

Deaths from narcotic painkillers quadrupled in past decade, CDC reports

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Increases highest among whites, and people between 55 and 64.

(HealthDay)—The number of Americans dying from accidental overdoses of narcotic painkillers jumped significantly from 1999 to 2011, federal health officials reported Tuesday.

Deaths from overdoses of drugs such as hydrocodone (Vicodin), morphine and oxycodone (Oxycontin) climbed from 1.4 per 100,000 people to 5.4 per 100,000, according to the U.S. Centers for Disease Control and Prevention.

That means about 3,000 people died in 1999 from unintentional overdoses. By 2011, that [number](#) was up to nearly 12,000 deaths, the report said.

Despite the rising number of deaths, the rate of the increase has actually slowed since 2006, according to report co-author Dr. Holly Hedegaard. She's an epidemiologist at CDC's National Center for Health Statistics (NCHS).

"Although the rate is still increasing, it is not increasing quite as fast as it did between 2000 and 2006," Hedegaard said. "From 1999 to 2006, the rate of deaths increased about 18 percent per year, but since 2006 it's only increasing about 3 percent per year."

Hedegaard thinks the slowing rate might be due in part to fewer deaths from methadone and some painkillers. Deaths from these drugs have leveled off or declined, she said.

However, in 2011, [benzodiazepines](#)—sedatives used to treat anxiety, insomnia and seizures—were involved in 31 percent of the narcotic painkiller deaths up from 13 percent in 1999, according to the report published Sept. 16 in the *NCHS Data Brief*.

From 2006 to 2011, deaths involving benzodiazepines increased an average of 14 percent per year, while deaths from painkillers not involving benzodiazepines did not change significantly, the investigators reported.

The report also found a striking increase in the number of deaths in people aged 55 to 64. In 1999, the rate was 1 per 100,000 people. By 2011, that number had jumped to more than 6 per 100,000, the findings showed.

There was also a dramatic rise in the number of deaths in white people from opioid use; it was 4.5 times higher in 2011 than it had been in 1999. The increase in the number of deaths from opioids doubled during the same time period for blacks, and increased just slightly for

Hispanics, the study authors said.

Dr. Andrew Kolodny, president of Physicians for Responsible Opioid Prescribing and chief medical officer of the Phoenix House Foundation in New York City, said this "epidemic" can be brought under control. "We have to stop creating new cases of addiction. That boils down to getting the medical community to prescribe more cautiously," he said.

"It's not that doctors are intentionally causing an epidemic, but they are overprescribing painkillers, particularly for common chronic problems like lower back pain and headaches," he explained.

Kolodny said these painkillers are intended for use in the days following surgery or an accident, or as palliative care for cancer patients. The bulk of the prescribing, however, is for chronic conditions. "That's what's really fueling the epidemic," he said.

The racial difference in the pattern of prescribing is also a large part of the problem, Kolodny said.

"Doctors prescribe [narcotic painkillers](#) much more cautiously to their non-white patients," he said. "When doctors have a black or Latino patient, they are more concerned about the possibility of addiction or diversion of the drug—patients selling the medication—so they prescribe more cautiously. Stereotyping is having a protective effect on minorities," Kolodny said.

The idea that a white, middle-class person could become addicted to these pills is far from their minds, he said.

Kolodny added that to address the problem, addicts need better access to treatment. "We need a vast expansion of treatment."

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