

Overdose Crisis in Transition: Changing Trends in a Widening Drug Death Epidemic

November 10, 2020 – 1:00 PM CDT

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Robert Hest, MPP



Technical Items

Participant audio has been automatically muted and video has been turned off

Submit questions using the Q&A feature at any time during the webinar

Problems:

- Ask for help using the chat feature
- Send a support request to Zoom at: https://support.zoom.us/hc/en-us/requests/new

Download the slides at: https://www.shadac.org/news/shadac-webinar-november-10th-changing-trends-widening-drug-overdose-crisis

Webinar recording will be posted on SHADAC's website

E-mail notice will be sent to participants



Presenters



Robert Hest, MPP SHADAC Research Fellow



Colin Planalp, MPA
SHADAC Senior Research Fellow

Changing Trends in a Widening Drug Death Epidemic

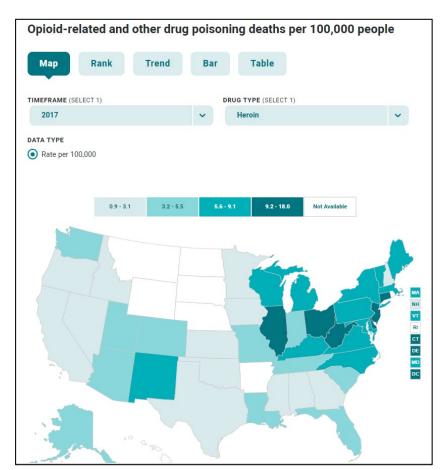
Colin Planalp, MPA SHADAC Senior Research Fellow

State Health Compare: Drug overdose death rates data

Source

U.S. Centers for Disease Control and Prevention, National Center for Health Statistics, National Vital Statistics System (via WONDER tool)

States collect and report data to the CDC



State Health Compare: Drug overdose death rates data

Aggregate categories of drug overdoses

- Drug overdoses (total)
- Opioid overdoses (types listed below, plus opium, methadone, non-specified)

Categories of opioid overdoses

- Natural and semi-synthetic opioids (i.e., prescription opioid painkillers, such as oxycodone and hydrocodone)
- Synthetic opioids (e.g., fentanyl)
- Heroin

Categories of non-opioid overdoses

- Cocaine
- Psychostimulants (e.g., methamphetamine, Ritalin, Adderall)



State Health Compare: Drug overdose death rates data

Limitations/considerations

- Under-recording/-reporting of opioid deaths (e.g., Indiana)
- Suppression of small numbers (i.e., 20 or fewer deaths)

Background

What are opioids?

 A family of addictive drugs that act on the opioid receptors in pleasure centers of the brain

What are their effects?

Can relieve pain and cause euphoria

Types of opioids:

- Natural opioids, derived from opium poppy (e.g., morphine)
- Semi-synthetic opioids, synthesized from natural opioids (e.g., oxycodone, heroin)
- Synthetic opioids, synthesized from non-opioid compounds to mimic opioid effects (e.g., fentanyl)

The Opioid Epidemic as an Evolving Crisis

Circa 2000

Gradual increases in overdose deaths from prescription opioid painkillers

2011 declaration of "epidemic"

 Increased attention since U.S. Centers for Disease Control and Prevention declared overdoses from prescription painkillers an "epidemic"

Since 2011

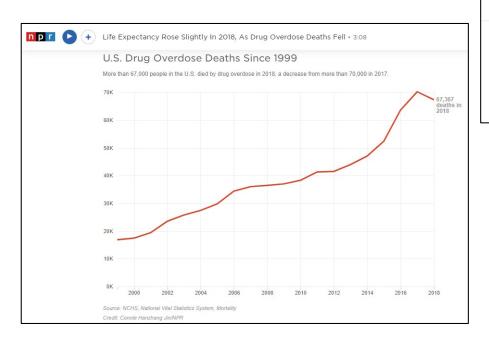
- Prescription opioid overdose death rates largely plateau, but death rates increase from illicit opioids (i.e., heroin, trafficked synthetics)
- Cocaine and psychostimulant (e.g., methamphetamine) overdose death rates increase; often involving opioids, as well

2018: An inflection point in the crisis

The Washington Post

Democracy Dies in Darkness

U.S. life expectancy ticks up as drug fatalities and cancer deaths drop



The New Hork Times

TheUpshot

Drug Overdose Deaths Drop in U.S. for First Time Since 1990



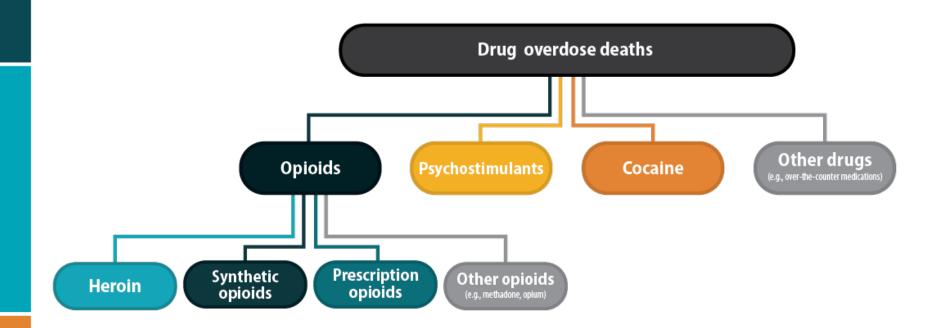
2018: An inflection point in the crisis

Noteworthy developments in 2018

- CDC announced that aggregate drug overdose and opioid overdose death rates declined
- Death rates from prescription opioids and heroin declined, but synthetic opioid death rates continued to grow
- Cocaine and psychostimulant death rates exceeded prescription opioid deaths

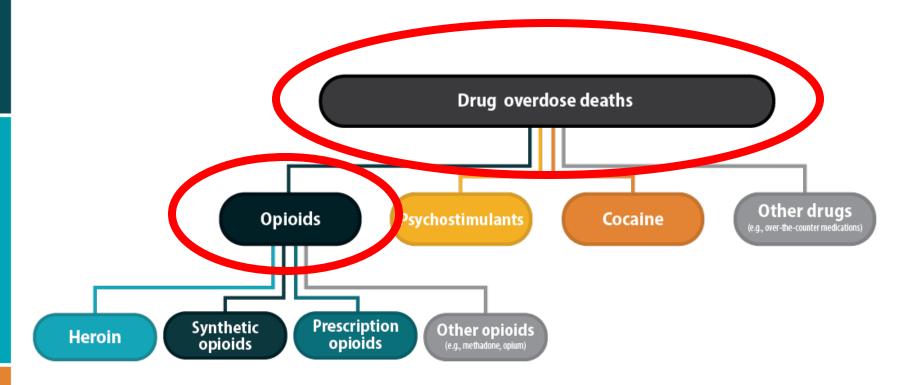
U.S. Trends

State Health Compare: Opioid overdose death rates data

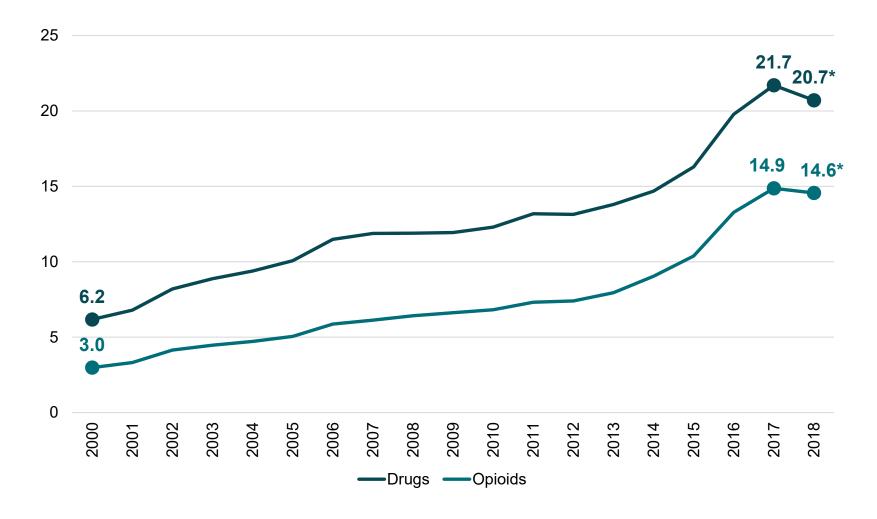


State Health Compare:

Opioid overdose death rates data



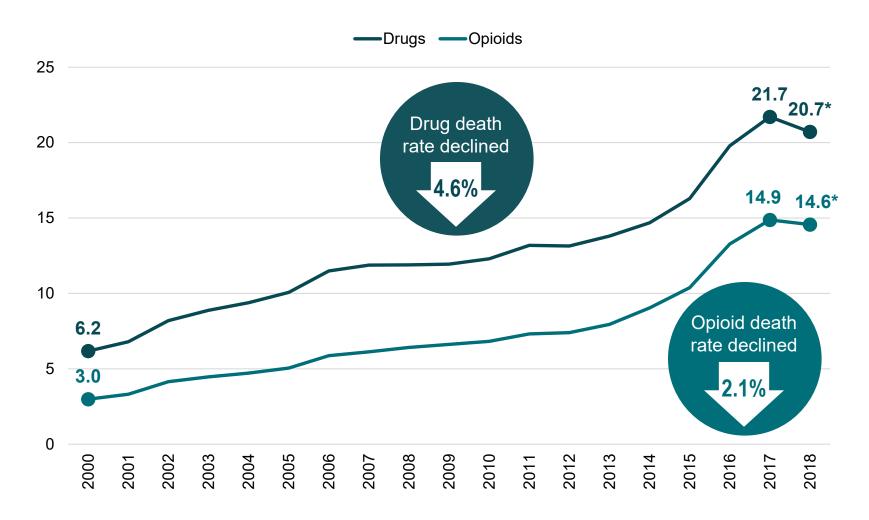
U.S. Drug and Opioid Overdose Deaths per 100,000 People, 2000-2018



^{*} Statistically significant decline since 2017 at the 95% level. Source: SHADAC analysis of age-adjusted rates of drug poisoning deaths, National Center for Health Statistics



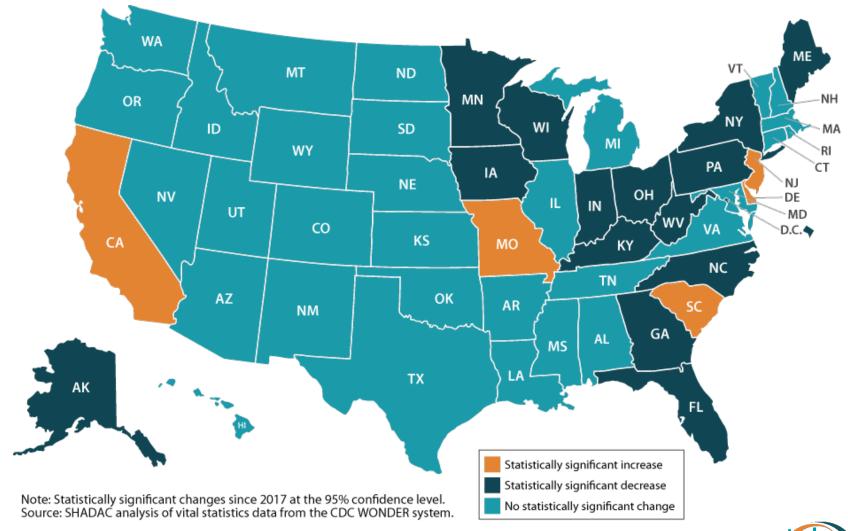
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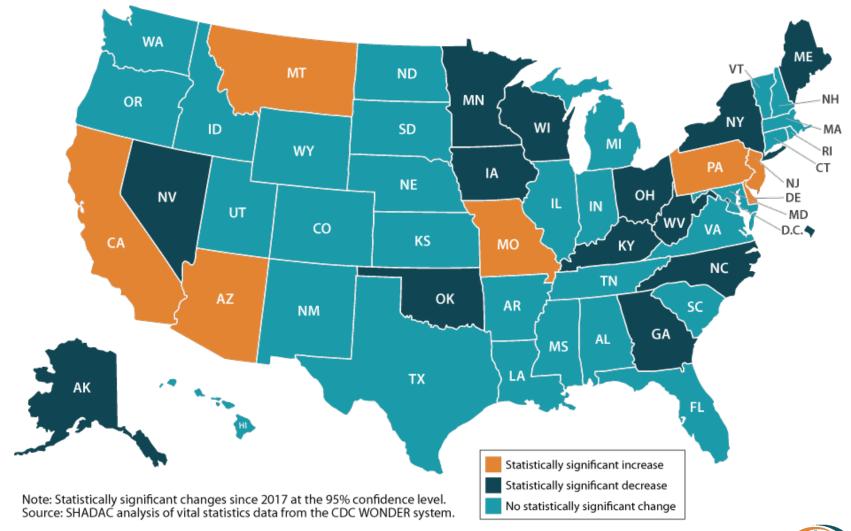
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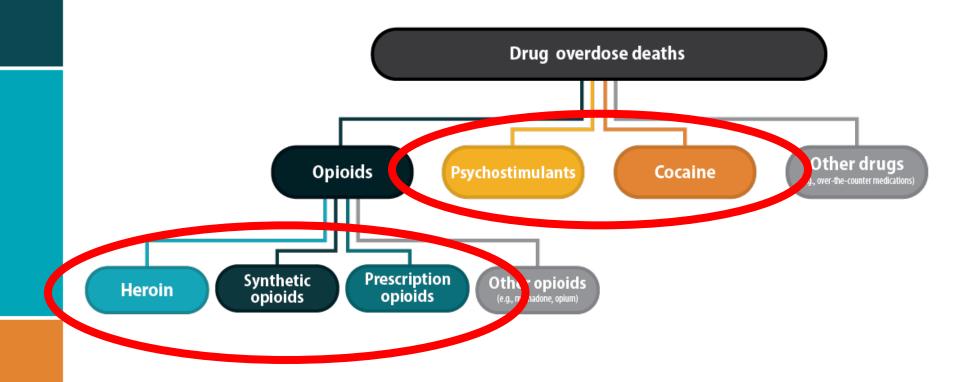
Changes in Drug Overdose Death Rates, 2017-2018



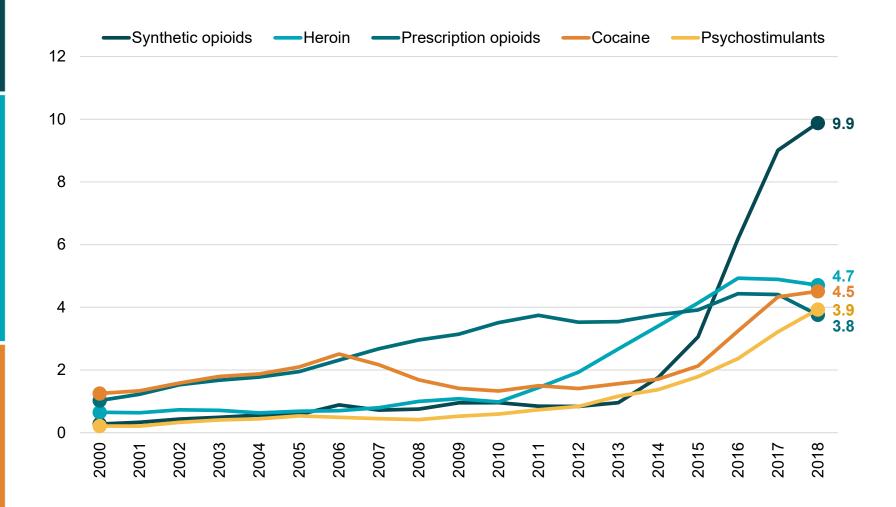
Changes in Opioid Overdose Death Rates, 2017-2018



State Health Compare: Opioid overdose death rates data



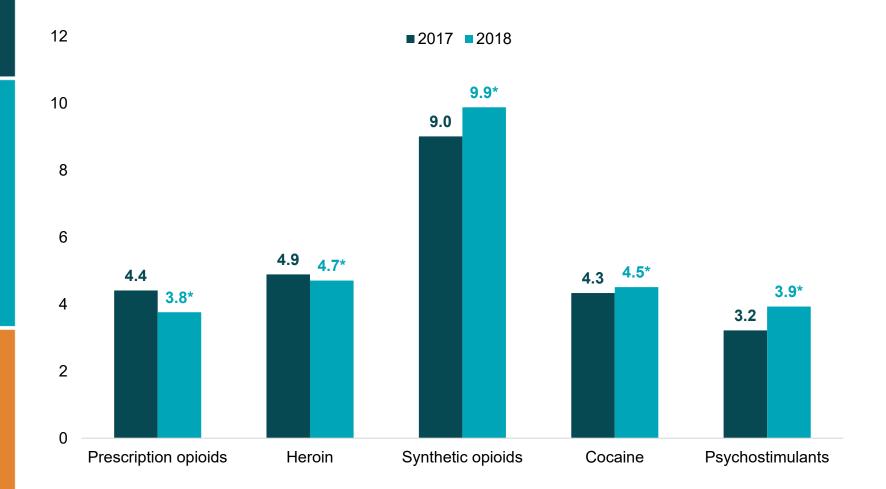
U.S. Drug Overdose Deaths by Type per 100,000 People, 2000-2018



^{*} Statistically significant decline since 2017 at the 95% level.

Source: SHADAC analysis of age-adjusted rates of drug poisoning deaths, National Center for Health Statistics

U.S. Drug Overdose Deaths by Type per 100,000 People, 2017-2018

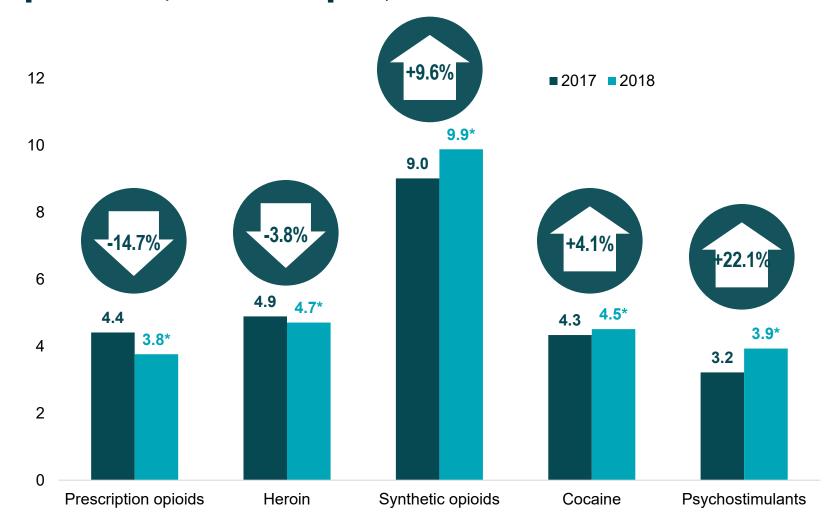


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Source: SHADAC analysis of age-adjusted rates of drug poisoning deaths, National Center for Health Statistics



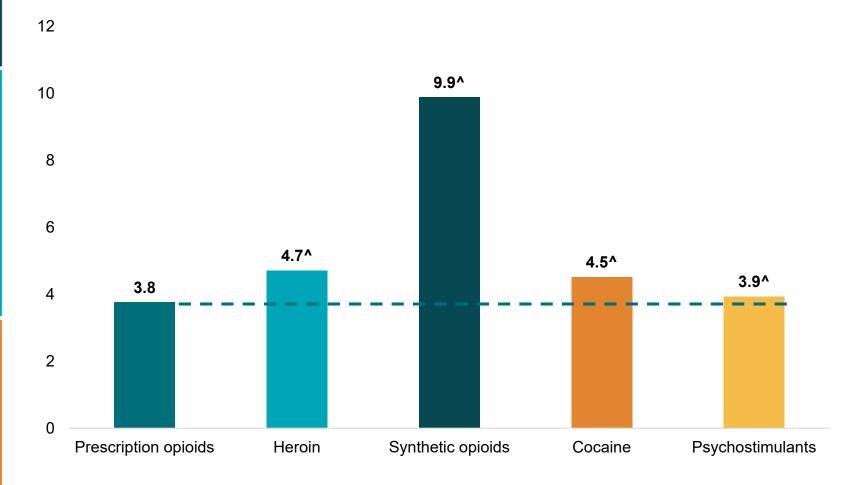
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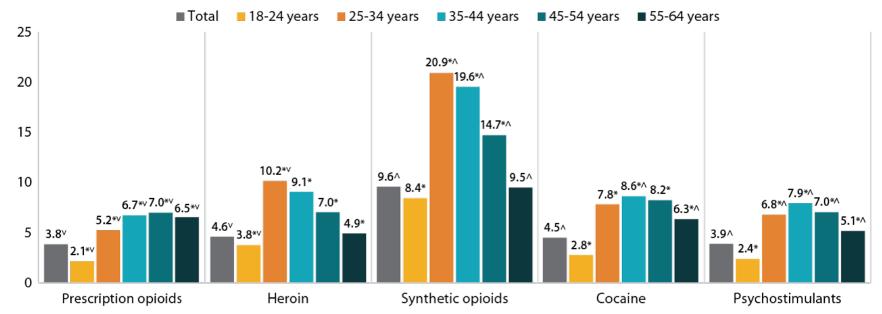
U.S. Drug Overdose Deaths by Type per 100,000 People, 2018





U.S. Sub-population Patterns

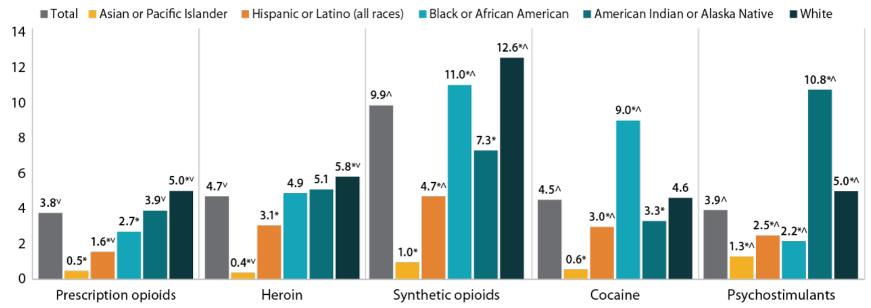
U.S. Overdose Deaths by Age per 100,000 People, 2018



[^] Significantly significant increase from 2017 rate at 95% level. Y Significantly significant decrease from 2017 rate at 95% level.

^{*} Statistically significant difference from total rate at 95% level. Source: SHADAC analysis of vital statistics data from the CDC WONDER system.

U.S. Overdose Deaths by Race/ethnicity per 100,000 People, 2018



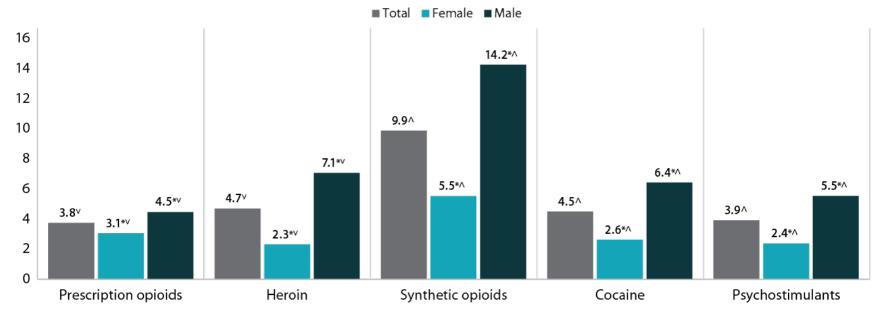
[^] Significantly significant increase from 2017 rate at 95% level.

Source: SHADAC analysis of vital statistics data from the CDC WONDER system.

V Significantly significant decrease from 2017 rate at 95% level.

^{*} Statistically significant difference from total rate at 95% level.

U.S. Overdose Deaths by Sex per 100,000 People, 2018



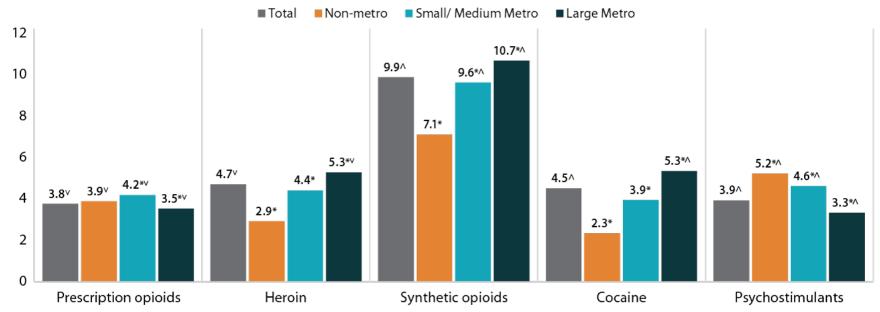
[^] Significantly significant increase from 2017 rate at 95% level.

Source: SHADAC analysis of vital statistics data from the CDC WONDER system.

Significantly significant decrease from 2017 rate at 95% level.

^{*} Statistically significant difference from total rate at 95% level.

U.S. Overdose Deaths by Urbanization per 100,000 People, 2018



[^] Significantly significant increase from 2017 rate at 95% level.

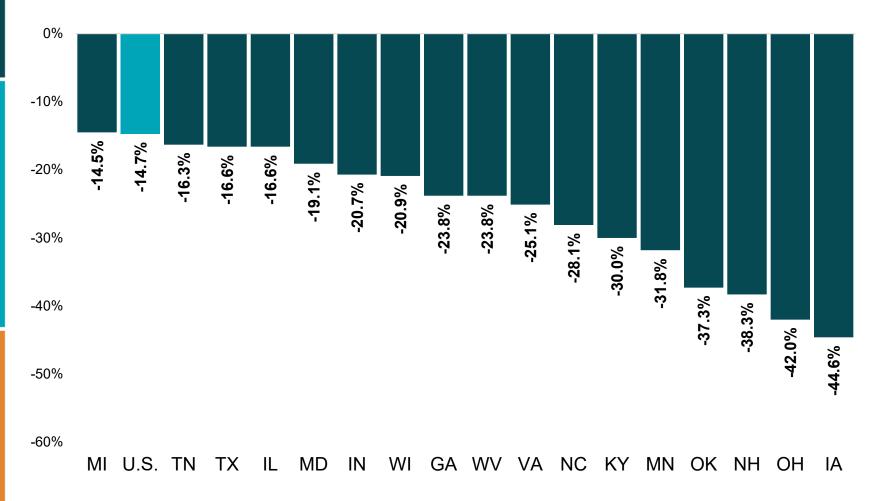
Significantly significant decrease from 2017 rate at 95% level.
 Statistically significant difference from total rate at 95% level.

Source: SHADAC analysis of vital statistics data from the CDC WONDER system.

State-level Patterns

Prescription Opioids

Significant Changes in Prescription Opioid Overdose Death Rates, 2017-2018



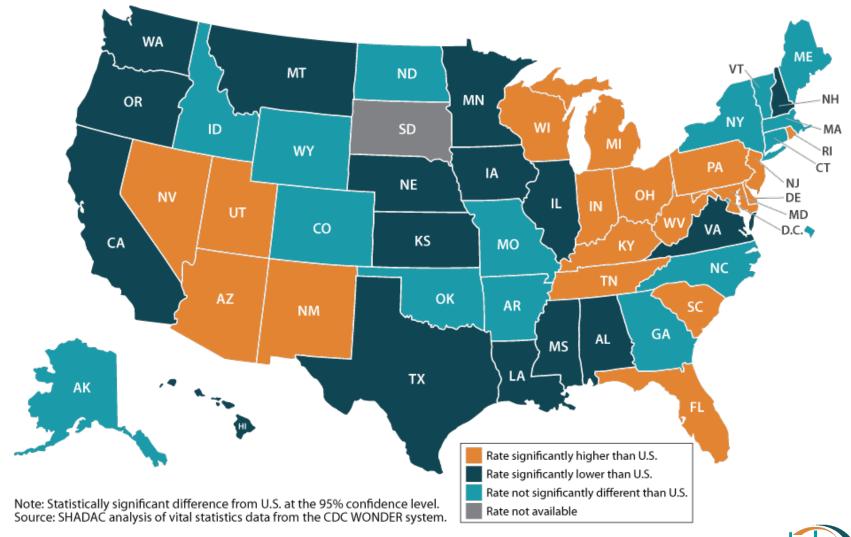


Highest and Lowest Rates of Prescription Opioid Deaths per 100,000 People, 2018

Five Highest Rates	
West Virginia	12.0
Utah	9.6
Tennessee	7.4
Maryland	6.8
Delaware	6.7

Five Lowest Rates	
Texas	1.6
Iowa	1.7
Hawaii	1.8
Minnesota & Nebraska	1.9
Montana	2.0

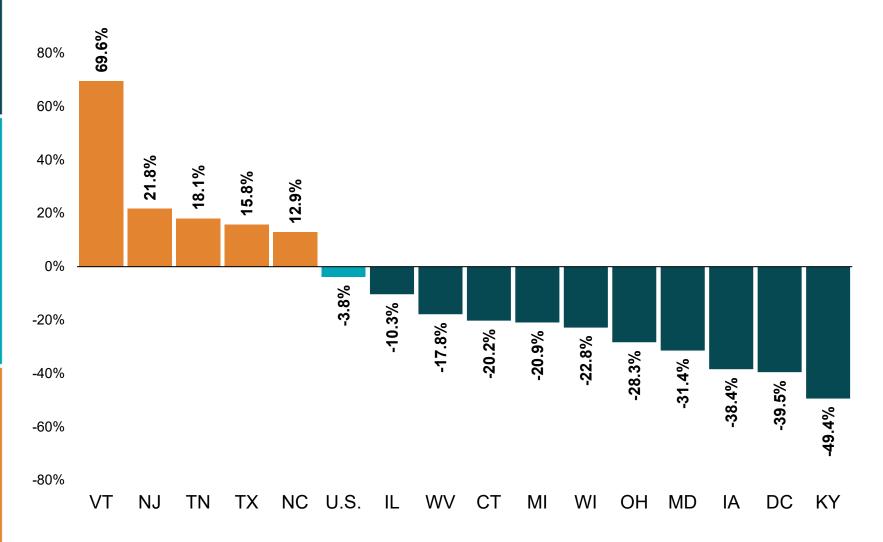
State Prescription Opioid Death Rates vs. U.S., 2018



State-level Patterns

Heroin

Significant Changes in Heroin Overdose Death Rates, 2017-2018



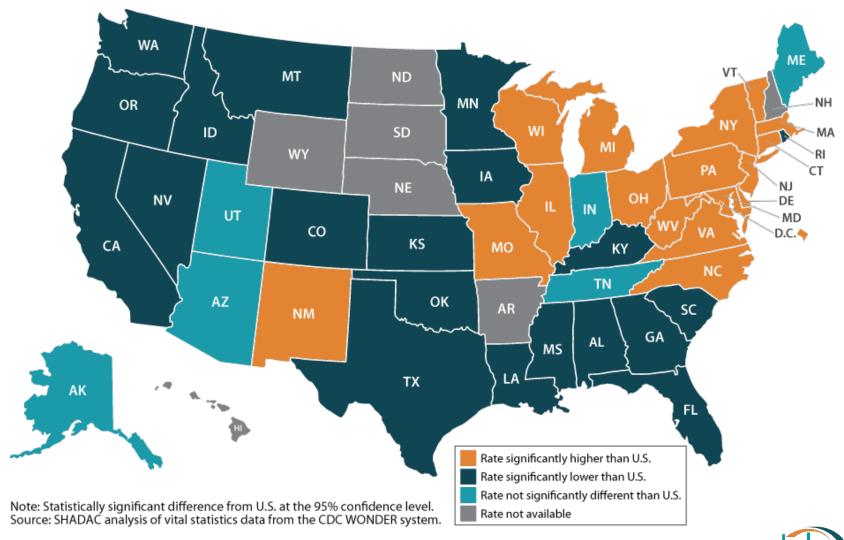


Highest and Lowest Rates of Heroin Deaths per 100,000 People, 2018

Five Highest Rates	
Delaware	15.9
New Jersey	14.8
Vermont	12.5
West Virginia	12.3
District of Columbia	10.9

Five Lowest Rates	
lowa & Kansas	1.3
Mississippi	1.4
Minnesota	1.7
Idaho	1.8
California	1.9

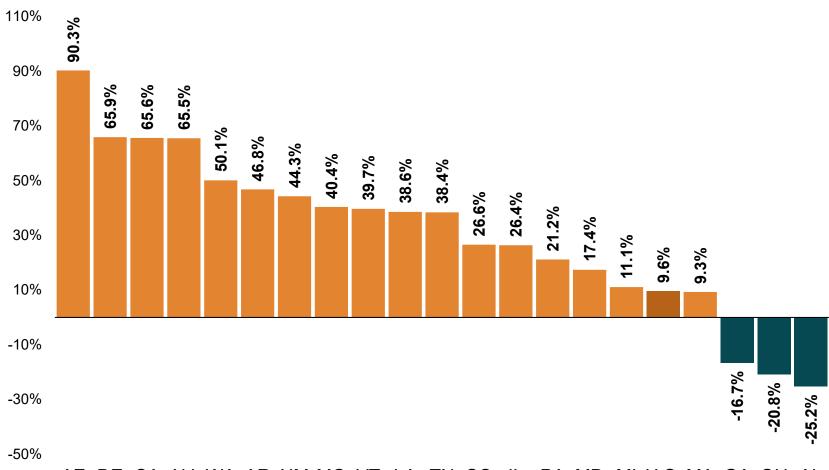
State Heroin Death Rates vs. U.S., 2018



State-level Patterns

Synthetic opioids

Significant Changes in Synthetic Opioid Overdose Death Rates, 2017-2018



AZ DE CA NJ WA AR NM MO VT LA TN SC IL PA MD MI U.S. MA GA OH AL

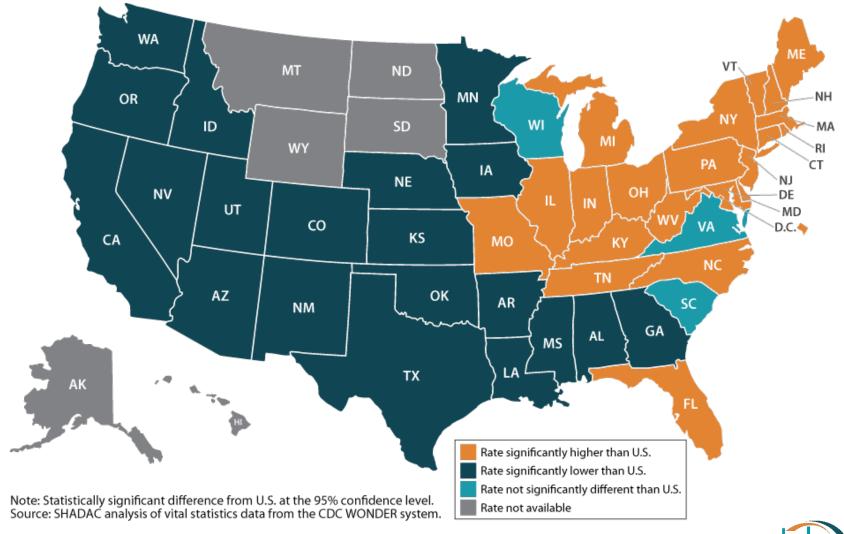


Highest and Lowest Rates of Synthetic Opioid Deaths per 100,000 People, 2018

Five Highest Rates	
West Virginia	34.0
Delaware	33.1
New Hampshire	31.3
Maryland	29.6
Massachusetts	26.8

Five Lowest Rates	
Texas	1.2
Nebraska	1.4
Idaho & Kansas	1.7
Oklahoma	2.0
California & Colorado	2.2

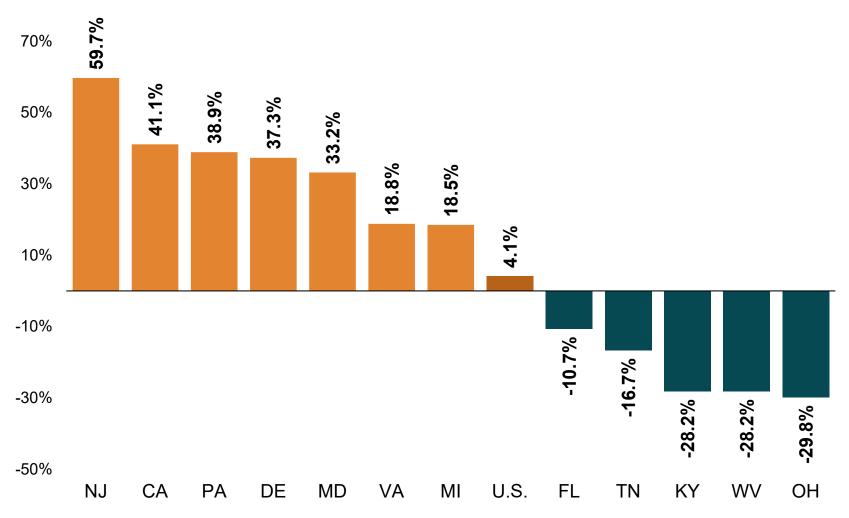
State Synthetic Opioid Death Rates vs. U.S., 2018



State-level Patterns

Cocaine

Significant Changes in Cocaine Overdose Death Rates, 2017-2018



Note: Only states that saw statistically significant changes in their overdose death rates from 2017 to 2018 are shown. Source: SHADAC analysis of vital statistics data from the CDC WONDER system.

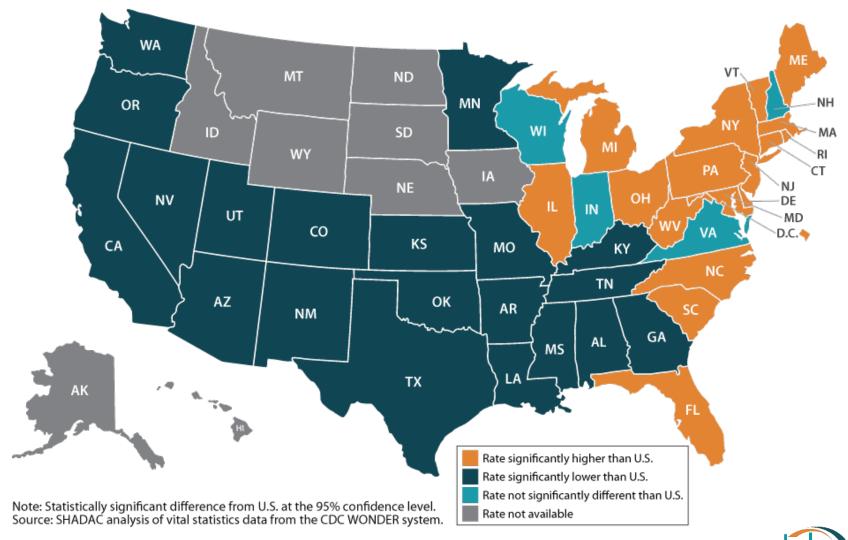


Highest and Lowest Rates of Cocaine Deaths per 100,000 People, 2018

Five Highest Rates	
Delaware	15.9
District of Columbia	14.2
Rhode Island	13.1
Maryland	11.4
Massachusetts	10.7

Five Lowest Rates	
Arkansas & Minnesota	0.9
Kansas	1.0
Oregon & Oklahoma	1.1
Mississippi	1.2
California	1.4

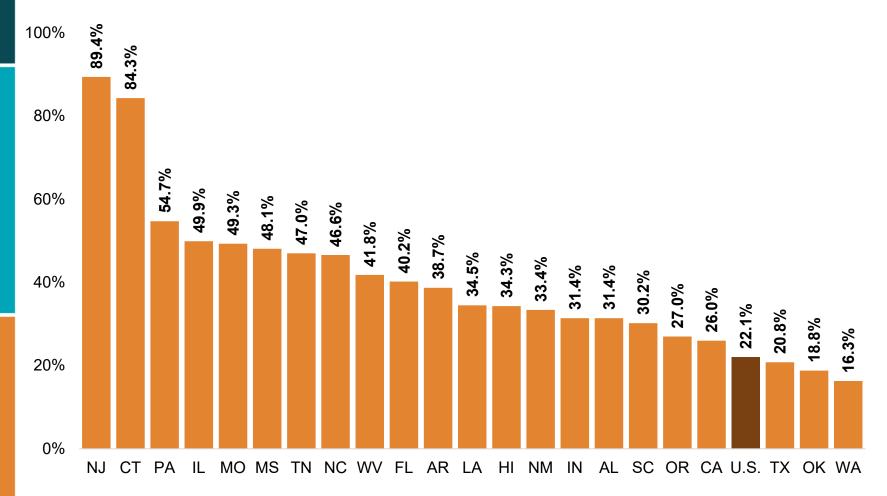
State Cocaine Death Rates vs. U.S., 2018



State-level Patterns

Psychostimulants

Significant Changes in Psychostimulant Overdose Death Rates, 2017-2018

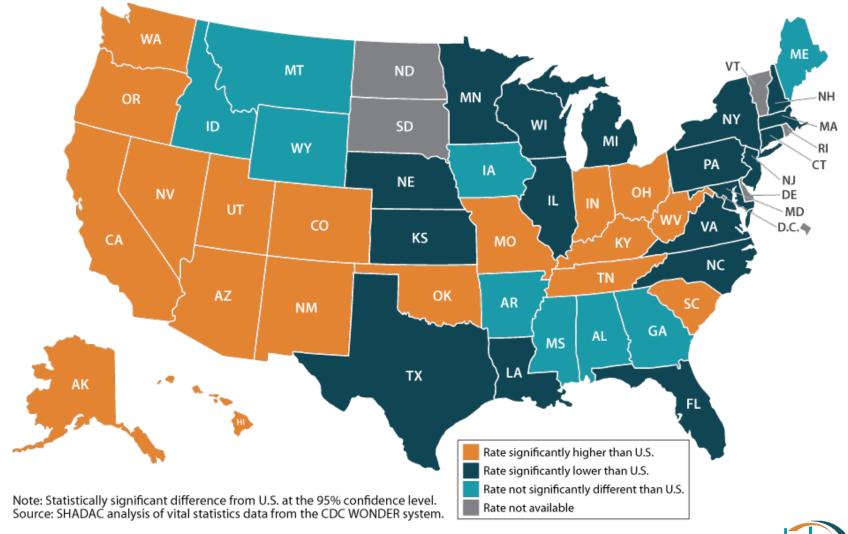


Highest and Lowest Rates of Psychostimulant Deaths per 100,000 People, 2018

Five Highest Rates	
West Virginia	19.3
New Mexico	10.9
Hawaii	9.9
Nevada	9.6
Kentucky	8.8

Five Lowest Rates	
New York	1.0
Maryland	1.1
Massachusetts	1.2
Virginia	1.6
Nebraska & New Jersey	1.7

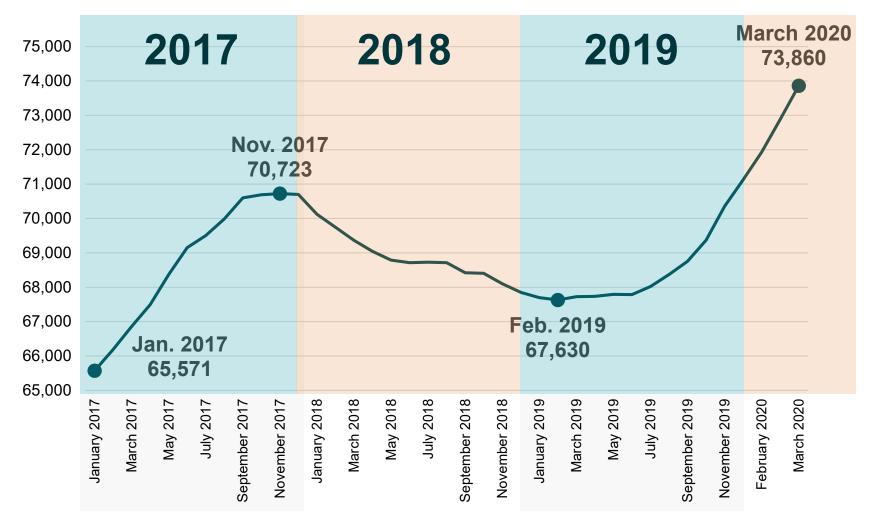
State Psychostimulant Death Rates vs. U.S., 2018



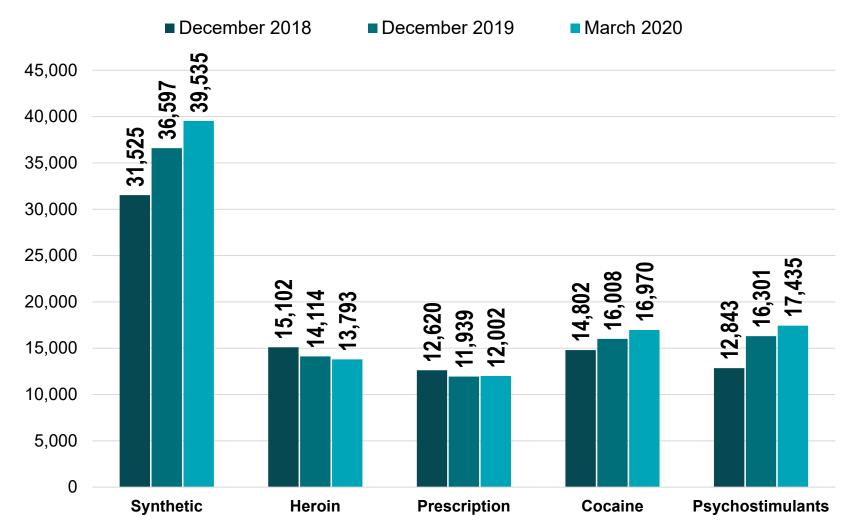
Resurgence of Overdose Deaths

Provisional data from 2019 and 2020

U.S. Provisional Drug Overdose Deaths, 12-month Rolling Counts



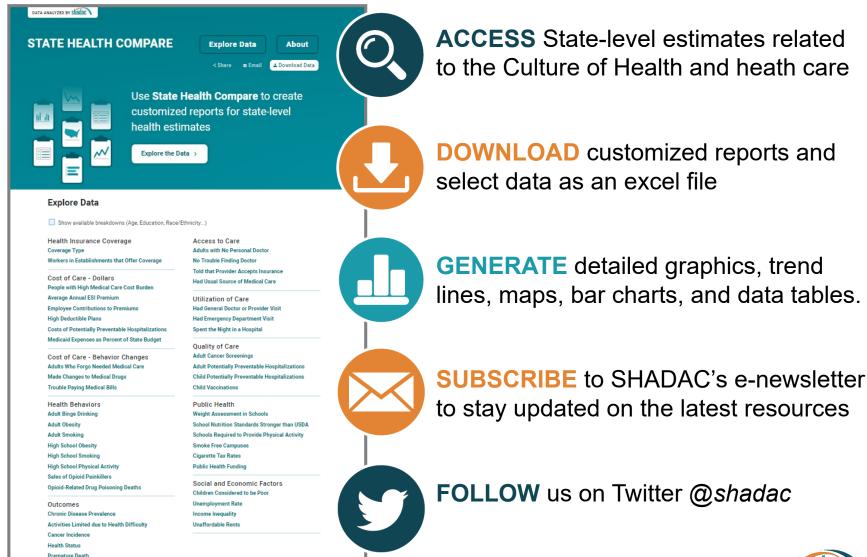
U.S. Provisional Overdose Deaths by Drug Type, 12-month Rolling Counts



Source: CDC Provisional Drug Overdose Death Counts



Visit StateHealthCompare.SHADAC.org



State Health Compare Demo

Robert Hest, MPP

Research Fellow, SHADAC

SHADAC's State Health Compare

45+ State-level measures of:

- Health Insurance Coverage
- Cost of Care
- Health Behaviors
- Outcomes
- Access to Care
- Utilization of Care
- Quality of Care
- Public Health
- Social and Economic Factors

Health Insurance Coverage	Access to Care
Coverage Type	Adults with No Personal Doctor
Workers in Establishments that Offer Coverage	No Trouble Finding Doctor
Cost of Care - Dollars	Told that Provider Accepts Insurance
	Had Usual Source of Medical Care
People with High Medical Care Cost Burden	
Average Annual ESI Premium	Utilization of Care
Average Annual ESI Deductible	Had General Doctor or Provider Visit
Employee Contributions to Premiums	Had Emergency Department Visit
High-Deductible Health Plans	Spent the Night in a Hospital
Costs of Potentially Preventable Hospitalizations	Overlity of Care
Medicaid Expenses as Percent of State Budget	Quality of Care Adult Cancer Screenings
2	Adult Potentially Preventable Hospitalizations
Cost of Care - Behavior Changes	
Adults Who Forgo Needed Medical Care	Child Potentially Preventable Hospitalizations Child Vaccinations
Made Changes to Medical Drugs	Child Vaccinations
Trouble Paying Medical Bills	Public Health
Health Behaviors	Weight Assessment in Schools
Adult Binge Drinking	School Nutrition Standards Stronger than USDA
Adult Obesity	Schools Required to Provide Physical Activity
Adult Smoking	Smoke Free Campuses
High School Obesity	Cigarette Tax Rates
High School Smoking	Public Health Funding
High School Physical Activity	
Sales of Opioid Painkillers	Social and Economic Factors
Opioid-Related and Other Drug Poisoning Deaths	Children Considered to be Poor
	Unemployment Rate
Outcomes	Income Inequality
Chronic Disease Prevalence	Unaffordable Rents
Activities Limited due to Health Difficulty	
Cancer Incidence	
Health Status	
Premature Death	
Adult Unhealthy Days	

SHADAC's State Health Compare



Access Policy-relevant breakdowns available for most measures



Generate tables, maps, bar charts, trends, and state rankings

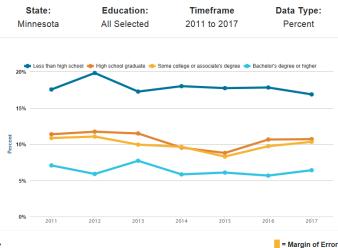


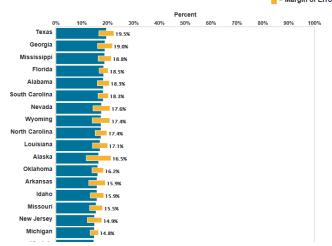
Margins of error in addition to point estimates allows for <u>significance testing</u>



Data can be downloaded in spreadsheet format

Percent of adults who could not get medical care when needed due to cost







16 Data Sources, including:

- American Community Survey (ACS)
- Current Population Survey (CPS)
- CDC WONDER Database
- U.S. Drug Enforcement Agency's Automated Reports and Consolidated Ordering System (ARCOS)
- Behavioral Risk Factor Surveillance System (BRFSS)
- National Health Interview Survey (NHIS)
- Other sources











Virtual Tour

statehealthcompare.shadac.org/

Questions for Presenters?



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Lynn Blewett, PhD SHADAC Director



Thank you

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