

Opiate Use in Arkansas
Update from Arkansas Department of Health

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Opioids

Naturally occurring drugs derived from opium; medically used for pain relief

- Codeine
- Morphine
- Methadone – pain and treatment for abuse
- [Heroin – abuse only]

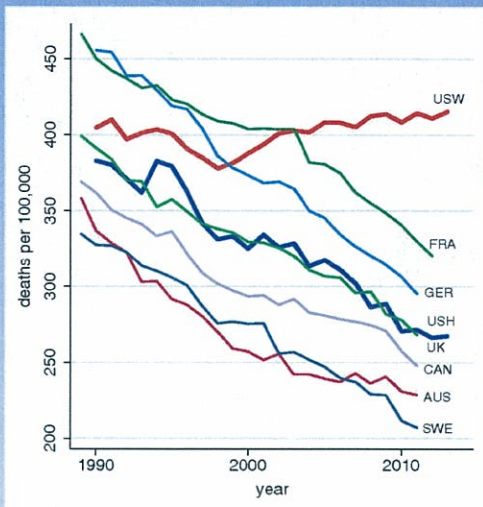
Synthetic drugs; medically used for pain relief

- Oxycodone
- Hydrocodone
- Fentanyl
- Hydromorphone
- Oxymorphone
- Buprenorphine – treatment for abuse only

US Perspective on Opioid Problem

- Now in every news outlet
- Even both parties in Congress agree!
- The President is engaged and helping

All-cause mortality, ages 45–54 for US White non-Hispanics

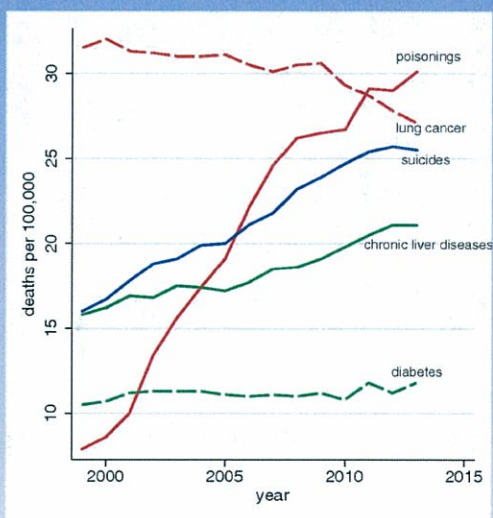


Case and Deaton PNAS 2015;112:15078-15083

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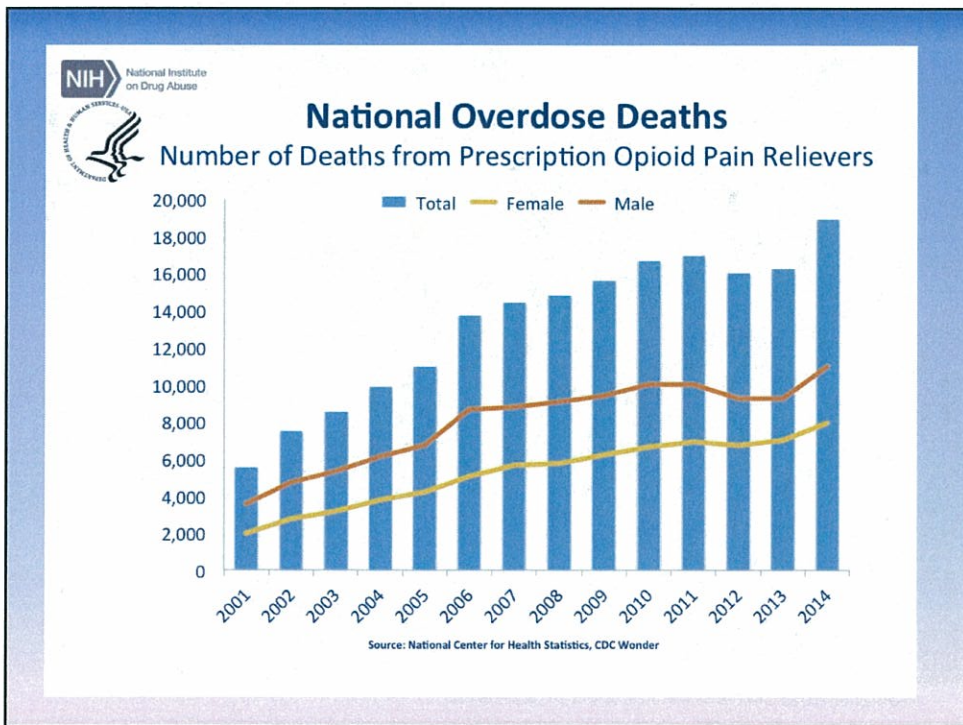
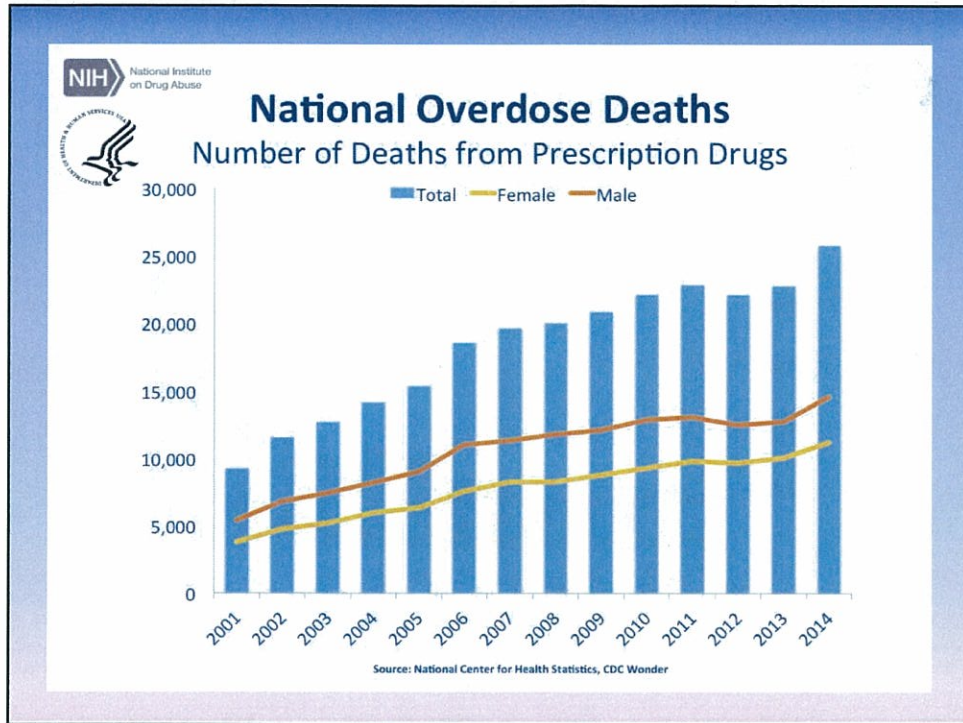
Mortality by cause, white non-Hispanics ages 45–54.

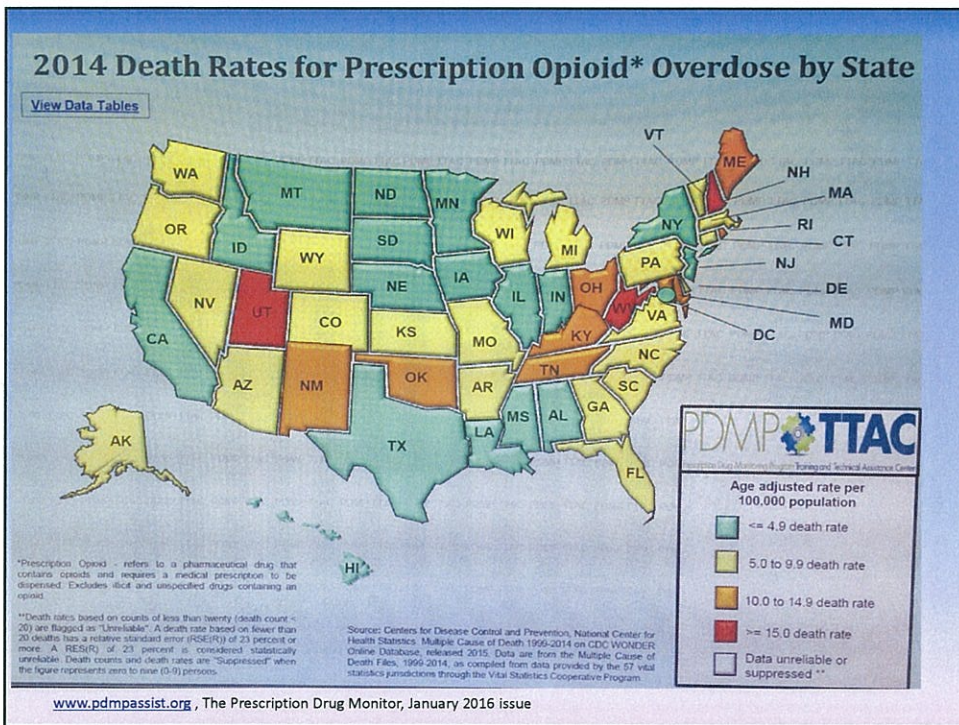
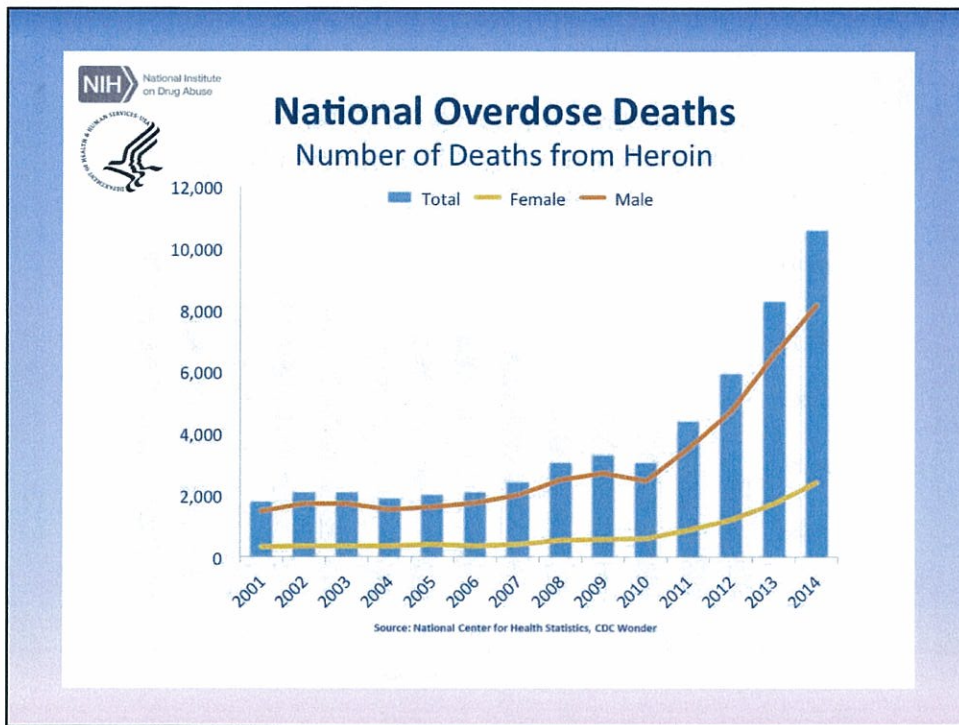


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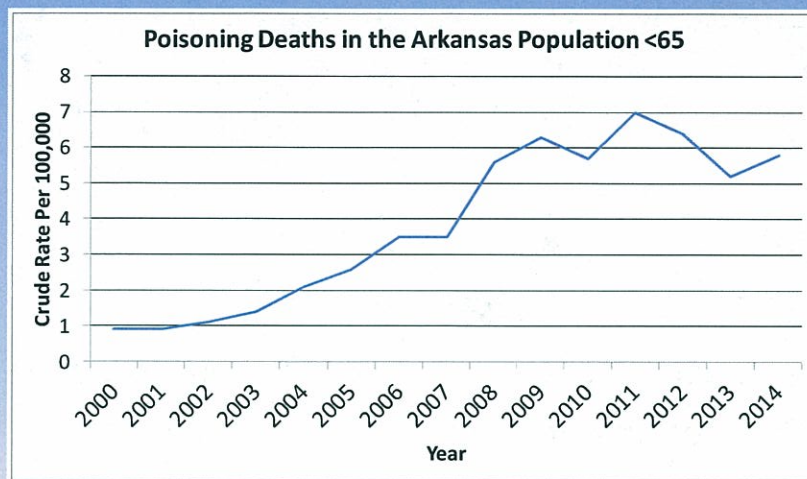
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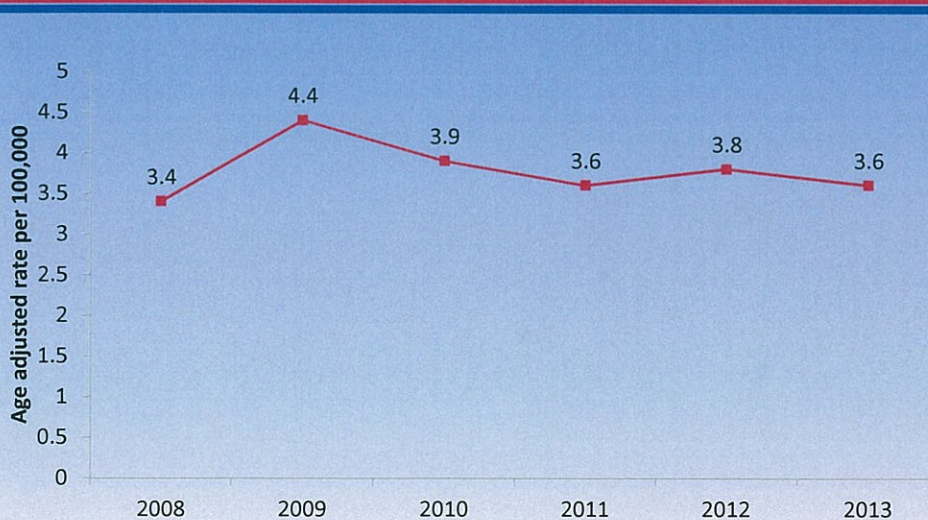


Arkansas Trend



Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2014 on CDC WONDER Online Database

Death Rate from Opioid Poisoning 2008-2013



Source: CDC WISQARS

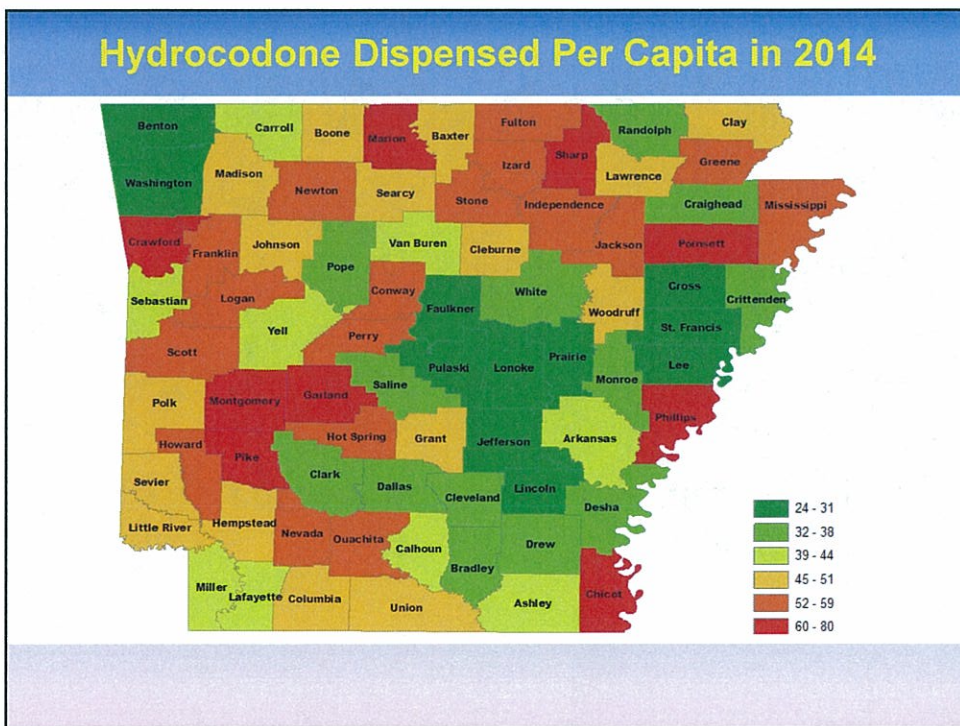
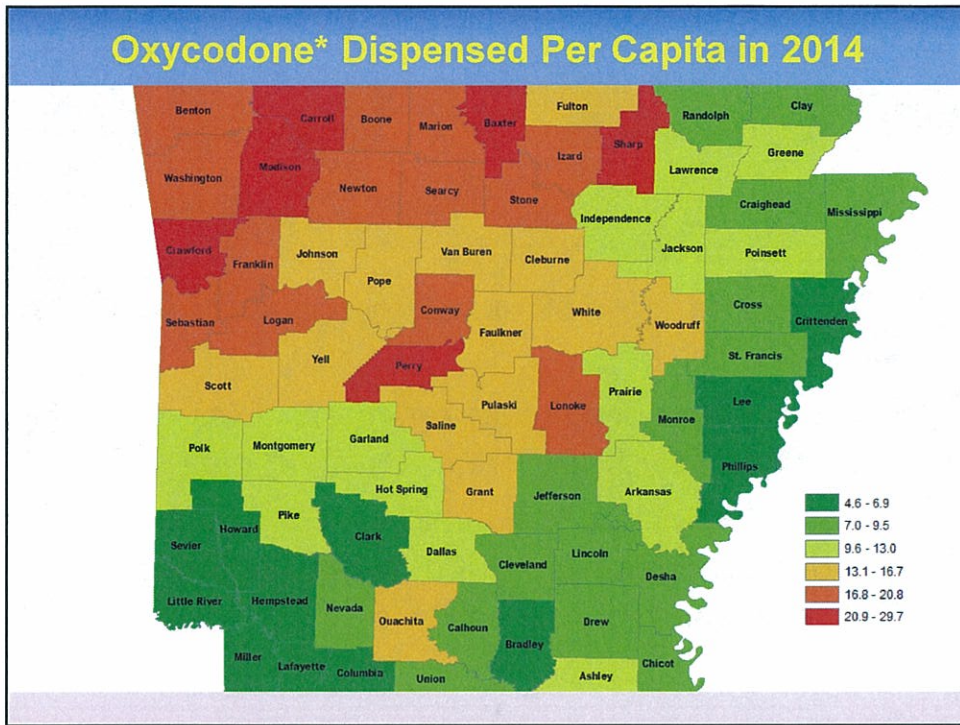
Approximately 108 opioid related deaths in Arkansas

The CDC estimates for every death there is:

- 10 treatment admission
- 32 ER visits for misuse or abuse
- 130 people who were abusers or dependent
- 825 non-medical users

Where is Arkansas is this happening?

- Everywhere
- Hot spots



Summary

- National and State epidemic of opioid overuse, abuse, and related deaths
- Arkansas is about mid-range in magnitude of the problem
- The costs to our state are enormous (lives, disability, healthcare, criminal justice, etc.)
- Our problem, due to our modest-sized population and the cooperative spirit of Arkansans/Arkansas-based organizations is solvable

Recommendations

- More treatment and treatment programs
- More flexibility with use of PDMP (Enabling legislation)
- Modest resources needed to address the problems
- Encouragement for organizations to fully cooperate