



CONCURRENT DISORDERS

CAPACITY BUILDING TEAM

April Newsletter

CCENDU Drug Alert—Nitazenes

The Canadian Community Epidemiology Network on Drug Use (CCENDU) has released a drug alert regarding **nitazenes**.

What are Nitazenes?

- Potent synthetic opioids from benzimidazole-opioids drug class
- Some estimated to be several times more potent than fentanyl
- Typically appear unexpectedly in drugs expected to contain other, more traditional opioids, often alongside non-medical benzodiazepines

Why Are They a Concern?

- Rising presence in unregulated drug supply
- Tend to be used unintentionally and in unknown quantities

- Can increase risk of accidental overdose
- Overdoses involving nitazenes may be difficult to reverse
- Fentanyl test strips cannot detect nitazenes, and detection by point-of-service drug checking requires sensitive equipment that is not always available
- Relationship to health risks and overdose deaths is difficult to monitor

Local data from Toronto's Drug Checking Service first identified a nitazene in February 2021 and has since identified seven different analogs.

The latest report from Toronto's Drug Checking Service, results from samples February 26-March 11, unexpectedly found 23% of samples to have contained a nitazene opioid. 19% of the expected fentanyl samples checked contained at least one nitazene opioid.

[CLICK HERE](#) for the full alert

Clinical Corner: Pregnancy Supplement— Provincial Guideline for the Clinical Management of High-Risk Drinking and Alcohol Use Disorder

This [guideline supplement](#) reviews evidence pertaining to care principles, screening and risk assessment methods, and treatment and continuing care options for pregnant individuals with high risk alcohol use and alcohol use disorder. The objectives are to address barriers to routine screening for the early identification of alcohol use and alcohol use disorder among pregnant patients and to promote the uptake of appropriate evidence-based prevention, risk reduction, and interventions. Emphasis is placed on the need for a non-judgmental, inclusive, trauma-informed, and culturally safe approach to care. This document supplements the British Columbia Centre on Substance Use (BCCSU) [Provincial Guideline for the Clinical Management of High-Risk Drinking and Alcohol Use Disorder](#) with clinical guidance specific to pregnant and post-partum patients.

The British Columbia Centre on Substance Use is also developing the first [National Guideline for the Clinical Management of High-Risk Drinking and Alcohol Use Disorder \(AUD\)](#). The guideline will help Canadian health care providers quickly identify and address harmful drinking, and treat and support patients throughout their lifetime and is expected to be available in 2022-23.

Alcohol Education Tailored for Youth

In February 2021 the [Canadian Centre on Substance Use and Addiction \(CCSA\) conducted a study](#) to build upon previously produced knowledge and to develop tailored public education resources to support Canadian youth regarding the use of alcohol. The specific goals of the study were to learn how to develop knowledge products that better relate to young people to address the following areas:

- The harms associated with alcohol use;
- Harm reduction strategies youth can utilize; and
- The association between alcohol consumption and the risk of developing breast cancer.

Two online focus groups were used to gather insight into young people's perspectives on several topics: Canada's Low-Risk Drinking Guidelines, drinking and youth culture, young people's use of alcohol to cope with stress, harm reduction messages about alcohol, and the association between alcohol and breast cancer. Participants provided insight as to what kinds of information materials about alcohol they would like to see be developed by CCSA for a youth audience and the messages most important to them.

In regards to the Low-Risk Alcohol Drinking Guidelines and youth drinking culture, participants largely

felt that the guidelines do not align well with youth culture generally and their own drinking habits. Participants reported the tendency for youth to engage in binge drinking with the goal of intoxication, contrary to the very nature of the Low-Risk Alcohol Drinking Guidelines.

Youth primary focused on the short-term risks of alcohol consumption, rather than long-term, highlighting the need for messaging about alcohol for youth to be clear and focused on the facts.

Finally, rather than using alcohol to cope with and control stress, the youth participants utilized alcohol as a reward system to motivate the completion of tasks.

The final products developed by the CCSA based on youth input include knowledge products that highlight the health risk of binge drinking, provide tips for young adults to reduce their risks of experiencing alcohol-related harms, and one focused on the relationship between alcohol consumption and breast cancer.



Understanding the service needs of youth with opioid use

A recently published study by [Sverdlichenko, Hawke, & Henderson \(2022\)](#) sought to understand the demographics, mental health, substance use and co-occurring concerns of service-seeking youth who use opioids. Their goal was to inform future service and research in this area. The study consisted of 1779 participants between 14-24 years of age who were seeking substance use services at an urban treatment facility in Toronto, Ontario between 2008 and 2019. The authors believe that significant barriers to treatment and a lack of appropriate programming for youth with opioid use may lead to worse outcomes for youth, emphasizing the necessity for a more comprehensive understanding of the specific needs of this patient population.

Several barriers to treatment are noted such as limited recognition of problematic substance use and a

preference to self-manage problems, inadequate or inaccessible programming, and a lack of integration of mental health and substance use services into mainstream healthcare. Through the completion of a battery of self-report questionnaires, the authors identified findings advantageous to addressing youth with opioid-related concerns and validate previous reports that youth with opioid use have more complex treatment needs. Youth who use opioids in this study were more likely to experience challenging social determinants of health, to report more concerns surrounding substance use including earlier age of onset and increased frequency, endorse internalizing and externalizing symptoms.

Furthermore, the results of this study emphasize the growing need to evidence-based programs for opioid use amongst youths in the context of community-based integrated models of care and support the call to action for more integrated models of care.

Trends in Cannabis Use Prior to First Admission to Inpatient Psychiatry in Ontario, Canada, Between 2007 and 2017

New research published in [The Canadian Journal of Psychiatry, by McGuckin et al., 2021](#), analyzes the correlation between cannabis use and admission to inpatient psychiatry care in Ontario: *Trends in Cannabis Use Prior to First Admission to Inpatient Psychiatry in Ontario, Canada, Between 2007 and 2017*. The [report in short](#) and [infographic](#) from the Canadian Centre on Substance Use and Addiction are based on the research.

Key points from the article include:

- Prior cannabis use has become more common among individuals at first admission to inpatient psychiatric beds in Ontario.
- Young adults (ages 18 to 24 years) were more likely to use cannabis before their first admission to inpatient psychiatry than older adults (ages 55 years and older).
- Cannabis use increased more in males than females between 2007 and 2017. Males with schizophrenia were more likely to use cannabis but females with schizophrenia were less likely to use cannabis.
- Gender differences in cannabis use exists among individuals at first admission to inpatient psychiatry in Ontario.
- Those with prior abuse (e.g., physical, verbal, sexual) and lower levels of education have increased chance of cannabis use.
- Having a mood disorder or experiencing mania or psychotic symptoms were strongly associated with cannabis use.
- Using tobacco and alcohol were strongly associated with cannabis use.

The authors noted the presence of complex interactions between cannabis use and mental illness, including an established relationship between regular cannabis use and psychosis, as well as the need to understand broader patterns of cannabis use among persons with mental illness, especially as cannabis policies in Canada have evolved in the last several years. This study aims to inform cannabis research and policy as it demonstrates the effect of cannabis-related policies on cannabis use and mental health.

The study analyzed trends in nonmedical cannabis use in the 30 days before individuals were first admitted to inpatient psychiatry beds in Ontario, Canada between 2007 and 2017. They also examined the characteristics associated with persons who reported cannabis use prior to admission. Data was analyzed from the Ontario Mental Health Reporting System of the Canadian Institute for Health Information and included data for all persons aged 18 years and older at their first admission to a psychiatric hospital for all admissions that occurred between January 1, 2007 and December 31, 2017.

The proportion of patients using cannabis within 30 days of admission increased from 16.7% in 2007 to 25.9% in 2017, with 20.1% of patients reporting use across all years. The data analysed identified a significant increase in the proportion of patients who reportedly used cannabis within 30 days of their first admission to inpatient psychiatry between 2009 and 2017 compared to 2007. Cannabis use was noted as being more common amongst individuals admitted to inpatient psychiatry compared to the general population, with 20% and 14% reporting use respectively in the prior year in 2017. As the age-adjusted proportion of the general Canadian population who reported use increased, the increasing proportion of psychiatric patients reporting use may be indicative of a broader national trend of increased use.

Questions were raised as to changing sentiments around the use of cannabis, the use of cannabis for self-medication of unmet mental health needs, and changes to cannabis policies as potential influences to their findings. The authors of the study concluded that as medical cannabis policies in Canada have evolved, reported cannabis use prior to a first admission to inpatient psychiatry has increased.

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***Spring: a lovely reminder of how beautiful change can truly be.
– Unknown***

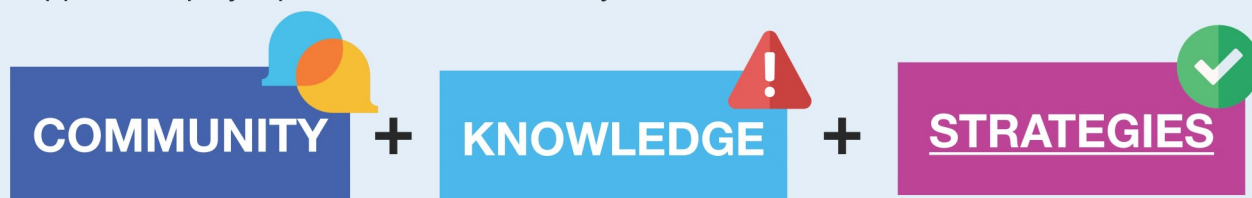
The Young Adult Substance Use Program (YA-SUP)

LOVED ONES EDUCATION GROUP

Community Reinforcement Approach Family Training

The YA-SUP Loved Ones Education Group is a group for the parents and other supporters of young adults (17-25) with substance use problems. This may include immediate, extended, or chosen parents and family members or close friends and partners.

This group is based on **Community Reinforcement Approach to Family Training – Support and Prevention (CRAFT)**. CRAFT is an evidence-based approach to change the way you interact with your child or loved one to promote positive relationships and recovery. Substance use can be difficult to understand and challenging to cope with. CRAFT talks about how **behaviour makes sense** and how the environment, community, and social support can play a powerful role in recovery.



This group includes 8 sessions:

- Group Overview, Safety, and Self Care
- Understanding Substance Use
- Understanding Co-occurring Mental Health Concerns
- Positive Communication
- Past Patterns & New Strategies
- Rewards & Coping with Intoxication
- Allowing Negative Consequences
- Special Cases, Review, & Next Steps



Sign up today to participate in one of our future groups.

The next cycle will begin on March 1, 2022.

Groups run for 8-weeks, on Tuesday's 6:00-7:30pm.

If you are interested in participating in a Loved Ones Education Group, please register here: <https://www.cdcapacitybuilding.com/youth-program>

St. Joseph's
Healthcare  Hamilton

Young Adult Substance Use Program (YA-SUP)

A program designed to meet the unique needs of young adults (17-25 years of age)

Who is this program for?

- Young adults age 17-25
- Young Adults looking to make changes to their substance use
- Young Adults committed to attending **group-based** treatment
- Those not in immediate crisis

How to Refer?

CONNECT (*self or professional*)

(905) 522-1155, Ext.36499

Internal referrals

can be made via Dovetale

Loved Ones Education Group

An 8-week group for the parents and other supporters of young adults with substance use problems focusing on changing the way you interact with your child or loved one to promote positive relationships and recovery.

Please register on the website:
<https://www.cdcapacitybuilding.com/youth-program>

The Young Adult Stream has a core ~12-week group structure and includes:

Five individual sessions including:

- ✓ Intake assessment (2 hours)
- ✓ 1 week feedback session (1 hour)
- ✓ Check-ins (1 hour) at weeks 4, 8, and 12

YA-SUP

Group Programming including:

- ✓ **Mind-Drug Connection** based in Cognitive Behavioural Therapy and Relapse Prevention.
- ✓ **Balancing Emotion and Mind** based on Dialectical Behavioural Therapy.
- ✓ **Mindfulness** based on Mindfulness-Based Stress Reduction.

Other Groups Coming Soon

We recommend attending 2 or more groups per week.



Young adults can continue accessing groups even after individual sessions are completed.



Consultations (time-limited) with a Nurse Practitioner, Psychiatrist, or Psychologist *may* be offered to help clarify diagnoses, recommend medications, and conduct additional testing. YA-SUP is **not intended for those only requiring access to consults.**

We want to work together. The YA-SUP is one part of a complex health and mental health system. We want to work together with current health and mental health providers to share care and collaborate to optimize treatment.

Reduce negative impacts of substance use

Improve mental health and wellbeing

Increase substance-free activities

St. Joseph's
Healthcare  Hamilton

More information here: <https://www.cdcapacitybuilding.com/youth-program>

One-Page Overview

[Click here](#) for a one-page overview of the YA-SUP program

Understanding Harm Reduction

TUESDAY, APRIL 26TH
12:00PM - 1:00PM

Presented by:

Tracie Groff, Community Support Counselor & Addiction Specialist

Michelle Sanderson, Community Support Counselor & Addiction Specialist

Please join us April 26th for a discussion on understanding harm reduction - What does it mean? Why is this approach important? What does it look like in practice? And more.

Join Tracie Groff and Michelle Sanderson in an informative presentation on harm reduction, with opportunity for questions and discussion.

Register through Eventbrite HERE:

<https://www.eventbrite.ca/e/cdcbt-april-education-session-understanding-harm-reduction-tickets-321436253487>

Contact: kayv@stjosham.on.ca

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Healthcare  Hamilton

Upcoming Education Opportunity

The CDCBT will be holding its monthly education session on TUESDAY, APRIL 26TH, from 12:00pm-1:00pm virtually over Zoom. This month we will be discussing **Harm Reduction**. Please see page 6 to view the poster and access the link to register. Please note that this education will not be held through OTN.

Educational Opportunity

Cannabis and Older Adults eLearning Modules developed by the Canadian Coalition for Senior's Mental Health in partnership with Baycrest

- Asynchronous eLearning
- 11 individually accredited modules
- No cost to learners
- For physicians, nurse practitioners, other healthcare provider and healthcare students

[CLICK HERE](#) for more information and to register

Your CD Capacity Building Contacts

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Bill Baker (Addiction Specialist) Charlton Site	Ext. 32801; Pager 5799
Jonathan Paul (Community Support Counsellor), West 5th & Charlton Site	Ext. 36287; Pager 5799
Melissa Bond (Administrative Assistant)	Ext. 39343
Michelle Sanderson (Community Support Counsellor), West 5th & Charlton	Ext. 36868; Pager 5707
Nick DiCarlo (Addiction Attendant), West 5th & Charlton Site	
Patrick Geuba (Registered Nurse)	
Stephanie D'Odorico (Mental Health Worker), West 5th & Charlton Site	Ext. 35047
Tracie Groff (Addiction Attendant), West 5th & Charlton Site	Ext. 34901
Victoria Kay (Concurrent Disorders Intern)	Ext. 39124
Opioid Replacement Therapy consultations available through Addiction Medicine Service Team	Contact Paging

*Updated evening/night coverage for ED/PES: Monday to Thursday 8:00pm-6:00am, Saturday and Sunday 12:00pm-12:00am

SJHH Intranet: <http://mystjoes/sites/Depts-A-L/concurrent>

External Website: <https://www.cdcapacitybuilding.com>