

UC CAR Weekly Newsletter 11.5.2021

Welcome to the weekly newsletter from the Center for Addiction Research! Each newsletter includes highlights from addiction in the news topics, active funding opportunities offered by NIDA/NIAAA, and information about any new publications from CAR members. Please email Jen Rowe ([roweji@ucmail.uc.edu](mailto:roweji@ucmail.uc.edu)) to change your communication preferences. Thank you.

Thank you for your interest in the Center for Addiction Research - our mission is to accelerate scientific progress in the prevention and treatment of substance use disorders and their consequences by fostering research collaborations across: 1) UC departments, colleges, and centers including Cincinnati Children's Hospital Medical Center; 2) Local, regional, and state community and governmental partners; and 3) Other academic institutions and industry."



## **UC/ Regional News**

### **Drug overdose rates continue to climb in Oxford**

Five suspected fatal drug overdoses have occurred in Oxford since the beginning of the year, according to Police Chief John Jones. In addition to the five fatalities, approximately 35 non-fatal drug overdoses have been recorded in OPD records since the start of the year. The most recent of these occurred just two weeks ago on South Locust Street. Oxford's drug climate is a small glimpse...

### **Pharmacy chain operator Giant Eagle settles Ohio opioid lawsuits mid-trial**

Oct 29 (Reuters) - Regional pharmacy chain operator Giant Eagle Inc (GIAEG.UL) on Friday said it had agreed to settle lawsuits accusing it of fueling the opioid epidemic in several Ohio communities, including two counties that had taken it and three larger rivals to trial. The settlement came during the fourth week of a trial in federal court in Cleveland over claims by the Ohio counties of...

### **On Senate Floor, Portman Discusses the Worsening Addiction Epidemic in the United States**

**WASHINGTON, DC** – Today, Senator Portman came to the Senate floor to discuss the need to ensure we focus on the worsening addiction crisis in the United States. After making substantial gains in combatting addiction, the COVID-19 pandemic brought about a new wave of addiction in this country. In July, the [CDC released preliminary data](#) showing that more than 93,331 Americans died...

## **National News**

### **Wisconsin Prisoners To Only Get Photocopies Of Mail; New Policy Aims To Curb Drug Abuse.**

The [Wisconsin State Journal](#) (11/3, Hamer, 355K) reports that beginning December “6, all Wisconsin prisoners will only receive photocopies of their personal mail – not the originals – because of a new policy aimed at curbing the infiltration of paper laced with a dangerous drug.” The new “policy was implemented as a pilot at Fox Lake Correctional Institution in April, but is now being expanded to the entire state prison system because of its success in reducing overdoses and violent behavior associated with K2, or ‘spice,’ a mind-altering synthetic cannabinoid.” It is possible to lace paper with K2 and then smoke it, “which is how the drug was getting through the mail.” NIDA is mentioned.

### **Legalizing Marijuana Reduces ‘Race-Based Arrests,’ American Medical Association Study Finds.**

[Marijuana Moment](#) (11/2, Jaeger) reports, “States that legalize or decriminalize marijuana see ‘large reductions in race-based arrests among adults’ while those that maintain prohibition continue to experience ‘increases in arrest rate disparities,’ a new study” found. According to the article, “Researchers from Eastern Virginia Medical School and Saint Louis University found that states that legalized cannabis saw 561 fewer arrests per 100,000 black people and 195 fewer arrests for white people on average over that time period.” The findings were published in the Journal of the American Medical Association Health Forum last week. National Institute on Drug Abuse Director Dr. Nora Volkow “has repeatedly highlighted and criticized the racial disparities in drug criminalization enforcement.” [\[Article attached.\]](#)

### **Marijuana Legalization Is Not Associated With Increased Mental Illness Or Suicide, New Study Finds, Despite Opposition Claims.**

[Marijuana Moment](#) (10/29, Jaeger) reported, “Legalizing marijuana is not associated with an increased risk of mental illness or suicide, despite what some opponents of the policy change have argued, according to a new study.” The research actually “found that legalizing cannabis is associated with a 6.29 percent decrease in suicide among males aged 40-49.” According to the article, “The scientists are previewing their findings, but it’s still in the process of undergoing peer review and is set to be published in ‘a major scientific journal,’ one of the authors said.” National Institute on Drug Abuse “Director Nora Volkow also conceded in a recent interview that legalization has not led to increased youth use despite her prior fears.”

### **Senators’ Marijuana Amendment To Defense Bill Would Streamline Research.**

[Marijuana Moment](#) (11/2, Jaeger) reports, “Sens. Dianne Feinstein (D-CA) and Brian Schatz (D-HI) submitted an amendment to the National Defense Authorization Act

(NDAA) on Monday that would streamline the application process for researchers who want to investigate cannabis as well as manufacture the plant to be used in studies.” According to the article, “The proposal would also clarify that physicians are allowed to discuss the risks and benefits of marijuana with patients and require” HHS “to submit a report on those potential health benefits, as well one on barriers to cannabis research and how to overcome those obstacles.” National Institute on Drug Abuse Director Dr. Nora Volkow “expressed support for allowing scientists to access marijuana from state-legal retailers in a recent interview with Marijuana Moment.”

### **NIDA Tells Congress Drug Scheduling Is Hindering Cannabis Research.**

[CannabisNewsWire](#) (11/1) reports “marijuana’s federal classification as a Schedule I controlled substance has consistently been a thorn in the plant’s side, especially as more states have chosen to legalize it in various capacities.” In a report sent “to the House and Senate Appropriations Committee, the National Institute on Drug Abuse (NIDA) outlined the barriers researchers face when they try to study Schedule I substances such as cannabis, including the ‘administratively complex’ process they have to go through before they can receive authorization from the Drug Enforcement Administration.” It sometimes takes “researchers more than a year to obtain a new registration, the report said, and it can take quite a while to modify a registration as well.”

### **Teen Marijuana Use Is Not Increasing As More States Legalize, Another Federal Study Shows.**

[Marijuana Moment](#) (10/28, Jaeger) reports, “Youth marijuana use dropped in 2020 amid the coronavirus pandemic...as more states moved to enact legalization, a newly released” National Survey on Drug Use and Health survey conducted by the Substance Abuse and Mental Health Services Administration found. According to the article, “Past-year cannabis use for those aged 12-17 dipped from 13.2 percent to 10.1 percent from 2019-2020, the survey” found. Meanwhile, National Institute on Drug Abuse “Director Nora Volkow also conceded in a recent interview that legalization has not led to increased youth use despite her prior fears.”

### **Op-Ed: FDA’s Approval Of E-Cigarette “Both Welcome And Overdue.”**

In an op-ed for [National Review](#) (11/2, 798K), Guy Bentley, the Reason Foundation’s director of Consumer Freedom Research, writes, “The Food and Drug Administration is facing backlash from anti-vaping members of Congress and other public-health campaigners for officially authorizing an e-cigarette as ‘appropriate for the protection of public health.’” Bentley writes that the decision by the FDA “to approve the Vuse Solo e-cigarette last month is a historic one: It marks the first time that America’s leading public-health agency officially recognized the potential of e-cigarettes to help smokers quit.” Bentley writes, “The FDA’s decision is both welcome and overdue.”

### **UK May Be First Country To Prescribe E-Cigarettes To Fight Smoking Addiction.**

[CNN](#) (10/29, Woodyatt, 89.21M) reported, “The UK’s Medicines and Healthcare products Regulatory Agency (MHRA) is publishing updated guidance which could allow e-cigarette products to be prescribed for those who want to stop smoking, the UK government said in a statement on Friday.” If the NHS approved e-cigarette products, “it would mean England would be the first country in the world to prescribe e-cigarettes licensed as a medical product, the government said.” The government added, “E-cigarettes contain nicotine and are not risk free, but expert reviews from the UK and US have been clear that the regulated e-cigarettes are less harmful than smoking.”

The [Daily Mirror \(UK\)](#) (10/29, Padin, 439K) reported, “Health Secretary Sajid Javid has said that almost 64,000 people died due to smoking in 2019 and that the Government is determined to help people kick the habit and make England smoke-free by 2030.” He added that the new guidance “has the potential to tackle the stark disparities in smoking rates across the country.”

### **Some Physicians Would Be Uncomfortable Prescribing E-Cigarettes For Smokers.**

The [Daily Mail \(UK\)](#) (10/29, Allen, 4.11M) reported, “England is set to become the first country in the world to prescribe e-cigarettes to help smokers quit, it was announced this week.” However, “two in five nurses and doctors would feel uncomfortable recommending e-cigarettes to smokers, and one in six would never do so, according to a survey of more than 2,000 staff commissioned by Cancer Research UK just two years ago.” University of Oxford Professor of Behavioural Medicine Paul Aveyard, who was involved in the study, said, “The only clinicians we found are comfortable with it in recent research were those who give methadone or opioid replacements to heroin users, on the same principle that this is much safer.”

### **HHS Maintains Methadone Pay Rate.**

[Bloomberg Law](#) (11/2, Subscription Publication, 4K) reports the Department of Health and Human Services “is holding off on lowering government funding for the use of methadone to treat opioid use disorder, fearing rate changes could block Medicare recipients from crucial treatment during the Covid-19 pandemic.” In an interim final rule released Tuesday, the agency said that a “sudden and significant decrease in the rate for methadone” could impact access “at a time when overdose deaths are at an all-time high.”

### **Fentanyl Overdose Deaths Spike Across The Country, Trend Driven By Secret Labs And Fake Pharmacies.**

[KNSS-AM](#) Wichita, KS (11/1, Barry) reports, “Experts say some websites and dealers are selling accidental deaths by importing pills from secret labs in Mexico, China and India that lace opioids with fentanyl, making them cheaper and driving

overdoses to deadly new depths.” So many “unlicensed, unregulated online pharmacies and street dealers are cutting their drugs with fentanyl that experts say ingesting a pill is playing with fire.” National Institute on Drug Abuse Director Dr. Nora Volkow said that a rise in drug overdose deaths “has been going up and up and is not limited to a particular region or location, you can see it emerging around 2016.”

### **Op-Ed: US Has Entered “Synthetic Era” Of Drugs.**

In an op-ed for the [Los Angeles Times](#) (10/31, 3.37M), Sam Quinones, the author of “Dreamland: The True Tale of America’s Opiate Epidemic,” wrote that the US has “entered what I call the synthetic era of drugs – street dope made with chemicals; no plants involved.” Quinones explained, “Synthetic drugs of various kinds have been around for decades, but none have come close to the supply and threat of the two staples now coming up from Mexico: fentanyl and methamphetamine.” He added, “I suspect this era will be with us for some time because synthetic drugs make huge business sense to traffickers.”

### **A Modernized Drug Crisis Goes Unchecked.**

Columnist Pat Anson writes for [Pain News Network](#) (10/28) that CDC data indicate that the US “saw over 96,000 overdose deaths in the year ending in March, 2021.” Anson explains, “The main driver is illicit fentanyl, which now accounts for over 70,000 drug-involved deaths. Illicit fentanyl is separate from pharmaceutical fentanyl.” He adds that NIDA Director Dr. Nora Volkow told USA Today, “Most of fentanyl overdoses are in combination with other drugs like heroin, cocaine and methamphetamine. ... It is all over the place from the East Coast, West Coast and the center of the United States.”

### **San Francisco’s New Street Overdose Response Teams Race To Combat Fatal Overdoses.**

[NPR](#) (11/3, Westervelt, 3.69M) reports that the Street Overdose Response Teams (SORT), a “collaboration between [San Francisco’s] health and fire departments, aim to deliver a broad range of support and care directly following an overdose” utilizing naloxone. Recently, the frequent presence of fentanyl in other drugs, including non-opioids, has played a part in making San Francisco the home of the “highest per capita drug overdose death rates of any city in the U.S.”

### **Feds Announce New Harm-Reduction Strategy For Drug Users.**

The [Baltimore Sun](#) (10/28, Davis, 629K) reports federal officials visited “Baltimore Wednesday to promote harm-reduction strategies intended to reduce overdoses, speaking from Maryland’s hardest hit city after the state suffered its worst year for fatal drug and alcohol overdoses.” This is “part of a national effort to tackle the growing problem, and brought senior Biden administration officials and Baltimore Mayor Brandon Scott to the Healthcare for the Homeless building. The plan allows

federal funding to purchase fentanyl test strips and allocates about \$30 million toward overdose prevention programs and initiatives.” HHS Secretary Xavier Becerra said, “We want to address the full spectrum of drug use and addiction that can result in overdose and perhaps death. ... Our strategy seeks to eliminate barriers and advance equity and reflects the administration’s commitment to putting [the] very individuals who have struggled with addiction in positions of power.” The article mentions Dr. Miriam Delphin-Rittmon, administrator of HHS’ Substance Abuse and Mental Health Services Administration, and NIDA.

### **People With Substance Use Disorder Are More Vulnerable To COVID-19.**

In an episode of “Weekend Edition Sunday,” [NPR](#) (10/31, Stone, 3.69M) interviewed National Institute on Drug Abuse Director [Dr. Nora Volkow](#), who said that her agency “found was that, indeed, individuals with a substance use disorder are at a significantly higher risk of getting a COVID infection after they had been fully vaccinated.” According to NPR, “Volkow says their latest study finds the heightened risk of breakthrough infections cuts across a whole range of substances – tobacco, alcohol, cocaine, opioids and cannabis.” The researchers “suspect there are two major reasons. First, people with substance use disorders also have much higher rates of chronic health problems, including hypertension, diabetes and heart disease.”

### **Oregon’s Drug Decriminalization Law Touted By Progressive Lawmakers, Civil Rights Groups Who Want More States To Follow.**

The [Stateline](#) (11/3, Quinton, 2K) reports, “Progressive lawmakers and civil rights groups want more states to follow Oregon’s recent example and drop criminal penalties for carrying small amounts of heroin, cocaine or other drugs, and to spend more money on addiction recovery services.” Supporters of the Oregon law “say it’ll take time to implement such a large shift in policy, and are urging their critics to be patient.” However, Stateline says, “Oregon’s experience shows that it’s easier to eliminate criminal penalties than to ramp up behavioral health services and get more people to use them.”

### **Awakn Life Sciences Studying Ketamine As Potential Remedy For Compulsive Behaviors, Especially Gambling Addiction.**

Contributor Zack Jones writes in [Forbes](#) (11/3, 10.33M) that “few true solutions exist to aid those looking for help” for their struggles “with some form of gambling abuse,” but “research is currently being conducted by a prominent biotech company to explore ketamine as a potential remedy for compulsive behaviors and more specifically gambling addiction.” A research team at Awakn Life Sciences “has announced their plans to conduct the first clinical examination of ketamine and gambling addictions.”

## **Biomarker Identified For Early Antidepressant Effects Of Deep Brain Stimulation.**

[Genetic Engineering & Biotechnology News](#) (11/3, Sarkar, 189K) reports, “A collaborative clinical trial led by scientists from Emory University and the Icahn School of Medicine at Mount Sinai has identified a biomarker that indicates the efficacy of deep brain stimulation (DBS) in patients with treatment-resistant major depressive disorder.” The study “reports brief exposure to therapeutic DBS at the time of implantation surgery induces a quick and consistent change in the electrophysiological state of the brain state that can be measured as a decrease in ‘beta power’ at the site of stimulation.” The “decrease in beta power correlates with an improvement of depressive symptoms in patients after the surgery, without additional stimulation, indicating decreased beta power is a biomarker that may be used for optimizing DBS treatment.” The trial “is part of an ongoing National Institutes of Health (NIH) BRAIN Initiative-funded grant.”

## **Funding Opportunities**



### **GRANTS & FUNDING**

NIH Central Resource for Grants and Funding Information

[RFA-AT-22-004](#)

[HEAL Initiative: Pragmatic and Implementation Studies for the Management of Sickle Cell Disease Pain \(UG3/UH3, Clinical Trials Optional\)](#)

[RFA-AT-22-005](#)

[HEAL Initiative: Sickle Cell Disease Pain Management Trials Utilizing the Pain Management Effectiveness Research Network Cooperative Agreement \(UG3/UH3, Clinical Trial Required\)](#)

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