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**

- **8,594** Estimated Vermonters age 18+ receiving MAT in **hubs and spokes** Q1 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**

- **84** Drug disposal locations available statewide*
- **14,937** Pounds of drugs collected in state-funded programs between July 2018 and June 2019**

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

**Overdoses (Accidental)**

- **39** Fatal overdoses as of May 2019 compared to 46 as of May 2018**
  - **82%** Of 2019 fatal overdoses involve fentanyl, through May 2019**
- **10.3** Rate of nonfatal opioid overdoses per 10,000 ED visits in July 2019** compared to the June 2018 rate of 28.7

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

**Prescription Monitoring**

- **39%** Reduction in opioid analgesics dispensed between Q1 2016 and Q1 2019*
- **4.3%** Of Vermont population received opioid analgesics in Q1 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**

- Between June 2018 and May 2019 there was a 23% increase in the number of buprenorphine waivered prescribers in Vermont (SAMHSA).
- Summary of Vermont medication assisted treatment for opioid use disorder trends is now available. [healthvermont.gov/MAT-Trends](http://healthvermont.gov/MAT-Trends)

**Messaging**

Active campaigns and outreach efforts aim to:

- Encourage parents to talk with their kids about substance use.
- Increase patient awareness that opioid medications can be addictive and dangerous.
Acronyms

ADAP – Alcohol & Drug Abuse Programs
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

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

References

healthvermont.gov/DoYourPart
www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm