

# Deaths tied to painkillers rising in the US

March 31 2013, by Scott Glover And Lisa Girion

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Despite efforts by law enforcement and public health officials to curb prescription drug abuse, drug-related deaths in the United States have continued to rise, the latest data show.

Figures from the U.S. [Centers for Disease Control and Prevention](#) reveal that drug fatalities increased 3 percent in 2010, the most recent year for which complete data are available. Preliminary data for 2011 indicate the trend has continued.

The figures reflect all drug deaths, but the increase was propelled largely by prescription painkillers such as OxyContin and Vicodin, according to just-released analyses by CDC researchers.

The numbers were a disappointment for [public health officials](#), who had expressed hope that educational and enforcement programs would stem the rise in fatal [overdoses](#).

"While most things are getting better in the health world, this isn't," CDC Director Tom Frieden said in an interview. "It's a big problem, and it's getting worse."

Drugs overtook [traffic accidents](#) as a cause of death in the country in 2009, and the gap has continued to widen.

[Overdose deaths](#) involving prescription painkillers rose to 16,651 in 2010, the CDC researchers found. That was 43 percent of all fatal overdoses.

The numbers come amid mounting pressure to reduce the use of [prescription painkillers](#). The U.S. [Food and Drug Administration](#) is considering a proposal to limit daily doses of painkillers and restrict their use to 90 days or less for non-[cancer patients](#). The proposal also would make such drugs available to non-cancer patients only if they suffer from severe pain.

"The data supporting long-term use of opiates for pain, other than cancer pain, is scant to nonexistent," Frieden said. "These are dangerous drugs. They're not proven to have long-term benefit for non-cancer pain, and they're being used to the detriment to hundreds of thousands of people in this country."

Among the most promising tools to combat the problem, Frieden said, are computerized drug monitoring programs that track prescriptions for painkillers and other commonly abused narcotics from doctor to pharmacy to patient. Frieden said such programs should be used to monitor doctors' prescribing as well as patients' use.

"You've got to look at the data to see where the problems are," he said. "You don't want to be flying blind."

In California, officials do not use the state's prescription drug monitoring program, known as CURES, to proactively seek out problem patients or physicians. The state's medical board initiates investigations of doctors only after receiving a complaint. Legislation awaiting action in Sacramento would increase funding for CURES and provide more investigators to police excessive prescribing, among other measures.

Frieden, a physician trained at Columbia and Yale universities, said patient safety should be placed above the concerns among some doctors about scrutiny of their prescribing patterns.

"We all take an oath to, above all, do no harm," he said. "And these medications do harm. You're free to practice medicine however you want. But you're not free to do things that hurt people."

President Barack Obama's drug czar, R. Gil Kerlikowske, echoed Frieden's call for aggressive monitoring by state medical boards.

"You can't just sit back, have a big database and then say, 'Well, we'll wait till there's a complaint that comes in,'" he said in an interview. "You have to use it proactively."

Lynn Webster, president-elect of the American Academy of Pain Medicine, said the new figures underscored the need for further action, such as educating physicians to recognize patients who are at risk for abusing painkillers.

"This is not the trend anyone wants to see," Webster said.

CDC mortality data, culled from death certificates, do not detail how the decedents obtained the drugs that killed them.

A Los Angeles Times analysis of coroners' records published last year found that prescriptions from physicians played a substantial role in the death toll. Of 3,733 prescription drug-related fatalities in Southern California examined by the Times, nearly half involved at least one drug that had been prescribed to the decedent by a physician.

Seventy-one doctors prescribed drugs to three or more patients who later fatally overdosed, the analysis showed. And several of the doctors lost a dozen or more patients to overdoses.

The latest CDC figures predate a broad attack on prescription drug abuse and misuse launched by the White House in April 2011. The preliminary

figure for 2011 is down slightly but is expected to grow by at least 5 percent - exceeding the 2010 level - when all death certificates are in and counted, experts said. That's what has happened in previous years.

Kerlikowske, who heads the White House Office of National [Drug Control Policy](#), said efforts to hone the response to measures that show results were frustrated by the lagging mortality data. But, he said, anecdotal evidence and surveys of younger Americans suggest "there's a lot going on that's moving in the right direction."

He declined to predict when there would be downturn in deaths.

"It won't be overnight, certainly," he said. "But we didn't get here, with these kinds of numbers of deaths and overdoses, overnight."

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