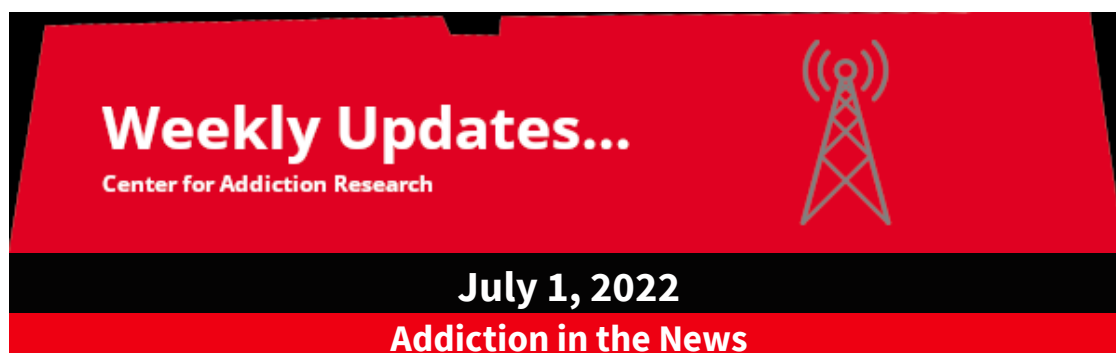


Welcome to the weekly newsletter from the Center for Addiction Research! Each newsletter includes highlights from addiction in the news topics, active funding opportunities offered by NIDA/NIAAA, and information about any new publications from CAR members. Please email Jen Rowe ([roweji@ucmail.uc.edu](mailto:roweji@ucmail.uc.edu))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

### **College of Medicine 2022 Faculty Mentoring Awards**

Congratulations to Teresa M. Reyes, PhD, Professor, Department of Pharmacology & Systems Physiology on receiving the 2022 Basic Science Faculty Mentoring Award. Mentoring among faculty at UC College of Medicine is a crucial element in sustaining a vital faculty community, promoting faculty development, and increasing faculty retention. The purpose of the Faculty-to-Faculty Mentoring Award is to recognize the outstanding efforts of one clinical and one basic science faculty member for their mentorship of other faculty members. These prestigious awards acknowledge the time sacrifice and dedication faculty mentors devote to foster the career development and academic success of colleagues in the areas of research, education, service, and clinical practice. "My dedication to mentoring comes from a deep appreciation for the many mentors that have supported me in my career development by providing essential advice and training. I hope that by sharing my own experiences, I can help "demystify" aspects of a scientific career. There is great joy in celebrating the success of fellow faculty and trainees, as each individual finds their own path."-Teresa M. Reyes, PhD **(CAR member, Dr. Reyes)**

### **Spatial clustering of heroin-related overdose incidents: a case study in Cincinnati, Ohio**

<https://doi.org/10.1186/s12889-022-13557-3>

*Background*

Drug overdose is one of the top leading causes of accidental death in the U.S., largely due to the opioid epidemic. Although the opioid epidemic is a nationwide issue, it has not affected the nation uniformly.

### *Conclusions*

Our study showed that the opioid epidemic disproportionately affected Cincinnati. Multi-phased spatial clustering models based on various data sources can be useful to identify areas that require more policy attention and targeted interventions to alleviate high heroin-related overdose rates.

Choi, J.I., Lee, J., Yeh, A.B. *et al.* Spatial clustering of heroin-related overdose incidents: a case study in Cincinnati, Ohio. *BMC Public Health* **22**, 1253 (2022).  
<https://doi.org/10.1186/s12889-022-13557-3>

### **How Ohio's medical schools are battling the opioid epidemic**

CLEVELAND — According to the CDC, 44 people die every day from overdoses involving prescription opioids. One would think that over the last decade, future doctors in medical school would learn about the dangers of substance use disorders (SUD) and the opioid epidemic, but you'd be wrong. The official curriculum didn't start in Ohio until the fall of 2020. Before we explain what took so long, we need to look at the history of the opioid...

### **Northern Kentucky county lands on state list for highest overdose death rates**

GALLATIN COUNTY, Ky. (WKRC) - A new report from the Kentucky Office of Drug Control lists a local county among the top five in the state for overdose death rates. For a small county like Gallatin, law enforcement says solving a drug problem comes with unique complications. "They're exploring with different things and different combinations, because we are seeing where people are having seizures, but not related to opioids," said...

### **Montgomery County creates text alert system to combat opioid epidemic**

DAYTON, Ohio — In 2020, there were more than 5,000 drug overdose deaths in Ohio, according to the Ohio Department of Health, a 25% increase from 2019. The statistic is why health departments and other organizations are working on efforts to help prevent as many deaths. Dayton Emergency Medical Technician Amy Dunkin lost her brother to addiction in 2014. His death fueled her mission to help others. "We respond to overdoses in...

### **Ohio County Considers Innovation Fund to Fight Opioid Epidemic**

One county leader wants to form a \$10 million Opioid Innovation Fund to support and test new strategies for combating the opioid epidemic, but County Council is divided over whether it's needed and how it might work. (TNS) — Cuyahoga County Executive Armond Budish wants to form a \$10 million Opioid Innovation Fund to support and test new strategies for combatting the opioid epidemic, but county council is divided over whether...

### **Meyer: Steps are needed to protect Ohioans from deadly fentanyl**

The monster, fentanyl, struck again. Two bright, young Ohio State University students appear to have joined the heart-breaking list of Ohioans who died by accidental overdose. Although the investigation is uncomplete, it appears that someone laced Adderall, a drug intended to treat attention deficit disorder, with the synthetic opioid fentanyl — a drug up to 100 times stronger than morphine. It may be that these students took Adderall...

### **Survey Aims to Create Holistic Picture of IN Addiction-Recovery Needs**

The State of Indiana wants to learn more about Hoosiers' experiences with substance-use disorder and addiction-recovery services. Administered by the state's Division of Mental Health and Addiction (DMHA), the "Recovery Capital Index" will take a holistic look at the addiction-recovery resources available to people across the state, to help determine whether further resources are needed to ensure patients stay on the path...

## **National News**

### **House Committee Leaders Tackle Marijuana Research, Kratom, Impaired Driving And More In New Spending Measures.**

[Marijuana Moment](#) (6/29, Jaeger) reports, "House Appropriations Committee leaders have released yet another set of spending bill reports that touch on marijuana and other drug policy issues like kratom, with this latest batch focusing on cannabis research barriers, impaired driving and preventing use by youth and pregnant people." The reports cover funding for HHS and other agencies. The report "says it appreciates that the National Institute on Drug Abuse (NIDA) has submitted documentation outlining the research implications of the strict scheduling of certain substances," but "it notes there are still challenges such as the fact that scientists are still not able to access cannabis from dispensaries." The NIH and FDA are mentioned.

### **Study Shows Recreational Marijuana Use Tied To Increased Risk Of Hospitalization, Emergency Room Care.**

[CNN](#) (6/27, LaMotte, 89.21M) reports "using recreational marijuana is associated with a higher risk of emergency room care and being hospitalized for any reason, a new study has found." The study, which was "published Monday in the journal BMJ Open Respiratory Research, looked at national health records data for over 30,000 Ontario, Canada, residents between the ages of 12 and 65 over a six-year period." When compared to individuals "who did not use marijuana, cannabis users were 22% more likely to visit an emergency department or be hospitalized, the study revealed." Respiratory issues "from smoking weed was the second leading reason users seek emergency care, the study found."

### **What A National Medical Marijuana Registry Could Mean For Those On The List.**

Tom Gaffey wrote in the [Fresh Toast](#) (6/24), “The National Institute on Drug Abuse (NIDA) has applied to create a national database of medical marijuana users in order to understand more about marijuana and how it is used to treat medical conditions in America.” The database “would be the most broad registry of its kind, and could help generate significant new data on the subject.” However, Gaffey said, “a medical marijuana patient may see this new registry and feel a bit uneasy.” Gaffey wrote, “This database could cover a broad range of medical cannabis users, but individuals have no need to worry about their medical privacy in this matter.” The database is voluntary, and “medical marijuana records are protected by HIPAA.”

### **California Wants Cannabis Products To Have Labels Warning Of Mental Health Risks.**

[Kaiser Health News](#) (6/30) reports “many scientific studies have linked marijuana use to an increased risk of developing psychiatric disorders, including schizophrenia.” Indeed, “the risk is more than four times as great for people who use high-potency marijuana daily than for those who have never used, according to a study published in *The Lancet Psychiatry* in 2019.” In fact, “one study found eliminating marijuana use in adolescents could reduce global rates of schizophrenia by 10%.” California physicians and lawmakers “want cannabis producers to warn consumers of this and other health risks on their packaging labels and in advertising, similar to requirements for cigarettes.”

### **Study: Teen Cannabis Use Rose, Mental Health Declined In States With Fewer Legal Restrictions.**

The [Center Square \(IL\)](#) (6/28, Harper) reports, “States that have legalized marijuana have seen increasingly strong THC products and a rise in mental health issues among teenagers, a newly released nationwide study reports.” The study, authored by the Drug Free America Foundation, “reports on ‘an association between adolescent cannabis use, the use of high potency cannabis products, and increased risk of psychosis.’” Marijuana use “‘affects brain systems that are still maturing through young adulthood, so regular use by teens may have negative and long-lasting effects on their cognitive development, putting them at a competitive disadvantage and possibly interfering with their well-being in other ways.’” Nora D. Volkow, director National Institute on Drug Abuse, said in the agency’s research report on the issue.” The NIH is mentioned.

### **Senate Intel Committee Advances Measure Allowing IC To Hire Former Marijuana Users.**

[CNN](#) (6/23, Lillis, 89.21M) reports the Senate Intelligence Committee has advanced “legislation that would allow US intelligence agencies to hire applicants who have used marijuana in the past, according to committee aides.” Language included in the “committee’s annual authorization bill for the intelligence community – which

passed unanimously on Wednesday – would prohibit intelligence agencies from discriminating against job applicants based solely on past use of the drug, which is now legal for recreational purposes in 19 states and Washington, DC.” Sen. Ron Wyden (D-OR), the measure’s sponsor, called it “a common-sense change to ensure the IC can recruit the most capable people possible.” National security officials have “long said that the lifetime prohibition on marijuana use has limited the pool of qualified candidates for key roles, in particular as attracting and retaining tech and cybersecurity talent has increasingly become a priority for the community.”

### **Congressional Leaders Push Marijuana Protections For Athletes And Federal Workers In New Spending Legislation.**

[Marijuana Moment](#) (6/24) reported, “House Appropriations Committee leaders have included even more marijuana provisions in newly released spending bills and attached reports, including a novel section that encourages sports regulators to push international officials to ‘change how cannabis is treated’ when it comes to suspending athletes from competition over positive tests.” A bill specifically focused on HHS spending “contains a lengthy section to change the names of various federal agencies and programs to swap out stigmatizing language for more neutral titles dealing with drugs and alcohol. For example, it proposes to change the ‘National Institute on Drug Abuse’ to the ‘National Institute on Drugs and Addiction.’” It also proposes changing the name of the Substance Abuse and Mental Health Services Administration to “Substance Use And Mental Health Services Administration.” The FDA is mentioned.

### **UN Report Says Legalization And COVID Lockdowns Increased Cannabis Use.**

[Reuters](#) (6/26) reports that on Monday, a UN report said “places including U.S. states that have legalized cannabis appear to have increased its regular use, while COVID lockdowns had a similar effect, raising the risk of depression and suicide.” The report also stated that “cannabis legalization appears to have accelerated the upwards trends in reported daily use of the drug.” And “the proportion of people with psychiatric disorders and suicides associated with regular cannabis use has increased.”

### **Hospital-Based Smoking Cessation May Be More Effective Than Telephone Treatment, Researchers Say.**

[PatientEngagementHIT](#) (6/29, Rodriguez) reports, “A healthcare system model that offered hospital-based smoking cessation interventions to patients discharged from a hospital was more effective than a telephone quitline at driving patient engagement in treatment, a [study](#) published in JAMA Internal Medicine found.” The Mass General-led study of more than 1,400 adult smokers “compared two models for delivering tobacco cessation treatment after discharge, both offering tobacco cessation medication and counseling by telephone for up to three months.” The hospital-based model, Transitional Tobacco Care Management (TTCM), “provided

patients with eight weeks of nicotine replacement therapy (NRT) and seven automated calls with a hospital-based counselor call-back option.”

### **Primary Care Intervention Significantly Improves Smoking Cessation.**

[Healio](#) (6/27, Marabito, 40K) reports, “primary care clinics that implemented an outreach intervention had a greater proportion of patients who converted from current to former smokers than clinics without the intervention,” investigators concluded in a 6,894-patient study that “evaluated the success of the Comprehensive Tobacco Intervention Program...at six adult primary care clinics in Madison, Wisconsin.” The [findings](#) of the National Cancer Institute-funded study were published online May 28 in the journal Preventive Medicine.

### **How We Treat Opioid Abuse In The LGBTQIA+ Community Is Changing.**

[Everyday Health](#) (6/28, Sullivan, 331K) reports, “Last year, deaths due to drug overdoses topped 100,000 for the first time in history.” Furthermore, “people who identify as part of the LGBTQIA+ community are at a disproportionately higher risk for substance use disorders, according to The Fenway Institute.” However, research “has also shown that tailored treatment services that factor in minority stress by acknowledging the impact of stigma, have the potential to produce more effective results in people who are marginalized.” SAMHSA suggests a trauma-informed care approach. The article discusses this and other ways to reach the LGBTQIA+ community. The NIH and Health Resources and Services Administration are mentioned.

### **Jails, Prisons Not Safe From Overdose Deaths As Opioid Crisis Worsens.**

[Kaiser Health News](#) (6/29, Dawson) reports, “As the opioid crisis ravages America, overdose deaths are sweeping through every corner of the nation, including jails and prisons.” While “criminal justice experts suggest that decades of using the legal system instead of community-based addiction treatment to address drug use have not led to a drop in drug use or overdoses,” the “rate of drug deaths behind bars in supposedly secure facilities has increased.” The increase “comes amid the decriminalization of cannabis in many parts of the country and a drop in the overall number of people incarcerated for drug crimes, according to the Pew report.”

### **Supreme Court Rules In Favor Of Physicians Challenging Convictions For Overprescribing Opioids.**

The [Washington Post](#) (6/27, Marimow, 10.52M) reports that on Monday, the Supreme Court “made it more difficult for the government to prosecute [physicians] who overprescribe drugs, unanimously setting aside the convictions of two physicians accused of operating opioid ‘pill mills.’” The court was “deciding how to distinguish valid medical conduct from illegal overprescription of highly addictive drugs like opioids,” and “held that the government must prove beyond a reasonable doubt that the [physician] knew or intended to prescribe the drugs in an unauthorized manner.”

### **Opinion: NYC's "Let's Talk Fentanyl" Campaign Desensitizes People To Dangers Of Illicit Drugs.**

Kevin Sabet, CEO of Smart Approaches to Marijuana and the Foundation for Drug Policy Solutions, says in an opinion piece for the [Wall Street Journal](#) (6/29, Subscription Publication, 8.41M) that the New York City Health Department's "Let's Talk Fentanyl" campaign, which made headlines for its posters that promoted illicit drug use, desensitizes people to the dangers of drug use by claiming that such substances empower users. Sabet writes that the desensitization will lead to an increase in overdoses.

### **White House Highlights Framework Of Drug Policies Aimed At Combatting Opioid Epidemic.**

The [Arizona Republic](#) (6/27, Svirnovskiy, 1.05M) reports, "A top White House official touted to Congress the widespread use of Naloxone and reiterated a need for targeted border funding Monday while explaining the strategies President Joe Biden's administration is taking to combat the nation's opioid epidemic." Dr. Rahul Gupta, "the White House director on drug policy...highlighted a framework of policies aimed at reducing the supply of illegal substances, increasing the reduction of treatment recovery and fundamentally changing the way the criminal justice system treats substance abuse disorders. It's a framework that, if implemented fully, could save up to 164,000 lives over the next three years, Gupta said."

### **Eli Lilly, NIDA Will Explore The Use Of Early-Phase Therapies As Addiction Treatments.**

[Indiana Public Media](#) (6/28, Benson) reports, "Eli Lilly has partnered with the National Institute on Drug Abuse to test the possibility of some early-phase therapies to be repurposed to treat opioid use disorder." The company "has given the National Institute on Drug Abuse samples of four molecules originally studied by the pharmaceutical company for psychiatric disorders and diabetes, according to Senior Director of Early Phase Alliance Management Linda Rorick-Kehn." Research done by Lilly "suggests they may help decrease anxiety, improve mood, and increase satiation, she said."

### **Columnist Says In Order For New National Drug Control Strategy To Succeed, Laws Need To Change.**

The [New York Times](#) (6/24, Interlandi, Eid, 20.6M) columnist Jeneen Interlandi says, "More people are dying of drug overdoses in the United States today than at any point in modern history." Addiction "is as enduring a part of the human experience as cancer, diabetes or Alzheimer's." Recently, "the Office of National Drug Control Policy unveiled a new, 'whole-of-government approach to beat the overdose epidemic.' The National Drug Control Strategy, as it's called, includes billions in new funding for evidence-based treatment initiatives, a renewed commitment to combating drug traffickers and a plan to 'make better use of data to guide all these



efforts.” In order for the strategy to succeed, Interlandi says, “Laws will have to change: Some drug-war-era statutes need to be repealed. Others, including those that focus on equal insurance coverage for behavioral health conditions, need to be better enforced. Agencies will have to be restructured so that false distinctions between addiction, mental illness and the rest of medicine are finally, fully erased. And funding streams will have to be reworked so that they support rather than impede evidence-based practices.”

### **More Proposed For Federal Research.**

[GenomeWeb](#) (6/27) reports, “Congressional spending committees are seeking to increase federal research funding for 2023, according to Science.” For example, the NIH “would receive more than \$47.4 billion in funding, which Science notes is a \$2.5 billion increase to its budget.” This “includes budget increases for specific programs like the Cancer Moonshot effort.” Additionally, NIH would “receive \$2.75 billion for the new Advanced Research Projects Agency for Health (ARPA-H) group within NIH.”

### **Pathfinders Recovery Center Offers Men’s Only Rehab.**

The [Plymouth \(IN\) Pilot-News](#) (6/23, 18K) reports on Pathfinders Recovery Center, a men’s only rehabilitation facility in Arizona. The article says, “Substance abuse affects all genders, but there is a noticeable divide. According to the National Institute on Drug Abuse (NIDA), men and boys over the age of 12 are 11.5% more likely to be victims of substance abuse than women and girls over the age of 12 who are experiencing problems at a rate of 6.4%.” For this reason, “an all-male center has certain benefits.”

### **Study Finds Physicians Less Likely To Prescribe Painkillers After Long Shift.**

[Forbes](#) (6/28, Forster, 10.33M) contributor Victoria Forster says, “Tired doctors have less empathy for patients in pain and are less likely to prescribe painkillers, according to a new study.” In the study, “researchers asked a group of physicians about 2 theoretical clinical scenarios where patients in pain. ... Overall, the doctors who had just started their working days were more likely to show empathy for the patients than those who had just finished a 26 hour shift.” The [study](#) was published in the journal Proceedings of the National Academy of Sciences.

### **House Committee Considers Bill That Would Encourage Diversity For Clinical Trials.**

[Bloomberg Law](#) (6/29, Baumann, Subscription Publication, 4K) reports behind a paywall that “the House Energy and Commerce Committee’s health panel Wednesday will consider a bill (H.R. 7845) that would require researchers to submit ‘clear and measurable goals’ in their grant applications to recruit and retain clinical trial participants who reflect the race, ethnicity, age, and sex of the patient or general US population. The bill would apply to clinical trials funded by the National Institutes of Health.”



### **Commentary Says Telehealth Apps Need To Be More Accessible For All Peoples.**

Contributor Gus Alexiou writes in a [Forbes](#) (6/29, Alexiou, 10.33M) op-ed, “The Covid-19 pandemic reshaped the healthcare landscape in a myriad of ways – mainstreaming multiple elements that were previously non-existent or on the periphery,” such as face masks and vaccination websites. However, “the most seismic shift has undoubtedly been the explosion in telehealth in the form of remote medical consultations.” Alexiou says, “Unfortunately, the very group of people with the most to gain from telehealth, namely the one in five American citizens living with a disability, risk being shut out of the healthcare revolution due to the proliferation of inaccessible apps and websites providing these services.” He says “for people living with disabilities and long-term health conditions, inaccessible digital healthcare is not simply a moderate inconvenience – it can end up severely diminishing a vulnerable individual’s quality of life and potentially shaving years off it.”

### **HHS Unveils New Guidelines For Patient Privacy.**

The [Wall Street Journal](#) (6/29, Mathews, Subscription Publication, 8.41M) reports on Wednesday, HHS’ Office for Civil Rights unveiled new guidelines for patient privacy in an effort to outline federal protections for medical data which could be used to investigate possible violations of state abortion bans. This move comes after the Supreme Court overturned Roe v. Wade, prompting some states to further limit or ban abortions. The article mentions HHS Secretary Xavier Becerra. [See summary at: <https://www.hhs.gov/about/news/2022/06/29/hhs-issues-guidance-to-protect-patient-privacy-in-wake-of-supreme-court-decision-on-roe.html>]

[Bloomberg Law](#) (6/29, Stein, Subscription Publication, 4K) reports physicians “and other health-care providers cannot disclose information about a patient’s pregnancy or abortion unless state laws or a court require them to do so, the HHS said Wednesday.” Physicians “have expressed concerns about their obligation to disclose patient’s medical information under the Health Insurance Portability and Accountability Act following the US Supreme Court’s decision in Dobbs v. Jackson Women’s Health.” Some “states have laws requiring disclosure to law enforcement of any injury that appears related to a criminal offense.”

[CNN](#) (6/29, Langmaid, 89.21M) reports this new guidance “addresses the circumstances under which the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule permits disclosure of [protected health information] without an individual’s authorization,” HHS said in a news release. Under “the guidance, providers may share protected health information with law enforcement and without a patient’s consent ‘in narrow circumstances.’”

### **The Imprisoned Are Living With Mental Illness. States Are Ill-Equipped To Help.**

The [Pennsylvania Capital-Star](#) (6/23) reports, “More than half (56 percent) of the people now in America’s state prisons have reported mental health issues, but only a handful ever receive treatment, underlining the need for states to shore up their safety net programs, new data shows.” Furthermore, according to the research, “A

staggering half (50 percent) of people in state prisons who have a history of substance use disorder treatment also have a history of one or more mental health conditions. This is disproportionate overlap: According to the National Institute on Drug Abuse, 38 percent of U.S. adults with substance use disorder also had one or more mental health disorders.”

### **Congressional Leaders Call For Psilocybin Policy Review, Hemp As A Plastic Alternative And Marijuana Product Research Access.**

[Marijuana Moment](#) (6/27, Jaeger) reports, “House Appropriations Committee leaders are calling for a federal review of psilocybin policy, utilizing hemp as an alternative to Chinese plastics and letting researchers study marijuana from dispensaries in new spending bill reports.” Meanwhile, “several GOP members are complaining about separate language on freeing up cannabis advertising – but an amendment to strike those protections was defeated in the panel.” According to the article, “The report for the Commerce, Justice, Science, and Related Agencies (CSJ), released on Monday, contains a novel section that specifically concerns psilocybin, calling for a Government Accountability Office (GAO) analysis on barriers to state, local and tribal programs for the psychedelic.” The FDA and NIDA are mentioned.

### **PA House Passes Bill Banning Sale Of Kratom To Minors.**

[WBRE-TV](#) Wilkes-Barre, PA (6/28, Glowacki) reports, “A bill that would ban the sale of Kratom, a hallucinogenic drug, to individuals under 18 passed through the Pennsylvania House of Representatives with a 197-3 vote on Monday.” Kratom “is a drug derived from a tropical tree from Southeast Asia. The leaves of this tree contain compounds that could cause hallucinatory effects and the National Institute of Drug Abuse (NIDA) said it produces opioid-like effects.” The FDA “hasn’t defined Kratom as a controlled substance,” but “it is listed as a ‘Drug of Concern’ and said some users have become addicted to the drug.”

### **Will Psychedelics Revolutionize Mental Health Treatment?**

[Medium](#) (6/29, Massner, 893K) reports, “Mental health illnesses are very common; in the United States alone, one in five adults live with a mental illness (National Institute of Mental Health, 2020).” Though “many mental health patients can cope reasonably well with daily situations, that may not be the case for people affected by severe disorders.” During “the search for revolutionary mental health treatments, scientists have been studying psychedelics and have a positive outlook on their results.” Out of all “the compounds with therapeutic value, psilocybin appears to be the most promising.”

### **Advocates For Legalizing Psilocybin, Psilocin In Colorado May Have Enough Signatures To Put Issue On November Ballot.**

The [Denver Post](#) (6/27, Ricciardi, 660K) reports Colorado “residents could be voting in November to legalize psilocybin and psilocin, the psychoactive compounds in magic mushrooms, for use in therapeutic settings after advocates said they’ve

collected enough signatures to qualify the question for the ballot.” On Monday, “Natural Medicine Colorado, the campaign behind the legalization effort, submitted a petition with 222,648 signatures supporting Initiative 58, also known as the Natural Medicine Health Act, to the Secretary of State’s office.” According to the Post, “The state still needs to verify the signatures, so it’s not a done deal yet, but given it requires about 125,000 valid signatures, Natural Medicine Colorado believes the question will be in front of voters this fall.”

### **Psychedelic Society Promotes Psilocybin-Assisted Therapy.**

The [Taos \(NM\) News](#) (6/22, Plant, 30K) reported, “A group of physicians, research scientists, academics and activists is laying the groundwork for state legislation that would allow psilocybin-containing mushrooms to be used for psychedelic-assisted therapy in a clinical setting.” According to the article, “early studies demonstrate that psilocybin may be beneficial for those suffering from depression, anxiety, post traumatic stress disorder (PTSD) and substance use disorders syndrome (SUDS).” This “movement is being led by a new advocacy group called the New Mexico Psychedelic Science Society.” The NIDA and the FDA are mentioned.

## **Funding Opportunities**



[PAR-22-201](#)

[NIDA Program Project Grant Applications \(P01 Clinical Trial Optional\)](#)

[RFA-DA-23-018](#)

[Enabling SUD Digital Therapeutics Research to Improve Payor Adoption \(R44- Clinical Trial Only\)](#)

[RFA-DA-23-017](#)

[Therapeutic Development of Psychoplastogenic Compounds for Substance Use Disorders \(R43/R44 - Clinical Trials Not Allowed\)](#)

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