SUBSTANCE ABUSE PREVENTION AND CONTROL **Medical Director's Brief**



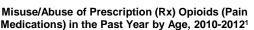
Rx Opioid Misuse/abuse and Consequences

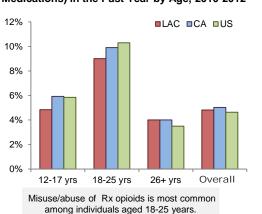
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Prevalence

Opioids as a Gateway Drug

Rx Opioid Sources





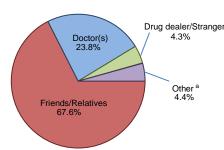
1 in 5 started illicit drug use with prescription drugs²



4 in 5 new heroin users had previously misused Rx opioids3



Individuals who misused /abused Rx opioids were more likely to use other illicit drugs in their lifetime4. Source of Rx Opioids Among Past Year Misuser/Abusers, 2012-20134

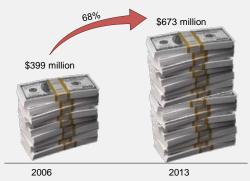


a Bought on internet, wrote fake prescription, stole from doctor's office, clinic, hospital, or pharmacy, or some other way

Most misuser/abusers obtained their Rx opioids from a friend or relative.

Economic Costs

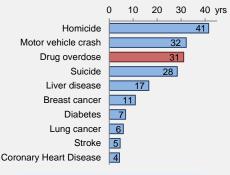
Total Annual Charges for All Rx Opioid-related Hospitalizations in LAC5



The economic burden of Rx opioid misuse/abuse is increasing.

Average years of potential life lost

by underlying cause of death in LAC, 20116

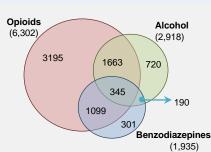


Individuals who died from drug overdose died an average of 31 years prematurely

Deaths

Rx Opioid-related Deaths in LAC, 2006-20137

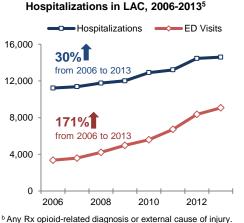
Nearly 400 deaths involved Rx opioids each year.



Most opioid-related deaths also tested positive for multiple substances.7

Healthcare Utilization

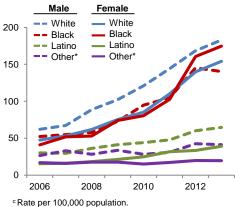
Rx Opioid-related^a ED Visits and



Healthcare utilization among Rx opioid

misusers/abusers greatly increased in recent years.

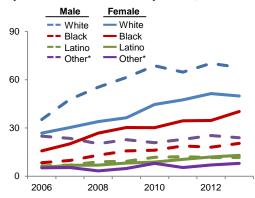
Rx Opioid-related^b ED Visit Rates^c by Gender and Race/Ethnicity in LAC, 2006-20135



Rx opioid-related ED visits increased among whites and African Americans, especially for African American women.

Treatment Admissions

Rate^c of Rx Opioids as Primary Drug of Choice by Gender and Race/Ethnicity in LAC, 2006-20138



*Native American, Asian, Pacific Islander, other, unknown,

Treatment admission for Rx opioids increased. Whites accounted for a majority of Rx opioid treatment admissions.

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Rx Opioid Misuse/abuse and Consequences

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Prevalence

Opioids as a Gateway Drug

Rx Opioid Sources

- According to the National Survey on Drug Use and Health¹, the prevalence rate of misusing/abusing opioids (prescription [Rx] pain medications) in the past year in Los Angeles County (LAC) is 4.8%, which is higher than the national average (4.5%), and lower than the California (CA) state average (4.9%) in 2010-2012.
- Misuse/abuse of Rx opioids in LAC (9.0%), CA (9.9%), and the US (10.3%) is most common among individuals aged 18-25 years.
- LAC has lower rates of Rx opioid misuse/abuse among youths (4.8%) and young adults (9.0%) compared to CA (youths 5.9%, young adults 9.9%) and US (youths 5.9%, young adults 10.3%) averages.

- About 1 in 5 (20.6%) individuals aged 12 or older who started using illicit drugs in the past year in the US reported that their first drug was Rx opioids².
- Among new heroin users in the US, about 4 in 5 (79.5%) reported misusing/abusing Rx opioids before starting their heroin use³.
- Compared to those who have never misused/abused Rx opioids, those who misused/abused Rx opioids had a greater risk of using other illicit drugs, including marijuana (2.1 times more likely), cocaine (4.5 times more likely), inhalants (5.6 times more likely), and heroin (9 times more likely) during their lifetimes⁴.
- Among individuals who misused/abused Rx opioid in the past year, most (67.6%) had obtained Rx opioids from their friends or relatives, 23.6% were prescribed Rx opioids from one (21.2%) or more than one doctor (2.6%), 4.3% bought them from a drug dealer or stranger, 0.1% bought them on the internet, and 4.3% had written a fake prescription, stole from a doctor's office, clinic, hospital, or pharmacy, or by some other way.
- Up to 2012, approximately 42 tons of unwanted or expired prescription drugs were turned in to the Drug Enforcement Administration (DEA)'s drug take back sites or Sheriff's Department Safe Drug Drop Off boxes in LAC9.

Economic Costs

• According to the Office of Statewide Health Planning and Development data, the sum of hospital charges for all hospitalizations with any Rx opioid-related diagnosis or external cause of injury at hospital discharge significantly (p_{trend}<0.01) increased by 68% from 2006 (\$399 million) to 2013 (\$673 million)⁵. All costs are adjusted for inflation to 2015 US dollars.

Deaths

- According to underlying cause of death data, premature death (death before age 75) from drug overdoses accounted for 18,204 years of potential life lost in LAC in 2011. On average, individuals who died from drug overdoses died 31 years prematurey⁶.
- According to LAC Coroner data, nearly 400 deaths (ranging 360-469) tested positive for Rx opioids at death each year in LAC. Rx opioids are involved in about 60% of all drug-related deaths from 2006-2012 in LAC⁷.
- Many drug-related deaths tested positive for multiple substances, indicating that multiple drug use is common in LAC. Almost half of deaths testing positive for Rx opioids also tested positive for alcohol, benzodiazepines, or both substances at death⁷.

Healthcare Utilization

- In LAC, the number of hospitalizations with any Rx opioid-related diagnosis or external cause of injury significantly (p_{trend} <0.01) increased by 30% from 2006 (11,230) to 2013 (14,594)⁵.
- \bullet The number of emergency department (ED) visits with any Rx opioid-related diagnosis or external cause of injury significantly (p_{trend}<0.01) increased by 171% from 2006 (3,354) to 2013 (9,075)⁵.
- The rate of Rx opioid-related ED visits per 100,000 population increased for white and African Americans, and increased most rapidly among African American women⁵.

Treatment Admissions

- According to the Los Angeles County Participant Reporting System (LACPRS) data, the number of individuals admitted to a publicly funded treatment programs for Rx opioids as their primary drug of choice in LAC significantly (p_{trend}<0.01) increased by 86% from 1,490 in 2006 to 2,766 in 2013⁸.
- Whites had the highest rate of treatment admissions for Rx opioids as the primary drug of choice from 2006-2013, followed by African American females.
- 1. Substance Abuse and Mental Health Services Administration. National Surveys on Drug Use and Health 2013, 2010-2012 averages. http://archive.samhsa.gov/data/NSDUH/substate2k12/ExcelTabs/NSDUHsubstateTOC2012.htm
- 2. Substance Abuse and Mental Health Services Administration. National Surveys on Drug Use and Health 2013. Results from the 2013 NSDUH: Summary of National Findings.
- 3. Substance Abuse and Mental Health Services Administration. Center for Behavioral Health Statistics and Quality Data Review. Associations of Nonmedical Pain Reliever Use and Initiation of Heroin Use in the United States. Aug 2013. http://www.samhsa.gov/data/sites/default/files/DR006/DR006/nonmedical-pain-reliever-use-2013.htm
- 4. Substance Abuse and Mental Health Data Archive. Substance Abuse and Mental Health Services Administration. National Surveys on Drug Use and Health 2013. http://www.icpsr.umich.edu/icpsrweb/SAMHDA/studies/35509/datasets/1/sdaxml
- 5. Emergency Department and Inpatient Discharge Data Set. Office of Statewide Health Planning and Development. California Department of Public Health. Costs are adjusted for inflation to 2015 US dollars.
- 6. Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology. Mortality in Los Angeles County 2011: Leading causes of death and premature death with trends for 2002-2011. August 2014.7. Los Angeles County Coroner Data, Drug Related Death Surveillance System, Injury and Violence Prevention Program.
- 7. Los Angeles County Coroner Data, Drug Related Death Surveillance System, Injury and Violence Prevention Program.
- 8. Los Angeles County Participant Reporting System. Substance Abuse Prevention and Control, Los Angeles County Dept. of Public Health.
- 9. Drug Enforcement Administration (DEA) Los Angeles Field Division (LAFD) and Los Angeles County Sheriff's Department, 2010-2012.

For treatment in LAC, call (888)742-7900 during normal business hours, or call 211.