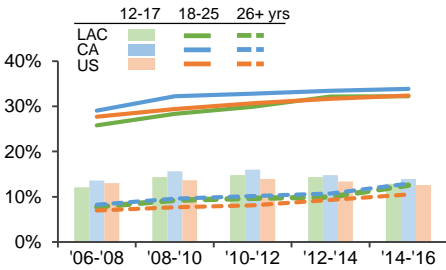


SAPC Data Brief

Impact of Marijuana Use

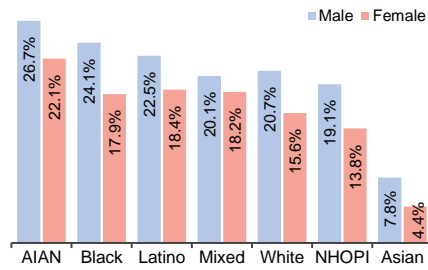
Prevalence Rate

Marijuana use in the past year, by age and geography, 2006-2016¹



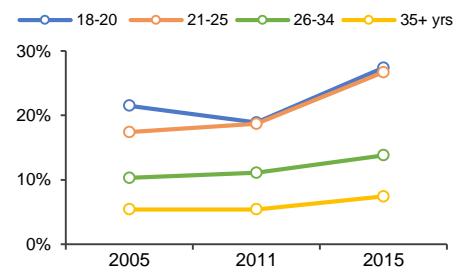
Marijuana use in Los Angeles County (LAC) among youth, young adults, and adults increased (by 6%, 25%, and 62% respectively) over recent years.

Marijuana use in the past month, by race/ethnicity and gender, 9th-12th graders, LAC, SY0708-SY1415²



Marijuana use was higher for males than females, highest among AIAN^a, and lowest among Asian high schoolers in LAC.

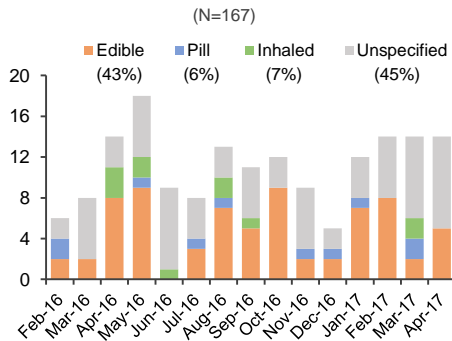
Marijuana use in the past year, by age, LAC, 2005-2015³



Marijuana use increased from 2011-2015 in LAC for all adult age groups, particularly among those aged 18-20 and 21-25 years.

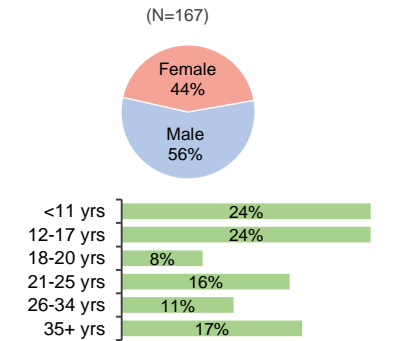
Poison Control Calls

Marijuana-related calls to Poison Control, by month and exposure type, LAC, 2/2016 – 4/2017⁴



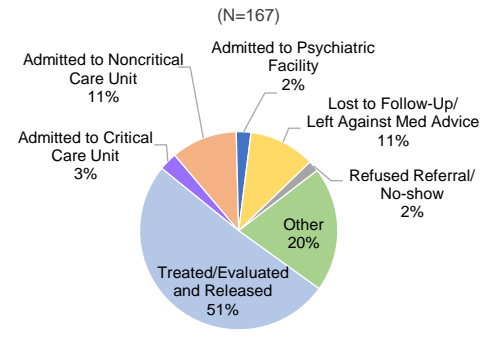
California Poison Control Center received 167 calls in LAC (average: 11 calls each month) for marijuana poisoning treatment advice and referral from Feb '16 to Apr '17.

Marijuana-related calls to Poison Control, by gender and age, LAC, 2/2016 – 4/2017⁴



Males accounted for 56%; children (<11) and adolescents (12-17) each accounted for 24% of calls to the California Poison Control for marijuana poisoning from Feb '16 to Apr '17.

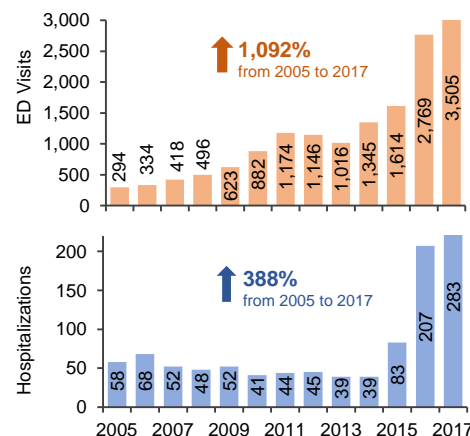
Marijuana-related calls to Poison Control by disposition, LAC, 2/2016 – 4/2017⁴



Over half of California Poison Control callers were treated or evaluated over the phone, while 16% were referred and admitted to health care facilities for marijuana poisoning from Feb '16 to Apr '17.

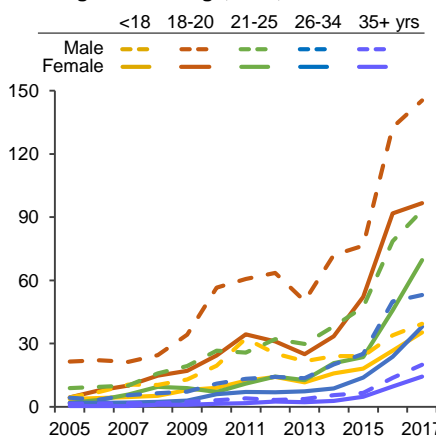
Healthcare Utilization

Primary marijuana hospitalizations and emergency department (ED) visits^a, LAC, 2005-2017⁵



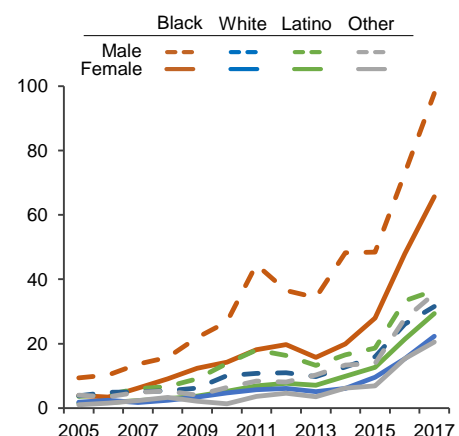
Marijuana ED visits increased steadily from 2005 to 2017. Hospitalizations due to marijuana remained stable through 2014, then increased sharply.

Primary marijuana rates of ED visits^b, by gender and age, LAC, 2005-2017⁵



Rates of ED visits (per 100k pop) due to marijuana increased for all gender-age groups in LAC. Males aged 18-20 years had the highest rates.

Primary marijuana rates of ED visits due to marijuana^b, by gender and race, LAC, 2005-2017⁵

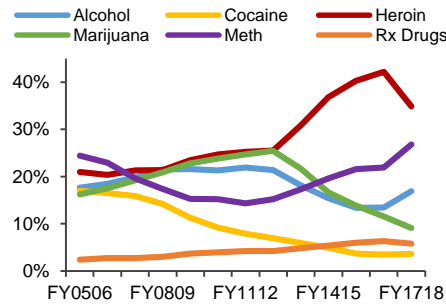


Rates of ED visits (per 100k pop) due to marijuana increased for all gender-race/ethnicity groups in LAC, particularly Blacks/ African Americans.

^a AIAN: American Indians/Alaskan Natives. NHOPI: Native Hawaiian or Pacific Islander. ^b ED visits and hospitalizations due to marijuana include records that listed marijuana poisoning, dependence, or abuse as the primary diagnosis

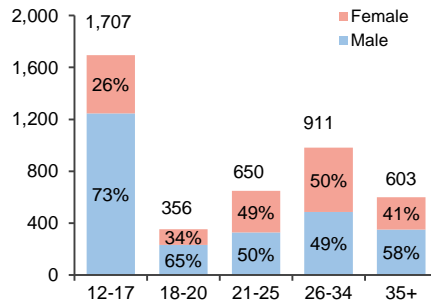
Treatment

Primary drug problem at treatment admission, LAC, FY0506-FY1718⁶



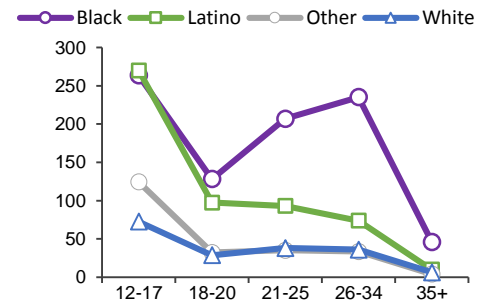
The proportion of admissions to publicly funded SUD treatment programs with marijuana as the primary drug decreased after FY1213.

Primary marijuana admissions by age and gender, LAC, FY1718⁶



Males and age 12-17 were the most common gender and age group among primary marijuana admissions.

Primary marijuana admission rate by age and race/ethnicity, LAC, FY1718⁶



Rates of primary marijuana admissions were highest among African Americans aged 26-34 years.

References and Notes

1. Substance Abuse and Mental Health Services Administration. National Survey on Drug Use and Health (NSDUH). <https://www.samhsa.gov/samhsa-data-outcomes-quality/major-data-collections/state-reports-NSDUH/2012-2014-substate-reports>

- Marijuana is the most commonly used drug in the US, especially among young adults. From 2014 to 2016, 32.2% of Los Angeles County (LAC) young adults (aged 18-25 years) had used marijuana in the past year.
- From 2014 to 2016, marijuana use in the past year among youth (aged 12-17 years) in LAC was 12.9%, higher than the national average (12.6%), but lower than the California state average (14.0%).
- From 2014 to 2016, marijuana use in the past year among adults (aged 26+ years) in LAC was 12.6%, higher than the national average (10.5%), but lower than the California state average (12.9%).
- In LAC, rates of marijuana use in the past year increased more rapidly than those of CA and US for all age groups from 2006 to 2016: Youth by 6%, young adults by 25%, and adults by 62%.

2. WestEd, California Department of Education. California Healthy Kids Survey (CHKS). <http://chks.wested.org/about/>

- Marijuana use in the past month was higher among male than female high school survey participants in Los Angeles County during the school years 2007-2008 to 2014-2015.
- American Indian/Alaskan Native survey participants had the highest prevalence of marijuana use, while Asian survey participants had the lowest prevalence of marijuana use in Los Angeles County.

3. Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology. Los Angeles County Health Survey (LACHS).

<http://www.publichealth.lacounty.gov/ha/LACHSDataTopics2015.htm>

- Marijuana use in the past year increased for all age groups from 2011-2015, particularly among those aged 18-20 and 21-25 years which both increased from about 19% in 2011 to about 27% in 2015.

4. Regents of the University of California. California Poison Control System (CPCS).

- There were a total of 167 calls (average: 11 calls; range: 5-18 calls per month) received by the California Poison Control 24/7 hotline for expert marijuana (alone or in combination with other drugs) poisoning treatment advice and referral from February 2016 to March 2017.
- Calls to California Poison Control were more commonly by males (56%) than females (44%).
- Children (aged <11 years) and adolescents (aged 12-17 years) each accounted for 24% of all marijuana-related poison control calls.
- About 43% of calls were for poisoning treatment advice for exposure to marijuana edibles.
- About half (51%) of callers were treated or evaluated immediately over the phone and released, while 16% were referred and admitted to a critical care unit, noncritical care unit, or psychiatric facility.

5. Office of Statewide Health Planning and Development (OSHPD). Emergency Department and Inpatient Discharge Data Sets 2005-2017. California Department of Public Health.

- ED visits due to marijuana (records that listed marijuana poisoning, dependence, or abuse as the primary diagnosis) increased 1,092% from 2005 to 2017.
- Hospitalizations due to marijuana remained relatively stable from 2010-2015, then increased 241% from 2015 to 2017. From 2005 to 2017, it increased by 388%.
- Rates of ED visits per 100,000 population due to marijuana increased for all gender-age groups in LAC from 2005 to 2012, dropped slightly in 2013, then began to increase again from 2014.

- From 2005 to 2017, males had higher rates of ED visits due to marijuana than females across all age groups in LAC. However, the rates of ED visits due to marijuana increased more rapidly among females than males for all adult age groups.

- From 2005 to 2017, underage adults aged 18 to 20 years had highest rates of marijuana-related ED visits than other age groups for both genders in LAC, particularly males aged 18 to 20 years, who had the highest rates across all gender/age groups.

- From 2005-2017, rates per 100,000 population of ED visits due to marijuana increased for all gender-race/ethnicity groups in LAC. The rates among females increased more steeply compared to males across all race/ethnicity groups.

- From 2007-2017, Black males had the highest rates of ED visits due to marijuana, followed by Black females, Latino males.

- Increases in marijuana-related ED visits and hospitalizations observed in 2015 and 2017 may be due in part to the change in the diagnosis coding system used by OSHPD (transition from ICD9 to ICD10 starting from the fourth quarter of 2015).

6. Los Angeles County Participant Reporting System (LACPRS) and Sage data. Substance Abuse Prevention and Control, Los Angeles County Department of Public Health.

- The proportion of admissions to publicly funded SUD treatment programs with marijuana as the primary drug increased from FY0506 to FY1213, then decreased thereafter.

- From FY0506 to FY1718, primary marijuana admissions in LAC were most common among youth clients aged 12-17 years. In FY1718, boys accounted for 73% of primary marijuana admissions among clients aged 12-17 years.

- In FY1718, the rate of primary marijuana treatment admissions per 100,000 population was highest among African American and Latino youth aged 12-17 years, and African American young adults aged 26-34 years in LAC.