

Resource Summary Report

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European Monitoring Centre for Drugs and Drug Addiction

RRID:SCR_006654

Type: Tool

Proper Citation

European Monitoring Centre for Drugs and Drug Addiction (RRID:SCR_006654)

Resource Information

URL: <http://www.emcdda.europa.eu/html.cfm/index190EN.html>

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Description: The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is the central source of comprehensive information on drugs and drug addiction in Europe. It was set up to provide factual, objective, reliable and comparable information concerning drugs, drug addiction and their consequences. Mission and work programme Just over a decade ago, Europes capacity for monitoring its drug problem was extremely limited. National approaches to the topic varied greatly and there was a lack of reliable and comparable information at European level concerning drugs, drug addiction and their consequences. In other words, it was impossible to talk with confidence about patterns and trends in drug use across the EU. The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) was founded in 1993 to change that. Inaugurated in Lisbon in 1995, the EMCDDA is the hub of drug-related information in the European Union. It exists to provide the EU and its Member States with a factual overview of European drug problems and a common information framework to support the drugs debate. The EMCDDA consists of a 90-strong team of specialists representing some 20 nationalities. Today it offers policy-makers the scientific evidence base they need for drawing up drug laws and strategies and helps professionals and researchers pinpoint best practice and new areas for analysis. Improving the comparability of drug information in the EU is central to the agencys work. To achieve this, the EMCDDA coordinates and relies on a network of some 30 national monitoring centres (Reitox network) to gather and analyse country data according to common data-collection standards and tools. The results of this national monitoring process are fed to the Lisbon centre for analysis and are ultimately released in the Annual report on the state of the drugs problem in Europe one of its many outputs. The EMCDDA has many working partners in Portugal. These include technical bodies primarily the Instituto da droga e da toxicodependncia which furnish the agency with the Portuguese drugs picture, and political bodies which use EMCDDA information when

taking decisions on drug-related issues. In addition to cooperating with partners at national level, the EMCDDA also collaborates with its peers worldwide, having signed agreements with European and international organisations working in the drugs field. Over time, the EMCDDA has become not only Europe's central reference point on drugs but also a respected authority globally. This interest has been reflected in visits by Heads of State and high-ranking politicians from all world regions and in requests from several non-EU countries for cooperation, whether in the area of technical assistance or the exchange of data and expertise. While the EMCDDA monitors the drug situation today, it is ever vigilant for new drugs and emerging trends that may pose a threat to Europe's citizens tomorrow. With the production of cocaine and heroin at historically high levels and with around 7,000 Europeans dying every year of drug overdoses, constant monitoring is imperative. Public access to documents Citizens of the European Union and natural or legal persons residing or having their registered office in a Member State have the right of access to EMCDDA documents under Article 255(1) of the EC Treaty and Article 2(1) of Regulation (EC) No 1049/2001 in accordance with detailed rules laid out in the implementing rules adopted by the Management Board on 24 February 2006. This right to access concerns documents held by the EMCDDA, that is to say, documents drawn up or received by it and in its possession. Pursuant to article 2(2) of Regulation (EC) No 1049/2001, citizens of third countries not residing in a Member State and legal persons not having their registered office in one of the Member States shall enjoy the right of access to EMCDDA documents on the same terms as the beneficiaries referred to in Article 255(1) of the EC Treaty and Article 2(1) of Regulation (EC) No 1049/2001. All applications for access to a document should be sent by mail, fax or email, clearly stating the reference Application for access to EMCDDA documents. Funding The EMCDDA receives stable funding under Commission budget line B3-441 of the general budget of the European Union. Each year, a preliminary draft budget is presented by the Centre's Director to the Management Board which may modify the draft before adopting it and submitting it to the European Commission. On this basis, the Commission presents its proposal for the annual funding to the EMCDDA's budget, to be adopted by the European Parliament and the Council. The implementation of the EMCDDA budget is subject to the external audit of the European Court of Auditors. The political responsibility for the execution of the budget rests with the EMCDDA's Management Board, which adopts its own internal financial rules, based on the financial regulation applicable to the general budget of the European Communities.

Abbreviations: EMCDDA

Synonyms: EMCDDA

Resource Type: institution

Keywords: drug, drug of abuse, europe, european union, best practice, substance-related disorder, trend

Resource Name: European Monitoring Centre for Drugs and Drug Addiction

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Ratings and Alerts

No rating or validation information has been found for European Monitoring Centre for Drugs and Drug Addiction.

No alerts have been found for European Monitoring Centre for Drugs and Drug Addiction.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 66 mentions in open access literature.

Listed below are recent publications. The full list is available at [RRID](#) .

Hoch E, et al. (2025) Cannabis use disorder: an overview of treatment approaches in Europe. European archives of psychiatry and clinical neuroscience, 275(2), 315.

Manthey J, et al. (2025) Treatment demand for cannabis use problems: analyses of routine data from 30 European countries. European archives of psychiatry and clinical neuroscience, 275(2), 355.

Fortin D, et al. (2025) Relationships Between Motives for Cannabis and Cannabidiol Use in People Who Co-Use: Results From the European Web Survey on Drugs. Drug and alcohol review, 44(6), 1666.

Pulver B, et al. (2024) EMCDDA framework and practical guidance for naming cathinones. Drug testing and analysis, 16(12), 1409.

Maticic M, et al. (2024) How far are we? Assessing progress in hepatitis C response towards the WHO 2030 elimination goals by the civil society monitoring in 25 European countries, period 2020 to 2023. Harm reduction journal, 21(1), 203.

Plettinckx E, et al. (2024) A protocol for identifying the needs related to drug use, health and social (re)integration of people living in prison within five European countries. Archives of public health = Archives belges de sante publique, 82(1), 178.

Farooqi WA, et al. (2024) Awareness of Hepatitis C Among the General Population of Riyadh, KSA, in 2023: A Cross-Sectional Study. Cureus, 16(1), e51783.

Janssen E, et al. (2024) Daily cigarette smoking among inpatients for substance use disorders in France, 2010-2020: Commonalities and specificities across substances. Tobacco induced diseases, 22.

Cousins G, et al. (2023) Prescription drugs with potential for misuse: protocol for a multi-indicator analysis of supply, detection and the associated health burden in Ireland between 2010 and 2020. *BMJ open*, 13(3), e069665.

Reece AS, et al. (2023) Geospatiotemporal and Causal Inferential Study of European Epidemiological Patterns of Cannabis- and Substance-Related Congenital Orofacial Anomalies. *Journal of xenobiotics*, 13(1), 42.

Reece AS, et al. (2023) Cannabis- and Substance-Related Carcinogenesis in Europe: A Lagged Causal Inferential Panel Regression Study. *Journal of xenobiotics*, 13(3), 323.

Reece AS, et al. (2023) Patterns of Cannabis- and Substance-Related Congenital General Anomalies in Europe: A Geospatiotemporal and Causal Inferential Study. *Pediatric reports*, 15(1), 69.

Horváth I, et al. (2023) Models of good practice to enhance infectious disease care cascades among people who inject drugs: a qualitative study of interventions implemented in European settings. *BMC health services research*, 23(1), 1352.

Manchester KR, et al. (2022) The blood-to-plasma ratio and predicted GABAA-binding affinity of designer benzodiazepines. *Forensic toxicology*, 40(2), 349.

Schwarz T, et al. (2022) Interventions to increase linkage to care and adherence to treatment for hepatitis C among people who inject drugs: A systematic review and practical considerations from an expert panel consultation. *The International journal on drug policy*, 102, 103588.

Dacosta-Sánchez D, et al. (2022) Retention in treatment and therapeutic adherence: How are these associated with therapeutic success? An analysis using real-world data. *International journal of methods in psychiatric research*, 31(4), e1929.

Reece AS, et al. (2022) Epidemiological Patterns of Cannabis- and Substance- Related Congenital Urological Anomalies in Europe: Geospatiotemporal and Causal Inferential Study. *International journal of environmental research and public health*, 19(21).

Gabri AC, et al. (2022) Changes in cannabis policy and prevalence of recreational cannabis use among adolescents and young adults in Europe-An interrupted time-series analysis. *PloS one*, 17(1), e0261885.

Reece AS, et al. (2022) Cannabinoid and substance relationships of European congenital anomaly patterns: a space-time panel regression and causal inferential study. *Environmental epigenetics*, 8(1), dvab015.

Reece AS, et al. (2022) Cannabis- and Substance-Related Epidemiological Patterns of Chromosomal Congenital Anomalies in Europe: Geospatiotemporal and Causal Inferential Study. *International journal of environmental research and public health*, 19(18).