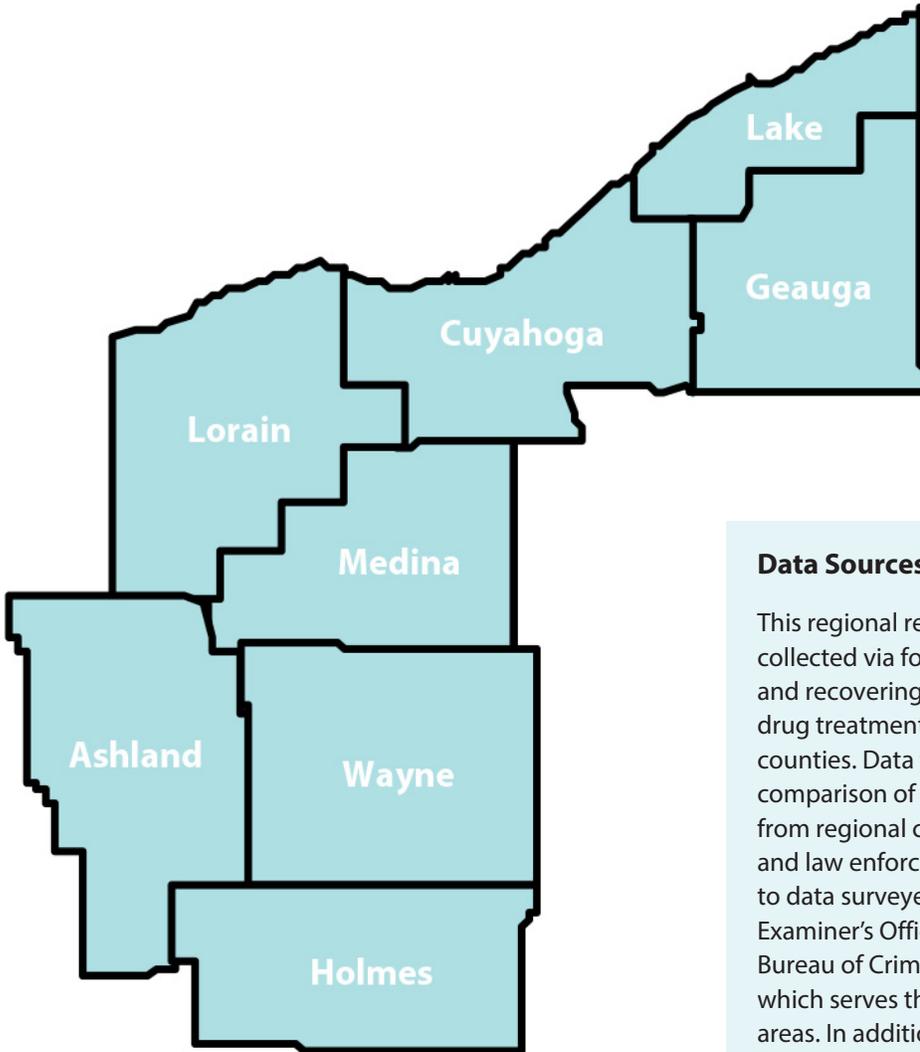




Drug Abuse Trends in the Cleveland Region



Regional Epidemiologist:
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Data Sources for the Cleveland Region

This regional report was based upon qualitative data collected via focus group interviews. Participants were active and recovering drug users recruited from alcohol and other drug treatment programs in Cuyahoga, Lake and Medina counties. Data triangulation was achieved through comparison of participant data to qualitative data collected from regional community professionals (treatment providers and law enforcement) via focus group interviews, as well as to data surveyed from the Cuyahoga County Medical Examiner’s Office, the Lake County Crime Lab and the Ohio Bureau of Criminal Investigation (BCI) Richfield Crime Lab, which serves the Cleveland, Akron-Canton and Youngstown areas. In addition, data were abstracted from the National Forensic Laboratory Information System (NFLIS) which collects results from drug chemistry analyses conducted by state and local forensic laboratories across Ohio. All secondary data are summary data of cases processed from July through December 2016. In addition to these data sources, Ohio media outlets were queried for information regarding regional drug abuse for January through June 2017.

Note: OSAM participants were asked to report on drug use/ knowledge pertaining to the past six months prior to the interview; thus, current secondary data correspond to the reporting period of participants.

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Regional Profile

Indicator ¹	Ohio	Cleveland Region	OSAM Drug Consumers
Total Population, 2016	11,614,373	2,269,670	44
Gender (female), 2016	51.0%	51.6%	45.5%
Whites, 2016	82.5%	76.8%	83.7% ²
African Americans, 2016	12.7%	18.7%	11.6% ²
Hispanic or Latino Origin, 2016	3.7%	5.2%	2.3% ³
High School Graduation Rate, 2015	89.1%	88.3%	79.5%
Median Household Income, 2015	\$51,086	\$51,874	\$16,000-19,000 ⁴
Persons Below Poverty Level, 2015	14.8%	14.7%	50.0% ⁵

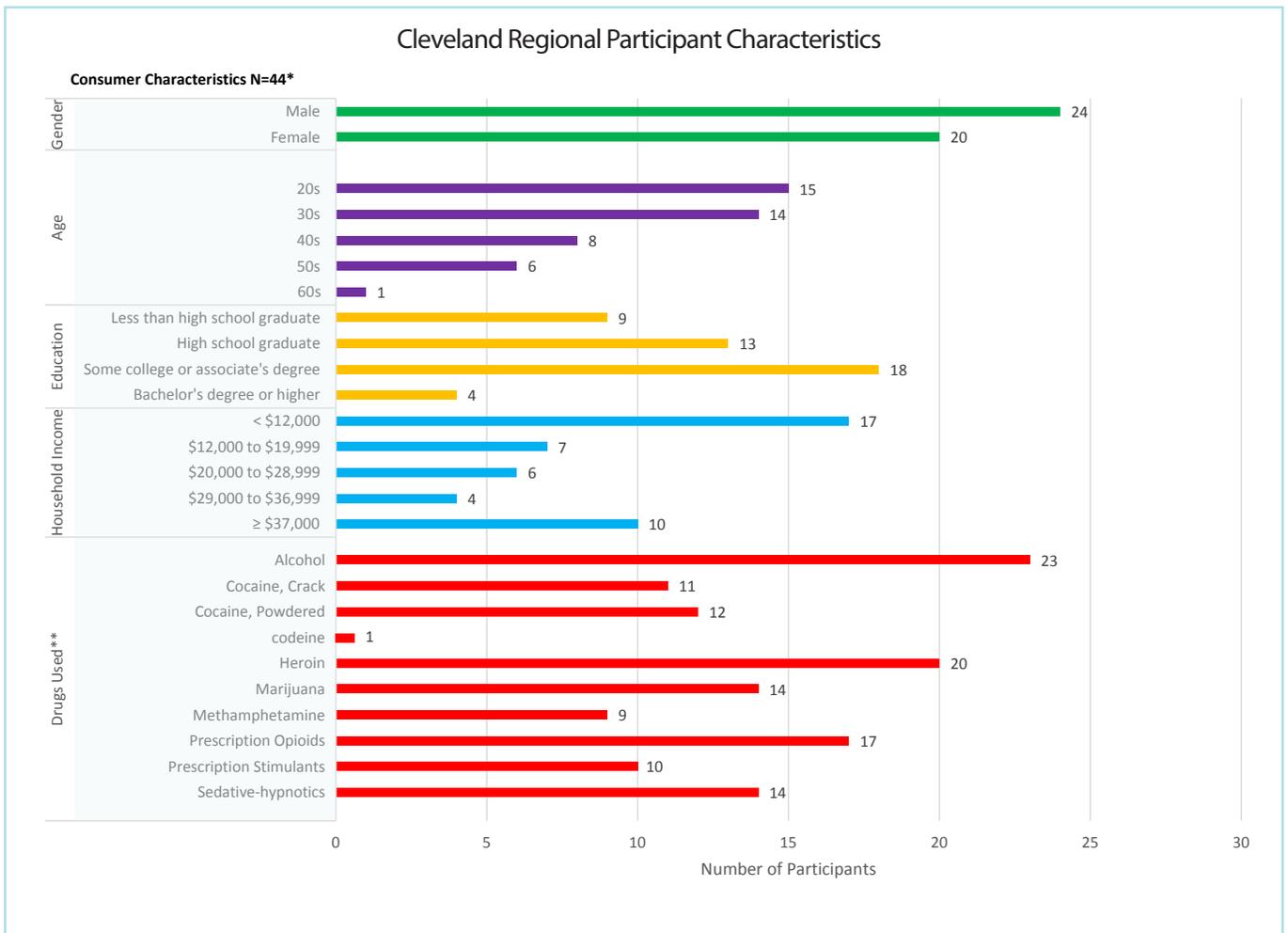
¹Ohio and Cleveland region statistics were derived from the most recent US Census; OSAM drug consumers were participants for this reporting period: January-June 2017.

²Race was unable to be determined for 1 participant due to missing and/or invalid data.

³Hispanic or Latino Origin was unable to be determined for 5 participants due to missing and/or invalid data.

⁴Participants reported income by selecting a category that best represented their household's approximate income for the previous year.

⁵Poverty status was unable to be determined for 2 participants due to missing and/or invalid data.



*Not all participants filled out forms completely; therefore, numbers may not equal 44.

**Some respondents reported multiple drugs of use during the past six months.

Historical Summary

In the previous reporting period (June 2016 - January 2017), crack cocaine, heroin, marijuana, powdered cocaine, prescription opioids, prescription stimulants, sedative-hypnotics, Suboxone® and synthetic marijuana remained highly available in the Cleveland region; methamphetamine and PCP (phencyclidine) were also highly available. Changes in availability during the reporting period included: increased availability for heroin and marijuana and likely increased availability for Suboxone®.

While many types of heroin were available in the region, participants and community professionals continued to report powdered heroin as most available. Participants and treatment providers attributed the increased availability of powdered heroin to increased demand for the drug, and explained that there were more users than previously due to the tightening of opioid prescribing. Law enforcement generally thought that the high availability of heroin could not get any higher, noting the seemingly endless number of dealers in the region. Reportedly, as soon as a dealer was jailed, another appeared to take over their business.

Participants discussed adulterants (aka “cuts”) that affected the quality of heroin and reported that the top cutting agents for the drug included: fentanyl and carfentanil. Participants observed that most white powdered heroin contained either drug; however, many participants reported that there was no “pure” heroin available, acknowledging that users did not know if they were purchasing heroin with fentanyl, carfentanil or a mixture of substances. Participants stated that more users were seeking heroin mixtures containing fentanyl and carfentanil because these potent substances produced a stronger high. They explained that many users tracked overdoses back to the dealers who sold the potent drug to obtain the “good stuff” for personal use. Treatment providers also noted users seeking straight fentanyl. The BCI Richfield Crime Lab reported processing cases of heroin-fentanyl and fentanyl analog mixtures (fentanyl, 3-methylfentanyl, valeryl fentanyl) during the reporting period.

The most common route of administration for heroin remained intravenous injection (aka “shooting”). Participants reported that injection needles were most available from street dealers and big box stores. Participants also reported that sharing of injection needles was common. Participants described powdered heroin users as everyone, but described typical black tar heroin users

as Hispanic people. Treatment providers described typical heroin users generally as white people between the ages of 19-32 years, while law enforcement described typical users as white people from the suburbs.

Participants and community professionals indicated that the availability of marijuana extracts and concentrates, often appearing as oil and waxy forms of the drug (aka “dabs”), had increased during the reporting period. Both groups of respondents noted an increase in edible forms of marijuana. Reportedly, “edibles” were more popular than previously; they were shipped to the region from states where their use was permissible by law, namely California.

Participants and treatment providers reported that the street availability of Neurontin® (gabapentin, an anticonvulsant) had increased during the reporting period. Participants explained that if a user took “enough” of the medication, this produced a “cocaine-like” high. They reported that Neurontin®, often referred to as “gabs” for gabapentin, its generic name, had increased in availability due to increased demand for the drug. Participants described typical illicit Neurontin® users as young people and opiate addicts who sought the drug to help alleviate withdrawal symptoms.

Lastly, promethazine (antihistamine, a neuroleptic) was moderately available in the region. Participants discussed that promethazine was most commonly used illicitly as “lean” (a mixture of promethazine and soda, aka “sizzurp”). They reported that the availability of promethazine had increased during the reporting period, remarking that the drug was popular among drug dealers. Reportedly, the most common routes of administration for illicit use were 1) oral consumption with soda and 2) smoking, laced in marijuana “blunts” (cigars). Participants and community professionals reported typical illicit promethazine users as younger people, while law enforcement noted use particular to young African-American people.

Current Trends

Powdered Cocaine

Powdered cocaine remains highly available in the region. Participants most often reported the drug’s current availability as ‘10’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely easy to get); the

previous most common score was also '10.' Participants discussed that in certain neighborhoods, drug dealers approach people suspected of looking to buy drugs and offer to sell any drug, including powdered cocaine. They stated: *"It was easy for me because I was the dealer; Most people just stop you ... you can be walking and they ask you if you need anything and you know what they mean because they come up to you directly."*

Community professionals most often reported the current availability of powdered cocaine as '8'; the previous most common scores were '5' for treatment providers and '8' for law enforcement. Treatment providers commented: *"Clearly it has to be there because our clients use it; They can still walk across the street and get it, but it is all laced (adulterated) ... they all test positive [for cocaine] with opiates."* One law enforcement officer remarked, *"I just feel like if they need to get it, they can find it."*

Corroborating data indicated that cocaine is available in the region. The Cuyahoga County Medical Examiner's Office reported that 37.5% of the 380 drug overdose deaths it processed during the past six months involved cocaine (powdered and/or crack cocaine). In addition, a query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Cleveland region returned 2,438 cocaine cases reported during the past six months, of which 67.4% were Cuyahoga County cases (an increase from 2,207 cases for the previous six months, of which 67.0% were Cuyahoga County cases). NFLIS does not differentiate between powdered and crack cocaine cases.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. The Cuyahoga County Medical Examiner's Office reported that 31 overdose deaths resulting from cocaine mixed with fentanyl and/or heroin occurred in January 2017; the medical examiner's office reported cocaine availability as increasing in Northeast Ohio, with cocaine overdose deaths expected to increase from 115 in 2015 to 230 in 2016 (www.newsnet5.com, Feb. 7, 2017). The Cuyahoga County Medical Examiner's Office reported that an additional 14 overdose deaths occurred in one weekend in early February and reported that cocaine laced with fentanyl and/or heroin caused the overdose deaths (www.cleveland.com, Feb. 10, 2017). Cleveland Police arrested a man at a gas station after he shot four people during a fight at a neighborhood bar; officers found cocaine and heroin in the man's vehicle (www.cleveland.com, Feb. 21,

2017). Ohio State Highway Patrol (OSHP) in Lorain County arrested a Pennsylvania man during a traffic stop on the Ohio Turnpike when criminal indicators prompted a search of the man's vehicle; officers confiscated two pounds of cocaine (www.statepatrol.ohio.gov, March 1, 2017). An investigation completed by the Drug Enforcement Agency (DEA) along with several regional law enforcement agencies lead to the federal indictment of six people responsible for a cocaine trafficking ring in Lake and Cuyahoga counties; the people involved in the ring sold cocaine out of residences and hotels in Willoughby Hills (Lake County) and South Euclid (Cuyahoga County); in total, officers seized 17 kilograms of cocaine during the investigation (www.otfca.net, March 1, 2017). A man responsible for killing a police officer during a hit and run crash in Cleveland faced additional charges after investigators learned the man was high on cocaine at the time of the crash; investigators reported finding cocaine in the man's vehicle (www.fox8.com, March 1, 2017). A federal jury convicted two delivery drivers for shipping several kilograms of cocaine using fake shipping accounts across the country; the jury also convicted one of the men's sisters for allowing the drivers to use her home to hold the cocaine and the money they made from selling it (www.newsnet5.com, March 9, 2017). The Cuyahoga County Medical Examiner reported that, while heroin-related overdose deaths were predominantly seen in white people with substance use disorder, heroin dealers are mixing cocaine, a drug used predominantly by African-American people, with fentanyl as a means to increase their customer base (www.distpatch.com, May 18, 2017).

Participants and community professionals reported that the availability of powdered cocaine has remained the same during the past six months. One participant stated, *"It's been common since the '80s."* One treatment provider commented, *"The high seems to be as intense as always ... people are still using it."* Lake County and the BCI Richfield crime labs reported that the number of cocaine cases they process have increased during the past six months; the labs do not typically differentiate between powdered and crack cocaine.

Powdered Cocaine	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No change
	 Treatment providers	No change

Participants most often rated the current overall quality of powdered cocaine as '5' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was also '5'. Participants stated: *"They are cutting it more and cut impacts the quality; It all depends on who you buy it from; I have had bad or really good."* Participants reported the top cutting agents (adulterants) for powdered cocaine as: baby laxatives, baby powder and vitamin B. Other adulterants mentioned included: fentanyl, inositol (dietary supplement), Novocain (local anesthetic) and prescription opioids. In addition, one participant reported: *"There is this stuff from the head shop called 'Blow Up' and it makes the appearance of more 'coke' (powdered cocaine)." Overall, participants reported that the quality of powdered cocaine has remained the same during the past six months.*

Powdered Cocaine	Cutting Agents Reported by Crime Lab
	<ul style="list-style-type: none"> <input type="radio"/> acetaminophen <input type="radio"/> atropine (prescription heart medication) <input type="radio"/> local anesthetics (benzocaine and lidocaine) <input type="radio"/> mannitol (diuretic) <input type="radio"/> pet and livestock dewormers (levamisole and tetramisole)

Reports of current prices for powdered cocaine were consistent among participants with experience buying the drug. Reportedly, the most common quantity of purchase is a gram. Participants discussed: *"A gram is the smallest and it goes for \$35 if you know the right people, but usually it is more like \$80 to \$100; I never cut it so the more pure it was, the better it was, so I can charge more ... I brought it in from out of state. I brought in a kilo and it's anywhere from 60 to 70 grand ... I more than doubled my money here."* Overall, participants reported that the price of powdered cocaine has remained the same during the past six months.

Powdered Cocaine	Current Street Prices for Powdered Cocaine	
	A gram	\$80-90
	1/16 ounce (aka "teener")	\$100
	1/8 ounce (aka "eight ball")	\$170
	1/2 ounce	\$600
	An ounce	\$1,200

Participants reported that the most common route of administration for powdered cocaine remains snorting. Participants estimated that out of 10 powdered cocaine users, eight would snort, one would smoke and one would intravenously inject (aka "shoot") the drug. Participants reported: *"I don't know anyone who ain't 'blowing a rail' (snorting a line of powdered cocaine); You can sprinkle on 'pot' (marijuana) and roll a 'joint' (cigarette) [to smoke the drug]."*

Participants described typical powdered cocaine users as wealthy, white people and adult entertainers (aka "strippers"). Participants stated: *"The reason why 'powder' (powdered cocaine) was so easy for me to get was because I worked in the strip club ... girls (strippers) had it ... it was common there; It depends on where you are ... in the hood there is more 'crack' (cocaine) and at colleges there is more coke; People with money, college students ... they think it is okay to snort cocaine...."*

Community professionals described typical powdered cocaine users as white people and those with a stable income. Treatment providers reported: *"Seems to be more with the higher income clients; It is white people with an income."* A law enforcement officer commented, *"I feel like a lot of people using cocaine, and just cocaine, are those who have been around, they tend to be in their 30s or 40s."*

Crack Cocaine

Crack cocaine remains highly available in the region. Participants most often reported the drug's current availability as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was also '10'. Participants commented: *"That is crazy available; If you go to Cleveland,*

it's a '10'; I could walk down my street and get samples for free. It's like, 'Hey, you need something? You need a sample?' If you are standing on the corner of [certain streets, it is assumed that] you are looking for something; You sometimes don't even have to pick up the phone ... they come to you."

Treatment providers most often reported the current availability of crack cocaine as '10', while law enforcement most often reported it as '6'; the previous most common scores were '8-9' for treatment providers and '3' for law enforcement. Treatment providers discussed: "They tend to use crack over the powder; There are just so many drug dealers that crack is most readily available to the consumers; I think it is the cost, there are few drugs you can get for \$4 and get a high ... you can get credit if the dealer knows where you live and what you make." Law enforcement reported: "It's like water around here; They may have to go down the road to get it, but they can get it."

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Ashland County law enforcement collaborated to execute a search warrant at an apartment in Ashland regarding theft and misuse of a credit card; officers arrested two people connected to the theft and uncovered crack cocaine, heroin and drug paraphernalia at the residence (www.wmfd.com, Feb. 2, 2017). An investigation of the Salem Police (Columbiana County) and the U.S. Bureau of Alcohol, Tobacco, Firearms and Explosives lead to the indictment of a man who possessed and intended to distribute crack cocaine and heroin in Cuyahoga County (www.vindy.com, Feb. 1, 2017). Cleveland Police along with the Ohio Investigative Unit and Middleburg Heights Police (Cuyahoga County) collaborated to execute a search warrant on a Middleburg Heights home and a Cleveland bar, both believed to have been connected to a large-scale drug ring; undercover officers purchased crack cocaine, powdered cocaine and heroin during the investigation (www.patch.com, Feb. 7, 2017). Three East Cleveland Police officers were sent to prison for framing approximately 43 alleged drug dealers, most of whom were black; the officers claimed they purchased crack cocaine from a man in Cleveland, and executed a search warrant shortly after; cameras in the man's home proved the officers lied, which uncovered four years of similar framing and thefts from the people they accused of dealing drugs (www.nbcnews.com, March 27, 2017).

Participants and community professionals reported that the availability of crack cocaine has remained the same during the past six months. A participant stated, "It has

always been easy to get." Lake County and the BCI Richfield crime labs reported that the number of cocaine cases they process have increased during the past six months; the labs do not typically differentiate between powdered and crack cocaine.

Crack Cocaine		Reported Availability Change during the Past 6 Months	
Crack Cocaine	 Participants	No change	
	 Law enforcement	No change	
	 Treatment providers	No change	

Participants most often rated the current overall quality of crack cocaine as '8' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '4-5'. Participants stated: "I used to live with a crack dealer, so it all depends on who cooks it ... his clients will say it was good; Quality varies, some tell me they got some trash and others said it was good." Participants reported that crack cocaine in the region is most often adulterated (aka "cut") with baking soda. Other cuts mentioned included: alcohol, baby aspirin, baby laxatives, caffeine, fentanyl, heroin, Novocain (local anesthetic) and pseudoephedrine (Sudafed®). Overall, participants reported that the quality of crack cocaine has remained the same during the past six months. One participant reiterated, "It really just depends on who is cooking it."

Crack Cocaine		Cutting Agents Reported by Crime Lab	
Crack Cocaine	<input type="radio"/>	acetaminophen (analgesic)	
	<input type="radio"/>	atropine (prescription heart medication)	
	<input type="radio"/>	lidocaine (local anesthetic)	
	<input type="radio"/>	mannitol (diuretic)	
	<input type="radio"/>	pet and livestock dewormers (levamisole and tetramisole)	

Reports of current prices for crack cocaine were consistent among participants with experience buying the drug. Reportedly, the most common quantity of purchase is 1/10 gram. Overall, participants reported that the price for crack cocaine has decreased during the past six months. One participant observed, "Crack has been cheaper in the last six months because people are making it more, so there is competition."

Crack Cocaine	Current Street Prices for Crack Cocaine	
	1/10 gram (aka "rock")	\$10
	1/2 gram	\$25
	A gram	\$50
	1/16 ounce	\$75
	1/8 ounce	\$150
	1/4 ounce	\$420
	1/2 ounce	\$600
	An ounce	\$1,200

Participants reported that the most common route of administration for crack cocaine remains smoking. Participants estimated that out of 10 crack cocaine users, eight would smoke and two would intravenously inject (aka "shoot") of the drug. A participant reported, "The thing with shooting is that they don't want to leave needle marks on their arms, so smoking is a lot cleaner to some."

Participants described typical crack cocaine users as impoverished. Participants remarked: "It's more in the inner city; Poverty stricken areas because it is a lot cheaper [than other drugs]." Community professionals described typical crack cocaine users as African-American people of low income, with more prevalent crack cocaine use in the inner city. Treatment providers stated: "I think with our population ... a lot are homeless; Seems to be more along the lines of those 40 [years of age] and up." Law enforcement officers noted: "We see it in the inner city; It's older [people aged] 30s or 40s, no gender differential!"

Heroin



Heroin remains highly available in the region. Participants most often reported the current availability of the drug as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was also '10'. Participants reported: "Drive to Cleveland and drive down any street and you are gonna be flagged down [by a dealer wanting to sell you heroin]; You can just go to the gas station and they will give

you a free sample; [Heroin, while highly available, is] harder to get than fentanyl though ... most of what is out there is fentanyl; When you see so many people dying from it per week, I don't think there is an access problem."

Community professionals also most often reported the current availability of heroin as '10'; the previous most common scores were '9-10'. Treatment providers observed: "It is like flies to fly paper ... if somebody expresses an interest, they will bring it to you. I hear open parking lots in the suburbs are big places for drug deals to take place; People are getting deliveries of heroin at home and parents are coming home and their kid is dead; Look at all the overdoses around ... clearly it is available." One law enforcement officer commented, "You can go anywhere and pick it up."

Corroborating data indicated that heroin is available in the region. The Cuyahoga County Medical Examiner's Office reported that 47.1% of the 380 drug overdose deaths it processed during the past six months involved heroin; 68.7% of these heroin cases also involved fentanyl. The medical examiner's office reported that 62.1% of the 380 drug overdose deaths involved fentanyl/fentanyl analogues, while 14.2% involved carfentanil.

A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Cleveland region returned 1,989 heroin cases reported during the past six months, of which 68.8% were Cuyahoga County cases (there were 1,954 cases for the previous six months, of which 59.9% were Cuyahoga County cases). In addition, separate NFLIS queries for the counties which comprise the Cleveland region returned 1,551 fentanyl and fentanyl analogue cases (an increase from 956 cases in the previous six months), and 168 carfentanil cases reported during the past six months (in the six months previous to this, no cases of carfentanil were found in NFLIS).

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. First responders in Cleveland responded to 14 opiate-related overdose cases in one day; six resulted in deaths, two of which at the same location, and another overdose death followed the next day (www.cleveland.com, Feb. 5, 2017). A female inmate who suddenly became ill at the Cuyahoga County Jail and died at a local hospital was incarcerated in January 2017 after Cleveland Police raided the woman's home and learned she was selling heroin, cocaine and marijuana out of the home (www.cleveland.com, Feb. 15, 2017). A couple plead not guilty in Cuyahoga County Common Pleas Court

to child endangerment and drug possession after their 7-year-old child overdosed on heroin in their home in Berea (Cuyahoga County); the father of the child called 911 when his son stopped breathing, and hospital staff found heroin and prescription pills hidden in the boy's sock (www.usnews.com, Feb. 19, 2017). A Cleveland man accused of selling fentanyl to a woman who subsequently died of fentanyl and diazepam intoxication plead not guilty to selling the drugs that caused her overdose death (www.cleveland.com, Feb. 22, 2017). An investigation led by several regional law enforcement agencies led to the indictment of a Cleveland man who sold heroin to two people in Wooster (Wayne County); one of the victims was treated at a hospital where hospital workers used 12 doses of Narcan® (naloxone, opiate overdose reversal medication) to revive him (www.wkyc.com, March 1, 2017). Lorain Police discovered a man overdosed in his vehicle with an infant in the backseat; officers went to the man's home to inform his significant other and found her overdosed with children present; officers arrested the couple after hospital staff in Lorain treated the couple with Narcan® (www.abcnews.go.com, March 2, 2017). Geauga County Sheriff's officers arrested a man for child endangerment after responding to a call from a retail store manager in Chardon Township that a man overdosed on heroin in his car in the store's parking lot with his two-year-old son present; officers and paramedics arrived at the scene and used Narcan® to revive the man (www.cleveland.com, March 3, 2017). A Lorain County judge helped save a man from an opiate-related overdose when a man came to her home and began pounding on the front door asking for help; the judge administered one dose of Narcan® to the man; medical personnel arrived and administered two additional doses of the antidote to revive the man (www.cleveland.com, March 14, 2017). Law enforcement in Cuyahoga County arrested a Cuyahoga County Jail corrections officer for smuggling a total of 16 grams of heroin and unidentified pills to an inmate of the jail (www.clevescene.com, March 16, 2017). A U.S. District Judge sentenced a Berea man to 12 and 1/2 years in prison for selling less than one gram of heroin to a Lakewood (Cuyahoga County) man that resulted in the man's overdose death (www.cleveland.com, March 20, 2017). U.S. Marshals Violent Fugitive Task Force arrested a fugitive of the week for violating conditions of his bond for failure to appear for drug treatment; officers executed a search warrant at a hotel in Middleburg Heights (Cuyahoga County) where the man was staying; a woman found with the man was found in possession of heroin and cocaine

(www.cleveland.com, March 22, 2017). Cleveland Police arrested a woman for child endangerment after her two-year-old grandson died in his Cleveland home; hospital workers confirmed the presence of methadone in the boy's system, causing his death; the boy's grandmother is a recovering heroin user and failed to take the boy to the hospital despite behavioral cues that the boy was ill (www.nbc4i.com, March 29, 2017). Homeland Security agents acted on a tip from U.S. Border Protection to intercept a package containing fentanyl sent from Hong Kong addressed to a man living in North Ridgeville (Lorain County); officers placed a beeper inside the package and arrested the man once he opened the package, setting off the beeper; the man admitted to ordering 30 grams of fentanyl, claiming he thought the drug was legal (www.cleveland.com, March 31, 2017). An investigation completed by Orville Police (Wayne County) along with other regional law enforcement agencies lead to the indictment of two men responsible for selling fentanyl to another man which resulted in the man's overdose death (www.ohio.com, April 5, 2017). A man from Highland Heights (Cuyahoga County) faced federal charges for providing fentanyl to another man who died from taking the drug; the man obtained both fentanyl and Xanax® by mail to distribute in the Cleveland area (www.cleveland.com, April 12, 2017). Cleveland Police arrested a Berea man after responding to a call from a fast food worker that the man was in the drive-thru acting erratically with a 5-year-old girl in the backseat of his vehicle; learning that the man ingested heroin one hour before the incident, officers used Narcan® to reverse an overdose (www.cleveland.com, April 27, 2017). Lorain County law enforcement issued a statement to other drug task forces across Ohio warning of the drug, "Gray Death," a designer drug consisting of a combination of opiates, including heroin, fentanyl, carfentanil and/or U-47700 (synthetic opiate) (www.thedenverchannel.com, May 1, 2017). Elyria Police (Lorain County) and the U.S. Marshals Northern Ohio Violent Fugitive Task Force sought a man responsible for the heroin-related overdose death of a woman; the woman overdosed and died of heroin supplied by the wanted man at a home in Elyria (www.cleveland.com, May 5, 2017). The Cuyahoga County Medical Examiner reported to a local news source that the county experienced 41 fatal heroin and/or fentanyl-related overdose deaths and 29 cocaine-related overdose deaths in April 2017 (www.wkyc.com, May 19, 2017). Westlake Police (Cuyahoga County) responded to a call that a woman crashed her car on Interstate 90; upon arriving to the scene, officers

administered four doses of Narcan® to the woman to revive her; when the woman became conscious, she admitted she snorted a pink powdery substance at a residence in Elyria and she reported taking opioids for chronic pain (www.cleveland.com, May 19, 2017). Mentor Police (Lake County) arrested two people after conducting a sting operation at a residence and seizing 20 grams of suspected heroin (www.news-herald.com, May 30, 2017). Thirteen people died from fentanyl-related overdoses over Memorial Day weekend according to the Cuyahoga County Medical Examiner's Office; the overdose victims ranged from 21-60 years of age, and included nine men, ten African-American people and three white people (www.cleveland.com, May 31, 2017). An additional 40 overdose deaths occurred in Cuyahoga County since Memorial Day according to the Cuyahoga County Medical Examiner's Office; the overdose victims ranged in age from 21-67 years of age, and included 29 men, and more than half of the victims lived in Cleveland (www.news5cleveland.com, June 7, 2017). Medical staff in Lorain County administered three doses of Narcan® to a woman who overdosed in drug court at the Lorain County Common Pleas Court (www.news5cleveland.com, June 6, 2017). Law enforcement apprehended three people after they led police on a high-speed chase through Cleveland; a search of the vehicle yielded a bag of heroin, a gun and drug paraphernalia (www.news5cleveland.com, June 12, 2017). The U.S. Attorney's Office of the Northern District along with other federal and local law enforcement agencies worked together to intercept mail shipments containing fentanyl, shipped using U.S. mail from places like China (www.news5cleveland.com, June 13, 2017). A Cincinnati couple in Cleveland was arrested after selling fentanyl to Homeland Security agents over the dark web in May 2017; agents tested the mailed drugs, and found they contained fentanyl, carfentanil, and other fentanyl analogues (www.norwalkreflector.com, June 13, 2017).

While many types of heroin are currently available in the region, participants continued to report powdered heroin as most available. Participants commented: *"In Cleveland, it is more powdered [heroin], so I was having [black tar heroin] sent from Texas in the mail; When fentanyl came out, white powdered was always available."* A law enforcement officer reported, *"I don't see tar as much as powdered ... we see white and brown powdered equally. I only know of four cases of tar in the last six months"* In addition to brown and white powdered heroin, participants described powdered heroin in the region as varying in color to include: blue,

gray, pink and purple. A participant noted, *"It's the cuts that make the color different ... purple and blue were stronger, so I paid more."*

Participants reported that the availability of black tar and brown powdered heroin has remained the same during the past six months, while the availability of white powdered heroin has increased. Participants reported: *"White is more available [than brown] but it is more cut; I seen more people look for the white powdered."* Treatment providers reported that the general availability of heroin has increased during the past six months, while law enforcement reported that it has remained the same. However, community professionals explained that much of the heroin supply is fentanyl. One treatment provider stated, *"Because [heroin] is being mixed with fentanyl ... and with both on the street ... they don't know what they are getting."* A law enforcement officer reported, *"[Users] say it is more difficult to find just heroin ... and if they OD (overdose), it is usually fentanyl or carfentanil."*

Regarding fentanyl specifically, participants and community professionals reported an increase in its availability during the past six months. Participants commented, *"[Fentanyl is] what has been killing all these kids out here, so I'd say it is real easy to get."* Treatment providers reported: *"[Fentanyl is] like water now [it's readily available]; Just fentanyl is now as widely available [as heroin] ... it is everywhere; [Fentanyl] has to be more available because of all the overdoses; It increased because there is a bigger profit margin for the seller and because the demand is there; Because of the high [of fentanyl], they are willing to take the risk [of overdose] because it feels good."* A law enforcement officer added, *"Abundantly available ... I think a lot of times they don't know that is what they are getting, so they are not necessarily seeking it out, but they are getting [fentanyl]."*

The Lake County Crime Lab reported that the number of heroin cases it processes has increased during the past six months, while the BCI Richfield Crime Lab reported that the number of heroin cases it processes has decreased. The labs reported processing black tar, beige, gray, tan and white powdered heroin, although neither lab typically differentiates between black tar and powdered heroin. The BCI Richfield Crime lab noted that is rare to see heroin by itself any more.

The crime labs also reported that the number of carfentanil, fentanyl and fentanyl analogue cases they process has increased during the past six months. They

reported processing the following fentanyl analogs: acetyl fentanyl, furanyl fentanyl and 3-methyl fentanyl. The BCI Richfield Crime Lab reported processing cases of the following additional fentanyl analogues: acryl fentanyl, butyryl fentanyl, cyclopropyl fentanyl, 2-FBF, 4-FBF, 2-FIBF, 3-FIBF, 4-FIBF, isobutyryl fentanyl and m-FBF.

Heroin	Reported Availability Change during the Past 6 Months	
	 Participants	Increase
	 Law enforcement	No change
	 Treatment providers	Increase

Participants most often rated the current quality of black tar heroin as '7' and the current quality of powdered heroin as '8' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score for heroin overall was '10.' However, many participants noted an inconsistency in the current quality of heroin: *"If you are a new user, they give you good shit ... and then you come back and they 'step on' (adulterate) it and it's garbage; It's like Russian roulette, you never know what you are getting."*

Participants discussed adulterants (aka "cuts") that affect the quality of heroin, reporting the top cutting agents as: fentanyl, sleeping aids and vitamin K. Additional cuts mentioned included: benzodiazepines and mannitol (diuretic). Participants reported: *"People coming into [the treatment agency] ... were not testing positive for heroin, it was fentanyl; Half the time they don't know what they are getting, but it is most likely fentanyl and not heroin."*

Overall, participants reported that the quality of black tar heroin has remained the same during the past six months, while the quality of brown and white powdered heroin has increased. Participants said: *"[Powdered heroin is] better because it is being cut with fentanyl; Fentanyl is everywhere, it is not heroin anymore ..."*

Heroin	Cutting Agents Reported by Crime Lab
	<ul style="list-style-type: none"> <input type="radio"/> acetaminophen <input type="radio"/> diphenhydramine (antihistamine) <input type="radio"/> mannitol (diuretic) <input type="radio"/> papaverine (vasodilator) <input type="radio"/> quinine (antimalarial)

Reports of current prices for heroin were consistent among participants with experience purchasing the drug. Reportedly, the most common quantity of purchase is 1/2 gram. Participants reported: *"One-half gram is most common and is \$50-60 depending on how long you know the 'dope boy' (drug dealer); If you are a dealer, you can get it for cheaper."* Overall, participants indicated that the price of heroin has decreased during the past six months. A participant commented, *"Pricing is cheaper because of demand (high supply)."*

Heroin	Current Street Prices for Heroin	
	Black tar and brown powdered:	
	1/10 gram	\$20
	1/2 gram	\$80
	A gram	\$140
	White powdered:	
	1/10 gram	\$15
	1/2 gram	\$65
	A gram	\$120
	1/8 ounce	\$300
1/4 ounce	\$700	
1/2 ounce	\$900	
An ounce	\$1,800	

While there were a few reported ways of using heroin, generally, the most common route of administration remains intravenous injection (aka "shooting"). Participants reported that out of 10 black tar heroin users, eight would shoot and two would smoke the drug. Participants estimated that out of 10 powdered heroin users, all 10 would shoot the drug. A participant commented, *"Most start with snorting and move to needles (shooting) because it's a quicker high ... with needles there is an immediate rush and with snorting it takes longer."* A law enforcement officer stated, *"We see a lot of hypodermic needle use ..."*

Participants reported that injection needles are most available from pharmacies, needle exchange programs or from relatives who have diabetes. Additionally, participants reported obtaining needles from other users. Participants shared: *"I get mine at the needle exchange; My mother-in-law is diabetic so she'd give them to me, knowing I was using because she did not want me to use dirty needles"*

... she was an enabler; I'd buy them from pharmacies but you need to prove you have diabetes now; It's not common to get needles from dealers ... it's not common at all because they don't want to keep needles or baggies at their house because if they get caught they are busted." The most commonly reported price for needles on the street is \$1 per needle. Reportedly, sharing needles is common among users. A participant said, "When you are sick, you are just thinking about getting un-sick."

A profile for a typical heroin user did not emerge from the data. Participants described typical users as everyone: "It's used by everybody; It is white middle class, upper class ... but really it is everyone." Community professionals also described typical heroin users as everyone. Treatment providers stated: "People on prescription opioids; People hitting treatment are all ages but I see the older kids, like 20 to 25 year olds ... and Caucasians are using it more ...". Law enforcement stated: "For drug court, the age range is 23 to 30 [years] for opiates in general, females and males ... gender does not have anything to do with it ... some have supportive families and some don't; It impacts everybody, every ethnicity, any age, any financial bracket, people in their 60s, 70s and 80s are using it."

Prescription Opioids



Prescription opioids remain highly available for illicit use in the region. Participants most often reported the current street availability of these drugs as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available,

extremely easy to get); the previous most common score was also '10'. Participants stated: "Yep, they are still available ... pretty easy to get for me, actually; Just a phone call away; Some people just sell pills." Treatment providers most often reported current street availability as '8', while law enforcement most often reported it as '10'; the previous most common scores were '7' for treatment providers and '10' for law enforcement.

Corroborating data indicated that prescription opioids are available for illicit use in the region. The Cuyahoga County Medical Examiner's Office reported that 15.8% of the 380 drug overdose deaths it processed during the past six months involved prescription opioids. In addition, a query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Cleveland region returned 513 prescription opioid cases reported during the past six months (there were 515 cases for the previous six

months). These counts do not include fentanyl and fentanyl analogues. Although previous OSAM Drug Trend Reports counted prescription opioids and fentanyl together, they are now counted separately. Fentanyl, fentanyl analogues and carfentanil data can now be found in the "Heroin and Fentanyl" section of this report.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. A Cuyahoga County Common Pleas Court judge mandated a former Cleveland drug detective to treatment for possessing oxycodone without a prescription; the detective had hundreds of text message exchanges with a drug dealer in Cleveland, in which he requested to purchase heroin and prescription drugs, and to act as a middle man to traffic the drugs (www.cleveland.com, Feb. 28, 2017). Drug Enforcement Administration (DEA) agents arrested a Cleveland man on federal drug trafficking charges for selling heroin and crack cocaine to two people in Wooster (Wayne County) that resulted in their overdose deaths; investigators found heroin mixed with fentanyl and drug paraphernalia in the man's home during his arrest (www.cleveland.com, March 1, 2017). A man accused of hitting and killing an OSHP trooper faced five additional years to his possible prison sentence for driving under the influence of drugs after new information released found that the man took a dose of methadone within 15 minutes prior to the crash; the man had a methadone prescription for opioid addiction (www.cleveland.com, March 6, 2017). U.S. postal inspectors arrested a Cleveland Police officer, the son of the Parma Heights (Cuyahoga County) mayor, a mayoral candidate and a drug dealer after they intercepted several packages containing prescription opioids; agents found the men preparing oxycodone pills to snort in a home in Cleveland (www.cleveland.com, March 15, 2017).

Participants and community professionals identified Percocet® and Vicodin® as the most available prescription opioid in terms of widespread illicit use. One law enforcement officer shared, "Most people have them in their homes. [Users] go to the ER (emergency room) and they can get them ... there are some doctors cutting them off, but it is still pretty easy ... whenever I go to the dentist I am offered them."

Participants and community professionals reported that the general availability of prescription opioids has decreased during the past six months. Participants discussed: "It's decreased because of all the restrictions on prescriptions; Doctors are not prescribing because of the opiate epidemic, they just aren't prescribing; People are not getting them in high quantities, too; People have moved on to heroin." Treatment

providers stated: "People are not getting prescriptions as often, and when they are, the amount is less; Doctors are not prescribing it as usual [practice], so a lot of people turned to heroin because they can't get [prescription opioids]; Within the Hispanic community, heroin is the primary drug and they are substituting it with methadone." One law enforcement officer reported, "I can go to the doctor and get a prescription for Vicodin® and put it on the streets."

The Lake County Crime Lab reported that the number of cases for oxycodone/acetaminophen (Percocet®), oxymorphone (Opana®) and tramadol (Ultram®) has increased during the past six months, while the number of cases for all other prescription opioids has decreased. The BCI Richfield Crime Lab reported that the number of hydrocodone (Vicodin®), hydromorphone (Dilaudid®) and oxymorphone cases it processes has increased, while the number of methadone, morphine, oxycodone (OxyContin®) and tramadol cases has decreased. In addition, the BCI Richfield Crime Lab reported that it has seen fake oxycodone tablets that contained both oxycodone and heroin during the past six months.

Prescription Opioids	Reported Availability Change during the Past 6 Months	
	 Participants	Decrease
	 Law enforcement	Decrease
	 Treatment providers	Decrease

Reports of current street prices for prescription opioids were consistent among participants with experience buying the drugs. Reportedly, the majority of prescription opioids sell for \$1.50 per milligram. Overall, participants indicated that the price of prescription opioids has increased during the past six months. Participants reported: "Increased in prices from \$1 per milligram to \$1.50 per milligram because they are harder to come by now; Price depends on who you get them from; Percocet® is \$1 per milligram usually, but 10 milligram is \$15 ... but if you buy the whole 'script' (prescription), you get it cheaper; I used to get 'perks' (Percocet®) from my doctor and sometimes I'd sell them for \$3 and sometimes \$5 it all depends on how bad I needed alcohol!"

Prescription Opioids	Current Street Prices for Prescription Opioids	
	methadone	\$1.50 per milligram
	Opana®	\$2 per milligram
	Percocet®	\$8-12 for 10 mg \$35-45 for 30 mg
	Roxicodone®	\$8-12 for 10 mg \$35-45 for 30 mg
Vicodin®	\$0.50 per milligram	

Participants reported obtaining these drugs for illicit use from drug dealers, doctors and people with prescriptions in and out of the state. Participants reported: "I was bringing them in from Detroit; I got them from people who were prescribed them; I got them originally from the doctor and then on the streets when I was cut off (no longer prescribed the drugs)." Treatment providers reported: "I have some clients who will seek [prescription opioids] in the hospitals; I know people find them in medicine cabinets."

While there were a few reported ways of consuming prescription opioids, and variations in methods of use were noted among types of prescription opioids, generally the most common route of administration for illicit use remains snorting. Participants estimated that out of 10 illicit prescription opioid users, eight would snort and two would orally ingest the drugs. Participants reported: "Snorting is more powerful than eating; Depending on how desperate someone is to get high would be how they use it ... it will take them 15 minutes to get high if they eat it, seven if they snort, and if they 'shoot' (intravenously inject), [the high is] instant; Some people 'parachute' (crush the pill and wrap it in tissue and swallow); People chew them; Dilaudid® you can shoot." Regarding use of prescription fentanyl patches, participants reported: "The gel patch I shot; You can suck on the patch or just put it on the body when withdrawing and scratch the skin to activate them."

Participants described typical illicit prescription opioid users as white people, younger and heroin users. Participants reported: "Heroin addicts use [prescription opioids] pretty interchangeably; Everyone, but I don't see a lot of African-American people using pills; I don't see a lot of people in lower socio-economic groups using; Youth, I seen kids as young as 13 [years old] popping pills ... I started at age 15; High school jocks because they have a sports injury and get addicted to the pills they are given."

Community professionals described typical illicit prescription opioid users as everybody, but specified that illicit use is more common among white people from the suburbs. Treatment providers reported: *“Across ethnicities, age, race, it does not seem to matter that much; More suburban ... I don’t see it in the inner city.”* Law enforcement officers reported, *“Younger because the pills is how they start off and it is more expensive, so once they know [heroin] is cheaper, they switch to heroin; I think it starts in high school with teens ... you do that long enough and it progresses ... almost all of them go to heroin ... by the time they get to us they are using heroin.”*

Suboxone®

Suboxone® is moderately to highly available for illicit use in the region. Participants most often reported the current street availability of Suboxone® in filmstrip form as ‘7’ and in pill form as ‘3’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely easy to get); the previous most common availability scores for Suboxone® in general were ‘8’ and ‘10’. A participant stated, *“I’ve seen them in jail. That is the biggest thing in jail because it is so thin [Suboxone® filmstrip] ... easy to conceal.”*

Treatment providers reported the current street availability of Suboxone® as ‘7’; while law enforcement reported it as ‘10’; the previous most common scores was ‘9’ and ‘8’, respectively. One treatment provider stated, *“I know a lot of people who can get it pretty easily.”* Law enforcement commented: *“They can seem to get it when they can’t get their heroin; It’s not that difficult to get the prescription and make it available on the street.”*

Corroborating data indicated that Suboxone® is available for illicit use in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Cleveland region returned 112 buprenorphine (an ingredient of Suboxone®) cases reported during the past six months (there were 102 cases for the previous reporting period).

Participants reported that the street availability of Suboxone® has increased during the past six months. One participant observed: *“More people are on it now, so more is on the street as a result.”* Treatment providers reported that street availability has increased during the past six months, while law enforcement reported that it has remained the same. A treatment provider reported, *“Availability increased because there are more providers and there are more [clinics]*

doing it for cash so they are being diverted.” The BCI Richfield and Lake County crime labs reported that the number of Suboxone® cases they process have decreased during the past six months.

Suboxone®	Reported Availability Change during the Past 6 Months	
	 Participants	Increase
	 Law enforcement	No change
	 Treatment providers	Increase

Reports of current street prices for Suboxone® were consistent among participants with experience buying the drug. Overall, participants reported that the price of Suboxone® has remained the same during the past six months.

Suboxone®	Current Street Prices for Suboxone®	
	filmstrip	\$20 for 8 mg
	pill	\$15 for 8 mg

In addition to obtaining Suboxone® on the street from dealers, participants also reported getting the drug through doctors. Participants reported that the most common route of administration for illicit use of Suboxone® filmstrips is sublingual, followed by intravenous injection (aka “shooting”); the most common routes of administration for illicit use of Suboxone® pills are shooting and snorting.

Participants described typical illicit Suboxone® users as heroin users trying to avoid withdrawal. Participants reported: *“It is mostly used by heroin users; People use it to avoid being ‘dope sick’ (experiencing withdrawal); It is very popular in prison, getting them from the guards who sell them, and also from visits (visitors smuggling the drug).”* Community professionals described typical illicit users also as heroin users trying to avoid withdrawal. A law enforcement officer stated, *“When they can’t get heroin, they use Suboxone®.”*

Sedative-Hypnotics

Sedative-hypnotics (benzodiazepines, barbiturates and muscle relaxants) remain highly available for illicit use in the region. Participants most often reported the current street availability of these drugs as '10' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was also '10.' Treatment providers most often reported current street availability as '8;' the previous most common score was '10.' Treatment providers stated: *"For a prescription, it is a '10,' you can just go to your doctor to get it; People seem to be prescribed Xanax® an awful lot still, especially the mental health population."* Law enforcement did not report on current street availability of sedative-hypnotics.

Corroborating data indicated that sedative-hypnotics are available for illicit use in the region. The Cuyahoga County Medical Examiner's Office reported that 17.9% of the 380 drug overdose deaths it processed during the past six months involved one or more benzodiazepine; of these benzodiazepine-related deaths, 55.9% involved alprazolam (Xanax®). In addition, a query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Cleveland region returned 342 benzodiazepine cases reported during the past six months, of which 68.4% were alprazolam (an increase from 298 benzodiazepine cases for the previous six months, of which 68.1% were alprazolam).

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Wooster Police (Wayne County) and OSHP arrested two men at a home in Wooster after executing a search warrant and seizing Xanax®, Suboxone® and 1.5 ounces of heroin (www.otfca.net, Feb. 7, 2017).

A Highland Heights (Cuyahoga County) man was arrested for obtaining Xanax® and fentanyl in the mail to sell on the street; the man sold fentanyl to a 19-year-old female who subsequently died from an overdose at a home in the North Collinwood neighborhood of Cleveland; investigators also found multiple texts between the man and a middle-man he used to distribute the drugs, offering him free drugs, including Klonopin® for the man's efforts; this man was also indicted by a federal jury for drug trafficking (www.cleveland.com, April 12, 2017).

Participants identified Klonopin® and Xanax® as the most available sedative-hypnotics in terms of widespread illicit use. Participants reported: *"'Xanie's' (Xanax®) are big; Xanies, Klonopin® ... I am not sure which one is easier to get ...*

probably both the same." Treatment providers also identified Klonopin® and Xanax® as the most available. They reported: *"I don't see [Xanax®] as a drug of choice, but they tell me about it in the assessment; If someone is prescribed it, they are giving it to their buddy; Normally, the clients who have Klonopin® sell theirs."*

Participants and treatment providers reported that the general availability of sedative-hypnotics has remained the same during the past six months. One participant stated, *"It's the same really, you can still get 'xanies' (Xanax®) and Klonopin®."* A treatment provider commented, *"It's as available as before."*

The Lake County and the BCI Richfield crime labs reported that the number of clonazepam (Klonopin®) and zolpidem (Ambien®) cases they process has increased during the past six months. In addition, the Lake County Crime Lab reported that its number of diazepam (Valium®) cases has also increased, while the BCI Richfield Crime Lab reported that its number of alprazolam (Xanax®) and lorazepam (Ativan®) cases have increased. The number of cases for all other sedative-hypnotics have either remained the same or decreased during the past six months.

Sedative-Hypnotics	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No comment
	 Treatment providers	No change

Reports of current street prices for sedative-hypnotics were consistent among participants with experience buying the drugs. Reportedly, sedative-hypnotics generally sell for \$1 per milligram. Overall, participants reported that the price of sedative-hypnotics has remained the same during the past six months. One participant commented, *"Xanies are \$4 to \$7 depending on who is selling them and where they are coming from."*

Sedative-Hypnotics	Current Street Prices for Sedative-Hypnotics	
	Klonopin®	\$1 for 0.5 mg \$2 for 1 mg
	Soma®	\$3 per pill (unspecified dose)
	Valium®	\$1-2 for 5 mg \$2 for 10 mg
	Xanax®	\$4 for 2 mg

Participants reported obtaining these drugs for illicit use from drug dealers, other users and doctors. Participants commented: *“They still be pretty easy to buy; I know a lot of people who are still prescribed them.”* Generally, the most common routes of administration for illicit use of sedative-hypnotics remain snorting and oral consumption. Participants estimated that out of 10 illicit sedative-hypnotic users, five would snort and five would orally consume the drugs. One participant said, *“Xanies you won’t snort because it burns.”*

Participants described typical illicit users of sedative-hypnotics as heroin users and younger people. One participant stated, *“Pills is any age but ‘bars’ (Xanax® 2 mg) are the cool things to do for younger people ... rappers are using it now and putting it in their ‘lean’ (promethazine with codeine mixed with soda).”* Treatment providers described typical illicit users also as heroin users. One treatment provider stated, *“It’s people on heroin who are trying to quit [heroin use].”*

Marijuana



Marijuana remains highly available in the region. Participants and community professionals most often reported the current availability of the drug as ‘10’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely easy to get); the previous most common score was also ‘10’. One participant remarked, *“It is more available because it is almost legal now.”* A treatment provider commented, *“‘Pot’ (marijuana) is not even considered a drug by the patients anymore ... it is like a cigarette...”*

Participants and community professionals also discussed the availability of high-grade marijuana extracts and concentrates, often appearing as oil and waxy forms of the

drug (aka “dabs”). Both groups of respondents most often reported the current availability of marijuana extracts and concentrates as ‘10’; the previous most common score was ‘8’ for participants while community professionals did not report on availability previously. Participants stated: *“It’s all the dispensaries in the legalized states. They are shipping in the high-grade ... it’s more in demand; A lot of people appreciate high quality pot.”* One law enforcement officer reported, *“I would say high-grade is a little more available, with Michigan right next door you can get it.”*

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. OSHP arrested an Akron woman during a traffic stop on the Ohio Turnpike in Lorain County when officers smelled raw marijuana from the vehicle, prompting a search; officers seized 366 grams of “shatter” (marijuana concentrate, aka “butane honey oil,” which is used for “dabbing”), 144 jars of a THC (tetrahydrocannabinol)-infused drink and 14 grams of marijuana (www.statepatrol.ohio.gov, Jan. 4, 2017). One man died during a marijuana deal in Cleveland when a man pulled a gun on another man and shot him (www.cleveland.com, Jan. 4, 2017). Law enforcement attempted to arrest a man in Cleveland after police found him in his car with a passenger smoking marijuana outside of a strip club; the man refused police orders to turn off his car, which ended in a police officer being dragged 35 feet as the man sped away; police later found the car abandoned with marijuana in it (www.cleveland.com, Jan. 12, 2017). Berea Police (Cuyahoga County) cited a man during a traffic stop after officers smelled marijuana coming from his car and the man admitted to smoking the drug; in a separate incident, Berea Police cited another man when they noticed a car running for a long time in a restaurant parking lot; when the man rolled down his window to speak with police, they noted the smell of marijuana; officers confiscated one bag of marijuana and a pipe to smoke the drug; in two separate additional incidents, officers arrested a man and then a woman in Berea for marijuana possession (www.cleveland.com, Jan. 19, 2017). Painesville Township (Lake County) fire department paramedics responded to a call regarding three people that overdosed in a 12-hour timespan, reportedly due to smoking marijuana laced with opiates; the report later showed that the marijuana was not laced with opiates, but that the people overdosed from a combination of marijuana, crack cocaine and other drugs (www.cleveland.com, Feb. 9, 2017). Mayfield Heights Police (Cuyahoga County) arrested a man when he called them to help him unlock his car and a strong smell of marijuana came from the car; officers confiscated bags containing the drug and marijuana-related

paraphernalia (www.newsnet5.com, Feb. 16, 2017). Lake County narcotics agents and Willoughby Police collaborated to arrest a woman for attempting to ship 100 pounds of marijuana to her home in Maple Heights (Cuyahoga County) from a retail shipping store (www.otfca.net, Feb. 16, 2017). Lorain Police (Lorain County) arrested the girlfriend of a known drug dealer for complicity in marijuana trafficking after police responded to a call of a shooting at the couple's home; officers found half a pound of marijuana in the home (www.cleveland.com, March 2, 2017). North Royalton Police (Cuyahoga County) arrested a man during a traffic stop after finding marijuana hidden in between scrap metal in the bed of his truck (www.cleveland.com, March 3, 2017). Bentleyville Police (Cuyahoga County) arrested a woman during an early morning traffic stop when officers smelled marijuana coming from her car and the woman pulled out marijuana wrapped in a dollar bill from her bra; the woman also registered twice over the legal alcohol limit during a breathalyzer test (www.cleveland.com, March 10, 2017). North Ridgeville Police (Lorain County) arrested a man after his 5-year-old daughter was found unresponsive; emergency crews transported the child to a hospital, where tests revealed the girl had THC in her body; the child reportedly found a gummy bear laced with THC in her father's dresser drawer and ate it (www.wtol.com, March 14, 2017). OSHP arrested a Michigan man during a traffic stop in Lorain County after searching the vehicle and confiscating 114 grams of "shatter" (marijuana concentrate, aka "butane honey oil," which is used for "dabbing"), a duffle bag containing 10 pounds of marijuana and 54 grams of cocaine (www.statepatrol.ohio.gov, March 24, 2017). Mayfield Heights Police arrested a man when he called them to help him find people who allegedly gave him counterfeit money in exchange for marijuana; the man admitted to officers to selling the drug, and upon searching the man's vehicle, they found a mason jar full of the drug (www.fox8.com, March 30, 2017). Beachwood Police (Cuyahoga County) arrested a man during a traffic stop after finding an undisclosed amount of marijuana in his vehicle; in a separate incident, officers arrested a driver in Shaker Heights (Cuyahoga County) during a traffic stop after finding baggies of marijuana in his vehicle (www.patch.com, March 31, 2017). Mayfield Heights Police arrested a woman who caused a two-car crash on Interstate-271 for driving under the influence of drugs; officers found marijuana and a metal grinder in the woman's vehicle at the time of the incident (www.cleveland.com, March 31, 2017). Lake County Narcotics agents collaborated with Willoughby Police to arrest a pregnant woman at a retail shipping store in Willoughby when she went to the store to pick up 27,000 grams of marijuana to give to someone to sell (www.news-herald.com, April 4, 2017). North Royalton Police issued a citation to a Barberton (Summit County) man after

pulling him over for a traffic violation and finding a marijuana "blunt" (cigar), marijuana buds and another smoked marijuana blunt in the man's vehicle (www.cleveland.com, May 12, 2017). Pepper Pike Police (Cuyahoga County) responded to a call at a residence where a shooting occurred; officers arrived to the home and found a dead man lying on the lawn; officers arrested the suspected murderer and two others involved in the incident and later learned that the men came to Pepper Pike to sell marijuana to the man they later killed (www.news5cleveland.com, May 22, 2017).

Participants and community professionals reported that the general availability of marijuana has remained the same during the past six months, while the availability of marijuana extracts and concentrates has increased. Participants discussed, "I friended people on Facebook in California so now I can get [high-grade marijuana] real easy; 'Edibles' (marijuana-infused food products) are becoming more popular; I think with the legalization with medical marijuana and recreational marijuana in the U.S. a lot is flooding into other states and it has made it increase."

The Lake County Crime Lab reported that the number of marijuana cases it processes has increased during the past six months, while the number of concentrated THC (oils, "dabs") cases it processes has decreased. For the BCI Richfield Crime Lab the inverse was reported: the number of marijuana cases (including edibles) has decreased during the past six months, while the number of concentrated THC cases has increased.

Marijuana	Reported Availability Change during the Past 6 Months	
	 Participants	Increase
	 Law enforcement	Increase
	 Treatment providers	Increase

Participants most often rated the current overall quality of marijuana as '10' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was also '10.' Regarding high-grade marijuana, participants commented: "Advances in technology are helping [to produce] better strains [of marijuana], better botany; People are taking pride in it; It is like an art." Overall, participants indicated that the quality of marijuana has increased during the past six months. One participant commented, "I think it has increased steadily because they are getting better at growing it."

Reports of current prices for marijuana were provided by participants with experience buying the drug. Reportedly, the most common quantity of purchase is a “blunt.” Overall, participants reported that the prices for marijuana have remained the same during the past six months.

		Current Street Prices for Marijuana	
		Low grade:	
Marijuana	A blunt (cigar) or gram	\$5	
	1/4 ounce	\$30	
	1/2 ounce	\$55	
	An ounce	\$100	
	A pound	\$900	
	High grade:		
	A blunt (cigar)	\$10	
	A gram	\$15-20	
	1/8 ounce	\$50	
	1/4 ounce	\$80	
	An ounce	\$250	
	A pound	\$3,000	
	Extracts and concentrates:		
	1 gram	\$35-50	
	2 grams	\$90	
3 grams	\$100		
7 grams	\$260		

While there were a few reported ways of consuming marijuana, generally the most common route of administration remains smoking. Participants estimated that out of 10 marijuana users, all 10 would smoke the drug.

A profile for a typical marijuana user did not emerge from the data. Participants described typical marijuana users as everyone. However, they differentiated that younger people tend to use low-grade marijuana more often than other age groups. Participants reported: “Junior high kids [use low-grade marijuana] because either they don't know or don't have the money; Someone who does not like to have all the smell of marijuana on them will dab.” Community professionals described typical marijuana users as younger

people. Community professionals reported: “Seems like there are zero consequences now. It is in high school and college for sure, anywhere from 13 to 30 [years of age] are using; Across the board, but more prevalent in a younger crowd; It is starting at a younger age now.”

Methamphetamine



Methamphetamine remains highly available in the region. Participants most often reported the current overall availability of the drug as ‘10’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely easy to get); the previous most common scores were ‘10’ for crystal methamphetamine and ‘6’ for powdered methamphetamine. Community professionals most often reported the current overall availability as ‘10’; the previous most common scores were ‘4’ for crystal methamphetamine and ‘7’ for powdered methamphetamine.

Corroborating data indicated that methamphetamine is available in the region. The Cuyahoga County Medical Examiner’s Office reported that 7 of the 380 drug overdose deaths it processed during the past six months involved methamphetamine. In addition, a query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Cleveland region returned 456 methamphetamine cases reported during the past six months, of which 26.5% were Cuyahoga County cases, and 28.1% were Lake County cases, (there were 498 cases for the previous six months, of which 39.4% were Cuyahoga County cases and 26.9% were Lake County cases).

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. Law enforcement in Wayne County arrested three men at a home in Orville while executing a search warrant; officers arrived to the home minutes after the men completed cooking methamphetamine and were weighing the drug on the porch (www.otfca.net, Jan. 8, 2017). Wooster Police (Wayne County) along with other regional law enforcement agencies responded to a tip from a concerned neighbor of possible drug trafficking; officers arrested four people after finding methamphetamine, heroin and drug paraphernalia in their home (www.otfca.net, Jan. 20, 2017). Wayne County Sheriff’s officers arrested two people after executing a search warrant of their home in West Salem and finding a methamphetamine laboratory inside the home; the

two people admitted to purchasing and reselling boxes of pseudoephedrine for \$50-100 each (www.otfca.net, Feb. 7, 2017). Ashland Police (Ashland County) along with other regional law enforcement agencies collaborated to execute a search warrant of a home and arrest two people after confiscating crystal methamphetamine, prescription drugs and drug abuse instruments (www.northcentralohio.com, Feb. 10, 2017). U.S. Marshals Northern Ohio Violent Fugitive Task Force officers arrested an Ashland couple at a home in Akron (Summit County) on a prior warrant where law enforcement previously seized suspected crystal methamphetamine, scheduled prescription drugs and drug abuse instruments from the couple's Ashland residence (www.richlandsource.com, Feb. 17, 2017). Cleveland Police arrested a man after responding to a call that a 3-year-old girl attempted to enter a garage with a suspected methamphetamine laboratory; officers arrived to find the father of the child in the garage in the presence of the lab and chemicals used to manufacture the drug (www.cleveland.com, March 7, 2017). A Cuyahoga County grand jury indicted a Cleveland man on charges of corrupting another person with drugs, drug possession and for providing crystal methamphetamine to his friend prior to him drowning in Lake Erie during a night swim from a boat; the men on the boat called the U.S. Coast Guard to help revive the man who drowned and investigators with the Ohio Department of Natural Resources Division of Watercraft found a bag of crystal methamphetamine on the boat (www.cleveland.com, March 14, 2017). Ashland Police along with other regional law enforcement agencies collaborated to execute a search warrant at an Ashland home and arrest six people after seizing suspected methamphetamine, drug paraphernalia and drug abuse instruments (www.wmfd.com, March 17, 2017).

Participants reported that methamphetamine is available in crystal and powdered forms throughout the region. However, they reported crystal as the most prevalent form of methamphetamine. A law enforcement officer stated, "I see 30-40% powder and the rest crystal."

The powdered form of methamphetamine is typically referred to as "shake-and-bake," which means users are producing the drug in a single sealed container, such as a two-liter soda bottle. By using common household chemicals along with ammonium nitrate (found in cold packs) and pseudoephedrine (found in some allergy medications), people who make methamphetamine can produce the drug in approximately 30 minutes in nearly any location. A participant stated, "A lot of people don't

know how to make shake-and-bake, and crystal is just as good, so they don't bother."

Participants reported that the availability of crystal methamphetamine has increased during the past six months, while the availability of powdered methamphetamine has remained the same. A participant stated, "There has been a steady increase of 'ice' (crystal methamphetamine) because of the Mexican cartels." Treatment providers reported that the availability of both forms of methamphetamine has remained the same during the past six months. Law enforcement reported that the availability of crystal methamphetamine has remained the same, while the availability of powdered methamphetamine has increased during the past six months. A law enforcement officer stated, "[Powdered methamphetamine] goes in waves and it has gone up in the last six months. There have been more arraignments in the last couple weeks dealing with [powdered] meth ... I think every 6-9 months we go through a wave."

The Lake County and the BCI Richfield crime labs reported that the number of methamphetamine cases they process has increased during the past six months; the labs reported processing crystal, off-white powder, white powder, brown powder and brown crystals in smoking devices.

Methamphetamine	Reported Availability Change during the Past 6 Months	
	 Participants	Increase
	 Law enforcement	Increase
	 Treatment providers	No change

Participants most often rated the current overall quality of methamphetamine as '6-7' for crystal methamphetamine and '5' for powdered methamphetamine on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common score was '8' for crystal methamphetamine with no previous quality score reported for powdered methamphetamine. Participants remarked: "It depends on who is making it; You need to know how to make [powdered] meth or you will blow your face off; Quality depends on where you get it from; I was up for 7 days and just continued to use ... you start to hallucinate ... I had to take a lot of Xanax® or heroin to come down."

Participants mentioned MSM (Methylsulfonylmethaneas, a joint supplement), MDMA and salt as adulterants (aka “cuts”) for methamphetamine. A participant stated, “They are cutting crystal with molly for a better high” Overall, participants reported that the quality for both crystal and powdered methamphetamine has remained the same during the past six months.

Reports of current prices for methamphetamine were consistent among participants with experience buying the drug. Reportedly, the most common amount of purchase is 1/2 gram to a gram. A participant stated, “You can also trade a box of pseudoephedrine for a gram.” Overall, participants reported that the price of crystal and powdered methamphetamine has remained the same during the past six months. A participant remarked, “A lot of people are starting to sell, so it might be going down soon.”

Methamphetamine	Current Prices for Methamphetamine	
	Powdered:	
	1/2 gram	\$40
	A gram	\$80
	Crystal:	
	1/2 gram	\$50
A gram	\$100	

Participants reported that the most common route of administration for methamphetamine remains smoking. Participants estimated that out of 10 crystal methamphetamine users five would snort and five would smoke or intravenously inject (aka “shoot”) the drug. Participants estimated that out of 10 powdered methamphetamine users, all 10 would smoke the drug. Participants stated: “Shoot and smoke ... it was a combo thing; I was using it all the ways, smoke, snort, you name it; With powder, you ‘hot rail.’” Hot railing methamphetamine is a process where the user places the drug in a glass pipe, heats the end of the pipe and inhales the vapors from the drug through their nose and exhales through their mouth.

Participants described typical methamphetamine users as men living in rural areas. Participants reported: “On the outskirts of town because there is nothing else to do in the country and because of the smell [of the drug]; I was hanging out with a wide variety [of methamphetamine users] but more in the country because people can smell it if you are making it, so you need open space.”

Treatment providers described typical methamphetamine users as gay men, while law enforcement described typical users as people who are on Vivitrol®. Treatment providers reported: “People always forget, among the gay population it has already been available; In the gay culture it is across races ... they use it because it heightens sexual experience; [Reportedly,] it is really easy to get and prevalent at bath houses (sex clubs).” A law enforcement officer stated, “What I can tell you is, people on the Vivitrol® shot, we are seeing more meth and alcohol come up with them [on drug screens].”

Prescription Stimulants

Prescription stimulants remain highly available for illicit use in the region. Participants and community professionals most often reported the current street availability of these drugs as ‘8’ on a scale of ‘0’ (not available, impossible to get) to ‘10’ (highly available, extremely easy to get); the previous most common scores were also ‘8’. Participants commented: “I just go to the doctor; I never tried to buy them ... usually people tell me that they have them.” One treatment provider remarked, “Adderall® is still pretty commonly abused.”

Corroborating data indicated that prescription stimulants are available for illicit use in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Cleveland region returned 150 prescription stimulant cases reported during the past six months, of which 80.0% were amphetamine (Adderall®) (there were 135 cases for the previous six months).

Participants and community professionals identified Adderall® as the most available prescription stimulant in terms of widespread illicit use. One participant stated, “I was able to get Adderall® any time.” A community professional reported, “I really only hear about Adderall®.”

Participants and community professionals reported that the general street availability of prescription stimulants has remained the same during the past six months. The Lake County Crime Lab reported that the number of amphetamine (Adderall®) and methylphenidate (Ritalin®) cases it processes has decreased during the past six months, while the BCI Richfield Crime Lab reported that the number of Ritalin® cases has increased and the number of Adderall® cases has remained the same.

Prescription Stimulants	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	No change
	 Treatment providers	No change

Reports of current street prices for prescription stimulants were consistent among participants with experience buying the drugs. Overall, participants reported that the price of prescription stimulants has remained the same during the past six months.

Prescription Stimulants	Current Street Prices for Prescription Stimulants	
	Adderall®	\$5 for 20 mg \$6 for 30 mg

Participants reported obtaining prescription stimulants for illicit use most often from people who have prescriptions. Participants reported: *"I'd steal them from people who had them; If there were an open house (showing of a home for sale), you go raid the bathroom, or when I was working a job (in someone's home), I'd look in their cabinets; I once bought the whole prescription off a girl; You can find someone willing to sell their 'script' (prescription) for sure; I didn't have a pill dealer, I got them from people who had scripts; Maybe occasionally a dealer had them...."*

Participants reported that the most common route of administration for illicit use of prescription stimulants is oral consumption. Participants estimated that out of 10 illicit prescription stimulant users, eight would take orally consume and two would snort the drugs.

Participants and community professionals described typical illicit users of prescription stimulants as college students. Participants stated: *"Rampant on college campuses for sure; People in college so they can stay up late studying."* A treatment provider commented, *"We still have younger clients coming in med-seeking for ADHD (attention-deficit hyperactivity disorder medications)."* Law enforcement reported: *"Younger males, about 18-25 [years of age]; They are huge in college ... everyone can get it in college."*

Ecstasy



Ecstasy (methylenedioxymethamphetamine: MDMA, or other derivatives containing BZP, MDA, and/or TFMPP) remains moderately to highly available in the region. Participants most often reported the current availability of the pressed pill form of ecstasy as '4' and of "molly" (powdered MDMA) as '8' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was '10' for both types of ecstasy. One participant mentioned, *"You can order it from China on the dark web."*

Treatment providers most often reported the current availability of the pressed pill form of ecstasy as '8,' while law enforcement most often reported it as '5,' the previous most common score was '7-8.' Both treatment providers and law enforcement most often reported the current availability of molly as '7,' no previous most common score was reported. A law enforcement officer stated, *"Rarely do we have people charged with [ecstasy], but they for sure have used it or tried it ... experimented with it."*

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. A federal judge in Cleveland sentenced a former Linndale (Cuyahoga County) police officer to 41 months in federal prison for her involvement in a drug ring, in which she helped traffic MDMA and high-grade marijuana from Canada to the Cleveland area; officers also arrested the former police officer's sister and four others for involvement in the ring (www.cleveland.com, Jan. 31, 2017). Cleveland vice officers arrested a Cuyahoga County Jail corrections officer after observing him sell marijuana to another man outside of a liquor store in Cleveland; officers searched the man's car and found two bags of ecstasy pills, 28 bags of marijuana, four bags of crack cocaine, two bags of heroin and a pill bottle containing 20 unidentified pills inside of a Pringles® can (www.cleveland.com, April 24, 2017).

Participants reported that the availability of ecstasy has decreased during the past six months, while the availability of molly has remained the same. One participant said, *"[Ecstasy has decreased] because meth has made a big comeback."* Community professionals reported that the availability of both ecstasy and molly has decreased during the past six months.

The Lake County and BCI Richfield crime labs reported that the number of ecstasy cases they process has decreased or

remained negligible (fewer than five cases) during the past six months; the labs do not differentiate between ecstasy and molly cases.

Ecstasy	Reported Availability Change during the Past 6 Months	
	 Participants	Decrease
	 Law enforcement	Decrease
	 Treatment providers	Decrease
Molly	Reported Availability Change during the Past 6 Months	
	 Participants	No change
	 Law enforcement	Decrease
	 Treatment providers	Decrease

Participants discussed the quality of ecstasy and molly and rated ecstasy's current overall quality as '3' and molly's as '8' on a scale of '0' (poor quality, "garbage") to '10' (high quality); the previous most common scores were '5' for ecstasy and '8' for molly. Overall, participants reported that the quality of ecstasy and molly has remained the same during the past six months. However, one participant reported, "I don't know how real it is, there is so much fake molly..."

Reports of current prices for ecstasy and molly were consistent among participants with experience buying the drugs. Overall, participants reported that the price of ecstasy and molly have remained the same during the past six months.

Ecstasy/Molly	Current Prices for Ecstasy/Molly	
	Ecstasy:	
	Low dose (aka "single stack")	\$5
	Medium dose (aka "double stack")	\$10
	High dose (aka "triple stack")	\$15
	Molly:	
	1/2 gram	\$25
A gram	\$50	

Participants indicated that molly is obtained from dealers. One participant stated, "You can find pill dealers that have it." Participants reported that the most common routes of administration for ecstasy and molly are oral consumption, snorting and anal insertion. Participants estimated that out of 10 ecstasy and molly users, eight would orally ingest, two would snort or anally insert the drug. Regarding molly, a participant remarked, "That shit burns like crazy when you snort, so people try to avoid that." In addition, participants noted that some users orally consume the drugs by "parachuting" (placing molly or crushed ecstasy in tissue and swallowing).

Participants described typical ecstasy and molly users as high school students and people who attend "raves" (dance parties). Participants stated: "For molly and 'X' (ecstasy), it is like the 13-year olds; Thirteen to 20 [years of age] because the rappers talk about it ... so the young ones, especially, think it's cool!" Community professionals described typical ecstasy and molly users as high school students and college-aged adults. One treatment provider commented, "I think people who wouldn't use hard core drugs might use that."

Synthetic Marijuana

Synthetic marijuana (synthetic cannabinoids) remains available in the region. However, neither participants nor community professionals were able to rate the current overall availability of the drug. Participants stated: "Still easy to get at the corner stores; You can still buy it in head shops." A treatment provider shared, "I only have a few clients abusing it." Law enforcement officers commented: "We do test for it, and yes, we see it; Last year it was an '8-10' (highly available), this year I can count on one hand the cases we've had."

Corroborating data indicated that synthetic marijuana is available in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Cleveland region returned 114 synthetic marijuana cases reported during the past six months (there were 144 cases for the previous six months). The most common synthetic marijuana ingredients reported in this region were: FUB-AMB, MDMA-FUBINACA and 5-Fluoro-ADB.

Neither participants nor treatment providers were able to report on a change in availability of synthetic marijuana during the past six months. However, law enforcement reported that availability has decreased: "You don't really

hear about it anymore; Used to see it a lot ... in the Akron area, but I don't see it up here; The potency of it ... intense, so they don't like it." The Lake County Crime Lab reported not processing any cases of synthetic marijuana during the past six months, while the BCI Richfield Crime Lab reported that the number of synthetic marijuana case it processes has decreased.

Synthetic Marijuana	Reported Availability Change during the Past 6 Months	
	 Participants	No comment
	 Law enforcement	Decrease
	 Treatment providers	No comment

Only one participant reported on the quality of synthetic marijuana and stated, "Strength was '9' (highly potent) but not a good high." In terms of current pricing of the drug, participants stated: "Cheaper than 'pot' (marijuana) ... maybe \$10 or \$20; I would buy a spray for \$50 ... you put it on [synthetic marijuana] to make it stronger." Despite legislation enacted in October 2011, participants reported that synthetic marijuana continues to be available at some gas stations and head shops.

Participants continued to report that the only route of administration for synthetic marijuana remains smoking. Participants estimated that out of 10 synthetic marijuana users, all 10 would smoke the drug. Participants described typical synthetic marijuana users as people who are trying to pass a drug screen. A participant stated, "People who don't want to drop dirty (screen positive for marijuana)." Treatment providers described typical users as young African-American males, while law enforcement described typical users as young, white people. A law enforcement officer remarked, "Teens and early 20s ... more Caucasians."

Other Drugs in the Cleveland Region

Participants and community professionals listed a variety of other drugs as being present in the region, but these drugs were not mentioned by the majority of people interviewed: hallucinogens (lysergic acid diethylamide [LSD], phencyclidine [PCP] and psilocybin mushrooms) and Neurontin® (gabapentin, an anticonvulsant).

In addition, the BCI Richfield Crime Lab reported that it processed 11 cases of U-47700 (a synthetic opioid) during the past six months. Media outlets reported on law enforcement seizures and arrests in the region this reporting period involving inhalants. Lakewood Police (Cuyahoga County) arrested a man after finding him passed out on two separate occasions, once in the bathroom of a fast food restaurant and again in the bathroom of a retail pharmacy from huffing aerosol cans (www.cleveland.com, Jan. 24, 2017). Fairview Park Police (Cuyahoga County) cited a man for disorderly conduct for fighting with police officers at a bus station; officers learned the man huffed computer duster prior to the incident (www.cleveland.com, Feb. 15, 2017). Elyria Police (Lorain County) responded to a call at a residence regarding a man who was unconscious from huffing computer dusters in his room while his 1-year-old and 4-year-old children were at home; the children's grandmother came home to find the children unsupervised and her adult son passed out in his room (www.cleveland.com, April 25, 2017). In addition, Wooster Police (Wayne County) seized the drug, α-Pyrrolidinopentiophenone (Alpha PVP, or "flakka," a second generation bath salt) during a raid; the news source did not confirm how much of the drug was confiscated, nor where the raid occurred in Wayne County (www.newsnet5.com, Jan. 19, 2017).

Hallucinogens

Hallucinogens remain available in the region. Participants most often reported the current availability of LSD as '8' and of PCP as '7' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common scores were '5' for LSD, '5' for psilocybin mushrooms and '10' for PCP. Although participants were not able to provide a current availability score for psilocybin mushrooms, they stated: "They are around, but you need to know people; I can get it in Columbus easier." Regarding PCP, a participant stated, "It's more in Cleveland because dealers like it, too ... they dip cigarettes in it."

Community professionals most often reported the current availability of LSD and psilocybin mushrooms as '5'; the previous most common scores were '2' for LSD and not reported for psilocybin mushrooms. Although community professionals were not able to provide a current availability rating for PCP, they reported: "I haven't heard of people having a problem getting it; It is always one of those staples."

Corroborating data indicated that hallucinogens are available in the region. A query of the National Forensic Laboratory Information System (NFLIS) for the counties which comprise the Cleveland region returned 122 hallucinogen cases reported during the past six months.

Media outlets reported on law enforcement seizures and arrests in the region this reporting period. South Euclid Police (Cuyahoga County) responded to a call from a 19-year-old male who believed he had swallowed a pregnant spider that gave birth in his stomach, and that spiders were crawling out of his mouth; officers learned the man ingested LSD shortly before making the call for help, and subsequently transported the man to a hospital for treatment (www.newsnet5.com, March 6, 2017).

Participants reported that the availability of psilocybin mushrooms has decreased during the past six months, while the availability of PCP has remained the same; they did no comment on a change of availability for LSD.

Treatment providers reported the availability of LSD has remained the same during the past six months, while law enforcement reported it has increased. A law enforcement officer stated, "LSD is starting to make a comeback." Community professionals agreed that the availability of PCP has decreased during the past six months. The BCI Richfield Crime Lab reported that the number of LSD, PCP and psilocybin mushrooms cases it processes has increased during the past six months, while the Lake County Crime Lab reported having processed five cases of hallucinogens during the past six months.

Reports of current prices for hallucinogens were provided by participants with experience purchasing these substances.

Hallucinogens	Current Prices for Hallucinogens	
	LSD:	
	A liquid drop or a single dose (aka "a hit")	\$10
	100 doses (aka "a sheet")	\$350
	Psilocybin mushrooms:	
	1/8 ounce	\$35
	1/4 ounce	\$50
	1/2 ounce	\$70

Participants reported the most common routes of administration for LSD are oral consumption and nasal and ocular absorption through drops. Participants described nasal and ocular absorption of LSD: "Some use in a dropper in the eye or up the nose; They drop it in their eyeballs." Participants reported that PCP is most often smoked by dipping a cigarette in the drug. Participants reported the most common route of administration for psilocybin mushrooms remains oral consumption. A participant stated, "Put on pizza or in tea because they taste like crap."

Participants described typical LSD users as college aged and festival-goers. Participants stated: "Common in festivals because people like to do 'acid' (LSD) at concerts ... it's more fun to them; Young people use at festivals like Nelson Ledges (park in Portage County)." In addition, participants commented: "A lot of people on Vivitrol® use it because it is not a common drug on a drug test; People coming off heroin who want a good high, but they don't want to get caught on a 'piss test' (urine drug screen)." Participants described typical PCP users as African-American people and individuals of lower socio-economic status, while they described typical psilocybin mushroom users as white people, college-aged individuals and hippies. Regarding psilocybin mushrooms, participants stated: "Seems like anybody would at least try them, but it's a white thing for sure; Hippies and pot smokers."

Treatment providers described typical LSD users as young people. A treatment provider reported, "[LSD is used by] younger kids, maybe college and grad students, too." Law enforcement indicated hallucinogen use among people who are prescribed Vivitrol® and older people. A law enforcement officer stated, "Seeing a little spike in this with the Vivitrol®, you see them dabble in it; An older group, but it is not a regular occurrence, maybe people have tried it a handful of times."

Neurontin®

Neurontin® is highly available for illicit use in the region. Participants most often reported the current street availability of the drug as a '10,' on a scale of '0' (not available, impossible to get) to '10' (highly available, extremely easy to get); the previous most common score was '5' and '10.'

Although treatment providers were not able to provide a current street availability rating for Neurontin®, they reported: "It is still one being overly prescribed; [Clients] are

saying it is easy to get but they are not identifying it as an addicted medication; In treatment, a lot of [clients] are on gabapentin (Neurontin®) for pain, so it's hard to determine if they are abusing it per se; When they are in treatment ... they sure are obsessed with it. I think it substitutes whatever vestiges of withdrawal they are having. I don't think when they go back out (leave treatment) they gravitate to it, but they like the little edge it gives them."

Treatment providers reported that the availability of Neurontin® has increased during the past six months. A treatment provider stated, "A little increase in prescriptions ... and we know it was being abused in another facility."

Reports of current street prices were consistent among participants with experience buying the drug. Participants reported purchasing 800 mg for \$1. Participants reported obtaining Neurontin® from people who are prescribed the drug. The most common routes of administration for illicit use are oral consumption and snorting. Participants estimated out of 10 users, seven would orally consume and three would snort Neurontin®.

Participants described typical illicit Neurontin® users as those addicted to opioids. Treatment providers described typical Neurontin® users as aged 25-45 years, white people and more often male than female.

Conclusion

Crack cocaine, heroin, marijuana, methamphetamine, powdered cocaine, prescription opioids, prescription stimulants and sedative-hypnotics remain highly available in the Cleveland region; also highly available is Neurontin® (gabapentin). Changes in availability during the past six months include: increased availability for heroin, fentanyl and marijuana; likely increased availability for methamphetamine; and decreased availability for prescription opioids and ecstasy.

Participants and treatment providers reported that the availability of powdered heroin has increased during the past six months. Participants discussed that powdered heroin, particularly white powdered, is often adulterated with fentanyl. Community professionals explained that much of the heroin supply is fentanyl. Moreover, a few treatment providers believed fentanyl to be as highly

available as heroin, while some participants expressed that fentanyl is now easier to find than heroin. Regarding fentanyl specifically, participants and community professionals reported an increase in its availability during the past six months; many respondent groups referenced an increase in overdoses as an indication of increased fentanyl availability.

NFLIS queries for the counties which comprise the Cleveland region returned 1,551 fentanyl and fentanyl analogue cases (an increase from 956 cases in the previous six months) and 168 carfentanil cases reported during the past six months. Regional crime labs reported that the number of fentanyl, fentanyl analogue and carfentanil cases they process has increased during the past six months.

While participants and community professionals reported that the general availability of marijuana has remained the same during the past six months, both respondent groups reported that the availability of marijuana extracts and concentrates (aka oils and "dabs") has increased. Participants discussed "edibles" (marijuana-infused food products) as becoming popular. Both respondent groups attributed the increased availability of high-grade marijuana to the expansion of "legal pot" in other states. Reportedly, products from legal dispensaries are being diverted to Ohio. One law enforcement officer indicated the neighboring state of Michigan as an easy source for medical-grade marijuana. The BCI Richfield Crime Lab reported that the number of marijuana extract and concentrate cases it processes has increased during the past six months.

Participants reported that the availability of crystal methamphetamine has increased during the past six months. Participants and law enforcement noted a steady increase in "ice" (crystal methamphetamine) flowing into the region, moved by drug cartels in Mexico. One law enforcement officer estimated that 60-70% of the methamphetamine cases his agency processed during the past six months were crystal methamphetamine cases. A few participants predicted that the price of methamphetamine will decrease due to the increasing number of dealers selling the drug.

The Lake County and the BCI Richfield crime labs reported that the number of methamphetamine cases they process has increased during the past six months; the labs reported processing crystal, off-white powder, white

powder, brown powder and brown crystals in smoking devices.

Lastly, participants reported that fentanyl, heroin and prescription opioids are used as “cuts” (adulterates) for powdered and crack cocaine. Participants also noted “molly” (powdered MDMA) as a cut for crystal methamphetamine. One participant stated, *“They are cutting crystal with molly for a better high.”*

