

# Dealing With Kratom

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# How It Started

- In its original, natural form it is a leaf from a tree originating from southeast Asia.
- Farmers and workers have used it for centuries as an energy booster. Chewing it or using it as a tea. Similar to a cup of coffee but lasts a little longer. Main ingredient is the affective alkaloid mitragynine. However the leaves have trace amounts of 7-OH (7-hydroxymitragynine).
- In smaller doses, acts as a stimulant but in larger or more concentrated doses, provides an effect more tied to an opiate.
- In 1921 the alkaloid was isolated and was fully mapped out in the 1960's. Didn't really do much with it after that.
- First concentrated, manufactured version was developed and brought to market in 1990's.

# What It Is Now

- In 2000's began being used in US as "natural supplement" in it's pill form .
- The original mild stimulant with some pain relief has turned into a significant opiate with some stimulant affects.
- The 7-OH (7-hydroxymitragynine) has been isolated, concentrated, and increased in volume per dosage. It's current state is about 25x more potent than it's natural form.
- Effects increased from 1-3 hours in leaf form, up to 2-7 hours in it's current form.
- In Mid-2000's, began marketing it as an opioid alternative.
- Gummies and higher concentrates developed in 2023.

# ➤ Why Is It Such A Problem

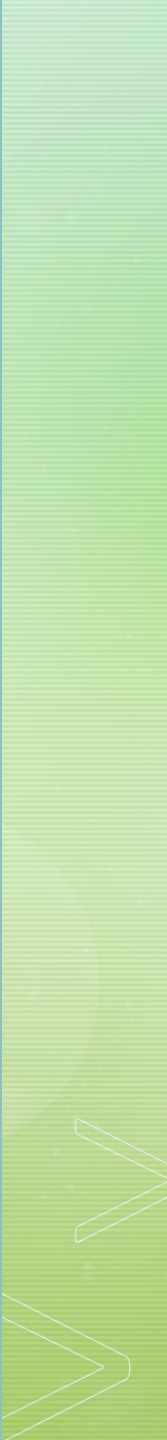
- While marketed as a supplement, it is not regulated by the Food and Drug Administration (FDA) or any other regulatory authority.
- Even though it's sold over the counter, in most cases the product purchased is more potent than morphine (Schedule 2 substance). The Kratom leaf is not classified at all while the higher concentrates have a temporary Schedule 1 classification (such as heroin, LSD, and MDMA).
- Purchaser has to be 21 to obtain cigarettes or alcohol. They can legally purchase Kratom at 18.
- Is not detected on the standard 5 or 10 panel urinalysis tests. The tests strips for Kratom are not globally mass produced so many clinics can't test for it regularly. Most botanical compounds are not tested.

# Different Patterns...Sort Of

- Started as an herbal supplement but has turned into an opiate substitute. Wasn't widely used when opiates were plentiful and not tracked as heavily.
- Sociologically "blipped" in tracking patterns of use for approximately 5 years. Problematic reports of use would stay in a region but not in a specific area with 2-4 months separating reports of use.
- Anecdotal patterns seem to have ties with people who had known each other through work or social relationships. People with histories of use try to substitute without others knowing, promote it to others, the others use it, until first person (next tiers) start to deal with ramifications, then pattern died down.
- Not completely unique in it's orientation, think K2 and spice from 2014-2015.
- Consistency has been lining out as traditional patterns but we're still running behind it.



Q & A



# Thank You!

- Please call or email me if you have any questions or would like more information about our services.
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