



EMCDDA DOCUMENTATION CENTRE INFORMATION BULLETIN

CORONAVIRUS, 21 May 2021

GREY LITERATURE

Mental health and substance use during COVID-19: spotlight on Canadian households with young children

Canadian Centre on Substance Use and Addiction
Ottawa: 2021

Highlights key data from the [Mental Health and Substance Use During COVID-19: Spotlight on Gender and Household Size](#) summary report. Also provides tips and resources to help Canadians cope with stress, anxiety and substance use during the pandemic.

<https://www.ccsa.ca/sites/default/files/2021-05/CCSA-COVID-19-Mental-Health-Substance-Use-Canadian-Households-Children-Infographic-2021-en.pdf>

COVID-19: guidance for commissioners and providers of services for people who use drugs or alcohol

Public Health England
London: 19 May 2021

Guidance for commissioners and service providers for those dependent on drugs or alcohol.

<https://www.gov.uk/government/publications/covid-19-guidance-for-commissioners-and-providers-of-services-for-people-who-use-drugs-or-alcohol/covid-19-guidance-for-commissioners-and-providers-of-services-for-people-who-use-drugs-or-alcohol>

L'uso dei farmaci durante la pandemia di covid-19 in Italia

[Drug use during the covid-19 pandemic in Italy]

Di Filippo A, Ambrosino F, Gallinella F, et al

Recenti Progressi in Medicina

112, 5, p.338-342, 2021

The Italian Medicines Agency has started, since the first months of 2020, a monitoring of drug use during the covid-19 pandemic. This made it possible to identify specific trends in hospital and local purchases, such as the extensive use of off-label drugs with little evidence of efficacy during the first weeks of the epidemic, and to progressively assess the degree of implementation of regulatory and ministerial recommendations.

Fin dalle prime fasi dell'emergenza covid-19 è emersa per l'Agenzia Italiana del Farmaco (AIFA) la necessità di monitorare in modo specifico l'uso dei farmaci utilizzati nel corso dell'epidemia. È infatti fondamentale, in un contesto caratterizzato da grande incertezza e da continui aggiornamenti delle linee guida, disporre di informazioni utili a una corretta lettura e interpretazione dei dati. È stato quindi realizzato un primo rapporto dell'Osservatorio Nazionale sull'Impiego dei Medicinali (OsMed) sull'uso dei farmaci utilizzati, a livello ospedaliero e territoriale, nella fase iniziale dell'epidemia¹. Questo metteva a confronto i consumi relativi al periodo compreso tra marzo a maggio del 2020 con quelli del trimestre immediatamente precedente, da dicembre 2019 a febbraio 2020. In seguito, il 4 marzo 2021, è stato pubblicato un aggiornamento dei dati in riferimento alle fasi successive dell'epidemia². Il monitoraggio ha preso in considerazione diverse categorie di farmaci, andando a valutare le oscillazioni negli acquisti in riferimento al progressivo aggiornamento degli indirizzi regolatori. I volumi osservati per ciascun farmaco sono stati standardizzati per 10.000 abitanti/die, andando a valutare le differenze pre- e post-covid-19 in termini di differenza assoluta, differenza percentuale e di p-value (p).

Inégalités, temporalité et addiction pendant le confinement

[Temporality and addiction, inequality and lockdown]

Blaise, M

Psychotropes

26, 2-3, p.221-227, 2021

This article describes the organisation of care at Marmottan Hospital, specialising in the management of addictive behaviour in Paris, during lockdown linked to the Covid-19 pandemic. The author describes in particular how this period changed the perception of temporality. He addresses the question of the link between people. Inequalities in patient resources were particularly highlighted during this period, and the lockdown did not get any easier, raising other kinds of issues.

Nantes: comment les intervenants des CSAPA/CAARUD se sont adaptés pour accompagner les usagers de drogues pendant le confinement ?

[Nantes: How have the CSAPA/ CAARUD workers adapted to support drug users during lockdown?]

Le Bourhis, G; Thietard, N

Psychotropes

26, 2-3, p.51-56, 2021

This article relates how the medico-social establishments, CSAPA and CAARUD de Nantes, organised the continuity of support for drug users during the period of lockdown linked to the Covid-19 epidemic. Some activities had to adapt, however, and teams worked to maintain social ties as well as access to harm reduction materials.

Coronakrise und Suchtmedizin: Ein Praxisbericht

[Corona crisis and addiction medicine: a field report]

Walcher, S

Sucht

66, 5, p.286-290, 2020

Initial situation:

The threat imposed by Covid-19 has a significant impact on the world-especially that of substance-users. Drugs suddenly became poorly available, the access to substitution-therapy, addiction-help

and addiction-medicine underwent restrictions. Close living-conditions, lockdown and poor health-conditions of substance-users led to serious concerns within patients, counselors and doctors.

Measures:

After briefly hesitating decisive action followed and self- and third party protection was installed- where scarce material-supply allowed it. Professional institutions improved political and medical framework, infection protection, take-home-prescriptions, test-capacities and virtual consultations as well as team conferences were expanded- And so far bigger infection-clusters could be avoided in this group of patients.

Conclusions:

Some of the current changes will remain- And will have an ongoing impact on our living together. We gained a lot of experience in crisis-management- And we improved the trustful relation to our patients. Good addiction-work is relationship-work: This crisis has just confirmed that!

Auswirkungen des coronabedingten Lockdowns auf die stationäre Rehabilitation von Suchtkranken

[Effects of the corona related lockdown on the inpatient rehabilitation for addicted patients]

Schoneck, R

Sucht

66, 5, p.265-269, 2020

Objective:

There is some evidence that the corona related lockdown caused negative consequences for addicts without treatment contacts. This paper addresses the question whether the strong corona conditioned limitations during lockdown may have consequences for patients in inpatient rehabilitation for addicted patients during that period.

Method:

Hypotheses regarding the outcome of treatment during the first wave of the pandemic will be derived and supported by first data on relapses and dropouts. In addition, inevitable changes due to corona conditioned limitations on inpatient rehabilitation will be described as well as experiences in handling these limitations.

Results:

During the lockdown the number of relapses in our treatment centre decreased significantly. Contrary to expectations, the rate of treatment dropouts did not increase significantly. The limitations contributed to the need that due to the corona conditioned limitations patients had to train fundamental behavioural changes already during their stay and that the number of high risk situations were clearly reduced or better prepared.

Conclusions:

It will be discussed if and how the positive effects might be used for future work with addicted patients.

Auswirkungen der Corona-Pandemie auf die Maßnahmen zur Suchtprävention der Bundeszentrale für gesundheitliche Aufklärung (BZgA)

[Effects of the corona pandemic on addiction prevention activities by the German Federal Centre for Health Education (BzgA)]

Goecke, M

Sucht

66, 5, p.259-264, 2020

Background:

The Federal Centre for Health Education (BZgA) is a specialist authority responsible, among other things, for the implementation of national programmes for addiction prevention. The annual work programmes are coordinated with the Federal Ministry of Health and currently focus on the prevention of the legal substances tobacco and alcohol against the background of public health relevance. Priority target groups are adolescents and young adults, as they are likely to develop and consolidate risky patterns of consumption. The prevention programmes of the BZgA include school-based services, web portals and social media and print media as information brochures.

Current situation:

The corona pandemic has had an impact on the addiction prevention activities of the BZgA. Worthy of mention is the thematic intermeshing in the context of Corona and a changed need for advice in terms of content-by telephone and online. The contact restrictions during the "lockdown" caused by the Corona pandemic and the new framework conditions for personal interaction have also changed addiction prevention. Interactive prevention offers in schools have been suspended, as have support for preventive activities in sports clubs or the implementation of peer programmes. In return, the use of digital possibilities both in the implementation of addiction prevention offers and in cooperation and

networking with the federal states has moved into a new focus. The Corona crisis could thus also be used as an opportunity.

Effect of COVID-19 disruptions on young adults' affect and substance use in daily life

Papp LM, Kouros CD.

Psychology of Addictive Behaviors

20 May 2021

doi: 10.1037/adb0000748

Objective:

Guided by accounts of adjustment in daily life as a key indicator of health, the current study examined prospective changes in young adults' emotions and substance behaviors assessed during a normative baseline period and during the acute COVID-19 disruption period in late March/early April 2020. The COVID-19 assessment also collected psychosocial risk factors expected to moderate changes in adjustment across time.

Method:

Participants included 295 young adults (70.8% female; ages 18-21 at baseline), drawn from an ongoing study of daily behaviors and health in college life that oversampled for recent substance behaviors, who completed both the baseline and COVID-19 assessments. Hypotheses were tested using analyses of repeated-measures data that included covariates of length of time between assessments and sampling group status.

Results:

Direct tests in support of hypotheses indicated an increase in negative affect ($d = .67, p < .001$), and greater alcohol use ($d = .75, p < .001$) and marijuana use ($d = .58, p < .001$), in daily life across time. Levels of positive affect ($d = .08, p > .05$), nicotine use ($d = .01, p > .05$), and prescription drug misuse ($d = .003, p > .05$) did not reliably change in tests of direct models. Moderation tests indicated several risk factors for experiencing steeper increases in negative affect, and increased likelihood of marijuana and nicotine use, in daily life across time.

Conclusions:

Findings offer implications for future research and clinical efforts to improve young adult adjustment in response to the pandemic.

Virtual Twelve Step meeting attendance during the COVID-19 period: a study of members of Narcotics Anonymous

Galanter, M; White, W L; Hunter, B

Journal of Addiction Medicine

15 May 2021

DOI: 10.1097/ADM.0000000000000852

Objectives:

Face-to-face meetings are key components of Twelve Step (TS) fellowships' support of members' abstinence. Home confinement during COVID-19 made this less feasible. Our objective was to ascertain whether a transition to virtual online meetings among TS members took place, and whether it was potentially effective.

Methods:

Two thousand one hundred fifty-two long-standing USA members of Narcotics Anonymous (NA) were surveyed to ascertain their recovery-related experiences and their relation to the transition to virtual meetings.

Results:

During the previous week (ie, 'during COVID-19') respondents attended more virtual meetings ($=4.13[SD4.64]$) than they had attended both face-to-face meetings before COVID-19 ($=3.35[SD2.05]$), and also face-to-face meetings during COVID-19 ($=0.75[SD1.8]$). Many of the meetings were accessed from sites remote from their homes (44.4%), even overseas (21.5%). The majority (64.9%) found virtual meetings at least as effective in promoting their abstinence as were face-to-face meetings, and 41.8% estimated the same for newcomers. A shorter period of antecedent abstinence from drugs and increased loneliness were associated with increased craving during the transition period. Relative to Whites, Black respondents were less distressed, with a lesser increase in craving, and currently attended more virtual meetings. Data provided by a national program reflected a large increase in virtual TS attendance since the onset of the pandemic.

Conclusions:

In a survey of well-established NA members, most had made a successful transition from face-to-face to virtual meetings, relative to their antecedent characteristics. This successful transition suggests the possibility of an enhanced opportunity for stabilizing TS membership.

Rethinking home-based outpatient parenteral antibiotic therapy for persons who inject drugs: an opportunity for change in the time of COVID-19

Jawa, R; Rozansky, H; Clemens, D; et al
Journal of Addiction Medicine
20 May 2021
DOI: 10.1097/ADM.0000000000000856

Outpatient parenteral antibiotic therapy (OPAT) refers to the monitored provision of intravenous antibiotics for complicated infections outside of a hospital setting, typically in a rehabilitation facility, an infusion center, or the home. Home-based OPAT allows for safe completion of prolonged courses of therapy while decreasing costs to the healthcare system, minimizing the risk of hospital-related infectious exposures for patients, and permitting patients to recover in a familiar environment. Amidst the COVID-19 pandemic, during which nursing facilities have been at the center of many outbreaks of the SARS-CoV-2 virus, completion of antimicrobial therapy in the home is an even more appealing option. Persons who inject drugs (PWID) frequently present with infectious complications of their injection drug use which require long courses of parenteral therapy. However, these individuals are frequently excluded from home-based OPAT on the basis of their addiction history. This commentary describes perceived challenges to establishing home-based OPAT for PWID, discusses ways in which this is discriminatory and unsupported by available data, highlights ways in which the COVID-19 pandemic has accentuated inequities in care, and proposes a multidisciplinary approach championed by Addiction specialists to increasing implementation of OPAT for appropriate patients with substance use disorders.

Persons with substance abuse disorders and other addictions: coping with the COVID-19 pandemic

Fabelo-Roche, J R; Iglesias-More, S; Gomez-Garcia, A M
MEDICC Review, 2021, 23, 2, 10

Cuba implemented policies mandating social distancing on March 11, 2020, which were still in place at the time of this study. During such periods of isolation, people with psychoactive substance-related disorders and other addictions may be tempted to reduce tension, stress, uncertainty and possible distress by increasing the use of substances or practices they have abused. This can mean relapses and setbacks for patients undergoing treatment. A multidisciplinary team of health professionals specializing in addiction at the Center for Academic Development in Drug Addiction, in Havana, Cuba, cares for people with these disorders and followed their evolution during the initial period of COVID-19 social isolation. With the aim of characterizing strategies employed by patients undergoing treatment for substance abuse and addictions, we conducted a qualitative study from April 2020 through May 2020, using a convenience sample of 37 patients (all students) who had been progressing towards recovery from addictive behaviors when face-to-face encounters were suspended due to COVID-19 restrictions. Contact was maintained through information and communication technologies. The research used telepsychology and focused on understanding patient life experiences. Patients were interviewed using a semi-structured survey, which was then transcribed and coded thematically using a grounded-theory approach. We found that patients' ability to cope successfully with challenges presented by COVID-19 were influenced by: 1) the individual's own methods for maintaining self-control (commitment to studies, projects, and work with therapists) that aided them in their goals concerning abstinence; 2) difficulties faced in addressing specific events and situations (doubts, uncertainties, disagreements, isolation and time use); 3) perpetuation and revivification of myths related to substances and addictive activities (exacerbation of supposed benefits of tobacco, alcohol, marijuana, overuse of social networks); and 4) tendencies toward irrationality and lack of emotional control (fear, sadness, anger, constant worry and self-imposed demands). Our findings suggest that despite the potential negative psychological impact of preventive social isolation during the COVID-19 pandemic, individual coping mechanisms developed by these patients, aiming at improved self-control, allowed most to avoid setbacks that could have affected their recovery. Nevertheless, patients faced challenges to their recovery that were compounded by difficulties in specific situations, myths related to substances and addictive activities, and tendencies toward irrationality or lack of emotional control.

Clinician perspectives on methadone service delivery and the use of telemedicine during the COVID-19 pandemic: A qualitative study

Hunter, S B; Dopp, A R; Ober, A J; Uscher-Pines, L
Journal of Substance Abuse Treatment, 2021, 124, 108288

Objectives:

During the COVID-19 pandemic, opioid treatment programs (OTPs) in the U.S. were granted new flexibility in methadone dispensing and the use of telemedicine. To explore the impact of the pandemic and accompanying policy changes on service delivery, we asked OTP clinicians about changes in care patterns and perceptions of impacts on access and quality.

Methods:

In May–June 2020, we completed semistructured telephone interviews with 20 OTP clinicians (physicians, physician assistants, and nurse practitioners) from 13 U.S. states. The study recruited participants through Medscape, an online platform where clinicians access clinical content. We used rapid thematic analysis, a qualitative approach, to summarize participants' expressed views related to the research objectives.

Results:

Clinicians identified a range of changes to methadone and ancillary service delivery as a result of COVID-19. Most clinicians reported that OTPs were prescribing more take-home doses of methadone and providing psychosocial services and medication management via telemedicine. Many also reported reducing the frequency of urine toxicology screening and accepting fewer new patients. While some clinicians expressed support for the increased flexibility around dosing and use of telemedicine, others expressed concern about increased risk of medication diversion and overdose. Clinicians reported several advantages and disadvantages of the changes due to the pandemic and that continued reimbursement would be required to maintain telemedicine services.

Conclusions:

The COVID-19 pandemic dramatically altered the delivery of methadone treatment in the U.S. This study's findings suggest that OTPs may have reduced their methadone treatment during the early months of the pandemic and that the flexibilities that policy changes offered may not have resulted in changes in care delivery for all patients. Careful consideration and additional analysis should inform which changes OTPs should maintain long-term.

Policing pain: A qualitative study of non-criminal justice approaches to managing opioid overdose during the COVID-19 pandemic

Trappen, S L, McLean, K J

Journal of Prevention & Intervention in the Community

17 May 2021

doi: 10.1080/10852352.2021.1908206

Opioid related drug overdose deaths are a leading cause of death and injury in the United States. While research demonstrates that where people live has a major impact on drug use and abuse, most work looks at social dynamics at the county level or under the rubric of the urban/rural divide. Only recently, scholarship has become attuned to the post-industrialized areas located on the fringes of urban cores. Data presented in here are from field research conducted in McKeesport, Pennsylvania, a small river town located east of Pittsburgh. Once a thriving industrial city, it is now deteriorated and has documented high levels of overdose experience. Preliminary results suggest that McKeesport residents, even before the emergence of SARS-CoV-2 (COVID-19), practice social and physical distancing as a way of life; data indicate how the pandemic potentially exacerbates the risk of accidental opioid overdose among a population defined by both geographic and social isolation.

Addiction and Covid-19 disease: risks and misconceptions

Mahdavi, A, Aliramezany, M

Addiction & Health, 2021, 13, 1, p.66-67

The mental health crises of the families of COVID-19 victims: a qualitative study

Mohammadi, F, Oshvandi, K, Shamsaei, F, et al

BMC Family Practice, 2021, 22, 1, 94

Background:

The bereaved families of COVID-19 victims are among the most vulnerable social groups in the COVID-19 pandemic. This highly infectious and contagious disease has afflicted these families with numerous psychological crises which have not been studied much yet. The present study is an attempt at investigating the psychological challenges and issues which the families of COVID-19 victims are faced with. The present study aims to identify the Mental Health crises which the families of COVID-19 deceased victims are going through.

Methods:

A qualitative research, the present study uses a conventional content analysis design. The participants were 16 members of the families of COVID-19 victims selected from medical centers in Iran from February to May 2020 via purposeful sampling. Sampling continued to the point of data

saturation Data were collected via semi-structured individual interviews conducted online. The collected data were analyzed according to the conventional qualitative content analysis approach.

Results:

Analyses of the data yielded two main themes and seven categories. Emotional shock included (feelings of guilt and rumination, bitter farewell, strange burial and concern about unreligious burial), and fear of the future included (instability in the family, lack of job security and difficult financial conditions, Stigmatization and complications in social interactions).

Conclusion:

The families of COVID-19 deceased victims are affected by various psychological crises which have exposed them to a deep sense of loss and emotional shock. Therefore, there is an urgent need for a cultural context which recognizes and supports all the various aspects of the mental health of these families.

Trends in filled naloxone prescriptions before and during the COVID-19 pandemic in the United States

O'Donoghue A L; Biswas, N; Dechen, T; et al.
JAMA Health Forum, 2021, 2, 5, e210393

Introduction

Substance use, including opioid use, increased during the COVID-19 pandemic.¹ While overall emergency department visits decreased during the pandemic, nonfatal opioid overdose visits more than doubled, but few patients who overdosed on opioids received naloxone prescriptions on discharge.² Studies show that increased access to naloxone can reduce fatal overdoses.^{3,4} In this study, we analyze the trends in filled naloxone prescriptions during the COVID-19 pandemic in the United States and compare these with trends in opioid prescriptions and overall prescriptions.

Methods

Through the COVID-19 Research Database,⁵ we used Symphony Health, a pharmacy claims database that includes 92% of national retail pharmacy claims, 71% of mail-order pharmacy claims, and 65% of specialty pharmacy activity, to examine the period from May 2019 to December 2020. We analyzed weekly trends in the number of patients filling naloxone prescriptions, opioid prescriptions, and all prescriptions from May 13, 2019, to December 20, 2020. We defined the prepandemic time period to be May 13, 2019, through the week of March 13, 2020, when a national emergency was declared for COVID-19 in the United States. We defined the pandemic period as beginning the following week and continuing through the end of the sample period. We used an interrupted time series design to quantify changes in the level and growth rate in weekly filled prescriptions before and during the pandemic. We stratified analyses by payer (Medicaid, Medicare, commercial, and cash). We excluded weeks with national holidays (Thanksgiving, Christmas, and New Year's Day). We used linear regression models and log-linear regression models, where a P value $\leq .05$ was considered statistically significant and all tests were 2-tailed. Stata SE version 16 (StataCorp) was used for statistical analysis. This research was classified as exempt by the Beth Israel Deaconess Medical Center institutional review board and it followed the Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) reporting guideline for cohort studies. This study used only deidentified data and was classified as exempt from written informed consent by the Beth Israel Deaconess Medical Center institutional review board.

Results

Trends in the average number of individuals filling prescriptions for naloxone, opioids, and any medication are summarized in the Figure. Abruptly in March 2020, the average number of individuals filling naloxone prescriptions per week declined in level by 361.09 individuals (95% CI, -499.56 to -222.62), which corresponds to a 26.32% reduction (Table). This exceeded the decline in the number of individuals filling prescriptions for any medication (-14.76%) and for opioid medications (-8.71%). Since March 2020, there was no statistically significant recovery in naloxone prescriptions (change in weekly growth rate: 0.36%; 95% CI, -0.17% to 0.88%), indicating that the number of individuals filling naloxone prescriptions has remained low throughout the pandemic. The weekly growth rates for individuals filling prescriptions for opioids and for any prescription have declined since March 2020. Individuals with Medicare and commercial insurance had a statistically significant decline in filling naloxone prescriptions at the start of the pandemic (-34.15% and -31.20%, respectively), while patients with Medicaid or cash payment had no statistically significant change during the pandemic.

Discussion

These findings indicate that individuals on Medicare and commercial insurance may be experiencing decreased access to naloxone during the COVID-19 pandemic. The decline is not explained by a decline in opioid prescriptions, where naloxone coprescription is recommended, as opioid prescriptions only decreased by 8.71% in March 2020, less than all prescriptions and much less than naloxone prescriptions. Limitations of this study include that we are only able to account for naloxone prescriptions filled at retail pharmacies and not naloxone kits distributed from other sources, such as

syringe service programs.⁶ Our study identifies an urgent gap in necessary access to medication for individuals on Medicare and commercial insurance during the pandemic. Continuing to increase naloxone distribution in densely populated areas and via mail order and delivery through community-based organizations could help to mitigate some of the reductions in naloxone distribution via pharmacies and could reduce some of the increases in fatal opioid overdoses during the COVID-19 pandemic.

Drug overdose deaths before and after shelter-in-place orders during the COVID-19 pandemic in San Francisco

Appa, A; Rodda, L N; Cawley, C; et al
JAMA Network Open, 2021, 4, 5, e2110452

Introduction

Fatal drug overdoses have been a growing public health crisis for years prior to the COVID-19 pandemic.¹ In December 2020, the US Centers for Disease Control and Prevention (CDC) issued an advisory that overdose deaths had reached an all-time high, citing increasing synthetic opioid-related deaths.² It is unknown how COVID-19 and health orders to mitigate transmission may be associated with this increase. In this study, we aimed to describe overdose deaths in San Francisco before and after the initial COVID-19 shelter-in-place order to elucidate whether characteristics of fatal overdoses changed during this time to guide future prevention efforts.

Methods

We performed a cross-sectional study of unintentional fatal overdoses in San Francisco for the 8.5 calendar months before and after the shelter-in-place order on March 17, 2020. Research was conducted in accordance with the Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) reporting guideline. The University of California, San Francisco institutional review board approved decedent research, waiving informed consent; data were not deidentified. Using data from the Office of the Chief Medical Examiner (OCME), we evaluated unintentional overdose deaths involving fentanyl, heroin, medicinal opioids, methamphetamine, and cocaine. Demographic and toxicological outcomes were identified from forensic findings; cause-of-death determination methods have been previously published.^{3,4} Housing information was collected from OCME investigations and analyzed using a county-level database of social service interactions. We compared overdose death features using χ^2 tests and calculated normalized death rates using postpandemic overdose deaths and 2019 US Census Bureau data.⁵ To account for temporal variation and illustrate prepandemic trends, we present overdose deaths by month between 2017 and 2020. Statistical significance was set at $P < .05$, and all tests were 2-tailed. Statistical analysis was conducted in Stata version 16.1 (StataCorp).

Results

In the 8.5 months before and after San Francisco's COVID-19 shelter-in-place order, 365 and 537 people experienced fatal overdoses, respectively, for a total of 902 deaths. The median (interquartile range) number of weekly overdose deaths was 10 (7-12) before the shelter-in-place order vs 15 (11-18) after the order, representing a 50% increase. Differences in decedent age and sex between time periods were not significant (Table). While the proportion of Black decedents slightly decreased after the shelter-in-place order, the death rate was still disproportionately high (272 per 100 000 Black residents vs 89 per 100 000 White residents). The proportion of decedents experiencing homelessness increased after the shelter-in-place order, from 85 (23%) to 183 (34%) ($P = .001$). The percentage of deaths attributable to fentanyl significantly increased (from 226 [62%] to 388 [72%]; $P = .001$), while the percentage of deaths related to methamphetamine remained unchanged (193 [53%] to 309 [58%]; $P = .17$). The Figure contextualizes deaths by month and year, demonstrating preexisting increases in 2019, with a clear increase in 2020. For example, in May 2019, there were 21 fatal overdoses vs 69 in May 2020.

Discussion

In this cross-sectional study, we found a continued increase in drug overdose deaths in San Francisco since the onset of COVID-19, with a 50% increase in weekly median overdose deaths. Of note, between March 17 and November 30, 2020, San Francisco recorded 537 drug overdose deaths, while recording 169 deaths due to COVID-19 in the same time period.⁶ The number of fatal overdoses among people experiencing homelessness during COVID-19 doubled. This follows the increasing trend in 2019 overdose deaths because of fentanyl, which is also associated with the increase in 2020. However, societal disruption related to COVID-19 is likely contributing, as it disproportionately affects people experiencing poverty and marginal housing. Likewise, overdose deaths among Black individuals in San Francisco have been persistently and disproportionately high. Preventing fentanyl-related deaths is of paramount importance, as deaths continue to increase amid the COVID-19 pandemic²; however, an ongoing focus on methamphetamine in our region is also needed.

This study was constrained to 1 geographic region, used OCME data (limiting covariate adjustment), and was cross-sectional, precluding causative statements. San Francisco has had a low COVID-19 mortality rate compared with other municipalities and adopted a comprehensive response to the pandemic. Our findings suggest that to complement a strong public health response to COVID-19, there must be more robust overdose prevention for people who use drugs, particularly for people experiencing homelessness, people who identify as Black, and people who use fentanyl and/or stimulants.

The COVID-19 outbreak, high stress, and increased substance use

Naeim, M; Rezaeisharif, A
Addictive Disorders and their Treatment
17 May 2021
DOI: 10.1097/ADT.0000000000000260

After the outbreak of the coronavirus and the epidemic of this deadly disease with the imposition of restrictions and the rumor that addicts are not infected, the rate of slippage among drug users in the COVID-19 period has increased to some extent and in a way, addiction has followed a secret process. In addition to increasing public awareness of rumors through the media, it should be noted that the main bulwark fight against the tendency to use drugs is the family. When the foundations of the family weaken, we must wait for any harm to the youth. If families do not take action to prevent drug use, we will have to witness unpleasant events in the not too distant future.

Virtual care for patients with chronic pain and addictions during the COVID-19 pandemic

Mukhida, K, Stewart, J, Mehrpooya, R, Fraser, J
Canadian Journal of Pain
4, 1, p.179-180, 2020

Substance consumption styles during the COVID-19 lockdown for socially integrated people who use drugs

Pavarin, R M; Bettelli, S; Noxtrani, E; et al
Journal of Substance Use
5 May 2021
DOI: 10.1080/14659891.2021.1923842

Background:

No studies have investigated changes of substance or alcohol consumption for non-problematic drug users within a period without restrictions in comparison with a period of lockdown.

Objectives:

Identification of changes in habits and in substance consumption styles during the lockdown due to COVID-19 among socially integrated people who use drugs. Methods: Semi-structured questionnaire administered via video calls.

Results:

During the lockdown we highlight a reduction in consumption and expenditure on illegal substances (cocaine, MDMA, ketamine) and alcohol (spirits) and a drastic drop in alcohol misuse. Many interviewees have stopped or have passed from a contextual consumption of substances, connected to sociality, to a solitary use motivated by boredom (alcohol and cannabis), habit (alcohol), search for particular sensations (cannabis) and escape from reality (cocaine). Substance consumption alone increased.

Conclusion:

Particular attention should be paid to the study of the dissemination and socialization of individual harm reduction practices among socially integrated people who use drug.

Adolescents and opioid-related outcomes amidst the COVID-19 pandemic

Romero, RA; Young, S D
Journal of Addictive Diseases
6 May 2021
DOI: 10.1080/10550887.2021.1916420

Morbidity and mortality attributable to opioid use and misuse among adolescents and young adults are evident. Although recent trend data suggest a decrease in both opioid misuse and opioid use disorder among adolescents and young adults in the last few years, overdose cases continue to rise. The opioid epidemic among this population is complex and has a different profile compared to adults, with family facilitating exposure to opioids more often than other sources. Additionally, despite recommendations by experts to initiate medications for opioid use disorder, few initiate treatment. The

recent COVID-19 pandemic has impacted many facets of daily life and its effects on the opioid crisis are largely unknown. Stay-at-home mandates resulting in online schooling and limited social interaction has had deleterious consequences for adolescents, especially their mental health. This viewpoint attempts to explore the effects of the pandemic on the opioid crisis in this vulnerable population.

Persons with substance abuse disorders and other addictions: coping with the COVID-19 pandemic

Fabelo-Roche, J R, Iglesias-Moré, S, Gómez-García, A M
MEDICC Review, 2021, 23, 2, 55

Cuba implemented policies mandating social distancing on March 11, 2020, which were still in place at the time of this study. During such periods of isolation, people with psychoactive substance-related disorders and other addictions may be tempted to reduce tension, stress, uncertainty and possible distress by increasing the use of substances or practices they have abused. This can mean relapses and setbacks for patients undergoing treatment. A multidisciplinary team of health professionals specializing in addiction at the Center for Academic Development in Drug Addiction, in Havana, Cuba, cares for people with these disorders and followed their evolution during the initial period of COVID-19 social isolation. With the aim of characterizing strategies employed by patients undergoing treatment for substance abuse and addictions, we conducted a qualitative study from April 2020 through May 2020, using a convenience sample of 37 patients (all students) who had been progressing towards recovery from addictive behaviors when face-to-face encounters were suspended due to COVID-19 restrictions. Contact was maintained through information and communication technologies. The research used telepsychology and focused on understanding patient life experiences. Patients were interviewed using a semi-structured survey, which was then transcribed and coded thematically using a grounded-theory approach. We found that patients' ability to cope successfully with challenges presented by COVID-19 were influenced by: 1) the individual's own methods for maintaining self-control (commitment to studies, projects, and work with therapists) that aided them in their goals concerning abstinence; 2) difficulties faced in addressing specific events and situations (doubts, uncertainties, disagreements, isolation and time use); 3) perpetuation and revivification of myths related to substances and addictive activities (exacerbation of supposed benefits of tobacco, alcohol, marijuana, overuse of social networks); and 4) tendencies toward irrationality and lack of emotional control (fear, sadness, anger, constant worry and self-imposed demands). Our findings suggest that despite the potential negative psychological impact of preventive social isolation during the COVID-19 pandemic, individual coping mechanisms developed by these patients, aiming at improved self-control, allowed most to avoid setbacks that could have affected their recovery. Nevertheless, patients faced challenges to their recovery that were compounded by difficulties in specific situations, myths related to substances and addictive activities, and tendencies toward irrationality or lack of emotional control.

Evolution of the illegal substances market and substance users' social situation and health during the COVID-19 pandemic

Gaume, J; Schmutz, E; Daeppen, J-B; Zobel, F
International Journal of Environmental Research and Public Health, 2021, 18, 9, 4960

The outbreak of the COVID-19 pandemic and the measures taken for tackling it had the potential to lead to deep modifications in the supply of illegal drugs and to impact substance users' health and social situation. To investigate this, we used mixed methods, i.e., quantitative data collected with a brief questionnaire from substance users receiving opioid agonist treatment in a treatment centre in Switzerland (N = 49), and qualitative data obtained using semi-structured phone interviews among a sub-group of participants (N = 17). We repeated data collection twice over four weeks to investigate trends over time (N = 51 and 14 at wave 2). Findings consistently showed the limited impact of the COVID-19 outbreak on the illegal substance market. Over the two waves, the supply, price and purity of three main illegal substances did not significantly vary. Substance use was estimated as usual by most, trending toward a decrease. The impact of the pandemic on participants' social situation and health was appraised as low to medium. Nevertheless, a minority of participants reported higher impact and multivariate analyses showed a more important impact for those who were female, younger, and not using multiple substances. This process was implemented quickly and provided an understanding of the short-term impact of the pandemic on drug markets and users.

Emerging challenges in covid-19 with substance use disorders

Salahuddin, M; Manzar, M D; Pandi-Perumal, S R; et al
Addictive Disorders and their Treatment
18 May 2021

Background and Objective:

People with substance use disorder (SUD) may be easily vulnerable to coronavirus disease-19 (COVID-19). Given the impaired lung function caused by COVID-19 may exacerbate the symptoms of patients already having preexisting opioids or central nervous system stimulants use disorder. This narrative review highlights the risks of interactions between COVID-19 and SUD.

Methods:

This article has systematically reviewed and collated relevant papers and articles identified through PubMed focusing on SUD and COVID-19.

Results:

SUD is characterized by an array of combined mental, physical, and behavioral symptoms, which is undoubtedly of great public health concern especially in the context of the recent advent of the COVID-19 pandemic. The myriad of physiological changes caused by COVID-19 and SUD may be additive or synergistic on various organ functions, hence this review has highlighted potential challenges and possible outcomes because of these interactions. Systematic delineation to parse out the combined COVID-19 and SUD pathology on a given organ function is crucial. Moreover, the primary measures to tackle the COVID-19 pandemic like home confinement and lack of social support may be a significant predictor of relapse in already sober individuals, thus alternate methodologies may be needed to confine this problem.

Conclusion:

This review highlights the importance of the intertwined epidemics interactions and proposes early measures to recognize the scope of problem at the individual level to prevent future challenges.

Increased availability of telehealth mental health and substance abuse treatment for peripartum and postpartum women: A unique opportunity to increase telehealth treatment

Moreland, A; Guille, C; McCauley, J L

Journal of Substance Abuse Treatment, 2021, 123, 108268

Since the onset of the COVID-19 pandemic, several federal, state, and payor policy changes have facilitated the uptake of telehealth service delivery. These changes have resulted in a significant uptick in the utilization of maternal mental health and substance use disorder screening and treatment services for pregnant and postpartum women. The Medical University of South Carolina's [MUSC] Women's Reproductive Behavioral Health Program provides outpatient mental health and substance use treatment to pregnant and postpartum women within obstetric practices. With the onset of COVID-19, our program converted all of its screening for and treatment of mental health and substance use disorders to remote platforms. Lessons learned during this time may lay the foundation for transitioning to sustainable telehealth-based referral and delivery of substance use treatment more broadly.

Who complies with coronavirus disease 2019 precautions and who does not?

Current Opinion in Psychiatry

Urbán R, Király O, Demetrovics Z.

17 May 2021

doi: 10.1097/YCO.0000000000000723

Purpose of review:

Severe acute respiratory syndrome (SARS)-coronavirus disease 2019 (COVID-19) virus imposes a higher risk of complications and mortality among people with mental disorders. Until widely available vaccines, adherence to preventive behaviours remains the most crucial tool to prevent SARS/COVID-19 virus transmission. Our review focuses on the determinants of adherence behaviours.

Recent findings:

Adherence behaviours include the use of a face mask and protective gloves, personal hygienic behaviours (handwashing or using hand sanitiser), and keeping physical distance and avoiding social gatherings. In almost all studies, males and younger people show less adherence. Risk perception and health beliefs (especially perceived severity of COVID-19 related conditions) can explain the sex and age differences in adherence. Studies covering the impact of mental disorders on adherence are surprisingly missing, with the exception of smoking.

Summary:

Engaging men and young people in adopting preventive behaviours is crucial in protecting the whole community and specific vulnerable populations. There is a lack of studies investigating preventive behaviours among people living with mental disorders and addiction problems. Furthermore, descriptive and intervention studies are needed to understand and improve the adherence of this population to preventive behaviours.

Low-threshold buprenorphine via community partnerships and telemedicine - case reports of expanding access to addiction treatment during COVID-19

Levander, X A; Wheelock, H; Pope, J; et al

Journal of Addiction Medicine

DOI: 10.1097/ADM.0000000000000811

Background:

To reduce coronavirus disease 2019 (COVID-19) spread, federal agencies eased telemedicine restrictions including audio-only appointments. These changes permitted clinicians to prescribe buprenorphine to patients with opioid use disorder (OUD) without in-person or audio/video assessment. Our clinic utilized existing community collaborations to implement protocols and extend outreach. We describe 3 patients with OUD who engaged with treatment through outreach with trusted community partners and low-threshold telemedicine.

Case Presentations:

Patient 1—a 40-year-old man with severe OUD who injected heroin and was living outside. A weekend harm reduction organization volunteer the patient previously knew used her mobile phone to facilitate an audio-only intake appointment during clinic hours. He completed outpatient buprenorphine initiation. Patient 2—a 48-year-old man with severe opioid and methamphetamine use disorders who injected both and was living in his recreational vehicle. He engaged regularly with syringe services program (SSP), but utilized no other healthcare services. Initially, an SSP worker connected him to our clinic for audio-only appointment using their landline to initiate buprenorphine; a harm reduction volunteer coordinated follow-up. Patient 3—a 66-year-old man with moderate OUD used non-prescribed pill opioids without prior buprenorphine experience. He lived over 5 hours away in a rural town. He underwent virtual appointment and completed home buprenorphine initiation.

Conclusion:

These 3 cases illustrate examples of how policy changes allowing for telemedicine buprenorphine prescribing can expand availability of addiction services for patients with OUD who were previously disengaged for reasons including geography, lack of housing, transportation difficulties, and mistrust of traditional healthcare systems.

Adolescents and opioid-related outcomes amidst the COVID-19 pandemic

Romero, R A; Young, S D

Journal of Addictive Diseases

19 May 2021

DOI: 10.1080/10550887.2021.1916420

Morbidity and mortality attributable to opioid use and misuse among adolescents and young adults are evident. Although recent trend data suggest a decrease in both opioid misuse and opioid use disorder among adolescents and young adults in the last few years, overdose cases continue to rise. The opioid epidemic among this population is complex and has a different profile compared to adults, with family facilitating exposure to opioids more often than other sources. Additionally, despite recommendations by experts to initiate medications for opioid use disorder, few initiate treatment. The recent COVID-19 pandemic has impacted many facets of daily life and its effects on the opioid crisis are largely unknown. Stay-at-home mandates resulting in online schooling and limited social interaction has had deleterious consequences for adolescents, especially their mental health. This viewpoint attempts to explore the effects of the pandemic on the opioid crisis in this vulnerable population.

COVID-19 vaccination among people who inject drugs: Leaving no one behind

Iversen, J; Maher, L

Drug and Alcohol Review

40, 4, p.517-520, 2021

The intertwined expansion of telehealth and buprenorphine access from a prescriber hub

Moore, D T; Wischik, D L; Lazar, C M; et al

Preventive Medicine, 8 May 2021, 106603

In this manuscript, we describe how efforts to increase access to buprenorphine for Opioid Use Disorder (OUD) through a telemedicine hub before and since the COVID-19 pandemic have played out in the Veterans Healthcare Administration (VHA) in New England. We look at how the COVID-19 pandemic and subsequent spike in opioid overdoses tilted the risk: benefit calculation for tele-prescribing a controlled substance such as buprenorphine toward expanding access to tele-

buprenorphine. We conclude that there is a need for tele-buprenorphine hubs that can fill gaps in geographically dispersed healthcare systems.

Associations of alcohol, marijuana, and polysubstance use with non-adherence to COVID-19 public health guidelines in a US sample

Fendrich, M, Becker, J, Park, C, et al

Substance Abuse

42, 2, p.220-226, 2021

Background:

We sought to understand the association between heavy alcohol and frequent drug use and non-adherence to recommended social distancing and personal hygiene guidelines for preventing the spread of COVID-19 early in the US pandemic.

Methods:

A survey was offered on the crowdsourcing platform, Amazon Mechanical Turk (MTurk) during April 2020 (the early days of strict, social distancing restrictions). The study included 1,521 adults ages 18 years and older who resided in the US and were enrolled as MTurk workers, i.e., workers who are qualified by Amazon to complete a range of human interaction tasks, including surveys through the MTurk worker platform. Main predictors included measures of heavy drinking, marijuana, and polysubstance use. The dependent measures were measures of social distancing and personal hygiene, based on guidelines recommended at the time of the survey by the US Centers for Disease Control to prevent the spread of COVID-19.

Results:

We found consistent negative associations between heavy drinking and drug use and adherence to social distancing and personal hygiene. Additionally, three control variables, age, gender, and race/ethnicity, were significant correlates of adherence to these measures.

Conclusions:

The findings here are consistent with previous research exploring links between substance use and other adverse health behaviors. Further, the negative association between heavy drinking (five or more drinks in one sitting) and adherence underscore the public health risks entailed with the unrestricted reopening of public drinking establishments.

Afghanistan: vaccinate drug users against COVID-19

Ahmadi, A, Ntacyabukura, B, Lucero-Prisno, D E

Nature

593, 7858, 195, 2021

«Chemsex», las fiestas de sexo y drogas que han aumentado con la pandemia

Los expertos advierten de los riesgos de adicción y propagación de enfermedades como la hepatitis C o el VIH

<https://www.lavozdeasturias.es/noticia/actualidad/2021/05/12/chemsex-fiestas-sexo-drogas-aumentado-pandemia/00031620809846318708212.htm>

Epidemic of opioid overdose deaths surged during pandemic

<https://www.independent.co.uk/news/world/americas/epidemic-of-opioid-overdose-deaths-surged-during-the-pandemic-b1825888.html>

Fatal overdoses rose during the pandemic — but they'd been increasing for years

<https://vtdigger.org/2021/05/16/fatal-overdoses-rose-during-the-pandemic-but-theyd-had-been-increasing-for-years/>

Fentanyl overdose crisis rages on during pandemic

<https://wusfnews.wusf.usf.edu/health-news-florida/2021-05-13/fentanyl-overdose-crisis-rages-on-during-pandemic>

COVID-19 stymies naloxone, care access for OUD patients

Naloxone prescriptions decreased by 25 percent among OUD patients with Medicare or commercial insurance, highlighting COVID-19 care access concerns.

<https://patientengagementhit.com/news/covid-19-stymies-naloxone-care-access-for-oud-patients>

The pandemic brought addiction recovery online. What comes next?

<https://www.politico.com/newsletters/future-pulse/2021/05/19/the-pandemic-brought-addiction-recovery-online-what-comes-next-795386>

Opioid-related deaths in Ottawa nearly double during pandemic

123 people died from overdoses in 2020, 65 in 2019: Ottawa Public Health

<https://www.cbc.ca/news/canada/ottawa/opioid-related-deaths-pandemic-ottawa-1.6033377>