Vermont’s multi-faceted approach to addressing substance use disorder involves coordination between multiple state agencies and community partners in the areas of prevention, treatment, recovery and law enforcement.

**Access to Treatment**
- **9,015**: Estimated Vermonters age 18+ receiving MAT in hubs and spokes Q4 2019*
- **0**: People waiting for hub services**
- **15-20k**: Estimated people with OUD in need of treatment (includes people in treatment)

Research shows that MAT is the most effective treatment for OUD.

**Drug Disposal**
- **85**: Drug disposal locations available statewide*
- **17,097**: Pounds of drugs collected in state-funded programs between Feb 2019 and Jan 2020**

Most people who misuse prescription opioids get them from friends or family. Convenient disposal options may decrease misuse of unused prescriptions.

**Overdoses (Accidental)**
- **96**: 2019 opioid fatalities as of Nov. 2019 compared to 101 as of Nov. 2018**
- **86%**: Of 2019 fatal overdoses involve fentanyl, through Nov. 2019**

**Nonfatal Overdoses**
- **22.8**: Rate of nonfatal opioid overdoses per 10,000 ED visits in Dec. 2019** compared to the Dec. 2018 rate of 11.3

People who die from accidental overdoses may have more than one substance in their system.

Sources: Vital Statistics; ESSENCE; VPMS; SATIS; program reporting. Some data are preliminary and subject to change.

**Prescription Monitoring**
- **Vermont Total MME Dispensed**
  - **110M**
  - **62M**
  - **43%**: Reduction in opioid analgesics dispensed between Q1 2016 and Q4 2019*
  - **4.1%**: Of Vermont population received opioid analgesics in Q4 2019

Nearly 80% of people who use heroin had previously misused prescription opioids. Limiting use to the minimum medically necessary amount is best practice.

**Recent Highlights**
- An evaluation of the Impact of Vermont’s Rule for the Prescribing of Opioids for Pain shows that the Rule change positively impacted prescriber use and prescribing patterns.
- The Opioid Use Harm Reduction Evaluation found that most opioid users are knowledgeable and use harm reduction strategies to reduce risk of overdose and infection.
- Children age 0-5 entering DCF custody due to parental opioid use decreased 30% between 2015 and 2019. Opioid use is no longer the primary reason children 0-5 enter custody.

**Messaging**
- Risks of sharing prescription opioids
- Safely using, storing, and disposing of prescriptions

* Data updated quarterly
** Data updated monthly

2/13/2020
Acronyms

ADAP – Alcohol & Drug Abuse Programs
BRFSS – Behavioral Risk Factor Surveillance System
CDC – Centers for Disease Control & Prevention
ED – Emergency Department
MAT – Medication Assisted Treatment
MME – Morphine Milligram Equivalent
OUD – Opioid Use Disorder
OD – Overdose
SAMHSA – Substance Abuse & Mental Health Services Administration
VPMS – Vermont Prescription Monitoring System
YRBS – Youth Risk Behavior Survey

Definitions

Hub – Regional programs that provide intensive opioid use disorder treatment options, including high intensity Medication Assisted Treatment, and maintain strong connections to area Spokes. There are nine Hubs in Vermont.

Medication Assisted Treatment (MAT) – The use of methadone, buprenorphine, or naltrexone, in combination with counseling and behavioral therapies, to treat opioid use disorder.

Morphine Milligram Equivalent (MME) – The amount of morphine equivalent to the strength of the opioid dispensed. Using MME allows comparison between types and strengths of opioids.

Opioid Analgesic – Narcotic pain medication

Opioid Use Disorder (OUD) – Recurrent use of opioids causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home.

Spoke – Office-based opioid treatment settings located in communities across Vermont. At many Spokes, opioid use disorder treatment is fully integrated into general healthcare and wellness services.

More Information

healthvermont.gov/scorecard-opioids
healthvermont.gov/RxAware
healthvermont.gov/opioids
healthvermont.gov/ADAPReports
healthvermont.gov/YRBS

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