



Professor Les Iversen
Chair, Advisory Council on the Misuse of Drugs
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4 June 2014

Dear Les,

As you know, recovery is at the heart of the Government's Drug Strategy and successful treatment is a key factor in the prevention of further substance misuse and promoting the opportunity to live a drug-free life.

The Home Secretary, the Secretary of State for Health and I are grateful to the Advisory Council and Recovery Committee for the attention and valuable advice it provides through successive reports in this important area.

Discussion at the Inter-Ministerial Group on Drugs has highlighted the provision of opioid substitution therapy as an area for further consideration. As part of our concern to maximise treatment gains we would like to explore the question of whether or not people in treatment are maintained on opioid substitution therapy for longer than is necessary or desirable. Colleagues from across Government have agreed that the Home Office and the Department of Health should commission the Advisory Council on the Misuse of Drugs through its Recovery Committee to consider the evidence on the extent of this, and whether the evidence supports the case for time-limiting opioid substitute therapy. If so, what would be a suitable time period and what would the risks and benefits be? Additionally, if this is not the case how can continuing opioid substitution therapy be optimised in order to maximise outcomes for service users?

I would be grateful if the commission on time-limiting opioid substitute therapy, or at least the initial parts thereof, could be completed in time to report back to the Inter-Ministerial Group on 3 September.

Yours sincerely

Norman Baker MP
Minister of State