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INDIANA UNIVERSITY Indianapolis

Testimony to the U.S. House of Representatives' Committee on Energy and Commerce Paul K. Halverson Founding Dean Indiana University Richard M. Fairbanks School of Public Health Indianapolis, Indiana October 20, 2015

SUMMARY

- Prescription opioid abuse is a rapidly escalating public health issue across the country.
 Opioid abuse leads to many health problems including heroin use, drug overdose and death.
- Indiana's mortality rate from drug overdose, at 14.4 per 100,000, has quadrupled since 1999, according to a report by Trust for America's Health.
- Opioid abuse is the cause of an HIV outbreak in a small rural county in Indiana. As of June, the county of 25,000 had 169 confirmed cases in 2015. Prior to this year, there have never been more than 5 cases for the entire southeastern district of the state (12 counties).
- Infants exposed to opioids in utero often experience Neonatal Abstinence Syndrome at birth.
 They experience irritability, feeding and digestive issues, and respiratory distress. Their hospitalizations are complicated and costly.
- Addiction is a challenging public health problem, due to the lack of consensus about the cause of the problem, i.e., biological/genetic vs. lack of character and will power.
- Although many people who use illegal drugs and become addicted are prosecuted and sentenced to jail, drug abuse continues to grow. We cannot incarcerate our way out of the problem. New approaches our needed.

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I'm before you today to discuss a very important and far reaching public health issue, the heroin and prescription drug abuse epidemics, and their deleterious effects, that we're experiencing across the country and in my home state of Indiana.

We know that addiction is not a tragedy for the addicted person alone. It is a tragedy for individuals, families and entire communities. The effects are cumulative, and contribute significantly to costly social, physical, mental, and public health problems. Addiction contributes to teenage pregnancy, harms unborn babies, fuels domestic violence and child abuse and contributes to the spread of sexually transmitted diseases. It leads to missed work, problems holding a job and sometimes to homelessness. Addiction is a major cause of motor vehicle crashes, crime, gun violence, homicide and suicide. As if the public health and social costs are not enough, the financial costs of drug addiction to our state alone, for health care, criminal justice, education and more, are estimated at \$7.3 billion annually.

Opioid abuse is particularly pernicious because it can be the precursor to heroin use. A study from the Substance Abuse and Mental Health Services Administration found that nearly 4 out of every 5 new heroin users took non-medical prescription pain medication before taking up heroin.

The end result is that people are dying. Forty-four people die each day in our country from an overdose of pain medication, according to the Centers for Disease Control and Prevention. Nationally heroin-related deaths have escalated from 5,300 to more than 8,200 between 2012 and 2013, a 39% increase.

In Indiana, we have the 17th highest drug overdose mortality rate in the United States, 14.4 per 100,000 people, according to a report from Trust for America's Health (TFAH). The majority of these deaths were from prescription drugs. Since 1999, when the rate was 3.2 per 100,000, our morality rate has quadrupled. Although mortality rates are up in many states in the country, Indiana is one of only 4 states where the rate quadrupled in 14 years. The TFAH report also states that Indiana had only five out of 10 possible indicators for promising strategies to help curb prescription drug abuse. Nationally, 28 states and Washington, D.C. scored six or less, placing us squarely in the bottom half of states.

Indiana made the national news this past summer with its public health crisis related to opioid abuse. Scott County, with a population of less than 25,000 people, had an unprecedented outbreak of HIV related to needle sharing among intravenous drug users who were injecting a prescription opioid. As of June 2015, there were 169 confirmed cases in the county. The entire southeastern region of Indiana has never had more than 5 cases annually prior to this year. Significant cuts in an already chronically underfunded public health infrastructure have hit communities hard, and left them without important public health services such as education on how to protect themselves against life threatening diseases and confidential HIV testing and treatment. As a result, this small county led the entire state in both drug overdose deaths in 2009-2013 (42.66/100,000) and non-fatal emergency department visits due to opioid overdose in (75.28/100,000) in 2009-2013.

Neonatal Abstinence Syndrome (NAS) is another serious crisis unfolding throughout the country. NAS appears in newborns who have been exposed to opiates in utero. The symptoms include increased irritability, hypertonia (spasticity), tremors, feeding intolerance, vomiting, watery stools, seizures and respiratory distress. NAS infants are likely to have significantly longer, more complicated and very expensive hospitalizations at birth. The incidence of NAS has *quintupled* between 2000 (1.20/1,000) and 2012 (5.8/1,000) and mirrors the surge in opioid abuse over the same time period. The percentage of NAS infants covered by Medicaid has risen from 68.7% in 2000 to 81.5% in 2013. Hospital charges for NAS infants in 2013 were estimated at \$1.5 billion, placing a significant burden on governmental budgets and the health care system.

Opioid abuse and heroin use indeed have serious consequences for the country, not only in terms of morbidity and mortality, but in the fraying of the social fabric of our communities. Individual attitudes and political responses to illegal drug consumption combine to make substance abuse one of the toughest of all public health challenges. It is often a primary focus for discussions about social values. The bottom line is that we don't have consensus on whether substance abuse is a biological or genetic disease or a matter of personal choice. People sometimes assume incorrectly that drug abusers don't have strong moral principles or willpower. They believe users can stop taking drugs simply by changing their behavior. In reality, drug addiction is a complicated disease, and recovery takes more than good intentions or willpower. Because drugs change the brain in ways that foster compulsive drug abuse, quitting is extremely difficult even for those who desperately want to do so.

By the same token, substance abuse is often a lightning rod in the criminal justice system. However, we have learned that we can't incarcerate our way out of this problem. We already have prisons full of people debilitated by substance abuse problems, and yet still the problem grows. We have to find a new approach. For all these complex and costly reasons, we are grateful to Representative Brooks for shedding light on the very serious problems of opioid abuse and heroin use, which are becoming more pervasive with each passing day. It is clear we need to effectively attack these problems and prevent further destruction of our public's health due to opioid abuse.

Sources:

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