



Title:	Age Differences in Intentional Abuse Cases Mentioning Hydrocodone Products Versus Schedule II Opioids
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Abstract:

Background: In October 2013, the FDA announced they would formally recommend hydrocodone combination products, such as Vicodin, be reclassified from Schedule III to a Schedule II. This move comes despite the FDA's past concerns regarding the added hardship the stricter scheduling will cause pain patients such as a reduction in the number of refills per prescription. However, a concern prompting the change is the impact hydrocodone is having on the national drug abuse epidemic, particularly among youth, due to its increased availability as a Schedule III. The purpose of this analysis is to examine age differences in mentions of hydrocodone products and Schedule II opioids by intentional abuse cases.

Methods: Data from the RADARS® System Poison Center Program were used. Mentions of hydrocodone products by intentional abuse cases from 1Q2009-4Q2013 were compared to mentions of oxycodone and to other Schedule II opioids used in the treatment of pain (fentanyl, hydromorphone, morphine, oxymorphone, and tapentadol). Abuse was defined as the intentional improper use of a drug in order to gain a high or euphoric effect. Differences in drug group by age group were compared using Poisson regression analyses.

Results: There were 8182 mentions of hydrocodone products by intentional abuse cases from 1Q2009-4Q2013. During this same period, there were 7859 mentions of oxycodone products and 5114 mentions of other Schedule II opioids. The most common age of intentional abuse cases mentioning hydrocodone was 17 years compared to 23 years for oxycodone and 21 years for other Schedule II opioids. There were 1796 (22.0%) product mentions for hydrocodone compared to 1462 (18.6%) for oxycodone and 679 (13.3%) for other Schedule II opioids among cases 19 years or younger. Hydrocodone was significantly more likely to be mentioned than both oxycodone and other Schedule II opioids among cases 19 years or younger ($p < 0.001$). These differences were not as great among adults over 19 years of age (6307 mentions of hydrocodone products, 6288 mentions of oxycodone products, and 4381 mentions of other Schedule II opioids). While hydrocodone abuse accounts for 39% of product mentions when compared to oxycodone and other Schedule II opioids among all age groups, it accounts for 46% of product mentions among those under the age of 19 years.

Conclusion: Mentions of hydrocodone by intentional abuse cases are greater than oxycodone and greater than other Schedule II opioids. These differences are greater among individuals 19 years or younger, potentially due to the widespread availability of hydrocodone. Stricter scheduling of hydrocodone could possibly impact its accessibility, particularly among adolescents.