Law enforcement reports of increasing methamphetamine use and associations with the opioid epidemic

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INTRODUCTION
• Serious adverse events associated with methamphetamine use include cardiac failure, suicide, stroke, and accidents causing physical harm.
• Polysubstance use which includes methamphetamine places users at increased risk for overdose.
• Recent reports of the combined use of methamphetamine and heroin – known as a “goofball” or “speedball” – are growing.
• Given the prevalence of heroin use, and reports of increasing methamphetamine use, more attention must be given to this phenomenon.

METHODS
Data are drawn from the Drug Diversion Program of the Researched Abuse, Diversion, and Addiction-Related Surveillance (RADARS®) System, a national prescription drug surveillance system. The Drug Diversion Program includes a quarterly survey of prescription drug diversion completed by a national sample of law enforcement and regulatory agencies. The survey includes a section for respondents to describe “new drug trends,” including methamphetamine. Currently, the Drug Diversion Program includes approximately 250 investigators from 49 states.

Qualitative data were collected during June 2017 to contextualize methamphetamine cases reported in the “new drug trends” section of the survey. A small supplemental questionnaire about new drug trends was distributed to reporting agencies. Respondents were asked to describe observed increases or decreases in past year methamphetamine cases, prevalent forms and sources and any other trends concerning methamphetamine in their jurisdictions.

RESULTS
Increasing availability and decreasing price was reported by 56 jurisdictions in 32 states; 20 jurisdictions reported no change; 2 reported a decrease; and the remainder reported either low local prevalence of methamphetamine and/or an agency focus on heroin/fentanyl.
• “There is no doubt methamphetamine is on the rise. We are seeing more in quantity. Where we use to think it was something to get an 8 ball or 8/8 of an ounce now it is problem to get 2, 4 or 8 ounces. The street people or still selling grams and 8 balls. One and two gram hits are very common on the street.” (Alabama)
• “The individual possession amounts have changed drastically and went up a lot. A pound can now be purchased for around $4,000/oz. to a buying in large amounts.” (Missouri)
• “Definitely an increase in meth in the area.” (Wisconsin)
• “Yes, we have seen an increase in Meth cases. But, over the last year we’ve seen a decrease in one-pot labs. It appears that crystal meth has become more accessible as of late.” (Michigan)
• “Meth has become more prevalent and way cheaper over the last few years in the metro area.” (Oregon)

Association of methamphetamine and opioids was reported by 12 jurisdictions in 9 states.
• “There are currently a high percentage of heroin addicts who are using the drug to be able to battle their opiate addiction, to experience a high while on the drug Vivitrol and to overcome dope sickness when they are unable to find a reliable source for their opiates.” (Ohio)
• “We are starting to see ‘Gray Death’ in our area, meth cut with fentanyl.” (Alabama)
• “Multiple jurisdictions are either reporting methamphetamine to be as prevalent as heroin or are predicting that it will surpass heroin use within the next several years.” (Ohio)
• “Meth users are “speedballing” by mixing prescription drugs and cocaine with meth and injecting them into their bodies with syringes.” (North Carolina)
• “There is a large group of users, 17-45 in age, are also addicted to heroin, a lot of people started using the meth to stop [withdrawal symptoms] when heroin was not available.” (Michigan)
• “Common users lately are former heroin addicts. ‘They say they get high on meth and don’t get dope sick from not having heroin.” (Wisconsin)
• “We have heard through informants that people are turning to meth instead of heroin because of overdose deaths related to fentanyl and carfentanyl.” (New Hampshire)

Crystal/ice forms of methamphetamine, primarily from Mexico, was reported by 39 jurisdictions in 28 states.
• “Methamphetamine from Mexico is becoming more available in Michigan. The Mexican produced methamphetamine is crystal methamphetamine and its cost is significantly lower, $35/gram vs. $100/gram.” (Michigan)
• “The trend has gone from local manufacturing (Birch Method) to importing Mexican meth.” (Kentucky)
• “Approximately 85 percent of the illegal drugs purchased in a recent undercover operation was ice methamphetamine that we have traced to Mexican drug cartels.” (Tennessee)
• “99.9% of all the methamphetamine seized is in the form of crystal meth. We rarely see methamphetamine produced locally or in a powder form. Nearly all of the methamphetamine seized is a product of illicit large scale labs in Mexico.” (Arkansas)

DISCUSSION and CONCLUSIONS
The findings demonstrate that while most law enforcement jurisdictions continue to confront problems related to the opioid epidemic, methamphetamine use and related problems are increasing and most methamphetamine is being imported from Mexico. Location-specific factors (e.g., opioid overdose deaths and price) appear to affect methamphetamine use patterns, including opioid-methamphetamine polysubstance use, which can be particularly dangerous. Highly potent adulterants (e.g., illicit fentanyl) added to both methamphetamine and heroin likely compound the risks for polysubstance users. Given the geographic diversity of the observed increases in methamphetamine use, law enforcement, public health officials, and substance abuse treatment providers must be attuned to this emerging drug trend.

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