CLINICAL TRENDS IN OVERDOSE

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Medical Director
Gateway Rehabilitation Center

Number of Overdoses by Year Allegheny County

Year	Number of Overdose Fatalities
1980-1990	Average of 58 per year
1998	104
2001	180
2005	223
2006	252
2008	236
2009	223
2010	226

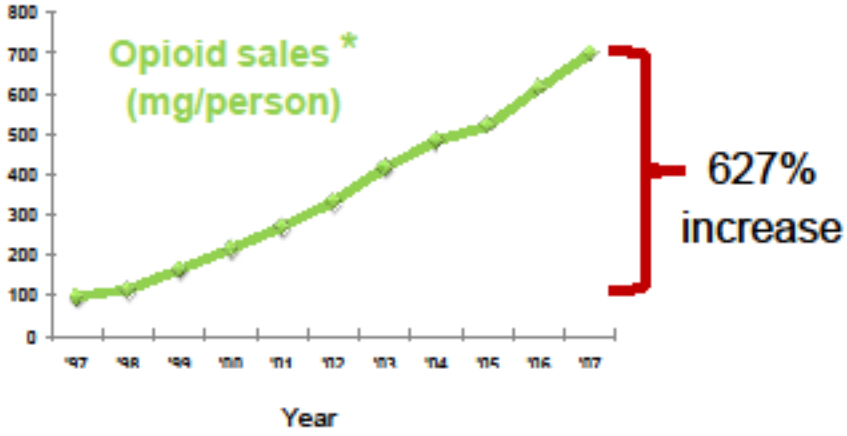
Drug overdose deaths increasing in Allegheny County

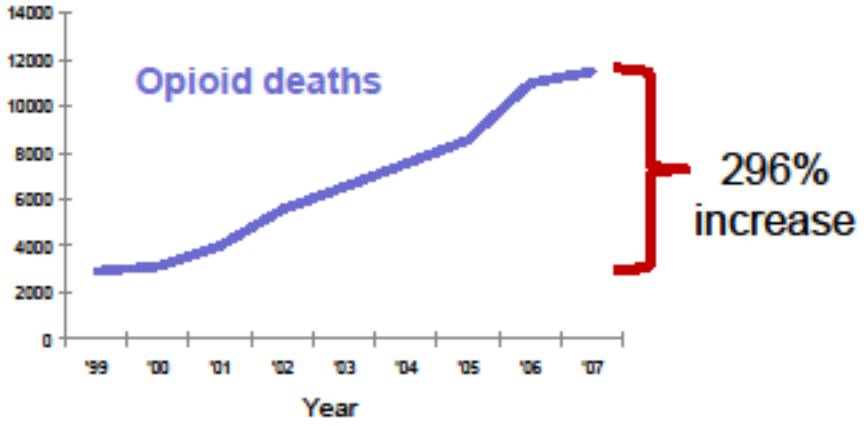
Roberta Lojak holds a high school graduation picture of her daughter Ashley Elder, who died of a heroin overdose in October 2001. Lojak is standing in a garden she planted in her daughter's memory

September 27, 2004, Pittsburgh Post-Gazette

Unintentional Overdose Deaths Involving Opioid Analgesics Parallel Opioid Sales United States, 1997–2007

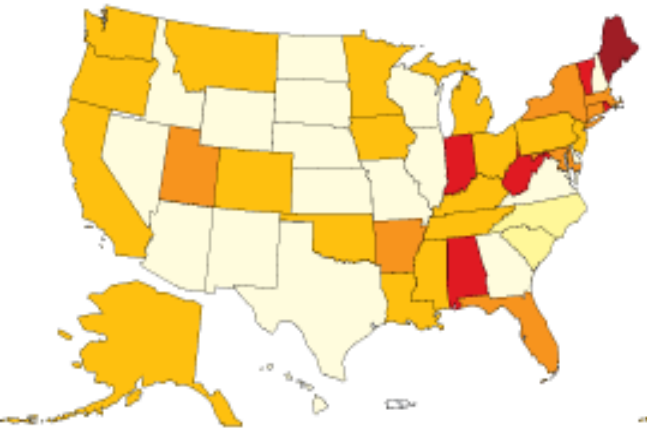
- **Distribution by drug companies**
  - 96 mg/person in 1997
  - 698 mg/person in 2007
    - Enough for every American to take 5 mg Vicodin every 4 hrs for 3 weeks
- **Overdose deaths**
  - 2,901 in 1999
  - 11,499 in 2007



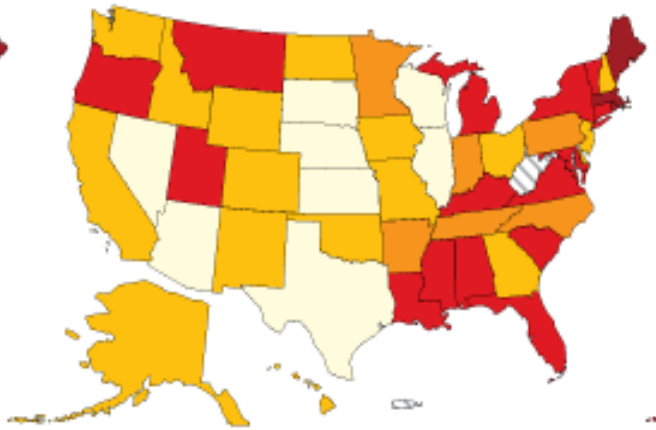


National Vital Statistics System, multiple cause of death data set and Drug Enforcement Administration ARCOS System
* 2007 opioid sales figure is preliminary

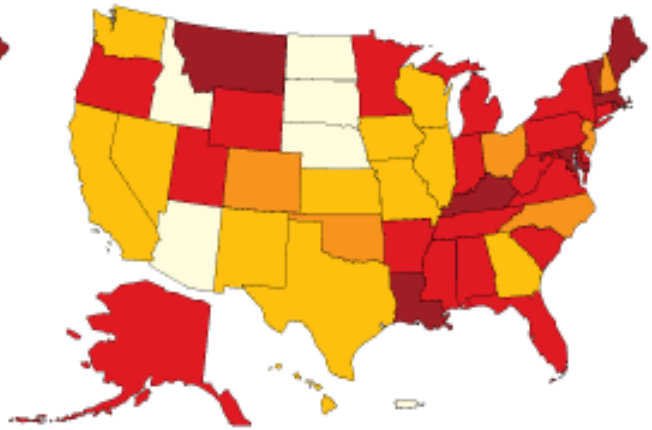
Figure 7. Primary non-heroin opiates/synthetics admission rates, by State or jurisdiction: 1999-2009
(per 100,000 population aged 12 and over)



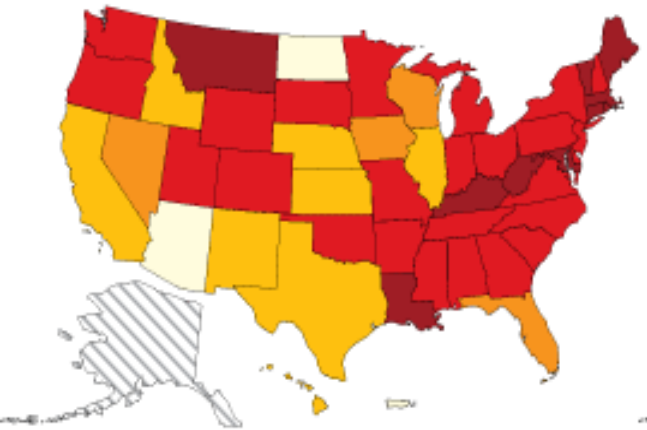
1999
(range 1 - 50)



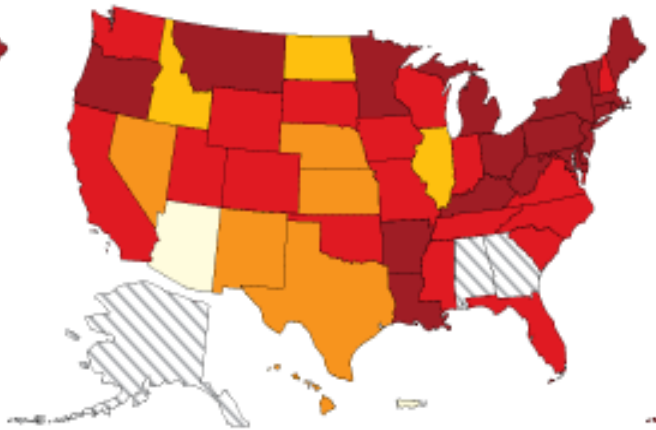
2001
(range 1 – 71)



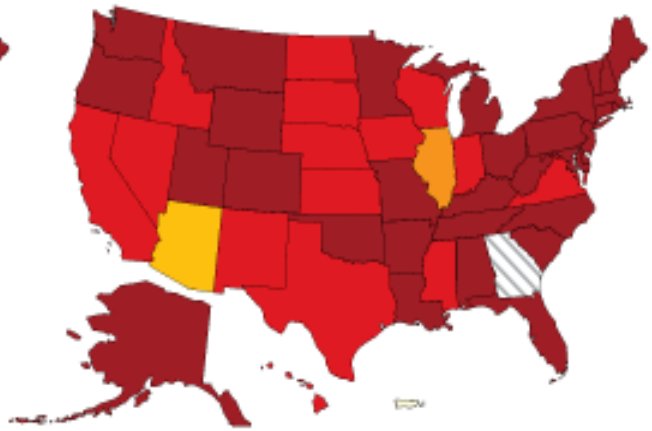
2003
(range 2 – 139)



2005
(range 0 – 214)



2007
(range 1 – 340)



2009
(range 1 – 379)

KEY YEAR: 1999

< 8
8 - 14
15 - 18
19 - 44
45 or more
Incomplete data

NOTES: See Chapter 1.

SOURCE: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS). Data received through 11.03.10.

The supply of prescription painkillers is larger than ever

- The quantity of prescription painkillers sold to pharmacies, hospitals, and doctor's offices was 4 times larger in 2010 than in 1999.

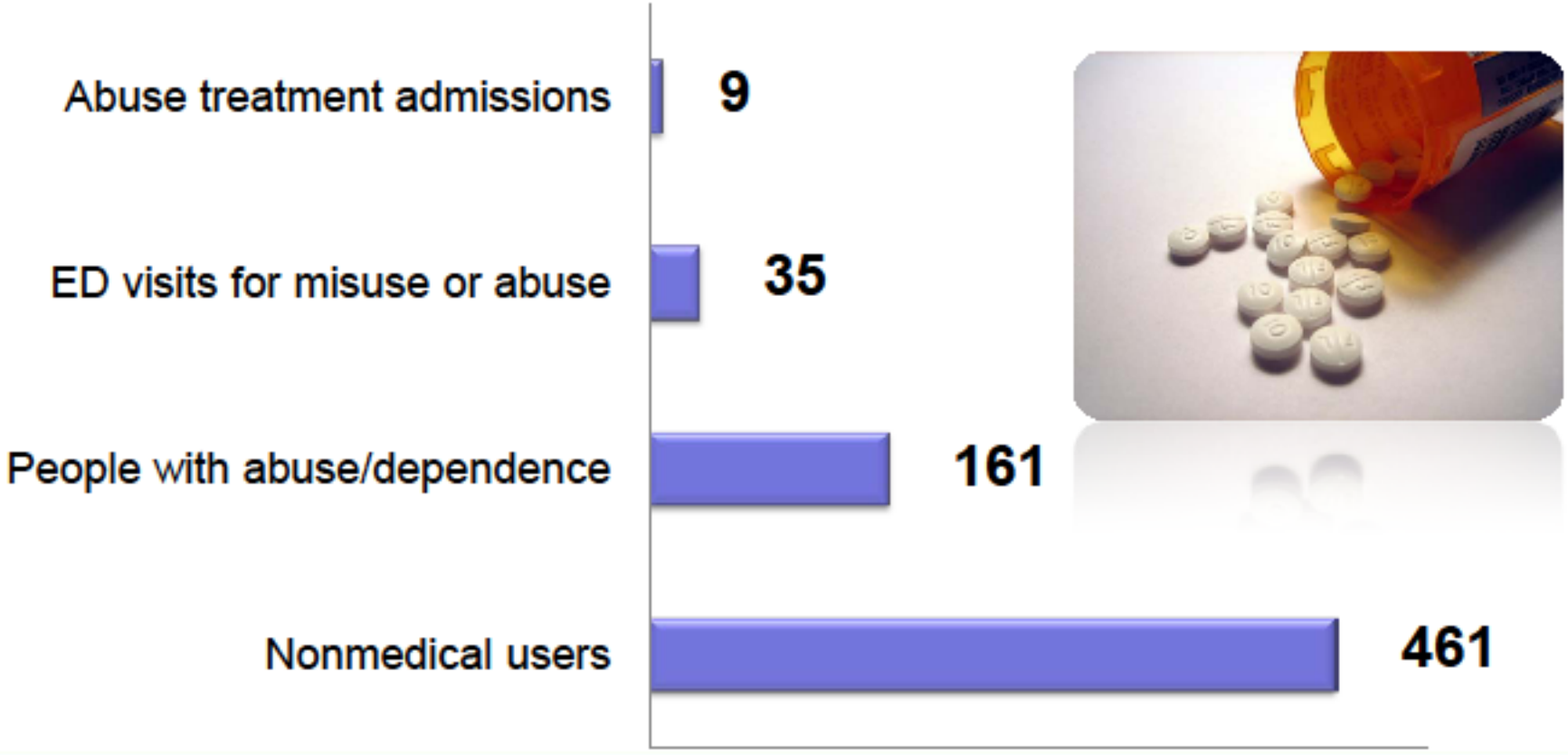
- Enough prescription painkillers were prescribed in 2010 to medicate every American adult around-the-clock for a month.

Prescription painkiller overdoses are a public health epidemic

- Prescription painkiller overdoses killed nearly 15,000 people in the US in 2008. This is more than 3 times the 4,000 people killed by these drugs in 1999.
- Nearly half a million emergency department visits in 2009 were due to people misusing or abusing prescription painkillers.
- Nonmedical use of prescription painkillers costs health insurers up to $72.5 billion annually in direct health care costs.

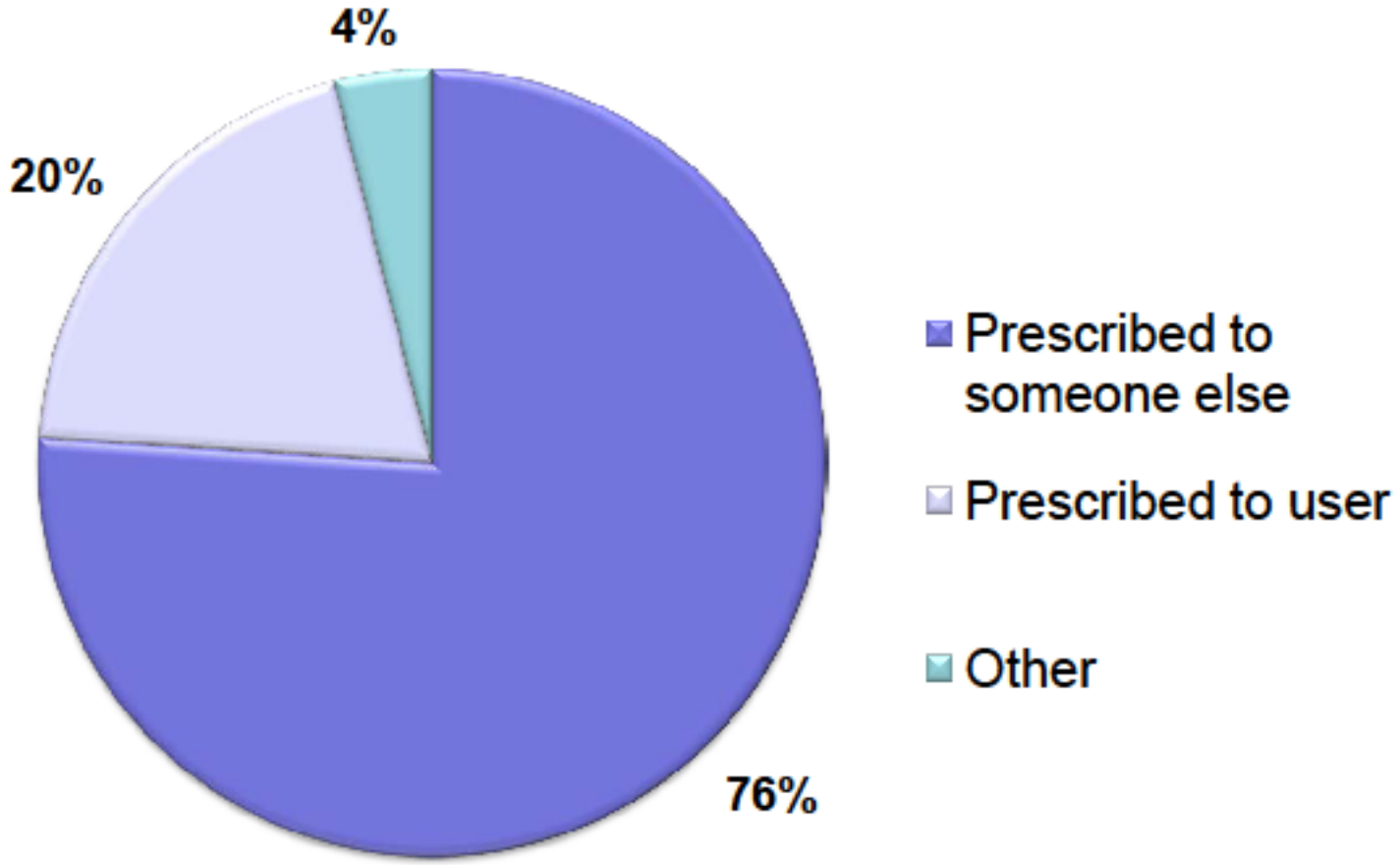
Public Health Impact of Opioid Analgesic Use

For every 1 overdose death there are



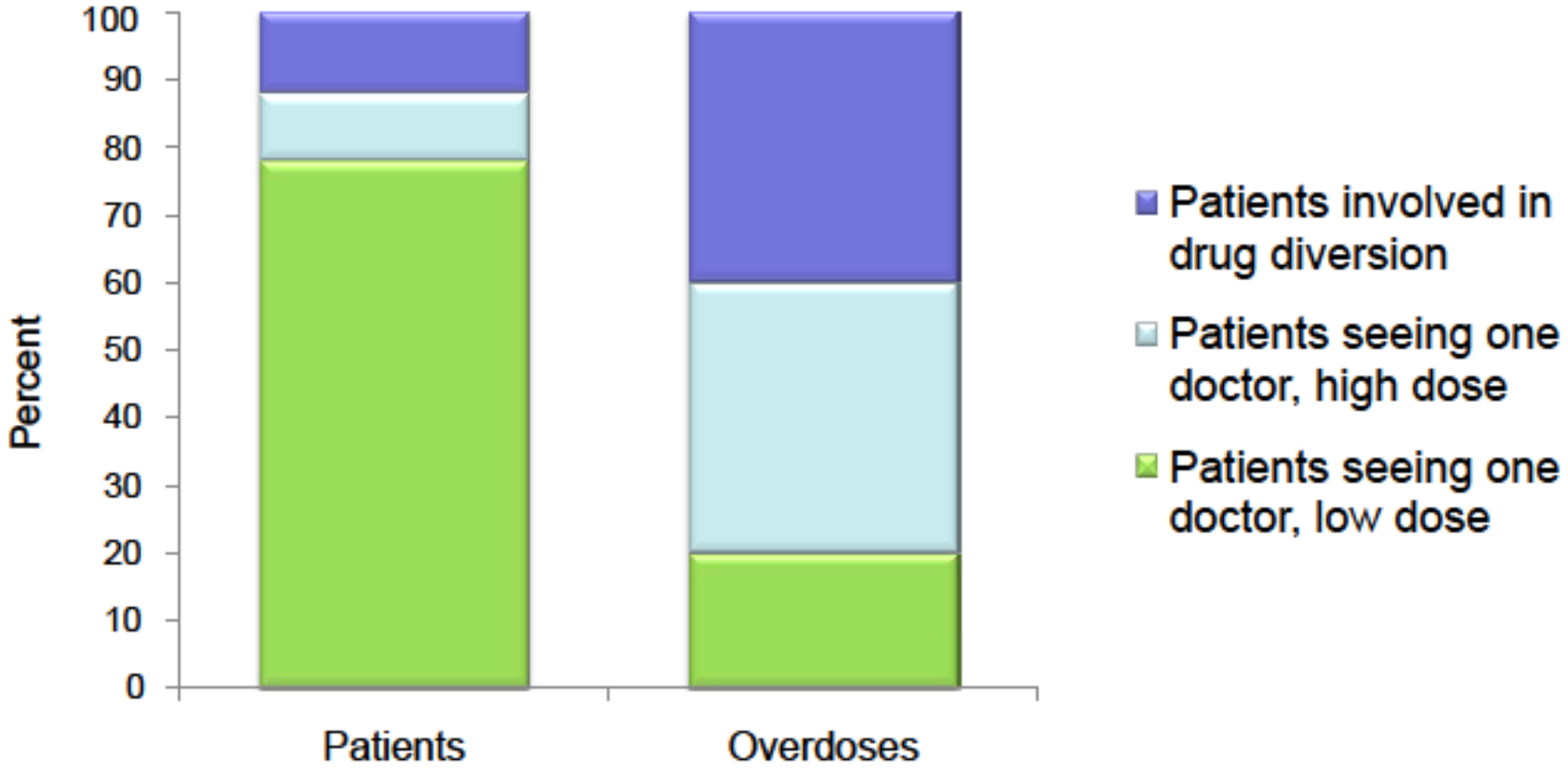
Treatment admissions are for primary use of opioids from Treatment Exposure Data set
Emergency department (ED) visits are from DAWN, Drug Abuse Warning Network, https://dawninfo.samhsa.gov/default.asp
Abuse/dependence and nonmedical use in the past month are from the National Survey on Drug Use and Health

Opioid Analgesics: Sources for Nonmedical Users United States, 2009



National Survey on Drug Use and Health. Summary of national findings, 2008-2009
http://www.oas.samhsa.gov

Distribution of Patients and Overdoses by Risk Group



Reason for Using Prescription Pain Relievers: PATS Attitude Tracking Study: 2005

- Easy to get from parents' medicine cabinets--62%
- Available everywhere--52%
- They are not illegal drugs--51%
- Easy to get through other people's prescriptions--50%
- Teens can claim to have a prescription if caught--49%
- They are cheap--43%
- Safer to use than illegal drugs--35%
- Less shame attached to using--33%
- Easy to purchase over the Internet--32%
- Fewer side effects than street drugs--32%
- Can be used as study aids--25%
- Parents don't care as much if you get caught--21%

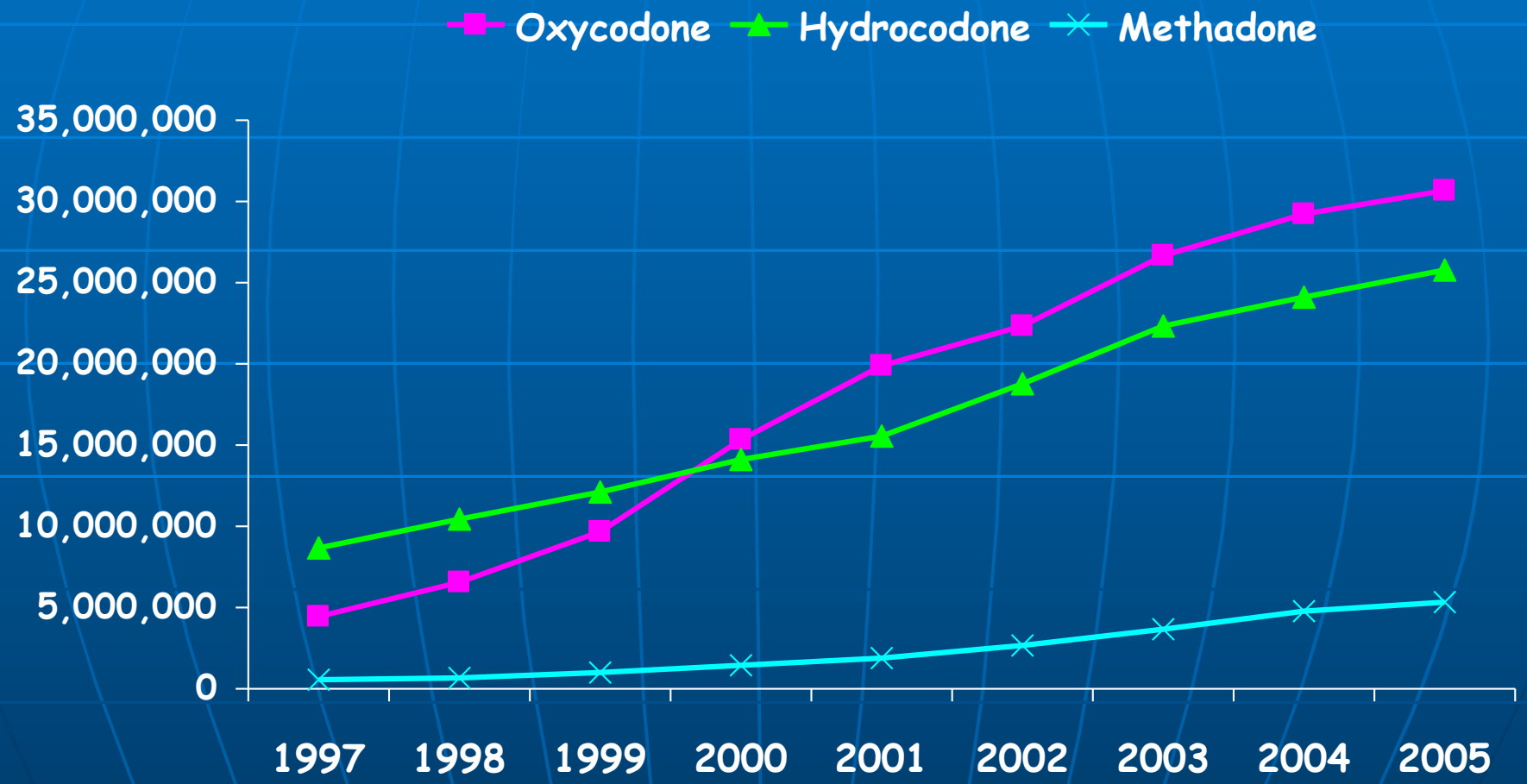
U.S. News & WORLD REPORT
MARCH 17, 1997

No Excuse For PAIN

NEW SCIENCE, OLD THINKING

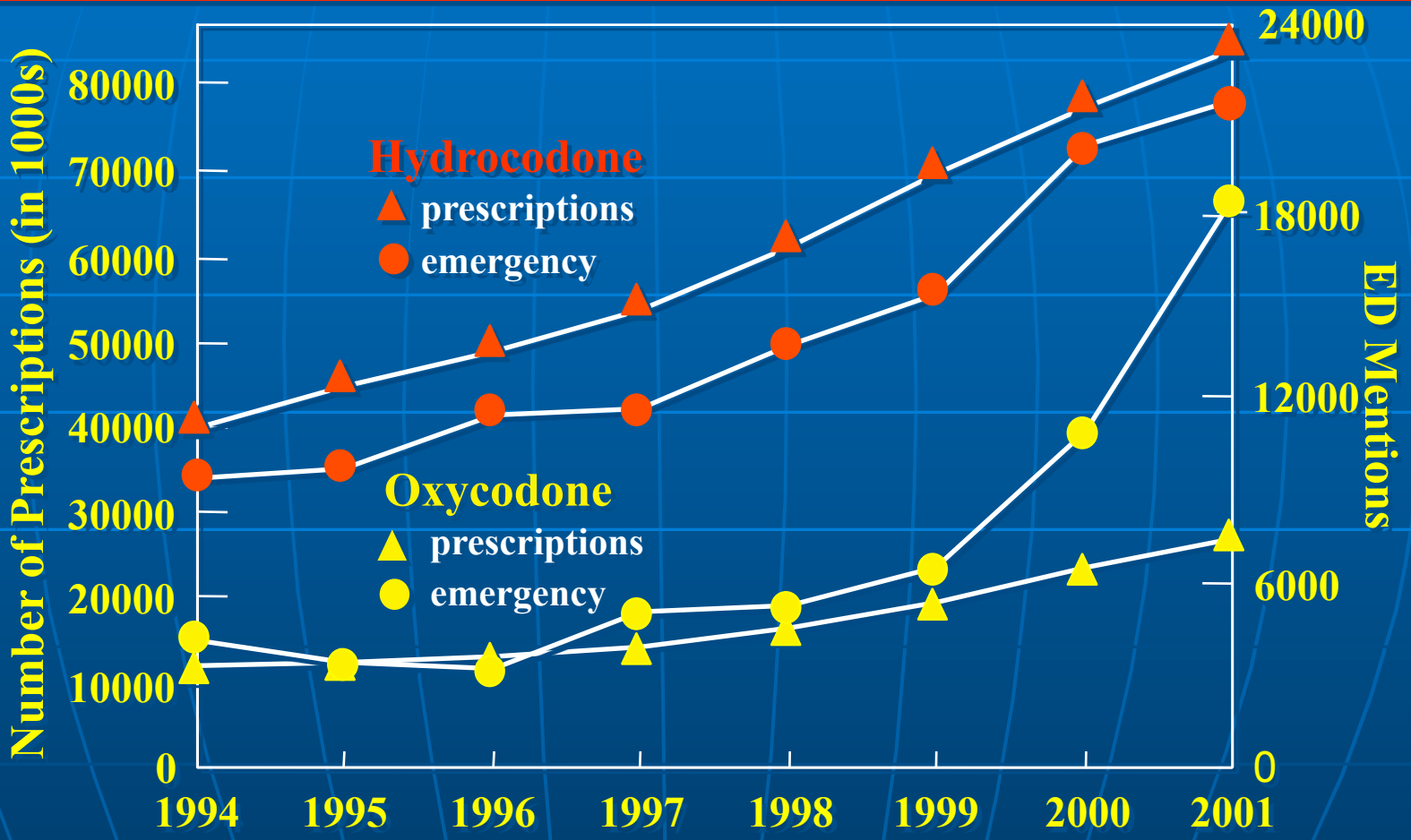
Doctors have the means at hand to relieve the suffering of millions of Americans. Why aren't they doing it?

ARCOS Retail Drug Distribution by Drug Code for the U.S: 1997-2005



Source: DEA

As Prescriptions Increase, Emergency Room Reports Have Increased at the Same or *Faster* rate



Source: SAMHSA, DAWN, 2002

January 28–30, 1999 ▪ New York City

THE THIRD CONFERENCE ON

PAIN MANAGEMENT and CHEMICAL DEPENDENCY

SPONSORS:

New York State Office of Alcoholism and Substance Abuse Services (OASAS)

National Institute on Drug Abuse (NIDA)

American Society of Addiction Medicine (ASAM)

American Pain Society

Beth Israel Medical Center
New York, New York

Final Program

If you could

prescribe an opioid with prolonged 12-hour control and prompt onset...

Wouldn't you?

If you could prescribe an opioid with the following advantages:

- The opioid you can start with and stay with
- Analgesic onset within 1 hour in most patients
- Achieves steady-state blood levels in 24-36 hours
- May be titrated every 1-2 days if necessary
- Four dosage strengths for ease of titration
- Most side effects diminish over time, except constipation
- Small, color-coded tablets are easy to swallow

Wouldn't you?

Q12h
OxyContin® CII
(OXYCODONE HCl CONTROLLED-RELEASE) TABLETS

Prompt onset, prolonged control

Q12h
OxyContin® CII
(OXYCODONE HCl CONTROLLED-RELEASE) TABLETS

Small, color-coded tablets (actual size)

WARNING:

OxyContin® is an opioid agonist and a Schedule II controlled substance with an abuse liability similar to morphine.

Oxycodone can be abused in a manner similar to other opioid agonists, legal or illicit. This should be considered when prescribing or dispensing OxyContin in situations where the physician or pharmacist is concerned about an increased risk of misuse, abuse or diversion.

OxyContin Tablets are a controlled-release oral formulation of oxycodone hydrochloride indicated for the management of moderate to severe pain when a continuous, around-the-clock analgesic is needed for an extended period of time.

OxyContin Tablets are NOT intended for use as a prn analgesic.

OxyContin 80 mg and 160 mg Tablets ARE FOR USE IN OPIOID-TOLERANT PATIENTS ONLY. These tablet strengths may cause fatal respiratory depression when administered to patients not previously exposed to opioids.

OxyContin Tablets ARE TO BE SWALLOWED WHOLE AND ARE NOT TO BE BROKEN, CHEWED OR CRUSHED. TAKING BROKEN, CHEWED OR CRUSHED OxyContin Tablets LEADS TO RAPID RELEASE AND ABSORPTION OF A POTENTIALLY FATAL DOSE OF OXYCODONE.

Illicit use of painkiller OxyContin 'exploding'

By Jonathan D. Silver
Post-Gazette Staff Writer

With startling speed and sometimes deadly consequences, the prescription painkiller OxyContin has shifted from sensation to scourge in Western Pennsylvania.

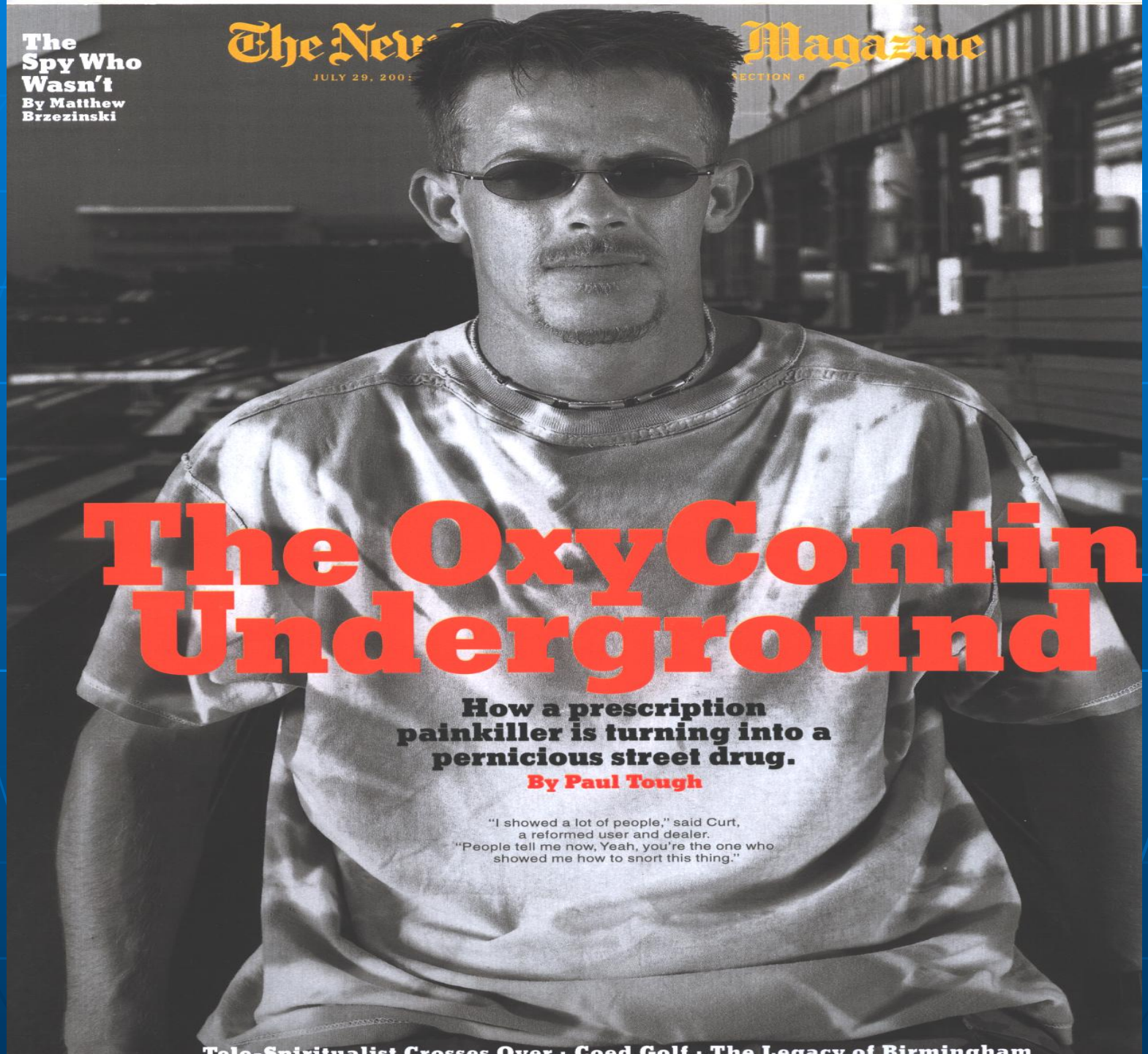
Federal agents based in Pittsburgh are conducting multiple investigations into the painkiller's illicit use. At least seven counties are reporting fatal overdoses involving OxyContin.

In Johnstown, there have been pharmacy break-ins and strong-arm robberies where only OxyContin is taken. And authorities believe that some unscrupulous or lax doctors and pharmacists are handing out the drug too freely to people faking their pain.

"It's a drug that's just exploding," said Capt. John Duignan of the Pennsylvania State Police's Bureau of Drug Law Enforcement. "Abusers are seeking easier, cheaper ways to get better highs, and word on the street travels quickly. And the word on the street now is OxyContin is available. It gives you a great high."

Patients given the powerful narcotic for moderate to severe pain often tied to cancer treatments or orthopedic problems are supposed to take one tablet twice a day. Unlike

SEE **DRUG,** PAGE A-16


The Spy Who Wasn't
By Matthew Brzezinski
The New
JULY 29, 200
Magazine
SECTION 6
The OxyContin Underground
How a prescription painkiller is turning into a pernicious street drug.
By Paul Tough
"I showed a lot of people," said Curt, a reformed user and dealer. "People tell me now, Yeah, you're the one who showed me how to snort this thing."
Tele-Spiritualist Crosses Over
Good Golf
The Legacy of Birmingham

upfront

A powerful painkilling pill called OxyContin brings relief to millions—and suffering to a small Pennsylvania town

• *by Patrick Rogers*

Police say OxyContin is the drug of choice in Windber, Pa.

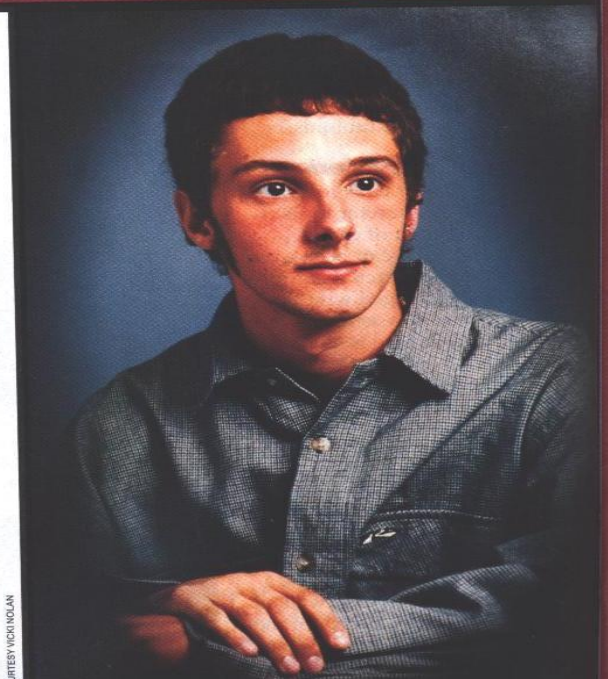
PRESCRIPTION FOR DEATH

Except for the setting—a smoky barroom in late afternoon—the family gathering in Windber, Pa., last May had all the trappings of a wake. One by one, over beer and chicken wings, relatives swapped memories of the late Bobby Wingard, a young man who, until drug addiction rewrote his life as a tragedy, had always taken a special pride in playing the family clown. "He would do the stupidest things to make you laugh," says his aunt Susan Nolan, 27. "He was such a ham."

But the Bobby Wingard who took his own life on Dec. 15 bore little resemblance to the comic character described in family lore. By then Wingard, 20, once a promising hockey player, had traded sports for drugs. Unshakably addicted to a relatively new and extremely powerful prescription painkiller called OxyContin, he did everything he could to maintain his supply, even stealing from the people he loved most. One after another the members of his tight-knit clan told him to straighten out his life. To that end, Wingard, who bought the drug on the street, had no shortage of plans. Most recently it was to join the Army. But when he was arrested for breaking into a home last winter, all hope that he might be accepted by the military vanished.

Finally, unemployed, broke and dependent on higher and higher doses of OxyContin just to make it through the day, Wingard left a message on his aunt's answering machine on Dec. 11. "Hi, Sue," he said. "This is Bob. I miss everybody. Hope you have a nice Christmas, and I'll see you the next time I can." But four days later he climbed a wooded hill and shot himself in the head with a stolen .44 Magnum handgun. "It wasn't my son who did what he did," says his grief-stricken mother, Vicki Nolan, 39, a homemaker. "It was the drug."

When it was introduced five years ago, OxyContin was hailed by some as a wonder drug. A derivative of morphine, it is now used by roughly 1 million people to fend off chronic pain caused by injury or diseases such as cancer. The drug's special time-release mechanism means a patient need take only one pill every 12 hours,



COURTESY VICKI NOLAN

"That drug controlled his life," says Rose Ann Nolan of her late grandson Bobby Wingard (in a '98 photo), who took his own life after he became addicted to OxyContin.

PHOTOGRAPHS BY APRIL SAUL

OPANA (oxymorphone)

The new King of the Streets?

PDR: 2 x oxycodone
Streets: 2-3 x oxycodone

Impending Disasters?

- Opioids
- Benzodiazepines including Ambien, Sonata, Lunesta
- Barbiturates including Soma, Fioricet
- Stimulants including Adderal, Ritalin, etc.

How significant a problem is prescription drug abuse today?

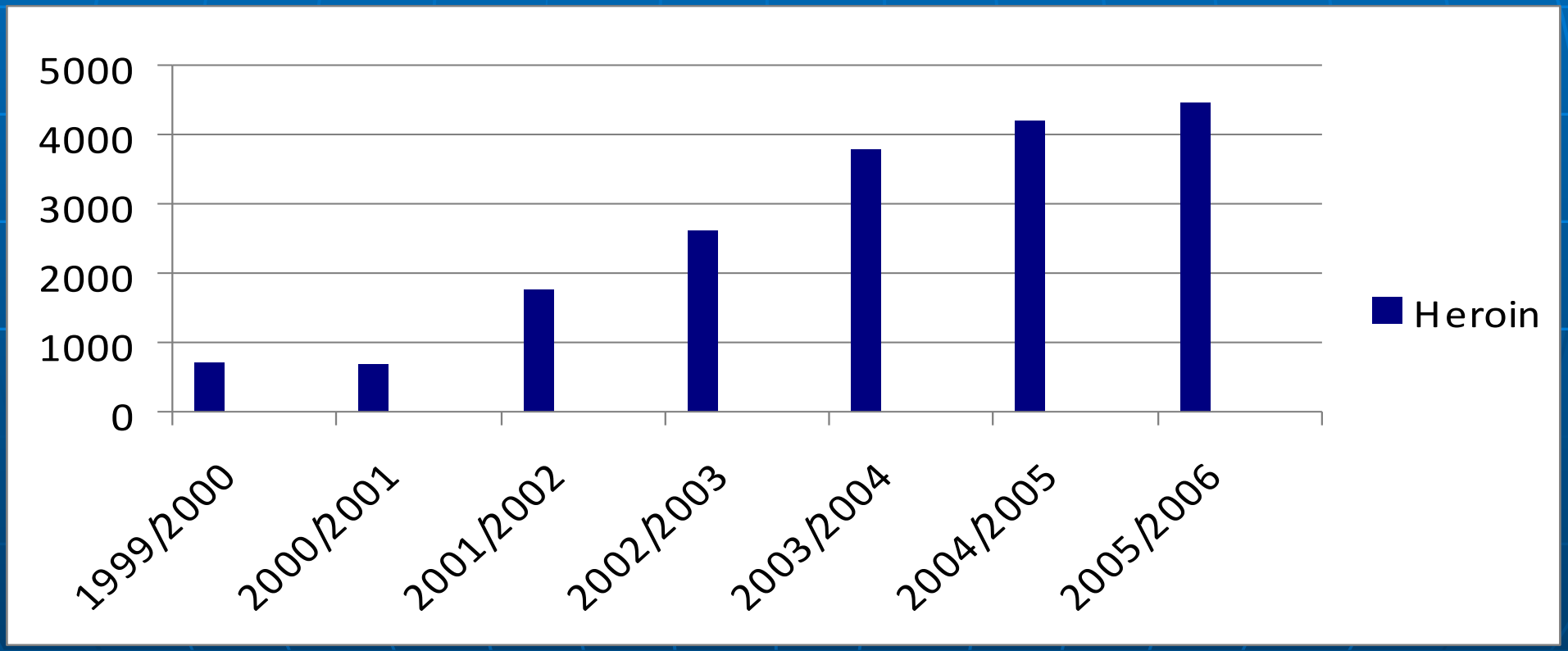
A Major Problem!

Heroin

(diacetylmorphine)
(C21H23NO5)
(dope, junk, smack, stamp bag)

Heroin Use in Allegheny County by Fiscal Year

Data from Pennsylvania Department Of Health



PURER, LESS EXPENSIVE HEROIN

In 1995, the Drug Enforcement Administration reported small retail purchases of heroin were 59% pure compared to 37% pure in 1992. In 1999 heroin in Philadelphia was reported to be 71% pure. Local law officials in Western Pennsylvania report that much of the heroin in our region is now 70% - 90% pure. This compares to average purity rates of 10% - 15% in the 1980's.

Lost to heroin

Manor family mourns death of model son

Zach Zion

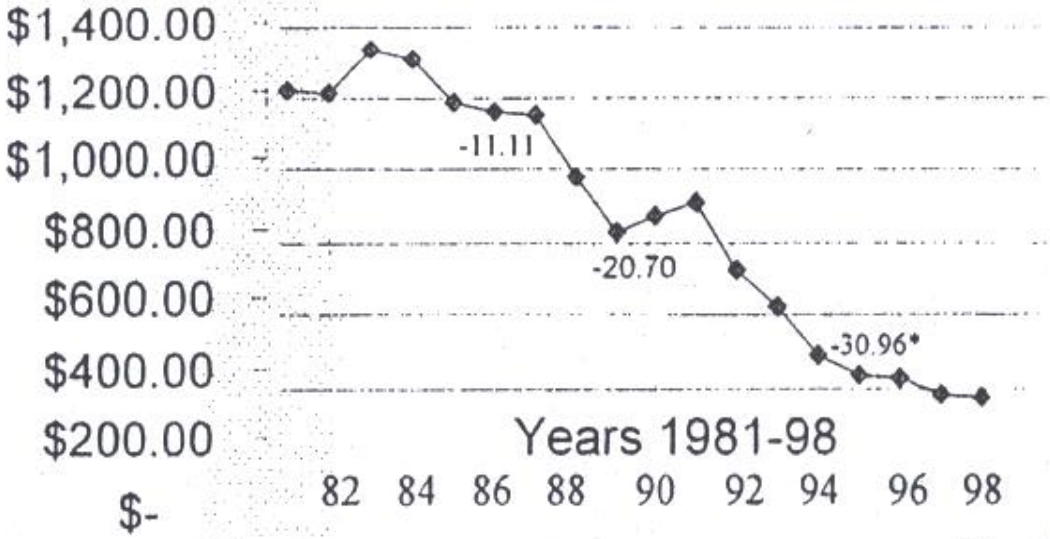
ERIC FELACK, staff photographer

YOUNGER, MORE AFFLUENT USERS

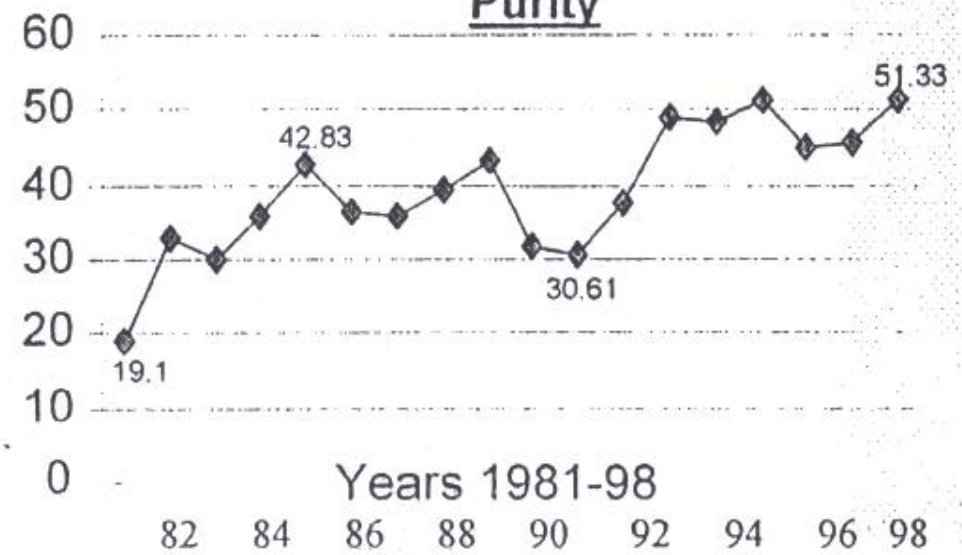
National surveys of substance abuse strongly suggest that most new users of heroin are young. According to the 1999 National Household Survey on Drug Abuse (NHSDA), a quarter of the new users were under age 18 and 47% were age 18 to 25 at their first use.

This trend of young users is confirmed by the 2000 Monitoring the Future Study, a national study of high school students, which found that 10.6% of high school seniors have tried heroin at least once in their lifetime and 1.5% had used it in the past year, resulting in the highest rate of heroin use among 12th graders since the survey began.

Price per Pure Gram/"Dealer" Level



Purity



**significant change*

ONDCP, Annual Report, 2001

INTRAVENOUS VERSUS INTRANASAL USE

Once addicted, many users shift from intranasal use to injecting heroin.

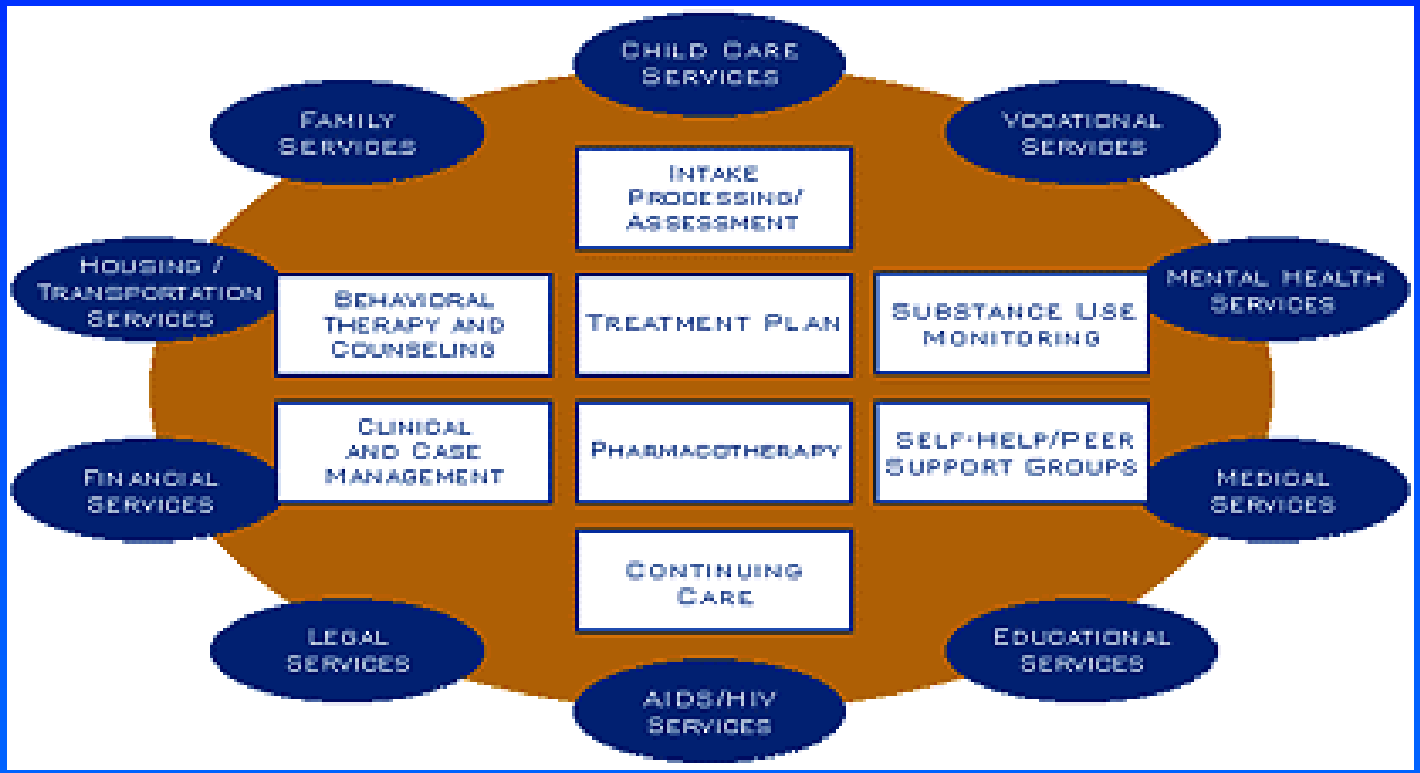
Intravenous use produces the quickest rush (seven to ten seconds) while snorting and smoking show effects within 10 to 15 minutes of use.

HEROIN

Health Hazards

Heroin abuse is associated with serious health conditions, including fatal overdose, spontaneous abortion, collapsed veins, and infectious diseases, including HIV/AIDS and hepatitis.

Components of Comprehensive Drug Addiction Treatment



ADDICTION BATTERS A THRIVING FAMILY

GatewayRehab

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