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# DRUG USE TRENDS IN DENVER AND COLORADO

**NOVEMBER 1991** 



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#### DRUG USE TRENDS IN DENVER AND COLORADO NOVEMBER, 1991

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#### INTRODUCTION

#### 1. Area Description

The city and county of Denver, the capital of Colorado, is located somewhat northeast of the State's center. Covering only 111.32 square miles, Denver is bordered on the southeast by Arapahoe County, on the northeast by Adams County, and on the west by Jefferson County.

The potential for drug abuse in Denver and Colorado is exacerbated by the following factors:

- O A major international airport at nearly a mid-point in the continental United States
- O Remote rural areas ideal for the undetected manufacture, cultivation, and transport of illicit drugs of abuse
- O Younger citizenry drawn to the recreational lifestyle available in Colorado
- O Large tourism industry, which draws millions of people each year
- O Several major universities and small colleges

#### 2. Data Sources

Data for the present report were collected and analyzed during November, 1991. Although these indicators reflect trends throughout Colorado, they are dominated by the Denver metropolitan area.

O Death statistics are available from the Colorado
Department of Health, Health Statistics Section. These
data represent drug related deaths which may involve
the drug as an underlying or additional cause.

- O Drug Abuse Warning Network (DAWN) presents data on drug abuse related emergency room mentions. The data are weighted estimates representing all drug abuse ER mentions in the Denver Metropolitan area.
- The Drug/Alcohol Coordinated Data System (DACODS)
  reports are completed on clients at admission and at
  discharge from all alcohol and drug treatment agencies
  receiving public monies in Colorado and from several
  non-funded agencies who are under special reporting
  requirements. Data elements include demographics and
  severity indicators (e.g., arrests, prior treatment
  episodes, drug use patterns, employment).
- O Drug Use Forecasting (DUF) data reports on arrestee urinalysis results based on studies conducted under the auspices of the National Institute of Justice.
- O **Hepatitis-B data** are available from the Disease Control and Epidemiology Division of the Colorado Department of Health.
- Community-specific data (e.g., price and purity, local trends, anecdotal information) are available from drug treatment program personnel, law or drug enforcement, and consumer personnel. This information is obtained fromm the Colorado State Epidemiology Work Group meetings.
- O Acquired immunodeficiency syndrome (AIDS) data are available from the Sexually Transmitted Disease Control Section, Colorado Department of Health.

#### **DRUG ABUSE TRENDS**

#### Cocaine

While cocaine trends are still down overall from 1988 peaks, some indicators for 1991 have shown slight to moderate increases over 1990. Exhibit 1 shows rates of cocaine and opiate deaths per 1 million population in Colorado from 1980 to 1991 (death rates for 1991 were projected from actual deaths for the first six months of the year). As indicated, cocaine deaths rose from 2.8 mentions per million population in 1985 to 15 in 1988, more than a 400 percent increase. From 1988, however, cocaine death mentions per 1 million population dropped to 8.2 in 1989 and to only 4.2 in 1990. This pattern was reversed in the first six months of 1991, during which time 15 cocaine deaths were reported more than for the first six months of 1990 (5 deaths) or 1989 (13 deaths). Annualizing the 1991 cocaine death data yields a projection of

9 deaths per 1 million population, still a much lower figure than 1988 but a substantial increase over the prior year and a slight increase over 1989.

In a change from previous years, the National Institute on Drug Abuse (NIDA) now develops "weighted estimates" representing all drug abuse emergency room (ER) episodes in the U.S. and in 21 metropolitan areas, including Denver. While this should greatly improve reporting on drug related emergency room episodes and mentions now and in the future, it does not allow for trend analysis prior to 1989. Exhibit 2 illustrates 1989 and 1990 weighted estimates for all cocaine, marijuana, heroin and amphetamine related emergency room mentions" for the Denver metropolitan area. From 1989 to 1990 the number of cocaine ER mentions dropped from 870 to 569, or by 35 percent.

Quarterly weighted estimates of ER mentions for cocaine, marijuana, heroin and methamphetamine are shown in Exhibit 3 from the first quarter of 1989 through the first quarter of 1991. As indicated, quarterly mentions for cocaine rose sharply from 195 in the first quarter of 1989 to 291 in the third quarter of 1989, a 49 percent increase. From there, however, they dropped by 41 percent (to 172 mentions) in the first quarter of 1990, increased slightly to 193, or by 12.2 percent, in the second quarter of 1990 then dropped steadily to only 110 mentions by the first quarter of 1991.

Exhibits 4 and 5 show Drug Use Forecasting (DUF) data for a sample of male and female arrestees in Denver for six reporting periods: February, 1990; May, 1990; August, 1990; November, 1990; February, 1991 and May, 1991. Exhibit 4 illustrates drugs found in urinalyses of samples of male arrestees for the aforementioned reporting periods. The total number (N) sampled in each reporting period is indicated at the bottom of the graph above the x-axis. As shown, the percentage of male arrestee testing positive for cocaine was 30 percent in the first study period (2/90). From there it dropped to 18 percent in both the 5/90 and 8/90 study periods only to climb to a high of 31 percent by 2/91. Subsequently, it decreased to 24 percent by May of 1991.

Interestingly, samples of female arrestees (Exhibit 5) tested positive for cocaine at the same or higher levels than their male counterparts for each of the six reporting periods. Again the N for each reporting period is shown above the x-axis. As indicated, 46 percent of females tested positive for cocaine in the 2/90 study period. From this point, the "positive for cocaine" percentages showed an up and down pattern through the 5/91 reporting period, at which time 36 percent of female arrestees tested positive for cocaine. This was down from the 41 percent observed in the 2/91 study period, but equivalent to the corresponding study period from the prior year (5/90).

As shown in Exhibit 6, cocaine treatment admissions increased to constitute the largest group in treatment during 1987 and 1988, making up almost 40 percent of all admissions to funded treatment programs in Colorado in 1988. Since 1988, however, this proportion has declined to 33.5 percent in 1989 and 29.5 percent in 1990. For the first six months of 1991, a slight increase in the proportion of cocaine admissions was observed (31.5 percent). This proportion, however, is still well below the 1988 peak.

Despite the slight increase in the proportion of cocaine admissions in the most recent reporting period, the proportion of new cocaine users\* (Exhibit 7) continues to decline. For the first six months of 1991, only 24.1 percent reported being a "new user", down from 26.5 percent in 1990 and substantially down from the 1987 peak of 31.9 percent.

Exhibit 8 displays information on demographics and substance use indicators according to primary drug type for clients admitted to treatment during the first six months of 1991. As shown, the average age of the cocaine using population is 30.5 years with a median of 30 years, representing a steady increase over the past The proportion of females in treatment has remained seven years. stable, constituting about a third of the cocaine treatment population. The proportion of minorities in treatment continues to increase. The current levels of 30.9 percent Black clients and 16.5 percent Hispanic clients represent small increases over 1990 (27.5 percent and 16.3 percent, respectively) and substantial increases from the 8 percent and 4.7 percent representations (respectively) observed in 1984. The mean and median years of education remain very close to 12 years. The average monthly income for the first six months of 1991 was \$556, with a median of \$400. This figure has been steadily dropping since 1986, when the average monthly income was reported at \$1,233.

A majority of cocaine clients admitted to treatment in 1991 reported prior alcohol or drug treatment experiences (55.6 percent). Slightly more than half (50.7 percent) had also been arrested for a non-DUI offense in the two years prior to admission. In addition, a small percentage (11.4 percent) had been arrested for DUI during the two years before admission.

<sup>\*</sup> Those who were admitted to treatment within three years of their initial use of cocaine.

Binge users and those who used cocaine more than three times a day represented around one quarter of admissions in the first six months of 1991. This is approximately the same proportion reported prior to 1989, but down from the 37.5 percent and 36 percent observed in 1989 and 1990 respectively. The average years of use and abuse however, increased in 1991 to 8.5 and 6.1 years, respectively. A slightly smaller proportion reported a secondary substance of abuse in 1991 (76.1 percent) in comparison to 1990 (77.6 percent). The most commonly reported secondary substances were alcohol (37.7 percent) and marijuana (28.2 percent).

Exhibit 9 displays the routes of administration reported by primary cocaine users admitted to treatment. The proportion of cocaine smokers has increased from 9.3 percent of the treatment population in 1985 to 45.6 percent in 1991. Concomitant decreases were observed in the proportions of those reporting inhalation and intravenous use.

The Denver Police Department (DPD) reports that more powder cocaine is available than ever. Cocaine prices in the city, according to the DPD, are down slightly, with a gram costing between \$50 and \$100, a 1/4 ounce going for \$300 and a kilo bringing from \$20,000 to \$25,000. The Drug Enforcement Agency (DEA) also notes readily available powder cocaine with slightly decreased prices of \$75 -\$100 per gram, \$800 to \$1,500 per ounce, \$10,000-\$15,000 per pound and \$16,000 - \$25,000 per kilo. DPD reports cocaine supplies at 60 to 85 per cent purity, while DEA findings show a wider range of cocaine purity from 20 to 90 percent.

The DEA reports that cocaine traffickers in Colorado are primarily middle class Caucasians, African Americans and Hispanics. Trafficking in the Denver/ Colorado Springs area is controlled by Colombians, Panamanians and Mexican Nationals. Also, according to the DEA, a majority of the cocaine originates from Florida, California and South American countries, with lesser amounts being smuggled across the Mexico/New Mexico Border. Packaging consists primarily of clear plastic zip lock bags, the size varying with the amount of cocaine. Also, kilogram seizures of compressed cocaine wrapped in duct tape seem to have originated in the Los Angeles area.

Other data from the DEA notes that cocaine continues to be available in ounce to kilogram quantities in Grand Junction, Aspen, Vail and Steamboat Springs. While constant in Grand Junction, trafficking picks up dramatically during the ski season in the ski resort areas (Vail, Aspen and Steamboat Springs). A kilogram of cocaine sells for approximately \$36,000 in Aspen.

The Greeley Police Department reports that supply and availability of powder cocaine in that area are as great as ever. Cocaine prices are consistent in Greeley at \$100 a gram and cocaine seized has been of very high purity.

Crack cocaine continues to be a major problem for law enforcement in the Denver metro area. The DPD reports that the crack market has moved from crack houses to street corners and bars. It also seems to be bought by sellers already "rocked-up". Additionally, the DPD reports that they are not seeing organized gangs controlling the crack trade as in the past. Rather, the trade has moved to a "bunch of independent operators". In general, the DPD says the problem has been dispersed, not reduced, and the nuisance factor has gone up considerably.

As to price and purity of crack cocaine, the DPD reports that a "rock" sells for \$20 and a gram brings \$150. Prices for larger amounts are: \$200 per 1/8 ounce, \$350 per 1/4 ounce and \$30,000 per kilo. Purity ranges from 70 to 85%.

DEA reports a slightly different version of crack cocaine prices at \$74 to \$100 per gram and \$1,000 to \$2,000 an ounce.

#### 2. Heroin/Other Opiates

Similar to the situation for cocaine, heroin/opiate related indicators show a mixed picture for 1991.

Breaking out opiate-related deaths by type of narcotic (such as heroin) is not possible given our current data. Therefore, aggregate opiate death mentions are displayed in Exhibit 1. Opiate death mentions increased from 1.9 per 1 million population in 1983 to 11.4 in 1986. Following 1986, however, death mentions declined to 5.5 per 1 million population by 1990, with only a slight increase from 1987 to 1988 interrupting the downward trend. For 1991, however, extrapolating from data for the first six months of the year, opiate related deaths increased to 9 deaths per 1 million population.

Heroin related emergency room mentions are shown in Exhibits 2 and 3. For total ER mentions between 1989 and 1990 (Exhibit 2), those for heroin declined from 190 to 134, or by 29.5 percent. As to quarterly heroin mentions (Exhibit 3), an increase of 56 percent (41 to 64) was observed between the first and third quarters of 1989. However, from that point heroin ER mentions began an overall decline to only 31 mentions by the first quarter of 1991. This was despite "spikes" in the first and third quarters of 1990.

Exhibits 4 and 5 show DUF data for opiates for the six reporting periods previously defined. Positive urinalyses for opiates were observed among only 3% of the sample of male arrestees in the 1/90 reporting period, which was the highest such percentage reported except for a like statistics in the 11/90 study period (Exhibit 3). Curiously, samples of female arrestees showed a higher percentage of positive urinalyses for opiates than their male counterparts, with a high of 9 percent positive recorded in 8/90 and a low of 1 percent in the 2/91 reporting period.

Exhibit 10 shows Hepatitis B cases in Colorado from 1980 through 1991. Those cases for 1991 were projected from data through November 15th. As indicated, Hepatitis B cases in the state rose sharply from 1982 (198) to 1984 (278), leveled through 1987 (263), then dropped sharply through 1990 (194). Projections for 1991 indicate an estimated 155 cases for the entire year. This represents a 20 percent drop from the prior year.

Treatment admissions of heroin and other opiate abusers constituted 24.4 percent of the treatment population in 1986 (Exhibit 6). This proportion then steadily declined through 1989, to 12.3 percent. In 1990, however, a sharp increase to 21.7 percent occurred. Data from the first six months of 1991 indicate a slight decline, to 18.2 percent. On the other hand, the proportions of new users entering treatment (Exhibit 7) seems to have been undergoing an overall decline since 1986, from 14.6 percent of the heroin-using treatment population to 10.2 percent This is despite slight increases in the proportion of new users from 1987 (10.8 percent) to 1988 (11.3 percent) and 1990 (9.7 percent) to the first six months of 1991 (10.2 percent). The proportion of new users for opiates other than heroin has followed a similar pattern to that of heroin, except that during 1991, the "other opiate" new user proportion dropped to 22.2 percent from 24.7 percent in 1990.

The two private methadone clinics in Colorado, both of which are located in Denver, began reporting on the DACODS in January, 1989. The data from these clinics were included in the analysis of the demographics and drug use patterns of heroin admissions, so that the information presented in Exhibit 8 would provide a more accurate picture of heroin users in Colorado. These data were omitted from the data presented in Exhibits 6 and 7.

The average age of the heroin using population seeking treatment was 36.5 years for the first six months of 1991, indicating a level trend from 1990 after years of increases. The median age for 1991 remained at the 1990 level of 36 years. Females comprise 37.3 percent of the population, up slightly from 1990 (36.8 percent). The proportion of white clients in treatment in 1991 (46.2 percent) is higher than in 1990 (41.6 percent) or 1989 (43 percent) but lower than in 1988 or earlier years. For the first six months of 1991, Black and Hispanic clients constituted respectively, 10 percent and 41.7 percent, of treatment admissions. Comparable figures for 1990 were 15.3 percent of admissions for Blacks and 41.8 percent for Hispanics.

Approximately 7 in 10 clients had prior alcohol or drug treatment experiences and more than half had been arrested for offenses other than a DUI in the two years prior to admission. Also, nearly 1 in 5 (18.6 percent) had been arrested for DUI.

Of those heroin users entering treatment in 1991, 84.9 percent used the drug on at least a daily basis. Years of use and years of abuse have continued to increase, currently to averages of 16 and 13.2, respectively. The median years of use and years of abuse were 17 and 12, respectively. Nearly two thirds (66 percent) of heroin admissions reported the use of a secondary substance, most often cocaine (26.2 percent) or alcohol (15.5 percent).

According to the DEA, only Mexican heroin is available in Colorado in both "mexican brown" and "black tar" varieties. "Brown heroin" is readily available in the Denver metro area at the street level, but not in large quantities. A one-half gram balloon retails for \$65 to \$100 and a one gram balloon goes for \$100 to \$120. Ounce prices range from \$3,000 to \$3,500. For "black tar" heroin, the DEA reports easy availability and prices of \$300 to \$500 per gram and \$3,700 to \$10,000 per ounce. Purity is placed at 25 to 75 percent.

The DPD reports stable heroin availability, but for only the black tar variety. In the past year, they have seen no "brown" heroin, or, for that matter, China White, which has never been very available in the Denver area anyway. According to the DPD, brown heroin costs \$65 a gram and \$1,500 per 1/4 ounce. Purity ranges from 2 to 5 percent. Tar heroin, on the other hand, ranges in price from \$300 per gram to \$2,000 per 1/4 ounce, up to \$150,000 per kilo. Purity goes from 14 to 70 percent.

The Denver area heroin supply comes mostly from Mexican traffickers who smuggle it across the border. Some African-American traffickers have been active in the Denver metro area, but to a much lesser extent than the Mexican nationals. There have also been reports of high level Iranian and Lebanese traffickers with family ties in the metro area. These traffickers are involved in distribution of S.W. Asian heroin into the U.S.

Outside the Denver metro area, the Greeley Police report a resurgence of heroin use and sales. Heroin is expensive in that area and is often packaged in small plastic grocery bags. Each "bag" sells for \$20 and weighs about a tenth of one gram. Also, according to the DEA, there is limited availability of "tar" heroin in the Colorado Springs and Pueblo areas. It sells for \$275 to \$300 per gram, with some distribution occurring in \$60 "papers". The exact amount in a paper is unknown. Finally, the DEA reports that Mexican brown heroin is available in limited quantities on the Western Slope of Colorado.

As to other opiate problems, the DPD reports the availability of fentanyl being sold as tar heroin. The fentanyl, which is typically a white powder, is being cut with chocolate.

#### 3. Marijuana

Current marijuana indicators point mostly to stable or downward trends.

As shown in Exhibits 2 and 3, ER mentions for marijuana declined overall from 273 to 174 or by 36.3 percent, from 1989 to 1990 (Exhibit 2). In terms of quarterly mentions (Exhibit 3), those for marijuana peaked at 89 in the third quarter of 1989 up from 65 and 64 in the first and second quarters, respectively, of 1989. From the peak, marijuana mentions dropped almost continuously to only 32 mentions in the fourth quarter of 1990. This was followed by a small rebound to 42 mentions in the first quarter of 1991.

Looking next at DUF data, 37 percent of male arrestees tested positive for marijuana in the 2/90 reporting period (Exhibit 4). This was approximately the same percentage observed in the most recent reporting periods of 2/91 (35 percent) and 5/91 (36 percent), after substantial downturns in the 8/90 (17 percent) and 11/90 (18 percent) reporting periods. On the other hand, female arrestees tested positive for marijuana at much lower levels than their male counterparts (Exhibit 5).

The proportion of admissions to treatment for marijuana use had increased to 40.6 percent in 1989, but dropped to 35.9 percent in 1990 (Exhibit 6). Data from the first six months indicate that this proportion has remained stable in 1991. The proportion of new users in treatment was 26.5 percent in 1989, but in 1990 this figure dropped to 20.3 percent. Data from the first six months of 1991 indicate that this proportion has declined even further (16.5 percent).

The population seeking treatment for marijuana use tends to be in their 20's, with the current average age at 25.7 percent years and the median at 24 years. Females in this group comprise the smallest proportion seen in any of the primary drug groups, at 21.4 percent. The majority of the marijuana treatment population are white (63.1 percent), while over a fourth are hispanic (27 percent). Average and median years of education in 1991 were 11. Average monthly income was \$559, while the median was \$400 (Exhibit 8).

Just under half of 1991 mariguana admissions have had prior substance abuse treatment (45.7 percent). Most have been arrested in the two years prior to treatment, with 12.7 percent having been arrested for DUI, and 56.5 percent having been arrested for another offense.

Over half of the marijuana treatment population admitted in 1990 were daily users (52.1 percent). Average years of use and abuse were reported at 12.2 and 8.6, respectively. These figures

represent an increase from those observed in prior years. The vast majority (81.2 percent) of primary marijuana users reported the use of a secondary drug. The most common secondary drug was alcohol (60.8 percent), followed by cocaine (11 percent).

The DEA reports that marijuana is still readily available in Colorado. A pound of marijuana retails for \$900 to \$1,450, with a pound of sinsemilla selling for \$1,500 to \$2,000. The THC content for sinsemilla averages 15 percent. The DPD, however, reports decreased marijuana availability in the metro area with a 1/4 ounce selling for \$50-68 and a kilo going for \$2,000.

In Greeley, according to the GPD, marijuana continues to be easily obtainable with a wide variety of street prices, generally in the \$35 to \$50 per 1/4 ounce range. The GPD states that most of the marijuana in that area originates in Mexico and is believed to be continually resupplied by large numbers of Mexican nationals who work in the area as a result of demand for immigrant labor. This demand has created a continuous flow of vehicles between Mexico and Greeley.

As reported by the DEA, no particular group dominates the marijuana market in Colorado. Mexican and Mexican-American groups are known to be active in smuggling marijuana across the U.S./Mexico border. However, "locally grown marijuana is cultivated by individuals from all walks of life with no particular group outstanding".

#### 4. Stimulants

Similar to marijuana trends, amphetamine and methamphetamine indicators remain stable or point slightly downward.

As shown in Exhibit 2, total methamphetamine ER mentions dropped 35 percent from 1989 (117) to 1990 (76). The quarterly mentions for methamphetamine, shown in Exhibit 3, represent a fairly steady drop, despite some peaks and valleys in the nine quarter reporting period. In fact, the 9 methamphetamine mentions in the first quarter of 1991 are well below the 20 mentions in the fourth quarter of 1990 and down 78 percent from the 41 mentions in the first quarter of 1989.

Treatment admissions for primary amphetamine users have remained relatively stable between 1984 and 1991, fluctuating between 6.3 percent and 7.8 percent of the treatment population (Exhibit 6). Although the proportion of admissions in the first half of 1991 (7.8 percent) is the highest seen in the seven and one half year reporting period illustrated, it is only slightly higher than 1990 (7.1 percent), 1989 (7.3 percent), 1987 and 1984 (both 7.6 percent) proportions.

The average age of amphetamine abusers in treatment for the first half of 1991 was 30.5 years with a median of 30. This is slightly higher than the 1990 figures of 29.2 years (average) and 29 years (median). For 1991, nearly two-thirds (64.6 percent) of amphetamine admissions were male, higher than in 1990 (60.2 percent); and 84.5 percent were white, compared with 90.9 percent in 1990. The average years of education for this population in 1991 was 11.4 years with a median of 12 years, approximately the same as in 1990. However, the average monthly income for amphetamine admissions was down for 1991 (\$459) as compared to 1990 (\$519).

As in 1990 (56.8 percent), a majority of 1991 amphetamine admissions had been involved in substance abuse treatment before (61.1 percent) also similar to 1990 (61.9 percent), more than half in 1991 (58.5 percent) had been arrested on charges other than DUI in the two years prior to admission. Conversely, slightly more amphetamine clients in 1991 (16.3 percent) had been arrested for a DUI in the two years prior to admission than their 1990 counterparts (13.2 percent).

Sixty-three percent of 1991 admissions used amphetamines at least once a day, compared to sixty-seven percent of 1990 admissions. Moreover, the 1991 clients reported 12.1 average years of amphetamine use and 8.9 average years of abuse, slightly more than 1990 amphetamine clients (10.3 average years of use and 8.1 average years of abuse).

As in 1990 (83.8), secondary drug use was common among 1991 amphetamine treatment clients (84.9 percent). For 1991, most often this secondary drug was marijuana (28.2 percent), followed closely by alcohol (26.1 percent) and cocaine (22.4 percent). This same secondary use pattern was also true for 1990 amphetamine clients with slightly different use percentages.

Amphetamine related deaths are a relatively rare occurrence in Colorado. Only one such death was reported in the first six months of 91, with none reported in 1990 or 1989 and only two reported in 1988.

The DEA states that methamphetamine has widespread availability in Colorado. Prices range from \$80 to \$125 per gram and \$1,200 to \$41,800 per ounce. Purity is in the 60 to 95 percent range. The DPD reports slightly lower gram price ranges than the DEA at \$50 to \$75. Higher quantity methamphetamine prices, according to the DPD, are \$150-200 per 1/8 ounce, \$300-\$350 per 1/4 ounce, and \$20,000 - \$27,000 per kilo. The DPD has had only 1 sighting of "Ice".

The DEA reports that "Biker" gangs continue to be heavily involved in the manufacture and distribution of methamphetamine. There are, however, some independent manufacturers as well.

The Greeley Police have been involved recently in several large methamphetamine busts. This has cut back on "meth" in that area, but only temporarily as distribution lines are quickly being reestablished.

#### 5. Hallucinogens

Only one hallucinogen related death was reported between 1980 and 1986. However, two to three such deaths were reported every year between 1987 and 1990. Fortunately, for the first half of 1991 no hallucinogen deaths were observed.

Primary hallucinogen users have made up 2.6 percent or less of the treatment population every year since 1984 (Exhibit 6). For the first half of 1991, hallucinogen clients accounted for only 1.8 of the total treatment population.

Both the DEA and DPD report resurgence of LSD in the Denver metro area and in other parts of Colorado. According to DEA dosage units from 60 to 150 micrograms are sold wholesale for \$.75 to \$1.50 and retail for \$3.00 to \$5.00. The DPD reports similar price structuring and add that 100 lot LSD packaging, called "jars", are available at \$1.00 to \$2.00 per hit and 1,000 hit packages are available at \$.75 to \$1.00 per hit.

The DEA reports LSD laboratory activity in the Boulder and Steamboat Springs areas. The Greeley Police also report readily available LSD. Packaging is most often 1/4 inch paper stamps with prices ranging from \$1 to \$5 per hit. Recently the Greeley Narcotics Unit in cooperation with DEA seized an LSD lab. According to the GPD, this seizure "included four gallons of liquid LSD capable of producing an enormous number of individual hits".

#### 6. Other Drugs

The proportion of primary inhalant abusers in treatment had declined from 3.4 percent in 1984 to 1.4 percent in 1990. This proportion increased slightly to 2.3 in the first six months of 1991, the highest proportion observed since 1985.

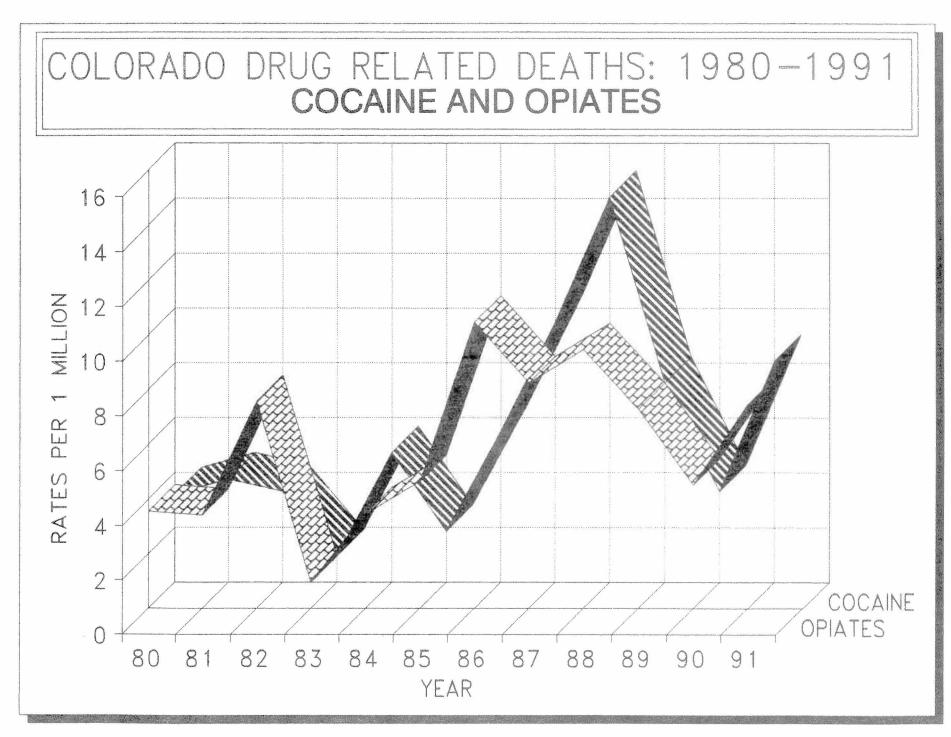
PCP, which had virtually disappeared as a primary drug among treatment admissions in 1990, made a very slight reappearance in the first six months of 1991 at .1 percent of total treatment admissions. Similarly, there were only 5 mentions of PCP among total drug ER mentions for 1989 and .7 for 1990. There were no PCP mentions during the first quarter of 1991.

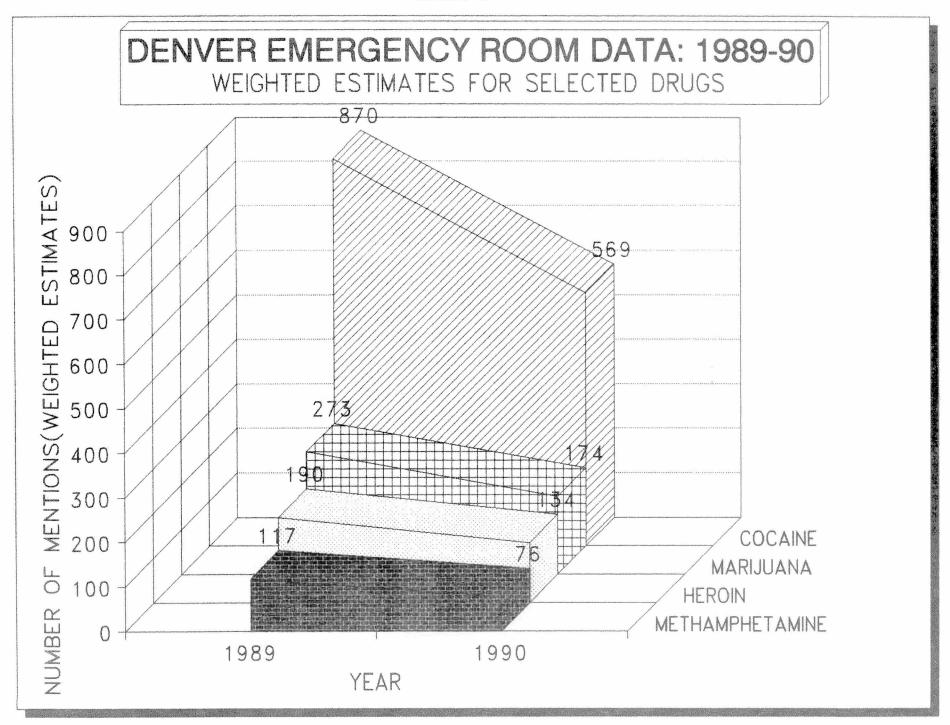
#### ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)

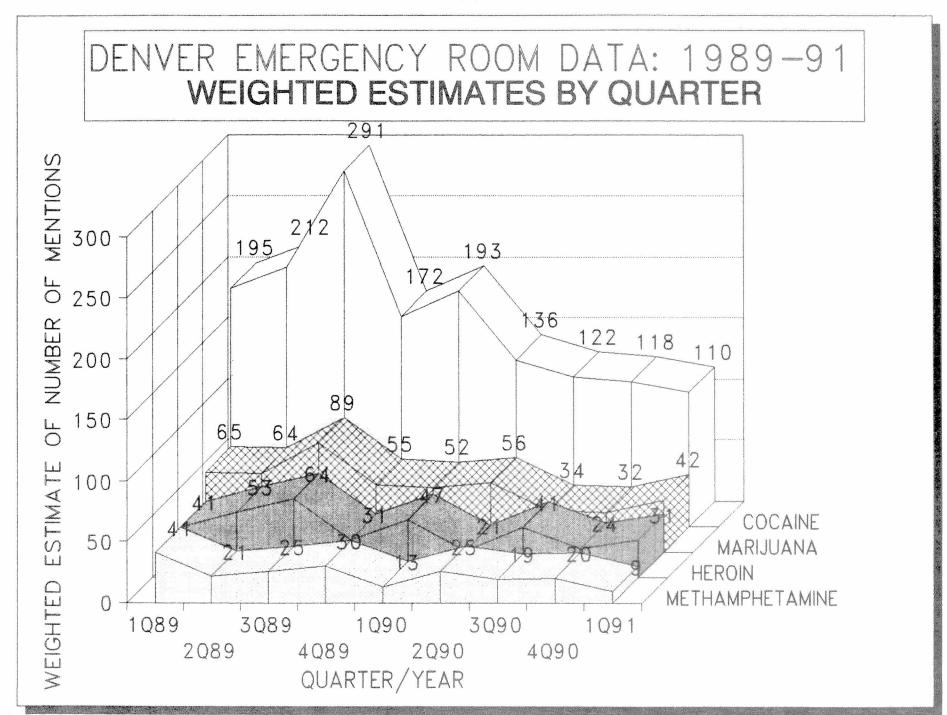
Of the 1,973 AIDS cases reported in Colorado through October 31, 1991, 5.8 percent were classified as intravenous drug users (IVDUs) and 9.9 percent were homosexual or bisexual males as well as IVDUs (Exhibit 11). Nearly 86 percent of individuals affected with AIDS live in the Denver metro area.

### **EXHIBITS**

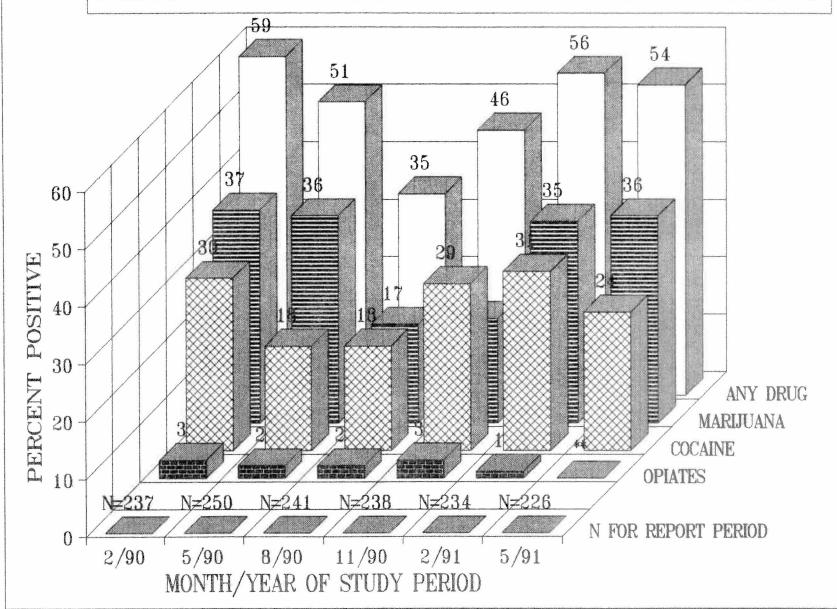
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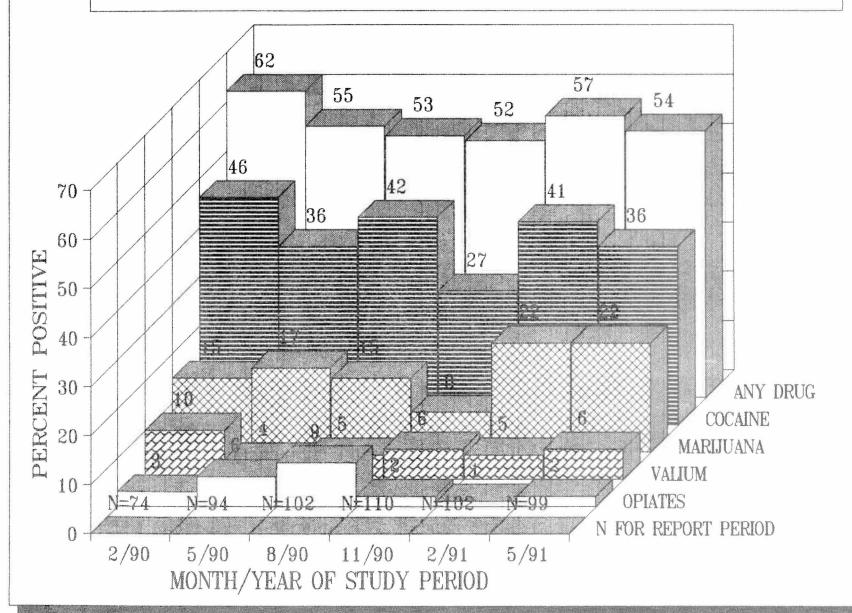








## DENVER DUF DATA: FEMALE ARRESTEES 90-91 PERCENTAGE POSITIVE URINALYSIS RESULTS



SOURCE: DUF

#### EXHIBIT 6

## PRIMARY DRUG OF ABUSE AT TREATMENT ADMISSION (PERCENT OF ADMISSIONS)

SUBSTANCE	1984	1985	1986	1987	1988	1989	1990	1991*
HEROIN	13.0	11.6	19.3	14.4	10.0	9.9	18.8	14.6
OTHER OPIATES	7.4	6.9	5.1	4.8	3.3	2.4	2.9	3.6
NON-RX METHADONE	.3	.3	0	.2	.2	.2	1	.1
AMPHETAMINES	7.6	6.9	6.3	7.6	6.7	7.3	7.1	7.8
COCAINE	27.5	25.5	29.2	33.3	39.5	33.5	29.5	31.5
MAR I JUANA	33.0	37.8	32.0	32.2	33.3	40.6	35.9	35.8
BARBITURATES	.8	1.0	.3	.7	.4	.3	.4	.3
SEDATIVES	.6	.3	.4	.3	.3	.3	.1	.2
TRANQUILIZERS	2.0	2.2	1.9	1.4	1.4	1.2	1.1	.7
HALLUCINOGENS	2.6	2.5	1.8	2.4	2.1	1.9	1.5	1.8
INHALANTS	3.4	3.4	2.1	1.4	1.3	1.3	1.4	2.3
PCP	.2	.3	0	.1	.2	.2	0	.1
отс	.4	.4	.5	.3	.3	.3	. 1	.1
OTHER	1.2	.9	1.1	.9	1.0	.6	1.1	1.1
TOTAL N	2,655	2,647	2,836	3,095	3,968	4,748	6,207	3,154

<sup>\*</sup> BASED ON FIRST 6 MONTHS OF 1991

SOURCE: DRUG ALCOHOL COORDINATED DATA SYSTEM

EXHIBIT 7

USERS ENTERING TREATMENT WITHIN THE FIRST THREE YEARS OF USE

				THE RESIDENCE OF THE PARTY OF T	PROPERTY AND THE PROPER		
SUBSTANCE	1985	1986	1987	1988	1989	1990	1991*
HEROIN N NEW % NEW (OF TOTAL HEROIN ADM.)	39 12.6	80 14.6	54 12.1	43 10.8	53 11.3	113 9.7	47 10.2
OTHER OPIATES N NEW % NEW (OF TOTAL OPIATE ADM.)	36 18.9	36 24.7	43 27.7	32 23.5	33 26.6	46 24.7	26 22.2
COCAINE N NEW % NEW (OF TOTAL COCAINE ADM.)	178 26.4	233	297	501 31.9	467 29.4	484 26.5	240
MARIJUANA N NEW % NEW (OF TOTAL MARIJUANA ADM.)	260 26.0	252 27.8	217 21.7	311 23.5	511 26.5	451 20.3	186 16.5
ALL DRUGS N NEW % NEW (OF TOTAL DRUG ADM.)	667 25.2	734 25.9	762 24.6	1,052 26.5	1,266 26.7	1,313 21.2	616 19.5

<sup>\*</sup> BASED ON DATA FROM FIRST 6 MONTHS OF 1991

SOURCE: COLORADO DEPARTMENT OF HEALTH

ALCOHOL AND DRUG ABUSE DIVISION

DRUG/ALCOHOL COORDINATED DATA SYSTEM

#### EXHIBIT 8

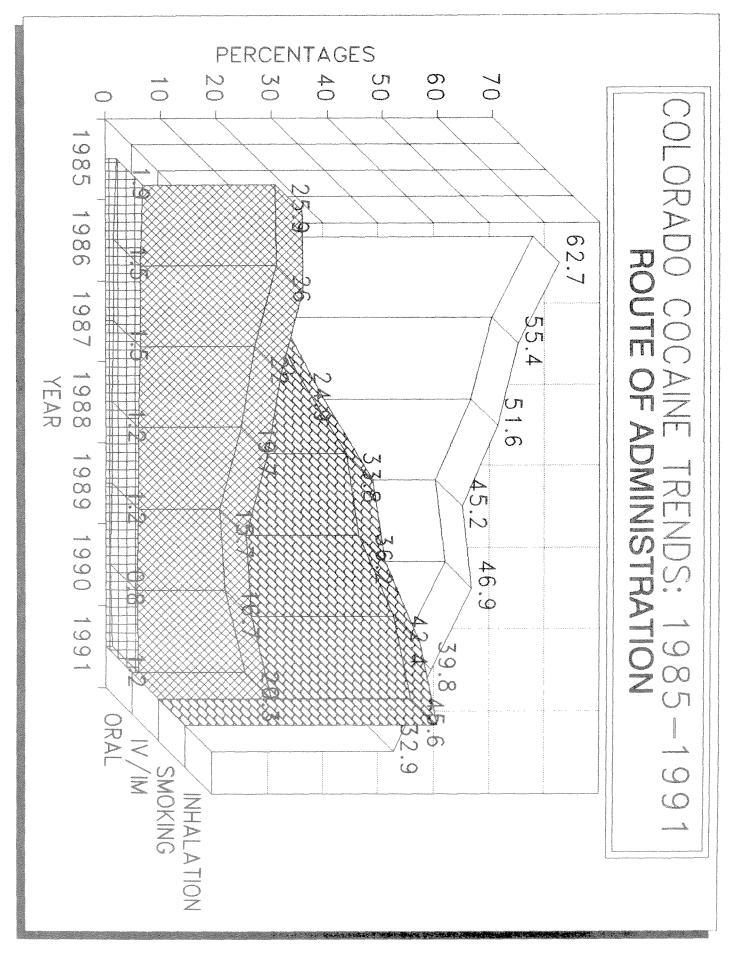
#### JANUARY-JUNE 1991 TREATMENT ADMISSIONS DEMOGRAPHICS/USE INFORMATION BY PRIMARY DRUG

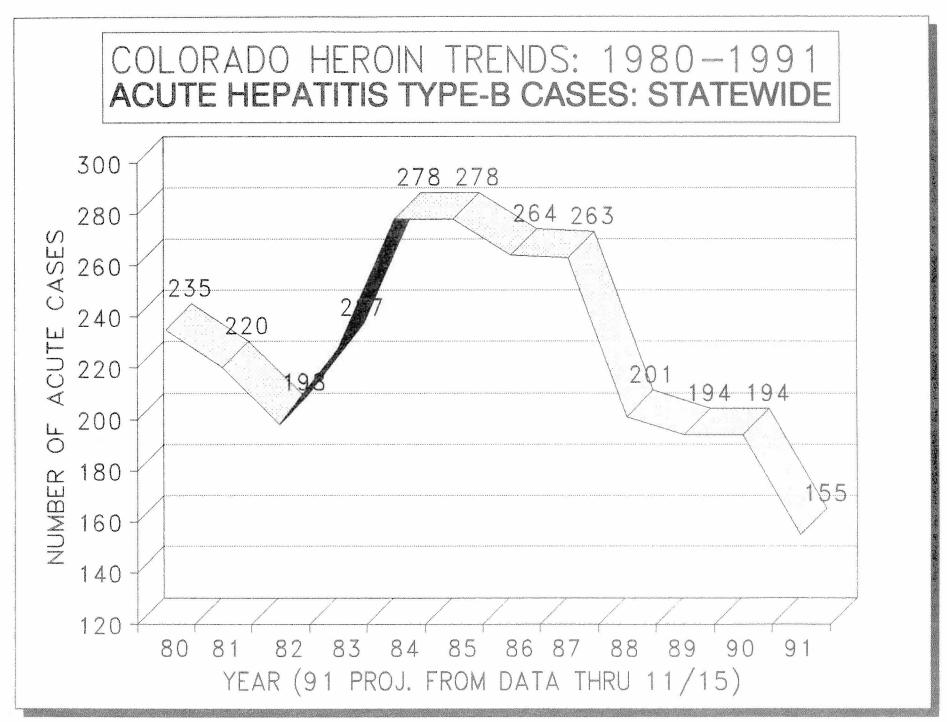
	HEROIN	COCAINE	MARIJUANA	AMPHETAMINES
AGE LESS THAN 21 21-25 26-30 31-35 OVER 35	1.0 5.1 14.3 23.2 56.4	5.2 17.2 29.9 27.7 20.1	32.3 21.9 18.9 13.1 12.9	8.1 18.3 24.0 27.6 22.0
MEAN	36.54	30.51	25.71	30.53
MEDIAN	36.00	30.00	24.00	30.00
sex Male Female	62.7 37.3	65.7 34.3	78.6 21.4	64.6 35.4
RACE WHITE BLACK HISPANIC NATIVE AMERICAN OTHER	46.2 10.0 41.7 .8 1.2	50.9 30.9 16.5 1.1	63.1 8.4 27.0 1.2	84.5 2.4 10.6 2.0
EDUCATION LESS THAN 12 12 13-16 MORE THAN 16	40.8	37.2	53.2	43.1
	37.5	38.9	30.7	39.0
	17.9	22.1	14.6	16.7
	3.8	1.8	1.5	1.2
MEAN	11.48	11.80	11.01	11.42
MEDIAN	12.00	12.00	11.00	12.00
MONTHLY INCOME  0 1-500 501-1,000 1,000-1,500 1,501-2,000 2,000+	17.4	23.5	25.2	24.8
	29.0	37.1	35.2	44.3
	24.0	23.4	23.5	19.1
	7.3	8.5	7.3	4.9
	4.1	3.7	3.2	2.0
	18.1	3.8	5.5	4.9
MEAN	944.39	555.81	559.03	458.83
MEDIAN	500.00	400.00	400.00	280.00
PRIOR DRUG/ALCOHOL TREATMENT YES NO	71.8	55.6	45.7	61.1
	28.2	44.4	54.3	38.9
PRIOR ARRESTS: NON-DUI YES NO	52.6 47.4	50.7 49.3	56.5 43.5	58.5 41.5

EXHIBIT 8
CONTINUED

	HEROIN	COCAINE	MARIJUANA	AMPHETAMINES
PRIOR ARRESTS: DUI YES NO	18.6 81.4	11.4 88.6	12.7 87.3	16.3 83.7
FREQUENCY OF USE LESS THAN ONCE A WEEK ONCE A WEEK SEVERAL TIMES A WEEK ONCE A DAY SEVERAL TIMES A DAY MORE THAN 3 TIMES A DAY BINGE	7.6 1.1 6.3 11.3 68.0 4.1 1.5	14.7 6.9 27.0 9.9 16.8 8.6 16.0	16.1 10.9 20.9 13.0 21.3 10.2 7.6	11.5 3.8 21.2 11.1 26.9 11.5 13.9
YEARS USED LESS THAN 3 3-5 6-10 GREATER THAN 10	5.8 13.7 13.2 67.3	13.6 26.4 26.8 33.2	9.9 16.9 24.1 49.2	9.3 16.3 28.9 45.5
MEAN MEDIAN	15.97 17.00	8.52 7.00	12.17 10.00	12.13 10.00
YEARS ABUSED LESS THAN 3 3-5 6-10 GREATER THAN 10 MEAN	12.3 14.8 17.9 55.1	31.3 27.7 23.1 18.0	22.5 20.0 25.3 32.2 8.58	20.3 20.3 30.1 29.3
MEDIAN	12.00	4.00	7.00	8.00
SECONDARY SUBSTANCE USE  NONE COCAINE HEROIN OTHER OPIATES NON-RX METHADONE ALCOHOL AMPHETAMINES MARIJUANA HALLUCINOGENS INHALANTS BARBITURATES OTHER OTHER	34.2 26.2 9.8 1.3 15.5 1.1 7.8 0 0 .5	23.9 3.0 .7 .2 37.7 3.5 28.2 .7 .1 .2 0	18.8 11.0 .4 .1 60.8 2.9 4.3 .1	15.1 22.4 2.4 1.2 .4 26.1 28.2 2.0 0 .4 0
TOTAL N	601	994	1127	246

SOURCE: DACODS





#### EXHIBIT 11

#### AIDS: STATUS IN COLORADO October 31, 1991

Number of Confirmed Cases			1973	
Cases by Sex	Male Femal	е	1882 91	(95.0%) (5.0%)
Current Mortality	Alive Dead	f Diagnosia	681 1292	(35.0%) (65.0%)
Race White 1608 (81%) Black 149 (8%) Hispanic 202 (10%) Other 14 (1%)	Age o 0-9 10-19 20-29 30-39 40-49 over 4		11 10 390 950 426 186	(.6%) (.5%) (19.8%) (48.1%) (21.6%) (9.4%)
Transmission Categories: Homosexual Male/Bisexual Male IV Drug User Homosexual/Bisexual Male and IV Drug User			1481 114 196	(75.1%) (5.8%) (9.9%)
Transfusion Recipient Hemophiliac Heterosexual Contact to High Risk Individend Undetermined Risk/No Identified Risk Factories at Risk/has AIDS	40 39 58 38 7	(2.0%) (2.0%) (2.9%) (1.9%) (.4%)		
Geographic Distribution: Denver Metropolitan Area Southeast Colorado South Central Colorado Northeastern Colorado Western Colorado			1691 52 126 59 45	(85.7%) (2.6%) (6.4%) (3.0%) (2.3)
Year of Diagnosis 1982 January-December 1983 January-December 1984 January-December 1985 January-December 1986 January-December 1987 January-December 1988 January-December 1989 January-December 1990 January-December 1991 January-October a:12118.91	Numb 8 25 45 94 182 264 323 373 341 318	(.7/mo) (2.1/mo) (3.8/mo) (7.8/mo) (15.2/mo) (22.0/mo) (26.9/mo) (31.1/mo) (28.4/mo) (31.8/mo)	Nun	7 88 25 100 45 100 90 96 169 93 230 87 249 77 249 67 148 43 80 25

#### EXHIBIT 11

#### CONTINUED

### REPORTED AIDS CASES BY COUNTY COLORADO 1982 - OCTOBER 31, 1991

COUNTY	CASES REPORTED	DEATHS	CUMULATIVE CASE* RATE/100,000
ADAMS	114	68	43.0
ARAPAHOE	111	67	28.4
BOULDER	62	44	27.5
DENVER	1270	837	271.6
DOUGLAS	8	5	13.2
EL PASO	121	92	30.5
FREMONT	17	7	52.7
JEFFERSON	122	71	27.8
LARIMER	24	15	12.9
MESA	6	4	6.4
MORGAN	7	5	31.9
PUEBLO	19	14	15.4
SUMMIT	9	9	69.9
WELD	21	12	15.9
ALL OTHER COUNTIES (30)	62	42	
COLORADO	1072	1202	50.0
TOTAL	1973	1292	59.9

COUNTIES REPORTING AIDS - 44 (69.8%)
CASES REPORTED RANGE FROM 1 TO 1270
CARE RATE/100,000 RANGE FROM 6.4 TO 271.6

#### CUMULATIVE HIV AB TESTING THROUGH CDH LABORATORY 07/01/85 - 10/31/91

SEX	NUMBER TESTED	NUMBER POSITIVE	%	
MALE . FEMALE	67823 43997	5420 430	7.99 .98	ditrimodo
TOTAL	111820	5850	5.23	

SOURCE: SEXUALLY TRANSMITTED DISEASES SECTION, COLORADO DEPARTMENT OF HEALTH

<sup>\*</sup>Based on 1990 Census