HRB Bulletin
National Drug Treatment Reporting System

2024 Alcohol Treatment Demand

Siobhán Ní Luasa, Derek O'Neill, Michael O'Sullivan and Suzi Lyons

HRB
Health
Research
Board

Research. Evidence. Action.

HRB StatLink Series 27

National Drug Treatment Reporting System 2024 Alcohol Treatment Demand

Siobhán Ní Luasa, Derek O'Neill, Michael O'Sullivan and Suzi Lyons

Table of Contents

Introduction

In this bulletin, data on **treated problem alcohol use** for the year 2024 are presented, followed by trends for the 8-year period 2017–2024.[1] The data are from the **National Drug Treatment Reporting System** (NDTRS), the national surveillance system that records and reports on cases of drug and alcohol treatment in Ireland. Data in this bulletin supersede all data previously published by the NDTRS.

Background

The NDTRS follows a common and systematic European methodology for collecting and reporting core data on the number and profile of those entering specialised drug treatment each year (treatment demand). The European Treatment Demand Indicator (TDI) protocol aims to provide objective, reliable and comparable information at a European level and is routinely used to help identify trends and patterns in problem drug use and to assess the use and uptake of treatment facilities.[2]

Included in the NDTRS are cases treated in all types of services: outpatient, residential, low threshold, general practitioners (GPs) who provide opioid agonist treatment (OAT), and those treated in prison.[3,4,5] Nationally, NDTRS data are widely used to measure progress and inform drug and alcohol-related planning and policy.[6] The National Drug and Alcohol Strategy *Reducing Harm, Supporting Recovery: A health-led approach to drug and alcohol abuse in Ireland*. 2017-2025 requires all publicly funded drug and alcohol services to complete the NDTRS for all people who use services (Action 5.1.47).[7]

Of note, this publication includes data collected since 2017, corresponding to the implementation of the strategy. Treatment data can be used to measure the impact of the strategy since its commencement.

Participation in the NDTRS

Currently, 91.2% of services required to report to the NDTRS provided data in 2024. GPs however do not currently report alcohol treatment data to the NDTRS. Therefore, it may be assumed that the data presented in this bulletin underestimate the true extent of treated alcohol use in Ireland.

Service providers are responsible for ensuring that data submitted to the NDTRS are accurate and complete. Service providers are supported through frequent training, detailed documentation and ongoing support provided by the NDTRS. Issues relating to data collection are monitored on an ongoing basis and addressed by NDTRS staff.

Data quality is monitored through a comprehensive set of automated validation checks which are applied to every record submitted to the NDTRS. All discrepancies are investigated and referred back to service providers for review and correction.

Summary 2024

In 2024, 8,745 cases were treated for problem alcohol use, an increase of 7.0% compared with 2023.

It is important to consider the changing landscape of treatment demand when interpreting the data. While overall percentages may appear stable, the absolute number of cases entering treatment may have increased, or in some scenarios, decreased. This highlights the need to look beyond percentages and analyse absolute figures to fully understand trends over time.

- 43.5% were *new cases* (never treated for problem alcohol use before).

- The majority of cases (62.8%) were treated in outpatient facilities.

Level of problem alcohol use

- In 2024, the **median age** at which cases first started drinking alcohol was 16 years.

- Over half (56.1%) of cases were classified as **alcohol dependent**.

- Among cases seeking treatment for alcohol use for the first time, the majority (51.7%) were classified as **alcohol dependent**.

- The majority (61.4%) of *previously treated cases* were classified as **alcohol dependent**.

Type of alcohol consumed

- Spirits (56.3%) were the most preferred type of alcohol, followed by beer (46.6%) and wine (28.3%).

Frequency and amount of alcohol consumed

- 68.6% cases consumed alcohol in the 30 days prior to starting treatment. Of these, more than one-half (53.4%) consumed alcohol daily.

- For females, the median number of **standard drinks** consumed on a typical drinking day was **14**. The low-risk drinking guidelines for females is up to 11 standard drinks in a week.[8]

- For males, the median number of **standard drinks** consumed on a typical drinking day was **16**. The low-risk drinking guidelines for males is up to 17 standard drinks in a week.[8]

Polydrug use

- **Polydrug use** (problem use of more than one substance) was reported by almost one-third (29.5%) of cases.

- Cocaine (70.7%) was the most common **additional drug** used alongside alcohol, followed by cannabis (49.4%), benzodiazepines (18.3%), and opioids (10.4%).

- The most common drugs used together were (1) alcohol plus cocaine; (2) alcohol plus cannabis; and (3) alcohol plus cocaine and cannabis.

- The type of additional problem drugs varied by age.

  – Among those aged 19 years or under, cannabis was the main drug reported alongside alcohol.

  – Among those aged 20–49 years, cocaine was the main drug reported alongside alcohol.

  – Among those aged 50 years or older, cannabis was the main drug reported alongside alcohol.

Socio-demographic characteristics

- The **median age** of cases was 43 years.

- The majority (62.3%) of cases were **male**.

- 8.3% of cases were recorded as **homeless** (females 5.1%; males 10.3%).

- 2.0% of cases identified as **Irish Traveller**[9].

- Almost one-half (47.8%) of cases were recorded as **unemployed**.

- One in three (35.3%) cases were **in paid employment**.

- Among cases with **children** aged 17 years or under, almost one-half (48.1%) had at least one child residing with them at the time of treatment entry (females 66.2%; males 36.3%).

Key trends over time 2017—2024

- In 2024, the number of treated cases for alcohol reached 8,745, the highest annual total reported in over a decade.

- The median age of females (44 years) was higher than that for males (42 years).

- The proportion of all cases that were classified as alcohol dependent decreased from 72.0% in 2017 to 56.1% in 2024.

- The proportion of cases who were classified as hazardous drinkers increased from 9.7% in 2017 to 13.4% in 2024.

- The proportion of cases who were classified as harmful drinkers increased from 16.0% in 2017 to 25.9% in 2024.

- Many cases in treatment continued to drink more in a typical day than is recommended in a week.[8]

- Among those who consumed alcohol in the 30 days prior to treatment:

  - One in two (51.8%) consumed alcohol daily over the period.

  - The proportion who consumed alcohol daily increased from 42.7% in 2017 to 53.4% in 2024.

- The proportion of cases reporting polydrug use increased from 19.8% in 2017 to 29.5% in 2024. The absolute number of cases reporting polydrug use has increased by 78%, from 1,452 cases in 2017 to 2,579 in 2024.

- The proportion reporting cocaine as an additional drug has increased from 41.8% in 2017 to 70.7% in 2024.

- Cocaine overtook cannabis as the most common additional drug in 2022. The number of polydrug cases reporting cocaine as an additional problem drug increased by 200.3% between 2017 and 2024, increasing from 607 cases in 2017 to 1,823 cases in 2024.

- Just over four in ten (42.0%) cases successfully completed treatment.

National overview for 2024

Number of cases entering treatment 2024

There were 8,745 treated cases recorded in the NDTRS in 2024. *New cases* accounted for 43.5% of alcohol treatment demand in 2024, while *previously treated cases* accounted for 52.8% of alcohol treatment entrants. For the remaining 3.7% the treatment status was not recorded.

8,745

**Total number
of cases treated for
problem alcohol use**

44%
new
cases

53%
previously
treated cases

Figures relate to 2024

Type of service provider 2024

The majority of cases (62.8%) were treated in outpatient facilities and followed by residential settings (30.3%). Much smaller proportions were treated in low-threshold settings (5.4%) and prison (1.5%). In this period the NDTRS received mainly counselling data from the Irish Prison Service. GPs do not currently report alcohol treatment figures to the NDTRS.

Service type 2024

63%
outpatient

30%
residential

5%
low-threshold

2%
prison
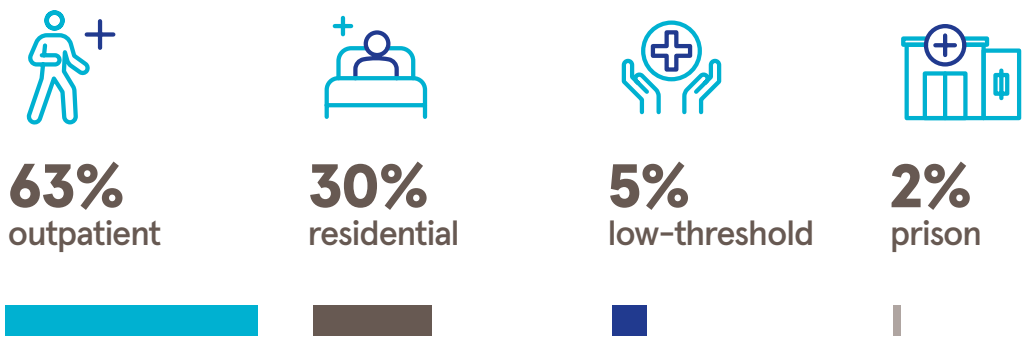
Figures relate to 2024

Level of problem alcohol use 2024

The median age at which cases commenced alcohol use was 16 years.

In 2024, the majority (56.1%) of cases were classified as **alcohol dependent** (by the healthcare professional treating them) (**Box 1**).

The proportion of *new cases* that were classified as alcohol dependent was 51.7% in 2024. This was higher among *previously treated cases* at 61.4%.

Box 1: Level of problem alcohol use

Hazardous: a pattern of alcohol use that increases the risk of harmful consequences for the person. The term describes drinking over the recommended limits by a person who has no apparent alcohol-related health problems. Includes experimental drinking. [AUDIT score 8–15: Increasing risk][10]

Harmful: a pattern of use that results in damage to physical or mental health; can include negative social consequences. [AUDIT score 16–19: High risk][10]

Dependent: a cluster of behavioural, cognitive, and physiological symptoms. Typically, includes a strong desire to consume alcohol, impaired control over its use, persistent drinking despite harmful consequences, a higher priority given to drinking than to other activities and obligations, increased alcohol tolerance. Also, notably, a physical withdrawal reaction when alcohol use is discontinued. [AUDIT score 20+: Possible dependence][10]

Alcohol dependence and treatment status

All cases

56%

52%
new cases

61%
previously treated cases

Figures relate to 2024

Types of alcohol consumed 2024

In 2024, the most common preferred alcohol types were spirits (56.3%), followed by beer (46.6%), wine (28.3%) and cider (7.9%). A small proportion of cases (2.9%) did not specify a preferred alcohol type. Patterns were broadly similar among new and *previously treated cases*.

Almost two thirds (64.3%) of cases reported one preferred type of alcohol, 33.0% reported more than one preferred type of alcohol. Among cases with more than one preferred alcohol type, the most common preferred alcohol type combinations were (1) beer plus spirits; (2) spirits plus wine; and (3) beer plus spirits plus wine.

Frequency and amount of alcohol consumed 2024

The majority (68.6%) of cases consumed alcohol in the 30 days prior to starting treatment. Of these, more than one-half (53.4%) consumed alcohol daily. The median number of standard drinks (**Box 2**) consumed on a typical drinking day or session in the 30 days prior to treatment was 16 (6–35)[11] standard drinks. This was slightly higher among *previously treated cases* at 16 (6–40) standard drinks than for *new cases* at 14 (5–30) standard drinks.

Box 2: What is a standard drink?[12]

In Ireland, a standard drink has about 10 grammes of pure alcohol. The amount of pure alcohol in a standard drink differs between countries. Examples of one standard drink in Ireland are:

Half pint of beer/cider   100 mL wine (12.5% vol)   1 pub measure of spirits (35.5mL)   1 alcopop (275mL bottle)

The HSE low risk drinking guidelines for females is up to 11 standard drinks in a week and up to 17 standard drinks in a week for males with drinks spaced out over the week, with two to three alcohol free days per week.

Polydrug use 2024

Three in ten (29.5%) cases treated for problem alcohol use also reported problem use of one or more other drugs (polydrug use).

In 2024, cocaine (70.7%) was the most common additional drug reported, followed by cannabis (49.4%), benzodiazepines (18.3%) and opioids (10.4%) (**Figure 1**).

In 2024, 12 cases (0.5%) reported **pregabalin** (Lyrica) as an additional problem drug.

Cocaine was the most common additional drug reported by both *new cases* and *previously treated cases*. However, rates varied by treatment status.

• *Among new cases*, cocaine (74.6%) was the most common additional substance in 2024, followed by cannabis (48.3%), benzodiazepines (13.4%) and opioids (6.0%).

• *Among previously treated cases*, cocaine (67.9%) was the most common additional problem substance, followed by cannabis (50.1%), benzodiazepines (22.1%) and opioids (14.0%).

Figure 1: Additional problem substances reported and treatment status (NDTRS 2024)
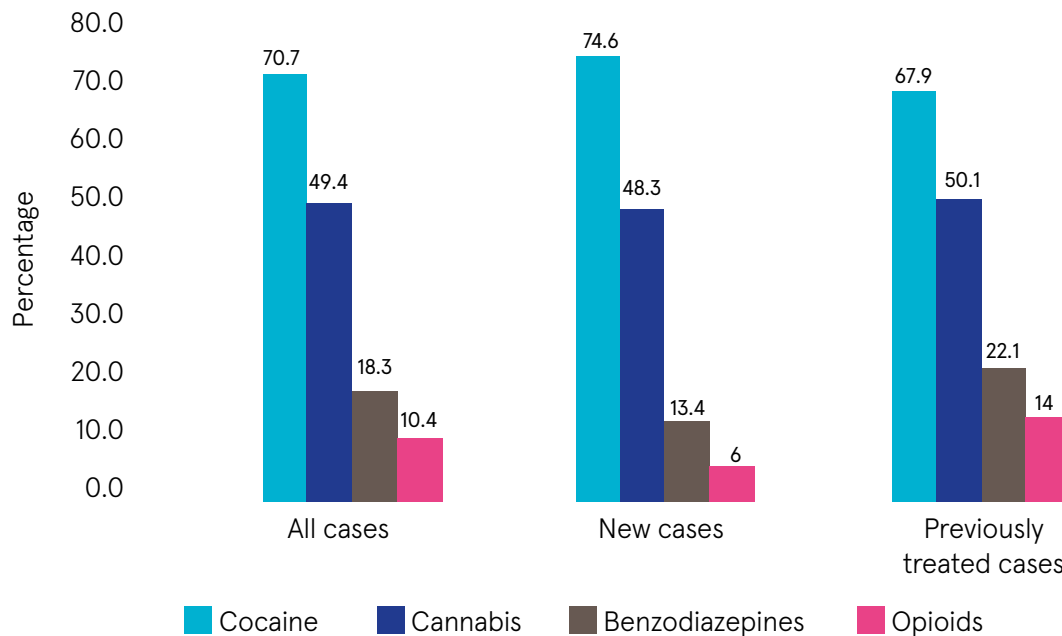
Among cases with polydrug use, the most common drugs used together were (1) alcohol plus cocaine; (2) alcohol plus cannabis; and (3) alcohol, plus cocaine and cannabis.

One in ten (10.0%) cases with polydrug use reported difficulty in determining which drug was the main problem. Among these, the pattern of additional drugs used were (1) alcohol plus cocaine; (2) alcohol plus cannabis, and (3) alcohol and benzodiazepines.

Polydrug use by age group 2024

The type of additional problem drugs varied by age:

- Among those aged 19 years or under, cannabis was the main drug reported alongside alcohol.

- Among those aged 20–49 years, cocaine was the main drug reported alongside alcohol.

- Among those aged 50 years or older, cannabis was the main drug reported alongside alcohol.

Polydrug problem drug by age

19 years or under
cannabis

20–49 years
cocaine

50 years or over
cannabis

Figures relate to 2024

Socio-demographic characteristics 2024

- The median age at which cases entered treatment was 43 years in 2024. A very small proportion of cases (0.8%) were aged 17 years or younger.

- The majority of cases were male (62.3%). The number of cases where cases identified as non- binary[13] or in another way was five or fewer. These options were added to the NDTRS at the end of the 2021 reporting period. Similarly, the number of cases where gender was not known was five or fewer.

- Almost one-half of cases were unemployed (47.8%).

- The proportion of cases recorded as homeless was 8.3%.

- 2.0% of cases identified as Irish Traveller.[9]

- 19.2% of cases reported ceasing education (for the first time) before the age of 16 years.

- Rates of homelessness, ceasing education before the age of 16 years, and unemployment were higher among *previously treated cases* than among *new cases*.

Characteristics
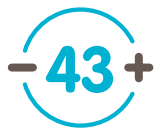
median age	62% males	8% homeless	48% unemployed

Figures relate to 2024

Gender 2024

This section focuses on gender differences between cases treated for alcohol as the main problem in 2024. More than one in three (37.6%) cases were female (**Table 1**).

The median age for females was higher than that for males (44 versus 42 years). Among cases treated for the first time, the median age for females was 44 years while the median age for males was 40 years.

A lower proportion of females ceased education before the age of 16 (14.3% versus 22.3%). A lower proportion of females reported being homeless (5.1% versus 10.3).

A higher proportion of males reported polydrug use (33.9% versus 21.9%). There were also differences in the type of additional drug used: a higher proportion of males reported cocaine as an additional drug (73.3% versus 63.9%) while a higher proportion of females reported benzodiazepines as an additional drug (23.8% versus 16.2%).

Additional problem drug – all cases

Cocaine		Cannabis		Benzodiazepines		Opioids	
64%	73%	44%	52%	24%	16%	13%	10%
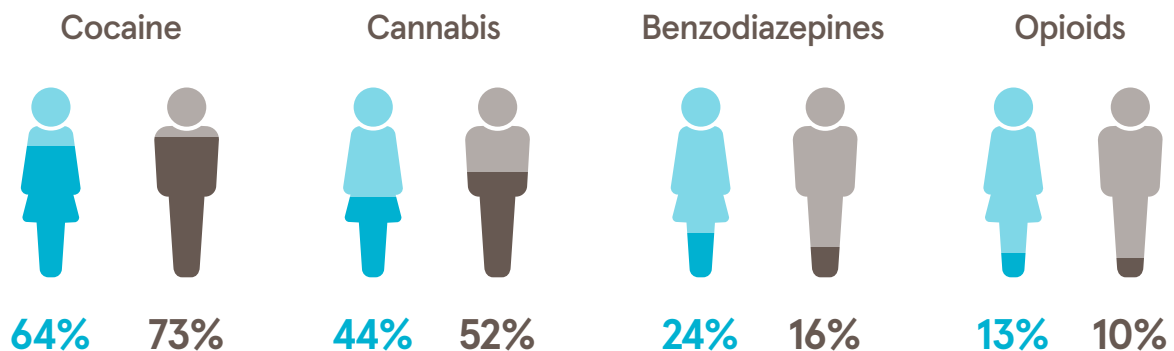
Table 1: Sociodemographic and polydrug characteristics by gender for cases treated for alcohol as a main problem, NDTRS 2024

	Female		Male	
	n	(%)	n	(%)
All cases	**3292**		**5445**	
Median age (range[11])	44	24–67	42	24–64
Under 35	686	(20.8)	1577	(29.0)
35–49	1479	(44.9)	2335	(42.9)
50+	1123	(34.1)	1527	(28.0)
Median age (first used alcohol)	16	12–25	15	12–20
Traveller	46	(1.4)	127	(2.3)
Education ceased before the age of 16 years	470	(14.3)	1212	(22.3)
In paid employment	1067	(32.4)	2010	(36.9)
Unemployed	1525	(46.3)	2658	(48.8)
Homeless	169	(5.1)	559	(10.3)
Dependent alcohol use	1795	(54.5)	3105	(57)
Median standard drinks consumed (range[11])*	14	5–30	16	6–40
Polydrug use	722	(21.9)	1846	(33.9)
Reported other additional drug(s)				
Cocaine	*461*	*(63.9)*	*1361*	*(73.3)*
Cannabis	*316*	*(43.8)*	*957*	*(51.6)*
Benzodiazepines	*172*	*(23.8)*	*300*	*(16.2)*
Opioids	*93*	*(12.9)*	*176*	*(9.5)*
New cases	**1411**		**2384**	
Median age (range[11])	44	22–66	40	22–64
Under 35	319	(22.6)	814	(34.1)
35–49	609	(43.1)	982	(41.2)
50+	483	(34.2)	586	(24.6)
Median age (first used alcohol)	16	12–25	15	12–20
Traveller	16	(1.1)	61	(2.6)
Education ceased before the age of 16 years	174	(12.3)	433	(18.2)
In paid employment	579	(41.0)	1146	(48.1)
Unemployed	570	(40.4)	965	(40.5)
Homeless	44	(3.1)	158	(6.6)
Dependent alcohol use	720	(51.0)	1242	(52.1)
Median standard drinks consumed (range[11])*	12	4–30	15	6–32
Polydrug use	285	(20.2)	814	(34.1)
Reported other additional drug(s)				
Cocaine	*183*	*(64.2)*	*637*	*(78.3)*
Cannabis	*123*	*(43.2)*	*408*	*(50.1)*
Benzodiazepines	*58*	*(20.4)*	*89*	*(10.9)*
Opioids	*21*	*(7.4)*	*45*	*(5.5)*

*Restricted to cases that consumed alcohol in the 30 days prior to treatment start

Children affected by alcohol 2024

In 2024, more than one-half (58.5%, 5,118) of cases in alcohol treatment had children of any age.

Of these, almost two in three (64.2%, 3,290) were known to have children aged 17 years or under. The median age of those known to have children aged 17 years or under was 40 years (**Table 2**).

Of those cases known to have children aged 17 years or under, 41.2% had one child, 34.9% had two children, 15.7% had three children, while 8.1% had four or more children. Cases entering alcohol treatment in 2024 with children aged 17 years or under had on average 2.4 children.

In 2024, of those cases known to have children aged 17 years or under, 48.1% had at least one child residing with them at the time of entry to treatment.[14,15]

Compared with males, a higher proportion of female cases in alcohol treatment reported having dependent children and living with children (66.2%) compared with males (36.3%). Males were more likely not to be residing with their children.

Table 2: Cases treated for alcohol with children aged 17 years or under, NDTRS 2024

	All cases		Female		Male	
	n	%	n	%	n	%
Have children	3290		1294		1994	
Median age (range[11])	40	27–54	40.5	28–53	40	26.7–54
Living with child(ren)	1581	(48.1)	856	(66.2)	723	(36.3)
Child(ren) live elsewhere	1696	(51.6)	431	(33.3)	1265	(63.4)
In paid employment	1315	(40.0)	440	(34.0)	874	(43.8)
Homeless	277	(8.4)	78	(6.0)	199	(10.0)
New treatment entrant	1536	(46.7)	593	(45.8)	942	(47.2)
Polydrug use	1189	(36.1)	374	(28.9)	814	(40.8)

Cases with children aged 17 years or under include different genders

Continuous care cases 2024

Continuous care cases are episodes of treatment which commenced treatment in a previous year and continued that treatment into the current year.

At the time of writing this bulletin and based on real-time data, there was a total of 3,262 cases that commenced treatment prior to 2024 and were still in treatment on 1 January 2024 (**Table 3**). Although continuous care cases are not presented elsewhere in this report, they may be combined with data on episodes of treatment commencing in 2024 to give a fuller picture of treatment provision for that year.

Table 3: Number of cases treated for alcohol as a main problem, new and continuous care cases, NDTRS 2024

	Cases commencing treatment in 2024		Continuous care cases 1 January 2024		Total (commencement plus continuous care)	
	n	%	n	%	n	%
All cases	**8745**		**3262**		**12007**	
New cases	3800	(43.5)	1437	(44.1)	5237	(43.6)
Previously treated cases	4619	(52.8)	1693	(51.9)	6312	(52.6)
Treatment status unknown	326	(3.7)	132	(4.0)	458	(3.8)

Treatment outcomes 2024

Characteristics of cases exiting alcohol treatment in 2024

The information presented in this section relates to immediate treatment outcomes for cases exiting alcohol treatment in 2024. Included are cases recorded as exiting treatment between 1 January 2024 and 31 December 2024 inclusive, **irrespective of when treatment commenced** (7,854 cases). This comprises 5,916 (75.3%) cases that both entered and exited treatment in 2024, and an additional 1,938 (24.7%) cases that exited treatment in 2024 but commenced treatment in previous years.

Excluded are a small number of cases for which the service provider was unable to provide sufficient exit information. These data allow for a greater understanding of the patterns, trends, and outcomes of treatment for cases receiving treatment for alcohol as their main problem substance.

Treatment duration

The duration of treatment refers to the length of time (in days) from the treatment start date to the treatment end date. Treatment duration was calculated for all cases exiting treatment in 2024 (7,854 cases).

Overall duration

- One-half of cases remained in treatment for 70 days or longer.

- Treatment duration ranged from 1 to 430 days (5th–95th percentile).

- Almost three in ten (28.7%) participated in treatment for less than a month.

- A small proportion (6.6%) stayed in treatment for more than a year.

Reason for treatment exit

More than four in ten (42.0%) cases successfully completed treatment, with 10.5% of cases referred to other drug and alcohol services for continued support. However, 22.6% of cases did not return for subsequent appointments and 17.1% refused further treatment sessions (**Table 4**).

Table 4: Reason for treatment exit, NDTRS 2024

	n	%
All cases exiting treatment	**7854**	
Treatment completed	3295	(42.0)
Client did not return for appointments (no show')	1778	(22.6)
Client declined further treatment	1342	(17.1)
Transferred/referred to treatment in another drug/alcohol service	821	(10.5)
Premature exit from treatment for non-compliance	188	(2.4)
Medical or mental health reasons	103	(1.3)
Unable to attend due to work/study commitments	65	(0.8)
No longer lives in the area	50	(0.6)
Died	50	(0.6)
Sentenced to prison	51	(0.6)
Staffing issues (resignation/retirement/maternity, etc.)	10	(0.1)
Released from prison but not linked to other treatment service	30	(0.4)
Prison to prison transfer	17	(0.2)
Other	26	(0.3)
Not known	28	(0.4)

Status of care plan at treatment exit

At the point of treatment exit, almost one in five cases (18.2%) had either engaged or achieved substantial progress towards their priority care plan goals. However, 4.1% had disengaged from their care plan, if one existed.

Trends over time 2017–2024

Number of cases entering treatment 2017–2024

In the eight year period 2017–2024, a total of 59,372 cases treated for alcohol as a main problem were reported to the NDTRS. In 2024, 8,745 cases were treated for problem alcohol use, an increase of 7.1% when compared with 2023 and the highest annual total reported in over a decade; (**Table 5**).[4]

The proportion of *new cases* decreased from 47.6% in 2017 to 43.5% in 2024. The proportion of *previously treated cases* increased from 49.7% in 2017 to 52.8% in 2024.

Type of service provider 2017–2024

Over the period 2017–2024, most cases were treated in outpatient facilities (58.5%).

The proportion of cases treated in low-threshold settings decreased slightly from 5.9% in 2017 to 5.4% in 2024 (**Table 6**).

Table 5: Number of cases treated for alcohol as a main problem, by treatment status, NDTRS 2017 – 2024

	2017		2018		2019		2020*		2021		2022		2023		2024	
	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)
All cases	7350		7464		7546		5824		6859		7421		8163		8745	
New cases	3500	(47.6)	3230	(43.3)	3296	(43.7)	2490	(42.8)	3026	(44.1)	3278	(44.2)	3625	(44.4)	3800	(43.5)
Previously treated cases	3652	(49.7)	3705	(49.6)	3400	(45.1)	3170	(54.4)	3596	(52.4)	3868	(52.1)	4257	(52.1)	4619	(52.8)
Treatment status unknown	198	(2.7)	529	(7.1)	850	(11.3)	164	(2.8)	237	(3.5)	275	(3.7)	281	(3.4)	326	(3.7)

* The decrease in cases in 2020 coincided with the COVID-19 pandemic and related restrictions, which presented increased risks for people who use drugs and alcohol, and significant challenges for treatment providers, and should be interpreted in that context.[16]

Table 6: Number of cases treated for alcohol as a main problem, by type of service provider, NDTRS 2017–2024

	2017		2018		2019		2020**		2021		2022		2023		2024	
	n	(%)	n	(%)	n	(%)	N	(%)	n	(%)	n	(%)	n	(%)	n	(%)
All cases	7350		7464		7546		5824		6859		7421		8163		8745	
Outpatient	3894	(53.0)	4087	(54.8)	4093	(54.2)	3505	(60.2)	4183	(61.0)	4469	(60.2)	4983	(61.0)	5496	(62.8)
Residential*	2949	(40.1)	2792	(37.4)	2806	(37.2)	1680	(28.8)	2102	(30.6)	2440	(32.9)	2743	(33.6)	2652	(30.3)
Low threshold	436	(5.9)	451	(6.0)	469	(6.2)	467	(8.0)	403	(5.9)	352	(4.7)	299	(3.7)	468	(5.4)
Prison	71	(1.0)	134	(1.8)	178	(2.4)	172	(3.0)	171	(2.5)	160	(2.2)	138	(1.7)	129	(1.5)

* Includes any service where the client stays overnight, e.g. residential detoxification, therapeutic communities, respite and step down.

** The reduction in residential case numbers can in part be attributed to temporary closures and reduced capacity introduced in 2020 to comply with COVID-19 pandemic restrictions.

Level of problem alcohol use 2017—2024

Between 2017 and 2024, the median age at which cases commenced alcohol use was 16 years, similar to previous years (**Table 7**).

Over the reporting period, the majority (65.3%) of cases were classified as alcohol dependent. The proportion of all cases that were classified as alcohol dependent decreased from 72.0% in 2017 to 56.1% in 2024.

The proportion of *new cases* that were classified as alcohol dependent decreased from 66.8% in 2017 to 51.7% in 2024.

The proportion of cases who were classified as hazardous drinkers increased from 9.7% in 2017 to 13.4% in 2024.

The proportion of cases who were classified as harmful drinkers increased from 16.0% in 2017 to 25.9% in 2024.

Types of alcohol consumed 2017—2024

Over the period 2017–2024, the most preferred alcohol type was spirits (57.2%), followed by beer (50.8%), wine (28.4%) and cider (9.7%). (**Table 8**).

Over this period, the majority (59.1%) of all cases reported one preferred type of alcohol, and 39.6% reported more than one preferred type of alcohol. Among cases with more than one preferred alcohol type, the most common preferred alcohol type combinations were (1) beer plus spirits; (2) spirits plus wine; and (3) beer plus spirits plus wine.

Frequency and amount of alcohol consumed 2017—2024

Over the period 2017–2024, the majority (72.5%) of cases consumed alcohol in the 30 days prior to treatment. Over the period, a higher proportion of *new cases* (73.9%) consumed alcohol in the 30 days prior to treatment than did *previously treated cases* (65.0%).

Among those who consumed alcohol in the 30 days prior to treatment:

- One in two (51.8%) consumed alcohol daily. The proportion who consumed alcohol daily increased from 42.7% in 2017 to 53.4% in 2024.

- The median number of standard drinks consumed increased from 16 (6–32) standard drinks in 2017 to 20 (6–40) standard drinks in 2021 and decreased to 16 (6–35) in 2024. (**Table 9**).

- Among *previously treated cases*, the median number of standard drinks consumed on a typical drinking day remained consistent, at 20 for the 5 years 2018–2022. However, in 2024, the number of standard drinks consumed on a typical drinking day decreased to 16 (6–40).

- Among *new cases*, the median number of standard drinks consumed remained steady over the period, at 16, however in 2024 the number of standard drinks consumed on a typical drinking day decreased to 14 (5–30).

Table 7: Age first started drinking and level of problem alcohol use, NDTRS 2017-2024

2024	2017		2018		2019		2020		2021		2022		2023		2024	
	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)
All cases	**7350**		**7464**		**7546**		**5824**		**6859**		**7421**		**8163**		**8745**	
Median age first started drinking (range[11])	16	12–22	15	12–22	16	12–21	16	12–21	16	12–22	16	12—22	16	12–21	16	12—22
*Level of problem alcohol use**																
Hazardous	711	(9.7)	746	(10.0)	864	(11.4)	807	(13.9)	830	(12.1)	908	(12.2)	1091	(13.4)	1174	(13.4)
Harmful	1174	(16.0)	1236	(16.6)	1374	(18.2)	1087	(18.7)	1284	(18.7)	1346	(18.1)	1798	(22.0)	2269	(25.9)
Dependent	5290	(72.0)	5300	(71.0)	5142	(68.1)	3768	(64.7)	4522	(65.9)	4848	(65.3)	4976	(61.0)	4904	(56.1)
New cases	**3500**		**3230**		**3296**		**2490**		**3026**		**3278**		**3625**		**3800**	
Median age first started drinking (range[11])	16	12–22	16	12–22	16	12–22	16	12–22	16	12–22	16	12–22	16	12–21	16	12–21
*Level of problem alcohol use**																
Hazardous	412	(11.8)	385	(11.9)	406	(12.3)	376	(15.1)	395	(13.1)	396	(12.1)	533	(14.7)	538	(14.2)
Harmful	674	(19.3)	677	(21.0)	714	(21.7)	633	(25.4)	661	(21.8)	672	(20.5)	908	(25.0)	1171	(30.8)
Dependent	2339	(66.8)	2118	(65.6)	2129	(64.6)	1425	(57.2)	1885	(62.3)	2099	64.0	2080	(57.4)	1965	(51.7)
Previously treated cases	**3652**		**3705**		**3400**		**3170**		**3596**		**3868**		**4257**		**4619**	
Median age first started drinking (range[11])	15	12–22	15	11–22	15	12–21	16	12–21	16	12–21	16	12–22	16	12–21	15	12–22
*Level of problem alcohol use**																
Hazardous	277	(7.6)	297	(8.0)	330	(9.7)	397	(12.5)	394	(11.0)	459	(11.9)	507	(11.9)	575	(12.4)
Harmful	445	(12.2)	479	(12.9)	450	(13.2)	417	(13.2)	578	(16.1)	611	(15.8)	830	(19.5)	1022	(22.1)
Dependent	2865	(78.5)	2847	(76.8)	2561	(75.3)	2284	(72.1)	2525	(70.2)	2636	(68.1)	2781	(65.3)	2838	(61.4)
Treatment status unknown	**198**		**529**		**850**		**164**		**237**		**275**		**281**		**326**	

* Where recorded. The proportion of cases where level of alcohol use is not known is not shown in the table.

Table 8: Type of alcohol consumed, NDTRS 2017–2024

	2017		2018		2019		2020		2021		2022		2023		2024	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
All cases	**7350**		**7464**		**7546**		**5824**		**6859**		**7421**		**8163**		**8745**	
Type of alcohol consumed																
Spirts	4310	(58.6)	4338	(58.1)	4164	(55.2)	3288	(56.5)	3934	(57.4)	4266	(57.5)	4754	(58.2)	4920	(56.3)
Beer	3977	(54.1)	4260	(57.1)	3998	(53.0)	2921	(50.2)	3348	(48.8)	3641	(49.1)	3929	(48.1)	4072	(46.6)
Wine	2040	(27.8)	2062	(27.6)	2130	(28.2)	1798	(30.9)	1999	(29.1)	2102	(28.3)	2256	(27.6)	2476	(28.3)
Cider	694	(9.4)	682	(9.1)	841	(11.1)	701	(12.0)	737	(10.7)	680	(9.2)	721	(8.8)	688	(7.9)
Alcopops	47	(0.6)	77	(1.0)	81	(1.1)	108	(1.9)	110	(1.6)	79	(1.1)	114	(1.4)	121	(1.4)
Fortified wine	55	(0.7)	71	(1.0)	94	(1.2)	94	(1.6)	107	(1.6)	86	(1.2)	102	(1.2)	107	(1.2)
Other*	7	(0.1)	7	(0.1)	6	(0.1)	~	~	~	~	21	(0.3)	17	(0.2)	13	(0.1)
Type not specified	207	(2.8)	190	(2.5)	287	(3.8)	190	(3.3)	194	(2.8)	242	(3.3)	222	(2.7)	252	(2.9)
New cases	**3500**		**3230**		**3296**		**2490**		**3026**		**3278**		**3625**		**3800**	
Type of alcohol consumed																
Spirts	1955	(55.9)	1817	(56.3)	1777	(53.9)	1325	(53.2)	1647	(54.4)	1802	(55.0)	1971	(54.4)	1961	(51.6)
Beer	1993	(56.9)	1949	(60.3)	1832	(55.6)	1258	(50.5)	1483	(49.0)	1662	(50.7)	1812	(50.0)	1885	(49.6)
Wine	985	(28.1)	951	(29.4)	1006	(30.5)	809	(32.5)	994	(32.8)	978	(29.8)	1089	(30.0)	1146	(30.2)
Cider	282	(8.1)	257	(8.0)	327	(9.9)	259	(10.4)	262	(8.7)	262	(8.0)	278	(7.7)	254	(6.7)
Alcopops	30	(0.9)	33	(1.0)	46	(1.4)	53	(2.1)	66	(2.2)	47	(1.4)	62	(1.7)	50	(1.3)
Fortified wine	28	(0.8)	28	(0.9)	52	(1.6)	35	(1.4)	43	(1.4)	37	(1.1)	38	(1.0)	48	(1.3)
Other*	~	~	~	~	~	~	0	(0.0)	0	(0.0)	6	(0.2)	~	~	~	~
Type not specified	82	(2.3)	40	(1.2)	87	(2.6)	66	(2.7)	69	(2.3)	97	(3.0)	85	(2.3)	72	(1.9)
Previously treated cases	**3652**		**3705**		**3400**		**3170**		**3596**		**3868**		**4257**		**4619**	
Type of alcohol consumed																
Spirts	2271	(62.2)	2251	(60.8)	1992	(58.6)	1910	(60.3)	2155	(59.9)	2340	(60.5)	2660	(62.5)	2833	(61.3)
Beer	1886	(51.6)	2048	(55.3)	1745	(51.3)	1593	(50.3)	1757	(48.9)	1868	(48.3)	2004	(47.1)	2078	(45.0)
Wine	1013	(27.7)	996	(26.9)	903	(26.6)	956	(30.2)	957	(26.6)	1060	(27.4)	1110	(26.1)	1270	(27.5)
Cider	392	(10.7)	348	(9.4)	430	(12.6)	424	(13.4)	446	(12.4)	398	(10.3)	406	(9.5)	407	(8.8)
Alcopops	17	(0.5)	33	(0.9)	34	(1.0)	55	(1.7)	44	(1.2)	30	(0.8)	52	(1.2)	69	(1.5)
Fortified wine	25	(0.7)	36	(1.0)	37	(1.1)	58	(1.8)	63	(1.8)	49	(1.3)	62	(1.5)	58	(1.3)
Other*	~	~	~	~	~	~	~	~	~	~	13	(0.3)	10	(0.2)	6	(0.1)
Type not specified	83	(2.3)	102	(2.8)	140	(4.1)	93	(2.9)	100	(2.8)	104	(2.7)	95	(2.2)	101	(2.2)
Treatment status unknown	**198**		**529**		**850**		**164**		**237**		**275**		**281**		**326**	

* Other includes hand sanitiser, ethanol, methylated spirits, mouth wash

~ Cells with five cases or fewer

Table 9: Amount of alcohol consumed by cases that consumed alcohol in the 30 days prior to treatment start, NDTRS 2017–2024

	2017		2018		2019		2020		2021		2022		2023		2024	
	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)
All cases	**5562**		**5589**		**5449**		**4033**		**4874**		**5448**		**6113**		**5995**	
Median standard drinks consumed (range[11])	16	(6–32)	18	(6–31)	20	(6–40)	18	(6–40)	20	(6–40)	18	(6–35)	16	(6–32)	16	(6–35)
New cases	**2835**		**2651**		**2521**		**1845**		**2316**		**2631**		**2933**		**2809**	
Median standard drinks consumed (range[11])	16	(6–30)	18	(6–30)	16	(6–35)	16	(6–38)	16	(6–36)	16	(6–35)	16	(6–30)	14	(5–30)
Previously treated cases	**2600**		**2594**		**2326**		**2098**		**2403**		**2627**		**2979**		**3003**	
Median standard drinks consumed (range[11])	16	(8–32)	20	(6–34)	20	(8–40)	20	(7–40)	20	(8–40)	20	(6–38)	17	(6–35)	16	(6–40)
Treatment status unknown	**127**		**344**		**602**		**90**		**155**		**190**		**201**			

Polydrug use 2017—2024

Over the eight year period 2017–2024, more than one in five (23.6%) reported polydrug use (problem use of more than one substance). The proportion of cases reporting polydrug use increased from 19.8% in 2017 to 29.5% in 2024 (**Table 10)**.

- In 2024, **cocaine** was the most common additional drug reported (**Table 11**). Cocaine overtook cannabis as the most common additional drug in 2022. The number of polydrug cases reporting **cocaine** as an additional problem drug increased by 200.3% between 2017 and 2024, increasing from 607 cases in 2017 to 1,823 cases in 2024.

- In the period 2017–2024, **cocaine** was the most common additional drug reported by cases with polydrug use. While the proportion of cases reporting cannabis decreased over the period, from 60.5% in 2017 to 49.4% in 2024, the absolute number of cases reporting cannabis has increased by 44.9%, from 878 cases in 2017 to 1,273 cases in 2024.

- The proportion of polydrug cases reporting **benzodiazepines** as an additional problem drug decreased from 22.9% in 2017 to 18.3% in 2024. The absolute number of cases reporting benzodiazepines increased over the period, from 332 cases in 2017 to 472 cases in 2024.

- **Opioids** were the fourth most common additional drug reported in this time period, decreasing from 14.3% in 2017 to 10.4% of cases in 2024. The absolute number of cases reporting opioids increased by 29.9% over the period.

- In 2024, 12 cases (0.5%) reported **pregabalin** (Lyrica) as an additional problem drug, an increase from 9 cases in 2017.

- Among *new* and *previously treated cases*, the patterns of additional drug use are similar, with cocaine, cannabis, benzodiazepines and opioids the four most commonly reported drugs. Patterns of use varied slightly, with a higher proportion of *new cases* reporting cocaine, whereas the proportion reporting cannabis, benzodiazepines and opioids was higher among *previously treated cases*.

Table 10: Polydrug use in cases treated for alcohol as a main problem, NDTRS 2017–2024

2024	2017		2018		2019		2020		2021		2022		2023		2024	
	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)
All cases	**7350**		**7464**		**7546**		**5824**		**6859**		**7421**		**8163**		**8745**	
Alcohol only	5898	(80.2)	5861	(78.5)	5976	(79.2)	4477	(76.9)	5231	(76.3)	5625	(75.8)	6131	(75.1)	6166	(70.5)
Reported other additional drug(s)	1452	(19.8)	1603	(21.5)	1570	(20.8)	1347	(23.1)	1628	(23.7)	1796	(24.2)	2032	(24.9)	2579	(29.5)

Table 11: Polydrug use – additional problem drugs for cases treated for alcohol as a main problem, NDTRS 2017 – 2024

	2017		2018		2019		2020		2021		2022		2023		2024	
	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)
All polydrug	**1452**		**1603**		**1570**		**1347**		**1628**		**1796**		**2032**		**2579**	
Cocaine	607	(41.8)	772	(48.2)	844	(53.8)	729	(54.1)	877	(53.9)	1103	(61.4)	1310	(64.5)	1823	(70.7)
Cannabis	878	(60.5)	940	(58.6)	881	(56.1)	740	(54.9)	901	(55.3)	887	(49.4)	958	(47.1)	1273	(49.4)
Benzodiazepines	332	(22.9)	375	(23.4)	342	(21.8)	331	(24.6)	357	(21.9)	390	(21.7)	419	(20.6)	472	(18.3)
Opioids	207	(14.3)	212	(13.2)	206	(13.1)	156	(11.6)	203	(12.5)	230	(12.8)	259	(12.7)	269	(10.4)
MDMA (ecstasy)	134	(9.2)	185	(11.5)	146	(9.3)	104	(7.7)	101	(6.2)	99	(5.5)	108	(5.3)	179	(6.9)
Amphetamines	49	(3.4)	57	(3.6)	46	(2.9)	38	(2.8)	55	(3.4)	61	(3.4)	51	(2.5)	76	(2.9)
NPS	18	(1.2)	15	(0.9)	20	(1.3)	24	(1.8)	26	(1.6)	20	(1.1)	31	(1.5)	28	(1.1)
Z-drugs	27	(1.9)	19	(1.2)	18	(1.1)	17	(1.3)	18	(1.1)	27	(1.5)	28	(1.4)	20	(0.8)
Volatile inhalants	6	(0.4)	~	~	~	~	~	~	~	~	9	(0.5)	7	(0.3)	15	(0.6)
Other	62	(4.3)	71	(4.4)	70	(4.5)	43	(3.2)	50	(3.1)	51	(2.8)	64	(3.1)	93	(3.6)
New cases	**656**		**635**		**659**		**570**		**640**		**743**		**884**		**1099**	
Cocaine	290	(44.2)	331	(52.1)	365	(55.4)	335	(58.8)	352	(55.0)	490	(65.9)	597	(67.5)	820	(74.6)
Cannabis	408	(62.2)	390	(61.4)	394	(59.8)	325	(57.0)	373	(58.3)	382	(51.4)	400	(45.2)	531	(48.3)
Benzodiazepines	122	(18.6)	106	(16.7)	111	(16.8)	101	(17.7)	104	(16.3)	119	(16.0)	146	(16.5)	147	(13.40)
Opioids	63	(9.6)	45	(7.1)	46	(7.0)	40	(7.0)	43	(6.7)	58	(7.8)	75	(8.5)	66	(6.0)
MDMA (ecstasy)	57	(8.7)	77	(12.1)	64	(9.7)	55	(9.6)	41	(6.4)	38	(5.1)	44	(5.0)	85	(7.7)
Amphetamines	22	(3.4)	22	(3.5)	21	(3.2)	17	(3.0)	13	(2.0)	18	(2.4)	19	(2.1)	26	(2.4)
NPS	8	(1.2)	~	~	6	(0.9)	8	(1.4)	7	(1.1)	6	(0.8)	10	(1.1)	14	(1.3)
Z-drugs	13	(2.0)	~	~	~	~	0	0	6	(0.9)	10	(1.3)	15	(1.7)	6	(0.5)
Volatile inhalants	~	~	0	0	~	~	~	~	~	~	~	~	~	~	~	~
Other	29	(4.4)	21	(3.3)	27	(4.1)	24	(4.2)	21	(3.3)	24	(3.2)	29	(3.3)	41	(3.7)
Previously treated cases	**751**		**851**		**746**		**734**		**914**		**976**		**1097**		**1410**	
Cocaine	299	(39.8)	390	(45.8)	390	(52.3)	377	(51.4)	481	(52.6)	564	(57.8)	682	(62.2)	957	(67.9)
Cannabis	445	(59.3)	486	(57.1)	409	(54.8)	394	(53.7)	487	(53.3)	476	(48.8)	537	(49.0)	707	(50.1)
Benzodiazepines	202	(26.9)	234	(27.5)	191	(25.6)	216	(29.4)	226	(24.7)	252	(25.8)	261	(23.8)	311	(22.1)
Opioids	133	(17.7)	140	(16.5)	128	(17.2)	110	(15.0)	148	(16.2)	156	(16.0)	170	(15.5)	198	(14.0)
MDMA (ecstasy)	74	(9.9)	96	(11.3)	71	(9.5)	43	(5.9)	49	(5.4)	58	(5.9)	63	(5.7)	90	(6.4)
Amphetamines	26	(3.5)	35	(4.1)	23	(3.1)	20	(2.7)	38	(4.2)	41	(4.2)	31	(2.8)	48	(3.4)
NPS	10	(1.3)	11	(1.3)	13	(1.7)	16	(2.2)	19	(2.1)	13	(1.3)	20	(1.8)	14	(1.0)
Z-drugs	13	(1.7)	12	(1.4)	12	(1.6)	13	(1.8)	8	(0.9)	15	(1.5)	13	(1.2)	14	(1.0)
Volatile inhalants	~	~	~	~	~	~	~	~	0	(0.0)	6	(0.6)	~	~	13	(0.9)
Other	28	(3.7)	43	(5.1)	36	(4.8)	19	(2.6)	26	(2.8)	24	(2.5)	33	(3.0)	51	(3.6)

* Z-drugs are non-benzodiazepine hypnotic sedative drugs, e.g. zolpidem, zopiclone

~ Cells with five cases or fewer

Socio-demographic characteristics 2017—2024

- The median age of cases increased from 41 years in 2017 to 43 years in 2024 (**Table 12**).

- For *new cases*, the median age was 42 years in 2024, an increase from 40 years in 2017.

- In 2024, only 0.8% of all cases were aged 17 years or younger, a decrease from 1.5% in 2017, and the lowest proportion in the reporting period. The number of cases aged 17 years or younger decreased by 46.6% over the reporting period. The proportion of *new cases* aged 17 years or younger in 2024 was 1.5%.

- Over the period 2017–2024, the majority (63.2%) of cases were male.

- While the proportion of cases reported as homeless remained stable (8.4% in 2017 versus 8.3% in 2024), the absolute number of cases increased from 620 cases in 2017 to 728 cases in 2024.

- The number of cases identifying as Irish Traveller[9] increased by 46.6% over the reporting period, from 118 cases in 2017 to 173 cases in 2024.

- The proportion of cases recorded as having ceased education (for the first time) before the age of 16 years decreased from 23.5% in 2017 to 18.6% in 2022 but increased to 19.2% in 2024.

- The proportion of all cases that were in paid employment increased from 28.0% in 2017 to 35.3% in 2024. The number of cases that were in paid employment increased by 49.9% over the period, from 2,056 cases in 2017 to 3,083 cases in 2024.

- Over the reporting period, 49.0% of all cases were unemployed. The proportion of cases that were unemployed decreased between 2017 and 2024, from 52.1% in 2017 to 47.8% in 2024.

- In each year, rates of homelessness, ceasing education before the age of 16 years, and unemployment were higher among *previously treated cases* than among *new cases*.

Table 12: Socio-demographic characteristics of cases treated for alcohol as a main problem, NDTRS 2017 – 2024

	2017		2018		2019		2020		2021		2022		2023		2024	
	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)
All cases	**7350**		**7464**		**7546**		**5824**		**6859**		**7421**		**8163**		**8745**	
Median age (range[11])	41	21–64	41	21–65	41	22–64	41	21–64	42	22–64	42	23–65	43	23–65	43	24–65
Under 18 years	112	(1.5)	114	(1.5)	107	(1.4)	99	(1.7)	109	(1.6)	76	(1.0)	62	(0.8)	71	(0.8)
Male	4769	(64.9)	4812	(64.5)	4835	(64.1)	3604	(61.9)	4297	(62.6)	4565	(61.5)	5203	(63.7)	5445	(62.3)
Homeless	620	(8.4)	713	(9.6)	654	(8.7)	494	(8.5)	567	(8.3)	567	(7.6)	640	(7.8)	728	(8.3)
Traveller[9]	118	(1.6)	145	(1.9)	178	(2.4)	121	(2.1)	167	(2.4)	186	(2.5)	151	(1.8)	173	(2.0)
Education ceased before the age of 16 years	1726	(23.5)	1727	(23.1)	1739	(23.0)	1235	(21.2)	1422	(20.7)	1382	(18.6)	1628	(19.9)	1683	(19.2)
In paid employment	2056	(28.0)	2067	(27.7)	2125	(28.2)	1639	(28.1)	2111	(30.8)	2526	(34.0)	2954	(36.2)	3083	(35.3)
Unemployed	3827	(52.1)	3783	(50.7)	3731	(49.4)	2865	(49.2)	3345	(48.8)	3534	(47.6)	3800	(46.6)	4184	(47.8)
Retired/unable to work, including disability	887	(12.1)	958	(12.8)	1004	(13.3)	848	(14.6)	931	(13.6)	926	(12.5)	998	(12.2)	1062	(12.1)
New cases	**3500**		**3230**		**3296**		**2490**		**3026**		**3278**		**3625**		**3800**	
Median age (range[11])	40	19–64	39	19–65	40	20–65	40	19–64	40	20–65	41	21–65	41	22–65	42	22–65
Under 18 years	90	(2.6)	87	(2.7)	83	(2.5)	82	(3.3)	90	(3.0)	67	(2.0)	55	(1.5)	58	(1.5)
Male	2234	(63.8)	2087	(64.6)	2080	(63.1)	1498	(60.2)	1841	(60.8)	2010	(61.3)	2271	(62.6)	2384	(62.7)
Homeless	166	(4.7)	191	(5.9)	207	(6.3)	149	(6.0)	165	(5.5)	166	(5.1)	163	(4.5)	202	(5.3)
Traveller[9]	50	(1.4)	59	(1.8)	73	(2.2)	46	(1.8)	70	(2.3)	85	(2.6)	57	(1.6)	77	(2.0)
Education ceased before the age of 16 years	768	(21.9)	639	(19.8)	716	(21.7)	464	(18.6)	568	(18.8)	519	(15.8)	612	(16.9)	607	(16.0)
In paid employment	1209	(34.5)	1165	(36.1)	1116	(33.9)	890	(35.7)	1106	(36.5)	1379	(42.1)	1596	(44.0)	1730	(45.5)
Unemployed	1587	(45.3)	1417	(43.9)	1458	(44.2)	1069	(42.9)	1301	(43.0)	1324	(40.4)	1464	(40.4)	1535	(40.4)
Retired/unable to work, including disability	367	(10.5)	354	(11.0)	390	(11.8)	278	(11.2)	358	(11.8)	353	(10.8)	376	(10.4)	354	(9.3)
Previously treated cases	**3652**		**3705**		**3400**		**3170**		**3596**		**3868**		**4257**		**4619**	
Median age (range[11])	43	24–64	42	23–65	42	24–65	43	25–64	43	25–64	43	26–65	43	25–65	43	25–66
Under 18 years	17	(0.5)	20	(0.5)	15	(0.4)	13	(0.4)	18	(0.5)	9	(0.2)	~	~	13	(0.3)
Male	2394	(65.6)	2382	(64.3)	2249	(66.1)	1997	(63.0)	2285	(63.5)	2383	(61.6)	2748	(64.6)	2859	(61.9)
Homeless	432	(11.8)	473	(12.8)	378	(11.1)	325	(10.3)	369	(10.3)	360	(9.3)	409	(9.6)	469	(10.20)
Traveller[9]	62	(1.7)	67	(1.8)	81	(2.4)	68	(2.1)	83	(2.3)	93	(2.4)	85	(2.0)	86	(1.9)
Education ceased before the age of 16 years	912	(25.0)	957	(25.8)	847	(24.9)	734	(23.2)	798	(22.2)	792	(20.5)	925	(21.7)	987	(21.4)
In paid employment	804	(22.0)	778	(21.0)	744	(21.9)	726	(22.9)	946	(26.3)	1067	(27.6)	1289	(30.3)	1270	27.50
Unemployed	2145	(58.7)	2109	(56.9)	1914	(56.3)	1709	(53.9)	1920	(53.4)	2078	(53.7)	2181	(51.2)	2487	(53.8)
Retired/unable to work, including disability	498	(13.6)	535	(14.4)	502	(14.8)	538	(17.0)	542	(15.1)	545	(14.1)	589	(13.8)	668	(14.5)
Treatment status unknown	**198**		**529**		**850**		**164**		**237**		**275**		**281**		**326**	

~ Cells with five cases or fewer

HSE Health Regions (HR) area of residence 2017—2024

In 2024, the highest number of cases treated for problem alcohol use resided[17] in HSE Dublin and South East (**Table 13**) (see below for reference to areas included in each Health Region (HR)).

As mentioned previously, participation in the NDTRS is not uniform across Ireland, and, therefore, conclusions based on geographic analyses must be interpreted in this context.

Table 13: Number of cases treated for alcohol as a main problem by HSE HR area of residence, NDTRS 2017–2024

	2017	2018	2019	2020	2021	2022	2023	2024
All cases	**7350**	**7464**	**7546**	**5824**	**6859**	**7421**	**8163**	**8745**
HSE Dublin and North East	1360	1350	1417	1181	1548	1671	2193	2011
HSE Dublin and Midlands	1281	1273	1257	957	1278	1372	1302	1364
HSE Dublin and South East	1619	1697	1609	1296	1474	1604	1747	2055
HSE South West	1240	1293	1290	943	971	953	920	1076
HSE Mid West	487	536	570	424	483	582	570	582
HSE West and North West	1154	1151	1306	928	1027	1122	1286	1428
Other/unknown	209	164	97	95	78	117	145	229
New cases	**3500**	**3230**	**3296**	**2490**	**3026**	**3278**	**3625**	**3800**
HSE Dublin and North East	632	570	510	507	661	645	928	845
HSE Dublin and Midlands	585	556	583	438	657	663	643	660
HSE Dublin and South East	786	806	711	544	594	702	782	851
HSE South West	639	579	569	424	459	468	447	477
HSE Mid West	234	253	294	181	223	258	261	261
HSE West and North West	550	398	597	344	391	500	515	596
Other/unknown	74	68	32	52	41	42	49	110

	2017	2018	2019	2020	2021	2022	2023	2024
Previously treated	**3652**	**3705**	**3400**	**3170**	**3596**	**3868**	**4257**	**4619**
HSE Dublin and North East	679	688	532	624	818	926	1163	1065
HSE Dublin and Midlands	647	633	522	470	575	647	592	640
HSE Dublin and South East	793	795	764	729	832	859	932	1170
HSE South West	594	654	668	512	488	465	462	576
HSE Mid West	248	246	257	235	250	318	297	311
HSE West and North West	566	611	613	563	600	596	737	757
Other/unknown	125	78	44	37	33	57	74	100
Treatment status unknown	**198**	**529**	**850**	**164**	**237**	**275**	**281**	**326**

HSE HR areas

HSE Dublin and North East: North Dublin, Meath, Louth, Cavan, Monaghan

HSE Dublin and Midlands: Longford, Westmeath, Offaly, Laois, Kildare, parts of Dublin and Wicklow

HSE Dublin and South East: Tipperary South, Waterford, Kilkenny, Carlow, Wexford, Wicklow, part of South Dublin
HSE South West: Kerry and Cork

HSE Mid West: Limerick, Tipperary North, Clare

HSE West and North West: Donegal, Sligo, Leitrim, Roscommon, Mayo, Galway
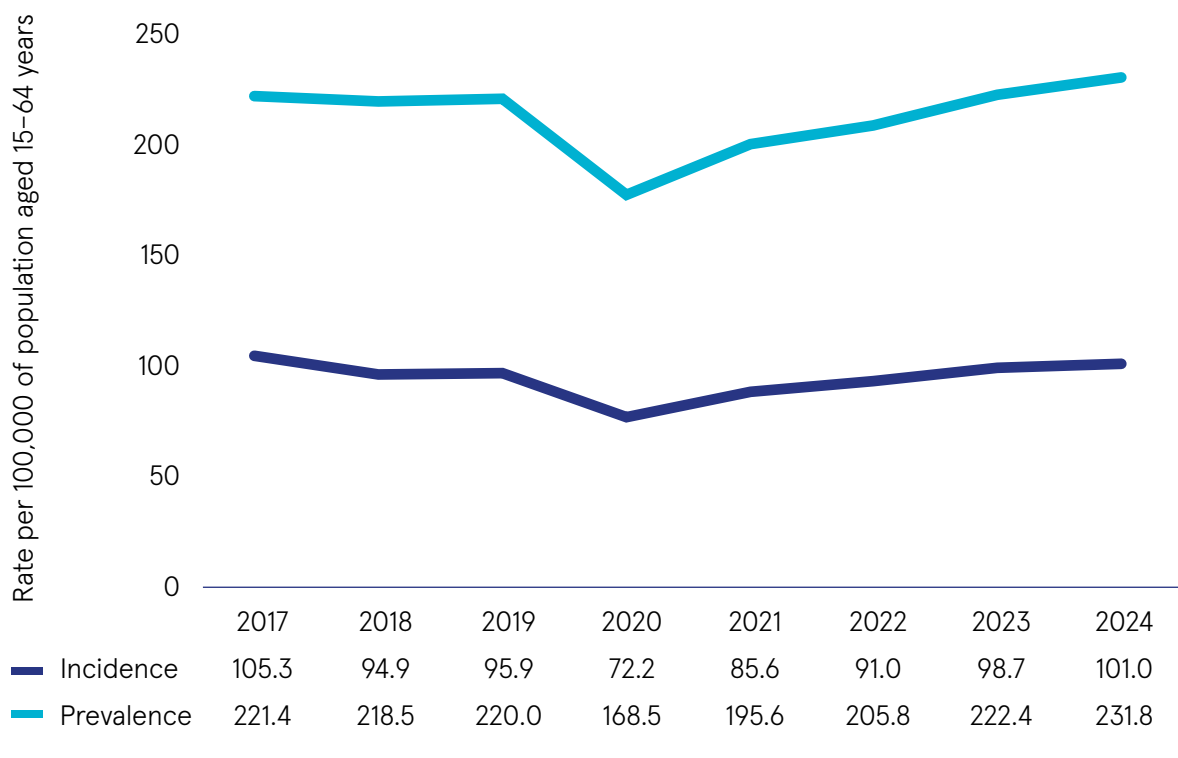
Incidence and prevalence of treatment 2017—2024

Annual rates for the incidence (*new cases*) and prevalence (*all cases*) of treated problem alcohol use were calculated per 100,000 of the population aged 15–64 years based on census figures from the Central Statistics Office (CSO) (**Figure 2**).[18]

Incidence decreased from 105.3 cases per 100,000 in 2017, to 72.2 in 2020, rising to 101.0 cases per 100,000 in 2024.

Prevalence, which includes both *new cases* and those cases returning to treatment, increased to 231.8 cases in 2024, the highest rate since 2017.

Changes in incidence and prevalence should be interpreted with caution for recent years due to the proportion of cases where treatment status was unknown (3.7% in 2024), and the challenges presented to service providers and those who availed of services due to the COVID-19 pandemic in 2020.

Figure 2: Incidence and prevalence of treated problem alcohol use per 100,000 of the population aged 15–64 years, NDTRS 2017–2024

	2017	2018	2019	2020	2021	2022	2023	2024
Incidence	105.3	94.9	95.9	72.2	85.6	91.0	98.7	101.0
Prevalence	221.4	218.5	220.0	168.5	195.6	205.8	222.4	231.8

Acknowledgements

The NDTRS team would like to acknowledge the ongoing support of the staff in the alcohol and drug treatment services throughout the country, without whom it would not be possible to maintain the NDTRS. Their participation and cooperation are very much appreciated and valued.

Notes

1. This document may be cited as: Ní Luasa S, O'Neill D, O'Sullivan M and Lyons S. (2025) National Drug Treatment Reporting System, *2024 Alcohol Treatment Demand*. StatLink Series 26. Dublin: Health Research Board. Available at https://www.drugsandalcohol.ie/43408/ and at www.hrb.ie/publications

2. European Monitoring System for Drugs and Drug Addiction (EMCDDA). (2012). Treatment demand indicator (TDI) standard protocol 3.0: Guidelines for reporting data on people entering drug treatment in European countries. EMCDDA. https://www.emcdda.europa.eu/publications/manuals/tdi-protocol-3.0_en

3. More detailed information on the NDTRS methodology can be found in previously published HRB Trends Series papers at https://www.hrb.ie/data-collections-evidence/alcohol-and-drug-treatment/publications/

4. NDTRS data are case-based, which means there is a possibility that individuals appear more than once in the database; for example, where a person receives treatment at more than one centre, or at the same centre more than once in a calendar year.

5. The NDTRS interactive tables will be updated to reflect the changes at: www.drugsandalcohol.ie/tables/

6. Bruton, L, Gibney, S, Hynes, T, Collins, D, Moran, P (2021). Spending review focused policy assessment of *Reducing Harm, Supporting Recovery: an analysis of expenditure and performance in the area of drug and alcohol misuse*. Government of Ireland: Dublin. https://www.drugsandalcohol.ie/34729/

7. Department of Health. (2017) *Reducing harm, supporting recovery. A health-response to drug and alcohol use in Ireland 2017-2025*. Dublin: Department of Health. https://www.drugsandalcohol.ie/27603/

8. Drink guidelines are taken from the HSE at https://www2.hse.ie/living-well/alcohol/health/improve-your-health/weekly-low-risk-alcohol-guidelines/

9. The number of Irish Travellers living in the State and counted in Census 2022 was 32,949, an increase of 6% from 30,987 in the 2016 census. Irish Travellers make up less than 1% of the population. https://www.cso.ie/en/releasesandpublications/ep/p-cpp5/census2022profile5-diversitymigrationethnicityirishtravellersreligion/

10. Babor T, Higgins-Biddle J, Saunders J and Monteiro M (2001) *Audit: the Alcohol Use Disorders Identification Test: guides for use in primary health care*. Geneva: World Health Organization https://www.who.int/publications/i/item/WHO-MSD-MSB-01.6a

11. Range presented is 5th percentile to 95th percentile (90% of cases are included within this range).

12. In Ireland a standard drink has about 10 grams of pure alcohol. In the UK a standard drink, also called a unit of alcohol, has about 8 grams of pure alcohol. Some examples of a standard drink in Ireland are: a pub measure of spirits (35.5 mL), a small glass of wine (12.5% volume), a half pint of normal beer, an alcopop (275 mL bottle). www2. hse.ie/living-well/alcohol/health/improve-your-health/weekly-low- risk- alcohol- guidelines/

13. Non-binary describes gender identities outside of the female/male gender binary. Individuals identifying as non-binary may feel neither exclusively male or female, both male and female, between or beyond genders.

14. Service users currently residing with children refers to the 30 days prior to treatment. This includes children where the service user has a carer or guardianship role; non-related children such as foster children and stepchildren; and the children of a long-term cohabiting partner. Where the service user is a grandparent or other close relative and is the official guardian of a child with whom they are living, they are recorded as living with children.

15. Children who are not residing with the service user refers to children currently living with another parent; children in formal care or informal care; and children living elsewhere who are biological children/adopted children, or children who are under the official guardianship of the service user. It also refers to children who have left home, and children who are living with other family members or friends temporarily, but who are not considered by the service user to be living in care.

16. The capacity and functionality of treatment services were impacted by COVID-19 pandemic restrictions. In 2020, the NDTRS surveyed participating services to estimate the impact of the restrictions on treatment data for 2020 (the response rate was 80%). Around 40% of services surveyed expressed some impact on their ability to provide returns, while around 50% expected some impact on numbers (unpublished data).

17. Area of residence relates to the service user's place of residence in the 30 days prior to commencing treatment, for all service types excluding prison. Where a service user is treated in prison and has been in prison for less than 6 months prior to starting treatment, area of residence is the place of residence prior to imprisonment. Otherwise, the prison location is recorded.

18. Population data are taken from the Central Statistics Office at: www.cso.ie/en/ releasesandpublications/ep/p-pme/populationandmigrationestimatesapril2022/

Appendix A: Number of cases treated for alcohol as a main problem, by county of residence, NDTRS 2017–2024

	2017		2018		2019		2020		2021		2022		2023		2024	
	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)
All cases	7350		7464		7546		5824		6859		7421		8163		8745	
Carlow	99	(1.3)	100	(1.3)	82	(1.1)	54	(0.9)	65	(0.9)	91	(1.2)	102	(1.2)	111	(1.3)
Cavan	89	(1.2)	78	(1.0)	94	(1.2)	67	(1.2)	87	(1.3)	101	(1.4)	204	(2.5)	94	(1.1)
Clare	91	(1.2)	106	(1.4)	111	(1.5)	87	(1.5)	112	(1.6)	138	(1.9)	121	(1.5)	132	(1.5)
Cork	930	(12.7)	972	(13.0)	963	(12.8)	719	(12.3)	758	(11.1)	697	(9.4)	668	(8.2)	815	(9.3)
Donegal	509	(6.9)	517	(6.9)	526	(7.0)	449	(7.7)	471	(6.9)	467	(6.3)	552	(6.8)	535	(6.1)
Dublin	1808	(24.6)	1907	(25.5)	1921	(25.5)	1593	(27.4)	2067	(30.1)	2232	(30.1)	2451	(30.0)	2562	(29.3)
Galway	273	(3.7)	254	(3.4)	264	(3.5)	130	(2.2)	180	(2.6)	275	(3.7)	315	(3.9)	394	(4.5)
Kerry	310	(4.2)	321	(4.3)	327	(4.3)	224	(3.8)	213	(3.1)	256	(3.4)	252	(3.1)	261	(3.0)
Kildare	201	(2.7)	182	(2.4)	203	(2.7)	205	(3.5)	249	(3.6)	291	(3.9)	242	(3.0)	269	(3.1)
Kilkenny	142	(1.9)	173	(2.3)	135	(1.8)	97	(1.7)	133	(1.9)	170	(2.3)	175	(2.1)	191	(2.2)
Laois	137	(1.9)	145	(1.9)	122	(1.6)	58	(1.0)	85	(1.2)	115	(1.5)	114	(1.4)	121	(1.4)
Leitrim	53	(0.7)	59	(0.8)	108	(1.4)	71	(1.2)	71	(1.0)	61	(0.8)	79	(1.0)	81	(0.9)
Limerick	306	(4.2)	320	(4.3)	372	(4.9)	257	(4.4)	267	(3.9)	349	(4.7)	355	(4.3)	365	(4.2)
Longford	57	(0.8)	40	(0.5)	50	(0.7)	47	(0.8)	32	(0.5)	48	(0.6)	42	(0.5)	50	(0.6)
Louth	155	(2.1)	143	(1.9)	152	(2.0)	130	(2.2)	160	(2.3)	166	(2.2)	228	(2.8)	188	(2.1)
Mayo	83	(1.1)	106	(1.4)	110	(1.5)	54	(0.9)	60	(0.9)	69	(0.9)	114	(1.4)	121	(1.4)
Meath	128	(1.7)	125	(1.7)	131	(1.7)	87	(1.5)	104	(1.5)	110	(1.5)	187	(2.3)	206	(2.4)
Monaghan	108	(1.5)	73	(1.0)	51	(0.7)	67	(1.2)	103	(1.5)	103	(1.4)	148	(1.8)	89	(1.0)
Offaly	118	(1.6)	94	(1.3)	97	(1.3)	47	(0.8)	127	(1.9)	103	(1.4)	75	(0.9)	78	(0.9)
Roscommon	39	(0.5)	38	(0.5)	64	(0.8)	67	(1.2)	84	(1.2)	80	(1.1)	91	(1.1)	108	(1.2)
Sligo	197	(2.7)	175	(2.3)	224	(3.0)	139	(2.4)	152	(2.2)	167	(2.3)	131	(1.6)	184	(2.1)
Tipperary	338	(4.6)	367	(4.9)	370	(4.9)	267	(4.6)	294	(4.3)	282	(3.8)	343	(4.2)	372	(4.3)
Waterford	455	(6.2)	441	(5.9)	426	(5.6)	361	(6.2)	335	(4.9)	346	(4.7)	393	(4.8)	509	(5.8)
Westmeath	128	(1.7)	81	(1.1)	94	(1.2)	62	(1.1)	60	(0.9)	81	(1.1)	77	(0.9)	62	(0.7)
Wexford	374	(5.1)	385	(5.2)	354	(4.7)	280	(4.8)	327	(4.8)	335	(4.5)	366	(4.5)	478	(5.5)
Wicklow	140	(1.9)	180	(2.4)	161	(2.1)	166	(2.9)	224	(3.3)	244	(3.3)	264	(3.2)	265	(3.0)
Outside Ireland	43	(0.6)	49	(0.7)	26	(0.3)	31	(0.5)	35	(0.5)	43	(0.6)	55	(0.7)	78	(0.9)
Ireland unknown	39	(0.5)	33	(0.4)	8	(0.1)	8	(0.1)	~	~	~	~	19	(0.2)	26	(0.3)
Total	7350		7464		7546		5824		6859		7421		8163		8745	

~ Cells with 5 cases or fewer

H^R^B

Health
Research
Board

Research. Evidence. Action.