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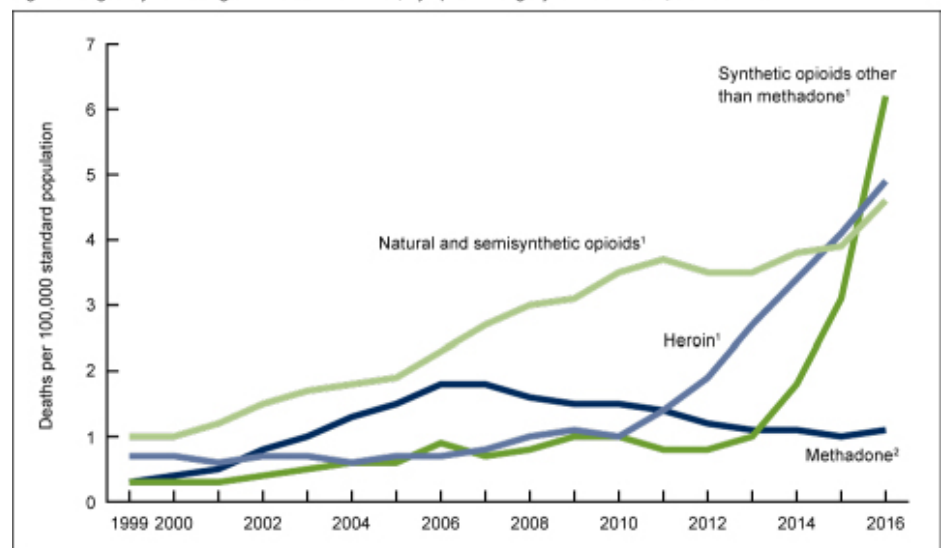
CDC Releases Drug Overdose Deaths in the United States, 1996-2016

The Centers for Disease Control and Prevention (CDC) released its annual drug overdose death report in December 2017. The report uses data from the National Vital Statistics System (NVSS) to illustrate trends in overdose deaths in the US, describe demographic and geographic patterns, and identify the types of drugs involved.

Key Findings:

- In 2016, there were more than 63,600 drug overdose deaths in the United States.
- The age-adjusted rate of drug overdose deaths in 2016 (19.8 per 100,000) was 21% higher than the rate in 2015 (16.3).
- Among persons aged 15 and over, adults aged 25–34, 35–44, and 45–54 had the highest rates of drug overdose deaths in 2016 at around 35 per 100,000.
- West Virginia (52.0 per 100,000), Ohio (39.1), New Hampshire (39.0), the District of Columbia (38.8), and Pennsylvania (37.9) had the highest observed age-adjusted drug overdose death rates in 2016.
- The age-adjusted rate of drug overdose deaths involving synthetic opioids other than methadone (drugs such as fentanyl, fentanyl analogs, and tramadol) doubled between 2015 and 2016, from 3.1 to 6.2 per 100,000.

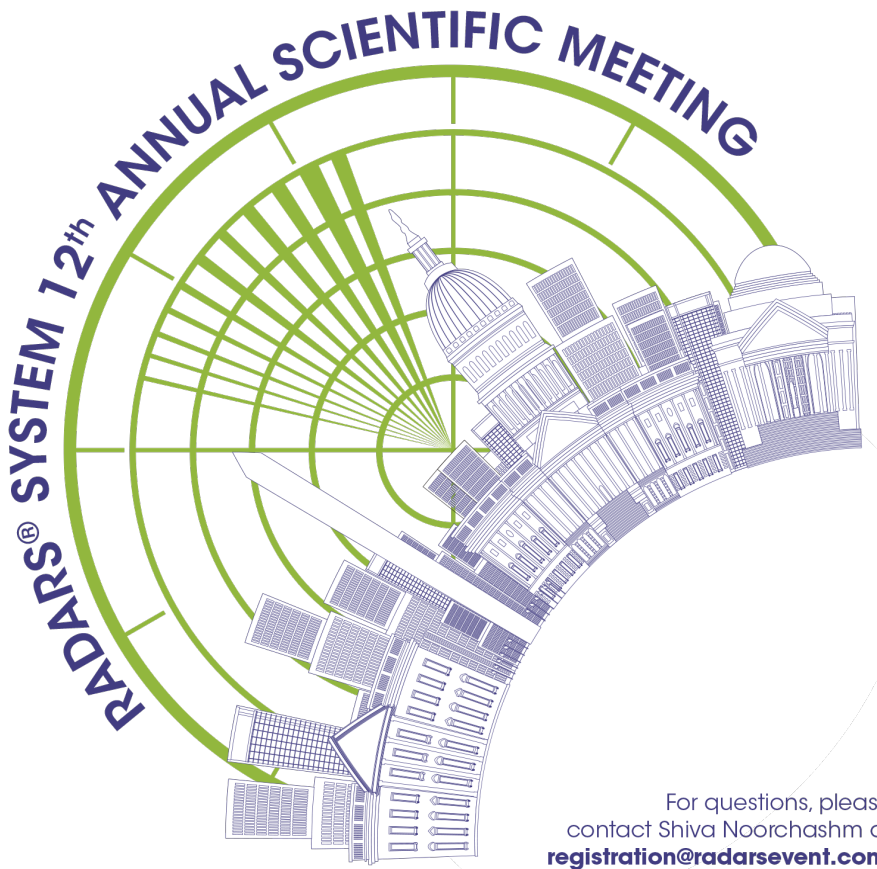
Figure 4. Age-adjusted drug overdose death rates, by opioid category: United States, 1999–2016



¹Significant increasing trend from 1999 to 2016 with different rates of change over time, $p < 0.05$.

²Significant increasing trend from 1999 to 2006, then decreasing trend from 2006 to 2016, $p < 0.05$.

NOTES: Deaths are classified using the International Classification of Diseases, Tenth Revision. Drug-poisoning (overdose) deaths are identified using underlying cause-of-death codes X40–X44, X60–X64, X85, and Y10–Y14. Drug overdose deaths involving selected drug categories are identified by specific multiple-cause-of-death codes: heroin, T40.1; natural and semisynthetic opioids, T40.2; methadone, T40.3; and synthetic opioids other than methadone, T40.4. Deaths involving more than one opioid category (e.g., a death involving both methadone and a natural or semisynthetic opioid) are counted in both categories. The percentage of drug overdose deaths that identified the specific drugs involved varied by year, with ranges of 75%–79% from 1999 to 2013, and 81%–85% from 2014 to 2016. Access data table for Figure 4 at: https://www.cdc.gov/nchs/data/databriefs/db294_table.pdf#4. SOURCE: NCHS, National Vital Statistics System, Mortality.



WEDNESDAY, MAY 9, 2018

INTERNATIONAL PRE-SYMPOSIUM AND NETWORKING WELCOME RECEPTION

THURSDAY, MAY 10, 2018

MAIN ANNUAL CONFERENCE

Westin Georgetown
2350 M Street, NW
Washington, DC



Program Spotlight: Researchers and Participants Interacting Directly (RAPID) Program

The Researchers and Participants Interacting Directly (RAPID) Program is a repository of patients/clients with opioid use disorder to be surveyed on special topics about drugs of abuse and abuse patterns over time.

The Program collects quantitative and qualitative data via online surveys from persons with opioid use disorder.

These periodic special topic surveys provide an in-depth view of the overall well-being of participating individuals (e.g., in treatment, relapsed), and expediently gather more detailed information about drugs of interest, including newly formulated drugs and new trends in the abuse and misuse of prescription drugs in their communities.

To learn more about the RAPID Program, please see the publications below. You may also email business@radars.org with any questions.

Cicero TJ, Ellis MS. Understanding the demand side of the prescription opioid epidemic: does the initial source of opioids matter? *Drug Alcohol Depend.* 2017;173:S4-S10. [doi: 10.1016/j.drugalcdep.2016.03.014](https://doi.org/10.1016/j.drugalcdep.2016.03.014).

Cicero TJ, Ellis MS, Kasper ZA. A tale of 2 ADFs: differences in the effectiveness of abuse-deterrent formulations of oxycodone and oxycodone extended-release drugs. *Pain.* 2016;157(6):1232-8. [doi: 10.1097/j.pain.0000000000000511](https://doi.org/10.1097/j.pain.0000000000000511)

Fourth Quarter Conferences and Presentations

Lisbon Addictions

Leading international experts in the field of addiction science met in Lisbon from 24–26 October 2017 for the Second European conference on addictive behaviors and dependencies. Over 1,000 participants from around the world came together to discuss and explore the challenges relating to illicit drugs, alcohol, tobacco, gambling, the internet, and other addictive behaviors. Dr. Richard Dart, along with RADARS System partners Dr. Jody Green and Dr. David Wood, held a Structured Session at the conference.

Key points from Dr. Dart's presentation, The Evolution of the Opioid Abuse Epidemic in North America:

- Prescription opioid abuse peaked 2010-2011 and has subsequently decreased steadily
- Illicit opioid abuse transformed by new distribution methods and is increasing rapidly
- Deaths occur primarily due to fentanyl-laced heroin
- Substance abuse is complex – Focusing on one or two agents could be misleading

[Click here to view Dr. Dart's presentation](#)

[Click here to view Dr. Wood's presentation](#)

Conclusions from Dr. Wood's presentation, The Landscape of Prescription Drug Misuse in the United Kingdom (UK):

- Increasing evidence of non-medical use of prescription medicines in the UK
 - Predominately opioids and benzodiazepines
 - Less commonly with GABAergics
- Misuse appears associated with certain 'sub-populations'
 - Clubbers, MSM community
 - Those with chronic illness / pain
- Significant harms being associated with misuse
 - Drug treatment, drug-related deaths, (ED presentations)
- Understanding relationship between prescribing patterns will enable improved harm reduction strategies

Conclusions from Dr. Green's presentation, The European Experience: Prescription Drug Misuse in France, Germany, Italy and Spain:

- Country-specific data is important as the landscape is unique for each country (e.g., products available, utilization, culture, behaviors)
- While magnitude and patterns vary, heroin is most commonly reported primary drug for patients entering substance abuse treatment however prescription opioid abuse/misuse detected in all countries
- Detectable level of acute health events associated with prescription opioid exposures have been reported.
- Larger mosaic important to understand complex issues like prescription drug misuse

[Click here to view Dr. Green's presentation](#)

NACCT

The North American Congress of Clinical Toxicology (NACCT) met October 11-15, 2017 in Vancouver, British Columbia. NACCT brings together healthcare providers and scientists to share knowledge on a variety of clinical toxicology topics and issues. RADARS System presented a poster at the conference comparing intentional exposure rates between stimulants in poison center data.

[Click here to view the poster](#)

[Click here to view the poster](#)

HAL Conference

Dr. Janetta Iwanicki was an invited speaker at the 4th Human Abuse Liability and Abuse-Deterrent Formulations Conference held in Bethesda, MD on November 6-7, 2017. Dr. Iwanicki's presentation focused on the increasing commonality of nonopioid pharmaceutical drugs being abused. Many are likely to be co-abused with opioids, increasing mortality due to synergistic CNS and respiratory depression. In order to fill the gaps in knowledge on this issue, we need methods for nonopioid pharmaceutical drug surveillance as well as early warning signals for this type of abuse. Dr. Iwanicki also attended a dinner workshop on FDA advisory committee meetings that provided an introduction to the behind-the-scenes work for preparation and success.

RADARS System is launching a new website in the first quarter of 2018. Make sure to bookmark <http://radars.org/> and check back often to see RADARS System updates.

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The Researched Abuse, Diversion and Addiction-Related Surveillance (RADARS®) System is a surveillance system that collects product- and geographically-specific data on abuse, misuse, and diversion of prescription drugs.

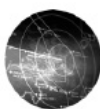
RADARS System News

Join us for the RADARS System 12th Annual Scientific Meeting and International Pre-Symposium May 9-10, 2018, in Washington D.C. Check back for more information!

What is the RADARS System?



Mosaic Surveillance



RADARS System Experts



Scientific Advisory Board

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Services



Post Market Surveillance

The RADARS System aids in development of post-market surveillance studies required to meet regulatory and business needs, including formal study protocols and statistical analysis plans.



Epidemiological Studies

Assistance with development of formal epidemiological study per FDA guidance, FDA Advice Letters and good pharmacovigilance practices.



Publication Strategy

RADARS System experts assist with publication strategy and related communication plans for our clients.



Advisory Board Participation

The RADARS system provides consultation on strategy and risk management approach related to prescription drugs with abuse potential.



Advisory Committee Consultation

RADARS System offers consultation services as clients prepare for U.S. Food and Drug Administration advisory committee meetings.

RADARS® System Offers Wide Range of Services Both Domestically and Internationally

The RADARS® System data have been utilized by manufacturers, regulatory agencies and medical and public health officials to characterize and monitor prescription drug abuse, misuse and diversion.

The data have been presented at several US Food and Drug Administration (FDA) advisory committee meetings and scientific meetings as well as in reports to the FDA, new drug applications, labeling claims, post market requirements, and Risk Evaluation and Mitigation Strategies (REMS) evaluations. Data may also be used for the development of interventions, to assess the impact of interventions and to monitor ever-changing market trends.

The RADARS® System is composed of a mosaic of programs which target diverse populations. Data from these RADARS® System programs are triangulated to provide a comprehensive picture of prescription drug abuse, misuse and diversion. Triangulation is an approach used in many fields of research and is especially useful in the study of hard to reach or hidden populations, such as prescription drug abusers. No single data source is expected to provide complete and representative information about a given population, but when considered together, multiple data sources strengthen the credibility of findings, reduce the risk of false

See services available
through the RADARS® System

interpretations, and provide a more complete and comprehensive perspective on the behaviors of the covert population.

The RADARS® System has helped clients meet pre- and post-market regulatory and business requirements since 2006. These services are customized to meet specific regulatory and business needs and may include but are not limited to the development of studies, formal epidemiological studies including protocol and statistical analysis plan development, quarterly and annual surveillance reports, and ad hoc analyses/reports as requested.

The RADARS® System publishes several articles each year in noteworthy peer-reviewed journals, including the New England Journal of Medicine, JAMA Psychiatry, the Journal of Pediatrics, Drug and Alcohol Dependence and the Clinical Journal of Pain. Further, RADARS® System data are regularly presented at scientific conferences throughout the world.

Take me to a list of domestic services

Take me to a list of international services

