

Prescription Opioid Overdose in Oregon: A public health perspective



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Death rates in white, middle-aged Americans

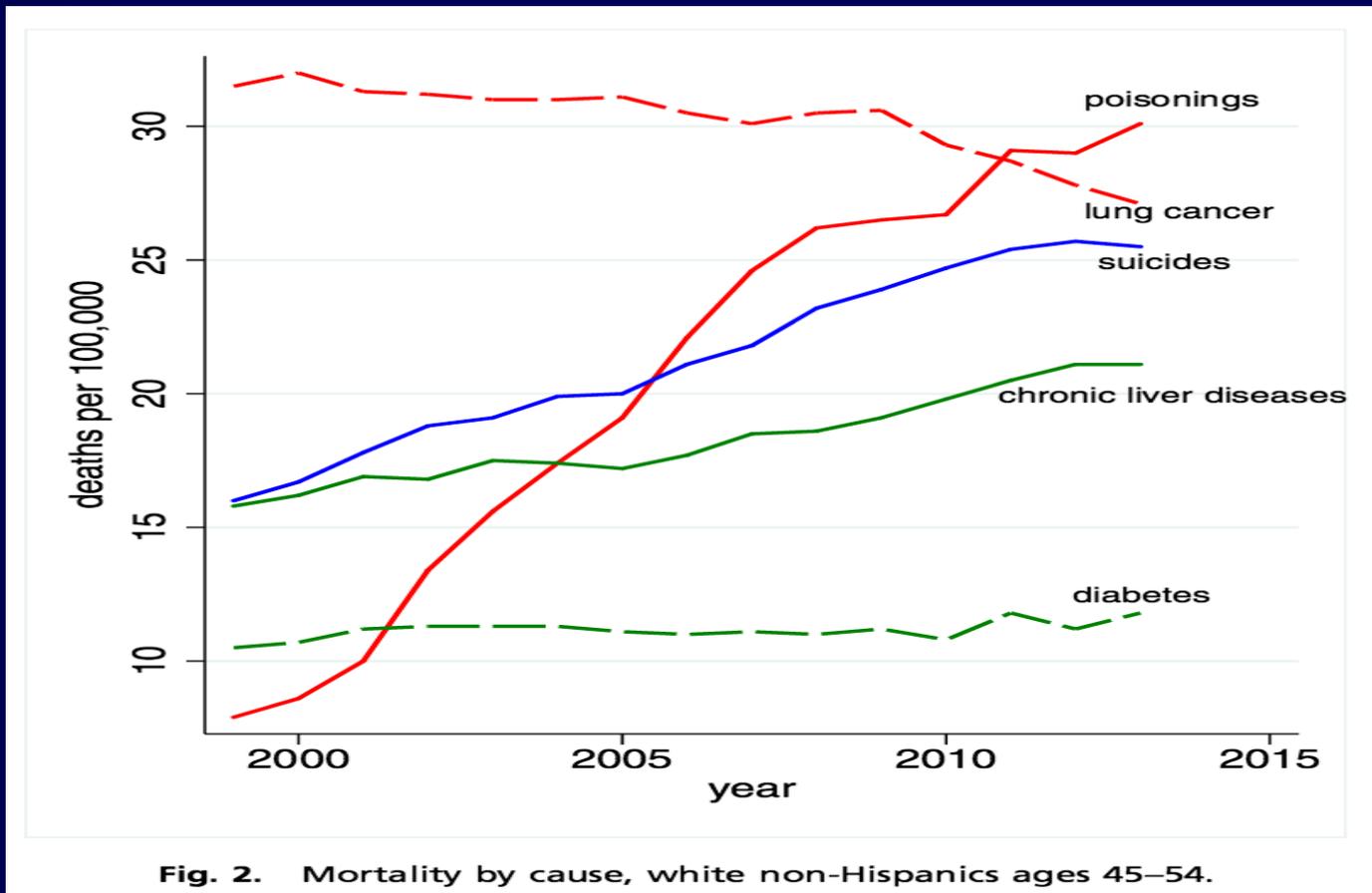
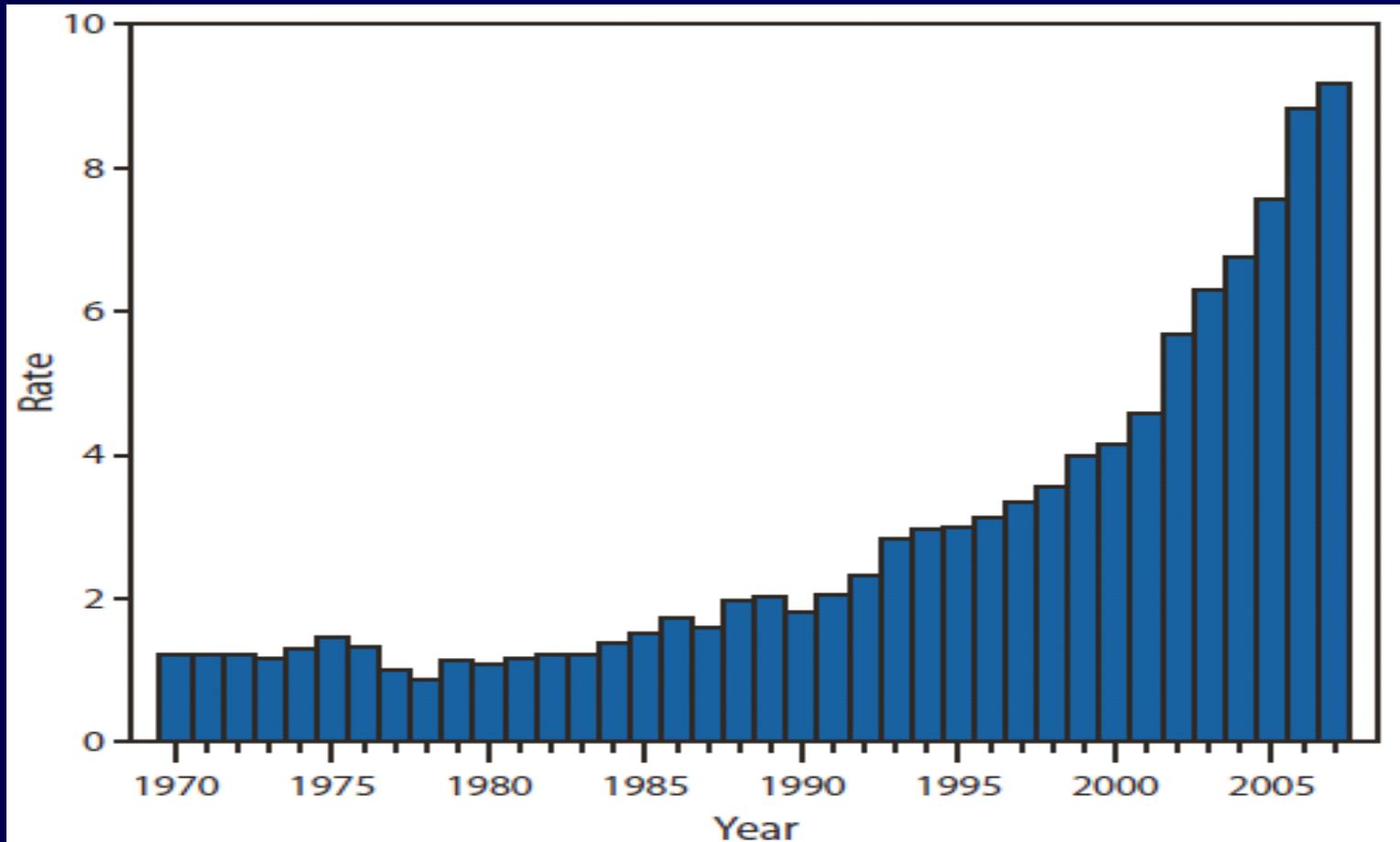
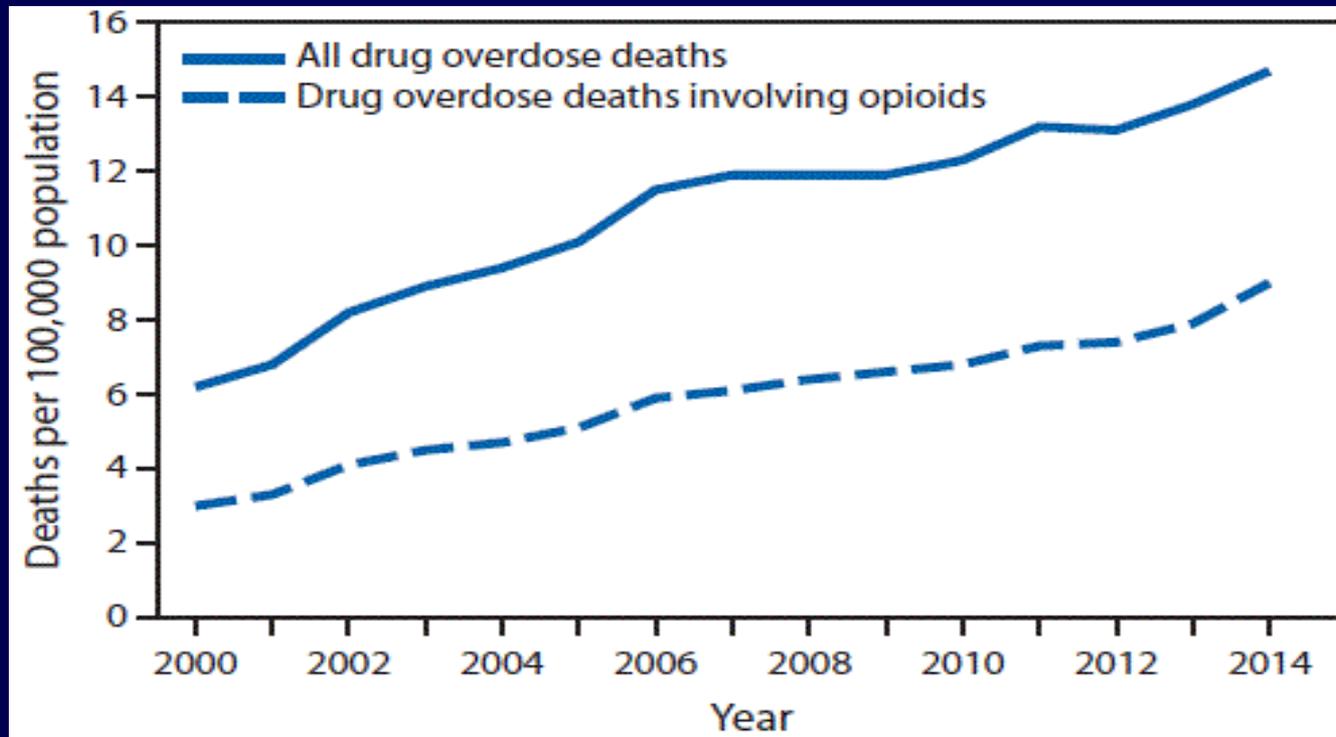


Fig. 2. Mortality by cause, white non-Hispanics ages 45-54.

Unintentional Drug Overdose Deaths--US



Drug overdose deaths in US; 2000-2014



2014: 47,055 drug overdose deaths (100 per day);
28,647 (60%) involved opioids



More than
40
 PEOPLE

die every day from overdoses involving **prescription opioids.**



At least
HALF



of all opioid overdose deaths involve a **prescription opioid.**

Amount prescribed in US

- 2012: 259 million prescriptions for opioid pain medications

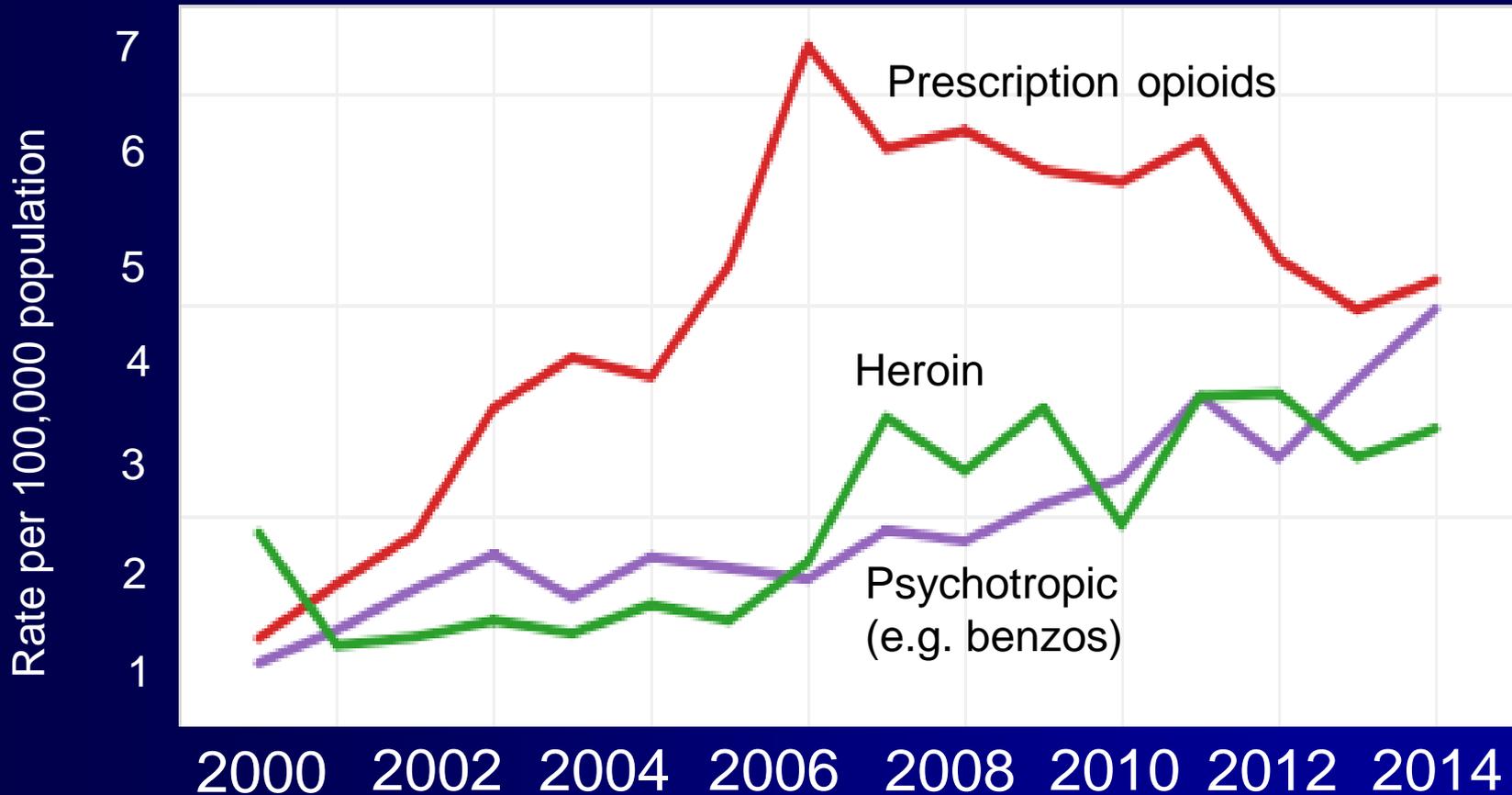
⇒ Enough for every adult in US to have a bottle of pills

- Opioid dependency
 - 2013: 1.9 million persons diagnosed

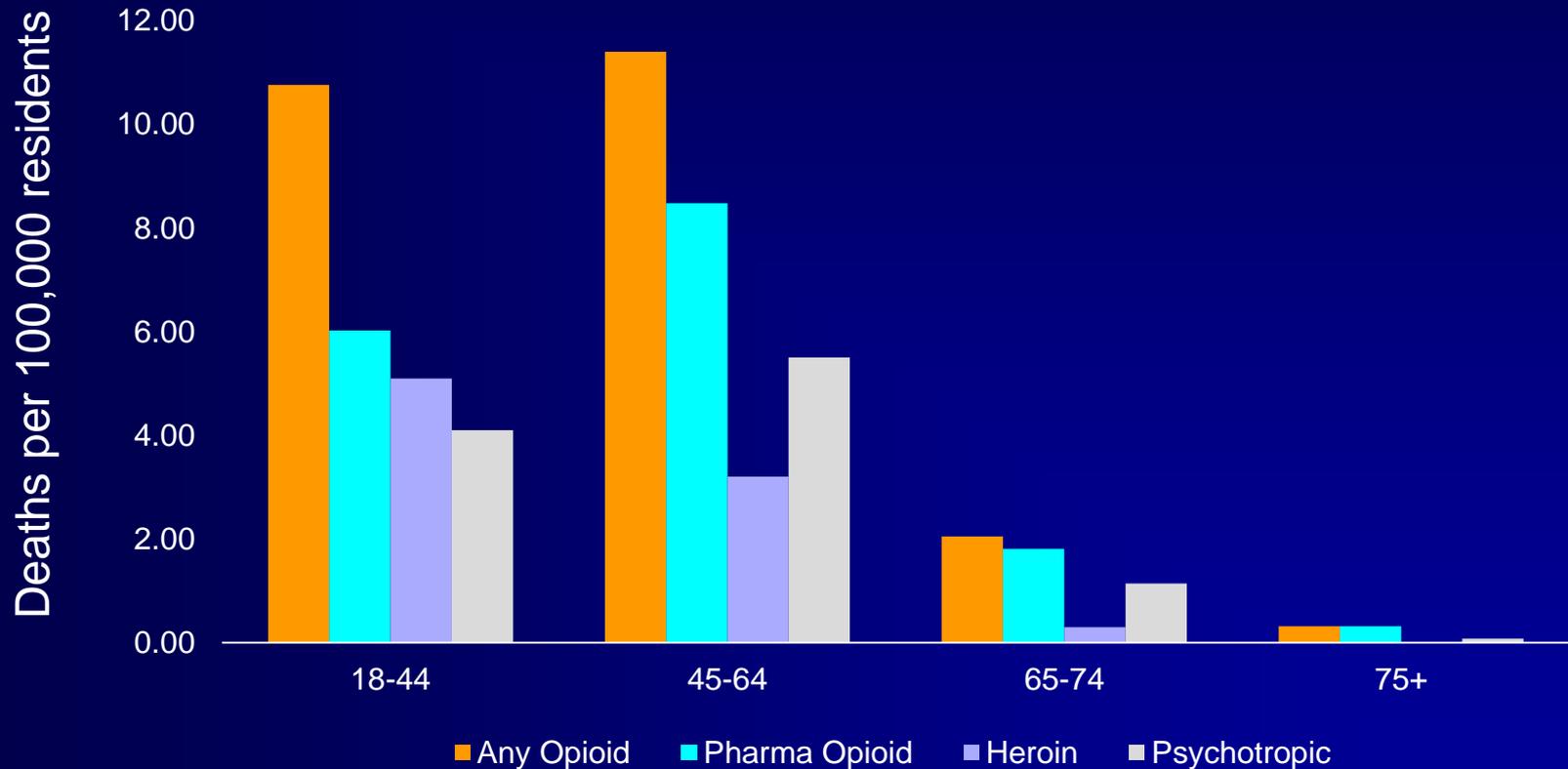
Oregon Prescription Opioids: The Problem

- **Deaths in 2014**
 - 154 Oregonians died (prescription opioids)
- **Hospitalizations in 2013**
 - 330 Oregonians hospitalized
 - Cost of care was \$9.1 million
 - 4,300 hospitalized patients had opioid use disorder

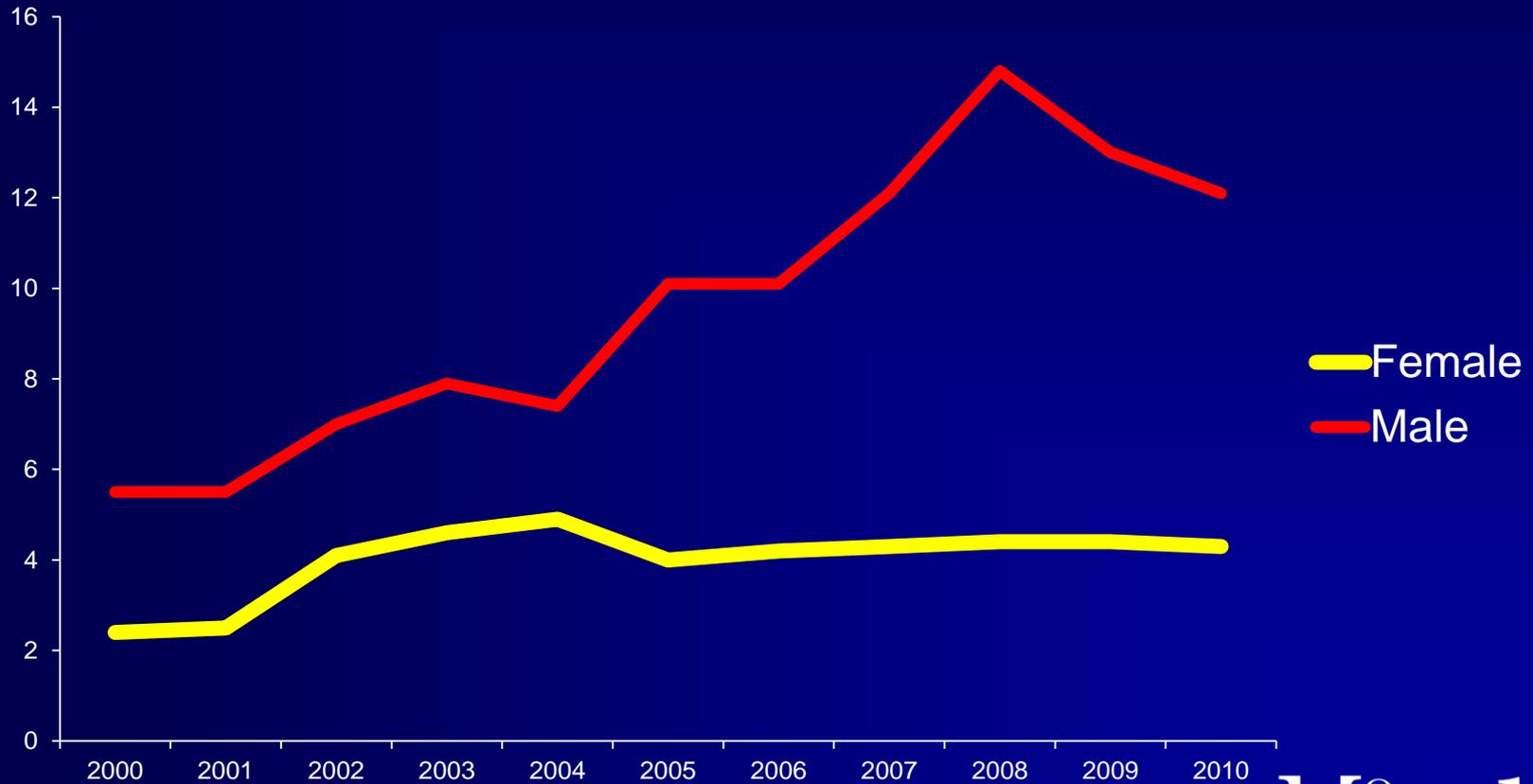
Drug overdose deaths, Oregon 2000-2014



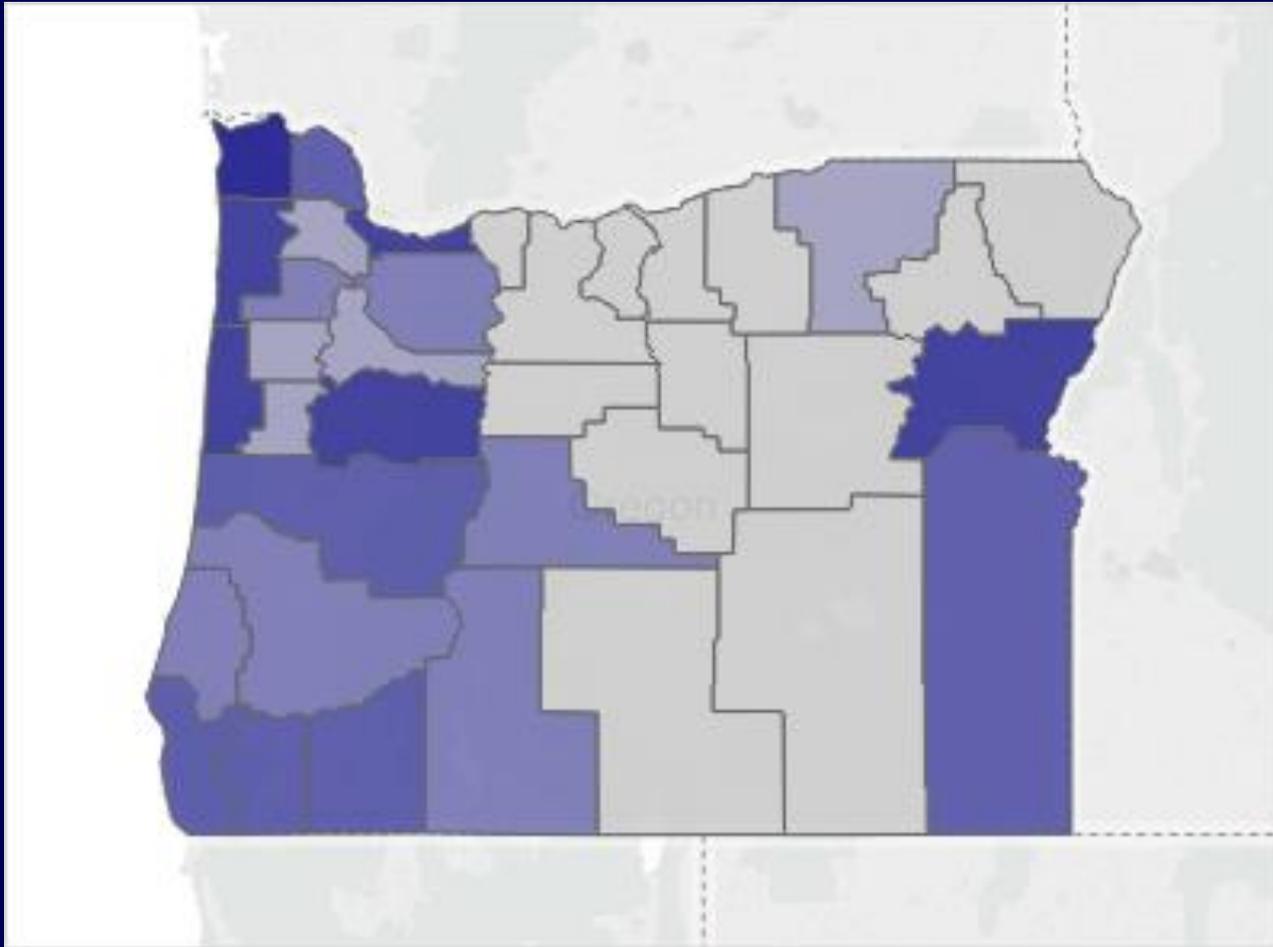
Drug Overdose Deaths by Age, Oregon 2010-2014



Oregon Overdose Deaths by Sex



Opioid Overdose Deaths: 2010-14



Risk Groups for Opioid Overdose Deaths

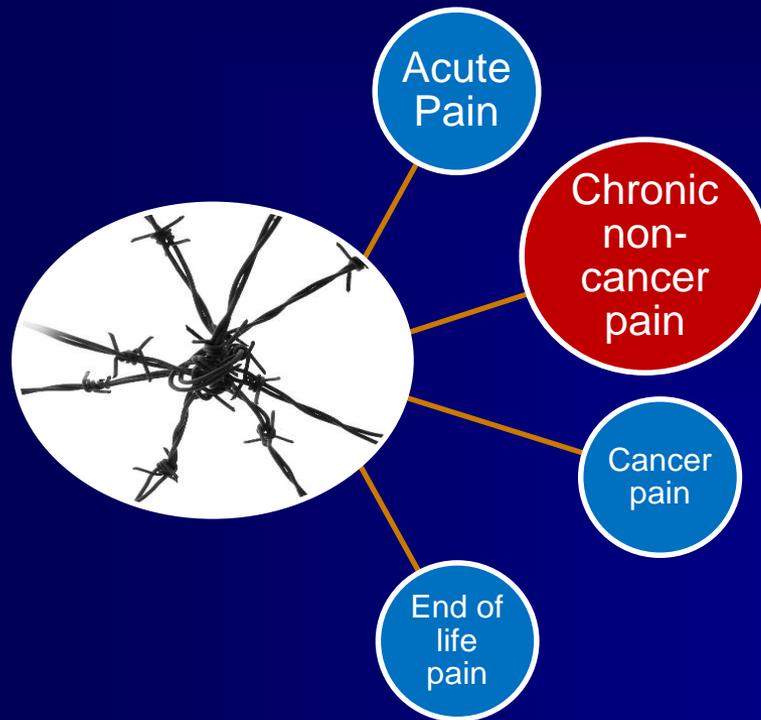
- Men > women
- Ages: 25-55 years
- White > black, Latino
- Poor, rural > higher SES, urban
- Pre-existing mental health issues

Pain Medication Misuse

- Oregon: in top 5 US states for nonmedical use of prescription painkillers*
 - 4.7% of persons ≥ 12 years
 - 5.3% of persons 12-17 years
 - 9.1% of persons 18-25 years

*SAMHSA- 2013-14 National Survey on Drug Use and Health

Pain Categories



- Pain lasting > 3 months/ past time of tissue healing
- ~15% of US adults

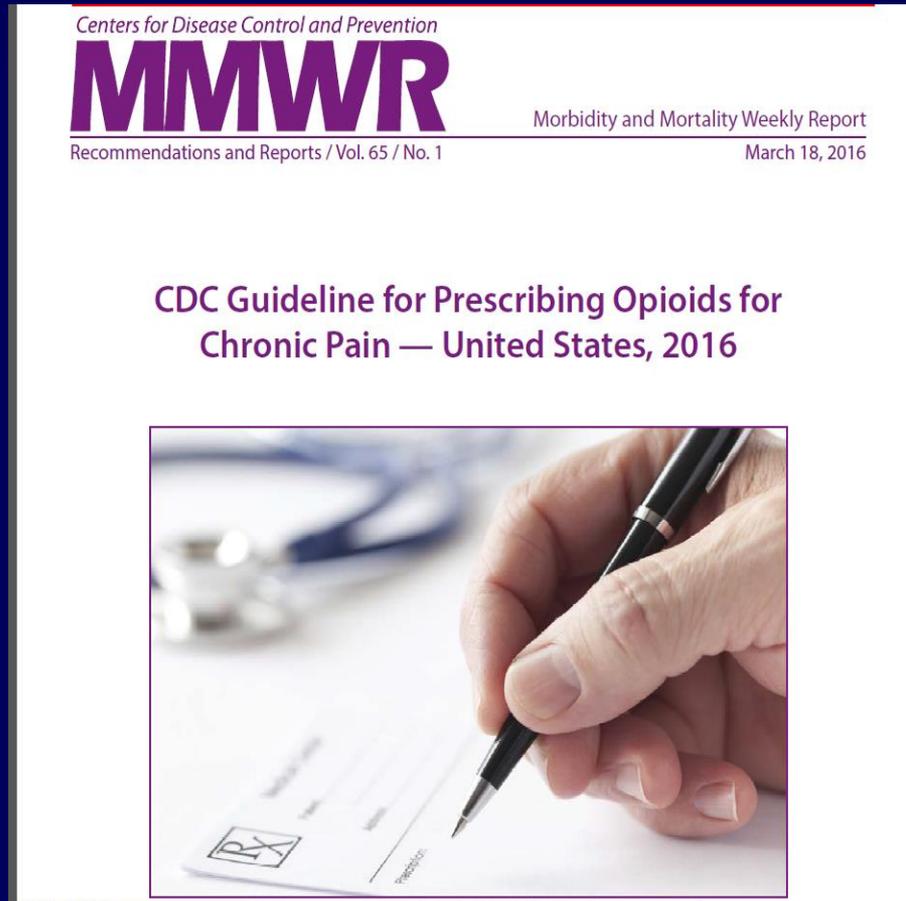
Spectrum of Interventions

- Decrease amount of opioids prescribed
- Increase availability of naloxone rescue for overdoses
- Ensure availability of treatment of opioid misuse disorder
- Use data to target and evaluation interventions

Limit Amount of Opioids Prescribed

- Implement Opioid Prescribing Guidelines for Pain Management
- Use Prescription Drug Monitoring Program to Assess
- Provide reimbursement for non-opioid pain treatment therapies
- Increase drug take-back availability

CDC Prescribing Guideline



Opioid Prescribing Recommendations (1)

- **When to initiate / continue opioid for chronic pain**
 - Alternative pain treatment options preferred
 - Treatment goals for pain and function
 - Discuss risks and benefits of opioid treatment

Opioid Prescribing Recommendations (2)

- **Opioid selection, dosage, duration, follow up, discontinuation**
 - Immediate release opioids rather than extended release
 - low initial dose; max 90 mg daily morphine equivalent dose (MED); <3 days if possible
 - methods for discontinuing opioids (e.g., taper, referrals to substance use Rx)

Opioid Prescribing Recommendations (3)

- **Risk assessment / addressing harms**
 - physical exam, patient history: pain, medical, family/social
 - PDMP to monitor prescribing / dispensing
 - pain treatment agreements; document progress
 - limit co-prescribing opioids, benzodiazepines, sedatives
 - access to medication assisted therapy

Oregon Opioid Prescribing Guidelines Task Force

- Endorse CDC guideline as the foundation for opioid prescribing in OR
- Oregon-specific addenda: marijuana use; chronic patients (consultation/documentation); MAT; naloxone
- Implementation/ communication strategies and plans

Oregon Prescription Drug Monitoring Program (PDMP)

“...establish and maintain a prescription monitoring program for monitoring and reporting prescription drugs dispensed by pharmacies in Oregon that are classified in schedules II through IV under the federal Controlled Substances Act...” ORS 431.962

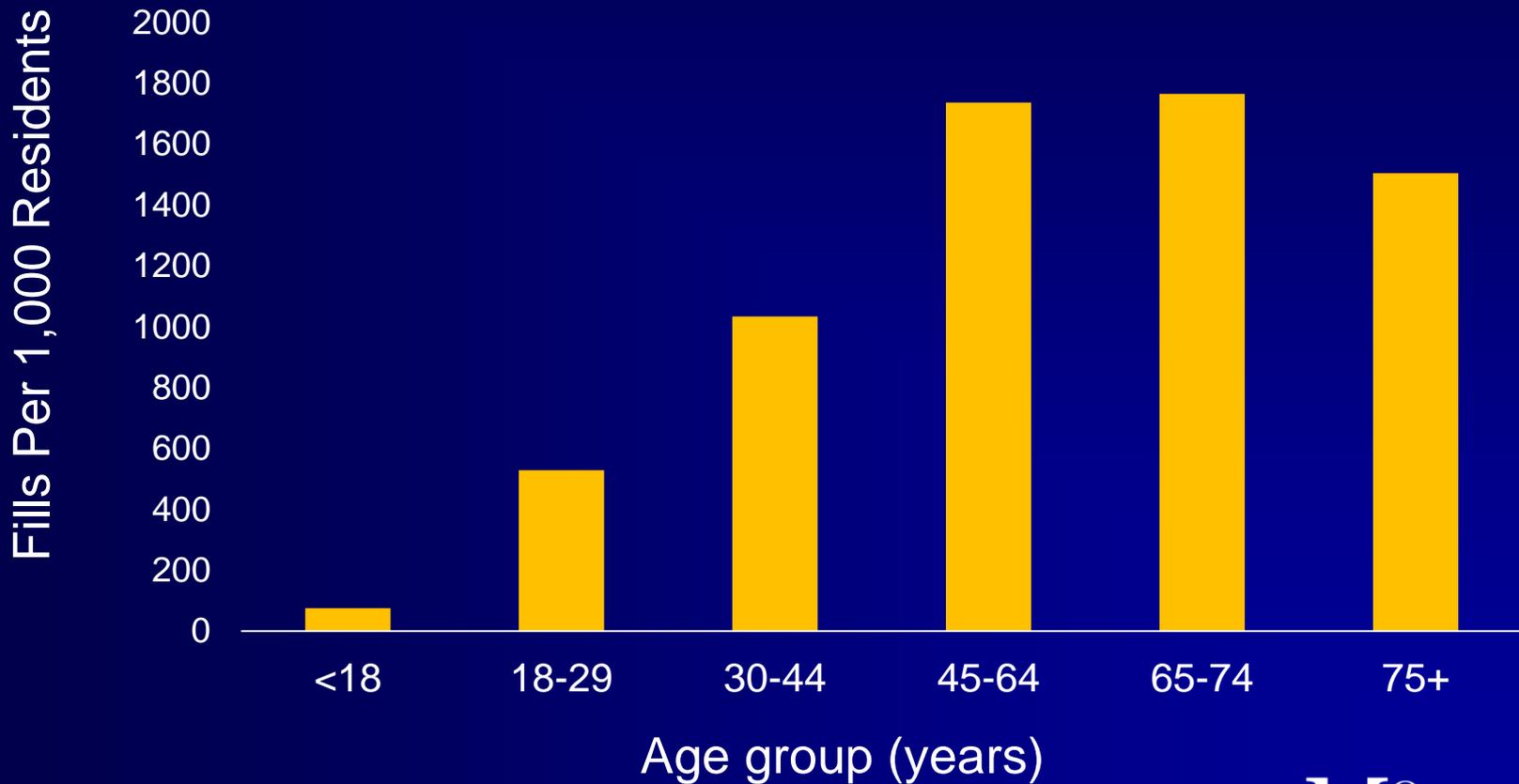
Purpose of Oregon PDMP

- Provide data on controlled substance prescriptions to improve patient safety and health
 - Patients at risk for: overdose, side effects, increased risk from other drugs, physical dependence, drug abuse
 - Provider tool to assess these issues

PDMP Data

- 7.5 million controlled prescriptions annually
- 4,000 prescribers write 80% of scheduled substance prescriptions
- Opioids (e.g., hydrocodone, oxycodone) account for >50% of prescriptions
- Benzodiazepines 2nd most frequent prescription

Opioid Prescription Fills by Age, Oregon, 2015





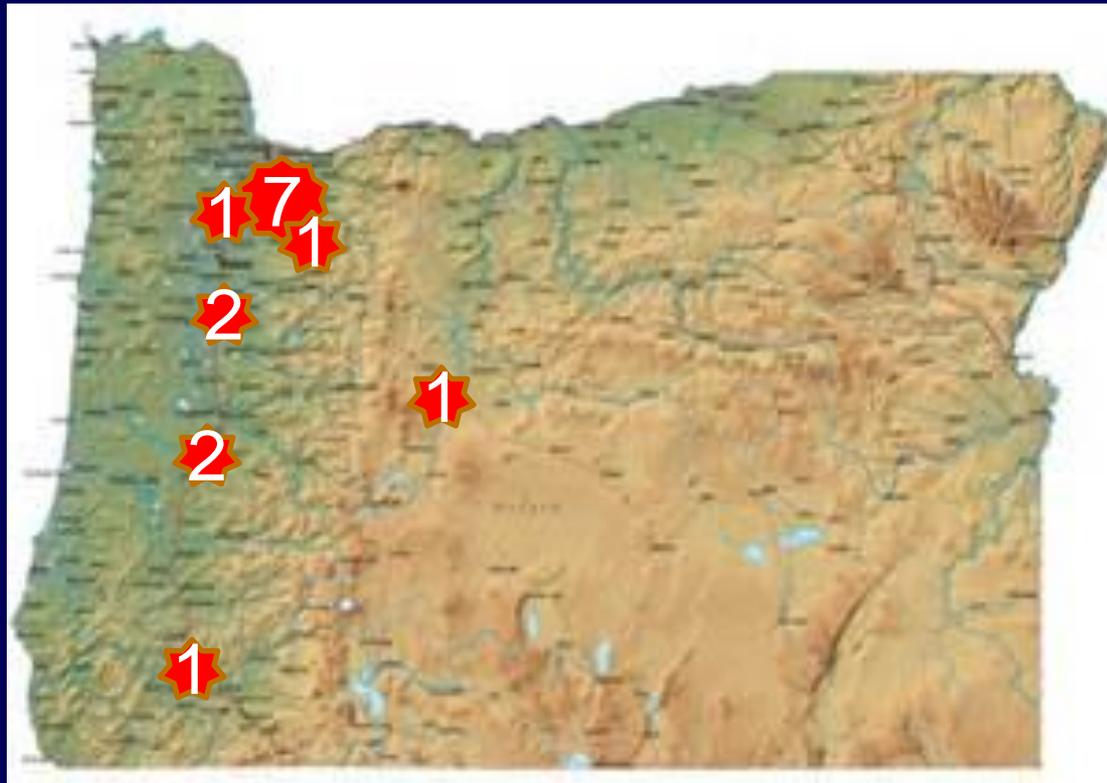
Increase Naloxone Availability

- Co-prescribe naloxone with opioids for at-risk patients
- Implement statute that allows naloxone prescription by pharmacists
- Improve infrastructure for naloxone rescue by EMTs and law enforcement
- Promote knowledge of Oregon's "Good Samaritan Law"

Medication-Assisted Treatment

- Improve access to MAT services throughout Oregon
- Ensure that CCOs cover MAT
- Increase number of Oregon physicians “waivered” to provide buprenorphine

Medication Assisted Treatment Programs in Oregon



Data to Guide/ Evaluate Interventions

- Overdose death, hospitalizations
- Percent population with daily MED >120 mg
- Opioid disorder treatment data

- Focus on: demographics, geography, health disparities (e.g. SES, homelessness, veteran status)

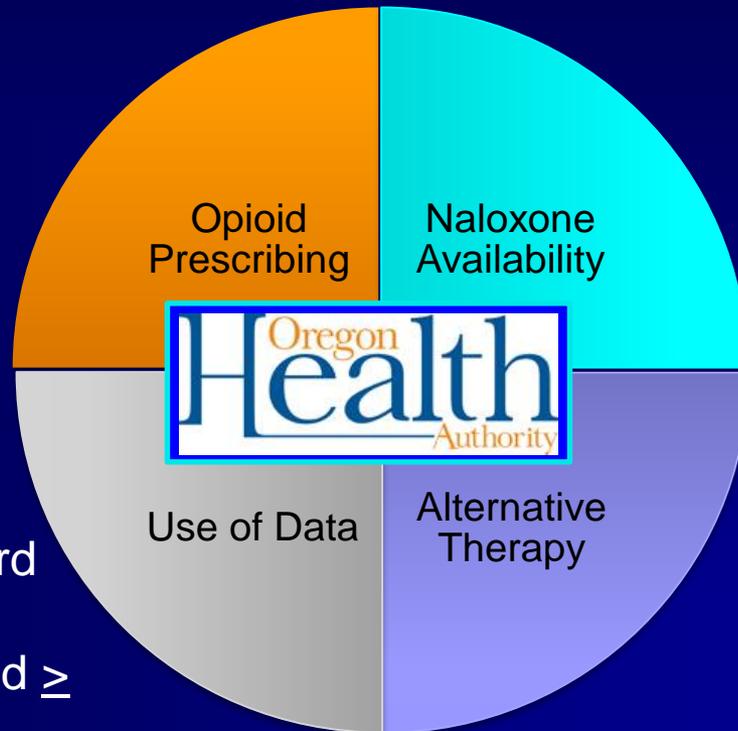
Community / Policy

- Collective role in communication and meeting statewide goals
- Education of patients/ providers/ policy makers
- Provider groups to develop best-practices in local area
- Implement statutory changes:
 - PDMP: incorporate into EDIE; use for public health practice/ research; automated notifications
 - Naloxone prescribing by pharmacists

Oregon Opioid Initiatives

- PDMP usage
- Statewide Prescribing Taskforce
- Statewide Performance Improvement Project (PIP)
- Prescription Drug Overdose Grant

- Interactive data dashboard
- Initiative dashboard dev.
- CCO PIP: ≥ 120 MED and ≥ 90 MED tracked
- Hospital Transformation Program metric development



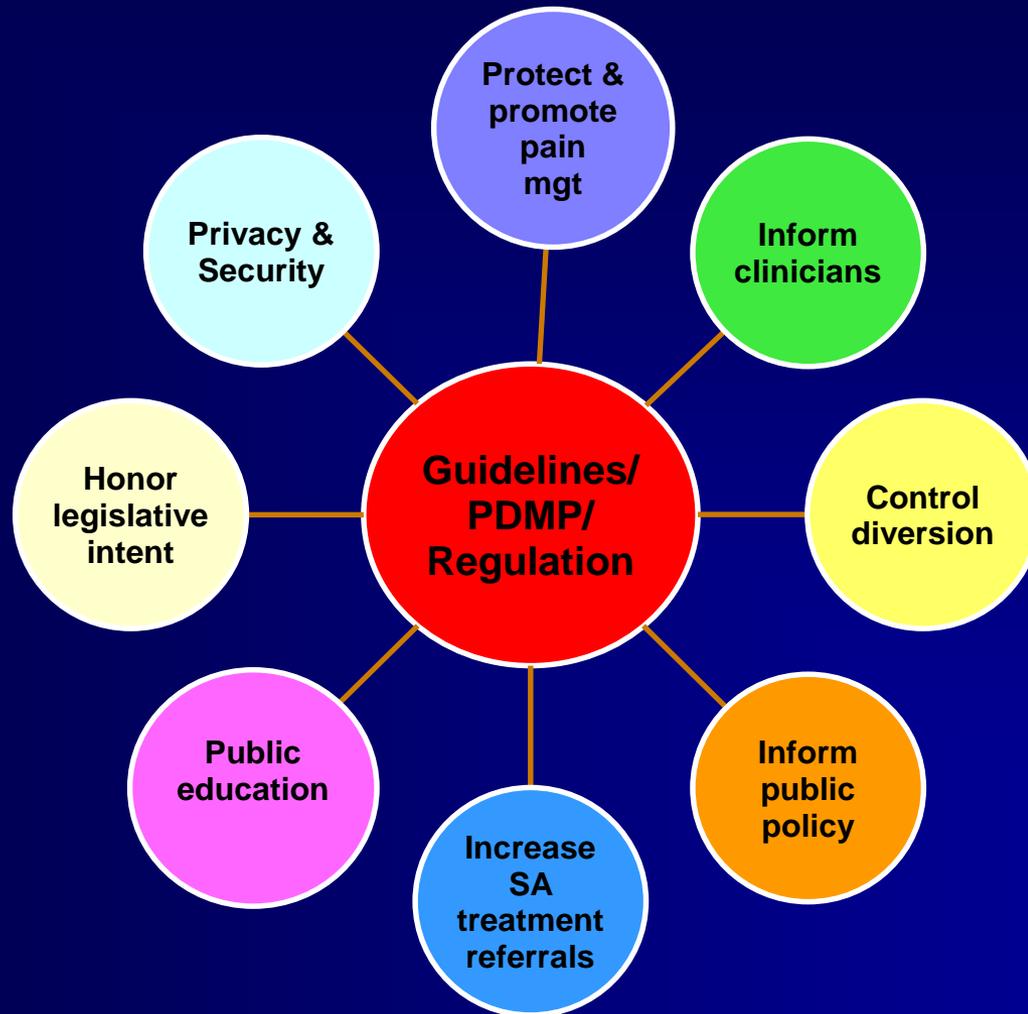
- HB 4124: Prescription Monitoring / Naloxone Availability
- Collaboration with law enforcement and EMT

- Medication Assisted Treatment (MAT)
- Prioritized List Back Condition Benefit coverage (7/1/2016)

Oregon Opioid Initiative Partnerships



Balance Needs



Questions?

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