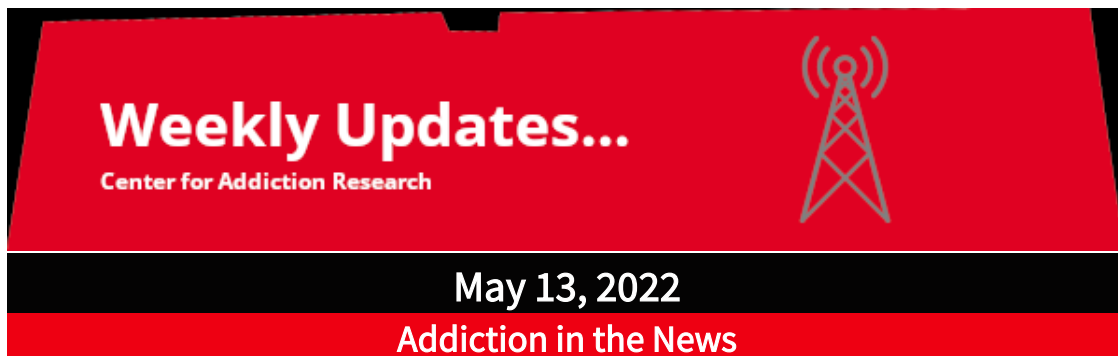


UC CAR Weekly Newsletter 5.13.2022

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. Please email Jen Rowe ([roweji@ucmail.uc.edu](mailto:roweji@ucmail.uc.edu)) to change your communication preferences. Thank you.

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."



### UC/ Regional News

#### [Cannabis Man podcast highlights UC researcher](#)

As more states legalize recreational and medical cannabis use, more research is needed into the effect of cannabis on its users. LaTrice Montgomery, PhD, research associate professor in the Addiction Sciences Division of the Department of Psychiatry and Behavioral Neuroscience in the UC College of Medicine, is one of the nation's leading cannabis researchers and was recently featured on the Cannabis Man podcast. In the podcast interview, Montgomery discussed a variety of topics, including the recent industry guideline that researchers should use 5 milligrams of THC... [\(Featuring CAR member, Dr. LaTrice Montgomery\)](#)

#### **Ohio AG Issues Warning About.**

[Fox News](#) (5/9, Goin, 23.99M) reports that Ohio's "Attorney General Dave Yost issued a warning about the prevalence of nitazenes as the Buckeye state saw an increase in the illicit drug." According to Fox News, "The drug, nicknamed 'Frankenstein opioids,' can be 1.5 to 40 times more potent than fentanyl." Ohio banned nitazenes in April "and in December the DEA issued a notice of intent to classify nitazenes as Schedule I drugs," but "experts warn those efforts may not be enough to keep nitazenes off the street." National Institute on Drug Abuse Director Dr. Nora Volkow said, "Because that's what dealers are looking for, drugs that are very potent but at the same time harder to identify."

## **New, emerging synthetic opioids making presence in Cuyahoga County, Northeast Ohio, experts say**

CLEVELAND, Ohio – Drug experts and law enforcement agencies across the state are carefully monitoring the emergence of new, dangerous synthetic opioids that have made their presence in Ohio, including Cuyahoga County. The benzimidazole compounds, commonly called nitazenes, surfaced in the county in December 2020, “when we first detected fatalities through toxicology,” Cuyahoga County...

## **This College Issued A Warning About Fake Adderall Pills Possibly Containing Fentanyl After Two Deaths.**

[SELF Magazine](#) (5/10, Coady, 3.68M) reports, “Two Ohio State University (OSU) students passed away on Thursday and Friday, and the school issued an urgent safety message to the community warning about fake Adderall

[amphetamine/dextroamphetamine] pills.” OSU’s “statement announcing the first fatality urged students to ‘be aware of the possibility of contaminated drugs in our community.’” OSU “also said a third student had been hospitalized and then released.” The National Institute on Drug Abuse and National Library of Medicine are mentioned.

## **Ohio University study suggests Hocking County unique in ‘overdose death epidemic’**

LOGAN — A new report by an Ohio University-affiliated organization refers to Hocking County’s “battle against substance abuse disorder” as a “bright spot” among other Ohio counties. According to “Overdose Deaths in Hocking County,” a report from the Ohio Alliance for Population Health, which is a statewide collaborative “focused on improving the health of all Ohioans,” and affiliated with the Ohio University...

## **Next phase of opioid trial may determine how much Walmart, CVS, Walgreens pay to Lake, Trumbull counties**

CLEVELAND, Ohio — A federal judge will begin hearing arguments Tuesday to determine how much money it will take to reverse the effects of the opioid crisis that devastated Lake and Trumbull counties. A jury found in November that CVS, Walgreens and Walmart contributed to the opioid epidemic. The decision requires attorneys to return to U.S. District Judge Dan Polster’s courtroom to begin the process of deciding...

## **We resuscitate someone 'literally dying from a drug overdose' in lobby monthly| Opinion**

Every month, we resuscitate someone in our lobby who is literally dying from a drug overdose. Without interruption, this process can lead to death. Our team, like many first responders, has access to a drug called naloxone, which blocks the opiate’s effect on the brain and ultimately reverses the overdose. Every overdose averted

using naloxone, also known as Narcan, is a life saved and a chance at recovery. That's...

### **More doctors charged with illegally prescribing pain pills in multistate effort by feds**

Federal authorities have now charged more than 100 doctors, pharmacists and other medical professionals in multiple states, including Ohio and Kentucky, with peddling pain pills to make money. "Doctors cannot be part of the problem," U.S. Attorney Kenneth Parker, of the Southern District of Ohio, told The Enquirer in an interview. "Someone should not come in seeking treatment for an illness and be turned..."

### **Law Enforcement, Recovery-Professional Team for "Outreach Saturation"**

COLUMBUS — More than 13 Tri-State Area law enforcement and treatment agencies joined the Ohio Narcotics Intelligence Center and RecoveryOhio in Lawrence County last week to conduct a coordinated drug/outreach saturation event. As a result of the sweep, 30 individuals were connected to substance use disorder treatment, 115 doses of Narcan were distributed and 421 grams of fentanyl were taken off...

## **National News**

### **Feds Funding Research On Role Of Cannabis In Treating Cancer.**

[Marijuana Moment](#) (5/9, Jaeger) reports that the National Cancer Institute (NCI) "is promoting funding opportunities for researchers to study the benefits and risks of marijuana for cancer patients." NCI on Thursday "said that about one in four cancer patients have reported using cannabis products to manage their symptoms – including anorexia, nausea and pain – but 'research about their health effects, including potential harms and benefits, remain limited.'" The agency "said that the purpose of the solicitation is to 'promote research in understanding the mechanisms by which cannabis and cannabinoids affect cancer biology, cancer interception, cancer treatment and resistance, and management of cancer symptoms.'" Meanwhile, the National Institute on Drug Abuse "recently renewed its push to promote federally funded research into marijuana as more states enact reform – specifically expressing interest in studies on differing cannabis regulatory models that are in place across the country."

### **Marijuana Use Among College Students Hits A Record High, Here's Why.**

The [Staten Island \(NY\) Advance](#) (5/7, Porpora, 234K) reported that 2020 is "the year cannabis use among college students reached its highest level during the 21st Century, according to data journalism website Stacker." According to the article "The National Institute on Drug Abuse's 2020 Monitoring the Future study – a report that tracks substance use in adults between the ages of 19 and 22 each year – revealed cannabis use that year was at the highest since the late 1980s." According to that study, in 2020 "44% of college students reported using marijuana in the last year, compared with 38% in 2015."

## What Are The Effects Of Cannabis Use In Cognitive Function?

[Cannadible](#) (5/8, Subscription Publication) reports that with the legalization of cannabis “increasing in more and more countries, studies are coming to light to raise awareness about the true effects of ingesting this substance,” including its effects on cognitive function. According to Cannadible, “Michele Ross, with a PhD in neuroscience and studies for the National Institute on Drug Abuse, says that cannabis edibles and tinctures don’t have the same effect as smoking, and that only THC or only CBD is different than THC and CBD. And it’s true, even if you take medical marijuana or use it for pleasure, the effects on cognitive function vary widely depending on the situation.”

## US Overdose Deaths Hit Record 107,000 Last Year, CDC Says.

The [AP](#) (5/11, Stobbe) reports that the CDC announced on Wednesday that “more than 107,000 Americans died of drug overdoses last year, setting another tragic record in the nation’s escalating overdose epidemic.” According to the AP, “The provisional 2021 total translates to roughly one US overdose death every 5 minutes,” and “marked a 15% increase from the previous record, set the year before.” NIDA Director Dr. Nora Volkow “called the latest numbers ‘truly staggering.’”

*Additional Sources.* The [New York Times](#) (5/11, A1, Weiland, Sanger-Katz, 20.6M) reports that “a growing share of deaths came from overdoses involving fentanyl, a class of potent synthetic opioids that are often mixed with other drugs, and methamphetamine, a synthetic stimulant.” According to the Times, “State health officials battling an influx of both drugs said many of the deaths appeared to be the result of combining the two. ... Deaths involving synthetic opioids – largely fentanyl – rose to 71,000 from 58,000, while those associated with stimulants like methamphetamine, which has grown cheaper and more lethal in recent years, increased to 33,000 from 25,000.”

The [Washington Post](#) (5/11, Kornfield, 10.52M) says, “Since the start of the 21st century, an overdose epidemic led by prescription pain pills and followed by waves of heroin, fentanyl and meth has killed more than 1 million people. ... And there is no clear end in sight, according to experts. ‘2022 will probably be as horrible as 2021 was, quite possibly worse,’ said Keith Humphreys, an addiction and drug policy researcher at Stanford University.”

[Politico](#) (5/11, Mahr, 6.73M) says, “The rapid spike in overdose fatalities – deaths are up nearly 50 percent in two years – presents a grave challenge to the Biden Administration,” and some “drug policy experts argue the administration needs to apply the same urgency to stopping opioid deaths that it’s brought to its COVID-19 response. ... ‘It is unacceptable that we are losing a life to overdose every five minutes around the clock,’ said Rahul Gupta, director of National Drug Control Policy, in a statement.”

## **Use Of Buprenorphine Remains Limited Despite Promise As Drug Addiction Treatment.**

[Kaiser Health News](#) (5/6, Gold) reports on buprenorphine, “one of three medications approved in the U.S. to treat opioid use disorder,” which “works by binding to opioid receptors in the brain and reducing cravings and withdrawal symptoms.” The article says, “In California, where overdose deaths have been rising for years, addiction experts say administering a month’s worth of [the] anti-addiction medication holds great potential, particularly for people without housing or who struggle with other forms of instability.” However, “despite its promise, the use of injectable buprenorphine remains fairly limited, especially compared with other forms of addiction medication.” The FDA is mentioned.

## **As Overdoses Soar, More States Decriminalize Fentanyl Testing Strips.**

[Salon](#) (5/11, Miller, 126K) reports a Georgia bill originally intended to regulate raw milk has been revised with language calling “for legalizing the use of strips that test drugs for fentanyl, a potent synthetic opioid fueling a wave of fatal overdoses across Georgia and the US.” The “bill passed overwhelmingly on the last day of the General Assembly session.” This year, Governors in New Mexico and Wisconsin “signed bills allowing test strips in those states, and legislatures in Tennessee and Alabama recently passed similar legislation.” Many experts “promote the rapid testing devices as what’s known as a ‘harm reduction’ tactic to help prevent overdose deaths from illicit drugs that users may not know are laced with fentanyl.” NIDA Director Dr. Nora Volkow said, “We hope all the states would come to realize the dangers of contamination are so high and that fentanyl test strips empower a person taking drugs to know whether they have fentanyl.” Salon adds that the “spread of fentanyl has helped lead to a stunning rise in drug overdose deaths.”

## **DEA Marks May 10 As “National Fentanyl Awareness Day.”**

[Fox News](#) (5/10, Betz, 23.99M) reports, “The Drug Enforcement Administration (DEA) is marking May 10 as ‘National Fentanyl Awareness Day’ to bring more people’s attention to overdose deaths across the US.” DEA Administrator Anne Milgram said, “Fentanyl is the single deadliest drug threat our nation has ever encountered. ... We must take every opportunity to spread the word to prevent the fentanyl-related overdoses claiming scores of American lives every day.”

[CBS News](#) (5/10, 5.39M) reports, “The leading cause of death for Americans between 18 and 45 isn’t COVID-19 or car accidents – it’s fentanyl overdoses.” Since a majority of the chemicals in fentanyl are “produced in China, the Drug Enforcement Administration is now calling on the Chinese government to crack down on the supply chain networks producing the illegal drug.” In an attempt to keep “fentanyl from getting into counterfeit drugs, the DEA is focusing on what’s called precursor chemicals – the ingredients needed to make fentanyl.”

### **Skid Row Is An Overdose ‘Epicenter.’ But Methadone Can Be Miles Away.**

The [Los Angeles Times](#) (5/11, Reyes, 3.37M) reports that medications including “methadone, which dampen cravings and the pangs of withdrawal, have been a crucial way to help people escape opioid addiction, a mission that has only grown more urgent as deaths from drug overdoses have skyrocketed.” But less “than 12% of teens and adults with opioid use disorder said they had received medication to help them stop misusing opioids in the previous year, according to the 2020 National Survey on Drug Use and Health.” Methadone treatment is hard “to access in many parts of the country, and ‘there’s a group of people that just don’t want to go to a methadone clinic. ... How do we address this?’ said Dr. Nora Volkow, director of the National Institute on Drug Abuse at the National Institutes of Health.” One solution “that is being researched is expanding methadone treatment to pharmacies and other physicians’ offices, she said.” Also, NIDA has “awarded a grant to a company that is developing a methadone tablet that releases the medication slowly over a week, so that patients do not have to take it as often, Volkow said.”

### **Skyrocketing Drug Overdoses Among Adolescents ‘Very, Very Concerning’ Warns Health Expert.**

[Fox News](#) (5/11, Koberg, 23.99M) reports that the “rising number of overdose deaths among young Americans is “very, very concerning” said National Institute on Drug Abuse Director Dr. Nora Volkow, who cited fentanyl as a leading cause of the deaths.” Overdose deaths from drugs “among adolescents increased by 94% from 2019 to 2020, and by 20% from 2020 to 2021, according to a study published in the [Journal of American Medical Association](#).” Volkow “noted that this demographic group typically does not take drugs like heroine, which is commonly mixed with fentanyl.” Volkow said, “Clearly, one of the culprits is that fentanyl is being used to contaminate all of the illicit drug market, including illicit prescription drugs that teenagers do take.”

### **Perspective: Nerve Blocks Could Be A Solution To The Opioids Epidemic.**

In a perspective piece for the [Washington Post](#) (5/6, 10.52M), Susan Berger wrote, “As I faced a prophylactic double mastectomy in hopes of averting cancer, I had many questions for my surgeons – one of which was about pain. I was stunned when both my breast surgeon and plastic surgeon said that a nerve block would leave me pain-free for about three days, after which the worst of the pain would be over. Pectoralis nerve (PECS) blocks were developed to provide analgesia or pain relief for chest surgeries, including breast surgery.” Berger wrote, “Just as my surgeons at NorthShore University HealthSystem predicted, I was released from the hospital the same day as my surgery and remarkably pain-free. I took one Tramadol (a step down from stronger medications containing codeine) when I got home – only because it was suggested I take one pill. As I recovered, I only took Advil and Tylenol. The opioid epidemic is a major public health issue in the United States and nerve blocks could be a solution.”

### **Powerful Overdose-Stopping Tool Naloxone Less Effective Since Fentanyl Has Replaced Heroin As Main Opioid Driving Drug Overdose Deaths In San Francisco.**

The [San Francisco Chronicle](#) (5/10, Jung, 2.44M) reports that as the synthetic opioid fentanyl replaced heroin as the main opioid driving drug overdose deaths in San Francisco, the number of lives lost to accidental drug overdoses in the city “skyrocketed by nearly 190%, from 222 in 2017 to 640 in 2021.” The Chronicle adds, “Based on computer modeling using public health data, city and UCSF researchers estimated that robust access to naloxone, commonly known by the commercial name Narcan, could have reduced fentanyl-involved overdose death rates in San Francisco by about 12%.” However, “the same research shows that widely available naloxone is even more effective at reducing heroin-related overdose death rates – by 26% compared with 12%,” suggesting that Narcan “may not be as effective as when heroin was the main driver of overdose deaths in the city.”

### **Fentanyl Overdoses Soar. Does Florida Need Safe Places To Use Drugs?**

[WTSP-TV St. Petersburg, FL](#) (5/9, 246K) reports, “People are overdosing on fentanyl in record numbers,” and the outlet is “taking a deep dive into a strategy” to combat this “that might sound counterproductive to you at first: Giving people safe, supervised places to use drugs.” The article says, “The Department of Health and Human Services’ National Institute on Drug Abuse delivered a Report to Congress on Overdose Prevention Centers and posted that report online on Nov. 9, 2021. That report found, ‘Given the amount and quality of the existing data, it may be prudent to consider the American Medical Association’s recommendation of developing and implementing OPC [overdose prevention center] pilot programs in the United States designed, monitored, and evaluated to generate locality-relevant data to inform policymakers on the feasibility and effectiveness of OPCs in reducing harms and health care costs related to IDU [injection drug use].’”

### **Tennessee Decriminalizes Possession Of Fentanyl Test Strips.**

The [Chattanooga \(TN\) Times Free Press](#) (5/9, Fite, 168K) reports, “A new Tennessee law signed by Gov. Bill Lee during the recent legislative session decriminalized the possession of fentanyl test strips, which can rapidly detect the potent synthetic opioid responsible for a continued surge in drug overdoses across the Chattanooga region.” Tennessee “joins a growing number of states to decriminalize the test strips, which were previously considered illegal drug paraphernalia, in the face of a nationwide surge in drug overdoses fueled by fentanyl.”

### **Editorial: Colorado Lawmakers Face Difficult Decision On Fentanyl Legislation.**

The [Denver Post](#) (5/9, 660K) says in an editorial that a bill under consideration in Colorado “to restore felony penalties for the possession of relatively small quantities...of fentanyl is an incredibly challenging and nuanced piece of public policy.” The editorial explains that if the bill is too harsh, people with severe addiction will be punished, but if the bill is too lenient, “police and prosecutors say

savvy criminals will avoid meaningful repercussions for their dangerous and selfish actions.” The Denver Post editorial board says that it sides with the bill’s sponsors, who “are urging their colleagues to not allow people who didn’t know that fentanyl was in their drugs to be charged with a felony.”

### **Advocates Say Talks With Justice Department On Overdose Prevention Sites Case Have Been ‘Productive,’ As Court Extends Deadline.**

[Marijuana Moment](#) (5/10, Jaeger) reports, “Advocates say that talks with the Justice Department over the establishment of safe drug consumption sites have been ‘productive,’ prompting them to agree on another extension of the deadline for the Biden Administration to make clear its stance in a legal case concerning the harm reduction facilities.” The latest in a long string of delays in this case “is actually seen as a positive for supporters, with” non-profit Safehouse, which recently tried to open an overdose prevention site in Philadelphia, “saying in an update that it ‘agreed to a 45-day extension because our discussions with the DOJ continue to be productive.’” The Biden Administration “has yet to take a specific position on policy proposals to authorize safe consumption facilities,” but the National Institutes of Health “put out a pair of requests for applications...in December for an effort that will provide funding for efforts to investigate how that and other harm reduction policies could help address the drug crisis.” National Institute on Drug Abuse Director Dr. “Nora Volkow has repeatedly expressed concerns about the harms caused by the criminalization of drug possession.”

### **New York Lawmakers Approve Bill To Authorize Safe Drug Consumption Sites In Committee.**

[Marijuana Moment](#) (5/10, Jaeger) reports, “A New York Assembly committee on Tuesday advanced a bill to establish a statewide safe consumption site program, allowing regulators to authorize facilities where people could use currently illicit drugs in a medically supervised environment.” The legislation is intended “to prevent overdose deaths by having medical professionals on site at places where they can use pre-obtained controlled substances without facing the threat of arrest or incarceration.” National Institute on Drug Abuse Director Dr. Nora Volkow is mentioned in the story.

### **Site Launched To Help Americans Find Addiction Treatment Locations Has Outdated Data, Other Critical Flaws.**

[Kaiser Health News](#) (5/9, Pattani) reports that [FindTreatment.gov](#) “was launched by the Substance Abuse and Mental Health Services Administration in 2019 to help hundreds of thousands of Americans affected by addiction” find out where they could get treatment. The website “is a directory of more than 13,000 state-licensed treatment facilities, including information on what types of services are offered, which insurance plans are accepted, and what ages are served.” While “[clinicians], researchers, and patient advocates welcomed the repository as a critical first step to overcoming the fragmented addiction treatment landscape and centralizing

information for patients,” these “same proponents say [FindTreatment.gov](#) and SAMHSA’s other treatment locators have critical flaws – inaccurate and outdated information, a lack of filtering options, and little guidance on how to identify high-quality treatment – that are long overdue for attention.” SAMHSA spokesperson Christopher Garrett said that the agency “endeavors to keep the [tools] current.”

### **End Of COVID-19 Emergency Endangers Substance Use Treatment.**

[Roll Call](#) (5/10, Hellmann, 130K) reports, “Members of vulnerable and hard-to-reach groups could find it more difficult to get treatment for substance use disorders if the end of the [COVID-19] public health emergency also brings the end of policies that allow health care providers to prescribe medications through video or audio calls, experts say.” During the pandemic, “the Drug Enforcement Administration has allowed providers to prescribe the gold-standard addiction treatment to patients with opioid use disorder through telehealth without first doing an in-person evaluation that addiction experts say is a barrier to underserved communities.” Clinicians worry that some groups that benefited from this policy “won’t be able to make in-person visits at the end of the public health emergency unless Congress or the DEA take action.” According to Roll Call, “The public health emergency is currently scheduled to end in July.” The National Institutes of Health is mentioned.

### **New Method Delivers Life-saving Drugs To The Brain – Using Sound Waves.**

[National Geographic](#) (5/5, 30.3M) reports behind a paywall on “a clinical trial testing a new method of delivering drugs directly into the brain, with a technique called focused ultrasound.” The article says, “Many experts believe this therapeutic technology will one day revolutionize brain medicine for a range of impossible or hard-to-cure conditions, from brain cancer to Alzheimer’s, Parkinson’s, and ALS.” [This cutting edge science could have implications for future addiction medicine treatment.]

### **Research Suggests Inflammation May Ward Off Chronic Pain.**

[STAT](#) (5/11, Mast, 262K) reports on a researcher that “investigated the underlying biology of pain” whose findings “repudiated much of what she and other pain researchers believed about how an initial bout of acute pain can develop into a chronic and debilitating condition.” The results of her study “suggest that initial inflammation is necessary for the body to recover. If true, it could mean that decades-old protocols for treating pain with IV steroids in the hospital or aspirin and ibuprofen at home were actually counterproductive, increasing patients’ risk of developing chronic pain.” [This could have widespread implications for future research.]

### **Mom Shares Heartbreaking Warning After Teen Dies Inhaling Deodorant Spray.**

[Newsweek](#) (5/9, Berlin, 2.67M) reports, “An Australian woman found her 16-year-old dead after inhaling spray deodorant and is now warning parents about the signs of inhalant abuse.” Anne “Ryan believes her daughter died of sudden sniffing death

syndrome and suffered a heart attack, The Sydney Morning Herald reported.” According to Newsweek, “The National Institute on Drug Abuse estimates that between 100 and 200 Americans die from inhalant-related fatalities per year.”

### **Mental Telehealth Firms Facing Growing Scrutiny Over Prescribing Practices.**

[Bloomberg](#) (5/5, Melby, Mosendz, Davalos, 3.57M) reports, “The largest online mental health startup has tightened its prescription practices after criticism by medical professionals that its aggressive social-media marketing and workplace culture made some addictive medications too easy to get.” On Wednesday, “Cerebral announced it would stop writing new prescriptions for drugs that treat attention deficit/hyperactivity disorder.” Now, “there are signs that scrutiny of mental telehealth is only intensifying.”

### **Senators Want Psychedelics Research Review From Federal Agencies.**

[Marijuana Moment](#) (5/11, Jaeger) reports that on Wednesday, Sens. Brian Schatz (D-HI) and Cory Booker (D-NJ) sent a letter “to the heads of the National Institutes of Health (NIH) and Food and Drug Administration (FDA)” urging them “to provide an update on research into the therapeutic potential of psychedelics, arguing that ongoing federal prohibition has stymied studies.” They “said that the agencies are ‘critical to ensuring a comprehensive, rigorous, and deliberative science-based approach to the study of psychedelics.’”

### **Connecticut Will Allow Certain Patients To Use Psychedelic Therapy As Mental Health Treatment.**

The [Connecticut Post](#) (5/11, Fenster, 310K) reports, “Psychedelic drugs are illegal, but the Food and Drug Administration allows researchers to study psilocybin and MDMA – the active substances in ‘magic’ mushrooms and ecstasy – for use in clinical settings.” Now, “Connecticut is paving the way for widespread psychedelic-assisted therapy” as the state “will soon allow a select group of patients to use psilocybin or MDMA as part of treatment for depression, anxiety and post-traumatic stress disorder.”

## **Funding Opportunities**



## **GRANTS & FUNDING**

NIH Central Resource for Grants and Funding Information

[PAR-22-143](#)

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

[PAR-22-144](#)

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

[PAR-22-182](#)

[Behavioral and Integrative Treatment Development Program \(R01 Clinical Trial Optional\)](#)

[PAR-22-183](#)

[Behavioral and Integrative Treatment Development Program \(R34 Clinical Trial Optional\)](#)

[PAR-22-105](#)

[Dissemination and Implementation Research in Health \(R01 Clinical Trial Optional\)](#)

[PAR-22-109](#)

[Dissemination and Implementation Research in Health \(R21 Clinical Trial Optional\)](#)

[PAR-22-106](#)

[Dissemination and Implementation Research in Health \(R21 Clinical Trial Optional\)](#)

[NOT-DA-22-068](#)

[Notice of Change to PAR-20-238, "Intervention Research to Improve Native American Health \(R01 Clinical Trial Optional\)"](#)

### **UC Foundation Funding Opportunities**

Please contact Carol Russell at (513) 556-6169 or [\*carol.russell@uc.edu\*](mailto:carol.russell@uc.edu) **at least 5 business days before the deadline**, prior to applying to either of the below opportunities, to ensure coordination and facilitate assistance with approaches.

### **[Funds Support Community Service Projects in Mental Health, Substance Use Disorder](#)**

**Deadline: May 31, 2022**

The [American Psychiatric Association Foundation](#) invites applications for its Helping Hands Grants Program. The program aims to encourage medical students to participate in community service activities, raise awareness of mental illness and the importance of early recognition of illness, and build interest among medical students in the psychiatric field and working in underserved communities. Grants of up to \$5,000 will be awarded to medical schools supporting mental health and SUD projects, particularly in underserved minority communities. Medical students should create and manage projects that may be conducted in partnership with community agencies or conjunction with ongoing medical school outreach activities. Projects must be supervised by at least one psychiatrist.

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