



# Prescription Drug Epidemic

Gulf Coast Safety & Training Group

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National Safety Council, S LA Chapter



# NSC Mission

The National Safety Council saves lives by preventing injuries and deaths at work, in homes, communities and on the roads through leadership, research, education and advocacy.



# Agenda

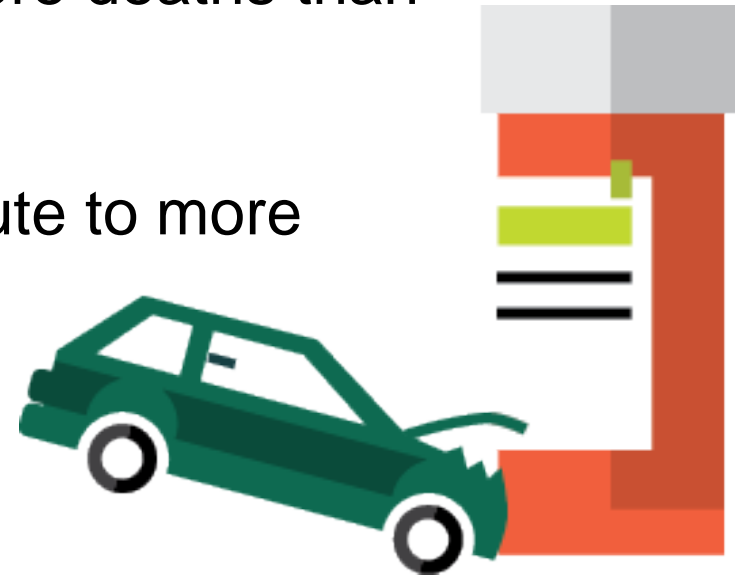
- The problem
- How we got here
- Strategies to change



# Prescription Drug Overdose

Drug overdoses now cause more deaths than car crashes.

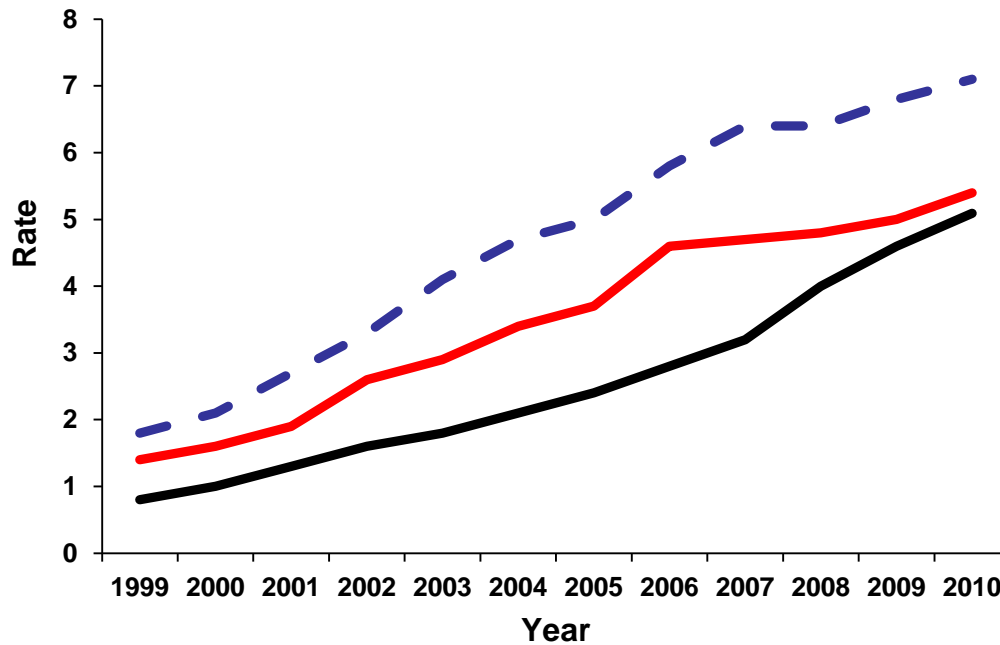
Prescription painkillers contribute to more deaths than any other drug.





# Rates of opioid sales, overdose deaths, and treatment admissions, US, 1999-2010

- Opioid Sales KG/10,000
- Opioid Deaths/100,000
- Opioid Treatment Admissions/10,000



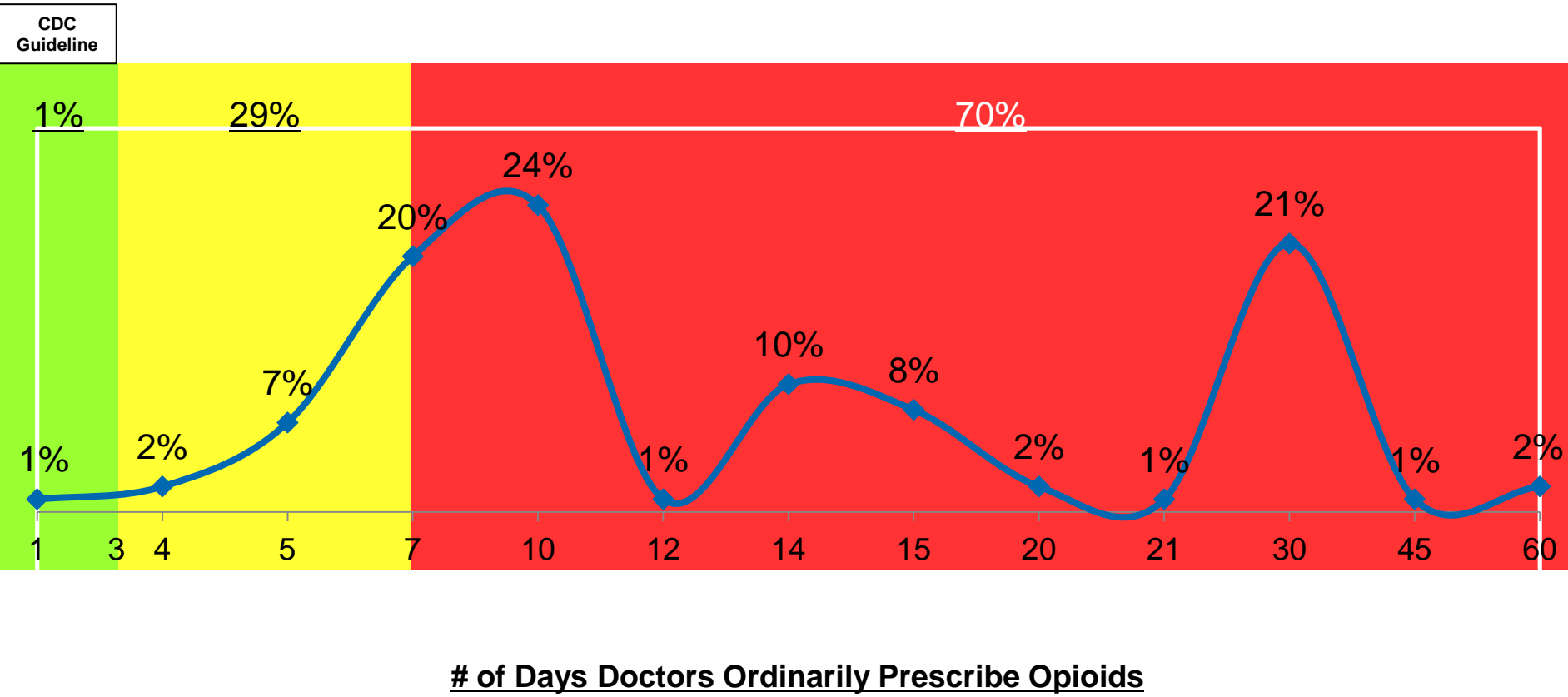
Enough Pills for every American Adult

259m  
Opioid RX  
2012

National Vital Statistics System, DEA's Automation of Reports and Consolidated Orders System, SAMHSA's TEDS



# 99% of doctors prescribe opioids for longer than the CDC guideline

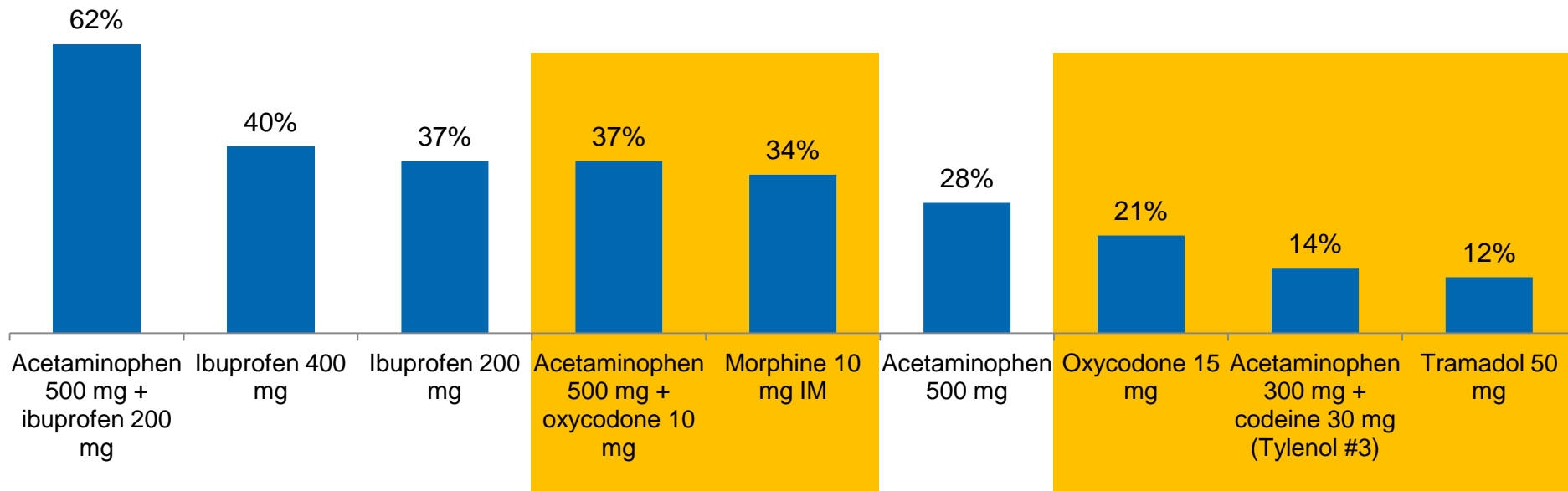




# Opioids are not the most effective at providing pain relief.

Percent with 50% pain relief

**Opioid medications**





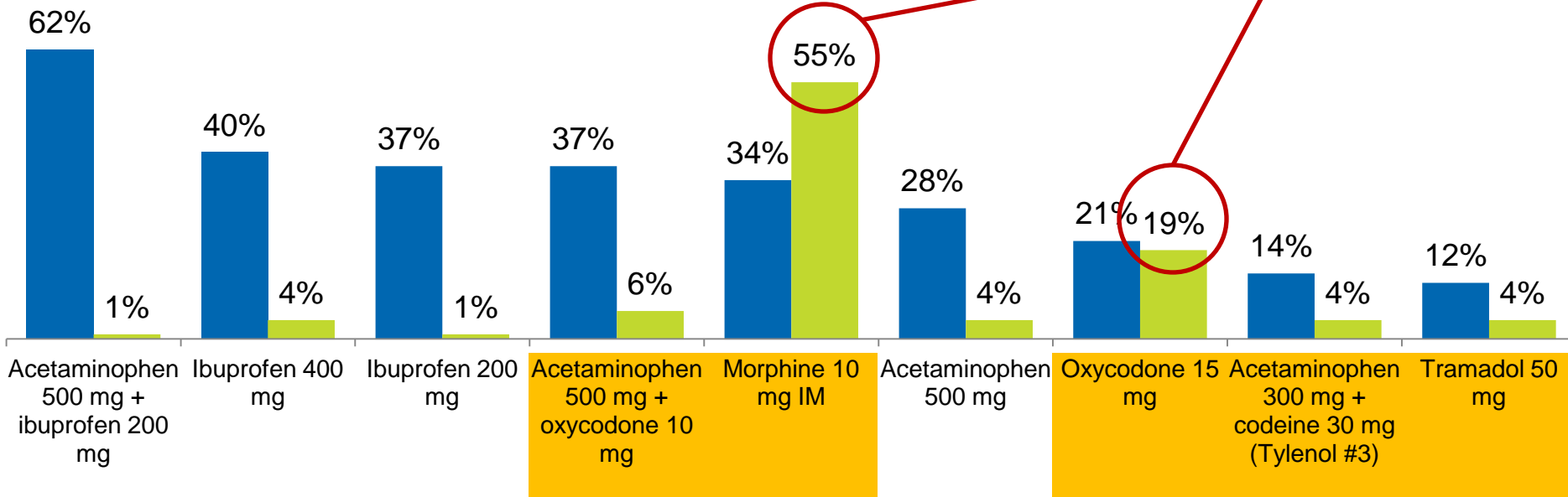
# Doctors overestimate the efficacy of opioids and underestimate the impact of safer alternatives.

Percent with 50% pain relief

Opioid medications

74% believe these opioids to be the most effective way to treat acute pain

■ Actual Efficacy  
■ % of Prescribers rank as most effective







# Patients also overestimate the benefits of taking opioid painkillers.

Opinions of Using Opioids as Pain Solution  
%Somewhat/Strongly Agree



© 2014 National Safety Council. *Which of the following were you most concerned with before taking the prescription?*  
(Among users - n = 427)

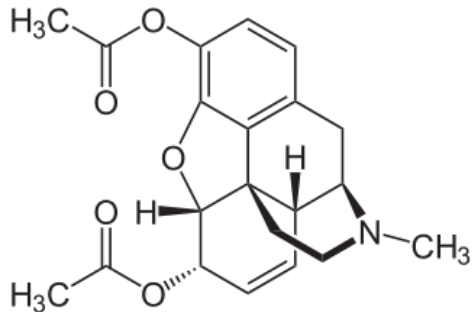
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and underestimate the addictiveness

78%

Very Addictive

Heroin



55%

Very Addictive

Hydrocodone

Oxycodone

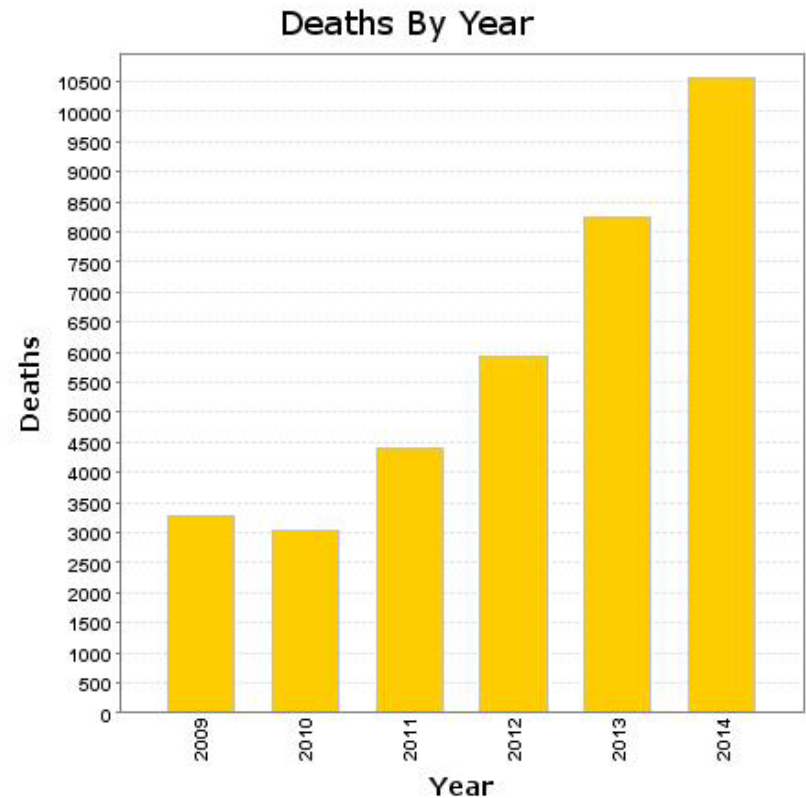
**Yet, these drugs are chemically the same!**



# So, how about heroin...

*4.3 million non-medical opioid users x 2% = 86,000 new heroin users.*

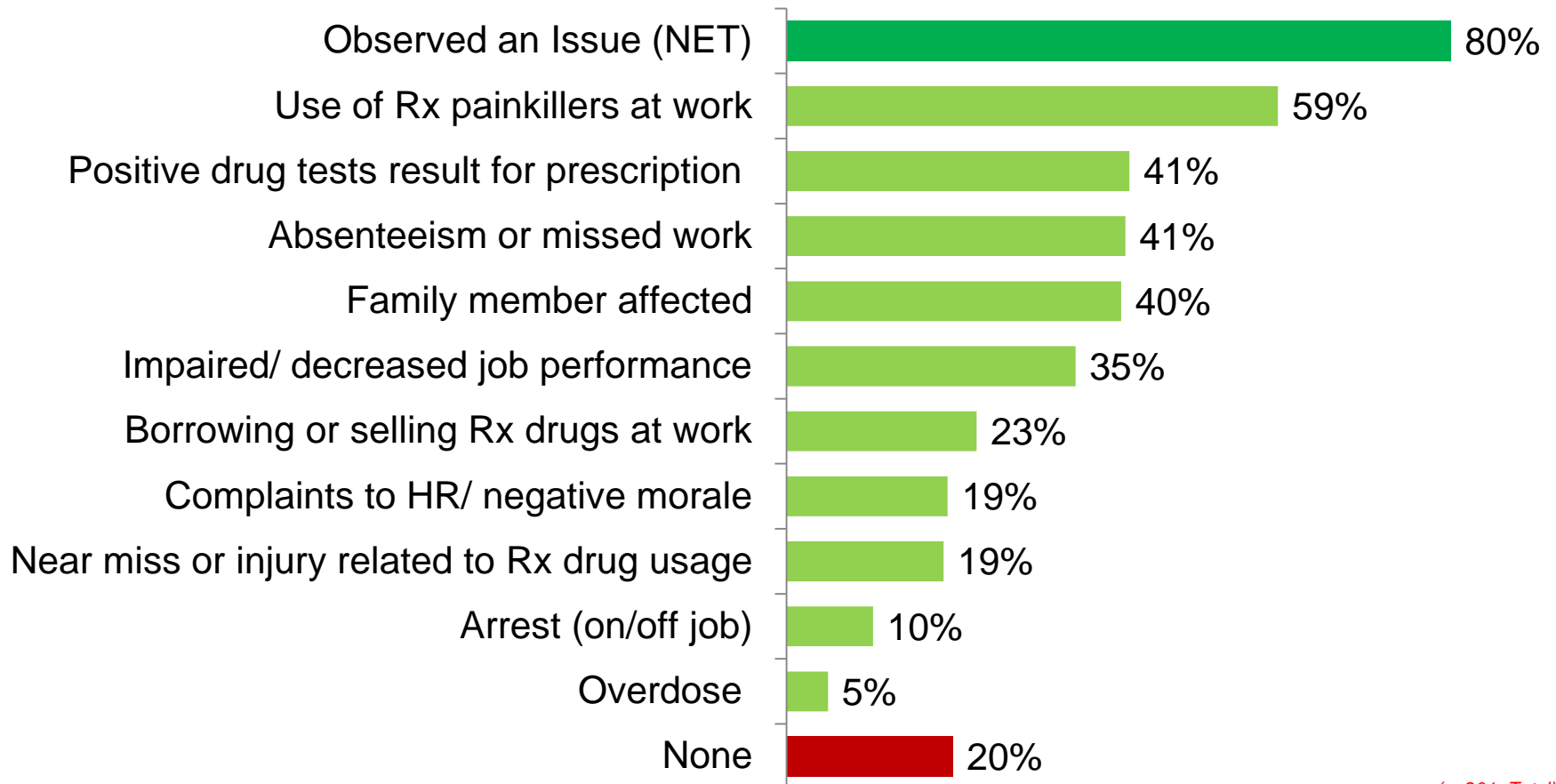
- 4 out of 5 new heroin users started with opioid pain pills.
- 19 times more likely to transition to heroin if prior non-medical opioid user.
- Only 2 – 4% opioid users switch to heroin, but more than 4.3 million people used opioid non-medically in the past month.





# Most Indiana companies impacted by Prescription Drug Abuse...

## Observed Workplace Issues

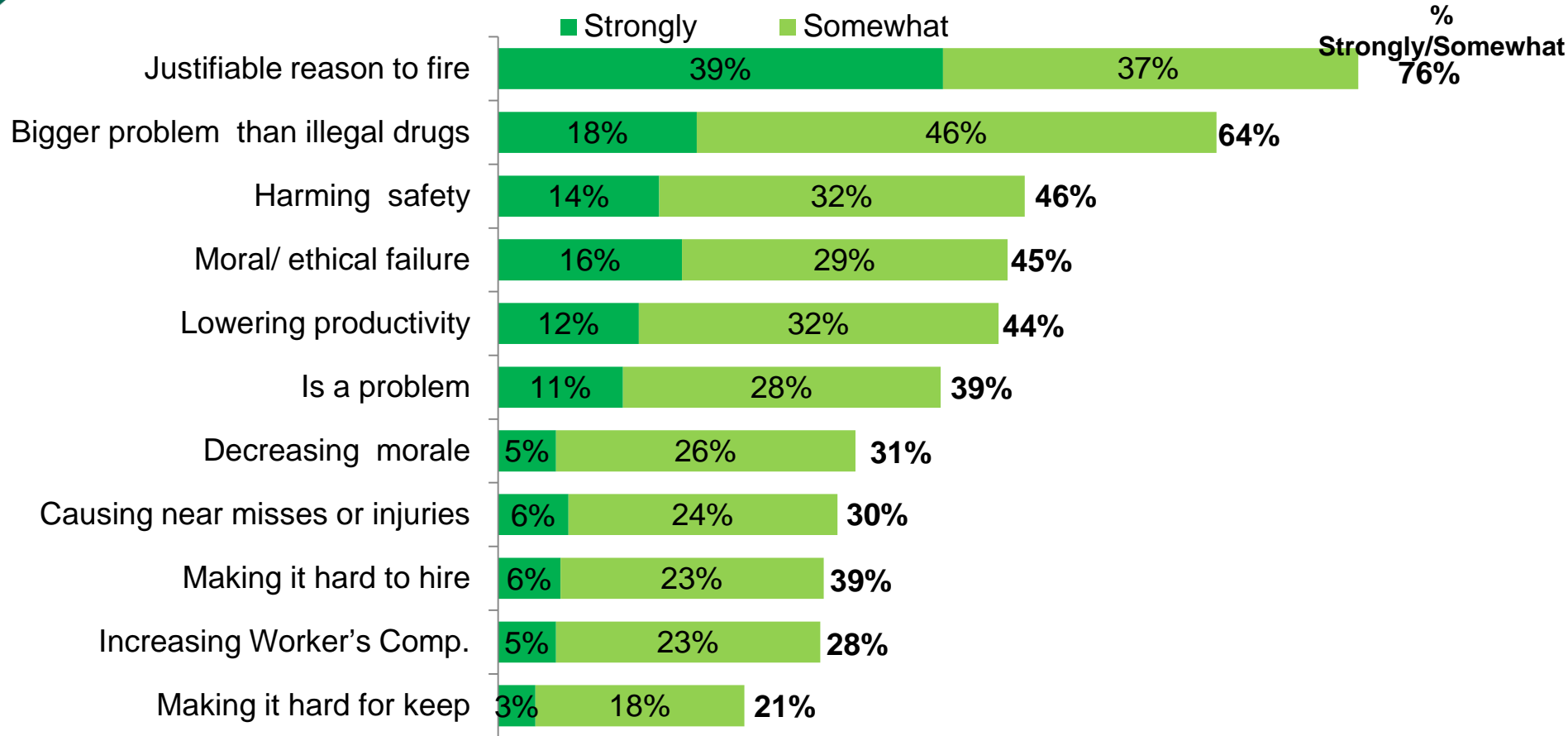


(n=201- Total)



# ... and feel it is a problem...

## Agreement with Statements



(n=201- Total)

5. Please rate your agreement with each of the following statements about the impact of prescription drugs on your organization. Misuse or abuse of prescription drugs is...?

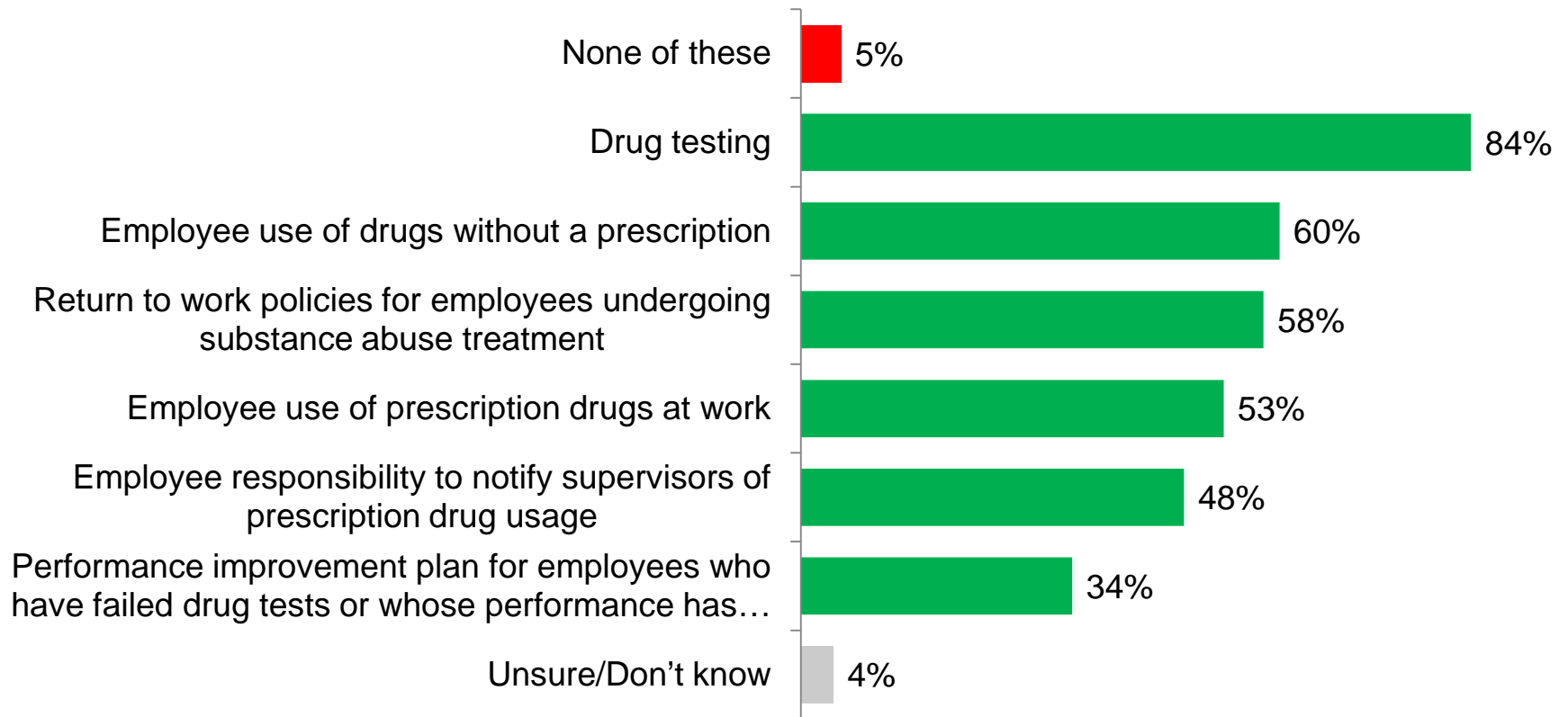
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# Most cover drug tests, but few address abuse

## Topics Covered by Organizations Written Policy



(n=201- Total)

10. Which of the following topics are specifically covered in your organization's written policies?

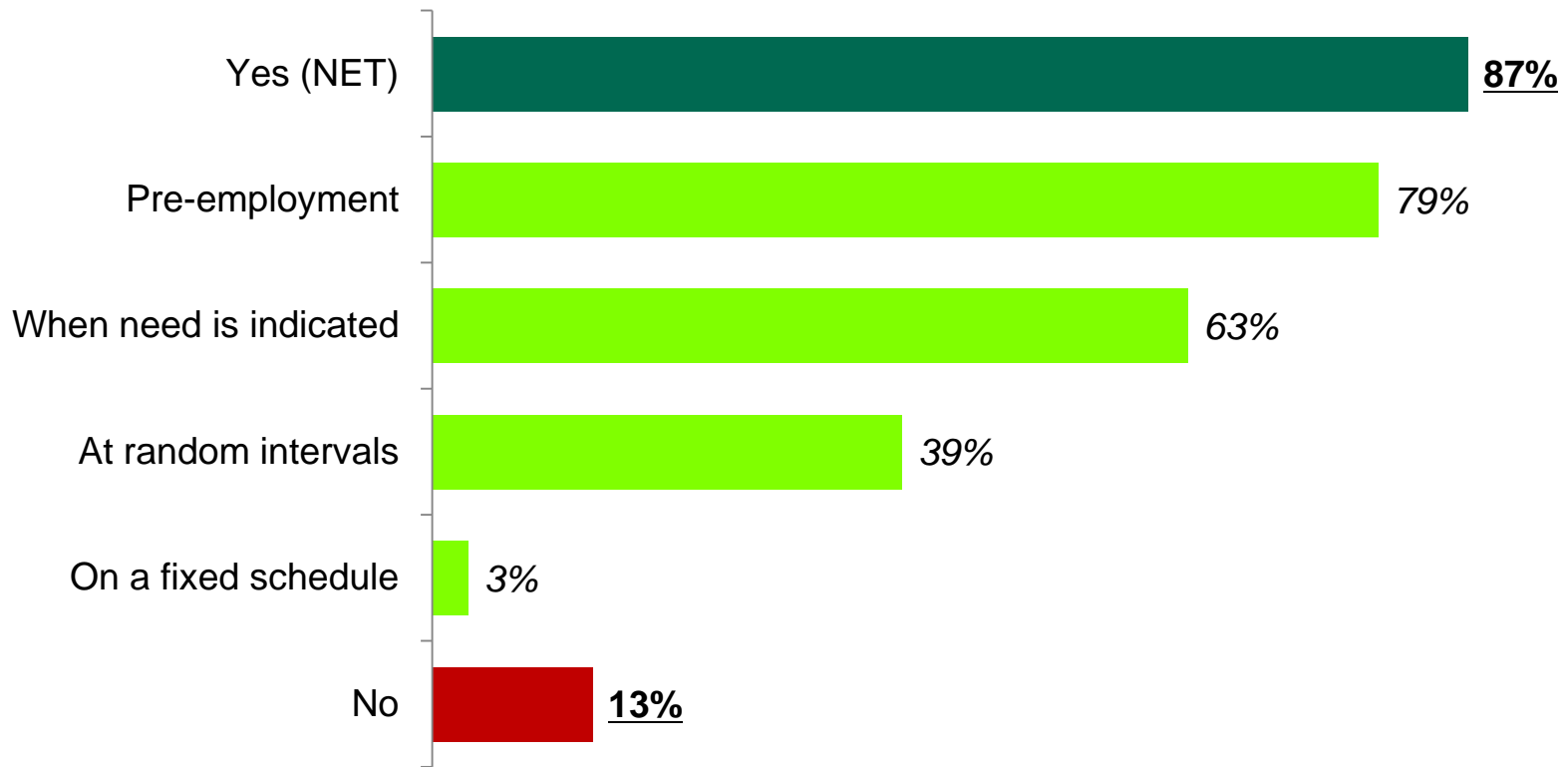
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# Most conduct drug testing...

## Conduct Drug Testing



(n=201- Total)

20. Does your organization require drug testing for your employees?

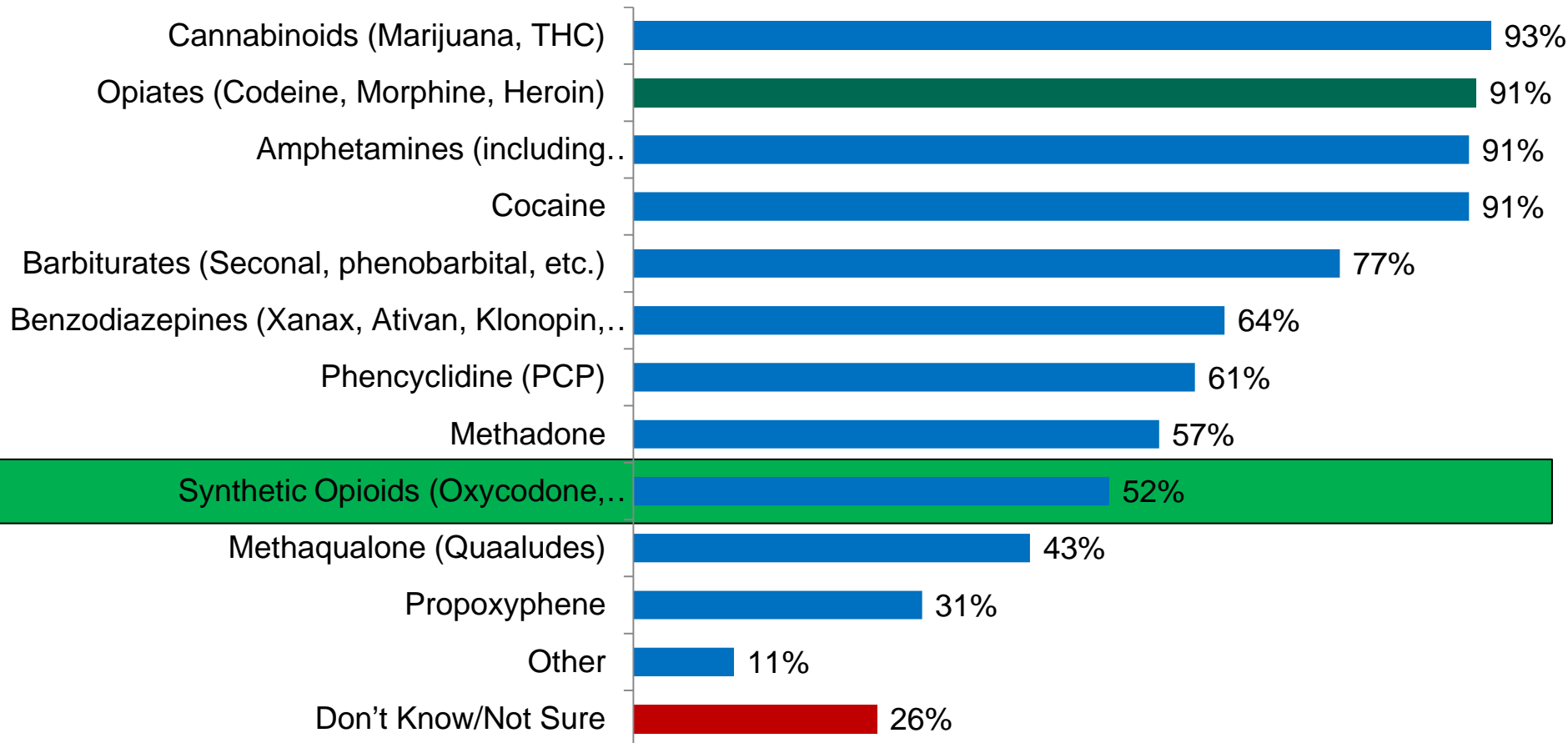
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# ...but few test for opioids...

## Substances Tested For



(n=174- Require Drug Testing)

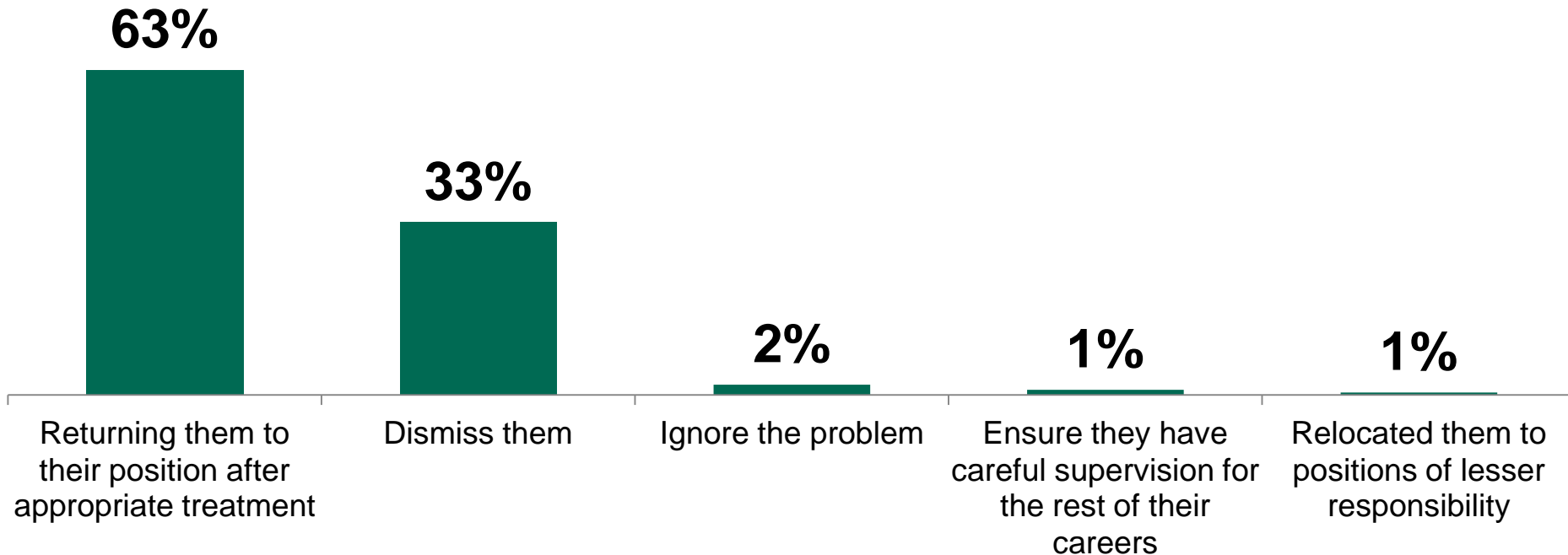
22. What substances are tested for?  
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# Most want to return employees to work...

## Organizational Approach to Employee Misuse/Abuse of Drugs or Alcohol



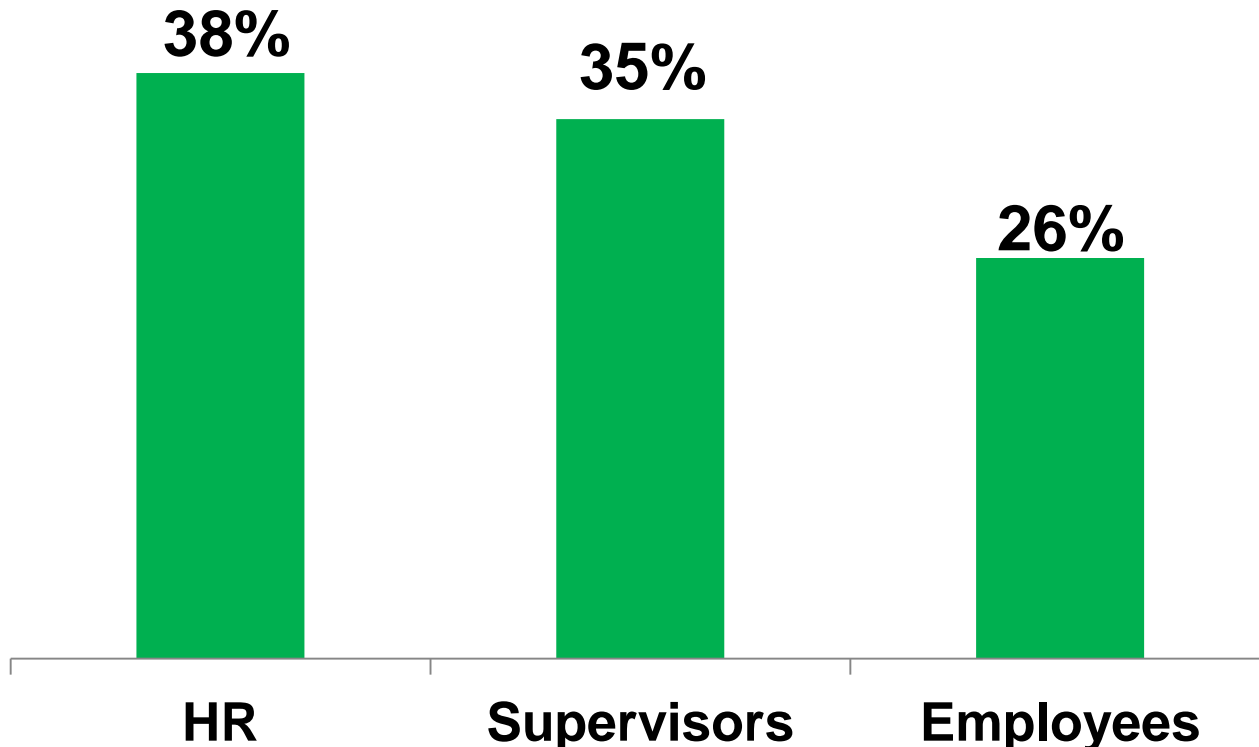
(n=201- Total)

9. Which of the following, would you say, best reflects your organization's approach to an employee who is found to be misusing or abusing drugs or alcohol?



# ...but can't identify who needs help...

## Very Confident can Identify Warning Signs



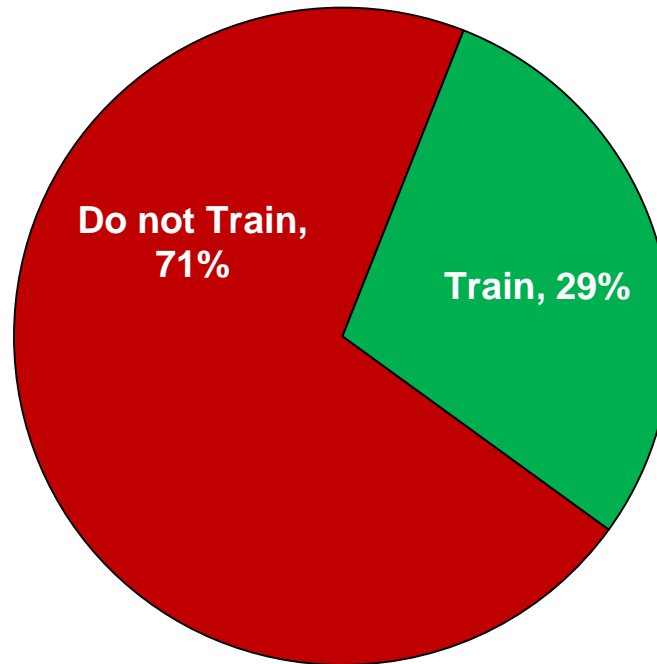
(n=201- Total)

8. How confident are you that your Human Resources department, supervisors and employees can correctly identify behavior that is a warning sign of misuse or abuse of prescription medication?



# ...because very few offer any training.

## Offer Training



- 29% train supervisors
- 13% also train employees

(n=201- Total)

11. Does your organization currently offer training around workplace usage of prescription drugs?

# Common Workplace Risks Associated with Prescription Painkiller Use



**Risk of incidents and injuries**



**Driving vehicles to/from/at work**



**Operating machinery/equipment**

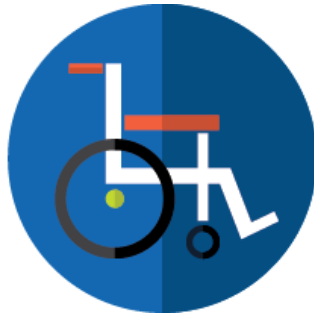


**Making critical errors**



**Productivity (pace, focus and concentration)**

# Painkiller misuse increase medical claim costs and the length of disability



**Length of  
Disability**



**Medical  
Claim Costs**



**Insurance  
Fraud**



# Why is this happening?

- 1995 - AMA task force
  - Not treating pain well enough and
  - Should be prescribing more pain pills
- 1998 – JCAHO
  - Not treating pain well enough and
  - Assessment of pain should be “the 5th vital sign”
- About this same time, OxyContin came on the market and was extensively marketed by Purdue Pharma.



# Opioids are Complex Medicines

- Opium Cure (1850s – 1950s)
- Opioid Hyperalgesia
- Physical dependence / tolerance



# Recent Surveys

- 7 of 10 did not know sharing analgesics is a FELONY
- 9 of 10 who use opioid analgesics are not worried about ADDICTION





# NSC Prescription Drug Initiative

Influence prescribers and payers

Educate the public

Increase access to treatments



# NSC Strategies

- 1. Adopt New Policies, Regulations and Legislation (mostly state).**
  - Require Prescription Drug Monitoring Programs (PDMPs)
  - Regulate pain clinics
  - “Lock in” programs
  - Good Samaritan Laws



# NSC Strategies

## 2. Change Prescriber Behavior

- Educate medical community
- Encourage use of PDMPs



# Opioids Efficacy

Opioids are no better than the anti-inflammatory drugs like ibuprofen and naproxen (at starting doses).



# NSC Strategies

## 3. Change Processes in Insurance, Health Care, Workers Comp.

- Establish “flagging” system into claims processing
- Institute “lock in” programs in public and private insurer reimbursement guidelines
- Require use of PDMPs
  - Reimbursement for PDMP use



# NSC Strategies

## 4. Educate Employers

- Adoption of drug-free workplace policies
- Workplace substance abuse prevention programs
- Ensure that contracts include
  - provisions that address substance abuse treatment
  - processes to identify doctor shopping
  - reimbursement for providers for use of PDMP reports
  - “lock in” programs



<http://safety.nsc.org/rxemployerkit>



# Policy Best Practices

- Address non-medical use of prescription and over-the-counter medications
- Include prescription medications in drug testing panel
- Provide guidance to employees and when to report
- Provide alternate work tasks while on medication
- Provide information about how to access employee benefit and assistance programs





# Prescription for Employers

- Recognize prescription drugs have big impact on your workplace
- Put strong policies in place
- Expand drug testing panels to include opioids
- Train supervisors and employees how to spot signs
- Treat substance use problems as a disease
- Leverage EAP to get employees back to work



# Drug Testing

- When
  - Pre-employment
  - Post-incident
  - Reasonable suspicion
  - Randomly
- Reputable lab
  - Certified
- Medical Review Officer (MRO)
  - Receiving, reviewing, evaluating results



# Drug Testing

- 7-Panel
  - Benzodiazepines (Tranquilizers: Valium, Librium, Xanax)
  - Opiates (Lortab, Vicodin)
  - Oxycodone
  - Methadone (increasingly prescribed)
  - Cocaine
  - Amphetamines (Stimulants: Ritalin, Dexedrine)
  - THC (active ingredient in marijuana)
- Seek legal advise!



# NSC Strategies

## 5. Educate Public

- How to identify overdoses and render emergency first aid
- Safe use of Rx
- Safe disposal of Rx



# Discussion

- What difficulties do you see in addressing prescription painkiller use for your company? Industry?
- What can NSC do to help you address prescription painkiller use?



# Questions

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