

Reductions in Prescription Opioid Abuse among Enrollees into Opioid Treatment Programs

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Diversion and Addiction-
Related Surveillance
(RADARS®) System*



Conflict of Interest Statement

- Most manufacturers of prescription opioids or stimulants subscribe to RADARS System.
- RADARS System is the property of Denver Health and Hospital Authority, a political subdivision of the State of Colorado.
- Subscribers receive information, but do not participate in developing the System, data collection, or analysis of the data. They do not have access to the raw data.
- Employees are prohibited from personal financial relationships with any company.

Context and Background

- Multiple data sources have documented a prescription opioid (PO) abuse epidemic – including overdose deaths - during the past two decades.
- Recent data show decline in PO dispensing, misuse and overdose; and an increase in heroin use and heroin overdose (Dart et. al, 2015; Larochelle,et. al., 2015).
- Historically there have been geographical differences in the prevalence of PO and heroin misuse.

Aim and Methods

- To examine 8-year trends of heroin and non-medical prescription opioid (PO) use among opioid-dependent patients enrolling in opioid treatment programs.
- 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 50,049 patients in 99 OTPs across 35 states from January 2008 to March 2015.

2014 Sample Characteristics (N = 7,476)

Geographical Factors

% or Mean (SD)

US Region

Northeast	30
Southeast	34
Midwest	19
West	17

Urbanicity (population density)

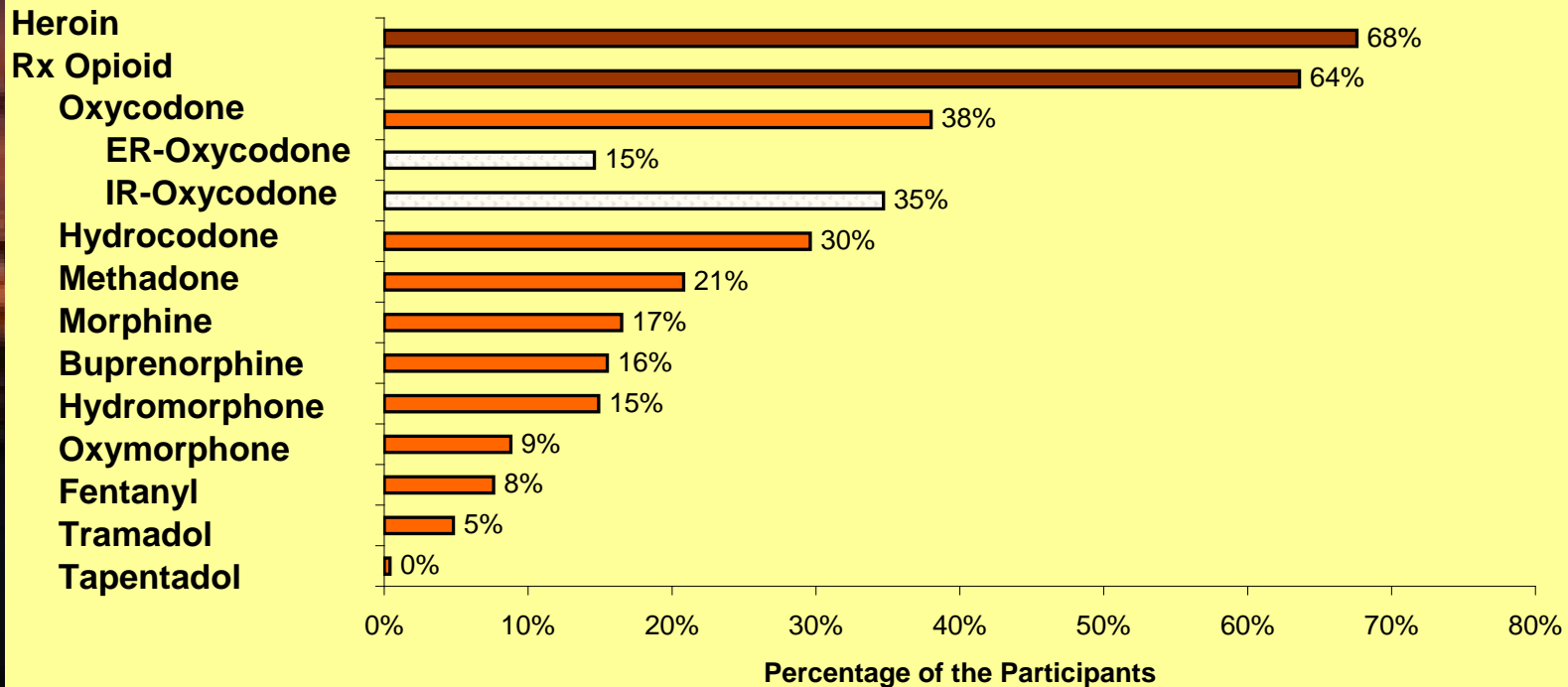
Metro>1M	62
250K-1M	29
<250K	9

Individual Factors

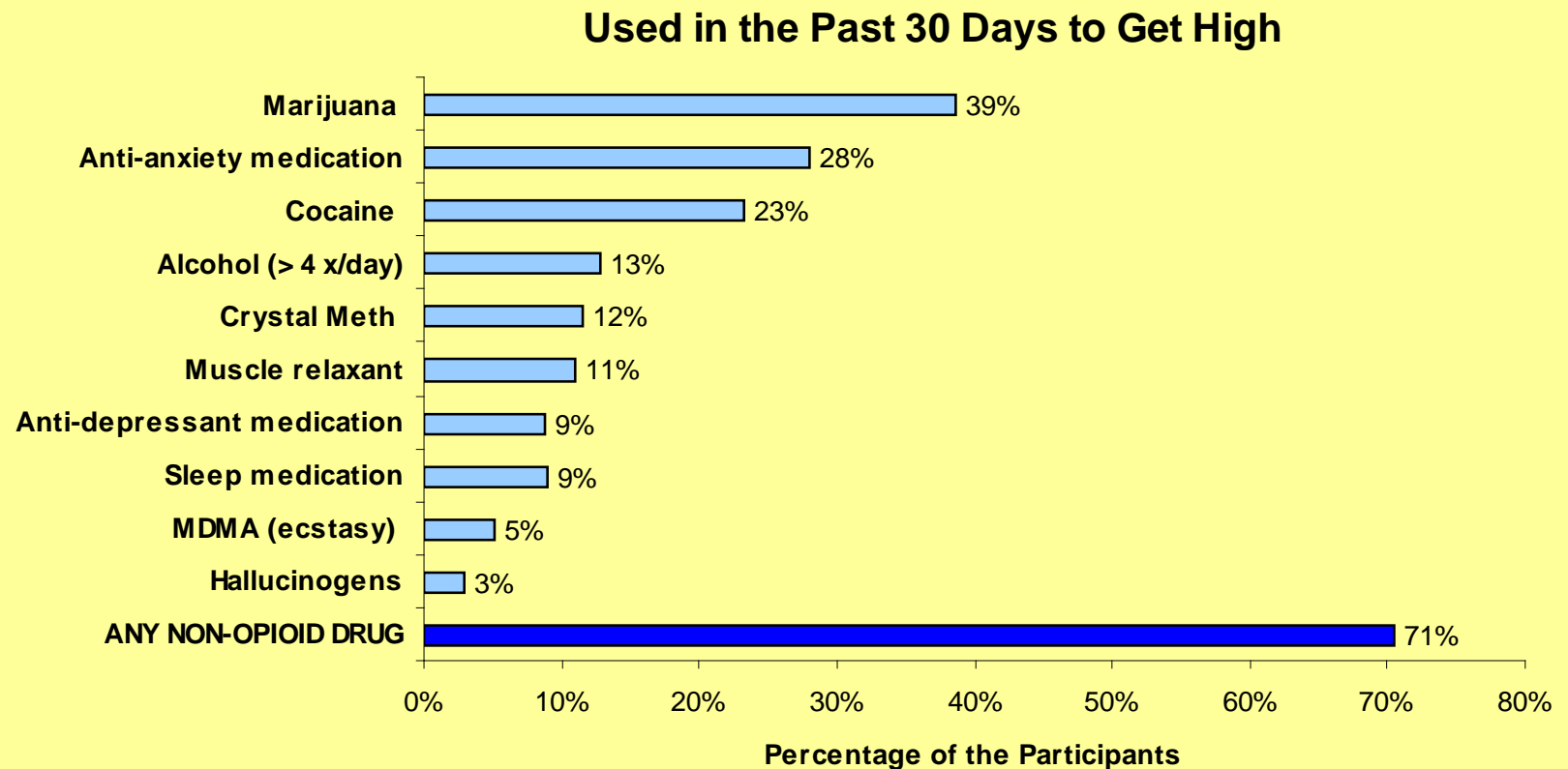
Female	45
White	81
Age	34 (10.5)
Craving (1-5)	4.3 (1.1)
Withdrawal Severity (1-5)	4.0 (1.2)
Chronic Pain	44
First Methadone TX	39

2014 Opioid Use (N = 7,476)

Used in the Past 30 Days to Get High



2014 Non-Opioid Use (N = 7,476)



8 Years Trend of Opioid Use in the Past 30 Days to Get High (50,049)

8 Year Trend Line (%)

87 months

Jan 2008

Mar 2015

(low , high)

Heroin

59  69 (45 , 74)

Rx Opioid

81  65 (58 , 85)

Oxycodone

44  37 (31 , 63)

ER-Oxycodone *

38  13 (10 , 54)

IR-Oxycodone *

39  34 (28 , 48)

Hydrocodone

38  27 (25 , 56)

Methadone

48  17 (16 , 48)

Morphine

24  19 (13 , 34)

Hydromorphone

11  17 (9 , 24)

Buprenorphine

7  16 (3 , 20)

Fentanyl

9  9 (5 , 21)

Oxymorphone ^

6  12 (5 , 23)

Tramadol

8  4 (3 , 14)

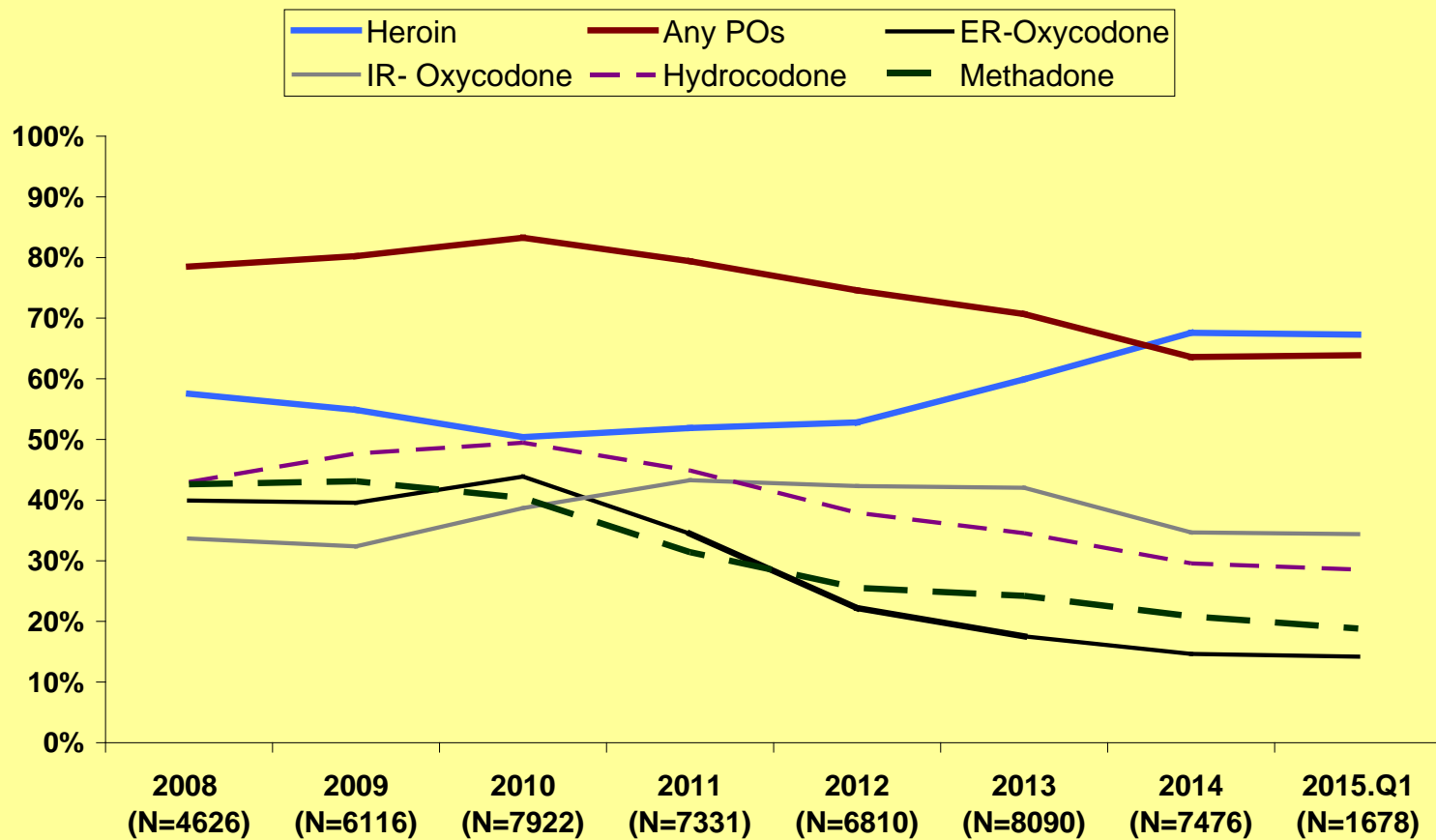
Tapentadol ^

0.3  0 (0 , 2)

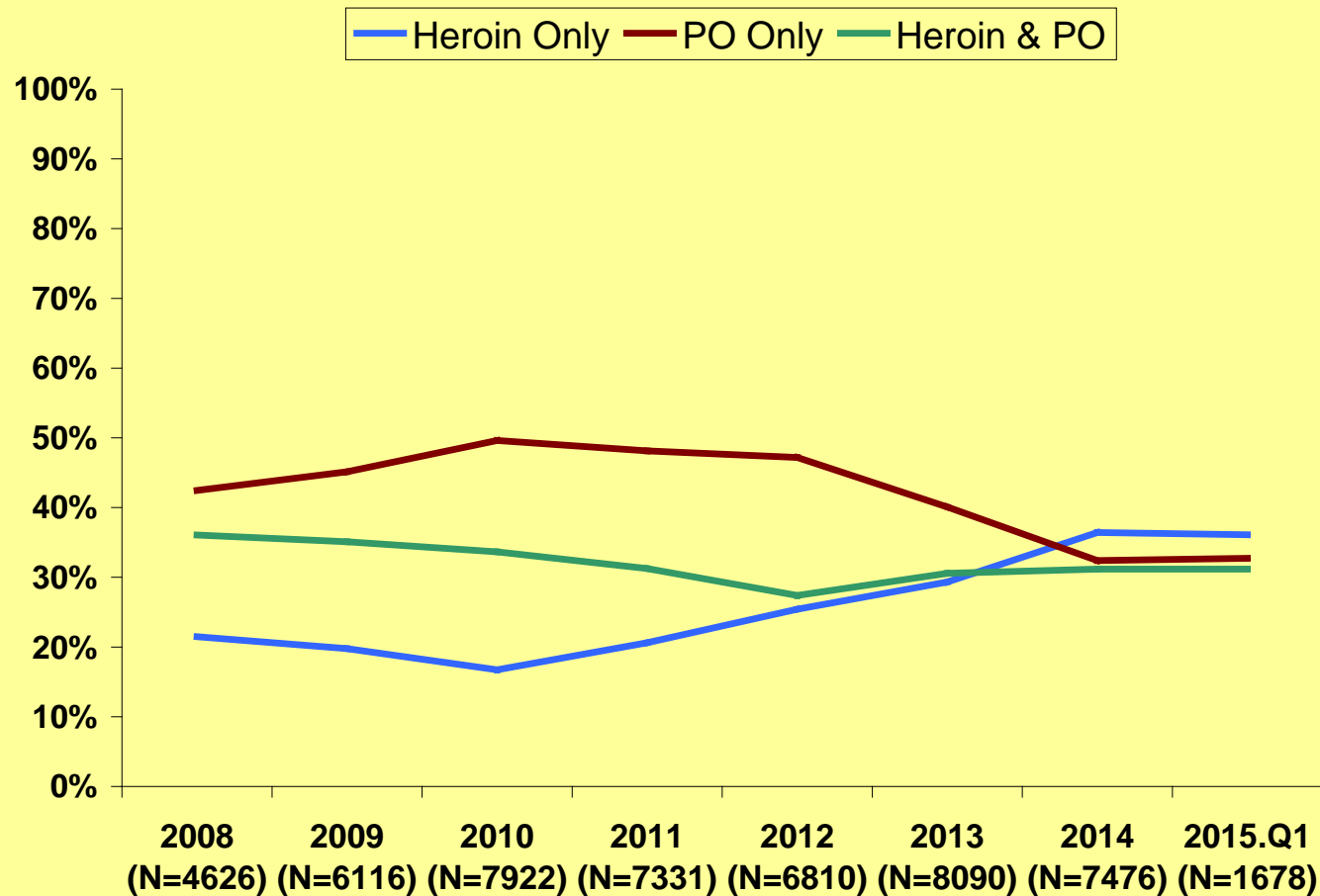
* ER = Extended-Release; IR = Immediate-Release

^ Data collection for some drugs did not begin until after January 2008

Heroin and the most Frequently Misused POs

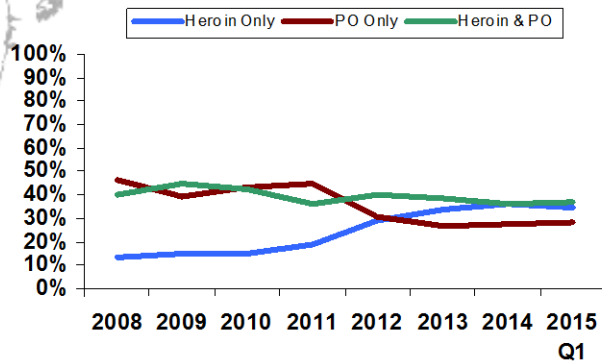


Heroin Only, PO Only, and Both Heroin & PO

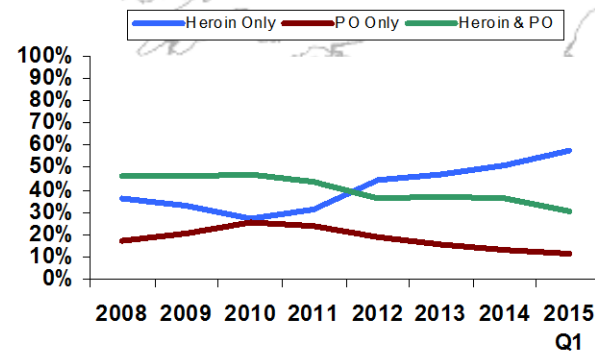


Heroin & Prescription Opioid Use Trends by Region

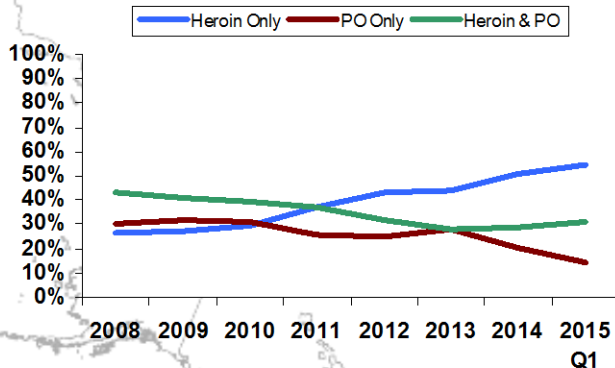
Midwest



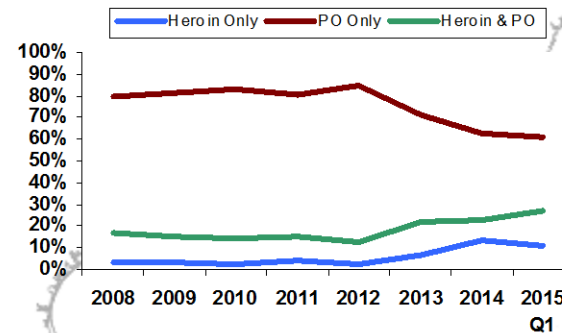
Northeast



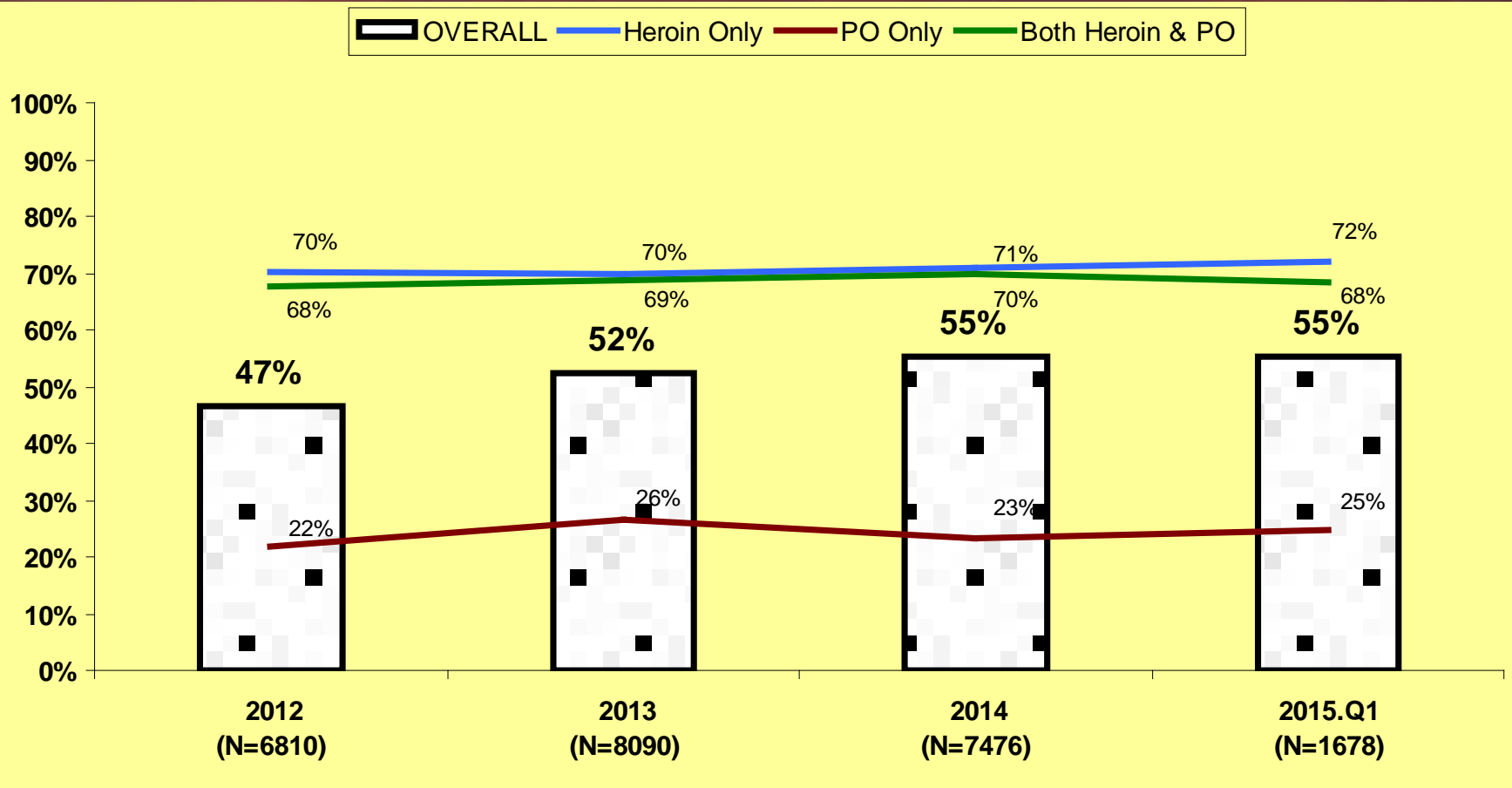
West



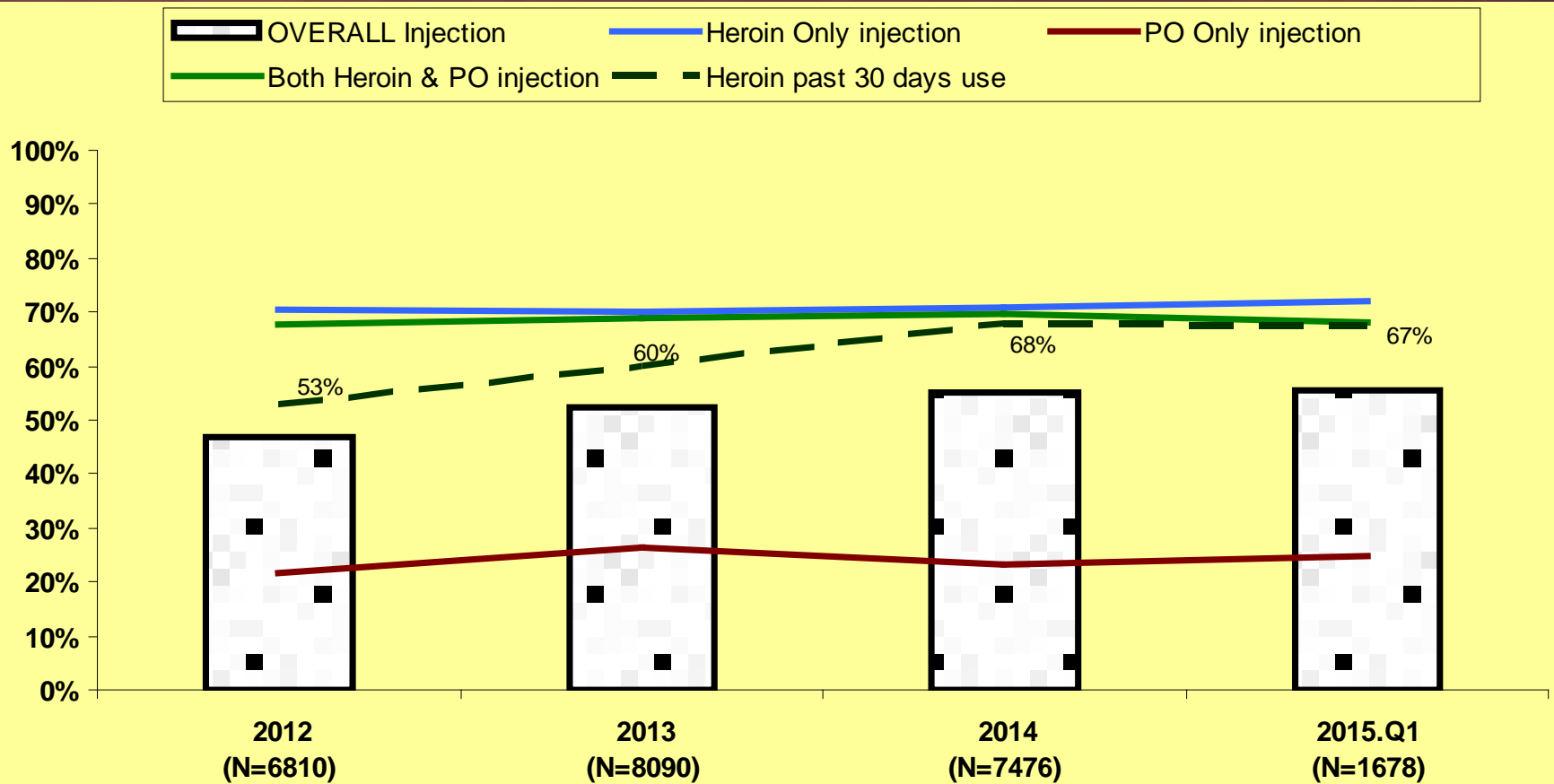
Southeast



Opioid Injection – Past 30 Days



Opioid Injection and Heroin Use – Past 30 Days



Summary of Opioid Use Trends

- Nationally and across all 4 US regions heroin has increased and PO-only misuse has decreased since 2008.
- Changes seem more dramatic since 2010. Except for buprenorphine and oxycodone, PO misuse decreased, with Oxy-ER and methadone showing the greatest decline.
- Though trends in heroin and PO misuse across regions appear similar, absolute values for these drugs differ.
- PO misuse most prevalent in the Southeast; heroin Northeast.
- Trend data represent changes in type of opioids used by OTP patients and not whether the absolute number of OTP enrollees has increased or declined.
- 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.
- Increase in heroin associated w/increase in IVD use. New injectors may also be at increased HIV/HCV risk if they are ignorant and/or not engaged in harm reduction practices.