Substance Use

Substance use disorders linked to COVID-19 susceptibility
(ACTION Grant) found in NIH - September 14, 2020

NIDA’s Dr. Volkow and Rong Xu, Ph.D., of Case Western Reserve University in Cleveland, Ohio, analyzed Electronic Health Record (EHR) data collected from 360 hospitals nationwide through June 15, 2020. Just over 10% of the sample had a substance use disorder (SUD) diagnosis compared to 15.6% of COVID-19 cases. Risk factors for COVID-19 (e.g., hypertension, diabetes, cardiovascular diseases, and renal diseases) were more prevalent among African Americans than whites with opioid use disorder. There was also a corresponding increase among African Americans with a recent opioid use disorder diagnosis being over four times more likely than whites to develop a COVID-19 infection.


NIH funds community engagement research efforts in areas hardest hit by COVID-19 (JCOIN) found in NIH - September 16, 2020

The National Institutes of Health announced a $12 million award for the outreach and engagement of ethnic and racial minorities disproportionately affected by COVID-19. The award will help 11 states from the Community Engagement Alliance (CEAL) team to focus on COVID-19 awareness especially among African Americans, Hispanics/Latinos, and American Indians. These populations currently account for over half the reported COVID cases in the United States to date. The CEAL project represents a cooperative effort by the National Institute on Minority Health and Health Disparities (NIMHD) and the National Heart, Lung, and Blood Institute (NHLBI).

Consortium Pushes Telehealth Freedoms for Substance Abuse Treatment (T-CAP) found in *mHealth Intelligence* - September 18, 2020

The Buprenorphine Telehealth Consortium is urging the Health and Human Services Secretary to waive the requirement in the Ryan Haight Act that mandates an in-person exam for emergency treatment during the pandemic and allow the use of telehealth consultation to determine if buprenorphine should be prescribed for those in treatment for substance use disorders. The consortium advocates for providers to be able to use telemedicine or audio-only phones to conduct initial in-person exams for prescribing purposes. They propose that Congress modify the Ryan Haight Act to provide a permanent legislative solution through an audio-only amendment of the already-introduced TREATS Act.” The TREATS Act, introduced in June, mandates the use of audio-visual telemedicine. The consortium is calling for an amendment to that bill to allow for the use of audio-only phones.


Substance-abuse treatment inquires increased 22% in Texas since COVID-19 pandemic (JCOIN) found in *Wichita Falls Times Record News* - September 17, 2020

Since the COVID-19 lockdowns began, in addition to large increases in the reporting of drug overdose deaths, many states have seen significant increases in inquiries into addiction treatment (e.g., 22% increase in Texas; 50% in New Mexico, Maryland, and Virginia; 61% in Iowa).

A 2020 study by the National Bureau of Economic Research found a direct correlation between the rising unemployment rates and an increase in opioid overdose deaths. A recent survey revealed that about 20 percent of recently unemployed Americans were using alcohol as a coping mechanism. The stresses of isolation, unemployment, and financial problems can often lead to increases in alcohol and substance use, even among those in recovery.


Medical Use and Misuse of Prescription Opioids in US 12th-Grade Youth: School-Level Correlates found in the *J of American Academy of Pediatrics* - Sept. 2020

This study examined school-level prevalence and correlates associated with medical use and misuse of prescription opioids from a sample of 228,507 U.S. 12th-graders in 1,079 public and private schools. The Monitoring the Future study provided the data from the years 2002 to 2017. Results showed higher prescription opioid misuse at schools with higher proportions of male students, white students, higher rates of marijuana use, and more frequent medical use of prescription opioids. Study authors conclude that the association between greater school-level medical use of prescription opioids and higher prevalence of prescription opioid misuse “represents a key risk factor to target for prevention efforts.”

[https://pediatrics.aappublications.org/content/early/2020/09/08/peds.2020-0387](https://pediatrics.aappublications.org/content/early/2020/09/08/peds.2020-0387)
Texas awarded two-year, $104 million grant to address the opioid crisis found in Neuces County Record Star - September 24, 2020

The Texas Health and Human Services Commission has secured a two-year, $104 million grant from the U.S. Department of Health and Human Services’ Substance Abuse and Mental Health Services Administration to help people and families impacted by opioids. The $104 million State Opioid Response 2020 grant will increase access to medication-assisted treatment and reduce opioid overdose-related deaths through prevention and recovery activities.


Telehealth


Prior to the COVID-19 pandemic, telehealth could be utilized to deliver substance use disorder (SUD) treatment though insurance coverage limitations prevented widespread use for key treatment components such as individual and group therapy by psychologists and licensed clinical social workers. The Ryan Haight Act required a prior in-person evaluation before controlled substances such as buprenorphine could be prescribed. Such restrictions have been relaxed since the beginning of COVID-19, and individuals are now allowed to get prescriptions for Medication-assisted treatment (MAT) both through teletherapy and in-person consultations. Moreover, patients who would not otherwise have received treatment now have access to individual and group therapy services.


Meeting Kids Where They Are At—A Substance Use and Sexual Risk Prevention Program via Telemedicine for African American Girls: Usability and Acceptability Study (SUHRI) found in Journal of Medical Internet Research - August 2020

Recent data has shown that substance use is higher and initiated at earlier ages in rural compared to urban youth, and that access to drug and sexual risk-taking prevention programs is lacking for these rural youth. In this study, a HIV risk reduction program culturally tailored for African American female adolescents—Sisters Informing, Healing, Living, and Empowering (SIHLE)—was delivered to 39 African American female youth via group telehealth. The aim was to evaluate initial usability and acceptability of this low-cost, technology-based approach to delivering effective, culturally-specific substance use disorder (SUD) prevention programs. Initial results showed overall usability and acceptability of the program.

https://www.jmir.org/2020/8/e16725/
Rural-Nonrural Difference in Telemedicine Use for Mental and Substance Use Disorders Among Medicaid Beneficiaries (IOWA) found in *Psychiatric Services* - April 15, 2020

This study examined the trends in rural and non-rural use of mental and substance use disorder telemedicine among adult Medicaid clients. Through an analysis of years 2012–2017, claims data from the IBM Multi-State Medicaid Database for adult beneficiaries ages 18–64 years with mental and substance use disorder diagnoses, it was found that rates of telemedicine treatment for mental and substance use disorders among Medicaid beneficiaries increased during the study period, but, overall, levels remained low. Among rural beneficiaries, there was a 5.9% increase in telemedicine for mental disorders and a 1.9% increase for substance use disorders. Rural Medicaid clients were more likely to receive telehealth services for mental health and substance use than non-rural clients, and receipt of telemedicine was associated with more in-person outpatient services.

https://ps.psychiatryonline.org/doi/10.1176/appi.ps.201900444

Portman-Whitehouse bill would make telehealth MAT permanent found in *Alcoholism Drug Abuse Weekly* - July 10, 2020

Last month, Senators Rob Portman (R-Ohio) and Sheldon Whitehouse (D-R.I.) introduced the Telehealth Response for E-prescribing Addiction Therapy Services (TREATS) Act to support the expansion of telehealth services for substance use disorder treatment — specifically, for medication-assisted treatment (MAT). The bill would make permanent the waiver allowing the prescription of buprenorphine and other necessary drugs (not methadone) without needing an in-person visit first, and would require Medicare to pay for audio-only telehealth visits. The flexibility was added this spring to reduce exposure to COVID-19, but the lawmakers say it’s necessary to increase overall access to MAT during an opioid crisis. “Telehealth sessions have been a lifeline for those walking the long road to recovery during a stressful, isolating time. Our bipartisan legislation would ensure that recovery support continues to be widely available from the comfort of home after the pandemic wanes.”