

mitigating withdrawal through contracts with academic laboratories and contract research organizations using established preclinical models and standardized protocols. Compounds submitted to the ATDP are evaluated using in vitro and in vivo models based, in part, on their respective mechanism(s) of action. In addition to its discovery efforts, the ATDP offers in silico computational toxicology and in vitro predictive safety testing to submitters for the purpose of lead selection and the de-risking of compounds. Targets and related compounds of interest encompass a wide variety of mechanisms of action (examples include but are not limited to mGluR2 or mGluR3 agonists or PAMs, muscarinic M5 antagonists or NAMs, Ghrelin antagonists or NAMs, GABA-B agonists or PAMs). However, NIDA welcomes and strongly encourages the submission of compounds for which a theoretical rationale can be developed or for which there is supporting preclinical data. NIDA is interested in both evaluating and advancing “late stage” development compounds for selected targets and collaborating with academic and pharmaceutical partners to evaluate new targets and novel early-stage compounds. Compound submitters retain the rights to their compounds and associated data with strict confidentiality being maintained by the ATDP. The establishment of legal agreements to facilitate collaborations is available as necessary.

Conclusions: The ATDP encourages companies and academic researchers to contact us to discuss the submission and evaluation of compounds for potential efficacy in treating SUDs.

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T152

Addressing E-Cigarette Use in Adolescents:
Initiatives to Support Vaping Cessation Services at
the Hospital for Sick Children and Across Canada

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Drug Category: Nicotine/Tobacco

Topic: Substance Use Disorder

Abstract Detail: Other

Abstract Category: Program Descriptions

Aim: Rates of e-cigarette use containing nicotine (“vaping”) by adolescents in Canada are among the highest globally. While no clinical trials have evaluated nicotine replacement therapy (NRT) for vaping cessation, NRT is recommended in combination with behavioural interventions for adolescents with moderate to severe tobacco use disorder based on the evidence of effectiveness for smoking cessation in adults, the severe harms of tobacco dependence, and the lack of evidence of serious NRT-associated harm in adolescents. NRT is prescribed judiciously for vaping cessation due to unpredictable nicotine exposure from vaping. The hospital’s substance use clinic provides outpatient vaping cessation services, however, the number of inpatient adolescents requiring nicotine withdrawal management and vaping cessation treatment across the organization is growing. In response to this need, several pharmacist- and physician-led initiatives have been implemented to support the provision of vaping cessation services by interdisciplinary paediatric clinicians at the Hospital for Sick Children.

Results: The hospital drug formulary was broadened to include more NRT product strengths. Educational presentations highlighting youth vaping prevalence, screening/assessment considerations and treatment principles were provided to interdisciplinary clinicians within the hospital’s Departments of Pharmacy, Psychiatry, and Adolescent Medicine. Interest expressed by community clinicians resulted in the provision of a well-attended province-wide webinar, which remains freely accessible for self-study. Furthermore, the top-leading medical journal in Canada expressed interest in a brief practice guidance article containing vaping cessation treatment considerations for prescribers, which is currently under consideration for publication.

Conclusions: With the success of these initiatives, future plans include the expansion of educational sessions to additional internal medical divisions and nursing staff, training for pharmacy students at the affiliated pharmacy school, inclusion of nicotine in the hospital’s clinical practice guideline for youth presenting with acute substance intoxication and withdrawal, and assessment of these interventions using quality improvement cycles.

Financial Support: Madelynn Hannah is completing a Paediatric Psychopharmacology Fellowship at the Hospital for Sick Children, funded by the Garry Hurvitz Centre for Brain and Mental Health.

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T153

Sex Differences in Lifetime Non-Medical
Prescription Opioid and Cannabis Use Among Older
Adults in the All of Us Research Program

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Drug Category: Opiates/Opioids

Topic: Epidemiology

Abstract Detail: Clinical - Epidemiology

Abstract Category: Original Research

Aim: The prevalence of lifetime nonmedical use of prescription opioids and cannabis in adults 50+ has grown significantly in the past decade. We analyzed data from the national NIH All of Us (AoU) Research Program looking at the impact of sociodemographic factors on lifetime nonmedical use versus abstention of both substances, hypothesizing greater lifetime use for men with lower income, divorced status, lower education, and racial/ethnic minorities.

Methods: The AoU cohort includes self-reported survey data on marijuana, cocaine, prescription stimulants, inhalants, sedatives, hallucinogens, and prescription opioids. Our final sample included 69,441 participants who were stratified into lifetime nonmedical use of cannabis and prescription opioids (n=8,639, 12.44%) and non-use of both substances (n=60,802, 87.56%). Logistic regression and Pearson chi-square tests in R were used to analyze sex differences between lifetime use (men, n=4,222, 48.87%; women, n=4,417, 51.13%) and non-use (men, n=23,149, 38.07%; women, n=37,653, 61.93%) and sociodemographic factors such as income, sex, race, marital status, and education.

Results: Men were less likely than women (OR = 0.737, 95% CI: -0.3488, -0.2598) to use both substances. Black/African American (OR = 0.530, 95% CI: -0.7030, -0.5665) and Hispanic/Latino women (OR = 0.446, 95% CI: -0.9040, -0.7147) had significantly lower odds of lifetime use. Women with higher education (OR = 1.5858, 95% CI: 0.4060, 0.5161) and higher income (OR = 1.51, 95% CI: -0.3040, 0.5273) were associated with increased lifetime use (OR = 0.446, 95% CI: -0.9040 to -0.7147) whereas

women who were married or cohabiting had greater odds of non-use (OR=1.34, 95% CI: 0.2620, 0.3167).

Conclusions: Contrary to our hypotheses, men 50+ showed a lower likelihood of lifetime nonmedical use of prescription opioids and cannabis compared to women. Our findings provide nuanced insights into the sociodemographic factors influencing lifetime substance use in older men and women, providing valuable insights to guide targeted public health interventions.

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T154

Exploring the Use of Psychedelic Drugs for Personal Growth and Mental Health Improvement: Early Qualitative Lessons From Focus Groups

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Drug Category: Psychedelics

Topic: Behavior

Abstract Detail: Other

Abstract Category: Original Research

Aim: Psychedelic use for the treatment of mental illness is quickly evolving. Many drugs, including ketamine, psilocybin, and LSD are being used in both “underground” and licensed treatment settings. Psychedelics are also being used for self-exploration in psychedelic churches and community groups. Physicians, harm reduction specialists, and public health officials must understand use patterns to maximize benefit and safety. We conducted formative qualitative research to inform future data collection on psychedelic safety and effectiveness.

Methods: We conducted focus groups with psychedelic practitioners and individuals who use psychedelics in Colorado. Focus groups were recorded, transcribed, and de-identified. Qualitative analysis employed Grounded Theory and inductive and deductive coding to uncover underlying themes within and across groups. Data collection is ongoing.

Results: We have conducted four focus groups (N=13) – two practitioner focus groups (N=4 ketamine/esketamine practitioners, N=2 community guides) and two groups with individuals who use psychedelics (N=7). Participants often identified with multiple roles. Formal themes will be developed once saturation is reached; however, several notable concepts have arisen. Many participants referred to psychedelics using the term “medicine” though regulated use in Colorado is outside the healthcare system. Licensed practitioners and community guides differed in beliefs about the role of touch during sessions and partaking in psychedelics with their clients. Participants expressed a strong desire for psychedelics to be used in ways that are beneficial, and this has produced a closely-

knit community that is both welcoming to newcomers and protective of their underground use practices.

Conclusions: Early qualitative findings suggest diverse beliefs regarding psychedelic services provision and patterns of use that can inform implementation of legal psychedelic use frameworks. Further formative research is warranted to optimize safety and uptake of regulated psychedelic services.

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T155

Misuse Potential of Medicinal Ketamine in Real-World Clinical Contexts, Part 2: Patients With a History of Substance Use Disorders

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Drug Category: Psychedelics

Topic: Behavioral Economics, Medical ketamine misuse potential

Abstract Detail: Other

Abstract Category: Original Research

Aim: Ketamine is widely used “off-label” to treat numerous conditions including substance use disorders (SUDs) and common SUD comorbidities (e.g., anxiety). Because ketamine is also an addictive club drug, the misuse potential among patients in general, and those with a history of problematic substance use specifically, warrants additional research. The purpose of the present secondary analysis was to identify risk factors and examine liking and misuse liability of medical ketamine among real world patients overall and those with a history of substance use disorders.

Methods: An anonymous online survey was distributed to patients by ketamine providers and posted to ketamine social media groups.

Results: Data analysis of the initial sample (n=184, data collection ongoing) suggests that overall, medical ketamine craving was relatively low (craving intensity M=7.07; craving frequency M=4.79; scale 0-100), as were misuse behaviors M=0.20; scale 0-7), although moderate liking was observed (liking M=23.43 on a scale from -50 to +50). However, reporting past or present problematic substance use (n=65) was correlated with increased craving intensity (r=.159, p=.031) and craving frequency (r=.134, p=.075). Although not statistically significant, on average patients reporting past/present problematic substance use also showed higher liking of ketamine, greater likelihood of using in a recreational context, and greater behavioral economic demand for at-home medical ketamine in a ketamine purchase task.

Conclusions: These initial data suggest that although medicinal ketamine appears to have overall low levels of misuse potential for those who do not have a history of harmful substance use, those reporting past/present problematic substance use and with at-home ketamine access may be at increased risk of developing Ketamine Use Disorder (KUD). These individuals may present a unique risk profile, highlighting the need for regulation (e.g., national registry), monitoring, and structured screening procedures that may differ based on patient needs.

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