

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

Dangerous synthetic opioid emerging across Ohio, turning up in Tri-State

COLUMBUS, Ohio (WKRC) - A dangerous synthetic opioid, up to 40 times stronger than fentanyl, is turning up in the Tri-State. Ohio Attorney General Dave Yost is sounding the alarm about nitazenes. Created back in the 1950s, the drug was never approved for medical use. Now, it's being made in makeshift labs and popping up on streets across Ohio. According to the Ohio Bureau of Criminal Investigations, Butler, Montgomery, and...

In Toledo, Portman Participates in Roundtable Discussion with Lucas County Health Department Opiate Coalition, Discusses His Work to Combat our Country's Drug Epidemic

WASHINGTON, DC – Today, U.S. Senator Rob Portman (R-OH) participated in a roundtable discussion with the Lucas County Health Department Opiate Coalition – a multi-sector coalition that meets to discuss strategies, interventions, prevention and policies to help combat the effects of the opioid epidemic – where the group discussed Lucas County's efforts to combat the epidemic in their community and how Congress can better...

28-year-old man dies of overdose because law made friends afraid to call 911|Opinion

Last spring, a 28-year-old man in East Liverpool became one of nearly 5,000 Ohioans who lost their lives to drug overdose in 2021. This man's life could have been saved if his friends had called 911 in time. But they waited too long. By the time

paramedics arrived, he was gone. Why did his friends wait to call for help? The short answer is fear. The house they were in was full of people on parole and probation, and drug paraphernalia was...

STRIKE force targets drug houses in southeastern Ohio

ATHENS, Ohio (WCMH) — A new task force is taking aim to shut down drug houses in southeastern Ohio. The Southeastern STRIKE (Suppression Through Rural, Interstate, Knowledgeable Enforcement) brings together more than a dozen law enforcement agencies across Washington, Noble, Morgan, Monroe and Athens counties. “The focus is on shutting down drug houses,” Athens County Sheriff Rodney Smith said. “Eighty-five...

New opioids banned in Ohio after DeWine’s executive order

A recent executive order signed by Ohio Gov. Mike DeWine effectively banned certain opioids because of their dangers of abuse and addiction. Seven benzimidazole-opioids were banned as the abuse of the substances are public health and safety risks, according to the executive order. The now-banned opioids are butonitazene, etodesnitazene, flunitazene, metonitazene, metodesnitazene, N-pyrrolidino etonitazene, and protonitazene. The State of...

National News

Tobacco Use Declined Among People With Major Depression, Substance Use Disorder: NIH.

[The Hill](#) (4/26, Choi, 5.69M) reports in continuing coverage that new research conducted by the National Institute on Drug Abuse (NIDA) and the Substance Abuse and Mental Health Services Administration indicates that the “rate of tobacco use among American adults with major depression, substance use disorder or both was found to have decreased between 2006 and 2019.” The findings were published April 26 in JAMA. NIDA Deputy Director Wilson Compton, MD, said that the results are “a public health success story.” According to the Hill, “NIDA Director Nora Volkow, who was a co-author of the study, said the results showed that tobacco cessation ‘should be prioritized’ along with treatments for substance abuse and depression.”

Additional Sources. [MedPage Today](#) (4/26, Firth, 183K) reports that the exploratory cross-sectional study “included data on 558,960 adults who participated in the 2006-2019 US National Surveys on Drug Use and Health.” MedPage Today adds, “From 2006 to 2019, past-month self-reported cigarette use fell from 37.3% to 24.2% for adults with major depressive episodes (MDEs), for an average annual percent change of -3.2 (95% CI -3.5 to -2.8), reported” Compton and colleagues. In addition, “for adults with substance use disorders (SUDs), past-month use decreased from 46.5% to 35.8% during the study period, an annual percent change of -1.7 (95% CI -2.8 to -0.6), they noted.”

[RT Magazine](#) (4/26, 60K) reports that Compton added that there is “still a lot of work to be done to ensure tobacco use in patients with substance use disorder,

depression, or other psychiatric conditions continue to decrease. It is crucial that healthcare providers treat all the health issues that a patient experiences, not just their depression or drug use disorder at a given point in time. To do this, smoking cessation therapies need to be integrated into existing behavioral health treatments. The result will be longer and healthier lives for all people.”

President Biden Announces National Drug Control Strategy Prioritizing Harm Reduction.

The AP (4/21, Johnson) reports President Biden “is sending his administration’s first national drug control strategy to Congress as the U.S. overdose death toll hit a new record of nearly 107,000 during the past 12 months.” The new “strategy, released Thursday, is the first national plan to prioritize what’s known as harm reduction, said” Office of National Drug Control Policy director Dr. Rahul Gupta. The plan “calls for changes in state laws and policies to support the expansion of harm reduction.”

A Washington Post (4/21, Bernstein, 10.52M) analysis says the plan “calls for working to ensure that naloxone...fentanyl test strips and syringe exchange programs reach anyone who needs them.” Also, it “emphasizes expanding treatment for people at the highest risk of overdosing – the homeless, people leaving jail and prison...and people who inject drugs.” The Post says the focus on harm reduction “is hardly a surprise: Biden campaigned on it and Xavier Becerra, secretary of the Department of Health and Human Services, outlined the administration’s intentions in October.”

The Long Road To Methadone Access In Rural America.

New Republic (4/27, R. Rosen, 192K) reports, “Methadone is many things to many people.” For individuals with opioid use disorder, methadone is “a life-saving medication that keeps them from experiencing debilitating withdrawal or seeking out an increasingly dangerous batch of street drugs.” Meanwhile, for researchers, “methadone is the ‘gold standard’ in medically assisted treatment options for opioid use.” However, “to the U.S. government, it’s a highly regulated Schedule II substance – akin to cocaine, methamphetamine, or fentanyl – and to adherents of abstinence-only and 12-step models of recovery, it’s just another opioid that disqualifies a person from claiming clean time or abstinence.” Access to methadone “is usually curtailed under onerous laws dictating how it is dispensed.” New Republic adds, “The National Institute on Drug Abuse reports that methadone can cost \$126 per week, but the price varies widely, especially among for-profit clinics.”

US Bars, Restaurants Handing Out Free Fentanyl Tests.

Reuters (4/20, Frandino) reports, “Strips to test drugs for the presence of” fentanyl “are becoming more commonplace in bars, restaurants and venues as the country grapples with the opioid epidemic and soaring death toll.” Overdoses of the drug “are now the top cause of death among U.S. residents ages 18-45, surpassing suicide, car accidents and COVID, according to an analysis of federal data by opioid awareness organization Families Against Fentanyl.” Critics of making the test strips

available say that they enable drug users, and “some states treat them as illegal drug paraphernalia.”

FDA Considering Modification To REMS Program For Safe Disposal Of Unused Opioids.

[Bloomberg Law](#) (4/20, Lopez, Subscription Publication, 4K) reports, “The FDA is considering letting patients mail back unused opioids to keep them out of the hands of people struggling with substance use disorder in the Biden administration’s latest move to fight rising overdoses.” According to the article, “Health providers dispensing opioids in an outpatient setting would be required to provide patients with ‘mail-back envelopes and education on safe disposal’ of unused drugs under a tweak to the” agency’s “Opioid Analgesic Risk Evaluation and Mitigation Strategy the agency floated past stakeholders in a Wednesday filing requesting public comments.”

[MedPage Today](#) (4/20, Ingram, 183K) reports, “FDA cited advantages to the mail-back envelope plan: patients don’t need to mix their unused opioids with water or other chemicals, which is typically required with at-home disposal techniques; and the medications would not wind up in landfills or the water supply, as they would be sent to Drug Enforcement Administration-registered facilities in a nondescript postage-paid envelope, and then incinerated.” FDA Commissioner Robert Califf, MD, stated that the agency “is committed to addressing the opioid crisis on all fronts, including exploring new approaches that have the potential to decrease unnecessary exposure to opioids and prevent new cases of addiction.”

Opinion: Newly Enacted Tennessee Law Will Combat Opioid Epidemic By Ensuring Increased Access To Overdose Reversal Medications.

In an opinion for the [Tennessean](#) (4/27, 645K), Tennessee Association of Alcohol, Drug & Other Addiction Services Executive Director Mary Linden Salter writes that Tennessee “cannot lose sight of the effects of a growing opioid crisis.” She adds, “Gov. Bill Lee and the Tennessee General Assembly have acted to combat this epidemic and ensure that community organizations, individuals at risk for overdoses and their families have increased access to these potentially lifesaving opioid overdose reversal medications, such as naloxone.” Salter explains, “Signed into law on March 24, Public Chapter 749 will allow health care practitioners to prescribe an opioid antagonist such as naloxone to individuals at risk for an overdose and their families and friends.”

Senators Push For More Warning Labels About Dangers Of Opioids.

The [New Hampshire Union Leader](#) (4/27, Albertson-Grove, 100K) reports, “In a letter to the newly confirmed commissioner of the Food and Drug Administration, U.S. Sen. Maggie Hassan [D-NH] is urging more warning labels about the dangers of prescription opioids.” Hassan, along with Sen. Mike Braun (R-IN), wrote to FDA Commissioner Robert Califf, saying, “Physicians and other prescribers rely on the FDA’s label to guide and inform clinical decisions. The label should be based on the

best available science, in order for medications to provide the most benefit for patients, with the least harm.” The senators “want to see the FDA push opioid makers to update their warning labels to include more information about the possibility of addiction and the long-term effectiveness of the drugs.”

Specialists Warn Community Members About The Danger Of Drugs.

[KERO-TV](#) Bakersfield, CA (4/26, Polk, Olumi) reports, “The CDC said that over 70% of the nearly 71,000 drug overdose deaths in 2019 involved an opioid, which is a class of drugs used to reduce pain such as fentanyl.” The National Institute on Drug Abuse “said opioid pain relievers are generally safe when taken for a short time and as prescribed by a doctor, but because they produce euphoria, which is a state of intense happiness in addition to the pain relief, they can be misused.” Dr. Raul Gupta, “Director of the White House Office of National Drug Control Policy [ONDCP]...said that the most important action that they can take right now is to save lives.” Gupta “adds that the majority of people with substance use disorder aren’t getting the treatment that they need, which is one of the main drivers of the overdose crisis.”

Opioids More Likely To Kill Americans Than Car Crashes Or Suicide, Report Finds.

Contributor Katharina Buchholz wrote in [Forbes](#) (4/22, 10.33M) that “overdose deaths have once again spiked in the United States, making the lifetimes odds to die from an opioid overdose now more likely than dying from a car crash or from suicide,” according to the National Safety Council latest report on the things most likely to kill Americans. Buchholz adds, “To a person born in 2020 in the US, the probability of dying of an opioid overdose over their lifetime is one in 67 if the number of overdose deaths remained constant in the future. This is the biggest likelihood of any cause of death that is not a disease.”

Walmart, CVS Are Among Large Pharmacies Blocking, Delaying Telehealth Prescriptions For Stimulants For Treating ADHD.

The [Wall Street Journal](#) (4/27, Winkler, Nassauer, Subscription Publication, 8.41M) reports that Walmart, CVS, and other large pharmacies have in the past year blocked or delayed prescriptions by clinicians for telehealth startups for Adderall (amphetamine salt mixture) and other stimulants for treating attention-deficit hyperactivity disorder over concerns that too many are being written.

California Sees Overdose Death Rate Among Prison Inmates Drop By 58 Percent During First Two Years Of Drug Program.

The [AP](#) (4/26, Thompson) reports that the overdose death rate among California prison inmates dropped 58% “during the first two years of a program that uses prescribed drugs to treat more incarcerated addicts than any such program in the country, officials said Tuesday.” In addition, “[hospitalizations] were 48% lower among those receiving the anti-craving drugs than among those waiting to begin

treatment.” The AP adds, “The promising results show the program was effective even after accounting for restrictions during the coronavirus pandemic, according to doctors and researchers with the state corrections system and the federal official who oversees medical care in California prisons.”

Social Media Posts About Nonsuicidal Self-Harm Have Hallmarks Of Addiction-Related Content.

[Neurology Advisor](#) (4/20, Nye) reports, “Social media posts related with nonsuicidal self-injury (NSSI) showed patterns in language and content similar to addiction-related content.” According to the article, “Investigators at the National Institute on Drug Abuse Intramural Research Program extracted posts on Reddit from forums discussing self-harm. These posts were used to characterize and quantify the addiction language and to evaluate the extent to which individuals who engage in self-harm feel they are suffering from an addiction.” The [findings](#) were published in the Journal of Behavioral Addictions.

Physicians Writing “Park Prescriptions” To Improve Mental, Physical Health With Nature Excursions.

[TIME](#) (4/27, Mock, 18.1M) reports that the Center for Nature and Health program at the University of California San Francisco Benioff Children’s Hospital Oakland “takes pediatric patients who are dealing with conditions like anxiety, autism, obesity, or developmental issues – and who live in areas without much nature nearby – into local parks on excursions with park staff each month.” According to Time, “The program is part of a growing trend of so-called ‘park prescriptions,’ which have increased in popularity over the last decade along with research into the health effects of spending time in nature. In these programs, physicians strongly encourage patients young and old to spend more time outside to improve their mental and physical health.” **[This seems like a positive adjunct to many treatment plans – the outside is good for the inside, of you.]**

Can Virtual Reality Help Ease Chronic Pain?

The [New York Times](#) (4/26, Ouyang, 20.6M) reports on virtual reality, which “is emerging as an unlikely tool for” treating chronic pain, providing “relief similar to intravenous opioids.” The Times adds, “The V.R. segment in health care alone, which according to some estimates is already valued at billions of dollars, is expected to grow by multiples of that in the next few years, with researchers seeing potential for it to help with everything from anxiety and depression to rehabilitation after strokes to surgeons strategizing where they will cut and stitch.” Leonardo Angelone, who heads a program at the National Institute on Drug Abuse, said, “There’s no point in developing a technology just because it’s cool.” Therefore, according to the Times, “If V.R.-therapy companies can’t get their products onto patients’ heads, it doesn’t matter what the machinery can do.” The FDA in November “gave authorization for the first V.R. product to be marketed for the

treatment of chronic pain.” [This may have implications for addiction treatment too.]

Reports Of Mental Health Disorders In US Teens Soar.

The [New York Times](#) (4/24, A1, Richtel, Flanagan, 20.6M) reported, “American adolescence is undergoing a drastic change.” Three decades ago, “the gravest public health threats to teenagers in the United States came from binge drinking, drunken driving, teenage pregnancy and smoking.” These “have since fallen sharply, replaced by a new public health concern: soaring rates of mental health disorders.” In 2019, 13 percent of adolescents “reported having a major depressive episode, a 60 percent increase from 2007.” National Institute on Drug Abuse Director Dr. Nora Volkow “described drug and alcohol use as ‘very much of a group dynamic.’” Dr. Volkow added, “To the extent that kids are not in the same place, one would expect a decrease in the behavior.”

Funding Opportunities



GRANTS & FUNDING

NIH Central Resource for Grants and Funding Information

[RFA-DA-23-012](#)

[Pathogenic Mechanisms influencing Blood Brain Barrier function in HIV and Substance Use Disorders \(R01 Clinical Trial Optional\)](#)

[RFA-DA-23-040](#)

[Coordinating Center for the HIV/AIDS and Substance Use Cohorts Program \(U24 Clinical Trial Not Allowed\)](#)

[NOT-AA-22-013](#)

[Notice of NIAAA Withdrawal from Participation in PAR-20-279 "Device-Based Treatments for Substance Use Disorders \(UG3/UH3, Clinical Trial Optional\)"](#)

[PAR-22-151](#)

[Fogarty HIV Research Training Program for Low-and Middle-Income Country Institutions \(D43 Clinical Trial Optional\)](#)

[PAR-22-152](#)

[Planning Grant for Fogarty HIV Research Training Program for Low- and Middle-Income Country Institutions \(D71 Clinical Trial Not Allowed\)](#)

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.

[Society for Neuroscience Invites Nominations for Drug Addiction Research Award](#) Deadline: May 12, 2022

The Society for Neuroscience is seeking nominations for the Jacob P. Waletzky Award, which supports a young scientist whose independent research has led to significant conceptual and empirical contributions to the understanding of drug addiction and who intends to continue to make significant contributions to addiction research and treatment. Both basic and clinical researchers are eligible. Recipients will receive a \$30,000 prize and complimentary registration, transportation (economy air or ground), and two nights of hotel accommodations for the SfN annual meeting. To be eligible, applicants must be within 15 years of a PhD or MD degree. Nominees need not be SfN members. Self-nomination is not permitted.

© [2020 Center for Addiction Research]

