

## Bogotá tackles basuco addiction

As Colombia's notorious cocaine export business continues to draw headlines and US money to combat it, the nation's capital is beset by its own addiction crisis. Joe Parkin Daniels reports.

Basuco, with its name derived from the Spanish for "dirty trash of cocaine", is a psychoactive by-product of cocaine production, a residual paste left at the bottom of the barrel after the pure drug has been produced. Speaking to *The Lancet*, Julian Quintero, director of Colombian non-governmental organisation Technical Social Action (ATS), calls basuco "the diabolical son of narcotrafficking", adding that "much like Colombian coffee, the best product leaves and the worst stays".

More potent than the crack cocaine found across European and American cities, basuco is typically smoked through a pipe, although it is sometimes rolled in cigarette papers with tobacco or cannabis. Basuco is highly addictive; families tell of relatives who become dependent after just 15 days of repeated consumption.

Given the fleeting 2-minute high it provides, users often retake the drug chronically, resulting in binges that leave little time for eating or sleeping. To attempt to manage the high and the paranoia that the drug induces, users sometimes take a cocktail of industrial alcohol, fruit juice, and another psychoactive agent such as MDMA. Alongside the tooth decay caused by the abandonment of hygiene, this near-sleepless existence takes its toll on users' skin, giving it a sunken, hanging appearance that makes age difficult to determine.

As in the rest of the world, poverty, lack of access to health care and education, and unemployment are risk factors for narcotic dependency, and as such, it is unsurprising that basuco addiction primarily afflicts the most vulnerable segments of Colombian society. With 6.4 million Colombians internally displaced by civil conflict between the government and leftist

rebel groups—now into its 52nd year—it is not difficult to see how basuco use has become a problem. The UN Office on Drugs and Crime (UNODC) in Colombia estimates that there are 4644 basuco users with problematic addictions in Bogotá. However, owing to the criminality of illicit drug use and the homelessness that often comes hand in hand with addiction, establishing an accurate figure is near impossible.

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### Mobile treatment centres

In September, 2012, the Mayor of Bogotá, Gustavo Petro, recognising the crisis on his doorstep, established the Mobile Centre for Attention to Drug Addicts (CAMAD) scheme to reduce the harm caused by basuco. The CAMAD interdisciplinary team of doctors, dentists, psychologists, and social workers visits neighbourhoods

rife with substance misuse and provides treatment and support. One of the three hospitals implementing the scheme, and the one working in the city's most dangerous neighbourhoods, is the public Hospital Centro Oriente. *The Lancet* spoke to Javier Cortés, the coordinator of the hospital's CAMAD bus, who said: "We're here to give them a semblance of dignity."

Working in Bogotá's most notorious criminal neighbourhoods, the team has garnered controversy from right-leaning politicians and the public for negotiating terms with the criminal gangs that control these areas. Furthermore, Cortés said that when his team started working in these neighbourhoods, he had to send one colleague home for a week as they fell ill from the unsanitary environments they were working in.

However, when *The Lancet* visited San Bernardo, a neighbourhood where addiction and crime are rampant, the locals, happy to see the same faces return each week, greeted the CAMAD team when their bus rolled into the neighbourhood,



A man smokes basuco in downtown Bogotá, April, 2013

as it does every Wednesday morning to provide treatment and advice to people with substance misuse problems. As most of the users in San Bernardo are homeless and exist outside of Colombia's official social structure, they are not required to provide proof of identity to receive treatment. On this day, there was also a separate team from the ministry of health working alongside CAMAD. Once a month, they provide drug users in the San Bernardo area with a packed lunch containing a meat protein, a vegetable protein, a piece of fruit, and a fruit juice. They also provide showers, toothbrushes, toothpaste, shaving cream, and a change of underwear. Again, no identification is required.

### CAMAD in prison

The Hospital Centro Oriente team also tends to the inmates of Bogotá's district prison, a medium-security facility with a wing of 106 people battling with addictions to basuco, alcohol, or both. Within this wing, the team works to reduce the damage done by addiction through private consultations, practical advice, and art projects. For inmate Jason Lopez, the work CAMAD does helps him manage his dependency on marijuana. "The programme is very helpful", he said while displaying the paper-mâché ship he had been building over 5 days from toilet paper and sticks of wood as part of the art therapy provided by the CAMAD team.

The team works in the prison every weekday, all year round, with doctors reporting that Christmas is the hardest time for inmates. CAMAD continues to offer care to inmates after they are released, with telephone support for the first 6 months of life after prison. "We often have difficulties reaching them as they change their numbers or disappear", Pilar Caro, the team's coordinator explained, "we'd ideally visit them, but we unfortunately don't have the resources".

### Walk-in treatment

The third centre operated by Hospital Centro Oriente is the Mediano Umbral facility, located a short walk from San Bernardo. Open daily from 7 am to 4 pm, this centre welcomes walk-in and referral patients unable to be sufficiently treated by Cortés' mobile team. Here patients can receive more focused treatment and can participate in group exercises, again with the hope of improving their self-esteem. Edgar Mauricio Useda, a psychologist specialising in addiction and part of the CAMAD team, explained the challenges people with substance misuse problems face when visiting the centre. "People frequently try to make changes in their housing, their work, and their circumstances", he said. "However", he added, "it normally takes months before they start to care [about money, or housing, or work]". Until then, their primary concern is their next fix.

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"There can be [drug] consumption", explained Useda, "but it must be controlled consumption and the damage mitigated".

"For me, and for everyone else, CAMAD is hugely important", said 48-year-old Rosaura Serrano Vargas, who is attempting to reduce the impact of drug addiction on her life with the help of the centre. "It helps us connect [with society]."

### Criticism

Despite those using the scheme singing its praise and doctors visiting Hospital Centro Oriente's centres from Ecuador and Chile to see the work they do, there are some people who believe that CAMAD does not do enough. "CAMAD must do more", ATS's Quintero said. "Right

now, it provides basic services for homeless addicts, offering them dignity, but it should, for example, be providing hygienic needles, cleaner alcohol, or cleaner materials for the consumption of basuco." As basuco users smoke from homemade pipes—usually improvised from PVC—they often inhale toxic plastic when using. ATS have run needle-exchange sites in Pereira, a small city in the country's coffee-growing region.

María Mercedes Dueñas, technical chief with the Drug Demand Reduction Area of UNODC in Colombia told *The Lancet* that, owing to CAMAD's inability to offer services such as HIV testing, needle exchange, or safe injection sites, "CAMAD's current levels of progress are not comparable with those of countries that have invested greater resources in the implementation of such schemes".

### Uncertain future

CAMAD also faces a problem of funding. The services provided by Hospital Centro Oriente alone cost US\$50 000 per month, and the system, supported by Mayor Petro but often criticised for being too soft on drugs, could be scrapped by whoever is elected in October, with Petro constitutionally unable to serve a third consecutive term. This uncertain situation is a concern for Elizabeth Beltrán, head of Hospital Centro Oriente, who wants to expand the project, but needs to look at possibilities of funding from elsewhere. "It's a political problem we face because, if the money stops, the programme stops." The team are looking at options outside government funding, possibly from abroad.

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*Joe Parkin Daniels*