

Chicago Metro Sentinel Community Site (SCS) Drug Use Patterns and Trends, 2020

August 2020

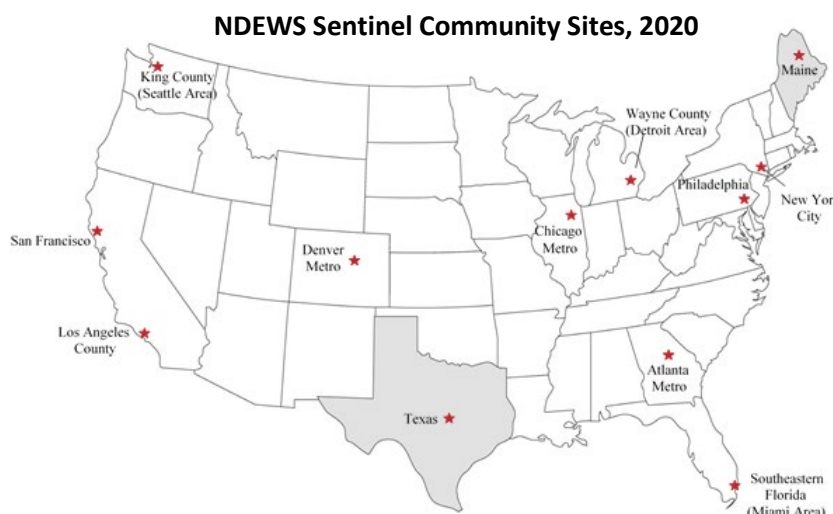
NDEWS Coordinating Center

NDEWS *National Drug Early Warning System*

Funded at the Center for Substance Abuse Research by the National Institute on Drug Abuse

A unique feature of NDEWS is its capability to describe and compare drug use patterns and trends in selected communities across the United States. The NDEWS Coordinating Center works closely with Sentinel Community Epidemiologists (SCEs) in

12 Sentinel Community Sites (SCSs) across the U.S. Emerging drugs and changing drug trends are monitored by each local SCE utilizing indicators such as drug overdose deaths, treatment admissions, hospital cases, poison center exposure calls, and law enforcement seizures. **In May 2020, each SCE was asked to review available indicators and identify up to five drugs they considered most important to summarize for their site and include in their 2020 annual *Drug Use Patterns and Trends Report*.**



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National Drug Early Warning System (NDEWS) Chicago Metro Sentinel Community Site (SCS) Drug Use Patterns and Trends, 2020

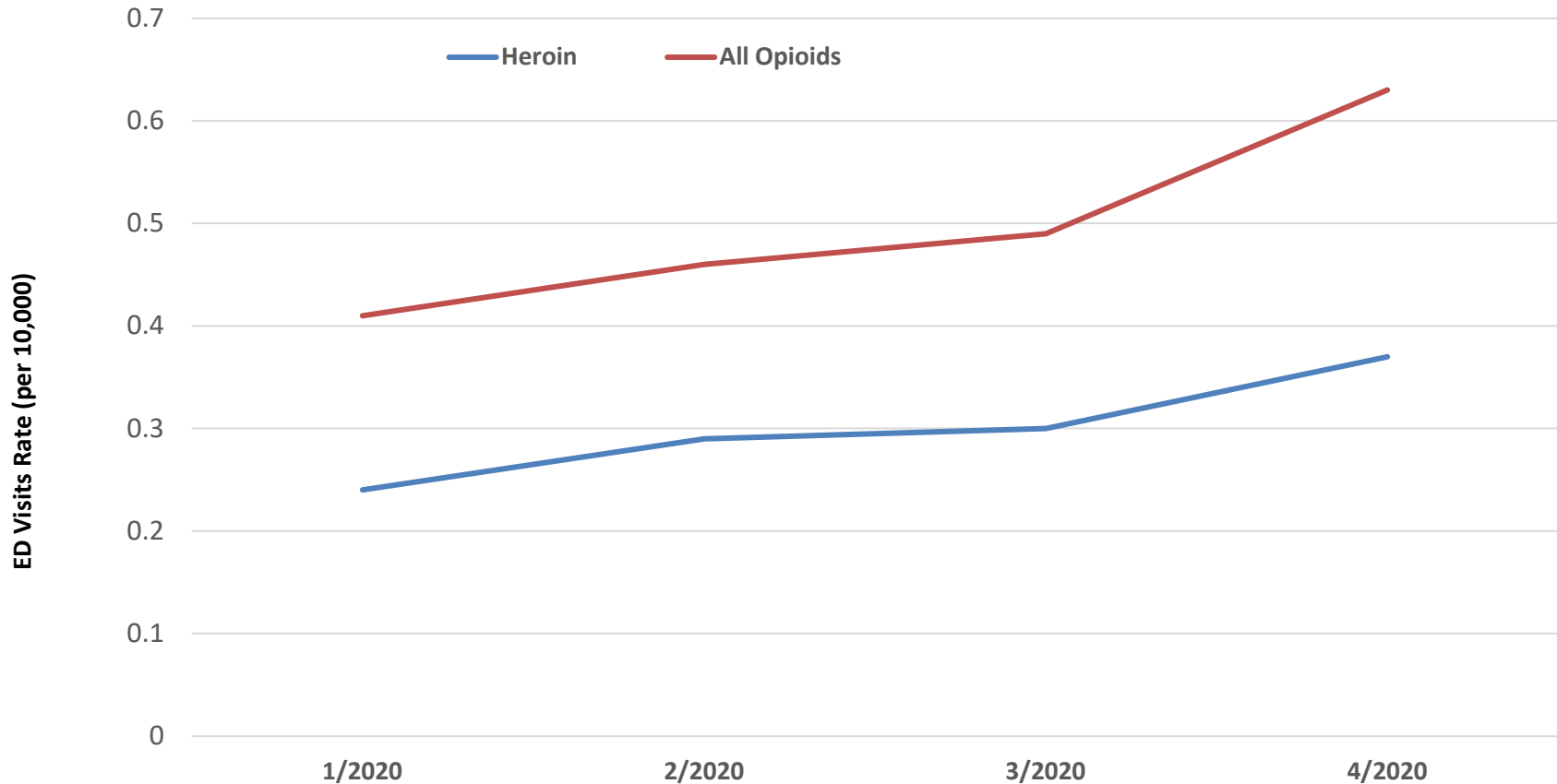
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Highlights

- **Fentanyl or its analogues** were present in the majority of opioid-related overdoses, which rose again in 2019 and appear to be rising in 2020. By May 2020, the COVID-19 pandemic appears to have caused little disruption in Chicago's street-level drug markets.
- **Methamphetamine** ('ice') reported as "new drug" in some areas of Chicago. In rural southern Illinois, there is considerable overlap in the use of methamphetamine and opioids. During SARS-CoV-2, a supply interruption was reported for methamphetamine in some rural areas of southern Illinois.
- **Cocaine:** Stable presence in Chicago MSA, and the most common form continues to be 'rock'
- **Counterfeit prescription drugs:** Counterfeit Xanax and generic alprazolam very common among purported benzodiazepines seized by police.¹
- **Ecstasy** more often contains MDMA; methamphetamine also somewhat common in drugs sold as Ecstasy.¹
- **Substituted cathinones:** Ethylone most common cathinone in Chicago area¹
- **LSD:** Notable uptick in LSD sold on blotter paper.¹
- **Cannabis:** Increase in submissions to the local forensics lab due to traffic stops observing "unsecured cannabis," including smoking while driving.¹

¹Personal communication with the Illinois State Forensic Science Center at Chicago, May 24, 2020. Note that the COVID-19 pandemic caused changes in lab operations such that the information presented here may be incomplete.

Monthly Rate of Opioid and Heroin Overdoses in Illinois Emergency Departments January - April 2020



Source: <https://idph.illinois.gov/OpioidDataDashboard/> (accessed May 19, 2020). Syndromic surveillance data includes all Illinois acute care hospital emergency department (ED) visits. Data presented is provisional. Data is submitted to IDPH in near real-time. Opioid overdoses are inclusive of heroin overdoses. Visits are classified as overdoses due to opioid and/or heroin based on searches of both chief complaint text and/or diagnosis codes.

Opioid-Related Deaths in Two Chicago MSA Counties: 2016 - 2019

Cook County (includes Chicago)	2016	2017	2018	2019^
no. deaths ^{1, 2}	970	1037	1135	1246
mean age ²	42.8	44.1	43.5	46.2
fentanyl present*	49%	56%	71%	74%
Will County (includes Joliet)	2016	2017	2018^	2019^
no. deaths ³	96	91	90	101
mean age ³	37.4	37.2	35.9	38.3
fentanyl present*	34%	59%	65%	90%

^Additional data may be forthcoming *Includes fentanyl analogues

- Opioid-related deaths rose in both counties in 2019.
- Fentanyl and heroin are present in most opioid-related deaths.
- The median age of Cook County decedents aligns with initiating opioid use when 'China white' became the dominant form of heroin in the early/mid-1990s; the age of Will County decedents aligns with initiating in mid- 2000s when prescription opioid use was common.

¹Source: <http://www.dph.illinois.gov/sites/default/files/Drug%20Overdose%20Deaths%20-%20August%202019.pdf> (accessed 11/6/2019)

²Source: Cook County Medical Examiner's Office <https://datacatalog.cookcountyil.gov/Public-Safety/Medical-Examiner-Case-Archive-Manner-of-Death-Char/jjtx-2ras> (accessed 5/19/2020)

³Source: Will County Coroner's Office: [h https://www.willcountyillinois.com/County-Offices/Judicial-Services/Coroner/2019-Overdose-Statistics](https://www.willcountyillinois.com/County-Offices/Judicial-Services/Coroner/2019-Overdose-Statistics) (accessed 5/19/2020)

Substance Use in Rural “Delta” Counties of Southern Illinois: Preliminary Findings from “ETHIC” study¹

- Sample area: southern Illinois Delta Region, which is largely rural
- Sample criteria: ≥15 years old; past 30 day injected any illicit drug or misused an opioid

Preliminary findings from baseline drug toxicology screening (n=113) collected in late 2018 to early 2019

opioid	fentanyl	methamphetamine	methamphetamine & opioid	benzodiazepine	mean no. of drugs
67%	17%	70%	43%	35%	4.2 range 1-10

Preliminary ethnographic findings:

- Ice methamphetamine of low cost and high quality has replaced locally produced methamphetamine and is said to be generating a new wave of users spanning a broad range of demographic characteristics.
- Fentanyl is recognized by people who use heroin as being locally present and deadly; overdoses are common.
- Opioid pain pills are increasingly difficult to acquire and street-level prices have increased.
- Drug sellers typically have access to multiple types of drugs, exposing buyers to more options.

¹Ending transmission of HIV, HCV, and STDs and overdose in rural communities of people who inject drugs (ETHIC). Mai Tuyet Pho, MD, University of Chicago, and Wiley Jenkins, PhD, Southern Illinois University School of Medicine). Funded by National Institute on Drug Abuse, Appalachian Regional Commission, CDC and SAMHSA

COVID-19 Pandemic and Illicit Drugs, Chicago MSA and Illinois May 2020

- *Number of drug submissions* to the State Forensic Science Center in Chicago declined notably during the pandemic.¹
- *Heroin/fentanyl*: Street-level reports suggest a small, short-lived decline in availability in Chicago early in the pandemic, followed by a return to pre-pandemic levels of availability. Quality is said to be within the typical pre-pandemic range, with perhaps a somewhat greater chance now to encounter sellers giving away free samples.
- *Methamphetamine ('ice')*: In rural southern Illinois, there were street reports in April of 'ice' being unsmokable due to it gumming up the pipe in which it was smoked. The 'ice' could still be injected or snorted. Availability of methamphetamine in the area was said to have declined. Ice was said to still be easily found in larger cities adjoining these rural areas (e.g., St. Louis).
 - Whether these changes are related to the arrest of a major local dealer several months earlier, supply chain issues caused by the COVID-19 pandemic, or other factors is unknown.
- *Treatment for Substance Use*
 - Drug treatment providers, following federal guidelines regarding COVID-19, are providing services through telehealth, including video and telephone conferencing. Face-to-face programs largely have been cancelled.
 - Insurers must cover normal treatment costs if delivered by telehealth.
 - Need for in-person drug screening is balanced by providers against other risks, such as patient needing to use public transportation.
 - Self-referral to drug treatment appears to have increased.
 - Telephone use challenging for homeless who encounter difficulty in accessing places to charge their phones.
- *Harm reduction services* in Chicago have reduced some face-to-face services (e.g., syringe exchange), because staff members often are persons at high risk if infected with SARS-CoV-2. Services such as case management are provided over the phone.
- *COVID-19 street services*: Funding from Chicago and a foundation supports street outreach to promote COVID-19 risk reduction. Services are provided by community-based groups involved in violence reduction or substance use harm reduction in neighborhoods with high rates of infection.

¹Personal communication with the Illinois State Forensic Science Center at Chicago, May 24, 2020.

Treatment Tables

Treatment data were not available for this SCS at the time this report was published.

Sources

DATA FOR THIS REPORT WERE DRAWN FROM THE FOLLOWING SOURCES:

Information on **drug reports among items seized and analyzed** in forensic laboratories is from the Illinois State Forensic Science Center at Chicago. The COVID-19 pandemic caused changes in lab operations such that the information presented here may be incomplete.

Drug-related mortality data on deaths were obtained from the following sources:

- Source: <https://idph.illinois.gov/OpioidDataDashboard/> (accessed May 19, 2020)
- Cook County Medical Examiner's Office <https://datacatalog.cookcountyil.gov/Public-Safety/Medical-Examiner-Case-Archive-Manner-of-Death-Char/jjtx-2ras> (accessed 5/19/2020)
- ³Source: Will County Coroner's Office: <https://www.willcountyillinois.com/County-Offices/Judicial-Services/Coroner/2019-Overdose-Statistics> (accessed 5/19/2020)

Substance use in rural Delta counties data are from:

- Ending transmission of HIV, HCV, and STDs and overdose in rural communities of people who inject drugs (ETHIC). Mai Tuyet Pho, MD, University of Chicago, and Wiley Jenkins, PhD, Southern Illinois University School of Medicine. Funded by the National Institute on Drug Abuse, Appalachian Regional Commission, CDC, and SAMHSA.

For additional information about the drugs and drug use patterns discussed in this report, please contact Lawrence J. Ouellet, Ph.D., Research Professor, Community Outreach Intervention Projects, Division of Epidemiology and Biostatistics, School of Public Health, University of Illinois at Chicago, MC 923, 1603 West Taylor Street, Chicago, IL 60612-4394, Phone: 312-355-0145, E-mail: ljo@uic.edu.