

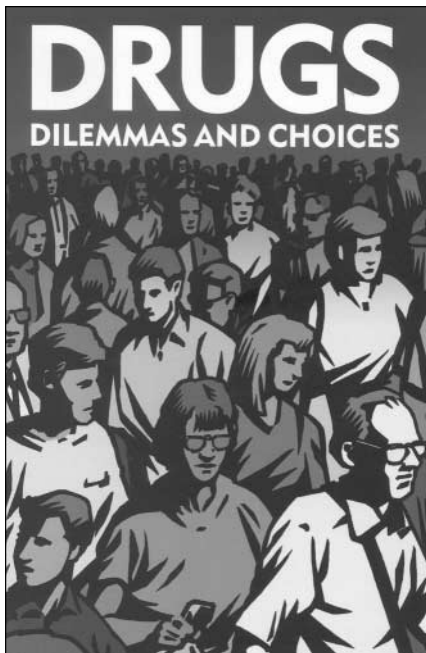
certainly in need of clarification, and it was helpful to witness the contributors grappling with them.

The book's title is an overstatement: psychoanalysis is such a static discipline that when it moves it moves only slightly. The movement lies only in the detail. The basic ingredients remain in place. Interpretation is still the principal therapeutic strategy. All dreams are still considered to be wish fulfilments, even when they so obviously are not. The Oedipus complex remains a central concept: one contributor even considers it to be hard-wired. In short, psychoanalysis continues to turn in upon itself, which, in the long run, can only be to its detriment.

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Drugs: Dilemmas and Choices

By a Working Party of the Royal College of Psychiatrists and the Royal College of Physicians. London: Gaskell. 2000. 304 pp. £9.50 (pb). ISBN 1 901242 44 7



The production of a major review of international and national drug policy is a feat of juggling and balance. This report was published in the same week as the Police Foundation Report. The latter, which called for some minor changes in the drug laws, made the headlines of all the national daily newspapers, partially

because the Government rapidly rejected its recommendations. By contrast, the former received a much quieter reception, probably because it chose not to make radical recommendations about changes in the law and in drug policy. You might infer, then, that this is a tame 'establishment' document. However, you should think again. Within its 300 pages of text are some thought-provoking and challenging questions about the nature of modern drug policy.

The report outlines how attitudes to drugs are based largely on the assumptions, prejudices, customs and economic interests of key nations. In particular, the major international conventions of the early 20th century were drafted with a dominant Anglo-Saxon influence. The voices of Asia, the Middle East and Latin America were barely heard.

Illicit drug use has increased steadily year on year for the past decade. Globally we have witnessed the diffusion of injected drug use from a small number of Western countries to over 130 nations, with an associated rapid spread of HIV and hepatitis C. International drug policy is caught up with dominant economic interests, changed by major wars and revolutions, and involved in the corruption of many governments. Drug trends are altered by new production and distribution technologies. Sport, which was once seen as a critical part of drugs prevention and which symbolised clean healthy living, has now become another area for drug misuse, with a range of new performance-enhancing drugs being developed.

Over two-thirds of resources expended on drug policy are spent on enforcement, including police, prisons, customs and international interdiction. This report highlights the paradox of such spending, pointing out that there is currently little evidence to support it. The Government annually spends £1.4 billion combating drugs. The report recommends that there should be a shift to ensure that about 50% of this is spent on primary and secondary prevention and treatment. It also calls for a substantial increase in the amount spent on research, noting that just 1% would inject £14 million per annum into drugs research.

Recent research from both the USA and the UK indicates that drug treatment is effective in reducing levels of drug consumption and, consequently, levels of drug-related crime. The National Treatment Outcome Research Study reported a saving of £3 for every £1 spent on treatment

(Healey *et al*, 1998). The report strongly supports the further development of treatment for drug dependence and notes that there is a significant lack of treatment for amphetamine users and young people. The national plan of the current UK Anti-Drugs Coordinator (the 'Drug Tsar') stresses the need for a radical increase in the number of treatment places. It is now necessary to ensure that appropriate resources are made available to support such service expansion, which the report emphasises should be directly linked to the percentage of the population requiring treatment for drug problems.

There is a finely balanced discussion of policy options regarding cannabis, and the report states that social experiments such as that of the Dutch Government should be encouraged and fully researched. The authors also argue that it is difficult to justify imprisoning someone simply for personal possession or personal use of cannabis. The report appears tacitly to support the expansion of prescribing heroin as an alternative to methadone and implies that such a shift could result in the de facto legalisation of heroin, stating that such a policy would be readily reversible if ill-effects started to mount.

The Working Party concludes that if drug consumption and its negative consequences continue to mount at the current rate, it is likely that there will be a shift from comprehensive prohibition to some form of legalisation. They call for policy to be developed through the objective appraisal of the consequences of previous policy changes rather than on the basis of moral postures, the mistaken assumptions of the past and accidents of history.

Repeatedly, the text argues for an approach in which reason and argument triumphs over passion and belief. It tries to keep all options open and provides an important framework that should make it essential reading for politicians and policy-makers. The lack of specific recommendations reduces the punch of this report but my guess is that it will gain in reputation and impact over time.

Healey, A., Knapp, M., Astin, J., et al (1998)

Economic burden of dependency: social costs incurred by drug users at intake to the National Treatment Outcome Research Study. *British Journal of Psychiatry*, **173**, 160–165.

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