

Most reproductive-age women using opioids also use another substance

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The majority of reproductive-age and pregnant women who use opioids for non-medical purposes also use at least one other substance, ranging from nicotine or alcohol to cocaine, according to a University of



Pittsburgh Graduate School of Public Health analysis. It was the first to look at use of multiple substances in a nationally representative group of U.S. women age 18 to 44.

The findings, published online and scheduled for an upcoming issue of the *American Journal of Public Health*, indicate that public <u>health</u> efforts aimed at fighting the <u>opioid</u> epidemic should include interventions that address concurrent use of multiple substances among reproductive-age women.

"Using multiple substances—some legal, some illegal—alongside opioids is the norm, not the exception, for reproductive-age women," said lead author Marian Jarlenski, Ph.D., M.P.H., assistant professor in the Department of Health Policy and Management at Pitt Public Health. "Since the increase in opioid use among women has been accompanied by an increase in adverse pregnancy and birth outcomes, including neonatal abstinence syndrome, reproductive-age women should be of particular concern in public health efforts to combat the opioid epidemic."

Jarlenski and her colleagues analyzed National Survey of Drug Use and Health data from 2005 to 2014, finding that approximately one in every 50 women age 18 to 44 reported using an opioid pain reliever that was not prescribed or used only for the experience or feeling it caused, or heroin, in the prior 30 days.

Almost 11 percent of those women reported only using the opioid. The most commonly used additional substances included cigarettes (56.2 percent), binge drinking (49.5 percent) and marijuana (32.4 percent). Prevalence of other <u>substances</u> was also high, including non-prescribed tranquilizers or sedatives (22.2 percent) and cocaine (9.4 percent).

"The high use of marijuana is particularly noteworthy, given recent



policy changes around state marijuana legalization efforts," said Jarlenski. "As legalization is likely to increase marijuana use, we'll need ongoing analyses to determine the relationship, if any, between marijuana policy and non-medical opioid use among women."

White women were the most likely to be using opioids along with another substance, with only 6.3 percent of white women reporting only using an opioid and nothing else, compared with 19.8 percent of non-white and Hispanic women.

"The U.S. has experienced a 400 percent increase in overdoses due to prescription opioid pain relievers among women of reproductive age between 1999 and 2010, and those deaths are concentrated among white women in rural areas, and those with lower socioeconomic status," said Jarlenski. "Despite evidence that substance use disorder treatment programs work, there is high unmet need for women-centered or pregnancy-focused substance use disorder treatment. I hope our study helps change that."

More information: Marian Jarlenski et al. Polysubstance Use Among US Women of Reproductive Age Who Use Opioids for Nonmedical Reasons, *American Journal of Public Health* (2017). DOI: 10.2105/AJPH.2017.303825

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