

## Opioids Drive Continued Increase In Drug Overdose Deaths

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Drug overdose deaths increased for the 11th consecutive year in 2010, according to an analysis from the Centers for Disease Control and Prevention.

The findings are published today in a research letter, "Pharmaceutical Overdose Deaths, United States, 2010," in the Journal of the American Medical Association (JAMA).

CDC's analysis shows that 38,329 people died from a drug overdose in the United States in 2010, up from 37,004 deaths in 2009. This continues the steady rise in overdose deaths seen over the past 11 years, starting with 16,849 deaths in 1999. Overdose deaths involving opioid analgesics have shown a similar increase. Starting with 4,030 deaths in 1999, the number of deaths increased to 15,597 in 2009 and 16,651 in 2010.

In 2010, nearly 60 percent of the drug overdose deaths (22,134) involved pharmaceutical drugs. Opioid analgesics, such as oxycodone, hydrocodone, and methadone, were involved in about 3 of every 4 pharmaceutical overdose deaths (16,651), confirming the predominant role opioid analgesics play in drug overdose deaths.

CDC researchers analyzed data from CDC's National Center for Health Statistics 2010 multiple cause-of-death file, which is based on death certificates.

The researchers also found that drugs often prescribed for mental health conditions were involved in a significant number of pharmaceutical overdose deaths. Benzodiazepines (anti-anxiety drugs) were involved in nearly 30 percent (6,497) of these deaths; antidepressants in 18 percent (3,889), and antipsychotic drugs in 6 percent (1,351). Deaths involving more than one drug or drug class are counted multiple times and therefore are not mutually exclusive.

"Patients with mental health or substance use disorders are at increased risk for nonmedical use and overdose from prescription painkillers as well as being prescribed high doses of these drugs," said CDC Director Tom Frieden, M.D., M.P.H. "Appropriate screening, identification, and clinical management by health care providers are essential parts of both behavioral health and chronic

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pain management."

Additional steps are being taken at the national, state and local levels, as well as by non-governmental organizations, to help prevent overdoses from prescription drugs.

In particular, the federal government is:

- Tracking prescription drug overdose trends to better understand the epidemic.
- Encouraging the development of abuse-deterrent opioid formulations and products that treat abuse and overdose.
- Educating health care providers and the public about prescription drug abuse and overdose.
- Requiring that manufacturers of extended-release and long-acting opioids make educational programs available to prescribers about the risks and benefits of opioid therapy, choosing patients appropriately, managing and monitoring patients, and counseling patients on the safe use of these drugs.
- Using opioid labeling as a tool to inform prescribers and patients about the approved uses of these medications.
- Developing, evaluating and promoting programs and policies shown to prevent prescription drug abuse and overdose, while making sure patients have access to safe, effective pain treatment.

Promising steps that many states are taking include:

- Starting or improving prescription drug monitoring programs, which are electronic databases that track all prescriptions for opioids in the state.
- Using prescription drug monitoring programs, public insurance programs, and workers' compensation data to identify improper prescribing of opioids.
- Setting up programs for public insurance programs, workers' compensation programs, and state-run health plans that identify and address improper patient use of opioids.
- Passing, enforcing and evaluating pill mill, doctor shopping and other state laws to reduce prescription opioid abuse.
- Encouraging state licensing boards to take action against inappropriate prescribing.
- Increasing access to substance abuse treatment.

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For more information about prescription drug overdoses in the United States, please [click here](#).