Welcome!

While we wait to start, please review ways to navigate this webinar.

If you move your **cursor** to the **bottom** of **your screen** you will see a **menu**.



This menu allows you to **control**:

- •Raise Hand
- •Access to the Chat box
- •Access to the **Q & A** box

Camera options are not available for participants. Participants can be unmuted by raising their hand and being recognized by the presenter.



Housekeeping









This session is being recorded to **Tomorrow's Healthcare** If you used a forwarded link, we need your email address Pose questions in the chat to all participants Please complete the post-session evaluation







No members of the planning committee, speakers, presenters, authors, content reviewers, and/or anyone else in a position to control the content of this education activity have relevant financial relationships with any entity producing, marketing, re-selling, or distributing health care goods or services, used on, or consumed by, patients to disclose.



Continuing Education Information

In support of improving patient care, this activity has been planned and implemented by the University of Pittsburgh and The Jewish Healthcare Foundation. The University of Pittsburgh is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME) and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team. **1.25 hours is approved for this course**.

As a Jointly Accredited Organization, University of Pittsburgh is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. State and provincial regulatory boards have the final authority to determine whether an individual course may be accepted for continuing education credit. University of Pittsburgh maintains responsibility for this course. Social workers completing this course receive **1.25 continuing education credits**.



Disclaimer

The information presented at this Center for Continuing Education in Health Sciences program represents the views and opinions of the individual presenters, and does not constitute the opinion or endorsement of, or promotion by, the UPMC Center for Continuing Education in the Health Sciences, UPMC/University of Pittsburgh Medical Center or affiliates and University of Pittsburgh School of Medicine. Reasonable efforts have been taken intending for educational subject matter to be presented in a balanced, unbiased fashion and in compliance with regulatory requirements. However, each program attendee must always use his/her own personal and professional judgment when considering further application of this information, particularly as it may relate to patient diagnostic or treatment decisions including, without limitation, FDA-approved uses, and any offlabel uses.



Mutual Agreement

- Everyone on every Program Evaluation and Research Unit (PERU) webinar is valued.
 Everyone has an expectation of mutual, positive regard for everyone else that respects the diversity of everyone on the webinar.
- We operate from a **strength-based**, **empathetic**, and **supportive** framework with the people we serve, and with each other on PERU webinars.
- We encourage the use of affirming language that is not discriminatory or stigmatizing.
- We treat others as **they** would like to be treated and, therefore, avoid argumentative, disruptive, and/or aggressive language.

Mutual Agreement (continued)

- We strive to: **listen** to each person, avoid interrupting others, and seek to **understand** each other through the Learning Network as we work toward the highest quality services for Centers of Excellence (COE) clients.
- Information presented in Learning Network sessions has been vetted. We recognize that people have different opinions, and those **diverse perspectives** are welcomed and valued. Questions and comments should be framed as **constructive feedback**.
- The Learning Network format is **not conducive to debate**. If something happens that concerns you, please send a chat during the session to the panelists and we will attempt to make room to address it either during the session or by scheduling time outside of the session to process and understand it. Alternatively, you can reach out offline to your PERU point of contact.



PERU

Program Evaluation and Research Unit

Current Trends in SUD and Treatment



Learning Objectives

By the end of this training, trainees should be able to do the following:

- Describe the current trends in overdose and treatment utilization through an equity lens.
- Discuss trends in common adulterants including their contribution to injection-related wounds



Background



Impact of Substance Use Disorder



SUD has **widespread** consequences

Awareness is critical to addressing SUD

A comprehensive response is necessary

> School of Pharmacy

University of

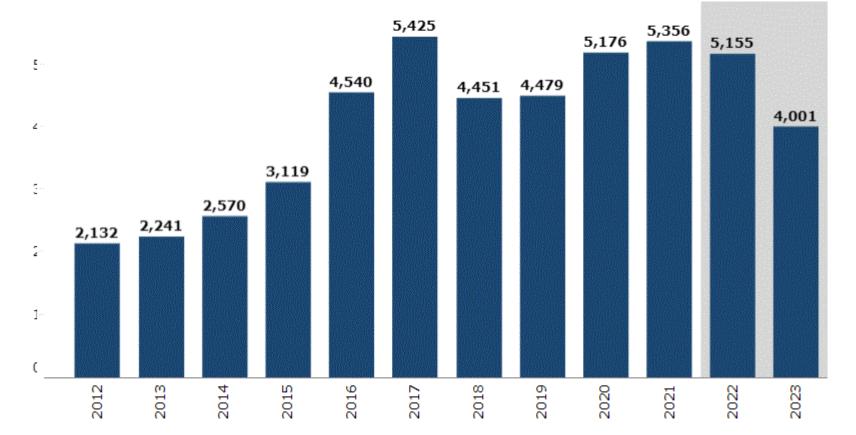
Pittsburgh

Overdose Trends



Pennsylvania Overdose Deaths

Pennsylvania | Any Drug Overdose Death Estimates by Year



2022 and 2023 counts are prelimir

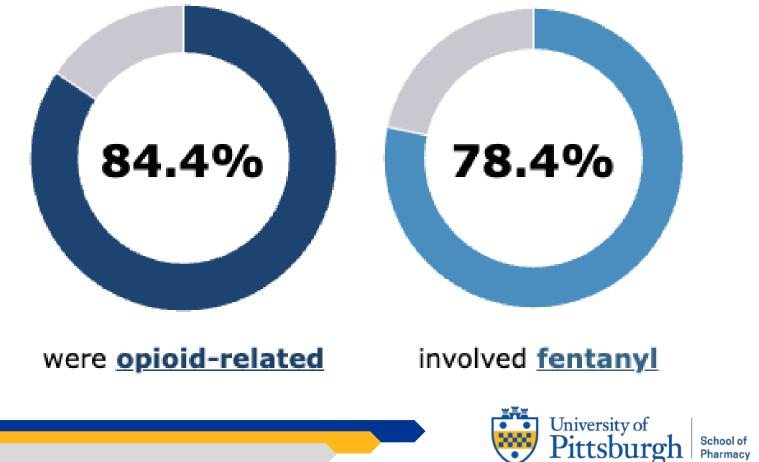


Copyright 2024, University of Pittsburgh. All Rights Reserved.

•

Opioid Related Overdose

Of the 5,158 overdose deaths in 2022,



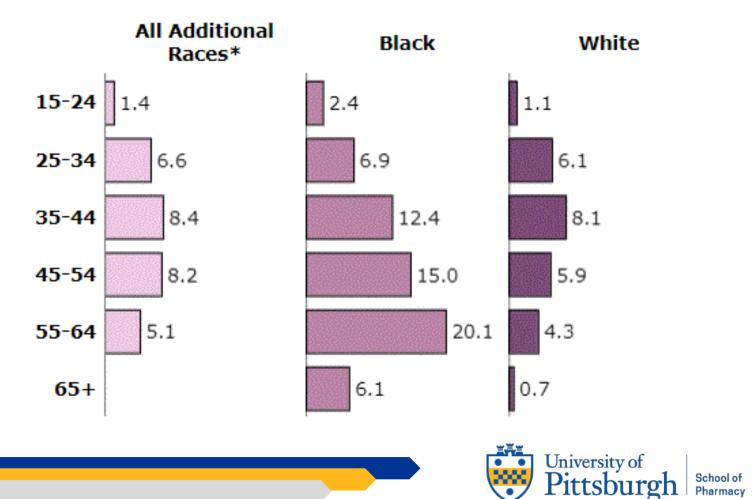
14

Copyright 2024, University of Pittsburgh. All Rights Reserved.

(Pennsylvania ODSMP, 2023)

Disparity in Overdose Deaths

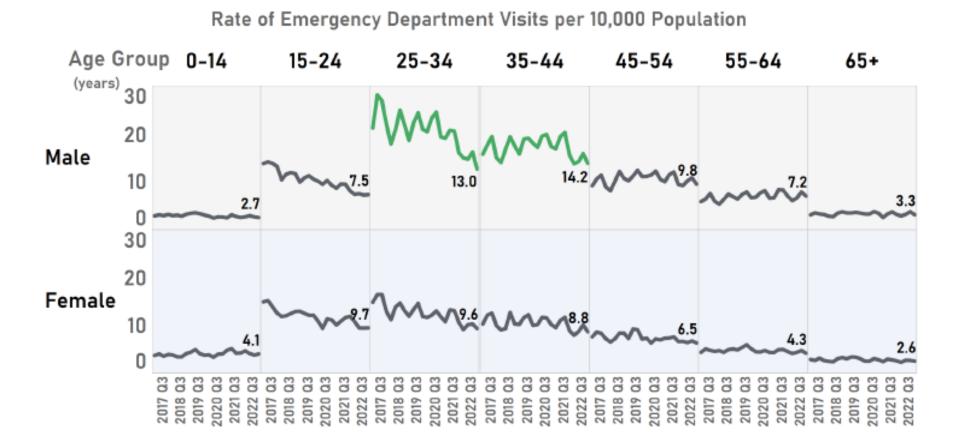
Age and Race



Copyright 2024, University of Pittsburgh. All Rights Reserved.

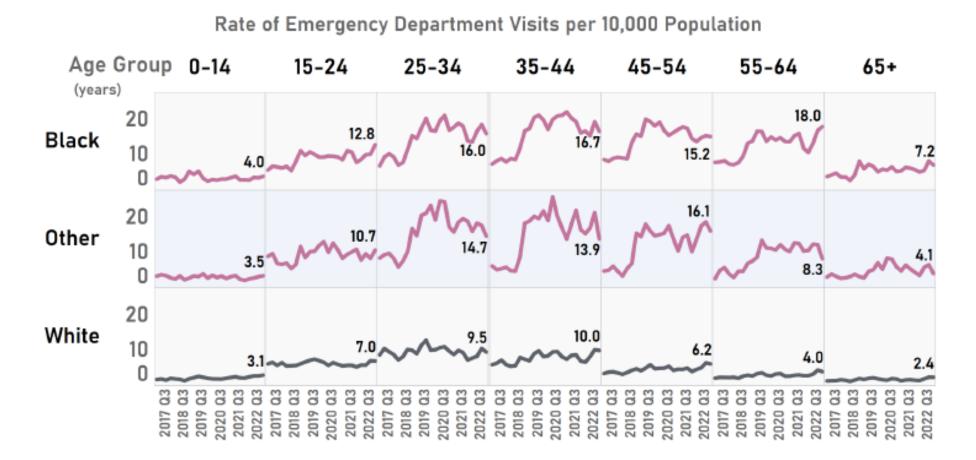
PERU

Non-Fatal Overdoses by Sex and Age





Disparity in Non-Fatal Overdoses

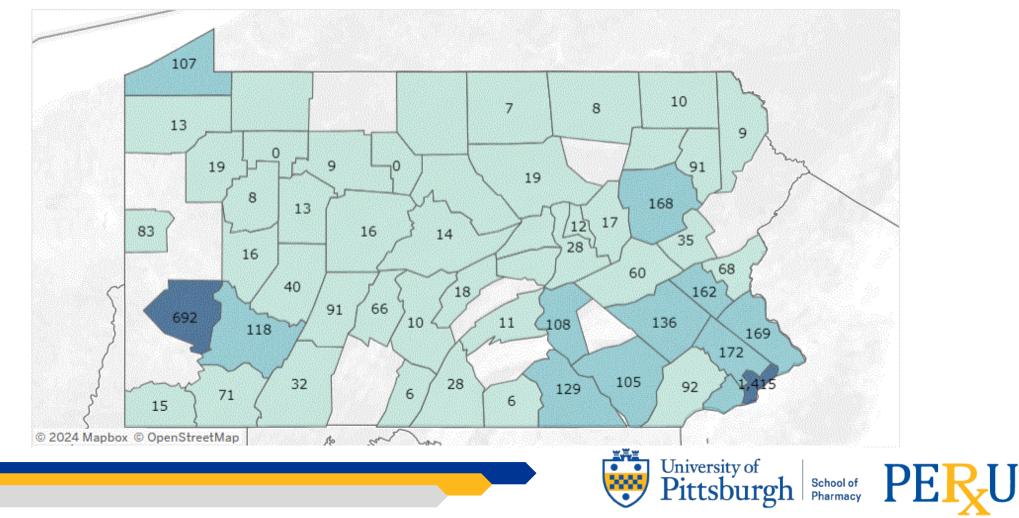




17

Regional Overdose Trends

2022 | Any Drug Overdose Deaths by County



Substance Use Trends



Discussion Question

What trends do you see at your COE? How do you identify trends?







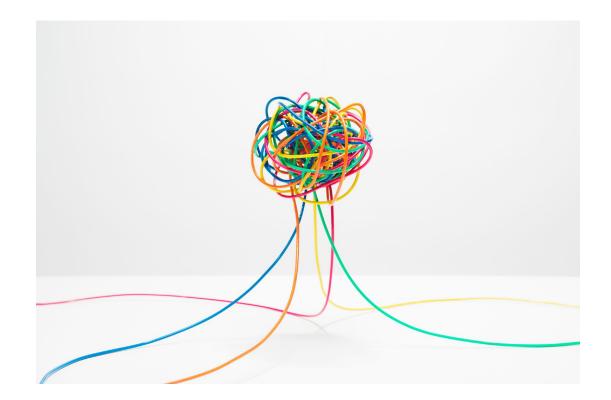
Resources for Identifying Drug Trends





Polysubstance Use

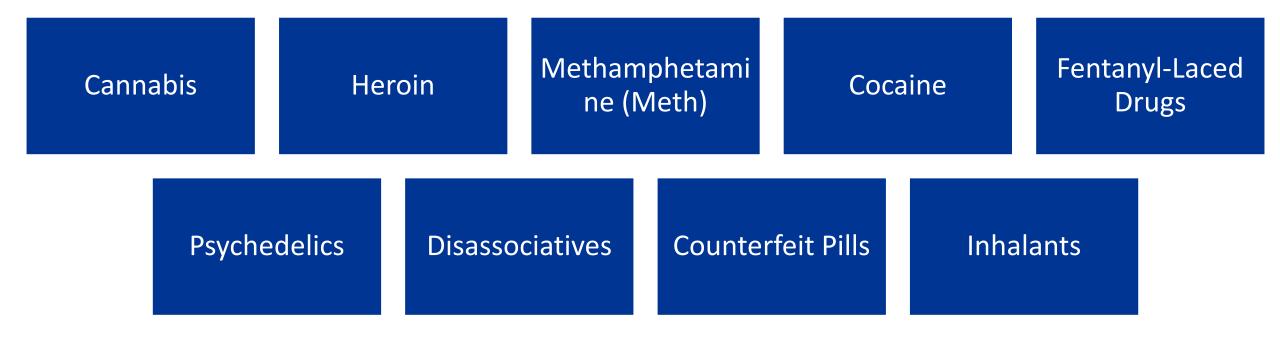
- Rising polysubstance use
- Unpredictable and deadly overdose scenarios
- Over half of overdose deaths involve **multiple substances**







Common Street Drugs in 2023





23

Tobacco Use Trends

- Nicotine use declined to 19% from 20.8% across all products including e-cigarettes¹
- Cigarettes were most common in 2020 followed by e-cigarettes, cigars, smokeless tobacco¹
- Disparities exist¹
- Smoking rates in adults with MH/SUD remain higher than their counterparts without MH/SUD issues²





New and Novel Psychoactive Substances (NPS)



NPS Surveillance



Definition Surveillance Barriers



26

Nitazenes

- Potent synthetic opioids
- Varying forms: powders, sprays, pills
- Not detectable by fentanyl test strips
- Naloxone is effective but often requires higher/multiple doses



(Image: Wilkinson, 2023)



27

Designer Benzodiazepines

- Mimic approved **benzodiazepines** with minor modifications
- Rising concerns over illegal **availability** and recreational **use**
- Lower health risk compared to other designer psychotropic agents despite increasing prevalence





28

Xylazine

- Non-opioid sedative often mixed with opioids like fentanyl¹
- Severe health risks¹
- Rising xylazine in **overdoses**²
- Highest in Philadelphia (26%)²
- Lack of routine testing for xylazine presence in overdoses²



(Image: National Harm Reduction Coalition, 2024)



Kratom



(Image National Center for Complementary and Integrative Health)

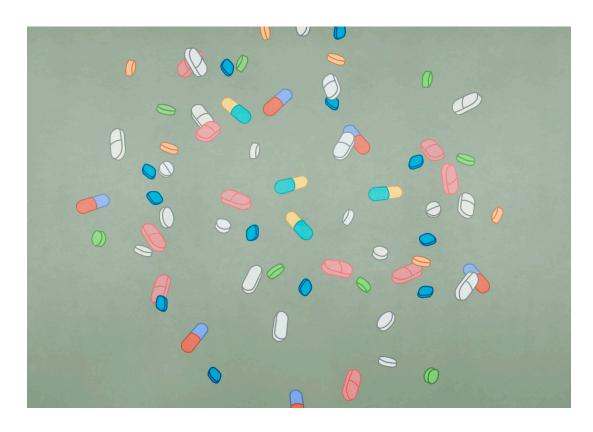
- Legally sold herbal supplement
- Found as leaves, capsules, tablets, powder and liquid extract
- Effects vary from stimulant to opioid-like
- Ongoing research to understand health impacts and potential therapeutic uses





30

Carfentanyl



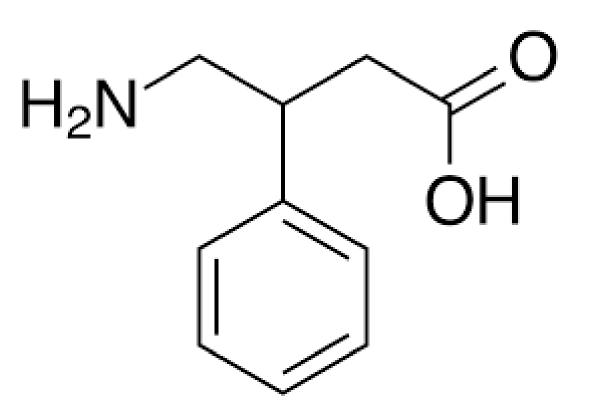
- 100x stronger than fentanyl, 10,000x more potent than morphine
- Found as powder, tablet, blotter
 paper
- Commonly **mixed** with other drugs





Phenibut

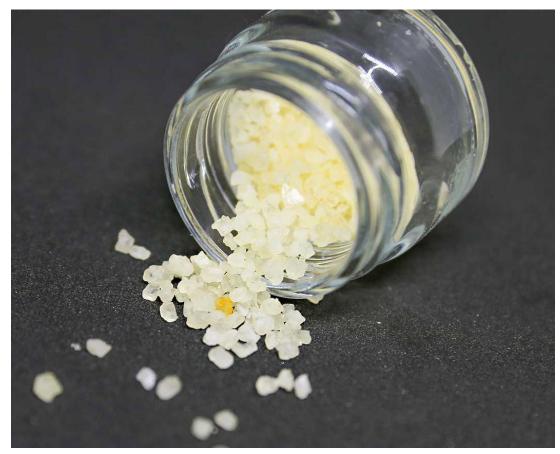
- **Depressant** with effects like benzodiazepines
- Dietary supplement in tablet, powder, or capsule
- Associated risks preclude prescription use





Flakka

- Highly addictive stimulant
- Appears as pale or pinkish crystal
- Usage methods include vaporizing, snorting



(Image: The Recovery Village, 2022)



Synthetic Cannabinoids (e.g., K2, Spice)

- Potent, **man-made** compounds, more dangerous than natural marijuana
- Available as a liquid for vaporizing or plantlike material for smoking
- Notably stronger effects than natural marijuana





Tianeptine (Tianna, Tiana Red, Zaza Red)

- Tricyclic antidepressant
- Not FDA approved but it is available as dietary supplement in some US states, banned in other states
- Side effects include agitation, confusion, respiratory depression, risk of death at high doses
- Naloxone is effective





Trends in Treatment



Trends in Treatment Access

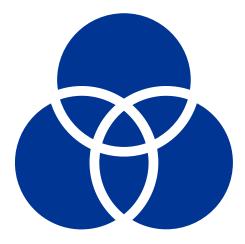
- Increased telehealth usage¹
- Increased outpatient utilization²
- SUD treatment stagnant²
- Increased SUD treatment in criminal justice²
- Increased proportion of clients receiving Medicaid²





Disparity in SUD Treatment

- Socioeconomic Disparities¹
- Geographic Disparities¹
- Race and Ethnicity¹
- Age-Related Disparity²





Fentanyl Vaccine



- Vaccine under development to block fentanyl's effects
- Produces antibodies against fentanyl, reduces pain-relief and brain impact
- Limits dangerous physical effects, potential aid for substance use treatment





39

Other Trends in Treatment

- Treatment **tailored** to individuals
- Growing recognition of dual diagnosis
- Improved combined treatment approaches
- Increased understanding of the role of trauma
- Enhanced **prevention** efforts





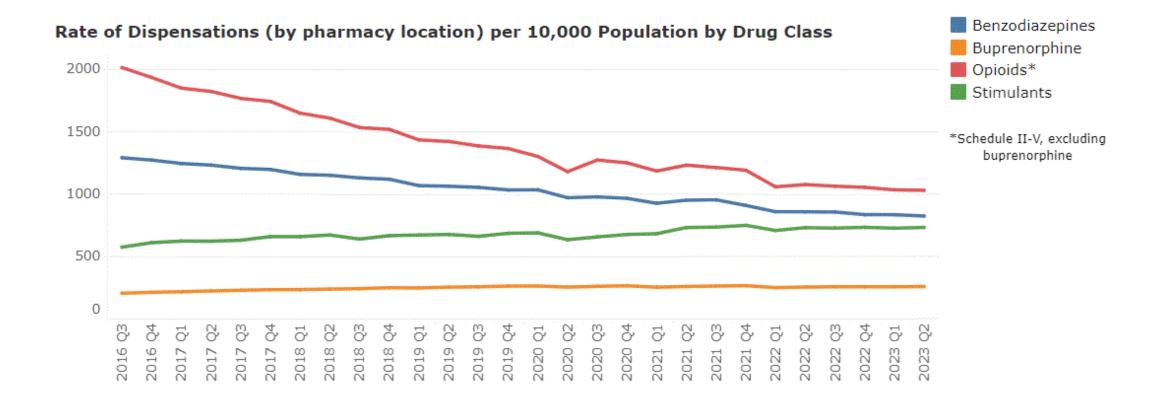


Approaches to Addressing New Psychoactive Substances

Employ	Employ comprehensive, adaptable approaches
Tailor	Tailor treatment
Educate	Educate providers
Integrate	Integrate medical, psychological, social support



Prescribing Trends





42

Other Trends



Depression

- Adolescents
- Consistent across demographics
- Low treatment utilization
- Shortage of **psychiatrists**
- Geographic and economic considerations

Suicide

- Increased suicide deaths in 2021-2022
- Decreased in specific demographics
- Recognized national mental health crisis





Solutions for the Current Mental Health Crisis

- Training programs for primary care providers
- Integrating behavioral health into primary care
- Developing scalable **online** mental health services
- Establishing coordinated mental health service networks
- Comprehensive continuum of care models
- Community and policy initiatives
- Aligning stakeholders and resources





Wounds

- PWID are a priority population for COEs¹
- Risk factors include being age over 30, females, those who experience homelessness, cocaine use, and having 5-10 years drug history¹
- Heroin-related soft tissue infections (STI) hospitalizations doubled between 2000 and 2010²
- Racial disparities in STI rates²
- Significant increase in those who reported an abscess in their lifetime³



University of

School of Pharmacy

- Acevedo, A., Panas, L., Garnick, D., Acevedo-Garcia, D., Miles, J., Ritter, G., & Campbell, K. (2018). Disparities in the Treatment of Substance Use Disorders: Does Where You Live Matter?. The journal of behavioral health services & research, 45(4), 533–549. https://doi.org/10.1007/s11414-018-9586-y
- Benrubi, L. M., Silcox, J., Hughto, J., Stopka, T. J., Palacios, W. R., Shrestha, S., Case, P., & Green, T. C. (2023). Trends and correlates of abscess history among people who inject drugs in Massachusetts: A mixed methods exploration of experiences amidst a rapidly evolving drug supply. Drug and Alcohol Dependence Reports, 8, 100176–100176. https://doi.org/10.1016/j.dadr.2023.100176
- Cahn, B. A., Bartholomew, T. S., Patel, H. P., Pastar, I., Tookes, H. E., & Lev-Tov, H. (2021). Correlates of injection-related wounds and skin infections amongst persons who inject drugs and use a syringe service programme: A single center study. International Wound Journal, 18(5), 701–707. https://doi.org/10.1111/iwj.13572
- Ciccarone, D., Unick, G. J., Cohen, J. K., Mars, S. G., & Rosenblum, D. (2016). Nationwide increase in hospitalizations for heroin-related soft tissue infections: Associations with structural market conditions. Drug and Alcohol Dependence, 163, 126–133. https://doi.org/10.1016/j.drugalcdep.2016.04.009

University of

Pittsburgh

School of Pharmacy

- Cornelius, M. E., Loretan, C. G., Wang, T. W., Jamal, A., & Homa, D. M. (2022). Tobacco product use among adults—United States, 2020. Morbidity and Mortality Weekly Report, 71(11), 397.
- Creedon, T. B., Wayne, G. F., Progovac, A. M., Levy, D. E., & Cook, B. L. (2023). Trends in cigarette use and health insurance coverage among US adults with mental health and substance use disorders. Addiction, 118(2), 353-364.
- Drug Enforcement Administration (DEA). (2023). Tianeptine. Drug Enforcement Administration Diversion Control Division. https://www.deadiversion.usdoj.gov/drug_chem_info/tianeptine.pdf
- Fischer, R. (2023). Drug Abuse Trends and Treatment Approaches for 2023. Psychiatric Times. Retrieved from https://www.psychiatrictimes.com/view/drug-abuse-trends-and-treatment-approaches-for-2023
- Friedman J, Montero F, Bourgois P, Wahbi R, Dye D, Goodman-Meza D, Shover C. Xylazine spreads across the US: A growing component of the increasingly synthetic and polysubstance overdose crisis. Drug Alcohol Depend. 2022 Apr 1;233:109380. doi: 10.1016/j.drugalcdep.2022.109380. Epub 2022 Feb 26. PMID: 35247724; PMCID: PMC9128597.



University of

Pittsburgh

School of Pharmacy

- Goodwin, R. D., Dierker, L. C., Wu, M., Galea, S., Hoven, C. W., & Weinberger, A. H. (2022). Trends in U.S. Depression Prevalence From 2015 to 2020: The Widening Treatment Gap. American journal of preventive medicine, 63(5), 726–733. https://doi.org/10.1016/j.amepre.2022.05.014
- Haile, C. N., Baker, M. D., Sanchez, S. A., Lopez Arteaga, C. A., Duddupudi, A. L., Cuny, G. D., ... & Kosten, T. A. (2022). An Immunconjugate Vaccine Alters Distribution and Reduces the Antinociceptive, Behavioral and Physiological Effects of Fentanyl in Male and Female Rats. Pharmaceutics, 14(11), 2290.
- National Institute on Drug Abuse (NIDA). (2022). Kratom. National Institutes of Health. https://nida.nih.gov/research-topics/kratom
- Pennsylvania ODSMP Drug Overdose Surveillance Interactive Data Report [Data visualization] (2023). Tableau Public. Retrieved from https://public.tableau.com/app/profile/pennsylvania.pdmp/viz/PennsylvaniaODSMPDrugOverdoseSurveillan ceInteractiveDataReport/Contents



- Philadelphia Department of Public Health (PDPH). (2022). PDPH Health Advisory Notice: Nitazene Analogs. Retrieved from https://hip.phila.gov/document/3203/PDPH-HAN_Alert_2_NitazeneAnalogs_12.21.2022.pdf/
- Saloner, B., Li, W., Bandara, S. N., McGinty, E. E., & Barry, C. L. (2022). Trends In The Use Of Treatment For Substance Use Disorders, 2010-19. Health affairs (Project Hope), 41(5), 696–702. https://doi.org/10.1377/hlthaff.2021.01767
- Talcherkar, A., Ph.D. (2022). Street Drugs to Watch 2022. Addiction Resource. Retrieved from https://www.addictionresource.net/blog/street-drugs-to-watch-2022/
- UCI Paul Merage School of Business. (2022, July 28). Best practices to improve mental health access & outcomes. https://merage.uci.edu/news/2022/07/Best-Practices-to-Improve-Mental-Health-Access-Outcomes.html
- /



- United Nations Office on Drugs and Crime (UNODC). (2023). UNODC Early Warning Advisory (EWA) on New Psychoactive Substances (NPS). Retrieved from https://www.unodc.org/LSS/Home/NPS
- USAFacts. (2023). What's the state of telehealth after COVID-19? Retrieved from https://usafacts.org/articles/whats-the-state-of-telehealth-after-covid-19
- Welsh, J. W., Dennis, M. L., Funk, R., Mataczynski, M. J., & Godley, M. D. (2022). Trends and age-related disparities in opioid use disorder treatment admissions for adolescents and young adults. Journal of Substance Abuse Treatment, 132, 108584–108584. https://doi.org/10.1016/j.jsat.2021.108584
- Zamengo, L., Frison, G., & Zwitser, G. (2019). Understanding and managing the new psychoactive substances phenomenon: a holistic approach. Journal of Public Health Policy, 40, 217-235.





The University of Pittsburgh School of Pharmacy, Program Evaluation and Research Unit (PERU) is dedicated to meaningful work that facilitates each patient or community member's ability to achieve optimal health, well-being, recovery and choice.