

Drug Abuse Trends in the Seattle-King County Area: 2014

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Highlights

- Drug caused deaths involving heroin and/or methamphetamine peaked in 2014.
- Prescription opioid involved deaths are at their lowest point in a decade.
- The number of treatment admissions with heroin as the primary drug doubled from 2010-2014 and are higher than any drug since at least 1999.
- 10% of high school seniors used marijuana on at least one-third of the days in the prior month, up significantly from a decade prior.

Data Overview

- **Washington State Patrol Crime Lab evidence testing**- Data received at the lab between 2001 and 2014 from law enforcement in King County are presented. Data are based on cases tested through April 2015 and are presented by the year the evidence was received at the lab in Figures 1a, 1b, 1c.
- **Recovery Help Line** data for King County callers from 2012 to 2014 are presented in Figure 2.
- **Marijuana use** days in the past 30 for 12th graders from the WA State Healthy Youth Survey were obtained from www.askhys.net for the years 2004-2014 and are presented in Figure 3.
- **Treatment admissions** for King County residents to publicly funded treatment are included for admissions from 1999 to 2014 in Figure 4. Data are duplicated and are for all modalities of care and were obtained from the Washington State Department of Social and Health Services (DSHS), Division of Behavioral Health and Recovery, Treatment Report and Generation Tool (TARGET).
- **King County Medical Examiner** data on drug caused deaths from 1997 through 2014 are presented in Figures 5a and 5b. The majority of deaths involved include multiple drugs, so discussion of drug specific deaths should be interpreted in the context of understanding that most also involved other drugs or alcohol.
- **Syringe exchange volume, Hepatitis and HIV/AIDS data** were provided by Public Health-Seattle & King County and are presented in Figure 6. HIV and Hepatitis cases diagnosed through Dec 2014 and reported through May 2015 are included.

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Area Description

Seattle is the largest city in King County and in the state of Washington. The county had an estimated population of 1,974,567 during the period from 2009-2013. During this period the racial composition was 64.2% White, 6.0% African American, 9.0% Hispanic/Latino, 0.6% American Indian/Alaska native, 14.7% Asian and 0.7% Native Hawaiian/Pacific Islander. Among those 25 and older 92% had a high school degree and 47% had at least a bachelor's degree. The unemployment rate was 5.4%, the median household income was \$71,811 and the proportion of the population whose income was below the poverty level was 11.5%.

In 1998 Washington State became one of the first states to pass legislation allowing the use of marijuana for medical purposes. In November 2012 Washington State passed a law legalizing recreational marijuana and stores selling marijuana for recreational purposes began slowly opening in the summer of 2014, meanwhile medical marijuana dispensaries are common throughout the region.

Washington State implemented pilot educational guidelines for pain management and opioid prescribing in 2007 and these rules were formalized into law taking effect in January 2012. To date these pain guidelines have been focused on the use of opioids for chronic pain with a recommended opioid dose at which a specialty consultation be sought. Washington State's controlled substance prescription drug monitoring program became fully operational in January 2012, as in other states, a minority of prescribers with a DEA license are registered with the PDMP.

In 2010 Washington State became the second state to address opioid overdoses by passing a law to expand bystander access to naloxone, an opioid overdose antidote, and promote calling 911 by providing limited immunity to people seeking aid during an overdose. Access points for naloxone began increasing substantially in 2013 and into 2015; a directory of access points is available at www.stopoverdose.org.

Overview of Current Drug Use

In 2014 methamphetamine was the most common drug in police evidence testing for the first time, slightly surpassing heroin, both of which have been increasing since 2011. Methamphetamine is the second most common drug mentioned by callers to the Help Line with increases in 2013 and 2014. Treatment admissions for heroin were up substantially in 2014, exceeding other drugs and nearly equaling alcohol admissions. Among primary heroin users, methamphetamine was the most common secondary drug of abuse, reported by 24% compared to 16% for cocaine, this is a substantial increase in methamphetamine compared to past years. Drug caused deaths totaled 314 in 2014, the greatest number since at least 1997. Heroin was involved in 156 deaths in 2014, up from 99 the year before, and 49 in 2009. Prescription-type-opioid involved deaths totaled 98 in 2014 the fifth year of continuous declines in prescription-type-opioid involved deaths. Methamphetamine involved deaths were up substantially to 70 in 2014 compared to 44 the year before and 15 in 2010. Any use of marijuana in the past 30 days was reported by 26.7% of high school seniors surveyed in King County in 2014, significantly higher than the 18.6% in 2004. Over this time frame there was a significant increase in students reporting using marijuana 10 or more days per month from 6.0% to 10.3%. Public consumption of marijuana, while technically illegal, is widespread.

Drug Specific Details

Marijuana indicator data for police evidence and treatment admissions have trended downwards in recent years. Any use of marijuana in the past 30 days was reported by 26.7% of high school seniors surveyed in King County in 2014, significantly higher than the 18.6% in 2004. Over this time frame there was a significant increase in students reporting using marijuana 10 or more days per month from 6.0% to 10.3%. Marijuana calls to the Help Line were level from 2012 to 2014. In 2009 marijuana was the most common drug identified in police evidence (n=704); since then law enforcement policies and priorities de-emphasized arrests for marijuana and total cases for marijuana were just 78 in 2014. Treatment admissions for marijuana as the primary drug have declined in absolute numbers (down 32%) and as a percentage of all admissions (down 23%) since 2010. In 2014, more than 70% of treatment admissions for marijuana were for males and almost half were under 18, the highest proportions for all drugs. Conversely, treatment admissions were made up of just one-third whites, the lowest proportion excepting cocaine, with large proportions of admissions among African Americans (25%) and Hispanics (16%) disproportionate relative to their representation in the county population 6% and 9% respectively. Almost all marijuana admissions were for those who reported smoking. The majority (55%) of those who reported marijuana as primary at treatment entry reported their second drug as alcohol. Marijuana was reported as the second drug of abuse by 33% of alcohol users and 28% of methamphetamine users.

Cocaine was the most common drug detected in police evidence from 2002 (n=882) through 2007 (n=1142), in 2014 it was the third most common drug detected (n=186). Cocaine related calls to the Help Line have remained steady in recent years and rank fifth.

Treatment admissions for cocaine are down 50% as a proportion and 55% in terms of absolute numbers from 2010-2014. In 2014 cocaine was the least common of the major drugs of abuse in treatment admissions. Two-thirds of those entering treatment for cocaine were male and 60% were aged 45 or older, a much older group compared to alcohol or any of the other drugs. Over half of those admitted to treatment for cocaine were African American compared to the county's population which is 6% African American. Over 80% of those entering treatment for cocaine reported smoking the drug. The secondary drug of choice was alcohol for half of those whose primary drug was cocaine. Conversely, cocaine was the secondary drug of choice for 13% whose primary drug was alcohol and 16% for those whose drug of choice was heroin.

Cocaine involved deaths totaled 78 in 2014, up slightly from 74 the year before and up from 46 in 2010 the lowest recorded number. In 2014, a majority, 60%, of cocaine involved deaths also involved heroin, compared to 2003-2013 during which time a minority of cocaine deaths also involved heroin.

Methamphetamine was the most common drug detected in police evidence in 2014 (n=337), slightly exceeding heroin, and continuing a rebound that began in 2011. Methamphetamine was the second most common drug mentioned by callers to the Help Line in 2013 and 2014, in 2012 it was ranked fourth in call volume.

Treatment admissions for methamphetamine totaled 1001 in 2014, up compared to recent years and very similar to the numbers seen from 2005-2008. Females made up 40% of methamphetamine treatment admissions in 2014. The largest proportion of methamphetamine admissions were among those ages 30-44, 7% were under 18, the largest proportion under 18 for all drugs except marijuana. Most, 65%, reported smoking methamphetamine with injection the next most common route of

ingestion (27%). The most common secondary drug was marijuana, followed by alcohol and heroin. Of note, among primary heroin users, methamphetamine was the most common secondary drug of abuse, reported by 24% compared to 16% for cocaine, a substantial shift compared to past years.

Methamphetamine involved deaths were up substantially to 70 in 2014 compared to 44 the year before and 15 in 2010. The increase in methamphetamine involved deaths from 2013 to 2014 was greatest in Seattle (18 to 27) and the southern part of King County (17 to 28). From 2013 to 2014 the increase in deaths was almost entirely among men, increasing from 32 to 58 deaths, and Whites, from 29 to 59 deaths. Methamphetamine involved deaths increased most among those under 31, from 6 to 18, and for those older than 50, from 12 to 23. Historically almost all methamphetamine involved deaths were among whites, with 12 deaths among African Americans from 1997 to 2012, then in 2013 there were 10 deaths and in 2014 6 deaths among African Americans. Though the overall numbers are even smaller, there were 4 deaths involving methamphetamine among Native Americans in 2014 compared to 5 in the previous 17 years. Heroin was the drug most strongly correlated with the increase in methamphetamine involved deaths overall with an increase from 14 methamphetamine and heroin deaths in 2013 to 37 in 2014. Almost all of the increase in methamphetamine involved deaths included other drugs and in 2014 53 of the 70 methamphetamine deaths also involved other drugs. The increase in deaths with methamphetamine may be due to increased combining with other drugs, in particular heroin.

Heroin has increased steadily in police evidence from 2010 (n=141) to 2014 (n=328) at the same time prescription-type-opioids declined steadily. Heroin related Help Line calls increased substantially in 2013 and 2014 and continues to be the drug most commonly mentioned.

The number of treatment admissions for heroin has doubled since 2010 and increased 32% from 2013 to 2014 when there were 2,886 admissions to treatment where heroin was primary. Medication assisted treatment programs in the county have been working to expand capacity and the number of admissions to these programs increased from 696 in 2011 to 1,486 in 2014. The number of unique people served in publicly funded medication assisted treatment programs, almost entirely methadone, increased 11% to 4,469 people in 2014 compared to 2013; many people are on medication assisted treatment for more than one year, hence these numbers exceed new admissions. Most, 60%, of those entering treatment for heroin are male and 39% are ages 18-29 a substantially younger population than in years past. Most, 70%, are White and most, 75%, inject while 21% reported smoking heroin. The most common secondary drug among heroin users was methamphetamine followed by cocaine.

Heroin involved deaths totaled 156 in 2014, their highest number since at least 1997 and a substantial increase since the lowest number recorded, 49, in 2009. Increases in heroin deaths from 2013 to 2014 were seen in all four regions of the county, with a total increase from 99 to 156. Increases from 2013 to 2014 were seen for both men and women while almost all of the increases, 50 deaths, were White. Increases were seen across the age range with the biggest increase among those older than 50, from 20 to 45 deaths, the greatest number in any age category in 2014. No single co-ingestent stood out with increases in heroin deaths and almost all of the increase in 2014 was among multi-drug deaths.

Prescription-type-opioids have declined in police evidence from 2010 (n=140) to 2014 (n=50). Oxycodone has been the most common prescription-type-opioid detected from 2002 through 2014. In 2014, hydrocodone, methadone, buprenorphine, morphine and fentanyl were all at similar, low

levels in police evidence, slightly below oxycodone (n=14). Help Line calls regarding prescription-type-opioids are down somewhat in recent years.

Prescription-type opioid primary treatment admissions declined 27% in absolute number from 2010 to 2014 and were the only drug with a majority of females admitted in 2014. Prescription opioid users entering treatment had virtually the same age distribution as heroin users with 39% under age 30. Most, 63%, reported oral use, 21% smoked, 12% inhaled/snorted and 5% injected. A quarter reported their second drug was heroin, followed by marijuana and alcohol.

Prescription-type-opioid involved deaths were at their lowest level since 2003 following a peak in 2009 (n=164) and dropped below heroin in 2014 to 98 deaths.

Emerging Drugs and Patterns of Drug Use. For the first time MT-45, a synthetic opioid, was identified in a death in 2014 in combination with methamphetamine, cocaine and a benzodiazepine, evidence from the scene indicated the MT-45 was in a plastic bag labeled with the chemical name. MT-45 is not a pharmaceutical product legally available in the United States. The European Monitoring Program on Drugs and Drug Abuse issued a report on the compound in 2014 <http://www.emcdda.europa.eu/publications/risk-assessment/mt-45> and 28 deaths were reported in which the drug was involved in Sweden in 2013 and 2014. No additional information about the source of the drug in the local case is available. Cannabimimetics (e.g. Spice) were first identified in police evidence in King County in 2011 when there were 9 cases, they declined in subsequent years to just 1 case in 2014. Cathinones (e.g. Bath Salts) peaked at 13 in 2013 and declined to 1 in 2014. There were 10 cases with tryptamines (e.g. DMT, Foxy Methoxy) in 2011, 2 in 2012 and none in 2013 or 2014.

Infectious Diseases and Syringe Exchange Data. In 2014 there were 281 new diagnoses of HIV in King County of which 8 (3%) were considered due to injection drug use and another 17 (6%) were among those with injection drug use and male-to-male sexual contact as transmission categories. For hepatitis B there were 9 acute cases and 615 chronic cases identified in 2014 and for hepatitis C 20 acute cases and 1,167 chronic cases. In 2014, 5,940,908 syringes were distributed by syringe exchanges based in King County, slightly up from the total volume in 2012 and 2013.

Figure 1a- Police evidence from King County tested at the WA State Patrol Crime Lab- Major drugs

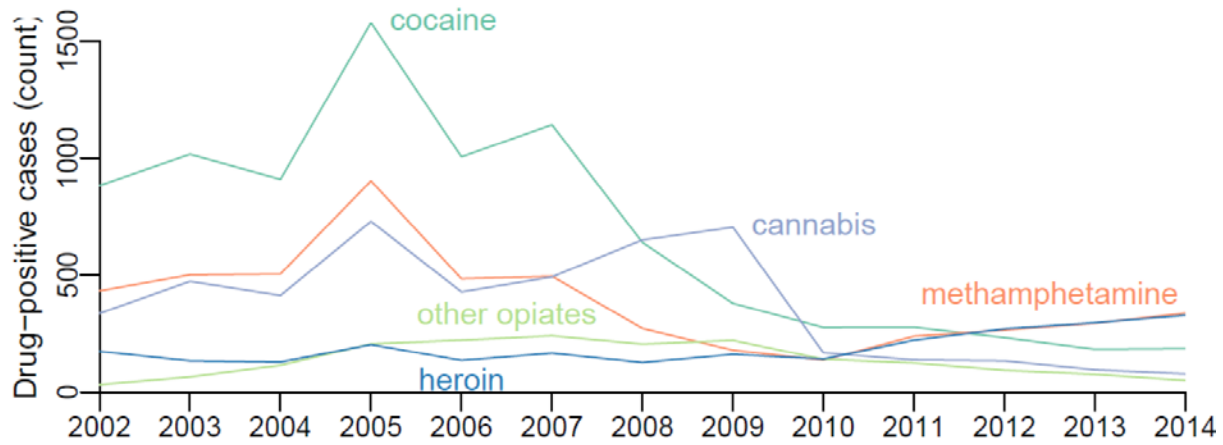


Figure 1b- Police evidence from King County tested at the WA State Patrol Crime Lab- Opioids

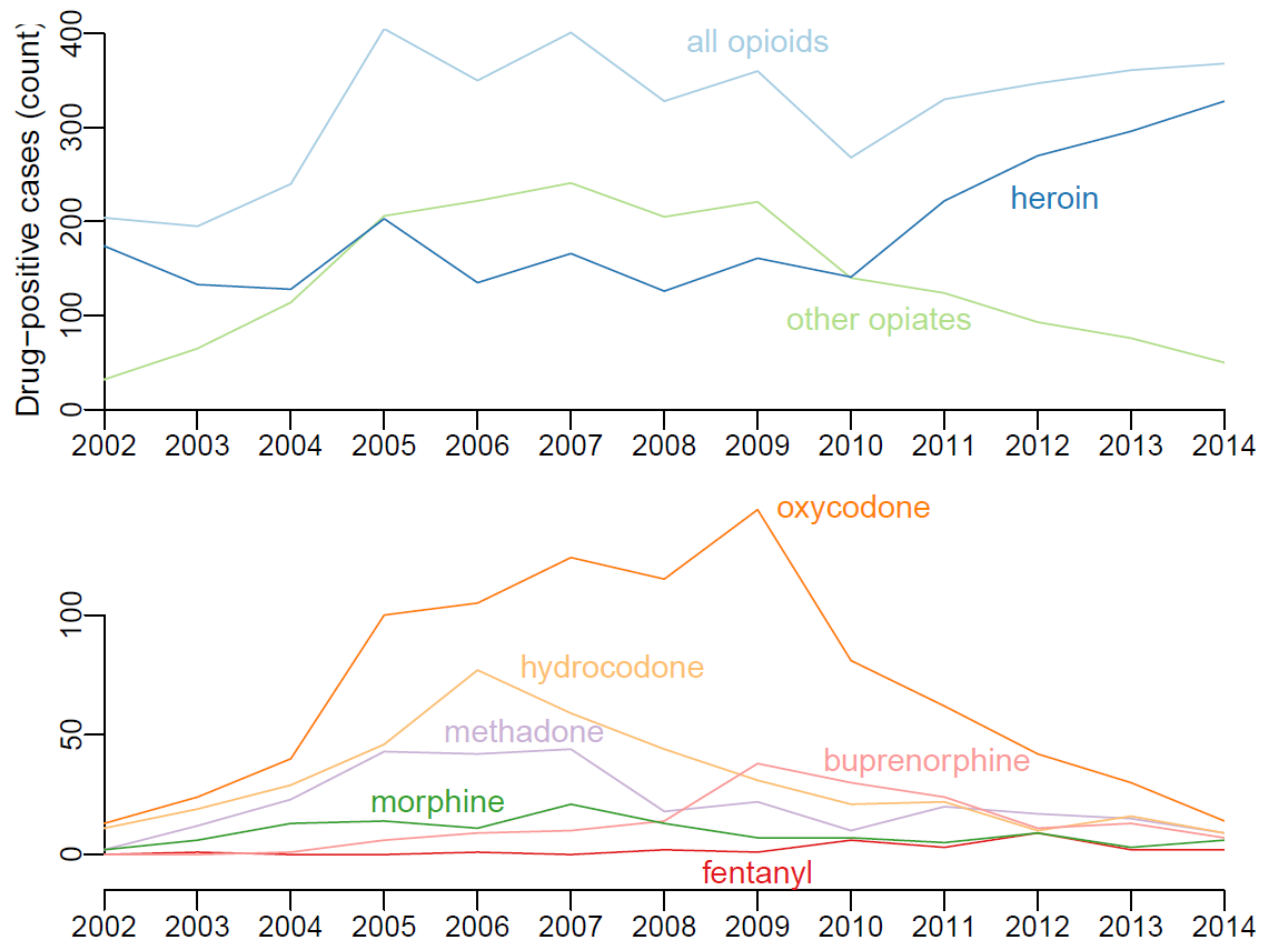


Figure 1c- Police evidence from King County tested at the WA State Patrol Crime Lab- Other synthetic drugs

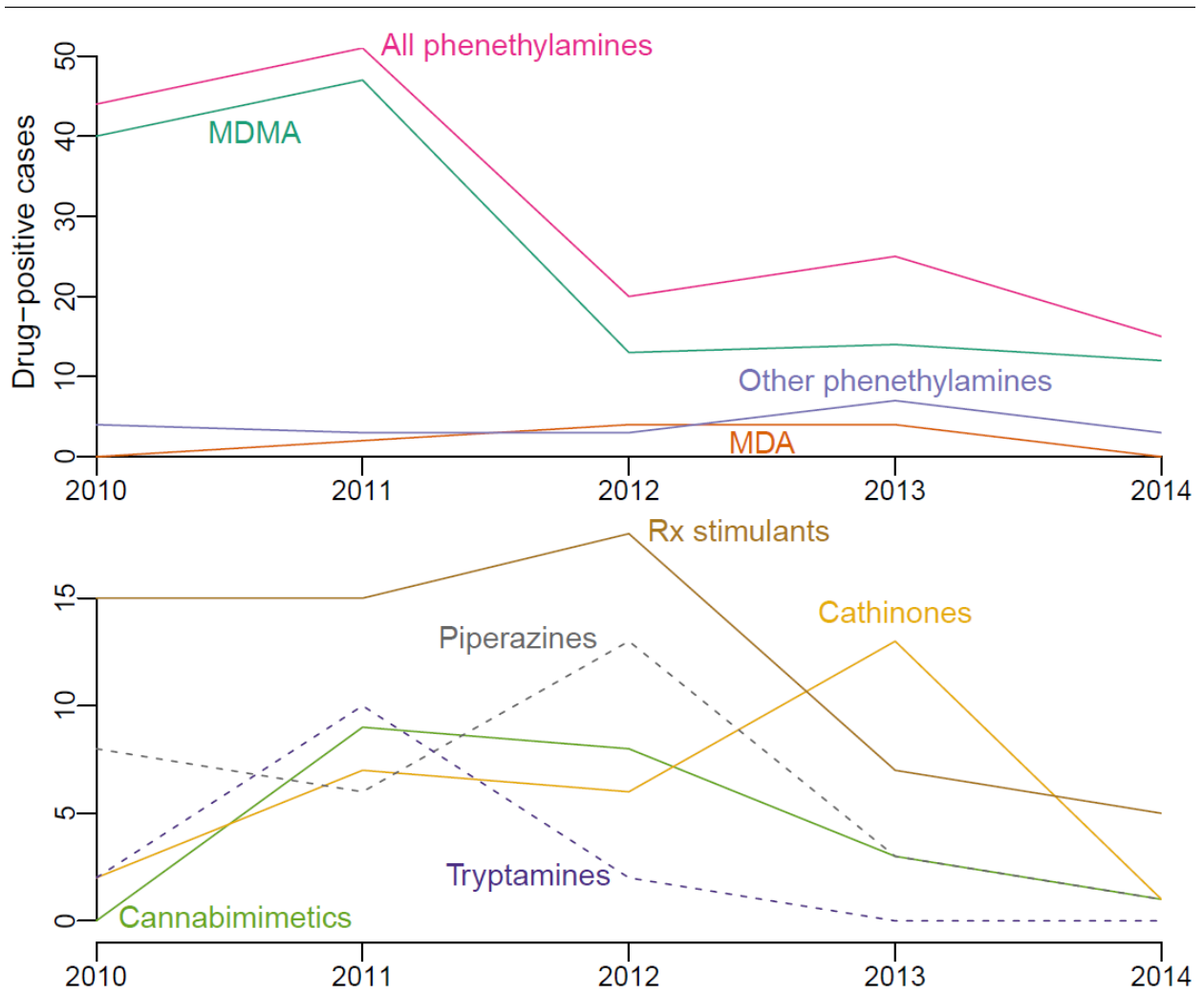
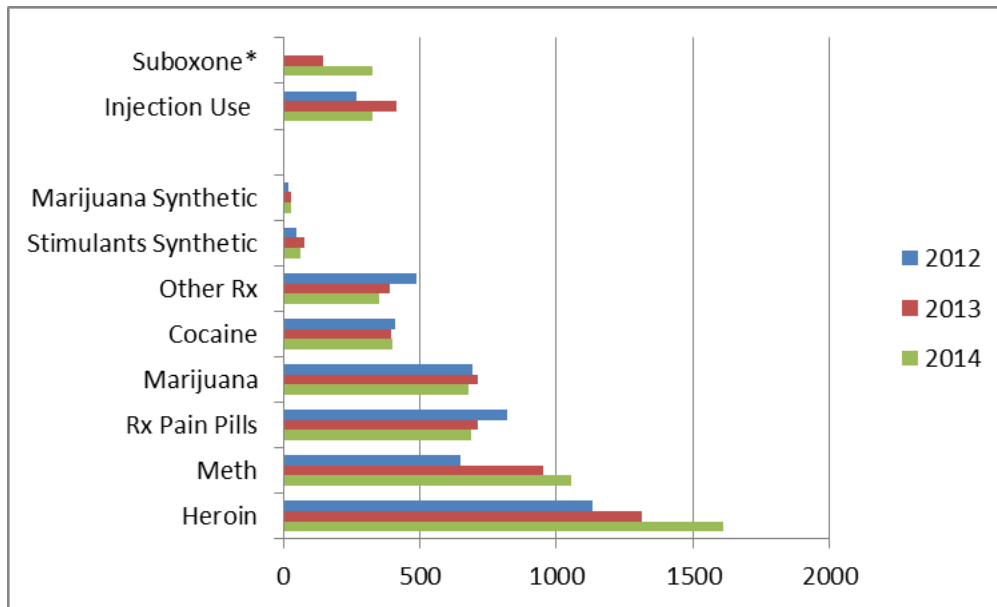


Figure 2- Recovery Help Line Calls from King County, WA



*Suboxone added to database in June 2013

Excludes alcohol and nicotine related calls

Figure 3- Marijuana use past 30 days, 12th Graders, King County, Healthy Youth Survey

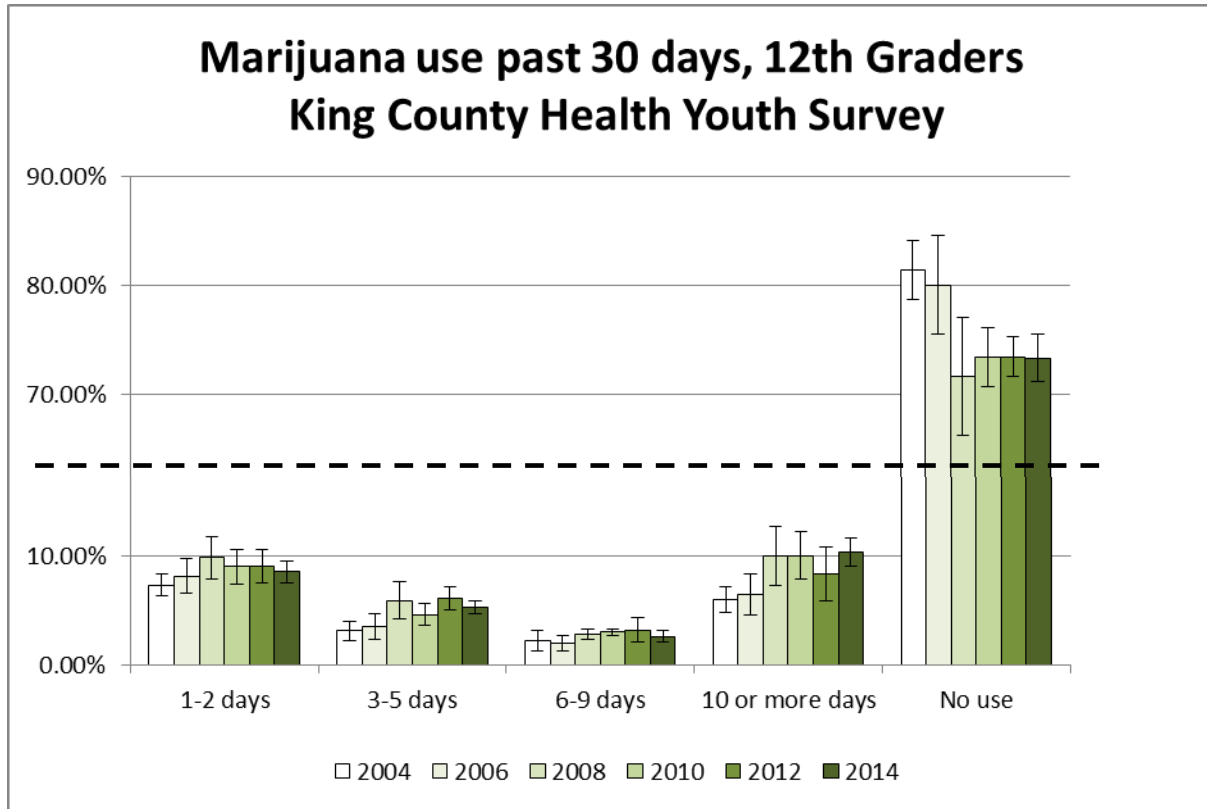
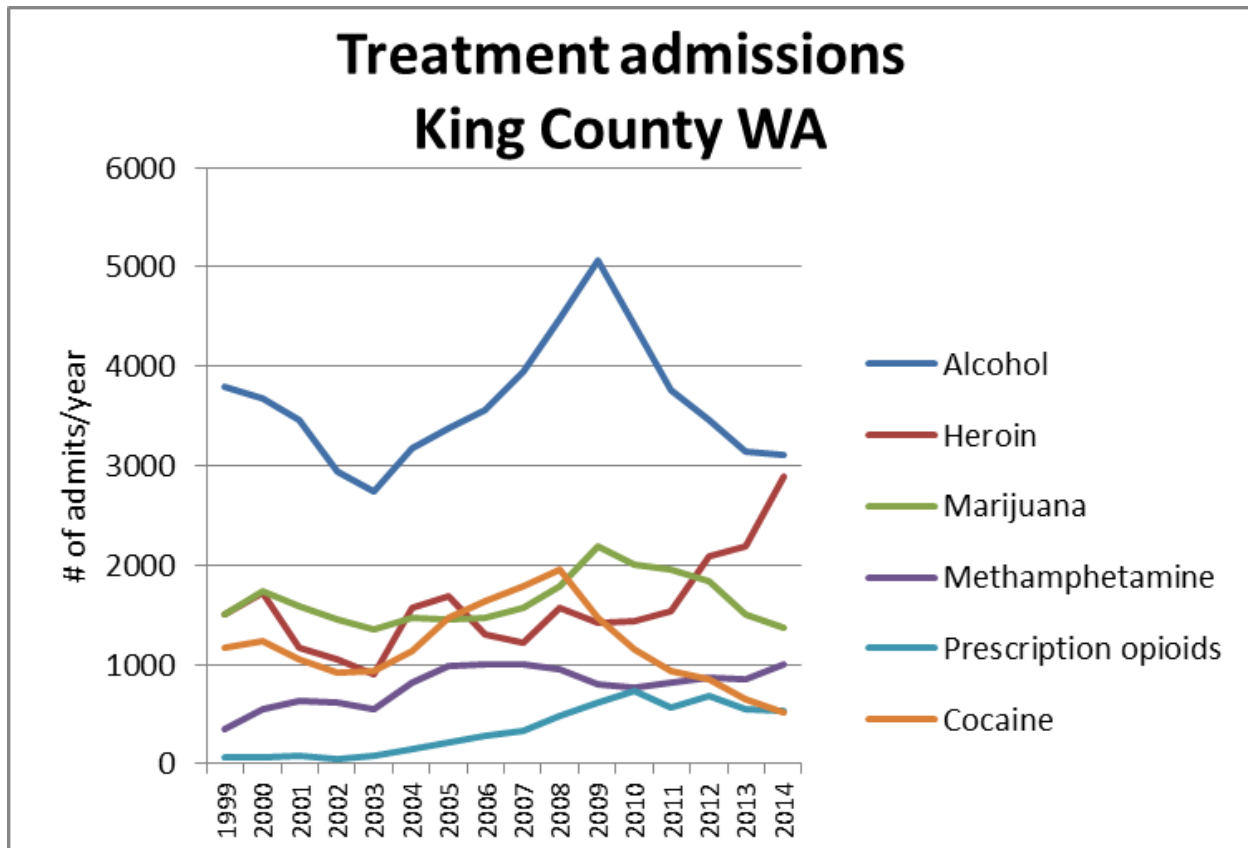


Figure 4-. Treatment admissions, publicly funded- Primary Drug



	2010		2011		2012		2013		2014		% Change 2010-2014	# Change 2010-2014
	(#)	(%)	(#)	(%)	(#)	(%)	(#)	(%)	(#)	(%)		
Alcohol	4417	40%	3768	38%	3456	34%	3145	34%	3106	32%	-21%	-30%
Cocaine/Crack	1158	11%	934	9%	855	8%	642	7%	518	5%	-50%	-55%
Heroin	1439	13%	1531	15%	2083	20%	2187	24%	2886	30%	126%	101%
Prescription Opioids	725	7%	562	6%	681	7%	557	6%	531	5%	-18%	-27%
Methamphetamine	772	7%	817	8%	874	9%	855	9%	1001	10%	46%	30%
Marijuana	2004	18%	1947	19%	1838	18%	1498	16%	1363	14%	-23%	-32%
Total Admissions (#)	11009		9990		10222		9277		9779			-11%

Figure 5a- Drug Caused Deaths, King County WA- Number and Rates

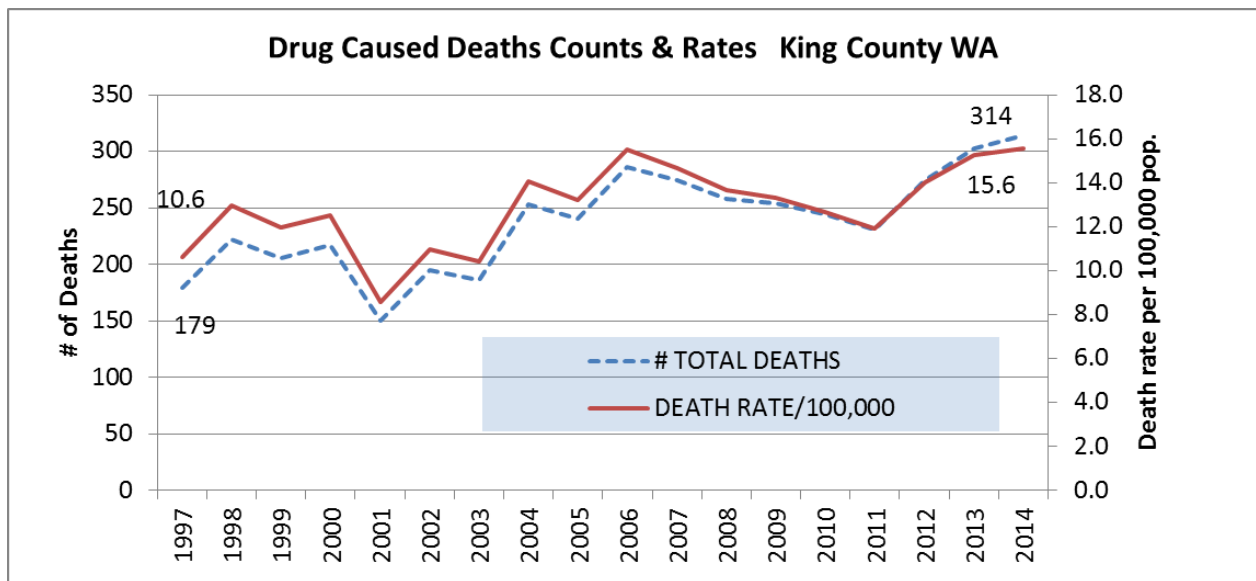
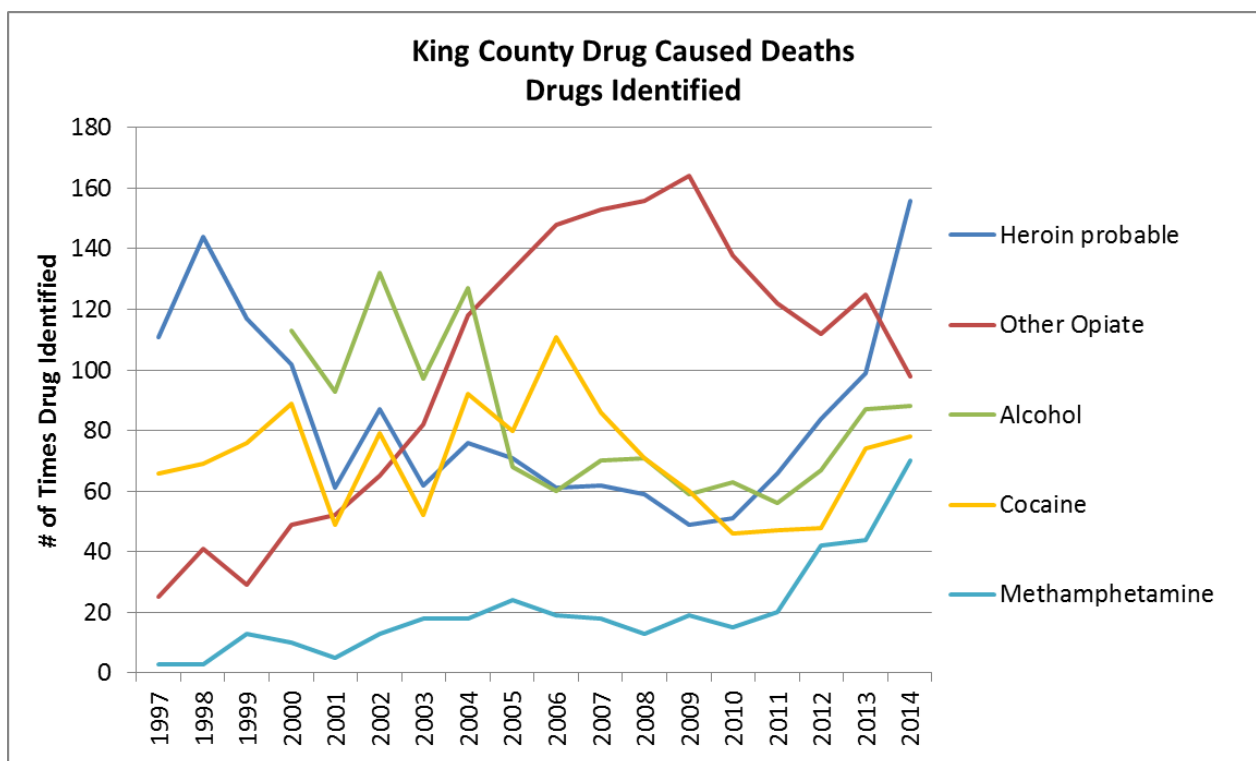
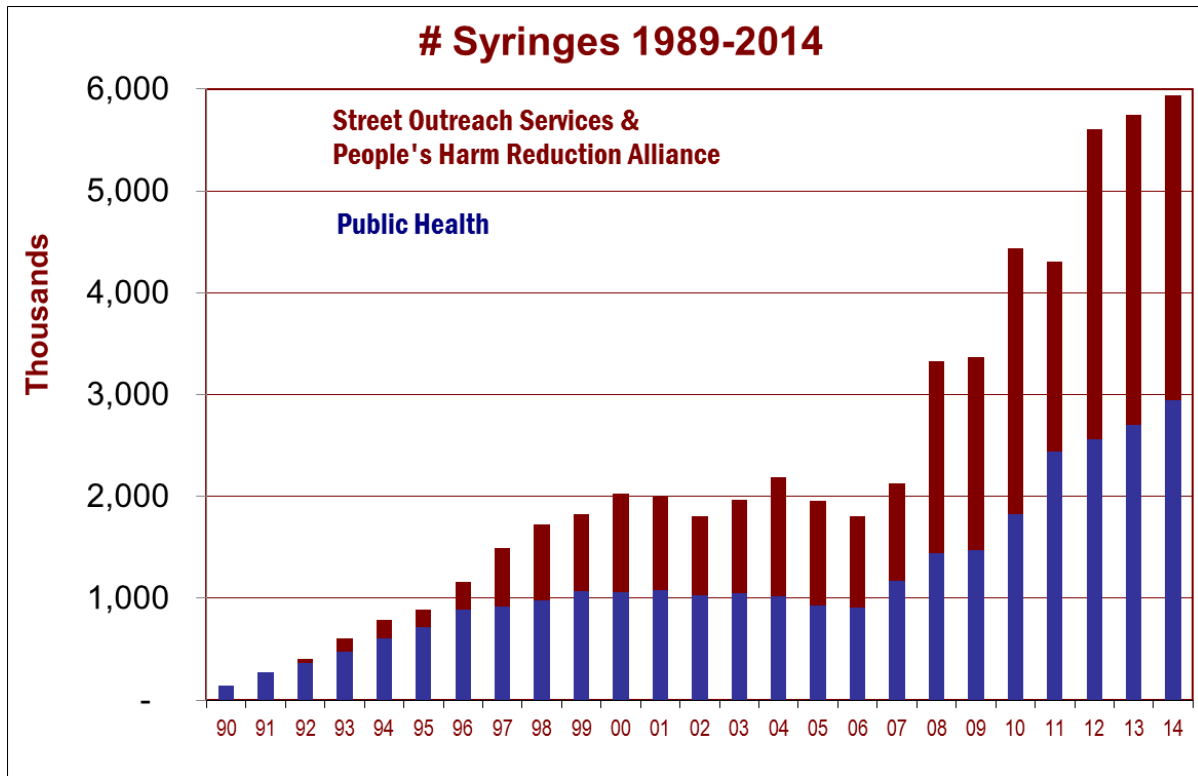


Figure 5b- Drug Caused Deaths, King County WA- Drugs identified



*Note alcohol coding changed in 2001, not reported for previous years

Figure 6- Syringe Exchange Utilization in King County



Citation: Drug Abuse Trends in the Seattle-King County Area: 2014. Banta-Green, C et al. Alcohol & Drug Abuse Institute, Univ. of Washington, June 17, 2015. adai.uw.edu/pubs/cewg/DrugTrends_2014_final.pdf