Evaluating surveillance indicators of prescription and illicit drug use: RADARS® System Survey of Non-Medical Use of Prescription Drugs Program

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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

Problem

- Rapidly changing drug use environment
- Lack of flexible data sources to accommodate change
 - Timeliness
 - Inadequate sample size for state-level analyses
- Need for real time surveillance
- CSTE Indicators 2015
 - The Council of State and Territorial Epidemiologists (CSTE) developed 18 surveillance indicators to monitor substance abuse and mental health.¹



1. Council for State and Territorial Epidemiologists. (2016). Recommended CSTE Surveillance Indicator for Substance Abuse & Mental Health. Retrieved from http://c.ymcdn.com/sites/www.cste.org/resource/resmgr/CrossCuttingI/Recommended_CSTE_Surveillanc.pdf

CSTE Indicators: Other Drugs

- Indicator 9: Drug or alcohol dependence or abuse in the last year — summary
 - Marijuana/hashish, cocaine (including crack), heroin, hallucinogens, inhalants, and methamphetamines, and non-medical use of prescription pain relievers, tranquilizers, stimulants, or sedatives
 - Identified data source: National Survey of Drug Use and Health
- Indicator 10: Prevalence of use of selected prescription and illicit drugs
 - Past month use: any illicit drug, marijuana, illicit drugs other than marijuana
 - Past year: marijuana, cocaine, non-medical use of pain relievers
 - Identified data Source: National Survey of Drug Use and Health



Objective

 Utilize NMURx data to report national prevalence estimates aligned with CSTE monitoring indicators 9 and 10.

 Demonstrate how NMURx can be used to monitor these state-based surveillance indicators.



NMURx Program: Methods



Study Design

Semi-annual repeated, cross-sectional online survey

Population/Sampling

- General population of adults
- Recruitment: survey panels
- Quota sampling proportional to census region and 50:50 male/female



Sample size

30,000/launch in the US twice a year



- Non-medical: use of a medication without a doctor's prescription or for any reason other than what was recommended by a doctor.
- Prescription drugs: opioids indicated for pain, sedatives, stimulants, tranquilizers





Analytical Methods



Post-stratification Weighting

- Weights are applied to reflect distribution of adults in the US
 - Census region (Northeast, Midwest, South, West)
 - Gender
 - Age categories (18-24, 25-34, 35-44, 45-54, 55-64, 65+)



Prevalence Estimates

- National estimates and 95% Confidence Intervals (CI)
- Stratified by census region



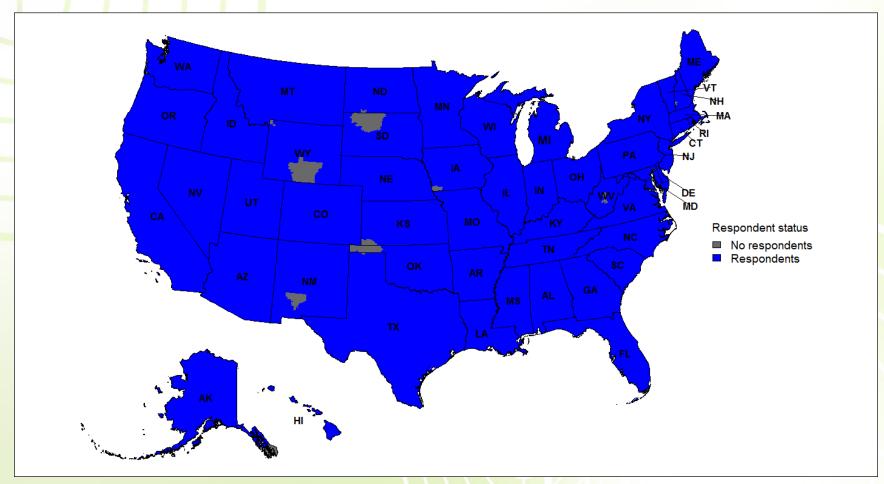
Population-Based Rates Heat Maps

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





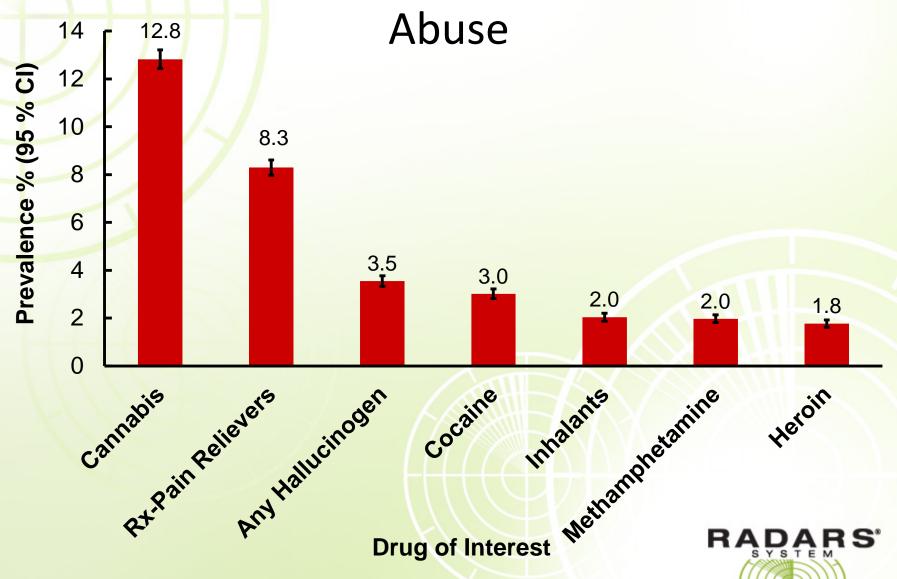
3rd Quarter 2017



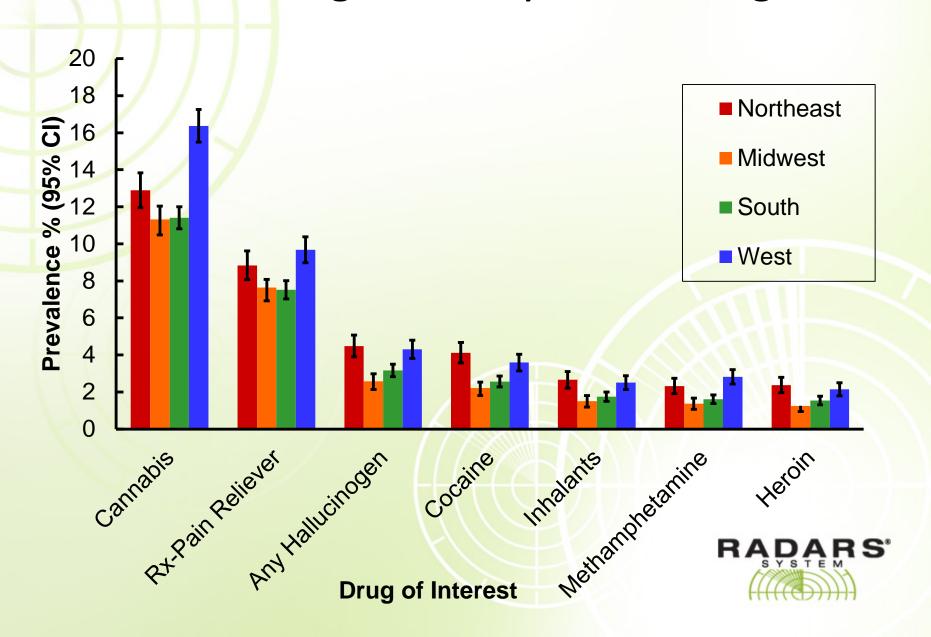
30,010 surveys
Representing 249,485,228 adults



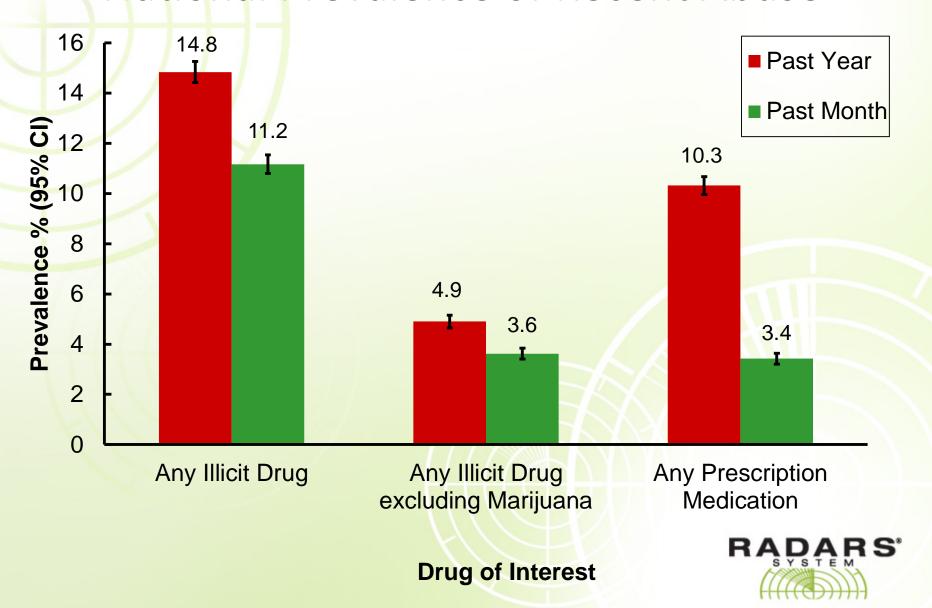
National Prevalence of Past Year Drug



Past Year Drug Abuse by Census Region

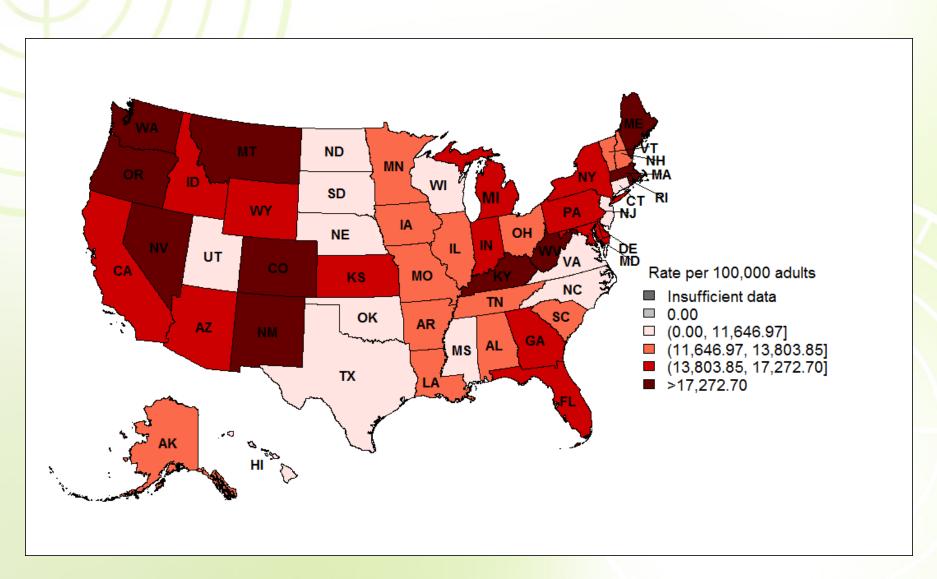


National Prevalence of Recent Abuse



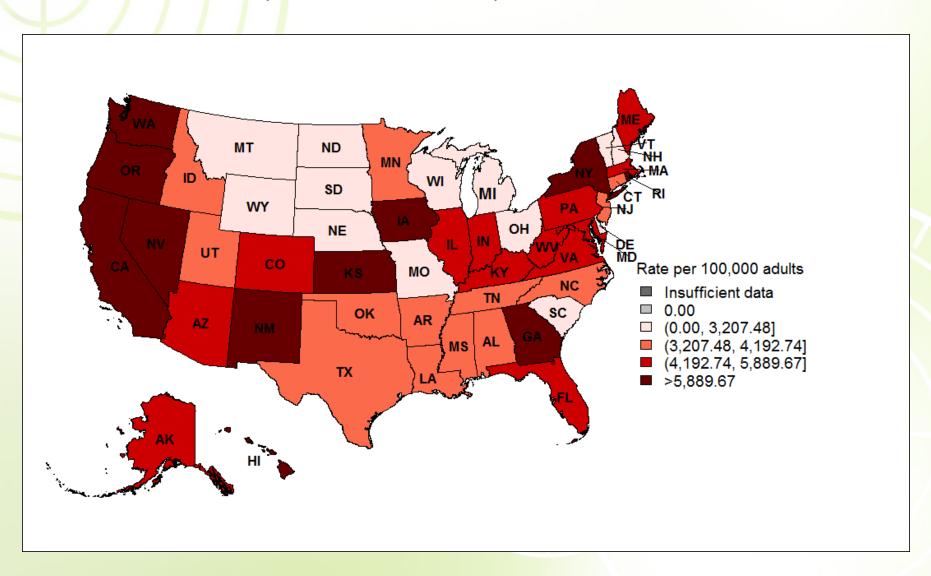
Any Illicit Drug Use Past Year

Population based rates per 100,000 adults



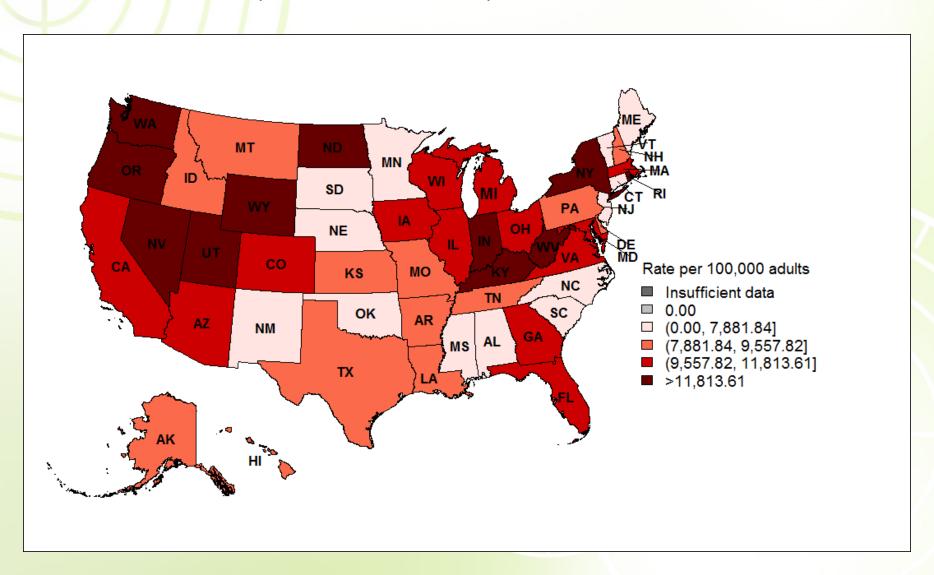
Any Illicit Drug Use exc. Marijuana Past Year

Population based rates per 100,000 adults



Any Rx-Medication Nonmedical Use Past Year

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



- Prescription drug nonmedical use remains more common than use of individual illicit substances, except marijuana.
- A future use of this program is to allow state representatives the opportunity to query NMURx data.
 - National- and state-level surveillance possibilities.
 - Timely, semiannual, and various disparities of interest.



Questions



