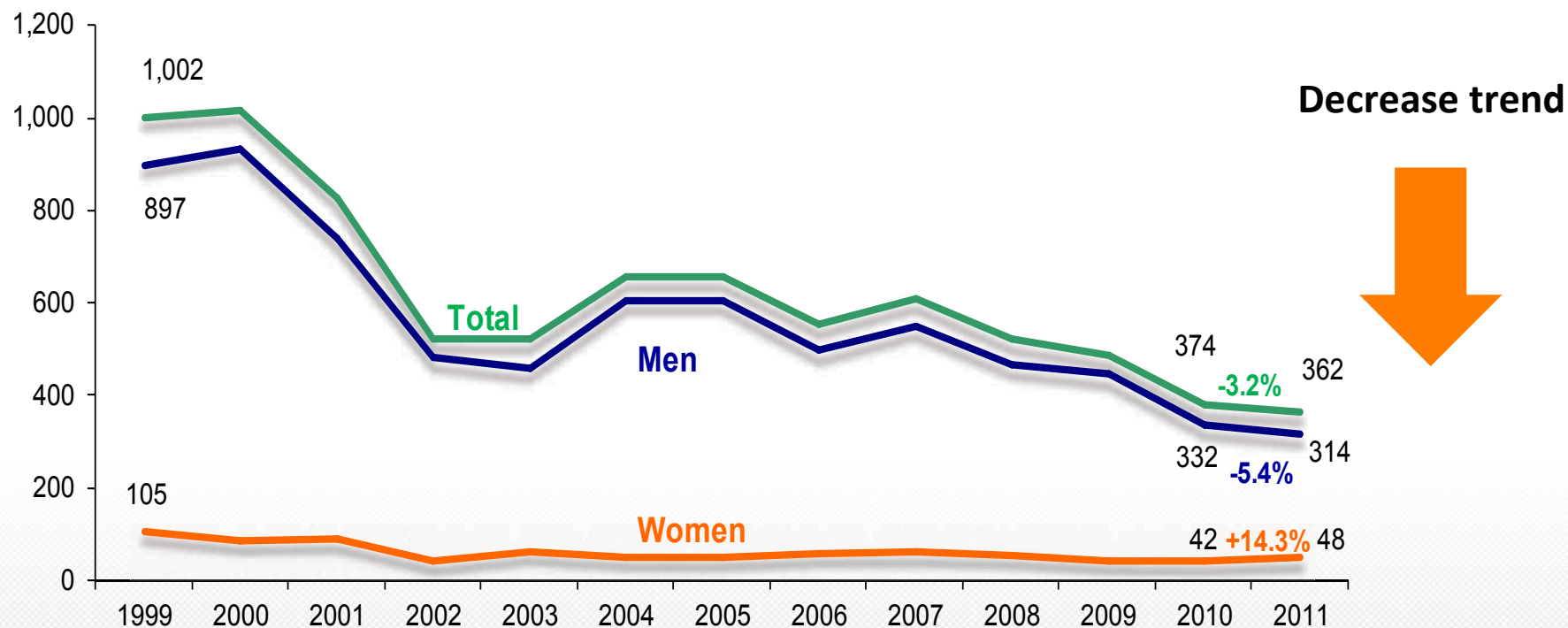
## Prevalence of HIV, HBV and HCV – positive results. The years 2000 - 2011





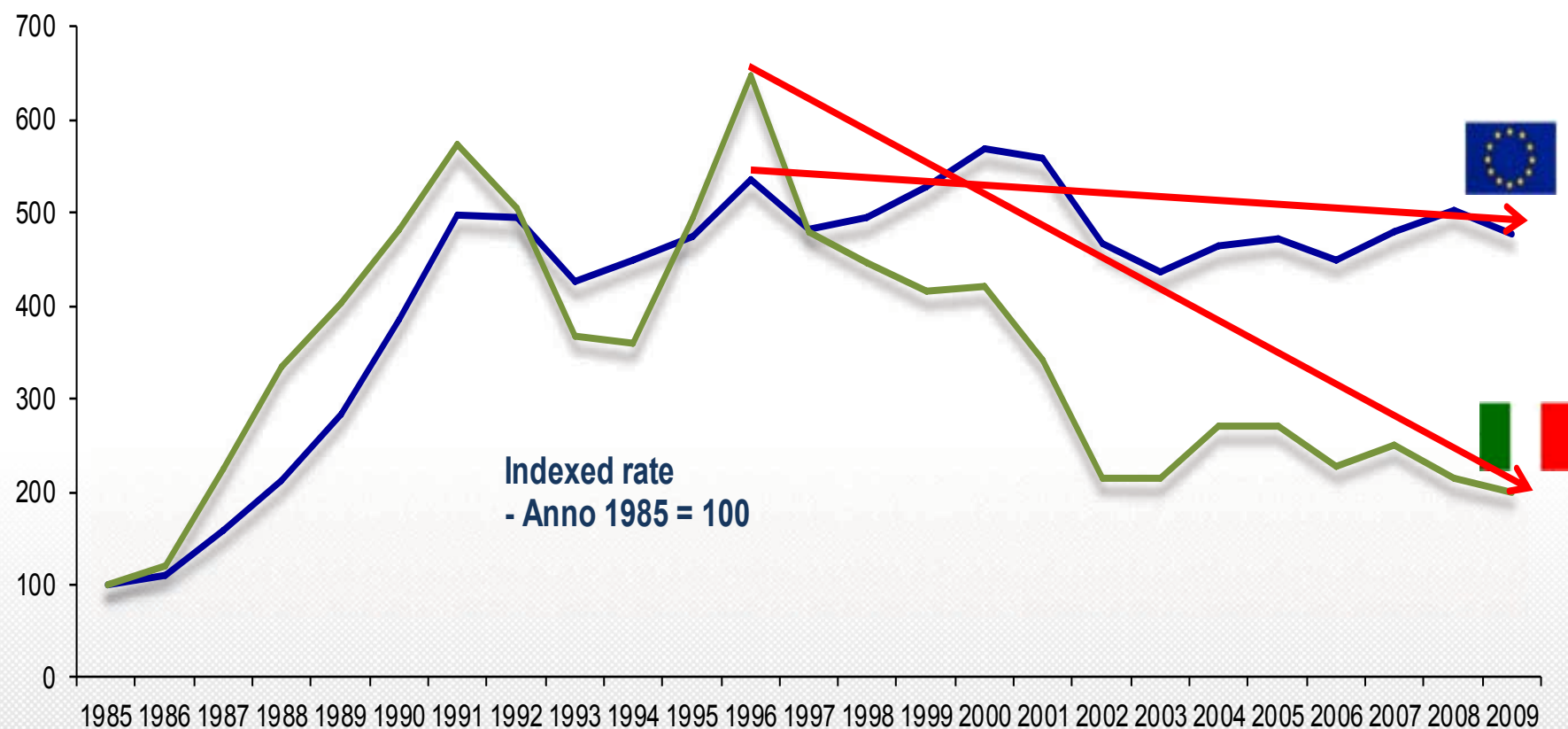


## Deaths for overdose. Years 1999 - 2011





## Comparison in deaths for overdose trend in Italy and Europe. Years 1985 - 2009



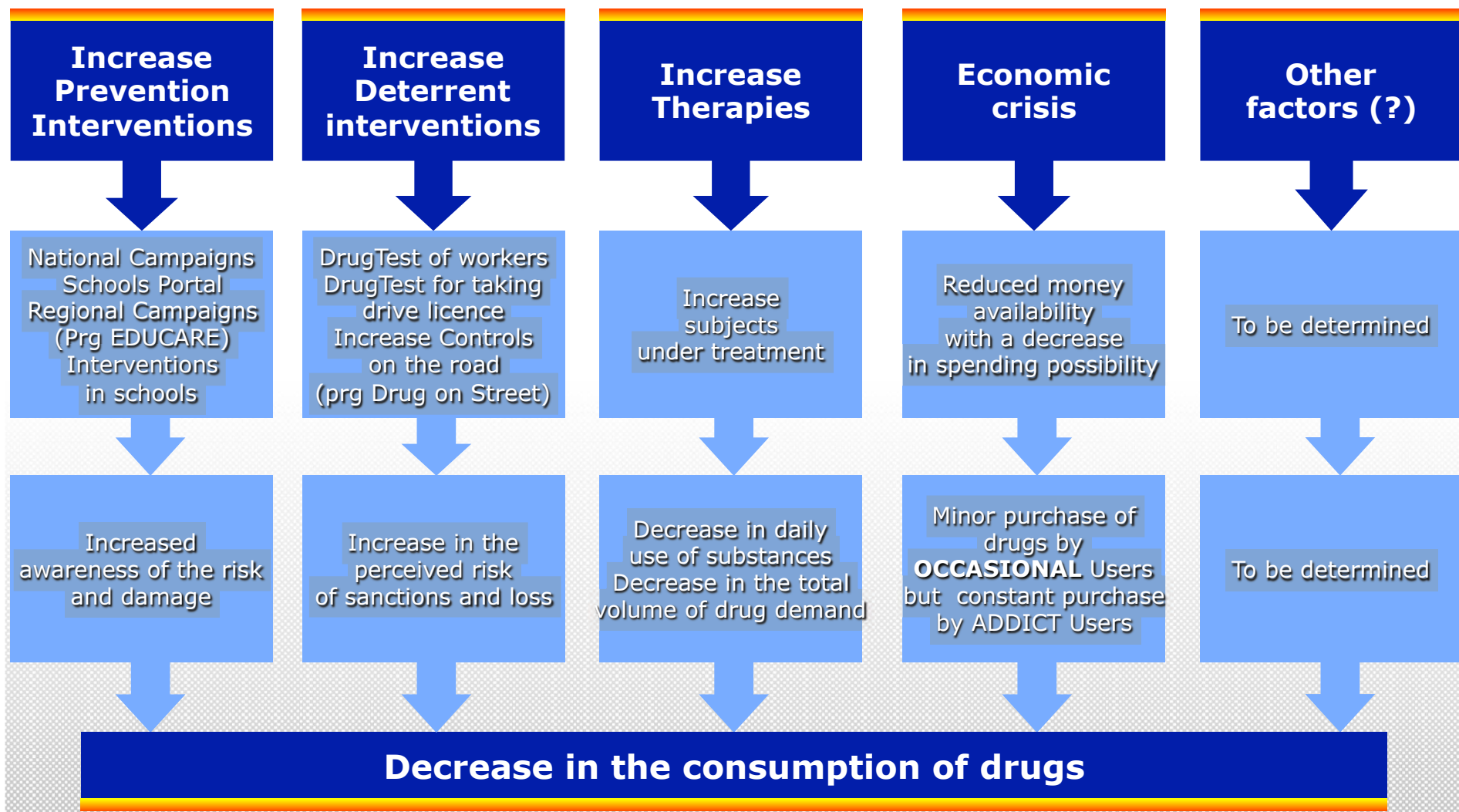




# What are the factors contributing to these results?

## SCENARIO 2008 – 2012:

there are multiple factors that can influence the results





# DROnet

Network Nazionale  
sulle Dipendenze

mantieni in salute  
il tuo cervello

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Principali sostanze d'abuso ▼

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In Collaborazione con:



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
Ministro per la Cooperazione Internazionale e l'Integrazione  
**Dipartimento Politiche Antidroga**

Visite Annuali: 334783  
Contatti Annuali: 5138001



Selezionare la regione per  
accedere al portale regionale



## NOTIZIE SCIENTIFICHE

## Newsletter Dronet

[09-11-2012]



[Cocaina: la droga dell'infarto](#)

[08-11-2012]



[Pubblicazione OEDT su droga e famiglia, dalla gravidanza alla cura dei figli](#)

[07-11-2012]



[Vaccino per le metanfetamine: risultati promettenti dagli studi su animali](#)

[06-11-2012]



[Neuroimmagini: visualizzati gli effetti della caffeina sul cervello](#)

[Cliccare sul titolo per visualizzare la notizia completa](#)

## Focus Educatori

[08-11-2012]



[Pubblicazione OEDT su droga e famiglia, dalla gravidanza alla cura dei figli](#)

[11-10-2012]



[USA, educazione alla salute e promozione artistica contro l'uso di alcol e droghe per giovani senza tetto](#)

[26-09-2012]



[Alcol e bambini: da evitare l'assaggio](#)

## Primo Piano

Dipartimento Politiche Antidroga  
Presidenza del Consiglio dei Ministri

**ADDICTION:**  
new evidences from Neuroimaging  
and Brain Stimulation

- Statement "Cannabis e suoi derivati"
- ONU, Risoluzione italiana sulle donne
- Le ragioni del perché NO alla legalizzazione delle sostanze stupefacenti
- Principi generali della posizione italiana contro l'uso di droghe (IT, EN)

**Accordo di collaborazione scientifica  
ITALIA - USA**

- Accordo di collaborazione scientifica Italia-USA (IT, EN)
- Dichiarazione DPA sulle collaborazioni scientifiche internazionali (IT, EN)
- Piano di Azione Nazionale Antidroga
- Risoluzione ONU presentata dall'Italia su strategie di riabilitazione e reinserimento (IT)
- Posizione italiana in relazione alle dichiarazioni della Global Commission on Drug Policies sulla legalizzazione delle sostanze stupefacenti (IT, EN)

**LOVE NO DRUGS**  
Ci sei contro la droga?  
Progetto di prevenzione per le scuole

**PROGETTO  
COMUNITALIA**

**THE  
ITALIAN  
SCHOOL  
ON  
ADDICTION**





# Publications for professionals

## PUBBLICAZIONI







# Prevention portals



PRESIDENZA DEL CONSIGLIO DEI MINISTRI  
Ministro per la Cooperazione Internazionale e l'Integrazione  
Dipartimento Politiche Antidroga

## DROGHE: materiali e metodologie di PREVENZIONE

In collaborazione con:  
Ministero dell'Istruzione dell'Università e della Ricerca  
EDU  
EHP

Homepage | Catalogo prodotti | Contatti | Richiesta materiali |

Link: NIDA, NATIONAL INSTITUTE ON DRUG ABUSE, UNODC, World Health Organization, Gruppo Pompidou, Health-EU, SAMHSA, DEA, SINS

**Presentazione**

Articoli  
Schede

La prevenzione dell'uso di sostanze stupefacenti necessita di una serie di strategie ed azioni, alcune delle quali dirette all'ambiente e alla popolazione generale (prevenzione ambientale e universale), altre dirette ai gruppi particolarmente vulnerabili (prevenzione indicata e selettiva). Soprattutto nell'ambito della prevenzione universale, è necessario disporre di una campagna di comunicazione che preveda la disponibilità di materiali informativi e di precisi piani di distribuzione al fine di rendere efficaci e permanenti i messaggi antidroga che si vogliono divulgare. Gli ambienti frequentati soprattutto dai giovani (scuole, ambienti sportivi, del divertimento, ritrovi sociali, ecc.) dovrebbero essere le principali "location" dove poter posizionare e far circolare le informazioni e i materiali informativi.

Continua...

**Catalogo prodotti**

<b>Siti web</b>  Accedi	<b>Campagne informative</b>  Accedi	<b>Neuroscienze</b>  Accedi	<b>Edu.Care</b>  Accedi
<b>Monografie</b>  Accedi	<b>Video e spot</b>  Accedi	<b>Slide show</b>  Accedi	<b>Gadget</b>  Accedi

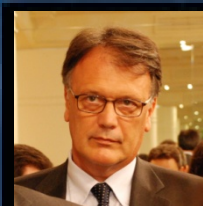
**Link**

Dipartimento Politiche Antidroga	DROnet	Drog@news	N.E.W.S.	NEUROSCIENZE e DIPENDENZE
DrugFreEdu.org	CANNABIS E DANNI ALLA SALUTE	ALCOL E PATOLOGIE CORRELATE	COCAINA	Protocollo DRUGS ON STREET
EARLY DETECTION DRUG USE	N. DRUGS ALCOHOL	DAD.NET	DREAM ON FOR A FUTURE WITHOUT DRUGS	Droga in Breve





# Thank you for your attention



**Giovanni Serpelloni – M.D.**  
**Head Antidrug Policy Department**

[g.serpelloni@governo.it](mailto:g.serpelloni@governo.it)