

Profile

Louisa Degenhardt: hooked on addiction research

Sometime during her high school years, Louisa Degenhardt decided she “wanted to be a psychologist”, even though, she admits, “I didn’t really know what that entailed”. But while her career path was to become research oriented—she is currently an Australian National Health and Medical Research Council (NHMRC) Senior Research Fellow based at the National Drug and Alcohol Research Centre, University of New South Wales—her wide-ranging work on drug addiction has been influenced by a foundation in psychology.

It was while studying psychology at the University of New South Wales, in 1997, that Degenhardt was to meet her long-time friend and mentor Wayne Hall, NHMRC Australia Fellow at the University of Queensland Centre for Clinical Research, Brisbane, Australia. At the time, Hall was lecturing on health statistics, with a strong focus on illicit drugs. Degenhardt wrote to Hall asking about any upcoming research work and a few months later her wish was granted; she started work as Hall’s research assistant in 1998. Around this time, there had been much-publicised increases in heroin and ecstasy consumption in Australia, and Degenhardt finished her PhD on the topic in 2001. “There are so many angles from which you can look at illicit drug use: moral, social, legal”, she says. “It’s vital to correct the misinformation around, to peel back the judgments people make and just present facts. Any drug can be dressed up as horrific or alternatively glamorous depending on how you spin things.”

Degenhardt quickly became hooked on research about addiction. Predictably, there have been moments of controversy along the way. Along with Hall, Carolyn Day, Libby Topp, and colleagues, she investigated the effects and possible causes of Australia’s sudden heroin shortage in 2001—the first time that the effects of reduced drug supply had been investigated at a population level. They feared the likely effects would be more crime, as well as riskier injecting, plus the use of multiple drugs. Although these fears were realised, at the population level there was also a notable decrease in overdoses, deaths, and first-time users of heroin. “The research team could not rule out that international law enforcement activity (as opposed to local or national policing) had been behind the reduced supply”, she explains. Many researchers in the field were sceptical that drug law enforcement could have exerted such an effect, and it’s an issue that still causes fierce debate in some quarters.

An international outlook has been a feature of much of Degenhardt’s research on the cultural and social drivers of illicit drug use worldwide. She’s worked in many international collaborations, including with WHO and the Independent Reference Group to the United Nations on HIV and Injecting Drug Use, for which she collaborated with Bradley Mathers at Australia’s National Drug and Alcohol Research Centre.

Working at the UN’s Office on Drugs and Crime in Vienna, in 2009, also helped Degenhardt understand some global challenges. For example, drug trafficking routes are changing: routes through Africa are leading to a spillover effect of increased injecting drug use in that continent. Combined with Africa’s generally high prevalence of HIV, the public health implications of this are clear.

Epidemiological studies and reviews, both global and national, can be arduous to do, but Degenhardt says she “knows these papers can clarify and distil issues and trends, which is especially relevant for policy makers who are acting at a population level”. Such a study, on the global burden of disease due to illicit drugs, forms the first part of *The Lancet’s* Addiction Series. According to Professor John Strang, Head of the Addictions Department at King’s College London, UK, “Louisa has demonstrated, in particular, the potential yield from well-conceived and applied scrutiny of large data sets, especially when these address areas of key importance in planning of public health and policy.”

Internationally, Degenhardt acknowledges that the USA funds most of the world’s research on illicit drug use. Back home, she believes Australia is in a good position compared with other high-income countries. “Both the current and previous governments have acknowledged the importance of this issue, and while one can always say more money is needed (which it is), it should also be acknowledged that drug research programmes in Australia are comparatively well funded.” Degenhardt’s team has just been given funding by the NHMRC to investigate the long-term effects of the prescription of opioids, such as morphine and buprenorphine, for chronic pain. “There are very few data to tell us whether it is sensible to provide these drugs for chronic non-malignant pain long term”, says Degenhardt, who will follow 2000 people receiving these drugs over 2 years. “How many continue using these drugs? How many have adverse outcomes? What happens to their pain?” The researchers will also use national databases to follow up patients prescribed opioids through Australia’s Pharmaceutical Benefits Scheme.

While this research is her current focus, Degenhardt is also curious about “some simple questions that would be of interest to answer”. She points to the need for prospective studies of illicit drug users to better characterise the natural history of drug use and the incidence of adverse outcomes of use, since their illegality makes quality data on use difficult to come by: “There are really basic things that we make assumptions about without hard evidence; even the literature on the natural history of drug use is based on questionable data.”

Tony Kirby



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