

Opioid Use Disorder: Epidemiology

The public health toll of the opioid epidemic is a stark reality in communities throughout the United States. In 2017, 2.1 million people had an opioid use disorder.¹ Despite vigorously disseminated campaigns to reduce opioid prescribing as a strategy to reduce opioid risks, there were still 58 opioid prescriptions written for every 100 Americans in 2017.² In that same year, 2 million people misused prescription opioids for the first time.¹ Smaller cities or larger towns with higher percentages of white populations and more people who are unemployed or uninsured tend to have higher rates of opioid prescribing.²

The opioid epidemic is lethal. On average 130 Americans, adolescents to older adults, die every day from an opioid overdose. There have been three distinct causative waves of opioid deaths: 1) commonly prescribed opioids 2) heroin 3) synthetic opioids (primarily fentanyl).³

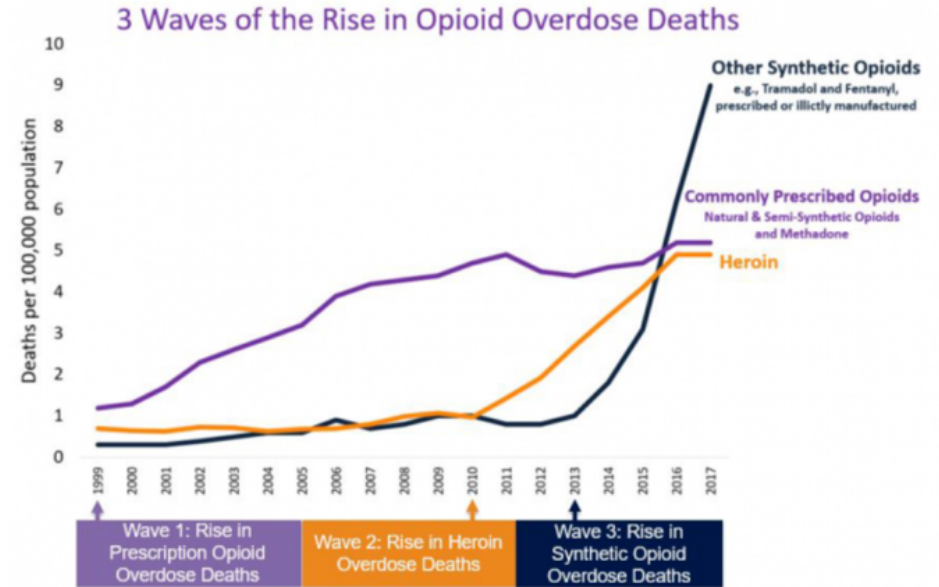
THE OPIOID EPIDEMIC BY THE NUMBERS

- 130+** People died every day from opioid-related drug overdoses³ (estimated)
- 11.4 m** People misused prescription opioids¹
- 47,600** People died from overdosing on opioids²
- 2.1 million** People had an opioid use disorder¹
- 886,000** People used heroin¹
- 81,000** People used heroin for the first time¹
- 2 million** People misused prescription opioids for the first time¹
- 15,482** Deaths attributed to overdosing on heroin²
- 28,466** Deaths attributed to overdosing on synthetic opioids other than methadone²

SOURCES

- 2017 National Survey on Drug Use and Health, Mortality in the United States, 2016
- NCHS Data Brief No. 293, December 2017
- NCHS, National Vital Statistics System. Estimates for 2017 and 2018 are based on provisional data.

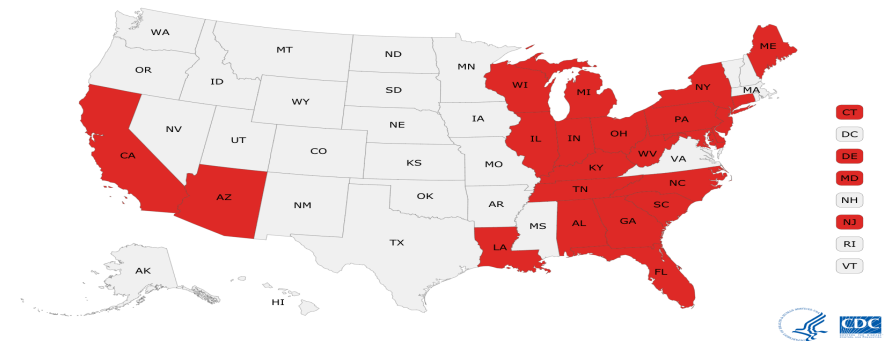
MHS.GOV/OPIOIDS



SOURCE: National Vital Statistics System Mortality File.

The opioid epidemic is a local reality. California is one of 23 states demonstrating a statistically significant rise in drug overdose deaths between 2016-2017, and 68 % of all drug overdose deaths are related to opioids.⁴

Statistically significant drug overdose death rate increase from 2016 to 2017, US States



The **California Opioid Surveillance Dashboard** is a useful resource that provides state and county level data on opioid deaths and opioid prescribing:

<https://discovery.cdph.ca.gov/CDIC/ODdash/>

California Quick Stats



In 2017, there were 2,196 opioid overdose deaths in California and 4,281 opioid overdose ED visits, without including heroin overdoses.⁵ Although prescription opioid deaths peaked in 2009 and have subsequently leveled off, they remain the most common source of overdose death.⁶ 21,787,042 opioid prescriptions were written in California in 2017.⁶

Although nationally the white, non-Hispanic population has demonstrated the highest rates of overdose death, in California the Native American population is disproportionately at risk for opioid overdose.^{6,7} The most at risk age groups for opioid overdose death in California are ages 55-59 and 25-34.⁵

2017 : Age Groups : **All Opioid Overdose Deaths** : Crude Rate per 100k Residents

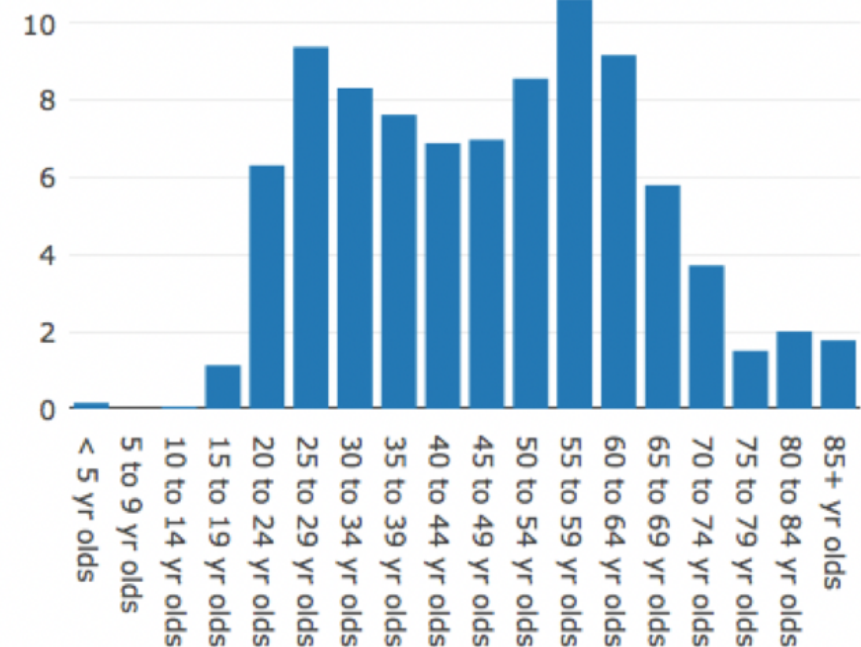
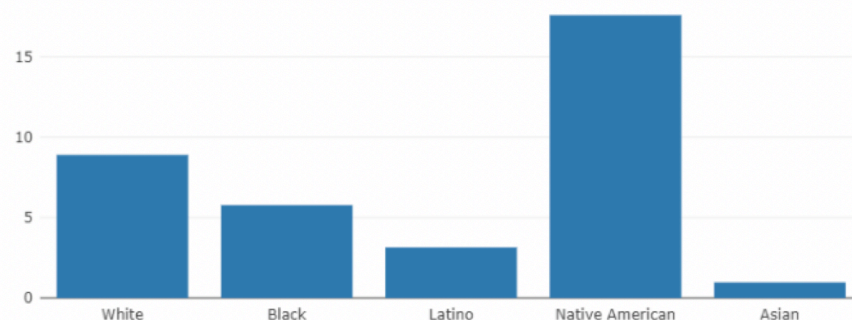


Image 2. Age-adjusted opioid overdose death rates per 100k residents by race/ethnicity (2017)

2017 : Race/Ethnicity : **All Opioid Overdose Deaths** : Age-Adjusted Rate per 100k Residents



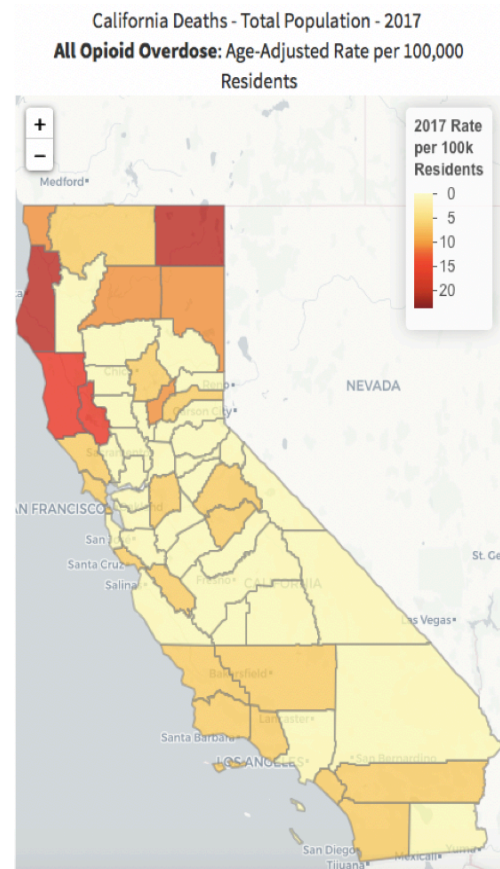
Rural counties in Northern California have demonstrated a comparatively high risk for opioid overdose. Counties with high overdose rates tend not to have access to specialized narcotic treatment programs (NTP).^{5,6} It is estimated that in California there are between 165,977 to 245,093 persons with an opioid use disorder without access to opioid agonist treatment.⁸ This reinforces the need to increase the number of opioid agonist prescribers and further integrate treatment for opioid use disorder within primary care and other community-based programs.

The Urban Institute Health Policy Center estimates that adding 3,525 opioid agonist prescribers in California could fill 31.9% of the treatment gap. County level fact sheets on opioid treatment gaps and strategies to address community need are available from the Urban Institute: <https://www.urban.org/policy-centers/health-policy-center/projects/california-county-fact-sheets-treatment-gaps-opioid-agonist-medication-assisted-therapy-oa-mat-and-estimates-how-many-additional-prescribers-are-needed>

Opioid use disorder is pervasive throughout California and the need to extend the reach of effective treatment is critical. It can be expected that healthcare trainees will encounter opioid use disorder in their clinical training and future practice settings. It is essential to heighten awareness of the treatment need and prepare the next generation of healthcare providers to effectively address the opioid epidemic.

Some resources for opioid use disorder epidemiologic data:

- 1) Centers for Disease Control and Prevention: <https://www.cdc.gov/drugoverdose/epidemic/index.html>
- 2) Substance Abuse and Mental Health Services Administration: <https://www.samhsa.gov/find-help/atod>
- 3) National Institute on Drug Abuse: <https://www.drugabuse.gov/drugs-abuse/opioids>
- 4) U.S. Department of Health and Human Services: <https://www.hhs.gov/opioids/about-the-epidemic/index.html>
- 5) The Urban Institute Health Policy Center: <https://www.urban.org/policy-centers/health-policy-center/projects/california-county-fact-sheets-treatment-gaps-opioid-agonist-medication-assisted-therapy-oa-mat-and-estimates-how-many-additional-prescribers-are-needed>
- 6) California Department of Public Health Opioid Dashboard: <https://discovery.cdph.ca.gov/CDIC/ODdash/>



References

- 1) United States Department of Health and Human Services (2019). What is the U.S. Opioid Epidemic? Accessed at <https://www.hhs.gov/opioids/about-the-epidemic/index.html>
- 2) Center for Disease Control and Prevention (2018). Prescription Opioid Data. Accessed at <https://www.cdc.gov/drugoverdose/data/prescribing.html>
- 3) Centers for Disease Control and Prevention (2018). Understanding the Epidemic. Accessed at <https://www.cdc.gov/drugoverdose/epidemic/index.html>
- 4) Centers for Disease Control and Prevention (2018). Drug Overdose Deaths. Accessed at <https://www.cdc.gov/drugoverdose/data/statedeaths.html>
- 5) California Department of Public Health (n.d.). California Opioid Overdose Surveillance Dashboard. Accessed at <https://discovery.cdph.ca.gov/CDIC/ODdash/>
- 6) Drafler, K., Urada, D., Antonini, V., Padwa, H, Joshi, V., & Sandoval, J. (2018). *California State Targeted Response to the Opioid Crisis: Year 1 Evaluation Report*. Los Angeles, CA: UCLA Integrated Substance Abuse Programs.
- 7) Centers for Disease Control and Prevention. 2018 Annual Surveillance Report of Drug-Related Risks and Outcomes — United States. Surveillance Special Report. Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. Published August 31, 2018. Accessed [date] from www.cdc.gov/drugoverdose/pdf/pubs/2018-cdc-drug-surveillance-report.pdf
- 8) Clemans-Cope, L. Wissoker, D.A. & Epstein, M. (2018). California County Fact Sheets: Treatment Gaps in Opioid-Agonist Medication Assisted Therapy (OA-MAT) and Estimates of How Many Additional Prescribers Are Needed. Retrieved from <https://www.urban.org/policy-centers/health-policy-center/projects/california-county-fact-sheets-treatment-gaps-opioid-agonist-medication-assisted-therapy-oa-mat-and-estimates-how-many-additional-prescribers-are-needed>