

Welcome to the weekly newsletter from the Center for Addiction Research! Each newsletter includes highlights from addiction in the news topics, active funding opportunities offered by NIDA/NIAAA, and information about any new publications from CAR members.

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."



National News

Alcohol-Related Admissions For Critical Diseases Increase Dramatically During Pandemic, Hospitals Report.

The [Los Angeles Times](#) (2/8, Cahan) reports, "As the pandemic sends thousands of recovering alcoholics into relapse, hospitals across the country have reported dramatic increases in alcohol-related admissions for critical diseases such as alcoholic hepatitis and liver failure." For instance, "specialists at hospitals affiliated with the University of Michigan, Northwestern University, Harvard University and Mount Sinai Health System in New York City said rates of admissions for alcoholic liver disease have leapt by up to 50% since March." The CDC "recommends that women have one drink or fewer per day, compared with two or fewer for men."

Alcohol As A Coping Response: Hyperkatifeia & How It Influences Our Drinking.

In a piece for [Forbes](#) (2/7, Fisher, 10.33M), contributor Dr. Nicole (Fisher) Roberts, founder of Health & Human Rights Strategies, writes, "Since the start of the Covid-19 pandemic, there has been an increase in alcohol consumption." According to Dr. Roberts, "that has caused great concern for the National Institute on Alcohol Abuse and Alcoholism (NIAAA), the agency tasked with understanding the causes and consequences of alcohol use." Dr. Roberts said that NIAAA director Dr. George Koob used his opening remarks at the NIAAA's 50th Anniversary symposium "to talk about hyperkatifeia, what he calls 'deaths of despair,' and Covid-19." Dr. Koob explained

that hyperkatifeia is a “high intensity and sensitivity to negative emotional states associated with withdrawal from alcohol (or for that matter, any drug of abuse).”

Former HHS Secretary Joins Marijuana Industry Group.

[The Hill](#) (2/9, Axelrod, 5.69M) reports former Obama-era Health and Human Services Secretary Kathleen Sebelius “is joining the National Cannabis Roundtable as a co-chair.” In a press release announcing her appointment, Sebelius said the “path forward for cannabis reform in Washington will require a holistic approach” that focuses on both the “economic side” and the “human side” of marijuana. Despite a “press for full legalization of marijuana at the federal level,” [The Hill](#) says “the lifting of all federal prohibitions is unlikely given Democrats’ narrow control of both chambers of Congress and broad GOP opposition to full legalization, making gradual reforms more likely to move forward in Washington.”

Study Finds ED Visit Rates For Opioid Overdoses Increased.

[ABC News](#) (2/10, Nissen, 2.44M) reports a study “that analyzed nearly 190 million emergency department (ED) visits...found significantly higher rates of visits to EDs for opioid overdoses during the months of March to October 2020 when compared against the same dates in 2019.”

[The Hill](#) (2/10, Weixel, 5.69M) reports the findings were published in the journal *JAMA Psychiatry* on February 3. The study underscores “the impact the coronavirus pandemic has had on the U.S. population, and the fact that the opioid epidemic never went away, but was merely overshadowed by COVID-19.” The study “analyzed nearly 190 million emergency department visits.” [\[Article attached.\]](#)

Bipartisan Group Of Lawmakers Calls On President Biden To Back Opioid-Treatment Legislation.

The [Washington Post](#) (2/9, Diamond, 10.52M) reports that “a bipartisan group of lawmakers is calling on President Biden to let more physicians prescribe an opioid-treatment drug.” The effort focuses “on the ‘X-waiver,’ a two-decade-old requirement, first mandated by Congress, that physicians undergo a day’s training before being allowed to prescribe buprenorphine for opioid-use disorder.” Biden “criticized the prescribing rules as unnecessary last year and vowed to lift them if elected. But his administration instead preserved the rules last month by halting a last-minute Trump administration plan intended as a workaround.” The lawmakers “are reintroducing legislation that would eliminate the rules and urging the president to support the bill.”

Houston Physicians, Patients Finding Alternatives To Opioids Post-Surgery.

The [Houston Chronicle](#) (2/9, Peyton, 982K) profiles patients in Houston who found physicians who recommend the use of “extra strength doses of aspirin, Tylenol [acetaminophen] or ibuprofen,” among other alternatives, instead of prescribing

opioids post-surgery. The article adds, “According to the U.S. Department of Health and Human Services, 10.3 million people misused prescription opioids in 2018. Now, as more light is shed on the crisis caused by their use, more patients are asking for alternatives to opioids these days.”

Commentary: Biden Administration Has Faltered Early In Fight Against Opioid Abuse.

In a [Wall Street Journal](#) (2/8, Subscription Publication, 8.41M) commentary, Brian Barnett and Jeremy Weleff write that the Biden Administration has faltered early in the fight against opioid addiction by not abolishing a licensing requirement for physicians prescribing buprenorphine as President Biden previously promised it would.

Opioid Settlement Could Allow McKinsey Hedge Fund Affiliate To Generate Investment Gains, Investigation Finds.

[NBC News](#) (2/8, Morgenson, 4.91M) reports “McKinsey & Co., the global consulting giant, agreed to pay nearly \$600 million last week to settle allegations by 49 states that its work for large opioid manufacturers helped ‘turbocharge’ sales of the drugs, contributing to an addiction epidemic that rocked the country and has caused more than 400,000 deaths.” However, “because most of the money to be paid by McKinsey will go to state programs funding addiction treatment centers and recovery services, the deal may allow a McKinsey hedge fund affiliate to generate investment gains, an NBC News investigation has found.” That is “because the firm’s wholly owned hedge fund affiliate, called MIO Partners, holds indirect stakes in addiction treatment centers and a maker of overdose treatment products.”

As Demand For Mental Healthcare Spikes In Montana, Health Officials Fear More Budget Cuts.

[Kaiser Health News](#) (2/5, Volz) reported, “When the pandemic hit, health officials in Montana’s Beaverhead County had barely begun to fill a hole left by the 2017 closure of the local public assistance office, mental health clinic, chemical dependency center and job placement office after the state’s last budget shortfall.” Now, those health officials “worry more cuts are coming, even as they brace for a spike in demand for substance abuse and mental health services.” That “would be no small challenge in a poor farming and ranching region where stigma often prevents people from admitting they need help,” said Katherine Buckley-Patton, who chairs the county’s Mental Health Local Advisory Council.”

New California Law Updates, Replaces Prior Mental Health Parity Statute.

The [San Diego Union-Tribune](#) (2/10, 587K) reports, “A California law that took effect Jan. 1, Senate Bill 855” requires state-regulated commercial health plans “to use nationally recognized clinical standards established by nonprofit associations of

clinical specialists to determine which mental health and addiction treatments they'll cover – and for how long.” This “new law, which updates and replaces California’s previous mental health parity statute, dramatically expands the number of conditions insurers must cover.”

Funding Opportunities



GRANTS & FUNDING

NIH Central Resource for Grants and Funding Information

[NOT-AA-21-004](#)

[Notice of Intent to Publish a Funding Opportunity Announcement for Specialized Alcohol Research Centers \(P50 Clinical Trial Optional\)](#)

[NOT-AA-21-005](#)

[Notice of Intent to Publish a Funding Opportunity Announcement for Comprehensive Alcohol Research Centers \(P60 Clinical Trial Optional\)](#)

[NOT-AG-21-017](#)

[Notice of Change to Eligibility of Foreign Components and Requirement for Letter of Support for PAR-21-109, "Early Stage Investigator Research Using Nonhuman Primate \(NHP\) Models \(R21 Clinical Trial Not Allowed\)](#)

[RFA-AA-21-003](#)

[SARS-CoV-2, COVID-19 and Consequences of Alcohol Use \(R03 Clinical Trial Not Allowed\)](#)

[RFA-AA-21-002](#)

[SARS-CoV-2, COVID-19 and Consequences of Alcohol Use \(R01 Clinical Trial Not Allowed\)](#)

[RFA-AA-21-004](#)

[SARS-CoV-2, COVID-19 and Consequences of Alcohol Use \(R21 Clinical Trial Not Allowed\)](#)

[RFA-DA-22-006](#)

[High-throughput Discovery and Validation of Novel Signal Transducers or Small Molecules that Modulate Opioid or other Substance Use Disorder Relevant Pathways \(R01 - Clinical Trials Not Allowed\)](#)

[NOT-DA-21-017](#)

[Notice of Special Interest \(NOSI\): Medical Consequences of Smoking and Vaping
Drugs of Abuse in Individuals with HIV and COVID-19](#)

[NOT-DA-21-018](#)

[Notice of Special Interest \(NOSI\): Long-Term Neurocognitive Consequences of
COVID-19 in Individuals Living with HIV and Substance Use Disorders](#)

[PA-21-151](#)

[NIH Support for Conferences and Scientific Meetings \(Parent R13 Clinical Trial Not
Allowed\)](#)

[NOT-DA-21-019](#)

[Notice of Special Interest \(NOSI\): Telehealth Strategies for Individuals with HIV
and Substance Use Disorders](#)

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