

EMCDDA DOCUMENTATION CENTRE INFORMATION BULLETIN

CORONAVIRUS, 20 November 2020

GREY LITERATURE

Peer-led COVID-19 impact survey

Molinaro, R
Kaleidoscope
Cardiff: 2020

As spring's national lockdown was announced, professionals troubled over how such unparalleled change might affect people in recovery. The lack of connection, loss of routine and pause on vital coping mechanisms would surely shake the resolve of even the most resilient service users. With the support of Welsh Government, drug and alcohol providers across Wales were determined to uncover lockdown's impacts. Here, data-supported insights collected from a peer-led and Wales-wide survey are presented, and the reality that lies behind the numbers.

<https://www.kaleidoscopoproject.org.uk/wp-content/uploads/sites/25/2020/10/FINAL.-Peer-led-COVID19-Impact-Survey-2020.-External-1.pdf>

Télétravail & pratiques addictives en période de crise

GAE Conseil
Paris: 2020

GAE Conseil est publié les résultats d'une étude exclusive ODOXA pour notre cabinet réalisée auprès d'un panel représentatif de 3000 Français sur le thème "Télétravail & pratiques addictives en période de crise".

- 75% des salariés estiment que le télétravail accroît les pratiques addictives ;
- Ils placent en premier les écrans (77%), le tabac (71%), l'alcool (66%) et le cannabis (55%) ;
- 41% des salariés pensent que les addictions sont fréquentes en télétravail (contre 31% sur le lieu de travail lui-même) ;
- 72% des managers considèrent qu'il est plus difficile d'aborder le sujet avec un salarié dépendant si ce dernier est en télétravail.

Ce livret présente l'étude complète, les infographies et des interviews de professionnels, experts et institutionnels.

<https://gaeconseil.fr/21913-2/>

Impact of COVID-19 and associated restrictions on people who inject drugs in the Australian Capital Territory: Findings from the Illicit Drug Reporting System 2020

Uporova, J; Peacock, A
National Drug and Alcohol Research Centre (NDARC)
Sydney: 2020

The COVID-19 pandemic and restrictions on travel and gathering have likely had major impacts on drug supply, use and harms and there have been significant challenges with delivery of drug treatment and harm reduction services | NDARC, Australia

https://ndarc.med.unsw.edu.au/sites/default/files/ndarc/resources/IDRS%20COVID%20bulletin_ACT_0.pdf

The impacts of COVID-19 on people who use drugs in Scotland

University of Stirling, UK

A new website reports results of a rapid research project that sought to understand how the social response to COVID-19 has affected people who use drugs including: drug markets, drug use, access to harm reduction and treatment services, physical and mental health, and recovery.

<https://covid-drugs.stir.ac.uk/>

COVID-19 risk for people in addiction recovery?

William White Papers
Punta Gorda, FL: 2020

Health and psychosocial risks associated with COVID-19 fall disproportionately on historically marginalized populations. I recently reviewed published studies on preliminary findings related to COVID-19 among people experiencing or recovering from substance use disorders (SUD). Major findings from this review are summarized below |, USA

<http://www.williamwhitepapers.com/blog/2020/11/covid-19-risk-for-people-in-addiction-recovery.html>

Substance-use related harms and risk factors during periods of disruption

Public Health Ontario
Queen's Printer for Ontario
Toronto: 2020

Evidence on substance use-related harms and relevant risk factors during periods of disruption, is limited and results varied. Few studies reflected the voices and experiences of people who use drugs, considered inequities, or examined intersecting determinants of health for people who use substances.

Relevant records were based on Hurricane Sandy, Hurricane Katrina, the September 11 terrorist attacks, a heroin shortage, closure of a needle and syringe program, and the Coronavirus Disease 2019 (COVID-19) pandemic. Disruptions prior to the COVID-19 pandemic did not involve specific measures to distance people from each other.

The most commonly cited substance use-related harms were fatal and nonfatal drug poisoning. In the current context, while evidence on the impacts of COVID-19 disruptions are not fully known, preliminary reports indicate an increase in fatal drug poisoning is occurring.

The main risk factors for increased substance use-related harms reflected a disruption in ways that people typically manage their drug use and access a network of support. This included decreased availability and increased price of drugs, decreased access to substance use treatment, harm reduction services and other supports, and increased toxicity of the drug content.

Monitoring and timely reporting of fatal and nonfatal poisoning, along with knowledge based on living and lived expertise of substance use, community experience, and practice are essential to understand the impacts of COVID-19 community-based public health measures and to inform response strategies.

<https://www.publichealthontario.ca/-/media/documents/ncov/main/2020/08/substance-use-related-harms-disruption.pdf?la=en>

JOURNAL ARTICLES

Supplying synthetic opioids during a pandemic: An early look at North America

Pardo, B

International Journal of Drug Policy, 2020, 102833

International commerce and travel have been restricted in order to limit the spread of COVID-19. The illegal trafficking in drugs, which is often concealed in other commercial activity, will be affected by these disruptions. This is particularly true for precursor chemicals, controlled substances of synthetic origin, and new psychoactive substances coming from Asia. China hosts large and under-regulated pharmaceutical and chemical sectors that provide many of the active ingredients used both in legitimate medicines and illicit fentanyl and methamphetamine. Unregulated producers and vendors in China have been supplying drug trafficking organizations in Mexico or using the internet and postal service to directly sell fentanyl to buyers in North America. The magnitude of supply shortages and interrupted trade of chemicals and synthetic drugs coming from China will depend on the breadth and depth of COVID-19's disruptions. In turn, this could impact vulnerable drug-using populations.

Drawing on historical accounts of prior supply disruptions, this commentary offers some initial speculation as to the possible effects of COVID-19 on the supply of synthetic drugs like fentanyl and precursor chemicals supplied to North America from China, which may have important lessons for other parts of the globe. Prior supply disruptions coincided with elevated prices and reduced purities of street drugs as well as increases in the number of users entering treatment. However, it is challenging to predict how developments will unfold given the unprecedented nature of this pandemic. A short-term breakdown in supply chains, interrupted trade, or social distancing mandates may not have much of an effect on the availability of synthetic drugs. Yet, disruptions in trade for months or years could shape how drugs are supplied or used. Drug policy will need to evaluate market indicators as soon as they are available but responding now with expanded medication therapies, like methadone, may help save lives. The drug policy landscape could look different in a post-COVID world.

COVID-19 and the health of people who use drugs: what is and what could be?

Grebely, J; Cerdá, M; Rhodes, T

International Journal of Drug Policy, 2020, 83, 102958

SARS-CoV-2, the virus that causes COVID-19, has changed the world as we know it, and continues to do so. How COVID-19 affects people who use drugs, the environments in which they live, and capacities of response, warrants immediate attention. This special issue begins to map how COVID-19 is altering the health of people who use drugs, including in relation to patterns of drug use, service responses, harms that may relate to drug use, interventions to reduce risk of harms, COVID-19 health, and drug policies. We emphasise the need to envisage COVID-19 and its effects as a matter of intersecting 'complex adaptive systems': that is, the impacts of COVID-19 extend beyond the virus and related illness conditions to encompass multiple social, cultural, economic, policy and political effects; and these affect the health of people who use drugs directly as well as indirectly by altering the risk and enabling environments in which they live. We synthesize emergent evidence on the impact of COVID-19 on the health of people who use drugs. A key concern we identify is how to sustain policy and service delivery improvements prompted by COVID-19. We need to maintain an ethos of emergent adaptation and experimentation towards the creation of safer environments in relation to the health of people who use drugs.

COVID-19 e servizi per le persone con disturbo da uso di sostanze in Europa: restrizioni, adattamenti e innovazione

Pirona, A; Matias, J; Montanari, L; Skarupova, K; Ferri, M; Giraudon, I; Mounteney, J; Sleiman, S; Natoniewska, K; Guarita, B; Kalisch, M; Mathis, F; Griffiths, P

Medicina delle Dipendenze – Italian Journal of the Addictions (MDD), 2020, 10, 39,

In questo articolo si presentano le informazioni raccolte dall'Osservatorio Europeo delle Droghe e delle Tossicodipendenze (OED-EMCDDA) nell'Aprile 2020 circa le sfide affrontate e gli adattamenti messi in atto dai servizi europei per il trattamento del disturbo da uso di sostanze (DUS) e la riduzione del danno a seguito dell'emergenza COVID-19. L'indagine è stata realizzata con la metodologia trendspotter, che permette di esplorare in tempi rapidi fenomeni emergenti grazie all'uso di un metodo di ricerca misto qualitativo e quantitativo e coinvolge gli esperti dei servizi operanti in Europa. La situazione di emergenza COVID-19 ha richiesto la riorganizzazione dei servizi e della modalità della loro somministrazione per far fronte a varie necessità quali la riduzione dei contatti con e tra gli utenti, la diversa domanda da parte degli utenti stessi, la minore disponibilità di personale, le difficoltà di movimento, una maggior richiesta di igienizzazione e di uso di dispositivi per la prevenzione del

contagio. Le problematiche emerse, le soluzioni adottate e la diversa interazione instauratasi con gli utenti hanno fatto emergere alcune possibilità per migliorare i servizi, rivedere il sistema e ripensare al rapporto con gli utenti.

SARS-CoV-2 pandemie und suchterkrankungen: schwerpunkt opioidabhängigkeit und substitution: ein erfahrungsbericht aus Bayern

SARS-CoV-2 pandemic and addictive disorders: focus on opioid dependence and opioid maintenance treatment-the Bavarian experience

Pogarell O., Wodarz Von Essen H., Wodarz N.

Sucht

66, 5, p.271-277, 2020

Hintergrund:

Die Auswirkungen der SARS-CoV-2 Pandemie betreffen Menschen mit Suchterkrankungen auf vielfältige Weise. Psychosoziale Stressoren wie die Sorge vor Ansteckung oder die Folgen der öffentlichen und privaten Kontaktbeschränkungen können zu Destabilisierung, Rückfällen oder Zunahme eines Substanzkonsums führen. Gleichzeitig sind stationäre, ambulante oder rehabilitative Versorgungsangebote nur noch begrenzt verfügbar. Besonders vulnerabel sind Personen mit Opioidabhängigkeit, die aufgrund der hohen psychischen und somatischen Komorbiditätsraten eine erhöhte Infektanfälligkeit aufweisen und im Rahmen einer Substitutionsbehandlung zwingend auf stabile ambulante Versorgungsstrukturen angewiesen sind.

Ziel:

Es werden am Beispiel der Erfahrungen in Bayern die Auswirkungen auf Opioidabhängige und die Substitution dargestellt.

Schlussfolgerungen:

Um die Folgen des Lockdowns für diese Patient_innen zu minimieren und das Betreuungsangebot verlässlich aufrechtzuerhalten sind verschiedene Vorgehensweisen in Betracht zu ziehen, die neben allgemeinen Hygieneschulungen der Betroffenen, Anpassungen der Ambulanzorganisation ebenso wie regulatorische Maßnahmen umfassen.

Background:

The covid-19 pandemic challenges patients with severe mental illnesses in many aspects. Curfews, quarantine and isolation are stressors that impair mental wellbeing and can lead to increases in substance use or relapse in patients with substance use disorders. Among the latter, patients with opioid use disorder are particularly vulnerable due to high prevalence of psychiatric or somatic comorbidities. On the other hand, both availability and access to health care is limited during the pandemic, which severely affects patients under opioid maintenance therapy (OMT).

Aim:

This report focusses on the Bavarian experience with opioid dependent patients and OMT.

Conclusions:

Measures to counteract the health risks for this group of patients require the maintenance of OMT facilities under safe conditions in terms of service, hygiene and risk of infection.

Coronakrise und suchtmedizin: ein praxisbericht

Corona crisis and addiction medicine: a field report

Walcher, S

Sucht

66, 5, p.286-290, 2020

Ausgangslage:

Die Bedrohung durch Covid-19 hat die Welt – und ganz besonders die der Drogengebraucher – erheblich verändert. Suchtmittel waren plötzlich schlecht verfügbar, Substitution, Suchthilfe und Einrichtungen der Suchtmedizin nur noch eingeschränkt zugänglich. Die engen Lebensbedingungen, der Lockdown und der oft schlechte Gesundheitszustand der Konsumenten führten zu großer Sorge unter Patienten, Helfern und Ärzten.

Maßnahmen:

Nach kurzem Zögern wurde schnell reagiert, und – soweit die schlechte Materialausstattung das zuließ – Eigen- und Fremdschutz eingerichtet. Die Fachgesellschaften erreichten bessere medizinische und politische Rahmenbedingungen, Infektionsschutz, Take-Home-Verordnung, Testkapazitäten und virtuelle Sprechstunden bzw. Teamkonferenzen wurden ausgebaut – und bisher konnten größere Infektionscluster in dieser Patientengruppe vermieden werden.

Schlussfolgerungen:

Einige dieser Veränderungen werden bleiben – und unser Zusammenleben nachhaltig beeinflussen. Wir haben jedenfalls viel Erfahrung im Krisenmanagement gewonnen – und das vertrauensvolle

Verhältnis zu unseren Patienten intensiviert. Gute Suchtarbeit ist Beziehungsarbeit: das hat diese Krise nur bestätigt!

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!

COVID-19 impact on Kazakhstan University student fear, mental health, and substance use

Konstantinov V, Berdenova S, Satkangulova G, et al

International Journal of Mental Health and Addiction

9 November 2020

doi: 10.1007/s11469-020-00412-y

Rapid transitional response to the COVID-19 pandemic by opioid agonist treatment programs in Ukraine

Meteliuk A, Galvez de Leon SJ, et al

Journal of Substance Abuse Treatment, 2020, 108164

On March 16, 2020, Ukraine's Ministry of Health issued nonspecific interim guidance to continue enrolling patients in opioid agonist therapies (OAT) and transition existing patients to take-home dosing to reduce community COVID-19 transmission. Though the number of OAT patients increased modestly, the proportion receiving take-home dosing increased from 57.5% to 82.2%, which translates on average to 963,952 fewer clinic interactions annually (range: 728,652-1,016,895) and potentially 80,329 (range: 60,721-84,741) fewer hours of in-person clinical encounters. During the transition, narcologists (addiction specialists) expressed concerns about overdoses, the guidance contradicting existing legislation, and patient dropout, either from incarceration or inadequate public transportation. Though clinicians did observe some overdoses, short-term overall mortality remained similar to the previous year. As the country relaxes the interim guidance, we do not know to what extent governmental guidance or clinical practice will change to adopt the new guidance permanently or revert to pre-guidance regulations. Some future considerations that have come from COVID-19 are should dosing schedules continue to be flexible, should clinicians adopt telehealth, and should there be more overdose education and naloxone distribution? OAT delivery has improved and become more efficient, but clinicians should plan long-term should COVID-19 return in the near future. If the new efficiencies are maintained, it will free the workforce to further scale up OAT.

The impact of COVID-19 on service provision for emergency department patients post-opioid overdose: a field report

Collins AB, Beaudoin FL, Samuels EA, Wightman R, Baird J.

Journal of Addiction Medicine

16 November 2020

doi: 10.1097/ADM.0000000000000779

Background:

To minimize the spread of COVID-19, health and ancillary care providers altered service delivery patterns. These changes included an increase in reliance on telemedicine modalities, a reduction in services or hours of operation, and prohibiting guests and nonessential personnel from healthcare settings. We describe a rapid environmental assessment with senior emergency department (ED) practitioners in Rhode Island to understand how COVID-related procedural changes impact the provision of post-overdose care in ED.

Methods:

Semi-structured interviews were conducted with 14 senior healthcare practitioners in EDs across Rhode Island from June to July 2020. Interviews were part of a larger, ongoing study examining the

implementation and effectiveness of post-opioid overdose care in EDs and sought to understand how COVID-19 had impacted the provision of services for people who use drugs (PWUD).

Results:

COVID-related policy changes challenged the provision of services to PWUD in the ED, and extended challenges in connecting people with OUD to services in the community. Specifically, challenges included transitions to telehealth modalities, required COVID tests for treatment services, and gaps in community resources.

Conclusions:

This study underscores opportunities to improve the delivery of services amid overlapping public health crises for PWUD, including bolstering the use of telemedicine in EDs and across the care continuum.

Implementation of a medical student-run telemedicine program for medications for opioid use disorder during the COVID-19 pandemic

Castillo, M, Conte, B, Hinkes, S, et al
Harm Reduction Journal, 2020, 17, 1, 88

Objectives:

The COVID-19 pandemic led to the closure of the IDEA syringe services program medical student-run free clinic in Miami, Florida. In an effort to continue to serve the community of people who inject drugs and practice compassionate and non-judgmental care, the students transitioned the clinic to a model of TeleMOUD (medications for opioid use disorder). We describe development and implementation of a medical student-run telemedicine clinic through an academic medical center-operated syringe services program.

Methods:

Students advertised TeleMOUD services at the syringe service program on social media and created an online sign-up form. They coordinated appointments and interviewed patients by phone or videoconference where they assessed patients for opioid use disorder. Supervising attending physicians also interviewed patients and prescribed buprenorphine when appropriate. Students assisted patients in obtaining medication from the pharmacy and provided support and guidance during home buprenorphine induction.

Results:

Over the first 9 weeks in operation, 31 appointments were requested, and 22 initial telehealth appointments were completed by a team of students and attending physicians. Fifteen appointments were for MOUD and 7 for other health issues. All patients seeking MOUD were prescribed buprenorphine and 12/15 successfully picked up medications from the pharmacy. The mean time between appointment request and prescription pick-up was 9.5 days.

Conclusions:

TeleMOUD is feasible and successful in providing people who inject drugs with low barrier access to life-saving MOUD during the COVID-19 pandemic. This model also provided medical students with experience treating addiction during a time when they were restricted from most clinical activities.

Evidence-informed policy brief – Substance use and related harms in context of COVID-19: A conceptual model

Enns, A., Pinto, A., Venugopal, J., et al
Health Promotion and Chronic Disease Prevention in Canada: Research, Policy and Practice, 2020, 40, 11-12

As the effects of COVID-19 have been unfolding, growing attention has been paid to the intersection of COVID-19 and substance use and the related harms. However, there are few theories and little empirical evidence to guide investigations in this area. To advance this emerging area of inquiry, we present a conceptual model that synthesizes evidence, information and knowledge on substance use and related harms in the context of the pandemic. The conceptual model offers a visual representation of the connections between the pandemic and substance use and related harms, and can be used to identify areas for future research.

<https://doi.org/10.24095/hpcdp.40.11/12.03>

Cannabis use disorder may increase risk of COVID-19 hospitalization

Hatoum, A S; Morrison, C L; Winiger, E A; et al
medRxiv, 2020, 11.15.20229971

Behavioral and life style factors plausibly play a role in likelihood of being hospitalized for COVID-19. Genetic vulnerability to hospitalization after SARS-CoV2 infection may partially relate to comorbid behavioral risk factors, especially the use of combustible psychoactive substances. Parallelizing the

COVID-19 crisis has been increasingly permissive laws for recreational cannabis use. Cannabis Use Disorder (CUD) is a psychiatric disorder that is heritable and genetically correlated with respiratory disease, independent of tobacco smoking. By leveraging genome-wide association summary statistics of CUD and COVID-19, we find that at least 1/3rd of the genetic vulnerability to COVID-19 overlaps with genomic liability to CUD ($rg=.34$, $p=0.0003$). Genetic causality as a potential mechanism of risk could not be excluded. The association between CUD and COVID-19 remained when accounting for genetics of trying marijuana, tobacco smoking (ever smoking regularly, cigarettes per day, smoking cessation, age of smoking initiation), BMI, fasting glucose, forced expiration volume, education attainment, and Townsend deprivation index. Heavy problematic cannabis use may increase chances of hospitalization due to COVID-19 respiratory complications. Curbing excessive cannabis use may be an essential strategy in COVID-19 mitigation.

How has COVID-19 affected drug use?

COVID-19 has changed our lives: from travel bans, social and physical isolation and empty cities to workers laid off and governments scrambling to muster effective responses. The impact that coronavirus has had on people varies widely and differently between countries. Relationships may be placed under new stresses and for those educating children at home, long division will never have seemed so hard | Drug Science, UK

<https://drugscience.org.uk/covid-19s-impact-on-drug-use/>

COVID 19's impact on drug use - In my professional opinion

<https://youtu.be/ROK4bxdtQNs>

Can we reduce drug overdose deaths in the middle of a COVID pandemic?

There are some innovative programs by government, community organizers and police. But as one advocate laments, "people are dying in greater numbers than ever." | Vancouver Sun, Canada

<https://vancouversun.com/health/can-we-reduce-drug-overdose-deaths-in-the-middle-of-a-covid-pandemic>

Opioid deaths in Canada were falling, then came coronavirus

<https://www.wsj.com/articles/opioid-deaths-in-canada-were-falling-then-came-coronavirus-11605368112>

Drug overdose deaths continue as B.C.'s COVID-19 case count rises

<https://bc.ctvnews.ca/drug-overdose-deaths-continue-as-b-c-s-covid-19-case-count-rises-1.5190163>

Welsh peer-led COVID19 impact report reveals 25% suffered relapse in spring lockdown

As spring's national lockdown was announced, professionals troubled over how such unparalleled change might affect people in recovery. The lack of connection, loss of routine and pause on vital coping mechanisms would surely shake the resolve of even the most resilient service users | Volteface, UK

<https://volteface.me/welsh-peer-led-covid19-impact-report-reveals-25-suffered-relapse-spring-lockdown/>

A review – how has our community been impacted by COVID19?

The COVID19 pandemic affected drug and alcohol providers across Wales, forcing them to completely re-design service provision in a relatively short timescale. The implications of this were vast | Kaleidoscope Project, UK

<https://www.kaleidoscopoproject.org.uk/news/covid19-impact-survey/>

Covid: Lockdown 'causing drugs gangs to recruit locally'

"County lines" gangs could be using children in care across north Wales to distribute drugs to get around lockdown restrictions, it is claimed | BBC, UK

<https://www.bbc.co.uk/news/uk-wales-54962907>

Study links COVID-19-specific mental health factors to initiating drug use during the pandemic

<https://www.psypost.org/2020/11/study-links-covid-19-specific-mental-health-factors-to-initiating-drug-use-during-the-pandemic-58579>