

#50 - The Drug Pandemic in La Crosse County

5/21/2021 Revision

-Stigma, Overdose Deaths, and Addiction-

Drug addiction is an illness. The user, the addict, has developed or inherited a propensity to a mental illness that can lead to a tragic death. I have been touched by the tragedy of addiction. A friend's daughter nearly died, and another cares for a 44-year-old addict in her basement (wasted by meth).

In 2020, 40 people died from a drug overdose in La Crosse County. You may not have been aware of this as many of these deaths did not make the news. Often there is a stigma attached to these tragic drug deaths. Stigma prevents the user from coming out and saying I am an addict - help me. The stigma then again prevents the family from talking about addiction.

The stigma of addiction destroys families and protects criminals and drug dealers because there is a public ignorance of the death they sell. The public does not know of 40 deaths last year. They do not know their kids are in danger. Why?

In 2019 there were 22 overdose deaths and 40 in 2020 (62 total according to La Crosse County Medical Examiner's report). But for 2019-2020, the public saw only 2 overdose deaths mentioned in the obituaries. Stigma covers up the killing. There is no true public knowledge to transfer to rage and action. The cycle must be broken and the ill cared for. If not, dealers will sell more, and citizens and kids become users, that become addicts because of the ignorance of an illness that has been stigmatized.

We can help shine light on addiction and "vaccinate" against this living death. There are "vaccinations" against the death of addiction. Gain knowledge of the temptation of addiction (Coulee Council, Alliance to HEAL, La Crosse County Support Services). There is no shame in having an illness that needs treatment.

For assistance, individuals can contact the following:

- Call 211 for help and referrals.
- Coulee Council on Addictions at 784-4177 or www.couleecouncil.org
- La Crosse County Support and Recovery Services – 784-4357 (HELP)
- Alliance to HEAL - www.alliancetoheal.com

I would like to thank the following individuals for their assistance in compiling this information:

Al Bliss - La Crosse County Health Department
Tim Candahl, La Crosse County Chief Medical Examiner
Pat Corran – La Crosse Fire Department
Dr. Christopher Eberlein – Gundersen Health System
N. Lake – Wisconsin Department of Health Services
Sgt. Casey Rossman – La Crosse Police Department Drug Unit
Christin Skolnik – La Crosse County Human Services Department
Dr. Tom Thompson
Teri Serres Walensky - La Crosse County Sheriff's Department

PRESENTED BY: DAVE TRAPP

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#50 - The Drug Pandemic in La Crosse County

Introduction

- 1) *Drug Deaths in La Crosse County are up 344% since 2014.*
- 2) *In 2016, there were 2,944 hospitalizations for drug abuse and 24 drug overdose deaths.*
- 3) *There were 40 accidental drug related deaths in 2020. (11 Marijuana related)*
- 4) *Kids grade 8 -12 in 2019: 35% used drugs (per Statistica) and 18% under age 12. In 2019, of the 73 million kids aged 18 and under, 25.5 million are users (35%). (per CDC)*

The odds are that in La Crosse County, one out of every ten employees at your local businesses are working while using drugs. Out of one hundred employees, ten could be sedated or out of control while on the job, or while driving to and from work. Using drugs threatens us all. The massive **economic cost** has been calculated to be \$578 Billion annually in the U.S. The society (human value) loss in the U.S. is estimated at \$874 Billion Dollars. The total “**crime cost**” of drug trafficking to supply the user is unknown. However, we know that in 1992 and in 2016, 26% of all US violent crime was drug related. There were 1,248,185 violent crimes (murder and manslaughter) in 2016. But we can estimate the number of user’s (addicts) that contribute to these tragic costs.

According to the CDC, in 2014, 9.4% (29.9 Million) people of the U.S. population of 318.6 Million people used all types of illicit drugs, and by 2016, usage increased to 15% of the 323.1 Million population (48.5 Million users). **The estimated number of drug users in La Crosse County, using the 2016 national users’ percentage, could be 17,709 users (15% of 118,066 La Crosse County population) resulting in 24 deaths. Since 2014, deaths increased by 166% by 2016, and up 344% by 2020. This is a tragic loss of life.**

The Dismal Math

As users increase, will deaths increase? Or how many users must be addicted before one more addict dies?

Using 2016 assumptions, 17,709 users ÷ 24 deaths = 737 users. With 40 deaths in 2020 (40 x 737) are there 29,480 users? These numbers are based on 2016 usage assumption of 15%. What is the usage today?

I. The Drug Overdose Death Pandemic in the US and La Crosse County (Deaths and Users)

A. Number of US Citizen Deaths in the War on Drugs are 841,000 since 1998 (CDC reporting varies from 1970's to 1990's). War on Drugs declared June 18, 1971.

B. Citizen Deaths in US Wars

Civil War	620,000 est. (or as high as 750,000)
WWI	116,516
WWII	405,316
Korean War	36,516
Vietnam	<u>58,209</u>
Total	1,236,557

C. Citizen Deaths in the Drug War

1999-2018	841,000
2019	70,630
2020	86,000 (not complete)
2021	<u>104,920</u> (estimate from WI DHS)
Total	1,102,550

D. The number of La Crosse County users estimated by the CDC, based on 2016 population, is 17,679 of our fellow citizens. They work with us and drive to work with us all. In 2016, there were 48.5 million users in the U.S.

II. Drug Deaths and Addiction are Greater in La Crosse County than the Rest of the U.S.

A. Problem of Drug Use from 2014 to 2016 (U.S. and La Crosse County)

	U.S.	La Crosse County
2014		
Population	316.6 million	117,440
% of Users	9.4%	9.4%
# of Users	29.7 million	11,039
2016		
Population	323.1 million	117,860
% of Users	15%	15%
# of Users	48.5 million	17,679

Increase of 63%

Increase of 60%

B. Drug Overdose Deaths 2015-2016 (per CDC)

	U.S.	La Crosse County
2014		
Deaths per 100,000 of Population	16	8.5
2016		
Deaths per 100,000 of Population	19.8	19.5
	Increase of 23%	<u>Increase of 129%</u>

C. Drug Overdose Deaths 2019-2020 – We have a bigger drug problem.

	U.S.	La Crosse County
2019		
# of Overdose Deaths	70,630	22
Deaths per 100,000 of Population	21.5	18.6
2020		
# of Overdose Deaths	81,000	40
Deaths per 100,000 of Population	24.5	33.9
	Increase of 14%	<u>Increase of 82%</u>

III. The Pandemic Related Drug Deaths (2019-2021)

In 2018, the CDC reported there were 67,365 opium/opioid deaths in the US. In La Crosse County, drugs, (mostly opioids) caused 20 drug related deaths in 2018. Opioids include heroin synthetics, such as fentanyl, oxycodone, oxycontin and Vicodin. If not specified in screening, they are just called opioids.

A. User Deaths Due to All Drugs in Wisconsin and La Crosse County*

(per Wisconsin Department of Health Services) ODD = Overdose Death

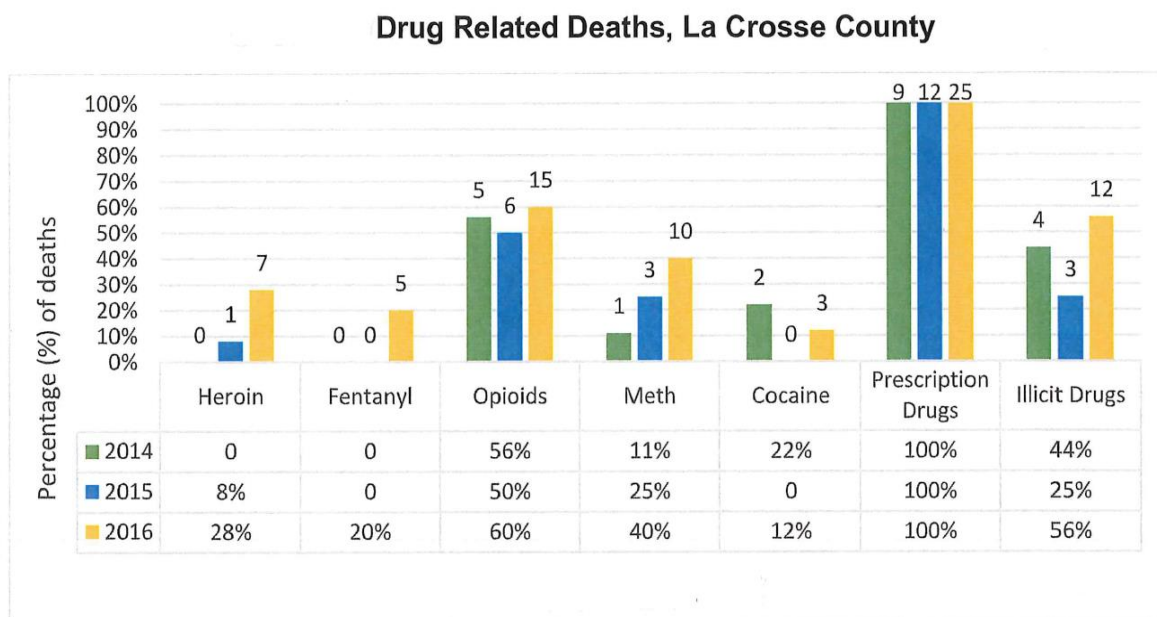
	2014	2015	2016	2017	2018	2019	2020	2021
WISCONSIN	662	616	827	919	837	911	1,186	n/a
Possible Narcan* Adjustment ODD	n/a	n/a	n/a	<u>+686</u>	n/a	n/a	<u>+984</u>	n/a
Total Adjusted ODD*				1,513			2,170	
LA CROSSE COUNTY (per WI DHS data)	9	12	24	22	20	22	40	8
LA CROSSE COUNTY (per La Crosse County data)	12	25	52	-	-	-	-	10 (2 months)
Possible Narcan* Adjusted ODD	n/a	n/a	n/a	n/a	n/a	n/a	+33	+8
Total Adjusted ODD							73	18
Annual Adjusted ODD							73	49-90+

* *Narcan Reversals per 2017 State of Massachusetts Adjustment +83% Possible Deaths*

* *For 2021, from 2 sources, the reversal adjustment could be 49, 60-186 or up to 411.*

Note: The deaths linked to drug crimes are not totaled. Deaths due to drug overdoses in 2021 could be up to 60, with 108 ODD reversed (or saved).

- B. **Drug Related Deaths in La Crosse County** – What drugs are present in the user’s system at time of death. (Graph and Text from ‘Burden of Illicit Drug Use in La Crosse County, April 2017) Note: The numbers indicated on top of the bars are the numbers of positive toxicity screenings for that drug that year. In 2016, there were 7 tests for heroin.



Prescription Drugs were found in all users at time of death with some other illegal drugs.
(For a ‘drug education’, see white paper #40 “Marijuana, CBD, Fentanyl and Mental Illness”)

“This figure shows the percentage of the drug related deaths testing positive for a certain drug during the toxicity screenings for each year. For example, “In 2015, 50% of overdose death patients contained opioids in their systems.” Most deaths were related to more than one substance. This figure also includes the exact number of positive toxicity screenings above each corresponding column.”

“The percentage of deaths related to heroin, fentanyl, opiates, methamphetamines, and illicit drugs in general were higher in 2016 than in the two previous years. All drug related death victims (100%) in all three years had some sort of prescription drug in their system at the time of autopsy.”

This presence of prescription drugs in our communities is not stopping, as 66% of adults take some prescription medication. 13% are on anti-depressants, 2.8% for treatment of bipolar disorder, and 5% for seasonally affective disorder.

- C. **To Clarify Above, in 2016, how many of the 24 overdose deaths had a certain drug in their system at death?**

- 100% (24) ...of overdose deaths had prescription drugs in their system.
- 60% (14) ...of overdose deaths had opioids in their system.
- 40% (10) ...of overdose deaths had methamphetamines in their system.
- 28% (7) ...of overdose deaths had heroin in their system.
- 20% (5) ...of overdose deaths had fentanyl in their system.
- 12% (3) ...of overdose deaths had cocaine in their system.
- 36% (13) ...of overdose deaths had other drugs in their system.

IV. Other Indicators of Increased Drug Usage

A. Number of Needle Pick Ups in La Crosse County*

(data from La Crosse Fire Department)

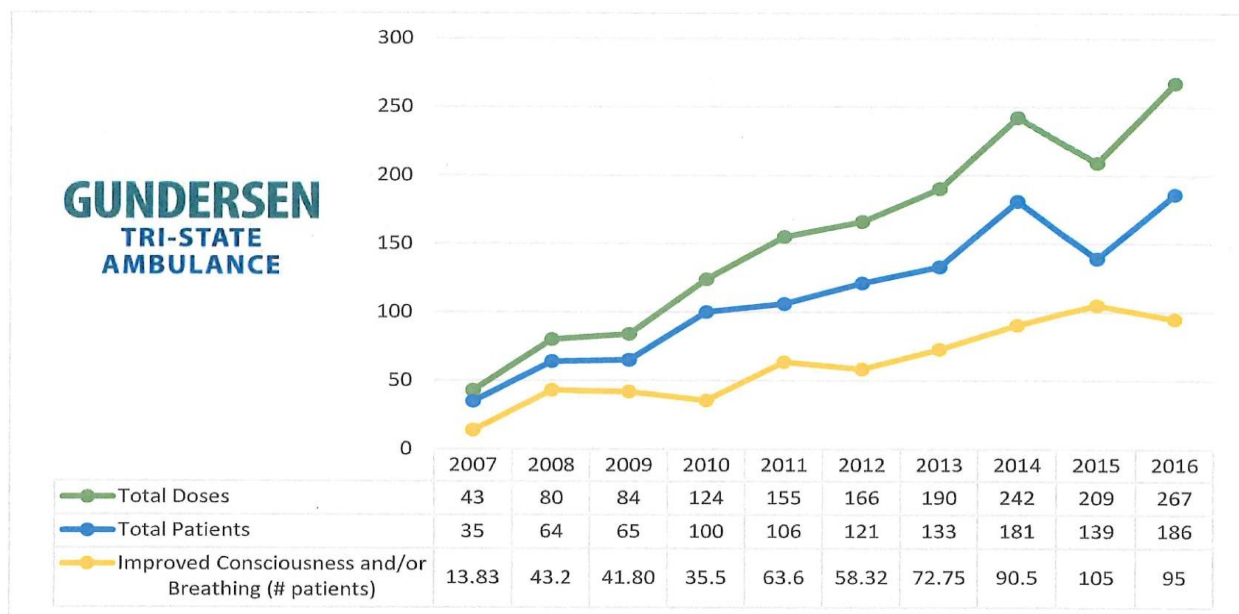
2017	2018	2019	2020	2021 (4 months)
257 Needle Pick Ups	226 Needle Pick Ups	326 Needle Pick Ups	383 Needle Pick Ups	66 Needle Pick Ups

Proper disposal of used needles indicates other increased other increased uses aside from illicit drugs.

The increased use of public needle drop-boxes indicate increased public response to education from the La Crosse County Fire Department and La Crosse County Health and Human Services. By using these drop boxes, used needles are out of harm's way and the fire department and police departments have fewer expensive needle pick up requests.

B. Increased Use of Narcan to Save Lives Indicates Usage Trend – Gundersen/Tri-State Ambulance Narcan Use 2007-2016 (from 'Burden of Illicit Drug Use in La Crosse County, April 2017) – Note: These could have been overdose deaths, but they were saved. These total numbers are from the Counties of Monroe, Jackson, Trempealeau, Vernon, and La Crosse.

La Crosse Area Narcan Use and Results, 2007-2016



"This figure shows the administration of Narcan from 2007 through 2016 in the La Crosse area. Total doses of Narcan given, the total number of patients that received the doses, and the number of patients that experienced improved consciousness and/or breathing are shown. As made visible by the data table, multiple patients received more than one dose of Narcan."

C. **Number of Narcan Trainings for Civilians in Wisconsin 2008-2016** – per ARCW

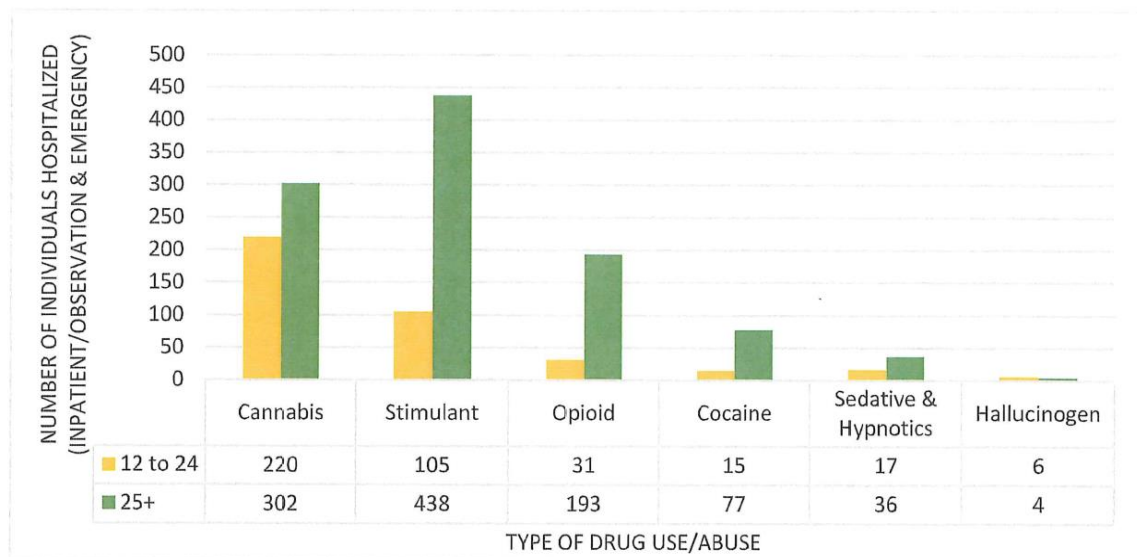
2008	2009	2010	2011	2012	2013	2014	2015	2016
4	4	20	30	44	51	56	48	183

- D. Due to 17,124 veteran overdose deaths in 2014, the VA began Narcan training and kit dispensing in 2017. Statistics show 227 kits handed out saved 1 life. How many kits will it take to save 17,000 lives in the public sector or in La Crosse County? Up to 3,859,000 kits?
- E. **Is Narcan use a Moral Hazard that covers up increased or continued usage (with an unknown level of rehab intervention) because there are no consequences of possible death?** A moral hazard (insurance and economic term) is when there is a lack of incentive to guard against risk. It is when one is protected from the consequences of one's actions.

Many roads to disaster are paved with good intentions.

V. La Crosse County Hospitalizations in 2016

Combined Hospitalizations Due to Drug Use/Abuse in La Crosse County, 2016 – Gundersen Health System (from 'Burden of Illicit Drug Use' April 2017)



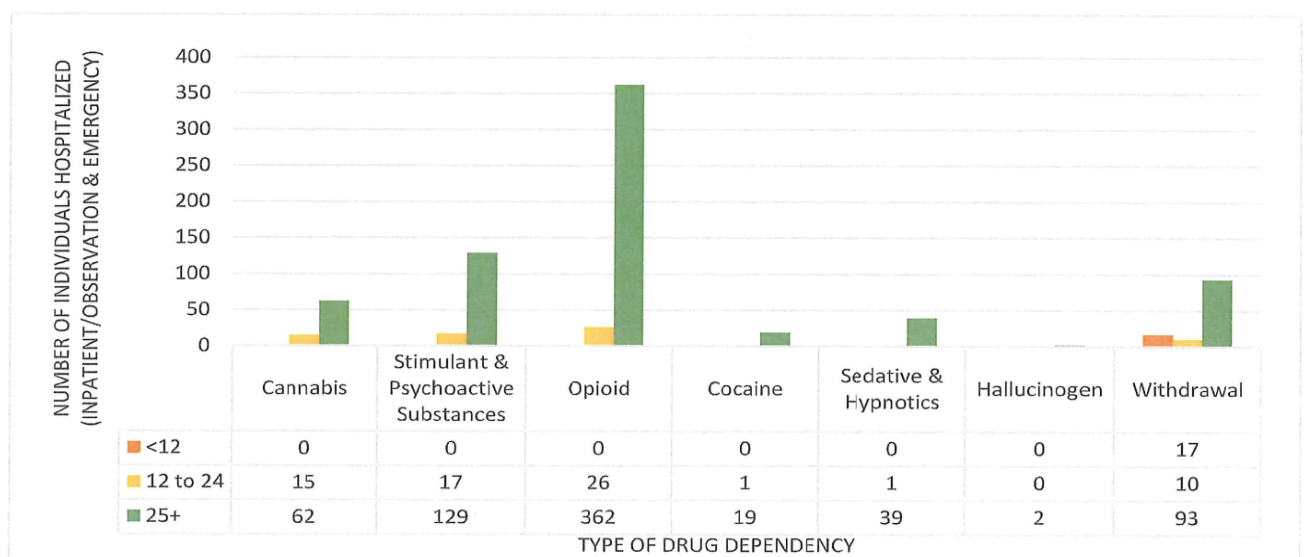
“This figure shows all 2016 Gundersen hospitalizations in La Crosse County related to drug use and/or abuse. Number of individuals hospitalized included inpatient/observation and emergency.” Note: You can overdose on cannabis.

“Gundersen Health System provided data of all 2016 drug related hospital admissions, including inpatient and emergency. There was a total of 2,944 individuals hospitalized and 3,985 diagnoses, signifying that numerous patients had more than one diagnosis or hospital admission.”

“The hospitalizations were categorized based on diagnosis, age group, and drug type. For the purpose of this report, diagnoses included drug use/abuse and drug dependency. Individuals were placed into age groups: less than 12 years, 12 to 24 years, and 25 years or older. The drug types included cannabis, stimulants and other psychoactive substances, opioids, cocaine, sedatives and hypnotics, and hallucinogens. The results of this categorization can be seen in the figure below.”

“Not included in this report are drug poisonings. This diagnosis was analyzed with more specific age groups and drug subgroups (heroin, amphetamines, methadone, benzodiazepines, etc.), location, and whether or not intentional self-harm was involved, or other significant variables.”

VI. Combined Hospitalizations Due to Drug Dependency in La Crosse County, 2016 Gundersen Health System (from ‘Burden of Illicit Drug Use’ April 2017)



“All 17 admissions related to withdrawing patients under 12 years of age were cases of neonatal withdrawal from maternal use of drugs of addiction. Neonatal Abstinence Syndrome (NAS) is a diagnosis that describes a newborn’s exposure to addictive opiate drugs while in the womb. Substances such as heroin, oxycodone, and methadone permeate the placenta causing drug dependency or addiction in the unborn baby. Because the baby is no longer exposed to the drug after birth, withdrawal symptoms occur as the drug is slowly cleared from the baby’s system. Categorized separately from cases of neonatal withdrawal symptoms, were an additional 2 cases in which a newborn was affected by maternal use of cocaine.”

VII. Calculating the Massive Human Costs in Productivity Losses and Suffering for La Crosse County are Not Attempted Here, but here is an example...

Many La Crosse County families are being destroyed, forcing La Crosse County Child Protective Services to seek more and more Foster Care homes. Please consider saving children. Join in the foster care program.

“The Human Services Department of La Crosse County handles many services and focus areas including Children and Youth. Child Protective Services cases relative to this report include those related to substance abuse. These types of cases fall under the category of ‘neglect’ and in 2016, 77 families were opened for ongoing services. Alcohol or drug issues were the primary reason for 46 out of these 77 cases. Alcohol or drug issues made up 68% of the Child Protective Services workload in 2016.”

See page 3 “Introduction” – Drug addiction is a trillion-dollar loss.

VIII. Can Rehab Slow Usage or Prevent Dependency? How Effective is Rehab? (from American Addiction Centers)

- 90% of users get no rehab.
 - 10% of users get rehab.
 - Of those that get rehab, only 3%-5% complete rehab.
 - Less than 1% of Heroin users survive.
- (Could not find other data of in and out success of rehab and/or recovery.

IX. Resources Available to La Crosse County Residents

- A) Call 911 in case of emergency.
- B) Call 211 – Great Rivers 211
- C) Have a great Employee Assistance Plan at work.
- D) Coulee Council on Addictions – 608-784-4177 – www.couleecouncil.org
- E) Alliance to HEAL – www.alliancetoheal.com
- F) How do you pay for drug counseling, rehab, or recovery? (I contacted three recovery/counseling services, disability insurers, one major health insurer, La Crosse County public sector and one provider to find out more regarding exact payment information. All indicated “exactness” is proprietary or had no reply.)
 - 1) Generally, 60-80% of costs outside of hospitalized care are covered by disability carriers (private pay). Treatments in hospitals, and treatments by a health care provider, are covered at 100% as “any other illness coverage” and then reimbursed from group medical, Medicaid or Medicare (under the Mental Health Parity and Addiction Act).
 - 2) Outside counseling, peer-to-peer, or recovery is generally paid by Medicaid (20% of the cost). Or see La Crosse County Public Services.
 - 3) The patient is responsible for remaining balance.
 - 4) Corporate group Mental, Nervous, Drug and Alcohol coverages (this information also applies to some individual disability policies) are summarized below for four disability plans. Most out of hospital payments are “private pay”.

- 5) Selection of a group disability carrier becomes a priority with PTSD, “long hauler” claims, and a public that has gone through tough times. This is private pay which covers 60-70% of recovery and counseling.
- What is available in private pay?
 - What coverage exists for the family after hospitalization? Employee benefits are changing.
 - Carriers are changing to meet this need for long term behavioral health needs. Specific behavioral health coverage coming.
- 6) Mental, Nervous, Drug and Alcohol (MNDA) Coverage Summary - Not a complete comparison. Just a brief overview.

	Company A	Company B	Company C	Company D
1) Per Occurrence – 24 months	Yes	Yes	Yes	Yes
2) 24 month/per Lifetime Limit	No	Yes	Yes	Yes
3) Unlimited Lifetime Occurrences	Yes	No	No	No
4) Maximum Monthly Limit in Contract	Yes	Yes	Yes	Yes
5) Elimination Period	Yes	Yes	Yes	Yes
6)ADA Accommodations	Yes	Yes	Yes	Yes
7) Elimination Period Paid After Served	Yes	No	No	No
8) Rehab Services	Yes	Yes	Yes	Yes
9) Your Occupation to age 65 Definition	No	Yes	Yes	No
10) Your Occupation – 2 Years	Yes	No	Yes	Yes
11) After 24 months – Regular Occupation	Yes	No	Yes	Yes
12) Pre-existing Condition Clause	3/12	3/12	3/12	3/12
13) Family Services	Yes	No	Yes	No
14) EAP	Yes	Yes	Yes	Yes
15) Disability Pay Transfers to LTC at age 65	No	Yes	No	No
16) Supplemental Health (Bundle of Voluntary Plans)	Yes	No	No	No
17) Dependent Care	No	Yes	Yes	No
18) Under the Influence Exclusion	Yes	Yes	Yes	No
19) Fiduciary Prudent Actions Exclusions	No	No	No	Yes
20) Specific Infectious Disease	No	No	No	Yes
21) Family and Corporate Counseling included in EAP	Yes	No	No	No
22) Self-Funded Design MNDA “Gap” Policy	Yes	No	Yes	Yes

X. Comments

- A. Where do you start to reduce drug addiction and overdose deaths? The entanglement of mental illness, drugs and incarceration has yet to be united. A place to start may be the engagement of some at-risk students (from all economic levels) that are from at-risk families. Some are plagued by cycles of addiction, illiteracy, and poverty. This has been studied. But what do we do? Keep families strong. No one should be alone. Please follow Alliance to HEAL activities. Contact Coulee Council on Addictions. Why?
- 1) 1 in 5 Americans have a mental condition (per 5/10/21 CNBC)
 - 2) Health insurers spending has increased from 13-20% for behavioral health to 84% during the pandemic. (AJM 8/30/20)
 - 3) 90% of all office visits in Colorado were stress related (9/2020 University of Colorado)
 - 4) The American Psychiatric Association (10/2020) has reordered causes of death.
#1 – Due to Stress (Mental Nervous/Drug Alcohol)
#2 – Heart Disease
#3 – Cancer
- B. Currently, the synthetic opioid fentanyl is a popular drug for users and the leading cause of their deaths. There have been 2-10 fentanyl deaths in La Crosse County in the first 2 months of 2021. What will the rest of 2021 bring? What actions could be taken? **What can you do?**
- C. It could help to have more personnel working at the two ends of the crisis continuum: 1) education and interdiction (more intervention before the sale to a user), and 2) early rehab. More family intervention and support (such YMCA, churches, Boys and Girls Club) and rehab support from employer and family coverage on private insurance. Then finally the community can take back the streets.
- See #44 Whitepaper – “Legalized Marijuana and Employment Issues” 9/5/2019
 - #40 Whitepaper “Marijuana, CBD, Fentanyl and Mental Health” 5/22/2019
 - #48 “Suicides and Loneliness” 10/12/2020.
- D. **Success in combating this Drug Pandemic could be measured** by the number “vaccinated” (number of those in La Crosse County’s education programs and the number in rehab). Setting rehab goals and tracking the number of rehabs could reduce drug deaths. Lastly, how do we reduce the number of users before there is a chance of an opioid death?

E. Drug Related Numbers for La Crosse County - "If you can't measure it, you can't manage it."

	2018	2019	2020	2021 (Jan-Feb)	2022	2023
1) # Educated						
2) # in DARE						
3) # in Peer Counseling						
4) # in Recovery						
5) # in Rehab						
6) # Users Treated in Hospitals						
7) # of Sellers Arrested with High-Risk Search Warrants-Using ERT	20	18	6	-		
8) # of Drug Arrests						
9) # of Needle Pickups	226	326	383	64		
10) # of Overdose Drug Deaths	20	22	40	(60?)		
11) # of Overdoses brought back by Narcan (Reversals.)				+49, +60, or +186, or +411?		

#7 Additional Information:

*In 2016 there were 95 Narcan reversals in La Crosse County.

2016: 13 Warrants
 2017: 10 Warrants
 2018: 20 Warrants
 2019: 18 Warrants
 2020: 6 Warrants

Sources: Centers for Disease Control and Prevention, www.cdc.gov; 'Burden of Illicit Drug Use La Crosse County', La Crosse County Health Department, April 2017; Wisconsin Department of Health Services, www.dhs.wisconsin.gov; (ARCW) AIDS Resource Center of Wisconsin, L. Wiebald; American Addiction Center; Captain Dittman, La Crosse Police Department; La Crosse Fire Department; Alliance to HEAL, 2021; Bureau of Justice Statistics; La Crosse County Medical Examiners Office; Harvard Health, 2020; US Dept of Veterans Affairs, 2017; La Crosse Public Library Reference Dept, 2021.

Note: See original sources. This is for informational purposes only.



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LCPD VICE UNIT

Presentation to La Crosse Rotary Club

May 27th, 2021

Contents:

- What does the Vice Unit do?
- Why are drugs a problem?
- What do drugs look like?
- Basic investigation techniques-

What does the LCPD Vice Unit do?

VICE CRIMES defined:

Activities that are made illegal because they offend the moral standards of the community banning them.

-yourdictionary.com



Drugs



Illegal Weapons



Fugitive Apprehension



Sex Crimes

Street Level Sex Crimes/Prostitution

- Is occurring everyday in La Crosse
- Goes hand in hand w/ drugs
- Hotels/Motels
- “Escort” websites



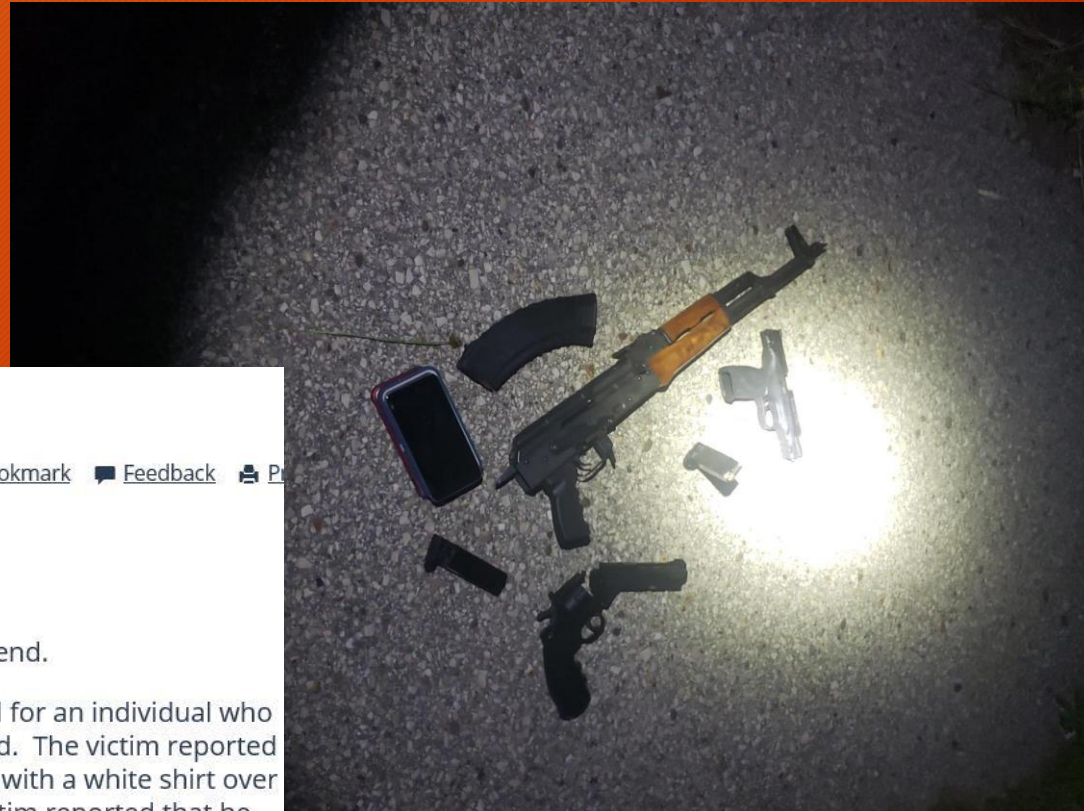
Fugitive Apprehension

- Surveillance
- Word of mouth
- Investigation into those closest with the party
- CrimeStoppers tips



Illegal Weapons

- Felon in Possession
- “Straw purchases”
- Shooting investigations



La Crosse PD News

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2 Shootings Under Investigation

Post Date: 07/19/2020 12:33 PM

La Crosse Police are investigating 2 shootings that occurred over this weekend.

The first incident started with La Crosse Police being sent to a local hospital for an individual who walked into the emergency room with a nonlife-threatening gunshot wound. The victim reported he was walking near 800 Main St. when he was confronted by a male black with a white shirt over his face. The suspect had a hand gun and demanded his property. The victim reported that he



DRUGS!!!



What kinds of drugs?

- Prescription drugs sold illegally on the street
- Methamphetamine
- Heroin/fentanyl
- Powder cocaine/crack cocaine
- MDMA/Ecstasy
- Marijuana
- Psilocybin mushrooms
- LSD

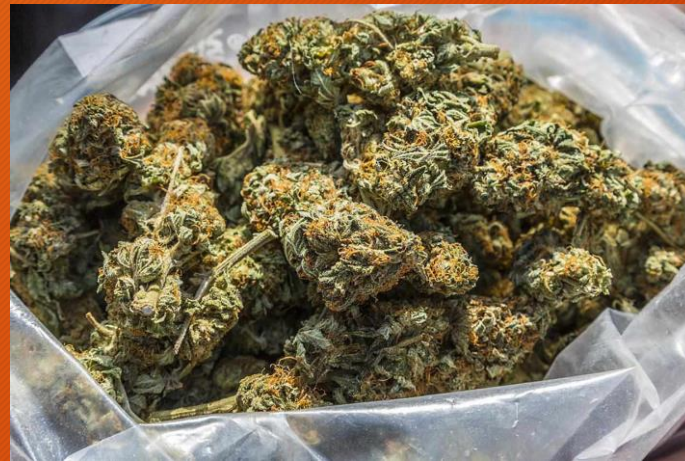
Why are drugs a problem?

- Highly addictive
- Associated with property crime/violent crime
- Costs to society
- Overdose death rates
- Neighborhood blight



What do Drugs look like?

- Marijuana:



What do Drugs look like?

- Methamphetamine:



What do Drugs look like?

Powder Cocaine:

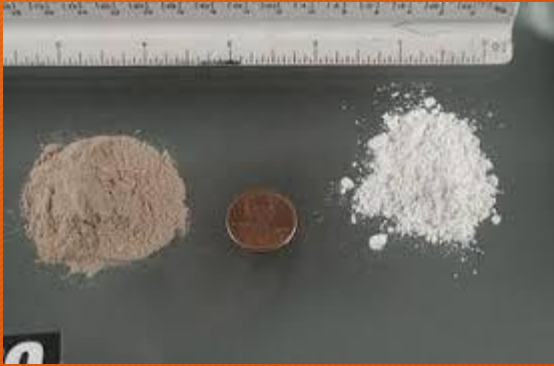


Crack Cocaine:



What do Drugs look like?

- Heroin:



What do Drugs look like?

- Fentanyl



Dangers of Fentanyl:



What is Naloxone (Narcan)?



Basic Investigation Techniques:

- Social Media
- Neighbor tips/CrimeStoppers
- Surveillance
- K9 Sniff
- Search Warrants/Act 79



Questions?

Distribution Notification: Marijuana #2 Update - Marijuana, Mental Illness and Violence

From: Dave Trapp <dtrapp9275@instantbusinessresources.com>

Sent: Wed, Feb 13, 2019 at 10:44 am

To: Dave Trapp

[recipients.txt](#) (9.9 KB)

Having trouble viewing this email? Please [view in browser](#)

Hi

These are some of the high points I've chosen from author and New York Times reporter Alex Berenson's new book **"Tell Your Children: The Truth about Marijuana, Mental Illness and Violence"**, 2019.

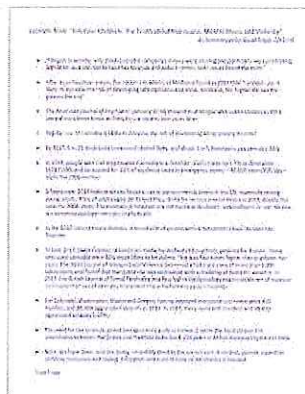
My opinion of Marijuana being a gateway drug is looking more real unfortunately. Please read the enclosed.

Thanks,

Dave Trapp

Second Opinion Insurance Services

Division of Stanley McDonald Agency



Excerpts from Tell Your Children

Download now



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<http://www.mcdonaldagency.com>

Excerpts from “Tell Your Children: The Truth about Marijuana, Mental Illness and Violence”

- As Summarized by David Trapp, 2/12/19

- “I began to wonder why stock cannabis company’s values were soaring and politicians were promoting legislation as a low risk to raise tax revenue and reduce crimes, but I never heard the truth.”
- After an exhaustive review, the nation’s Academy of Medicine found in 2017 that “cannabis use is likely to increase the risk of developing schizophrenia and other psychosis; the higher the use the greater the risk”.
- The American Journal of Psychiatry (January 2018) showed that people who used cannabis in 2001 were almost three times as likely to use opiates two years later.
- Regular use of cannabis is likely to increase the risk of developing social anxiety disorder.
- By 2017, 1 in 15 Americans consumed alcohol daily, and about 1 in 5 Americans use cannabis daily.
- In 2014, people who had diagnosable Cannabis Use Disorder (CUD) made up 1.5% of Americans (4,717,500) and accounted for 11% of psychosis cases in emergency rooms – 90,000 cases/250/day – triple the 2006 number.
- A September 2017 federal survey found a rise in serious mental illness in the US, especially among young adults. 7.5% of adults aged 18-25 met the criteria for serious mental illness in 2017; double the rates for 2008. Note: The mentally ill however are not necessarily violent, schizophrenic or not. No one is a complete package mentally or physically.
- In the 2010 Schizophrenic Bulletin, it found 27% of people with Schizophrenia had Cannabis Use Disorder.
- In June 2017, Swiss Frontier of Forensics medicine studied 265 psychotic patients for 3 years. Those who used cannabis were 50% more likely to be violent. This was four times higher than psychotic non-users. The 2012 Journal of Interpersonal Violence examined a federal survey of more than 9,000 adolescents and found that marijuana use was associated with a doubling of domestic violence. In 2017, the British Journal of Social Psychiatry and Psychiatric Epidemiology examined drivers of violence and found that use of cannabis translated into a fivefold increase in violence.
- For Colorado, Washington, Alaska and Oregon, having legalized marijuana use, there were 450 murders and 30,300 aggravated assaults in 2013. In 2017, there were 620 murders and 38,000 aggravated assaults (+27%).
- The need for tax revenue, greed and ignorance push us forward, while the hard data on the relationship between marijuana and madness dates back 150 years in British Asylums registers in India.
- Note: We have been, and are today, incredibly blind to the social costs of alcohol, opioids, cigarettes and now marijuana and vaping. Education and a social code of abstinence is needed.

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