

January 23, 2020



D.C. Update: NASADAD releases overview of Electronic Nicotine Delivery Systems (ENDS), NIH supported study finds prenatal smoking and drinking increase risk for SIDS, and more



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### Meet the Member

#### Michael Langer, Region X Director

Michael Langer is the Deputy Assistant Director for the Washington State Health Care Authority Division of Behavioral Health and Recovery. Michael has managed prevention, intervention, treatment, and recovery support services for the State since 1986. He has extensive experience managing federal grants and State resources, and leading statewide substance use and mental health program initiatives and system reforms. Michael currently serves on the NASADAD Board of Directors as Region X Director and has previously served on the Executive Boards of its component groups: the National Prevention Network (NPN) and the National Treatment Network (NTN). Michael and his wife Kelli are the proud parents of 4 children and one granddaughter, and live in Rochester, Washington.



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### News from NASADAD

#### NASADAD releases overview of electronic nicotine delivery systems (ENDS)

NASADAD recently released a new fact sheet titled "[Overview of and Recommendations Regarding Electronic Nicotine Delivery Systems \(ENDS\)](#)". The overview offers background on e-cigarettes and reviews the scope of the

## Overview of and Recommendations Regarding Electronic Nicotine Delivery Systems (ENDS)

### BACKGROUND AND SCOPE OF THE PROBLEM:

Electronic nicotine delivery systems (ENDS), or e-cigarettes, were introduced in the United States in 2007, and have become a pressing public health concern, especially among youth (Office of the Surgeon General [OSG], 2016, p. 10). Some brands were initially promoted by industry as smoking cessation aids, but e-cigarettes are not currently approved by the U.S. Food and Drug Administration as an aid to quit smoking (U.S. Food and Drug Administration [FDA], 2019a).

E-cigarettes are also known as e-cigs, e-hookahs, mods, vape pens, vapes, and tank systems. Some e-cigarettes look like regular cigarettes and some often resemble everyday items such as USB sticks or highlighters (Centers for Disease Control and Prevention [CDC], n.d.). E-cigarettes are designed to deliver nicotine, flavorings, and other additives via an inhaled aerosol (CDC, 2019c). In addition to being inhaled by the e-cigarette user, this aerosol can also be inhaled secondhand by bystanders (CDC, n.d.). Of all e-cigarettes sold at convenience stores, supermarkets, and other common retailers, 99% contain the drug nicotine (Marynak et al., 2017). The e-cigarette aerosol that users breathe from the device can contain other harmful substances in addition to nicotine, including cancer-causing chemicals and ultrafine particles that reach deep into the lungs (CDC, 2019a).

Nicotine is highly addictive and can affect the developing brain, potentially harming teens and young adults (CDC, 2019b). Nicotine use during adolescence and young adulthood has been associated with impairments in memory, attention, and learning (American Lung Association, 2019). Additionally, the nicotine in e-cigarettes and other tobacco products cause changes in the adolescent brain that make it more vulnerable to addiction to other drugs (U.S. Department of Health and Human Services, n.d.).

Currently, 1 in 5 high school students use e-cigarettes. The rate of use has increased 78% among high school students, from 11.7% in 2017 to 20.8% in 2018 (FDA, 2019e). These youth who use e-cigarettes are more likely to continue on to regular cigarette use (Rand Corporation, 2018). Additionally, youth who use e-cigarettes are 3.5 times more likely to use marijuana (National Institute on Drug Abuse, 2019).

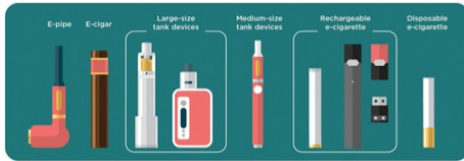


Figure 1 Retrieved from CDC (n.d.)

NASADAD National Association of State Alcohol and Drug Abuse Directors

problem, especially among youth; outlines federal actions over the past several years, including recent steps to raise the minimum age of legal tobacco product access to 21; describes the Food and Drug Administration's (FDA) role in regulating the sale of tobacco products; describes the State alcohol and drug agencies' role in tobacco control, with a particular focus on Synar; and offers NASADAD's position and recommendations related to ENDS.

## Around the Agencies

### SAMHSA accepting applications for the Comprehensive Opioid Recovery Centers grant

The Substance Abuse and Mental Health Services Administration (SAMHSA) is now accepting [applications](#) for the Comprehensive Opioid Recovery Centers (CORC) grant, which was authorized in the SUPPORT Act of 2018. As described in the funding opportunity announcement (FOA), the purpose of the program is to assist nonprofit organizations in the operation of comprehensive centers which provide a full spectrum of treatment and recovery support services to address the opioid crisis. The anticipated total available award amount is \$850,000, awarded to two organizations.

### ACF requests recommendations for programs using recovery coaches in child welfare settings

The Administration for Children and Families (ACF) is currently requesting recommendations related to their [Expanding Evidence on Replicable Recovery and Reunification Interventions for Families \(R3\) project](#). The project, authorized in the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act, will conduct an impact evaluation of recovery coach interventions for families involved or at risk of involvement with the child welfare system due to a substance use disorder (SUD). ACF is requesting recommendations for programs that are currently using recovery coaches in these settings and have the potential for replication and evaluation. The following information is requested in a cover letter or email:

- Name of intervention or program: Please list all known names for the program and if applicable, specify the version or adaptation recommended for review.
- Contact information: If available, please provide the name and contact information for an individual we can contact about this program.
- Service sector: Specify the primary service sector(s) in which the program is currently or has previously been used (e.g., substance use treatment, child welfare).
- Description of program Please provide a description of the program, or information about how to access written materials describing the program.
- Evidence indicating promise: Please provide information about how to access written materials describing any impact, outcome, process, or implementation study of the program.

Submissions may also include supporting documentation and can be sent to

### FDA to release video series as part of youth vaping prevention campaign

Beginning this week, the Food and Drug Administration (FDA) will [launch](#) a video series as part of their [“The Real Cost”](#) youth e-cigarette prevention campaign. The video series, titled “My Vaping Mistake”, will feature true stories from teens that experienced the physical and emotional effects of e-cigarette addiction. The four episodes in the video series will be released throughout the month of January on youth-focused channels and “The Real Cost” campaigns social media accounts.



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### Research Roundup

#### NIH-supported study finds prenatal smoking and drinking increase risk for SIDS

The National Institutes of Health (NIH) [announced](#) the results of a new [study](#) examining the association between maternal smoking and drinking during pregnancy and the risk of sudden infant death syndrome (SIDS). As described in the announcement, many studies have found that prenatal alcohol exposure and smoking can increase the risk of SIDS. Therefore, researchers focused on the influence of timing and the amount of prenatal exposure to tobacco and alcohol. Results of the study indicated a 12-fold increase in the risk for SIDS from combined smoking and drinking beyond the first trimester of pregnancy. Separately, the risk of SIDS increased five-fold in infants whose mothers continued smoking beyond the first trimester and four-fold for infants whose mothers continued drinking past the first trimester.

#### Study finds lack of treatment services and high rates of overdose deaths in States with Medicaid work requirements

A [research paper](#) published in the *Journal of General Internal Medicine* found that States with approved Medicaid work requirement waivers had higher rates of opioid-related overdose deaths, compared to States with pending or no work requirements. Additionally, researchers found that States with work requirements had fewer treatment facilities and fewer clinicians waived to prescribe buprenorphine. Researchers noted the concerning nature of these results as individuals with substance use disorder (SUD) face challenges in finding and maintaining employment and could potentially lose their healthcare coverage. While sixteen of the seventeen States with work requirements allow SUD treatment to fulfill the work requirement, limited treatment resources would inhibit this exemption.

#### Study finds higher overdose mortality rates in counties that experienced an automotive assembly plant closure

A [study](#) recently published in the *Journal of the American Medical Association (JAMA)* examined the association between automotive assembly plant closures and opioid overdose mortality rates. Researchers analyzed 112 manufacturing counties between 1999 and 2016 and found that automotive assembly plant closures were associated with an increase in opioid overdose mortality. Five years after a plant closure, mortality rates had increased by 85% compared to counties that did not experience closure. Researchers noted that their findings highlight the association between declining economic opportunity and the opioid overdose crisis.

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### In the News

[SPR accepting team applications for the Sloboda and Bukoski Cup](#)

The Society for Prevention Research (SPR) is now accepting team [applications](#) for the fifteenth annual Sloboda and Bukoski SPR Cup. Teams of early career researchers are given a data set based on SPR's 2020 conference theme, "Why Context Matters: Towards a Place-Based Prevention Science". Teams will then conduct a literature review and analysis and present their findings at a symposium with senior prevention scientist judges. The highest scoring team may also be invited to submit a manuscript of their findings to be considered for publication in SPR's journal, *Prevention Science*. Applications are due February 24th and a maximum of five teams will be accepted.



Great Lakes (HHS Region 5)

**PTTC**

Prevention Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

**Prevention as Partners in Recovery-Oriented Systems of Care**

## Upcoming Events

### Webinar on using Recovery-Oriented Systems of Care to advance prevention goals

The Prevention Technology

Transfer Center Network (PTTC) announced an upcoming webinar titled "Prevention as Partners in Recovery-Oriented Systems of Care". As described in the announcement, the webinar will provide an overview of Recovery-Oriented Systems of Care with an emphasis on opportunities for collaboration across community sectors to advance prevention goals. Chuck Klevgaard, a nationally recognized expert in substance misuse prevention and school-based health, will present during the webinar. Registration can be found [here](#) and the webinar will be held on January 29th from 11:00-12:00pm EST.