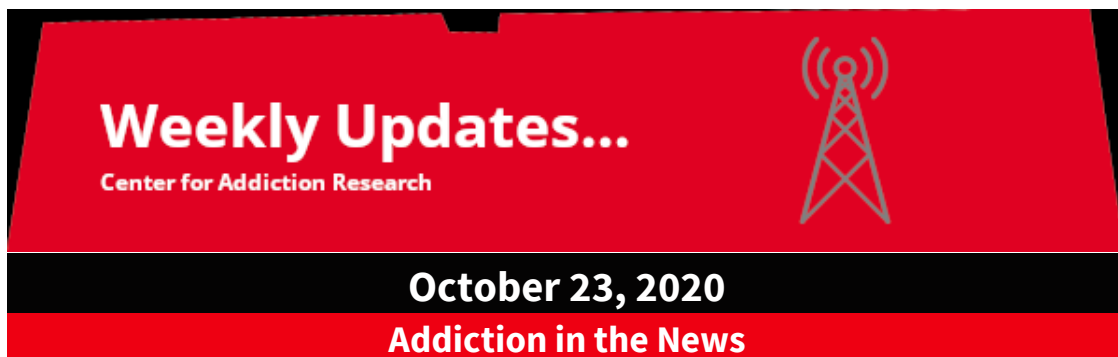


Welcome to the first newsletter from the Center for Addiction Research! Each weekly newsletter will include highlights from Addiction in the News topics as well as active funding opportunities offered by NIDA/NIAAA. Please email Jen Rowe (roweji@ucmail.uc.edu) to change your communication preferences or to request additions to this distribution list.

Thank you for your interest in the Center for Addiction Research - our mission is to accelerate scientific progress in the prevention and treatment of substance use disorders and their consequences by fostering research collaborations across: 1) UC departments, colleges, and centers including Cincinnati Children's Hospital Medical Center; 2) Local, regional, and state community and governmental partners; and 3) Other academic institutions and industry.



Commentary Says Medical Experts Predict Strong Need For Mental Health, Substance Use Treatments Amid Pandemic.

Brett Hart, PhD, chief behavioral health officer for Centene Corp., wrote for [Modern Healthcare](#) (10/17, Subscription Publication, 214K), "As the COVID-19 pandemic persists, **medical experts across the country predict a continuing, significant need for mental health and substance abuse treatments.**" Hart said even "for those who have not historically used behavioral health resources, stressors from the pandemic such as quarantine, isolation, anxiety over financial/job security, and other concerns, are expected to increase demand." He added that **as of July 2020, the CDC "estimates that 41% of people have experienced symptoms of an anxiety or depressive disorder as a result of the pandemic."**

The COVID-19 Pandemic Has Changed Some Physicians' Views Of Telemedicine In Different Ways.

[STAT](#) (10/16, Robbins, 24K) reported on how some early critics of telemedicine have changed their minds and are now embracing the practice amid the COVID-19 pandemic, while others have grown more critical. For example, Dr. Joe Heyman, a retired OB-GYN, was a critic of telemedicine back in the 2000s and still has reservations about the practice, but he now says having the option of seeing patients on Zoom "would have been wonderful." According to STAT, "**Some initially**

skeptical physicians and regulators have warmed to telemedicine with time,” some “say they have not changed their minds at all,” while “others, like Heyman, fall somewhere in between.”

Missouri Opens First Two Medical Marijuana Dispensaries To Long Lines.

The [AP](#) (10/18) reports Missouri’s “first licensed marijuana dispensaries opened this weekend in the St. Louis area with long lines.” The two dispensaries “run by N’Bliss opened Saturday in Ellisville and Manchester.” Another dispensary “is expected to open Monday in the Kansas City area nearly two years after Missouri voters approved a constitutional amendment to allow the sale of medical marijuana.”

Montana’s Top Federal Prosecutor Urges Voters To Carefully Consider Risks Of Legalizing Cannabis.

[Reuters](#) (10/19) reports, “Montana’s top federal prosecutor [Kurt Alme] is urging voters to tread carefully before voting to legalize recreational marijuana, taking the unusual step of jumping into a political debate about a ballot initiative in the weeks before the election.” He said “in an op-ed published in several newspapers in recent days and posted on the Justice Department’s website on Monday” that voters “should ‘review in detail’ a pair of ballot initiatives that would legalize cannabis for adults ages 21 and older, warning that marijuana is addictive, could lead to more traffic accidents and could even ‘increase the risk of severe complications from COVID-19.’”

NIH study tests a comprehensive model intervention to reduce opioid overdose deaths in hard-hit communities

National Institutes of Health and other federal leaders outlined their vision for a groundbreaking study that will aim to address gaps in reaching communities most heavily affected by the opioid epidemic with proven, evidence-based interventions for opioid use disorder (OUD). This approach is detailed in a paper published in a special issue of *Drug and Alcohol Dependence*, and also describes the early impact of COVID-19 on its goals, and the potential for uncovering insights at the intersection of COVID-19 and the opioid epidemic.

An estimated 1.6 million people had OUD in 2019; of these, only 18.1% received medication treatment for opioid misuse. To address this gap, in May 2019, the NIH announced plans to invest more than \$350 million to support the multi-year [HEALing Communities Study](#), a multi-site research study that will test the impact of an integrated set of evidence-based practices on reducing opioid-related overdose

deaths by 40% in three years in communities hard-hit by the opioid crisis. [\[Article Attached.\]](#)

Data Suggest COVID-19 Pandemic Driving US Drug Overdose Deaths To All-Time High This Year.

The [AP](#) (10/20, Stobbe, Sainz) reports, “National data is incomplete, but available information suggests U.S. drug overdose deaths are on track to reach an all-time high.” Substance abuse and “addiction experts blame the pandemic, which has left people stressed and isolated, disrupted treatment and recovery programs, and contributed to an increasingly dangerous illicit drug supply.” One expert comments on the reason for the rise, “The new CDC data confirms our fears that COVID-19 is exacerbating the already devastating overdose crisis.”

ASAM

Increase in Drug Overdose Deaths Involving Cocaine: United States, 2009–2018

Deaths from drug overdose continue to contribute to mortality in the United States. The rate of drug overdose deaths involving cocaine has nearly tripled in recent years. This Data Brief provides additional information on drug overdose deaths involving cocaine by examining trends in rates by sex, age group, race and Hispanic origin, and by concurrent involvement of opioids from 2009 through 2018. [Center for Disease Control and Prevention >>>](#)

Funding Opportunities



GRANTS & FUNDING

NIH Central Resource for Grants and Funding Information

[Health Services Research on Minority Health and Health Disparities \(R01- Clinical Trial Optional\)](#)

[Population Assessment of Tobacco and Health \(PATH\) Study Biospecimen Access \(X01\)](#)

[HEAL Initiative: Non-addictive Analgesic Therapeutics Development \[Small Molecules and Biologics\] to Treat Pain \(UG3/UH3 Clinical Trial Optional\)](#)

[New Models of Integrated HIV/AIDS, Addiction, and Primary Care Services \(R01 Clinical Trial Required\)](#)

[New Models of Integrated HIV/AIDS, Addiction, and Primary Care Services \(R34 - Clinical Trial Optional\)](#)

[Intervention Research to Improve Native American Health \(R01 Clinical Trial Optional\)](#)

[Research to Improve Native American Health \(R21 Clinical Trials Optional\)](#)

[Device-Based Treatments for Substance Use Disorders \(UG3/UH3, Clinical Trial Optional\)](#)

[NIDA Core "Center of Excellence" Grant Program \(P30 Clinical Trial Optional\)](#)

[Countermeasures Against Chemical Threats \(CounterACT\)
Exploratory/Developmental Projects \(R21 Clinical Trial Not Allowed\)](#)

[NIDA Mentored Clinical Scientist Development Program Award in Substance Use and Substance Use Disorder Research \(K12 Clinical Trial Optional\)](#)

[Digital Healthcare Interventions to Address the Secondary Health Effects Related to Social, Behavioral, and Economic Impact of COVID-19 \(R01 - Clinical Trial Optional\)](#)

[Avenir Award Program for Genetics or Epigenetics of Substance Use Disorders \(DP1 Clinical Trial Optional\)](#)

[Avenir Award Program for Research on Substance Use Disorders and HIV/AIDS \(DP2 Clinical Trial Optional\)](#)

[NIDA Avant-Garde Award Program for HIV/AIDS and Substance Use Disorder Research \(DP1, Clinical Trial Optional\)](#)

[Single Cell Opioid Responses in the Context of HIV \(SCORCH\) Program
Expansion: CNS Data Generation for Chronic Opioid, Methamphetamine, and/or Cocaine Exposures \(U01 Clinical Trial Not Allowed\)](#)

[Identifying Innovative Mechanisms or Interventions that Target Multimorbidity and Its Consequences \(R01 Clinical Trial Optional\)](#)

[Extracellular RNA carrier subclasses in processes relevant to Substance Use Disorders or HIV infection \(R21- Clinical Trial Not Allowed\)](#)

[Extracellular RNA carrier subclasses in processes relevant to Substance Use Disorders or HIV infection \(R01- Clinical Trial Not Allowed\)](#)

[Exploiting in vivo or in situ imaging approaches to understand HIV-relevant processes in the context of substance use disorders \(R61/R33 Clinical Trials Optional\)](#)

[National Cooperative Drug/Device Discovery/Development Groups \(NCDDG\) for the Treatment of Mental or Substance Use Disorders or Alcohol Disorder \(U19 Clinical Trial Optional\)](#)

[National Cooperative Drug/Device Discovery/Development Groups \(NCDDG\) for the Treatment of Mental or Substance Use Disorders or Alcohol Disorder \(U01 Clinical Trial Optional\)](#)

[Mentored Research Scientist Career Development Award in Tobacco Regulatory Research \(K01 - Independent Clinical Trial Required\)](#)

[Pathway to Independence Award in Tobacco Regulatory Research \(K99/R00 - Independent Clinical Trial Required\)](#)

[Pathway to Independence Award in Tobacco Regulatory Research \(K99/R00 - Independent Clinical Trial Not Allowed\)](#)

[Mentored Research Scientist Career Development Award in Tobacco Regulatory Research \(K01 - Independent Clinical Trial Not Allowed\)](#)

[Development of Medications to Prevent and Treat Opioid Use Disorders and Overdose \(UG3/UH3\) \(Clinical Trial Optional\)](#)

