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COORDINATOR COMMENTS

by Sergeant Timothy Plummer

Looking at the enforcement efforts of law enforcement and DRE officers across the state during the last three months, it is nothing more than outstanding. There have been three National Enforcement efforts spanning 33 days; from the Fourth of July and Labor Day impaired driving crackdowns through the Three Flags and occupant protection campaign at the end of September.

Statistics for the Fourth of July period indicates that there were four people who died in four separate fatal traffic crashes during the 78-hour Fourth of July holiday period in Oregon. The reporting period this year was from 6:00 p.m., Thursday, July 3rd, through 11:59 p.m., Sunday, July 6th.

Based upon confirmed information reported at this time from Oregon law enforcement agencies to ODOT's Fatality Analysis Reporting Unit (FARS), fatal traffic crashes occurred in Linn County (2 fatal crashes), Malheur County, and Coos County. Last year, 3 people died in three separate fatal crashes during a 30-hour reporting period and in 2005 and 2006 when there was a similar 78-hour reporting period, eight people died each year in Oregon fatal traffic crashes.

During this holiday crackdown, Oregon DREs reported the following enforcement efforts: 30 DUII arrests, 10 Drug Evaluations, 7 drug related arrests, investigation of a DUII related crash, 15 MIP citations, 6 Truck inspections and a warrant service.

During the 78-hour 2008 Labor Day Holiday extended weekend the latest information indicates 11 people were killed in nine separate traffic crashes between 6:00 p.m., August 29th, and 11:59 p.m., September 1st. According to known police reports from Oregon law enforcement agencies each fatal crash involved a single vehicle, including two crashes in which two people were killed. Two others died in traffic crashes on Friday, August 29th, prior to the official reporting period's 6:00 p.m. start.

According to initial investigative information, alcohol is a possible contributing factor in two of the seven fatal crashes. Based upon known statistics gathered by ODOT's Fatality Analysis Reporting System (FARS), since 1985 about 53% of Labor Day holiday weekend fatalities were alcohol involved.

Oregon DREs reported the following activities during the Labor Day National Crackdown: 96 DUII arrests, 7 DUID arrests, 32 Drug Evaluations, participated in 14 saturation patrols, 18 special holiday events, 30 drug arrests, 2 MIP – Alcohol citations, 4 crash reconstructions, 3 drug operations and 1 on air radio show Wet Lab.

Crash investigations included an alcohol fatality investigation where 2 teens were killed and the suspect driver had a BAC of .197, and a serious injury vehicle pedestrian crash in which the vehicle driver was suspected of being under the influence of a CNS Stimulant and Cannabis. The pedestrian was a Hood to Coast runner.

To sum it up, Oregon DREs are a contributing factor to the traffic safety of the state. Great work everyone.

New National Survey Reveals Cocaine, Methamphetamine Use Drop among Young Adults; Prescription Drug Abuse Increases

Cocaine and methamphetamine use among young adults has dropped significantly over the past year, while abuse of prescription drugs has risen, according to the nation's largest substance use assessment, SAMHSA's 2007 National Survey on Drug Use and Health (NSDUH). The report also showed a spike in drug use among 55-59-year-olds, as baby boomers entered that age range.

Cocaine use among 18-25 year-olds dropped 23 percent (to 1.7 percent), while methamphetamine use among young adults fell by a third (to 0.4 percent) between 2006 and 2007, said the report by the Substance Abuse and Mental Health Services Administration (SAMHSA). The survey was released today at the start of the 19th annual National Alcohol and Drug Addiction Recovery Month.

Historically, young adults have had the highest rates of substance abuse.

Among youth ages 12-17, there was a significant decline in overall past month illicit drug use, from 11.6 percent in 2002 to 9.5 percent in 2007. Reductions in youth drug use occurred for nearly every type of illicit drug, including marijuana, cocaine, hallucinogens, LSD, Ecstasy, prescription-type drugs used nonmedically, pain relievers, stimulants and methamphetamine.

Current marijuana use among this age group declined from 8.2 percent in 2002 to 6.7 percent in 2007. Most of the decline occurred between 2002 and 2005.

The level of alcohol use also dropped among those aged 12 to 17, from 17.6 percent in 2002 to 15.9 percent in 2007. Similarly, the rate of cigarette use among this age group diminished from 13.0 percent in 2002 to 9.8 percent in 2007.

"These results confirm that progress has been made – particularly regarding substance abuse among younger Americans," said HHS Secretary Mike Leavitt. "The report also reminds us of the importance of our efforts to provide substance abuse treatment to those in need and to encourage health care professionals to identify people who are at risk for developing substance abuse problems and intervene early."

The reductions in methamphetamine and cocaine use among young adults coincide with reductions in their use among Americans in the workforce and significant market disruptions for both drugs. In 2007, there was a 21 percent increase in the average price per gram for cocaine and a 10 percent decrease in purity.

Workplace drug test positives for cocaine dropped 19 percent in 2007 to the lowest levels in the history of this testing system. For methamphetamine, there has been a 50 percent reduction in the level of workplace drug test positives since 2005, along with an 84 percent increase in average price per pure gram and 26 percent decrease in methamphetamine purity in 2007.

Despite many positive trends, the most recent NSDUH also reveals some less encouraging data. Among young adults ages 18 to 25, the level of current nonmedical use of prescription pain relievers has risen 12 percent (to 4.6 percent in 2007). In addition, the level of current illicit drug use among those aged 55 to 59 more than doubled, to 4.1 percent in 2007, confirming concerns that baby boomers have continued their higher levels of substance abuse as they age.

"Our efforts against methamphetamine, cocaine, and other illegal drugs are working," said John Walters, director of National Drug Control Policy. "The markets for these poisons are shrinking, and the deadly grip they hold on the lives of individuals, families, and communities is being countered. But when it comes to prescription drugs, we can not afford to re-live the painful experiences we've had with illegal drugs. We must act quickly to increase awareness of the dangers of prescription drug abuse, decrease the illegal diversion of these products, and shore up safer practices for their prescription and distribution."

SAMHSA's 2007 NSDUH report also provides extensive data on mental health issues. The report says 24.3 million Americans aged 18 or older experienced serious psychological distress over the past year, and 16.5 million Americans had suffered at least one major depressive episode during this period.

The mental health and substance abuse components of the report also highlight the association between these public health problems. For example, in 2007 adults 18 and older who had experienced a major depressive episode in the past year were more than twice as likely as other adults to have used illicit drugs during that time (27.4 percent vs.12.8 percent).

"The survey shows the tremendous progress communities, families and individuals across America have made in reducing substance abuse among young people, said SAMHSA Acting Administrator Eric Broderick, D.D.S, M.P.H, a rear admiral in the U.S. Public Health Service. "It also provides critical information that will help guide the future direction of our substance abuse prevention and treatment efforts."

(Continued from Page 2 – National Survey)

NSDUH is a scientifically conducted annual survey of approximately 67,500 people throughout the country. Because of its statistical power, it is a primary source of information on the levels of illicit drug, alcohol, and tobacco use as well as certain mental health conditions.

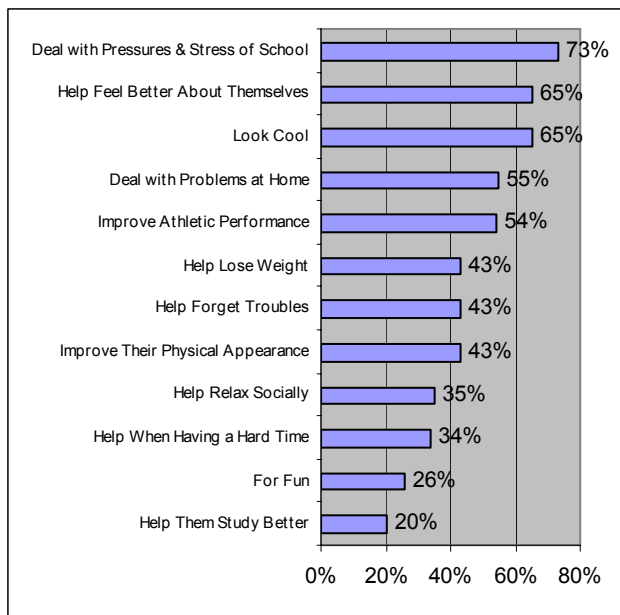
The complete survey is available on the SAMHSA Web site <http://oas.samhsa.gov/NSDUHlatest.htm> .

Information obtained from SAMHSA News Release 9/4/2008

Coping with School Stress is Number One Reason Given by Teens for Teen Drug Use

Nearly three-fourths (73%) of teens in grades 7 to 12 believe that “kids use drugs to deal with the pressures and stress of school,” according data from the 20th annual Partnership Attitude Tracking Study (PATs). Other reasons cited by more than half of teens surveyed were to help them feel better about themselves (65%), to look cool (65%), to deal with problems at home (55%), and to improve athletic performance (54%). The least cited reasons for teen drug use were to have fun (26%) and to help study better (20%).

Editors note: It is possible that the reasons given would have been different if the survey question had specified the types of drugs being asked about. Previous surveys of high school and college students have found that motivations vary greatly by type of drug. For example, one survey found that the most common motive for use of prescription stimulants by college students was to increase concentration.



Information obtained from Cesar Fax
August 18, 2008, Vol. 17, Issue 33

OSIN.INFO TAKES OFF AS INFORMATION SHARING TOOL

Within only a few months, the new Oregon law enforcement website WWW.OSIN.INFO has become a valuable tool for many in the law enforcement community. In August, the site was accessed well over 530 times.

The site continues to undergo improvements to make accessing publications easier. For example, under the tab “Prosecutor Resources” you can access all kinds of DUII publications, any DOJ Legal Updates dating back to January 2008, the Oregon Criminal Reporter 2d, the Search and Seizure Manual, and most importantly, past VERDICT issues.

Additionally, police gave access to the weekly intelligence bulletins on topics such as gangs, narcotics, officer safety, terrorism, training schedules along with issue specific analysis—such as “the stolen metals problem” or “drug prices in Oregon.”

To get access, go to www.osin.info and follow the prompts to register.

Information obtained from THE VERDICT
September 2008 Issue

ENERGY DRINKS LINKED TO RISK-TAKING BEHAVIORS AMONG COLLEGE STUDENTS

BUFFALO, N.Y. -- Over the last decade, energy drinks – such as Red Bull, Monster, and Rockstar – have become nearly ubiquitous on college campuses. The global market for these types of drinks currently exceeds three billion dollars a year and new products are introduced annually.

Although few researchers have examined energy drink consumption, a researcher at the University at Buffalo’s Research Institute on Addictions (RIA) has been investigating links between energy drinks and public health concerns like substance abuse and risky behaviors.

Two new research reports by RIA Research Scientist Kathleen E. Miller, Ph.D. examine the relationships between energy drink consumption and risk-taking in college students and secondly, “toxic jock identity” -- characterized by hypermasculinity and risk-taking behaviors among college-age athletes.

Miller’s research validates and expands upon existing concerns about energy drink consumption: “The principal target demographic for energy drinks is young adults aged 18-25, but they’re nearly as common among younger teens,” she explains. “This is a concern because energy drinks typically

contain three times the caffeine of a soft drink, and in some cases, up to ten times as much. They also include ingredients with potential interactions such as taurine and other amino acids, massive doses of vitamins, and plant and herbal extracts.”

Miller is a sociologist and an adjunct research assistant professor in the Department of Sociology of UB’s College of Arts and Sciences. The research was funded by a \$471,000 grant by the National Institute on Drug Abuse.

In the first set of results published online in June in the *Journal of Adolescent Health*, Miller identified links between energy drink consumption, risky substance use, and sexual risk-taking.

Frequent energy drink consumers (six or more days a month), according to Miller’s findings, were approximately three times as likely as less frequent energy drink consumers or non-consumers to have smoked cigarettes, abused prescription drugs and been in a serious physical fight in the year prior to the survey. They reported drinking alcohol, having alcohol-related problems and using marijuana about twice as often as non-consumers. They were also more likely to engage in other forms of risk-taking, including unsafe sex, not using a seatbelt, participating in an extreme sport and doing something dangerous on a dare. The associations with smoking, drinking, alcohol problems and illicit prescription use were found for white but not black students.

A total of 795 Western New York male and female undergraduate students participated in the study and 39 percent reported consuming at least one energy drink in the previous month. There was significantly higher consumption by men (46 percent) than by women (31 percent) and higher consumption by whites (40 percent) than by blacks (25 percent). Eighty-seven percent of the students in the study were white; 52 percent were male.

Two thirds of the energy drink consumers in Miller’s study had used energy drinks as mixers with alcoholic beverages. The growing popularity of this practice further heightens concern, Miller says.

“It is widely, but incorrectly, believed that the caffeine in energy drinks counteracts the effects of alcohol, so students will have the energy to party all night without getting as drunk,” she explains. “While the combination may reduce perceptions of intoxication, it does not reduce alcohol-induced impairments of reaction time or judgment.”

According to Miller, these findings suggest that frequent energy drink consumption may serve as a

useful screening indicator to identify students at risk for what scientists call “problem behavior syndrome.”

“Energy drink consumption is correlated with substance use, unsafe sexual activity and several other forms of risk-taking,” Miller notes. “For parents and college officials, frequent energy drink consumption may be a red flag or warning sign for identifying a young person at higher risk for health-compromising behavior.”

“Although energy drink consumption can be used to predict other problem behaviors, it does not necessarily follow that drinking these substances is a gateway to more serious health-compromising activities,” Miller cautions. “It is entirely possible that a common factor, such as a sensation-seeking personality or involvement in risk-oriented peer sub-cultures, contributes to both. More investigation is needed to study these relationships further, over longer periods of time.”

In the second set of results, published in the March/April issue of the *Journal of American College Health*, Miller looked at energy drink consumption and “toxic jock identity.”

“For many people, being an athlete is an important part of who they are,” Miller explains. “Some go a step farther, though, and come to see themselves as ‘jocks.’ For them, sport is wrapped up in a larger identity that also emphasizes hyper-masculinity and a willingness to take excessive risks.” Unlike an athlete identity, a jock identity can be considered “toxic,” according to Miller, because it’s associated with a wide range of risky or problem behaviors, including problem drinking, sexual risk-taking, interpersonal violence, academic misconduct, delinquency and even suicide attempts.

Miller’s research found that undergraduates who consumed energy drinks more often were also more likely to develop a jock identity and to engage in risk-taking behaviors. “Ultimately,” she says, “undergraduates’ frequent use of Red Bull and other energy drinks should be seen by peers, parents, and college officials as a potential predictor of ‘toxic jock identity.’”

In the wake of several recent deaths linked to energy drinks, a number of countries have instituted restrictions on their use. Some, like France, Turkey, Denmark, Norway, Uruguay, and Iceland ban high-caffeine/taurine energy drinks altogether, Miller notes. Sweden only permits them to be sold in pharmacies as medicinal products. Canada, which banned these drinks until 2004, now requires warning labels cautioning against use by children or pregnant women, use in large quantities, or use with

alcohol. However, energy drink consumption remains unregulated in the United States.

Miller says she hopes to develop future research into the influence of personality traits, peer norms and other factors that may influence the relationships among energy drink consumption, race, gender and risk-taking. Better understanding of these relationships, she argues, may be useful in developing programs for preventing substance use and other health-compromising behaviors.

The Research Institute on Addictions has been a national leader in the study of addictions since 1970 and a research center of the University at Buffalo since 1999.

The University at Buffalo is a premier research-intensive public university, a flagship institution in the State University of New York system and its largest and most comprehensive campus. UB's more than 28,000 students pursue their academic interests through more than 300 undergraduate, graduate and professional degree programs. Founded in 1846, the University at Buffalo is a member of the Association of American Universities.

Information obtained from Research Institute on Addictions
News Release July 24, 2008

SPIKE IN METHADONE PRESCRIPTIONS, DEATHS

Methadone now ranks as the fastest-growing source of narcotic deaths in the country, and many experts believe lack of federal oversight and dangerous prescribing practices by physicians are largely to blame, the New York Times reported Aug. 17.

The number of methadone prescriptions increased by 700 percent from 1998 to 2006 -- a period during which the Food and Drug Administration (FDA) unwittingly labeled package inserts with a dangerously high dosage recommendation of up to 80 mg per day for a starting dose.

The FDA cut the recommended starting dose to 30 mg in late 2006, but some experts believe the FDA should also require physicians to take special classes on prescribing narcotics, a move the agency is considering.

"This is a wonderful medicine used appropriately, but an unforgiving medicine used inappropriately," said Howard A. Heit, M.D., a Georgetown University pain specialist. "Many legitimate patients, following the direction of the doctor, have run into trouble with methadone, including death."

Nationally, the number of deaths in which methadone was listed as a contributing factor increased fivefold to 4,462 from 1999-2005, but experts say that figure understates the problem because of incomplete reporting in some states. Florida saw its deaths caused at least in part by methadone increase from 367 in 2003 to 785 in 2007.

Many health experts believe doctors who are increasingly prescribing the medication for pain management do not have enough knowledge of how slowly methadone is metabolized, or how various patients can experience different effects from the medication. They say some physicians prescribe too much of the drug too fast, while others do not inform patients of the risks of using alcohol or sedatives with the medication.

As a result of these problems, some physicians have instituted innovative practices in conjunction with prescribing methadone for pain management, including contracts with patients that list mutual obligations or occasional phone calls from the physician to a patient's loved ones to check on the patient's progress.

Information obtained from Join Together
News Summery August 18, 2008

DRE REFERENCES

<http://www.decp.org/>

The International Drug Evaluation & Classification Program

<http://www.oregon.gov//ODOT/TS/dre.shtml>

ODOT – Oregon DRE Program

<http://www.samhsa.gov/index.aspx>

Substance Abuse & Mental Health Services Administration

<https://nsduhweb.rti.org/>

National Survey on Drug Use and Health

<http://www.cesar.umd.edu/cesar/cesarfax.asp>

Center for Substance Abuse Research

<http://www.ndaa.org/apri/index.html>

American Prosecutors Research Institute

http://www.usdoj.gov/dea/programs/forensicsci/microgram/bulletins_index.html

DEA Microgram Bulletins

<http://www.theantidrug.com/>

Parents – The Anti-Drug

<http://www.jointogether.org/>

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