

Kratom Katastrophe: Unmasking the Medical and Socioeconomic Impact of Recreational Kratom Use in Kentucky

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Faculty Disclosure

I have nothing to disclose

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Outline

1. Introduction
2. Cases Presentations
3. Harms vs Benefits
4. Discussion
5. Conclusion

Introduction

- Origins
- Pharmacology
- Epidemiology
- Clinical
- Adverse Effects/Withdrawal



<https://www.nccih.nih.gov/health/kratom>

Case Presentations

- 20 yo F
- GAD, MDD
- 7-8 Kratom tablets daily
- Restlessness, body aches, chills, N/V/D

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- Recreational use combined with ETOH and marijuana

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- 49 yo M
- Chronic pain
- 10 g Kratom every 4-5 hours
- No withdrawal with taper

- 38 yo F
- GAD, MDD, seizures
- Up to 60 Kratom tablets daily
- Unresponsive, catatonic

Harm vs Benefit

Harm

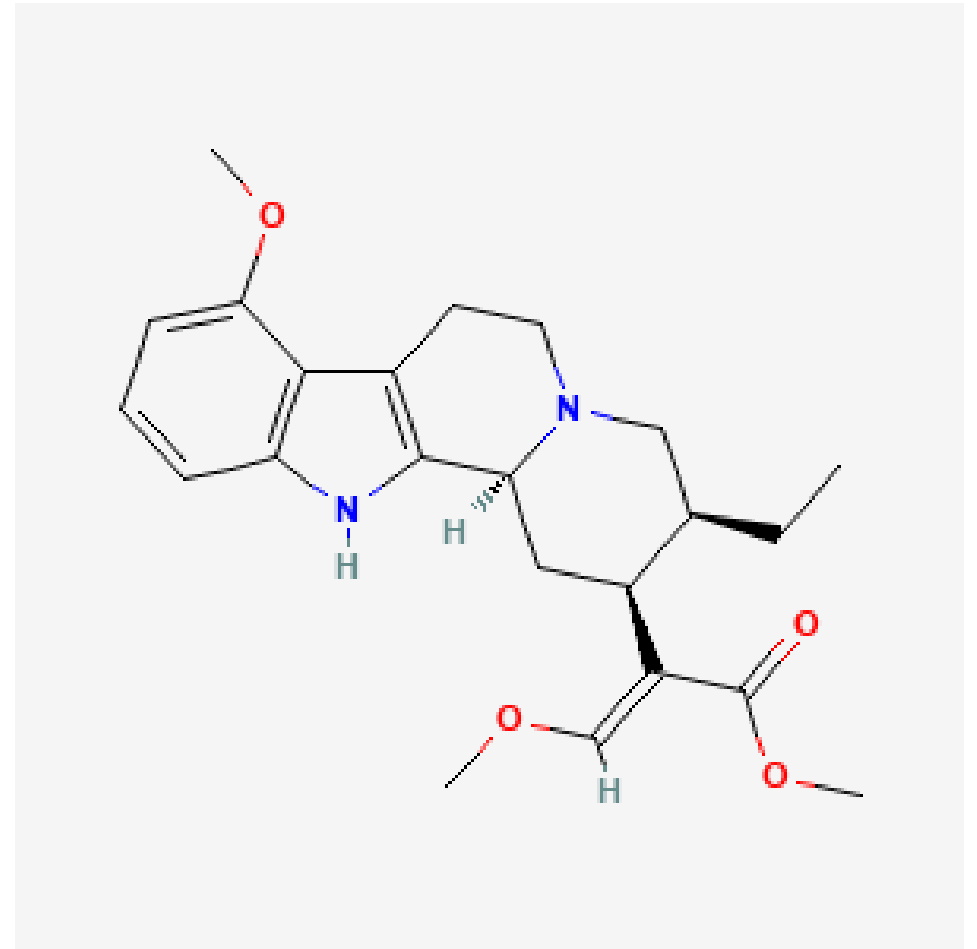
- GI symptoms
- Psychosocial effects
- Abuse potential
- Withdrawal
- Drug interactions
- Organ dysfunction
- Cardiac arrest

Benefit

- Energy/focus
- Mood/mental health
- Harm reduction
- Pain management

Discussion

- Billion-dollar industry
- Active bans
- Unknowns
- Risk vs Benefit



<https://pubchem.ncbi.nlm.nih.gov/compound/3034396>

Conclusion

- Kratom is a naturally occurring psychoactive chemical that has been adulterated by Western medicine for supplementation use.
- The true scope of the risks and benefits is unknown due to a lack of research.
- The Kratom industry is a multi-billion-dollar industry, which likely causes socioeconomic harms to patients in addition to the physical harms experienced.
- There is no FDA oversight due to its status as a supplement, though there is a growing number of states that have banned Kratom.
- At this time, the unknowns appear to be greater than the knowns, with an uncertain future for this supplement.

References

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QUESTIONS?