

# Why COVID-19 could make the overdose epidemic worse

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When Alberta's chief medical officer, Deena Hinshaw, announced special exemptions to COVID-19 regulations for group therapy in residential addiction treatment centres, it was exactly what University of Alberta addictions expert Cameron Wild was hoping to hear.

"The whole concept of recovery is in part founded on developing strong social supportive relationships," said Wild, principal investigator with the Canadian Research Initiative on Substance Misuse in the U of A's School of Public Health.

"The most commonly used form of treatment in programs throughout North America is founded on 12-step principles—essentially fellowship groups. These traditionally rely on in-person group meetings," some of which have been severely limited, said Wild.

In other words, isolation and addictions simply do not mix, and Wild worries a rise in overdoses will result.

Just before COVID-19 hit, the number of deaths in Alberta as a result of fentanyl overdoses dropped to the lowest figures in three years, according to [new provincial data](#).

In the final quarter of 2019, 109 people died from a fentanyl-related overdose, down from 158 in 2018 and 178 in 2017. But conditions caused by the pandemic could reverse that encouraging trend, said Wild.

"Any kind of retrenchment of harm reduction services has potential to negatively impact progress we were starting to see in overdose rates in the community."

Wild and his colleagues across the country have been monitoring changes experienced by people who use drugs during the COVID-19 pandemic, especially marginalized drug users. The researchers are developing guidelines for harm reduction and addiction treatment in light of COVID-19 public health measures.

While outpatient programs now have reduced access, others are doing the best they can to continue operating with public health measures in

place, said Wild.

"It's fair to say addiction treatment has been disrupted. Clinicians across the board are concerned about maintaining critical therapeutic relationships between them and their patients, as well as the supportive social relations that go on in effective group treatment."

## **More dangerous street drugs**

Besides the disruption of social contact for recovering addicts, the pandemic can bring with it harmful consequences related to the illegal drug trade, said Wild. The closed Canada-U.S. border limits illegal supply, and that could lead to more adulterated and toxic drugs on the street.

"If the drug market is changing, there's an economic incentive to maximize profit for a reduced number of drug transactions. There's more motivation to adulterate drug supplies.

"We're very concerned about that and the impact on [drug users](#)," said Wild.

The pandemic has underscored the reality that many substance abusers are among the most vulnerable in society, said Wild, adding it's hard to comply with a stay-at-home order if you don't have a home.

"The impacts for people who are more marginalized are being felt both in drug supply chains and disruption in access to drugs because of concerns about infectious disease transmission."

Support for substance abuse harm reduction had already been eroding before the pandemic, said Wild, especially in light of a report by the Alberta government's Supervised Consumption Services Review

Committee. It suggested supervised drug consumption sites produce increased needle debris in surrounding neighbourhoods and are a risk to public safety.

"That was the worst possible time for that to have come out," said Wild.

"We're really trying to promote the idea that we don't want to exacerbate overdose death and [drug](#)-related problems by restricting harm reduction services further."

Wild also recommends loosening restrictions on "opioid agonist" treatments such as methadone or buprenorphine to treat addiction to opioids.

"We support things like pharmacists being able to supply longer-term medication that can be more flexibly delivered," he said.

## **Increased overall use of alcohol and cannabis**

Wild and his colleagues have also been watching a rise in substance use—especially alcohol and cannabis—in the general population while people are sheltered at home during the pandemic.

According to a [recent poll](#) by the Canadian Centre on Substance Use and Addiction, 25 percent of Canadians aged 35–54 are drinking more at home, citing lack of a regular schedule, stress and boredom as the main reasons.

"We're concerned about broader [general population](#) changes in [substance use](#) patterns triggered by some of the isolation and distancing issues that people are being asked to adopt."

Wild said he hopes the experience of addicts will give us all fresh eyes to

re-evaluate addictions services.

"This is a chance to look with a very sober eye at the patchwork of services that existed prior to the pandemic," he said. "We need to reconsider several key components in how we respond to [addiction](#)."

"I just hope that we don't see that need for reform on the basis of increased overdoses and harm to users."

Provided by University of Alberta

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