

Prescription painkillers trail only marijuana in abuse rates, report shows

January 10 2013, by Steven Reinberg, Healthday Reporter



Rising numbers of people seeking treatment for abuse of these pain drugs, federal officials say.

(HealthDay)—Prescription painkillers are second only to marijuana when it comes to drug abuse, a new government report claims.

Some 22 million Americans have misused prescription painkillers since 2002, according to the U.S. Substance [Abuse](#) and [Mental Health Services](#) Administration (SAMHSA).

"Any time you have 2 percent of the population using medications like this there is a lot to do, but we are doing a lot with a combination of putting tighter controls on who can get these drugs and public education," said Peter Delany, director of SAMHSA's Center for [Behavioral Health](#) Statistics and Quality.

Also, programs such as the Prescription [Drug Monitoring](#) Program, which allows doctors to track patients who may be getting painkillers from several sources, has helped get a handle on the problem, he added.

And although the misuse of [prescription painkillers](#) has remained fairly constant over the past few years, the real consequence of the problem is the number of people seeking treatment, he said.

"The number of people seeking treatment has come on faster than we thought," Delany said. "The number of people going for treatment for prescription pain [drug](#) use has quadrupled from 2004 to 2010 and we have seen a similar increase in what's going on in the emergency room."

In 2009, there were nearly 425,000 emergency department visits involving non-medical or inappropriate use of narcotic painkillers and an estimated 15,600 deaths involving these drugs, according to Dr. Douglas Throckmorton, deputy director for regulatory programs at the Center for [Drug Evaluation](#) and Research, which is part of the U.S. [Food and Drug Administration](#).

Some people are concerned that by cracking down on prescription drug abuse, patients who need these pain medications will not be able to get them.

Delany said these concerns must be taken into account as solutions to the problem are crafted and implemented.

On Wednesday, the FDA proposed guidelines for drug makers for testing and evaluating new formulations of these drugs that make them harder to abuse by making them more difficult to tamper with so that abusers can "get high."

In the SAMHSA report, the abuse of narcotic pain relievers varied state

to state; pooled data from 2010 and 2011 found that rates of abuse for those aged 12 or older ranged from 3.6 percent in Iowa to 6.4 percent in Oregon.

Seven of the states with the highest rates of narcotic painkiller abuse were in the West—Arizona, Colorado, Idaho, Nevada, New Mexico, Oregon and Washington.

Four of the states with the lowest rates were in the Midwest—Illinois, Iowa, North Dakota and South Dakota—and four were in the South—Florida, Georgia, Maryland and North Carolina, according to the report.

Abuse of these drugs decreased in Kentucky, Louisiana, Massachusetts, Mississippi, New Hampshire, New York, Ohio, Oklahoma, Rhode Island and West Virginia.

The report is based on data from the SAMHSA National Survey on Drug Use and Health, which is a survey of approximately 67,500 people across the United States.

"The public health community has begun to recognize the scope of the epidemic," said Dr. G. Caleb Alexander, co-director of the Center for Drug Safety and Effectiveness at the Johns Hopkins School of Public Health in Baltimore.

Alexander noted that the problem is partially the result of trying to correct another problem, namely, the under-use of narcotic painkillers to manage pain in those who need it.

"One of the factors that has contributed to the epidemic are well-intentioned efforts to try to improve the identification and treatment of patients with pain," he said.

Another factor is the heavy marketing of [narcotic painkillers](#) by drug makers, Alexander said. In addition, doctors may be dispensing more pills in a prescription than a patient needs, he added.

"There is abuse and deception in every step of the pipeline, from warehouse robberies to pharmacy holdups down to theft from people's medicine cabinets, so it's a very complex problem," Alexander said.

Another expert, Leo Beletsky, an assistant professor of law and health sciences at Northeastern University School of Law & Bouve College of Health Sciences in Boston, is concerned that government efforts to curb narcotic painkiller abuse may go too far.

"Government officials have championed a number of solutions drawn primarily from the drug enforcement playbook, such as prescription monitoring programs, prosecutions of doctors accused of over-prescribing, and pill mill raids," Beletsky said.

Focusing only on drug supply is short-sighted and dangerous, he noted. "First, it may unduly restrict legitimate patient access to effective pain care and, second, recent data suggests that cutting patients with [substance abuse](#) problems off prescription opioid medications may actually push them towards injecting heroin," Beletsky said.

"In other words, as we craft solutions to address prescription drug misuse, we must be extremely careful to avoid causing more harm than good," Beletsky added.

Along with actions to restrict supply, the answer to this problem must include wider access to substance abuse services, drug treatment, counseling and other investments in the scientifically proven ways to address substance abuse, Beletsky explained.

More information: For more on prescription drug abuse, visit the [U.S. National Library of Medicine](#).

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Citation: Prescription painkillers trail only marijuana in abuse rates, report shows (2013, January 10) retrieved 23 April 2024 from <https://medicalxpress.com/news/2013-01-prescription-painkillers-trail-marijuana-abuse.html>

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