Regional Advisory Board (RAB) of Community Anti-Drug Coalitions

March 2020 Newsletter

2020 Awareness Campaigns

March: National Inhalants and Poisons Awareness Week (March 15–21)

National Drug and Alcohol Facts Week (March 30–April 5)

April: Alcohol Awareness Month; Stress Awareness Month

May: National Prevention Week (May 10-13)

National Alcohol- and Other Drug-Related Birth Defects Awareness Week

(May 13–19)

Prom and Graduation messaging

June: PTSD Awareness Month back to school messaging

International Overdose Awareness Day (August 31)

September: Recovery Month

October: National Prescription Drug Awareness Month

National Substance Abuse Awareness Month

Red Ribbon Week (October 23-31)

November: Great American Smokeout (Nov. 19) **December:** Impaired Driving Prevention Month

Did You Know?

The FDA's flavor ban on e-cigarettes is in effect. But a little-noticed footnote in the new policy allows mint, dessert, and fruit flavors to be sold in disposable e-cigarettes. The flavor ban applies only to devices like Juul that come with refillable pods. It didn't take long for teenagers to find the loophole. They're switching from refillable Juuls to disposable Puff Bars with flavors like banana ice, sour gummy, or cool mint. Other disposable brands include Posh, Stig, and blu. All are distributed by American companies but are imported from China. Some contain even more nicotine than Juul. Because Juul is thought to be responsible for having nearly tripled adolescent vaping in just two years, the company voluntarily stopped making all flavor pods except menthol and tobacco. Allowing disposable e-cigarettes to still have flavors means teenagers simply switch brands. (The Marijuana Report, 2/5/20)

More than one-fourth of opioid poisonings involve children and teens, and they have become increasingly severe in recent years, according to new research. One-fifth of opioid poisonings among children and teens were likely suicide attempts, Emory University researchers reported at the Society for Critical Care Medicine annual meeting. They analyzed almost 754,000 opioid poisoning cases between 2005 and 2018 that were reported to the U.S. National Poison Data System. Nearly 208,000 cases involved children 18 or younger, HealthDay reports. During the

study period, the proportion of children and teens with suspected suicide due to an opioid poisoning increased from just under 14% to more than 21%. "Our findings suggest the opioids children and adolescents have access to are increasingly potent and even small doses of them can cause severe health problems or death," researcher Megan Land, M.D., said. "Despite efforts to limit and monitor access to prescription opioids, the proportion of admissions to the critical care unit for acute opioid poisonings in children is rising, especially following attempted suicide." (drugfree.org, 2/20/20)

Forty-three percent of college students have used pot in the last year because they see it as less risky, according to the Monitoring the Future Survey. That's up from 38 percent the previous year. About 6 percent reported marijuana use on 20 or more days in the past month, while for those the same age who are not enrolled in college the rate is nearly double, at 11 percent. This age group's belief that marijuana is risky has fallen from 75 percent in the early 1990s to 22 percent today. About 11 percent of college students vaped marijuana in the past month, more than double the number from the previous year. (The Marijuana Report, 2/26/20)

People with opioid use disorder who receive treatment with medications such as buprenorphine or methadone are 80% less likely to die from an opioid overdose compared with patients treated without these medications, according to a new study. The study included data on more than 48,000 patients treated for opioid addiction. "All opioid treatment programs should offer and encourage use of medications such as methadone and buprenorphine," lead researcher Noa Krawczyk of NYU Langone Health said in a news release. Many treatment facilities don't offer medication-assisted treatment, the study found. "The fact that so few addiction treatment providers offer these medications is unconscionable and should no longer be tolerated," said Emily Feinstein, Executive VP at the Center on Addiction. "We need to do more to remove the barriers to methadone and buprenorphine, including insurance barriers, so that people can access the care they need," she told HealthDay. (drugfree.org, 2/27/20)

There is no medication-assisted treatment available for meth addiction, as there is for opioid addiction. Some addiction experts recommend psycho-social therapy as the best treatment for meth addiction. The method can include talk therapy, learning about the illness and a rehabilitation regimen that helps people develop social and emotional skills they can employ to live a healthy life. Some sufferers are prescribed anti-anxiety or sleep-help drugs or other medications while they detox from meth. In common with other addictions, you have to look at the underlying issues and really make a treatment plan that's individualized for the person. Not enough people are getting treatment. Meth-related deaths are rising. The latest figures from the U.S. Centers for Disease Control and Prevention show that from 2012 to 2018, the rate of drug overdose deaths involving methamphetamine and other "psychostimulants with abuse potential" was up almost fivefold. (USA Today, 2/20/20)

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