The Opioid Epidemic

A National and State Public Health Perspective

Hank Weiss - Ph.D., M.P.H., M.S. Injury and Violence Prevention



WISCONSIN DEPARTMENT of HEALTH SERVICES

Wisconsin Society of Addiction Medicine Annual Conference, October 4, 2015

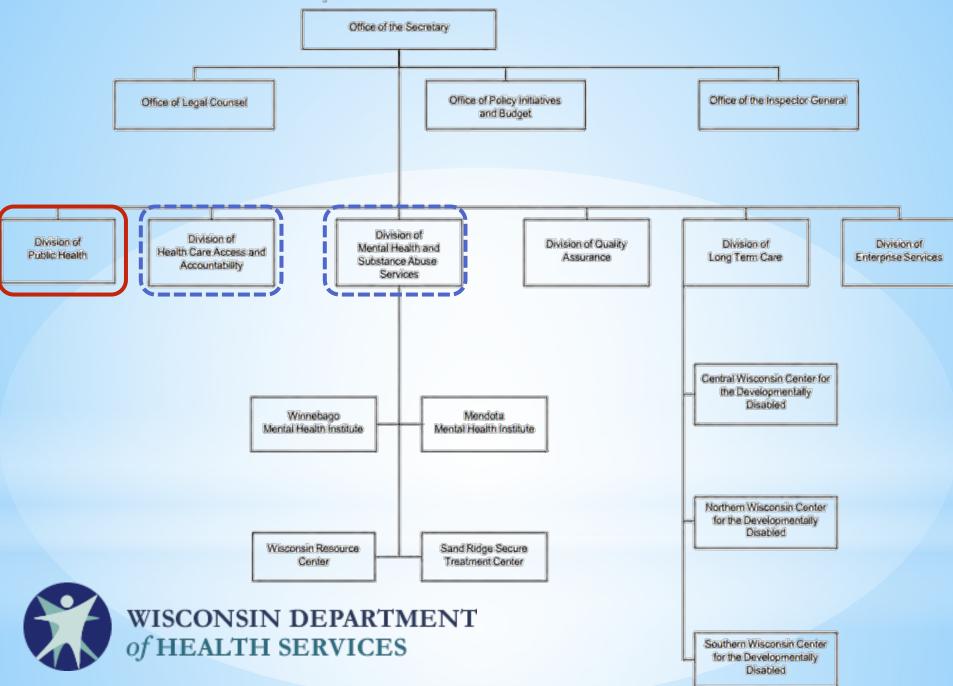


Protecting and promoting the health and safety of the people of Wisconsin

I have no financial disclosures to make

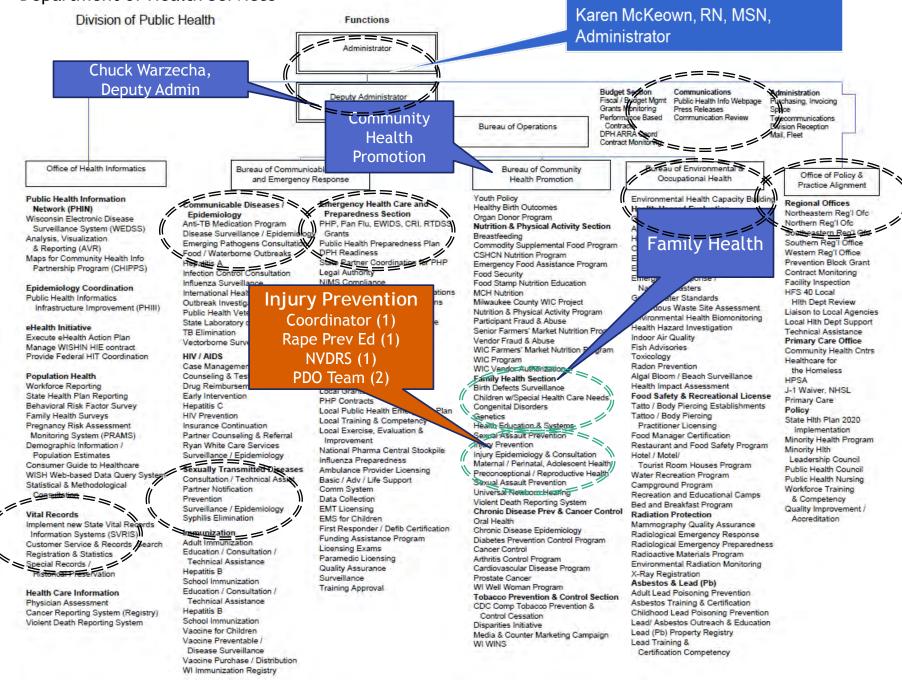
- 1. Where am I coming from?
- 2. What is the issue?
- 3. Why is drug overdose a Public Health *injury* problem?
- **4.** How did the epidemic happen?
- 5. What are the National and State impacts (epidemiology)?
- 6. What is being done to address it?

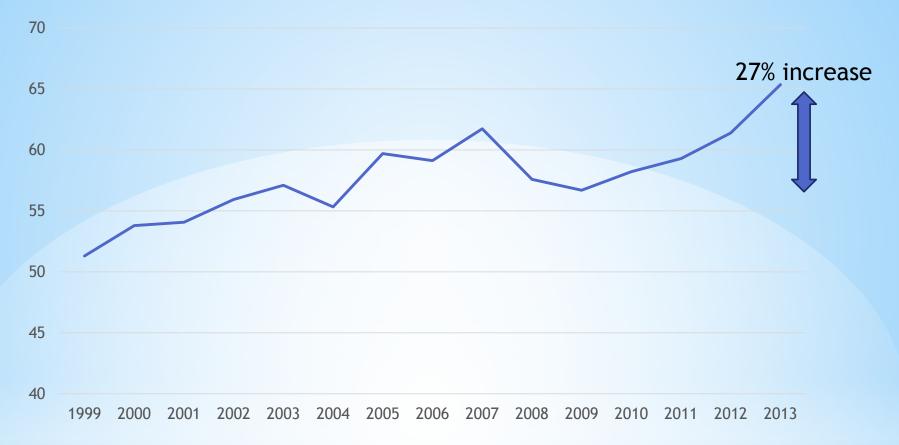
Today's Questions



<u>4</u> Protecting and promoting the health and safety of the people of Wisconsin.

Department of Health Services





Wisconsin Age-Adjusted Injury Death Rate, 1999-2013

CDC WISQARS, 9/2/2015

Leading Injury Death Rates, Wisconsin Residents, 1999-2013



Addiction

Treatment Withdrawal *Overdose* Mental health Family conflicts Infectious disease Short life span

> Crime Incarceration



^{ASAM} [≇]NATIONAL PRACTICE GUIDELINE

For the Use of Medications in the Treatment of

Addiction Involving Opioid Use

ASAM THE SALES

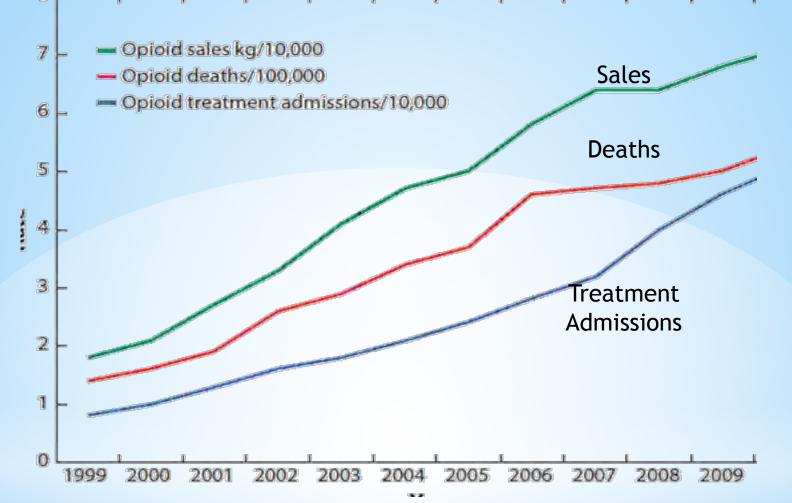




Adapted from Teater, D. The Psychological and Physical Side Effects of Pain Medications

We are in the midst of the "worst drug overdose epidemic in [US] history" - CDC

Paulozzi LJ. The epidemiology of drug overdoses in the United States (2010) CDC, NCIPC





Rates of Opioid Pain Reliever (OPR) sales, related unintentional overdose deaths, and addiction treatment admissions, 1999-2010

Source: CDC(Cent. Dis. Control Prev.). 2011. Vital signs: overdoses of prescription opioid pain relievers—United States, 1999-2008. MMWR 60:1487-92

Opioid Painkiller Prescribing

Vitalsigns



46

259 M

00

Each day, 46 people die from an overdose of prescription painkillers* in the US.

Health care providers wrote 259 million prescriptions for painkillers in 2012, enough for every American adult to have a bottle of pills.

CDC Vital Statistics, July 2014



http://www.cdc.gov/vitalsigns/opioid-prescribing/index.html

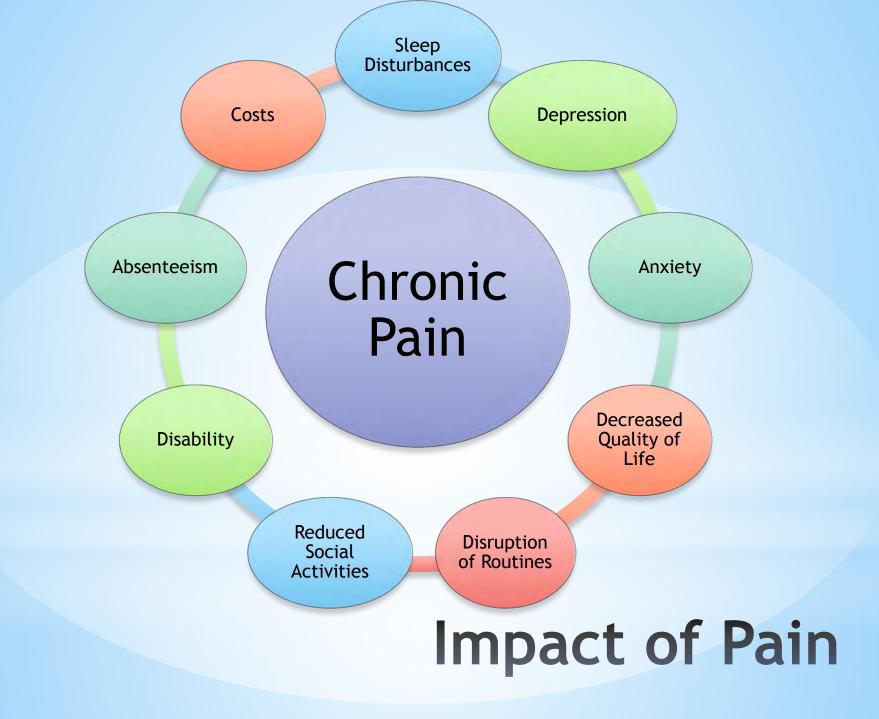
Over 140,000 deaths
Many more overdose admissions
Spillover to heroin
Millions addicted and/or dependent





How Did We Get Here?





Under-treatment of some pain conditions recognized

- Applied principles for treating acute and cancer pain to chronic non-malignant pain
- Belief that those with pain were less likely to abuse opioids

Pain Management Initiatives

Original Source: CSTE talk by Jim Shames, Medical Director Health and Human Services, Jackson County Oregon

By late 1990s ~20 states had passed laws, regulations or policies moving from nearprohibition of opioids to use without dosing guidance

Laws based on weak science

No ceiling on dose

Common practice of use more if tolerance develops

Ill-informed Policies

OxyContin maker to pay \$600 million in fines ABINGDON, Virginia — The company that makes the narcotic HE L Painkiller OxyContin and three current and former executives pleaded guilty Thursday in U.S. court here to criminal charges that Published: Thursday, May 10, 2007 they misled regulators, doctors and patients about the drug's risk of By Barry Meier addiction and its potential to be abused. Fraudulent

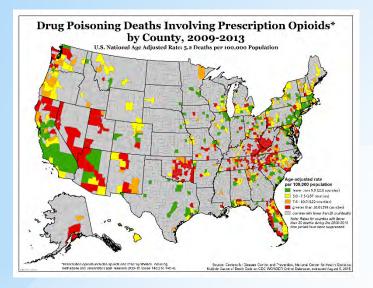
Marketing

Original Source: CSTE talk by Jim Shames, Medical Director Health and Human Services, Jackson County Oregon

Opioid use disorders are very prevalent in chronic pain opioid pain reliever patients:

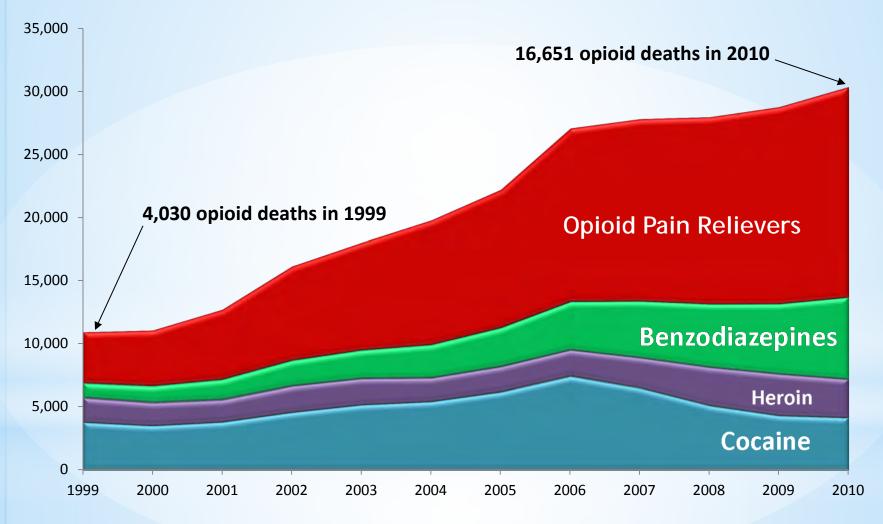
- Survey of 705 chronic pain patients treated in specialty and primary care outpatient centers found that 26% met criteria for opioid dependence, and 35% for opioid use disorder.
- Review of back pain patients found drug abuserelated behaviors suggestive of addiction in up to 24% of patients on long-term opioid pain relievers.

New Evidence



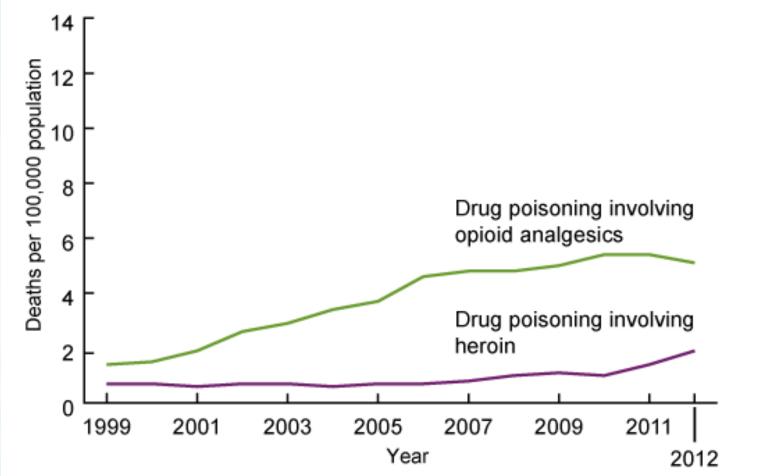
Epidemiology National

Opioid Pain Relievers Drive the Overdose Epidemic

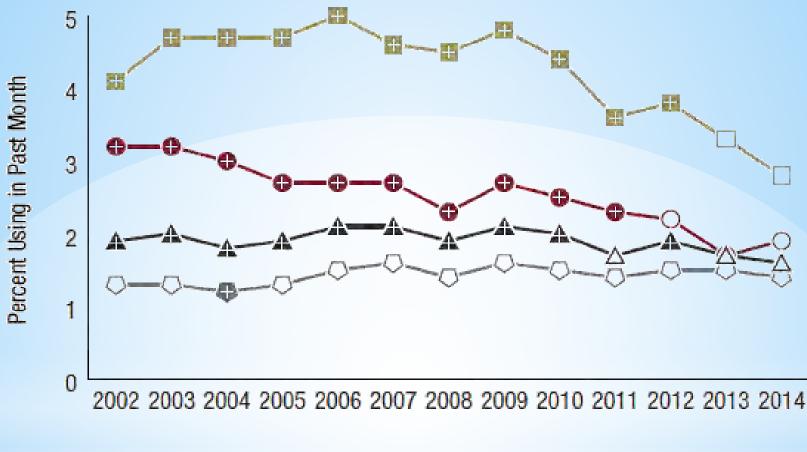


NCHS, National Vital Statistics System, 1999-2010

Opioid Pain Relievers Drive the Overdose Epidemic but Heroin is Catching Up



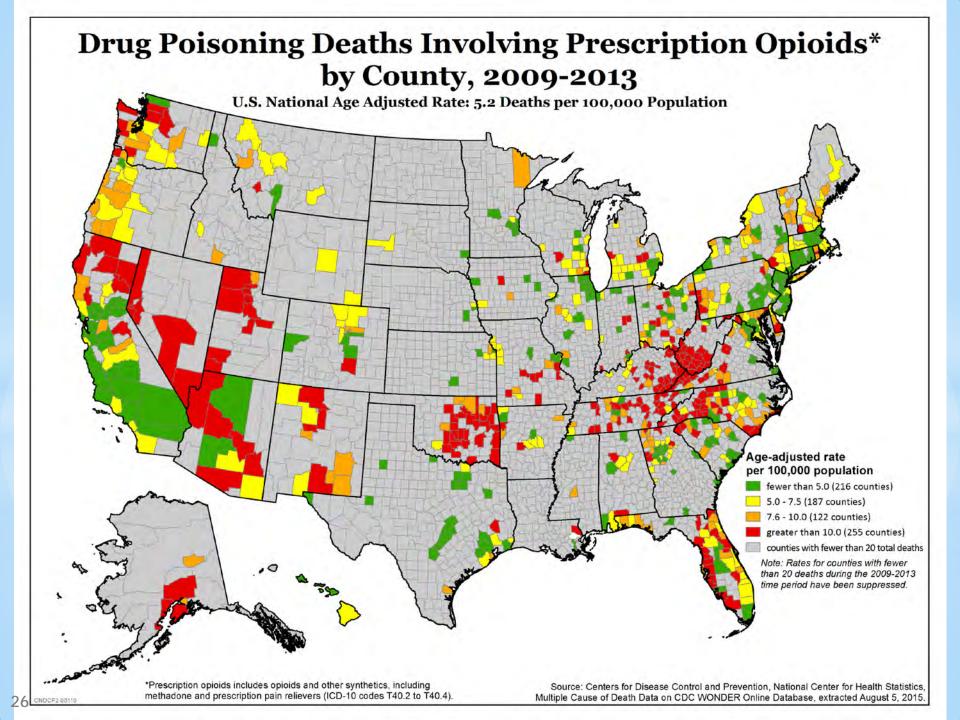
Trends in Drug-poisoning Deaths Involving Opioid Analgesics and Heroin: United States, 1999-2012. Division of Vital Statistics; Office of Analysis and Epidemiology NCHS



-A 12 or Older = 12 to 17 - 18 to 25 - 26 or Older

Past Month Nonmedical Use of Pain Relievers, Ages 12+, by Age Group: 2002-2014

"The disease of opioid addiction arises from repeated exposure to opioids and can occur both in individuals using opioids to relieve pain and in nonmedical users."



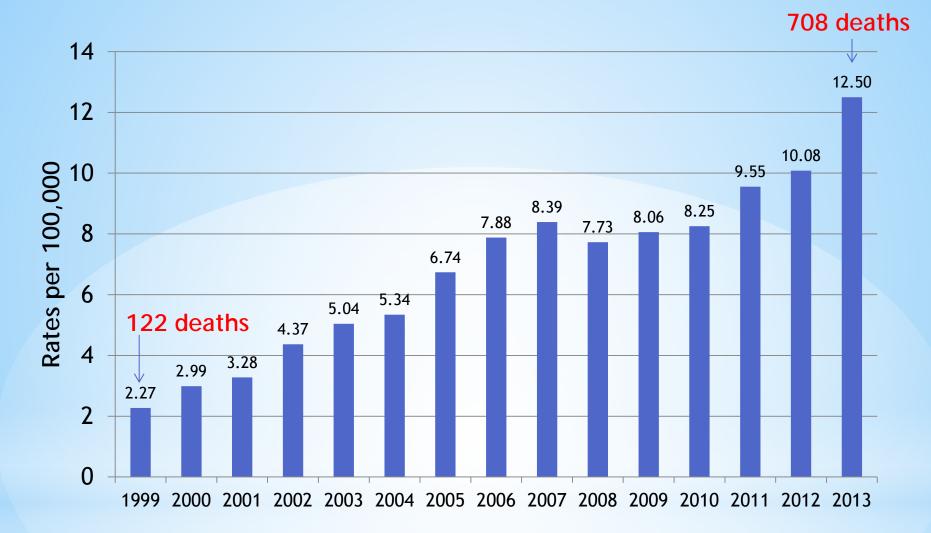


Epidemiology Wisconsin

Death Certificates (as of 2013)
Hospital discharge and emergency department data

Prescription Drug Monitoring Program (PDMP)
Medical Examiner/Coroner data
Emergency Department encounter data (syndromic)
Wisconsin Ambulance Run Data System (WARDS)

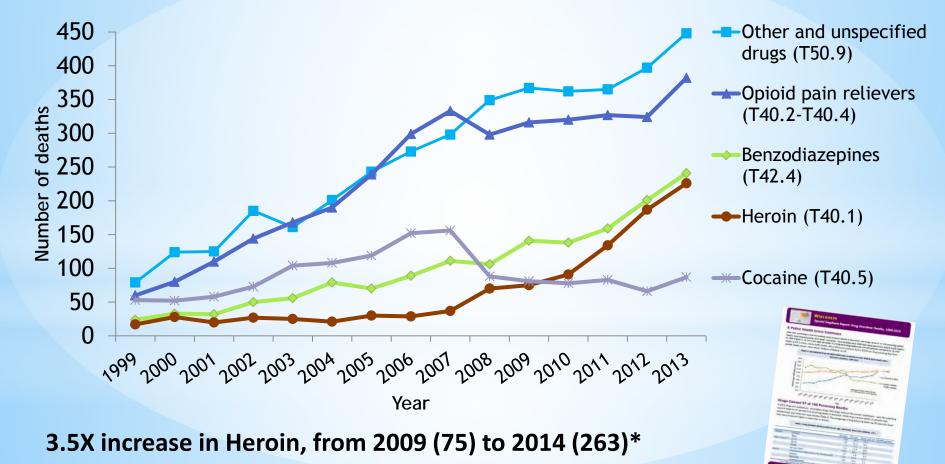
Surveillance: Data Sources and Systems



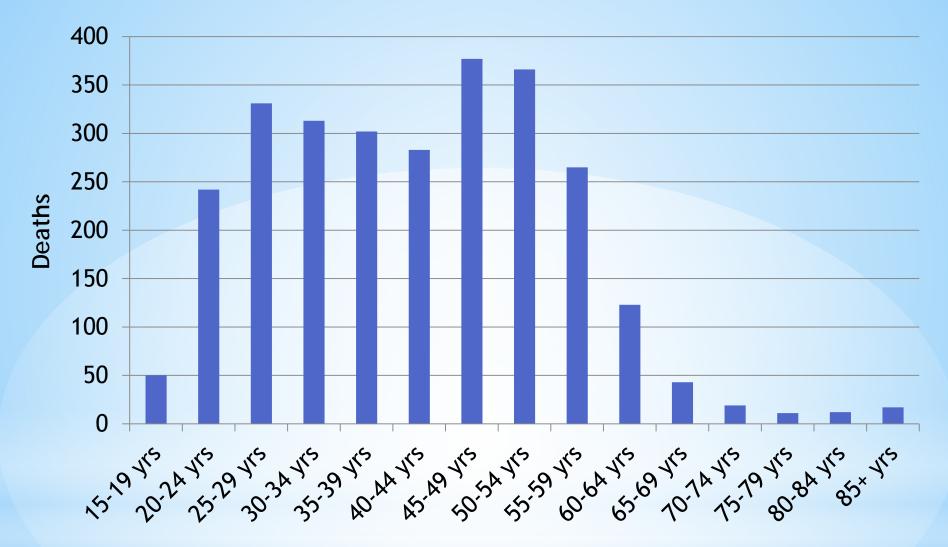
1999-2013, Wisconsin Unintentional Drug Poisoning, Age-Adjusted Death Rates All Races, Both Sexes, All Ages - ICD-10 Codes: X40-X44

CDC WISQARS: National Center for Injury Prevention and Control, CDC Data Source: NCHS Vital Statistics System for numbers of deaths. Bureau of Census for population estimates.

Number of drug overdose deaths involving opioid (morphine-like) pain relievers and other drugs, Wisconsin residents, 1999-2013

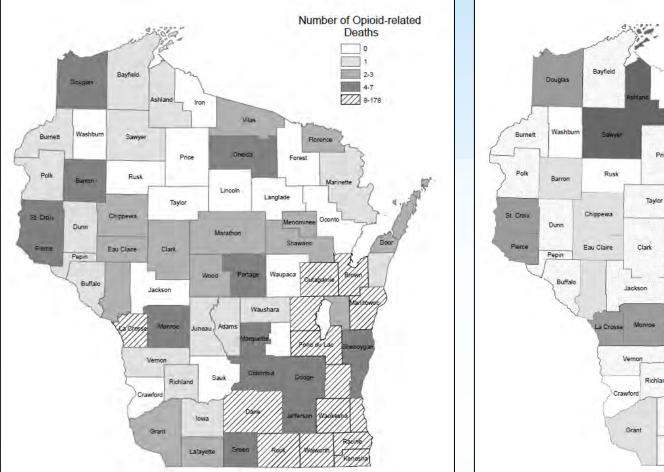


Source: WI DHS, OHI



2009 - 2013, Wisconsin Unintentional Drug Poisoning Deaths by Age All Races, Both Sexes

CDC WISQARS: National Center for Injury Prevention and Control, CDC Data Source: NCHS Vital Statistics System for numbers of deaths. Bureau of Census for population estimates.

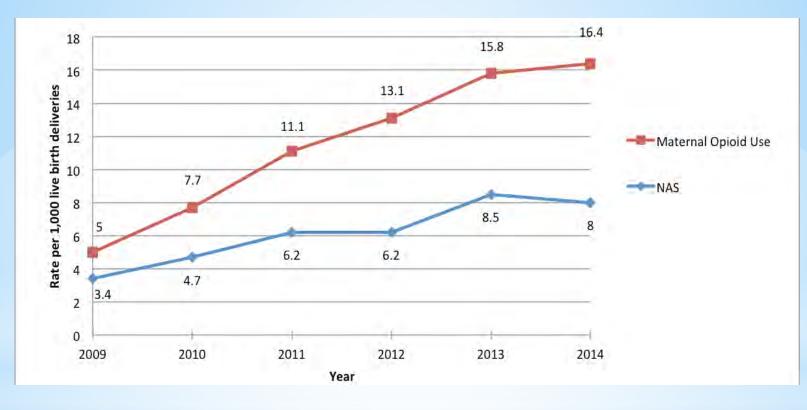


Opioid-related Mortality Rates per 100,000 Unstable 0 1.0-5.9 6.0-9.9 Iron 10.0-19.2 Vilas Florence Oneida Price Forest Marinett Lincoln Langlade Oconto Menomine Marathon Door Shawand Wood Portage Waupaca Brown Outagamie lanito Waushara Juneau Marquette Fond du Lac Sheboygan Columbia Dodge Sauk Richland Dane Jefferson Waukesha lowa Green Walworth Lafayette

Opioid-related Deaths, by County, Wisconsin Residents, 2013 Opioid-related Death Rates by County, Wisconsin Residents, 2011-13

Source: WI DPH, 2015

Rate of Deliveries with Maternal Opioid Use and Rate of Neonatal Abstinence Syndrome, Wisconsin 2009-2014



	2009	2010	2011	2012	2013	2014
Maternal Opioid Use	335	506	719	842	1001	1041
NAS	N=227	305	384	398	540	508

From: Neonatal Abstinence Syndrome and Maternal Substance Use in Wisconsin, 2009-2014. Karina A. Atwell, MD; Harold B. Weiss, PhD, MPH, MS; Crystal Gibson, MPH; Richard Miller, MS; Timothy E. Corden, MD



Primary Prevention:

Preventing new cases of opioid addiction

Secondary Prevention:

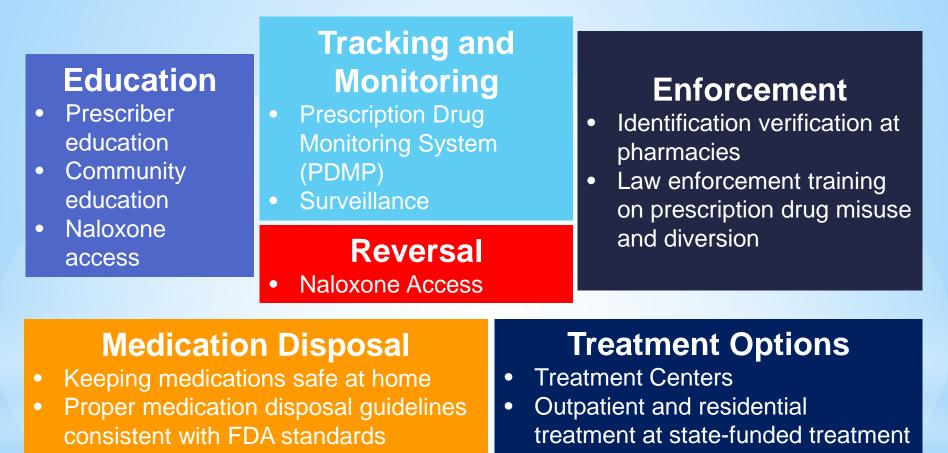
Identifying early cases of opioid addiction

> Tertiary prevention:

Ensuring access to effective addiction treatment

A Prescription for Prevention

Actions to Prevent Opioid Harm and Abuse



providers

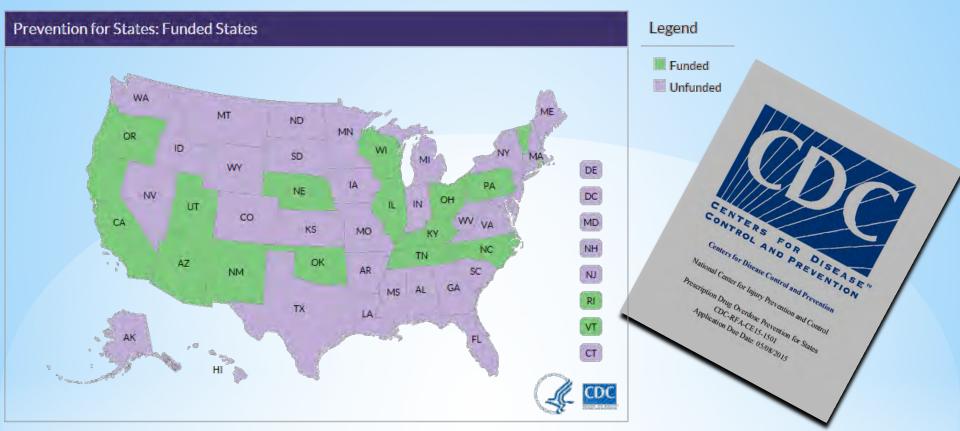
Policies

Supporting all sectors

Community take-back programs

35

Funded States Map



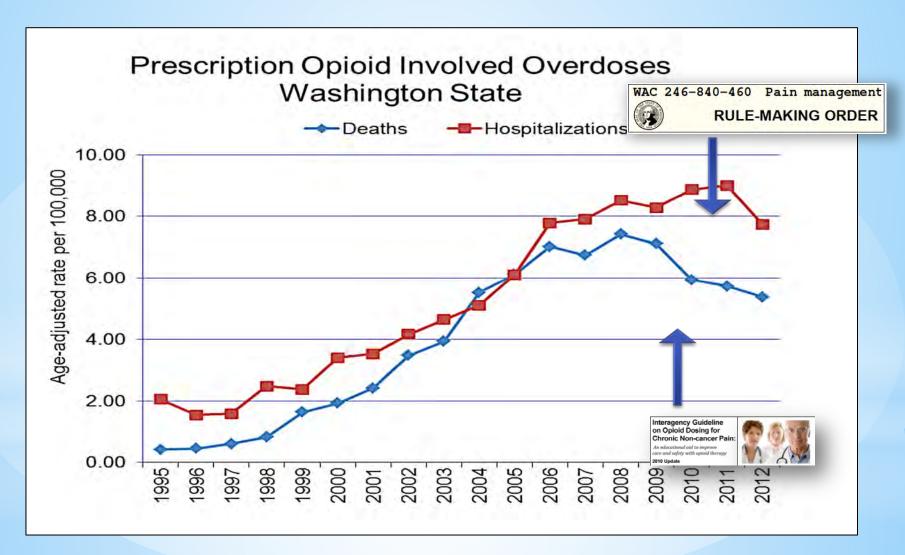
CDC RFA-CE15-1501: Prescription Drug Overdose Prevention for States

Addresses upstream drivers of the epidemic 4 years, ≈\$940,000/year **PDMP** Enhancements IT **Usability** Content Analysis Prescription Rapid Response **Projects** Drug Community Partnerships Curriculum & **Overdose** Guidelines **Prevention:** Opioid **CDC** Cooperative **Stewardship Agreement Wisconsin** in Wisconsin **Program Overview**

Avoidance	Stewardship	Overuse
Will not prescribe	Rational Pharmacology	Inattentive to dangers
Fear of oversight	Therapy tailored to individual risk	Inadequate monitoring
Inadequate understanding of addiction	Dynamic treatment, based on monitoring and outcomes	Excessive dosing
Exaggerated perception of risk	Acknowledge patient and community risks	Failure to recognize and respond to abuse

Opioid Stewardship

"Bending the Curve"—WA State First with Decline in Opioid-Related Adverse Events



Gary Franklin, University of Washington - Original Source: Jennifer Sabel Ph.D., Washington State Department of Health, 2014



A Coordinated Response Madison/Dane County Safe Community



Discussion

For More Information:

Hank Weiss, Ph.D., M.P.H. Injury and Violence Prevention Program DPH/BCHP/Family Health Section Wisconsin Department of Health Services <u>Harold.Weiss@wi.gov</u>