

Years into a nationwide overdose epidemic, many with opioid addiction still aren't getting treatment medication

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Despite improvements in treatment access as the overdose crisis has spiraled over the last decade, many people with opioid use disorder

aren't getting medications to treat their addiction, a new study has found.

And the disorganized nature of data collection around [addiction](#) means it's difficult to estimate the true scope of the treatment gap in the United States.

The study, conducted by researchers at New York University, Columbia University, and the Centers for Disease Control and Prevention, looked at the estimated number of people with [opioid](#) use disorder nationwide between 2010 and 2019, and compared that with the number of people receiving medication treatment—buprenorphine or methadone. Both [opioid medications](#) are proven to help maintain a more lasting recovery than quitting cold turkey.

Methadone is heavily federally regulated and typically dispensed through specially designated clinics. People typically must report to their clinic daily for a liquid dose of methadone. Buprenorphine is an oral pill medication that must be prescribed by a specially licensed doctor but can be taken at home.

Data on how many people use medication to treat opioid use disorder are scattered across different databases, and estimating how many people are struggling with an [opioid addiction](#) in the United States is even harder, said Noa Krawczyk, an assistant professor in the department of population health at NYU's Grossman School of Medicine and the study's lead author. "We have to rely on a lot of disjointed data," she said.

The National Survey on Drug Use and Health, a federal study on addiction rates, is household-based—meaning incarcerated people or people living on the street, both of whom suffer from high rates of addiction, are likely missed.

And because drug use is criminalized and stigma around addiction remains high, even people who are reached by surveyors might not say they have an opioid use disorder, Krawczyk said.

To reach a more accurate estimate of the extent of opioid addiction in the U.S., Krawczyk and other researchers consulted a more comprehensive 2018 study from Massachusetts, which estimated that opioid addiction rates in the state were nearly 4.5 times higher than federal estimates. Applying that multiplier nationwide, Krawczyk said, data show that it's likely that around 86% of people with opioid use disorder aren't receiving medications for it.

In Pennsylvania, according to that adjusted estimate, 78% of people with opioid use disorder aren't getting medications; in New Jersey, the gap is an estimated 89%, Krawczyk said.

And even without multiplying the federal estimates—assuming a much smaller population of Americans is addicted to opioids—there's still a significant number of Americans with opioid addiction who aren't accessing [medication](#), around 40%.

"Even in the best-case scenario, we are still missing a high portion of the population with [opioid use disorder](#)," Krawczyk said. "We didn't need to know exactly what the gap is in order to know that there is one, but it's important to understand what the extent of the problem is."

There are a number of barriers that keep people from accessing methadone and buprenorphine to treat their addictions—from strict federal regulations on the medications themselves to local zoning laws that make it difficult to open new methadone clinics. And while the study found that treatment access has almost doubled in the United States since 2010, overdose rates have also steadily risen since then as well—suggesting that too many still aren't getting the help they need.

The study authors stressed the need to increase [insurance coverage](#) for methadone, incentivize more doctors to prescribe buprenorphine, and decrease stigma around addiction in medical settings.

"Part of the motivation for doing this is to scream that we haven't even gotten much better in how we've addressed this issue," Krawczyk said. "And a sad part of the story is that we do know a lot of ways that we could be addressing this problem."

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