

The DASIS Report

July 23, 2004

Treatment Admissions Involving Narcotic Painkillers: 2002 Update

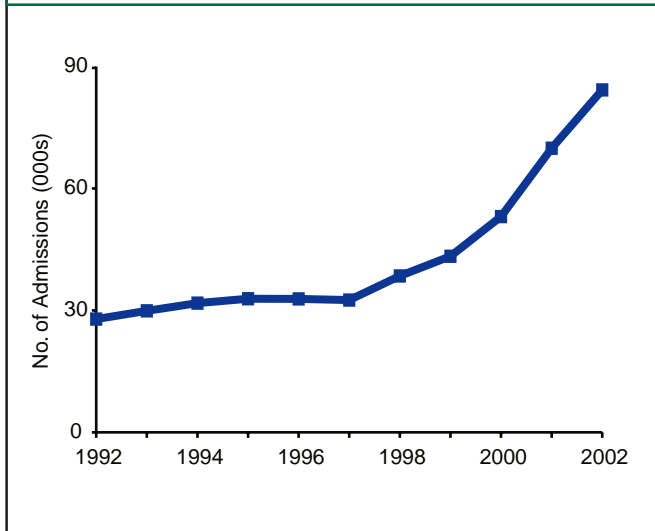
In Brief

- Between 1992 and 2002, treatment admission rates for abuse of narcotic painkillers more than doubled
- The proportion of new users of narcotic painkillers (those entering treatment within 3 years of beginning use) increased from 26 percent in 1997 to 39 percent in 2002
- Between 1997 and 2002, the number of treatment admissions involving narcotic painkillers increased for all ages, especially among people aged 20 to 30

Admissions to treatment involving the abuse of narcotic painkillers¹ made up a small proportion—about 4 percent—of the 1.9 million admissions reported to the Treatment Episode Data Set (TEDS) in 2002. However, these treatment admissions have increased in publicly funded substance abuse treatment facilities across the nation during the last few years.

In 2002, there were about 84,000 admissions to treatment where the primary, secondary, or tertiary substance of abuse was a narcotic painkiller. In about half of these admissions, narcotic painkillers represented the primary substance of abuse.² In the other half of these 84,000 admissions, abuse of narcotic painkillers was secondary to abuse of another substance, generally alcohol or heroin.

Figure 1. Narcotic Painkiller Treatment Admissions: 1992-2002



Source: 2002 SAMHSA Treatment Episode Data Set (TEDS).

The number of treatment admissions in which narcotic painkillers were involved was relatively stable between 1992 and 1997, but increased between 1997 and 2002 (Figure 1). In 1992, the treatment admission rate for narcotic painkiller abuse in the United States was 14 admissions per 100,000 persons aged 12 or older.³ By 2002, it had increased to 35 admissions per 100,000, more than doubling the rate since 1992.

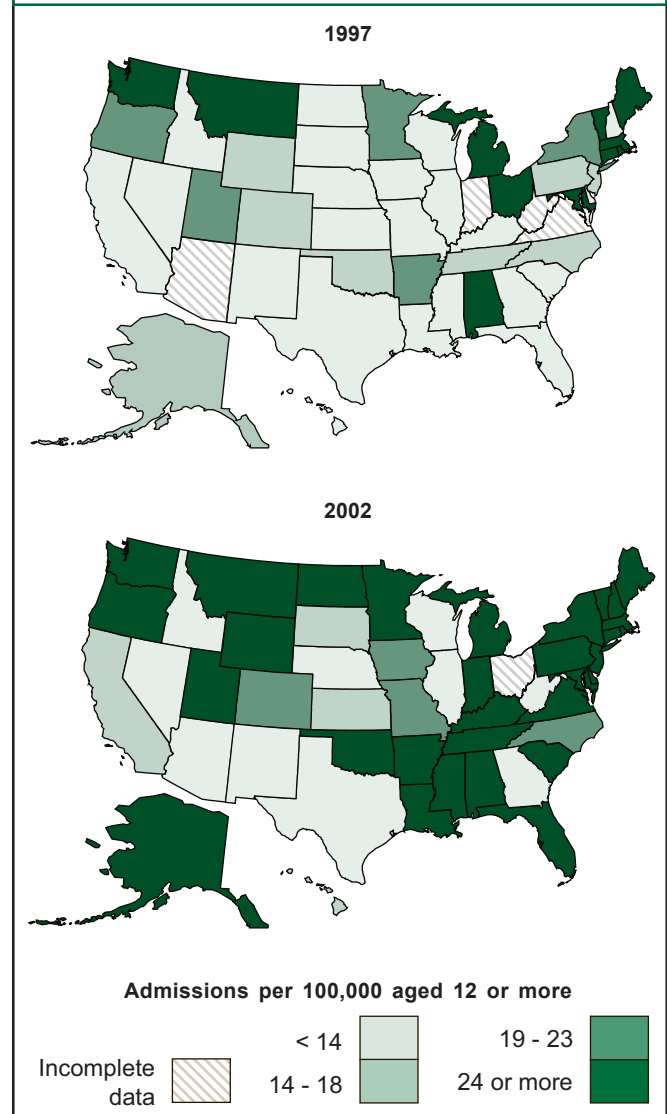
Admission Rates by State

In 1992, 5 States had an admission rate for narcotic painkillers of 24 per 100,000 aged 12 or older. By 1997, 11 States had admission rates that high, and by 2002, 31 States had narcotic painkiller admission rates of 24 per 100,000 or more (Figure 2). Five of the 6 New England States reported the highest rates in the nation, ranging from 89 per 100,000 in Connecticut to 207 per 100,000 in Maine.

Number of Admissions

The increase in admissions involving narcotic painkillers was much larger than the overall increase in treatment admissions (Figure 3). In TEDS, the number of treatment admissions increased by 17 percent between 1997 and 2002. During that same period, admissions for primary heroin abuse increased 21 percent. Admissions for primary abuse of narcotic painkillers increased

Figure 2. Narcotic Painkiller Admission Rates, by State: 1997 and 2002



186 percent, and the number of admissions involving any primary, secondary, or tertiary abuse of narcotic painkillers increased by 159 percent.

Characteristics

The characteristics of admissions for abuse of narcotic painkillers changed little between 1997 and 2002. Over half (56 percent in 1997 and 57 percent in 2002) were male, and the majority were White (83 percent in 1997 and 87 percent in 2002). Referral to treatment through the criminal justice system was relatively rare (17 percent in both 1997 and 2002), with about half of narcotic painkiller admissions seeking treatment on their

Figure 3. Percent Increase in Number of Treatment Admissions: 1997-2002

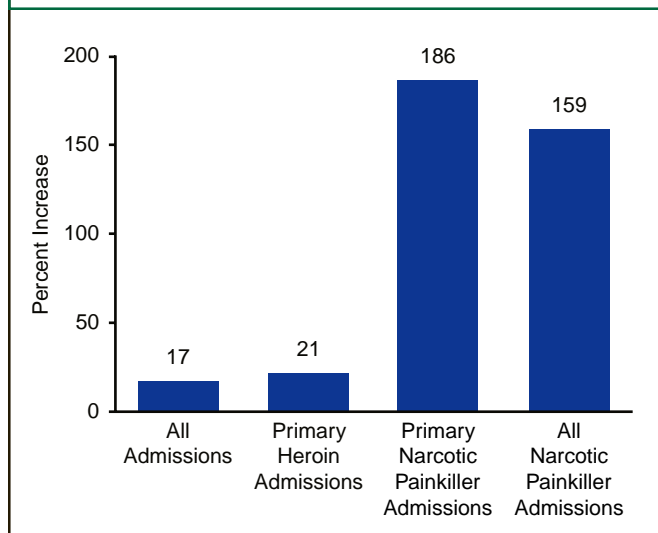
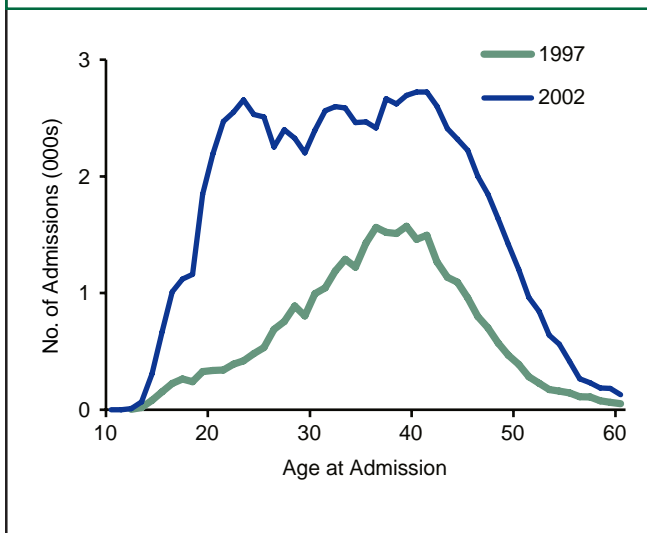


Figure 4. Narcotic Painkiller Admissions, by Age: 1997 and 2002



own (47 percent in 1997 and 49 percent in 2002) and one quarter being referred by substance abuse treatment or other health care providers (26 percent in 1997 and 25 percent in 2002). In 2002, a larger proportion entered detoxification than in 1997 (27 percent vs. 22 percent).

New Users

The major change between 1997 and 2002 was the substantial increase in the proportion of new users of narcotic painkillers (those entering treatment within 3 years of beginning use). The proportion of new users increased from 26 percent in 1997 to 39 percent in 2002.

Age

Over the 5-year span 1997 to 2002, the number of treatment admissions involving narcotic painkillers increased for all ages (Figure 4). However, the largest

increase was in the number of admissions among people aged 20 to 30.

Duration of Use

The median duration of use before first seeking treatment decreased, from 9 years in 1992, to 7 years in 1997, to 4 years in 2002.

End Notes

- ¹ Narcotic painkiller admissions include all admissions reporting primary, secondary, or tertiary abuse of narcotic painkillers such as codeine, hydrocodone, hydromorphone, meperidine, morphine, oxycodone, pentazocine, propoxyphene, and any other drug with morphine-like effects. Admissions involving abuse of heroin and/or methadone, unless reported in addition to abuse of narcotic painkillers, are excluded from this report.
- ² The primary substance of abuse is the main substance reported at the time of admission.
- ³ States continually review the quality of their data processing. When systematic errors are identified, States may revise or replace historical TEDS data files. While this process represents an improvement in the data system, the historical statistics in this report will differ slightly from those in earlier reports.

The Drug and Alcohol Services Information System (DASIS) is an integrated data system maintained by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA). One component of DASIS is the Treatment Episode Data Set (TEDS). TEDS is a compilation of data on the demographic characteristics and substance abuse problems of those admitted for substance abuse treatment. The information comes primarily from facilities that receive some public funding. Information on treatment admissions is routinely collected by State administrative systems and then submitted to SAMHSA in a standard format. Approximately 1.9 million records are included in TEDS each year. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once.

The DASIS Report is prepared by the Office of Applied Studies, SAMHSA; Synectics for Management Decisions, Inc., Arlington, Virginia; and RTI, Research Triangle Park, North Carolina.

Information and data for this issue are based on data reported to TEDS through March 1, 2004.

Access the latest TEDS reports at: <http://www.oas.samhsa.gov/dasis.htm>
 Access the latest TEDS public use files at: <http://www.oas.samhsa.gov/SAMHDA.htm>
 Other substance abuse reports are available at: <http://www.oas.samhsa.gov>



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