

As opioid deaths rise among teens, too few youth get anti-addiction drug

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The number of American teenagers becoming addicted to opioids is on

the rise, yet fewer are being prescribed a medication that can help them, a new government study finds.

Between 2015 and 2020, the proportion of teens receiving buprenorphine prescriptions fell by 45%. Buprenorphine is one of three medications approved to treat opioid addiction.

The decline in prescriptions is "concerning," given that the [opioid crisis](#) is actually worsening, said lead researcher [Dr. Andrew Terranella](#), of the U.S. Centers for Disease Control and Prevention.

"In the context of rising rates of opioid-involved overdose deaths, these data really underscore the important work that still needs to be done to better understand the reasons for low prescribing," he said.

The study, published Jan. 24 in the journal *Pediatrics*, is the latest look at nation's opioid epidemic—which has been exacting a growing toll on teenagers. More teens are dying of overdoses that involve opioids: The rate rose nearly fourfold between 2010 and 2021, according to the CDC.

And just as with adults, those overdose deaths have been mainly driven by illegally made versions of the painkiller fentanyl—a synthetic opioid that is 50 times more potent than heroin.

Illicit fentanyl is sold in various forms, including pills made to look like other prescription opioids. It's also commonly mixed into other illegal drugs like cocaine and heroin to boost their potency. The result is that users are often unaware they're taking fentanyl, [health officials](#) say.

There are effective medications to treat opioid addiction, sometimes along with counseling. Buprenorphine works by dampening opioid cravings and [withdrawal symptoms](#); it can be taken by mouth, extended-release injections or as an implant under the skin.

While studies show the [medication](#) is effective, prescriptions for it have remained stubbornly low—for adults and teens.

There are, unfortunately, many barriers, said [Molly Bobek](#), associate vice president of family and adolescent clinical technology and science at the nonprofit Partnership to End Addiction.

Often, [health care providers](#)—including many who care for kids—lack training in treating opioid use disorder. Then there's the enduring stigma that is attached not only to [opioid addiction](#), but to the medications used to treat it, Bobek said.

On top of that, she noted, there are logistical obstacles. To prescribe buprenorphine, for example, providers have long had to go through training, apply for a waiver and agree to limits on the number of patients they will treat.

However, that particular barrier, Terranella said, was just eliminated with the omnibus bill signed in December by President Joe Biden.

"Every clinician can now prescribe buprenorphine for opioid use disorder," he said. "And I hope this opens the door for this treatment to be available in all primary care clinics for youth who need it."

For the new study, the CDC researchers analyzed a national prescriptions database for the years 2015 to 2020. Over that period, they found, the proportion of Americans ages 12 to 19 who were prescribed buprenorphine dropped by 45%—from 7.6 out of every 100,000 teens per year, to just over 4 per 100,000.

That was in sharp contrast to Americans age 20 and up: The proportion receiving buprenorphine prescriptions climbed by 47% during the same time period.

Given past research, Terranella said his team expected to see low prescription rates to teens.

"But the extent of the low prescribing rates, as well as the decline—especially in comparison with adults—is concerning," he said.

The study also found that pediatricians rarely prescribed [buprenorphine](#), accounting for less than 2% of all prescriptions to teens.

"Lack of training and experience in residency and beyond certainly may play a role," Terranella said. "It's important to ensure all pediatricians are comfortable in the treatment and management of substance use disorders."

But, he noted, that goes for "all clinicians" who treat teens, not just pediatricians.

As for parents, Bobek said they should know that medications for [opioid use disorder](#) are safe and effective.

"Youth with [opioid use disorder](#) are made less safe if not given access to [those medications]," she said.

Parents' involvement in the treatment process is also key, according to Bobek.

"Family involvement in treatment can reduce stigma and build the kind of social support network necessary for long-term medication adherence," she said.

More information: The U.S. Centers for Disease Control and Prevention has more on treatment for [opioid use disorder](#).

Andrew Terranella et al, Buprenorphine Dispensing Among Youth Aged ≤19 Years in the United States: 2015–2020, *Pediatrics* (2023). DOI: [10.1542/peds.2022-058755](https://doi.org/10.1542/peds.2022-058755)

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