

## 2019 PROFILE: PRESCRIPTION DRUGS IN SOUTHWEST CONNECTICUT

(See also the Profile on Heroin and Illicit Drugs in Southwest CT for more information on other opioids)

**Prescription drugs** were used by almost half the U.S. population in the past month, with psychiatric medications the leading drug types for adults ages 20-59 and teens ages 11-19.<sup>11</sup> The most common psychiatric medications are *antidepressants* (e.g., Prozac, Zoloft, Effexor, Lexapro, Cymbalta, Wellbutrin, Celexa); *benzodiazepine* (aka “benzos,” such as Xanax, Valium, Ativan, Klonopin, used for anxiety and insomnia); and *amphetamines* (e.g. Adderall, used for ADHD). These drugs can have significant side effects and can create dependency. In many cases they are misused, meaning used other than as prescribed: for different symptoms, in higher doses or for longer than as prescribed, or used by someone other than the intended recipient. In 2018, 17% of benzo users reported misuse.<sup>12</sup> Safe storage and disposal practices are strategies for reducing diversion and misuse of prescription drugs.

*Opioids* (e.g., Oxycontin, Percocet, Demerol, Dilaudid, Vicodin) are powerful and addictive prescription drugs used to manage pain. Today’s opioid crisis began in the early 2000s, when the medical community identified pain as the “fifth vital sign” and began prescribing opioids aggressively in response. Many individuals who were prescribed opioid medication developed an addiction, turning to illicit opioids such as heroin, which is cheaper and does not require a prescription. Currently, medical professions encourage the use of alternatives for pain management: non-steroidal anti-inflammatory drugs (e.g., ibuprofen), physical therapy, and mind-body therapies. Legislative and practice changes are in place to curb the prescription of opioid medication.

### Magnitude:

*Prescription Drug Use:* Nationally, 12.6% of adults take a benzodiazepine,<sup>12</sup> 11.4% of adults ages 20-59 take an antidepressant, and 6.2% of teens and 3.5% of children under age 11 take an ADHD stimulant.<sup>11</sup> While similar state-level data on use are not available, the top 5 drugs prescribed in Connecticut in 2018 include 3 benzos and 1 stimulant, as well as 1 opioid. (See adjacent figure.)

*Prescription Drug Misuse:* Nationally, emergency department visits involving misuse of pharmaceuticals have doubled over the past five years.<sup>13</sup>

Within Southwest CT (SW CT), local youth surveys examined misuse of prescription drugs in 2018, finding:

- 12% of middle and high school students in one city had used prescription drugs in the past 30 days.
- 30% of high school students stole prescription drugs from a family member, and 40% took the pills with a family member’s permission.
- 3% of high school students in one suburb reported past-month prescription drug use.
- 6% of high school seniors reported using a stimulant without a prescription.

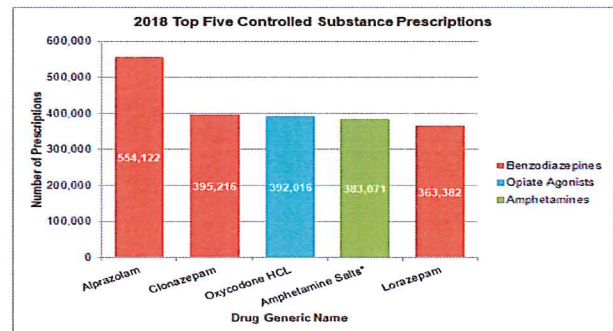


Figure 8: Top 5 Prescription Drug Types in CT, 2018

Source: CT Prescription Monitoring and Reporting System (CPMRS)

<sup>11</sup> May 2019 National Center for Health Statistics (NCHS) data brief: <https://www.cdc.gov/nchs/data/databriefs/db334-h.pdf>

<sup>12</sup> <https://www.psychiatry.org/newsroom/news-releases/study-finds-increasing-use-and-misuse-of-benzodiazepines>

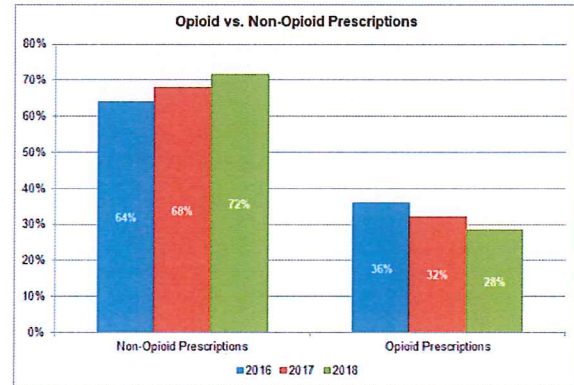
<sup>13</sup> SAMHSA National Prevention Strategy: Preventing Drug Abuse and Excessive Alcohol Abuse



*Opioid Misuse:* In 2018 surveys conducted by DataHaven, between 21% and 24% of SW CT adults over age 18 report personally knowing someone who struggled with opioids in the past three years. Among these respondents, 2% in the greater Stamford and Norwalk areas and 6% in the Bridgeport area reported that it was they themselves who struggled, leading to a calculation that 0.4% to 1.4% of SW CT residents may have an Opioid Use Disorder (OUD).

In 2018, 1882 individuals from SW CT (0.27% of the region) were treated for OUD, according to the Department of Mental Health and Addiction Services. After rising from 2013 to 2015, the number of residents receiving OUD treatment has decreased for the past two years and is now 4% lower than in 2013. In comparison, the state OUD treatment rate has increased by 7% during this period and only began to decrease in the past year.

*Trends:* The number and percentage of opioids have decreased in CT since 2016, along with an 8% decrease in the strength of opioids prescribed.<sup>14</sup> Figure 9 reflects the success of state policies aimed at curbing the opioid epidemic. In addition, benzodiazepine prescriptions decreased by 5.3% from 2018 to 2019, according to the state Department of Consumer Protection.



**Figure 9: Change in Opioid vs Non-Opioid Prescriptions in CT, 2016-2018**  
Source: CPMRS

### Risk Factors and Subpopulations at Risk:

- *Risk factors for prescription drug misuse* include: other substance misuse, including alcohol and tobacco; family history of substance misuse; mental health disorders; peer pressure or social setting involving drug use; access to prescription drugs (e.g., unlocked home medicine cabinets); and lack of awareness about risks and harm.
- *At-risk populations* are non-Hispanic whites, followed by non-Hispanic blacks. Prescription drug use increases with age. Teens and young adults are more likely to misuse stimulants. Individuals dealing with pain are most likely to be prescribed an opioid.

### Burden:

The heavy use of prescription drugs in our society has an impact on individuals, families, and the economy. Financially, the cost of prescription drugs can be burdensome for people who are uninsured, have significant co-pays, or take multiple medications, as well as to employers and insurance plans. Health-wise, people who take psychiatric medications may experience sleep problems, nausea, weight gain, dizziness, and suicidal ideation. Both psychiatric medications and opioids can lead to dependence and misuse.

Most tragically, drug overdoses have led to the deaths of 354 SW CT residents between 2016 and 2018. Among the 117 overdose deaths reported in 2018, 91% involved opioids, with 30% specifically involving prescription opioids, and 34% involved benzodiazepines. The majority of overdose deaths (79%) involved more than 1 drug: 24 deaths involved both opioids and benzos, and 8 deaths involved opioids, benzos and alcohol.

These deaths have a significant impact on families. According to the 2018 DataHaven surveys, 16% to 18% of adults in SW CT know someone personally who died from an opioid overdose. In the Greater Bridgeport survey, 29% of respondents reported that the person who died was their family member. Small subgroups are affected by multiple

<sup>14</sup> CT Prescription Monitoring and Reporting System

