

JOURNAL ARTICLES

Lifestyle habits of adults during the COVID-19 pandemic lockdown in Cyprus: evidence from a cross-sectional study

Kolokotroni, O, Mosquera, M C, Quattrocchi, A, Heraclides, A, Demetriou, C, Philippou, E
BMC Public Health, 2021, 21, 1, 786

Background:

The COVID-19 pandemic and the widespread adoption of virus control measures have inevitably disrupted efforts to address lifestyle risk factors for non-communicable diseases (NCD). This study aimed to explore the effects of COVID-19 lockdown on all lifestyle medicine pillars, namely diet, physical activity, sleep, stress, social support and use of risky substances.

Methods:

This was a cross-sectional study on a convenient sample of adults who resided in Cyprus during the Spring 2020 lockdown. Participants completed an anonymous online questionnaire comprised of six validated tools regarding the following lifestyle behaviours before and during lockdown: adherence to the Mediterranean diet, physical activity, stress and social support levels, sleep pattern and use of risky substances such as smoking and alcohol. Paired before and during lockdown comparisons for each lifestyle pillar were undertaken using Wilcoxon Signed-Rank test and Bowker symmetry Test where response was numerical (non-parametric data) and categorical respectively. Furthermore, stratified analyses for sociodemographic characteristics were performed.

Results:

Out of 745 participants, 74% were female and median age was 39 years. Overall participants reported significantly higher perceived stress score (22 v 25, $p < 0.01$), lower social support score (71 v 68, $p < 0.001$), and worse sleep quality score (4 v 5, $p < 0.01$) during lockdown. Mediterranean diet (MD) adherence was moderate and increased significantly only in those practicing religious fasting (score of 6 v 7, $p < 0.01$). Total minutes spent sitting increased (120 v 180, $p < 0.01$) although overall physical activity score did not significantly change. Smoking intensity increased during lockdown whilst frequency of alcohol consumption decreased ($p_{trend} = 0.03$ and < 0.01 , respectively).

Conclusion:

Various lifestyle factors were adversely affected by the COVID-19 lockdown in Cyprus. Evidence from this study supports development of holistic lifestyle interventions during and following the pandemic to reduce short and long-term NCD risks by building on lifestyle behaviour strengths and addressing longstanding and emerging gaps and needs.

Differential impacts of COVID-19 across racial-ethnic identities in persons with opioid use disorder

Mistler, C B; Sullivan, M C; Copenhaver, M M; et al
Journal of Substance Abuse Treatment, 2021, 129, 108387

Objective:

The COVID-19 pandemic has exacerbated health disparities, particularly among at-risk people with opioid use disorder (OUD). We sought to characterize the direct and indirect impacts of COVID-19 on this group to understand how the pandemic has affected this group, this group's public health response to COVID-19, and whether there were differences by race/ethnicity.

Methods:

This study recruited its sample from a drug treatment setting in the northeast region of the United States. We surveyed 110 individuals on methadone as treatment for OUD and assessed COVID-19-related impacts on their health behaviors and other indices of social, physical, and mental well-being, including sexual health behaviors, substance use, mental health status, health care access, income, and employment.

Results:

Our findings highlight overall increases in depression, anxiety, loneliness, and frustration among the sample of people with OUD; the study also observed decreases in financial stability. Significant differences between groups indicated a greater financial burden among racial-ethnic minorities; this subgroup also reported greater direct adverse effects of COVID-19, including being more concerned about contracting COVID-19, not being able to get a COVID-19 test, and knowing someone who had died from COVID-19. A greater proportion of Whites indicated increases in alcohol consumption and non-prescription drug use than did racial-ethnic minorities.

Conclusions:

Treatment providers must be vigilant in managing direct and indirect outcomes of COVID-19 among people with OUD. Findings highlight the need to develop culturally competent, differentiated interventions in partnership with community-based organizations to meet the unique challenges that the COVID-19 pandemic presents for people in treatment for OUD.

The pandemic stay-at-home order and opioid-involved overdose fatalities

Mason, M; Arukumar, P; Feinglass, J
Journal of the American Medical Association
23 April 2021
doi:10.1001/jama.2021.6700

A health crisis within a health crisis: Opioid access in the COVID-19 pandemic

Narayan, A; Balkrishnan, R
Substance Abuse
23 April 2021
DOI: 10.1080/08897077.2021.1900981

The novel coronavirus has thrown large sections of our healthcare system into disarray, with providers overburdened by record breaking number of hospitalizations and deaths. The U.S., in particular, has remained the nation with one of the fastest growing case counts in the world. As a consequence, many other critical healthcare needs have not received the necessary resources or consideration. This commentary draws attention to substance use and opioid access during the ongoing crisis, given the potential for breakdowns in treatment access for addiction, the growing concern of mental health comorbidities, and the lack of access for those who require opioids for adequate pain management. Further, the commentary will offer policy and practice recommendations that may be implemented to provide more equitable distribution of care.

Leveraging telehealth in the United States to increase access to opioid use disorder treatment in pregnancy and postpartum during the COVID-19 pandemic

Guille, C; Moreland, A
American Journal of Psychiatry
178, 4, p.290-293, 2021

Substance use disorders and behavioral addictions during the COVID-19 pandemic and COVID-19-related restrictions

Avena, N M; Simkus, J; Lewandowski, A; et al
Frontiers in Psychiatry, 2021, 12:653674.

COVID-19 was first identified in Wuhan, China in December of 2019 and appeared in the United States 1 month later. Between the onset of the pandemic and January 13, 2021, over 92 million people have tested positive for the virus and over 1.9 million people have died globally. Virtually every country in the world has been impacted by this virus. Beginning in March 2020, many U.S. state governments enforced a “quarantine” to respond to the growing health crisis. Citizens were required to remain at home; schools, restaurants, and non-essential businesses were forced to close, and large gatherings were prohibited. Americans’ lives were transformed in a span of days as daily routines were interrupted and people were shuttered indoors. Mounting fear and unpredictability coupled with widespread unemployment and social isolation escalated anxiety and impacted the mental health of millions across the globe. Most (53%) U.S. adults reported that the coronavirus outbreak has had a negative impact on their mental health, including inducing or exacerbating use of alcohol, drugs, gambling and overeating as coping mechanisms. In this paper, we will examine

substance use and addictive behaviors that have been used to manage the stress and uncertainty wrought by the COVID-19 pandemic. We review the changing treatment landscape as therapy pivoted online and telemedicine became the norm.

Cannabis withdrawal induced brief psychotic disorder: a case study during the national lockdown secondary to the COVID-19 pandemic

Marín, J; Pérez de Mendiola, X; Fernández, S

Journal of Addictive Diseases

22 April 2021

doi: 10.1080/10550887.2021.1910473

Background:

Cannabis Withdrawal Syndrome (CWS) is a key feature of Cannabis Use Disorder (CUD). The CWS causes significant distress and disability. While the relationship between CUD and psychosis has been extensively studied, the potential connection between CWS and psychosis has not received as much attention.

Case presentation:

The CARE guideline's methodology is followed in the presentation of this case report. During the national lockdown decreed by the Spanish government for the containment of the CoronaVirus Disease 19 (COVID-19) pandemic, a 29-year-old man suffers a CWS and a subsequent psychotic episode. He is admitted to a psychiatric unit, obtaining a rapid and complete response to treatment.

Discussion:

Clinical and pathophysiological data that support the hypothesis of CWS-induced psychosis are discussed. Due to the increasing use of cannabis worldwide, we believe that more research is needed on the mental disturbances associated with CUD, including CWS and psychosis. On the other hand, the confinement and social distancing measures adopted in the face of the current COVID-19 pandemic could have restricted the availability and consumption of certain drugs, precipitating the emergence of withdrawal syndromes such as CWS.

Going virtual: youth attitudes toward and experiences of virtual mental health and substance use services during the COVID-19 pandemic

Hawke, L D; Sheikhan, NY; MacCon, K; et al

BMC Health Services Research, 2021, 21, 1, 340

Background:

During the COVID-19 pandemic, youth mental health and substance use services rapidly moved to virtual modalities to meet social distancing requirements. It is important to understand youth attitudes toward and experience of virtual services.

Objective:

This study examined the attitudes toward and experiences of virtual mental health and substance use services among youth drawn from clinical and non-clinical samples.

Method:

Four hundred nine youth completed a survey including questions about their attitudes toward and experience of virtual services. The survey included quantitative and open-ended questions on virtual care, as well as a mental health and substance use screener.

Results:

The majority of youth with mental health or substance use challenges would be willing to consider individual virtual services, but fewer would consider group virtual services. However, many have not received virtual services. Youth are interested in accessing a wide variety of virtual services and other supportive wellness services. Advantages and disadvantages of virtual services are discussed, including accessibility benefits and technological barriers.

Discussion:

As youth mental health and substance use services have rapidly gone virtual during the COVID-19 pandemic, it is essential that we hear the perspectives of youth to promote service utilization among those in need. Diverse, accessible, technologically stable virtual services are required to meet the needs of different youth, possibly with in-person options for some youth. Future research, engaging youth in the research process, is needed to evaluate the efficacy of virtual services to plan for the sustainability of some virtual service gains beyond the pandemic period.

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Beyond the withdrawal. Managing post-acute benzodiazepine withdrawal in older adults

DiGenova, P; Leyva, R; Hartman, J; et al

Journal of the American Geriatrics Society 2021 69 :SUPPL 1 (S21)

Introduction

Post-acute withdrawal, also described as protracted, extended or persistent withdrawal, refers to a syndrome that includes anxiety, irritability, hostility, mood instability, fatigue, insomnia and increased physical complaints often related to gastrointestinal symptoms, pain and weakness. Unlike acute withdrawal, where treatment guidelines and practices are highly predictable and protocol driven; post-acute interventions are highly symptom driven and individualized. Attention to co-occurring medical and psychiatric disorders is vital as well. It is well-known that benzodiazepines pose greater risks to older adults including confusion, ataxia, syncope, risk of falls, fractures, delirium and excess hospitalizations. There is limited literature on managing post-acute withdrawal syndromes in older adults, with few available guidelines for medication management of emerging symptoms. The additional challenges of the COVID-19 pandemic have increased both the stress on older adults in need of care and of providers seeking to engage patients in therapeutic relationships. We focus on representative cases of older adults seeking treatment related to benzodiazepines withdrawal and describe flexible treatment approaches for their evolving and complex needs.

Methods

Cases studies were identified from the patient population at Mount Sinai Beth Israel, an urban medical center serving a multicultural and socioeconomically diverse population that includes several NORC sites. Patients were identified from those who presented to the ambulatory care center that offers adult, geriatric and dual-diagnosis services. A personalized treatment planning approach was developed in each case and included the time period of the COVID-19 quarantine.

Results

The results will be discussed.

Conclusion

Despite the proven negative outcomes of chronic use providers continue to prescribe benzodiazepines inappropriately to older adults. The need to care for patients treated with these agents is high. Postacute withdrawal syndrome is poorly understood and under recognized in older adults. Efforts such as de-prescribing, patient centered approaches to rational prescribing and use remote education programs should be increased. COVID-19 pandemic conditions lead to an increase in overall symptoms reported but did not prevent patients from engaging in successful treatment.

Targeted virtual opioid overdose education and naloxone distribution in overdose hotspots for older adults

Beiting, K; Molony, J; Ari, M; Thompson, K

Journal of the American Geriatrics Society, 2021, 69, SUPPL 1, S173

Background:

Mirroring the rise in heroin use among older adults, the rate of rise of opioid-related overdose deaths from 2016 to 2017 in Chicago was highest among ages 55-64 (+26.7%) and 65-74 (+95.0%). In Chicago, recent work examining spatial distribution of overdose deaths in adults over 50 showed opioid overdose deaths are geographically clustered. This hyper-local impact creates an opportunity

for locationally targeted interventions. Opioid overdose education and community naloxone distribution (OEND) is cost effective, results in reduced opioid-related emergency department visits, and may have a mortality benefit. The COVID-19 pandemic has exacerbated the opioid crisis and 2020 was the deadliest year for opioid overdoses in the history of Chicago but many in-person community outreach and training initiatives have paused or been transitioned to virtual platforms due to the pandemic. A video-conferencing based virtual OEND intervention targeting community organizations identified to be within communities with high overdose rates for older adults has the potential to reach this particularly vulnerable population during the limits imposed by the COVID-19 pandemic.

Methods:

An existing in-person training for opioid overdose identification and naloxone administration was adapted to a virtual format and revised to include precautions in the context of the COVID-19 pandemic (e.g. changes needed to respiratory resuscitation). A protocol was developed for participants to acquire naloxone. Next steps include soliciting curriculum feedback from diverse stakeholders. We then plan to deliver the curriculum to senior housing residents, community-dwelling older adults, and aging services professionals. Program recruitment will be focused in areas with more highly clustered fatal overdoses. A 5-item Likert assessment on participant confidence in responding to overdose will be used for evaluation.

Results:

The results will be discussed and will include data on number of trainings, attendee types, and post-training survey results.

Conclusions:

A geographically targeted virtual OEND training represents an innovative means to continue essential outreach aimed at reducing the frequency of fatal opioid overdoses among Chicago's older adults in high-risk communities.

Payer strategies to ensure access to care for individuals with opioid use disorder during COVID-19

Bachireddy, C; Terplan, M
American Journal of Managed Care
27, 3, p.91-92, 2021

Perceived impacts of the COVID-19 pandemic on cannabis-using emerging adults

Bonar E E, Chapman L, McAfee J, et al
Translational Behavioral Medicine
27 April 2021
doi: 10.1093/tbm/ibab025

Cannabis-using youth are a large epidemiologic subgroup whose age and smoking-related risks underscore the importance of examining the impact of the COVID-19 pandemic in this population. Within a clinical trial (n = 36 received an intervention prior to data collection reported herein), we surveyed cannabis-using emerging adults (ages 18-25) about perceived COVID-19 impacts. Participants (n = 141) reporting weekly cannabis use (M = 18.6 use days in the past 30) were enrolled and completed online surveys as part of either their baseline or 3 month assessment. COVID-19-related measures included symptoms, substance use, mood, etc. Participants were 57% female (mean age = 21, standard deviation = 2.2), with 21% Hispanic/Latinx, 70% White, 20% Black/African American, and 10% of other races. Most participants (86%) reported quarantine/self-isolation (M = 59 days). Several had COVID-19 symptoms (16%), but none reported testing COVID-19 positive. Many respondents felt their cannabis use (35%-50%, across consumption methods) and negative emotions (e.g., loneliness, stress, and depression; 69.5%, 69.5%, and 61.8%, respectively) increased. They reported decreased in-person socialization (90.8%) and job losses (23.4%). Reports of increased cannabis smoking were associated with increased negative emotions. On an open-response item, employment/finances and social isolation were frequently named negative impacts (33.3% and 29.4%, respectively). Although cannabis-using emerging adults' reports of increases in cannabis use, coupled with mental health symptoms and social isolation, are concerning, the full impact of the pandemic on their health and well-being remains unknown. Future studies examining the relationship between social isolation, mental health, and cannabis use among young people are needed.

Use of alcohol, tobacco, cannabis, and other substances during the first wave of the SARS-CoV-2 pandemic in Europe: a survey on 36,000 European substance users

Manthey J, Kilian C, Carr S, et al
Substance Abuse: Treatment, Prevention & Policy, 2021, 16, 1, 36

Background:

SARS-CoV-2 reached Europe in early 2020 and disrupted the private and public life of its citizens, with potential implications for substance use. The objective of this study was to describe possible changes in substance use in the first months of the SARS-CoV-2 pandemic in Europe.

Methods:

Data were obtained from a cross-sectional online survey of 36,538 adult substance users from 21 European countries conducted between April 24 and July 22 of 2020. Self-perceived changes in substance use were measured by asking respondents whether their use had decreased (slightly or substantially), increased (slightly or substantially), or not changed during the past month. The survey covered alcohol (frequency, quantity, and heavy episodic drinking occasions), tobacco, cannabis, and other illicit drug use. Sample weighted data were descriptively analysed and compared across substances.

Results:

Across all countries, use of all substances remained unchanged for around half of the respondents, while the remainder reported either a decrease or increase in their substance use. For alcohol use, overall, a larger proportion of respondents indicated a decrease than those reporting an increase. In contrast, more respondents reported increases in their tobacco and cannabis use during the previous month compared to those reporting decreased use. No distinct direction of change was reported for other substance use.

Conclusions:

Our findings suggest changes in use of alcohol, tobacco and cannabis during the initial months of the pandemic in several European countries. This study offers initial insights into changes in substance use. Other data sources, such as sales statistics, should be used to corroborate these preliminary findings.

Evidence of increased Fentanyl use during the COVID-19 pandemic among opioid agonist treatment patients in Ontario, Canada

Morin, K A; Acharya, S; Eibl, J K; et al

International Journal of Drug Policy 2021 90 Article Number 103088

Background:

Amid the opioid crisis, the health care system is restructuring to prevent and treat COVID-19. Individuals in opioid agonist treatment (OAT) are uniquely challenged because of disruption to treatment, medication diversion, and isolation during the pandemic.

Methods:

Between January and September 2020, we utilized the electronic medical record from a chain of 67 opioid agonist treatment clinics in Ontario, Canada, to examine routinely collected urine drug screen results of patients in opioid agonist treatment by Public Health Units.

Results:

We present evidence of a 108% increase in the percentage of fentanyl positive urine drug screens from April to September ($p < 0.001$). During the same period, health regions in northern and southwestern Ontario, areas with a high concentration of rural communities, have seen the most notable increase in the percent of fentanyl positive urine drug screen results.

Conclusion:

The use of fentanyl increased by 108% among OAT patients in Ontario during the COVID 19 pandemic. We argue that the persistent increase of fentanyl exposure over time, specifically in the OAT population, suggests that reduced monitoring may decrease OAT's effectiveness and negatively impact patient outcomes.

Common themes in early state policy responses to substance use disorder treatment during COVID-19

Andraka-Christou B, Bouskill K, Haffajee RL, et al

American Journal of Drug and Alcohol Abuse

28 April 2021

doi: 10.1080/00952990.2021.1903023

Background:

Limited research has examined how states have changed policies for treatment of substance use disorder (SUD) during the COVID-19 pandemic.

Objectives:

We aimed to identify themes in state policy responses to the pandemic in the context of SUD treatment. Identifying themes in policy responses provides a framework for subsequent evaluations of the relationship between state policies and health service utilization.

Methods:

Between May and June 2020, we searched all Single State Agencies for Substance Abuse Services (SSA) websites for statements of SUD treatment policy responses to the pandemic. We conducted Iterative Categorization of policies for outpatient programs, opioid treatment programs, and other treatment settings to identify themes in policy responses.

Results:

We collected 220 documents from SSA websites from 45 states and Washington D.C. Eight specific themes emerged from our content analysis: delivery of pharmacological and non-pharmacological services, obtaining informed consent and documentation for remote services, conducting health assessments, facility operating procedures and staffing requirements, and permissible telehealth technology and billing protocols. Policy changes often mirrored federal guidance, for instance, by expanding methadone take-home options for opioid treatment programs. The extent and nature of policy changes varied across jurisdictions, including telehealth technology requirements and staffing flexibility.

Conclusion:

States have made significant policy changes to SUD treatment policies during COVID-19, particularly regarding telehealth and facilitation of remote care. Understanding these changes could help policymakers prioritize guidance during the pandemic and for future health crises. Impacts of policies on disparate treatment populations, including those with limited technological access, should be considered.

Socially-supportive norms and mutual aid of people who use opioids: An analysis of Reddit during the initial COVID-19 pandemic

Bunting AM, Frank D, Arshonsky J, Bragg MA, Friedman SR, Krawczyk N.
Drug and Alcohol Dependence, 2021, 222, 108672

Background:

Big events (i.e., unique historical disruptions) like the COVID-19 epidemic and its associated period of social distancing can transform social structures, social interactions, and social norms. Social distancing rules and the fear of infection have greatly reduced face-to-face interactions, increased loneliness, reduced ties to helping institutions, and may also have disrupted the opioid use behaviors of people who use drugs. This research used Reddit to examine the impact of COVID-19 on the social networks and social processes of people who use opioids.

Methods:

Data were collected from the social media forum, Reddit.com. At the beginning of the COVID-19 pandemic in the U.S. (March 5, 2020, to May 13, 2020), 2,000 Reddit posts were collected from the two most popular opioid subreddits (r/OpiatesRecovery, r/Opiates). Posts were reviewed for relevance to COVID-19 and opioid use resulting in a final sample of 300. Thematic analysis was guided by the Big Events framework.

Results:

The COVID-19 pandemic was found to create changes in the social networks and daily lives among persons who use opioids. Adaptions to these changes shifted social networks leading to robust social support and mutual aid on Reddit, including sharing and seeking advice on facing withdrawal, dealing with isolation, managing cravings, and accessing recovery resources.

Conclusions:

Reddit provided an important source of social support and mutual aid for persons who use opioids. Findings indicate online social support networks are beneficial to persons who use opioids, particularly during big events where isolation from other social support resources may occur.

Addictive behaviors and craving during the COVID-19 pandemic of people who have recovered from substance use disorder

Bonny-Noach H, Gold D.
Journal of Addictive Diseases
39, 2, p.257-264, 2021

Background:

Stressors caused by the coronavirus pandemic (COVID-19) contribute to increased addictive behaviors in the general population worldwide. Little is known, however, about addictive behaviors of people who have recovered a long time ago, even years, from substance use disorder (SUD). The goal of the present research was to examine the craving for drug use and addictive behaviors (tobacco and alcohol consumption, viewing of pornography, gambling, and shopping online) of people who recovered from SUD, before and after the outbreak of the COVID-19 pandemic.

Methods:

During one week of isolation imposed in Israel following the outbreak of COVID-19 in April, 2020, a self-report questionnaire was distributed to a convenience sample of 113 people who had recovered from SUD, aged 22-69, 78% men.

Results

Fifty-one percent of participants reported craving drugs during the isolation period and engaging in addictive behaviors. Significant differences were found in tobacco and alcohol consumption, gambling, and viewing of pornography online, before and after the outbreak of the pandemic, especially in participants who reported having engaged in these addictive behaviors to some extent before the outbreak. A hierarchical linear regression showed a significant explained variance ($R^2=44\%$, $p<.001$), with stronger feelings of loneliness and shorter length of time free from drug use being associated with stronger craving for drugs.

Conclusions:

The drug addiction treatment establishment should pay close attention and strengthen communication with people who recovered from SUD. It is necessary to develop real-time anti-craving and anti-replacement addiction interventions to prevent relapses.

One year into COVID, methadone deliveries show the way forward

<https://filtermag.org/covid-methadone-deliveries/>

Overdose deaths surged in pandemic, as more drugs were laced with fentanyl

<https://www.npr.org/sections/health-shots/2021/04/22/989833102/overdose-deaths-surged-in-pandemic-as-more-drugs-were-laced-with-fentanyl>

How Covid-19 caused an organised crime boom

Criminal groups have capitalised on the chaos of coronavirus by adopting new methods

<https://www.irishtimes.com/culture/books/how-covid-19-caused-an-organised-crime-boom-1.4543623>

Impact of COVID-19 on racial-ethnic minorities among persons with opioid use disorder

<https://medicalxpress.com/news/2021-04-impact-covid-racial-ethnic-minorities-persons.html>

Addiction professionals in the pandemic – Andre Johnson

<https://recoveryreview.blog/2021/04/26/addiction-professionals-in-the-pandemic-andre-johnson-2/>

Pandemic, fentanyl and homelessness are a fatal combination. The benefits of prescribing opioids outweigh the risks

<https://www.thestar.com/opinion/contributors/2021/04/26/pandemic-fentanyl-and-homelessness-are-a-fatal-combination-the-benefits-of-prescribing-opioids-outweigh-the-risks.html>

Virtual 'spotting' could help keep drug users safe during COVID-19, U of T researchers say

A group of researchers at the University of Toronto and the Canadian Association of People Who Use Drugs are studying a remote supervised-consumption model known as “spotting” to understand its benefits among people who use drugs during the pandemic | University of Toronto, Canada

<https://www.utoronto.ca/news/virtual-spotting-could-help-keep-drug-users-safe-during-covid-19-u-t-researchers-say>

COVID-19 pandemic results in increased substance use among regular drug users

<https://www.pharmacytimes.com/view/covid-19-pandemic-results-in-increased-substance-use-among-regular-drug-users>

Opioid use, fentanyl deaths spike amid pandemic

<https://baltimorefishbowl.com/stories/opioid-use-fentanyl-deaths-spike-amid-pandemic/>

Overdose crisis: The COVID-19 pandemic has laid bare decades of drug policy failures

<https://theconversation.com/overdose-crisis-the-covid-19-pandemic-has-laid-bare-decades-of-drug-policy-failures-158514>

Doctors prescribe more opioids to COVID-19 ‘long haulers,’ raising addiction fears

<https://www.latimes.com/science/story/2021-04-28/doctors-prescribe-more-opioids-to-long-covid-patients-addiction>

Addicted Michigan: Fentanyl overdoses on the rise during the pandemic

<https://nbc25news.com/news/addicted-america/addicted-michigan-fentanyl-overdoses-on-the-rise-during-the-pandemic>

Opioid use, fentanyl deaths in Maryland spike amid pandemic

<https://baltimore.cbslocal.com/2021/04/28/opioid-use-fentanyl-deaths-in-maryland-spike-amid-pandemic/>

Impact of COVID-19 on racial-ethnic minorities among persons with opioid use disorder

Findings highlight differences in the experiences of racial-ethnic minorities with opioid use disorder during the COVID-19 pandemic

<https://today.uconn.edu/2021/04/impact-of-covid-19-on-racial-ethnic-minorities-among-persons-with-opioid-use-disorder/#>