

# **Consequences to Current Approaches to Drug Policy**

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# Overview

Review of:

- Marijuana
- The Opioids Crisis: What does it look like now?
- Approaches in the U.S. to addressing the crisis: the move to Harm Reduction
- Possible approaches/solutions

# Substance Use Disorders in America Pre/Post-COVID-19

PAST YEAR, 2019, 2022 NSDUH, 18+

**2019:**  
Among those with SUD:  
**2 IN 5 (38.5% or 7.4M)**  
**3 IN 4 (73.1% or 14.1M)**  
**1 IN 9 (11.5% or 2.2M)**

**2022** ↓  
illicit drugs (56% 27.2M)  
alcohol (61% 29.5M)  
illicit drugs/alcohol (17% 8.2M)

**7.7%**  
**(19.3 M)**  
People aged 18 or older had a substance use disorder (SUD)  
**NSDUH 2022 SUD:**  
**17.3% (48.7M)**

**3.8%**  
**(9.5 M)**  
People 18 or older had BOTH an SUD and a mental illness  
**2022**  
**8.4%**  
**17M**

**125% increase in SUD prevalence During and post-COVID** ↑



NSDUH, 2022

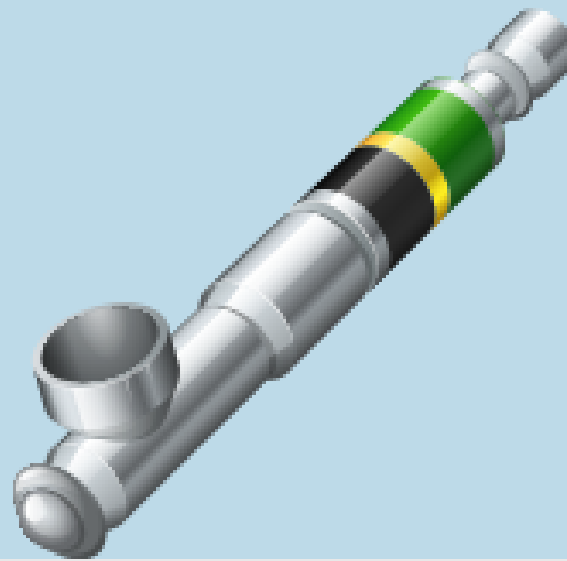
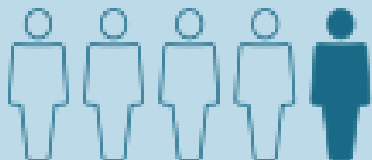
**61.9 million**  
(22%) used marijuana  
in the past year.

**28% increase from 2019**

**22.7 million vaped marijuana in the past year.**

**7.4 million**  
**About 1 in 5**

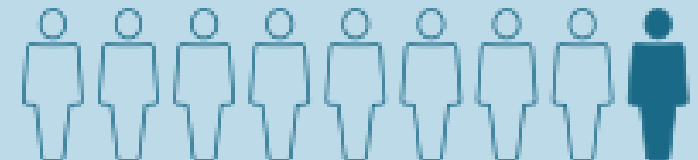
people aged 12 to 20 used  
marijuana in the past year.



**4.3 million**  
**About 1 in 9**

people aged 12 to 20 vaped  
marijuana in the past year.

**11%**



# Marijuana: Not the Drug of the 70s, 80s, and 90s

- THC content: increased from 4% (1990s) to 12% (2014) (Ehsoly MA et al. 2016) and now  $\geq 20\%$  (<https://wayofleaf.com/blog/average-thc-content-over-the-years>)
- Extracts: THC concentration average range: 39-70%, can exceed 80% (NIDA.gov, 2020)
- Addiction liability: 10-20% of users develop use disorders (Volkow et al. 2016)
- NSDUH (2018, 2019) shows **association of marijuana use with depression, suicidality, serious mental illness/psychotic illness**
- Use in adolescence: increased risk for **psychotic disorders** in adulthood and linked with **suicidal ideation or behavior** (D'Souza et al, 2016; McHugh et al, 2017).
- Failure in developmental milestones of adulthood: increased school dropout, lack of degree attainment, welfare dependence (Silins, et al. 2014)

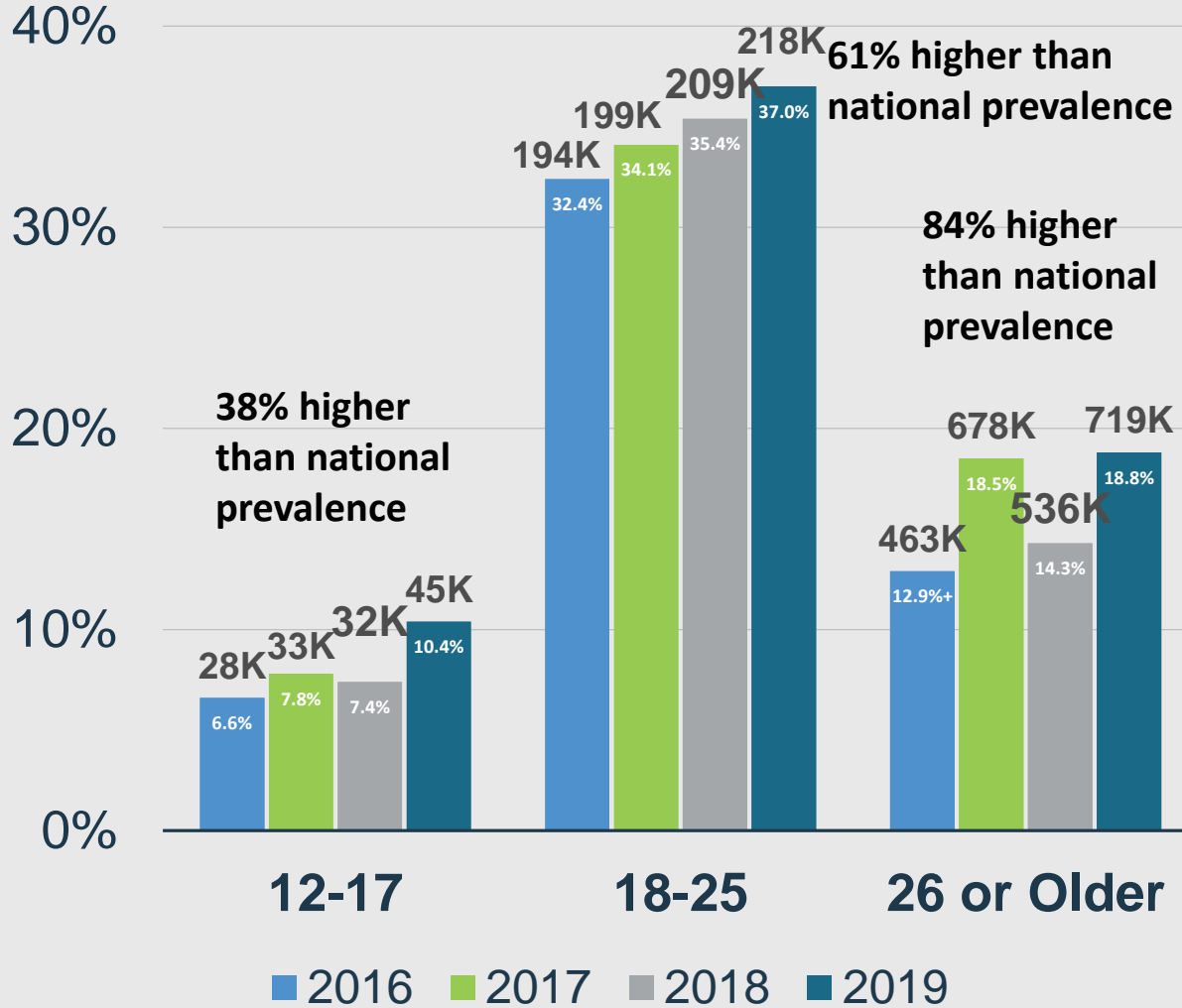
# Comparison of Recent History of Marijuana Use in the United States vs. Colorado



## United States



## Colorado



PAST MONTH, 2016-2019 NSDUH, 12+

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.

# Cognitive Deficits Associated with Long Term Cannabis Use

- Cohort study n=1037 of individuals born in 1972-3 and followed to age 45 (94% retention); assessed for cannabis use/disorder at ages 18, 21, 26, 32, 38, and 45
- Neuropsychological assessment and hippocampal volume measured at age 45
- Findings:
- Long term cannabis use associated with:
  - IQ drop (5.5 points)
  - poorer learning and slower processing speed
  - memory and attention problems

(Meier MH, et al., AJP, 2022)

# Marijuana Use and Pregnancy

Pregnant Women 15-44y	No use past year	Any use Past year
	%	%
Cocaine	0.3	8.5+
Pain Relievers	1.4	17.9+
Alcohol (Past Mo.)	6.1	27.3+
Binge Alcohol Use	3.1	13.7+
Suicidal Thoughts	3.3	14+
Suicide Plans	0.7	7.3+
Suicide Attempts	0.8	5.4+
SMI	3.2	14.3+
MDE	6.6	14+

**Increased risk for:**  
**Stillbirth**  
**Preterm birth**  
**Low birth weight**  
**NICU admits**  
**In exposed children:**  
**ADHD**  
**Poor cognitive function**



# Today: Marijuana Proposed for Schedule III



- What can we expect:
- Push to legalize nationally and place on Schedule III will further increase cannabis use
- Regulation is needed:
- Labelling of THC content in all cannabis products
- Federal Commission to study and make recommendations regarding high THC content extracts
- More federal funding for prevention
- Stop marketing to our children



# HEMP Products



## FDA Warning

- Not evaluated or approved
- Marketed in ways that put public health at risk
  - Adverse events reported
    - Psychoactive and intoxicating effects
  - Use of potentially harmful chemicals in extraction

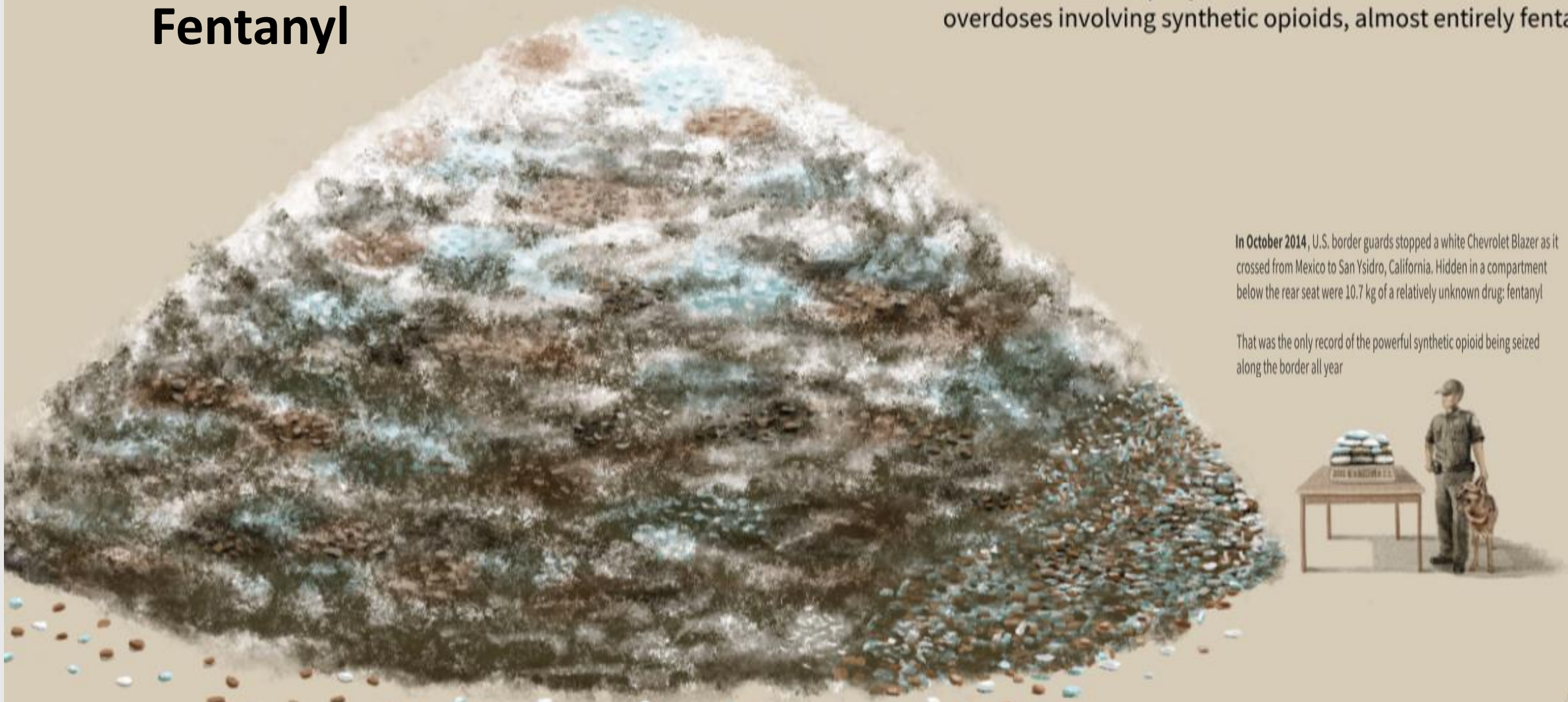
# The Opioids Crisis: Fentanyl

2022

Fast forward just eight years. Around 8,400 kg of fentanyl were seized along the border in 2022. In the intervening years, more than 325,000 people died in the United States from overdoses involving synthetic opioids, almost entirely fentanyl

In October 2014, U.S. border guards stopped a white Chevrolet Blazer as it crossed from Mexico to San Ysidro, California. Hidden in a compartment below the rear seat were 10.7 kg of a relatively unknown drug: fentanyl

That was the only record of the powerful synthetic opioid being seized along the border all year



# Opioid Use Disorder: New Directions since 2021

- **Increased focus on HARM REDUCTION**
- Policies, programs and practices that aim to minimize the negative health, social and legal impacts associated with drug use, drug policies, and drug laws; grounded in justice and human rights
- Focuses on positive change and on working with people without judgment, coercion, discrimination or requiring that people stop using drugs as a precondition *of support*

# Syringe Exchange

- Reduction in infectious diseases
- Reduction in health care costs
- Health Care Services: a way to reach high risk, out-of-treatment populations
  - Vaccination programs
  - Distribution of naloxone
  - Distribution of fentanyl test strips
  - Induction onto buprenorphine/naloxone
  - Possibility of getting drug users into treatment programs

Packham (2022):

- Counties with Syringe Exchange:
- Higher rates of opioid overdose deaths
- Lower rates of infectious diseases
- Community concerns for environment

# Safe Consumption Sites

- Provide a space for people to bring preobtained drugs
- Use drugs with sterile supplies provided under clean conditions
- Staff use of naloxone to reverse opioid overdose
- Services that may be available:
  - screening for infectious diseases
  - peer counseling
  - wound care
  - referral to other social and medical services, such as substance use treatment

# Safe Consumption Sites

- Perpetuates drug using lifestyle which can kill in many ways:
  - Medical complications: sepsis, abscess, cellulitis, heart disease
  - Polysubstance abuse
  - Mental health complications
  - Drug users won't use all doses in site so remain at high risk for overdose deaths, crime victimization, criminality
  - Used syringes/paraphernalia trash around sites
  - Violation of Controlled Substances Act
  - Low-cost way for government to say they are doing something about the opioids crisis

# Fentanyl test strips

- Used to determine if fentanyl is present in a drug
- Should be using universal precautions and investing in the treatment system
- Wrong messaging: There is no safe use of these drugs



# Decriminalization

Oregon's first-in-the-nation drug decriminalization law is facing pushback amid the fentanyl crisis



6 of 8

A man holding a glass pipe and two lighters struggles to wrestle a piece of candy from a wrapper while sitting on a bench in downtown Portland, Ore. on Thursday, May 18, 2023. Three years ago, nearly two-thirds of Oregon voters approved a ballot measure decriminalizing illicit drugs, backing the idea that addiction treatment is more effective than jail. But now, public drug use in cities such as Portland and a surge in fentanyl overdose deaths have created a backlash against the first-in-the-nation law. (Beth Nakamura/The Oregonian via AP)

Share 

April 2024: Recriminalization to start September 1, 2024

# Is Harm Reduction Working?

- How many Americans meet criteria for OUD:
- OUD 2019: 1.6M    OUD 2021: 2.5M    *56% increase*
  
- How many get medications for OUD?
- MOUD 2019: 27.8%    MOUD 2021: 22%    *21% decrease*

Jones, C et al. JAMA Network Open. 2023;6(8):e2327488. doi:10.1001/jamanetworkopen.2023.27488

What is happening with overdose deaths:

- *2017: 48,000 opioid overdose deaths*
- *2023: over 98,560 of ~112,000*

<https://usafacts.org/articles/are-fentanyl-overdose-deaths-rising-in-the-us/> Accessed: Nov 6, 2023

<https://www.cdc.gov/nchs/data/databriefs/db394-tables-508.pdf#1>. SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality. Accessed November 6, 2023

Kariisa M, O'Donnell J, Kumar S, Mattson CL, Goldberger BA. Illicitly Manufactured Fentanyl–Involved Overdose Deaths with Detected Xylazine — United States, January 2019–June 2022. MMWR Morb Mortal Wkly Rep 2023;72:721–727. DOI: <http://dx.doi.org/10.15585/mmwr.mm7226a4>

# Solutions: Improvement to Treatment Services

- **Improve Treatment Resources:**
- State contracts should **require use of evidence-based practices**; emphasize need to use **FDA-approved medication treatments** where indicated: opioids, alcohol
- Greater flexibility in hours, types of treatment, numbers and types of clinicians available
- Combine in person and telehealth
- **Require outcomes data: 6m/1y post treatment completion**
- Mobile units that travel to communities to provide behavioral health services
- Incentivize clinicians to go into behavioral health: increase NHSC grant and loan payback funding; states can offer additional grant/loan resources
- Use of peer specialists, bachelor level counselors and social workers in treatment system

# **Solutions: Build CCBHC Network of Integrated Care**

## **Certified Community Behavioral Health Clinics (CCBHC) Required Services**

- Crisis Services: Mobile as well as bricks/mortar facilities.
- Screening, Assessment, Diagnosis & Risk Assessment.
- Treatment Planning.
- Outpatient Mental Health & Substance Use Services.
- Targeted Case Management.
- Outpatient Primary Care Screening and Monitoring.
- Community-Based Mental Health Care for Veterans.
- Peer, Family Support & Counselor Services.
- Psychiatric rehabilitation services (including ACT/AOT).

# Options for Severe Addiction

## **Assertive Community Treatment (ACT):**

- Team-based care (prescriber, nurse, social worker/case manager/peer) that outreaches in communities for those who do not come to service sites
  - Focus on addressing substance use disorder, mental disorders, and physical health conditions
  - Focus on medication management
  - Help to obtain housing

## **Civil Commitment**

- **Assisted Outpatient Treatment (AOT):** equivalent of civil commitment for substance use disorders with required participation in treatment services
- Compels participation in treatment with consequences determined by states for failure to engage: e.g.: residential treatment at state hospital or in DOC

# Drug Courts

- Increased funding for drug courts:
- **Require evidence-based practices: medication treatment of substance use disorders**
- Require completion of outpatient counseling with toxicology screening
- Case management services for co-occurring disorders
- Assist with housing resources
- Utilize state hospitals for residential services if needed
- Drug courts involve conviction which can make it more difficult to get employment/housing; threat of incarceration is a strong incentive

# Prevention: Focus on Adults and Youth

- Family-based (e.g.: caregiver partnerships)
- School-based (skills training/education, parent/teacher resources),
- Community-based programs (specific to community needs)
- Population-based (housing and health care for homeless with substance issues, public awareness)
- Health care systems: screening/brief interventions
- Workplace awareness programs, EAP
- <https://www.youtube.com/watch?v=HLYIDpJxxqs>

# Discussion

Thank you!

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