

Vermont Opioid Crisis Overview



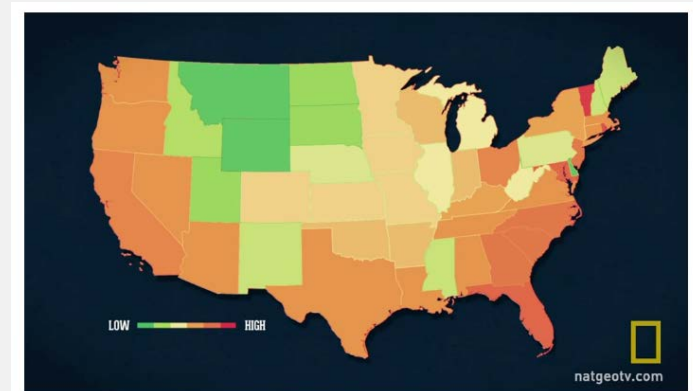
July 2017

Extent of the Opioid Crisis in Vermont



Pictured Above: Rolling Stone feature story in April of 2014

Pictured Right: National Geographic Feature Story on the most "Drug infested State"



Vermont, The Green Mountain State comes in first the clear standout among what Nat Geo calls the most drug infested country' worldwide



CRIME / DRUGS / LAW ENFORCEMENT

Vermont Health Department: 2016 Was a Record Year for Opiate Deaths

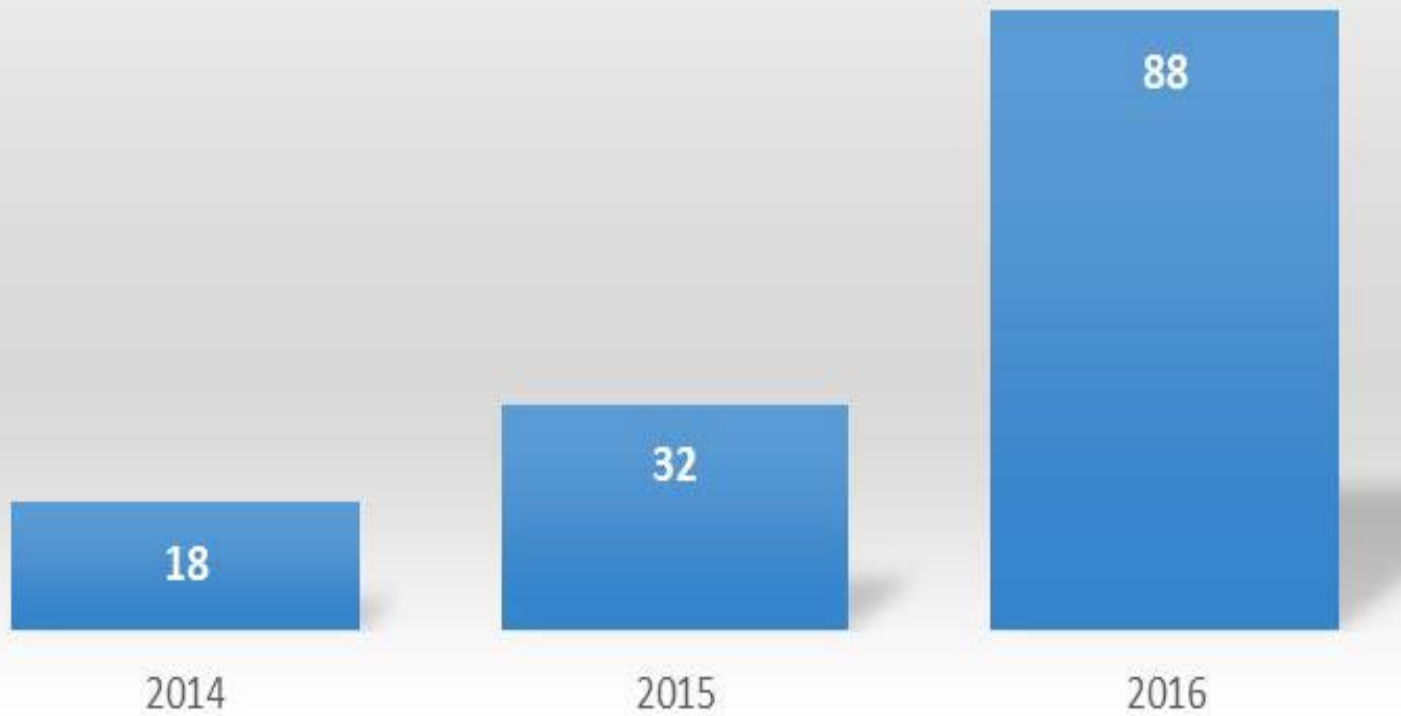
POSTED BY MARK DAVIS ON WED, FEB 8, 2017 AT 4:45 PM



DEATH BY DRUGS

FENTANYL

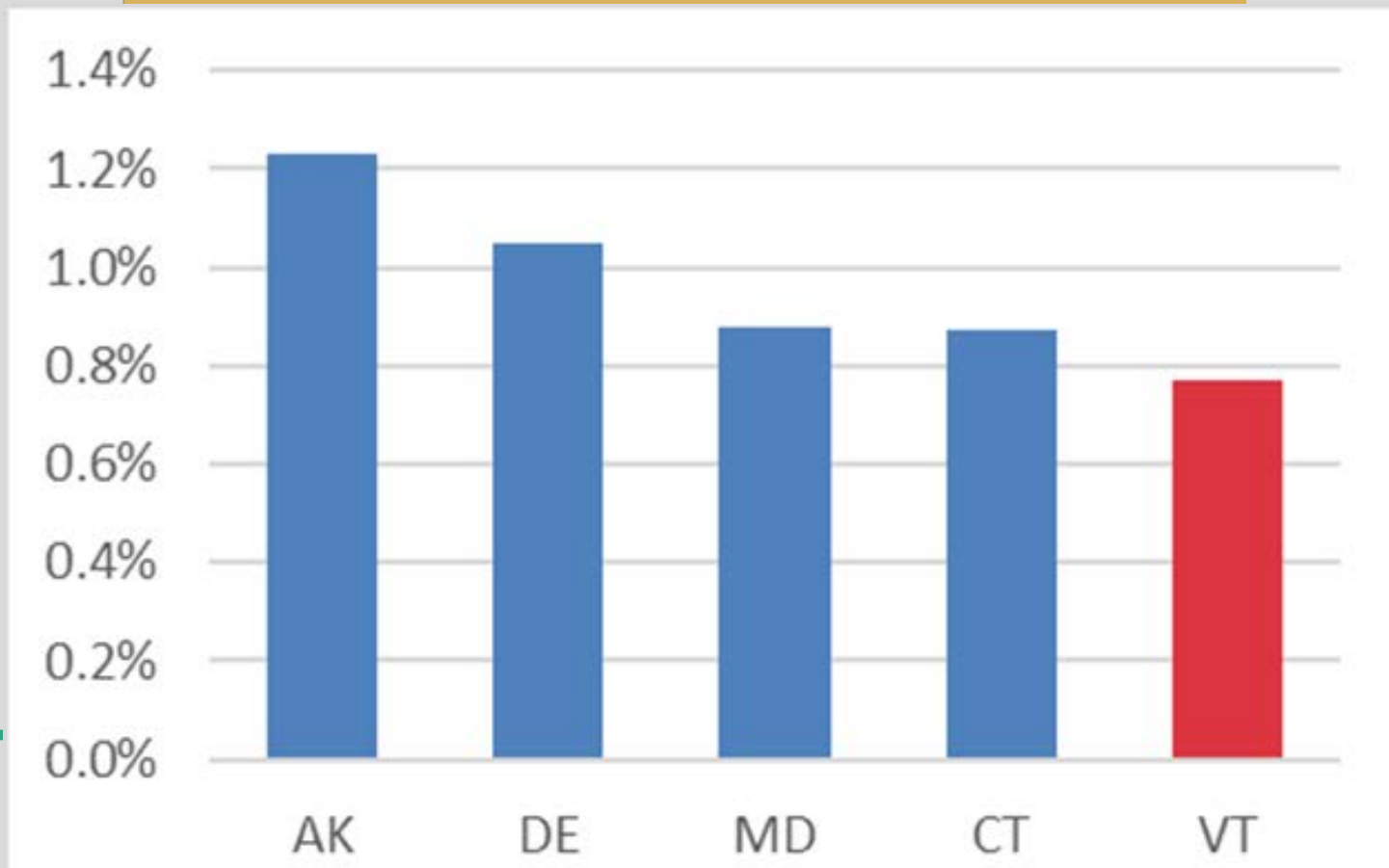
Vermont Forensics Lab Cases of Fentanyl



Vermont is one of the top 5 states for heroin use

(by percentage of adult population)

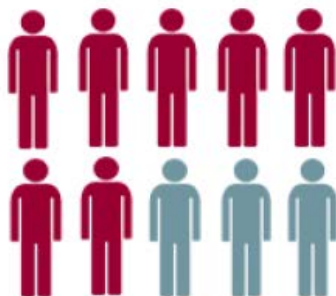
Heroin Use Age 12+ (NSDUH 2014/2015)



The heroin increase is an offshoot of the opioid epidemic



3 out of 4 people
who used heroin in the
past year misused
opioids first



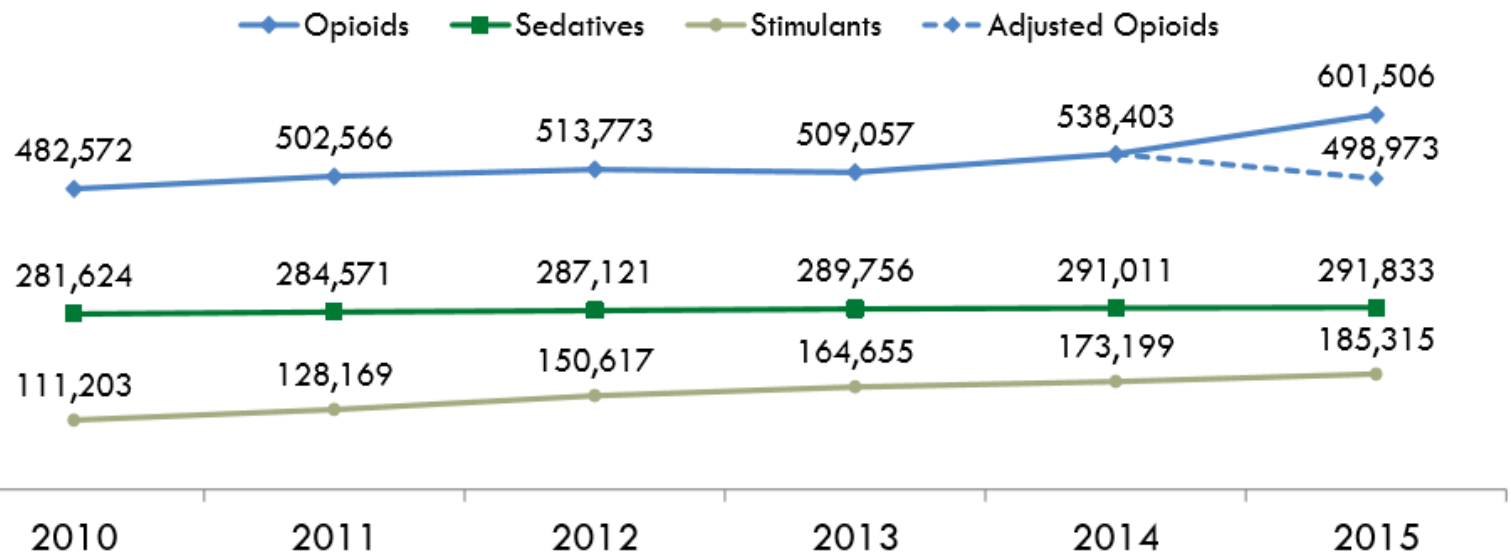
7 out of 10 people
who used heroin in the
past year also misused
opioids in the past year

Jones, C.M., Heroin use and heroin use risk behaviors among nonmedical users of prescription opioid pain relievers – United States, 2002–2004 and 2008–2010. *Drug Alcohol Depend.* (2013).

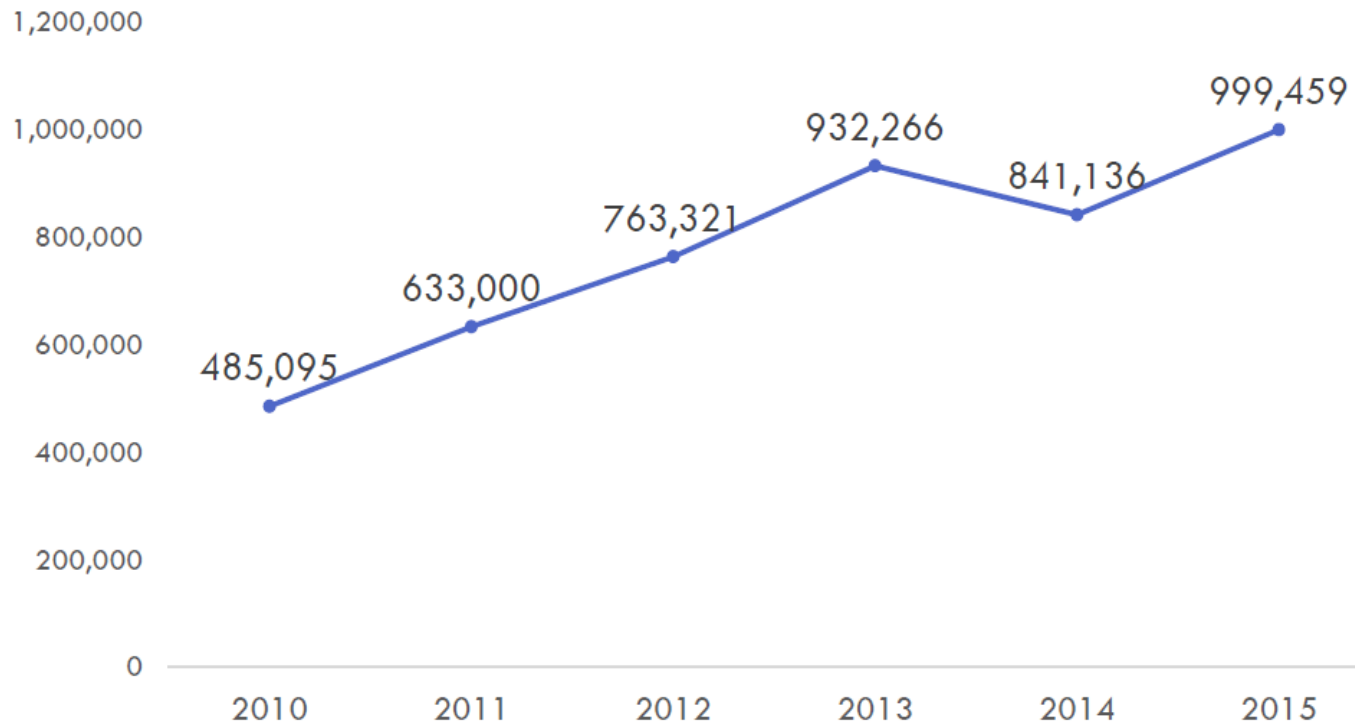
Number of Prescriptions by Drug Type and Year

- Opioids account for approximately 48% of the controlled substances dispensed in VT on an annual basis. Sedatives account for approximately 26%.
- The adjusted opioid prescription total indicates that fewer opioid prescriptions were dispensed in 2015. (See the note below for details.)

Total Number of Controlled Substance Prescriptions by Drug Type and Year



Total number of syringes dispensed by year



Effect on Vermont Families

- The number of children in DCF custody increased from 982 to 1,323 in federal FY 2016.
 - **During 2016, 53% of children in DCF care under the age of 6 were in DCF care due to opioid use issues.**
 - Termination for parental rights petitions increased 93% between 2011 and 2016
 - Petitions for 'children in need of supervision', increased from 553 to 1,070 cases between 2011 and 2016.
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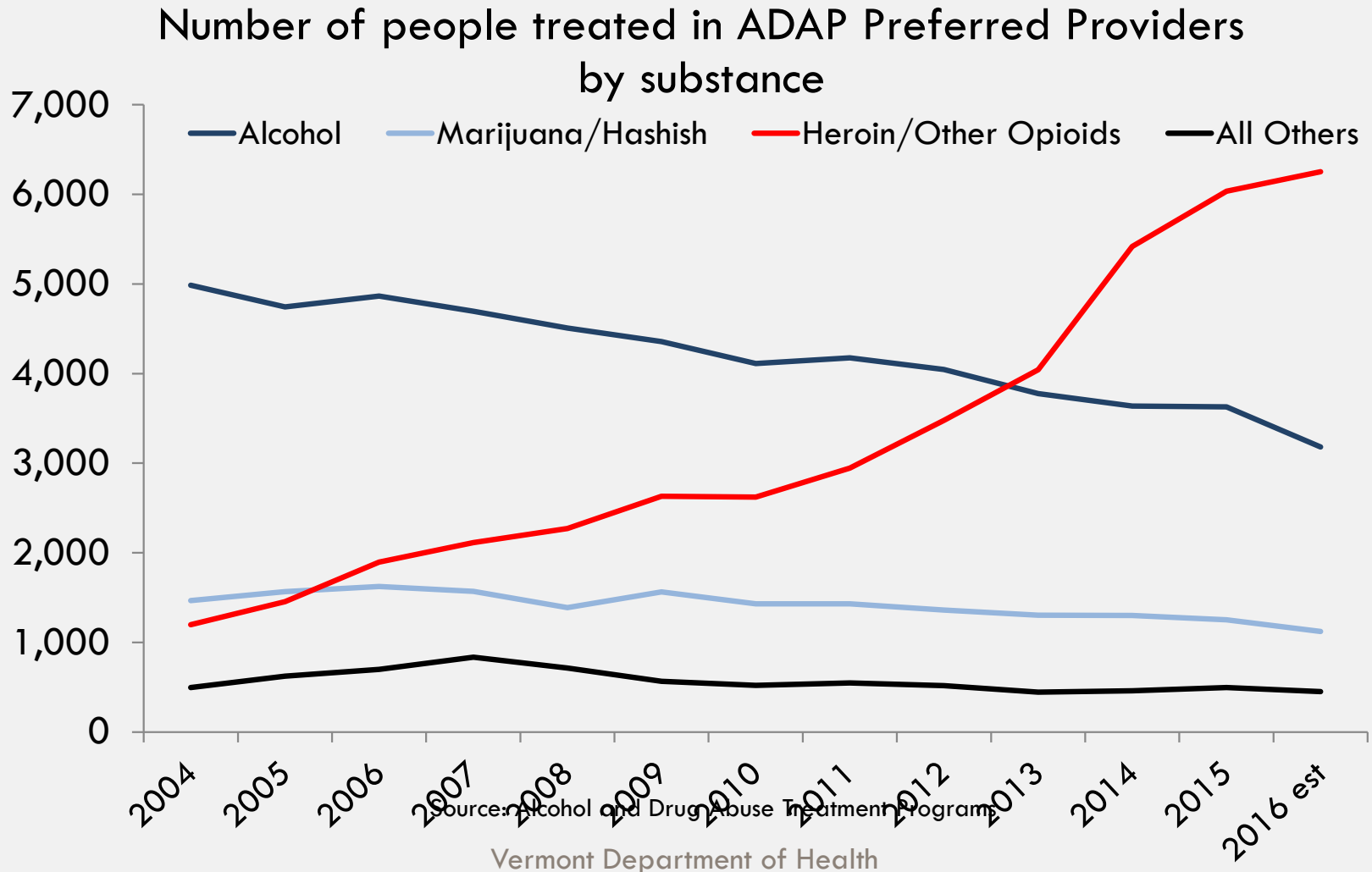
Outstanding Issues

- Altering Prescribing Practices
- Coordinated Statewide Prevention/Messaging Strategy
- Timely OD Data Collection
- Treatment/Recovery

Progress

- Large parts of the state do not have wait lists for treatment
 - Deaths from prescription opioids appear to be flattening
 - Naloxone is getting into the hands of those who need it most
 - Youth use is trending downward over time
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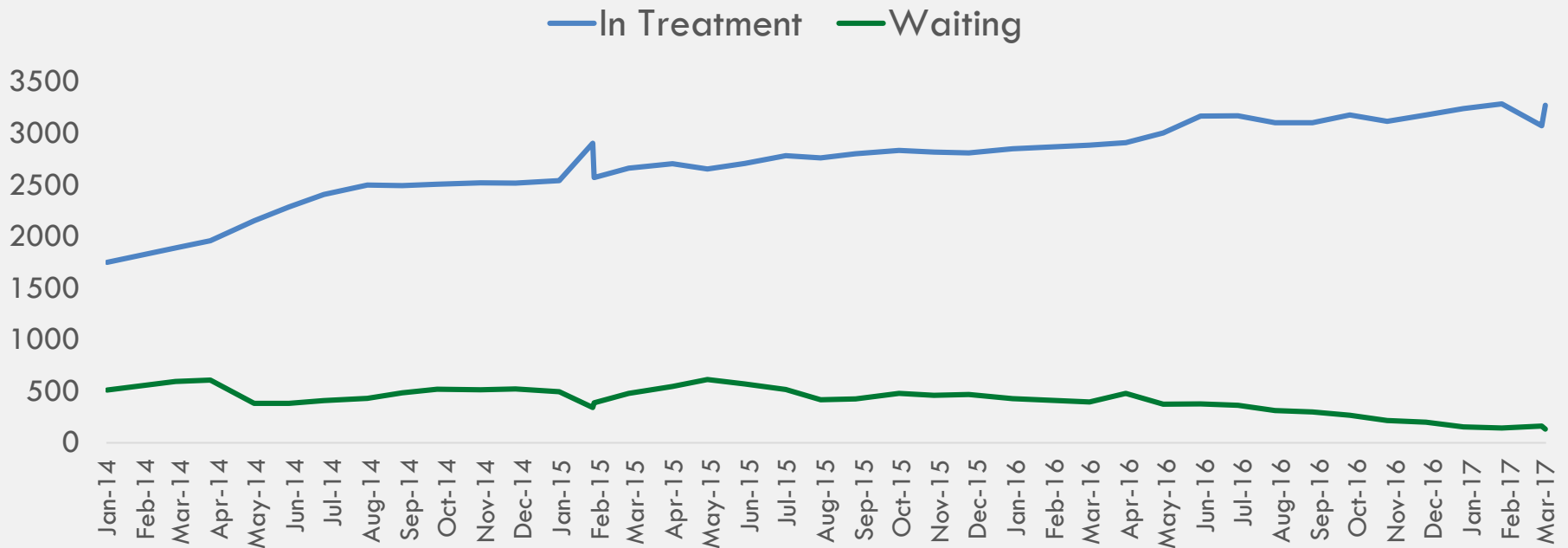
The number of Vermonters treated for opioid addiction continues to increase



Opioid Use Disorder Treatment Hubs

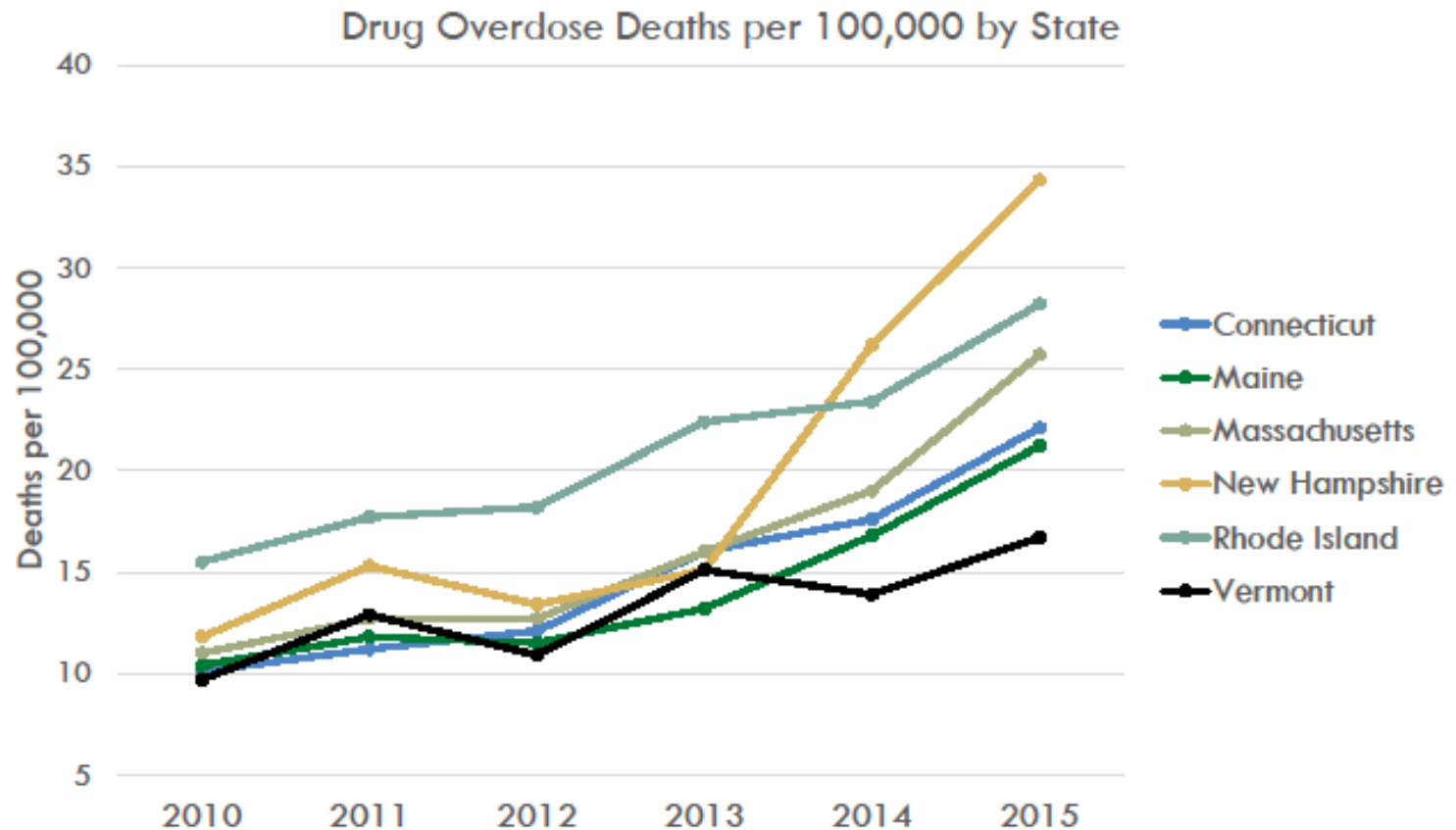
The statewide number of people waiting for opioid use disorder treatment in hubs has trended downward over time; the number of people served in hubs has increased

Number of People in Hubs and Waiting for Hub Services Over Time



Source: Alcohol and Drug Abuse Treatment Programs

New England Drug Overdose Deaths



Source: CDC/NCHS, National Vital Statistics System, mortality data. Includes opioids and other drugs

Scope and Impact of the Opioid Crisis

- The accurate number of the opioid dependent individuals in Vermont is unknown.
- It is likely 15,000-20,000 people.(3%-4% of the adult population).
- An opioid addiction epidemic is not a “flash in the pan” phenomenon (eg. the 1970s heroin epidemic).
- The current group of addicted individuals will impact the healthcare, social service, criminal justice and other aspects of Vermont society for decades.
- Treatment for these individuals far exceeds the capability of the specialty care (addiction) treatment system.
- Primary care networks will be the principal source of ongoing care for the treatment of these individuals.

Vermont's response to the opioid crisis is based on the most current science

- Vermont's response to the opioid crisis includes:
 - Expanded access to evidence-based treatment;
 - Narcan distribution;
 - Syringe exchange;
 - Prescription opioid monitoring;
 - Community mobilization;
 - Prevention activities.
- This response is in full agreement with the:
 - 2017 Surgeon General's Report on Alcohol Drugs and Health
 - Major policy papers and recommendations by:
 - National Institute of Drug Abuse,
 - Substance Abuse and Mental Health Services Administration
 - American Society of Addiction Medicine
 - The United Nations
 - The World Health Organization
- At least 8 states are currently making major investments to replicate Vermont's response to the opioid crisis.

Goals for 2017

- ❑ St. Albans hub opening summer 2017
- ❑ New pain rules in place July 1, 2017
- ❑ Implementation of peer recovery support services in three Vermont hospital emergency departments
- ❑ Public information, social marketing, and messaging about use of opioids
 - ❑ Awareness about the responsible use of prescription pain relievers
 - ❑ Encourage patients to talk with their doctor about the risks of opioids
 - ❑ Address expectations of **zero** pain
 - ❑ Increase the perception of risk associated with prescription pain reliever misuse and transitioning to other opioids such as heroin.
 - ❑ Outreach to prescribers with support tools and resources

Goals for 2017 – “State Targeted Response to Opioid Crisis” Grant - \$2M

- ❑ Training for NPs/PAs to prescribe buprenorphine
- ❑ Drug disposal system implementation & evaluation
- ❑ Community/parent education & prevention grants
- ❑ Telephone recovery support
- ❑ Improve treatment system capacity management
- ❑ Workforce development
 - ❑ Recovery Coach Academy
 - ❑ Counselor competencies