Statistics on drugs misuse

England, 2017
Executive Summary

Drug misuse related hospital admissions (England)
- In 2015/16 there were 8,621 hospital admissions with a primary diagnosis of drug-related mental health and behavioural disorders. This is 6% more than 2014/15 and 11% higher than 2005/06.
- There were 15,074 hospital admissions with a primary diagnosis of poisoning by illicit drugs. This is 6% more than 2014/15 and 51% more than 2005/06.

Deaths related to drug misuse (England and Wales)
- In 2015 there were 2,479 registered deaths related to drug misuse. This is an increase of 10% on 2014 and 48% higher than 2005.
- Deaths related to drug misuse are at their highest level since comparable records began in 1993.

Drug use among adults (England and Wales)
- In 2015/16, around 1 in 12 (8.4%) adults aged 16 to 59 had taken an illicit drug in the last year. This equates to around 2.7 million people.
- This level of drug use was similar to the 2014/15 survey (8.6%), but is significantly lower than a decade ago (10.5% in the 2005/06 survey).

Drug use among children (England)
- In 2014, 15% of pupils had ever taken drugs, 10% had taken drugs in the last year and 6% had taken drugs in the last month.
- The prevalence of drug use increased with age. 6% of 11 year olds said they had tried drugs at least once, compared with 24% of 15 year olds.
National Statistics status means that official statistics meet the highest standards of trustworthiness, quality and public value. All official statistics should comply with all aspects of the Code of Practice for Official Statistics. They are awarded National Statistics status following an assessment by the Authority’s regulatory arm. The Authority considers whether the statistics meet the highest standards of Code compliance, including the value they add to public decisions and debate.

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This report may be of interest to members of the public, policy officials and other stakeholders to make local and national comparisons and to monitor the quality and effectiveness of services.
Introduction

This statistical report\(^1\) presents a range of information on drug use by adults and children drawn together from a variety of sources. It focuses on England only where possible although some statistics are only readily available at GB or UK level or for England and Wales combined. Some of this is new information whilst some has been published previously.

More detail can be found in the source publications which contain a wider range of data and analysis.

Newly published data includes:
- Analyses from NHS Digital Hospital Episode Statistics (HES).

The latest information from already published sources includes data from:
- The Office for National Statistics (ONS) on deaths related to drug misuse.
- National drug treatment monitoring system (NDTMS).
- Crime survey for England and Wales (CSEW).
- Adult Psychiatric Morbidity Survey (APMS),
- Smoking, Drinking and Drug Use (SDD).
- What About Youth (WAY).

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1. Most figures quoted in this report have been rounded to the nearest whole number. Unrounded data may be found in related data sources.
Part 1: Drug misuse related hospital admissions

This section presents information on the number of hospital admissions for diseases, injuries and conditions that can be attributed to drug misuse. 

Three measures for the number of drug-related hospital admissions have been calculated using Hospital Episode Statistics (HES) data:

- Measure 1 – hospital admissions with a primary diagnosis of drug-related mental and behavioural disorders;
- Measure 2 – hospital admissions with a primary or secondary diagnosis of drug-related mental and behavioural disorders;
- Measure 3 – hospital admissions with a primary diagnosis of poisoning by illicit drugs.

More detail on the methods used to calculate these measures is provided in Appendix B.

1. Based on the tenth revision of the International Classification of Diseases (ICD-10) Codes.
2. The primary diagnosis provides the main reason why the patient was admitted to hospital.
3. As well as the primary diagnosis, there are up to 19 (13 from 2002-03 to 2006-07 and 6 prior to 2002-03) secondary diagnosis fields in HES. These show other diagnoses relevant to the episode of care. The reporting of secondary diagnoses has improved in recent years which can lead to an increase over time which is due to improved data quality rather than a real increase.
Hospital admissions with a primary diagnosis of drug-related mental and behavioural disorders

There were 8,621 hospital admissions with a primary diagnosis of drug-related mental health and behavioural disorders. This is 6% more than 2014/15 and 11% higher than 2005/06.

About 1 in 3 (33%) of patients were aged between 25 and 34.

For more information: Tables 1 and 2 of Statistics on drug misuse, England, 2017 (based on 2015/16 HES)
Hospital admissions with a primary diagnosis of drug-related mental and behavioural disorders

Regions
The North West had the highest rate of admissions per 100,000 population for both males and females at 38 and 13 respectively. The South West had the lowest rate for males at 15 while East of England was the lowest for females at 6.

Local Authorities
Liverpool City Council had the highest rate of admissions with 70 per 100,000 population. 

1. City of London had no admissions and 8 other LAs had their rates suppressed to mitigate against individuals being identified. For more information: Table 2 of Statistics on drug misuse, England, 2017 (based on 2015/16 HES)
Hospital admissions with a primary or secondary diagnosis of drug-related mental and behavioural disorders

There were 81,904 hospital admissions with a primary or secondary diagnosis of drug-related mental and behavioural disorders. This is 9% more than 2014/15 and over double the level in 2005/06.

58% of patients were aged between 25 and 44.

70% male 30% female

1. The increase from 2005/06 will be partly due to improvements in recording of secondary diagnoses.

For more information: Tables 3 and 4 of Statistics on drug misuse, England, 2017 (based on 2015/16 HES)
**Hospital admissions with a primary or secondary diagnosis of drug-related mental and behavioural disorders**

**Regions**
The North West had the highest rate of admissions per 100,000 population for both males and females at 326 and 141 respectively. The South East had the lowest rates at 139 for males and 61 for females.

**Local Authorities**
Liverpool City Council had the highest rate of admissions, with 491 per 100,000 population. Rutland had the lowest with 31 per 100,000 population.

1. 4 LAs had their rates suppressed to mitigate against individuals being identified.
For more information: [Table 4 of Statistics on drug misuse, England, 2017 (based on 2015/16 HES)](#)
Hospital admissions with a primary diagnosis of poisoning by illicit drugs

There were 15,074 hospital admissions with a primary diagnosis of poisoning by illicit drugs. This is 6% more than 2014/15 and 51% more than 2005/06.

Almost two thirds of patients were aged between 16 and 44.

### Total number of admissions by age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Thousands</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 16</td>
<td>2,910</td>
</tr>
<tr>
<td>16 to 24</td>
<td>14,279</td>
</tr>
<tr>
<td>25 to 34</td>
<td>15,074</td>
</tr>
<tr>
<td>35 to 44</td>
<td>14,279</td>
</tr>
<tr>
<td>45 to 54</td>
<td>14,279</td>
</tr>
<tr>
<td>55 to 64</td>
<td>14,279</td>
</tr>
<tr>
<td>65 to 74</td>
<td>14,279</td>
</tr>
<tr>
<td>75 and over</td>
<td>14,279</td>
</tr>
</tbody>
</table>

1. Code T40.4 has been excluded from 2012/13 onwards. It contributed 283 admissions in 2011/12 which was 2.3% of the total. See Appendix B for more information.

For more information: Tables 5 and 6 of Statistics on drug misuse, England, 2017 (based on 2015/16 HES)
Hospital admissions with a primary diagnosis of poisoning by illicit drugs

Regions
The North West had the highest rate of admissions per 100,000 population for both males and females at 48 and 40 respectively. London had the lowest rates at 15 for males and 12 for females.

Local Authorities
Blackpool Borough Council had the highest rate of admissions, with 116 per 100,000 population.

1. City of London and Isles of Scilly had no admissions and 2 other LAs had their rates suppressed to mitigate against individuals being identified.

For more information: Table 6 of Statistics on drug misuse, England, 2017 (based on 2015/16 HES)
Drug misuse and drug dependence are known causes of premature mortality. Drug-related deaths occur in a variety of circumstances, each with different social and policy implications. Consequently, there is considerable political, media and public interest in these figures.

This section presents information on the number of deaths that can be attributed to drug misuse. Deaths were included where the underlying cause was due to drug poisoning and where a drug controlled under the Misuse of Drugs Act 1971 was mentioned on the death certificate.

The data source is the Office for National Statistics (ONS) who provide details on the definition of a drug misuse death involving illegal drugs.

The figures presented here are for deaths registered each year, rather than deaths occurring each year. Almost all drug-related deaths are certified by a coroner. Due to the length of time it takes a coroner to complete an inquest, about half of drug-related deaths registered in a particular year will have actually occurred prior to that year.

Nevertheless, general trends in drug-related deaths are broadly equivalent, regardless of whether the data is analysed by year of occurrence or year of registration.

The data presented in this report covers England and Wales combined. The number of deaths for England only is available from the ONS source data. However as all breakdowns in the ONS data are for England and Wales combined this report uses the overall England and Wales figure for consistency.

1. Misuse of Drugs Act 1971
2. Deaths Related to Drug Poisoning in England and Wales Statistical bulletins
Deaths related to drug misuse

In 2015 there were 2,479 registered deaths in England and Wales related to drug misuse. This is 0.5% of all deaths. This is an increase of 10% on 2014 and 48% higher than 2005.

Deaths related to drug misuse are at their highest level since comparable records began in 1993.

Drug-related deaths by age

60% of registered deaths were for people aged between 30 and 49.

Drug-related deaths by sex

74% 26%

For more information: Tables 1 and 5 of Deaths related to drug poisoning in England and Wales: 2015 registrations, Office for National Statistics
In 2015, 79% of deaths (1,964) were due to Accidental poisoning by drugs, medicaments and biological substances. Over three quarters (1,536) of these were for males. 4 deaths were for assault by drugs, medicaments and biological substances.

For more information: Table 3 of Deaths related to drug poisoning in England and Wales: 2015 registrations, Office for National Statistics
Part 3: Drug use among adults

This section presents a range of information on drug use among adults including the prevalence of drug use, the number of people receiving treatment for drugs, comparisons across European countries and information on legal highs.

The main source of data for drug use among adults is the Drug misuse: findings from the 2014 to 2015 Crime Survey for England and Wales 2nd edition published by the Home Office. This is an annual survey covering the prevalence and trends of illicit drug use among 16 to 59 year olds including separate analysis on young adults (16 to 24).


Information on treatment for drug use is taken from the National Drug Treatment Monitoring System (NDTMS).

Information is also summarised from the European Drug Report – Trends and Developments, 2016 which is published by the European Monitoring Centre for Drugs and Drug Addiction and the EU Drug Markets Report - Strategic Overview, 2016.
Prevalence of drug use among adults

16 to 59 year olds
Around 1 in 12 (8.4%) adults aged 16 to 59 in England and Wales had taken an illicit drug in the last year. This equates to around 2.7 million people.

This level of drug use was similar to the 2014/15 survey (8.6%), but is significantly lower than a decade ago (10.5% in the 2005/06 survey).

16 to 24 year olds
Around 1 in 5 (18.0%) young adults aged 16 to 24 had taken an illicit drug in the last year. This equates to around 1.1 million people.

This level of drug use was similar to the 2014/15 survey (19.5%), but significantly lower compared with a decade ago (25.2% in the 2005/06 survey).

For more information: Tables 1.02 and 1.06 of Drugs Misuse: Findings from the 2015/16 Crime Survey for England and Wales
Prevalence of drug use among adults by type of drug

Selected drug use
Men aged 16-59 in England and Wales were more than twice as likely to report using cannabis in the last year than women (9.1% of men compared with 3.8% of women).

Men were almost three times more likely than women to take powder cocaine (3.3% compared with 1.2%) and ecstasy (2.2% compared with 0.8%) in the last year.

Cannabis
As in previous years, cannabis was the most commonly used drug, with 6.5% of adults aged 16 to 59 having used it in the last year (around 2.1 million people).

This was similar to the 2014/15 survey (6.7%), but showing significant falls compared with a decade ago (8.7%).

For more information: Table 3.05 of Drugs Misuse: Findings from the 2015/16 Crime Survey for England and Wales
Prevalence of drug dependence among adults

Trends in signs of drug dependence

Between 1993 and 2000 there was an increase in the proportions of adults (16-64) reporting signs of dependence in the past year.

Since then, the overall level of signs of dependence has remained stable.

Drug dependency by age

Drug dependence decreased with age.
11.8% of men aged 16 to 24 showed signs of drug dependence

Drug dependency by sex (adults 16+)

4.3% Male
1.9% Female

For more information: Tables 11.5 and 11.6 of the Adult Psychiatric Morbidity Survey, 2014
Prevalence of drug dependence among adults by ethnicity and employment status

Drug dependence by ethnic group
Using age-standardised data, the proportion showing signs of dependence was highest (at 7.5%) among adults in the Black/Black British group. This may be explained by their higher rates of cannabis use, and could reflect reporting of daily use.

Drug dependence by employment status
Among people aged 16–64, the prevalence of drug dependence varied with employment status. In men, signs of drug dependence were most common in those classed as economically inactive (9.6%). For women, the highest prevalence was found in those who were unemployed (4.4%).

1. The ‘economically inactive’ group includes students, and those looking after home, long term sick or disabled, or retired. For more information: Tables 11.7 and 11.9 of the Adult Psychiatric Morbidity Survey, 2014.
### Adults using legal highs/New psychoactive substances (NPS)

#### 16 to 59 year olds

Fewer than 1 in 100 (0.7%) of adults had used an NPS in the last year which is similar to the estimate from 2014/15.

Men were significantly more likely to have used an NPS in the last year than women (1.1% compared with 0.4% of women).

Overall, 2.7% of adults had used an NPS in their lifetime.

#### 16 to 24 year olds

Around one in 40 (2.6%) young adults aged 16 to 24 took an NPS in the last year which is similar to the estimate from 2014/15.

Among men aged 16 to 24, 3.6% had used an NPS in the last year compared to 1.6% of young women.

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For more information: Table 4.01 of Drugs Misuse: Findings from the 2015/16 Crime Survey for England and Wales
Adults receiving help for substance misuse

Reasons for treatment
288,843 individuals were in contact with drug and alcohol services in 2015/16.

More people were treated for opiates than the other three categories combined.

For more information: Table 4.2.1 of Adult substance misuse statistics from the National Drug Treatment Monitoring System (NDTMS), 2015-2016
Levels of lifetime use of cannabis\(^1\) differ considerably between countries, from around four in 10 adults in France and one-third of adults in Denmark and Italy to less than one in 10 in Bulgaria, Hungary, Malta, Romania and Turkey.

Just under one-third of adults in England and Wales had used cannabis. This was above the European Union average.

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1. Lifetime usage for adults (15-64). Year of prevalence estimates varies by country with the majority being between 2012 and 2014.

For more information: Table A5 of European Drug Report – Trends and Developments, 2016, European Monitoring Centre for Drugs and Drug Addiction
This section presents a range of information on drug use among children including prevalence and frequency of drug use and attitudes towards drug use. This information has been taken from two NHS Digital publications.

Information is provided from *Smoking, Drinking and Drug use among Young People in England (SDD)* which surveys pupils in secondary schools across England to provide national estimates and information on the smoking, drinking and drug use behaviours of young people aged 11 - 15.

Information is also summarised from *What About YOUth? (WAY)* which surveys 15 year olds with questions about their health, diet, exercise, bullying, alcohol, drugs and smoking.

It should be noted that the SDD survey is completed at school in exam conditions without the involvement of parents or teachers but WAY is completed at home when other family members may be present. This will affect comparability between the two surveys as respondents may be less likely to admit to behaviours such as drug taking when carrying out surveys in a home setting.

In addition this section summarises information from the *Young people’s statistics from the National Drug Treatment Monitoring System (NDTMS)*.
The prevalence of drug use among 11 to 15 year olds in England declined between 2001 and 2010. Since then, the decline has slowed. In 2014, 15% of pupils had ever taken drugs, 10% had taken drugs in the last year and 6% had taken drugs in the last month.

The prevalence of drug use increased with age. For example, 6% of 11 year olds said they had tried drugs at least once, compared with 24% of 15 year olds. A similar pattern was seen for drug use in the last year and the last month.

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1. The survey was not carried out in 2015 – see appendix A for further details.

For more information: Tables 8.1, 8.2, 8.3 and 8.5 of Smoking, drinking and drug use among young people in England in 2014.
Prevalence by type of drug and attitudes to drug use among children

Prevalence by type of drug used in the last year

As in previous years, pupils were more likely to have taken cannabis than any other drug. 6.7% of pupils reported taking cannabis in the last year compared to 2.9% of pupils who had used volatile substances.

Attitudes to drug use

9% thought it was okay for someone of their age to try cannabis and 5% thought it okay to take once a week. Levels of approval for sniffing glue and taking cocaine were lower.

1. Bars coloured in grey in the chart represent usage of one or more of the drugs in the relevant section.
2. Volatile substances includes gas, glue, aerosols and other solvents,

For more information: Tables 8.7c, 9.6 and 9.7 of Smoking, drinking and drug use among young people in England in 2014
Prevalence of drug use among 15 year olds

Prevalence by drug type
26% of 15 year-olds had been offered cannabis and 11% had tried it.
13% had been offered other drugs and 2% had tried another drug.

Frequency of cannabis use
Of those who had ever tried cannabis, 83% had used it in the last year which included 43% who had used it in the last month.

For more information: Tables 8.1, 8.6, 8.16, 8.31 and 8.32, Chapter 8 of WAY Survey 2014
Prevalence of drug use among 15 year olds by ethnicity and local authority

Prevalence of cannabis use by ethnicity

The highest proportion of young people who had tried cannabis came from the Mixed ethnic group while the lowest came from the Asian ethnic group.

- White: 10%
- BME: 8%
- Mixed: 15%
- Asian: 5%
- Black: 10%
- Other: 6%

Prevalence of cannabis use by LA

24.2% of young people in Brighton and Hove had ever tried cannabis, followed by 18.6% in Richmond upon Thames. In comparison, 4.9% in Slough had ever tried cannabis.

1. BME in the chart is an average for the Mixed, Asian, Black and Other ethnic groups.

For more information: Tables 8.9 and 8.14, Chapter 8 of WAY Survey 2014
Awareness and usage of legal highs

Awareness of legal highs

Half of pupils (51%) had heard of legal highs. Awareness increased with age, from 21% of 11 year olds to 74% of 15 year olds.

Prevalence of legal high usage

2.5% of pupils reported having ever taken legal highs, including 2.0% who had taken them in the last year and 0.9% who had taken them in the last month. The prevalence of taking legal highs increased with age.

For more information: Tables 8.21 and 8.23 of Smoking, drinking and drug use among young people in England in 2014

1. Since this report was published "legal highs" are now generally referred to as New Psychoactive Substances or NPS.
Young people attending specialist substance misuse services

Trends in primary substance

The number of young people attending specialist substance misuse services was 17,077, down 7% from the previous year.

The number of young people in treatment for cannabis continues the fall reported last year.

Primary or adjunctive substance use

87% of young people reported either primary or adjunctive cannabis use. Alcohol was the second most cited (48%) while 6% cited the use of a new psychoactive substance (NPS).

1. Includes those receiving treatment for alcohol only.

For more information: Tables 2.3.1 and 5.2.1 of Young people’s statistics from the NDTMS, 2015/16

2. Primary substance use - the substance that brought the young person into treatment at the point of triage/initial assessment. Adjunctive substance use - other substances cited by the young person.

3. Other opiates includes methadone