

Perceptions of prospective pharmaceutical stimulant substitution treatments among people who use illicit stimulants in Vancouver, Canada

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Stimulant use in the context of an overdose crisis

Both **illicit stimulant use** and **stimulant-involved deaths** are increasing globally (UNODC, 2019)

- Surveillance data suggests this is driven by **involvement of synthetic opioids** (Kariisa et al., 2019)

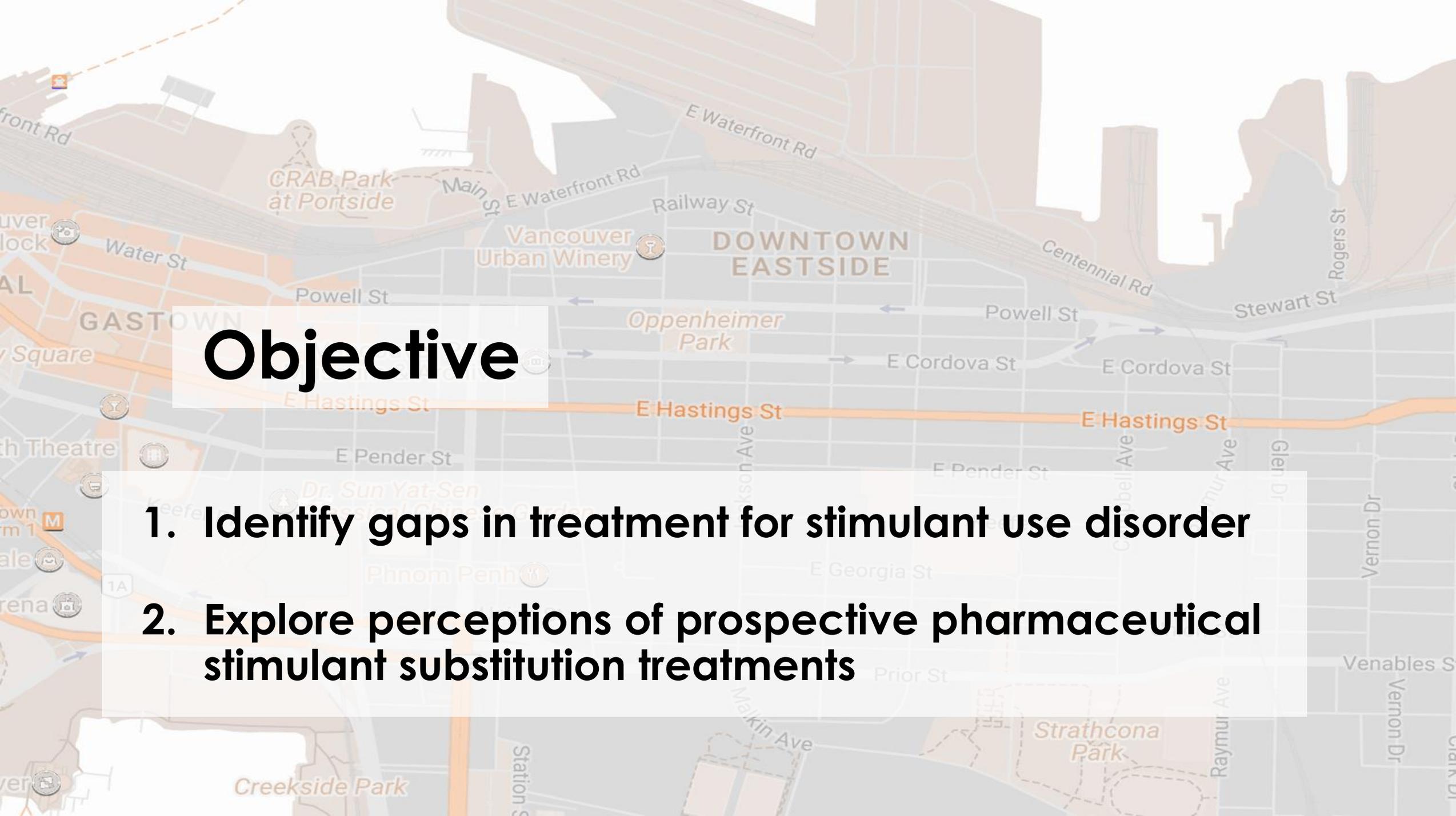
Drug testing data shows that **street-level stimulant supplies** are increasingly being adulterated with **fentanyl, benzodiazepines, and other harmful substances** (Tupper et al., 2018; BC Coroners Service, 2022)

Emerging stimulant substitution treatments

Stimulant substitution treatment (SST) involves substituting illicit stimulants with **prescription psychostimulants**, providing a consistent supply of known quality/quantity

- E.g., **methylphenidate** for methamphetamine, **high dose extended-release amphetamines** for cocaine (Castells et al., 2016)

Results of trials for SST are mixed, and do not adequately account for the **lived realities** of criminalized stimulant use (UNODC, 2019)



Objective

1. Identify gaps in treatment for stimulant use disorder
2. Explore perceptions of prospective pharmaceutical stimulant substitution treatments

Methods

In depth **qualitative interviews** with 86 people who use stimulants

- Recruited from an ongoing prospective cohort and via community outreach activities

Part of a larger study on criminalized stimulant use (Ivsins et al, 2022; Mansoor et al., 2022)

Questions in interviews **emphasized user agency**, such that participants' **individual goals** for prospective STT ranged from **abstinence** to **getting high**



DOWNTOWN EASTSIDE

Findings

1

Unmet treatment needs

Participants **challenged perceptions** of stimulant users as treatment resistant

- Current treatment options **don't account for instrumental uses** of stimulants (e.g., energy, pain management)
- **Unrealistic** to centre **abstinence** as treatment goal

While there are a range of medical treatments for opioid use, the **lack of similar treatments** for stimulant use was viewed as exemplifying **stigma against stimulant users**

"There's a pill for everything else"

2

Perceived benefits of SST

Participants described the **direct and indirect health, social, and economic benefits** they anticipated if they were to be able to access SST

- Meet the needs that illicit stimulant use addresses **outside of a criminalized/stigmatized context**
- Mitigate some degree of **economic insecurity**
- Reduce engagement with **toxic drug supply**

I'd much rather do it legally than illegally, and the stuff we're getting now, who knows what it is. It's not what it used to be

3

Perceived drawbacks of SST

Informed by knowledge of existing opioid substitution/agonist therapies, leading to **concerns around loss of agency** and **highly regulated** operational contexts

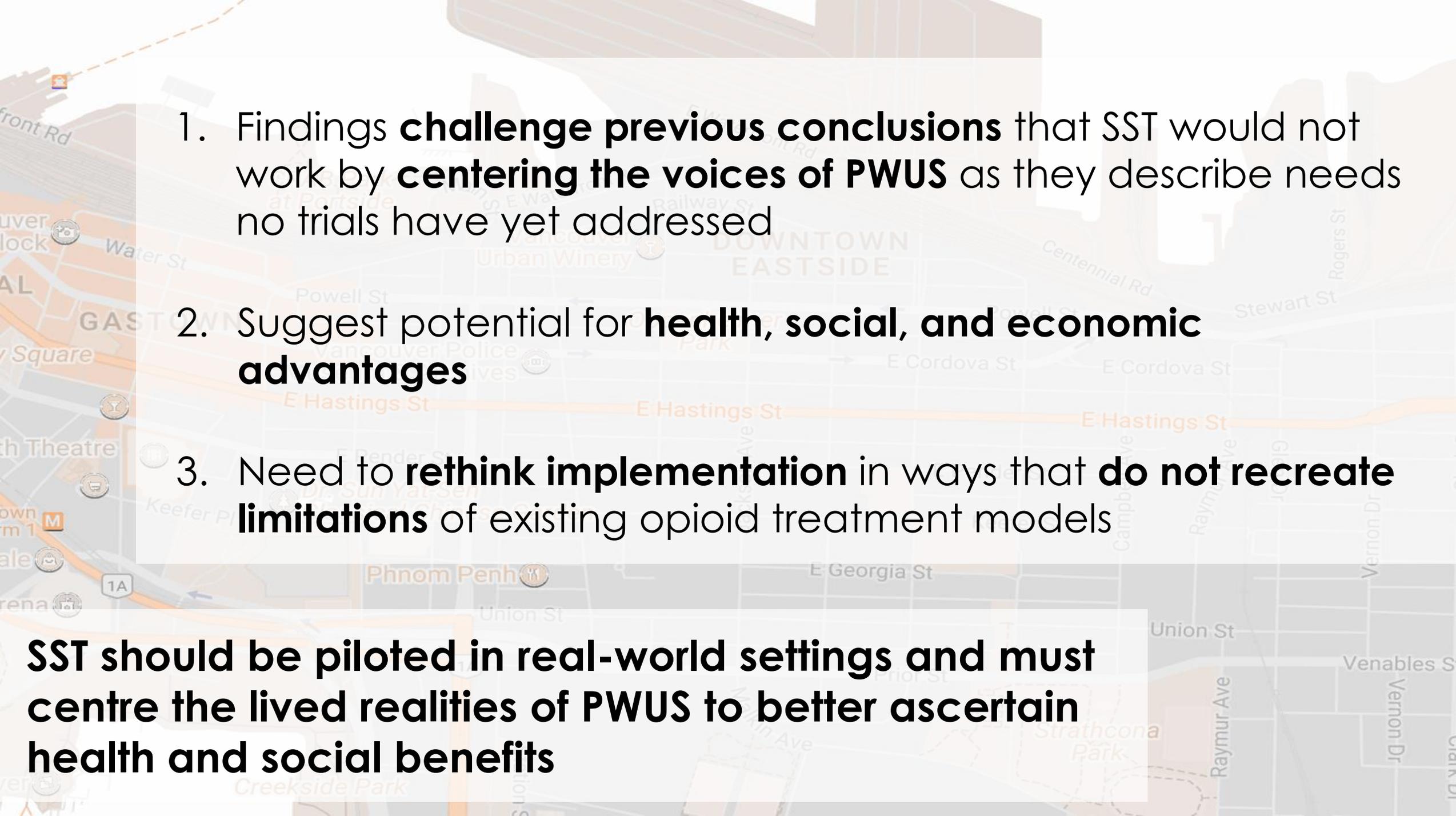
Comparability between felt effects of prescription stimulants and their illicit counterparts

How is treatment effectiveness determined?

*I know it hasn't shown success in the medication cause **they don't give you dosage that's enough**. I did that Adderall program for a bit. I was only on it for six months but it was nice cause it kept me functioned and I was able to do things everyday and it helped to calm me down. It helped me get off meth for a bit. **But it's so restrictive because you have to go into the pharmacy every day**, literally put your fingers in your mouth, make sure you swallowed your pill, and then you have to do a pee test every week and if you come back with meth in your system, they cut you off. **That's not the way to do the program.***

A map of downtown Vancouver, British Columbia, showing the areas of Gastown and Downtown Eastside. The map features a grid of streets including Water St, Powell St, E Hastings St, E Cordova St, E Pender St, Keefe St, E Georgia St, Union St, Prior St, and Malkin Ave. Key landmarks such as CRAB Park at Portside, Vancouver Urban Winery, Oppenheimer Park, Vancouver Police Museum & Archives, Phnom Penh, and Strathcona Park are labeled. Major roads like 1A and Centennial Rd are also shown. A white rectangular box with the word "Conclusions" in large black font is overlaid on the map, centered over the area between E Hastings St and E Pender St.

Conclusions

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- A background map of Vancouver's Downtown Eastside neighborhood. The map shows a grid of streets including Water St, Powell St, E Hastings St, E Cordova St, E Georgia St, Union St, and Raymur Ave. Landmarks like Strathcona Park and Phnom Penh are also visible. The map is overlaid with a semi-transparent white box containing text.
1. Findings **challenge previous conclusions** that SST would not work by **centering the voices of PWUS** as they describe needs no trials have yet addressed
 2. Suggest potential for **health, social, and economic advantages**
 3. Need to **rethink implementation** in ways that **do not recreate limitations** of existing opioid treatment models

SST should be piloted in real-world settings and must centre the lived realities of PWUS to better ascertain health and social benefits

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Questions?