UC CAR Weekly Newsletter 10.8.2021

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) 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

Pharmacies Stand Trial Over Opioid Crisis

Two Ohio counties, Lake and Trumbull, filed a lawsuit in 2018 against CVS, Walgreens, Walmart, and Giant Engle for their part in the Opioid epidemic; after delay, the federal trial of the 4 pharmacies began October 4th. In his opening remarks, Mark Lanier — attorney for the 2 Ohio counties — declared major pharmacies had "dispensed like a vending machine," elaborating that the massive...

Boardman doctor on probation after painkiller prescription conviction

No jail time is included in the sentence of a Boardman podiatrist who pleaded guilty to a 79-count indictment for improperly prescribing powerful painkillers to patients during the rise of the opioid epidemic in Ohio. Dr. James Prommersberger, 58, could have faced maximum penalties of 108 years in prison and \$345,000 in fines. However, under a plea agreement, recommended by the Ohio Attorney...

National News

Sober-Curious Drinkers Look To Online Recovery Programs.

The Wall Street Journal (10/3, Tergesen, Subscription Publication, 8.41M) reports that so-called sober-curious drinkers – who suspect they drink to excess but reject the label of alcoholic – are logging into online recovery programs to either cut back or quit drinking entirely. The number of days in which Americans drank increased by 14% during a one-month period in 2020.

Study Finds Lung Injuries Tied To Contaminated Vapes Less Common Where Homegrown Marijuana Is Allowed.

Benzinga (10/6, Jose Rodriguez, 152K) reports research funded by the National Institute on Drug Abuse "found that states that allow home cultivation had a 60 percent lower EVALI (e-cigarette and vaping-associated lung injury) incidence compared to those that forbid it." According to the report, "in states where cannabis was legal for adults, EVALI was significantly less prevalent. Forbidding smokable cannabis seemed in general to increase EVALI prevalence." The findings were published in the journal Drug and Alcohol Dependence.

Study: CBD Can Reduce Depression And Anxiety Symptoms.

The Province (CAN) (10/6, Riches, 459K) reports new research indicates "that medicinal cannabis use may reduce anxiety and depressive symptoms in clinically anxious and depressed populations." The study, which was supported by the National Institute on Drug Abuse and public charity RoC, "found that the patients experienced therapeutic benefits from CBD in doses as low as 60 milligrams." The participants, 79% of whom were women and who had a mean age of 46, "completed a baseline survey and then followed up at three-month intervals." The findings were published in Frontiers in Psychiatry.

Weed And Depression: Marijuana's Effects On Mental Health.

US News & World Report (9/30, Levine, Mendelsohn, 1.91M) says, "As marijuana becomes increasingly destigmatized, not to mention decriminalized, in much of the country, understanding its association with mental health is more important than ever." The science on the link between pot and depression is unclear. According to the article, "The National Institute on Drug Abuse notes that several studies have linked marijuana use to increased risk for psychiatric disorders, including depression, 'but whether and to what extent it actually causes these conditions is not always easy to determine.'" The agency "looked at long-term data that examined associations between marijuana use, mood and anxiety disorders, and substance use disorders, and concluded that: 'After adjusting for various confounding factors, no association between marijuana use and mood and anxiety disorders was found.'"

Youth Vaping Declined Sharply For Second Year, New Data Show.

The New York Times reports, "Teen use of electronic cigarettes fell sharply in 2021, the second consecutive year of big declines, according to the government's annual National Youth Tobacco Survey. This year, 11.3 percent of high school students reported that they currently vape – down from 19.6 percent in 2020 and strikingly lower than the 27.5 percent reported in 2019, according to a report of the survey issued Thursday by the Centers for Disease Control and Prevention." However, "Even with the drop, the survey found that more than 2 million high school and middle school students were currently using e-cigarettes." Mitch Zeller, "the director of the F.D.A.'s Center for Tobacco Products," said in a statement that "the new data remained concerning, particularly the popularity of flavored e-cigarettes, which were banned by the Trump administration but remain on the market in certain forms through a regulatory loophole."

The Wall Street Journal (9/30, Subscription Publication, 8.41M) reports that the Puff Bar disposable vaporizer has surpassed JUUL to become the most popular type of electronic cigarette among US teens, according to data from a study by the FDA and CDC. Some 26% of high school students who vape said they use Puff Bar.

Vaping In Teens Dropped By 40% During The Pandemic, And May Continue To Decline.

The Parent Herald (10/4, Scott) reports that a survey of students in the US has found that vaping in teens has dropped by 40 percent during the pandemic. The survey "showed that only 11 percent of high school kids and three percent of middle school children used e-cigarettes in recent months." National Institute on Drug Abuse Deputy Director Dr. Wilson Compton "told NBC News that one-third of seniors in high school are using vaping products," which "has prompted the U.S. Food and Drug Administration (FDA) to impose a series of directives to cut down access to vaping products among the youth."

Opioid Vaccine Eyed By Scientists As A Shot To Stem Overdose Epidemic.

NBC News (10/1, Edwards, 4.91M) reports, "At least three research groups nationwide have begun work on vaccines to prevent opioid overdoses. At least three research groups nationwide have begun work on vaccines to prevent opioid overdoses." National Institute on Drug Abuse Director Dr. Nora Volkow said such an opioid vaccine would be an "important and lifesaving option" if it proved effective. Volkow added, "We need as many effective tools as possible to accelerate our ability to prevent and treat opioid use disorder and overdose."

How The COVID Pandemic Made The Opioid Epidemic Worse, Even As Telehealth Helped.

HealthDay (10/1, Thompson, 11K) reported, "The COVID-19 pandemic has shaken up the U.S. opioid crisis in ways bad and good, increasing the risk of use and overdose but also spurring innovative approaches to treatment." During a HealthDay Now video interview, Tufts University Associate Professor Thomas Stopka said that the increase in opioid overdose deaths "from 2019 to 2020 was upwards of a 30% increase, from about 70,000 the previous year to 93,000 in 2020." However, experts argued that "COVID-inspired social distancing requirements also have made it easier for people to get treatment for substance use disorder," spurring "a dramatic increase in telehealth services in all medical fields." The National Institute on Drug Abuse is mentioned.

El Paso County Sees 'Significant Improvement' In Deaths By Suicide, Concern Over Increasing Fentanyl Overdoses.

The Colorado Springs (CO) Gazette (10/6, Kelley, Shinn, 172K) reports that "as of this week, El Paso County," Colorado "has had 126 deaths by suicide, compared with 146 at the same time in 2020." El Paso County Coroner Leon Kelly said, "So, we are running 20 suicides behind last year, which is a significant improvement." However, "the improvement is tempered with a concern Kelly has for overdoses – many being accidental – of the synthetic opioid painkiller fentanyl." Deaths from fentanyl "have doubled each year in El Paso County for the past four years, the coroner said." NIDA is mentioned.

Fake Prescription Pills Increase The Burden Of Overdose Epidemic.

The Verywell Health1 (10/1, Wolters) reported in continuing coverage, "The Drug Enforcement Administration (DEA) on Monday released a public safety alert for a sharp increase in fake prescription pills laced with fentanyl and methamphetamine." According to the agency, "more than 9.5 million fake pills have been seized so far" in 2021. National Institute on Drug Abuse Director Nora Volkow, MD, said, "Methamphetamine is extremely potent in one drop. … Dealers are not going to be mixing methamphetamine with properly manufactured prescription medication, because they're much more expensive – it would cost them a lot of money." Volkow added, "The moment that you add fentanyl into any of these drugs that are manufactured, you make it much more powerful."

Minnesota's Emergency Rooms Saw 18% Increase In Nonfatal Drug Overdoses Last Year.

The Minneapolis Star Tribune (9/30, Howatt, 855K) says, "Minnesota's emergency rooms saw an 18% increase in nonfatal drug overdoses in 2020, the state Department of Health reported Thursday." Out "of the 7,290 nonfatal overdoses that did not appear to be self-harm," opioids and stimulants accounted for 57% of the cases. Including cases of self-harm, "the state's hospitals saw 14,475 nonfatal overdoses that were treated in the emergency department or admitted as patients."

Meth Overdose Deaths In The U.S. Almost Tripled From 2015 To 2019.

The Washington Post (10/2, Blakemore, 10.52M) reported in continuing coverage that researchers from the National Institute on Drug Abuse (NIDA) and the Centers for Disease Control and Prevention have found that methamphetamine overdoses are on the rise. In an analysis of data "from 2015 to 2019, they found that meth overdose deaths in the United States had almost tripled." NIDA Science Policy Branch Chief Emily Epstein, a co-author, said in a news release, "What makes these data even more devastating is that currently, there are no approved medications to treat methamphetamine use disorder." The findings were published in JAMA Psychiatry.

Trends in Methamphetamine Use and Related Deaths

Overdose deaths in the U.S. involving stimulants other than cocaine have risen sharply in recent years. Methamphetamine is the primary culprit in these deaths. Yet the increases in methamphetamine use and methamphetamine use disorder (MUD) have been much less dramatic. This suggests that the overdose risk among people who use methamphetamine has increased. It's not clear what changes in methamphetamine use patterns could account for this. To find out, a team of researchers led by Dr. Beth Han from NIH's National Institute on Drug Abuse (NIDA) examined data from almost 200,000 people nationwide, aged 18-64, who participated in the 2015-2019 National Surveys on Drug Use and Health (NSDUH). They also examined data on overdose deaths during the same period from the National Vital Statistics System. Both NIDA and the CDC supported the study. Results appeared in *JAMA Psychiatry* on September 22, 2021.

The researchers found that overdose deaths from stimulants other than cocaine almost tripled from 2015 to 2019. Yet methamphetamine use increased by only 43% during the same period. The number of people using methamphetamine and cocaine together increased by 60%, and the number with MUD increased by 62%. Frequent methamphetamine use, defined as using for at least 100 days in the past year, increased by 66%. These results point to a growing trend in risky use patterns, which may have led to more overdose deaths. https://www.nih.gov/newsevents/nih-research-matters/trends-us-methamphetamine-use-associateddeaths

4 States And Territories To Participate In NGA Policy Academy On Stimulant And Polysubstance Use.

Detroit Legal News (MI) (10/6) reports, "American Samoa, Connecticut, Michigan and West Virginia will participate in the National Governors Association's (NGA) Policy Academy on State Strategies to Improve Care for Stimulant and Polysubstance Use, intended to help state leaders identify and implement best practices to improve care and reduce overdoses among people who use opioids and stimulants, or combine substances, which is known as polysubstance use." Speakers include National Institute on Drug Abuse Director Dr. Nora Volkow, acting National Center for Injury Prevention and Control Director Dr. Christopher M. Jones, and Substance Abuse and Mental Health Services Administration Assistant Secretary for Mental Health and Substance Use Dr. Miriam E. Delphin-Rittmon.

To Combat Meth, California Will Try A Bold Treatment: Pay Drug Users To Stop Using.

NPR (9/30, 3.69M) reports, "As overdoses and public health costs related to meth and cocaine continue to spiral in California, state officials are desperate for more effective treatment options and are pursuing legislation and appealing to federal regulators to make contingency management more widely available." NPR adds, "Washington, Montana, and West Virginia are also exploring similar strategies." Contingency management "incentivizes drug users with money or gift cards to stay off drugs." Research indicates this approach "is the most effective treatment for meth or cocaine addiction, especially when combined with other behavioral therapy."

Additional Source. Mic (9/30, Kumamoto, 229K) reports California legislators passed Senate Bill 110, "which will require Medicaid to cover cash-incentivized meth addiction treatment." The legislation "received bipartisan support and is expected to be signed into law by Governor Gavin Newsom." According to the most recent "data by the National Institute of Drug Abuse, the number of meth users rose from 684,000 in 2016 to 964,000 in 2017 and likely grew even more during the pandemic."

Racial Factors May Affect PrEP Discussions With Black Women.NIH

Medscape (10/5, Boerner, Subscription Publication, 219K) reports a study funded by the National Institute on Drug Abuse indicates that "[primary] care practitioners who scored higher on a scale indicating unconscious or conscious racism were less willing to discuss HIV preexposure prophylaxis (PrEP) with Black women, citing concerns that the women wouldn't be able to take the daily HIV prevention pill every day." The findings were published in the Journal of Acquired Immune Deficiency Syndrome. Medscape says that the study "adds to mounting evidence that practitioners who know about and are willing to prescribe PrEP – even those participating in federal projects to increase PrEP among Black Americans – still fail to refer Black people for PrEP and, when faced with people who might qualify, hesitate to prescribe because of worries related to Black patients' behaviors

Psychedelic Therapy: A Roadmap For Wider Acceptance And Utilization.

Contributors Mason Marks and I. Glen Cohen write in Nature (10/4, 194K) that psychedelic therapies "have shown great promise in treating mental-health conditions, but their use is severely limited by legal obstacles, which could be overcome." They add, "Clinical trials have now been conducted at leading universities, and a growing body of evidence supports the use of psychedelics, such as psilocybin and MDMA, in the treatment of depression, post-traumatic stress disorder and anxiety toward the end of life," but "[the] schedule I status of most psychedelics imposes a ceiling on many policy recommendations." In addition, "a federal appropriations rider...creates a considerable obstacle to such research." However, according to Nature, "as this Comment was going to print, the National Institute on Drug Abuse funded a trial to investigate the use of psilocybin for smoking cessation, possibly reflecting an encouraging policy shift."

The Science Of Psychedelic Therapy Breaks On Through.

Axios (9/30, Snyder, 1.26M) reports, "<mark>Scientific studies of psychedelic therapies may be entering a new, broader phase thanks to more interest and funding from federal governments.</mark>" Funding from agencies like the National Institutes of Health "could allow researchers to study nitty-gritty details – about dosing and other variables –

needed for a drug to become an accepted part of medical practice." A resurgence in studying psychedelics in humans seen 20 years ago was mainly backed by private philanthropists, which is "partly because studies struggled to meet best scientific practices, like randomizing trials and having a placebo control, says Steven Grant, a former program officer at the National Institute on Drug Abuse (NIDA) who is now director of research at Heffter Research Institute, which promotes the scientific study of classic psychedelics, like psilocybin." NIDA Director Dr. Nora Volkow told Axios, "Newly funded research on the therapeutic effects of hallucinogens reflects a resurgence in interest in hallucinogens in the scientific community and is predicated on the submission of well-designed research studies for funding consideration."

Psilera To Collaborate With NIDA On Pre-Clinical Psychedelic Studies.

Drug Target Review (UK) (10/5, Begley) reports, "Psilera has finalised a Co-operative Research and Development Agreement with the US National Institute on Drug Abuse (NIDA) to initiate pre-clinical studies on an intranasal formulation of N, Ndimethyltryptamine (DMT) and other psychedelic-inspired compounds." NIDA Designer Drug Unit Director Dr Michael Baumann "and postdoctoral fellow, Dr Grant Glatfelter, will collaborate with Psilera to determine drug-target interactions with the company's lead new chemical entities (NCEs) as well as metabolite profiling and behavioural effects in vivo." According to the article, "There will be two primary initiatives assessed by the NIDA collaboration."

Health Systems Launch App Marketplace For Digital Health Tools.

Modern Healthcare (10/5, Cohen, Subscription Publication, 215K) reports, "Three not-for-profit health systems – Intermountain Healthcare, Presbyterian Healthcare Services and SSM Health – on Tuesday launched a company that they say will make it easier for hospitals to quickly deploy vetted digital health tools." This nonprofit, "dubbed Graphite Health, will host a marketplace of digital health apps – similar to popular app stores – that the company reviews and certifies." This marketplace "which essentially serves as a central repository of health apps, will use a standard data language, so that developers can create tools they know hospitals will be able to implement, according to the company."

A 'Pacemaker For The Brain': No Treatment Helped Her Depression – Until This.

According to the New York Times (10/4, Belluck, 20.6M), "the first study of individualized brain stimulation to treat severe depression" now "raises the possibility the method may help people who don't respond to other therapies." Researchers "surgically implanted a battery-operated, matchbook-sized device in" the patient's "brain...calibrated to detect the neural activity pattern that occurs when...becoming depressed," and then "delivers pulses of electrical stimulation to stave off depression." Twelve days after the "device was fully operational," the patient's "score on a standard depression scale dropped to 14 from 33, and several months later, it fell below 10, essentially signaling remission, the researchers reported" in the case study published in Nature Medicine.

Additional Sources. On its website, CNN (10/4, Fox, 89.21M) reports, "Other researchers have tried this approach for depression." According to the National Institute of Mental Health, "a review of various deep brain stimulation techniques shows that 40% to 50% of people treated with deep brain stimulation show more than 50% improvement."

STAT (10/4, Cueto, 262K) reports <mark>the implant used by researchers, "called a NeuroPace device, was granted an investigational exemption by the Food and Drug Administration, but it hasn't been cleared for more general use in treating depression."</mark>

Seattle City Council Votes Unanimously To Relax Rules Against Naturally Occurring Drugs.

Bloomberg (10/4, Kary, 3.57M) reports, "Seattle's city council voted unanimously to relax its rules against naturally occurring drugs, joining a handful of other cities that have decriminalized psilocybin and similar substances since Denver kicked off a wave of such changes three years ago." As a result, Seattle "police will make it among their lowest priorities to arrest or prosecute anyone engaging in activities related to 'entheogens,' or drugs like psilocybin and ayahuasca that are often used for spiritual or religious purposes."

Telehealth Still Not Successful In Reaching Enough People In Rural Areas.

STAT (9/30, Brodwin, 262K) reports, "Despite the wide-ranging expansion of telehealth in the past year, there is still a broad swath of the US population it has largely failed to reach: the 57 million people in rural parts of the country." But even "as employers rush to add virtual care to their benefits, many telehealth companies have avoided rural areas." Some of those companies "acknowledged to STAT that most of their users remain in urban and suburban areas, and they've made far less progress than they'd like to in reaching rural patients."

Funding Opportunities

GRANTS & FUNDING

NIH Central Resource for Grants and Funding Information

RFA-HL-22-013

HEAL initiative: Pharmacotherapies to Reverse Opioid Overdose Induced Respiratory Depression Without Central Opioid Withdrawal (Target Validation and Candidate Therapeutic Development) (UG3/UH3 Clinical Trials Not Allowed)

NOT-NS-22-031

Notice of NEI, NIA, NIAAA, NIAMS, NIDA and NIDDK's Participation in RFA-NS-22-016 "HEAL Initiative: Interdisciplinary Teams to Elucidate the Mechanisms of Device-Based Pain Relief (RM1 Clinical Trial Optional)"

NOT-DA-21-090

<u>Notice of Correction to the Key Dates in PAS-21-270, AIDS-Science Track Award</u> <u>for Research Transition (R03 Clinical Trial Optional)"</u>

PAR-21-349

Research on Biopsychosocial Factors of Social Connectedness and Isolation on Health, Wellbeing, Illness, and Recovery (R01 Basic Experimental Studies with Humans Required)

PAR-21-350

<u>Research on Biopsychosocial Factors of Social Connectedness and Isolation on</u> <u>Health, Wellbeing, Illness, and Recovery (R01 Clinical Trials Not Allowed)</u>

PAR-21-352

<u>Research on Biopsychosocial Factors of Social Connectedness and Isolation on</u> <u>Health, Wellbeing, Illness, and Recovery (R01 Clinical Trial Required)</u>

UC Foundation Funding Opportunities

Please contact Carol Russell at (513) 556-6169 or *carol.russell@uc.edu* at least 5 business days before the deadline, prior to applying to either of the below opportunities, to ensure coordination and facilitate assistance with approaches.

Doris Duke Invites Proposals for 2022 Clinical Scientist Development Award

This award provides grants to junior physician scientists (MD, MD/PhD, DO, or foreign equivalent degree) to facilitate their transition to independent clinical research careers. This request for applications will provide approximately 17 grants of up to \$495,000 over three years (\$150,000 direct cost and \$15,000 indirect costs per year). <u>Click to learn more.</u>

RWJF Accepting Applications for Research to Advance Racial Equity in Health

Evidence for Action (E4A), a national program of the Robert Wood Johnson Foundation, funds research that expands the evidence needed to build a Culture of Health, with an explicit emphasis on advancing racial equity. Research should center on the needs and experiences of communities exhibiting the greatest health burdens and be motivated by real-world priorities. It should be able to inform a specific course of action and/or establish beneficial practices, not stop at characterizing or documenting the extent of a problem. **Click to learn more.**

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