

Community Epidemiology Work Group - December 2000 preliminary report

More and more cities and countries around the world are setting up epidemiology groups to provide up to date information on drug use patterns. Epidemiology is the study of the nature and extent of health problems. Epidemiology groups concerned with drug use can provide information on new drug use trends quite quickly because they bring together information that is being collected anyway.

This is a summary of the most recent report of the Community Epidemiology Work Group (CEWG) **in the United States**, the oldest and best-developed drug use epidemiology network in the world. Professionals in 21 cities develop profiles of drug use for their cities and contribute to a national US profile.

Aims:

Some of the aims of the CEWG reports are:

- to analyze drug abuse patterns and trends;
- to alert authorities and the general public, to the current situation and potential problems so appropriate, timely action can be taken;
- to provide a forum for discussion on trends and patterns.

Methods:

These groups bring together information from a variety of sources, such as public health agencies, medical and treatment programs, coroners' offices, the courts, prisons and police to develop a picture of the drugs of concern, problems resulting and evolving patterns.

Results:

COCAINE/CRACK use is continuing a decline that began in the mid-1990s in many cities, a trend reported in 18 of the 21 CEWG areas. The fact that crack abusers are getting older and no longer using appears to be a major factor in the downward trend.

HEROIN use and problems are increasing in most CEWG sites, due to cheaper prices and higher quality in many cities. As in the past, CEWG members continued to report increases in heroin use and problems among young people, (i.e. increasing numbers of youth going to treatment and to emergency wards). Heroin is often used with cocaine (either concurrently or sequentially).

A study of 120 young heroin abusers (age 18 to 25) in San Francisco, focusing on their beliefs about overdose, shows that abusers are generally misinformed about the reasons for over-dosing, what they can do to lower their risk of overdosing, and actions to take if they do overdose.

MARIJUANA use showed a dramatic increase between 1990 and 1998 in all CEWG areas for such reasons as: increased availability of the drug; increased concentration of THC (from 3.7 percent in 1996 to 7 percent in 1999), as well as in sinsemilla (from 10.1 percent in 1990 to 13.1 percent in 1999); and increased use of other substances in combination with marijuana, e.g., in **blunts (marijuana packed in cigar wrappers)**.

Marijuana use trends have been mixed since 1998 across CEWG areas. It appears abuse of the drug has remained the same in some areas after the dramatic upsurge from 1990-98. However, CEWG members reported increases in those going to treatment for marijuana dependency. Also, marijuana is more likely than other illicit drugs to be used in combination with other substances, including hydrocodone and MDMA (ecstasy).

METHAMPHETAMINE (ice) abuse is rising after a 2-year decline, and use of the drug continues to spread to areas outside the US west coast and southeast where abuse has been most concentrated in the past. Reports from 11 CEWG areas indicate that methamphetamine is being used along with other drugs at dance venues such as raves.

MDMA (ecstasy) is being closely watched and members from 17 of the 21 cities report that ecstasy use has become more widespread. For example, a Massachusetts school survey shows that ecstasy use increased sharply among high school students, from 6 percent in 1996 to 15 percent in 1999. A survey of patients in **Seattle**, conducted from February to July 2000, showed that **44 percent of the younger patients (age 14 to 24) and 43 percent of the patients age 25 and older had used ecstasy at some point in their lives.**

CEWG members report that ecstasy is now being used in a variety of settings, including house parties, by different age groups, but predominantly white middle class young adults. MDMA use, in combination with marijuana/hashish was mentioned in emergency ward records 796 times in 1999 in contrast to just 8 times in 1990.

Authors' Comments:

This is a report of findings presented at the 49th meeting of the Community Epidemiology Work Group (CEWG) held in San Francisco, California, on December 12-15, 2000. Sponsored by the US National Institute on Drug Abuse (NIDA), the CEWG is a network of epidemiologists and researchers in the United States that meets biannually to review current and emerging substance abuse problems. Increasingly, researchers from other countries as well as international agencies like UNDCP are attending and reporting.

Reviewer's Comments:

School or country surveys are useful for learning about patterns, but they are very costly, so they cannot be undertaken very often. Survey information often becomes outdated because drug use patterns can change so quickly. Information from epidemiology groups such as CEWG can provide more timely information.

Admissions to treatment for marijuana problems in the US have risen dramatically. This may be due in part to the increased strength of marijuana; there is also a pattern of combining it with alcohol, cocaine and other substances, which has the potential to increase harm. However, the increase in marijuana treatment might also be explained by the dramatic increase in the number of Drug Courts in the US - these courts allow users to go to treatment instead of prison if they agree to certain conditions.