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Disclosures

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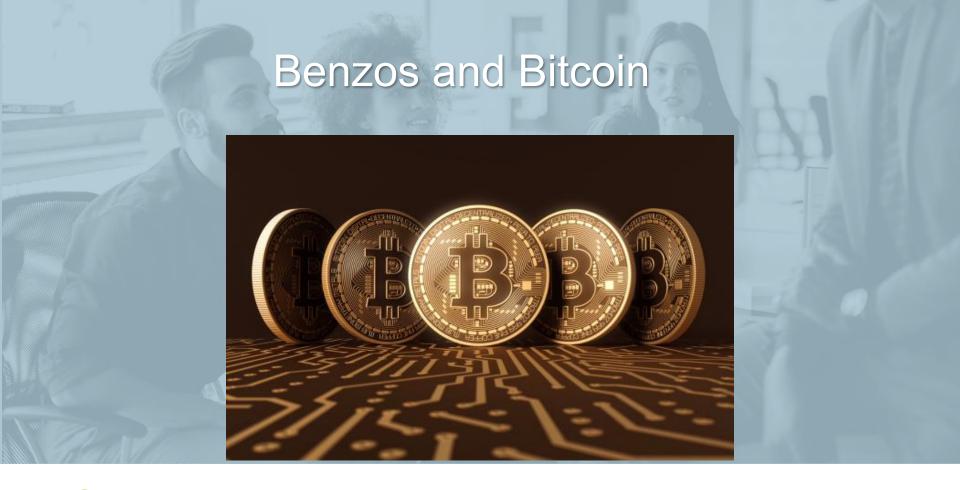
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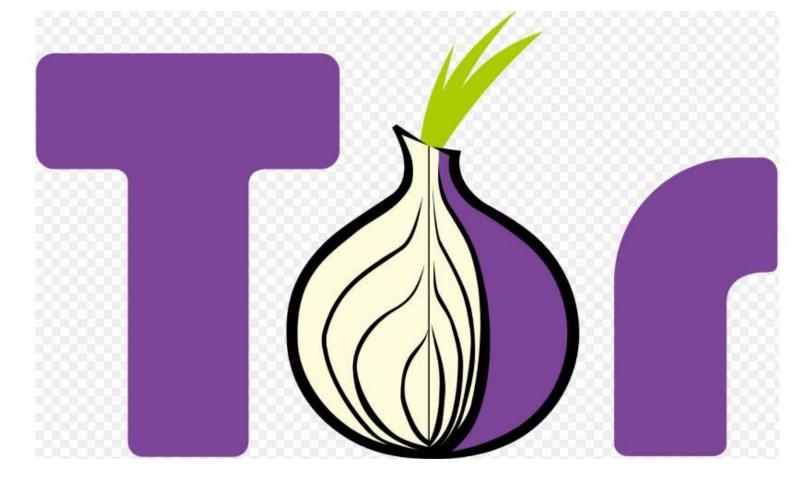
Objectives

- Identify concerning national trends for youth
- Learn about the developmental and psychological underpinnings of addiction
- Discuss ways high risk youth can be identified relative to substance use disorders
- Discuss the importance of prevention and early intervention











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browsing drugs



0,7g Hydroponically Grown Crystal Cloud (LIMITED TIME OFFER!!!)

item



7g (1/4oz) P.Cubensis Powder



Methadone hydrochloride - 250mg pure (min 90%) crystaline powder



Accessing Drugs Through Normal Web

- Kratom
- Cava
- Dextromethorphan
- "Peptides"
- Tianzepine ("Gas station heroin")



Dark Web Drugs

- Cryptocurrency is the initial catalyst
- Electronic payment platforms (CashApp)
- Cheap prices















Why the Concern for Youth

- Benzos are incredibly cheap (\$2-5 a "bar")
- Blackouts
- Seizures
- Delirium

- Many illicit drugs are cut with Fentanyl
- Powdered Fentanyl can be used in many ways (spray bottle)







brodifacoum •

noun | bro·di·fa·coum | \brō-dī-'fa-,küm\

FTRENDING NOW: abhorrent embolization oleaginous pansexual ALL >





Medical Definition of BRODIFACOUM

: a poisonous anticoagulant compound C₃₁H₂₃BrO₃ that is a derivative of coumarin and is used as a rodenticide and pesticide



J Med Chem. 2012 Sep 27;55(18):7967-77. Epub 2012 Sep 11.

7-Alkyl-3-benzylcoumarins: a versatile scaffold for the development of potent and selective cannabinoid receptor agonists and antagonists.

Rempel V1, Volz N, Hinz S, Karcz T, Meliciani I, Nieger M, Wenzel W, Bräse S, Müller CE.

Author information

Abstract

A series of 7-alkyl-3-benzylcoumarins was designed, synthesized, and tested at cannabinoid CB(1) and CB(2) receptors in radioligand binding and cAMP accumulation studies. 7-Alkyl-3-benzylcoumarins were found to constitute a versatile scaffold for obtaining potent CB receptor ligands with high potency at either CB(1) or CB(2) and a broad spectrum of efficacies. Fine-tuning of compound properties was achieved by small modifications of the substitution pattern. The most potent compounds of the present series include 5-methoxy-3-(2-methylbenzyl)-7-pentyl-2H-chromen-2-one (19a, PSB-SB-1201), a selective CB(1)antagonist (K(i) CB(1) 0.022 μM), 5-methoxy-3-(2-methoxybenzyl)-7-pentyl-2H-chromen-2-one (21a, PSB-SB-1202), a dual CB(1)/CB(2)agonist (CB(1)K(i) 0.032 μM, EC(50) 0.056 μM; CB(2)K(i) 0.049 μM, EC(50) 0.014 μM), 5-hydroxy-3-(2-hydroxybenzyl)-7-(2-methyloct-2-yl)-2H-chromen-2-one (25b, PSB-SB-1203), a dual CB(1)/CB(2) ligand that blocks CB(1) but activates CB(2) receptors (CB(1)K(i) 0.244 μM; CB(2)K(i) 0.210 μM, EC(50) 0.054 μM), and 7-(1-butylcyclopentyl)-5-hydroxy-3-(2-hydroxybenzyl)-2H-chromen-2-one (27b, PSB-SB-1204), a selective CB(2) receptor agonist (CB(1)K(i) 1.59 μM; CB(2)K(i) 0.068 μM, EC(50) 0.048 μM).

PMID: 22916707 DOI: 10.1021/jm3008213

[Indexed for MEDLINE]







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JULY 19, 2018

Alcohol-related cirrhosis deaths skyrocket in young adults

MICHIGAN MEDICINE

Deaths from cirrhosis rose in all but one state between 1999-2016, with increases seen most often among young adults, a new study shows.

The deaths linked to the end stages of liver damage jumped by 65 percent with alcohol a major cause, adults age 25-34 the biggest victims and fatalities highest among whites, American Indians and Hispanics.

Liver specialist Elliot B. Tapper, M.D., says he's witnessed the disturbing shift in demographics among the patients with liver failure he treats at Michigan Medicine. National data collected by Tapper and study coauthor Neehar Parikh, M.D., M.S., confirms that in communities across the country more young people are drinking themselves to death.

The data published in the journal BMJ shows adults age 25-34 experienced the highest average annual increase in cirrhosis deaths -- about 10.5 percent each year. The rise was driven entirely by alcohol-related liver disease, the authors say.



FDA warns about 'gas station heroin'

One brand recalled products in 2024 after consumers died

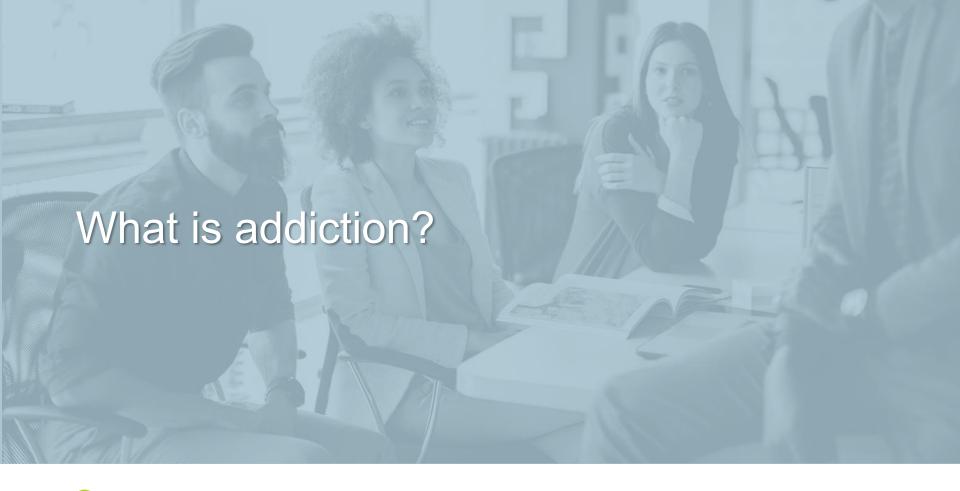




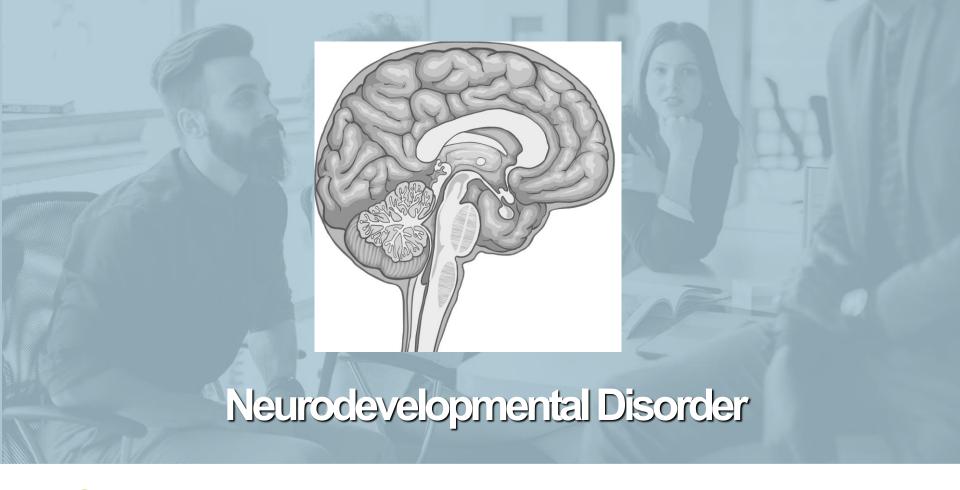
Fentanyl

- In as much as 85% of all supply of illicit drug products
- Xylazine positive overdoses increased 1,127% in the South from 2020-2021
- Many analogues detected in OK (acetyl-fentanyl, paraflourofentanyl)
- Opioid overdoses decreased last year for first time since pandemic; meth overdoses rose











Two Control Centers Limbic System Cinqulate Fornix Pineal gland gyrus /lammillary body Thalamus Pituitary gland Hypothalamus Amygdala Hippocampus The Limbic System is a complex connection of brain regions deep within the brain underneath the temporal lobes. It includes the Hippocampus, Fornix, Thalamus, Hypothalamus, Amygdala, Olfactory cortex and Cingulate Gyrus. Generally speaking, the limbic system is considered our primitive brain and is responsible for things like emotions, instincts/basic drives (i.e., sex, hunger..), motivation, mood, pleasure/pain, smell and memory. Lesions in the Limbic System can result in voracious appetite, increased (often perverse) sexual activity, and docility (including loss of normal fear and anger responses).



SO...

- Wisdom vs Intelligence
- Teens cannot override emotional impulses consistently
- PROBLEMS?



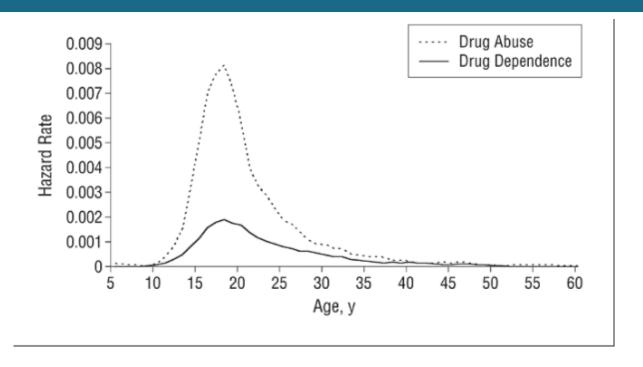




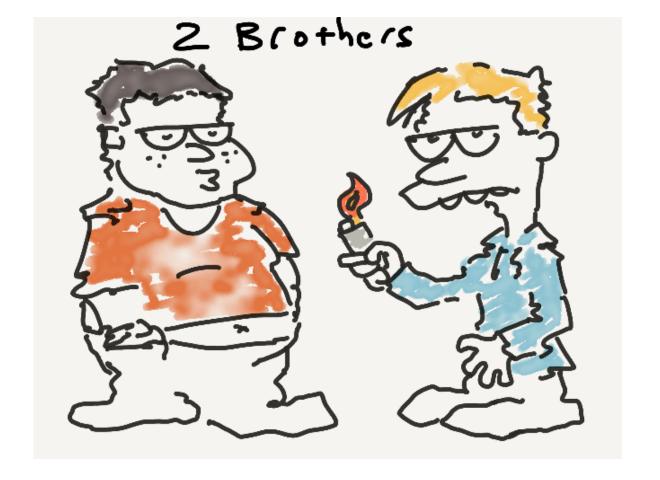
Addiction is a Developmental Disorder



Addiction is a Developmental Disorder





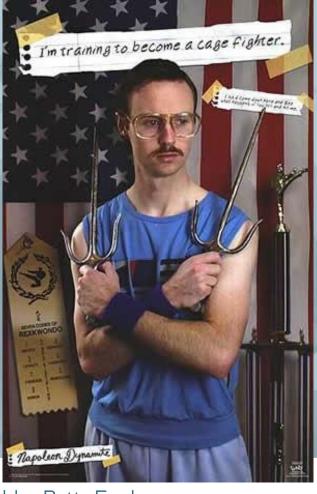






Family history ADHD Early Behavior issues Negotive Peers E only suspension





AT RISK YOUTH ARE DIFFERENT



High Risk Youth are Different

The Marshmallow test







Anticipatory Reward

Anticipatory Reward

Addiction is neurophysiological and from behavioral conditioning

At risk kids feel a strong pull towards conditioned rewards (they blow through homework, chores, to get to an event where they can use)

Get triggered and conditioned and life begins to take a back seat as they chase the reward

Lie more, cover up more, live a "double life"



Delay Discounting





Delay Discounting

- If you increase the delay for a reward your mind tends to discount it more (e.g., \$10 today or \$20 a day later...two, three, days later?)
- At risk youth have a shorter horizon for reward because of how powerfully they're conditioned
- Great difficulty delaying gratification



Delay Discounting

- Not only does the value of reward decrease more quickly over time but so are consequences discounted more rapidly for at risk youth
- Fail a test: "Never again!"; In a few days, rationalize, "maybe it wasn't that bad"
- High risk cohorts have a hard time hardwiring consequences; their memory stays but the emotional sting does not; they repeat their mistakes



So What Are the Risk Factors?

Individual

- Early initiation
- Behavior problems
- Poor emotional regulation
- Poor grades
- Too much work
- Attitudes
- Pseudomaturity



At Risk Teens Are...

- Less daunted by consequences
- Struggle to hardwire lessons from consequences
- Have a harder time delaying gratification
- Tend to be consequential decision makers
- Are more avoidant when immediate reward is absent
- Much more fatalistic



Familial Risk Factors

- Genetics
- Parent behaviors
- Parenting tactics
- Parent/Child relationships



Environmental/Social

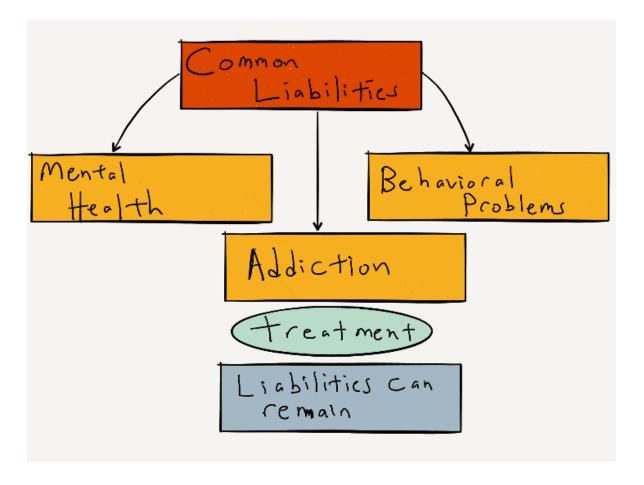
- Environmental/Social
 - Using friends
 - Shared attitudes
 - Popularity?
 - Adversity/Trauma



Common Liability Theory

- Shared liabilities change the risk for addiction over development
- •i.e. Genetics, Obesity







Drug and Alcohol Dependence

Author Manuscript

HHS Public Access

Index of the Transmissible Common
Liability to Addiction: Heritability and
Prospective Associations with Substance
Abuse and Related Outcomes

Brian M. Hicks, William G. Iacono, and Matt McGue



Does the Transmissible Liability Index (TLI) assessed in late childhood predict suicidal symptoms at young adulthood?

Cornelius JR¹, Kirisci L, Reynolds M, Vanyukov M, Tarter R.

Author information

Abstract

OBJECTIVE: Our previous work demonstrated that the Transmissible Liability Index (TLI), an instrument designed as an index of liability for substance use disorder (SUD), is associated with risk of substance use disorder. This longitudinal study assessed whether TLI measured in 10-12-year-olds (late childhood) predicts suicidal behavior from age 12-14 (preadolescence) to age 25 (young adulthood). We hypothesized that TLI would predict number and severity of suicide attempts.

METHODS: Subjects were sons of men who had lifetime history of SUD (n = 250), called the High Average Risk (HAR) group, and sons of men with no lifetime history of a SUD (n = 250), called the Low Average Risk (LAR) group. The TLI was delineated at baseline (age 10-12), and age-specific versions were administered at 12-14, 16, 19, 22, and 25 years of age.

RESULTS: TLI was significantly associated with number and severity of lifetime suicide attempts.

CONCLUSIONS: These findings confirm the hypothesis that TLI assessed at late childhood is a predictor of frequency and severity of suicidal behavior from preadolescence to young adulthood.

Addiction is About People, Not Drugs









- PARETO'S PRINCIPLE
- 80/20
- 10% of people consume more than half of the alcohol in the country

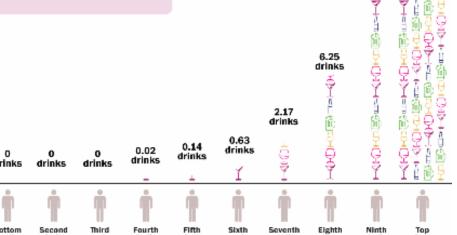


Time for a stiff drink

Average number of drinks per capita consumed in the past week, by decile, among adults aged 18 and over.

30 percent of American adults don't drink at all. Another 30 percent consume, on average, less than one drink per week.

On the other hand, the too 10 percent of American adults - 24 million of them - consume an average of 74 drinks per week, or a little more than 10 drinks per day.



WASH NGTONPOST.COM/WONKBLOG

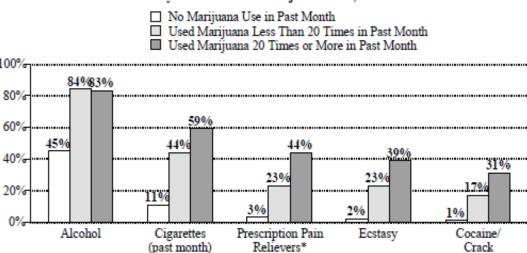
Source: "Paying the Tab," by Phillip J. Dook

73.85

drinks

Marijuana is "Better" Than

Percentage of U.S. High School Students Reporting Past Year Substance Use, by Past Month Marijuana Use, 2011



Substance Used in Past Year



Basic Concepts

- Cohort is just as important as drugs
- Development of SUD is about risk/trajectory
- Risks can be identified and intervened on
- Risks may continue even with sobriety (shared so can lead to other pathology)



Marijuana and Early Drug Use

- Early drug use and alcohol use can affect development but...
 - More important to note that early users are self identifying as high risk
 - Think cohort
 - Mild marijuana use disorder



Traps for Clinicians

- Ranking one drug as better than another
- Dismissing early use as a "phase"
- Believing use is solely due to some other issue (mental health, depression, ADHD)
- Waiting for "full addiction" to set in



Stay informed, be openminded, and we can solve this together.





