

SUBSTANCE ABUSE INFORMATION FOR ACTION





Special Report

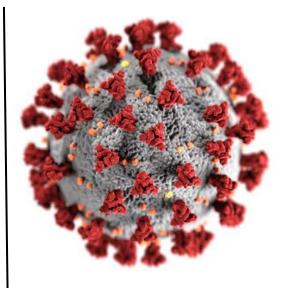
COVID-19 and Potential Risks for People Who Use Drugs

The novel coronavirus (COVID-19) may present additional risk factors for people who smoke or use drugs. COVID-19 is believed to have originated in China and was transferred from bats or other mammals to humans. The virus attacks the respiratory system, may cause severe respiratory illness, and has a higher mortality rate than seasonal influenza. Serious illness and deaths related to COVID-19 appear to be concentrated among older individuals and those with underlying health issues, including respiratory conditions, diabetes, and cancer. As a result, COVID-19 may be an especially serious threat to people who smoke or use drugs.

Smoking-related co-occurring conditions, including chronic obstructive pulmonary disease (COPD), cardiovascular disease, or other respiratory diseases may worsen the prognosis in patients suffering from COVID-19. Initial data from the Chinese Centers for Disease Control and Prevention show that individuals with chronic respiratory disease had a higher fatality rate of 6.3%, as compared to 2.3% overall. In addition, vaping and the use of aerosol inhalants in e-cigarettes causes harm to lung cells and reduce the body's ability to fight infection. Given this, individuals who vape may also have increased risk for COVID-19 complications.

Opioid use may cause additional COVID-19-related risks among individuals with opioid use disorder (OUD) or individuals who take opioids at high doses for medical reasons. Opioids cause breathing to slow and this may increase the risk of experiencing a harmful decrease in blood-oxygen levels (hypoxemia) or even an overdose. Given that COVID-19 causes reduced lung capacity, additional risks related to hypoxemia may be especially dangerous for individuals who use opioids.

Individuals who use methamphetamine may also face added risks. Methamphetamine constricts blood vessels and contributes to pulmonary damage and pulmonary hypertension. Thus, additional monitoring by clinicians may be required when treating COVID-19 among individuals with histories of methamphetamine use. This is especially important, given recent trends showing increasing rates of methamphetamine use.



This illustration, created at the Centers for Disease Control and Prevention (CDC), reveals ultrastructural morphology exhibited by coronaviruses. Note the spikes that adorn the outer surface of the virus, which impart the look of a corona surrounding the virion, when viewed electron microscopically. A novel coronavirus, named Severe Acute Respiratory Syndrome coronavirus 2 (SARS-CoV-2), was identified as the cause of an outbreak of respiratory illness first detected in Wuhan, China in 2019. The illness caused by this virus has been named coronavirus disease 2019 (COVID-19).

Source: CDC/Eckert and Higgins https://phil.cdc.gov/Details.aspx?pid=23312

In addition to physical complications, COVID-19 may exacerbate existing health and social problems among people who use drugs, including decreased access to health and social services and greater likelihood of housing instability and incarceration. People with addiction, who already face stigma and discrimination in healthcare settings, may find increased barriers to COVID-19 treatment. Homelessness or incarceration may place people who use drugs in environments where they are in close contact with others resulting in increased risk for COVID-19 transmission. Moreover, treatment and support services, including AA and other support meetings, may be disrupted by public health measures including quarantines and temporary organization closures.

Responses to COVID-19 and Resources

In response to COVID-19, the Substance Abuse and Mental Health Services Administration (SAMHSA) issued guidance related to substance abuse treatment. States with declared states of emergency, including Florida, may request that stable opioid treatment program patients receive 28 days of take-home medication for OUD. Furthermore, SAMHSA has issued guidance which allows for greater use of telemedicine for the treatment of OUD. SAMHSA has additional COVID-19 resources, guidance, and answers to frequently asked questions related to behavioral health treatment, OUD, and substance use which can be found at www.samhsa.gov.

To support in people in recovery, a new, free smartphone app, Connections, is available. Through a partnership with Addiction Policy Forum and CHESS Health, the Connections app was designed to ensure that people in recovery have a virtual support network, even while practicing social distancing. To sign-up for Connections, visit https://www.addictionpolicy.org/connections-app.

Alcoholics Anonymous (AA) also released guidance regarding COVID-19, which contains a list of links to virtual AA meetings held via telephone, e-mail, video conference, and 24-hour-a-day chat rooms. Information can be found at https://www.aa-intergroup.org/directory.php.

Broward County COVID-19 information and updates can be found at https://www.broward.org/CoronaVirus/Pages/default.aspx.

Source: National Institute on Drug Abuse. https://www.drugabuse.gov/about-nida/noras-blog/2020/03/covid-19-potential-implications-individuals-substance-use-disorders

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