



Central East (HHS Region 3)

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Alcohol, Amphetamine and Cocaine Use Disorders: Update in African Americans During COVID-19

Michael Ingram, MD

February 11, 2021

THE DANYA INSTITUTE

SAMHSA
Substance Abuse and Mental Health
Services Administration

ATTCs

Funded by SAMHSA

- **Accelerate** the adoption and implementation of evidence-based and promising addiction treatment and recovery-oriented practices and services;
- **Heighten** the awareness, knowledge, and skills of the workforce that addresses the needs of people and substance use and/or other behavioral health disorders; and
- **Foster regional** and national alliances among culturally diverse practitioners, researchers, policy makers, funders, and the recovery community.



ATTC Purpose

The ATTC Network vision is to unify science, education and service to transform lives through evidence-based and promising treatment and recovery practices in a recovery-oriented system of care.

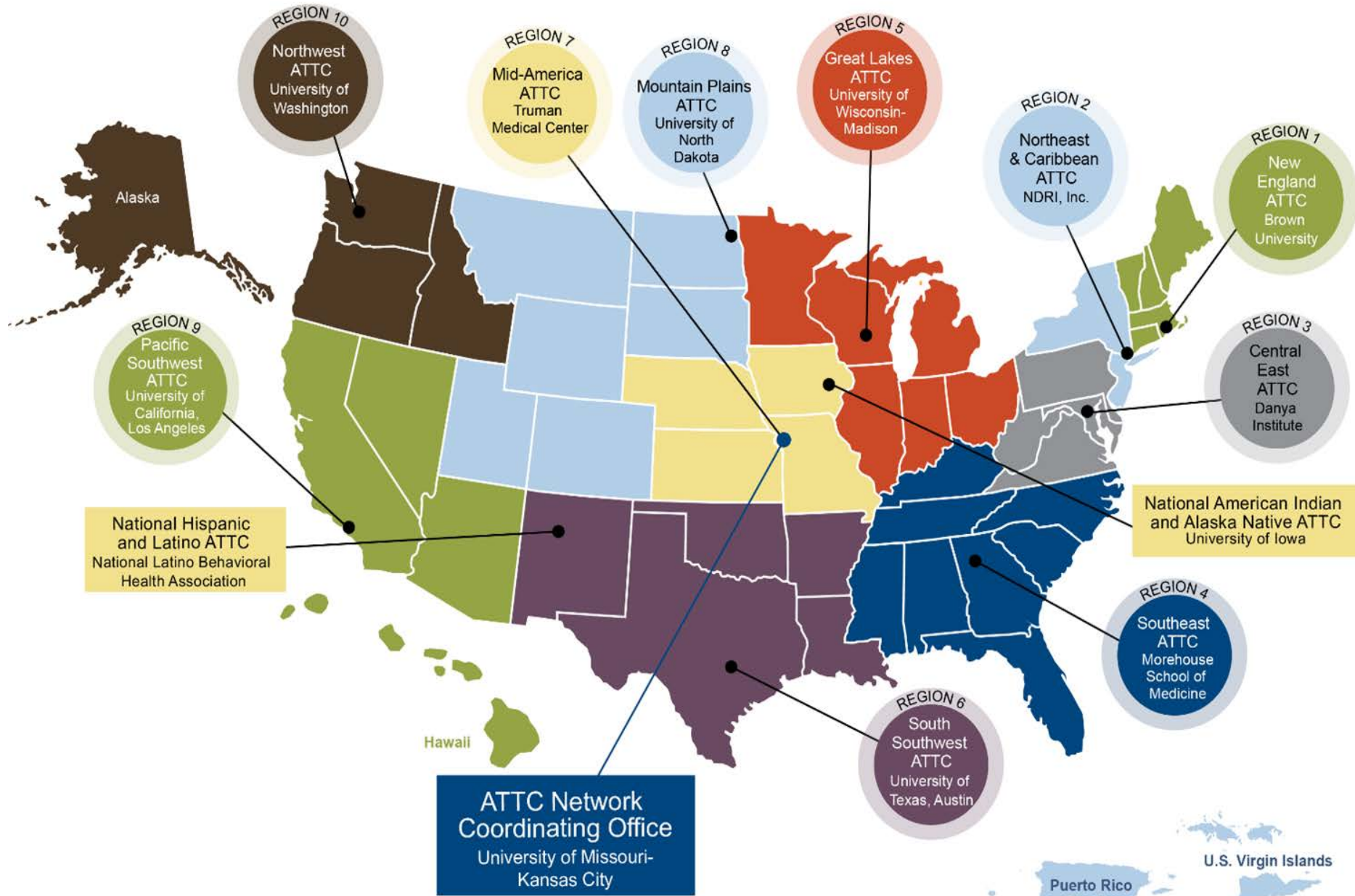




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U.S.-based ATTC Network

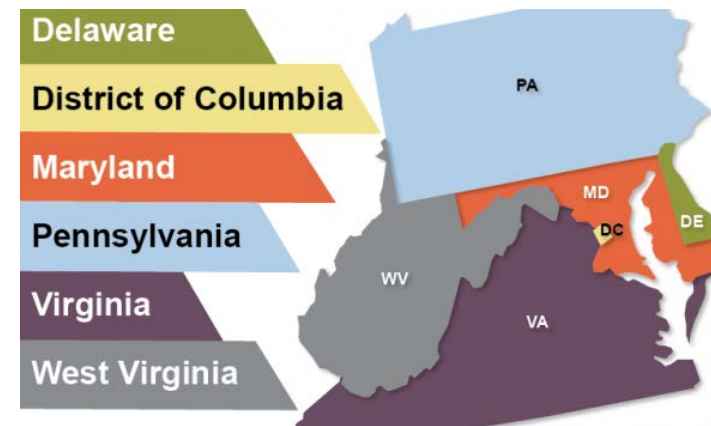


Central East Focus Areas

- Health Equity and Inclusion
- Evidence-based Practices (EBPs)
 - Motivational Interviewing
 - SBIRT
 - Clinical Supervision
- Medication Assisted Treatment (MAT)
- Opioid Crisis
- Peer Workforce
- Tobacco Cessation



HHS REGION 3



Other Resources in Region 3



Central East (HHS Region 3)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration



Central East (HHS Region 3)

PTTC

Prevention Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration



Central East (HHS Region 3)

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Addiction Technology Transfer Center Network
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Central East ATTC Goals

- Collaborate and communicate with key regional stakeholders and develop T/TA responses for the behavioral health and public health workforce
- Increase ongoing implementation of evidence-based SUD interventions, treatment and recovery practices in specialized SUD, HIV, and primary care programs and practices



Alcohol, Amphetamine and Cocaine Use Disorders: Update in African Americans During COVID-19

***Michael Ingram, MD
Past President, Black Psychiatrists of America***

Health Equity Webinar Series

February 11, 2021

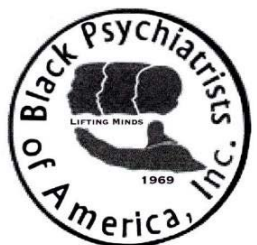
Moderator:

**Annelle B. Primm, MD, MPH
Black Psychiatrists of America, Council of Elders**



COVID-19: Unprecedented Disaster

- Catastrophic impact on Black and other marginalized communities with disparate levels of illness, death, and economic fallout superimposed on layers of pre-existing inequities
- Distancing from loved ones including those who are sick and dying
- Rise in anxiety, depression, and substance use



Today's Program

- Special thanks to the Danya Institute for its support of this second of several webinars in the Black Psychiatrists of America Health Equity SME Series
- Today's program features Michael Ingram, MD, Past President of the Black Psychiatrists of America



Alcohol Amphetamine and Cocaine Use Disorders:

Update In African
Americans During
COVID 19

**Michael Ingram M.D.
F.A.P.A.**

**Director of Behavioral
Health**

Great Lakes Bay Healthcare

Outline

- Overview
- Substance abuse in General
- Effects of Alcohol
- Effects of Stimulants
- Effects of Cocaine
- African American impact:
- Treatment
- Conclusion



Overview

- SUD constituted 10.3% of the total study population, they represented 15.6% of the COVID-19 cases.
- Strongest for opioid use disorder, followed by tobacco use disorder.
- Lungs and cardiovascular system are often compromised in people with SUD, which may partially explain their heightened susceptibility to COVID-19,” said Dr. Volkow. “Another contributing factor is the marginalization of people with addiction, which makes it harder for them to access health care services.

Overview

- Hospitalizations and death rates of COVID-19 patients were all elevated in people with recorded SUDs compared to those without (41.0% versus 30.1% and 9.6% versus 6.6%, respectively).
- Additionally, African Americans with a recent opioid use disorder diagnosis were over four times more likely to develop COVID-19, compared to whites. Results showed that hypertension, diabetes, cardiovascular diseases, and renal diseases, which are risk factors for COVID-19, were more prevalent among African Americans than whites with opioid use disorder.

Alcohol

- Nielsen reported a 54% increase in national sales of alcohol for the week ending March 21, 2020, compared with 1 year before; online sales increased 262% from 2019.
- The World Health Organization warned that alcohol use during the pandemic may potentially exacerbate health concerns and risk-taking behaviors.
- Frequency of alcohol consumption increased overall, 0.74 days (95% CI, 0.33-1.15 days), representing an increase of 14% over the baseline of 5.48 days in 2019
- For women, 0.78 days (95% CI, 0.41-1.15 days), representing an increase of 17% over the 2019 baseline of 4.58 days;

Alcohol

- On average, alcohol was consumed 1 day more per month by 3 of 4 adults. For women, there was also a significant increase of 0.18 days of heavy drinking (95% CI, 0.04-0.32 days), from a 2019 baseline of 0.44 days, which represents an increase of 41% over baseline.
- In addition to a range of negative physical health associations, excessive alcohol use may lead to or worsen existing mental health problems, such as anxiety or depression,⁶ which may themselves be increasing during COVID-19.



Alcohol (International)

- First, lockdown causes different behavioural changes on alcohol intake, with about 20% of individuals increasing or decreasing their normal alcohol consumption.
- Second, we found no distinct protective factors for relapse, suggesting that pre-lockdown abstinence status is not protective against lockdown-related relapse.
- Third, those who relapsed had a clinically significant average level of alcohol consumption of nearly 49 units weekly post-relapse, which is concordant with previous studies of a high risk of harmful drinking after relapse.

Alcohol (International)

- Finally, in a subgroup of patients who had clinical contact during lockdown, contact with an alcohol nurse specialist was a positive predictor for reducing relapse and improving new abstinence.
- Lockdown represents a risk factor for increasing alcohol consumption in people with alcohol use disorders and relapse for those who were previously abstinent.

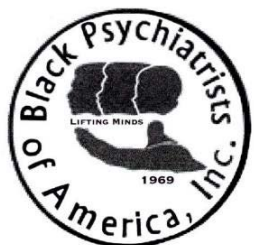
Effects of Alcohol

Excess alcohol consumption can lead to:

Impairment of systemic as well as lung mucosal immune responses potentially leading to severe disease.

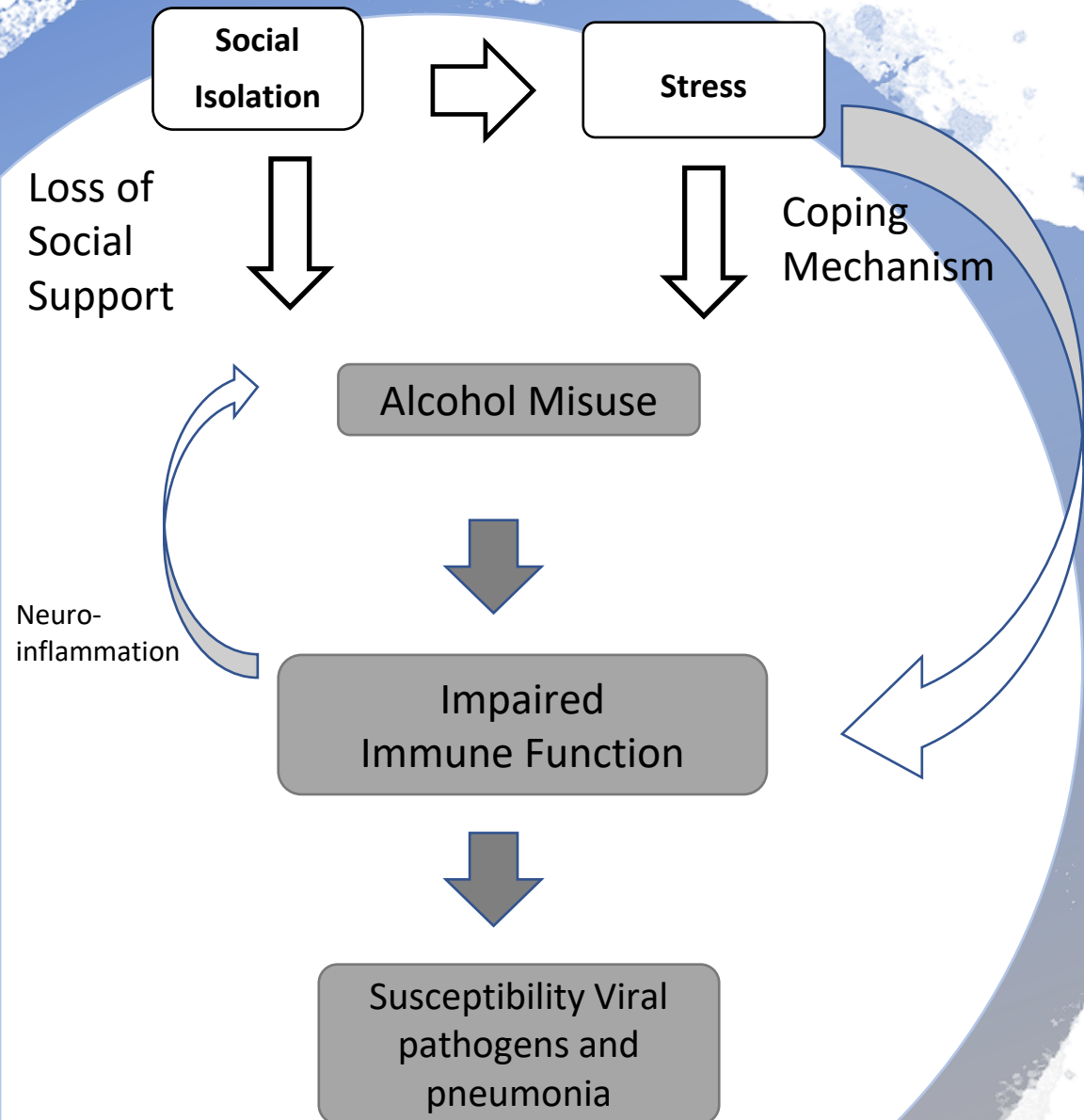
Compounded comorbidities such as diabetes and chronic kidney disease which are often associated with alcohol related liver diseases.


Also, corticosteroids which are often used to treat alcoholic hepatitis may render patients at a higher risk of developing severe COVID-19.



Effects of Alcohol

- Biological effects of alcohol could also exacerbate the pandemic.
- Alcohol compromises immune function, increasing the risk and severity of lung infections.
- Chronic alcohol consumption increases the risk for acute respiratory distress syndrome (ARDS), with increased need for mechanical ventilation, prolonged intensive care unit stay, and higher incidence of mortality.





Alcohol and the Immune System

- Alcohol disrupts immune pathways in complex and seemingly paradoxical ways. These disruptions can impair the body's ability to defend against infection, contribute to organ damage associated with alcohol consumption, and impede recovery from tissue injury.
- Acute respiratory stress syndromes (ARDS) and sepsis.
- Alcoholic liver disease (ALD), and Certain cancers;
- A higher incidence of postoperative complications; and slower and less complete recovery from infection and physical trauma, including poor wound healing.

Alcohol and the Immune System

- One of the most significant immediate effects of alcohol is that it affects the structure and integrity of the GI tract. For example, alcohol alters the numbers and relative abundances of microbes in the gut microbiome
- Alcohol consumption also damages epithelial cells, T cells, and neutrophils in the GI system, disrupting gut barrier function and facilitating leakage of microbes into the circulation



Alcohol (Fact vs Fiction)

- Drinking alcohol does not protect you from COVID-19.
- Drinking alcohol weakens your body's ability to fight infections, increasing the risk of complications and making it harder to get better if you are sick.
- Alcohol use can increase the risk of acute respiratory distress syndrome and pneumonia, which are sometimes associated with COVID-19.



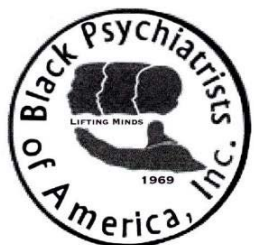
Alcohol (Fact vs Fiction)

- *Myth: Consuming alcohol destroys the virus that causes COVID-19.*
- **Fact: Consuming alcohol will not destroy the virus**, and its consumption is likely to increase the health risks if a person becomes infected with the virus. Alcohol (at a concentration of at least 60% by volume) works as a disinfectant on your skin, but it has no such effect within your system when ingested.
- *Myth: Drinking strong alcohol kills the virus in the inhaled air.*
- **Fact: Consumption of alcohol will not kill the virus in the inhaled air**; it will not disinfect your mouth and throat; and it will not give you any kind of protection against COVID-19.



Alcohol (Fact vs Fiction)

- *Myth: Alcohol (beer, wine, distilled spirits or herbal alcohol) stimulates immunity and resistance to the virus.*
- **Fact: Alcohol has a deleterious effect on your immune system and will not stimulate immunity and virus resistance.**





Impact on African Americans

- As of April 15, 2020, case data from CDC show that in COVID-19 cases where race was specified, Blacks, who comprise 13 percent of the total U.S. population (U.S. Census Bureau, 2018), make up 30 percent of COVID-19 cases



Impact on African Americans

- People of color are:
 - At an increased risk for serious illness if they contract COVID-19 due to higher rates of underlying health conditions, such as diabetes, asthma, hypertension, and obesity compared to Whites;
 - More likely to be uninsured and to lack a usual source of care which is an impediment to accessing COVID-19 testing and treatment services;

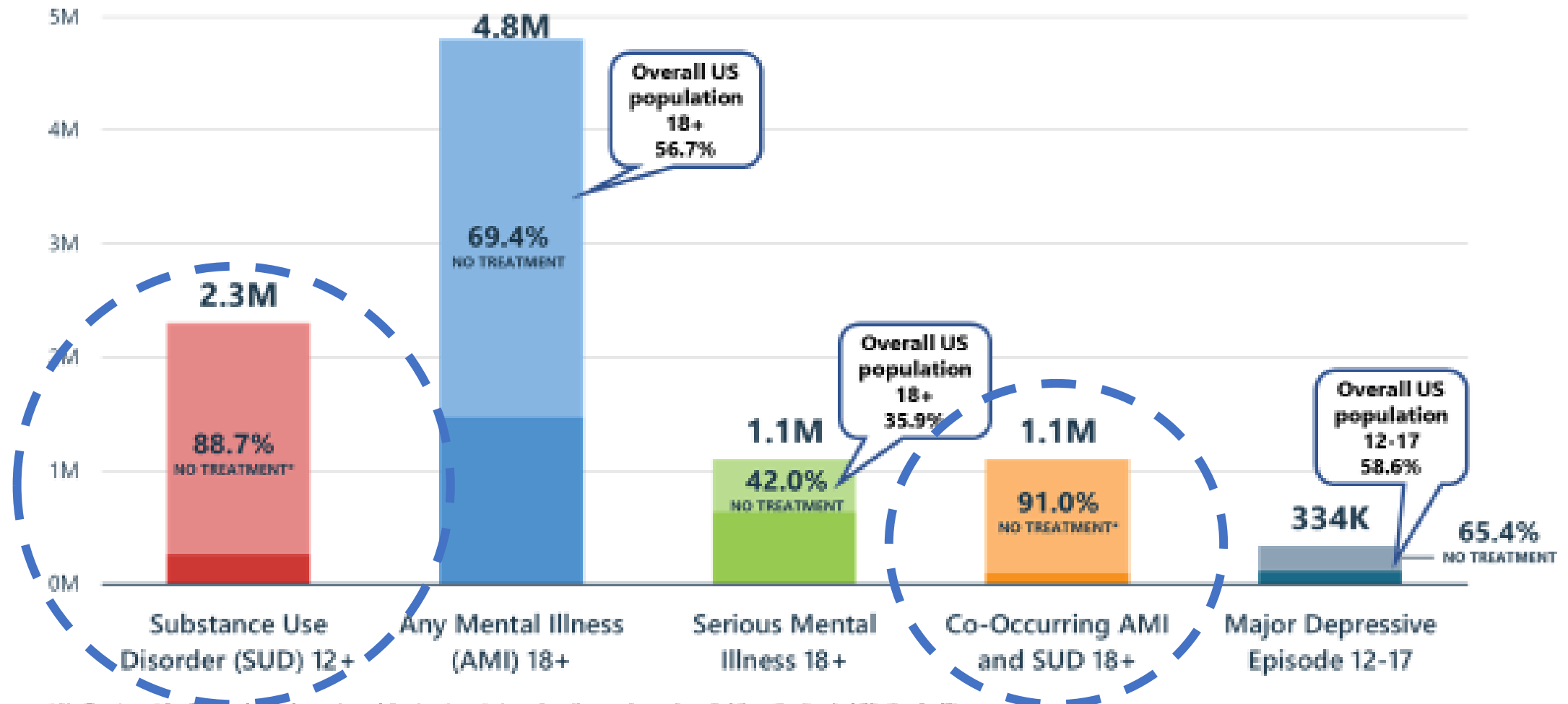
Impact on African Americans

- People of color are:
 - More likely to work in the service industries such as restaurants, retail, and hospitality that are particularly at risk for loss of income during the pandemic;
 - More likely to live in housing situations, such as multigenerational families or low-income and public housing that make it difficult to social distance or self-isolate;
 - Often working in jobs that are not amenable to teleworking and use public transportation that puts them at risk for exposure to COVID-19




Despite Consequences and Disease Burden, Treatment Gaps among African Americans Remain Vast

PAST YEAR, 2018 NSDUH, African American 12+



* No Treatment for SUDs is defined as not receiving treatment at any location, such as a hospital (inpatient), rehabilitation facility (inpatient or outpatient), mental health center, emergency room, private doctor's office, self-help group, or prison/jail.



Stimulants

Cocaine

Amphetamines

- The use of stimulants such as cocaine, amphetamine, and methamphetamine can cause acute health problems:
 - Stroke
 - Heart attacks
 - Abnormal heart rhythm
 - Seizures
 - Chronic conditions:
 - heart or lung damage.

Smoking or Vaping

- The use of drugs by smoking or vaping (e.g., heroin, crack, cocaine and marijuana).
- Can make chronic obstructive pulmonary disease (COPD), asthma, and other lung conditions worse.



Methamphetamine

- Methamphetamine is a highly toxic drug that causes pulmonary damage:
 - pulmonary hypertension
 - cardiomyopathy
- Its use has markedly increased in the United States; clinicians should be alert to the possibility of increased risk for adverse COVID-19 outcomes in methamphetamine users.

Methamphetamine and Cocaine: COVID Health Risk

- Suppress the immune system, making you more vulnerable to infection
- Increase your heart rate and blood pressure, putting added stress on your body
- Negatively impact the lungs and impair breathing
- Skin problems from itching and scratching, making you more vulnerable to infection



Impact of Pandemic

- Persons who are isolated and stressed—as much of the population is during a pandemic—frequently turn to substances to alleviate their negative feelings. Those in recovery will face stresses and heightened urges to use substances and will be at greatly increased risk for relapse. Peers, family members, and addiction treatment providers should be alert to this possibility.

Impact of Pandemic on African Americans

- African Americans, compared with all other racial/ethnic groups, are more likely to contract coronavirus disease 2019 (COVID-19), be hospitalized for it, and die of the disease.
- Psychosocial, sociocultural, and environmental vulnerabilities, compounded by preexisting health conditions (including substance abuse), exacerbate this health disparity.



Implications for Public Health

- Promote local community leadership to proactively inform mitigation strategies.
- Strategically engage public health and community-attuned policy leaders and prioritize community stimulus strategies.
- 4 “Es” hypothesized to narrow disparity gaps and offer opportunities for self-sufficiency and community resiliency.
- Employ trained/certified, compensated community health workers, coaches, and ambassadors who are charged with cultural messaging and education, contact tracing, and surveillance toward increased adherence to policies on physical distancing and sheltering in place.



Implications for Public Health

- Expand SNAP programs with vouchers to include the purchase of household and personal care items rather than encouraging recipients to barter for basic care products.
- Enhance school lunch programs so that all children receive high-quality, balanced meals throughout the year, regardless of the ability to pay.
- Ensure universal broadband internet access to reduce education, health care, and information barriers.

Alcohol Treatment

- **Motivational interviewing**
 - Resolving clients' ambivalent feelings and insecurities and enhancing the internal motivation needed to change their behavior
- **Contingency management**
 - Positively reinforcing desired behaviors
- **Cognitive Behavior and Skills Training Therapies**
 - Emphasis on functional analysis of drug use. Skills training, through which the individual learns to recognize the situations or states in which he or she is most vulnerable to drug use, avoid those high-risk situations whenever possible, and use a range of behavioral and cognitive strategies to cope effectively with those situations if they cannot be avoided.
- **Couples and Family Treatments**
 - Treat drug-using individuals in the context of family and social systems in which substance use may develop or be maintained.



Alcohol Treatment

- **Acamprosate calcium** is indicated for the maintenance of abstinence from alcohol in patients dependent on alcohol who are abstinent at treatment initiation.
- **Disulfiram** is an aid in the management of selected patients who want to remain in a state of enforced sobriety so that supportive and psychotherapeutic treatment may be applied to best advantage.
- **Oral naltrexone** (naltrexone hydrochloride tablet) is indicated for the treatment of alcohol dependence.
- **Extended-release injectable naltrexone** is indicated for the treatment of alcohol dependence in patients who have been able to abstain from alcohol in an outpatient setting.

Cocaine and Stimulants Treatment

- **Motivational interviewing**
 - Resolving clients' ambivalent feelings and insecurities and enhancing the internal motivation needed to change their behavior
- **Contingency management**
 - Positively reinforcing desired behaviors
- **Community reinforcement approach**
 - Identifying behaviors that reinforce stimulant use and making a substance-free lifestyle more rewarding than one that includes substances
- **Cognitive behavioral therapy**
 - Helping clients improve the quality of their lives not by changing their circumstances, but altering their perceptions of those circumstances

Stimulant Use Treatment

No medications are approved by the Food and Drug Administration for the treatment of stimulant dependence.

Abstinence Initiation Medications

Ameliorate withdrawal symptoms, reduce cocaine reinforcement

Modafinil

Acts as a mild stimulant, countering energy depletion during withdrawal; blocks cocaine-induced euphoria/enhances glutamate transmission

Propranolol

Reduces anxiety during withdrawal; may blunt cocaine-induced euphoria and craving/reduces sensitivity to adrenaline

Bupropion

Eases negative mood symptoms of withdrawal/inhibits dopamine reuptake

- No medications are approved by the Food and Drug Administration for the treatment of stimulant dependence.

Relapse Prevention Medications	Reduce cocaine reinforcement or increase unpleasant effects
GABA Enhancers	Inhibit cocaine reinforcement by elevating GABA, a neurotransmitter that opposes the cocaine-induced dopamine surge that underlies reward
GVG	/Inhibits breakdown of GABA by the enzyme GABA transaminase
Tiagabine	/Blocks GABA reuptake via the presynaptic GABA transporter type 1
Topiramate	/Directly facilitates GABA neurotransmission; inhibits glutamate, which opposes GABA's effect on dopamine
Disulfiram	Increases cocaine-induced anxiety/blocks enzymatic degradation of dopamine and cocaine
TA-CD Vaccine	Inhibits all cocaine-induced psychoactive effects/stimulates production of cocaine-specific antibodies that prevent cocaine from crossing the blood-brain barrier

Conclusion



Clean and disinfect



Stay at least
6 ft Apart

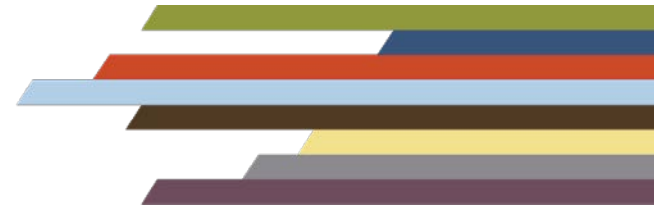


Wash your hands



Wear a Mask

Questions?

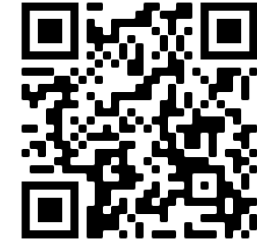


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Your feedback is important!

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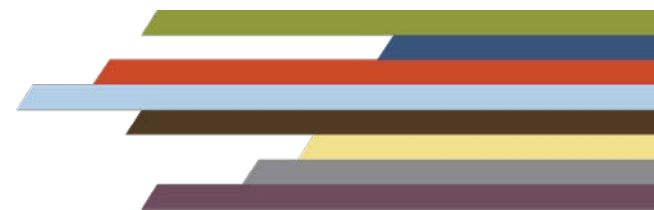
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A recording of today's webinar will be available online in 4-6 weeks.

Thank You



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