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► [Heroin-assisted treatment in Switzerland: a case study in policy change.](#)

Uchtenhagen A. [Request reprint](#)

Addiction: 2009, 105, p. 29–37.

How a damaging and socially divisive drug scene in Switzerland led that country to try prescribing heroin to heroin addicts and the political and cultural processes behind this experimental programme becoming accepted practice.

Original abstract *Background* Switzerland introduced a pragmatic national drug policy when the former conservative abstinence-orientated politics proved unable to cope with an escalating number of users and related negative consequences for public health and public order. The high visibility of 'needle parks' and the size of the acquired immune deficiency disorder (AIDS) epidemic called for a new approach and for national leadership.

Aims To describe the intentions, the process and the results of setting up the new treatment approach of prescribing heroin to treatment-resistant heroin addicts, as an example of drug policy change.

Materials and Methods A systematic collection of relevant documents is analysed and used as evidence for describing the process of policy change.

Results Measures to reduce the negative consequences of continued use and to prevent the spread of AIDS were started mainly by private initiatives and soon taken up officially in the 'four-pillar' drug policy (including harm reduction, prevention, treatment and law enforcement). Medical prescription of heroin to chronic, treatment-resistant heroin addicts was one of the innovations, based on extensive scientific and political preparation. Detailed documentation and evaluation, ample communication of results, adaptations made on the basis of results and extensive public debate helped to consolidate the new policy and heroin-assisted treatment, in spite of its limitations as an observational cohort study. All necessary steps were taken to proceed from a scientific experiment to a routine procedure.

Discussion Comparable policy changes have been observed in a few other countries, such

as The Netherlands and Germany, based on the Swiss experience, with equally positive results of heroin-assisted treatment. These experiments were designed as randomised controlled trials, comparing intravenous heroin against oral methadone, thereby demonstrating the specific value of pharmaceutical diamorphine for maintenance treatment in opiate dependence. The positive impact of policy change and the positive outcomes of heroin-assisted treatment were acknowledged increasingly nationally and internationally, but made it difficult to continue the process of adapting policy to new challenges, due to the low visibility of present drug problems and to changing political priorities.

Conclusion A major change in drug policy was effectively realised under typical conditions of a federalist country with a longstanding tradition of democratic consensus building. Facilitating factors were the size and visibility of the heroin problem, the rise of the AIDS epidemic, and a pragmatic attitude of tolerating private initiatives opening the way to official policy change.

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