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Reference: FOI2016/06090

8 July 2016

Thank you for your email of 10 June 2016 requesting the following information:

*"I am requesting information regarding the issue of opiate addiction among military personnel. Specifically I would like to know the number of military personnel classified as suffering from an opiate use disorder for any years available. Preferably I would like these number broken down by branch and unit. Please provide this information electronically if available."*

I am treating your correspondence as a request for information under the Freedom of Information Act 2000.

A search for the information has now been completed within the Ministry of Defence, and I can confirm that information in scope of your request is held. Some of the information falls entirely within the scope of the absolute exemptions provided for at section 40 (Personal Data) of the FOIA and has been withheld.

Section 40(2) has been applied to some of the information in order to protect personal information as governed by the Data Protection Act 1998. This is also in line with Joint Service Publication 200 (JSP) in which numbers fewer than five are suppressed in order to reduce the possible inadvertent disclosure of individual identities. Section 40 is an absolute exemption and there is therefore no requirement to consider the public interest in making a decision to withhold the information.

Between 1 January 2009 and 21 June 2016, a minimum of **19** UK Armed Forces personnel had a read code entered onto the Defence primary care system (DMICP) relating to Psychoactive Substance misuse due to Opioids, of which **nine** were still serving as at 1 May 2016.

The following units had **fewer than five** personnel with at least one read code relating to Psychoactive Substance misuse due to Opioids, 1 ITB, 12 REGT RA 9 (PLASSEY) BTY RA, 15 SIG REGT, 150 (YORKSHIRE) TPT REGT RLC (V) 219 TPT SQN, 2 R WELSH, 3 LOG SP REGT RLC 31 CLOSE SUPPORT SQUADRON, 4 ARMD MED REGT SP SQN, 6 CS BN REME, DEFENCE PEOPLE ROYAL HOUSEHOLD, HQ 15 (NE) BDE PRU REM, MOD A Block, RAFP-GPW-6 SQN-HWYC-MPGS, TEMPORARY 1 R WELSH SAM, TEMPORARY HQ 2 DIV SAM YORK, TEMPORARY HQ 43 (WX) BDE PRU, TEMPORARY HQ 51 BDE PRU and fewer than five with unknown posted unit.

Under section 16 of the Act (Advice and Assistance), you may find it useful to note the following:

In the case of dependency on any substance a medical category of Medically Not Deployable (MND) is appropriate whilst any treatment is undertaken. Healthcare is available from primary care, specialist mental healthcare in the Departments of Community Mental Health, and for those requiring inpatient management via the Independent Service Providers in the NHS who are contracted to provide such services by the MOD.

It is not possible within the DMICP data warehouse to identify episodes of care for individuals, thus, it is not possible to identify personnel who are currently suffering from an opiate addiction. A person could have several codes relating to opiate addiction or opiate addiction related conditions i.e. opiate withdrawal, entered into their record but it is not possible to say if these codes relate to one, or multiple events.

Whilst healthcare needs have higher priority it should be noted that the MOD has a zero tolerance policy to the misuse of drugs because it threatens the efficiency and discipline of the Service. Accordingly Service Personnel who misuse substances are liable for disciplinary or administration action, in accordance with MOD and single Service policy. The deterrent effect of these policies may explain the low numbers above.

*Medical information management*

The Defence Medical Information Capability Programme (DMICP) was rolled out in 2007 and is the source of electronic, integrated healthcare records for primary healthcare and some MOD specialist care providers. Data are compiled by Defence Statistics (Health) from the Defence Medical Information Capability Programme (DMICP) data warehouse.

Prior to this data warehouse, medical records were kept locally, at each individual medical centre. By 2010, DMICP was in place for the UK and the majority of Germany. Rollout to other overseas locations commenced in November 2011 and is ongoing.

The electronic patient record has information that is Read coded. Read codes are a set of clinical codes designed for Primary Care to record the everyday care of a Patient. They are part of a hierarchical structure and form the recognised standard for General Practice.

The following read codes were used to identify Psychoactive Substance misuse due to Opioids from DMICP:

Read Code	Description
Eu11	[X]Mental and behavioural disorders due to use of opioids
Eu112	[X]Mental and behav dis due to use opioids: dependence syndr
Eu112-1	[X]Drug addiction - opioids
Eu112-2	[X]Heroin addiction
Eu113	[X]Mental and behav dis due to use opioids: withdrawal state
Eu113-1	[X]Cold turkey, opiate withdrawal
Eu11z	[X]Ment & behav dis due use opioids: unsp ment & behav dis

Please note if any of the descriptions or codes listed above were recorded as free text only in the patient medical record they will not be included in the above search thus figures provided should be considered a minimum, as this information is not available in the data warehouse.

DMICP is a live data source and is subject to change. Date of extract 21 June 2016.

Joint Personnel Administrative (JPA) information

JPA is the most accurate source for demographic information on UK Armed Forces personnel and is used to gather information on a person's service as well as posted unit.

JPA data is correct as at the 1st of each month when the extract is taken. JPA Posted\_unit field was used for all UK personnel at time of the DMICP code was entered for each individual.

Would you like to be added to our contact list, so that we can inform you about updates to our statistical publications covering mental health and medical discharges in the UK Armed Forces and consult you if we are thinking of making changes? You can subscribe to updates by emailing: DefStrat-Stat-Health-PQ-FOI@mod.uk.

If you are not satisfied with this response or you wish to complain about any aspect of the handling of your request, then you should contact me in the first instance. If informal resolution is not possible and you are still dissatisfied then you may apply for an independent internal review by contacting the Information Rights Compliance team, 2nd Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail CIO-FOI-IR@mod.uk ). Please note that any request for an internal review must be made within 40 working days of the date on which the attempt to reach informal resolution has come to an end.

If you remain dissatisfied following an internal review, you may take your complaint to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not investigate your case until the MOD internal review process has been completed. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website, <https://ico.org.uk/>.

I hope this is helpful.

Yours sincerely

Defence Statistics (Health) Head (B1)