



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

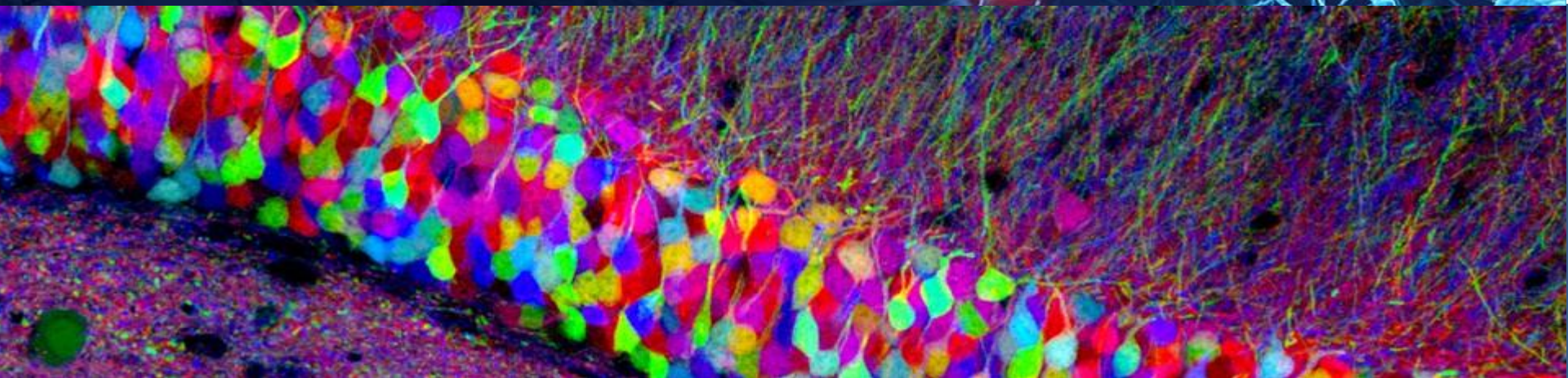
NEUROSCIENZE e DIPENDENZE



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



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Head Antidrug Policy Department

g.serpelloni@governo.it



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cerca...

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Link

NIDA NATIONAL INSTITUTE
ON DRUG ABUSE

UNODC
United Nations Office on Drugs and Crime

World Health Organization

Group Pompidu

Pompidu Group

Health-EU

**European Monitoring Centre
for Drugs and Drug Addiction**

SAMHSA

DEA

SINS

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.

ITALIAN SCHOOL
ADDICTION

DROnet
Network Nazionale sulle Dipendenze

THE ITALIAN SCIENTIFIC
COMMUNITY
ON ADDICTION

N.E.W.S.
NATIONAL EARLY WARNING SYSTEM

EARLY DETECTION
OF DRUG USE &
EARLY INTERVENTION

DrugFreEdu.org
L'unico sito italiano dedicato alla scuola per prevenire l'uso di droga

CANNABIS
E DANNI ALLA SALUTE

ALCOL
E PATOLOGIE CORRELATE

COCAINA

Protocollo
DRUGS ON STREET

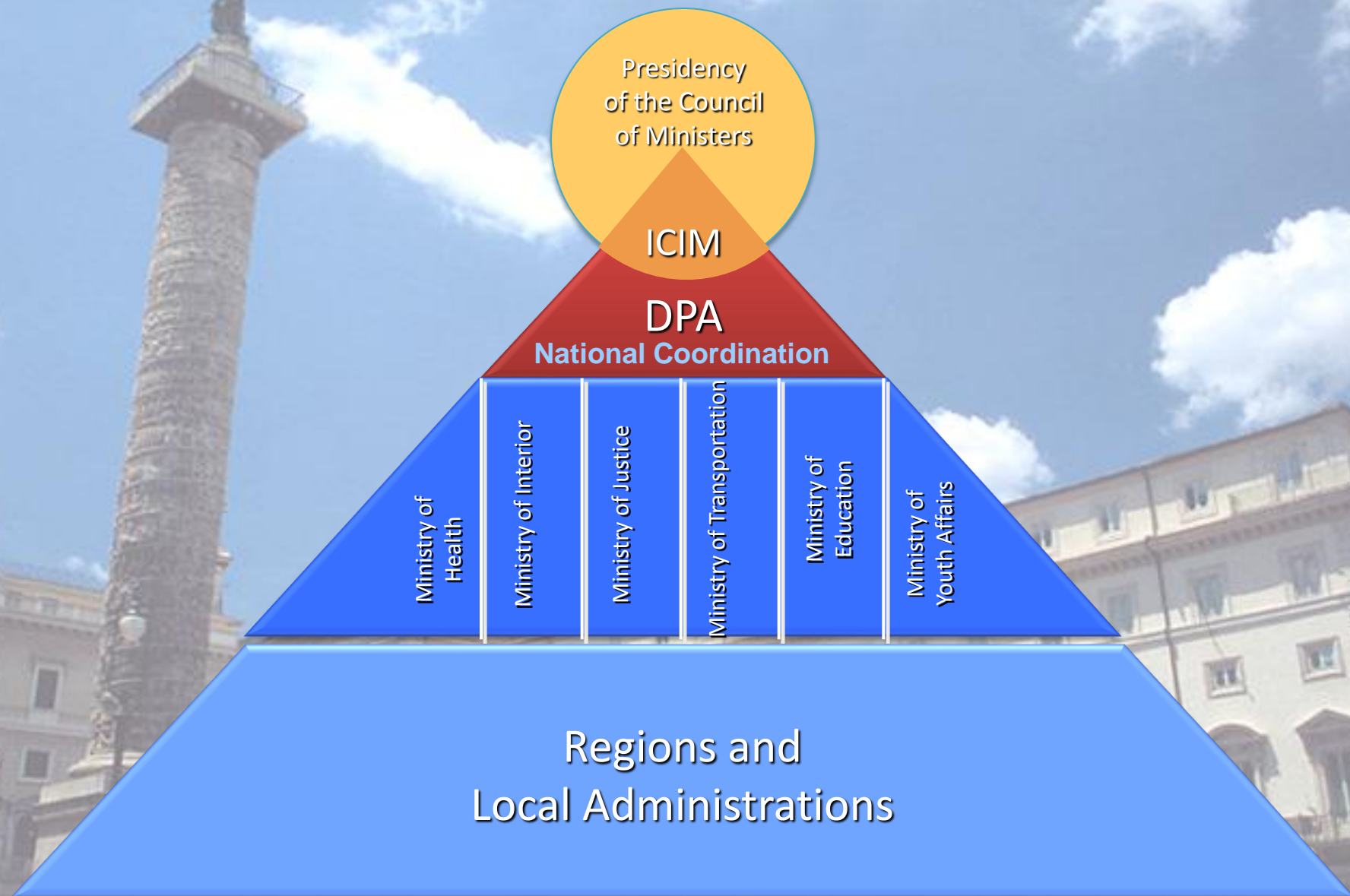
DREAM ON
FOR A FUTURE WITHOUT DRUGS

DRUGS IN SCHOOL

Droga in Breve

DRUGS
MANIFESTI DI PREVENZIONE

Progetto
EDU





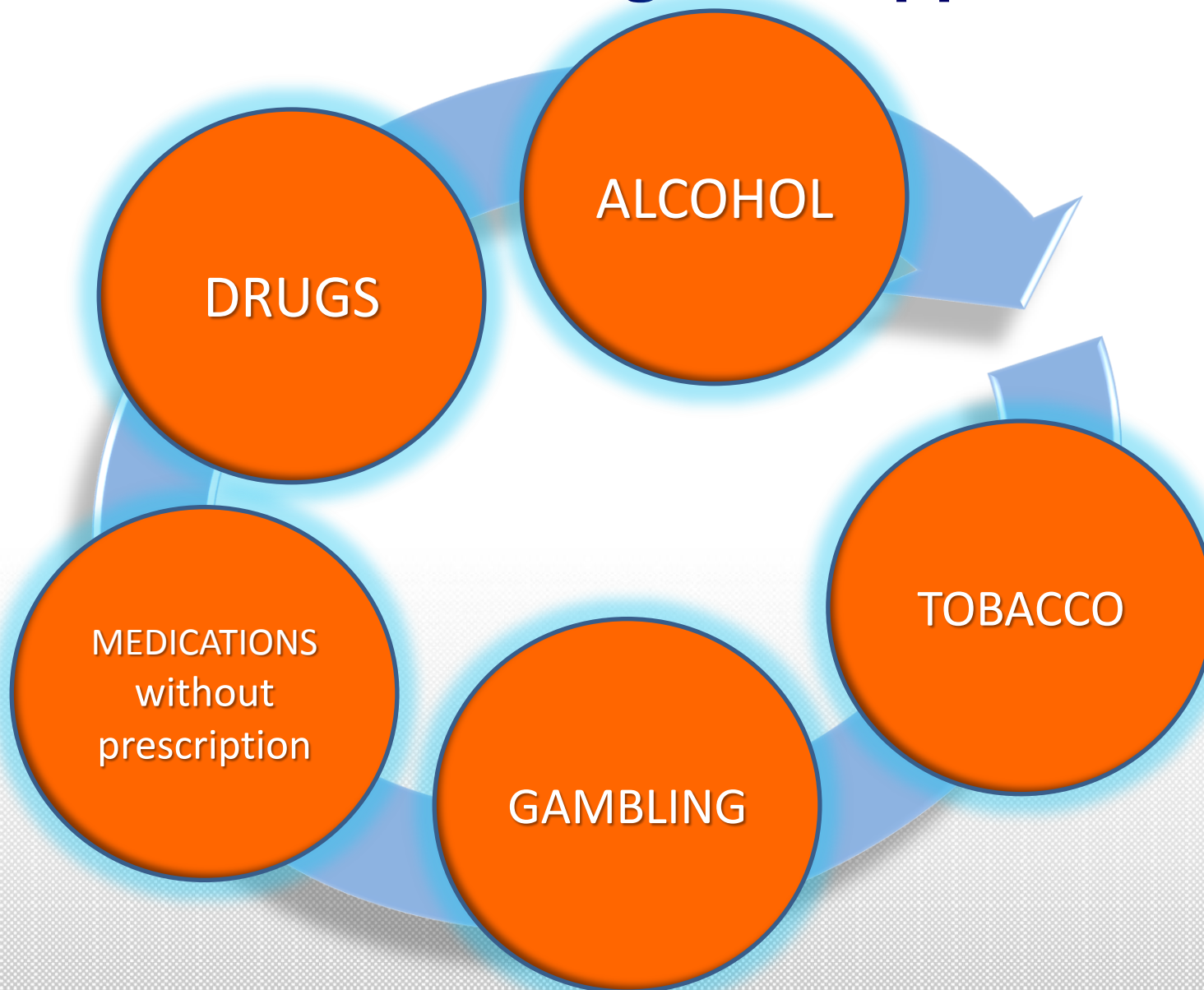
PRESIDENZA DEL CONSIGLIO DEI MINISTRI
Dipartimento Politiche Antidroga

National Drug Action Plan 2010-2013



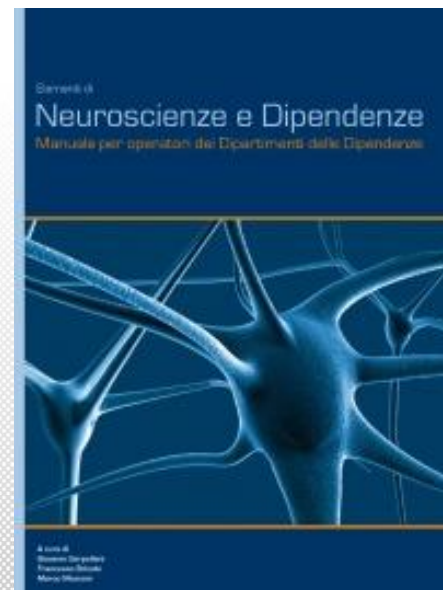


Global and integrated approach





www.politiche antidroga.it





DPA: international collaborations and scientific research activities on neuroscience

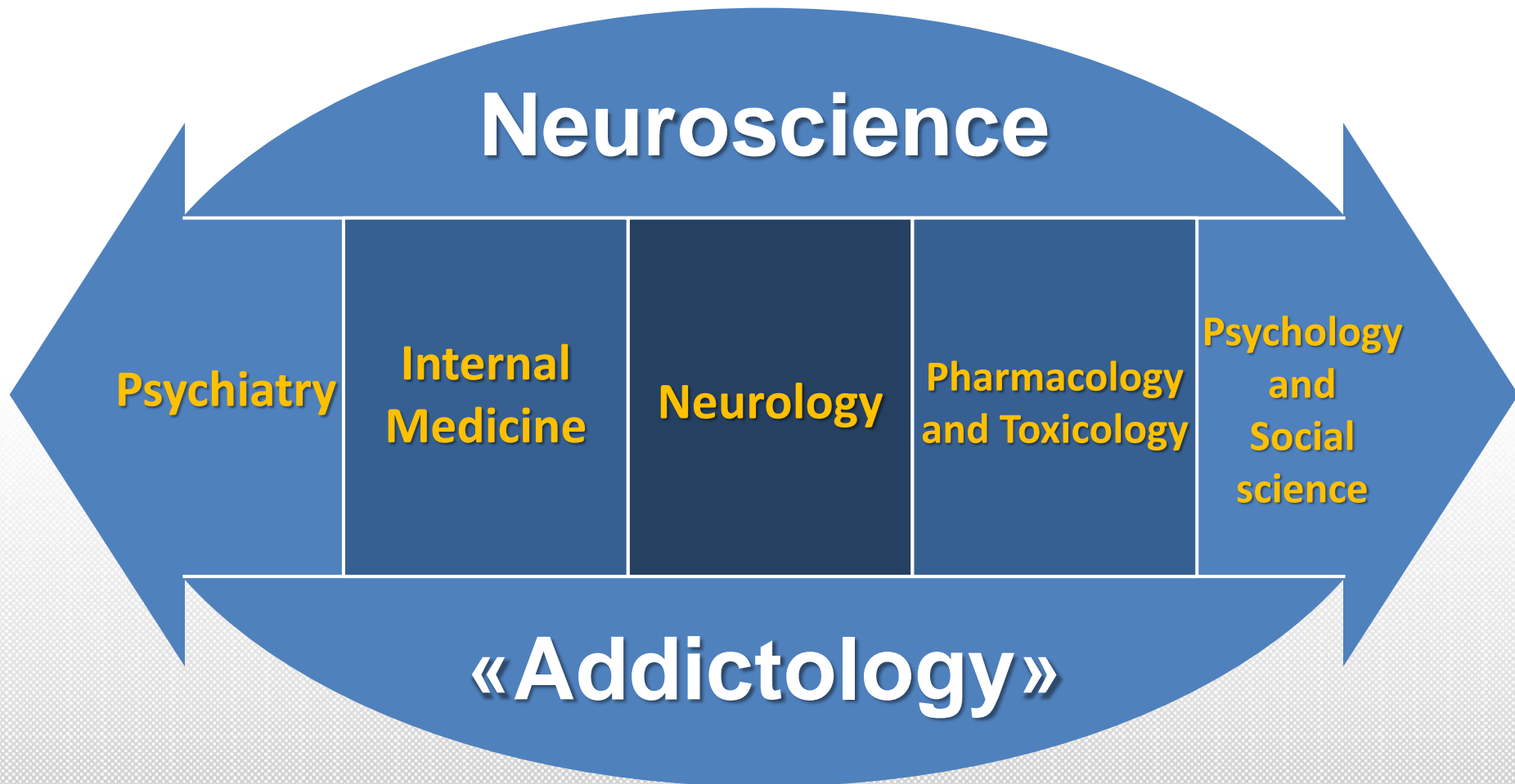


Giovanni Serpelloni – M.D.
Head Antidrug Policy Department
Presidency of the Council of Ministers

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New Addiction Approach: «Neuroscience, a master key»





New Addiction Approach:

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

Neuroscience

and addiction phisiopatology

Prevention

Vulnerability
**Neuro-
educational
approach**

Diagnosis

**Prefrontal
cortex role**
**Behaviours
and NB
systems**

Treatment and care

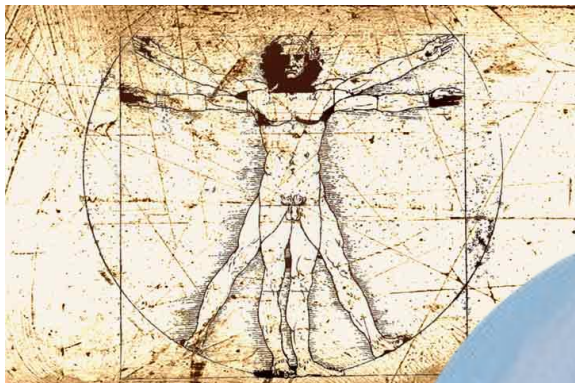
**Different
response and
relapse risk**

Riabilitation and Recovery

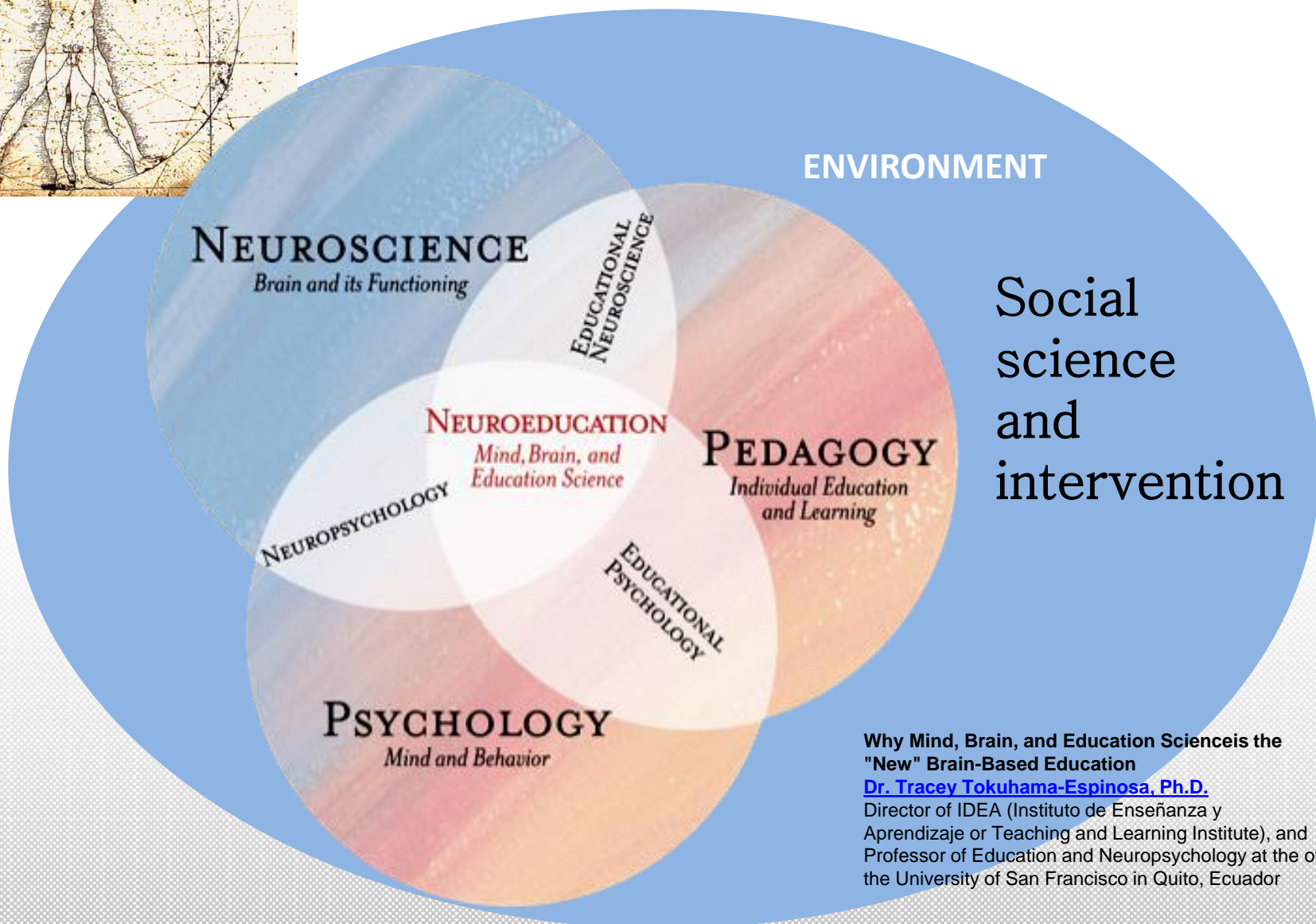
**Different
outcome and
relapse risk**

Health syst. planning and organization

**Addiction
department**



Transdisciplinarity



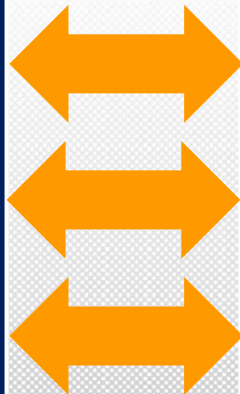


New Addiction Approach:

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





ADDICTION
NCCI

National
Coordination
Center for
International
Collaboration

Ongoing International collaborations



Brain Laboratory of Neuropsychology
and Brain Imaging, Milwaukee, USA



UNODC

United Nations Office on Drugs and Crime



unieri

United Nations
Interregional Crime and Justice
Research Institute

University of
Hertfordshire



Media Research Lab,
Department of Psychology



FRIENDS RESEARCH INSTITUTE



THE UNIVERSITY
of
WISCONSIN
MADISON

u^b

University Hospital of Psychiatry,
University Bern, Svizzera

**UNIVERSITÄT
BERN**



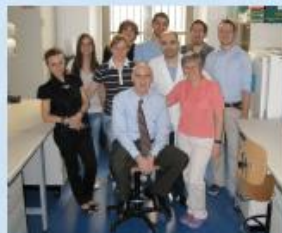
DPA ITALIAN COLLABORATIVE CENTRES



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

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*



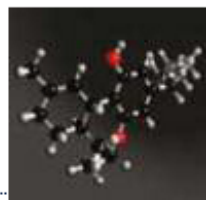
3. On the left DLPFC rTMS in patients dependent on alcohol and / or drug addicts in treatment

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*





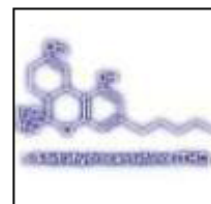
12. Schizca

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



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*



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

- Aquadrugs
- Ariadrugs
- 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

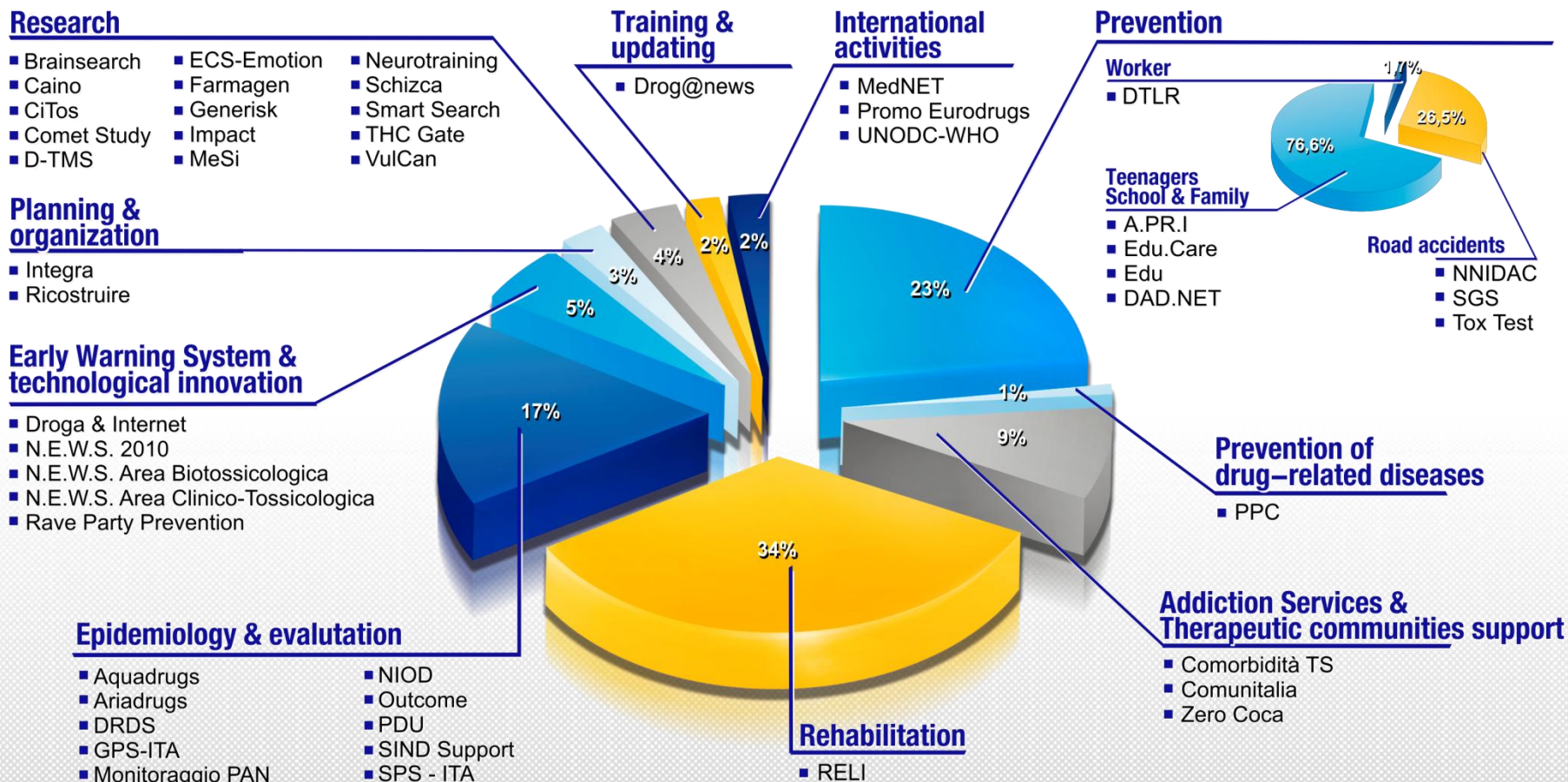
- PPC

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
- Aquadruugs 2011-2012
- Monitoraggio Incidenti stradali
- Outcome Comunità

Rehabilitation

- FUBOD - Fuori dall'oblio

Addiction Services & Therapeutic communities support

- Riabitiamo

Prevention of drug-related diseases

- DPTI

Early Warning System & technological innovation

- ALLERT 2011

Planning & organization

- PAN 2010-2013

Research

- ADOCANNABIS
- MIRNA

Training & updating

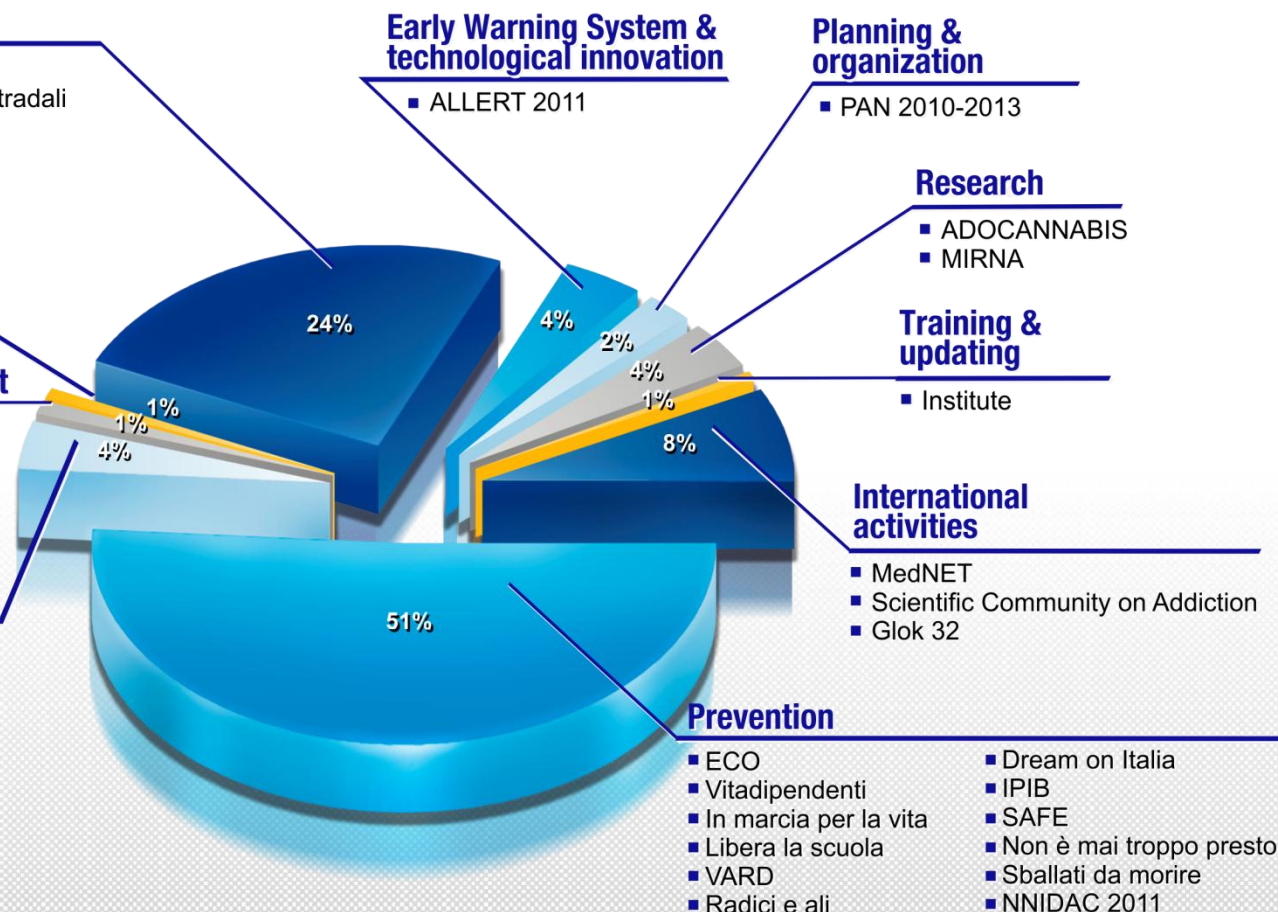
- Institute

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





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 1953, 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 Kerlikowske
Director, White House Office of
National Drug Control Policy





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: 25th 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



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 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.



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.



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United Nations Office on Drugs and Crime

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Dipartimento Politiche Antidroga

Prevention Strategy and Policy Makers

“A solidarity consortium”

Rome 9th –10th 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



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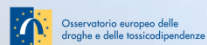
Solidarity Consortium for prevention strategies and intervention of drug use



Paesi ed organizzazioni partecipanti all'incontro



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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*



Giovanni Serpelloni

*Capo Dipartimento Politiche Antidroga
Presidenza del Consiglio dei Ministri*



Jonathan Lucas

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

Giovanni Serpelloni



INCB Head: Raymond Yans





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Italian Scientific Community on Addiction

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SAMHSA

UNODC United Nations Office on Drugs and Crime

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Italian Journal On Addiction

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National School on Addiction

International Collaboration Groups

Good clinic practices

International Cooperation on Addiction

Gruppi internazionali per la condivisione delle "best practices" e la ricerca

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)

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tration (SAMHSA);



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	DB Normativa	Linee Guida
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CANNABIS
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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.

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ITALIAN JOURNAL ON ADDICTION



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[Presentazione > J. Lucas](#)

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[Contributi originali](#)

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Sfoglia il fascicolo

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. E' 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.

IJA
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Buprenorfina nella terapia di disintossicazione da oppiacei

M. A. Raggi, M. A. Saraceno

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No





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FORMAZIONE DI ECCELLENZA PER I DIRIGENTI E I FUNZIONARI DELLA PA





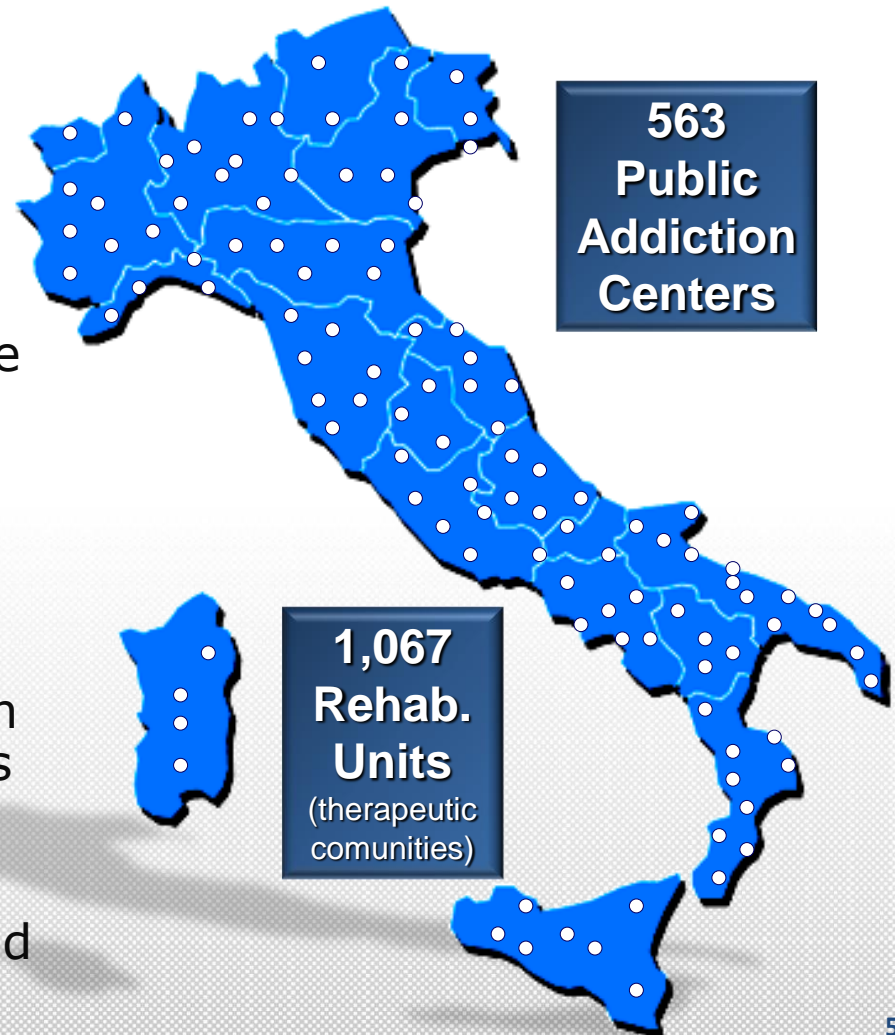
Drug use and addiction in Italy: a Brief epidemiological report





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

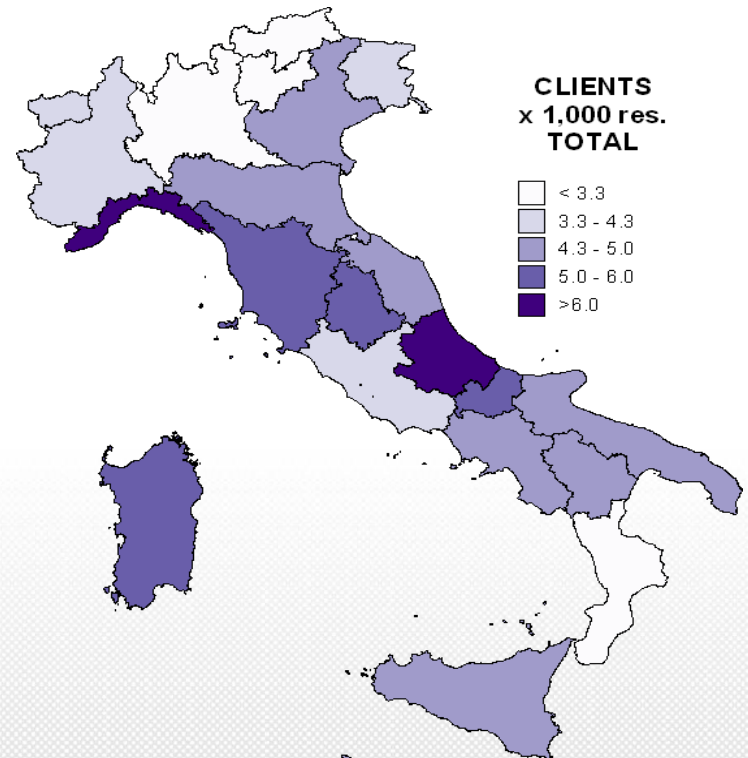
Treated Population and Need of Treatment (2011)

2011 NATIONAL DATA

520.150 Estimated number of addicts needing treatment

172.211 Total treated clients

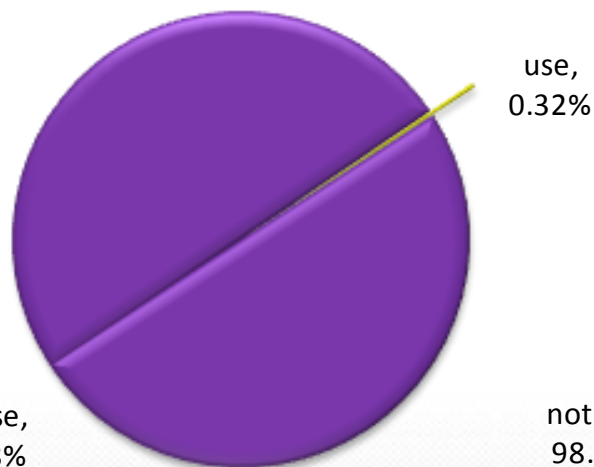
33.1% are in treatment





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%

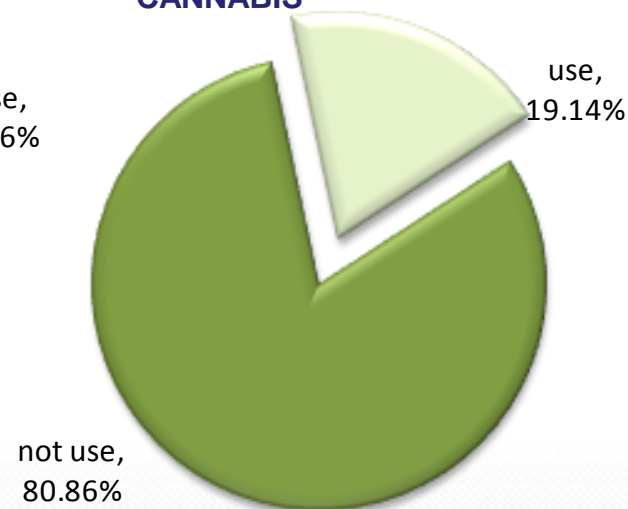
COCAINE



1.06% over the 30 days prior to the survey

2011: 2.0%

CANNABIS



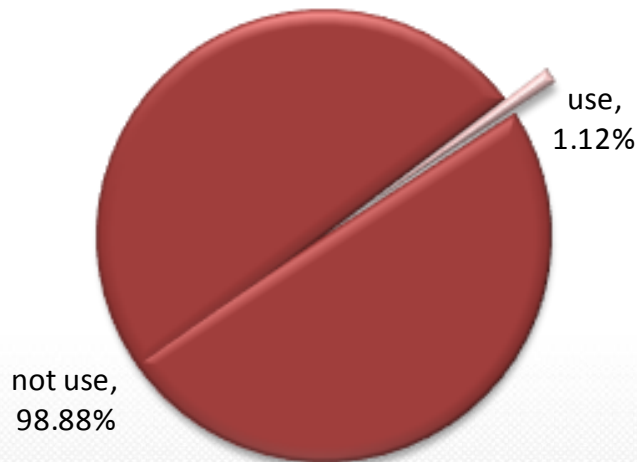
12.95% over the 30 days prior to the survey

2011: 17.9%



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

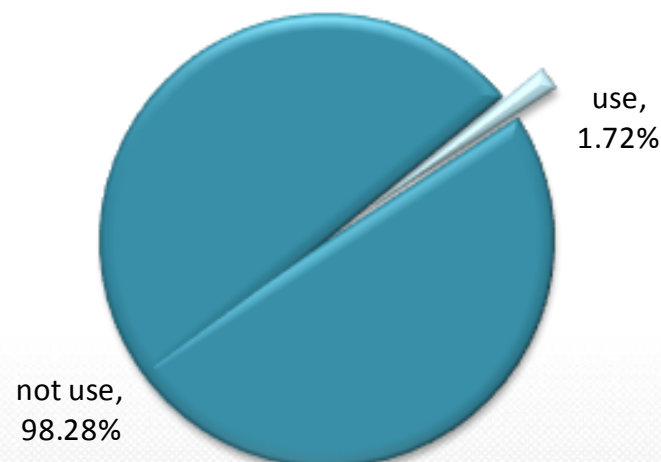
STIMULANTS



0.57% over the 30 days
prior to the survey

2011: 1.0%

HALLUCINOGENS

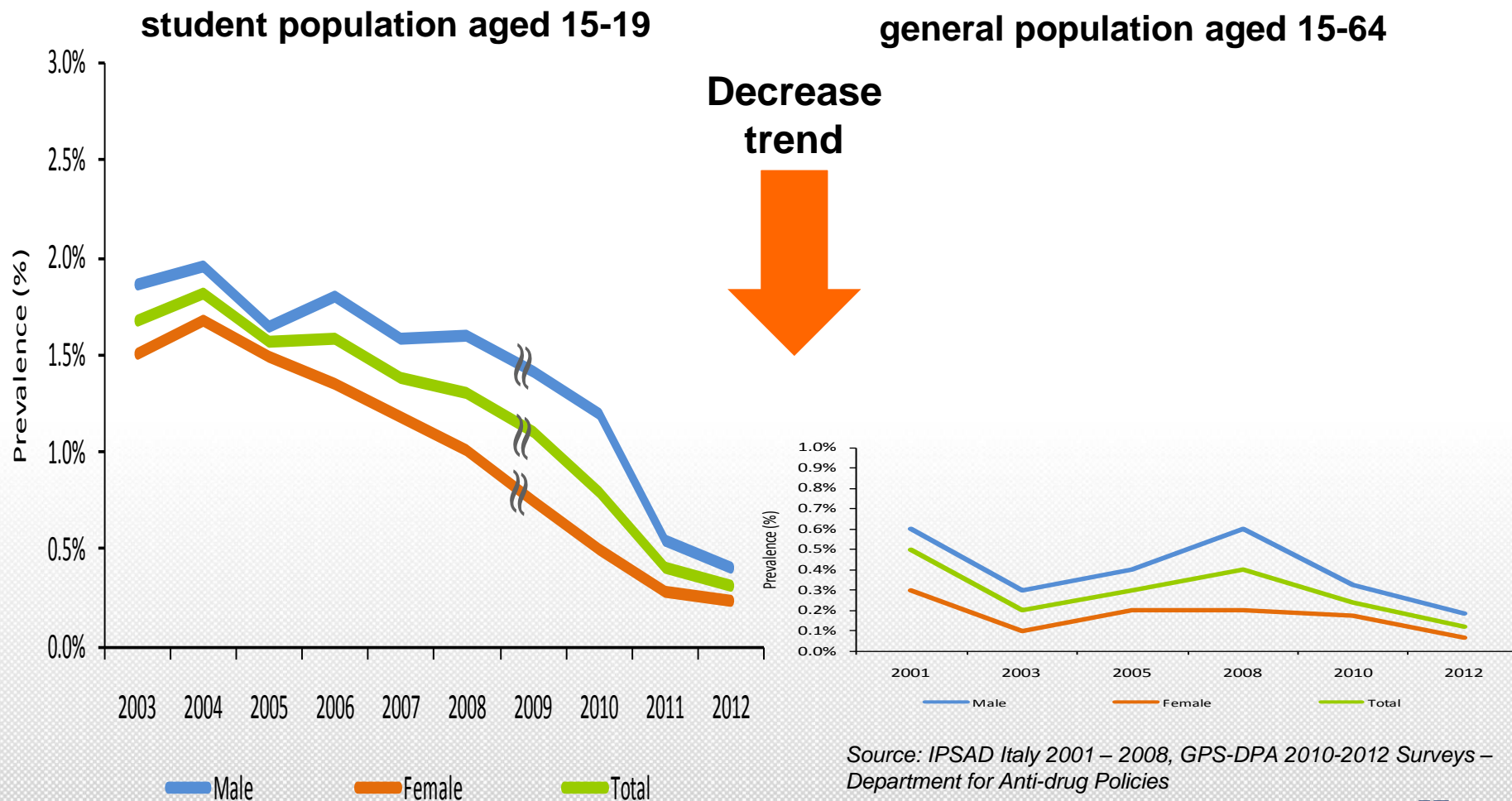


0.86% over the 30 days
prior to the survey

2011: 1.9%



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

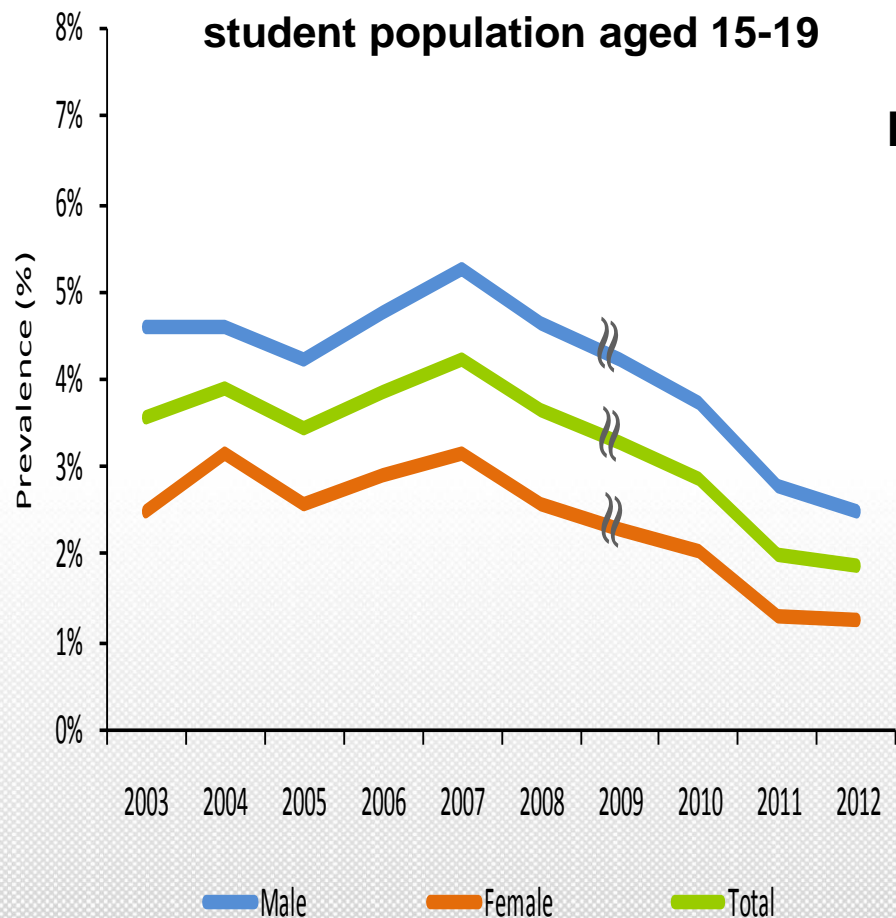


Source: ESPAD Italy 2003-2008 – SPS-DPA Surveys 2010-2012 –
Department for Anti-drug Policies

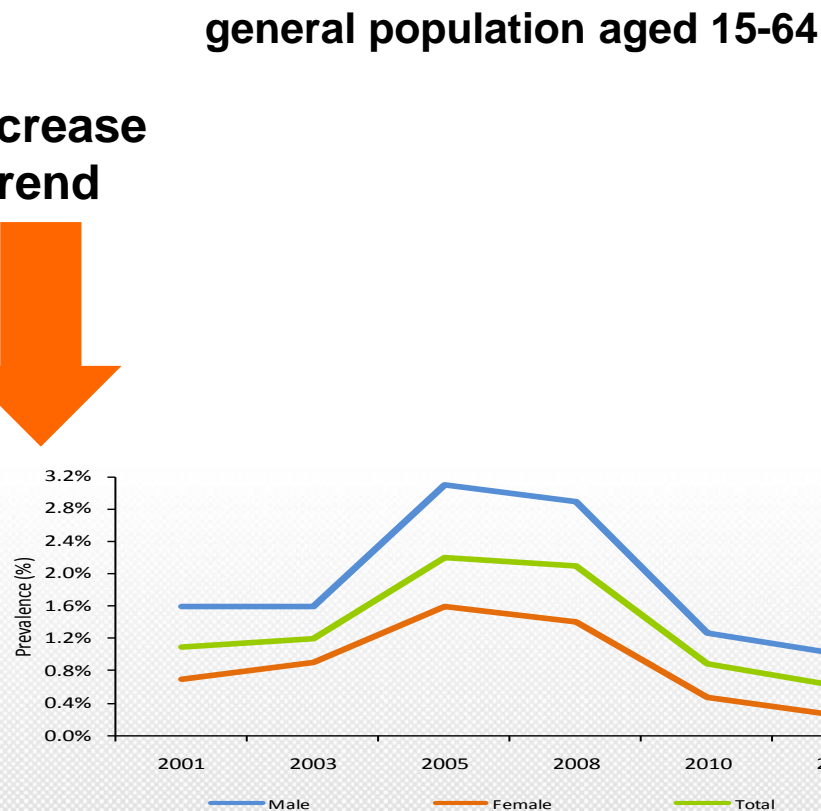
Source: IPSAD Italy 2001 – 2008, GPS-DPA 2010-2012 Surveys –
Department for Anti-drug Policies



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



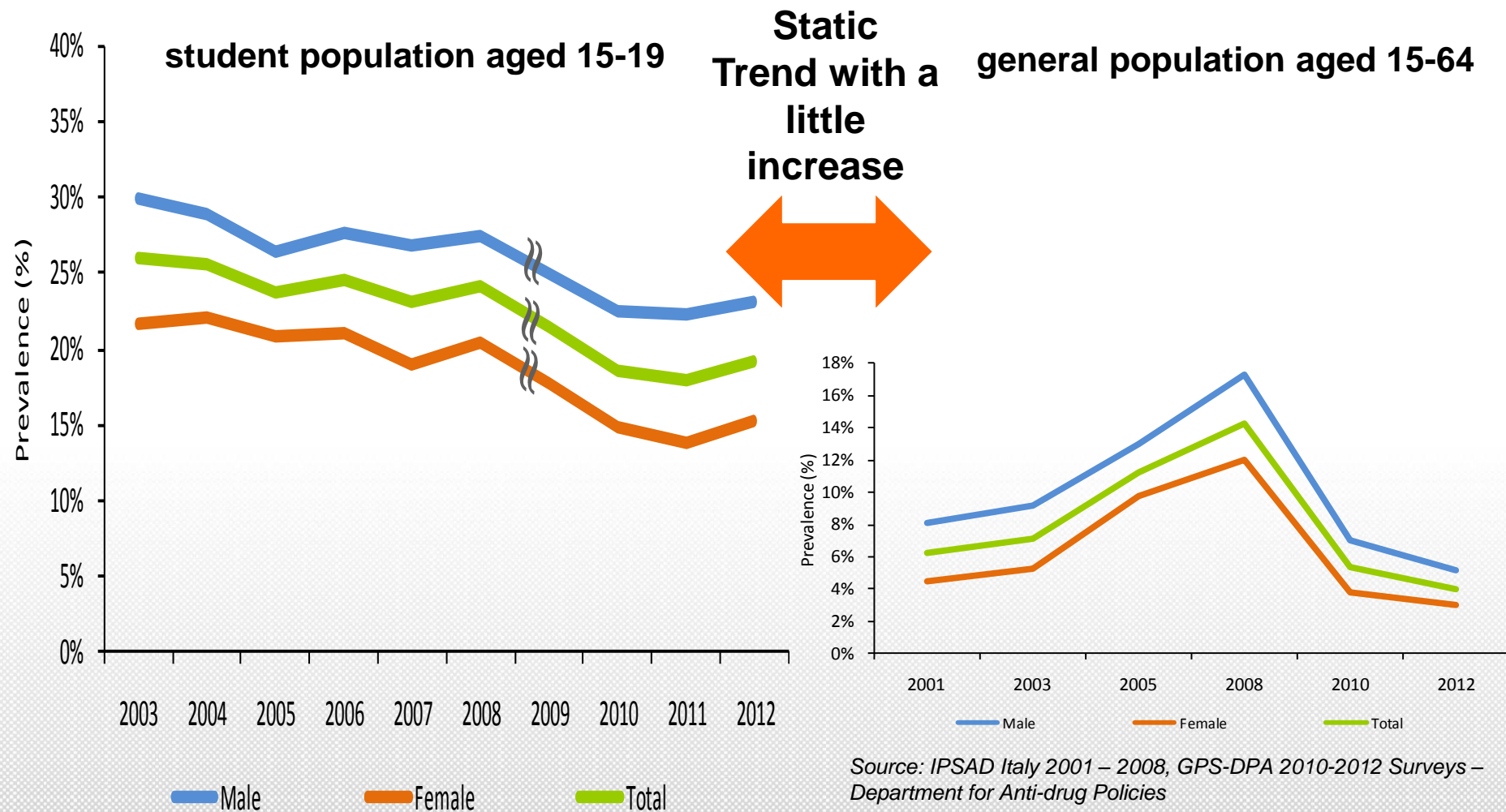
Decrease trend



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

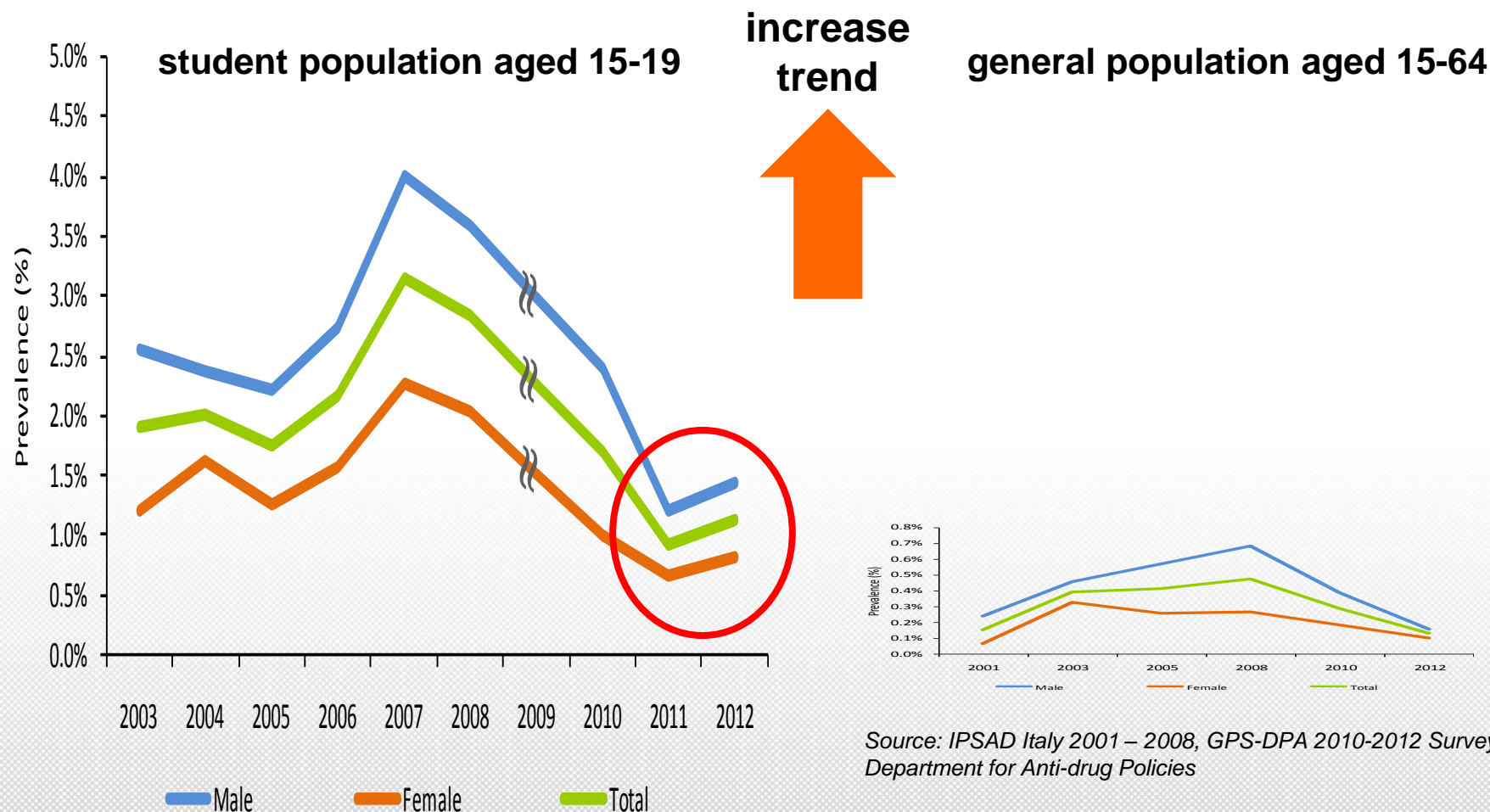


Source: ESPAD Italy 2003-2008 – SPS-DPA Surveys 2010-2012 –
Department for Anti-drug Policies

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



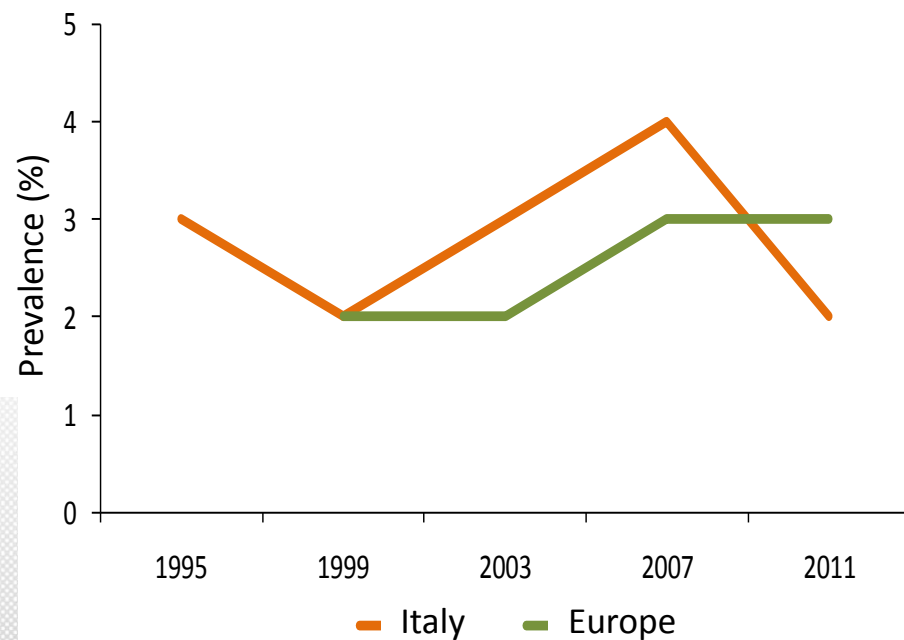
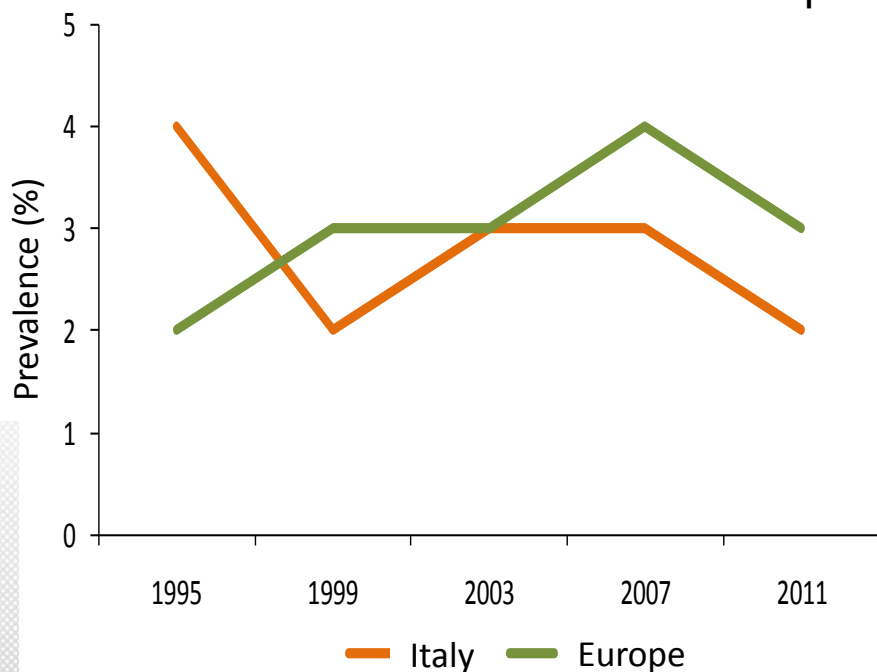
Source: IPSAD Italy 2001 – 2008, GPS-DPA 2010-2012 Surveys – Department for Anti-drug Policies



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

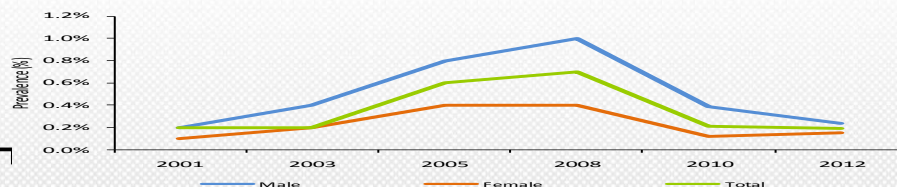
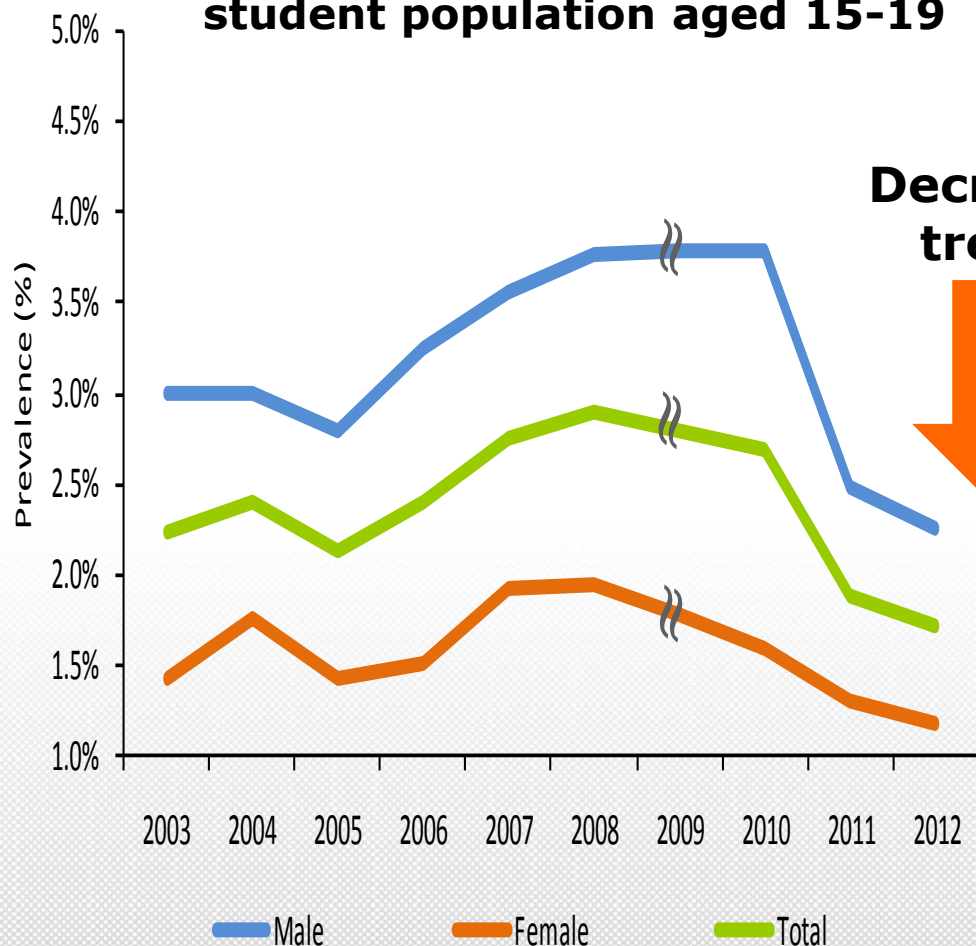




Hallucinogen use (% prevalence) over the 12 months prior to the survey. 2003-2012

student population aged 15-19

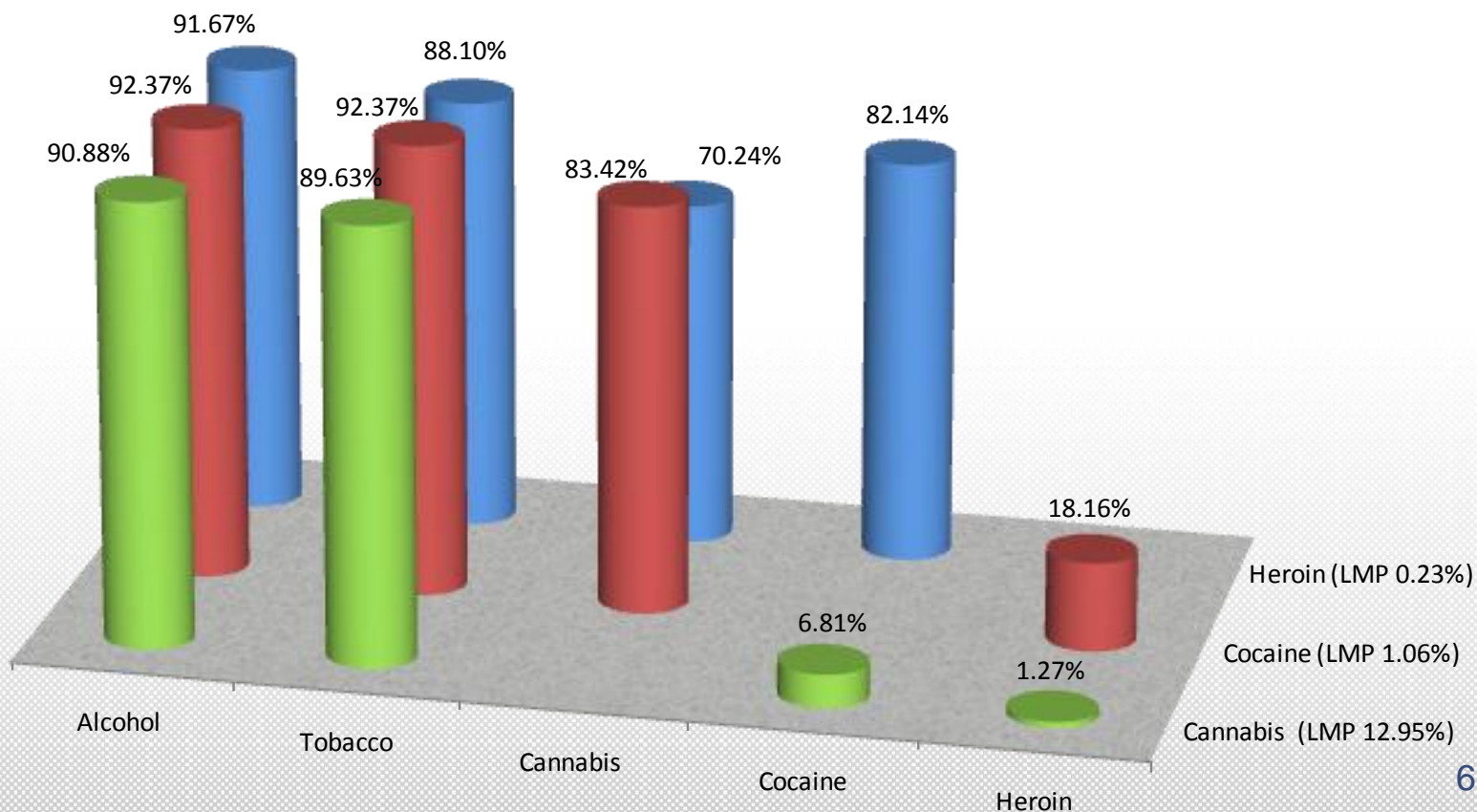
general population aged 15-64



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

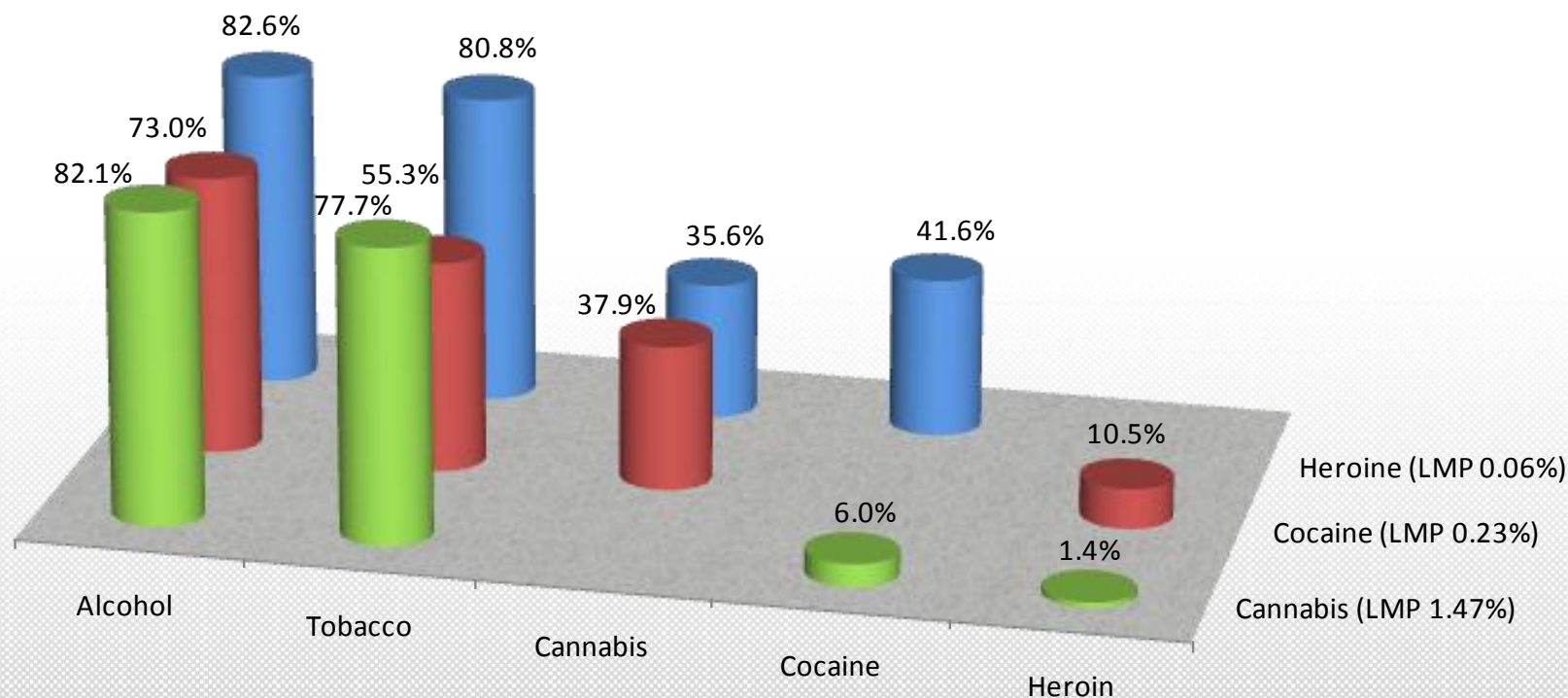


Distribution of poly drug use in the student population **aged 15-19** in the last 30 days, related to primary use of cannabis, cocaine and heroin. Year 2012





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



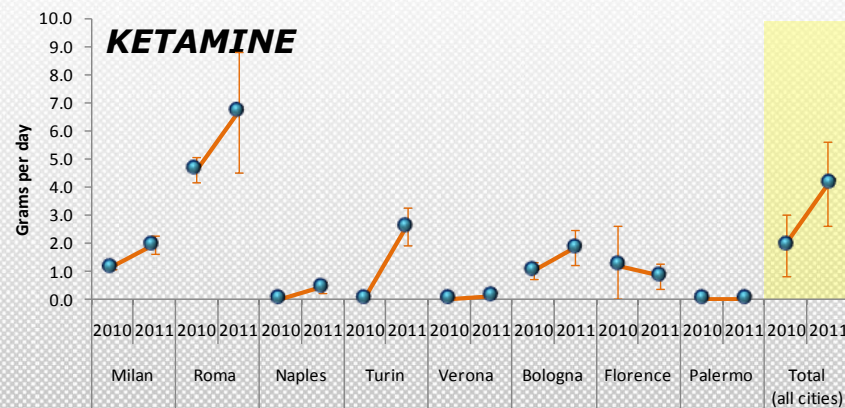
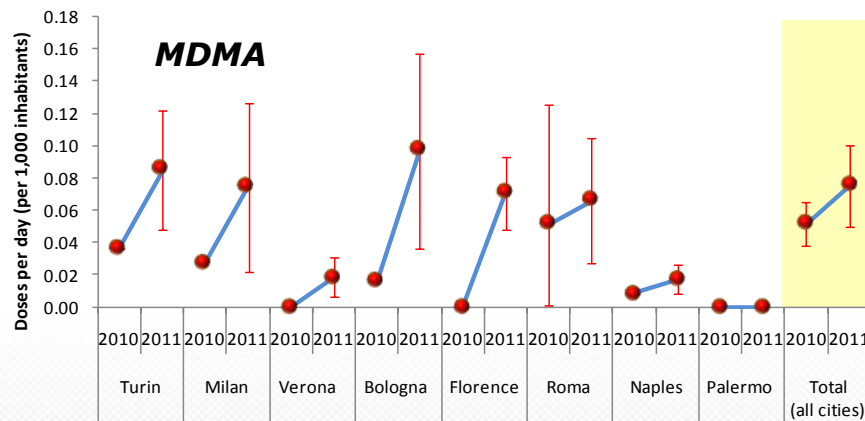
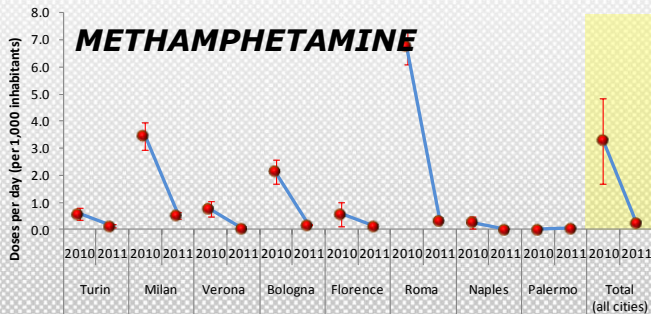
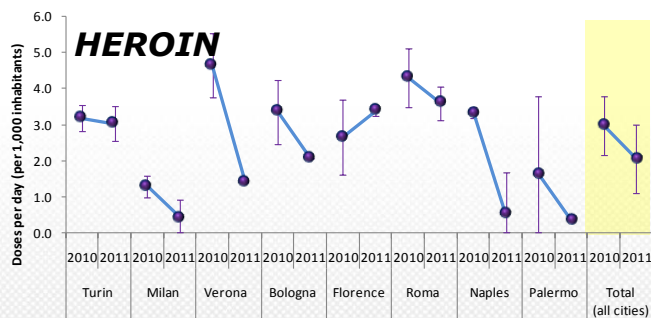
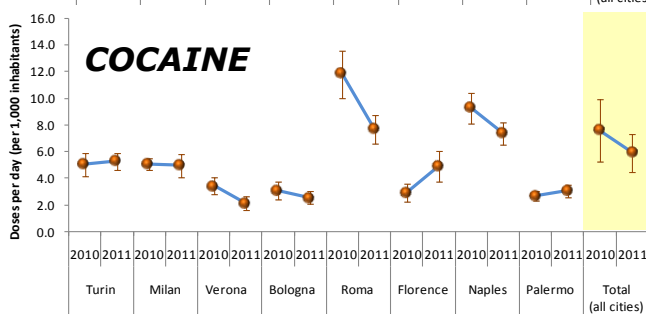
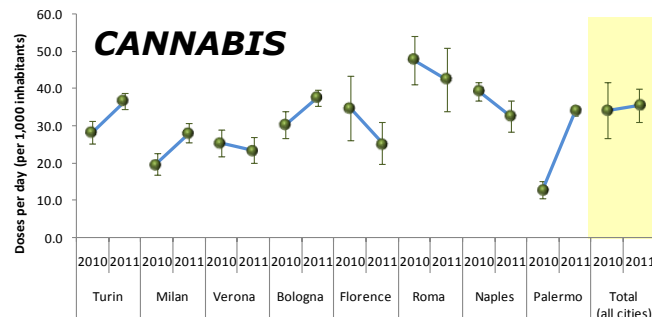


Wastewater analyses

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

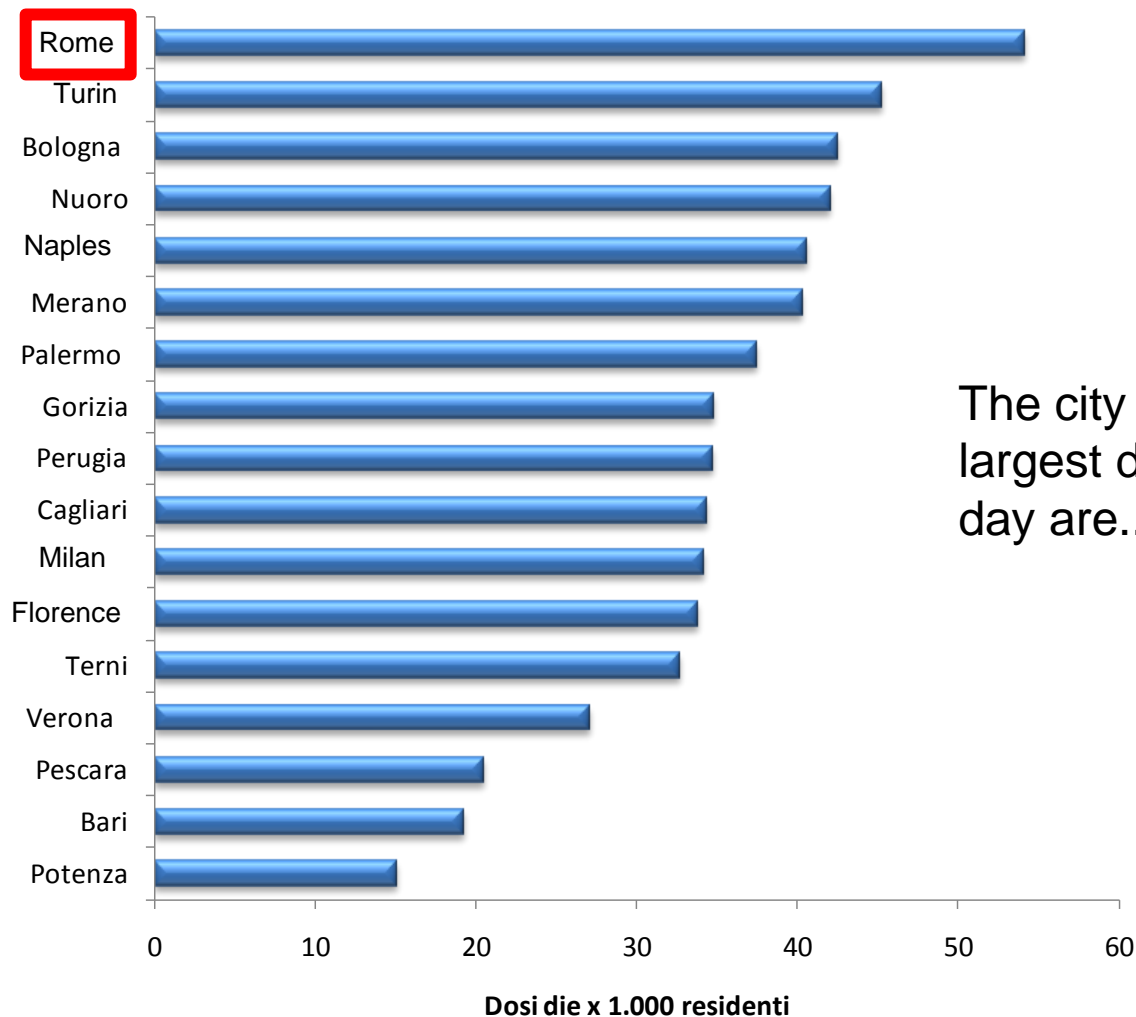
2010-2011

“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...

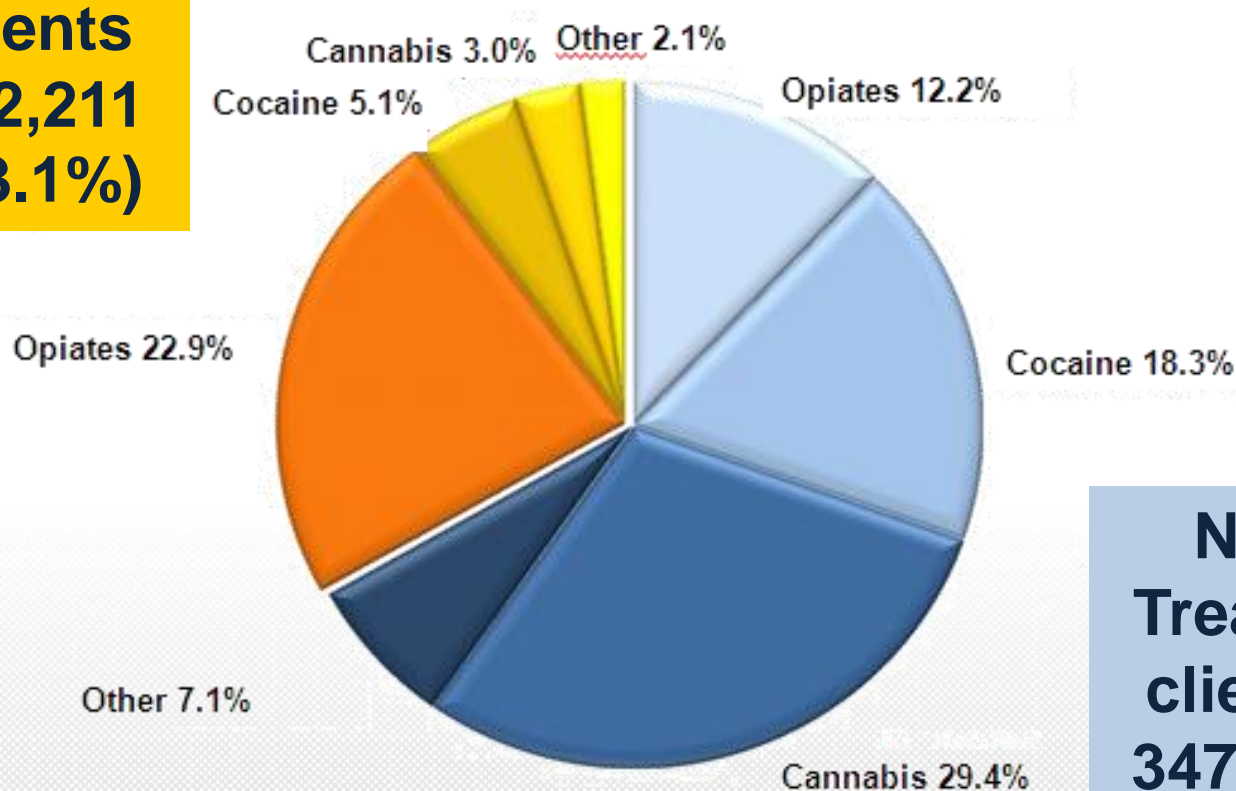


Drug Addicts Treatments



Treated clients and Not Treated clients – Years 2011

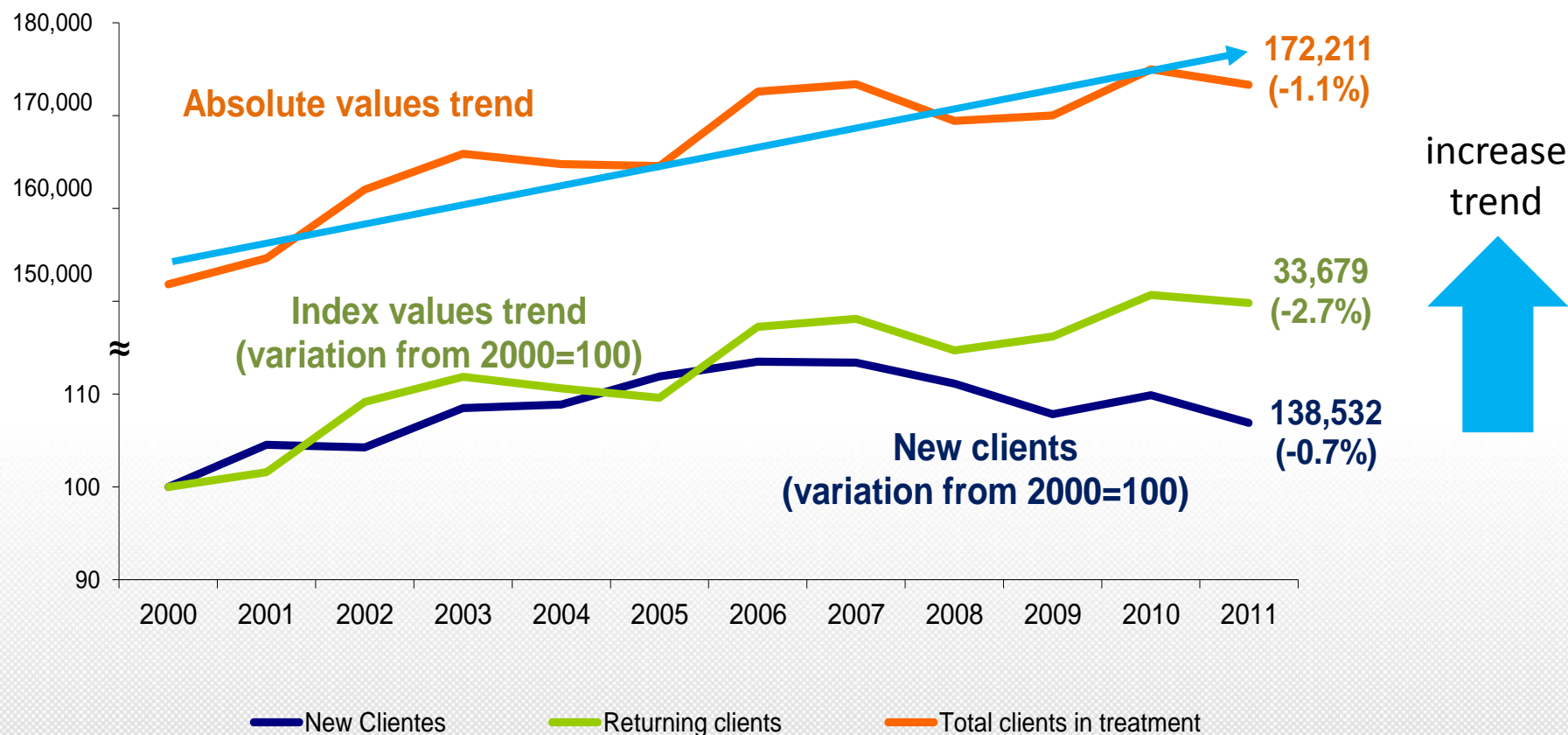
**Treated
clients
172,211
(33.1%)**



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



Characteristics of subjects in treatment – 2000 - 2011

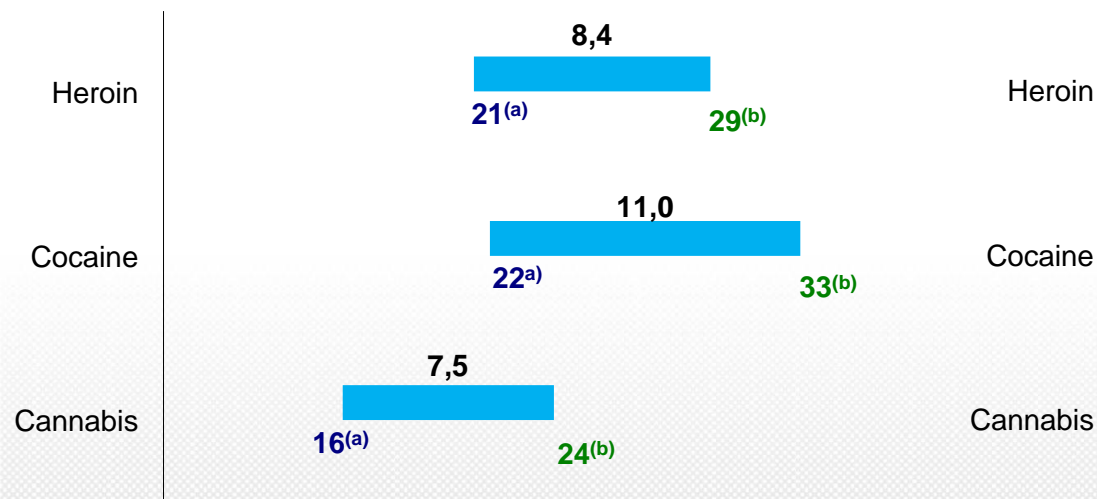




Latency period: Age at first use - age at first treatment

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

Men

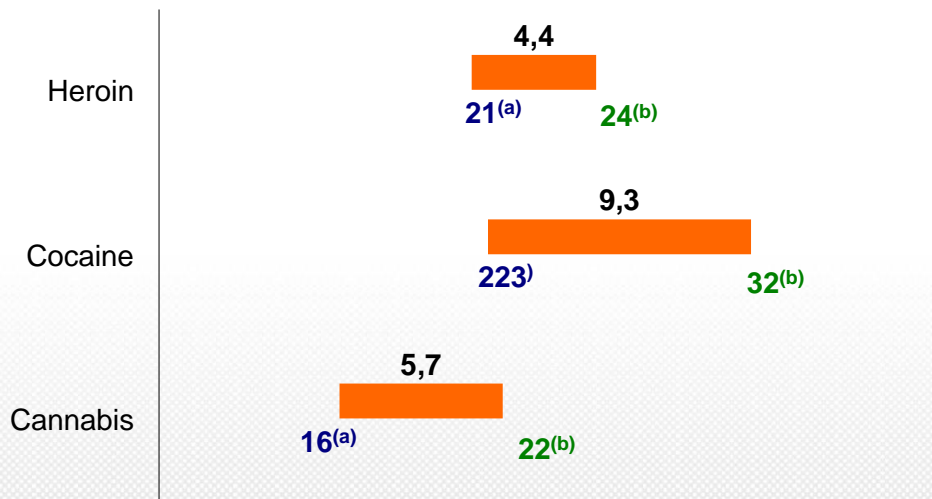


(a) = Age at first use

(b) = Age at first treatment

■ Latency period (years)

Women



(a) = Age at first use

(b) = Age at first treatment

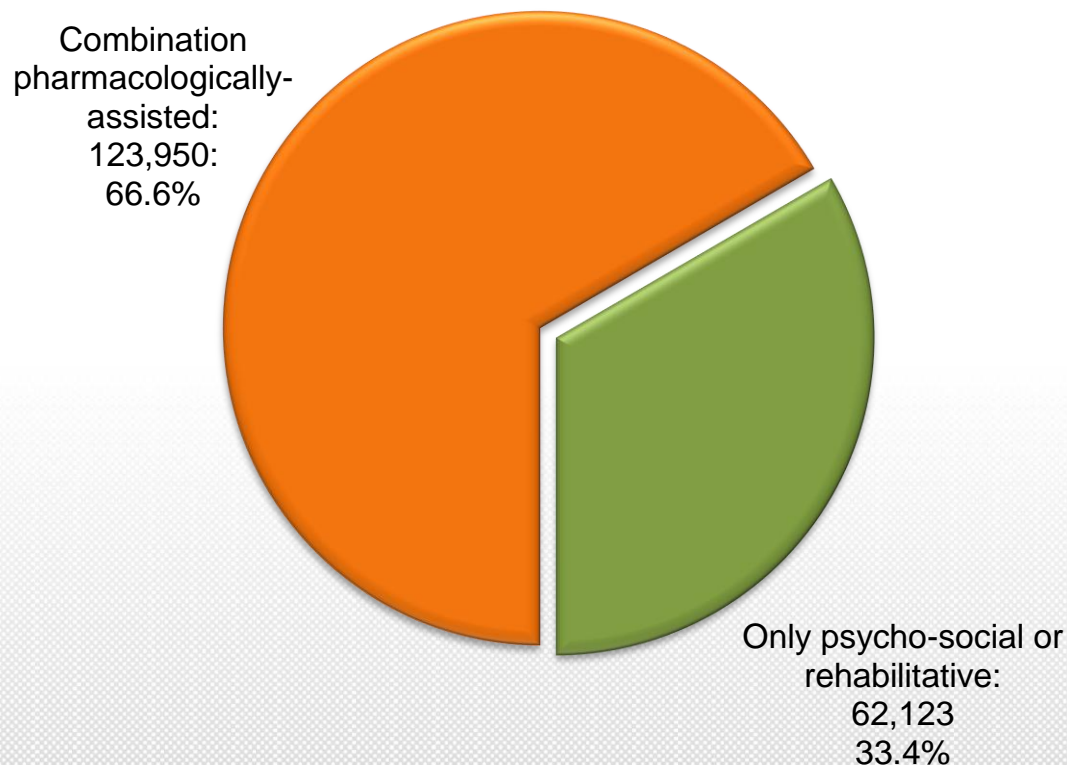
■ Latency period (years)



Total Treatments provided. – Year 2011

186.213

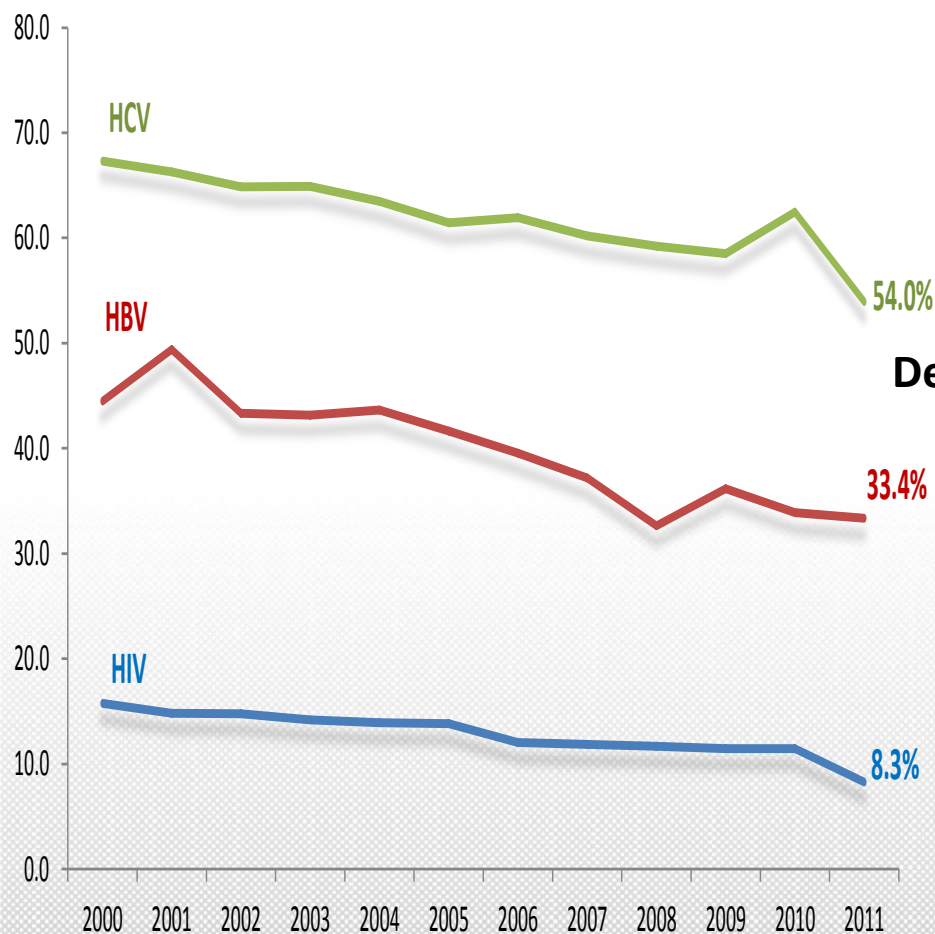
Treatments provided in 2011



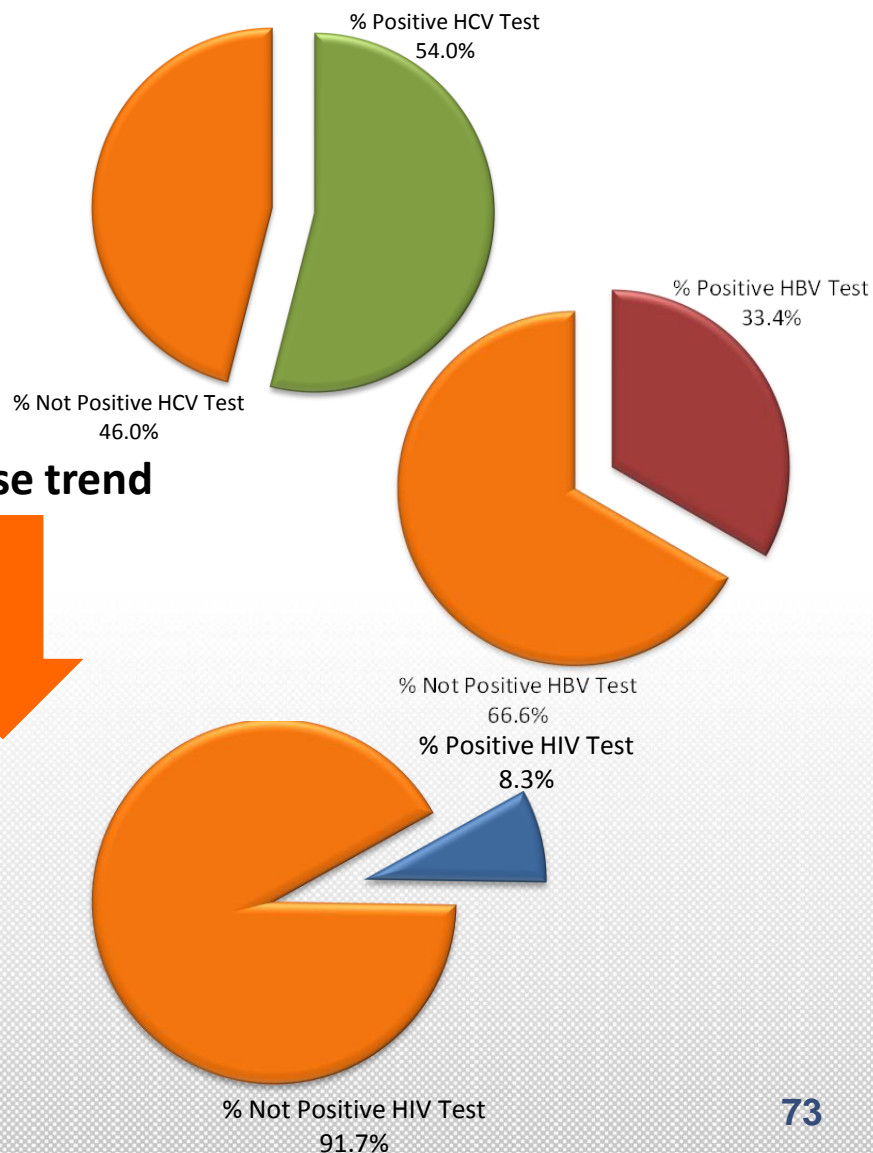
The same subject may have accessed more than one type of service more than once



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

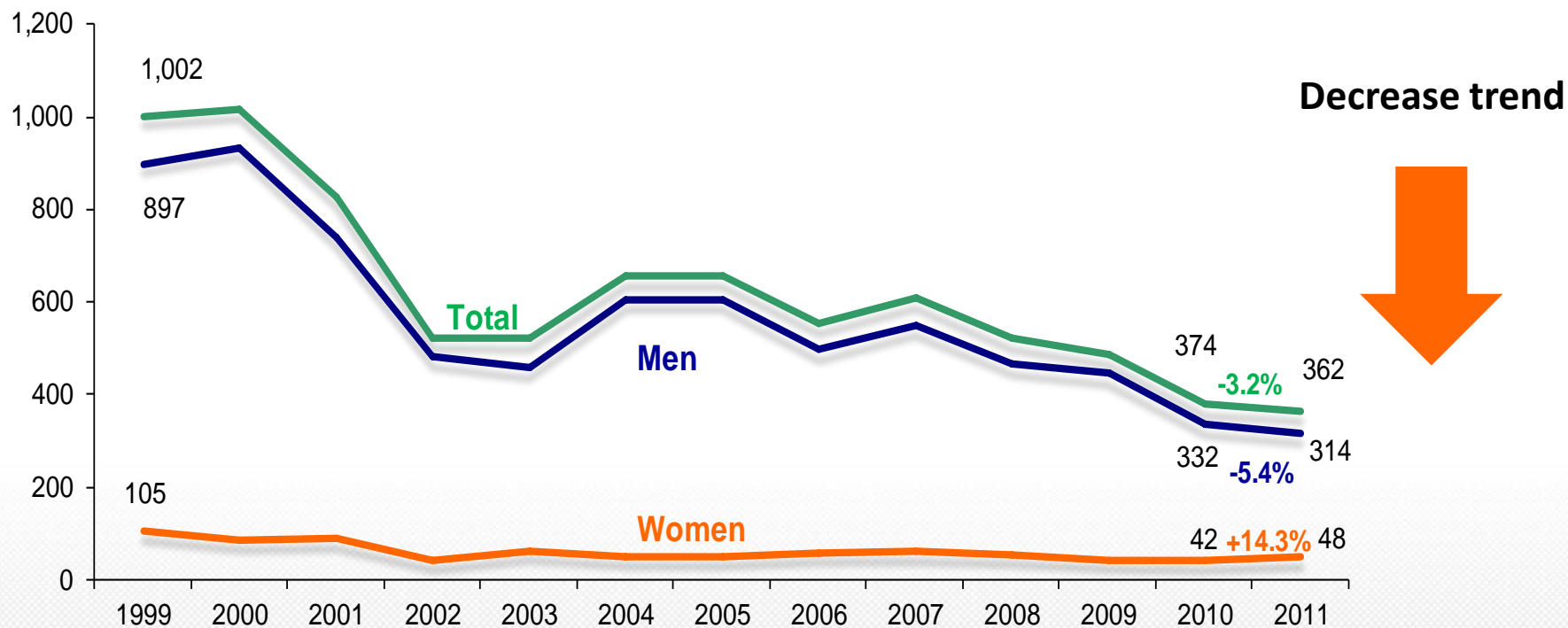


Decrease trend



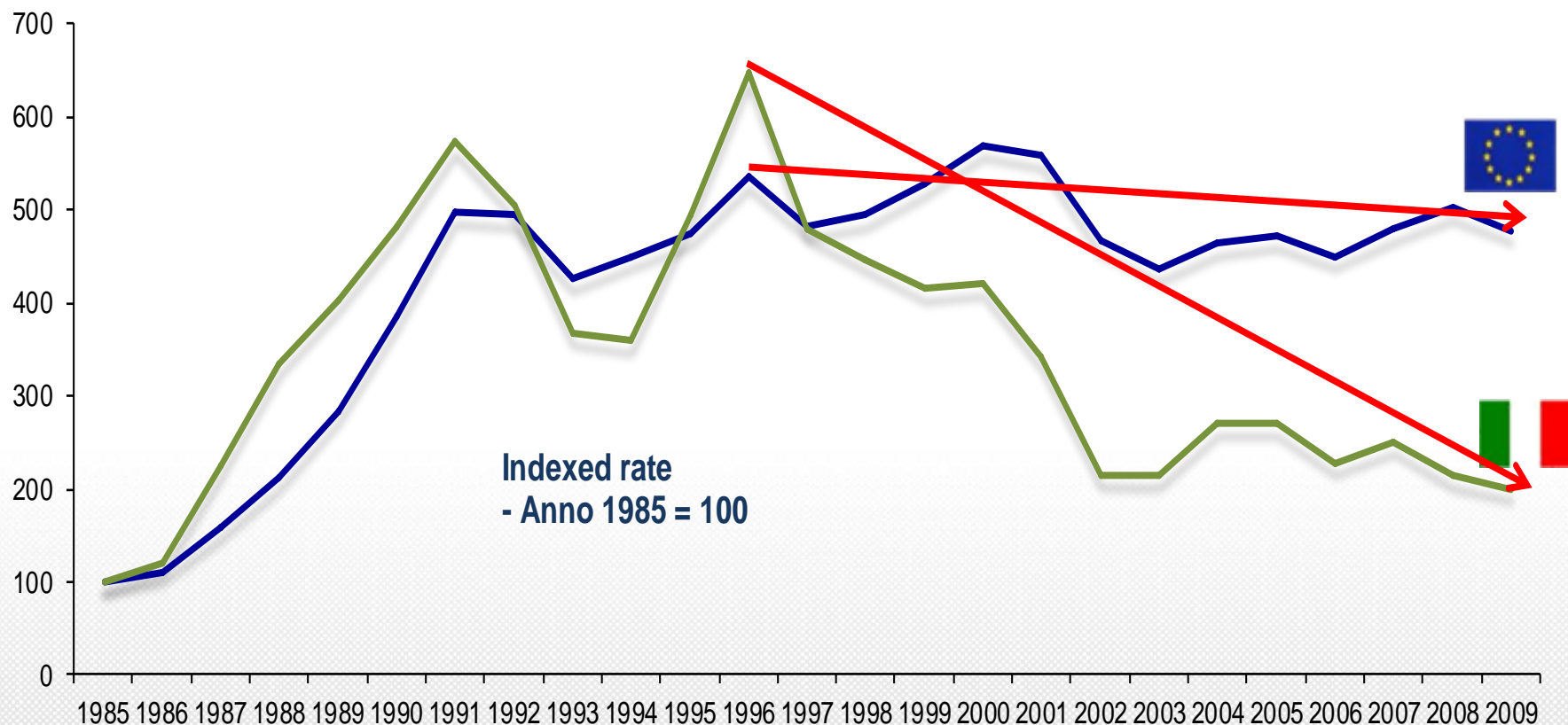


Deaths for overdose. Years 1999 - 2011





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

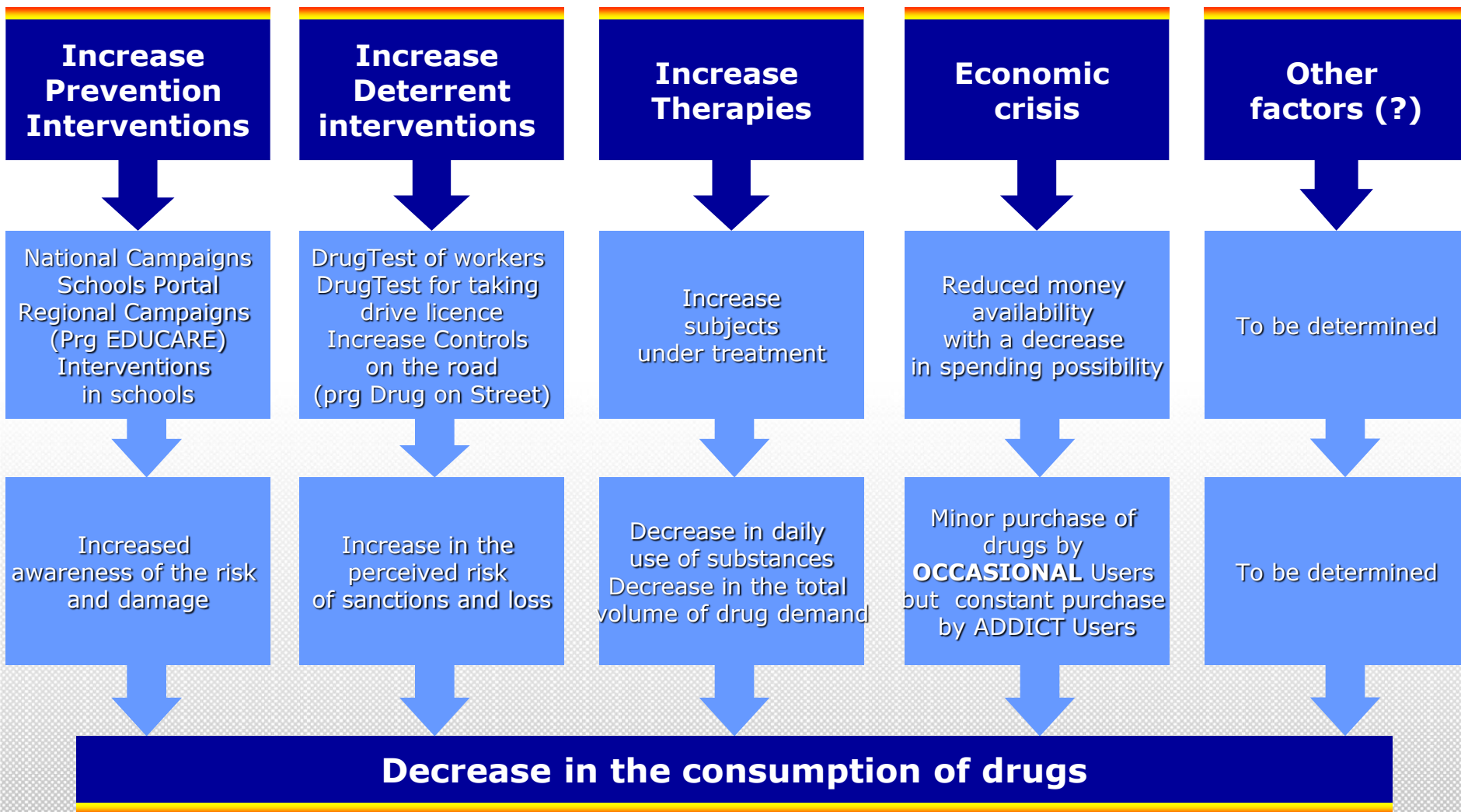




What are the factors contributing to these results?

SCENARIO 2008 – 2012:

there are multiple factors that can influence the results





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Selezionare la regione per
accedere al portale regionale



Droga in Breve



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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)

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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 stai contro la droga?
Progetto di prevenzione per le scuole

**PROGETTO
COMUNITALIA**

**THE
ITALIAN SCHOOL
ON
ADDICTION**



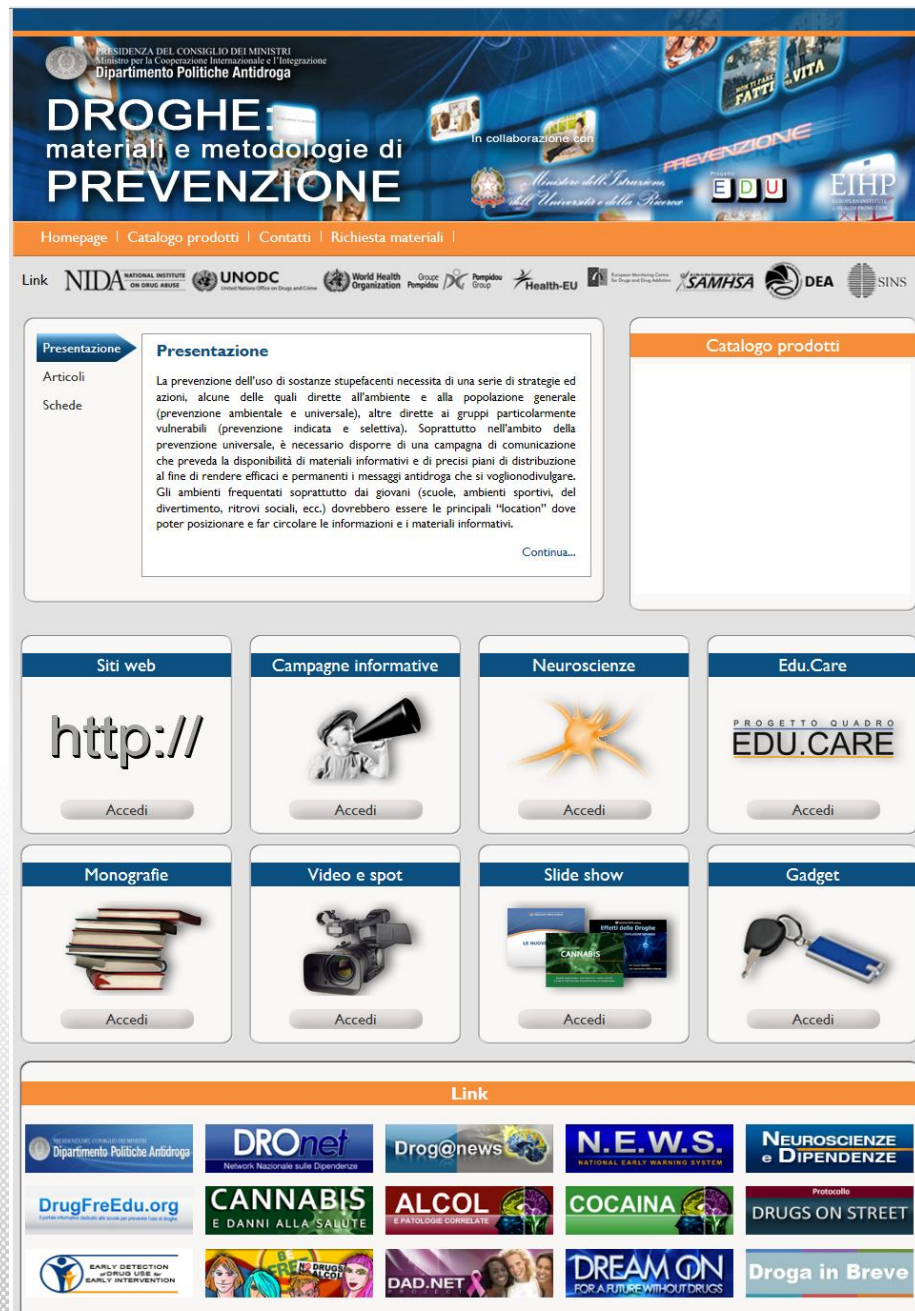
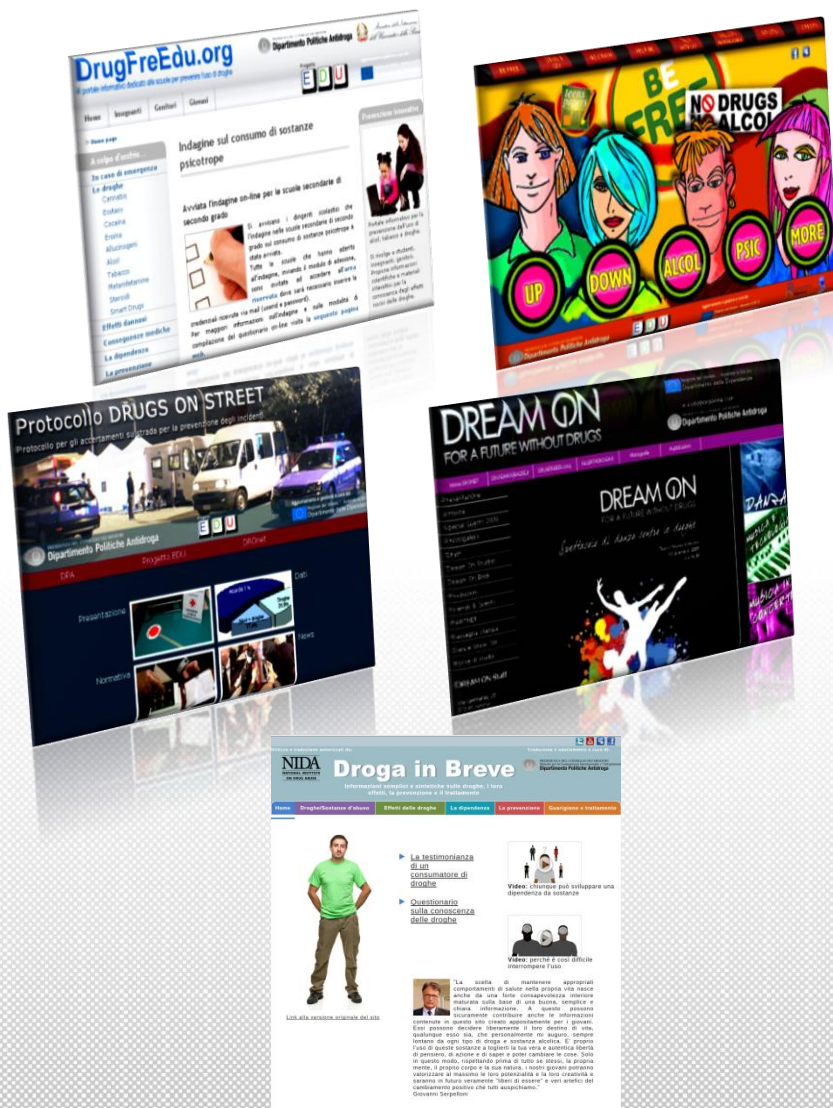
Publications for professionals

PUBBLICAZIONI





Prevention portals





**Thank you for your
attention**



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