Current Trends in Drug Abuse

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Current substance use in the U.S.
(age 12 and older, 2013)

- Any Drinking: 136.9 millions
- Binge Drinking: 60.1 millions
- Heavy Drinking: 16.5 millions
- ILLICIT DRUGS: 24.6 millions

First specific drug associated with initiation of illicit drug use among past year illicit drug initiates

![Pie chart showing drug use initiation](chart.png)

2.9 Million Initiates of Illicit Drugs


12th graders reporting lifetime use:

- **66% alcohol** (50% drunk)
- **44% marijuana**
- **20% any Rx drug**

The Point

In 2013, 16.3% of 12th-graders reported current (past-month) cigarette smoking, compared with 22.9% who reported current MJ use.

More kids smoke marijuana than smoke cigarettes

In 2013, 16.3% of 12th-graders reported current (past-month) cigarette smoking, compared with 22.9% who reported current MJ use.
Currently only 37% of 12-to-17 year-olds find smoking marijuana at least once a week to be harmful, compared to 55% in 2005 and 45% in 2011.

Marijuana

2.4 million NEW users in past year

6,600 NEW users each day


Adverse Health Effects of Marijuana Use

Nora D. Volkow, M.D., Ruben D. Baler, Ph.D., Wilson M. Compton, M.D., and Susan R.B. Weiss, Ph.D.

DOI: 10.1056/NEJMra1402309
Effects of short-term MJ use

• Impaired short-term memory (making it difficult to learn and retain information)
• Impaired motor coordination (heightening risk of injury and accidents)
• Altered judgment
• In high doses, paranoia and psychosis

Effects of long-term or heavy MJ use

• Addiction*
• Altered brain development*
• Poor educational outcome* (increased drop-out risk)
• Cognitive impairment* (lower IQ function among frequent adolescent users)
• Diminished life satisfaction and achievement*
• Symptoms of chronic bronchitis
• Increased risk of chronic psychotic disorders (including schizophrenia) in predisposed individuals

* the effect is strongly associated with initial MJ use in early adolescence
Clinical conditions with symptoms that may be relieved by MJ/cannabinoids:

- Epilepsy
- Glaucoma
- Nausea
- Multiple Sclerosis
- AIDS associated wasting syndrome
- Chronic pain
- Inflammation

Marijuana Wax
Marijuana:
The changing public opinion

58% of Americans favor legalization

Marijuana

Medical = 23 states, Wash DC

Recreational = Colorado, Washington, Alaska, Oregon, Wash DC, and Portland, ME.
Medical cannabis will be available to Minnesota residents whose health care provider certifies them to be suffering from conditions including:

- Cancer associated with severe/chronic pain, nausea or severe vomiting, or cachexia or severe wasting.
- Glaucoma.
- HIV/AIDS.
- Crohn’s Disease
- Tourette’s Syndrome.
- Amyotrophic Lateral Sclerosis (ALS).
- Seizures, including those characteristic of epilepsy.
- Severe, persistent muscle spasms, in characteristic of multiple sclerosis.
- Terminal illness, with a life expectancy of less than one year, if the illness or treatment produces severe/chronic pain, nausea or severe vomiting, cachexia or severe wasting.
Louisiana, Minnesota and New York exclude smoking from the list of allowable methods to use marijuana medicinally.

In 2011, marijuana was reported in over 455,000 emergency department visits in the U.S. Over 13 percent involved people between the ages of 12 and 17.

- anxiety attacks
- car crashes
- accidental injuries
- coingestants
Driving after marijuana use is more common than driving after alcohol use.

Past Month Usage by 12 to 17-Year-Olds, 2013

As of 2013:
- Legalized Recreational/Medical State
- Legalized Medical Marijuana State
- Non-Legalized Medical Marijuana State

SOURCE: SAMHSA.gov, National Survey on Drug Use and Health 2013 and 2014

MARIJUANA TALK KIT
http://drugfree.org/MJTalkKit

Helping parents talk with their teens about marijuana
Current trends:

Synthetic drugs

Can result in “excited delirium” which involves psychotic or violent behavior, kidney failure and an extreme increase in body temperature.

"These are really guinea-pig drugs, and the population that's now taking what they think is MDMA is consuming literally poisons.”

Jim Hall
Nova SE University
Ft Lauderdale, FL
Synthetic drugs

- Manufactured in China
- Sold online
- Labeled “not for human consumption”
- Unknown chemical compounds
- Unknown & unpredictable effects
- State and Federally banned
- Chemists develop new compounds
- DEA reports 5 - 6 new ones /month

“Bath Salts”
3,4-Methylenedioxymethcathinone

Substituted cathinones
- “Molly”
- Methylone
- MDPV
- FLAKKA

Effects like MDMA and amphetamines
“Research chemicals”

• Depicted as research chemicals to be used by fellow researchers

• Most contain phenylethylamines – long-acting hallucinogens

• 2-CB “Nexus”
  2C-E “Europa”
  2C-I/2 C-T-7,
  NBOMe.

Synthetic cannabinoids

Anxiety attacks
Agitation
Elevated heart rate
Elevated blood pressure
Vomiting
Paranoia
Hallucinations
Current trends:

Methamphetamine

Back up at the 2005 levels in many states
Minneapolis/St. Paul addiction treatment program admissions by primary substance problem: 2014

Total admissions = 21,928


Admissions to Minneapolis/St. Paul addiction treatment programs by primary substance problem (excluding alcohol): 2007 - 2013
Rx opioids and heroin

Each day, 46 people die from an overdose of prescription painkillers in the US.

Health care providers wrote 259 million prescriptions for painkillers in 2012.

**Source of pain relievers for most recent nonmedical use among past year users**

![Pie chart showing sources of pain relievers](chart1.png)

**Drug Deaths in United States 2000 - 2013**

![Graph showing drug deaths per 100,000 population](chart2.png)

Heroin-related deaths nearly tripled within 3 years and quadrupled in 13 years.

**Source:** 2011 and 2012 data from the 2012 National Survey on Drug Use and Health, Substance Abuse and Mental Health Services Administration, 2013.
Rates of prescription painkiller sales, deaths and addiction treatment admissions


Greatest Drug Threat Regionally in 2014 as reported by State and Local agencies

Source: National Drug Threat Survey, 2014
High availability of **heroin**

**PERCENTAGE OF NDTS RESPONDENTS REPORTING HIGH HEROIN AVAILABILITY IN THEIR JURISDICTIONS**

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**SOURCE:** Drug Enforcement Administration, National Drug Threat Survey 2007 - 2011, 2013

**NOTE:** The National Drug Threat Survey was not administered in 2012.


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High availability of **controlled prescription drugs**

**PERCENTAGE OF NDTS RESPONDENTS REPORTING HIGH CPD AVAILABILITY IN THEIR JURISDICTIONS**

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Prescription painkillers sold in Minnesota

SOURCE: 2011 data from Automation of Reports and Consolidated Orders System (ARCOS), U.S. Drug Enforcement Administration, 2012. Prescription opioid analgesics (painkillers) include: codeine, morphine, fentanyl (brand names: Sublimaze, Actiq, etc.), hydrocodone (brand names: Vicodin, Lortab), hydromorphone (brand names: Dilaudid, Palladone), meperidine, pethidine (brand name: Demerol), and oxycodone (brand names: Oxycodin, Percodan, Percocet).

Diversion Events per 100,000 Population: 1/2009 – 8/2013

SOURCE: Minnesota Department of Health based on an analysis of reports of thefts or losses of controlled substances to the DEA from April of 2005 to August of 2013.
Includes heroin and other opiates

OPIATE-RELATED ADDICTION TREATMENT ADMISSIONS IN MINNESOTA 2013

Minnesota drug overdose deaths surpass traffic deaths

Sources: Minnesota Department of Public Safety, Minnesota Department of Health
Opioid Overdose Prevention Toolkit

http://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit-Updated-2014/All-New-Products/SMA14-4742

- Increased illicit drug use
- Decrease in perceived harm associated with it
- Expanding accessibility & availability of drugs
- Rising public sentiment favoring legalization