

Drug Abuse Trends Minneapolis/St. Paul, Minnesota

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Numerous indicators of methamphetamine (meth) abuse, particularly among adolescents, continued to decline in 2007 in the Twin Cities metro area, reversing previous upward trends. Seizures of methamphetamine by law enforcement, however, continued to outnumber seizures of any other illicit drug in 2007 (34.7 percent of all seizures).

Admissions to addiction treatment programs with methamphetamine as the primary substance problem accounted for 7.6 percent of metro area treatment admissions in 2007 (first half) compared with 8 percent in 2006 and 12 percent in 2005 (the highest year). An increasingly smaller proportion of meth admissions were adolescents. Patients under the age of 18 accounted for 4 percent of meth-related treatment admissions in 2007 (first half), compared with a high of 17.8 percent of total meth-related admissions in 2003.

Methamphetamine use by high school students in the metro area also showed downward trends according to new data from the Minnesota Student Survey. Among high school seniors 2.2 percent reported methamphetamine use in 2007, compared with 4.8 percent in 2004 and 5.3 percent in 2001. In 2007 meth use (any use in the year prior to the survey) was reported by 1.5 percent of metro 9th grade students, compared with 4.1 percent in 2004 and 4.3 percent in 2001. Similar declines were found statewide.

Collectively these findings suggest that the growth in methamphetamine abuse in the Twin Cities is slowing and possibly reversing itself due to continued pressures on the supply side and reduced interest on the demand side, particularly among young people.

From 2004 to 2007, use of marijuana, MDMA (“ecstasy”), and LSD increased among metro area high school seniors. Marijuana use (any use in the past year) was reported by 33 percent of high school seniors in 2007, compared with 29.2 percent in 2004, and reversing a slight downward trend since a rate of 35 percent in 1995. Declines were seen for grades 9 and 6, however. MDMA use (any use in the past year) rose from 4.3 percent in 2004 to 5.7 percent in 2007, and LSD from 4.9 to 6.2 percent.

Since 1998 cigarette use (any use in past month) declined among metro area high school students, and in 2007 was reported by 21.5 percent of seniors, 9 percent of 9th graders, and 1.5 percent of 6th graders.

Both marijuana and cocaine treatment admissions declined. In 2007 (first half) marijuana admissions accounted for 16.4 percent of total admissions, compared with 18.3 percent in 2006. Cocaine accounted for 11.6 percent in 2007 (first half) compared with 14.1 percent in 2006. Most cocaine admissions were for crack cocaine. Admissions for heroin have steadily and gradually increased since the turn of the century to 6.1 percent in 2007 (first half). Opiate-related deaths outnumbered those related to any other illicit drug.

Alcohol remained the most widely abused substance. Treatment admissions for alcohol accounted for half of all admissions in 2007, up slightly from 2006 (48.3 percent). Sixty percent of alcohol-related treatment admissions were age 35 or older.

Recent alcohol toxicity-involved deaths at numerous college campuses across the State raised public awareness of extreme college binge drinking, an ongoing issue with dangerous consequences. Current alcohol use was reported by 73.7 percent of students age 18 – 24 at the University of Minnesota Twin Cities campus in 2007, according to the 2007 College Health Survey Report by Boynton Health Service

of the University of Minnesota Twin Cities. High risk drinking (five or more drinks at one sitting in the past two weeks) was reported by 41.6 percent of students with relatively stable trends since 2000.

Alcohol consumption (any use in past year) was reported by 60.8 percent of metro area high school seniors in 2007, virtually unchanged from the 2004 survey (60.6 percent), but lower than the highest rate of 78.1 percent in 1992. From 2004 to 2007 alcohol use declined among 9th graders from 40.3 to 35.4 percent and among 6th graders from 10.9 to 8.8 percent. Binge drinking rates (five or more drinks on one occasion in past two weeks) were also relatively stable among high school seniors (roughly 28 percent since 1998) and fell slightly among 9th graders to 11.5 percent in 2007 from 14 percent in 2004.

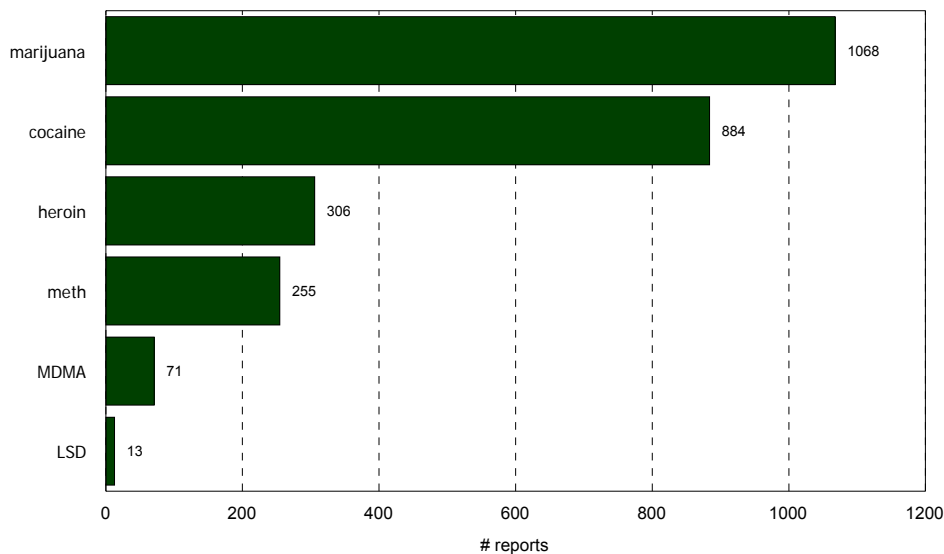
In 2007 (through September) 68 alcohol-related deaths were reported in Hennepin County: 8 where acute alcohol poisoning was cited as the cause of death, and 60 where acute alcohol intoxication was reported as a significant contributing condition. By comparison in the same period in 2007 there were 52 opiate-related deaths, 42 cocaine-related deaths and 5 involving methamphetamine in Hennepin County.

This report is prepared twice annually as part of a national drug abuse monitoring work group of the National Institute on Drug Abuse. It is based on the most recent available data from multiple sources.

Data Sources:

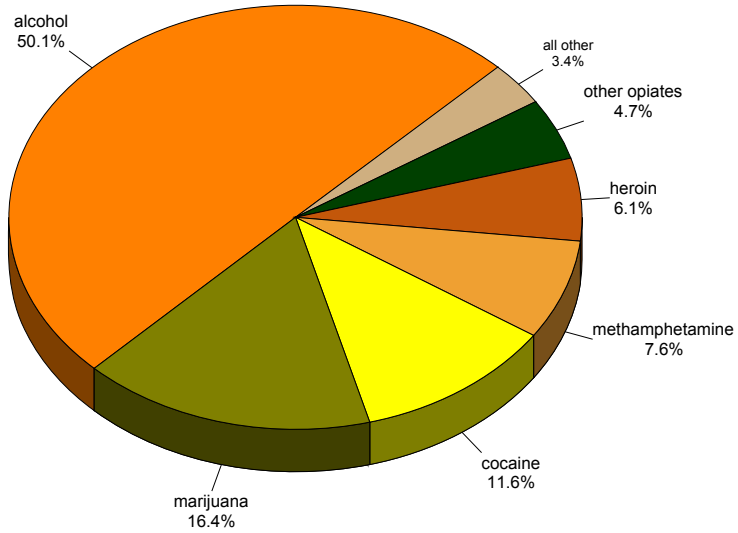
- **Treatment data**
from addiction treatment programs (residential, outpatient, extended care) in the five-county Twin Cities metropolitan area as reported on the Drug and Alcohol Abuse Normative Evaluation System (DAANES) of the Minnesota Department of Human Services (through June 2007).
- **Hospital emergency department data**
from the Drug Abuse Warning Network (DAWN) *Live!*, a newly revised system administered by the Office of Applied Studies of the Substance Abuse and Mental Health Services Administration. A patient may report the use of multiple drugs (up to six) and alcohol. Due to the 2003 redesign, these DAWN *Live!* data *cannot* be compared to DAWN data from 2002 and before. A full description of DAWN is online at www.dawninfo.samhsa.gov.
- **Mortality data**
from the Hennepin County Medical Examiner and the Ramsey County Medical Examiner (through September 2007). Hennepin County cases include those in which drug toxicity was the immediate cause of death and those in which the recent use of a drug was listed as a significant condition contributing to the death. Ramsey County cases include those in which drug toxicity was the immediate cause of death and those in which drugs were present at the time of death.
- **Crime lab data**
from the National Forensic Laboratory Information System (NFLIS), sponsored by the U.S. Drug Enforcement Administration.
- **Meth lab data**
from the U.S. Drug Enforcement Administration, National Clandestine Laboratory Database.
- **Secondary schools - student survey data**
from the Minnesota Student Survey, which is administered statewide every three years to students in grades 6, 9 and 12. It asks questions about tobacco, alcohol and other drug use. Results presented here are from students in the 5-county metropolitan area.
- **College student survey data**
from 2007 College Health Survey Report, Boynton Health Service, University of Minnesota Twin Cities, 2007.

Reports on drug-related emergency department (ED) visits in Minneapolis/St. Paul by drug category (unweighted): January - June 2007



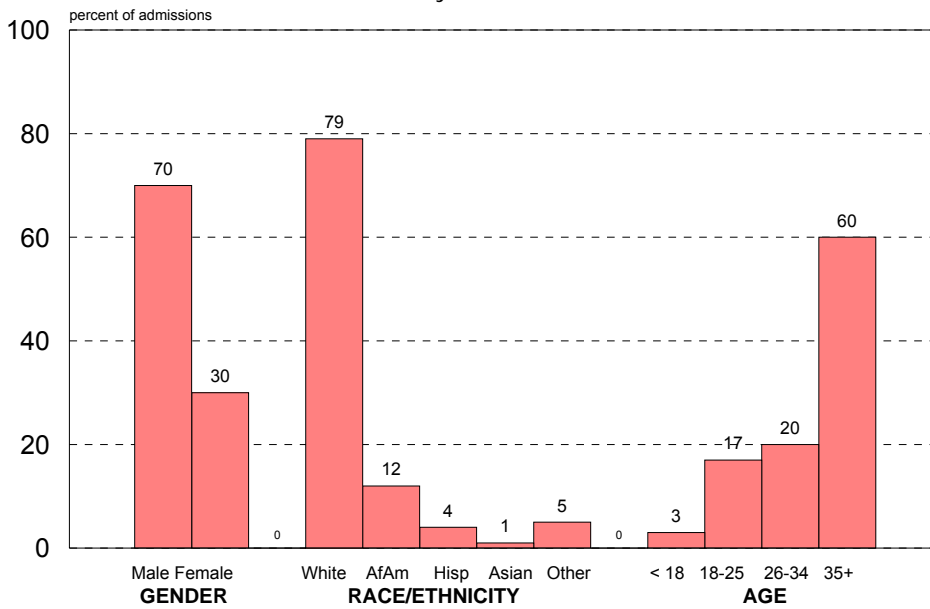
SOURCE: Drug Abuse Warning Network (DAWN) *Live!* cases derived from a sample of up to 10 metro area hospital emergency departments from 1/1/2007 through 6/31/2007. All cases are reviewed for quality control and based on this review may be corrected or deleted. These data were generated by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration on 12/10/2007.

Patients admitted to Twin Cities area addiction treatment programs
by primary substance problem: January - June 2007



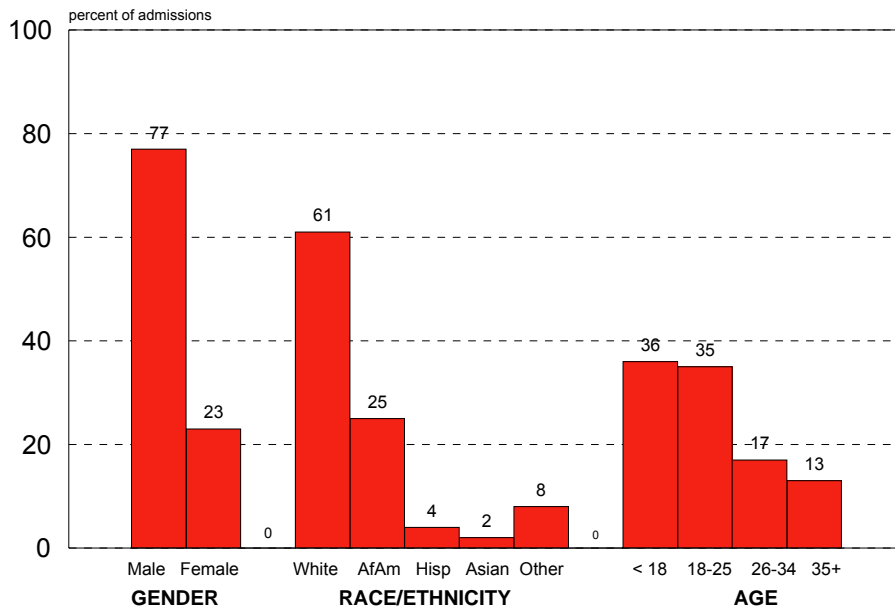
SOURCE: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Minnesota Department of Human Services, 2007.

Patient characteristics: Alcohol treatment admissions in Twin Cities
January - June 2007



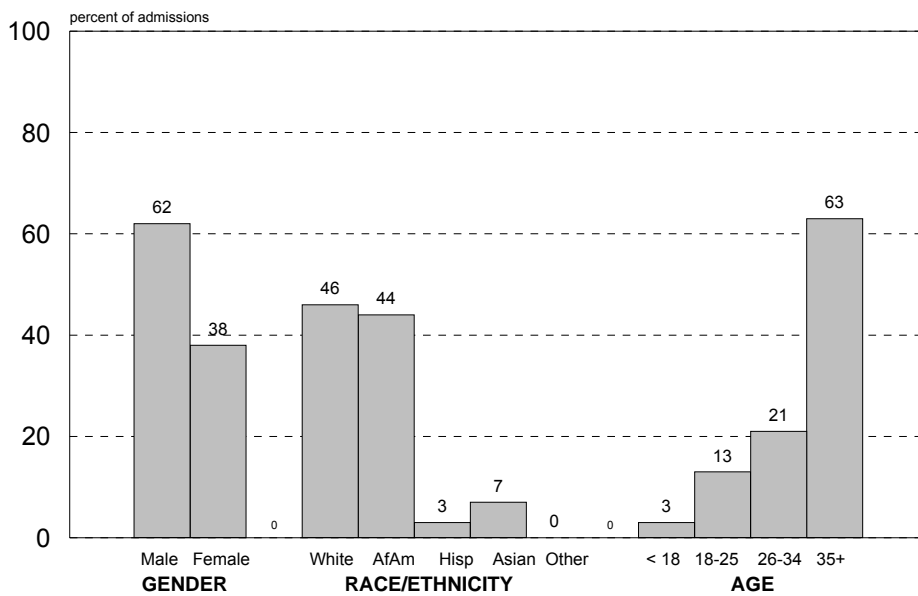
SOURCE: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Performance Measurement and Quality Improvement Division, Minnesota Department of Human Services, 2007.

Patient characteristics: Marijuana treatment admissions in Twin Cities
January - June 2007



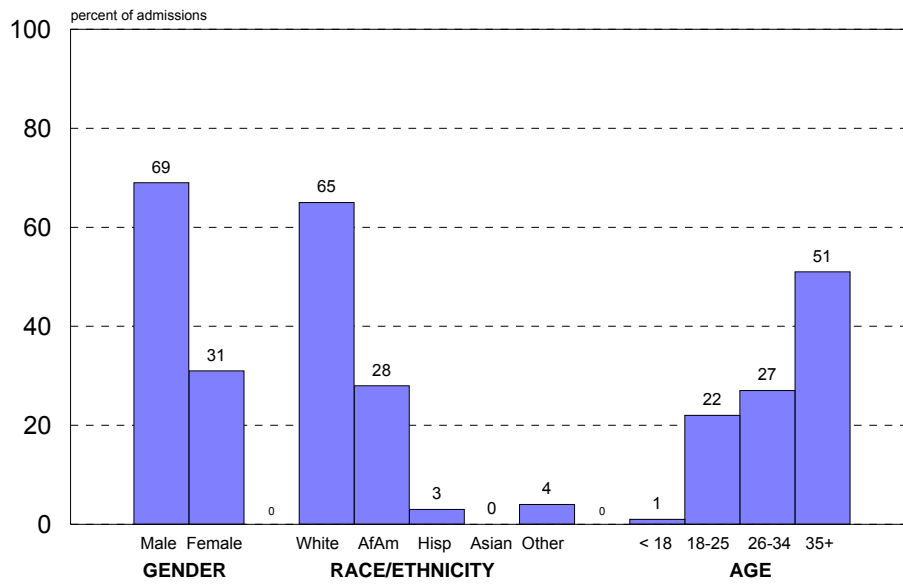
SOURCE: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Performance Measurement and Quality Improvement Division, Minnesota Department of Human Services, 2007.

Patient characteristics: Cocaine treatment admissions in Twin Cities
January - June 2007



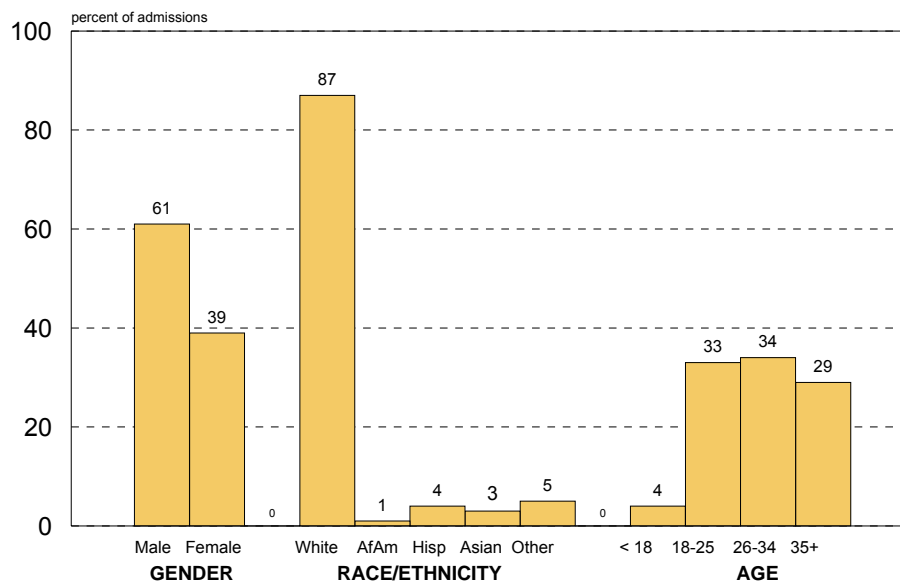
SOURCE: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Performance Measurement and Quality Improvement Division, Minnesota Department of Human Services, 2007.

Patient characteristics: Heroin treatment admissions in Twin Cities
January - June 2007



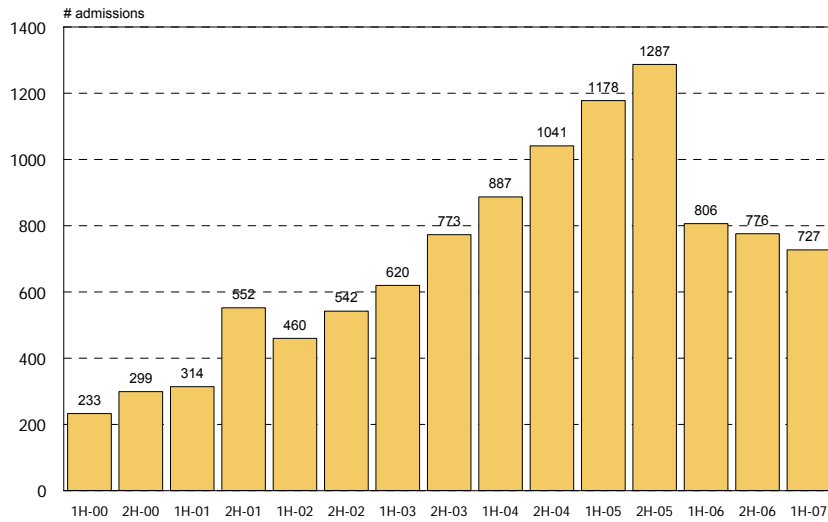
SOURCE: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Performance Measurement and Quality Improvement Division, Minnesota Department of Human Services, 2007.

Patient characteristics: Methamphetamine treatment admissions in Twin Cities
January - June 2007



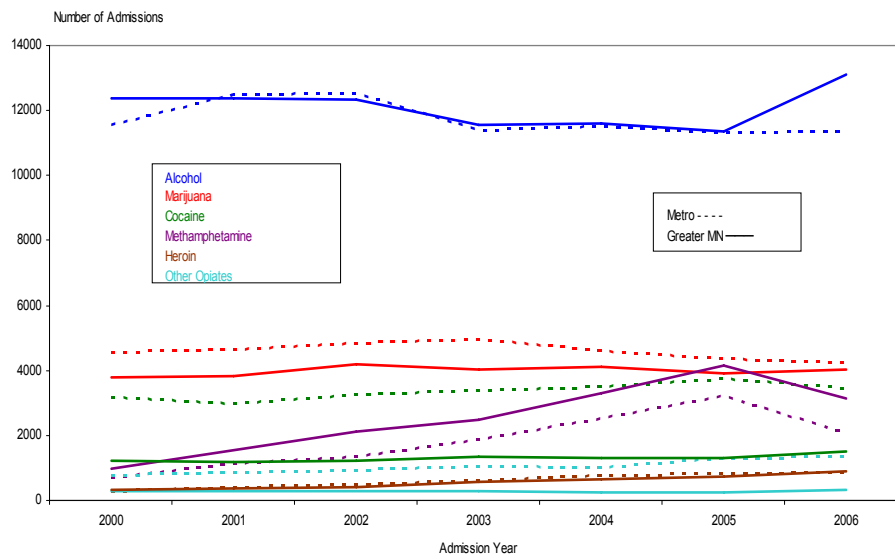
SOURCE: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Performance Measurement and Quality Improvement Division, Minnesota Department of Human Services, 2007.

Methamphetamine-related treatment admissions in the Twin Cities area: 2000 through June 2007 (by half year)



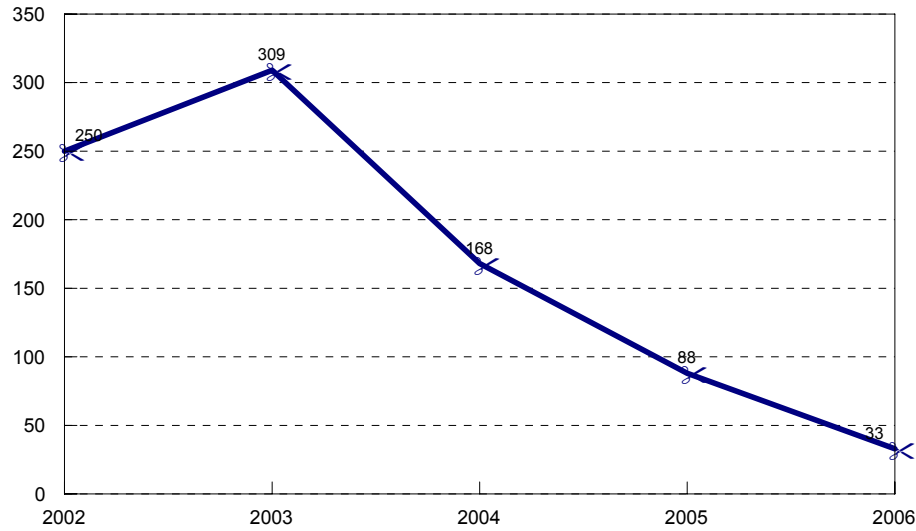
SOURCE: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Minnesota Department of Human Services, 2007.

Addiction treatment admissions by geographic area by primary drug by year: Minnesota 2000 - 2006



SOURCE: Drug and Alcohol Abuse Normative Evaluation System, Performance Measurement and Quality Improvement Division, Minnesota Department of Human Services, 2007.

Clandestine methamphetamine laboratory incidents in Minnesota:
Labs, dumpsites, chemicals, glass, equipment
2002 - 2006



SOURCE: US Drug Enforcement Administration, National Clandestine Laboratory Database.

Drug seizures
Twin Cities - FFY 2007

| Drug | # of items | Percent |
|-----------------|-------------|------------|
| Methamphetamine | 1535 | 34.7 |
| Cocaine | 1263 | 28.6 |
| Cannabis | 1165 | 26.4 |
| MDMA | 184 | 4.2 |
| Oxycodone | 51 | 1.1 |
| all other | 218 | 5 |
| TOTAL | 4416 | 100 |

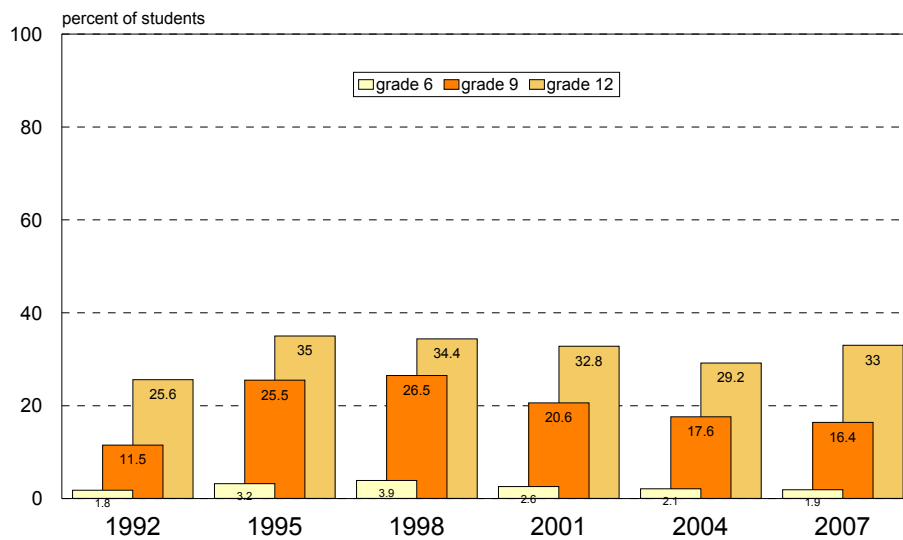
SOURCE: National Forensic Laboratory Information System (NFLIS), seven county metro area, US Drug Enforcement Administration, 2008.

Drug-related deaths:
Hennepin County and Ramsey County

| | 2006 | Jan- Sept 2007 |
|-------------------------------|------------------------|------------------------|
| <i>HENNEPIN COUNTY</i> | | |
| cocaine | 48 | 42 |
| opiates | 69 | 52 |
| meth | 8 (includes 1 MDMA) | 5 (includes 1 MDMA) |
| alcohol | 98 | 68 |
| <i>RAMSEY COUNTY</i> | | |
| cocaine | 13 | 10 |
| opiates | 27 | 26 |
| meth | 6 | 5 |
| alcohol | n/a | n/a |

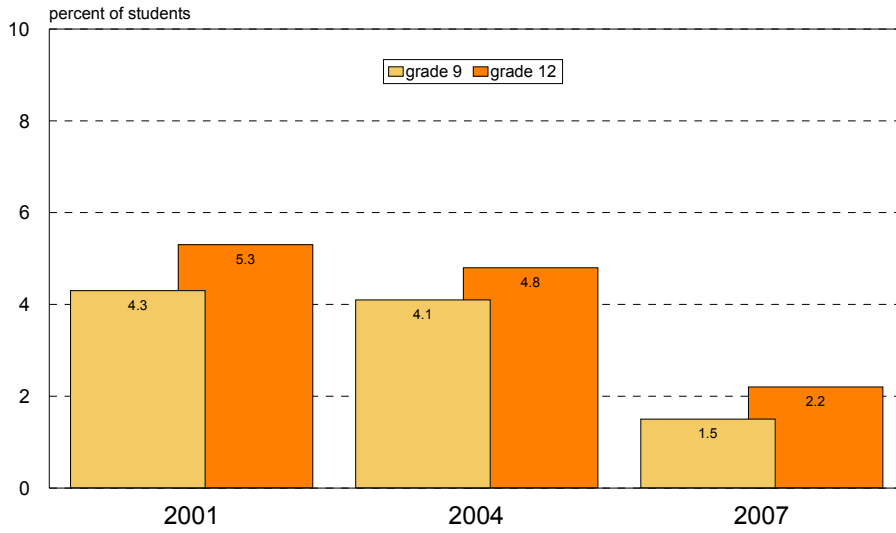
SOURCE: Hennepin County Medical Examiner and Ramsey County Medical Examiner, 2008. Hennepin County cases include those in which drug or alcohol toxicity was the cause of death and those in which drug or alcohol use was a significant contributing condition. Ramsey County cases include those in which drug toxicity was the cause of death and those in which drugs were present at the time of death. Alcohol-related data was not obtained from Ramsey County.

Marijuana use in past year by Twin Cities area students:
1992 - 2007



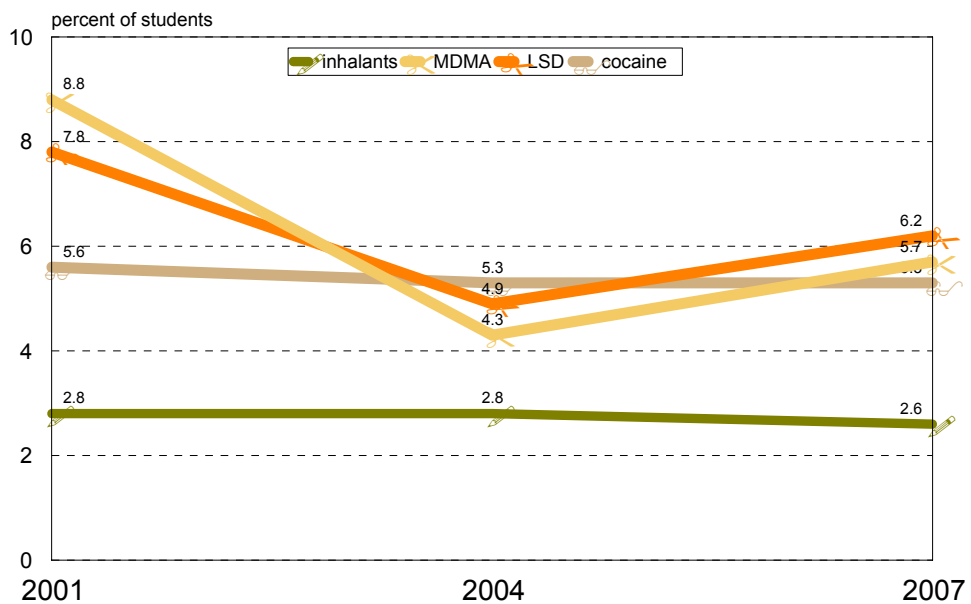
SOURCE: Minnesota Student Survey, Trend dataset, 5 county metro area, PMQI, Minnesota Department of Human Services, 2008.

Methamphetamine use in past year by Twin Cities area students:
2001 - 2007



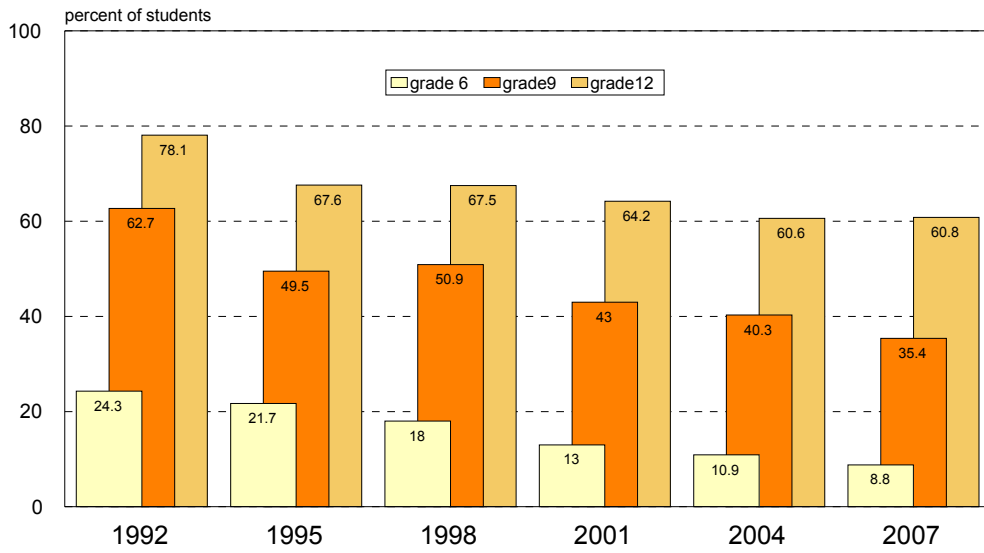
SOURCE: Minnesota Student Survey, Trend dataset, 5 county metro area, PMQI, Minnesota Department of Human Services, 2008.

Use of other drugs in past year by Twin Cities area high school seniors:
2001 - 2007



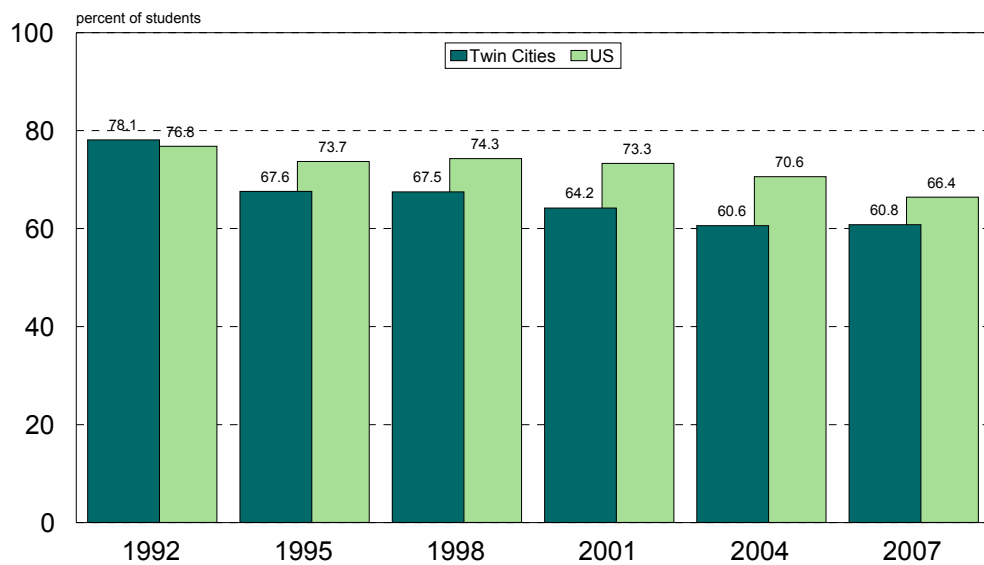
SOURCE: Minnesota Student Survey, Trend dataset, 5 county metro area, PMQI, Minnesota Department of Human Services, 2008.

Alcohol use in past year by Twin Cities area students:
1992 - 2007



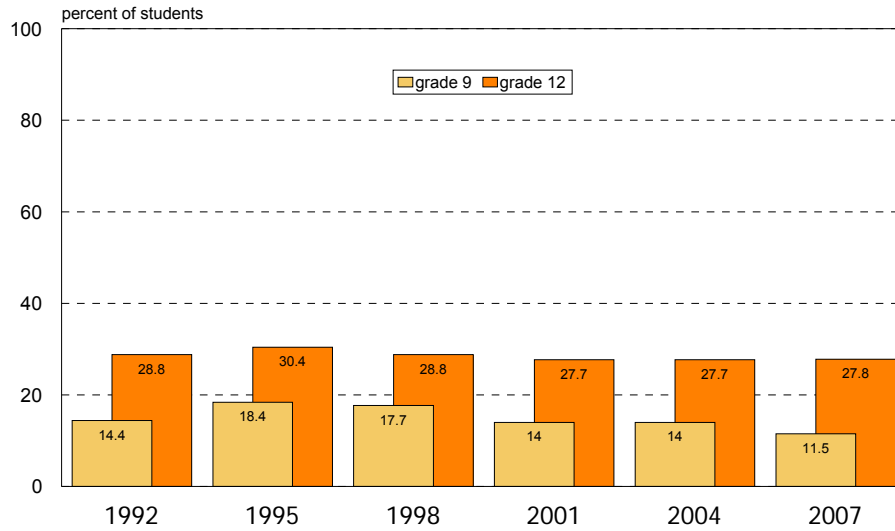
SOURCE: Minnesota Student Survey, Trend dataset, 5 county metro area, PMQI, Minnesota Department of Human Services, 2008.

Past year alcohol use by high school seniors: Twin Cities and US
1992 - 2007



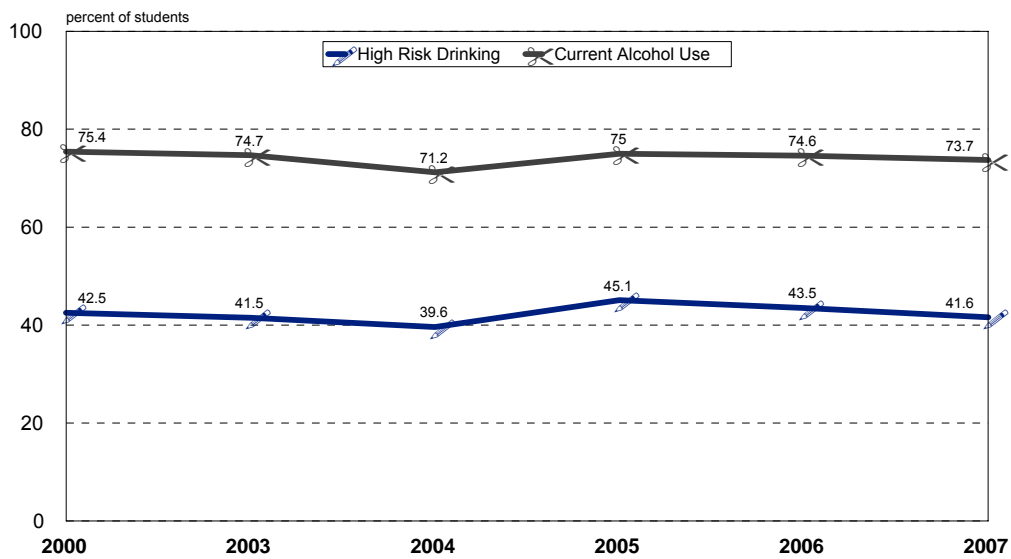
SOURCE: Minnesota Student Survey and the Monitoring the Future Study, University of Michigan, 2007. Past year use means any use in the year prior to the survey. Twin Cities includes students in the 5-county metro area: Anoka, Dakota, Hennepin, Ramsey, and Washington.

Binge drinking in past 2 weeks by Twin Cities area students:
1992 - 2007



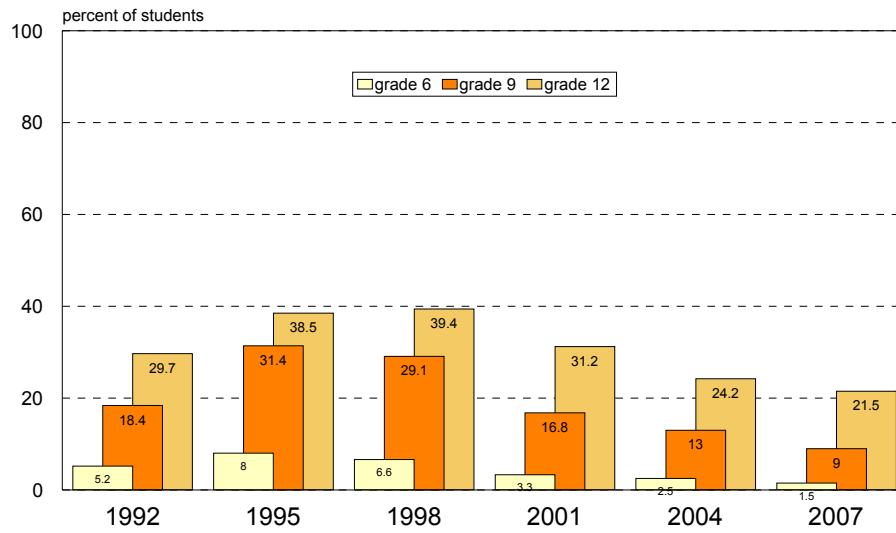
SOURCE: Minnesota Student Survey, Trend dataset, 5 county metro area, PMQI, Minnesota Department of Human Services, 2008.

Current alcohol use and high risk drinking at the University of Minnesota
Twin Cities campus by students age 18 -24
2000 - 2007



SOURCE: 2007 College Health Survey Report, Boynton Health Service, University of Minnesota Twin Cities, 2007.
High risk drinking = 5 or more drinks at one sitting in past 2 weeks. Current alcohol use = any alcohol use in past 30 days.

Cigarette use in past 30 days by Twin Cities area students:
1992 - 2007



SOURCE: Minnesota Student Survey, Trend dataset, 5 county metro area, PMQI, Minnesota Department of Human Services, 2008.

Supplemental tables

Characteristics of patients admitted to Minneapolis/St. Paul area
treatment programs by primary substance problem: January - June 2007

| TOTAL admissions = 9,543 | ALCOHOL = 4,768 (50%) | MARIJUANA = 1,562 (16.4%) | COCAINE = 1,112 (11.6%) | METH = 727 (7.6%) | HEROIN = 587 (6.1%) |
|-----------------------------|--------------------------|------------------------------|----------------------------|----------------------|------------------------|
| GENDER | | | | | |
| % male | 70 | 77 | 62 | 61 | 69 |
| % female | 30 | 23 | 38 | 39 | 31 |
| RACE/ETHNICITY | | | | | |
| % White | 79 | 61 | 46 | 87 | 65 |
| % African Am | 12 | 25 | 44 | 1 | 28 |
| % Hispanic | 4 | 4 | 3 | 4 | 3 |
| % Am Indian + Other | 5 | 8 | 7 | 5 | 4 |
| % Asian | 1 | 2 | 0 | 3 | 0 |
| AGE | | | | | |
| % 17 and under | 3 | 36 | 3 | 4 | 1 |
| % 18 - 25 | 17 | 35 | 13 | 33 | 22 |
| % 26 - 34 | 20 | 17 | 21 | 34 | 27 |
| % 35 + | 60 | 13 | 63 | 29 | 51 |
| ADMIN ROUTE | | | | | |
| % smoking | | | 72 | 71 | 5 |
| % sniffing | | | 25 | 12 | 28 |
| % injecting | | | 1 | 11 | 65 |
| % oral | | | 0 | 4 | 0 |

SOURCE: Drug and Alcohol Abuse Normative Evaluation System (DAANES), Performance Measurement and Quality Improvement Division, Minnesota Department of Human Services, 2007.

Drug Abuse Warning Network (DAWN): Sample summary

| | Jan 2007 | Feb 2007 | Mar 2007 | Apr 2007 | May 2007 | Jun 2007 |
|---|-------------|-------------|-------------|-------------|-------------|-------------|
| Data Completeness Summary | | | | | | |
| Basically complete (90% or greater) | 10 | 10 | 10 | 9 | 9 | 9 |
| Partially complete (50% to 89%) | 0 | 0 | 0 | 0 | 0 | 1 |
| Incomplete (less than 50%) | 0 | 0 | 0 | 1 | 1 | 1 |
| No data reported | 16 | 16 | 16 | 16 | 16 | 15 |
| Total EDs in DAWN Sample* | 26 | 26 | 26 | 26 | 26 | 26 |
| * Total eligible hospitals in area | 28 | | | | | |
| Hospitals in DAWN sample | 26 | | | | | |
| Hospitals not in DAWN sample | 2 | | | | | |

SOURCE: Drug Abuse Warning Network (DAWN) Live! cases derived from a sample of up to 10 metro area hospital emergency departments from 1/1/2007 through 6/31/2007. All cases are reviewed for quality control and based on this review may be corrected or deleted. These data were generated by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration on 12/10/2007.