



# Changes in “Bath Salts” and Synthetic Marijuana Availability and Use over Time

OSAM-o-Gram

Ohio Substance Abuse Monitoring Network

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**June 2011 - Bath salts** (synthetic compounds that produce a high similar to a stimulant or hallucinogenic drug) are highly available across all OSAM regions. These compounds commonly contain methylone, mephedrone or MDPV. The generic term ‘bath salts’ is deceiving because they are not substances meant to be put in a bath, but are abused by people looking for a legal high and individuals attempting to avoid drug-use detection on urine drug screens. Bath salts were legally sold during this reporting period at head shops and some convenience marts.

**October 2011 -** Ohio Gov. John Kasich signed House Bill 64 into law, making possessing or selling bath salts and synthetic marijuana (synthetic cannabinoids) illegal in Ohio. Since the passage of HB 64, the availability and use of bath salts have dramatically decreased as illustrated in Tables 1-3. Note: upward arrows indicate an increase while downward arrows indicate a decrease; absence of an arrow indicates no change/no report.

**Table 1. Change in Bath Salts Availability as Reported by OSAM Focus Group Respondents**

Region	June 2011	January 2012	June 2012	January 2013	June 2013	January 2014	June 2014	January 2015
Akron-Canton	↑	↑			↓		↓	↓
Athens	↑	↓	↑				↓	↓
Cincinnati	↑	↑	↑	↓				↓
Cleveland	↑		↓					↓
Columbus	↑		↑		↑		↓	↓
Dayton	↑	↓		↓	↓	↓		↓
Toledo	↑	↑	↑			↓	↓	↓
Youngstown		↑	↓				↓	

**Table 3. Change in Number of Bath Salts Cases Processed by BCI Labs**

BCI Lab	June 2011	January 2012	June 2012	January 2013	June 2013	January 2014	June 2014	January 2015
Richfield		↑	↑	↑		↑	↑	↓
London	↑	↑	↑		↑	↑		↓
Bowling Green	↑	↑	↑	↓				↓

bath salts during the past six months and added that they have not seen any recent positive urinalysis testing in their clients for the drug. Likewise, law enforcement reported that the availability of bath salts seems to have “died off.” One member of law enforcement reported, “The stuff we do purchase ends up not having a controlled substance in it.” Participants and community professionals reported decreased availability of bath salts during the past six months. All BCI Crime Labs reported that the number of bath salts cases they process have decreased during the past six months.

**Table 2. Number of Human Exposures<sup>1</sup> to Bath Salts Reported to American Association of Poison Control Centers<sup>2</sup>**

Year	Number of Cases
2011	6,137
2012	2,691 ↓
2013	995 ↓
2014	582 ↓
2015 Through 6/30/2015	267 ↓

<sup>1</sup>The term “exposure” means someone has had contact with the substance in some way (e.g., ingested, inhaled, absorbed by the skin or eyes). Not all exposures are poisonings or overdoses. <sup>2</sup>Bath Salts data presented in Table 2 were obtained at <http://www.aapcc.org>

**January 2015 - Bath salts** are reportedly rarely available throughout OSAM regions. Most regions reported decreased availability of this drug and cited law enforcement and decreased popularity due to negative side effects as reasons for the decrease. Treatment providers reported “not hearing about”

**January 2015 - Synthetic marijuana** (synthetic cannabinoids; aka “K2” and “spice”) remains available throughout OSAM regions despite the October 2011 legislation that banned its sale and use. Overall, participants reported synthetic marijuana availability higher than what community professionals reported. Participants reported moderate or high availability of synthetic marijuana in Akron-Canton, Athens, Cincinnati, Cleveland, Columbus and Toledo. Respondents reported that synthetic marijuana availability has remained the same or has decreased during the past six months. Community professionals in Columbus and Athens noted an increase in use of liquid synthetic cannabinoid (aka “crown”). BCI Richfield and London Crime Labs reported fewer synthetic marijuana cases during the past six months. Tables 4-6 illustrate the change in availability and use of synthetic marijuana over time. Note: upward arrows indicate an increase while downward arrows indicate a decrease; absence of an arrow indicates no change/no report.

**Table 4. Change in Synthetic Marijuana Availability as Reported by OSAM Focus Group Respondents**

Region	June 2011	January 2012	June 2012	January 2013	June 2013	January 2014	June 2014	January 2015
Akron-Canton	↑				↓	↓	↓	↓
Athens	↑		↓		↓		↓	
Cincinnati			↑			↓	↓	
Cleveland	↑							↓
Columbus	↑		↑			↓		
Dayton	↑				↓	↓		↓
Toledo			↑	↑				↓
Youngstown	↑		↑	↑		↓	↓	

**Table 5. Number of Human Exposures<sup>1</sup> to Synthetic Marijuana Reported to American Association of Poison Control Centers<sup>2</sup>**

Year	Number of Cases
2011	6,968
2012	5,230 ↓
2013	2,668 ↓
2014	3,682 ↑
2015 Through 6/30/2015	4,377 ↑

**Table 6. Change in Number of Synthetic Marijuana Cases Processed by BCI Labs**

BCI Lab	June 2011	January 2012	June 2012	January 2013	June 2013	January 2014	June 2014	January 2015
Richfield		↑	↑	↑		↑		↓
London	↑	↑	↑	↑		↑		↓
Bowling Green	↑	↑	↑	↑				↑

<sup>1</sup>The term “exposure” means someone has had contact with the substance in some way (e.g., ingested, inhaled, absorbed by the skin or eyes). Not all exposures are poisonings or overdoses.

<sup>2</sup>Synthetic marijuana data presented in Table 5 were obtained at <http://www.aapcc.org>

**Conclusion -** The availability and use of bath salts have declined dramatically over time to the point where the majority of OSAM respondents do not mention/report on them. Likewise, the majority of OSAM respondents do not mention/report on synthetic marijuana; however, most recent secondary data from at least one Ohio crime lab and from the American Association of Poison Control Centers indicate a possible upward trend in synthetic marijuana. Respondents described typical users of synthetic marijuana as young (teens to mid-20s), marijuana smokers, and those who need to pass drug screens (on probation or for employment). The OSAM Network will continue to monitor and report on bath salts and synthetic marijuana, along with any emergent synthetic drug.

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