

# Emerging Trends in Amyl Nitrite Use

## Findings from Drug Trends

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Therapeutic Goods Administration Alkyl Nitrites Public Meeting  
Kirby Institute, UNSW Sydney

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# Acknowledgements

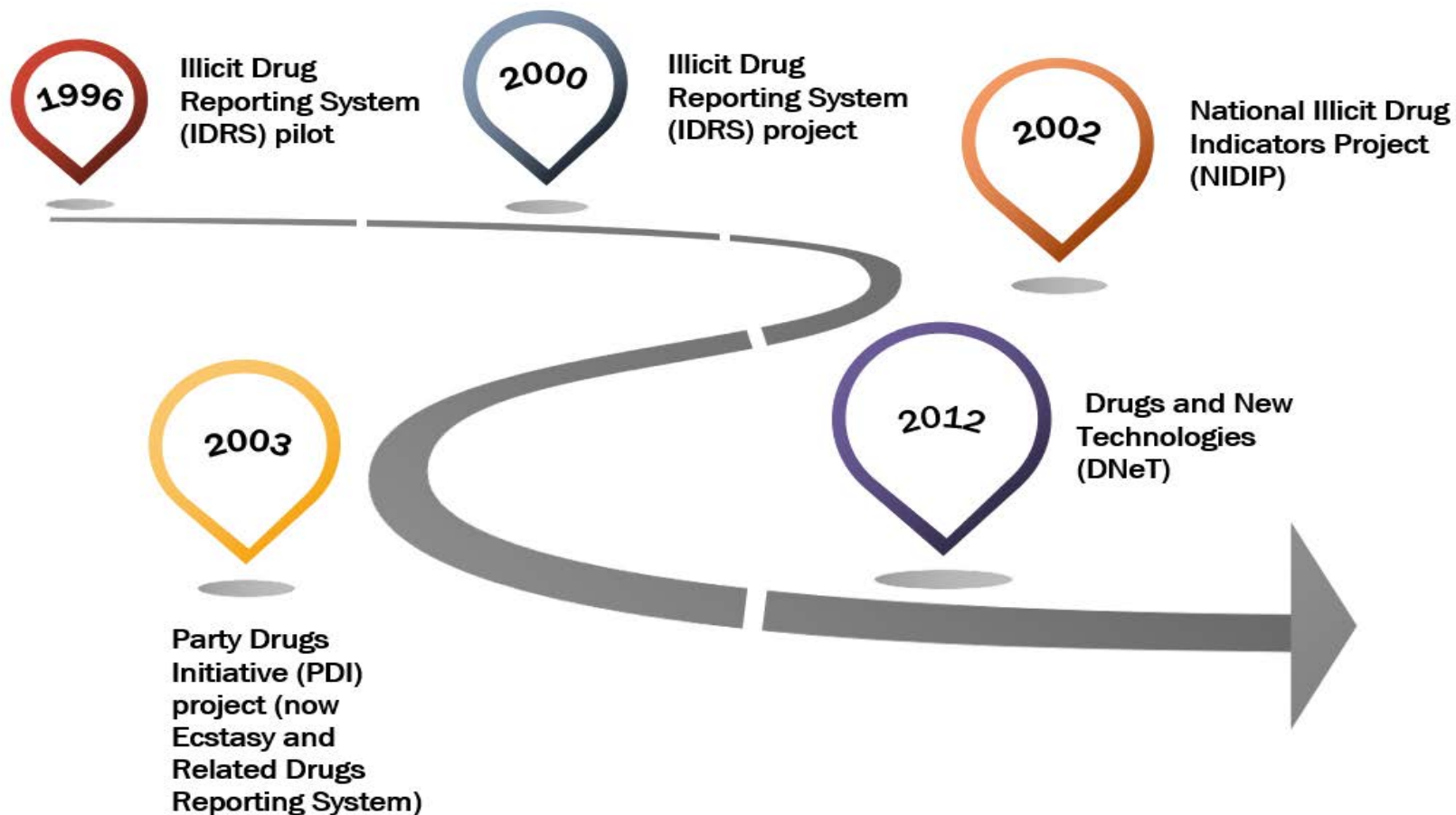
## Funding

- Australian Government Department of Health: for funding provided under the Drug and Alcohol Program
- **Drug Trends Team**
- **National Drug and Alcohol Research Centre**
- **Burnet Institute (VIC)**
- **University of Tasmania**
- **National Drug Research Institute (WA)**
- **University of Queensland (QLD)**
- **Northern Territory Department of Health (NT)**

## Other Acknowledgements:

- Participants: for the time they provide in completing the interview
- Data custodians: for the timely provision of data and input on analysis and interpretation
- Stakeholders: for engagement with and input on Drug Trends

# History of Drug Trends



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Est. 1978



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To establish, maintain, and continuously improve monitoring of drug trends across Australia

National Monitoring with Secondary Data

**Mortality Data**  
Drug-induced deaths from NCIS and ABS

**Hospitalisation Data**  
Drug-induced hospitalisations from NHMD

**Other Sources**  
NDSHS, AODTS-NMDS etc

Jurisdictional Monitoring with Secondary Data

Various data sources assessing drug use and harms at the population-level (e.g., hospital separations, emergency department presentations) and subpopulation level (e.g., NSP visits)

Sentinel Sample Monitoring

**Illicit Drug Reporting System (IDRS) Ecstasy and Related Drug Reporting System (EDRS)**  
Annual interviews with people who inject drugs (IDRS) and who use stimulants (EDRS) in each capital city

Online Monitoring

**Darknet Market Data**  
Scraping listings on darknet drug markets

Single source regular reports

Single source regular reports

Single source regular reports

Single source regular reports

Input from CIs, national stakeholders, and jurisdiction stakeholders to inform priority research questions and interrogation of data

Analytical reports using triangulated data



# Demographic characteristics of the EDRS sample, 2018

## EDRS eligibility criteria:

Be at least 16 years of age

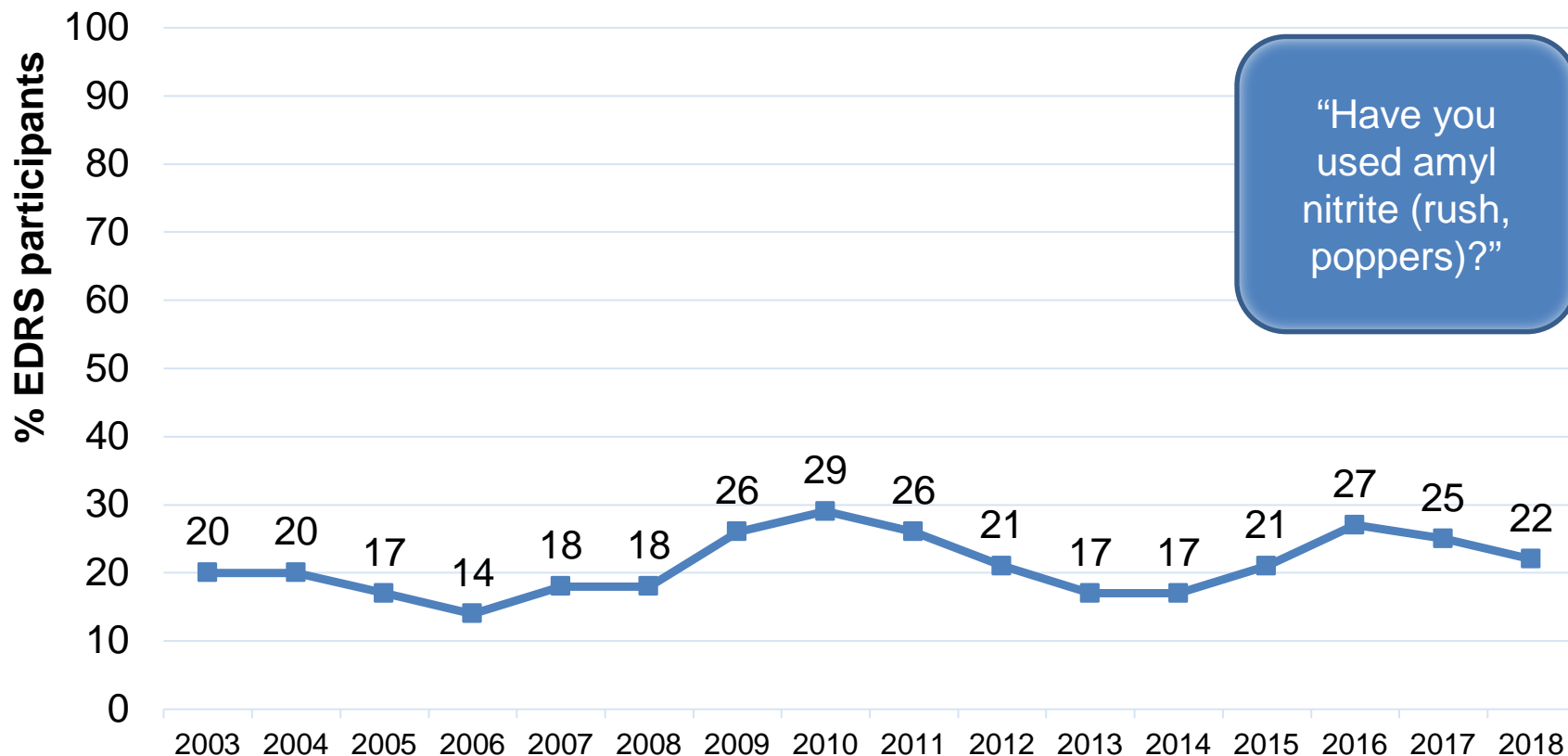
Have used ecstasy or other stimulants at least six times in the 6 months preceding interview

Have been a resident of the capital city for the past 12 months

National EDRS sample, 2018	N=799
Median age (years, IQR)	21 (19-24)
% Male	59
% Aboriginal and/or Torres Strait Islander	6
% Heterosexual	84
% Gay male or male bisexual	6
Mean years of school education	12
Employed full-time	22
Students	18
Renting house/flat	44
Parents'/family home	48



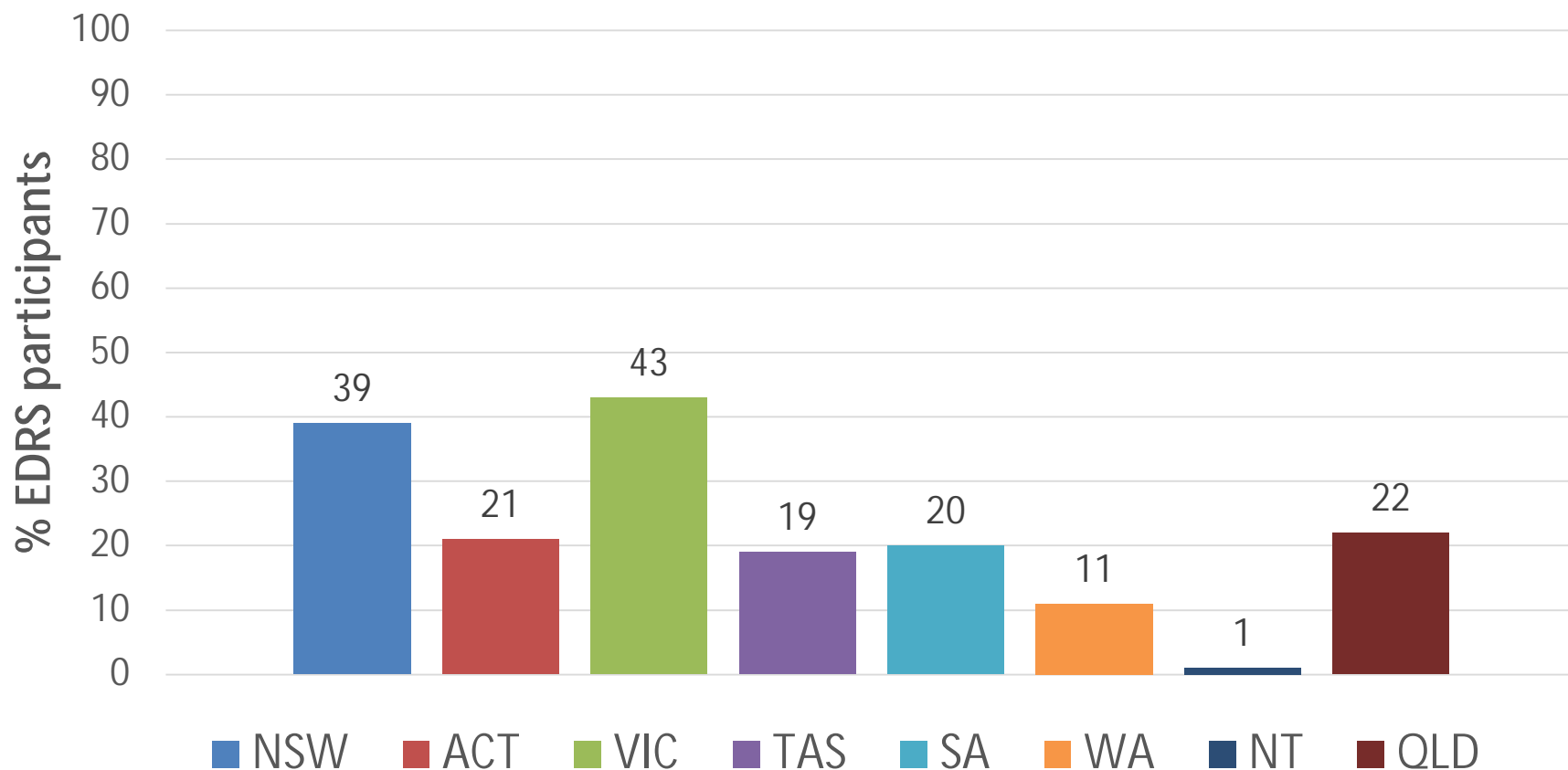
# Amyl nitrite use last six months, national, 2003-2018



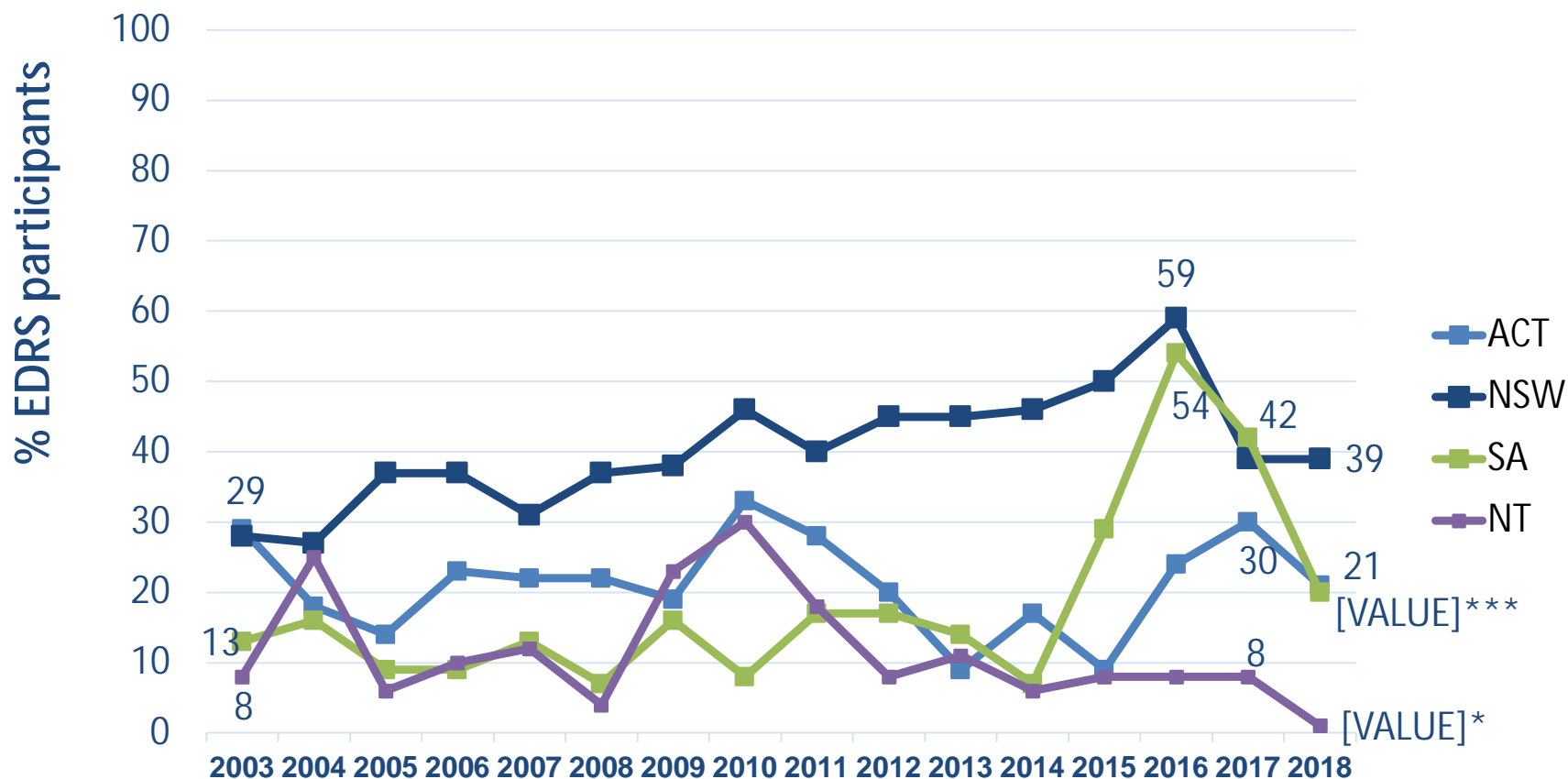
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# Amyl nitrite use last six months, by jurisdiction, 2018

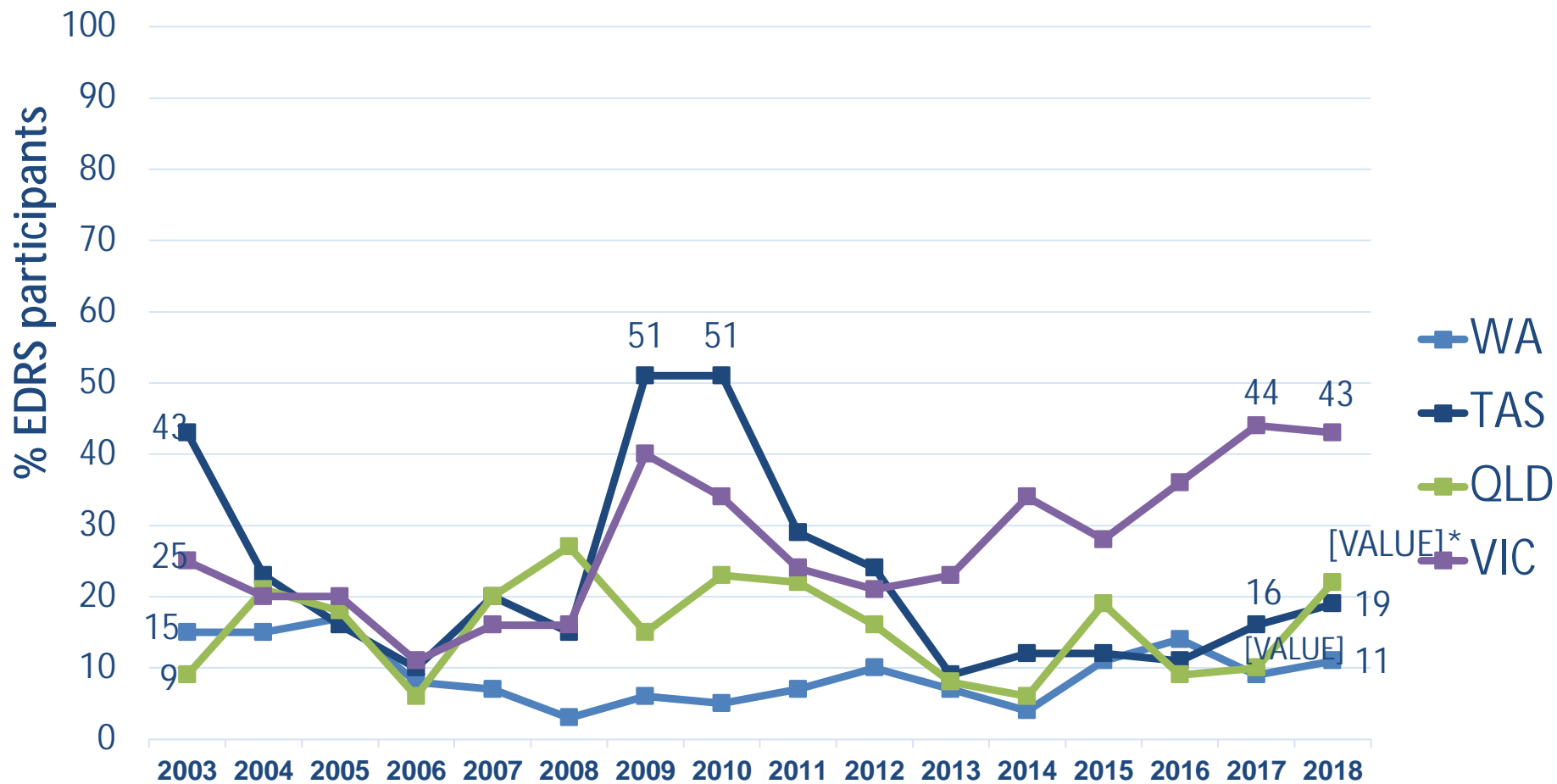


# Amyl nitrite use last six months, ACT, NSW, SA & NT, 2003-2018

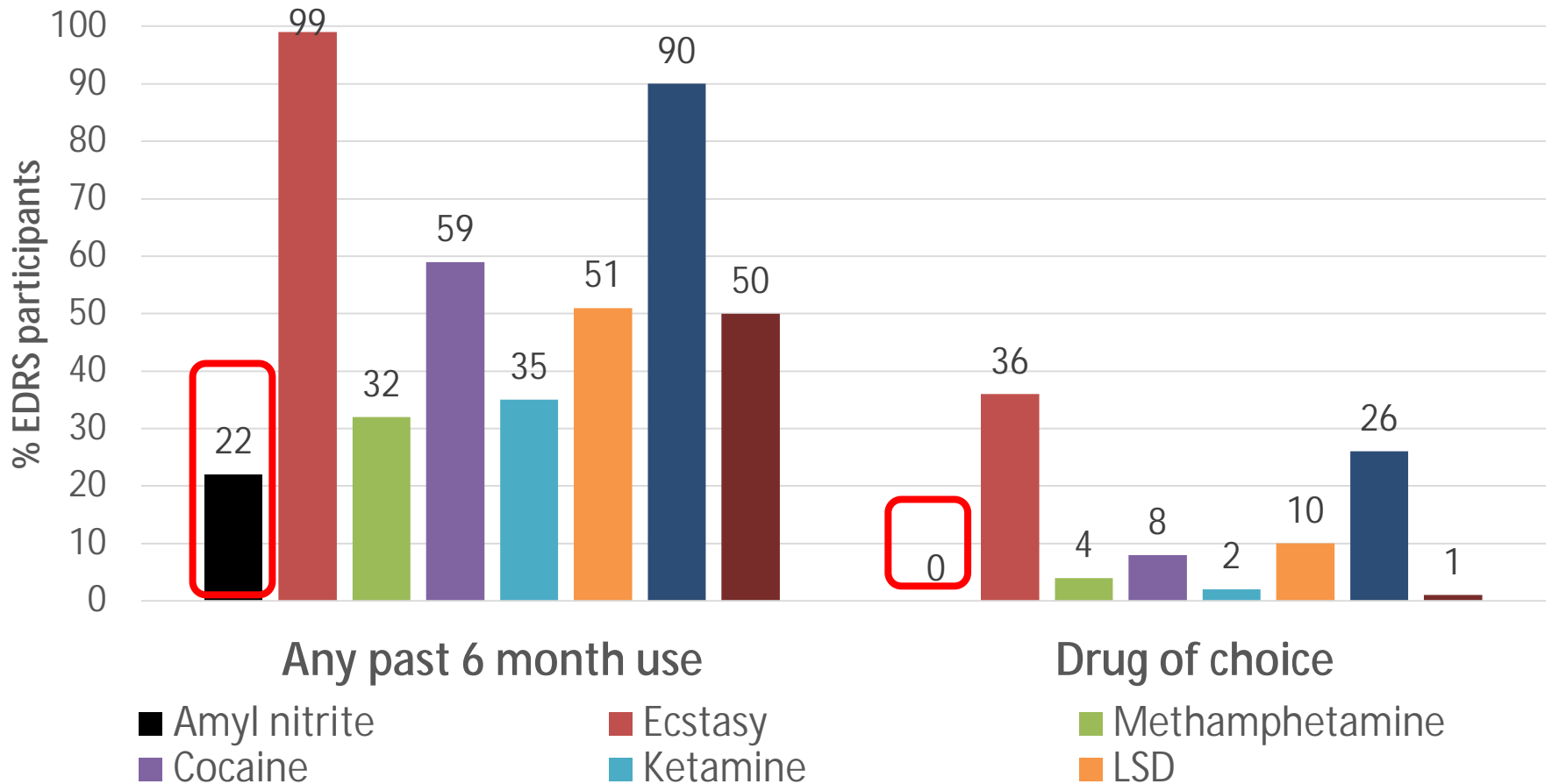




# Amyl nitrite use last six months, WA, TAS, QLD & VIC, 2003-2018



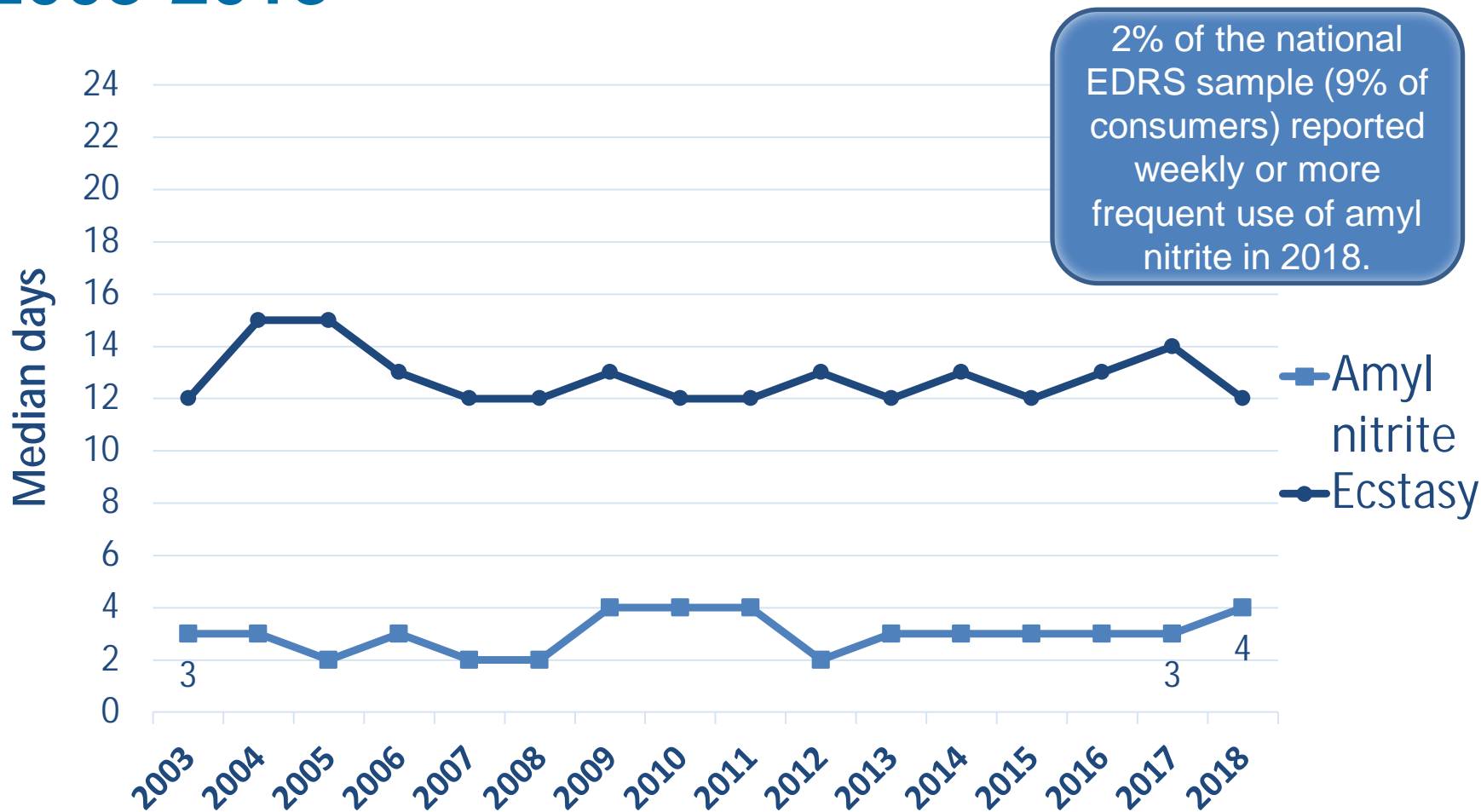
# Recent drug use and 'drug of choice', national, 2018



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# Median days of amyl nitrite use, national, 2003-2018



Note. Participants are asked number of days used in past six months (maximum = 180 days)



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# Characteristics of consumers vs non-consumers, 2018

Data redacted

*Note. \* $p < 0.050$ ; \*\* $p < 0.010$ ; \*\*\* $p < 0.001$*



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# Characteristics of consumers vs non-consumers, 2018

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# Proportion of men who reported recent amyl nitrite use, by sexual identity, 2015-2018

Data redacted



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# Bingeing behaviours and non-fatal overdose, 2018

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# Summary

1. Amyl nitrite is uncommon (and use infrequent) relative to other drug use among people who regularly use ecstasy and other illicit stimulants.
2. People who report amyl nitrite use are typically more likely to endorse use of a range of illicit drugs relative to those who do not report use.
3. Acute health harms of amyl nitrite use were not assessed. Yet, indicators suggest that amyl nitrite use is infrequently consumed in instances of overdose and other problematic drug use behaviours (e.g., binge use).

