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A response from Comiskey et al.

Dear Editor,

In response to the letter of Long and Corrigan, my co-authors and I would like to state the following.

We are pleased that our article has prompted interest and debate from two Irish Government Bodies, the Health Research Board (HRB), a statutory body of The Department of Health and Children and the National Advisory Committee on Drugs (NACD), a statutory body of The Department of Community, Rural and Gaeltacht (Irish) Affairs.

We subscribe to the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) recommendation that a range of different methods should be used to inform estimates of prevalence while being cognisant of the limitations of these approaches (EMCDDA, 1997a). These methods include capture recapture methods and multiplier methods based on treatment figures, deaths or police records.

We are encouraged to note that given the slight alterations of Long and Corrigan to both the multiplier and the benchmark, estimates of prevalence continue to remain close to the point estimate of Comiskey et al. (2007) and overlap with the 95 per cent confidence intervals of the capture recapture estimates of Kelly et al. (2003) and Comiskey (2001).

While the numbers presented in Table 4 of Comiskey et al. (2007) do represent the number of offences detected for possession of any drugs for sale or supply, rather than the number of opiate users, or of individuals arrested, it has been found by Cox and Comiskey (2007) and Cox et al. (2006) that among treated opiate users poly drug use is the norm.

The estimate in Comiskey et al. (2007) was informed by the EMCDDA published study on National Prevalence among 15 member states (EMCDDA, 1997a) of which Comiskey was the invited Irish expert. It was not informed by the NACD Commissioned Study *A Network Analysis Study, with an In-Depth Interview Component* which used snowball sampling as requested by the NACD and recommended by the EMCDDA (EMCDDA, 1997b).

Thank you to you and your readers for this opportunity to respond and debate.

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