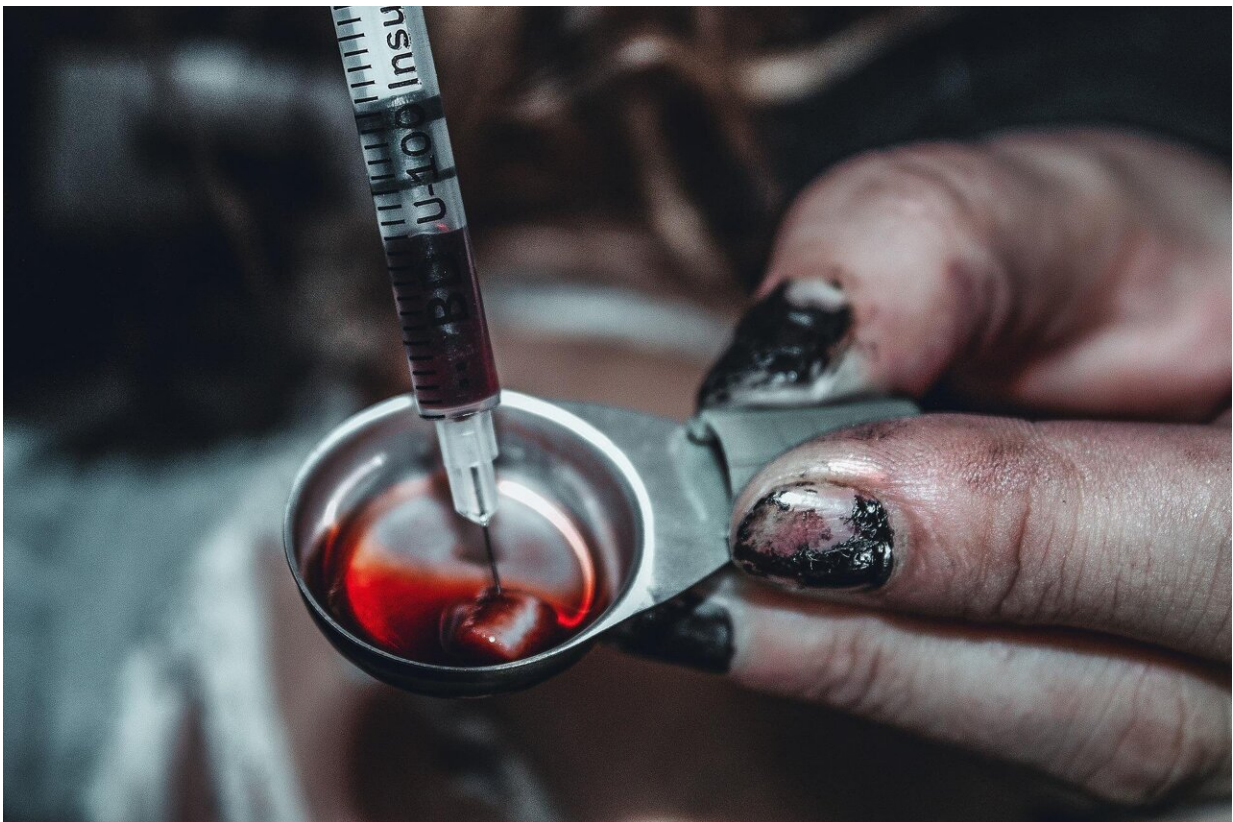


Almost 90 percent of people with opioid use disorder not receiving life-saving medication, new study finds

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Credit: Pixabay/CC0 Public Domain

While the opioid overdose and death epidemic continues to worsen across the United States, medications such as methadone, buprenorphine

and extended-release naltrexone are proven to reduce opioid overdoses by more than 50 percent. New findings led by researchers at NYU Grossman School of Medicine indicate the vast majority, or 86.6 percent, of people living with opioid use disorder (OUD) are not receiving these evidence-based, life-saving medications.

The study, published online August 4, 2022 in the *International Journal of Drug Policy*, examined the gap between new estimates of OUD prevalence and the use of medications to treat [opioid use disorder](#) (MOUD) at the national and state levels from 2010 through 2019. Although the use of MOUD has grown by more than 100 percent over the last decade, this rise in [treatment](#) has failed to keep pace with OUD and skyrocketing overdose mortality rates—largely driven by fentanyl, a potent synthetic opioid up to 50 times stronger than heroin.

A recent report from the Centers for Disease Control and Prevention revealed [opioid overdose](#) deaths climbed 30 percent during the first year of the COVID-19 pandemic nationally, with Black, American Indian and Alaska Native populations bearing disproportionate shares of the increase.

"Our findings highlight the urgency of removing barriers to accessing medications to treat opioid use disorder, while expanding the availability of these medications," says Noa Krawczyk, Ph.D., an assistant professor at the Center for Opioid Epidemiology and Policy in the Department of Population Health at NYU Langone, and lead author of the study. "But what we have is way beyond a simple treatment capacity problem. We need to rethink how treatment for opioid use disorder is delivered, eliminate stigma, make it easier for people to enter and remain in treatment, as well as ensure that all treatment programs provide and encourage use of evidence-based medications that we know save lives."

According to Krawczyk, more than 70 percent of residential treatment

programs across the country do not offer MOUD. Other ways to expand access to MOUD could include removing special waiver requirements so that more physicians can prescribe buprenorphine, as well as expanding the deployment of MOUD by mobile health clinics and community-based organizations, and within the criminal justice system. Making methadone less controlled and more accessible through avenues other than highly regulated opioid [treatment programs](#) is also long overdue, says Krawczyk.

How the study was conducted

To determine the gap between people with OUD and the number of people receiving MOUD, the investigators analyzed two different sources: a publicly available database that tracks the dispensing of MOUD by licensed methadone clinics, and a private database of outpatient pharmacy claims that tracks prescriptions filled for buprenorphine and extended-release naltrexone (medications for OUD that can be prescribed from a doctor's office). The researchers then calculated the percent change in national and state-specific rates of persons receiving MOUD over the past year (2018 to 2019) and past decade (2010 to 2019), using rates per 100,000 people. Their analysis revealed the following:

- There was a 105.6 percent increase in the rate of MOUD receipt across the U.S. from 2010-2019
- As of 2019, 86.6 percent of people with OUD were not receiving MOUD
- State-specific findings indicate a wide variation in past-year OUD prevalence and MOUD treatment gaps
- MOUD treatment rates were lowest in South Dakota (66.1 per 100,000) and highest in Vermont (1,342.6 per 100,000)
- As of 2019, the largest treatment gaps were in Iowa (97.3 percent), North Dakota (96.1 percent) and Washington D.C.

(95.1 percent)

- The smallest treatment gaps were in Connecticut (53.9 percent), Maryland (58.1 percent) and Rhode Island (58.6%)
- While all 50 states had increases in MOUD treatment rates, only Washington, D.C. had a decrease of 9.2 percent between 2018 and 2019

"Even in states with the smallest treatment gaps, at least 50 percent of people who could benefit from medications for [opioid](#) use disorder are still not receiving them," says Magdalena Cerdá, DrPH, professor and director of the Center for Opioid Epidemiology and Policy in the Department of Population Health at NYU Langone Health, and the study's senior author. "We have a long way to go in reducing stigma surrounding treatment and in devising the types of policies and programs we need to ensure these medications reach the people who need them the most," says Cerdá.

More information: Noa Krawczyk et al, Has the treatment gap for opioid use disorder narrowed in the U.S.?: A yearly assessment from 2010 to 2019", *International Journal of Drug Policy* (2022). [DOI: 10.1016/j.drugpo.2022.103786](#)

CDC report: [www.cdc.gov/mmwr/volumes/71/wr ... mm7129e2.htm#T2](http://www.cdc.gov/mmwr/volumes/71/wr/mm7129e2.htm#T2) down

Provided by NYU Langone Health

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