Reductions in Prescription Opioid Abuse among Enrollees into Opioid Treatment Programs

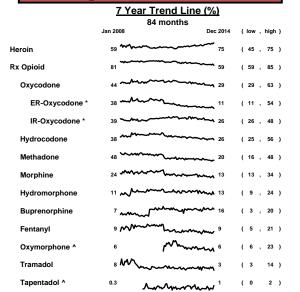
Aim

To examine 7-year trends of heroin and non-medical prescription opioid (PO) use among opioid-dependent patients enrolling in opioid treatment programs.

Methods

Newly admitted patients to opioid treatment programs (OTPs), in a nationwide prevalence study, completed a self-administered survey of past 30 day heroin and non-medical PO use. Data were collected from 48,262 patients in 100 OTPs across 35 states from January 2008 to December 2014.

Opioid Use Trends



^ Data collection for some drugs did not begin until after January 200



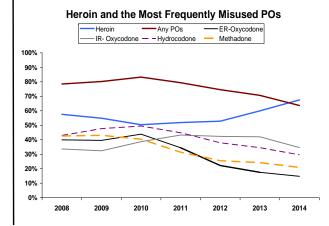
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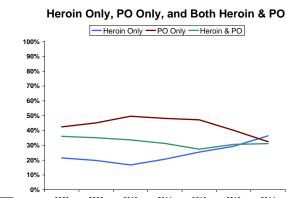
Building knowledge for better lives

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Heroin & Prescription Opioid Trends Comparison





Sample Characteristics

Geographical Factors % or Mean (SD)

US Region Northeast

Northeast	30
Southeast	34
Midwest	19
West	17

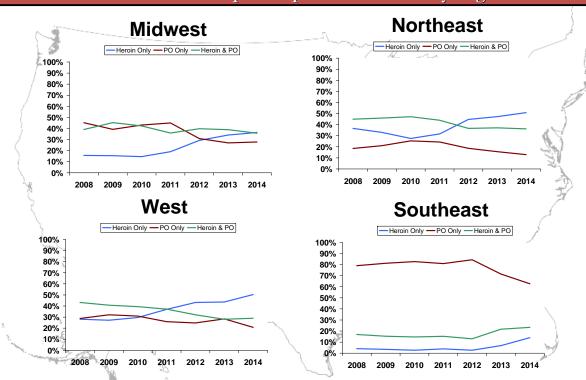
Urbanicity (population density)

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Metro>1M	62
250K-1M	29
<250K	9

Individual Factors

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Female	45
White	81
Age	34 (10.5)
Craving (1-5)	4.3 (1.1)
Withdrawal Severity (1-5)	4.0 (1.2)
Chronic Pain	44
First Methadone TX	40

Heroin & Prescription Opioid Use Trends by Region



Results and Conclusion

- Nationally and across all 4 US regions heroin has increased and PO-only misuse has decreased since 2008. These changes seem more dramatic since 2010. Except for buprenorphine, non-medical use for POs decreased, with Oxy-ER and methadone misuse showing the greatest decline.
- Though trends in heroin and PO misuse across regions appear similar, absolute values for these drugs differ. PO misuse is most prevalent in the Southeast and heroin is most prevalent in the Northeast.
- The decline in PO misuse may be attributed to several systemic changes such as introduction of tamper proof/abuse deterrent medications and establishment of drug monitoring programs in several states.
- The findings underscore the importance of ongoing surveillance of heroin and illicit use of POs and suggest that changes in opioid prescribing practices and formulations may have influenced declines in PO misuse but may have inadvertently contributed to an increase in heroin use.

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