

Welcome To

Addressing the Latest Emerging Substance Use Trends

Xylazine, Nitazenes, Hallucinogens
Tianeptine, Bromazolam, and Others

NPN Conference— Phoenix, AZ

August 14, 2024

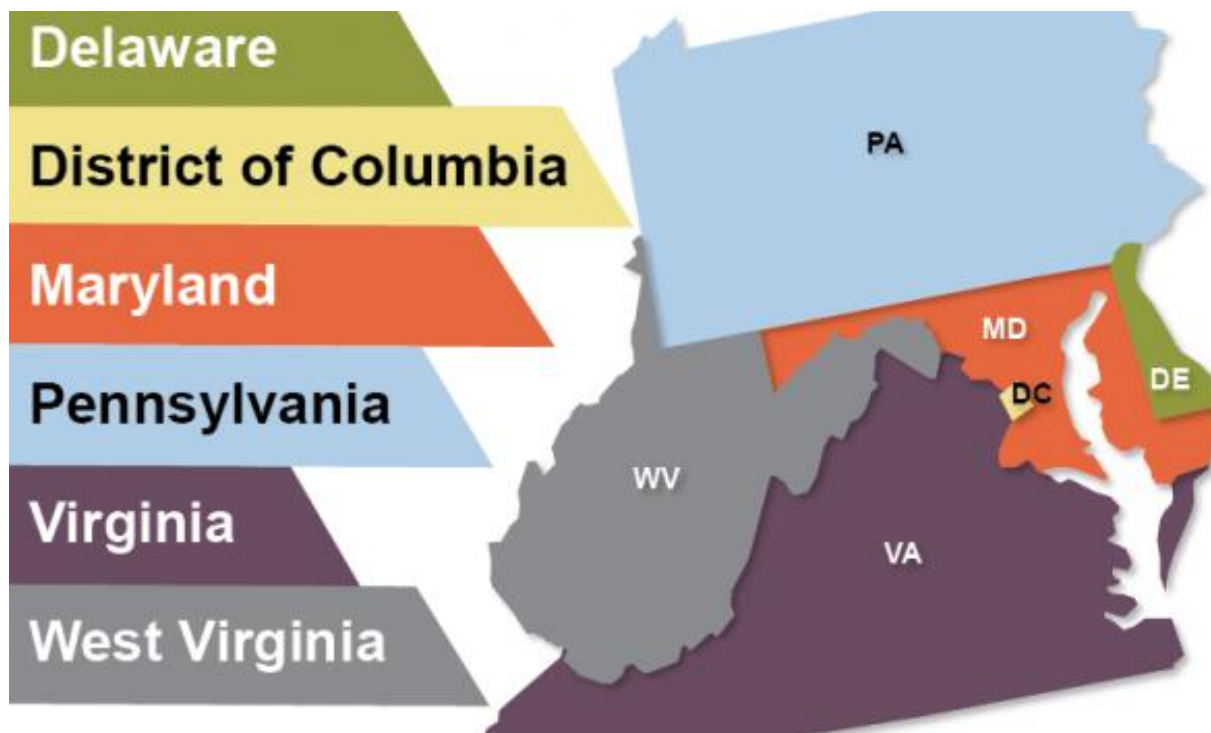


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Central East Region

SAMHSA REGION 3



The use of affirming language inspires hope.

LANGUAGE MATTERS.

Words have power.

PEOPLE FIRST.

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.



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ethnicity spirituality
orientation practices
normalize experiences expression
standard create
Ethnic stories terror identity
race share injustices
change care Matter shootings
Racial education
space
seem normal cultural
powerful
NASW self Black
gender affected Lives hate
Diversity uncertainty
sexual advocacy
religious competency humility



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PTTC Mission



To Strengthen the Capacity of the Workforce

1

To Deliver Evidence-Based Prevention Strategies

2

Facilitate Opportunities for Preventionists to Pursue New Collaboration Opportunities, which include Developing Prevention Partnerships and Alliances

3



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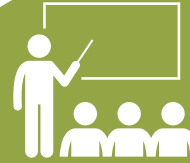
Services Available



Online Courses



Technical Assistance



Skill Based Training



Webinar



Toolkits



Facilitate Prevention Partnership & Alliances



Research Learning Collaborative



Newsletter



Technology Driven Models



Literature Searches



Virtual Meeting



Research Publication



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Other Resources in SAMHSA Region 3



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ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



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MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



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Carnevale Associates (CALLC) is an internationally recognized woman-owned small business providing strategic consulting services for more than 20 years.

Services Include:

- Research & Evaluation
- Training & Technical Assistance (TTA)
- Performance Measurement & Management
- Policy Formulation
- Strategic Planning

THE OPIOID EPIDEMIOLOGY

Evidence Based Strategies for Abatement of Harms FROM THE OPIOID

SUICIDE PREVENTION RESOURCE GUIDE

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PTTC Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

SAMHSA

INFO BRIEF
Addressing the Social Determinants of Health in Substance Use Prevention

We have long known that substance use is driven by a complex set of factors and circumstances. Each of our decisions is influenced by our circumstances, intentions and consequences. That why substance use prevention should be comprehensive – addressing as many of the primary drivers of substance use as possible. Recently, there has been a push to encourage health care professionals to focus on how the context of our lives affects our health, notably in the U.S. Department of Health and Human Services' (HHS) Healthy People 2030 initiative. The factors that comprise this context are related to collective, but social determinants of health (SDOH). This brief will explore the SDOH, map the context of SDOH across "structural", "organizational", "personal", "behavioral", and "lifestyle" categories and provide an overview of how they can play a role in "health" and "wellness".

WHAT ARE THE SOCIAL DETERMINANTS OF HEALTH?

- Economic Stability: The ability to afford housing, pay for utilities, and pay for transportation, food, and other essential needs.
- Education Access and Quality: The ability to obtain a high-quality education.
- Health Care Access and Quality: The ability to obtain a high-quality health care service.
- Neighborhood and Built Environment: The ability to live in a safe and healthy neighborhood and built environment.
- Social and Community Context: The ability to live in a safe and healthy neighborhood and built environment.

THE SOCIAL DETERMINANTS OF HEALTH ARE KEY TO WELLNESS

INFO BRIEF
Status of State Cannabis Legislation: November 2022

This brief provides an update to the status of state cannabis laws in the United States, following the November 2022 election. Although cannabis remains illegal at the federal level, 37 states and the District of Columbia have now legalized medical cannabis use, with 22 of those jurisdictions also legalizing recreational cannabis use. Overall, almost 73% of U.S. residents now live in a state with legalized medical or recreational cannabis use.

FIGURE 1. STATES OF STATE CANNABIS LEGISLATION: NOVEMBER 2022

■ Legal Recreational and Medical Use (22 States & DC) ■ Legal Medical Use Only (15 States)

November 2022

Opioid and Alcohol Misuse and Risk of Suicide: A LITERATURE REVIEW

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Funded by Substance Abuse and Mental Health Services Administration

Metamphetamine Use in the Great Lakes and South-Southeast October 2022

This brief provides an update to a large and growing problem across much of the United States. In fact, there are now more than 100 reports of methamphetamine use in the Great Lakes and South-Southeast regions. This brief provides an overview of the current state of methamphetamine use in the Great Lakes and South-Southeast regions. It also provides an overview of the current state of methamphetamine use in the Great Lakes and South-Southeast regions.

New Trends in Use

- Over 25% of methamphetamine users are now female.
- Over 50% of methamphetamine users are now under 30 years old.
- Over 50% of methamphetamine users are now using injection.
- Over 50% of methamphetamine users are now using fentanyl.

Methamphetamine Use

Our specialized team of subject matter experts bring a wealth of industry knowledge to deliver practical and research-based solutions



Presenters



Josh Esrick
Speaker



Olivia Stuart
Speaker



Emily Patton
Co-Author



Deborah Nixon-Hughes
Co-Author

Learning Objectives

- Recognize the importance of incorporating emerging trend data into strategic planning efforts.
- Describe the scope and impacts of the latest emerging substance use trends.
- Identify data sources and primary data collection methods that can provide information on emerging trends.
- Recognize strategies for ensuring cultural competency and responsiveness in addressing emerging trends.



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Strategic Planning & Emerging Trends



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Emerging Trend Data Lets Us Answer Questions Such As:

- Are specific substances becoming more commonly used in our community?
- Is substance use increasing disproportionately among various populations?
- Are the consequences of substance use becoming more severe?
- Are substance-specific risk factors (e.g., availability, perceptions of harm, etc.) changing?



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How It Impacts Our Work

1. Shift or confirm our priorities
2. Can change the partners needed
3. Determine if we should review or revise our strategic planning
4. Inform the need to change, shift, or maintain our current strategies



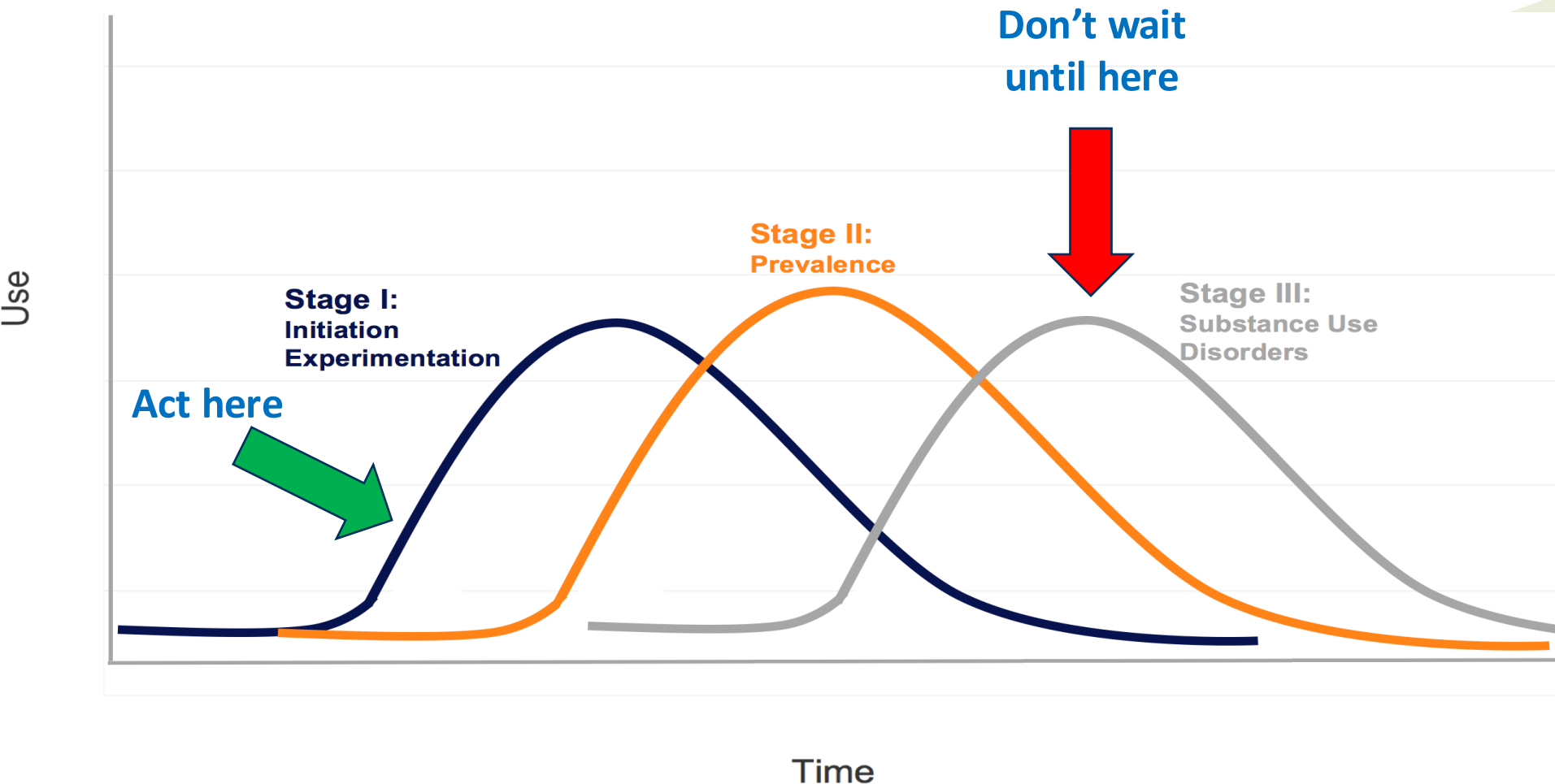
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Emerging Trend Data Lets Us Act More Quickly



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Emerging Trends Inform Strategic Planning

- Processes for identifying and implementing evidence-based prevention
 - Using data to establish goals
 - Using existing evidence to implement processes for achieving goals
 - Using new evidence to make adjustments
- Having evidence-based programs gives the greatest chance of success
- Use strategic planning to figure out how to address emerging trends



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3/16/2024



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SAMHSA's Strategic Prevention Framework

- Step 1: Needs Assessment
 - Step 2: Build Capacity
 - Step 3: Planning
 - Step 4: Implementation
 - Step 5: Evaluation
- Be mindful throughout of:
- Sustainability
 - Cultural Competence
 - Ethical Behavior



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Scope & Impact of the Latest Trends



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Xylazine

- Veterinary anesthetic not approved for human use
 - Non-opioid sedative
 - But chemically interacts with opioids
- Not a federally controlled substance
- Easily available online for purchase
- Use has slowly spread in US since 2006



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Scope of Consequences

- Over 3,468 fatal overdoses in 2021
 - 34% of all fatal overdoses in Philadelphia
- Jan 2019-June 2022 saw 4,859 fatal fentanyl overdoses involving xylazine (9%)
- 40% of people in a 2011 study developed necrotizing wounds
- No data available, but...
 - High potential for use disorder
 - Use has led to significant health problems, including amputations



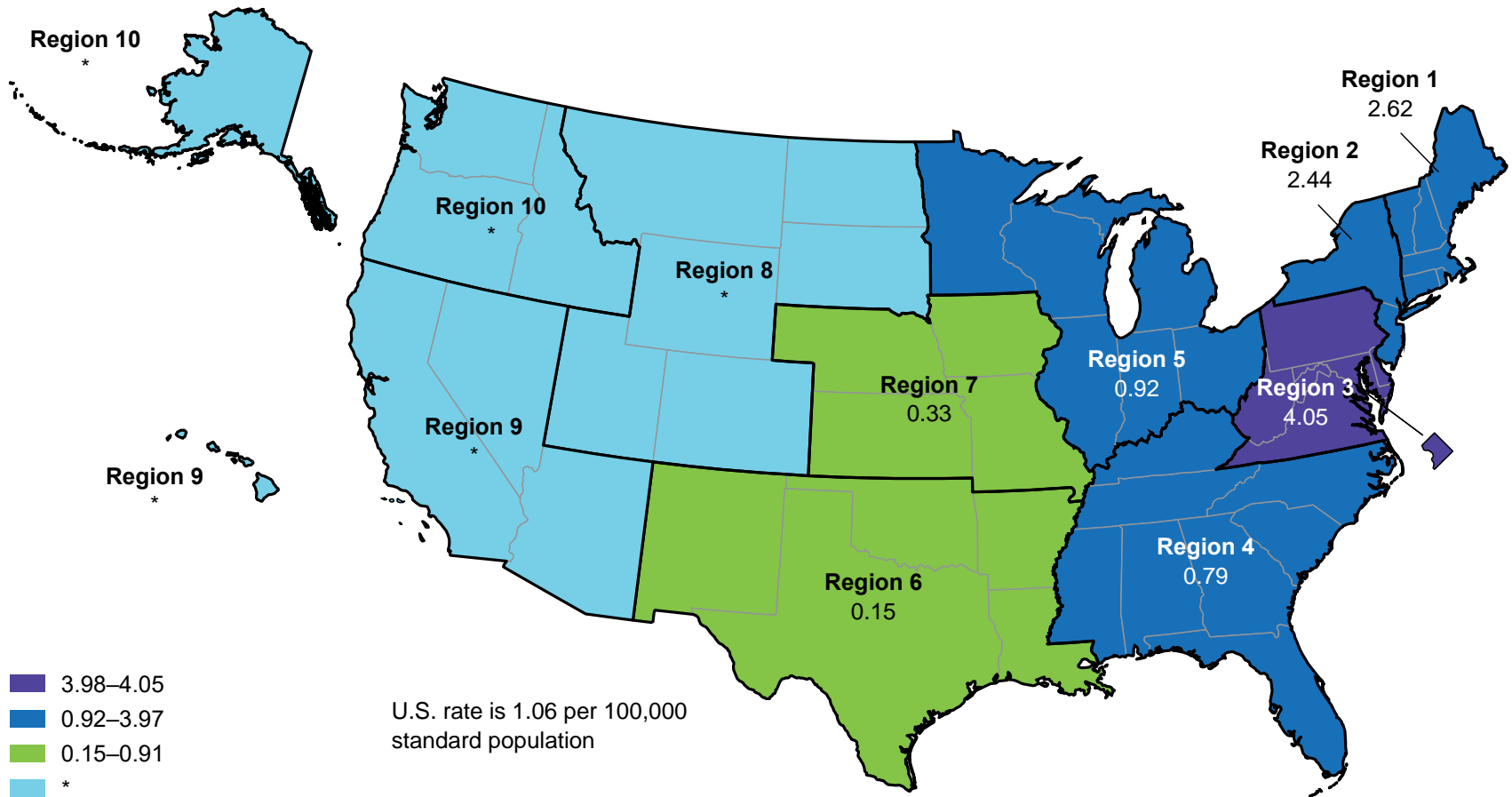
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Xylazine Overdoses, 2021



- 3.98–4.05
- 0.92–3.97
- 0.15–0.91
- *



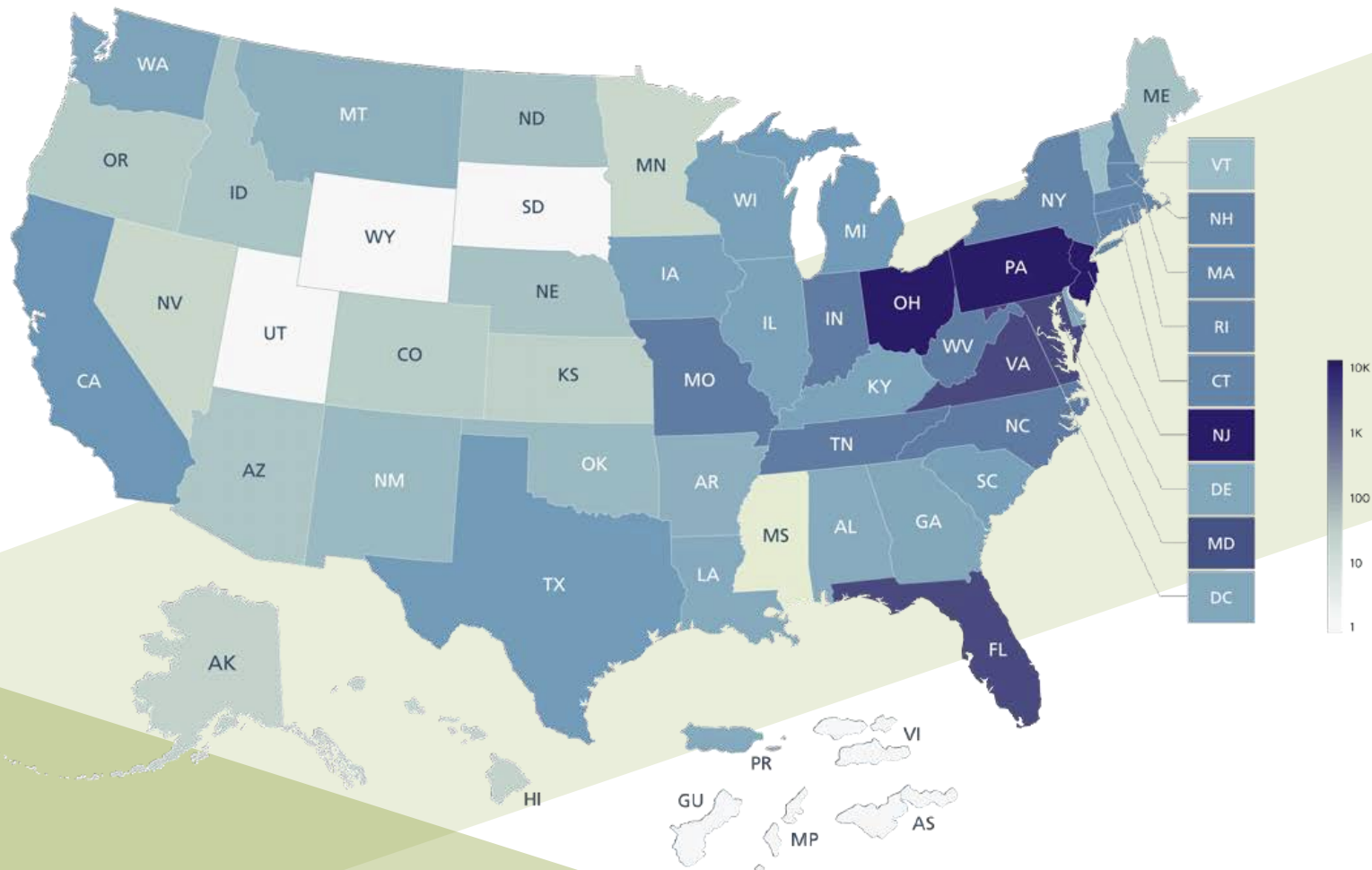
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Xylazine Seizures, 2023



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Source: DEA National Forensic Laboratory Information System

Nitazenes

- Synthetic opioid analgesic created in the 1950s
- At least 13 types identified, with most common including isonitazine ("ISOs"), metonitazine, and protonitazine
- Commonly mixed into heroin or fentanyl, or falsely marketed as dilaudid or oxycodone
 - *Resulting in many people using nitazenes unintentionally*
- Produces feelings of euphoria and sedation
- Sold as pills, powders, and sprays
 - Can be ingested intravenously, intranasally, orally, sublingually, or inhaled (vaping)



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Nitazenes

- First identified in illicit drug markets in Europe & Midwest US in 2019
- Identified in at least 4,300 law enforcement drug seizures in the U.S. since 2019
 - Often co-identified with illicit opioids and benzodiazepines
- Found in wastewater samples in Washington & Illinois in 2023, indicating use
- Many are now considered Schedule 1 substances in the U.S. (and equivalent restrictions in the UK, Canada, Brazil, and other countries)



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Nitazenes

- Some are estimated to be up to **43 times** more potent than fentanyl
 - *Strong potency → highly addictive → greater potential for overdose*
- Involved in 200+ overdose deaths in Europe and North America so far (real numbers likely higher)
- Use can result in respiratory depression, vomiting, and low blood pressure/heart rate
- Like opioids, naloxone can reverse a nitazene overdose
 - However, because of their potency, multiple doses may be required



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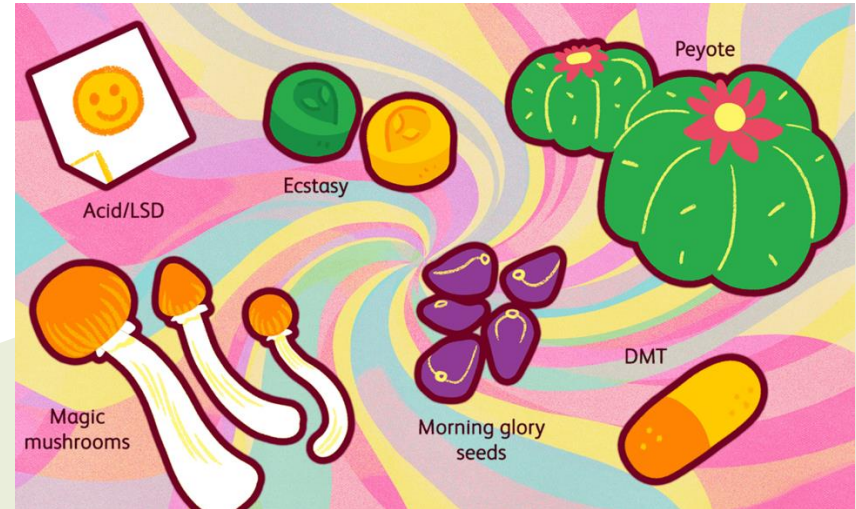
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Hallucinogens

- Can be found in certain plants or fungi, or produced synthetically
- Includes psilocybin, LSD, DMT, mescaline, ketamine, PCP, MDMA, salvia, and others
- Induces sensory distortions and psychic effects which change how the user perceives reality
- High potential for injury and safety issues due to impaired thought processes and perceptions



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Hallucinogens

- In 2022, 8.5 million people ages 12+ used hallucinogens in the past year (NSDUH)
 - Highest prevalence of use among emerging adults ages 18-25 (7.7%) – but highest growth rate among adults age 50+ (264% increase)
- Among adults aged 19-30, past-year non-LSD hallucinogen use more than doubled from 2018-2021
- Use among adults 35-50, past-year hallucinogen use reached an all-time high in 2022
- Hallucinogen use is generally higher among white males with college-educated parents



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Hallucinogens

- Emerging research has shown that certain psychedelics may be useful in the treatment of behavioral health disorders
 - Esketamine approved by the FDA for use in treatment-resistant depression
- Legislation to decriminalize hallucinogens has been introduced in at least 22 states
- Psilocybin has been fully legalized in Oregon and Colorado
- Law enforcement seizures of psilocybin rose by nearly 350% between 2017-2022



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Tianeptine

- Also known as “Gas Station Heroin”
- Sold under brand names Pegasus, Tianaa, Zaza Red
- Prescribed as an antidepressant in other countries but not approved for any medical use by the FDA
- Bonds to opioid receptors in the brain and mimics the effects of heroin in high doses
- Banned in 9 states as of May 2024



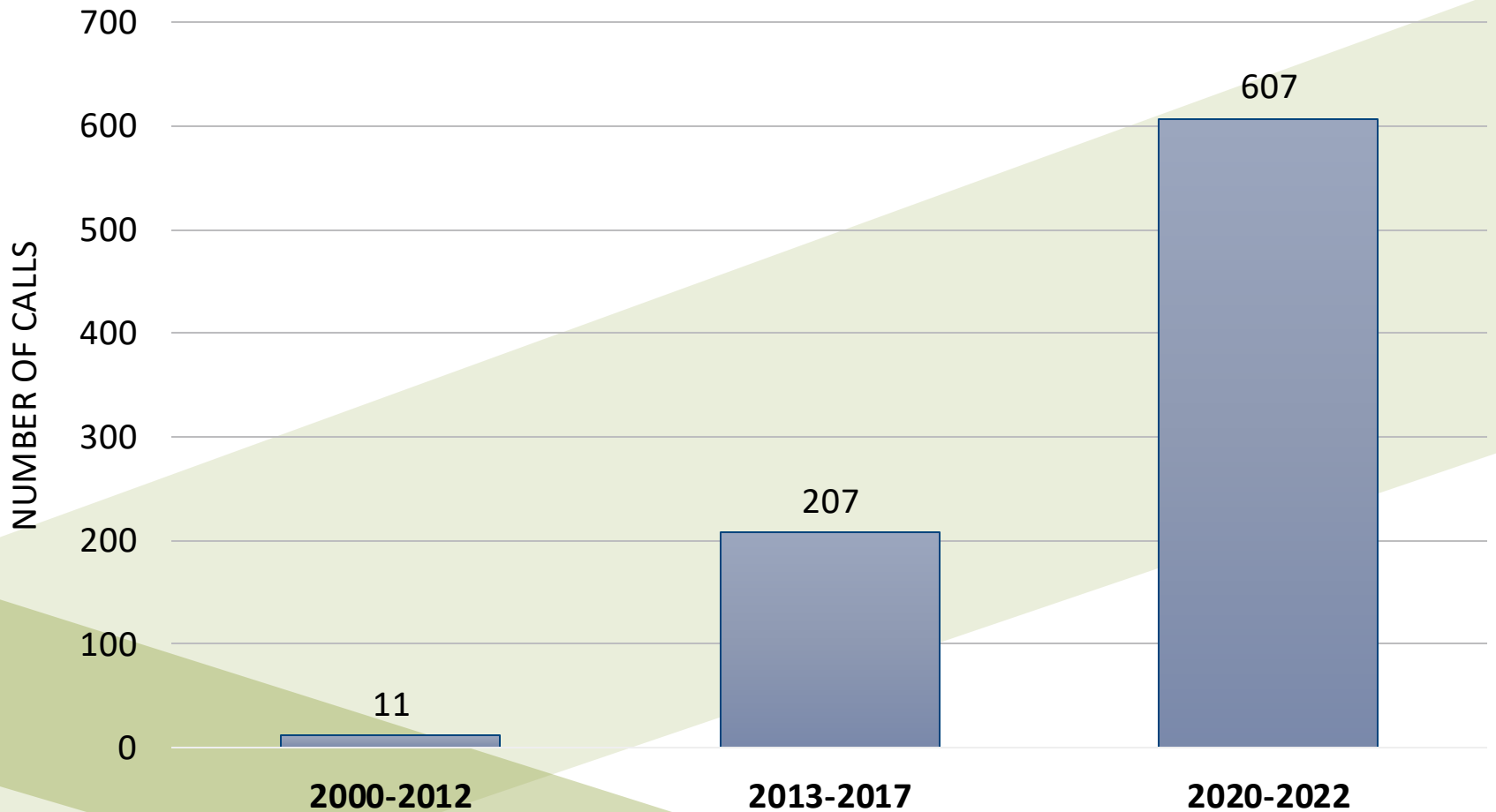
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Tianeptine-Related Calls to Poison Control Centers Over Time



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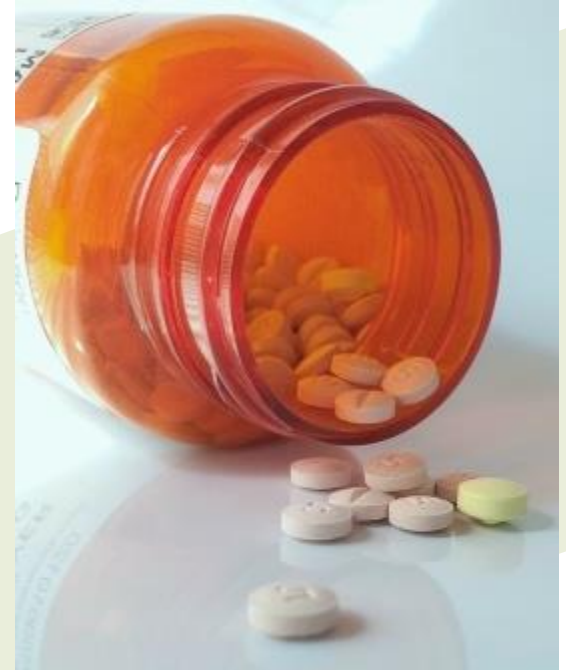
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Bromazepam

- Was first synthesized in 1976 but never approved for therapeutic use
- Acts predominantly as a sedative
- Mostly detected alongside fentanyl or other opioids (88%-100% of tested samples)
- Can be life-threatening, even in the absence of other drugs
- Law enforcement seizures that involved bromazepam increased from >3 per year during 2016–2018 to 2,142 in 2022, and 2,913 in 2023



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QUESTION

Are you seeing any of these trends in your communities? Which are standing out to you?



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Federal Efforts to Address Emerging Trends

- Increasing flexibility of grant funding
- Changing drug scheduling
- Expanding interdiction efforts
- Supporting ongoing intervention research
- Ongoing epidemiological surveillance and data reporting



Data Sources & Data Collection



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Finding Data

- Data collection begins with determining what data sources already exist and whether or not you have access to these data
- Start by determining the complete universe of relevant data sources first, then narrow down, as necessary



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Examples of Data Sources

National	State	Local
<ul style="list-style-type: none"> National Survey on Drug Use and Health (SAMHSA) Wide-ranging Online Data for Epidemiologic Research (WONDER) (CDC) Behavioral Risk Factor Surveillance System (CDC) Youth Risk Behavioral Surveillance System (CDC) U.S. Census Drug Abuse Warning Network (SAMHSA) 	<ul style="list-style-type: none"> Department of Education Department of Health/Public Health Department of Motor Vehicles (DMV) State Police Office of State Courts State Liquor Licensing Agency Prescription Drug Monitoring Program (PDMP) 	<ul style="list-style-type: none"> County/municipal health departments Medical examiner/coroner Local hospitals, urgent care centers, health care providers Substance use treatment and recovery providers Local law enforcement School districts Local colleges/universities

...and many more!



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Data Elements to Look For

- Prevalence data
 - What substance misuse problems are happening in the community?
 - Where in the community are they happening?
- Risk and protective factor data
 - Why is this happening in the community?
- You may also want to collect data related to your capacity to try and address these emerging issues
 - How capable are we of helping the community?
 - Who can we work with to help the community?



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Surveys

Advantages

- Can be highly accurate
- Can be highly reliable and valid
- Can be compared to other populations
- Can be used to generate quantitative data
- Easier to summarize and analyze findings
- Can add more sensitive questions

Challenges

- Accuracy constrained by size and diversity of reachable sample
- Can be high cost
- Time-consuming to create and use
- Can have low response rates
- Difficult to explore issues in depth
- Cannot clarify questions
- Cannot build rapport with respondents



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Key Informant Interviews

Advantages

- Can be low cost
- Can have short turnaround time
- Respondents define what is important
- Can explore issues in depth
- Can clarify responses through probes
- Can be source of leads to other data
- Have generally lower refusal rates
- Can be opportunity to build partnerships

Challenges

- Can be time-consuming to schedule
- Requires skilled/trained interviewers
- Have limited generalizability
- Produce limited quantitative data
- Might not provide sensitive data
- Can be difficult to analyze findings
- Potential for interviewer bias



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Focus Groups

Advantages

- Can be low cost
- Can have short turnaround time
- Participants define what is important
- Can explore issues in depth
- Can clarify responses through probes

Challenges

- Can be time-consuming to assemble
- Require skilled/trained facilitators
- Have limited generalizability
- Produce limited quantitative data
- Offer less control over the process
- Might not provide sensitive data
- Can be difficult to analyze findings



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A Culturally Responsive Public Health Approach to Substance Use



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Importance of Cultural Humility to Public Health & Prevention

- Culture shapes every interaction we have, intentionally or not
- Prevention professionals & their partners work in different settings with individuals from diverse cultures in many capacities
- As new trends emerge, there are new chances that you will work with populations new to you
- Vital to meet these populations on their terms and not try to implement a “one size fits all” approach



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3 Core Tenets of Cultural Humility



1. Life-long commitment to self-reflection



2. Actively seek to address power imbalances



3. Develop non-paternalistic, mutually beneficial partnerships with communities



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Using Cultural Humility in Substance Use Prevention

Look inwards

Work outwards

Solicit the expertise of those with the lived experience

Follow the principles of cultural competence



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Supporting Prevention Outcomes

- Cultural humility is an ongoing, lifelong commitment to self-critique/exploration; holding institutions accountable; and building partnerships
 - Mirrors much of what PH seeks to accomplish as well
- Social justice and ethics are woven throughout the principles and tenets of cultural humility and how we want a public health approach to be implemented
- It is critical to incorporate the core concepts of CH and PH into the strategic planning process as we do our prevention work to best address substance use



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Conclusion

- The substance use landscape is ever-changing
- Need to understand the causes behind emerging trends and follow the principles of strategic planning to address them
- Important to address the underlying causes of substance use; not reinventing the wheel
- BUT, emerging trend data can allow us to better identify and serve community needs
- The earlier we address a trend, the greater the impact we can have!



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Let's Hear From You!

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