Understanding Changes in the US 'Heroin' Market: Notes from the Field

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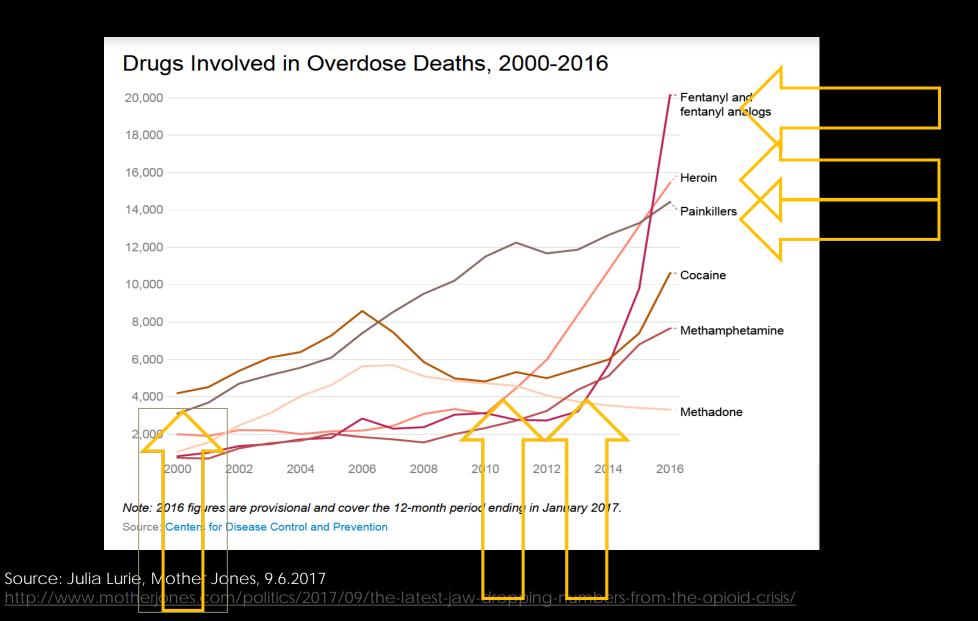
DISCLOSURES

No financial disclosures

HEROIN IN TRANSITION ("HIT") STUDY

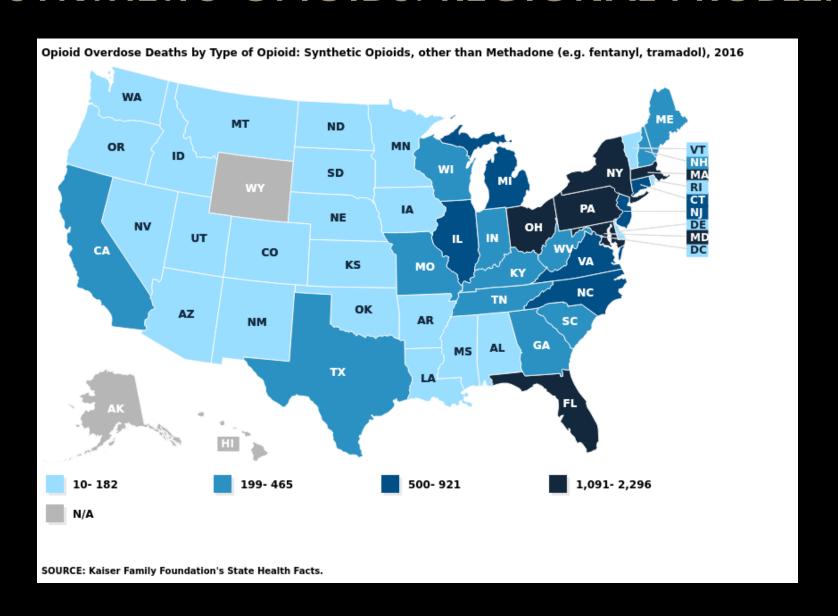
- NIH: National Institute of Drug Abuse
 - DA037820
- Multi-methodological study: quantitative and qualitative aims
 - Supply changes > medical consequences overdose
 - New drug forms > user perceptions, adaptation, etc.

THE TRIPLE WAVE EPIDEMIC





SYNTHETIC OPIOIDS: REGIONAL PROBLEM

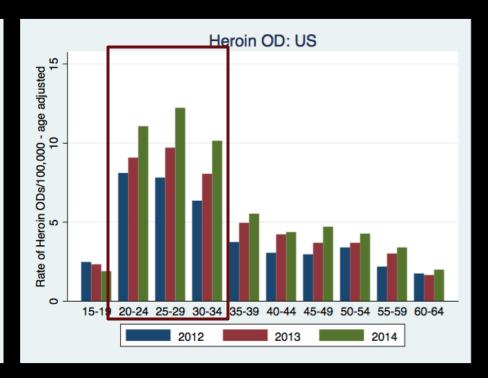


NIS: US OVERDOSE RATES (2012-2014) BY <u>AGE GROUP</u>:

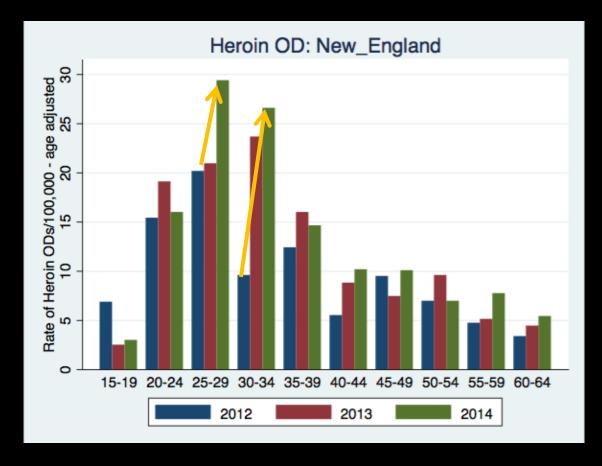
Opioid overdose

Opiate OD: US Opiate

Heroin overdose



New England: Large increases in heroin OD hospitalizations for 25-35 yo.



QUALITATIVE STUDY AIMS

- "Hotspot study" where our team of researchers goes to visit areas in the country where significant changes in the heroin supply or overdoses have been reported
 - ➤ Baltimore, MD; Lawrence and Lowell, MA; Chicago, IL; Charleston, West Virginia
- Our aim is to understand the experiences and beliefs of the users themselves and to observe first hand the heroin currently being used



1. DEVASTATION: 'LIKE A 'COMBAT STATE'

Now the dope is fentanyl and it's killing people left and right. I have over the years, I've watched friends [die]—but on average, it was three a year. Now the last 3 years it's been an average of 20 [per year]. I feel like I'm back in a combat state and I feel like I'm fighting for my life right now.

Jerry, Lowell, aged 46, using on and off for the last 20 years



ARS QUESTION 1

2. CHANGES IN 'HEROIN'

- Users reported and our ethnographers observed rapid changes in the appearance of and effects due to substances sold as 'heroin'
- Supply not demand driven changes:
 - Users surprised and dismayed
 - Range of desirability
 - No cultural idioms
 - Dealers even surprised

We're supposedly buying dope that doesn't have any fentanyl in it, but when I started showing up dirty with heroin, I started showing up dirty with fentanyl... When we cut the dope, we don't use fentanyl. The problem was that we were buying the dope already dirty with that and we didn't know it.

Hector, aged 42, using heroin for 26 years Lawrence, MA



ARS QUESTION 2

3. VARIATION AND UNPREDICTABILITY

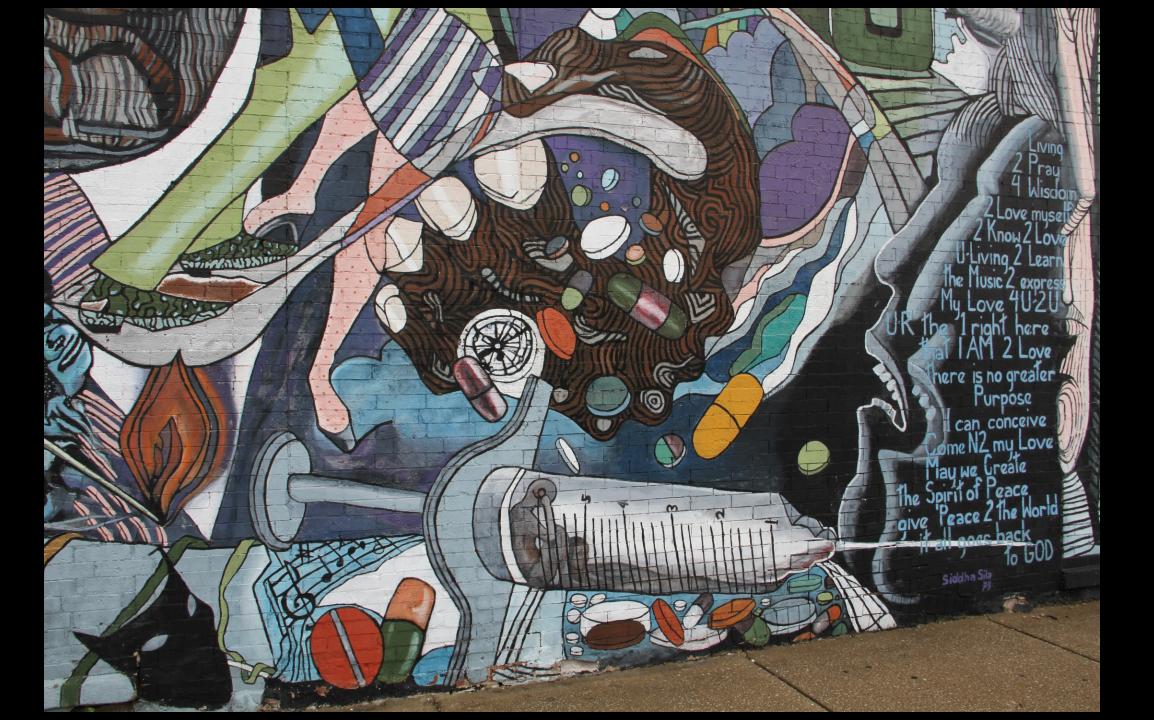
- 'Heroin' varied by:
 - Color: powder and solution
 - Intensity of onset or 'rush'
 - Intensity of effect
 - Duration of effect (from 45 minutes to 12 hours)
 - Types of effect eg sleepy or stimulating

HEROIN SOURCE-FORMS

"Black Tar" Heroin: Mexican







4. DESIRABILITY

The high is wonderful. It's splendidly wonderful. It's magnified heroin feeling by a great number.

> Tim, aged 45, using heroin for 25 years, Baltimore

I know a couple of people have done died from that, with fentanyl, yeah. [...] And I have a lot of associates that are letting me know, "Don't go to that place because they selling fentanyl".

► Montana, 39 year old woman using for 21 years, Baltimore



5. DISCERNMENT

- Hierarchy:
 - Physiological >
 - Taste on the tongue >
 - Solution color >
 - Powder color

When you add the water to it and pull it back it's almost like clear. Heroin's dark and brown. It's brown. ...but the fentanyl is like, like water kinda, like a little bit yellowish... The regular heroin ...it can be dark brown or light brown but it's never yellow like that.

Kristin, 19 years old, using heroin for 5 years, Lowell, MA

6. GENERATIONAL CHANGES

- 50 yo African American male, Englewood Chicago about violence in Chicago and the increase in homicides:
- A: A lot of guys are older now, like me. I'm 50 years old. My gang banging days have been over a long time ago. So you got a lot of people with a lot of rank they're going to jail and they ain't getting out no time soon.
- Q: So the youngsters take over?
- A: So the young, so yeah they're trying to recruit younger guys and these younger guys they're recruiting they're putting guns in their hand and they just going buck wild. They're not following the rules or the laws of the gang that they're in, they're trying to rewrite the laws and do what they want to do.

7. TAKING PRECAUTIONS

Like when I get stuff I don't know what it is I do a little bit before I do something that I feel. Like I want to kind of scale out how much I want to do. Because I don't want to die. But these people are just doing a gram shot and just... my friend just died two days ago.

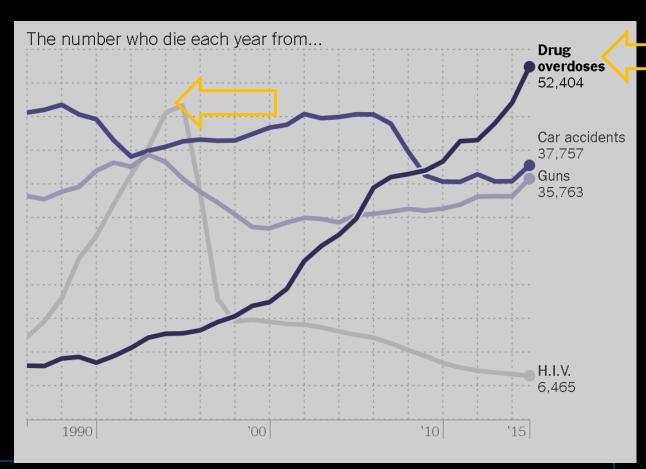
Liz, in her 20s, using heroin for 1.5 years Lawrence, MA

SUMMARY

- Devastation is rampant: individual, social, cultural
- Changes in heroin: supply driven
- Variation in potency, compounded by fentanyl: 'Russian roulette'
- Mixed desirability for fentanyl
- Some degree of discernment
- A new generation needs risk reduction guidance
- Some organic harm reduction > pay attention to this!

An Epidemic of Crisis Proportion

- Crisis with Epic Opportunity
- Treatment and Prevention can work!



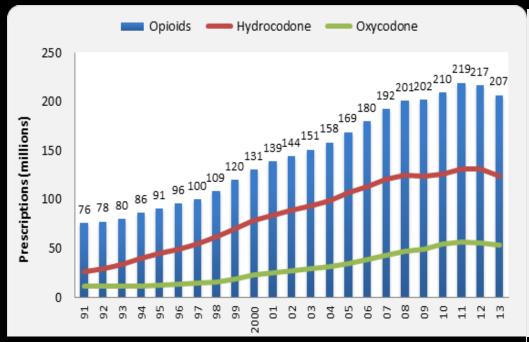
Source: New York Times, The Upshot; Josh Katz; April 14, 2017

CRISIS RESPONSE

- Triple wave epidemic is unprecedented
 - Prescription pills ≠ Heroin/fentanyl:
 - Unique supply drivers
 - Problems more than just overdose
 - HIV/HCV
 - Increasing numbers of heroin users starting with heroin not pills
 - Differences in population at risk: Youth!
 - Geography

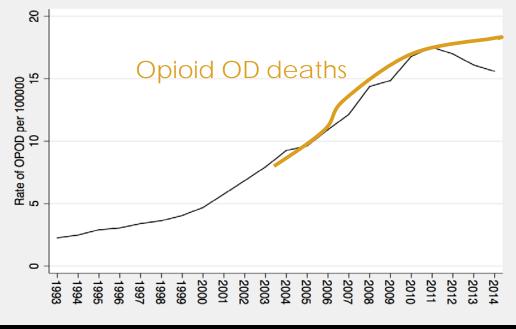
OPIOID SUPPLY

Opioid prescriptions



IMS Health, Vector One®: National, 1991-2011 IMS Health, National Prescription Audit, 2012-2013 Thanks: Wilson Compton, Deputy Director, NIDA

Opioid overdose hospitalizations



CRISIS RESPONSE

- Better surveillance is needed
 - Fentanyl as poisoning epidemic
- More evidence-based treatment
- Faster responses to overdose

CRISIS RESPONSE

- Stigma remains our biggest enemy
- Harm reduction saves lives, is costeffective and can bridge people into treatment



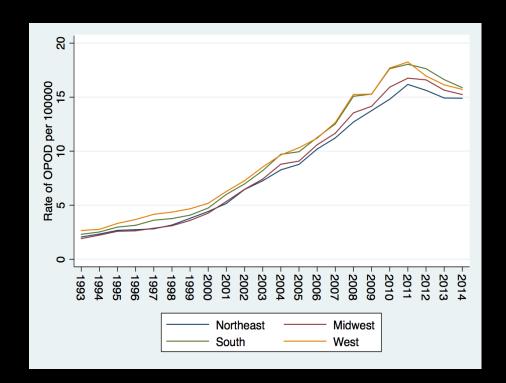
ACKNOWLEDGEMENTS

- Heroin in Transition study:
 - HIT team: Sarah Mars, Jeff Ondocsin, Eliza Wheeler, Mary Howe, Fernando Castillo, Philippe Bourgois, Dan Rosenblum, Jay Unick
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- Participants!
- Photo credits: Dan Ciccarone, Fernando Castillo

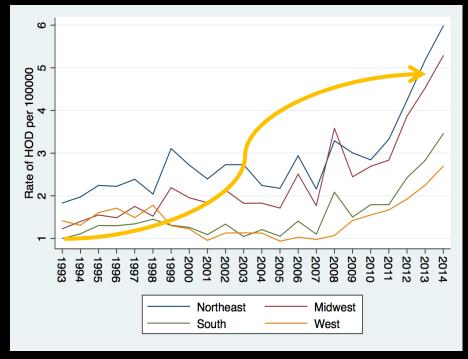


NIS: OVERDOSE RATES (1993-2014) BY GEOGRAPHIC REGION:

OPOD: Even -

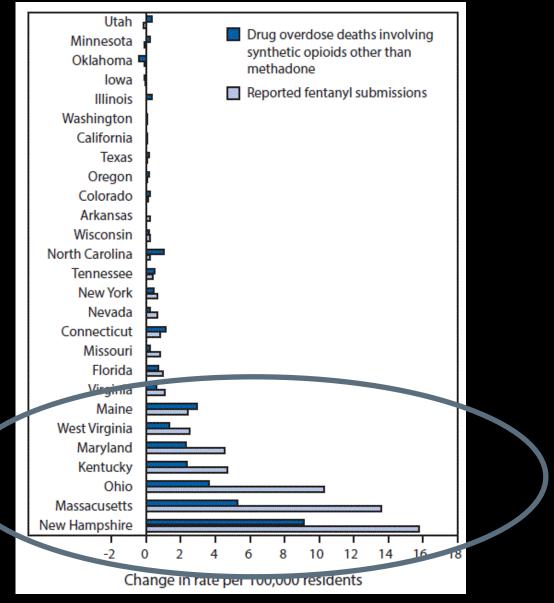


HOD: Northeast and Midwest!



CDC: 27 states

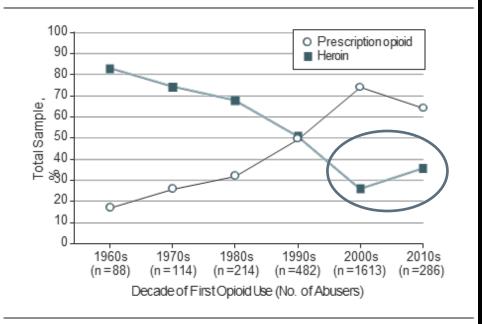
- Increases in synthetic opioid overdose deaths
 - Concentrated in 7 states



Gladden RM, Martinez P, Seth P. Fentanyl Law Enforcement Submissions and Increases in Synthetic Opioid-Involved Overdose Deaths — 27 States, 2013–2014. MMWR

Heroin treatment: Initial opioid of choice

Figure 1. Percentage of the Total Heroin-Dependent Sample That Used Heroin or a Prescription Opioid as Their First Opioid of Abuse



Data are plotted as a function of the decade in which respondents initiated their opioid abuse.

A BRIEF HISTORY OF OPIOID "EPIDEMICS"

Epidemic

- Morphine & heroin 1880-1900's
- Heroin (wave 2, illicit, 1920 's)
- Heroin (Jazz era)
- Heroin (Vietnam era)
- Heroin (Colombian-sourced, 1990's)
- Opioid pills (2000's)
- Heroin (late 2000's)
- Synthetics eg fentanyl (2013)

Trigger

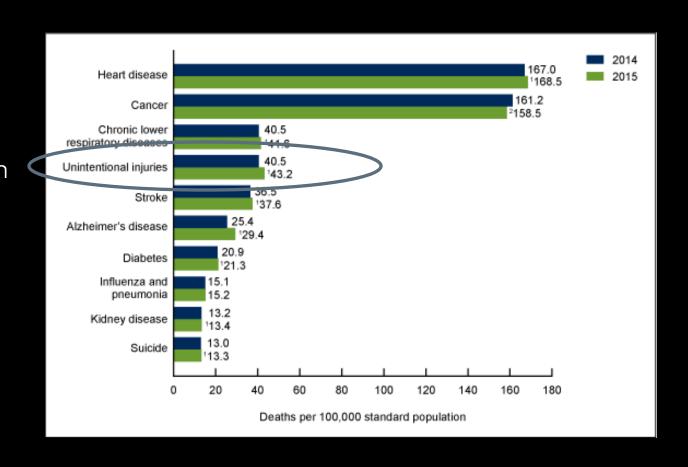
- Novel drug/ latrogenic/ technological
- Harrison Act (restriction)? > illicit
- Cultural?
- New source & cultural
- New source
- latrogenic/ novel form/ technological (ER)
- New source-form /restriction
- New source/technological

OTHER CONSEQUENCES

- Infectious disease
 - Blood borne viruses:
 - Hepatitis C virus
 - HIV Scott County, IN
 - Bacterial:
 - Endocarditis
 - Skin and soft tissue infections

Leading Causes of Death

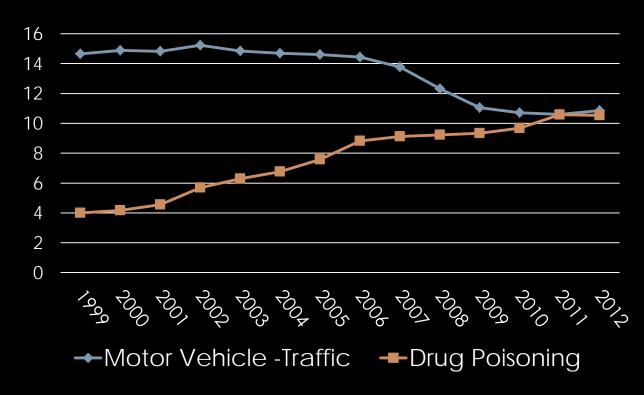
 Age-adjusted death rates for the 10 leading causes of death in 2015



NCHS Data Brief No. 267 December 2016. U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention. National Center for Health Statistics Mortality in the United States, 2015

Unintentional Injury 1999-2012

 Age-adjusted death rates per 100,000 pop.

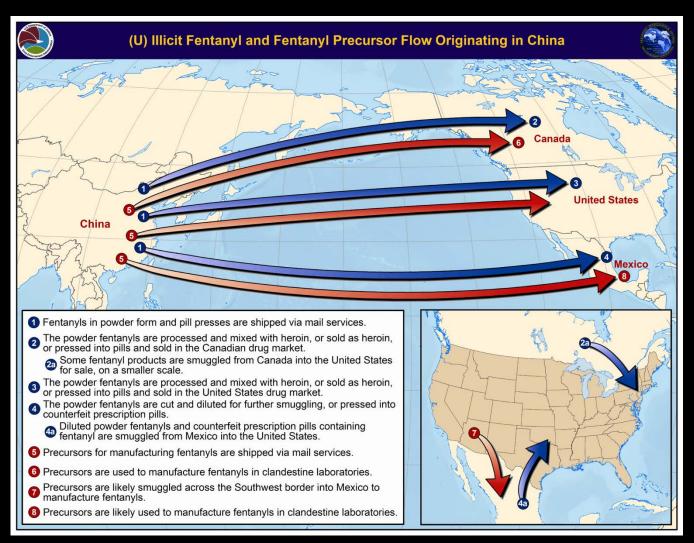


Produced by: National Center for Injury Prevention and Control, CDC

Data Source: NCHS Vital Statistics System for numbers of deaths. Bureau of Census for population

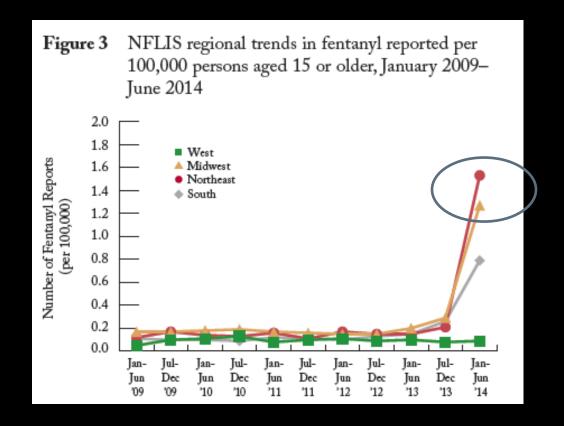
estimates. Accessed: 11.5.14

FLOW OF FENTANYLS



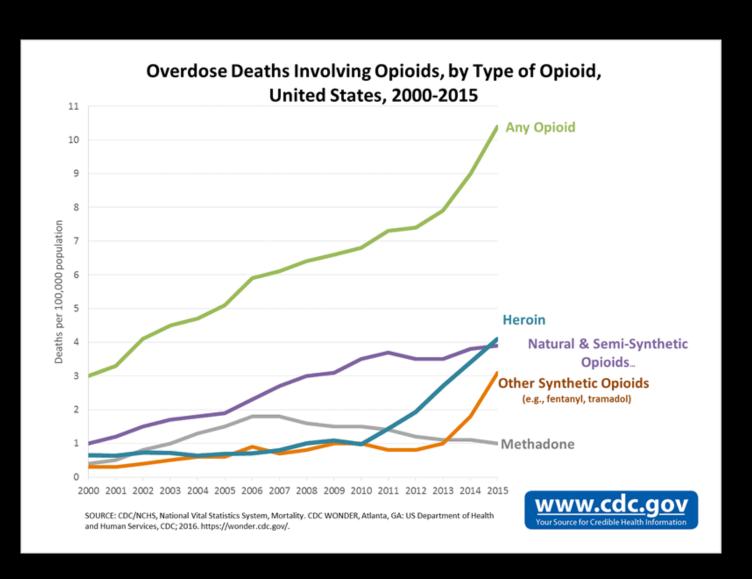
NFLIS: Fentanyl

- Testing seized drugs
- Highest rise in rates in NE and MW
 - Recent relative to earlier rises in heroin overdose



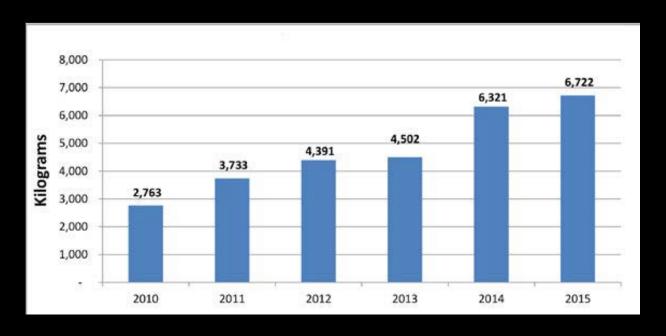
NATIONAL FORENSIC LABORATORY INFORMATION SYSTEM. Special Report: Opiates and Related Drugs Reported in NFLIS, 2009–2014. Office of Diversion Control, DOJ, DEA. 2015

TRENDS IN MORTALITY – TYPE OF OPIOID



CHANGES IN THE HEROIN SUPPLY

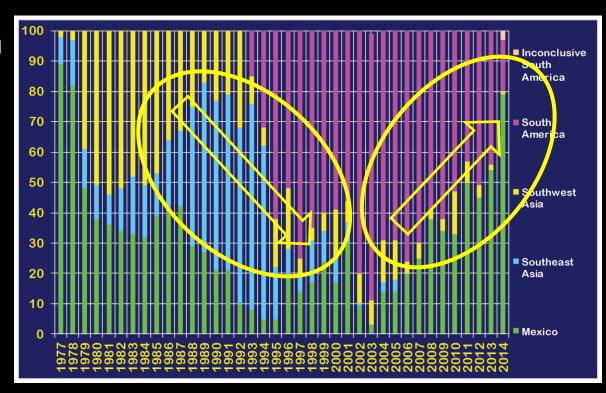
US heroin seizures are up ~ 140%, 2010-15



Source: National Seizure System. Reported in the 2016 National Heroin Threat Assessment Summary; DOJ, DEA, 2016

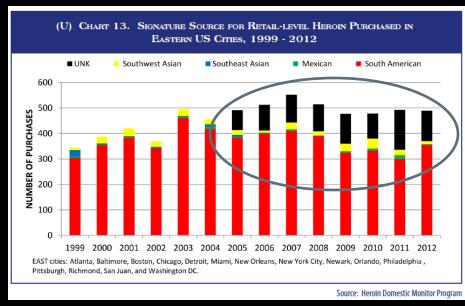
HEROIN SOURCES OVER TIME

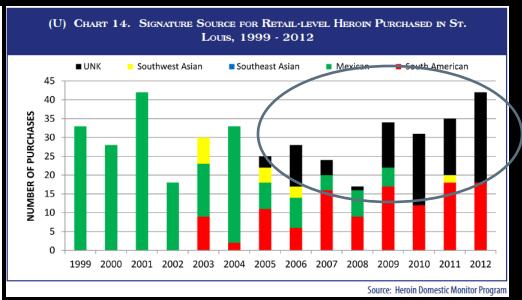
- Four sources down to two
- Colombian dominant to 2010
- Now Mexican dominant: 78% in 2014



Source: Heroin Signature Program. Reported in the 2015 National Drug Threat Assessment Summary; DOJ, DEA, 2015

HEROIN OF UNKNOWN SOURCE

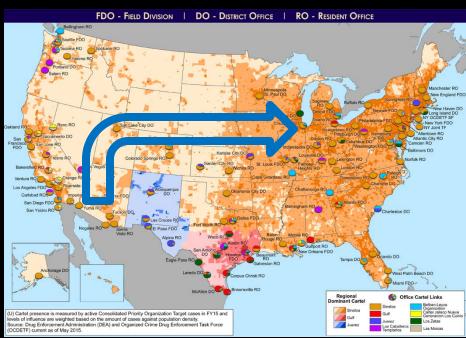




Source: Domestic Monitoring Program. Reported in the 2015 National Drug Threat Assessment Summary; DOJ, DEA, 2015

MEXICAN TCOs: FLOW OF HEROIN TO US





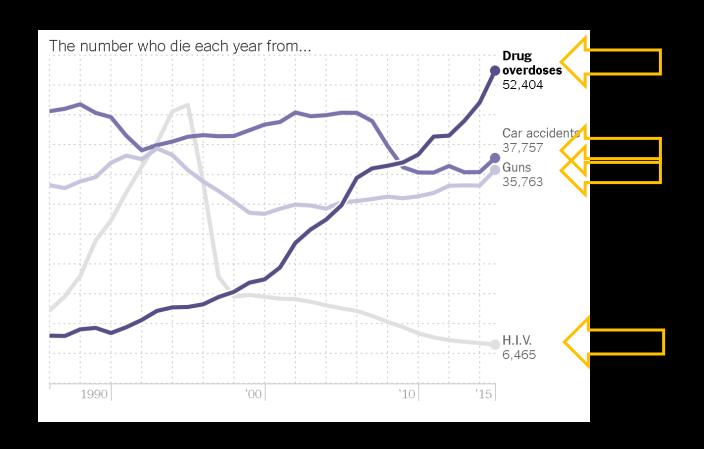
MEXICAN-SOURCED HEROIN: CHANGES

- Mexican opium/heroin production has grown while Colombian production is down 40%
- Explanations for rising HOD in Midwest (in addition to fentanyl):
 - A more purified product coming from Mexico
 - "Mexican White:" Colombian mimic
 - Traditional Colombian-sourced-heroin retail places
 - > Synthetic adulteration > heroin "inconclusive" origin

An Epidemic of Crisis Proportion

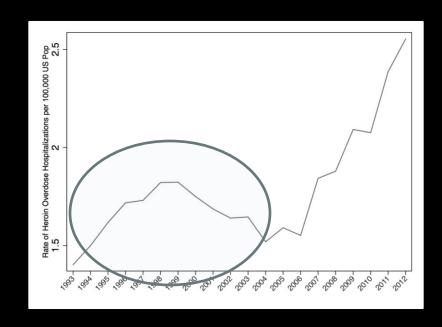
Numbers of deaths:

- Drug overdose >
- Motor vehicle >
- Gun homicide >
- HIV



Source: New York Times, The Upshot; Josh Katz; April 14, 2017. Data from: Centers for Disease Control and Prevention, National Center for Health Statistics

SUMMARY: HEROIN IN TRANSITION



- The novel entry of Colombian-sourced heroin increased HOD rates; 1993-1999
- New increases in HOD:
 - Regional!
 - New form of Mexicansourced heroin
 - (+)Fentanyl adulteration
 - Wider distribution models
 - Young users