

Study finds adults aged 50-59 now largest age group in opioid treatment programs

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Recent years have seen a change in drug use patterns, especially for older adults, with an increase in their admission to substance abuse treatment and increased injection drug use among those over the age of 50. Yet, there has been little research regarding the epidemiology, health status, and functional impairments in the aging population of adults accessing opioid treatment.

Of the few studies on this [population](#) to date, most have been based off of a limited dataset that only accounts for [treatment](#) admissions, and therefore may not fully capture the utilization of [substance abuse](#)

treatment over time. Furthermore the treatment episode dataset (TEDS), defines an older adult as aged over 50 or 55, and may not fully demonstrate how the population is aging.

Given the gaps in existing data, researchers affiliated with New York University's Center for Drug Use and HIV Research (CDUHR), and NYU's School of Medicine (NYUSoM) sought to elucidate age trends for [opioid treatment](#) programs, with an emphasis on [older adults](#), in a new study published in the *Journal of Substance Use & Misuse*. The investigation focuses on such trends in New York City, as it has one of the largest methadone treatment systems in the U.S. and consistently provides access to treatment in the public system.

The study, "Demographic Trends of Adults in New York City Opioid Treatment Programs- An Aging Population," used data collected by New York State's Office of Alcoholism and Substance Abuse Services (OASAS). OASAS provides more detailed information on the treatment population than what is available nationally through the TEDS dataset, allowing the NYU researchers to characterize basic demographic, self-reported other substance use, and self-reported physical impairments.

"Most notably," says Benjamin Han, MD, MPH, an instructor at NYUSoM and the study's principle investigator, "we found a pronounced age trend in those utilizing opioid [treatment programs](#) from 1996 to 2012, with adults aged 50 and older becoming the majority treatment population."

Specifically, individuals aged 50-59 which made up 7.8% (N= 2,892) of the total patient population in 1996, accounted for 35.9% (N= 12,301) of the population in 2012. Patients aged 60-69, also saw a dramatic increase in numbers, originally constituting 1.5% of [patients](#) (N= 558) to 12.0% of patients (N= 4,099).

"These increases are especially striking, considering there was about a 7.6% decrease in the total patient population over that period of time, and suggests that we are facing a never before seen epidemic of older adults with substance use disorders and increasing numbers of older adults in [substance abuse treatment](#). Unfortunately there is a lack of knowledge about the burden of chronic diseases and geriatric conditions or the cognitive and physical function of this growing population" says Dr. Han.

During the same period, those age 40 and below, who in 1996 accounted for 56.2% of patients (N= 20,804), were a fraction of that in 2012, responsible for 20.5% of total patients (N= 7,035).

There were also notable shifts with regards to race and ethnicity. During this period older adults over the age of 60 were increasingly white, with a 10.3% increase in representation, while there was a 13.8% decrease in the percentage of black patients. There was a small increase in the Hispanic constituency from 35.0% in 1996 to 38.8% in 2012. These trends, however, were different for those aged 50-59. In this age group there were smaller decreases in both the white (3.5%) and black (5.9%) populations, and a larger increase in Hispanic patients (9.2%). However, when looking at all age groups during this period, the overall white population remained steady (-0.4%), with a slight decrease in black patients (3.5%) and a slight increase in Hispanic patients (3.4%).

Researchers believe the increase in older adults utilizing opioid treatment programs is likely to continue into the next decade. Further studies are required to better understand the specific and unique health needs of this growing population from a geriatric perspective. More research is also need to understand how other substance use can complicate care and how to address the changing ethnic and racial demographics of this population in New York City.

More information: Benjamin Han et al. Demographic Trends of Adults in New York City Opioid Treatment Programs—An Aging Population, *Substance Use & Misuse* (2015). [DOI: 10.3109/10826084.2015.1027929](https://doi.org/10.3109/10826084.2015.1027929)

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