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Government publications – resources on drug information

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Government Publications

JO BELL WHITLATCH

DRUG ABUSE

This column will be confined mostly to federal government publications. Complete bibliographical information for each U.S. government publication mentioned is available in the last three years of the *Monthly Catalog of United States Government Publications* (Washington D.C.: U.S.G.P.O.). Although alcohol is a drug of abuse in the depressant class, extensive abuse is not of such recent origin as other drugs. Consequently, there is a larger body of literature available on alcohol abuse and more long-term research results are known in areas such as health effects and treatment. Thus, alcohol is only mentioned briefly in this column.

Widespread concern with misuse of drugs has been a recent development in the federal government. At least twenty federal agencies have become involved in the effort to deal with drugs; the Department of Justice (Drug Enforcement Administration, Law Enforcement Administration, Immigration and Naturalization Service, and Bureau of Prisons), the Department of the Treasury (Customs Service and Internal Revenue Service), the Department of Health, Education and Welfare (National Institute of Drug Abuse and Food and Drug Administration), Veterans Administration, and the Strategy Council on Drug Abuse are some of the major agencies with active programs and publications. Congress has also held a considerable number of hearings on the

subject of drug abuse. Because of the large number of recent publications, this column will attempt only a representative sampling of federal government publications issued within the last two years.

A recent white paper defines "drug abuse" as the nonmedical use of any drug in such a way that it adversely affects some aspect of the user's life—contributing to criminal behavior, poor health, economic dependence, etc.¹ *Questions and Answers about Drug Abuse* (PrEx 20.2: Q3) provides excellent information for the layman on classes of drugs, including tobacco (containing the stimulant nicotine) and alcohol. Notable features are illustrations of worldwide drug abuse stamps, an I.Q. test on drug abuse, a bibliography for further reading, and a list of state resource agencies. *Drugs of Abuse* gives basic information about the common classes of drugs of abuse: (1) stimulants (e.g., amphetamines, cocaine), (2) depressants (e.g., barbituates, tranquilizers, alcohol), (3) hallucinogens (e.g., LSD, marihuana, hashish), (4) narcotics (e.g., opium, heroin, codeine, morphine). All of these classes of drugs have a mood-altering effect on humans: stimulants stimulate the central nervous system, depressants depress the central nervous system, hallucinogens distort perceptions of reality, and narcotics relieve pain.²

Several bibliographies and information services are available through various federal agencies. One of the subject bibliographies in the Government Printing Office series *Drug Education* (GP 3.22/2: 163/2) lists U.S. government documents in print and annotates selective publications. The first edition was published in 1975 and the second in 1977. *DACAS; Drug Abuse Cur-*

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rent Awareness System (HE 20.8209: [v. nos. & nos.]) provides a comprehensive biweekly listing of citations of the recent drug abuse literature. *Information Services for Researchers, Community Workers, Educators, Concerned Public* (HE 20.8202: D 84/4) describes the Drug Abuse Communications Network (DRACON), which provides a program for pretesting publications prior to release and a computerized literature and program search service; the National Institute on Drug Abuse Library, which serves the needs of drug abuse professionals; the Resources and Materials File (RMF), which provides bibliographic printouts of abstracts of the world's literature on drug abuse; and the Clearinghouse Program File (CPF), which provides information on current treatment programs in the U.S.

The National Institute on Drug Abuse Statistical Series: Quarterly Report (HE 20.8212: [nos.]) gives statistical information on national patterns of drug abuse and treatment. *Findings on Drug Abuse Research* (HE 20.8216: 1/v.1-2) is an annotated bibliography of research supported by the National Institute of Mental Health and the National Institute on Drug Abuse in 1967-74. *Drug Interactions* (HE 20.3614: D84/967-71/v.1-3) provides health professionals with easy access to reports on chemical interactions among various drugs. Another excellent source for a health professional is *Toxicity Bibliography* (HE 20.3613: [v. nos. & mos.]), a National Library of Medicine bibliography that draws selectively on current citations in MEDLARS. There is good coverage of adverse drug reactions and poisoning in man and other animals. *Primary Prevention in Drug Abuse* (HE 20.8211: D 84/2) is an annotated guide to literature published within the last five years. It contains a section on drug abuse information sources. The National Institute on Drug Abuse (NIDA) has also published a series of research issues on special topics. Among the most interesting are *Drug Themes in Science Fiction* (HE 20.8214:9), *Drug Themes in Fiction* (HE 20.8214:10), and *Drugs and Personality* (HE 20.8214:14). The National Clearinghouse for Drug Abuse Information publishes a *Report Series* (HE 20.8215: [series nos. & nos.]) containing information on treatment

modalities, drugs of abuse, and opinions and practices of authorities in the field.

Recent U.S. government publications may be classed under one of the following topics: federal enforcement efforts and strategies; federal regulation of drugs; identification, treatment, and rehabilitation of the drug abuser; drugs and crime; drugs and health; drug abuse education; alternatives to drug abuse; drug abuse among special populations; and international efforts to control drug abuse.

Federal Enforcement Efforts and Strategies

The Strategy Council on Drug Abuse has prepared *Federal Strategy for Drug Abuse and Drug Education* (Y 3.St 8:2D 84/976), which serves as a useful annual summary of federal efforts. Until recently, there have been two principal methods of dealing with drug abuse. The Drug Enforcement Administration (DEA) and the U.S. Customs Service were the principal agencies attempting to reduce the supply of available drugs of abuse, while the National Institute on Drug Abuse (NIDA), the Social Rehabilitation Service, the Veterans Administration, and the Bureau of Prisons attempted to reduce the demand for drugs. To date, these strategies have not been noticeably successful in reducing the magnitude of the problem. *Management Effectiveness Measures for NIDA Drug Abuse Treatment Programs* (HE 20.8213: M31/v.1-2) estimates the societal costs of drug abuse at \$10.3 billion annually. This is one-third of the cost of alcohol abuse and 60 percent more than smoking costs. Congress has held a series of hearings that attempted to analyze the federal enforcement program and suggest possible improvements. Recent hearings include: *Federal Drug Enforcement* (Y 4.G74/6: D84/4/pt.4-5), *Federal Narcotics Enforcement* (94-2: Srp. 1039), *IRS, Taxing the Heroin Barons* (Y 4.J89/2: H43/v.2), and *Marihuana-Hashish Epidemic and Its Impact on U.S. Security: The Continuing Escalation* (Y 4:J89/2: M33/3/pt.2). The House of Representatives has become so concerned about the ineffectiveness of federal efforts that the Select Committee on Narcotics Abuse was created on July 29, 1976. The purpose of the select committee is to investigate and evaluate fed-

eral government performance. The ultimate goal of the committee is to aid in making a society where hard drug use is not desired by our people. This committee has published two very interesting reports: *Summary and Testimony of Oversight Hearings on Narcotics Abuse and Current Federal and International Control Effort* (Y 4.N16: 95-1-1) and *Summary of Testimony and Findings and Conclusions Resulting from Oversight Hearings on Narcotic Abuse and Control* (95-1: Hrp. 32). These reports conclude that the federal government has failed to develop an effective means of determining and reporting essential data; there is a lack of information sharing among agencies, and the various computer programs have not been geared to cooperative intelligence. Until 1966, all federal drug law enforcement programs were administered by the Department of the Treasury. In 1973, the Drug Enforcement Administration was created to serve as the chief enforcement agency. However, despite the fact that the financial commitment of the federal government to drug abuse treatment and enforcement programs has increased annually by 900 percent in the last eight years, the present effort of the DEA is generally acknowledged to be unsatisfactory. The National Institute of Law Enforcement and Criminal Justice has recently published *A Multi-Agency Narcotics Unit Manual* (J 1.8/3: N 16) that is designed to assist enforcement efforts.

Federal Regulation of Drugs

The Food and Drug Administration (FDA) is the primary agency for drug regulation. The *FDA Consumer* (HE 20.4010: [v. nos. & nos.]) is a monthly publication that has extensive coverage of drugs and occasional articles on drug abuse. *FDA Drug Bulletin* (HE 20.4003/3: [v. nos. & nos.]) is an irregular newsletter featuring information of importance to health professionals. For the general public, FDA has recently published *We Want You to Know about Drugs for Food Producing Animals* (HE 20.4002: AN5/975) and *Selecting Your Own Medicines: A Guide to the Use of Non-Prescription Drugs* (HE 20.4008: M46/2).

FDA has encountered serious difficulties in effectively regulating drugs. *Competitive*

Problems in the Drug Industry (Y 4.Sm 1/2: D 84/pt. 30) and *Regulation of New Drug R&D by Food and Drug Administration* (Y 4.L11/2: D 84/17/974) address the conflict of interest between the drug industry, wishing to sell its products, and what medical experts regard as good medical practice—the principle of parsimony in exposing patients to drugs. There is also pressure on FDA employees to approve new drugs. Both *Preclinical and Clinical Testing by the Pharmaceutical Industry* (Y 4. L11/2: P49/2/975-976/pt.1-3) and *FDA's Regulation of the Drug "Triazure"* (Y 4.G74/7: D 84/13) question FDA's role in the drug-approval process.

Still another difficulty with federal regulation of drugs is theft of controlled drugs. *Drug Abuse: Pharmacist* (Y 4. J89/2: D 84/6) reveals that 85 percent of 1974 thefts of controlled drugs was from pharmacies. Night break-ins and armed robberies were the most popular methods. Prescription fraud and mail order diversion also result in deviation from authorized medical purposes to the street. The *Diversion Investigation Unit (DIU) Program* (J 24.2: D64) describes DEA's plans and efforts. DEA has issued *A Manual for the Medical Practitioner* (J 24.8: M46) that contains technical information regarding handling and security for controlled drugs.

The final difficulty in federal regulation efforts is the lack of knowledge regarding drugs and their chemical interactions. Recent useful references are: *Prescription Drug Data Summary, 1974* (HE 3.2: D 84/974); *Project Label* (J 24.2: L11/1-2), providing a listing by drug product and drug distributor; *Cocaine Bibliography* (HE 20. 8214:8); *Cocaine: Summaries of Psychological Research* (HE 20. 8214:15); *The Life-Styles of Nine American Cocaine Users* (HE 20.8214:16); *The CNS Depressant Withdrawal Syndrome and Its Management: An Annotated Bibliography* (HE 20.8211/2:2); *Polydrug Use* (HE 20.8211/2:3); *Erythroxylon Coca* (J 24: 15. M27/2/976); *LSD Research: An Annotated Bibliography 1972-1975* (HE 20.8211/2:5); *Cannabis Sativa* (J 24.15: M27/976); *Cannabinoid Assays in Humans* (HE 20.8216:7); *Marihuana and Question of Personnel Security* (Y 4. J89/2: M33/2); and *Opium and Its Derivatives* (J 24.15: M 27/3/976).

Identification, Treatment, and Rehabilitation of the Drug Abuser

It is not always easy to identify the drug abuser. Effective standardized tests have not been developed. *ECDEU* (Early Clinical Drug Evaluation Program) *Assessment Manual for Psychopharmacology* (HE 20.8108: P95/2/976) deals with the need to develop a uniform battery of clinical assessment instruments for those working in the area of psychotropic (i.e., mood altering) drug evaluation. Other publications that deal with drug abuser identification and evaluation are: *Toward a Heroin Problem Index* (HE 20. 8213: H 43), *Drug Abuse Instrument Handbook* (HE 20.8214:12), *Data Analysis Strategies and Designs for Substance Abuse Research* (HE 20.8214:13), and *Operational Definitions in Socio-Behavioral Drug Use Research* (HE 20.8216:2). *Drug Abuse and Misuse* (J 24. 2: D 84/12) is a popular DEA pamphlet identifying the signs of drug abuse.

Besides the lack of standard tests and agreed definitions of terms, the exact extent of drug abuse in the nation cannot be accurately measured. *Drug Abuse Warning Network, Phase 2 Report* (J 24.14: 10/2) and *DAWN City Summaries: A Report of Emergency Room Data from the Drug Abuse Warning Network* (HE 20. 8202: D32/975) provide some indication of the existing patterns of drug abuse by reporting emergency room drug mentions in twenty-three Standard Metropolitan Statistical Areas. For example, in San Francisco, tranquilizers received the most mentions, followed by heroin, barbituates, and alcohol (in combination with another drug).

An important resource for individuals seeking treatment and referral agencies is the *National Directory of Drug Abuse Treatment Programs* (HE 20.8202: T 71). Two quick references for physicians are *Diagnosis and Treatment of Adverse Reactions to Sedative Hypnotics* (HE 20.8208: Se 2) and *A Treatment Manual for Acute Drug Abuse Emergencies* (HE 20.8208: Em 3). There is a substantial ongoing effort to train health-related personnel to deal with drug abuse. *Vanguards in Training* (HE 20.8202: T 68/4), *Alcohol, Drug Abuse and Mental Health Research Grant Awards, Fiscal Year, 1975* (HE

20.8118: 975), *National Training System Course Calendar* (HE 20.8202: T 68/976-77), and *National Institute on Drug Abuse Training Grants Directory* (HE 20.8202: T 68/3) provide information on grants and courses available to health personnel.

One of the most controversial areas of drug treatment and rehabilitation deals with methadone maintenance. In *More Effective Action Needed to Control Abuse and Diversion in Methadone Treatment Programs* (GA 1.13: GGD-76-51), the General Accounting Office reports that 801 deaths in 1975 involved methadone and provide strong evidence that illicit use of methadone is a serious problem. *Methadone Diversion* (HE 20.8216/2-2: M 56) deals with illicit street use. In 1975, NIDA published *Federal and State Laws Pertaining to Methadone* (HE 20.8208: M56/975). *Rx 3x/Week LAAM* (HE 20.8216: 8) and *Narcotic Antagonists—Naltrexone* (HE 20.8216:9) explore alternates to methadone.

Another serious difficulty with rehabilitation of the drug user appears to be finding employment. A 1975 landmark decision, *Beazer v. New York City Transit Authority* (HE 20.8202: M 56/2), requires employers to consider methadone maintenance patients for positions on an individualized basis. A publication in NIDA's new Services Research Report Series is entitled *Securing Employment for Ex-Drug Abusers* (HE 20.8216/3: Em 7). Further information on this subject is available through use of the selected bibliography *Effects of Labeling the "Drug Abuser"* (HE 20.8216:6).

Drugs and Crime

Recent studies have dealt with the possible relationship between drug abuse and crime, although research has not yet proven any casual relationship. A recent NIDA study, *Criminal Charges and Drug Abuse Patterns of Arrestees in the District of Columbia* (HE 20. 8213: C86), indicates that drug positive arrestees are less likely to be charged with major crimes of violence. *Heroin Indicators Trend Report* (HE 20. 8202: H 43/976-2) and *Impact of Heroin Addiction on Criminal Justice System* (93-2 Hrp. no. 1650) find that heroin use appears to be responsible for 70 percent of all identified social cost of illicit drug use

in the U.S. Heroin addicts have stolen property valued at approximately three billion dollars. The second report indicates that heroin addicts must receive treatment while in prison. One experimental approach aimed at breaking down the cycle of addiction and crime is outlined in *Treatment Alternatives to Street Crime* (J 1.46: A/3). Abstracts of major studies from 1960 to 1975 are available in *Drugs and Crime* (HE 20.8214:17). *Geo-Drug Enforcement Program, Six Month Statistics, January 1975—June 1975* (J 24.18: 975-1) contains drug arrest statistics. *Marihuana—Hashish Epidemic and Its Impact on U.S. Security: The Continuing Escalation* (Y 4.J89/2: M33/3/pt.2) examines the escalation in potency and use and its effect upon U.S. security.

Another question that has received considerable attention is the appropriate penalties for drug possession, particularly marihuana. President Carter is recommending that a fine be the penalty for possession of up to one ounce of marihuana rather than imposing a prison sentence.³ Part of the controversy around decriminalization (which is *not* legalization) seems to revolve around long-term unknown health effects and testimony by medical experts that driving under the influence of marihuana could be dangerous. These issues are debated in *Marihuana Decriminalization* (Y 4.J89/2: M33/3 and supp. 1-2), *Decriminalization of Marihuana* (Y 4.N16: 95-1-8), and *Considerations For and Against the Reduction of Federal Penalties for Possession of Small Amounts of Marihuana for Personal Use* (Y 4.N16: 95-1-9).

Major shifts in the law enforcement drug abuse effort toward heroin traffickers and away from cocaine and marihuana traffickers have been reported in *Federal Strategy for Drug Abuse and Drug Traffic Prevention* (Y 3.St 8:2D84/976). The federal government has determined that the relative priority among drugs of abuse in both supply and demand reduction efforts should be based upon relative social cost (e.g., drug-induced criminality, job loss) and risk to personal health.

Drugs and Health

Drug abuse treatment has not yet been incorporated into the general health serv-

ices system, but the *White Paper on Drug Abuse* (PrEx 15.2: D 84) indicates that this is critical to the long-term success of the program. In his message to Congress, President Carter reported that drug abuse among young men was the fourth most common cause of death, with heroin, barbituates, and other sedative/hypnotic drugs accounting for more than 90 percent of deaths.⁴ The federal enforcement strategy of supply reduction may also have an adverse effect on the health of committed users whose lives may be threatened by impure drugs.

Research on drug abuse and the resulting health effects has just begun. *Marihuana and Question of Personnel Security* (Y 4.J89/2: M33/2) presents evidence of cases in which continued use results in serious impairment of judgment, psychological stability, and performance. The sixth annual report of the National Institute on Drug Abuse, *Marihuana and Health* (HE 20.8210:976), presents evidence that marihuana use at typical social levels definitely impairs driving ability and related skills. Experimental use is usually without hazard, but studies of chronic use are limited. Marihuana increases the heart rate and may temporarily weaken heart muscle contractions, although there is no evidence of permanent impairment in normal young men. Long-range research has indicated impairments in pulmonary function in chronic marihuana smokers. The *White Paper on Drug Abuse* (PrEx 15.2: D 84) reports that hallucinogens can cause side effects including panic reactions and long psychotic or depressive episodes. Health publications containing more technical medical information are *Psychopharmacology Abstracts* (HE 20.8109:2 [v. no. & nos.]), which indexes clinical and laboratory research, and *Psychopharmacology Bulletin* (HE 20.8109: [v. no. & nos.]), which contains regular reports on the activities of the World Health Organization International Reference Centers for Psychotropic Drugs as well as articles on drug-related medical research. Examples of recent studies indexed in *Psychopharmacology Abstracts* are "Effect of Smoking Marihuana and a High Nicotine Cigarette on Angina Pectoris" and "Depression and Anxiety in Heroin Addicts."

Drug Abuse Education

Besides reduction of supply and demand, federal strategy for control of drug abuse involves drug abuse education. Thus far, this has not been noticeably successful. The *White Paper on Drug Abuse* (PrEx 15.2: D 84) recommends incorporating drug abuse into the required curricula of medical schools and schools of social work, psychology, and vocational rehabilitation. At present, only 5 out of 115 U.S. medical schools require coursework in drug dependency. *An Assessment of Drug Education Prevention Programs in the U.S. Army* (D101.60: 261) reports that current drug education programs are ineffective. The *White Paper on Drug Abuse* (PrEx 15.2: D 84) recommends that the federal media efforts provide basic information about drugs and emphasize successful and productive life-styles of non-drug users rather than using scare tactics. There is also concern over the role of the school and the family in drug abuse education, as indicated by publications such as *Doing Drug Education: The Role of the School Teacher* (HE 20.8202: Ed 8) and *A Family Response to the Drug Problem* (HE 20.8202: F21/2). Another important area is the role of the mass media: the fifth annual report, *Marihuana and Health* (Y 4.L11/2: M33/3/975), discusses harm done by the hawking of over-the-counter remedies during popular television programs and commercials that teach our children that one drug is better than another for a headache. On the other hand, *The Media and Drug Abuse Messages* (PrEx 20.9: D 1), after studying popular music and drug lyrics, concludes that popular music is not homogeneously in favor of drug use. *Acceptance* (PrEx 20.8: Ac 2) is a handbook designed to augment communication skills of local Community Acceptance workers interested in developing and implementing a mass media campaign designed to sensitize the general public to the problems of the former drug user.

Alternatives to Drug Abuse

This strategy is reported as most promising for controlling drug abuse. *Alternative Pursuits for America's Third Century* (HE 20.8202: D 84/2) reports increasing evidence that drug abuse represents an effort to achieve aspirations and fill experi-

mental voids not being met in the concept of today's social system. Drug abuse is a response to boredom, frustration, pain, powerlessness, and lack of hope for change. *Alternatives to Drug Abuse* (HE 20.8202: D84) analyzes the results of a 1969 study among San Leandro high school students that revealed that the biggest reason (39.8 percent) for nonuse was "no need" (i.e., "life is fine," "I'm happy," etc.). *The RAP Kit* (HE 20.8202: R 18) provides a guide for communities seeking to develop programs featuring alternatives to drug abuse. *Alternatives* (HE 20.8202: A17/2) is a popular pamphlet listing model programs. It also includes a bibliography of books, articles, and multimedia sources.

Drug Abuse Among Special Populations

Following is a list of special populations and recently published studies on drug abuse:

American Indian

Report on Alcohol and Drug Abuse: Final Report to the American Indian Policy Review Commission (Y 4. In 2/10: A1 1)

The Elderly

Alcohol and Drug Abuse Among the Elderly (Y 4.L11/2: A1 1/11/976)

Supplemental Security Income Program for Drug Addicts and Alcoholics and the View from the States (Y 4.W36: Su 7/4)

The Institutionalized

Physicians' Drug Prescribing Patterns in Skilled Nursing Facilities (HE 20.2: L86/monograph 2)

Drugs in Institutions (Y 4.J89/2: D84/8/v.1-3)

The Military

Alcohol Abuse is More Prevalent in the Military than Drug Abuse (GA 1.13: MWD-76-99)

Alcohol and Drug Abuse Interchange, Lessons Learned and Other Information (D 101.22: 600-102)

Experience in Drug Abuse Programs (D 1.2: D 84)

Women

Drugs and Pregnancy (HE 20.8214: 5)

Women and Drugs, Annotated Bibliography (HE 20.8211/2: 4)

Youth

Predicting Adolescent Drug Abuse (HE 20.8214: 11)

Young Men and Drugs (HE 20.8216: 5)

Some highlights of information contained in the above publications follow: Alcoholism and alcohol and drug abuse have been identified as the number one problem affecting American Indians and the Alaskan natives. Drugs in institutions have been used indiscriminately to control the behavior of the institutionalized. There is a major need for a number of safeguards in drug prescribing. The U.S. military has not sufficiently recognized the severity of its alcohol problem, and the approach to drug abuse control is not as effective as possible. Women use psychotherapeutic drugs more than men do, and more women overdose themselves. Use of drugs is higher among young males in large cities, the unemployed, the less conventional, those with lower educational levels, and men in college with social science or humanities majors.

International Efforts to Control Drug Abuse

The United States has published studies that deal specifically with our drug abuse efforts on the international scene. *Poppy Politics* (Y 4.J89/2: P81/v.1-2) examines the administration's efforts to curb heroin traffic and abuse. A quarterly DEA periodical, *Drug Enforcement* (J 24.3/2: [v. no. & nos.]), deals with various aspects of drug enforcement. Volume three, issue number one, is devoted to the international drug traffic.

The U.S. is also working with United Nations agencies such as United Nations Fund for Drug Abuse Control, United Na-

tions Commission on Narcotic Drugs, International Narcotics Control Board, and the World Health Organization. President Carter has urged Congress to adopt legislation implementing the 1971 Convention on Psychotropic Substances and has urged Senate ratification of the treaty.⁵ This international treaty is designed to prevent and curb abuse of drugs having primarily a mood-altering effect on humans. It would seem that Congress is remiss in not giving the amendment of the Drug Abuse and Control Act of 1970 a higher priority so that the Senate might ratify the treaty.

Further information on the international effort may be found in such publications as *Drugs Demystified* by Helen Nowlis (Paris: Unesco, 1975) and *A Manual on Drug Dependence* by J. F. Kramer and D. C. Cameron (Geneva: World Health Organization, 1975). *International Bibliography, Information, Documentation: Publications of the United Nations System*, a quarterly Unipub bibliography, lists many other useful sources on drug abuse and the international effort.

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2. United States. Drug Enforcement Administration, *Drugs of Abuse*, 3d ed. (Washington, D.C.: Drug Enforcement Administration, 1976) (J 24.2: D 84/976).
3. *Congressional Quarterly Weekly Report* 35, no.32 (1977): p.1,673.
4. *Ibid.*, p.1,671.
5. *Ibid.*, p.1,672.

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