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.

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**UC/ Regional News**

**Opinion: Our society often punishes individuals struggling with addiction**

The recent settlement announced between the state of Ohio and consulting business McKinsey & Co. for the firm's role in creating and fueling the opioid epidemic is a perfect example of how we unfairly punish Ohioans dealing with substance-use disorder while allowing the engineers of this crisis to escape with just a slap on the wrist. More than 200,000 lives have been lost to the opioid…

**The Opioid Crisis Was America’s Epidemic Before COVID. Research Suggests that Overdoses Hurt Student Achievement**

Long before the emergence of COVID-19, the United States was struggling to contain a years-long opioid crisis that took tens of thousands of lives every year. Now, with Oxycontin manufacturer Purdue Pharma still negotiating billion-dollar penalties for its role in the two-decade drug epidemic, experts have begun taking the measure of its impact on student learning.
National News

**Teens More Likely Than Young Adults To Develop Addiction To Marijuana, Prescription Drugs Within 12 Months, Study Shows.**

USA Today (4/1, Rodriguez, 12.7M) reports a new study by the National Institute on Drug Abuse shows “teenagers are more likely than young adults to become addicted to marijuana or prescription drugs within a year after trying them for the first time.” The NIAID’s study “adds to mounting evidence showing adolescents are more vulnerable to substance use disorders than young adults, increasing the need for early screening and drug prevention education, health experts say.” NIDA Director Dr. Nora Volkow said, “We know that young people are more vulnerable to developing substance use disorders. ... Though not everybody who uses a drug will develop addiction, adolescents may develop addiction faster than adults.”

**New York Governor Signs Bill Legalizing Recreational Use Of Marijuana.**

The AP (3/31, Villeneuve, Peltz) reports that on Wednesday, New York Gov. Andrew Cuomo (D) signed a bill into law that allows New York residents to “possess and use up to 3 ounces of cannabis.” The article adds that “sales of recreational-use marijuana won’t become legal for an estimated 18 months until the state draws up regulations.”

The Wall Street Journal (3/31, Vielkind, Subscription Publication, 8.41M) reports the legislation immediately legalized the right for people aged 21 and older to possess cannabis.

**Schumer: Biden’s Reticence On Cannabis Legalization Will Not Hinder Senate From Acting.**

Politico (4/3, Fertig, 6.73M) said the President “has been a conspicuous outlier among Democrats when it comes to supporting” legalization of cannabis. However, Politico paraphrases Senate Majority Leader Schumer as having said that Biden’s restraint won’t hinder “the Senate from taking aggressive action to loosen federal restrictions.” During an interview with Politico, Schumer said, “I want to make my arguments to him, as many other advocates will,” adding, “But at some point we’re going to move forward, period.”

**Opinion: Medical Cannabis Bill Is Harmful To South Carolina.**

In a commentary piece for the Charleston (SC) Post and Courier (4/2, 299K), Mark Keel, chief of the S.C. State Law Enforcement Division, criticized a bill in South Carolina legalizing medical cannabis. He argued, “The bill ultimately would allow people to vape, eat or ingest marijuana that has not had any traditional medical review and is not approved by the U.S. Food and Drug Administration. This is a truly dangerous proposition. Perhaps this is why 77% of South Carolinians said marijuana should be regulated by the FDA in a 2016 Winthrop poll.” He wrote, “In South Carolina and throughout the country, marijuana is the No. 1 reason for
addiction and treatment admission for minors between 12 and 17 years old. I have spent my 43 years in law enforcement standing up for those who can’t stand up for themselves. This is why I have consistently voiced my concerns about legalizing marijuana in any form.”

New Mexico Poised To Become Latest State To Legalize Recreational Marijuana.
The New York Times (4/1, Victor, 20.6M) reports New Mexico “was set to become the 16th state to legalize recreational marijuana after the Legislature passed a bill on Wednesday, joining a national movement to rethink antidrug laws that are increasingly seen as impediments to racial justice and the economy.” Gov. Michelle Lujan Grisham (D) “said she would sign the bill, which would also expunge the criminal records of people who possessed marijuana for personal use.” The governor “said in a statement that workers, entrepreneurs and the government would benefit from the new industry, creating jobs and tax revenue.”

Opinion: Moves To Legalize Marijuana Are As Much About Making Amends As Lighting Up.
In an opinion piece for the New York Times (4/1, 20.6M), staff editor Spencer Bokat-Lindell writes, “For many proponents, marijuana legalization is less about using the substance itself than about making amends for the war on drugs, which Americans across the political spectrum have turned their backs on. And perhaps no drug has become more emblematic of that war’s destructive failures than marijuana.” Bokat-Lindell writes, “The creation of the federal ban on marijuana was rooted in prejudices against Mexicans and African-Americans, as my colleague Brent Staples has written, and those roots are evident in how the ban has been enforced: While white people and Black people use marijuana at roughly equal rates, Black people are more than three times as likely to be arrested on low-level possession charges.”

Georgia Warns Of Fentanyl Overdoses From Pills Falsely Sold As Alprazolam Or Oxycodone/Paracetamol.
The AP (4/7) reports, “Georgia officials are warning that some people may be overdosing on fentanyl pills that were falsely sold to them as Xanax [alprazolam] or Percocet [oxycodone / paracetamol].” The state Public Health Department on Monday “warned of the problem and urged people who notice unusual overdose activity or counterfeit pills to contact the Georgia Poison Center or the Public Health Department’s opioid unit.”

Purdue Can Be Questioned On Research On OxyContin Exposure In Utero.
The STAT (4/7, Silverman, 262K) reports, “A federal judge has given a green light to lawyers representing children with birth defects – allegedly due to exposure to opioids in utero – to question Purdue Pharma over efforts to provide documents concerning any links to its addictive painkiller and birth defects.” The article says
the decision is “a potentially significant victory in a long-running battle to connect OxyContin [oxycodone] with neonatal abstinence syndrome, or NAS, a group of conditions caused when a baby withdraws from certain drugs while exposed in the womb.” The article mentions the National Institute on Drug Abuse.

**Telehealth Using Video Platforms Presents Barriers To Patients With Opioid Use Disorder, Physicians Say.**
In a piece for Politico (4/5, 6.73M), Utsha G. Khatri, a physician with the National Clinician Scholars Program at the University of Pennsylvania in Philadelphia, and Elizabeth A. Samuels, a physician with Brown Emergency Medicine in Providence, write that telehealth using a two-way video platform would put up significant barriers for patients with opioid use disorder in addition to barriers “they already face, including a limited number of providers, few appointments, no transportation and limited or no Internet access.” They argue that “it would be fairly simple to amend the legislation to allow audio-only telehealth visits, which would address many of these gaps.” Although “some may fear that this change creates the risk of patients not following up for future appointments,” the authors say their experience has shown the opposite.

**Growing Body Of Research Suggests Psychedelic Drugs Could Be Used As Medical Treatment.**
The Los Angeles Times (4/5, Kelly, 3.37M) reported, “A growing body of medical research suggests that psilocybin and other psychedelic drugs could help treat anxiety, depression, post-traumatic stress disorder and” substance use disorder. But, “the legal environment remains fraught” for companies that hope to provide psychedelic drugs for medical treatment purposes. The Times highlights a federal case involving a Denver man who, after being arrested by DEA agents “for selling psychedelic mushrooms,” received a three-year probation sentence. Forbes (4/5, Coffey, 10.33M) publishes a related article.

**Biden Administration Unveils First-Year Plan To Address Drug Addiction By Focusing On Treatment Access, Inequity.**
Bloomberg Law (4/1, Lopez, Subscription Publication, 4K) reports that the Biden Administration has “unveiled its first-year plan to address the U.S. drug addiction crisis, focusing on treatment access and ending racial, gender, and economic inequities in drug policy and the criminal justice system.” The announcement, which was made Thursday in a notice from the Office of National Drug Control Policy, “comes at what ONDCP called a ‘critical’ moment, pointing to” CDC data.

**Last Year May Have Seen Over 90,000 Overdose Deaths In US, Data Suggest.**
In an analysis piece, the Washington Post (4/7, Winfield Cunningham, 10.52M) reports that there may have been more than 90,000 overdose deaths in the US last year,
according to “an analysis of preliminary data by the Commonwealth Fund.” The same analysis also “found that shortly after the pandemic started, monthly overdose deaths spiked 50 percent to more than 9,000 deaths in May.” The Washington Post also discusses what actions the Biden Administration has taken so far concerning drug overdoses.

**Pandemic Reportedly Undid Efforts To Battle Addiction In Huntington, West Virginia.**
The AP (4/8, Galofaro) reports that “as the COVID-19 pandemic killed more than a half-million Americans, it also quietly inflamed what was before it one of the country's greatest public health crises: addiction.” The CDC “estimates that more than 88,000 people died of drug overdoses in the 12 months ending in August 2020 – the latest figures available. That is the highest number of overdose deaths ever recorded in a year.” Huntington, West Virginia “was once ground zero for the addiction epidemic,” but after a “battle,” the area’s “overdose rate plummeted.” However, “then the pandemic arrived and it undid much of their effort.”

**Biden Made A Promise To Scientists. He Can Still Keep It.**
In an opinion for the New York Times (4/8, 20.6M), contributor Charles Piller writes, “In 2016, Joe Biden, then vice president, launched the Cancer Moonshot initiative” and learned that year “of stark failures by the National Institutes of Health and its grantees in managing results from cancer experiments, and he told an audience at a cancer research conference that he was outraged.” Piller explains that “researchers using federal funds to conduct cancer trials...were sometimes taking more than a year to report their results to the N.I.H., as required,” He adds that NIH Director Dr. Francis Collins in 2016 “announced that the agency would begin penalizing researchers for failing to comply with its reporting requirements,” but “in the years since, neither the F.D.A. nor N.I.H. have enforced the law.”

**Suicides Decreased In 2020, Preliminary CDC Data Show.**
The New York Daily News (4/2, Ganz, 2.51M) reported preliminary data from the Centers for Disease Control and Prevention show suicides decreased in 2020 “despite the mental and financial strain placed on many by the coronavirus pandemic.” While suicides “decreased by 5.6% between 2019 and 2020,” the article explains that “suicide is not the only way a death of despair can occur, as they also include fatal drug overdoses and deaths related to alcohol.” Though the "direct influence of the pandemic on such deaths is pending final data," the CDC also found “pointed to an increase in unintentional injury deaths as well, which last year ‘were largely driven by drug overdose deaths.'
Drug Overdose Deaths Spiked To 88K During Pandemic, White House Says.  
NPR (4/1, Mann, 3.69M) reports that Regina LaBelle, acting head of the White House Office of National Drug Control Policy, “said Thursday that drug deaths spiked dramatically during the pandemic, up roughly 27% compared with the previous year.” LaBelle said, “We lost 88,000 people in the 12-month period ending in August 2020,” and “illicitly manufactured fentanyl and synthetic opioids are the primary drivers of this increase.”

Commentary: Telemedicine “Too Convenient” To Vanish After Pandemic.  
Virginia Postrel writes in Bloomberg Opinion (3/31) that telemedicine “is too convenient for both patients and doctors” to vanish once the COVID-19 pandemic is over. Telemedicine is also a convenient way to offer after-hours care, particularly when there’s a time-zone difference. Postrel says there is “another potential positive legacy of the pandemic: loosened regulations to let licensed medical professionals cross state lines.”

Opinion: Reforming State Medical License Restrictions Could Help Retain Benefits Of Telemedicine.  
In an opinion piece for Forbes (3/31, 10.33M), contributor Paul Hsieh writes, “As Covid-19 wrought enormous disruption to the world in 2020, there was one potential silver lining in the US health system – the growth of telemedicine. As the pandemic unfolded, the federal government loosened Medicare rules and agreed to reimburse physicians and providers for remote consultations that they previously required be done in person. Private insurers adopted similar policies.” Hsieh writes, “As the pandemic eases, I hope we can find ways to retain the benefits of telemedicine. Reforming or eliminating outdated state medical licensure restrictions would be a good start in the right direction.”

CBS News (3/31, Silverstein, 5.39M) reports, “The new law also automatically expunges convictions for marijuana possession that would now be legal.” According to the New York Times (3/31, Ferré-Sadurní, 20.6M), New York “became the 15th state to legalize the recreational use of cannabis, positioning itself to quickly become one of the largest markets of legal cannabis in the nation and one of the few states where legalization is directly tied to economic and racial equity.”

USA Today (3/31, Campbell, Robinson, 12.7M) reports that the New York cannabis industry “is expected to generate more than $350 million in tax revenues per year for the state of New York, with 40% going to a social equity fund, 40% for schools and 20% for drug treatment and education.”
Funding Opportunities

**Funding Opportunities**

- **NOT-AA-21-012**
  NIH Blueprint for Neuroscience Research: Request for Information (RFI) on Neuroimmune Interactions in the Healthy CNS

- **RFA-AA-21-005**
  Specialized Alcohol Research Centers (P50 Clinical Trial Optional)

- **RFA-AA-21-006**
  Comprehensive Alcohol Research Centers (P60 Clinical trial Optional)

- **RFA-NS-21-013**
  BRAIN Initiative: Targeted BRAIN Circuits Projects- TargetedBCP (R01 Clinical Trial Not Allowed)

- **RFA-NS-21-014**
  BRAIN Initiative: Targeted BRAIN Circuits Planning Projects TargetedBCPP (R34 Clinical Trials Not Allowed)

- **NOT-AA-21-019**
  Notice of Participation of the National Institute on Alcohol Abuse and Alcoholism (NIAAA) in PA-21-110 Pilot and Feasibility Studies in Preparation for Substance Use Preventions Trials (R34 Clinical Trial Optional)

- **PAR-21-213**
  Emergency Award: Social, Behavioral, and Economic Research on COVID-19 Consortium (U01 Clinical Trial Not Allowed)

- **RFA-AI-21-018**
  Limited Interaction Targeted Epidemiology (LITE-2): To Advance HIV Prevention (UG3/UH3 Clinical Trial Optional)

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