

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) 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

Ohio Overdose Awareness Day brings new website, resources to residents

OHIO — State flags across Ohio, displayed at all state buildings and public institutions, are flying at half staff in honor of Ohio Overdose Awareness Day. Gov. Mike DeWine announced that on Aug. 31, the state will observe its second annual Overdose Awareness Day and begin recognition of September's Recovery Month. The day was established in 2021 by Senate Bill 30, and aims to raise public awareness and to remember the lives lost to the opioid...

Kentucky Observes Overdose Awareness Day.

[WBKO-TV](#) Bowling Green, KY (8/31) reports, "Overdose Awareness Day is a global event held on Aug. 31 each year to raise awareness of drug overdoses, reduce the stigma of drug-related deaths, and acknowledge the grief felt by families and friends as they remember those who have died or have a permanent injury as a result of a drug overdose." Gov. Andy Beshear (D-KY) said, "Today and every day, the commonwealth mourns the Kentuckians whose lives were gone too soon from an overdose. ... To those fighting addiction, please know there is hope and there is help through Kentucky's many treatment facilities and addiction programs." As part of addiction prevention efforts, at the end of 2022, the "HEALing Communities Study," conducted by the National Institutes of Health and the Substance Abuse and Mental Health Services Administration, should be completed" with the hope of identifying "the most effective means of intervention to assist in reducing overdose deaths in the commonwealth and around the nation."

Louisville To Receive Almost \$32M In Opioid Settlement Funds, But City Leaders Have No Clear Plans For Use.

The [Louisville \(KY\) Courier-Journal](#) (9/1, Stultz, 554K) reports, “Nearly \$32 million in opioid settlement funds are coming to Louisville, Mayor Greg Fischer announced Wednesday as city leaders observed International Overdose Awareness Day, in a push to help people suffering with addiction and substance abuse.” However, “with no clear plan for how the money will be used...critics at a separate press conference that afternoon said no amount is enough to save those at risk.” The settlement funds “which will be received over the next 18 years, include two payments totaling about \$3.5 million that will be available by the end of this year.” The Louisville Metro Public Health and Wellness team “will create multiple agencies to seek public input on how the money should be used, according to a release from the mayor’s office,” and the plan “will eventually be presented to Metro Council to potentially be approved after additional input.”

HRSA Awards Kosciusko County \$1M Grant To Help Residents Seeking Opioid Addiction Recovery Treatment.

The [Fort Wayne \(IN\) Journal-Gazette](#) (8/25, 166K) reports, “Bowen Center, in partnership with four other community partners, has been awarded a \$1 million Opioid Response Implementation Grant from the Health Resource & Services Administration through the U.S. Department of Health and Human Services.” The objective of “this grant is to create a unified community response to those seeking addiction recovery treatment and to support several Kosciusko County addiction recovery efforts, according to a news release.”

The time is now to act to head off coming opioid overdose surge: editorial

As cleveland.com’s Gretchen Kuda Croen recently reported, modeling suggests that a tidal wave of drug overdose deaths is coming – to Ohio and the nation. And with Ohio, the seventh most populous state, ranked No. 4 in drug overdose deaths in 2020, there’s little doubt that the state and region will again be in the eye of this tragic storm. Those are horrific facts which looming circumstances may worsen -- and which demand preventive action...

Drug overdose deaths expected to grow nationally

SANDUSKY — A new study predicts national drug overdose deaths from opioids will get even worse, even as new numbers show that Ohio had a record number of drug overdose deaths in 2021. The study published in JAMA Network Open, “Geographic Trends in Opioid Overdoses in the US From 1999 to 2020,” suggests that overdose deaths will continue to grow. “I’m sounding the alarm because, for the first time, there is a convergence and escalation of acceleration rates for every type of rural...

National News

Alcohol Triggers Transcriptomic And Epigenomic Changes In Brain's Emotion Center.

[Genetic Engineering & Biotechnology News](#) (9/13, Sarkar, 189K) reports, “Based on high-throughput sequencing experiments conducted on animal models of alcohol exposure, scientists at the University of Illinois at Chicago...found that even small quantities of alcohol can induce immediate transcriptomic and epigenomic changes in the amygdala that alter accessibility to the genome.” Data indicate “the molecular changes in the amygdala underlie positive behavioral effects of alcohol such as feelings of deep relaxation (anxiolysis) and euphoria but also prime the genome to initiate and maintain alcohol use disorder (AUD).” Funding for the study was provided by the National Institute on Alcohol Abuse and Alcoholism and the Department of Veterans Affairs. – *Link to article* [Unraveling the epigenomic and transcriptomic interplay during alcohol-induced anxiolysis | Molecular Psychiatry \(nature.com\)](#)

As Alcohol-Related Deaths Rise In States Such As Oregon, Policies To Curb Drinking, Including Taxes, Have Been Ignored.

The [New York Times](#) (9/11, Alcorn, 20.6M) reports “few places have seen a greater uptick” in alcohol-related deaths “than Oregon, where the rate of alcohol-induced deaths grew 2.5 times from 1999 to 2020, after adjusting for the state’s changing age distribution.” In 2021, 2,153 Oregon “residents died of causes attributed to alcohol, according to the Oregon Health Authority – more than twice the number of people killed by methamphetamines, heroin and fentanyl combined.” Meanwhile, policies which “experts consider most effective at curbing excessive drinking have been ignored.” For instance, “even as alcohol-related deaths soared to record highs in the last few years, alcohol taxes have fallen to the lowest rates in a generation.”

Mental Disorders Up In Youth With Prenatal Cannabis Exposure.

[Medscape](#) (9/14, Vlessides, Subscription Publication, 219K) reports, “Exposure to cannabis in the womb may leave children at risk for psychiatric disorders and problematic substance abuse, particularly as they enter peak periods of vulnerability in late adolescence,” according to a new study published in *JAMA Pediatrics*. For the study, researchers analyzed “data from the Adolescent Brain Cognitive Development (ABCD) Study, the largest long-term investigation of brain development and health in children and teens in the United States.” NIDA Director Dr. Nora D. Volkow “said the findings are particularly relevant given marijuana’s increasing popularity.” She stated, “We need to understand that as more people are choosing to use marijuana, there may be potential negative effects of that consumption. ... And we have been particularly concerned about the use of marijuana during pregnancy, because already the data show that mothers who use marijuana tend to have smaller children and to deliver newborns prematurely.”

[MedPage Today](#) (9/14, Lopilato, 183K) also covers the story.

Marijuana Use During Pregnancy May Harm Children’s Mental Health.

[NBC News](#) (9/12, Carroll, 4.91M) reports “children whose mothers used cannabis after the fifth or sixth week of pregnancy may be more likely to develop mental health problems in early adolescence,” according to “an analysis of data from more than 10,000 children aged 11 and 12.” The [findings](#) published online in a research letter in JAMA Pediatrics “revealed that exposure to cannabis in utero was associated with a higher risk of developing disorders such as [AD/HD], aggressive behavior, conduct disorder and rule-breaking behavior.” The study’s “results fall in line with earlier research on the same children, who were participants in the ongoing Adolescent Brain Cognitive Development (ABCD) study” supported by NIH. Using “cannabis during pregnancy appears to increase the risk of children having long-term problems with behavior and cognition, said” NIDA Director Nora Volkow. – [Link to article Association of Mental Health Burden With Prenatal Cannabis Exposure From Childhood to Early Adolescence: Longitudinal Findings From the Adolescent Brain Cognitive Development \(ABCD\) Study | Adolescent Medicine | JAMA Pediatrics | JAMA Network](#)

Liberals Push Biden Administration On Marijuana Legalization Ahead Of Midterms.

[The Hill](#) (9/8, Folley, Trudo, 5.69M) reports, “Democrats are beginning to pressure President Biden to take on marijuana reform as Congress struggles to find a path forward on decriminalization and as the party contemplates what’s possible before the midterms.” Democratic senators had “sent a letter to the Biden administration ahead of the August recess pushing the president to start addressing the issue” of legalizing marijuana. The senators “asked officials at the Department of Justice (DOJ) to remove marijuana from the list of federal controlled substances and pardon those convicted of nonviolent cannabis-related offenses.” Legislators “said the request was a follow-up after receiving a ‘disappointing’ response months prior, claiming the DOJ’s sole reason for not acting was a determination by the Department of Health and Human Services that ‘cannabis has not been proven in scientific studies to be a safe and effective treatment for any disease or condition.’”

Pa. Law Protects Workers Who Are Approved For Medical Marijuana – But Once They Use It, It’s A Different Story.

The [Philadelphia Inquirer](#) (9/14, Mahon) reports, “Vague legal safeguards for medical marijuana users in Pennsylvania are forcing patients to choose between their job and a drug they say has changed their life, and leaving skittish employers vulnerable to lawsuits, according to a three-month Spotlight PA investigation.” Although the state’s legislation “protects workers from being fired or denied a job just for having a doctor’s permission to use marijuana, those protections become opaque when people actually take the drug.” Spotlight PA’s “review of more than a dozen state and federal lawsuits...highlights the law’s ambiguity, showing the ramifications faced by legal marijuana users.” The state’s law “doesn’t specifically address the rights of patients to use the drug when they aren’t at work” and

“doesn’t include protections for them if they fail a drug test but are not impaired.” The use of marijuana “can impair a person’s judgment, coordination, and balance, according to a report from the National Institute on Drug Abuse.”

Wichita City Council Votes To Decriminalize Marijuana Possession, Fentanyl Strips.

The [AP](#) (9/13) reports, “The Wichita City Council on Tuesday voted to decriminalize possession of small amounts of marijuana and fentanyl test strips in the state’s largest city.” The move is expected to “eliminate between 750 and 850 prosecutions a year from the municipal courts.” Sedgwick County District Attorney Marc Bennett “did not take a position on the proposal but said his office doesn’t have the resources to prosecute an additional 750 to 850 marijuana possession cases a year.”

North Dakota To Vote On Marijuana Legalization Ballot Initiative In November.

The [AP](#) (9/12, MacPherson) reports the legalization of marijuana in “North Dakota could cut the number of people who are registered to use the drug as medicine by at least 80%, due to access to bigger quantities and more varied products, a health official said Monday.” Supporters of legalization met the signature threshold to put the issue of legalization on the upcoming November ballot. The ballot initiative “would allow people 21 and older to legally use marijuana at home as well as possess and cultivate restricted amounts of cannabis.” Medical Marijuana Division Director Jason Wahl “said thousands of patients holding medical pot cards likely will opt to purchase from recreational sources if the measure is approved.”

Missouri Supreme Court Refuses Challenge To Marijuana Legalization Ballot.

The [AP](#) (9/13) reports the “Missouri Supreme Court on Tuesday refused to take up a lawsuit challenging a ballot proposal to legalize recreational marijuana use in the state.” Its “ruling means the proposed constitutional amendment will be on the Nov. 8 ballot.” If voters pass the ballot, “those age 21 and older could buy and grow marijuana for personal consumption as early as this year” and “require courts to wipe most past marijuana convictions clean.” Sales of marijuana “would be taxed at 6% under the Missouri measure,” which is projected to raised “more than \$46 million during the first full year the amendment is in effect and close to \$70 million the following year.”

Teens Of Different Races, Sexual Orientations Have Different Vaping Habits, Study Finds.

The [Philadelphia Inquirer](#) (9/11, Whelan) reports, “Some teen girls of color who identify as lesbian are more likely than their white or heterosexual peers to use e-cigarettes, researchers...have reported.” The researchers “found that 18.2% of Black girls who identified as lesbian said they were currently using e-cigarettes, as opposed to 7.1% of Black girls identifying as heterosexual.” Additionally, “multiracial girls who identified as lesbian were also six percentage points higher than their heterosexual-identifying counterparts to smoke e-cigarettes.” However,

“white teenage girls who identified as heterosexual were more likely than peers who identified as lesbian to vape.” – *Link to article [Intersectionality of Sexual Orientation With Race and Ethnicity and Associations With E-Cigarette Use Status Among U.S. Youth - ScienceDirect](#)*

CTP Director Discusses Tobacco Approval Process, Youth Smoking During Interview.

The [CW Baltimore \(USA\)](#) (9/11, 713) reports that in an interview on “Straight Talk,” the Food and Drug Administration Center for Tobacco Products Director Dr. Brian King discussed the approval process for tobacco products and the CTP’s role in it. He also addressed the rate of smoking among teenagers and how flavored tobacco products had an effect on it. In addition, he discussed the probability of marijuana being legalized.

Experts Say Juul Settlement Unlikely To Make Meaningful Changes To Juul’s Business Model.

[STAT](#) (9/8, Florko, 262K) reports, “On Tuesday, a group of more than 30 attorneys general announced they had reached a ‘landmark’ \$438.5 million settlement with the e-cigarette maker Juul over its alleged marketing toward children.” But “the settlement doesn’t have nearly the scope or the import of earlier efforts to rein in tobacco companies’ marketing, experts told STAT,” and “it appears to be missing many of the key provisions that they say made the earlier settlement so powerful in the first place.” The “experts aren’t even sure the provisions outlined in press releases about the Juul settlement...will meaningfully change how the company is currently doing business,” as many of the restrictions were something “Juul has already voluntarily agreed to or never used those tactics in the first place.”

Alaska Governor Vetoes Bill Raising Minimum Smoking Age, Taxing E-Cigarettes.

The [Fairbanks \(AK\) News-Miner](#) (9/13, Barnwell, 37K) reports, “A bill that would have raised the minimum smoking age from 19 to 21 and raised taxes on e-cigarette products that contained nicotine was voted down by” Alaska “Gov. Mike Dunleavy on Friday.” The legislation “would institute a 35% wholesale tax on e-cigarette products, such as vaping pens.” Currently, “they are exempt from the state’s tobacco taxes, though various municipalities have their own levied taxes on the product.”

Royal College Of Physicians Calls For Tobacco 21 Policy In Ireland.

[Irish Independent \(IRL\)](#) (9/12, O'Regan, 466K) reports the Royal College of Physicians is calling on Ireland to raise the minimum age of sale of cigarettes from 18 to 21 to mitigate an increase in cigarette use among teenage boys. One member of the health group “said the Tobacco 21 policy which has been implemented [in] parts of the United State is a simple and effective step on the road to tobacco endgame.”

Volkow On How To Prevent Opioid Overdoses.

[Alcoholism & Drug Abuse Weekly](#) (9/12, Knopf, 143K) features an interview with National Institute on Drug Abuse Director Dr. Nora Volkow on the prevention of opioid overdoses. Preventing opioid overdoses “is not much different from preventing [addiction], except for in the growing number of cases of occasional users, according to” Volkow. She said, “Ultimately, all you want to control is the withdrawal, and in order to understand what dose you should give, the patients need to have a reduction in withdrawal and craving.” At the end of the piece, Volkow called for “education of the providers of the public, a need for support to do that...and a need to get rid of the stigma for [addiction] and treatment.”

Fentanyl test strips could help save lives. In many states, they’re still illegal.

[STAT](#) (9/8, Facher, 262K) reports tools like testing strips intended to indicate the presence of fentanyl “are still classified as drug paraphernalia” in over a dozen states despite the prevalence of deaths linked to fentanyl across the United States. While advocates argue the bans “have only worsened the crisis and further marginalized drug users,” proponents of the restrictions state the use of such tools “only serve to facilitate drug use.”

HHS OIG Report Says Medicare Providing Inadequate Access To Treatment For Opioid Use Disorder.

[STAT](#) (9/15, Joseph, 262K) reports that an HHS Office of Inspector General report found “Medicare is vastly underserving older Americans with opioid use disorder, with only 18% of enrollees with the diagnosis receiving recommended medication treatment.” Over “1.1 million Medicare beneficiaries had diagnosed opioid use disorders in 2021, the report said. There are 51 million Part D enrollees.” STAT adds, “The low rate of medication access is notable because insurance coverage can be a key obstacle to getting one of the three medications approved to treat opioid addiction.” For example, expanding Medicaid under the ACA “increased access to medication for opioid use disorder, or MOUD, which is considered the most effective form of treatment.” The Office of Inspector General “has previously called for the Centers for Medicare & Medicaid Services to improve access to medications for opioid use disorder and reiterated that message in the report released Thursday.”

California Workers’ Comp Patients Show Dramatic Drop In Opioid Use.

The [Fresno \(CA\) Business Journal](#) (9/13) reports, “The State Compensation Insurance Fund (State Fund) announced last week that despite the pandemic spurring alarming opioid use and fatalities nationwide, the overall number of opioid prescriptions has dropped significantly.” The announcement said “that the number of opioid prescriptions for injured workers under its care has been reduced by 82% since 2014.” State Fund also said “that over the course of the COVID-19 pandemic, the pattern continued, seeing a 14% decrease in the number of prescribed opioids

for injured workers, even with increasing opioid use and overdoses reported by the National Institute on Drug Abuse 2022.”

NYC Council Passes Bill To Supply Bars, Restaurants With Narcan.

The [New York Daily News](#) (9/13, Stratman, 2.51M) reports New York City Council members “want to enlist bars, restaurants and nightclubs in the fight against deadly drug overdoses by providing them with life-saving Narcan doses and fentanyl testing kits.” The council’s Committee on Mental Health Disabilities and Addiction on Tuesday cleared a bill to set up the program. The bill would “also require the Health Department to offer free resources and training for staff of participating nightlife establishments on how to use the kits.”

Narcan Available In Vending Machine In North Carolina Jail.

The [Raleigh \(NC\) News & Observer](#) (9/13, Johnson, 396K) reports a North Carolina jail has “become one of the few facilities in the state to offer free Narcan nasal spray for drug overdoses, county officials announced.” Narcan is “available 24 hours a day in a vending machine in the lobby of the Orange County Detention Center at 1200 U.S. 70 West in Hillsborough.” According to officials, “the detention center is a critical location for distributing Narcan, as a recent study found that people are 40 times more likely to die from an opioid overdose in the first two weeks after they leave jail.”

Experts Say DC Public Health Strategies Should Be Tailored To Deal With Fentanyl’s Overtake Of Heroin Overdoses.

The [Washington Post](#) (9/8, Jamison, 10.52M) reports that “heroin, synonymous with illicit drug use in Mid-Atlantic cities since the 1960s, is close to vanishing from the streets of the nation’s capital.” In “D.C.’s latest opioid overdose statistics, released by city officials in August...heroin was detected in only 15 of the 166 opioid deaths recorded in the first five months of 2022.” The figures indicate “the near-total replacement of heroin by fentanyl,” and “experts say public health strategies should be tailored to opioid markets now occupied almost exclusively by fentanyl.”

Specialists Helping Hospitals To Provide Better Treatment To People Suffering From Addiction.

[WBUR-FM](#) Boston (9/14, Bebinger, 71K) reports Liz Tadie, a nurse practitioner certified in addiction care, has “launched a new approach at Salem Hospital, a member of the Mass General Brigham hospital network, using a federal grant that others in the hospital worked for several years to secure.” She “started what’s known as an addiction consult service. In this case, that team included Tadie, three recovery coaches and a patient case manager.” She is using “success stories...to help unravel decades of misinformation, discrimination and ignorance about patients with an addiction and their treatment options. Part of the problem, said Tadie, is that doctors, nurses and other clinicians get very little training in the

physiology, medications and other aspects of treatment. And what they do get is often unhelpful.” The article mentions the HEALing Communities study.

Expert Helps Families Dealing With Loved Ones’ Substance Use Disorder.

Contributor Cathy Cassata writes in [Forbes](#) (9/14, 10.33M) that over “40 million people were living with a substance use disorder in 2020, according to the Substance Abuse and Mental Health Services Administration.” Although “the disease takes lives, 3 out of 4 people who experience addiction eventually recover, as reported in a 2020 study.” Steve D’Antonio, EVP of family education at Shatterproof, helps families deal with loved ones’ substance use disorder, something his family experienced. “To explain the science of addiction, the stigma associated with it, and hope for recovery, he helped create the Presence of Mind interactive training video ‘Understanding Addiction,’ in which gaming influencers and esports athletes share their addiction care journey in short video testimonials.” D’Antonio said, “Addiction has been referred to by many people as an adolescent disease because about 96% of people who end up with a substance use disorder started their use in adolescence.”

HHS Funding Increased Substance Use Disorder Treatment Access In West Virginia.

The [Bluefield \(WV\) Daily Telegraph](#) (9/13, Jordan, 41K) reports Sens. Joe Manchin (D-WV) and Shelley Moore Capito (R-WV) announced this week that US Department of Health and Human Services (HHS) grant money will go to six programs that support healthcare services in West Virginia. Manchin stated, “I’m pleased HHS is investing more than \$4.9 million in these six critical programs to bolster health services, expand access to treatment for substance use disorder and support innovative research opportunities across West Virginia.” Capito, meanwhile, said, “I’m thrilled to see support heading to West Virginia to help strengthen research initiatives, improve important health services, and increase access to” substance use disorder treatment.

Oregon Voters Continue To Support Drug Decriminalization Law They Approved In 2020, New Poll Shows.

[Marijuana Moment](#) (9/13, Jaeger) reports, “Oregon voters took the historic step of decriminalizing possession of all drugs at the ballot in 2020 – and a new poll shows that the policy continues to enjoy majority support in the state.” In a survey of likely voters about the reform, Data for Progress found “that not only do most people (72 percent) agree with the basic idea that substance misuse should be treated like a public health issue rather than a criminal justice problem, but a majority (58 percent) also says that the voter-enacted initiative should stay in place.” NIDA Director Nora Volkow “said recently that the ongoing criminalization of people over drug use needs to end in order to effectively address substance misuse and the stigmatization of addiction.”

Animal Tranquilizer Being Found In Overdose Deaths.

The [Marietta \(OH\) Times](#) (9/14, 26K) reports, “Federal officials are reporting concerns about the use of an animal tranquilizer called xylazine being seen more often in overdose deaths reported nationwide.” According to a National Institute on Drug Abuse report, “Xylazine, a non-opioid veterinary tranquilizer not approved for human use, has been linked to an increasing number of overdose deaths nationwide in the evolving drug addiction and overdose crisis.” The report said, “Studies show people exposed to xylazine often knowingly or unknowingly used it in combination with other drugs, particularly illicit fentanyl.” The most prevalent side effects of xylazine are “hypotension, bradycardia and decreased levels of consciousness, according to data provided by the U.S. Food and Drug Administration.”

New Program Teaches Addiction Science.

The [USC Daily Trojan](#) (9/14, Chkarboul, 29K) reports the School of Pharmacy at USC “announced in August the establishment of the education program Rising STARS – Scientific Training in Alcohol Research and other Substances – which intends to expose undergraduate students from underrepresented backgrounds to interdisciplinary opportunities in addiction science.” Associate Dean for Undergraduate Education Daryl Davies said the program gives students “all the hands-on experience to be successful and jump right into a graduate or Ph.D. program.” The Rising STARS program received a “grant from the National Institute on Drug Abuse – the first of its kind to enhance diversity in addiction science in the nation – to assist with educational efforts.”

Addiction Often Goes Hand-In-Hand With Mental Illnesses.

NIDA Director Nora Volkow writes in an opinion piece for [The Hill](#) (9/12, 5.69M) that “recovering from drug addiction is notoriously difficult” and “too often, a critical element is overlooked: co-occurring mental health conditions.” Volkow writes, “Treating mental illnesses like depression, anxiety, post-traumatic stress disorder, ADHD, and others with medications or other therapies is crucial to address the addiction and overdose crisis that now claims over 100,000 lives annually.” Volkow also says “expanded screening and care for mental illnesses including depression, anxiety, PTSD, and others must be a component to successfully address the current addiction and overdose crises.”

New Homeless Shelter In San Diego Offering On-Site Addiction, Mental Health Services.

The [San Diego Union-Tribune](#) (9/12, Warth, 587K) reports a new, 150-bed “homeless shelter in San Diego’s Midway District” is “the first of its kind to offer on-site mental health and addiction services, addressing some of the most serious issues facing people on the street.” The shelter’s “plan is to take it slow, bringing in 15 people at a time to assess their needs and connect them with help.” According to the Union-Tribune, “the city of San Diego contracted with the Alpha Project for \$4.8 million for

a 13-month term through June 30, 2023, at a cost of about \$77 a bed nightly.” San Diego County “is providing the site for the shelter and has allocated \$1.4 million this fiscal year for Vista Hill to provide a multi-disciplinary team that includes a nurse practitioner, mental health clinicians and substance-use counselors.”

Dallas Officials Consider Program That Maps Drug Overdoses In Real Time.

The [Dallas Morning News](#) (9/12, Smith, 772K) reports, “Dallas officials are considering a national program that maps where overdoses happen in real time so agencies know where to deploy resources and can sound the alarm about clusters or spikes in certain areas.” On Monday, “Dallas County District Attorney John Creuzot advocated for the Overdose Detection Mapping Application Program at the city’s public safety committee meeting.” However, “Dallas officials haven’t yet committed to the federally funded program.”

S.C. Prison To Treat Substance Abuse With Digital Therapy.

The [AP](#) (9/2) reported, “The South Carolina Department of Corrections will offer a new digital tracking service to support addiction therapy for inmates in the state’s main prison for women.” Offenders eligible for the program “will report their substance use, cravings and triggers on a smart device, and counselors will use the results to inform their therapy sessions.” The “program is funded by the S.C. Department of Alcohol and Other Drug Abuse Services.” The AP adds that “National Institute on Drug Abuse data show 85% of the nation’s prison population has an active substance use disorder or were imprisoned over drug-related crimes.”

Save A Life Day Event Distributes Overdose Prevention Resources To Healthcare Workers.

The [AP](#) (9/8, Willingham) reports the Save a Life Day event in West Virginia Thursday was “the largest event for overdose reversal drug training and distribution in” the state’s history. “West Virginia has by far the nation’s highest overdose death rate, and” the event put resources in the hands of public health workers such as “at least 10,000 doses of Narcan” along with training “on how to use it” plus fentanyl test strips and training on how to recognize “signs of an opioid overdose.”

CDC Data Show 3.6% Decrease In West Virginia Overdose Deaths.

The [AP](#) (9/8) reports, “Overdose deaths in West Virginia declined during the second year of the COVID-19 pandemic, health officials said.” According to data from the CDC, “from March 2021 to March 2022, West Virginia saw 1,485 overdose deaths...a decrease of 3.6% from the 1,541 deaths for the year ending in March 2021.” Additionally, “five other states also saw overdose deaths drop, the CDC said. West Virginia’s percentage decrease was the second-highest among all states to Virginia’s 6.7%,” but West Virginia also “has by far the nation’s highest overdose death rate.”

How rewards help recovery from addiction.

The [AP](#) (9/7, Johnson) reports, “For an increasing number of Americans, addiction treatment involves not only hard work, but also earning rewards – sometimes totaling \$500 – for negative drug tests or showing up for counseling or group meetings.” During the fall, “California will launch a pilot program designed to reward \$10 gift cards passing drug tests for stimulants. Oregon will use tax revenue from the state’s legal marijuana industry to pay for similar incentives. Montana launched a program in March using a federal grant.” HHS is also “working to revise its guidance on how much government grant money can be spent on prizes, rewards and cash cards. Researchers say the current \$75 limit per patient is arbitrary and ineffective and should be raised to \$599.”

With A Promising New Plan To Pay For Pricy Cures, Two States Set Out To Eliminate Hepatitis C. But Cost Hasn’t Been The Biggest Problem.

[STAT](#) (9/13, Florko, 262K) reports experts have “assumed the biggest obstacle to eliminating hepatitis C was the sky-high cost of the new cures.” In 2019, Louisiana and Washington state reached agreements with pharmaceutical companies to produce medication, “and dedicated personnel and money toward the lofty goal.” However, the two “states are nowhere near achieving the overarching goals they set, a new STAT investigation reveals.” The rate of treatment in Washington “for the state’s Medicaid program now is actually lower than it was before the initiative began.” White House science advisor Francis Collins “told hepatitis C advocates last week he hoped Congress would allocate \$8 billion to \$10 billion to help eliminate the virus nationally.” Collins “told STAT that a ‘Netflix model’ is on the table, though he also said on last week’s call that it would ‘potentially [be] modeled on the federal Covid-19 Test and Treat program’ for Pfizer’s Covid-19 drug Paxlovid” (nirmatrelvir and ritonavir).

Nothing Seemed To Treat Their Depression. Then They Tried Ketamine.

The [Washington Post](#) (9/12, Kornfield, 10.52M) reports that “a year-long evaluation of more than 400 patients” treated for depression with ketamine “found a significant reduction in symptoms of depression, according to a study published in the Journal of Clinical Psychiatry on Monday.” In the study, “72 percent of patients saw improvement in their mood and 38 percent were symptom-free after 10 infusions.” The Post reports, “While the study has limitations, the findings appear to illuminate how ketamine could offer more than just brief relief to people whose depression is resistant to other medications.” National Institute of Mental Health Experimental Therapeutics and Pathophysiology Branch Chief Carlos Zarate Jr. “reviewed the study, saying this real-world research has proved that ketamine has helped people with medication-resistant depression.” The piece adds that the FDA in 2019 “approved esketamine, a nasal spray derived from ketamine and developed by a subsidiary of Johnson & Johnson for people with treatment-resistant depression.”

California Governor Signs Bill To Create Mental Health Courts For Homeless.

The [Los Angeles Times](#) (9/14, Wiley, 3.37M) reports California Gov. Gavin Newsom (D) on Wednesday signed into law a proposal that would “order mental health and addiction treatment for thousands of Californians.” Proponents of the Community Assistance, Recovery and Empowerment (CARE) Court “call it a major transformation in the state’s approach to treatment, a way to divert Californians struggling with substance use and severe mental illness from incarceration and homelessness – while avoiding a more restrictive court-ordered conservatorship.” Newsom “and his administration have been careful to describe CARE Court as voluntary because individuals who qualify can still technically refuse to participate.” But “a vast network of influential civil and disability rights organizations” have “spent much of this year’s legislative session criticizing CARE Court as a way to criminalize mental illness and remove basic freedoms from already marginalized groups.”

The [AP](#) (9/14, Har, Beam) reports, “The Newsom administration estimates about 12,000 people could get help under the program.” It “would not begin until next year, and only in seven counties: Glenn, Orange, Riverside, San Diego, San Francisco, Stanislaus, and Tuolumne must establish programs by Oct 1, 2023. All other counties would have until Dec. 1, 2024.”

Calls To Suicide Prevention Lifeline Increased By 45% Following Switch To 988 Number, Data Indicate.

[CNN](#) (9/9, Howard, 89.21M) reported following “the summer launch of the new 988 Suicide and Crisis Lifeline number, calls to the lifeline increased 45% compared with the same time last year, and the majority of those calls were connected to a counselor, according to the US Department of Health and Human Services.” The department on Friday unveiled “performance data detailing the number of calls, chats and texts made to the 988 lifeline in the month of August, as well as the portion of those contacts that were answered.” HHS Secretary Xavier Becerra said, “Our nation’s transition to 988 moves us closer to better serving the crisis care needs of people across America. ... 988 is more than a number, it’s a message: we’re there for you. The transition to 988 is just the beginning. We will continue working towards comprehensive, responsive crisis care services nationwide to save lives.”

HHS Announces \$35M In Grants To Tribes For 988 Lifeline.

The [AP](#) (9/9, Fonseca) reported on Friday, HHS announced “it’s making \$35 million in grant funding available to Native American and Alaska Native tribes to ensure callers [to the 988 Lifeline] receive culturally sensitive support as well as follow-up care if needed. The deadline to apply is Oct. 25.” All “of the 574 federally recognized tribes are eligible to apply, along with tribal organizations. Up to 100 grants will be awarded.” This “funding is part of \$150 million set aside for the 988 hotline in a bill addressing gun violence and mental health that President Joe Biden signed in June.” The article added, “Miriam Delphin-Rittmon, assistant secretary for Mental Health and Substance Use at Health and Human Services, was among the federal

officials who visited Santa Clara and Jemez pueblos, and Albuquerque, New Mexico, this week.”

White House Requires Immediate Public Access To All U.S.-Funded Research Papers By 2025.

[Science](#) (8/26, Brainard, 484K) reported, “President Joe Biden’s administration announced yesterday that, by the end of 2025, federal agencies must make papers that describe taxpayer-funded work freely available to the public as soon as the final peer-reviewed manuscript is published.” The new guidance requires that “data underlying those publications must also be made freely available ‘without delay.’” While “many details of the new policy, including exactly how the government will fund immediate public access, remain to be decided...it significantly reshapes and expands existing – and fiercely contested – U.S. access rules that have been in place since 2013. Most notably, the White House has substantially weakened, but not formally eliminated, the ability of journals to keep final versions of federally funded papers behind a subscription paywall for up to 1 year.”

Additional Sources. [Nature](#) (8/26, 194K) reported, “The policy change was announced on 25 August, in guidance that the White House Office of Science and Technology Policy (OSTP) issued to federal agencies. The OSTP recommends that agencies ensure that peer-reviewed work from their grant recipients is made available in an agency-approved public repository without delay after publication.” The new “OSTP guidance builds on US public-access policies that date back nearly two decades. In 2008, the US National Institutes of Health (NIH), a major funder of biomedical research, told scientists receiving its grants to deposit their studies in a public repository within a year of publication.”

Link to memorandum [08-2022-OSTP-Public-Access-Memo.pdf \(whitehouse.gov\)](#)

Funding Opportunities



[PAR-22-202](#)

[Grand Opportunity in Medications Development for Substance-Use Disorders \(U01 Clinical Trial Optional\)](#)

[PAR-22-200](#)

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

[NOT-DA-22-079](#)

[Notice of Availability of FAQ for RFA-DA-23-011, "Registry of Medical Cannabis Use and Health Outcomes \(UM1 - Clinical Trial Optional\)"](#)

[PAR-22-233](#)

[Time-Sensitive Opportunities for Health Research \(R61/R33 Clinical Trial Not Allowed\)](#)

[NOT-DA-22-073](#)

[Notice of Pre-Application Technical Assistance Webinar for NIDA RFA-DA-23-046, "HEAL Initiative: Research to Foster an Opioid Use Disorder Treatment System Patients Can Count On \(RM1 - Clinical Trial Optional\)"](#)

[RFA-OD-22-022](#)

[Environmental influences on Child Health Outcomes \(ECHO\) Data Analysis Center \(U24\) Clinical Trial Not Allowed](#)

[RFA-OD-22-020](#)

[Environmental influences on Child Health Outcomes \(ECHO\) Measurement Core \(U24\) Clinical Trial Not Allowed](#)

[RFA-OD-22-017](#)

[Open Competition: Environmental influences on Child Health Outcomes \(ECHO\) Pregnancy Cohort Study Sites. Clinical Trial Not Allowed \(UG3/UH3\)](#)

[RFA-HD-23-030](#)

[HEAL Initiative: Opioid Exposure and Effects on Placenta Function, Brain Development, and Neurodevelopmental Outcomes \(R01 Clinical Trial Not Allowed\)](#)

[RFA-HD-23-031](#)

[HEAL Initiative: Opioid Exposure and Effects on Placenta Function, Brain Development, and Neurodevelopmental Outcomes \(R21 Clinical Trial Not Allowed\)](#)

[RFA-HD-23-032](#)

[HEAL Initiative: Opioid Exposure and Effects on Placenta Function, Brain Development, and Neurodevelopmental Outcomes \(R01 Basic Experimental Studies with Humans Required\)](#)

[RFA-HD-23-033](#)

[HEAL Initiative: Opioid Exposure and Effects on Placenta Function, Brain Development, and Neurodevelopmental Outcomes \(R21 Basic Experimental Studies with Humans Required\)](#)

[NOT-AT-22-026](#)

[Request for Information \(RFI\): Investigators interests in and barriers to research studies on the health effects of cannabis and its constituents](#)

[NOT-DA-22-071](#)

[Notice of Pre-Application Technical Assistance Webinar for NIDA RFAs to support research to advance equity for racial and ethnic minority groups affected by disparities related to substance use and consequences of substance use](#)

[RFA-HD-23-003](#)

[Elucidation and Validation of the role of Transporters in the Placenta, Lactating Mammary Gland, Developing Gut, and Blood Brain Barrier \(UC2 Clinical Trial Not Allowed\)](#)

[NOT-OD-22-203](#)

[Notice of Special Interest \(NOSI\): Development and Preliminary Testing of Health-related Behavioral Interventions](#)

Other Funding Opportunities:

[UC Research Conference Internal Funding Program](#)

Due Date: 01/01/2030

The *UC Research Conference Internal Funding Program* provides supplemental support to UC researchers who wish to host national research conferences, focused symposia, or other forms of convenings around strategic research areas at UC. The event must be held at UC or in Cincinnati to be eligible for support. This funding program is intended to enhance our faculty's ability to bring together researchers, community members, practitioners, policymakers, and other important collaborators whose expertise, substantive knowledge and practice, theoretical insight, or methodological expertise can be engaged in ways that help to build upon and advance research at UC. A maximum of \$5000 may be requested.

UC Foundation Funding Opportunities

Please contact Carol Russell at (513) 556-6169 or 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.

[Klingenstein-Simons Fellowship Supports Basic, Clinical Neuroscience Researchers](#)

Application Deadline: February 15, 2023, 11:59 p.m. E.T. (including three letters of recommendation)

The Klingenstein-Simons Fellowship supports early-career investigators engaged in basic or clinical research that may lead to a better understanding of neurological and psychiatric disorders. Several areas within neuroscience are of particular interest:

- Cellular and molecular neuroscience. Studies of the mechanisms of neuronal excitability and development, and of the genetic basis of behavior.
- Neural systems. Studies of the integrative function of the nervous system.
- Translational research. Studies designed to improve our understanding of the causes, prevention, diagnosis, and treatment of neurological and psychiatric disorders.

To qualify for an award, investigators must hold a Ph.D. and/or an M.D, and have completed all research training, including post-doctoral training. Candidates must also meet these four qualifications:

- The candidate must have a tenure track appointment or equivalent. A letter indicating the commitment of institutional resources to establish the investigator and the prospects for long-term support by the institution must be provided by an institutional official (e.g., dean), including date of appointment.
- The candidate must be an independent investigator at a university, medical center, or research institute with a maximum of four years between the completion of last postdoc and the application deadline.
- U.S. citizenship is not a requirement, but it's expected that candidates will be permanent residents of the U.S. and their research will be conducted in U.S. institutions.
- Applicants must inform the Esther A. & Joseph Klingenstein Fund of other sources of funding. Although there's no strict prohibition against holding more than one fellowship at one time, the Fund may take other funding into account when deciding whether to grant an Award.

CAR Member New Projects

Title: Therapeutic and mechanistic significance of altered metabolism of HIV medicines by alcohol- and alcohol/synthetic opioid combination

Name of PD/PI: Bingfang Yan/Jennifer Brown/Jason Blackard

Major Goals: Provide mechanistic details on how these contributing factors interplay, validate biomarkers for efficacy/safety and adherence monitoring, and build strong foundations for developing mitigation strategies.

Project Number/Award Amount: R01 AA030486, \$3,510,360 (NIH/NIAAA)

