Navigating the New Stimulant Landscape:

Consumer Experiences and Illicit Drug Supply Insights from the RACK and MADDS projects in Massachusetts

Traci C. Green, PhD, MSc

Opioid Policy Research Collaborative, The Heller School for Social Policy and Management, Brandeis University

Stimulant Use – National Trends

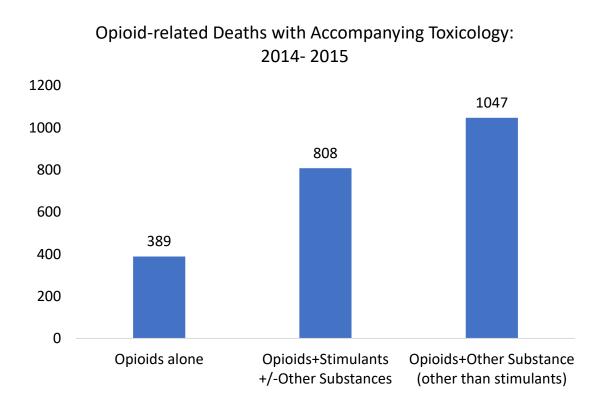
Nationally, there has been an enormous rise in drug overdose deaths involving cocaine.

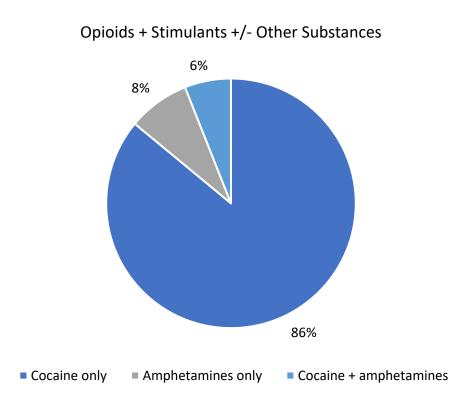
- About 1 in 5 (13,942; 19.8%) of the 70,237 drug overdose deaths that occurred in the United States in 2019 involved cocaine. This is a 34.4% increase from 2016.
- From 2016 to 2017, death rates involving cocaine and psychostimulants increased across age groups, racial/ethnic groups, county urbanization levels, and multiple states.
- Opioids were also involved in 72.7% of cocaine-involved deaths, primarily synthetic opioids like fentanyl.
- Synthetic opioids appear to be the primary driver of cocaine-involved death rate increases, and recent data point to increasing synthetic opioid involvement in psychostimulant-involved deaths.

Source: Mbabazi Kariisa, PhD; Lawrence Scholl, PhD; Nana Wilson, PhD; Puja Seth, PhD; Brooke Hoots, PhD. Drug Overdose Deaths Involving Cocaine and Psychostimulants with Abuse Potential — United States, 2003–2017. Morbidity and Mortality Weekly / May 3, 2019 / 68(17);388–395

Stimulant Use – Massachusetts

- In MA, opioid-related overdose deaths often involve stimulants, namely cocaine
- What is unknown is if these drugs were taken in combination, sequentially, or without the user's knowledge





Source: MDPH

Research and Evidence Base – RACK Consumer Knowledge Study

Rapid Assessment of Consumer Knowledge (RACK)

- 2019 study funded by CDC and DPH/BSAS which examined trends in cocaine-opioid involved overdose deaths in Massachusetts using data already collected for CDC surveillance from the State Unintentional Drug Overdose Reporting System (SUDORS).
- Utilized surveys and interviews specific to cocaine use with people who use drugs living in the communities with the highest burden of cocaine-opioid overdose deaths in the state.

Key findings:

- Compared to non-cocaine involved opioid overdoses, cocaine-opioid overdose deaths were:
 - More likely to be Hispanic and non-Hispanic Black
 - More likely homeless
 - Slightly younger (25-34)
 - More likely to have recently been released from jail/prison
 - More likely to have recently been released from hospital
 - Less likely to have been recently released from drug treatment or residential treatment

Research and Evidence Base – RACK Findings on At-Risk Populations

Special Considerations: Men who have Sex with Men (MSM)

- New HIV infections in MA: MSM remains predominant exposure mode.
 Stimulant use is major factor in transmission
- Consumption of drugs to facilitate or enhance sexual activity (Party and Play)
- 25% of MSM report using stimulants in context of sex
- Mostly smoking of crystal meth but also booty bumping, less so injection
- Less harm reduction service/syringe service program uptake for meth-related supports, more treatment seeking
- Socio-economic status and sex work considerations

Source: SUDORS overdose death surveillance, Massachusetts

Research and Evidence Base – Industries and Employees Most At-Risk

 Certain industries and employment categories have been impacted by cocaine-involved opioid overdose more than others.

Employment	N	%	Example positions
Construction/Trades	236	28.8	Construction worker, electrical apprentice, iron worker
Not in workforce	155	18.9	Disabled, homemaker, student
Accommodation and food services	94	11.5	Bartender, chef, waitstaff
Healthcare	55	6.7	Counselor, home health aide, medical assistant

Source: SUDORS overdose death surveillance, Massachusetts

Research and Evidence Base – Availability and Cost

- Methamphetamine use is uncommon, expensive, comparatively, but those who use it have easy access.
- Cocaine and crack, in contrast, are readily available and inexpensive for more people.

Drug availability, across MA communities

Perceived Availability of Drugs on the Street n (%)			
	Under 1 hour	A few hours	1 day or longer
Buprenorphine/ Suboxone (n=33)	28 (85)	4 (12)	1 (3)
Heroin (n=41)	36 (88)	3 (7)	2 (5)
Fentanyl (n=33)	31 (94)	2 (6)	
Benzodiazepines (n=26)	18 (69)	5 (19)	3 (12)
Rx Opioids (n=26)	13 (50)	5 (19)	8 (31)
Cocaine (powder) (n=43)	31 (72)	7 (16)	5 (12)
Crack (n=44)	38 (86)	5 (11)	1 (2)
Methamphetamine (n=20)	15 (75)	4 (20)	1 (5)

Street prices, across MA communities

Drug	Estimated Street Price
Buprenorphine/Suboxone	\$7.45/strip
Heroin	\$56.90/gram
Fentanyl	\$59.23/gram
Benzodiazepines	\$4.30/per pill
Rx Opioids	\$.99/per mg
Cocaine	\$66.63/gram
Crack	\$53.55/gram
Methamphetamine	\$71.11/gram

Source: SUDORS overdose death surveillance, Massachusetts

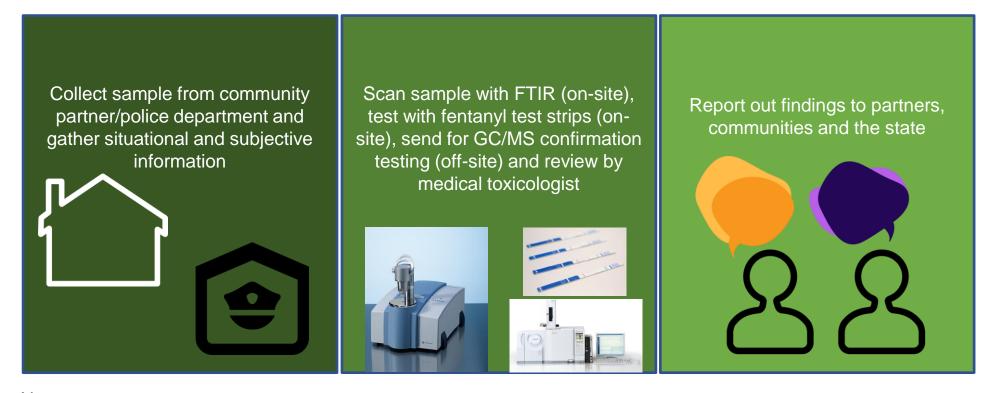
Research and Evidence Base – Implications and Possible Interventions

Based on the RACK study's findings, a number of possible interventions emerged:

- Broad-based educational campaigns addressing cocaine, crack users even occasional users
- Syringe Service Program/Provider communications focused on cocaine risks
- Include fentanyl test strips and education in safe smoking/safe snorting kits
- Street distribution level outreach/interventions
 - Drug checking, education
 - Packaging protections, prevention plan
 - Naloxone distribution ambassadors or locales?
- Engage cut distribution points, especially bodegas in outreach/intervention
 - Couple with safe syringe sale, distribution
- Offer Community Drug Checking: People want to know what's in their drugs.
 - Most primary cocaine/crack users indicated that they would avoid fentanyl laced drugs if they
 could
 - See following slide for additional details on Community Drug Checking

Interventions – MADDS Community Drug Checking

Massachusetts is the first and only state conducting drug supply screenings through the Massachusetts Drug Supply Data Stream (MADDS)



Notes:

GC/MS = gas chromatography mass spectrometry FTIR = Fourier transform infrared spectroscopy

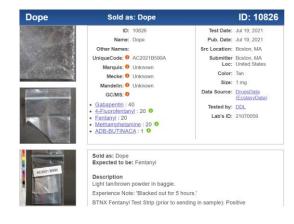
Interventions – MADDS Community Drug Checking Results

Results from the **Massachusetts Drug Supply Data Stream (MADDS)** from sampling in Quincy, New Bedford, Lynn, Lowell, Boston, Berkshire County indicated a strong presence of fentanyl.

However, 2021 MADDS samples indicated that the current supply of cocaine has been even more poisoned, revealing more toxic 4-fluorofentanyl (analog) entering the local supply in the past year.

Substance	Powder Cocaine	Any Pill/ Counterfeit pills	Methamphetamine	Crack	Heroin
Suspected	19	26/16	21	19	161
Unknown, + for column substance	34	12/7	2	25	48
TOTAL	53	38/23	23	44	209
Fentanyl present	13 (25%)	6 (16%/26%)	0 (0%)*	0 (0%)	178 (85%)

Sample MADDS Results, 2021



MADDS Findings – Turning Research into Public Health Policy

From the MADDS study findings, a number of public health interventions were identified, which are either being currently implemented or could be explored

MADDS Finding	Interventions / Public Health Strategy
The heroin drug supply is heavily inundated with fentanyl. Methamphetamine powder products rarely contain fentanyl. Fentanyl products may contain meth.	 Naloxone, low-barrier MOUD, harm reduction supplies, wound care, safe places for use, quick detection of overdose, community drug checking, communications to providers/systems about supply
 For any given suspected illicit pill, 16% appear to contain fentanyl. If a counterfeit pill is suspected, 26% contain fentanyl 	 Public service announcements/campaigns to reach people using counterfeit pills or non-prescribed pills urging to get naloxone, obtain fentanyl test strips, Never Use Alone hotline

MADDS Findings – Turning Research into Public Health Policy

MADDS Finding	Interventions / Public Health Strategy
Presently, about 25% of illicit drugs in powder form contain fentanyl, other than suspected heroin which contain higher proportions of fentanyl	 Public service announcements/campaigns targeted to important subgroups of people using illicit drugs in powder form. Harm reduction supplies and education, community drug checking, safer smoking and safer snorting kits to promote replacement, fentanyl test strips, naloxone
Illicit drugs may contain other things that can cause unexpected and harmful reactions when consumed.	Remain vigilant, share information about unexpected drug contents with provider, EMS, public safety to calibrate response
 Fentanyl exposure is possible through intentional mixing in drug preparation, mislabeled drugs, and reuse or sharing of drug preparation or materials used for administration (i.e., stem, pipe, syringe) 	Ensure sufficient supply of new sterile equipment (syringes, stems, etc), encourage community drug checking participation



Tracigreen@brandeis.edu

