Ohio's Opiate Epidemic

April 2012

The Problem

Ohio's opiate epidemic is a crisis of unparalleled proportions with devastating, often deadly, consequences. Opiates include both heroin and prescription pain reliever medications. In fact, these substances accounted for nearly 63 percent of the state's 1,544 overdose deaths in 2010.

In addition to the human toll, Ohio's opiate and prescription drug epidemic has severely strained law enforcement, criminal justice and health care resources and stretched the capacity of Ohio's publicly-funded alcohol and other drug addiction treatment services system.

Evidence increasingly points to opiate addiction as a major driver of increasing health care costs as well. A study in the Journal of Managed Care Pharmacy estimates that the medical expenses of a person who is abusing opioids are eight times those of a non-addict. Meanwhile, CareSource, a leading managed care provider in Ohio, has reported that one in four Aged, Blind and Disabled (ABD) Medicaid recipients enrolled in its program are using opiate painkillers.

Southern Ohio has been particularly hard-hit by this crisis and is widely considered "a window on the world" in terms of the wreckage caused when prescription drug abuse and addiction becomes entrenched in a community. The Ohio State Board of Pharmacy reported 8.2 million doses were legally dispensed to Scioto County residents in 2011. This is double the per capita rate dispensed in Cuyahoga County (Greater Cleveland). Scioto County, which has less than 79,000 residents, had the highest overdose death rate (26.0) per 100,000 from 2006-2010.

Developing and implementing cost-effective policies and strategies to resolve the crisis is a collective responsibility. From generating greater public awareness around the issue to toughening state laws and regulations around how controlled substances are prescribed (HB 93), and embracing evidence-based treatment technologies such as Medication-Assisted Treatment (MAT), Ohio is acting swiftly and decisively to formulate a coordinated response to rein in spiraling health care costs and prevent more tragic deaths.

On average, four Ohioans die each day as a result of drug overdose.
(Source: Ohio Department of Health)

Key Facts

- 8.2 million doses of prescription painkillers were legally dispensed to Scioto County residents in 2011. That amounts to 103.6 doses for every man, woman and child. (Source: Ohio Board of Pharmacy, 2012)
- Since 2007, unintentional drug overdoses have been the leading cause of accidental death in Ohio. Fatal and non-fatal poisonings cost Ohioans $3.6 billion annually. (Source: Ohio Department of Health, "Burden of Poisoning in Ohio, 1999-2008")
- Prescription painkillers accounted for nearly 63 percent of unintentional overdose deaths in 2010. (Source: Ohio Department of Health)
- The Ohio Substance Abuse Monitoring (OSAM) Network reports a move from prescription painkillers to heroin among opiate abusers. Heroin is highly available in all regions of the state. (Source: ODADAS, OSAM Network, 2012)
- 85 percent of substance abuse treatment requests at The Scioto County Counseling Center are for opiate addiction, marking a 300 percent increase in the past three years. (Source: Scioto County Rx Drug Action Team)
Ohio's Opiate Epidemic — page 2

[Map Information:]
This map represents the doses of prescription opioids available for each person during 2011. Ohio's average per capita rate is 66.7 doses. The counties with the highest per capita rates were Jackson (120.1), Adams (111.9) and Gallia (108.9). The counties with the lowest per capita rates were Holmes (20.7), Mercer (36.2) and Geauga (41.6).

2011 Prescription Opiate Consumption Per Capita

Proportion of drug overdoses among Ohio residents involving selected drugs, 2010[^1,^2]

<table>
<thead>
<tr>
<th>Drug Type</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>unspecified/multiple drugs**</td>
<td>66%</td>
</tr>
<tr>
<td>all opioids*</td>
<td>63%</td>
</tr>
<tr>
<td>prescription opioids</td>
<td>45%</td>
</tr>
<tr>
<td>methadone</td>
<td>10%</td>
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<td>heroin</td>
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[^1]: Source: Ohio Department of Health; Center for Public Health Statistics and Informatics
[^2]: Multiple substances are usually involved in overdose deaths
[^3]: Includes involvement of prescription opioids and/or heroin
[^4]: *at least two substances were involved
[^5]: **no specific drug was identified

Data Source: Data adapted from the Ohio State Board of Pharmacy
Map produced March 2012

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[Certificate data. As such, we assume that the reported drugs are likely under-estimates of their involvement.](Image)

Multiple drug use has continued to increase from 16 percent (233) in 2008 to 20 percent (338) in 2010. Approximately two-thirds (979; 63 percent*) of the drug overdoses involved prescription opioids and/or heroin. More than one-fourth (431; 28 percent*) of the overdoses involved commonly-prescribed opioids such as oxycodone, hydrocodone and morphine (data not shown).

Heroin-involved deaths were Holmes (20.7), Mercer (45.3), Allen (45.0) and Geauga (41.6). The counties with the lowest per capita rates were Holmes (20.7), Mercer (45.3) and Geauga (41.6).

Ten percent* of the overdoses involved methadone (prescription opioid) (see Table 1). Violence and Injury Prevention Program (VIPP) data adapted from the Ohio State Board of Pharmacy.

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