

Marijuana and Inhalant Use in Louisiana

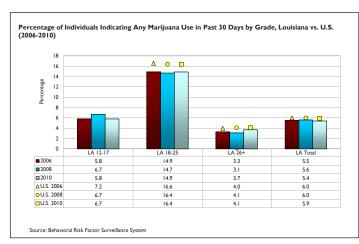
February 2012

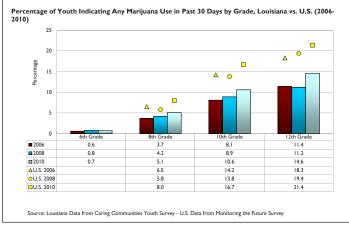
The surveillance of substance use trends is an important role addressed by the Louisiana State Epidemiology Workgroup. In this data brief, data highlighting the use of two substances considered to be "gateway drugs" are examined. First, data related to marijuana use is presented, followed by data related to inhalant use in the state.

Marijuana

Marijuana has traditionally been the illicit drug with the highest use rates both nationally, and in Louisiana. While alcohol and tobacco use are much more prevalent in the state, marijuana continues to be the substance with the third highest use rates among both youth and adults (e.g., among 12th graders, past 30 day use rates for alcohol, tobacco, and marijuana were 45%, 20% and 15% respectively). In comparing marijuana use rates in Louisiana to national rates, however, it is evident that Louisiana has lower rates of marijuana use both among youth and adults. Among adults, marijuana use rates in Louisiana have remained stable from 2006 to 2010, with use rates much higher among 18-25 year olds than those older than 25. Data collected through the 2011 CORE Alcohol and Drug Survey, administered in the

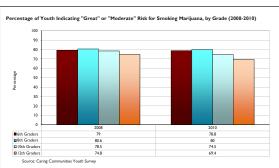
state's higher education institutions, found that the 30-day marijuana use rate for Louisiana college students was slightly less than a national comparison group (16.3% vs. 17.3%), but had increased in comparison to the 2009 CORE Survey administration (14.5% use rate in 2009). Among youth, the data suggested a similar theme. Overall, the data clearly show that Louisiana youth used marijuana at rates much lower than their national counterparts. While this is definitely a positive finding, the data also reveal that use rates in Louisiana may be showing signs of increasing. For grades 8, 10 and 12, marijuana use rates showed a marked increase from 2008 to 2010. Whether this increase is indicative of an upward trend or represents a momentary anomaly will only become clear as new data are collected and examined.

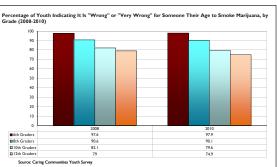




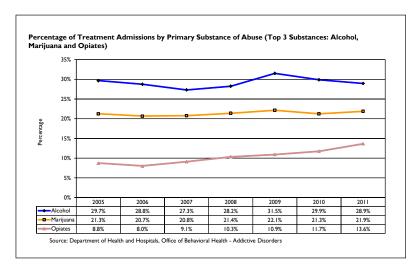
Why does Louisiana have lower rates of marijuana use than the nation, especially among youth? Undoubtedly, there are multiple reasons for the low rates of marijuana use in our state. One determinant is likely to be the attitudes and beliefs that youth hold about marijuana use. A look at data from the Caring Communities Youth Survey (CCYS) suggests that Louisiana youth generally hold negative beliefs and attitudes toward marijuana use. When asked how much they felt someone risked harming themselves if they smoke marijuana regularly, the vast majority of Louisiana students indicated a "moderate" or "great" level of risk. When asked how wrong they felt it was for someone their age to smoke marijuana, Louisiana youth overwhelmingly indicated that that it would be "wrong" or "very wrong." Hopefully, with continued prevention efforts, youth in our state will continue to hold these negative attitudes toward marijuana use in the future.

When asked how wrong they felt it was for someone their age to smoke marijuana, Louisiana youth overwhelmingly indicated that that it would be "wrong" or "very wrong."





Despite the low marijuana use rates observed in Louisiana, it is important that substance prevention efforts continue to address marijuana as well as more prevalent substance use issues such as adult alcohol misuse and underage drinking. Marijuana abuse and dependency represents a significant cost to the state in terms of treatment. An examination of treatment admissions data from 2005 through 2011 revealed that marijuana is the substance that accounts for the second highest percentage (following alcohol) of substance abuse treatment admissions (funded through the Office of Behavioral Health). Historically, treatment admissions for marijuana (as the primary substance) have accounted for about 21% of all admissions, and that percentage has remained steady throughout the time-frame mentioned.

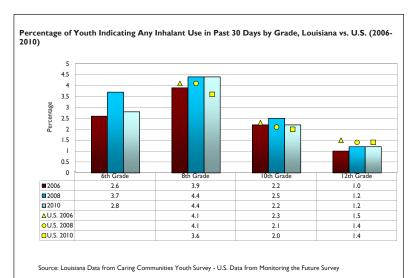


${f I}$ nhalants

Inhalants refer to a variety of substances whose chemical vapors can be inhaled to produce psychoactive effects. The term "inhalants" is used to describe these substances because the manner of consumption involves inhaling the chemicals or gases to produce a high. A variety of products found in the household and the workplace can be abused as inhalants. Examples of products commonly used as inhalants includes spray paints, gasoline, nitrous oxide from whip cream cans, glue, shoe polish and lighter fluid. Unfortunately, as a result, inhalants are often readily available to youth.

In looking at inhalant use rates, the percentage of Louisiana youth indicating ever having used inhalants in their lifetime has been consistently lower than national rates across grades 8, 10 and 12 (for example, among 8th graders in 2010, lifetime use was 11.7% in Louisiana vs. 14.5% nationally; similar differences are seen for grades 10 and 12 and across all years between 2006 and 2008).

An examination of inhalant use in the past 30 days, however, yields a different picture. The percentage of Louisiana youth who reported using inhalants in the past 30 days is generally similar or even slightly higher than the national rates across grades 8, 10 and 12. Both nationally and within the state, youth inhalant use typically peaks between grades 7 and 8, with rates observed for 8th graders near or above four percent every year between 2006 and 2010. Presumably, as youth get older they become less likely to use inhalants and more likely to consume alcohol, tobacco and marijuana, thus the drop in inhalant use after 8th grade.



There are a variety of negative consequences associated with the abuse of inhalants, including both acute and chronic health consequences. The types of health consequences individuals may experience, and the severity of those consequences varies greatly depending on how much and what was inhaled by the user. Among the list of possible negative consequences include: loss of consciousness, confusion, nausea, vomiting, damage to the brain or central nervous system, or even sudden death as a result of heart failure, suffocation or arrested breathing.

This data brief is brought to you by the Office of Behavioral Health – Addictive Disorders, the Governor's Office of Safe and Drug Free Communities, and the Louisiana State Epidemiology Workgroup. To find data related to substance use and abuse, please visit the State Epidemiological Workgroup Online Data system at www.gov.state.la.us/lasocialindicators or go to http://new.dhh.louisiana.gov/index.cfm/newsroom/detail/1394 to download Caring Communities Youth Survey reports.

