



CONNECTICUT DEPARTMENT
OF SOCIAL SERVICES
Caring for Connecticut



Prescription Painkiller Epidemic

Prescription painkiller misuse, overdose and death associated with these drugs have skyrocketed in recent years. The CDC recently reported that one in 20 people in the United States, ages 12 and older, used prescription painkillers for nonmedical reasons during 2010.¹ Death rates from prescription opiate narcotics have also reached epidemic levels. The number of overdose deaths is now greater than deaths from heroin and cocaine combined². From 1999 to 2010, the number of U.S. drug poisoning deaths involving any opioid analgesic, from 4,030 to 16,651.³

The painkiller overdose epidemic seems to be involving women to substantial degree. About 18 women die each day from prescription painkiller overdose in the U.S. resulting in more than 6,600 deaths in 2010. While men continue die at a greater rate than women from prescription painkiller overdose, since 1999, the death rate for women has increased 400%, while only by 265% for men. Soon, more women than men may be dying from prescription painkiller overdose.⁴

Consider the following:^{2,4}

- ◆ More men than women

die from overdoses

- ◆ Middle-aged adults have the highest overdose rates
- ◆ Women between the ages of 25 and 54 are more likely than any other age group to go to the emergency department from abuse/misuse
- ◆ Women ages 45 to 54 have the highest risk of dying from an overdose compared to any other age group
- ◆ People in rural counties are almost twice as likely to overdose than people from larger cities
- ◆ Non-Hispanic Whites, American Indians or Alaska Natives are more likely to overdose than any other race
- ◆ Medicaid enrollees

Medicaid enrollees are prescribed painkillers at twice the rate of non-Medicaid patients and are at six times the risk of prescription painkiller overdose. One Washington State study found that 45% of people who died from prescription painkiller overdoses were Medicaid enrollees.^{5,6}

An analysis of Connecticut Medicaid data showed that 648 Medicaid enrollees were diagnosed with poisoning by prescription opiates from July 2008 through July 2009. 337 of

those poisonings occurred in women and 311 occurred in men. Looking at more recent data, 1,151 Medicaid enrollees were diagnosed with poisoning by prescription opiates from July 2012 through July 2013. 492 of those poisonings occurred in women and 659 occurred in men, showing a similar increasing trend when compared with national data.

Due to the substantial number of opiate related poisonings within the Connecticut Medicaid population, a targeted mailing to the top 50 prescribers of controlled substances will be sent in October.

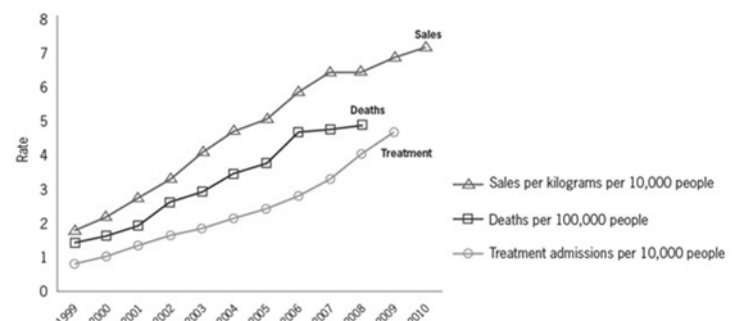
Not only are overdose and death rates due to prescription painkiller use on the rise, but sales and distribution of these medications are also on the rapid increase. Enough prescription painkillers were prescribed in 2010 to medi-

cate every American adult around the clock for a month, and the supply of prescription painkillers sold to pharmacies, hospitals, and doctors' offices was 4 times larger in 2010 than in 1999². The unprecedented rise in overdose deaths in the US parallels a 300% increase, since 1999, in the sale of these drugs.⁷

Most prescription pain killers are prescribed by primary care and internal medicine doctors and dentists (not specialists⁸), and roughly 20% of prescribers prescribe 80% of all prescription painkillers.^{9,10} Most of the time, prescription drugs involved in overdoses come from valid prescriptions; however, most people who misuse prescription painkillers are using drugs prescribed to treat someone else.¹¹

Prescription painkiller misuse

Rates of prescription painkiller sales, deaths and substance abuse treatment admissions (1999-2010)



SOURCES: National Vital Statistics System, 1999-2008; Automation of Reports and Consolidated Orders System (ARCOS) of the Drug Enforcement Administration (DEA), 1999-2010; Treatment Episode Data Set, 1999-2009

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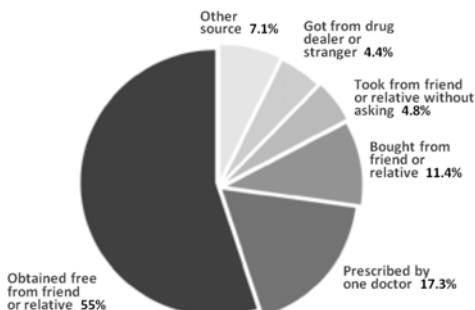
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and overdose is a public health epidemic. People are dying, and the numbers are rising. Approximately 16,000 people were killed by painkiller overdose in 2010, and during that same year, 12 million Americans (age 12 or older) reported nonmedical use of prescription painkillers. Nonmedical use of prescription painkillers costs healthcare insurers up to 72.5 billion annually in direct health care costs.²

The following state policies are CDC recommendations that show promise in reducing prescription drug abuse while ensuring patients have access to safe, effective pain treatment.¹²

- ◆ Prescription Drug Monitoring Programs
- ◆ Patient review and restriction programs
- ◆ Health care provider accountability
- ◆ Laws to prevent prescription drug abuse and diversion
- ◆ Better access to substance abuse treatment

People who abuse prescription painkillers get drugs from a variety of sources⁷



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Adherence Corner

During June 2013, 10,067 patients received a prescription for metformin. Following a routine query in June 2013, 712 adults were found to be non adherent to their metformin therapy. Therefore, approximately 7.07% of patients who received metformin prescriptions during June 2013 were found to be non adherent to the therapy.

Non-adherence to metformin can negatively impact patients and lead to:

- Inadequate diabetes control
- Increases in HbA1c levels
- Increases in overall healthcare costs associated with non adherent patients
- Increases in morbidity and mortality

It is important for the healthcare community to counsel patients about the importance of adhering to their medication regimens. Physician pill counts, self adherence reporting, and pharmacy refill records are all possible tools that can be used to improve medication adherence.