

Mosaic approach for monitoring Healthy People 2020 objectives: A substance abuse surveillance system

Karilynn Rockhill¹, Gabrielle E. Bau¹, Matthew S. Ellis²,
Theodore J. Cicero², Richard Dart¹

¹ Rocky Mountain Poison & Drug Center, Denver Health and Hospital
Authority, Denver, CO ² Department of Psychiatry, Washington University
School of Medicine, St. Louis, MO



Disclosure

The RADARS System is supported by subscriptions from pharmaceutical manufacturers, government, and non-government agencies for surveillance, research, and reporting services. RADARS System is the property of Denver Health and Hospital Authority, a political subdivision of the State of Colorado. Denver Health retains exclusive ownership of all data, databases and systems. Subscribers do not participate in data collection nor do they have access to the raw data.



Background

- **Healthy People 2020 Objectives**

- National 10-year objectives for improving and monitoring the health of all Americans

- **Problem**

- Rapidly changing drug use environment
- Lack of repeatable yet flexible data instruments
 - Able to provide timely data
 - Ability to adapt questions on surveys

- **Need for real time surveillance**

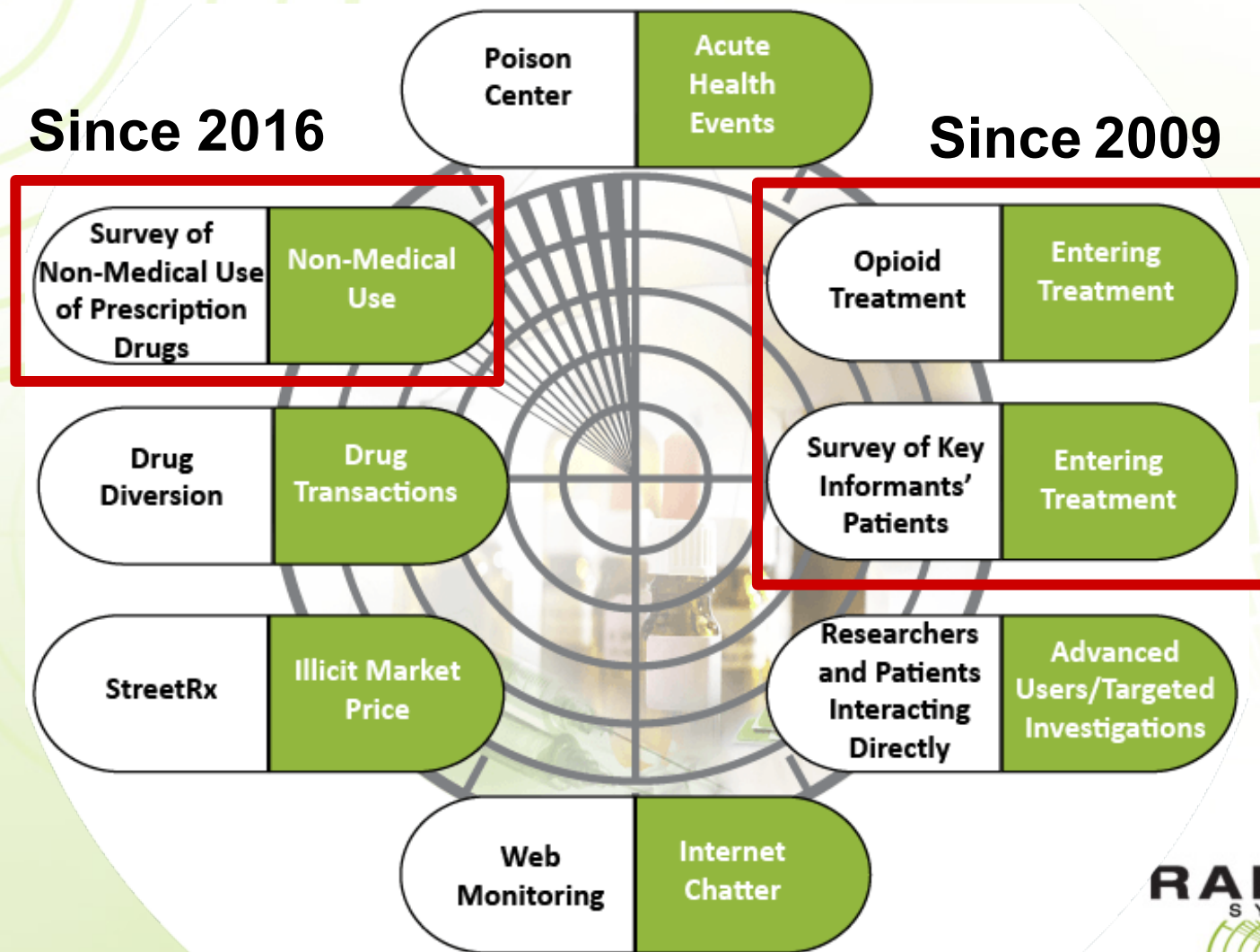
HP 2020: Substance Abuse Objectives

- **SA 7: Increase the number of admissions to substance abuse treatment for injection drug use**
 - Goal of a 10% improvement
- **SA 13.3: Reduce the proportion of adults reporting use of any illicit drug in the past-month**
 - Goal of a 10% reduction
 - Disparities of interest: age, race/ethnicity
- **SA 19: Reduce the past-year non-medical use of prescription drugs**
 - Disparities of interest: age, race/ethnicity, veteran status

Study Objective

- **Provide progress on three indicators using two RADARS® System Data Sources**
 - Treatment Center Programs Combined
 - Survey of Non-Medical Use of Prescription Drugs Program
- **Demonstrate how these data sources can be used to monitor these indicators**

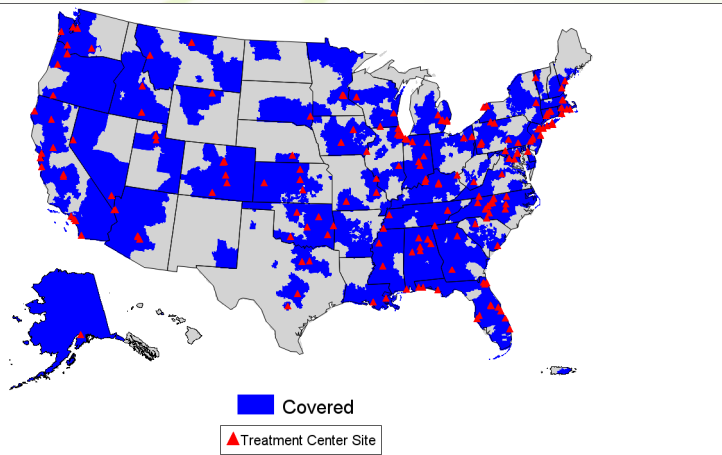
RADARS[®] Surveillance System: Mosaic Approach



Treatment Center Programs Combined: Data Collection Methods

- **Overall Design**

- Newly admitted patients seeking treatment for opioid use disorder
- Two data collection systems combined with a standardized self-administered questionnaire



- **Definition/Type of Cases**

- Past month abuse prevalence and injection rate of prescription opioids, heroin, and non-opioid drugs

Opioid Treatment Program

- Persons entering federally-approved medication-assisted programs
- 71 active programs in 33 states

Survey of Key Informants' Patients Program

- Persons entering primarily private treatment centers
- 125 Key Informants in 45 states

Treatment Center Programs Combined: Analytical Methods



- **Study Period**

- 2011 through 2017

- **Key Measure**

- Report of injection of a drug at time of treatment admission
- Report of use of any illicit drug in the past month (cocaine/crack, methamphetamine [crystal meth], hallucinogens, heroin, or MDMA)



- **Regression**

- Logistic regression with a random intercept on participating centers used to calculate odds ratio of respondents who report injecting a drug in 2017 compared to 2011
- Stratified by age and race/ethnicity

Survey of Non-Medical Use of Prescription Drugs Program: Data Collection Methods



- **Study Design**

- Semi-annual repeated, cross-sectional online survey

- **Population/Sampling**

- General population of adults recruited from a survey panel
- Quota sampling proportional to census region and 50:50 male/female



- **Sample size**

- 63,042 adults in 2017

- **Definition/Type of Cases**

- Non-medical: use of a medication without a doctor's prescription or for any reason other than what was recommended by a doctor
 - Opioids indicated for pain
- Illicit drug use in past month



Survey of Non-Medical Use of Prescription Drugs Program: Analytical Methods

- **Post-stratification Weighting**

- Weights are applied to reflect distribution of adults in the US
 - Census region – NE, MW, S, W
 - Gender
 - Age categories – 10 year categories



- **Prevalence Estimates**

- National estimates and 95% Confidence Intervals (CI)
- Stratified by age, race/ethnicity, veteran status

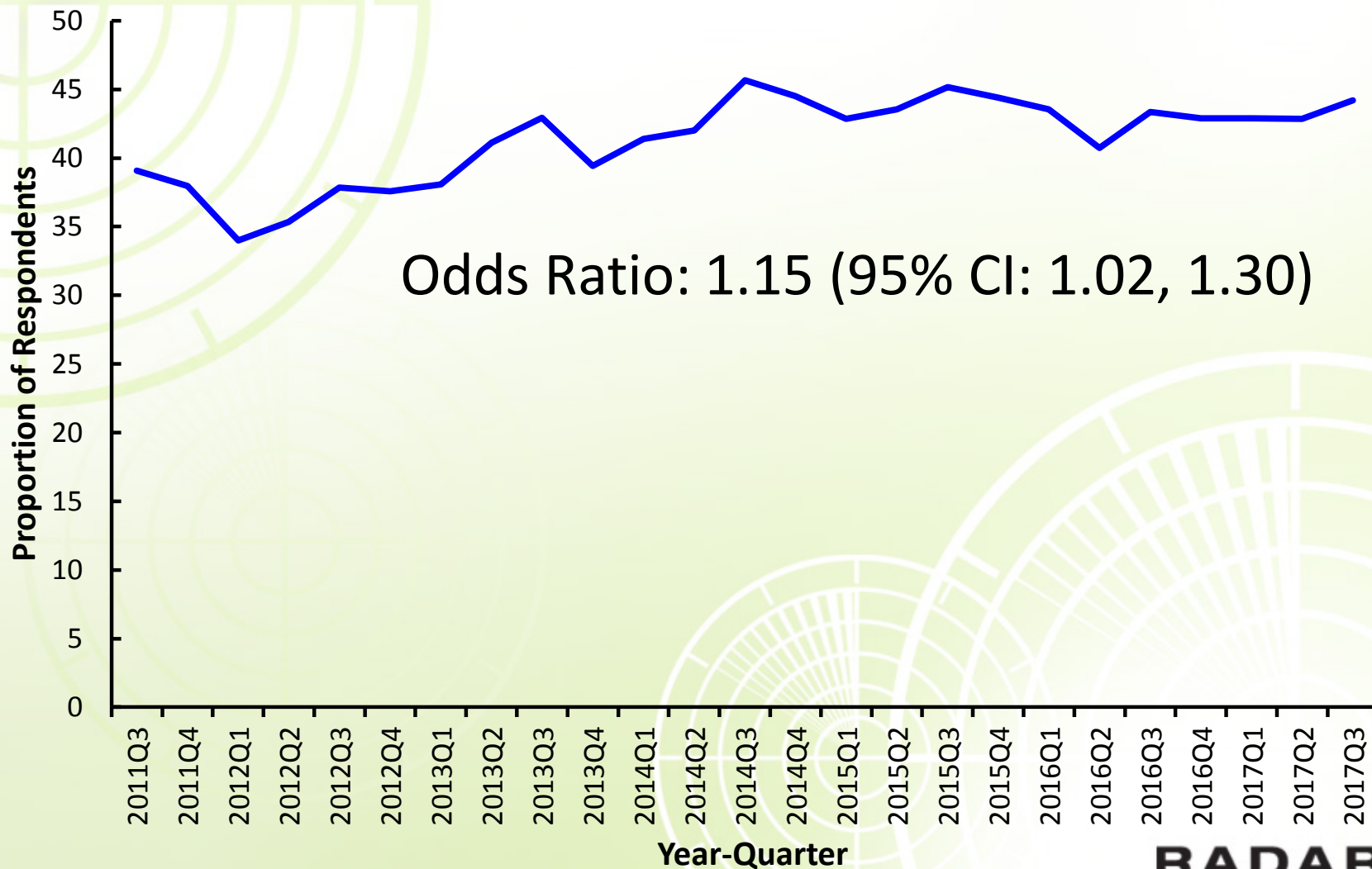


- **Population-Based Rates, State Heat Maps**

- Weighted estimate of the number of adults for each measure per 100,000 adult population

Treatment Center Programs Combined

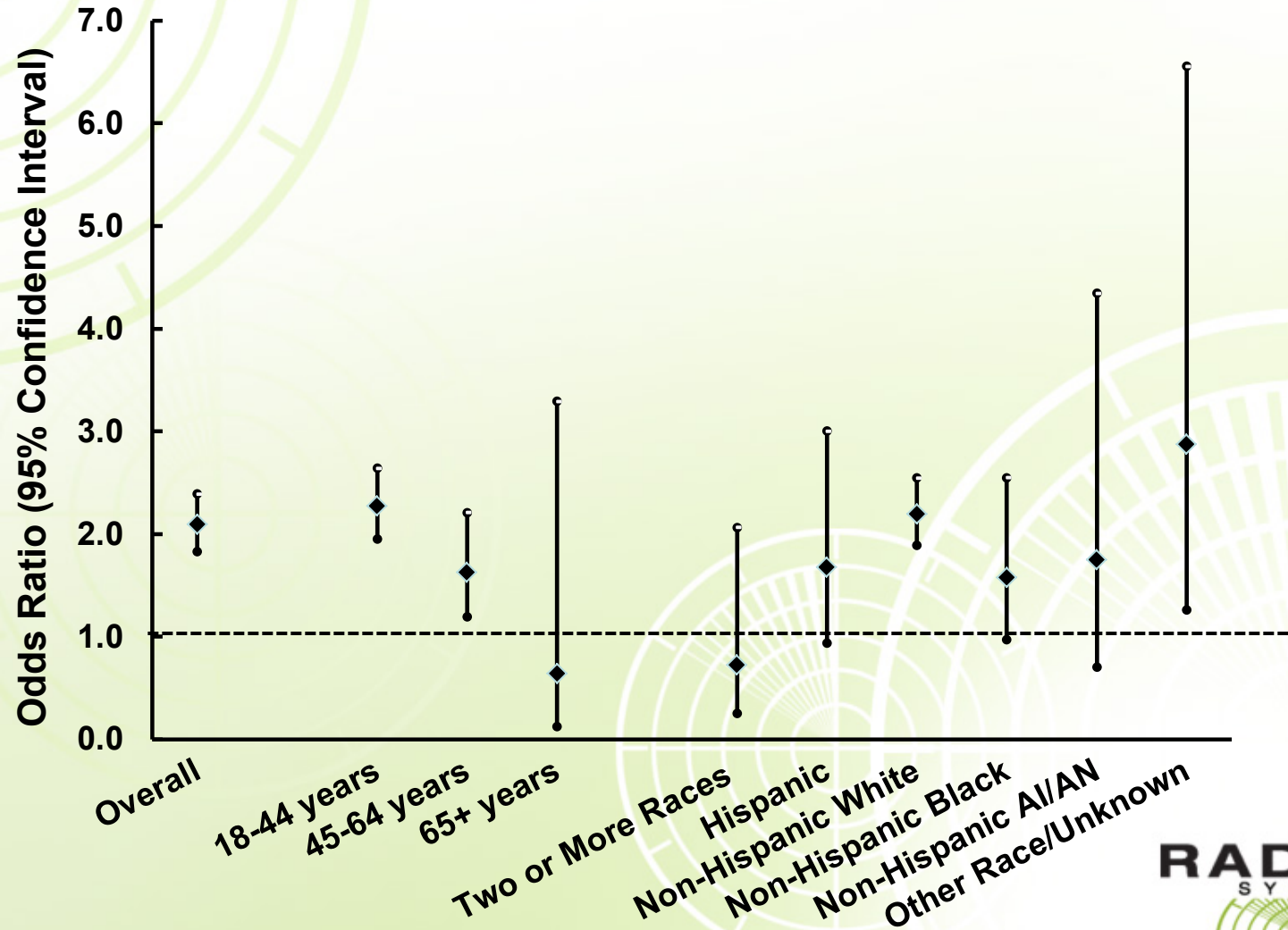
Injection Drug Use in Past Month



SA 7: Increase the number of admissions to substance abuse treatment for injection drug use

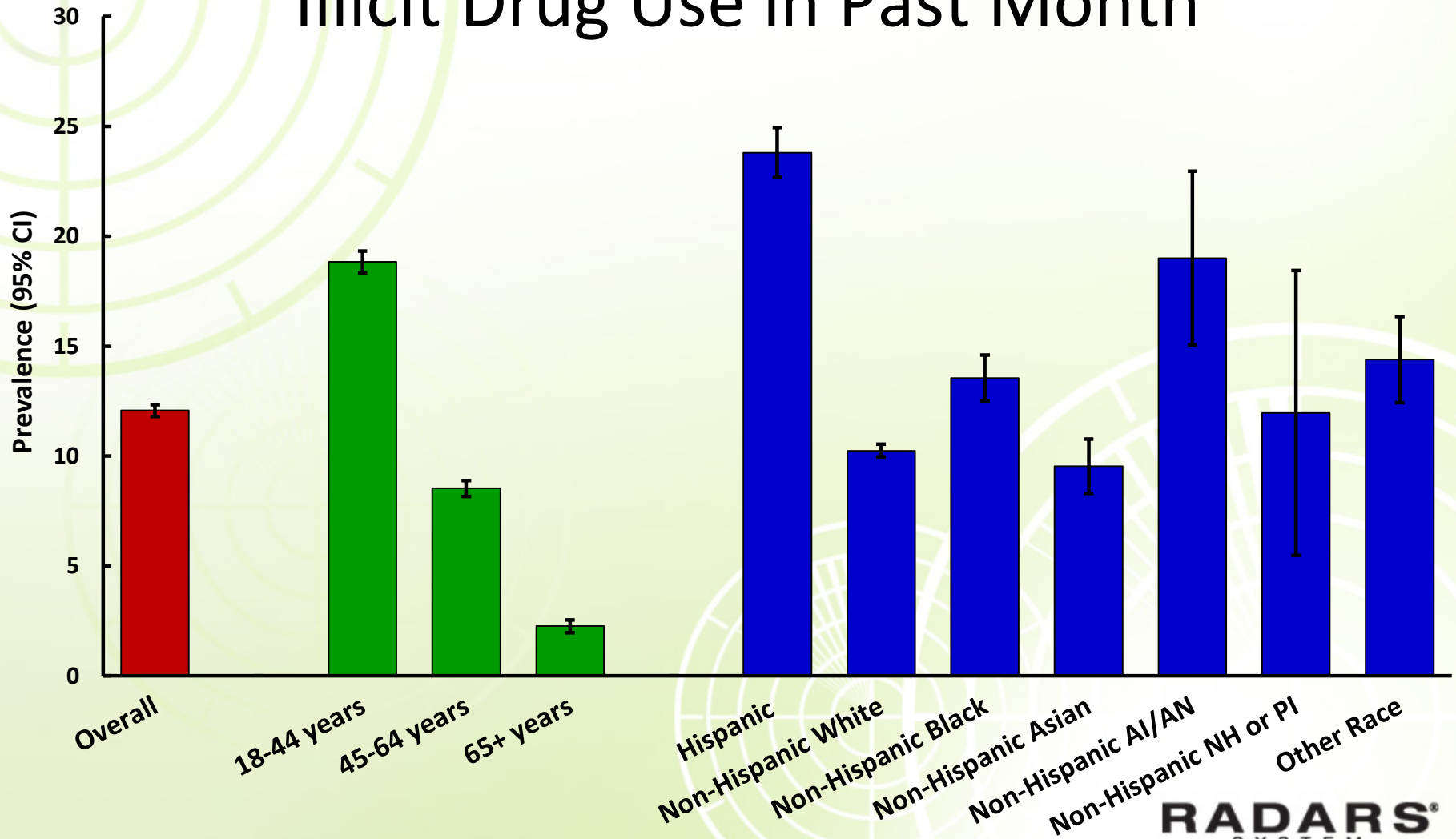
Treatment Center Programs Combined

Change in Odds of Illicit Drug Use 2011 to 2017 in Past Month



Survey of Non-Medical Use of Prescription Drugs Program

2017 National Prevalence of Illicit Drug Use in Past Month

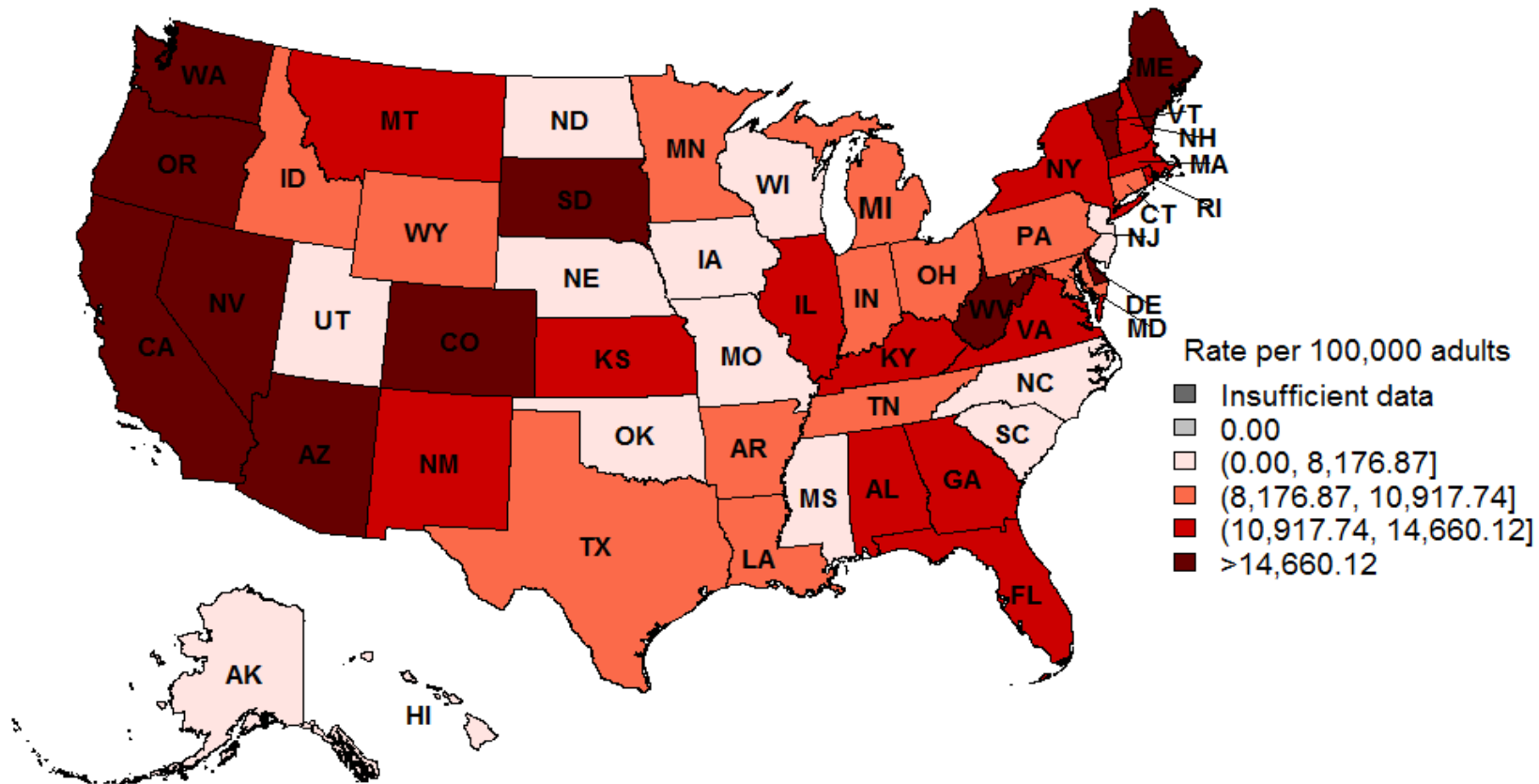


SA 13.3: Reduce the proportion of adults reporting use of any illicit drug in the past-month

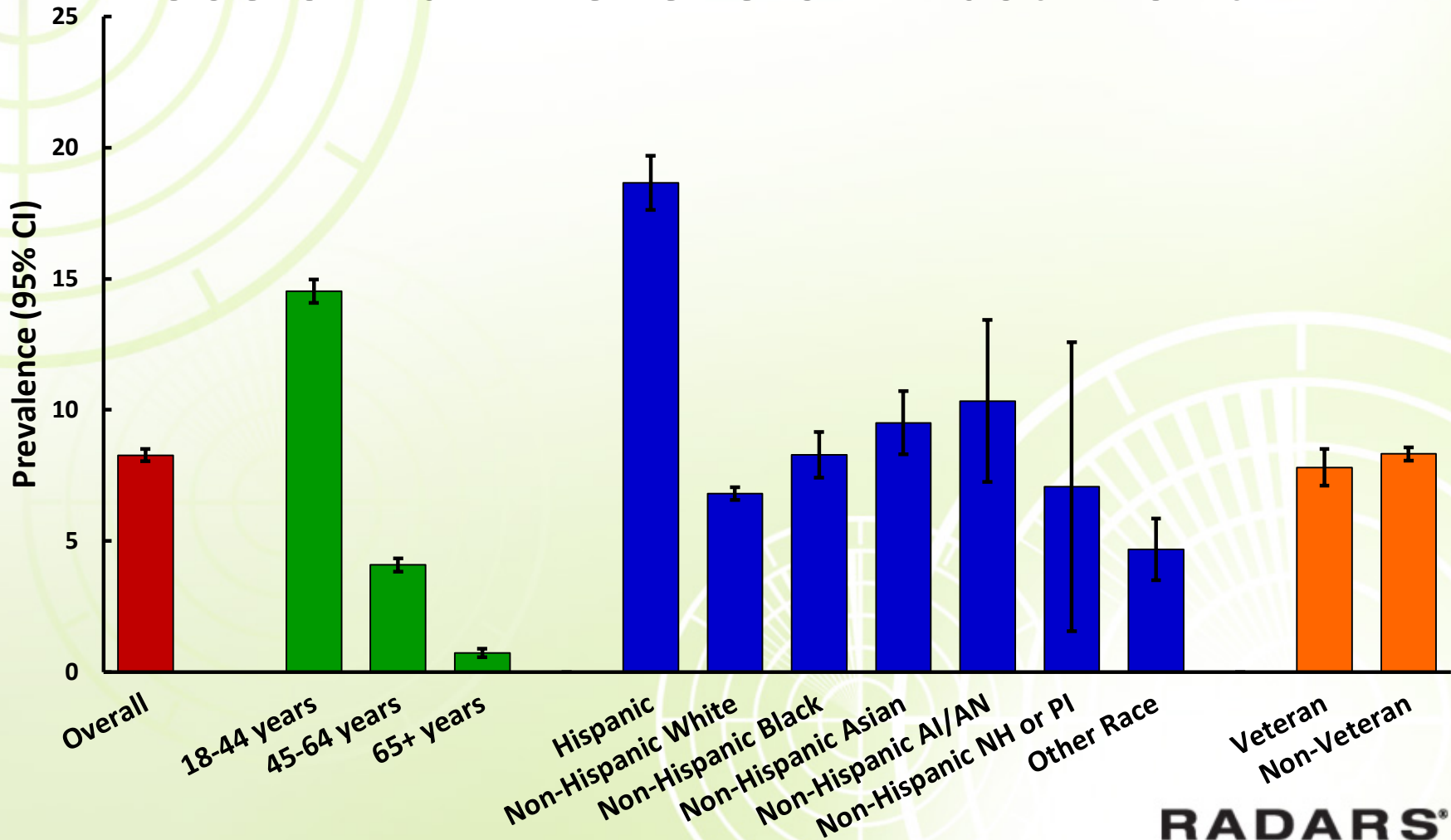
Survey of Non-Medical Use of Prescription Drugs Program

Any Illicit Drug Use Past Month

Population based rates per 100,000 adults



2017 National Prevalence of Non-Medical Use of Pain Relievers in Last Month

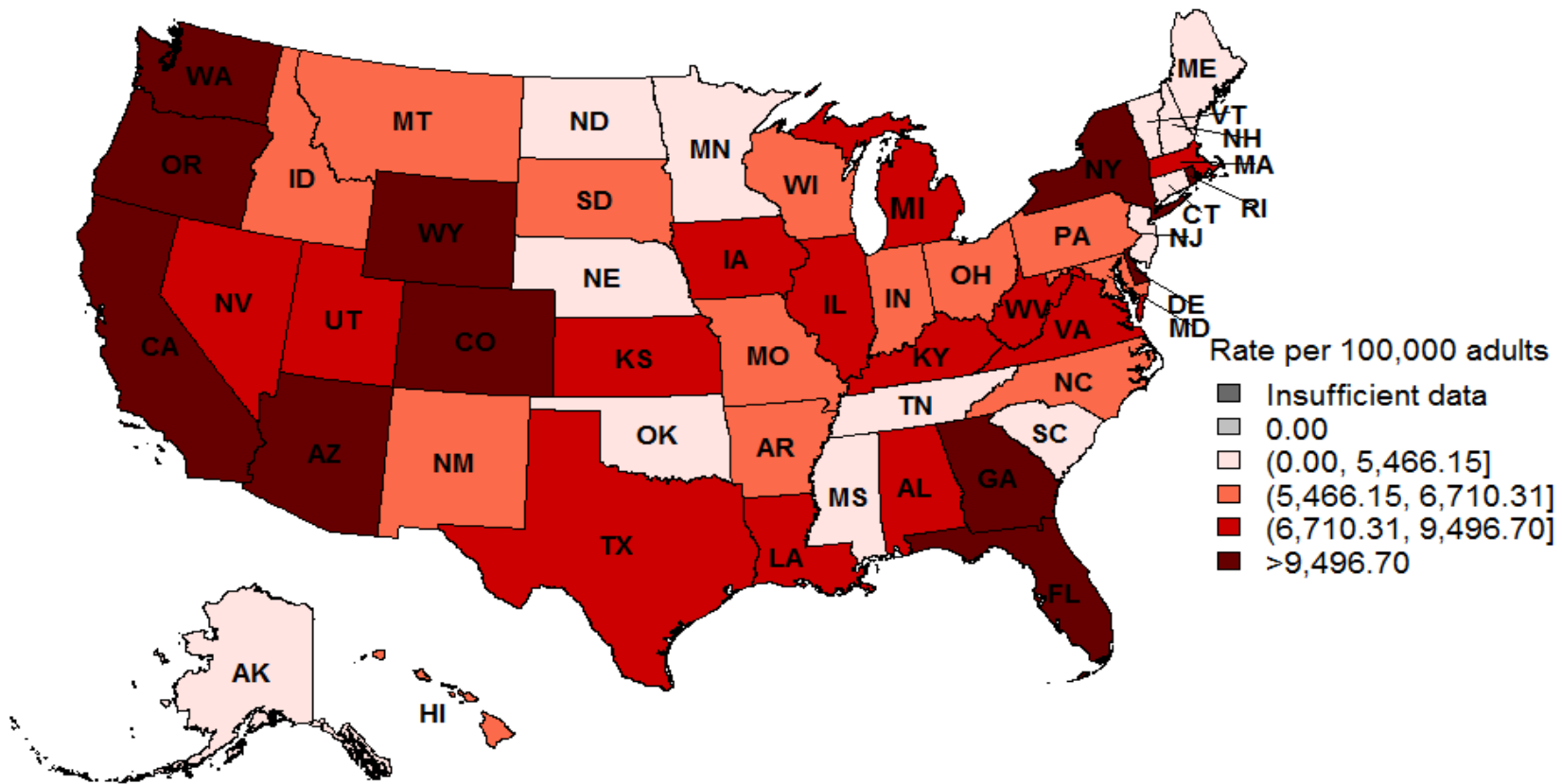


Survey of Non-Medical Use of Prescription Drugs Program

Non-Medical Use of Pain Relievers

Use Past Month

Population based rates per 100,000 adults



Disparities of Interest

- Gender
- Geographic Region
- Age
- Race/Ethnicity
- Income
- Marital Status
- Education
- Student Status
- Veteran Status
- Healthcare Professional Status
- Pregnancy
- Chronic/Acute Pain History
- DAST-10 Score

Conclusions

- **The RADARS System mosaic approach can compliment existing data to evaluate the Heathy People 2020 objectives**
- **Assessing progress on the objectives can be made in near real-time with various RADARS System data**
 - Treatment Center Programs Combined has data dating back to 2009 to assess trends
 - Survey of Non-Medical Use of Prescription Drugs Program began data collection in 2016Q3 and will continue semi-annually

Questions



Karilynn Rockhill, MPH
Biostatistician II

Karilynn.Rockhill@rmpdc.org

303-389-1633

