OHIO’S OPIOID DRUG OVERDOSE EPIDEMIC:

CONTRIBUTING FACTORS AND ONGOING PREVENTION EFFORTS
**DEFINITIONS**

• **Opiate**- originate from naturally-occurring elements found in the opium poppy plant. These drugs are best known for their ability to relieve pain symptoms. Opiate drug types include heroin, opium, morphine and codeine.

• **Opioid** - any chemical that resembles morphine. Can be natural or synthetic. Examples include oxycodone (OxyContin), fentanyl, methadone, hydrocodone (Vicodin)

• **Fentanyl** - a powerful opioid that is 30-50 times more potent than heroin.

• **Carfentanil** - a synthetic opioid that is 100 times more potent than fentanyl and up to 10,000 times more potent than morphine.

• **Naloxone** - also known as Narcan, is a medication that can reverse an overdose caused by an opioid drug.
OVERVIEW OF DRUG RELATED DEATHS IN OHIO

- Accidental Drug Overdose continues to be the leading cause of injury related death in Ohio
- Opioid pain relievers are responsible for about 75% of all Rx drug overdose deaths
- Deaths involving opioids have quadrupled since 1999
- Steps taken to reduce Rx abuse may have caused a shift towards heroin use
- Heroin use has skyrocketed in Cuyahoga County
- Fentanyl use has significantly increased fatalities
CUYAHOGA COUNTY
OPIATE TASK FORCE

MISSION:
To serve the residents of Cuyahoga County by actively working to raise public awareness, promote community action, and provide education related to the dangers and devastating effects of drug abuse.

VISION:
To create a healthier community by reducing accidental fatalities associated with opiate abuse through collaborative partnerships that focus on prevention, treatment, and recovery.
Unintentional drug overdose deaths of Ohio residents by specific drug(s) involved, by year, 2000-2015

Figure 5. Number of Unintentional Overdose Involving Selected Drugs, by Year, Ohio, 2000-2015

* Prescription opioids not including fentanyl; fentanyl was not captured in the data prior to 2007 as denoted by the dashed line.

Source: Ohio Department of Health, Bureau of Vital Statistics; Analysis Conducted by ODH Injury Prevention Program.

Multiple drugs are usually involved in overdose deaths. Individual deaths may be reported in more than one category.
Cuyahoga County Overdose Deaths 2006-2017*
Most Common Drugs (*projected based on ruled cases as of February 28)

**Graph depicting the number of overdose deaths in Cuyahoga County from 2013 to 2017.**

- **Heroin**
- **Non-fentanyl associated Heroin deaths**
- **Cocaine**
- **Non-fentanyl associated Cocaine deaths**
- **Fentanyl**
- **TOTAL OD DEATHS**

The graph shows a significant increase in overdose deaths over the years, with a projected rise in 2017. The most common drugs involved in overdose deaths are listed above, along with the number of cases each year.
NATIONAL DATA: PUBLIC HEALTH IMPACT OF OPIOID OVERDOSE

In 2008, there were 14,800 prescription painkiller deaths.\(^4\)

For every 1 death there are...

- 10 treatment admissions for abuse\(^9\)
- 32 emergency dept visits for misuse or abuse\(^6\)
- 130 people who abuse or are dependent\(^7\)
- 825 nonmedical users\(^7\)

Sources: \(^1\)SAMHSA Treatment Episode Data Set (TEDS); \(^2\)Drug Abuse Warning Network (DAWN); \(^3\)National Survey of Drug Use in Households (NSDUH)
Prescription drugs led to a larger overdose epidemic than illicit drugs ever have.

Source: 
2 2006-2011 ODH Office of Vital Statistics,  
3 Change from ICD-9 to ICD-10 coding in 1999 (caution in comparing before and after 1998 and 1999)
OHIO’S OPIOID EPIDEMIC

WHO IS IMPACTED?
HIGH RISK GROUPS FOR OPIOID ABUSE AND DEATH

White males ages 25-54
Females 45-54
Pregnant Females
Adolescents 19-28
Shift towards younger population
Medicaid populations
Rural populations
Mentally ill

ODH Violence and Injury Prevention Program
OHIO’S OPIOID EPIDEMIC

HOW DID THIS OCCUR?
Increased Exposure

Increased Substance Abuse

Epidemic

Contributing Factors

Availability and Marketing of New Extended Release Rx Opioids

Overall Growth in Rx Use:
- New and better preventive drugs
- HC insurance pressure

Widespread Diversion of Rx Drugs:
- Internet
- Pill Mills
- Deception/Scams
- Theft

Direct-to-Consumer Marketing of Rx

Changing Rx Pain Management Guidelines

Self-medicating habits of baby boomers

Perceived Legitimacy and Safety of Rx Drugs

ODH Violence and Injury Prevention Program
ADDICTION IS LIKE OTHER DISEASES...

• It is preventable
• It is treatable
• It changes biology
• If untreated, it can last a lifetime
HEROIN & FENTANYL

TYPICALLY SOLD AS WHITE OR BROWN POWDER OR AS A STICKY BLACK SUBSTANCE KNOWN AS “BLACK TAR”

ABUSED BY INJECTING, SNORTING, OR SMOKING

ILLICIT FENTANYL HAS MADE A SIGNIFICANT IMPACT LOCALLY AND ACROSS OHIO
POISON DEATH REVIEW COMMITTEE

Demographics

- Male:Female 73:27
- White:Non-White 85:15

Ages
- 19-29 25%
- 30-44 31%
- 45-60 40%

Urban (Cleveland)/Suburban (non-Cleveland) 50:50

Historical data

- Previous history of illicit drug use 95%
- OARRS report on file 73%
- History of intravenous drug use 62%
- Period of abstinence prior to death 31%
- Mental health history 45%
- Veteran status 12%
- Physical labor and trades 40% (current vs. prior employment?)
HEROIN OVERDOSE DEATHS

Typical 2007 Case Profile

- Male 85%
- White 75%
- Age 45-60 50%
  - Age 19-29 only 7.5% of overdose deaths
- City of Cleveland or Suburban equal 42.5%; rest out of county

Typical 2016 Heroin Case Profile

- Male 76%
  - Female use up 28% from 2007
- Caucasian 88%
- Age 30-44 37%
  - 19-29 22%
  - Over 60 10%
- CLE 42% vs Suburban Residents 45%
  - Out of County case 12%
- 7 in 10 cases mixed with Fentanyl
  - 1 in 6 heroin alone
FENTANYL IS DRIVING THIS CRISIS

2016 Fentanyl Case Profile

- Male 73%
  - Female use over 26%
- Caucasian 84%
  - African American use at 15%
- Age 30-44 nearly 40%
  - Younger profile than heroin
  - 19-29 at 21%
- CLE 45% vs Suburban 44%
- 7 in 10 mixed with heroin, cocaine or both
  - 1 in 4 fentanyl or analogue

2016 Heroin Case Profile

- Male 76%
  - Female use up 28% from 2007
- Caucasian 88%
- Age 30-44 37%
  - 19-29 22%
  - Over 60 10%
- CLE 42% vs Suburban Residents 45%
  - Out of County case 12%
- 7 in 10 cases mixed with Fentanyl
  - 1 in 6 heroin alone
CURRENT PUBLIC HEALTH CRISIS
At least 24 fatalities since February 1, 2017

Fatal Cases due to heroin/fentanyl in January—at least 46 (11 cases pending additional testing)
Carfentanil: 33 CONFIRMED CASES TO DATE in 2016
23 - City of Cleveland Residents

VICTIMS
Victims’ ages range from 23 – 67
32 Male victims; 14 Female victims
13 African American victims; 33 Caucasian victims (1 hispanic)

TRENDS
At least 517 victims died from heroin/fentanyl or in combination in 2016, more than double the 228 from 2015. Cocaine deaths are projected to have doubled from 115 to 225 or 230 in 2016.

January also saw 31 cocaine related deaths, with 19 being mixed with Fentanyl, Heroin or both.

Source: Cuyahoga County Medical Examiner’s Office revised 2-6-17
PROJECT DAWN
DEATHS AVOIDED WITH NALOXONE

Community Walk-In Clinics

Thomas F. McCafferty Health Center
4242 Lorain Ave., Cleveland, OH
Walk-in hours: Thursdays, 4pm-8pm

The Cuyahoga County Board of Health
5550 Venture Dr., Parma, OH
Walk-in hours: Fridays, 9am-12pm

The Free Medical Clinic of Greater Cleveland
12201 Euclid Ave., Cleveland, OH
Walk-in hours: Fridays, 1pm-5pm

City of Cleveland-EMS Headquarters
1701 Lakeside Ave., Cleveland, OH
Walk-in hours: Monday-Friday 9-4

• Cuyahoga County Project DAWN has registered nearly 7000 individuals (at-risk registrants and third party registrants) and has 700 documented overdose reversals.

• Currently have 47 local law enforcement agencies carrying naloxone, with over 100 overdose reversals.

It is believed that the actual number of reversals is higher due to program participant underreporting.
PROJECT DAWN KIT DISTRIBUTION AND RESCUE REPORTS 2013-2016

Total Lay Responder Rescues Reported to Project DAWN (2013-Today):
790 Rescues

Unknown Date of Rescue:
56 Rescues

2017 Reported Rescues: 22 Rescues
Cuyahoga County Heroin Related Overdose Deaths 2007-2016*
Projected deaths with DAWN Saves and Fentanyl as overdose Deaths

(* 2016 projected based on preliminary data thru December 31)

Source: Cuyahoga County Medical Examiner's Office revised 1-11-17

DAWN includes all documented naloxone saves through DAWN including police reversals. Does not include EMS administration (nearly 1,000 in 2015).
CHALLENGES

• Stigma
  – Individuals made a decision to use
  – Moral view that substance abuse is a sin

• Prescribing Practices
  – A pill for everything culture

• Treatment Availability
  – Resources & beds are limited
  – New treatment options for those dealing with opioid abuse

• Limited education on addiction medicine
  – Increase awareness for physicians on the impact of current prescribing practices
  – Understanding that chronic pain is a valid medical issue that need to be addressed

• Today is opioids
  – Maybe we should have a comprehensive view of addiction
    • https://addiction.surgeongeneral.gov/
CHALLENGES OF THIS EPIDEMIC

Stigma

- Thinning the herd!
  - What if that herd included someone you cared about?
  - What if that person who EMS/Law Enforcement had responded to 5 times was your son or daughter?
  - Many of the families I have worked with never thought that this disease would impact their families.
  - Addiction is a family disease!
  - Why don’t we treat people who use tobacco with the same negative thoughts as we do people dealing with the illness of addiction.
“Not my Kid, Not my Community”

• Colleagues across Ohio continue to express their concern that families/communities unwilling to understand that these powerful drugs are available in their neighborhoods are at risk.

• Heroin/Fentanyl are now considered mainstream
  • Are we going to see a shift where adolescents are going straight to heroin/fentanyl and Rx pain pills are no longer the connection?
  • Will heroin be a drug of the past because fentanyl can be mass produced in a warehouse?
CHALLENGES OF THIS EPIDEMIC

East Liverpool

- Photo’s taken by officers responding to a call regarding two adults unconscious in a car with young boy in the back seat.
  - East Liverpool Safety Director/Police Chief decided to post the photo without covering the young boys face in the back seat of the car.
  - The women was clearly dying from an overdose while law enforcement was taking photos.
  - In the interview with the Safety Director and Chief of Police they felt that this was the best way to increase awareness to the problem.
    - Has shame ever worked in changing behaviors?
    - Has this ever working in reducing the impact of other chronic diseases?
Family & Community Involvement

Heroin deaths reported to the Cuyahoga County Medical Examiner in 2003. Founded to address drug use of 34

Corning Together as ONE for Our Community

Wednesday, March 11th 6:30pm

at Lakewood Methodist Church
15700 Detroit Ave. Lakewood, OH 44107

Free Parking Available
Limited Free Childcare Available // Please Call Jessica Parker (216) 520-5018

EVENT OVERVIEW:

5:30p-7:00p // 6:00p-8:30p — Open Community Resource Room
Several local community organizations and programs present to offer resource options for treatment, recovery, advocacy & prevention.

7:00p-8:00p — three featured speakers - Rachel Dissel, Vince Caraffi and Aaron Marks
Speakers will offer their insights and answer questions from the audience.

8:00p-8:45p — Project DAWN Naloxone Training & Kit Distribution
MetroHealth’s Project DAWN is an opioid overdose education & naloxone distribution program.
Program participants are educated on the risk factors of opioid overdose, how to recognize an opioid overdose, and how to respond to an opioid overdose.

Eligible participants are given FREE naloxone kits containing 2 vials of naloxone hydrochloride medication

Robby’s Voice
Break the Silence
FENTANYL UPDATE- OARRS

February 2017 Update

- 55 fentanyl overdose deaths
- Previously have not looked at fentanyl deaths separately
- Ongoing research to compare this population with heroin overdose date
FENTANYL UPDATE- OARRS

OARRS (OHIO AUTOMATED RX REPORTING SYSTEM) MONITORS PRESCRIPTION DRUGS/CONTROLLED SUBSTANCES- MANDATORY REPORTING SINCE 4/15 (PHYSICIANS) AND 4/16 (PHARMACISTS)

LOOK BACK NOW 3 YEARS

PREVIOUS OARRS DATA ARE AVAILABLE FOR HEROIN OVERDOSE DEATHS

FENTANYL DATA FROM WORSENING DRUG EPIDEMIC IN 2016 TO BE EXAMINED- FOCUS NOW ON MOST RECENT DATA (FEB 2017)
41/55 Fentanyl overdose decedents had an OARRS file (75%)

37/41 with a file had at least one prescription for opiates (90%)

16/41 with a file had a prescription for a benzodiazepine (39%)

7/41 met criteria for doctor-shopping (17%) including 5 who received at least one opiate prescription since mandatory reporting for pharmacists
5/41 (12%) RECEIVED AT LEAST ONE OUT-OF-STATE PRESCRIPTION

11/41 (27%) HAD RECEIVED A PRESCRIPTION FOR BUPRENORPHINE AND WERE NOT COUNTED IN THE “DOCTOR SHOPPING” GROUP BASED ON THIS
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Cuyahoga County Board of Health
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