

Title:	Regional concentrations of Opana® ER abuse before and after introduction of a tamper resistant formulation in 2012
Authors:	SG Severtson1, MC Le Lait1, JL Green1, RC Dart1, 2
Meeting:	CPDD
Date:	June 2014
Location	San Juan, PR

Abstract:

Aims: Abuse of Opana® ER (extended release (ER) oxymorphone tablet) significantly increased following the reformulation of OxyContin® (ER oxycodone) and declined following introduction of the tamper resistant Opana ER in February 2012. We examined regional differences in abuse of Opana ER before and after the introduction of the reformulation within the United States.

Methods Researched Abuse, Diversion, and Addiction Related (RADARS®) System Poison Centers recorded abuse exposures to Opana ER one year before and after introduction of the reformulation (2011Q1 - 2011Q4 and 2012Q3 - 2013Q2). Zero-inflated Poisson regression was used to assess changes in cases and rates across poison centers. Rates represent mentions over prescriptions filled within ZIP codes served by the regional poison center.

Results: Opana ER abuse exposures declined from 255 in the year before introduction of the reformulation to 73 in the year after reformulation, a 74% (95% CI: 61% to 83%, p<0.001) decline. The number of exposures reporting injection use of Opana ER were 17 before and 25 (p=0.081) following the reformulation. Declines were also observed adjusting for prescriptions dispensed. Five of 43 poison centers accounted for 57% of pre-reformulation abuse exposures: Kentucky, Upstate New York, California, West Virginia, and Tennessee. Following the reformulation, the number of Opana ER exposures reported to these centers declined except for Tennessee. Tennessee accounted for 21% of post-reformulation cases and 32% of exposures reporting injection use.

Conclusions: Abuse of Opana ER reported to poison centers declined following the reformulation. In both time periods, exposures and route of administration appear to be concentrated in specific regions of the United States.

Financial Support: The RADARS® System is part of Denver Health and Hospital Authority, a division of the state of Colorado. It is supported by subscriptions from pharmaceutical manufacturers.