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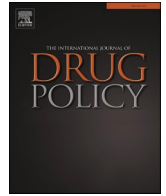
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Commentary

Synthetic opioids in Poland—A cause for concern or a media distraction?

Greg Los^{a,*}, Artur Malczewski^b^a University of West London, United Kingdom^b Head of CINN (Reitox Focal Point Point), Poland

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ABSTRACT

Background: The North American continent has been battling a major health crisis defined by opioids like OxyContin and fentanyl for over two decades now. In that time, it seemed that Europe is rather resilient to a similar problem, and heroin retained its position as the most problematic opioid. This does seem to be changing and European media, including in Poland, is starting to report on growing popularity of synthetic opioids like fentanyl.

Methods: We use official data showing the number of prescriptions for synthetic opioids; data showing the percentage of people entering treatment due to different opioids; police data on drug interceptions as well as lab closures, and data on opioid related poisonings.

Results: The data demonstrates that although Polish physicians are increasingly more likely to prescribe synthetic opioids like OxyContin or Fentanyl, their problematic use remains low.

Conclusion: Poland currently does not seem to be in a position that resembles an early stage of an opioid crisis. With this article we want to calm a heated public debate that is currently taking place in Poland, and redirect attention to a much more substantial problem of synthetic cathinones.

Introduction

The discussion surrounding the use of synthetic opioids like fentanyl has, for a long time, been focused predominantly on the North American context. The United States has been dealing with significant problems associated with opioids like OxyContin and, more recently fentanyl for approximately 25 years now. The beginnings of the opioid epidemic are traceable to the context of the late 1990s and early 2000s when pharmaceutical companies began to market prescription drugs like OxyContin aggressively (Compton & Manseau, 2019). Since then, hundreds of thousands of people have died due to opioid misuse—81,806 just in 2022 (NIH, 2024). It is perhaps unsurprising that most academics have focused on the North American context. It seems that Europe was, for a long time, capable of avoiding a similar health crisis. This is reflected in some statistics. In 2021, there were 6166 overdose deaths reported in the EU, which is estimated to be 18.3 per million (EMCDDA, 2022) but in the U.S.A., it was 324 per million (NIH, 2024).

A report from the European Monitoring Centre for Drugs and Addiction (EMCDDA, 2024) concludes that heroin remains the most problematic opioid in Europe and one which is responsible for the most significant number of drug-related deaths. The consumption of opioids

on the European continent, however, continues to evolve. The same report notices how the cohort of heroin users is ageing, and other opioids are becoming more popular. Other studies also show that the number of consumed opioids seems to be growing across Europe for over two decades now (Guastella et al., 2022; Hider-Mlynarz et al., 2018). They are, amongst other things, indicating that doctors in some European countries are increasingly willing to prescribe them. Overall, there are growing concerns surrounding the use and popularity of synthetic opioids in Europe.

Recently the Polish government, for example, has assembled a special committee on opioids (PAP, 2024). This is arguably a response to the Polish media, which has recently begun reporting on the growing popularity of fentanyl. Gazeta Wyborcza (Górski, 2024) for example, has reported that “fentanyl has broken out of hospitals and is taking a deadly toll.” Another newspaper talks about how “Fentanyl—zombie drug—is killing in Poland” and that the “police do not see a problem” (Celej, 2024). The discussion has recently reached its zenith when, in March of 2024, a 26-year-old woman died because of a drug overdose, and fentanyl was found in her blood, amongst other substances. In this short commentary, we will address some of these concerns and show that our data does not seem to indicate that Poland currently finds itself in a

* Corresponding author.

E-mail addresses: greg.los@uwl.ac.uk (G. Los), artur.malczewski@kbpn.gov.pl (A. Malczewski).

situation that resembles the early phases of an opioid crisis. The data we present here is patchy, and we purposefully do not include some types of data. The general representative population survey of drug use in Poland (Malczewski et al., 2020) is now really dated (2018/2019). Equally, we are not focusing on representative youth studies. These studies have shown a very similar pattern of heroin use of about 1.2–1.8 % of 18-year-olds since they commenced in 2008 (Malczewski et al., 2020). Instead, we focus on data on prescriptions of opiates like fentanyl and OxyContin - and we look at this data in section one. We supplement this data with statistics on the percentage of people entering treatment because of opioid use and the use of different opioids amongst the users. This is self-reported data and is therefore prone to problems with reliability. People who use drugs often do not know what drugs they have taken and depend on the truthfulness of their supplier. If the effects of drugs are similar, then they might wrongfully identify the substance. Basing conclusions on this data alone would not be valid or reliable. However, we hope that in corroboration with other types of data we deploy here, this data will serve as a puzzle demonstrating a bigger picture. Finally, we also explore the data of recent drug-related poisonings. This data has been obtained under the Polish freedom of information laws and has been passed on to us directly from the Chief Sanitary Inspectorate in Poland.

In the discussion section, we will argue that Poland is in a completely different situation to, for example, the United States in the mid-2010s when fentanyl became popular. In turn, however, we would like to draw attention to other synthetic drugs which have grown in popularity in Poland, like synthetic cathinones. We believe that this is important. One of us is a civil servant who noticed that the Polish media has become interested in synthetic opioids like fentanyl in a somewhat sensationalist manner. We hope this article can start a more informed discussion, calm what appears to be a heated discussion in the public sphere and redirect attention to a much more substantial problem of synthetic cathinones.

Fentanyl and other opioids in Poland

Synthetic opioids like fentanyl or OxyContin are not new to Poland. Fentanyl, for example, has been used to treat very severe pain (e.g., in cancer patients) for a while now. Patients in Poland can access products containing fentanyl in pharmacies by prescription only. These products include transdermal patches, injection solutions, aerosols, and tablets. Similarly to their European counterparts, Polish doctors seem to be increasingly more inclined to prescribe opioids as pain medicine. Kosmowski (2024) for example, shows that the overall value of the sale of opioids from 2002 to 2021 has increased by 255 % (404,686, 480PLN or 104,654,928USD). Data on prescriptions (Table 1) supports this and shows that from 2019 to 2023, the quantity of prescribed synthetic opioids like OxyContin has increased significantly. Prescriptions issued for fentanyl by the Polish health service, on the other hand, seem to have decreased in the same period but increased in the private counterpart.

The data from other sources, however, does not seem to indicate that these synthetic opioids are becoming more problematic than other opioids. A good reflection here is the percentage of people who enter outpatient and inpatient drug treatment (Fig. 1). The most recent data shows that in 2022, 16 % of these patients consisted of opiate users. This is the third largest group, after users of stimulants and cannabinoids. After declining from 2017 to 2021, this percentage slightly increased last year. Similarly, the rate of patients seeking treatment for heroin use

Table 1
Prescriptions issued for OxyContin and Fentanyl in Poland.

	2019	2023
OxyContin (funded by the Polish Health Service NFZ)	165,482	203,630
OxyContin (private)	7760	54,496
Fentanyl (funded by the Polish Health Service NFZ)	138,983	123,094
Fentanyl (private)	5901	11,389

has increased. In the case of other opioids (this category partly includes users of pharmaceutical opioids, mainly codeine, morphine, tramadol, and oxycodone), it has experienced a slight but systematic increase, at least since 2018. The presented data may indicate a slight increase in the non-medical use of opioid medications. This issue requires further analysis. In the case of fentanyl, however, this percentage has remained at a similar level in recent years, oscillating around 0.2–0.3 %.

Similarly, data from the needle exchange programs shows that methadone continues to be the most popular substance amongst these users, followed by heroin (Fig. 2). The prevalence of methadone has been increasing since 2008, with a slight dip in 2016 and most recent year, from 65 % in 2020 to 52 % in 2022. The popularity of heroin seems to have decreased from about 44–45 % in 2008–2010 to 30–26 % in years 2012–2020 before increasing slightly in 2022 to 33 %. Finally, *Kompot*—also known as Polish heroin, which is a homemade opiate derived from poppy straw, has decreased in popularity. *Kompot* was particularly popular in the 1970s and 1980s, but in 2020, only 2 % of the program participants have admitted to its use.

The data from the Chief Sanitary Inspectorate, which receives information from medical bodies across Poland regarding drug-related poisonings (Fig. 3), also seems to indicate that fentanyl remains relatively unpopular in Poland. The data from the first six months of 2024 shows that overall, there have been 878 registered drug-related poisonings. In 69 of these cases, fentanyl is the sole cause of the poisoning or was found in combination with other substances with psychoactive effects. This, all in all, shows that opiates other than fentanyl, like heroin, continue to be more popular and problematic amongst Polish opiate users.

Other synthetic drugs

As demonstrated in the previous section, the popularity of synthetic opioids like fentanyl seems to remain relatively low in Poland. There are, however, groups of drugs other than opioids which do seem to be growing in popularity. The European Drug Report (2024) mentions that synthetic cathinones, which are commonly referred to as 'bath salts,' are increasingly trafficked to Europe from India. They are also notably produced in Poland. In 2022, 23 laboratories producing synthetic cathinones were dismantled, and 355 kg of precursors were seized. This is an increase from eight labs a couple of years earlier. Other data also shows that synthetic cathinones are among some of the most confiscated substances by the police. In 2023, 12.185t of synthetic cathinones were seized by the police, and in the first five months of 2024, that number has already reached 10.468 t (Fig. 4). This seems to follow an earlier trend where 1.827 t were confiscated in 2021 and 5.837 t in 2022. These numbers overshadow other commonly used drugs in Poland, like amphetamine. Since 2021, about 1.9–2.1 t of amphetamine has been seized in Poland every year. During the same period, only 141 kg of heroin was seized by the police, which is relatively insignificant in comparison to the other substances. Finally—in comparison—only 0.25 kg of substances containing fentanyl have been confiscated by the police from 2023 till May 2024.

Conclusion and discussion

In conclusion, the available data indicates that the popularity of opioids like fentanyl or OxyContin remains low in Poland, and heroin remains the most popular opiate. As mentioned at the start of this commentary, we believe that Poland is in a significantly different position than the United States, where fentanyl became popular post-2014. In the United States, at the time, there was already a significant population addicted to prescription drugs like OxyContin. As the U.S. government began to introduce more restrictive rules regarding prescriptions of that drug, many people started to switch to heroin and then fentanyl. Poland is, therefore, in a different situation, as the U.S. was already experiencing an opioid epidemic for roughly a decade when

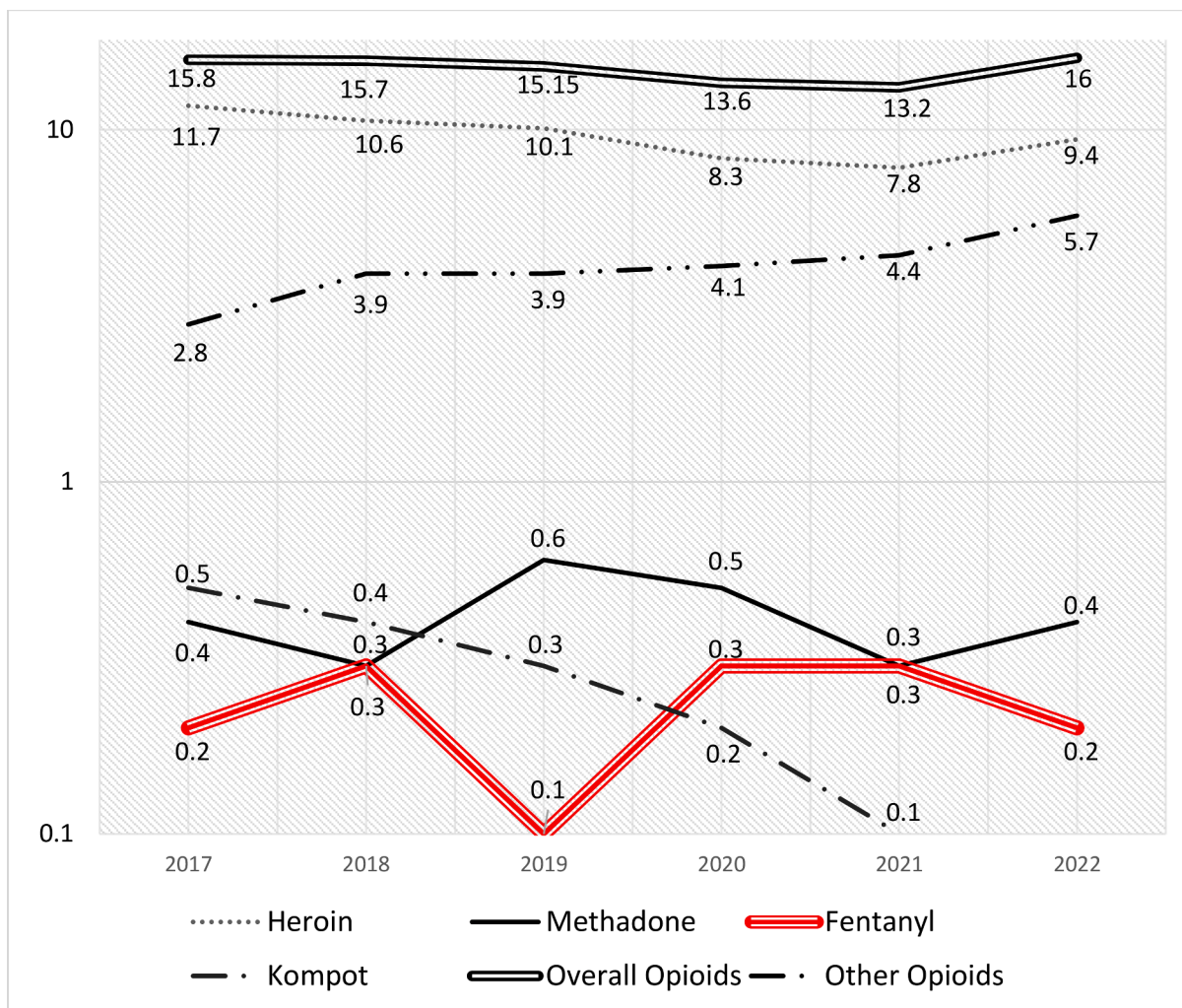


Fig. 1. Entering treatment because of drug use (focusing on opioids) (%).

fentanyl became popular.

This does not mean that things will not change, nor that Poland is immune to a similar health crisis. While the overprescribing of medication was the origin of the opioid crisis in the United States, the market has evolved significantly in recent years, and the context has shifted. The impact has undoubtedly extended far beyond those who initially became dependent on prescription drugs such as OxyContin. The availability of fentanyl reflects the changing drug markets in the U.S. and other countries, including Poland. Synthetic opioids like fentanyl could replace opioids currently prevalent in Poland, such as heroin if heroin becomes less accessible. The Taliban’s commitment in Afghanistan to reducing opium poppy production, along with various other global factors, could trigger this shift. An opioid crisis could, therefore, still happen in Poland, even without an established population of people who use prescription drugs problematically.

Conversely, as mentioned at the start of this commentary, the volume of prescribed synthetic opioids like OxyContin is increasing in Poland. What is worth taking into consideration is that the prescription system has undergone a significant transformation in recent years, which could be problematic for the given context. Since January 2020, patients have had access to an online prescription system called ‘e-recepta’, which is widely used. In this system, a patient can see a doctor online and receive a four-digit code instead of a physical prescription, which can be used in any pharmacy in Poland. The system became controversial as it became apparent that some doctors were issuing prescriptions for various drugs, including painkillers and medical cannabis, in a manner that would

resemble a ‘vending machine.’ As a result, in 2023, the Minister of Health issued limits on the number of prescriptions a doctor can issue. However, the system remains controversial, and, likely, many physicians are still abusing the system. The challenge of fixing the problem is shown by the case of the Minister of Health Niedzielski, who, after introducing restrictions, got into a dispute with the medical community and, as a result, was dismissed because he disclosed personal data (Rzeczpospolita, 2023). Overall, the loopholes in the Polish system of online prescriptions, if not addressed, could also become a potentially critical factor in initiating an opioid crisis in Poland.

Finally, another thing worth taking into consideration is that some elements of the Polish harm-reduction infrastructure should be further developed to prepare for a potential opioid crisis in the future. Arguably, the United States has been unprepared for a major health crisis associated with opioids. Safe injection sites, for example, are still lacking across much of the United States, a wider rollout of naloxone is only now underway, and drug-checking is in its infancy. This is similar to Poland, where these elements are still lacking or underdeveloped. It would be beneficial for Poland to at least prepare the infrastructure for the eventuality of an opioid-related health crisis unravelling. If such does not emerge, the given infrastructure could still serve to help with problems associated with heroin use, for example.

Overall, currently, Poland does not seem to be experiencing a substantial problem with synthetic opioids—contrary to some of the claims made by the Polish media. This leads us to make three recommendations. Firstly, the situation regarding synthetic opioids should be

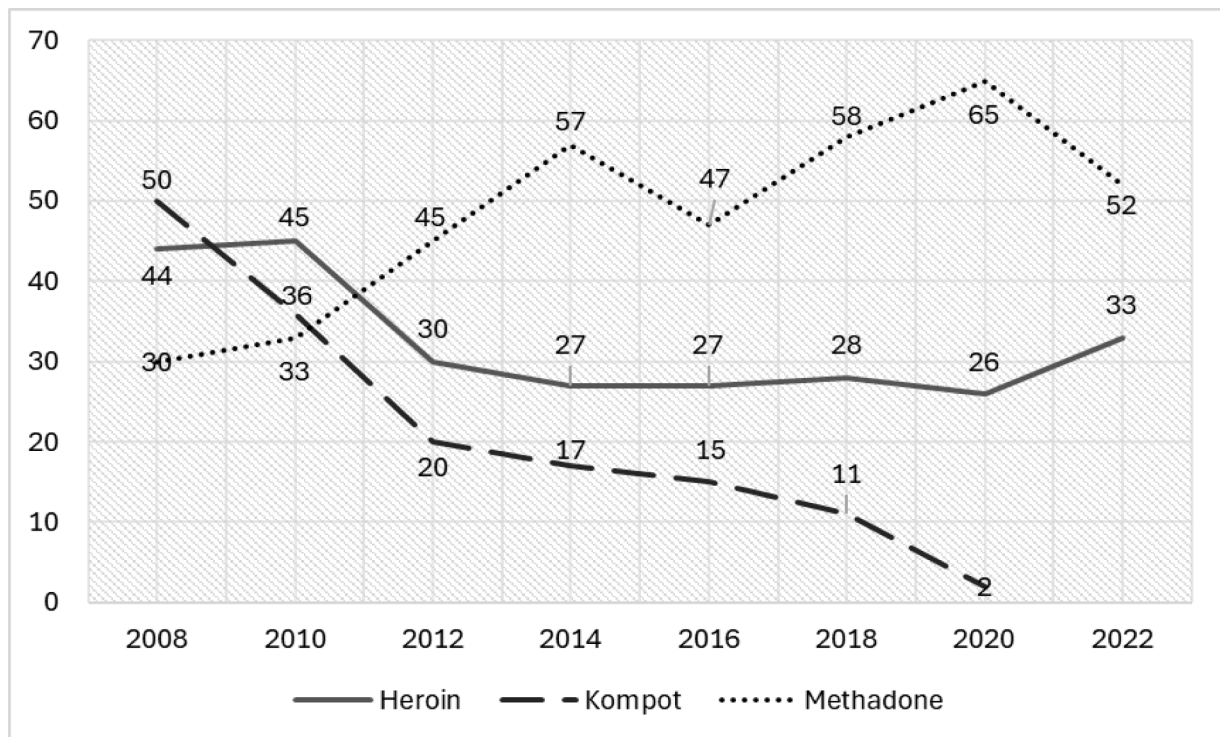


Fig. 2. Opioid use among users of needle exchange programs (%).

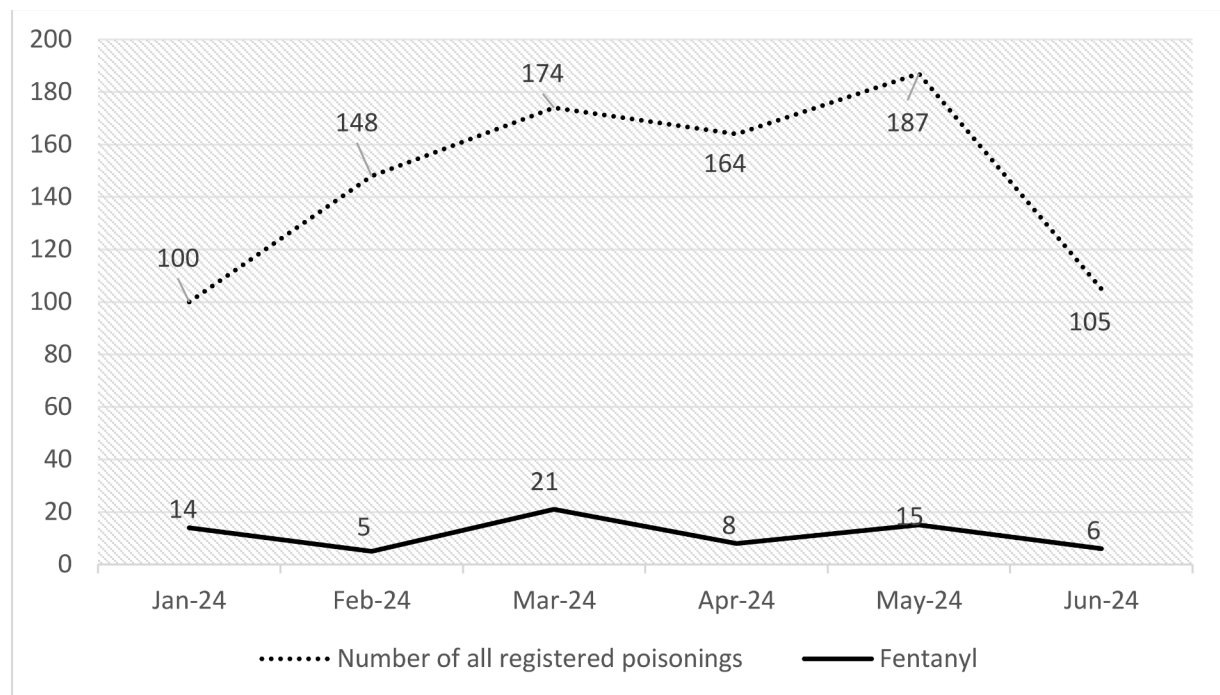


Fig. 3. The number of all drug poisonings registered by the medical bodies.

monitored, and we encourage additional research. Secondly, investments should continue to be made into an ‘infrastructure’ which may help to prevent an opioid crisis from unravelling in the future. This includes investments in developing safe injection sites, naloxone, and drug testing facilities. In relation to drug-testing facilities, it would be particularly beneficial to strengthen the monitoring systems since, as we note at the start, most data on opioid use and related problems comes from user-reported studies. Research basing itself on syringe residues,

for example, would be a more valid source of information about what types of drugs, especially opioids, are used and whether we are observing a shift towards their synthetic varieties. Finally, we believe that, at least currently, more attention should be given to the growing supply of synthetic cathinones and its popularity among some people in Poland—especially those in the younger cohort. As noted above, increasingly more labs responsible for the production of these substances are being raided by the police, and police are intercepting

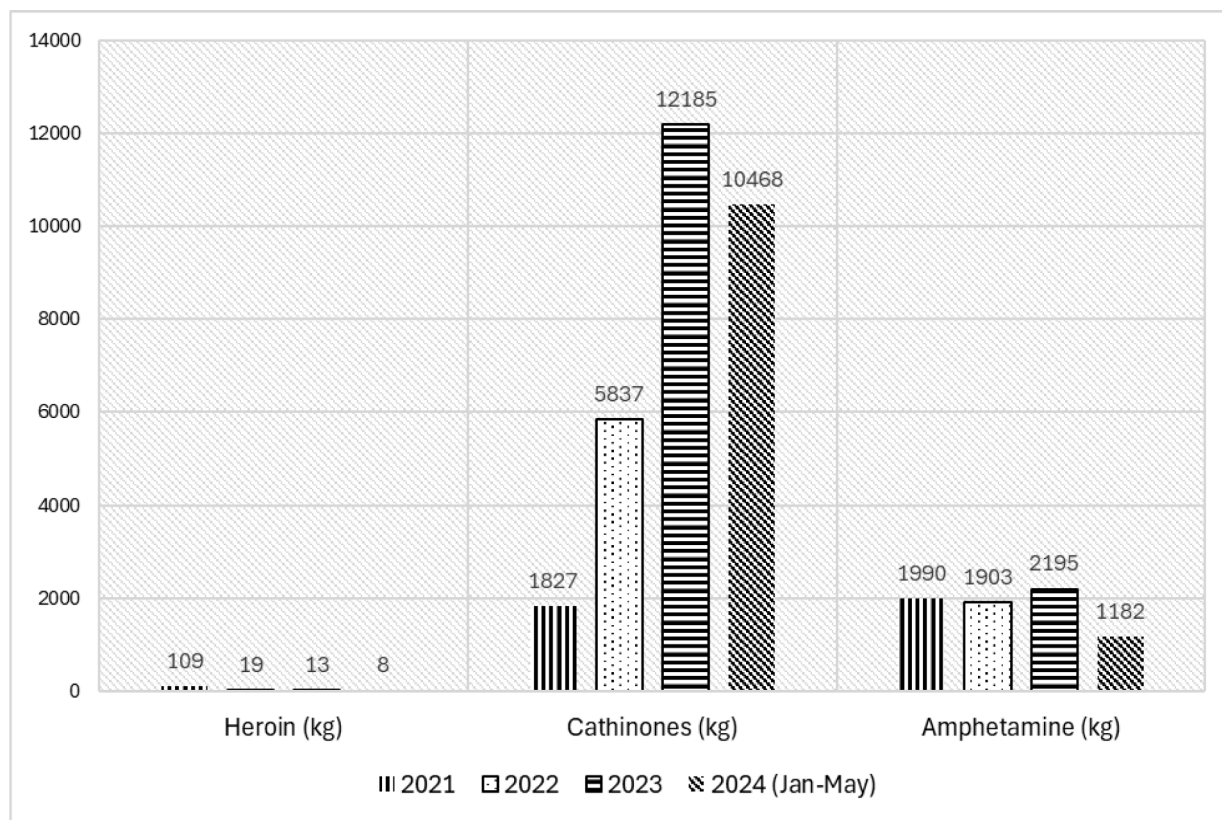


Fig. 4. Police seizures for heroin, synthetic cathinones, and amphetamines (kg).

increasingly more of these substances. Ideally, this will also involve a more informed discussion in the public sphere, as currently, the media seem preoccupied with fentanyl, and the debate over synthetic cathinones seems absent in the public sphere.

CRediT authorship contribution statement

Greg Los: Writing – original draft, Formal analysis, Conceptualization. **Artur Malczewski:** Writing – review & editing.

Declaration of competing interest

The authors declare the following financial interests/personal relationships which may be considered as potential competing interests:

Artur Malczewski is a government official and works for the National Centre for Countering Addiction (Krajowe Centrum Przeciwdziałania Uzależnieniom).

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