



Research Policy Update

The Opioid Epidemic: Definitions, Data, Solutions

Key Points:

- The opioid epidemic is a complex problem of supply and demand issues in AI/AN communities
- Solutions require more local data to inform action, along with collaboration across multiple sectors

Opioids – Definitions and Data

Definitions. Opioids are generally prescribed for relief of moderate to severe pain in patients with: 1) pain related to cancer and its treatment; 2) non-cancer acute pain, such as from injuries or surgery; and 3) non-cancer chronic pain that lasts several months or more, such as from chronic joint, muscle or nerve pain.

Examples of opioid types and names are listed below.^{1 2}

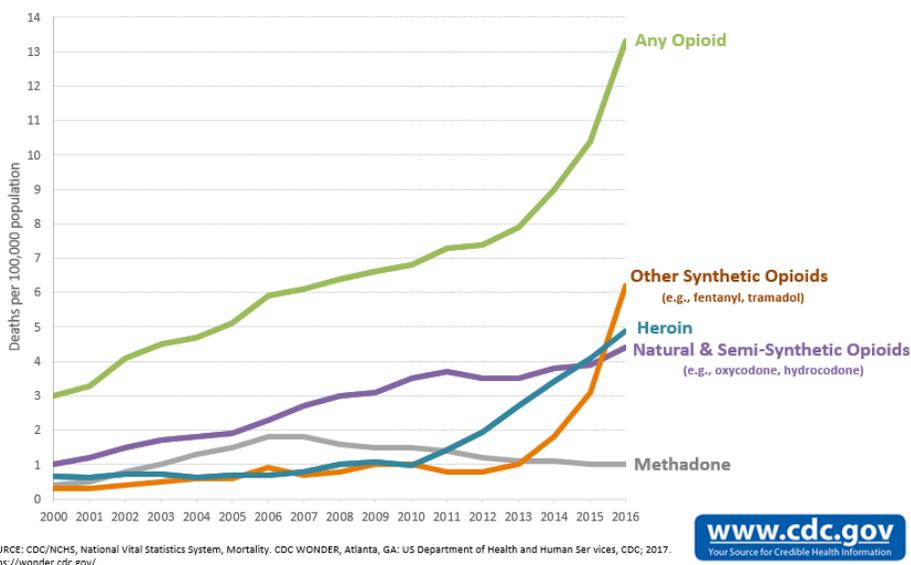
| Source | Type | Generic Name | Brand Name Examples | |
|----------------------|---------------------------------|---|-----------------------------|-----------------------------|
| PRESCRIPTION OPIOIDS | Natural opioids | Morphine | <i>MS Contin</i> | |
| | | Codeine | <i>Tylenol with Codeine</i> | |
| | Semi-synthetic opioids | Oxycodone | <i>Percocet, Oxycontin</i> | |
| | | Hydrocodone | <i>Vicodin</i> | |
| | | Hyromorphone | <i>Dilaudid</i> | |
| | | Oxymorphone | <i>Opana</i> | |
| | | Meperidine | <i>Demerol</i> | |
| | | Buprenorphine | <i>Suboxone</i> | |
| | | Synthetic opioids | Methadone | <i>Dolophine</i> |
| | | | Fentanyl | <i>Duragesic, Sublimaze</i> |
| ILLEGAL OPIOIDS | Heroin | Processed from morphine, a natural opioid | | |
| | Illicitly manufactured fentanyl | Lab-made synthetic opioid, often mixed with other products, such as heroin, cocaine | | |

¹ Opioid Data Analysis, Centers for Disease Control and Prevention. Accessed on March 11, 2018 at <https://www.cdc.gov/drugoverdose/data/analysis.html>

² Controlled Substance Schedules, Diversion Control Division, Drug Enforcement Administration, US Department of Justice, accessed on March 11, 2018 at: <https://www.deadiversion.usdoj.gov/schedules/>

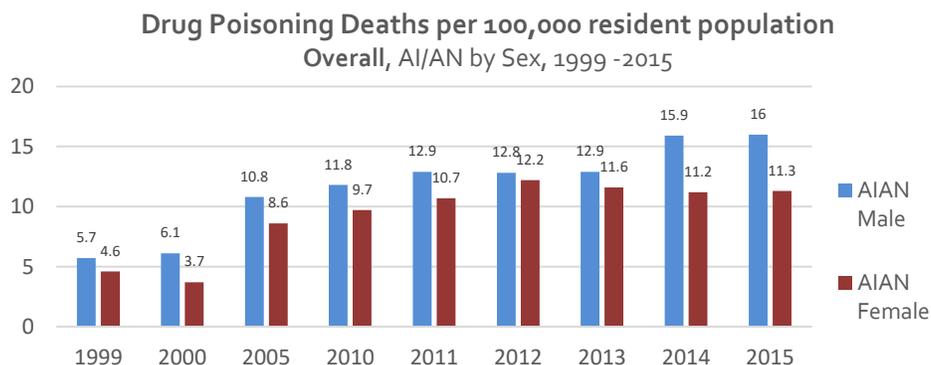
U.S. Data on Opioid Overdose Deaths. The United States (U.S.) data on opioid overdose deaths show dramatic increases over time, especially in the last few years. The age adjusted rate of deaths from drug overdoses in the U.S. was three times greater in 2016 compared to 1999.³ The chart below reveals two important trends in overdose deaths involving opioids by type from 2000-2016: a progressive increase over time in deaths due to medications commonly prescribed for pain, including natural and semi-synthetic opioids, and a much greater increase in the last few years in deaths from heroin and other synthetic opioids such as fentanyl.

Overdose Deaths Involving Opioids, by Type of Opioid, United States, 2000 -2016



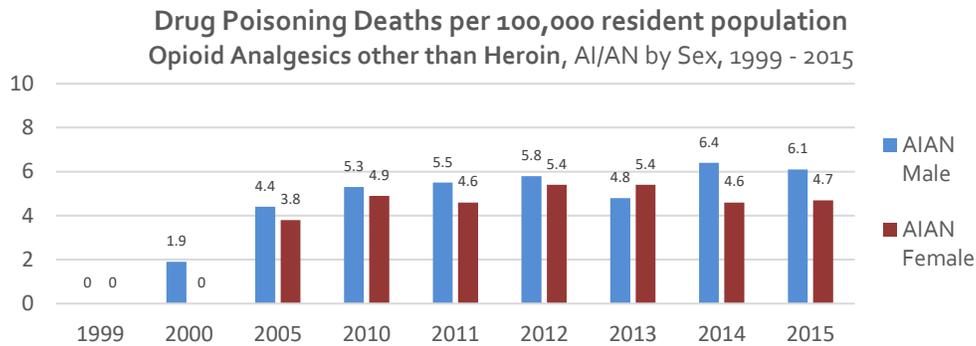
Accessed on March 11, 2018 at: <https://www.cdc.gov/drugoverdose/data/index.html>

American Indian/Alaska Native (AI/AN) Data on Opioid Overdose Deaths. Data from the National Center for Health Statistics (NCHS) reveal that the opioid epidemic is increasing in AI/ANs, including deaths from drug poisoning overall and deaths due to opioid analgesics other than heroin as illustrated below, with some small differences for males vs. females.



SOURCE: NCHS, National Vital Statistics System; numerator data from National Vital Statistics System, annual public-use Mortality Files; denominator data from national population estimates for race groups from Table 1; Deaths: Final data for 2015. National vital statistics reports Hyattsville, MD: NCHS; 2017. Available from: <http://www.cdc.gov/nchs/products/nvsr.htm>. See Appendix I, National Vital Statistics System (NVSS). Accessed on March 11, 2018 at: <https://www.cdc.gov/nchs/data/hus/2016/027.pdf>

³ Hedegaard H, Warner M, Miniño AM. Drug overdose deaths in the United States, 1999–2016. NCHS Data Brief, no 294. Hyattsville, MD: National Center for Health Statistics. 2017. Accessed on March 11, 2018 at: <https://www.cdc.gov/nchs/products/databriefs/db294.htm>



SOURCE: NCHS, National Vital Statistics System; numerator data from National Vital Statistics System, annual public-use Mortality Files; denominator data from national population estimates for race groups from Table 1; Deaths: Final data for 2015. National vital statistics reports Hyattsville, MD: NCHS; 2017. Available from: <http://www.cdc.gov/nchs/products/nvsr.htm>. See Appendix I, National Vital Statistics System (NVSS). Accessed on March 11, 2018 at: <https://www.cdc.gov/nchs/data/hus/2016/027.pdf>

Data Limitations. Data on death rates are often underestimates for AI/ANs due to misidentification on death certificates. Also, this national data does not reveal potential regional/ local differences in impact. Some tribes indicate that opioids are a huge problem in their communities, and some point to greater problems with other abused substances. More data is needed to understand local and regional trends and to inform action.

Opioids – A Problem of Supply and Demand

The opioid epidemic in AI/ANs is a complex problem of supply and demand impacting local communities. Opioids are available for abuse due to a variety of issues and the increasing demand for opioids results from a number of challenges and conditions that are driving the epidemic.

Supply of Opioids

- Provider prescription and over-prescription
- Overuse of opioids in pain management practices
- Pharmacy supply - improper access, diversion, or security breaches
- Impaired provider access, diversion, self-prescription
- Community access through drug dealers, theft of prescribed opioids
- Pharmaceutical company distribution of large amounts of opioids in communities
- Illegal manufacturing

Demand for Opioids

- Lack of access to appropriate care for conditions requiring pain management
- Use for relief of mental health issues, trauma, chronic stress
- Cause of substance abuse/addiction, overdose, neonatal abstinence syndrome
- Usage by impaired providers
- Poverty, unemployment and economic opportunity in drug trafficking, sales, theft
- Lack of access to prevention/treatment/recovery services
- Lack of funding to address the opioid epidemic

Solutions – Cross Sector Opportunities

The epidemic of opioid abuse has many causes, yet opportunities for community action are numerous, and collaboration across sectors is essential. Six areas for action steps are listed below.

Health provider/system education, training, monitoring, security

- Providers – pain management education, drug prescribing guidelines, drug monitoring programs
- Pharmacy – education/counseling patients on proper use, potential for abuse, security measures to prevent diversion, double signatures for dispensing
- Identification and treatment for impaired providers
- Increased access to specialty care, referral funding for conditions requiring pain management

Opioid addiction prevention, treatment, recovery strategies

- Better diagnosis of addiction, access to treatment/recovery services, inpatient/outpatient treatment, medication assisted therapy, naloxone use
- Strategies to address root causes: trauma, chronic stress, mental health counseling/treatment
- Additional funding for grants to communities for interventions
- Education and treatment guidelines for neonatal abstinence syndrome

Law enforcement strategies

- Enhanced arrest/convention of drug trafficking, diversion, theft, illegal manufacturing
- Drug court options for addicts instead of jail/prison time
- Increased access to treatment/recovery services for the incarcerated

Community strategies

- Community opioid emergency declaration
- Community needs assessment, strategic planning, collaboration with other stakeholders
- Community awareness, education, wellness and prevention activities
- Naloxone distribution
- Community economic development strategies
- Implementation of the recommendations of the Tribal Behavioral Health Agenda

Litigation Strategy

- Pharmaceutical company oversupply - seek economic and injunctive relief to prevent future abuses

Federal/State/Local government efforts

- Education and awareness of opioid crisis, available resources, collaboration with tribes
- More data/research on needs, solutions, sharing of best and promising practices
- Increased resources for provider, treatment/recovery, law enforcement and community strategies

Citation: NCAI Policy Research Center (2018). *Research Policy Update: The Opioid Epidemic: Definitions, Data, and Solutions*. National Congress of American Indians, March 2018.

Questions: NCAI Policy Research Center – email: research@ncai.org; website: <http://www.ncai.org/prc>