OPIOID OVERDOSE CRISIS IN CARBON COUNTY

Social Services Appropriations Subcommittee
2016 Top Causes of Death in Utah

1. Heart disease – 3,636  
2. Cancer – 3,125  
3. Unintentional injuries – 1,211  
4. Stroke - 932  
5. Alzheimer's disease - 904  
6. Chronic Lower Respiratory Disease - 875  
7. Diabetes - 624  
8. Suicide - 620  
9. Opioids - 466  

Opioids was #11 in 2000

SOURCES = (1) HTTPS://DATA.CDC.GOV/NCHS/NCHS-LEADING-CAUSES-OF-DEATH-UNITED-STATES/B163-DTPU/DATA AND (2) HTTP://IBIS.HEALTH.UTAH.GOV/INDICATOR/VIEW/POIDTH.OPI.HTML
**Definition**

Drug overdose deaths caused by acute poisonings that involve any opioid as a contributing cause of death, regardless of intent (e.g., unintentional, suicide, assault, or undetermined) or type of drug. Opioids include both prescription opioid pain relievers such as hydrocodone, oxycodone, and morphine, as well as heroin, opium, and synthetic opioids such as fentanyl that may be prescription or illicitly-manufactured.

Deaths with any of the following ICD-10 codes as the underlying cause of death:
- X40-X44: Accidental poisonings by drugs
- X60-X64: Intentional self-poisoning by drugs
- X85: Assault by drug poisoning
- Y10-Y14: Drug poisoning of undetermined intent
- With any of the following ICD-10 multiple cause-of-death codes:
  - T40.0: Opium
  - T40.1: Heroin
  - T40.2: Natural and semisynthetic opioids
  - T40.3: Methadone
  - T40.4: Synthetic opioids, other than methadone
  - T40.6: Other and unspecified narcotic
Rate of Drug Overdose Deaths Involving Opioids per 100,000 Population, U.S and Utah 1999-2016 (age-adjusted)

**Utah**

- 1999: 3.1
- 2016: 17
- 

**U.S.**

- 1999: 7.5
- 2016: 13.7

**UT Rank**

- 1999: 4
- 2016: 17

**OPIOID OVERDOSE CRISIS IN CARBON COUNTY**

*Slide from Anna Fondario, Department of Health*
Rate of Drug Overdose Deaths Involving Opioids per 100,000 Population, U.S., Utah, Carbon, 1999-2016 (age-adjusted)

Carbon County 2014-16
Population Share = 0.7%
Opioid Share Deaths = 2.3%

<table>
<thead>
<tr>
<th>Year Range</th>
<th>U.S.</th>
<th>Utah</th>
<th>Carbon</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999-2004</td>
<td>4.0</td>
<td>9.9</td>
<td>25.9</td>
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<tr>
<td>2005-2010</td>
<td>6.4</td>
<td>14.9</td>
<td>28.7</td>
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<tr>
<td>2011-2016</td>
<td>9.5</td>
<td>16.5</td>
<td>51.4</td>
</tr>
</tbody>
</table>
What Makes Carbon County Unique?

• "Carbon County respondents are least likely to know someone personally who uses opioids, and most aware of Naloxone."
• "Carbon County respondents made less annually than other counties."
• "Carbon County was the least educated county surveyed." (largest less than high school education level and smallest post college graduate)
• "Of all Utah counties, Carbon county felt opioid abuse was most serious."
What Makes Carbon County Unique?

OPIOID OVERDOSE CRISIS IN CARBON COUNTY

SOURCES: (1) PRESCRIPTION OPIOID DEATH RATE: DEPARTMENT OF HEALTH AND (2) PRESCRIPTIONS FILLED: CENTERS FOR DISEASE CONTROL AND PREVENTION
Sources of $47 Million Spent on Direct Interventions in Utah for Opioids, FY 2007 to FY 2019

Direct Opioid Interventions by Fiscal Year

New Interventions

Carbon County Opioid Plan (State Funding)

• $260,000 ongoing and $125,000 one-time starting July 1, 2018

• Purpose: staff for drug addiction, mental health and suicide prevention as well as medication assisted treatment

Pre-meeting Survey Results (74)

1. Action - Out of Seven Options People Ranked the Following Additional Interventions as Most Effective:
   a. More Treatment Programs/Rehabilitation Centers
   b. Change Laws for Prescribing of Opioids

2. Stigma – People on Average Most Disagreed With the Following Two Statements
   a. Most people would hire someone who has been treated for substance use to take care of their children.
   b. Most people would accept someone who has been treated for substance use as a teacher of young children in a public school.
Nine Suggestions From Panelists for the Supply Side of Opioids

1. “Educating law enforcement about the nature of addiction, what drives a person to misuse substances.” (Carbon Addiction Reduction & Elimination)

2. “Helping community members understand the opioid epidemic is not unique to just pain killers. Overall substance abuse is an issue and often opioid misuse begins with abusing other drugs such as alcohol, tobacco and marijuana.” (Carbon Addiction Reduction & Elimination)

3. “I believe we should create a risk assessment for opioid prescribing.” (Southeast Utah Health Department)

Twenty Suggestions From Panelists for the Demand Side of Opioids

1. “Recommendations to decrease demand would be to not only encourage evidenced based strategies across the spectrum of care but to provide the necessary resources and infrastructure required to deliver those strategies with fidelity, to population saturation and with sustainability.” (Carbon Addiction Reduction & Elimination)

2. “Messaging to reduce the stigma of getting [Substance Use Disorder] help in the first place - so folks will seek help earlier on in their addiction.” (Four Corners Community Behavioral Health) “Reducing stigma for those with an opioid use disorder, educating about effective substance use treatment modalities, and harm reduction messages about the dangers of synthetic opioids.” (Department of Health)