

# The Arizona Rx Drug Misuse and Abuse Initiative



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# The Opioid Influx



- \* A **4 fold increase** in the quantity of Rx Pain Relievers sold in the U.S. in the last decade
- \* The **United States** makes up 4.6% of the world's population, but **consumes 80%** of its Rx opioids
- \* **~ 1 death per day in Arizona due to Rx opioid overdoses**
- \* Rx Pain Reliever deaths are **greater than heroin and cocaine combined**

# Difficult Balancing Act

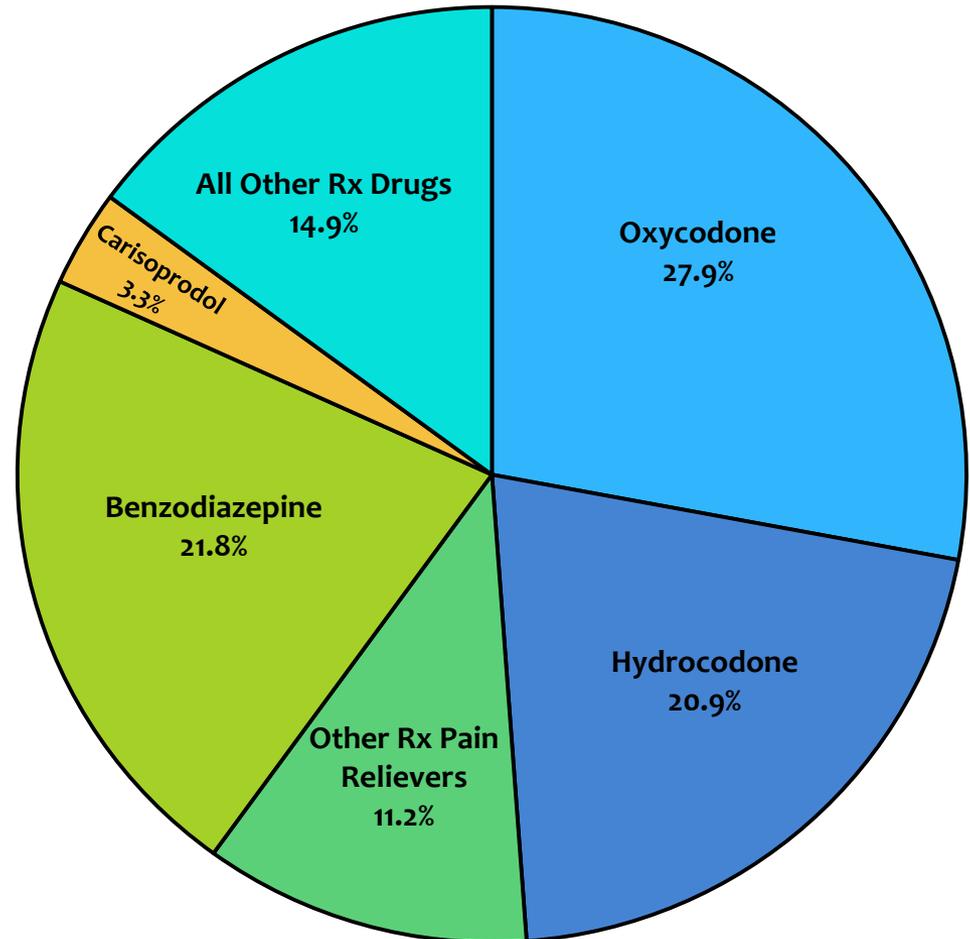
**Prescribers struggle with balancing the legitimate pain needs of their patients while ensuring their safety**

- \* **Prescribers were told over a decade ago that they weren't accessing pain well enough – Pain became the 5<sup>th</sup> Vital Sign**
- \* **Inconsistent Guidelines**
- \* **Unrealistic Expectations of the Health Consumer**
- \* **Uninformed Patients and lack of education tools/resources**
- \* **The Role of the Controlled Substances Prescription Monitoring Program (CSPMP)**

# The Problem?

- ~ **579 million** Class II-IV pills were prescribed in Arizona in 2014
- **Pain Relievers** had the highest % of scripts, pills and average number of pills per day; accounting for **60.0%** of all pills prescribed
- **Hydrocodone** and **Oxycodone** accounted for 81.4% of all pain relievers prescribed in Arizona
- Why it matters = probability and **access!**

Percentage of Pills by Drug Type in Arizona (2014)



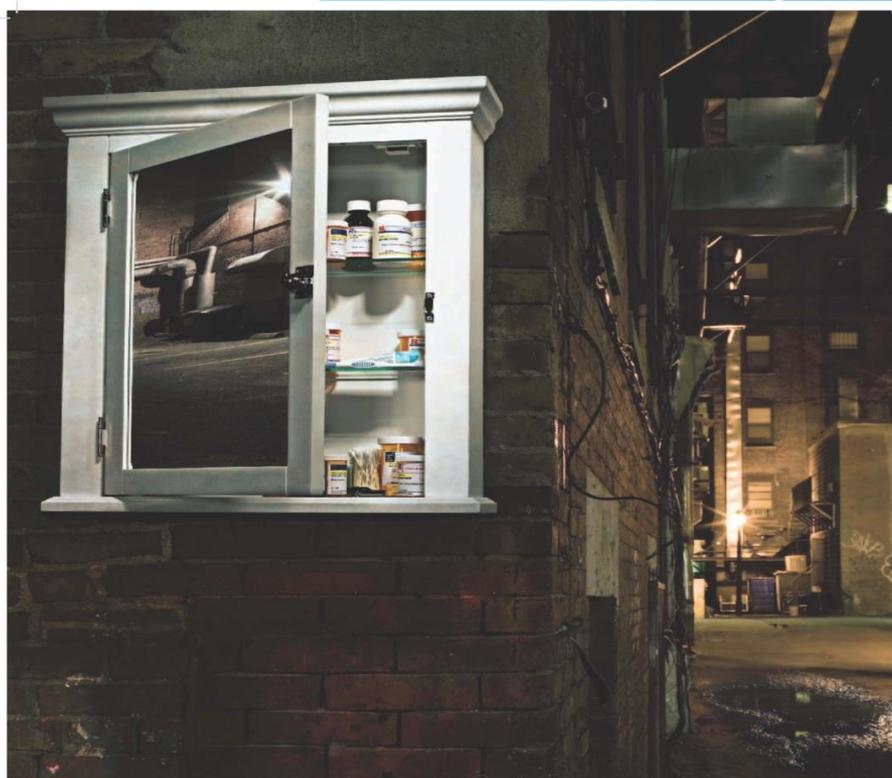
# Volume:Access Ratio

Enough Rx pain relievers were dispensed last year to medicate every adult in Arizona around-the-clock for 2 weeks straight



# Easy Access

78.9% of Arizona youth who have misused prescription drugs in the past 30 days report getting them from friends, family or right out of the home



**THERE'S A NEW DEALER IN TOWN.**

Prescription drug abuse is a problem among Pinal County teens today. You can definitely do something to stop it. Safeguard your medicine cabinet and dispose of unused medicine. Find an Rx drop box location near you by visiting [CasaGrandeAlliance.org](http://CasaGrandeAlliance.org).

**YOU CAN STOP THE DEALER.**

Casa Grande Alliance  
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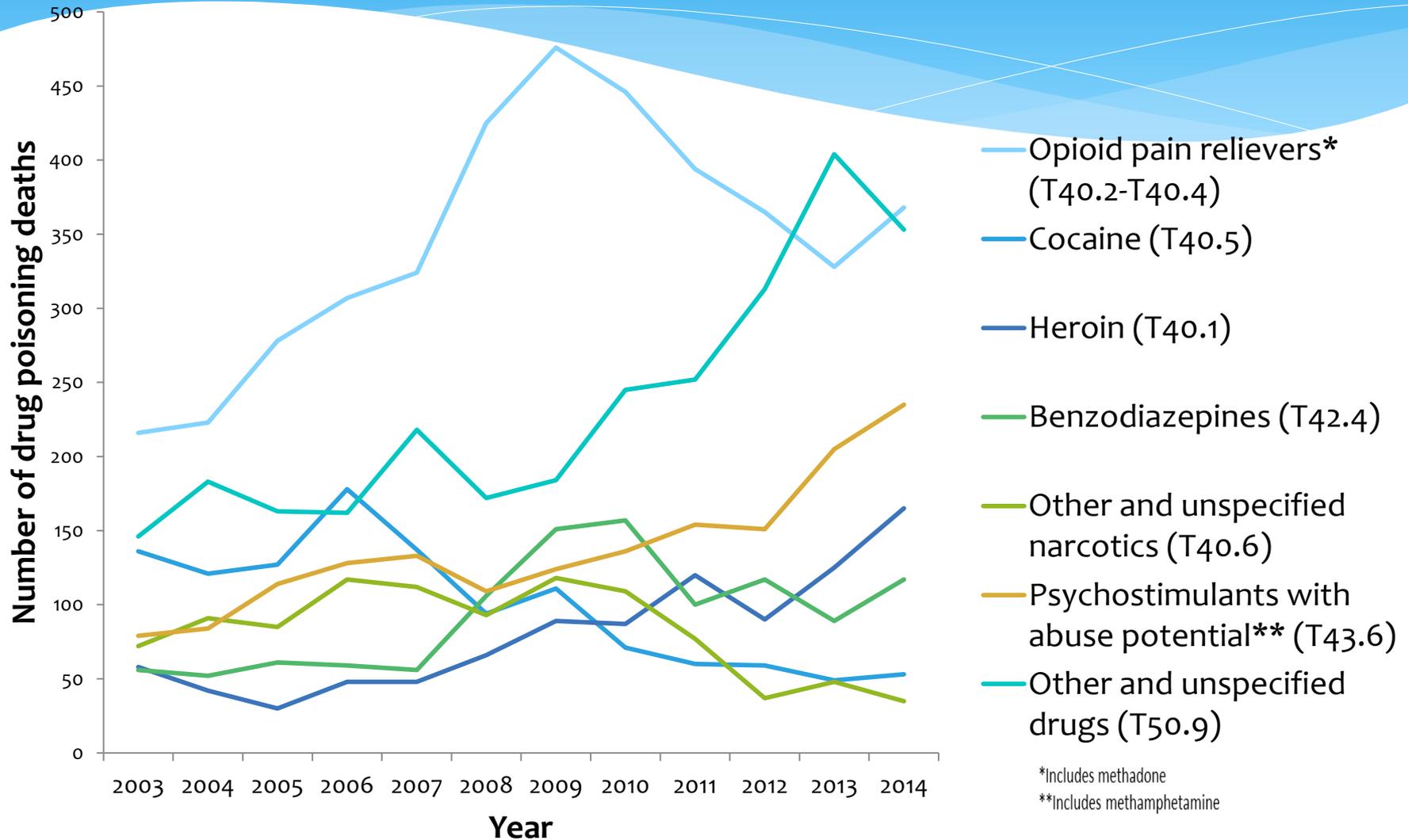


# Diversion as a Business

**Oxy and Hydro generate between \$20-\$80 a pill “on the street”  
depending on dose and formulation**

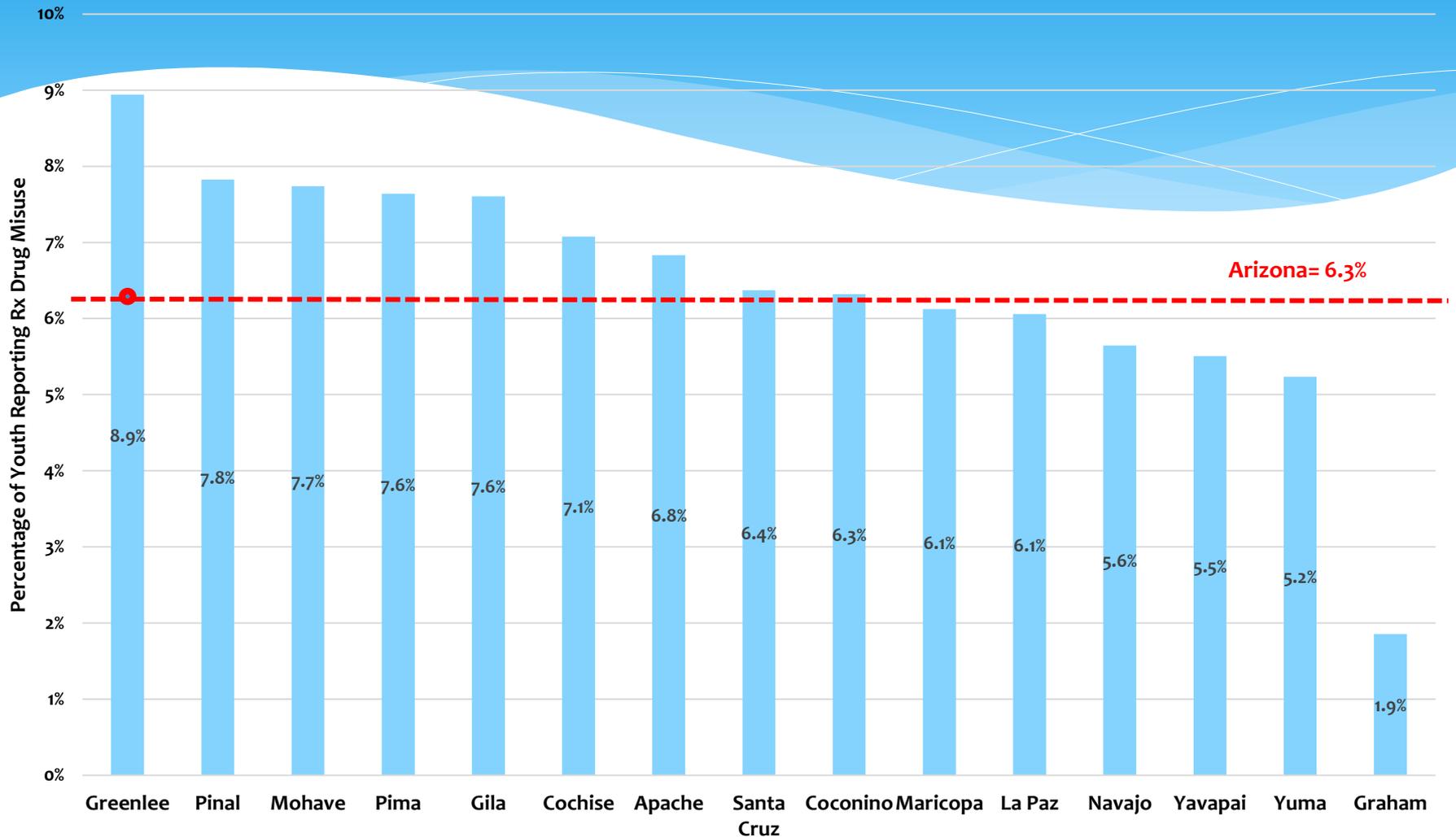


# Number of Drug Overdose Deaths Involving Selected Drugs in Arizona 2003 - 2014



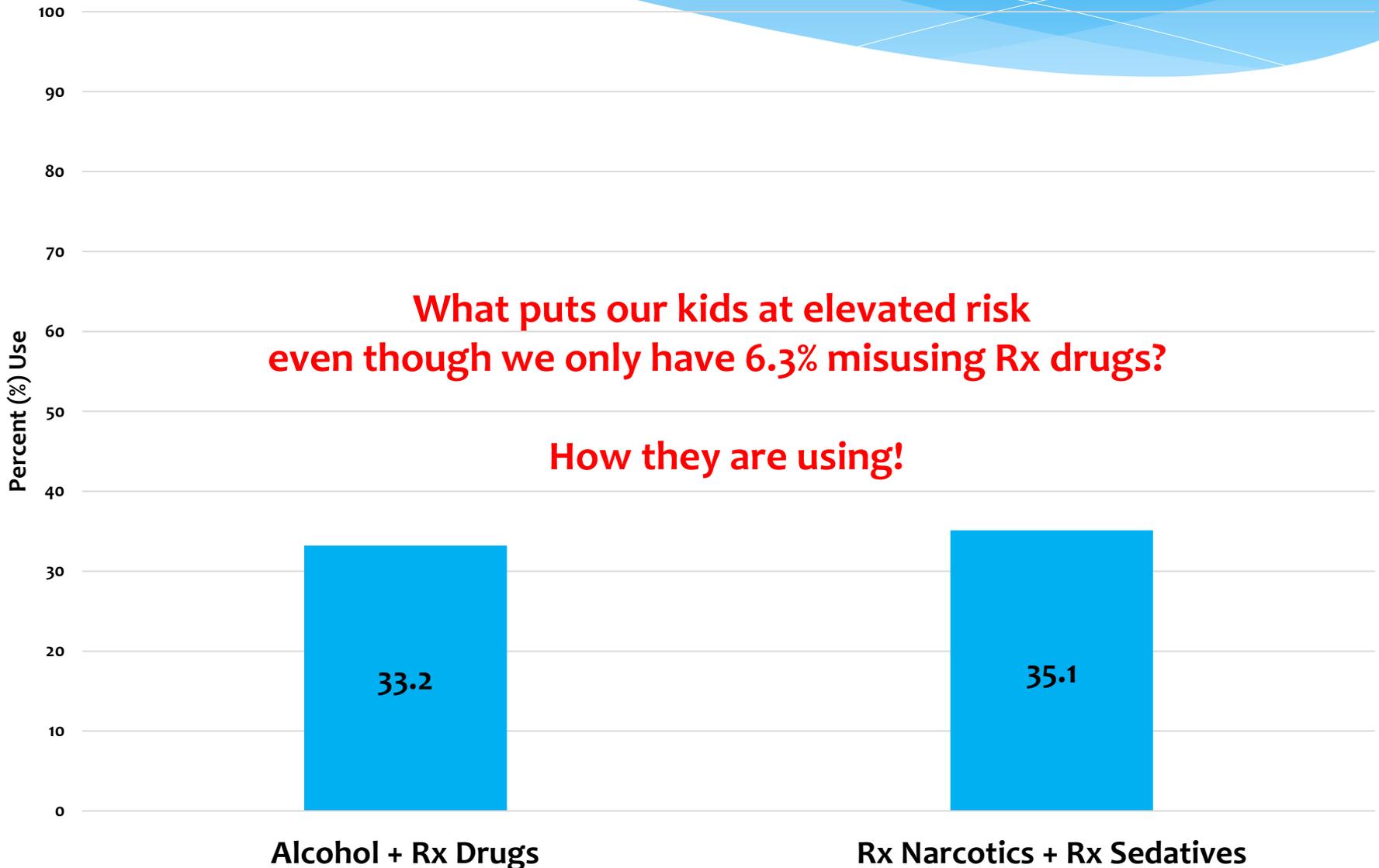
**WHO IS IT AFFECTING?**

# Past 30 Day Rx Drug Misuse Among Arizona Youth (2014)

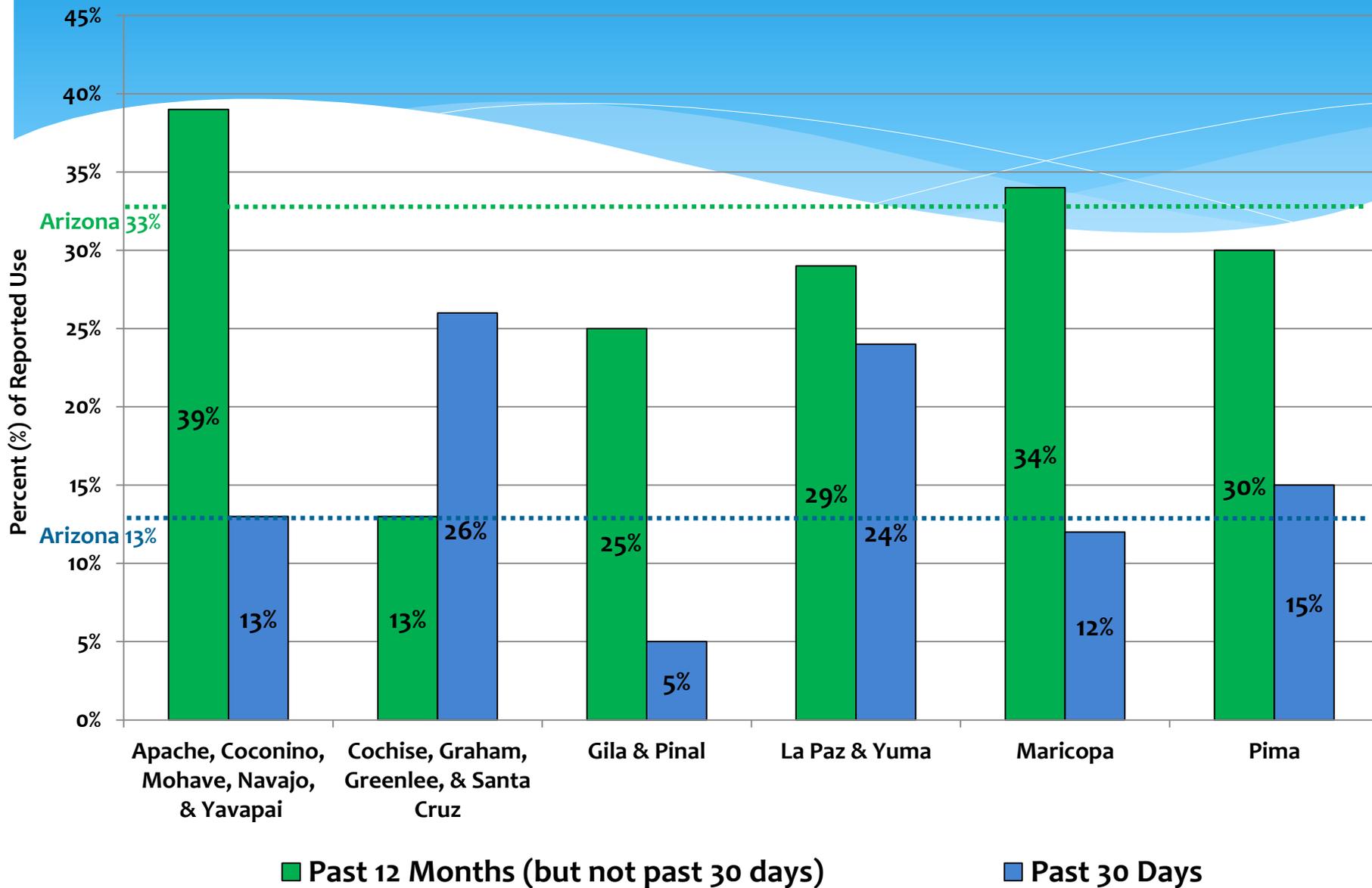


\*Y-axis altered for visual purposes; accurate representation is out of 100%

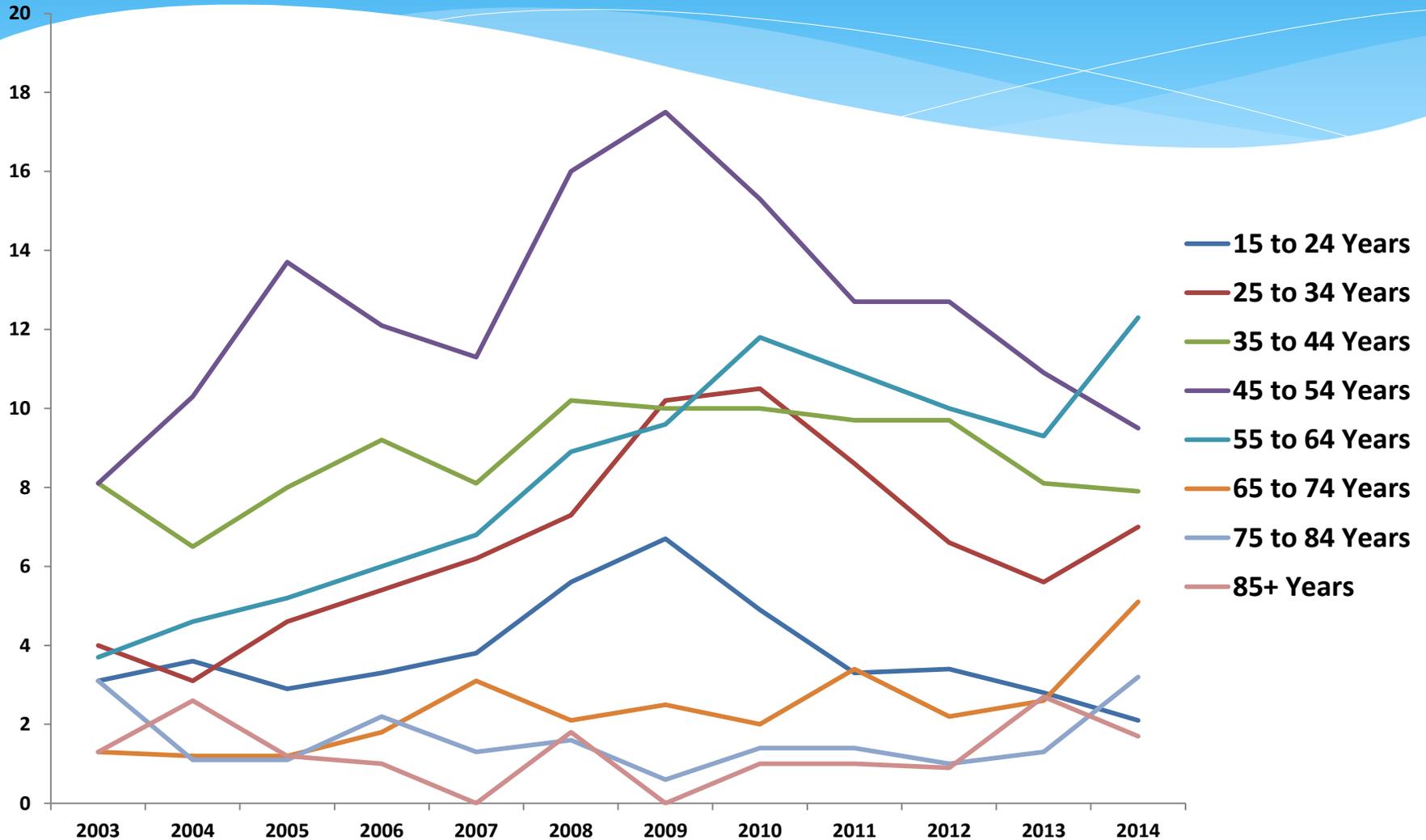
# Percentage of Arizona Past 30 Day Youth Rx Users Reporting Cocktailing (2014)



# Rx Misuse and Abuse Among Arizona Adults (2010)



# Drug Overdose Mortality Rates Involving Opiates by Age Group, Arizona 2003-2014



# What Is It Costing Us?

## \* Increase in Health Care Costs

- \* Hospital charges for non-fatal poisoning-related inpatient hospitalizations totaled more than **\$213 million** in 2013 in Arizona
- \* The average hospitalization cost over **\$32,000**
- \* 27% were charged to AHCCCS

## \* Increase in DUI-D

- \* 4,073 DUI-D arrests in AZ – a **99.4% increase** over the past decade

## \* Increase in babies born with Neonatal Abstinence Syndrome (NAS)

- \* **3 out of every 1,000 babies** born between 2008-2013
- \* In 2013, 645 newborns were identified with the presence of narcotics
- \* Average NAS birth costs **\$31,000** versus \$2500 for non-NAS births

# FINDING A SOLUTION

## The Arizona Rx Drug Misuse and Abuse Initiative

**A Multi-Systemic Approach:**

**Medical, Treatment, Law Enforcement and Prevention**

# History and Foundation

- \* Early in 2011, Office of National Drug Control Policy (ONDCP) published the Rx Drug Abuse prevention plan
- \* AZ HIDTA took the lead and held a Rx Drug Summit in October, 2011
  - \* Focus was in 3 domains: **law enforcement, medical/treatment, prevention**
- \* The Arizona Substance Abuse Partnership (ASAP) made Rx drug abuse their strategic area of focus in January 2012

# The Rx Drug Misuse and Abuse Initiative

- \* Using the ONDCP and the AZ Rx Summit recommendations, ACJC and GOCYF hosted a **Rx Drug Expert Panel** in February, 2012
  - \* The panel and attendees involved local stakeholders from **law enforcement, medical/treatment, and prevention/education**
  - \* A set of strategies was developed from recommendations made by the expert panel and attendees and **three pilot counties** were chosen for a pilot project implementation
  - \* The pilot project served as a **feasibility study** to demonstrate the feasibility and efficacy (where measurable) of the strategies for an eventual statewide initiative

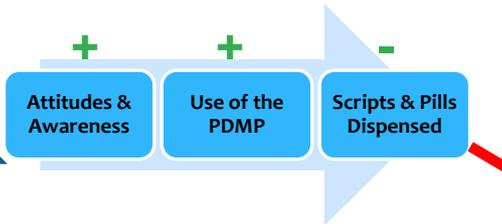
# Arizona Rx Misuse & Abuse Initiative Core Group

- \* Governor's Office for Children, Youth & Families (GOCYF)
- \* Arizona Substance Abuse Partnership (ASAP)
- \* Arizona Criminal Justice Commission (ACJC)
- \* Arizona Department of Health Services (ADHS)
- \* Arizona High Intensity Drug Trafficking Area Program (AZ HIDTA)
- \* Arizona Board of Pharmacy
- \* AHCCCS

# Conceptual Framework

Targeted Increases (+) and Decreases (-)

## SUPPLY



## DEMAND

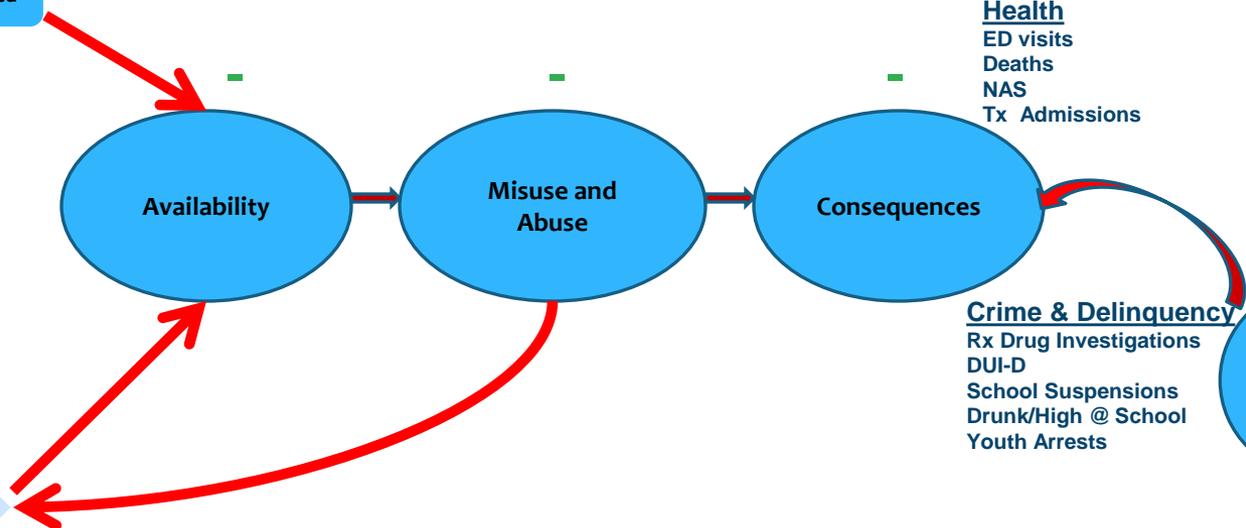


Health  
ED visits  
Deaths  
NAS  
Tx Admissions

Crime & Delinquency  
Rx Drug Investigations  
DUI-D  
School Suspensions  
Drunk/High @ School  
Youth Arrests

Social Acceptance  
Perceived Low Risk  
Expectations of Health Consumer

Unsafe Storage & Disposal  
Sharing Scripts  
Lack of Resistance Strategies  
Lack of Parent-Child Communication



# The Strategies

1. **Reduce** Illicit Acquisition and **Diversion** of Rx Drugs
2. Promote **Responsible Prescribing and Dispensing** Policies and Practices
3. Enhance Rx Drug **Practice and Policies** in Law Enforcement
4. Increase **Public Awareness** and **Patient Education** about Rx Drug Misuse
5. Enhance **Assessment and Referral** to Treatment

# Community & Statewide Approaches

- \* Community Coalitions & Pilots: Yavapai, Pinal, Graham/Greenlee
- \* Community toolkit
- \* Prescriber Report Cards
- \* Best practice guidelines
- \* Free online training for prescribers
- \* Compilation of resources

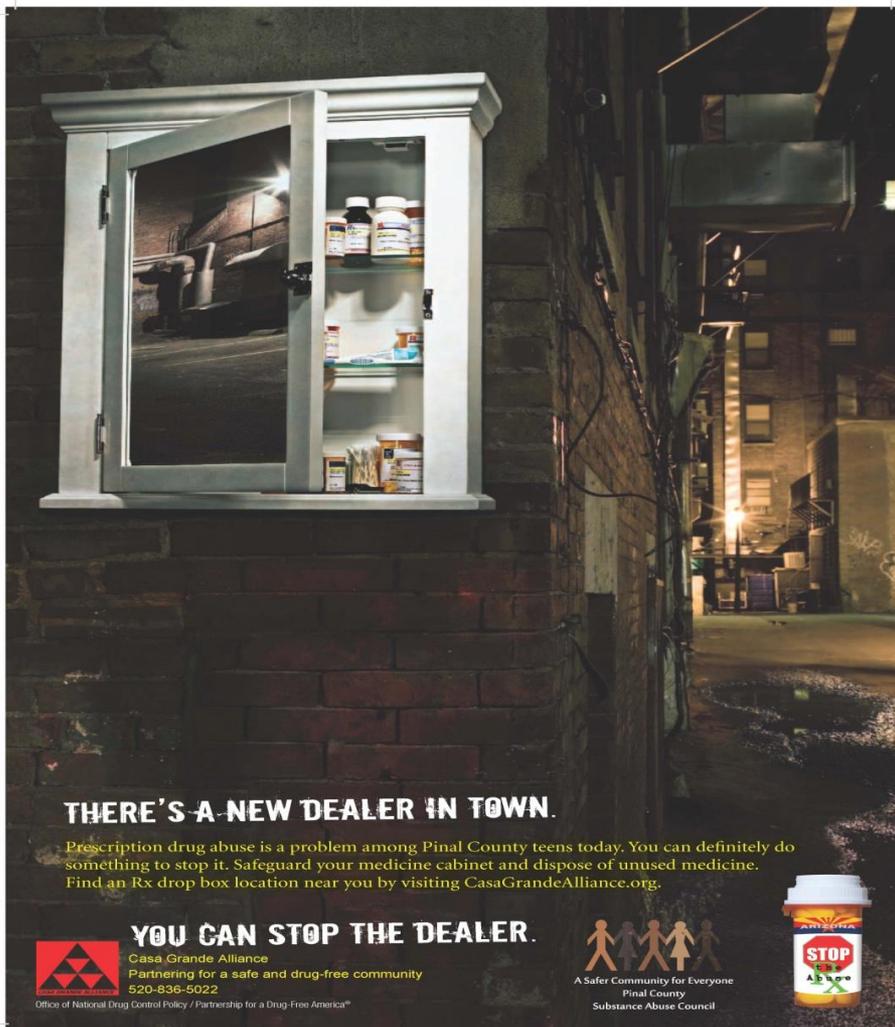
# Evaluation Highlights

# Goal: Install and Promote Permanent Drop Boxes



- \* **15,000 lbs.** of unused, unneeded and expired medication are no longer available for potential diversion.
- \* **117 Rx drug boxes** are now available in Arizona – a 485% increase since June, 2012

# Goal: Limit Youth Access



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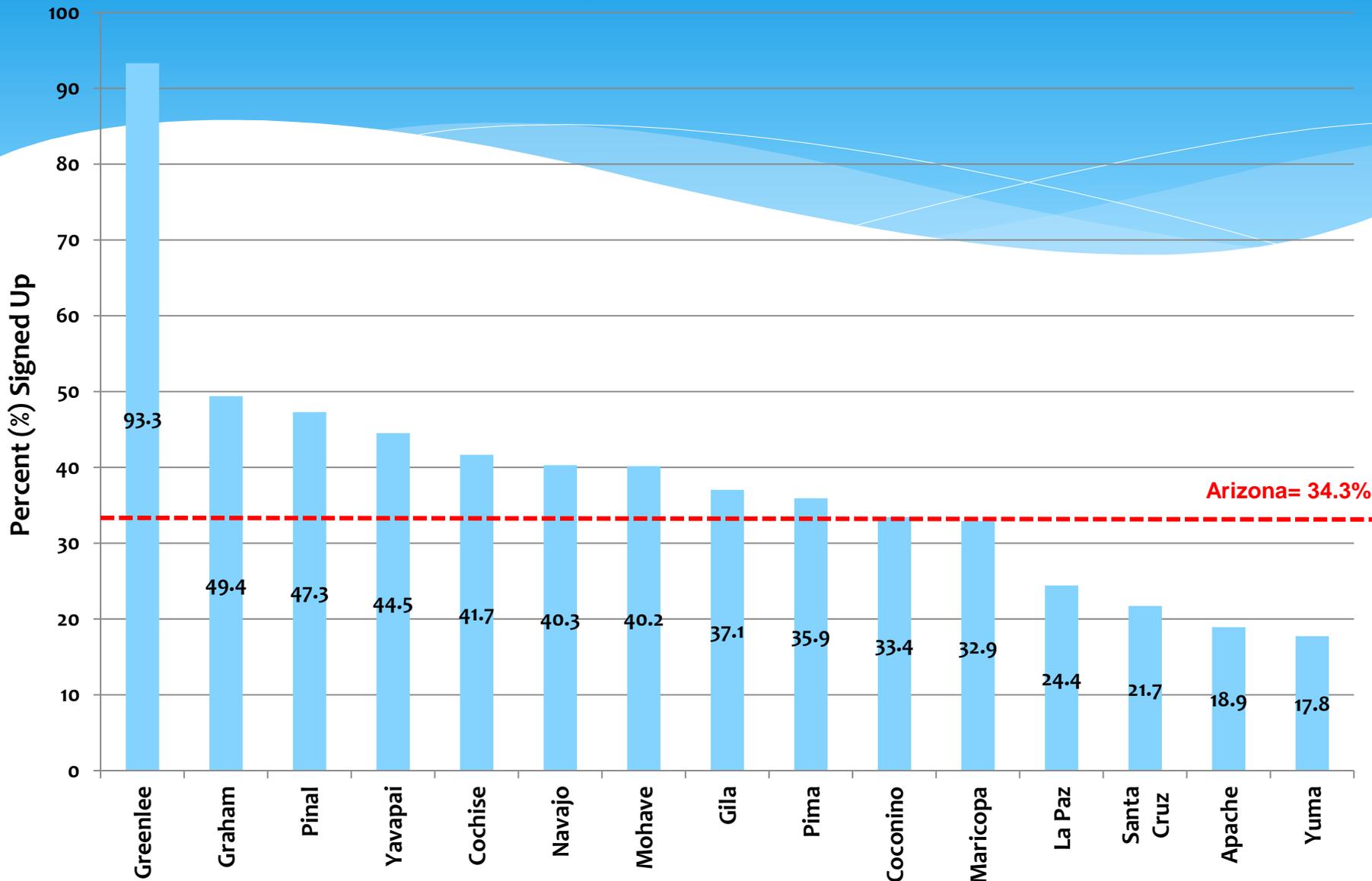


- \* Arizona has seen a **10% reduction** in youth obtaining Rx drugs from the home.
- \* The **“Friends and Family”** plan has significantly decreased in Yavapai, Graham/Greenlee Counties and Casa Grande for past 30 day youth Rx drug misusers (**range 29-68% reduction**)

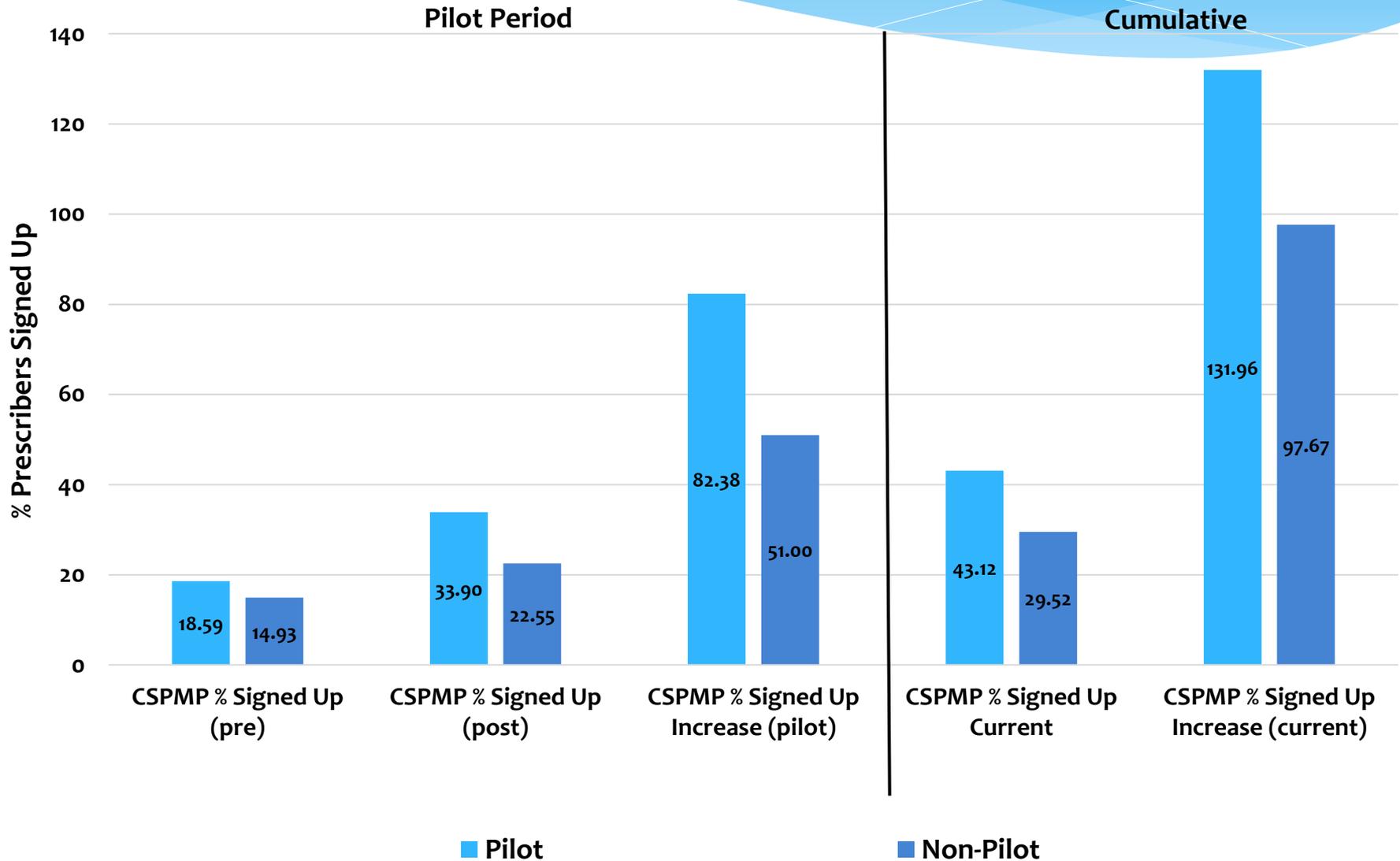
# Goal: Encourage Sign Up and Use of the CSPMP

- \* Arizona has seen a **130% increase in prescribers** signed up to use the CSPMP system
  - \* 14.9% June 1, 2012
  - \* **34.25%** June 1, 2015
- \* Arizona has seen a **274% increase in pharmacists** signed up to use the CSPMP system
  - \* 14.7% June 1, 2012
  - \* **55.0%** June 1, 2015

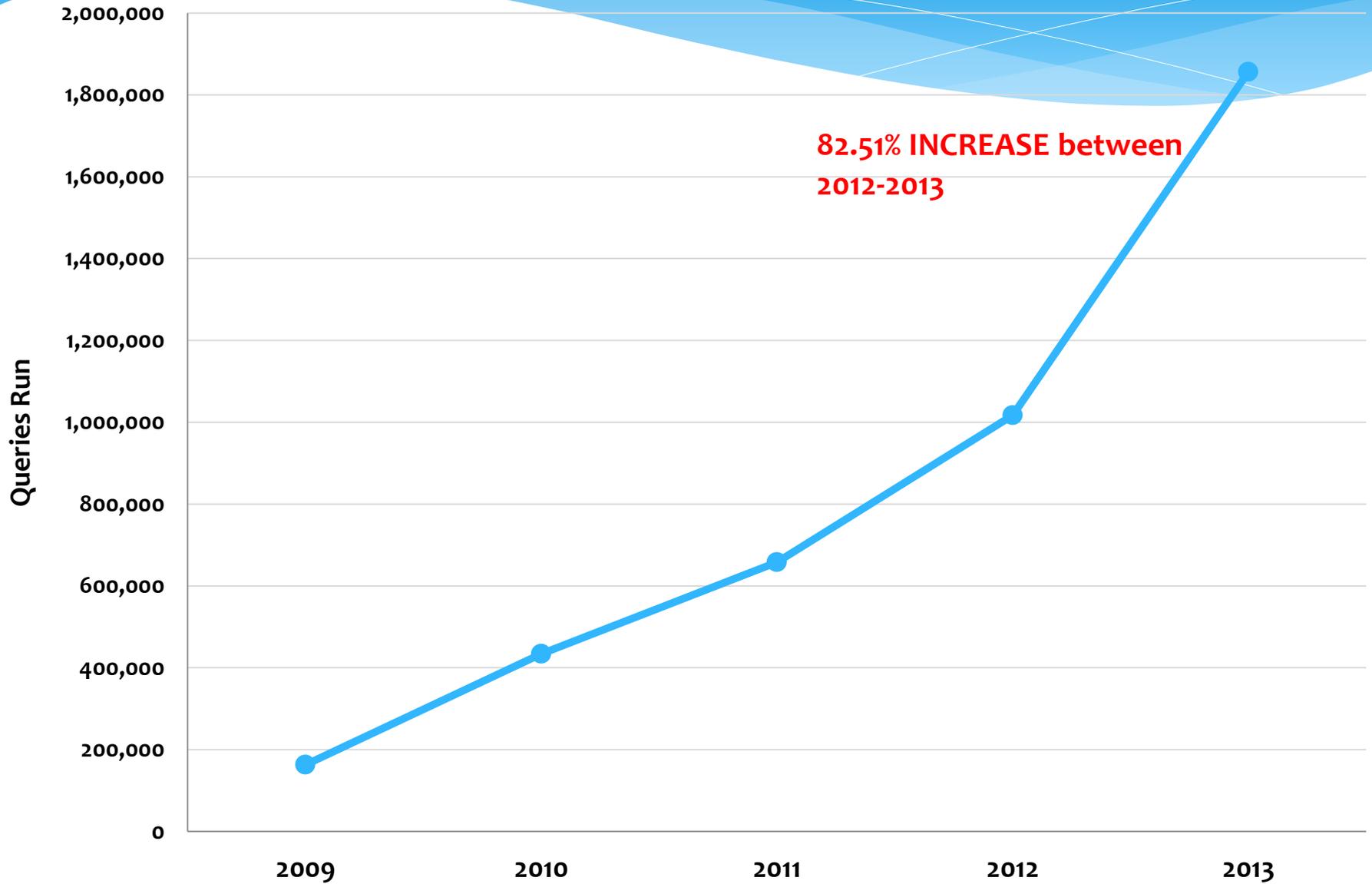
# Percentage of Arizona Prescribers Signed Up to Use the CSPMP (as of 6.1.15)



# Prescribers Signed up for the CSPMP



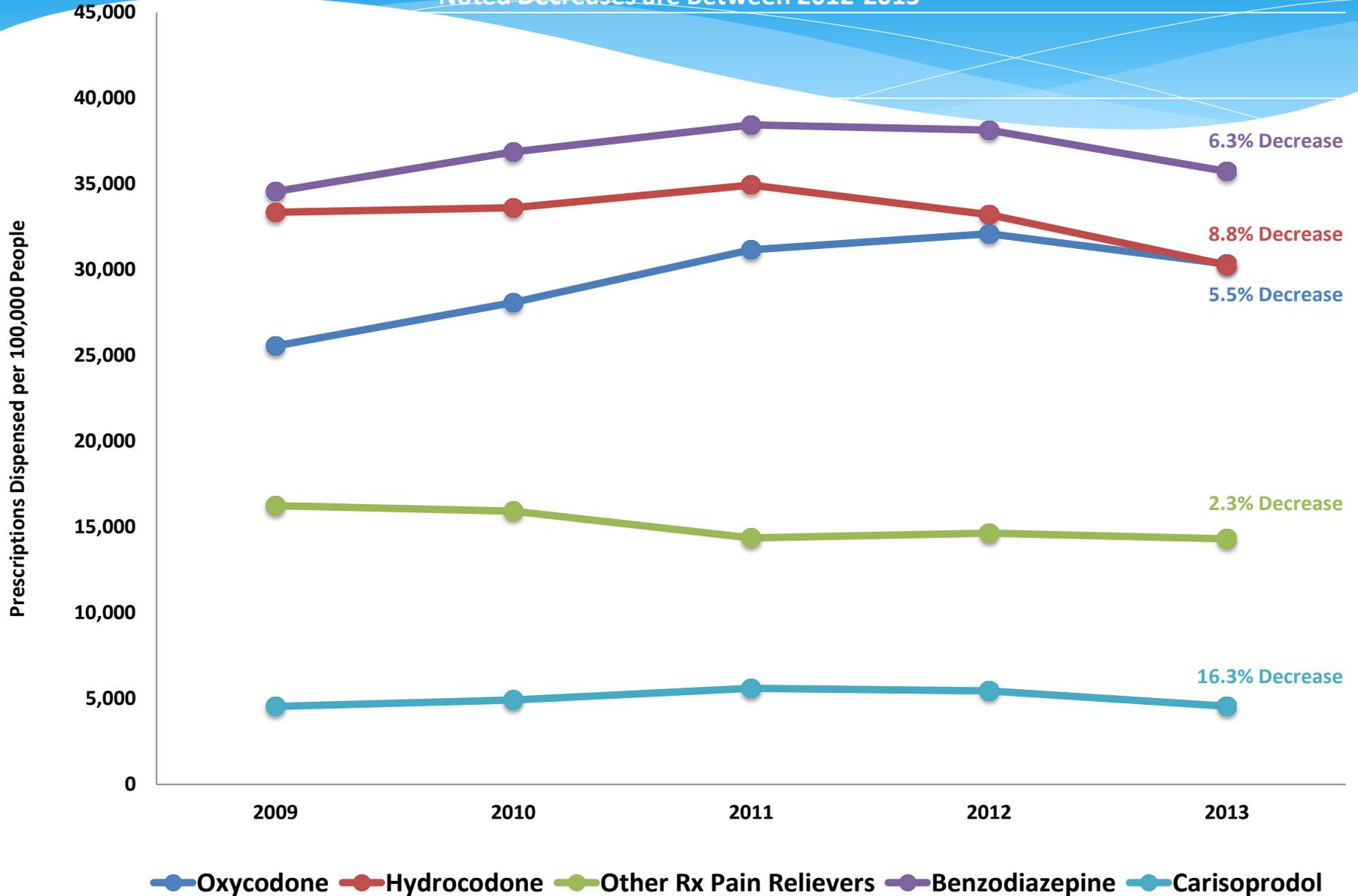
# Arizona CSPMP Queries



**Goal: Provide Education and  
Training and Increase Awareness  
of Individual Prescribing Habits**

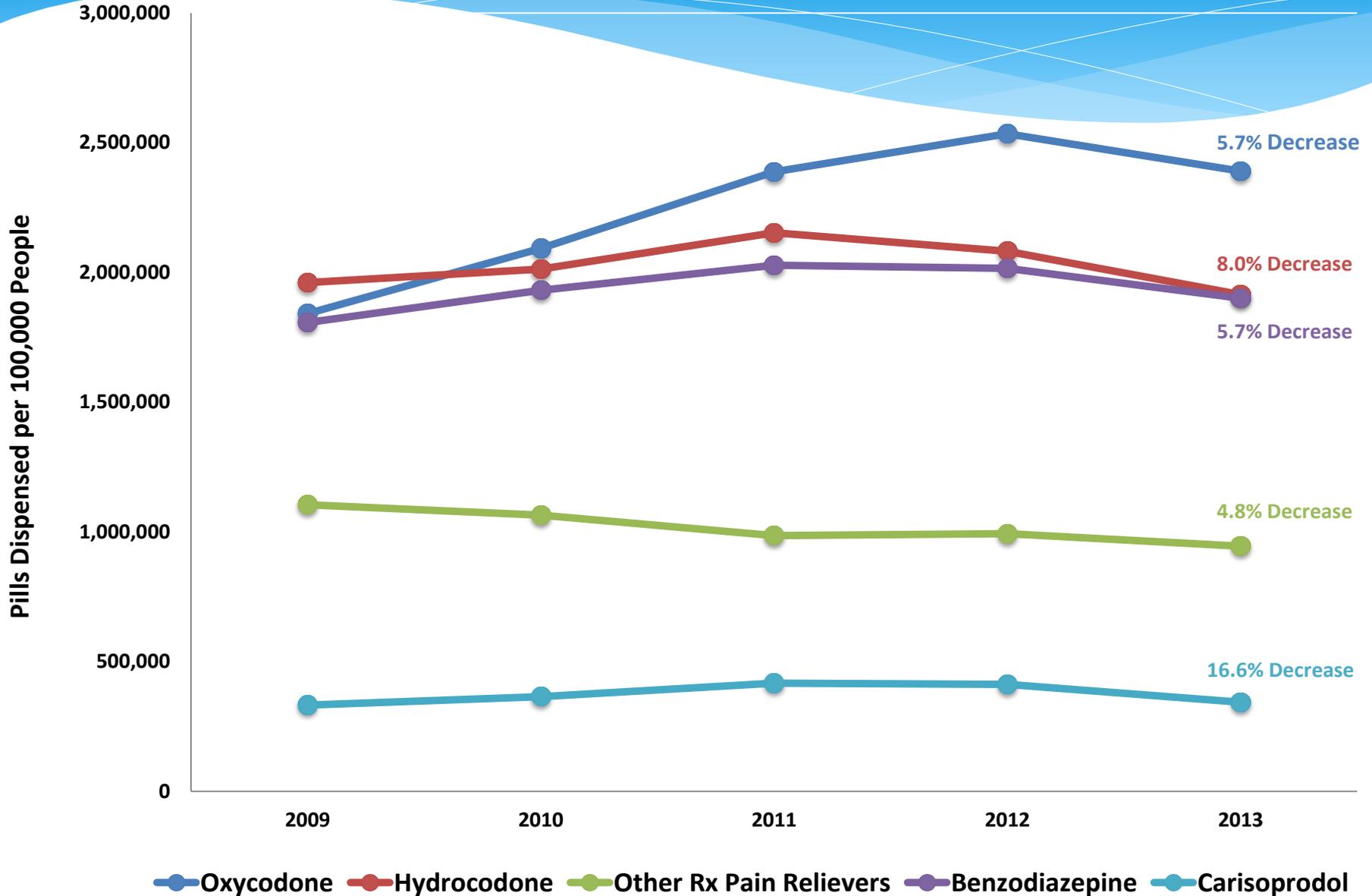
# Rate of Controlled Substance Prescriptions in Arizona

## Noted Decreases are Between 2012-2013



# Rate of Controlled Substance Pills in Arizona

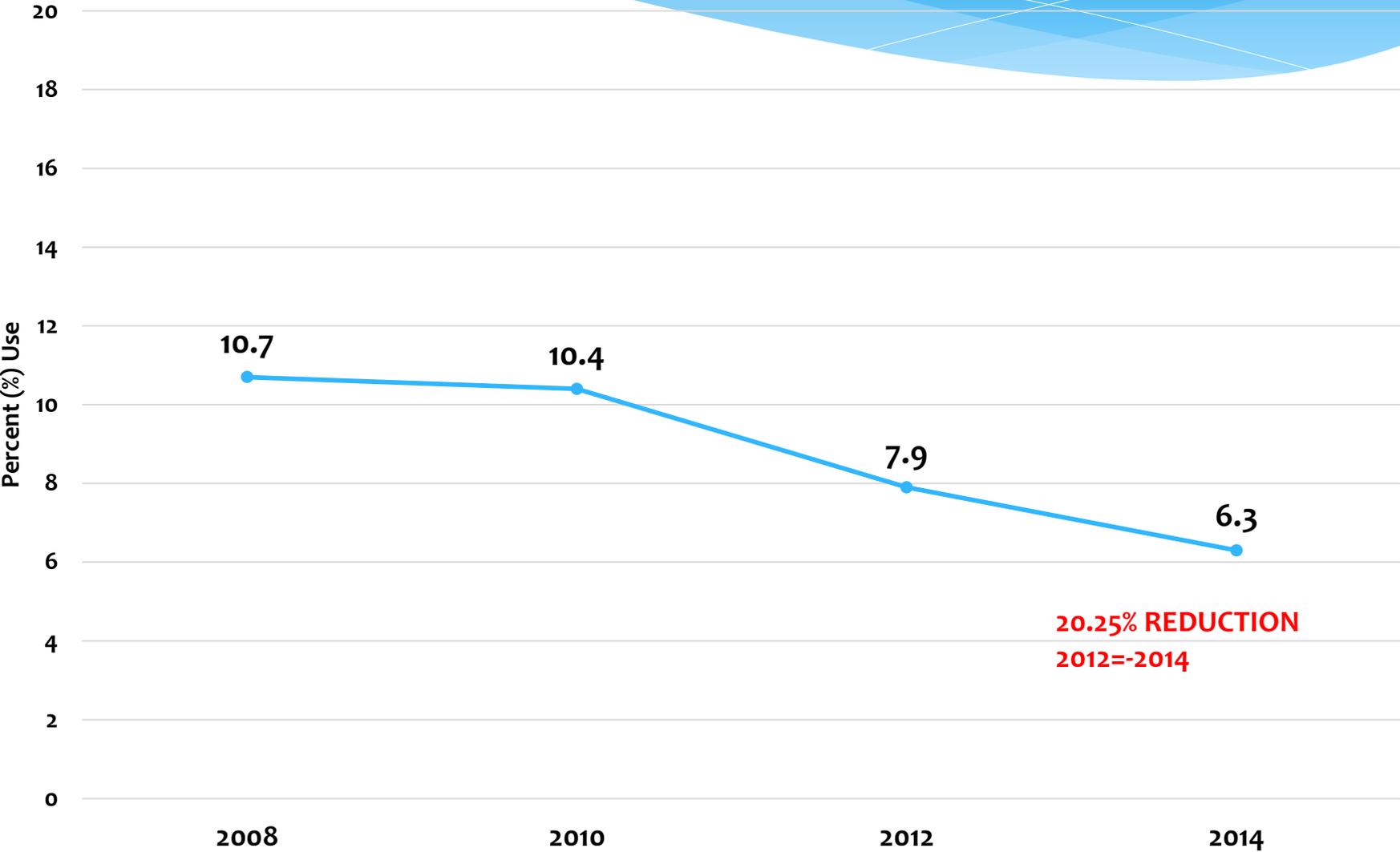
## Noted Decreases are Between 2012-2013



# Outcome Evaluation

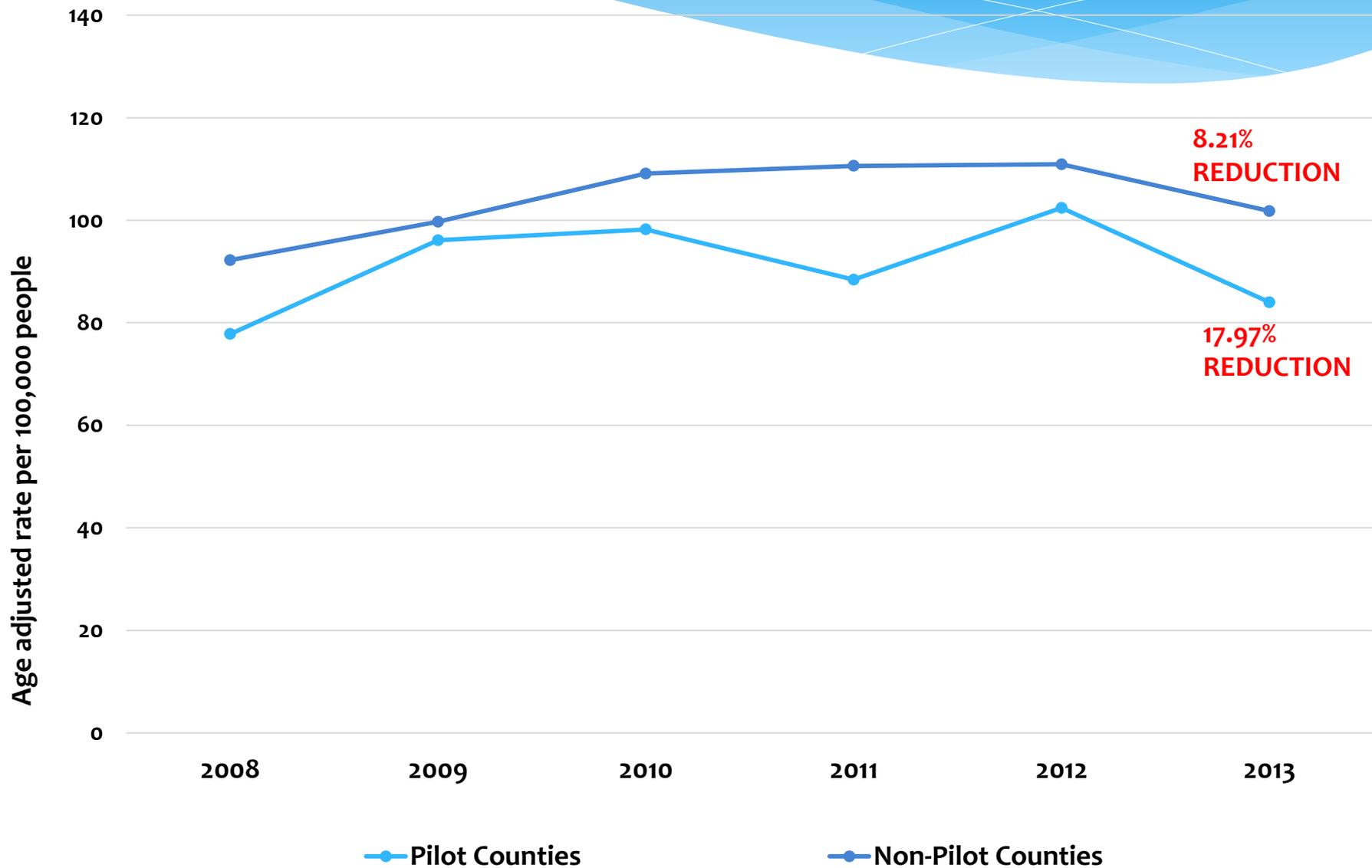
Rates of Misuse, Non-Fatal Poisonings and  
Opioid-Related Deaths

# Past 30 Day Rx Drug Use Among Arizona Youth

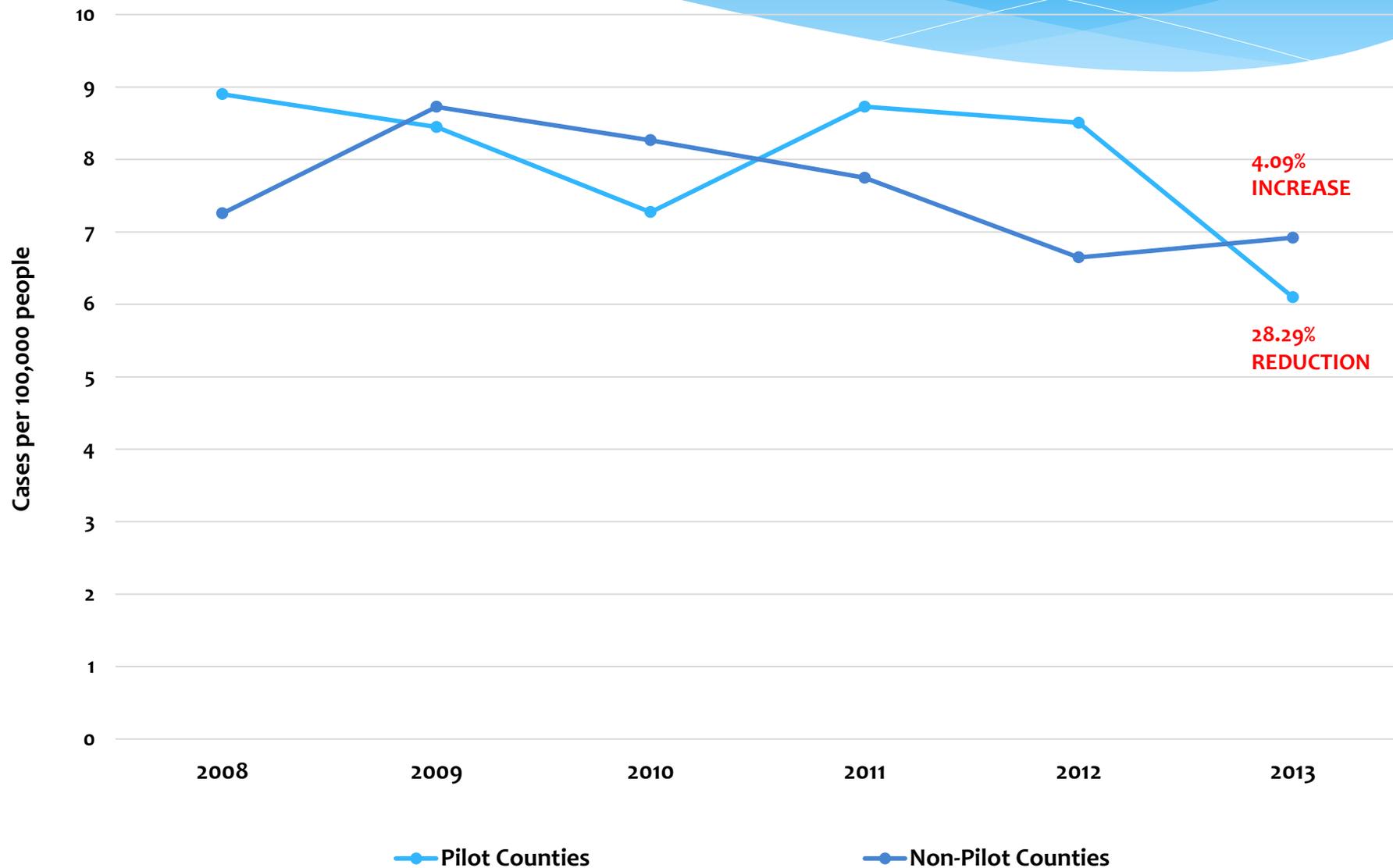


Note: scale reduced for visibility; accurate depiction is out of 100%

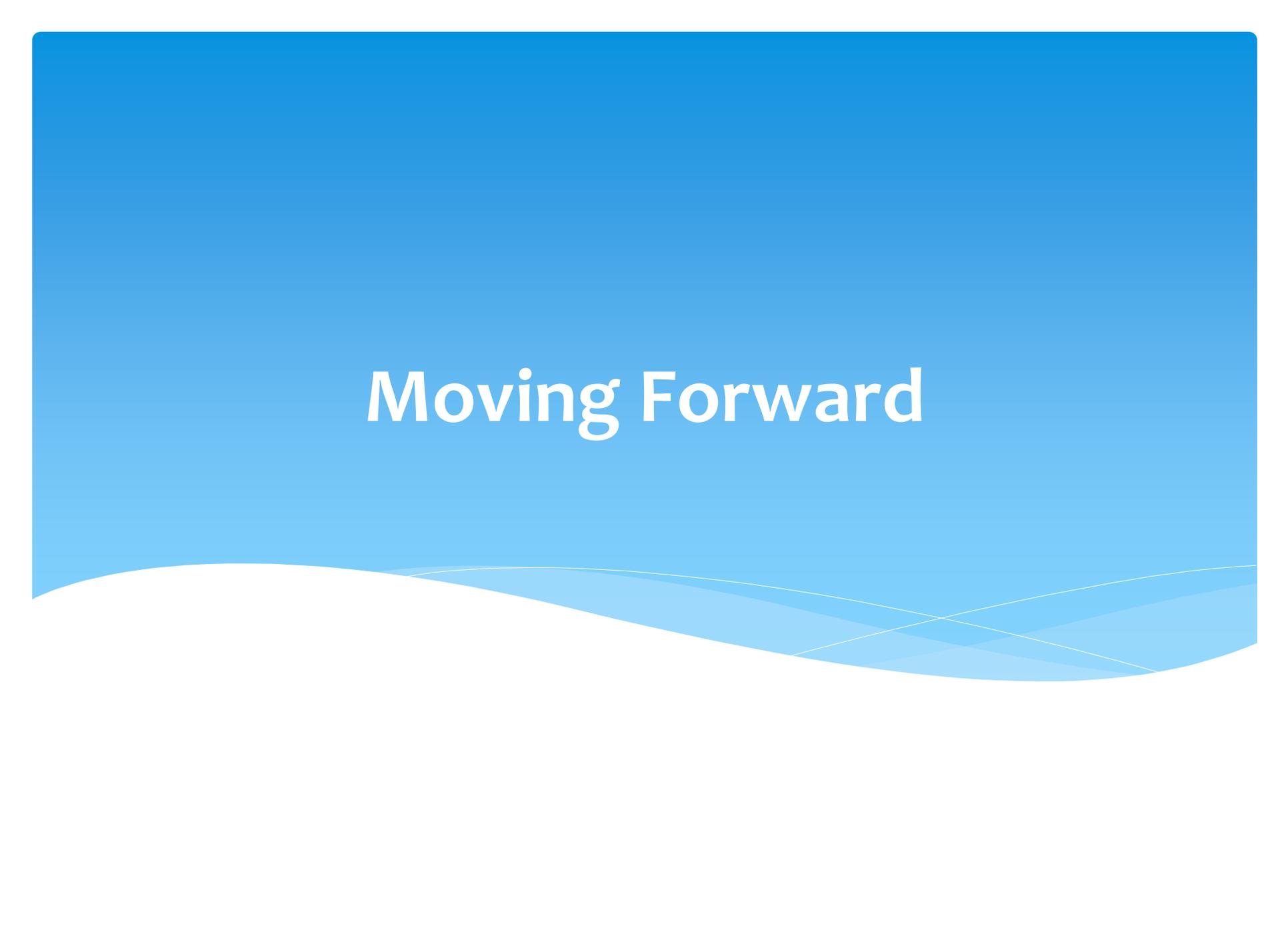
# Non-Fatal Poisoning-Related Inpatient Hospitalizations in Arizona



# Opiate/Opioid Related Deaths in Arizona



# Moving Forward

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# The Overarching Goal



Reduce prescription  
drug overdose deaths in  
Arizona by 18% by 2018

# The Targets by 2018



- \* Reduce hospitalizations and emergency department visits due to prescription drugs overdoses by 10%
- \* Reduce misuse by youth aged 12-17 years by 28%
- \* Reduce Neonatal Abstinence Syndrome by 3%
- \* Reduce DUI-D by 8%
- \* Increase rate of queries in the Arizona Controlled Substance Prescription Monitoring Program up to 50%
- \* Increase percent of prescribers signed up to 75%

# Next Steps/Strategic Actions

- \* Develop and/or disseminate use of clinical tools and processes that make it easier to adopt the best practices
- \* Facilitate sharing of best practices among clinicians
- \* Identify and promote technical assistance and educational opportunities on effective tools and processes
- \* Establish a Health Care Advisory Team for Initiative
- \* Work toward linking electronic health records to the CSPMP

# Next Steps/Strategic Actions

- \* Encourage academic institutions to adopt/enhance curricula regarding appropriate prescribing of controlled substances and pain management alternatives
- \* Develop prevention tactics for younger children & older adults
- \* Focus on reduction of stigma
- \* Promote use of Medication Assisted Treatment
- \* Support expanded access to naloxone

# Call to Action Sessions

- \* Health Care, June 2
- \* Law Enforcement/Criminal Justice, July 15
- \* Community Prevention, August 25
- \* Academic Institutions
- \* First Responders
- \* Substance Abuse Treatment Providers
- \* Media

# Contacts

For additional information, please visit our website <http://www.azcjc.gov/acjc.web/rx/default.aspx> or contact:

- \* Debbie Moak (ASAP Co-Chair and Director, GOCYF): [dmoak@az.gov](mailto:dmoak@az.gov)
- \* Karen Ziegler (Initiative co-chair): [kziegler@azcjc.gov](mailto:kziegler@azcjc.gov)
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