

# The DASIS Report

December 26, 2003

## Treatment Admissions Involving Narcotic Painkillers

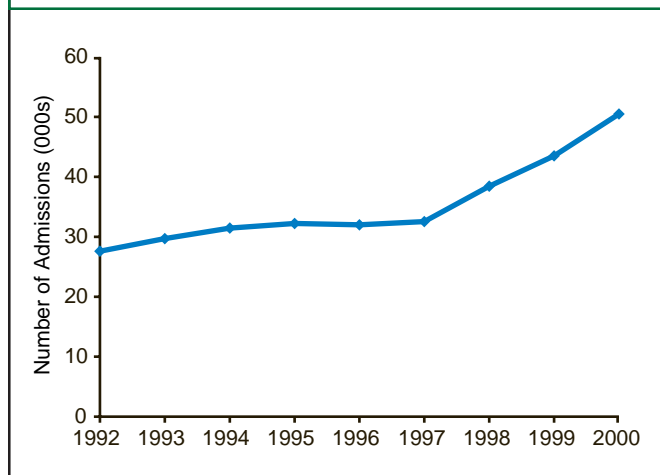
### In Brief

- Between 1992 and 2000, treatment admission rates for abuse of narcotic painkillers more than doubled
- The proportion of new users of narcotic painkillers (those entering treatment within 3 years of beginning use) increased from 30 percent in 1997 to 41 percent in 2000
- Between 1997 and 2000, the number of treatment admissions involving narcotic painkillers increased for all ages, especially among people aged 20 to 30

Admissions to treatment involving the abuse of narcotic painkillers<sup>1</sup> made up a small proportion—about 3 percent—of the 1.6 million admissions reported to the Treatment Episode Data Set (TEDS) in 2000. However, these treatment admissions have increased in publicly funded substance abuse treatment facilities across the nation during the last few years.

In 2000, there were about 50,000 admissions to treatment where the primary, secondary, or tertiary substance of abuse was a narcotic painkiller. In about half of these admissions, narcotic painkillers represented the primary substance of abuse.<sup>2</sup> In the other half of these 50,000 admissions, abuse of narcotic painkillers was secondary to abuse of another substance, generally alcohol or heroin.

**Figure 1. Narcotic Painkiller Treatment Admissions: 1992-2000**



Source: 2000 SAMHSA Treatment Episode Data Set (TEDS).

The number of treatment admissions in which narcotic painkillers were involved was relatively stable between 1992 and 1997, but increased between 1997 and 2000 (Figure 1). In 1992, the treatment admission rate for narcotic painkiller abuse in the United States was 13 admissions per 100,000 persons aged 12 or older. By 2000, it had increased to 27 admissions per 100,000, more than doubling the rate since 1992.

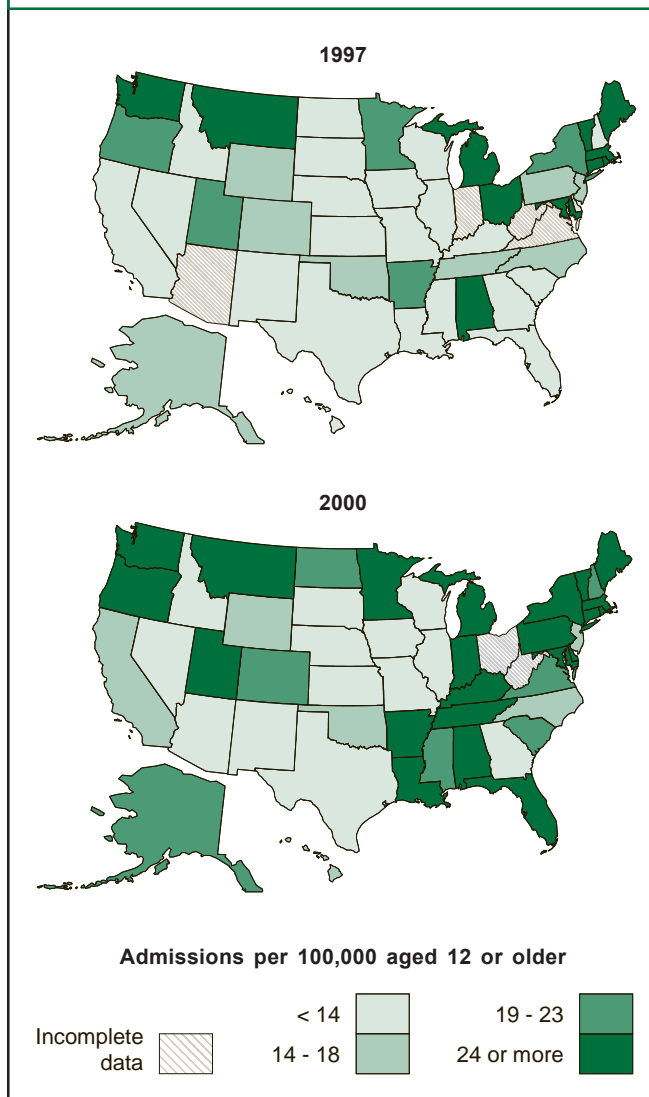
### Admission Rates by State

In 1992, 5 States had an admission rate for narcotic painkillers of 24 per 100,000 aged 12 or older (Figure 2). By 1997, 11 States had admission rates that high, and by 2000, 21 States had narcotic painkiller admission rates of 24 per 100,000 or more. Rates were particularly high in New England, where they ranged from 12 per 100,000 people in New Hampshire, to 63 per 100,000 in Connecticut, to 120 per 100,000 in Maine.

### Number of Admissions

The increase in admissions involving narcotic painkillers was much larger than the overall increase in treatment admissions (Figure 3). In TEDS, the number of treatment admissions increased by 9 percent between 1997 and 2000. During that same period, admissions for primary heroin abuse in-

**Figure 2. Narcotic Painkiller Admission Rates, by State: 1997 and 2000**

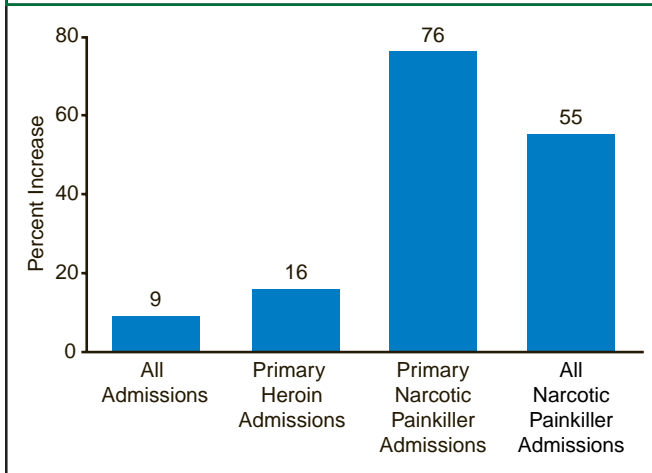


creased 16 percent. Admissions for primary abuse of narcotic painkillers increased 76 percent, and the number of admissions involving any primary, secondary, or tertiary abuse of narcotic painkillers increased by 55 percent.

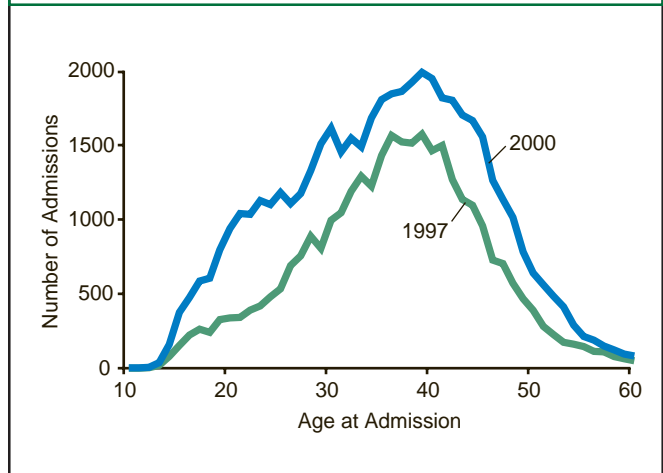
### Characteristics

The characteristics of admissions for abuse of narcotic painkillers changed little between 1997 and 2000. Over half of these admissions (56 percent) were male, and over 80 percent were White. Referral to treatment through the criminal justice system was relatively rare (17 percent in 1997 and 17 percent in 2000), with about half of narcotic painkiller admis-

**Figure 3. Percent Increase in Number of Treatment Admissions: 1997-2000**



**Figure 4. Narcotic Painkiller Admissions by Age: 1997 and 2000**



sions seeking treatment on their own (47 percent in 1997 and 48 percent in 2000) or being referred by substance abuse treatment or other health care providers (26 percent in 1997 and 27 percent in 2000). In 2000, a larger proportion entered detoxification than in 1997 (27 percent vs. 22 percent).

### New Users

The major change between 1997 and 2000 was the substantial increase in the proportion of new users of narcotic painkillers (those entering treatment within 3 years of beginning use). The proportion of new users increased from 30 percent in 1997 to 41 percent in 2000.

### Age

Over the 3-year span 1997 to 2000, the number of treatment admissions involving narcotic painkillers increased for all ages (Figure 4). However, the largest

increase was in the number of admissions among persons aged 20 to 30.

### Duration of Use

The median duration of use before first seeking treatment has decreased, from 10 years in 1992, to 8 years in 1997, to 6 years in 2000.

### End Notes

- <sup>1</sup> Narcotic painkiller admissions include all admissions reporting primary, secondary, or tertiary abuse of narcotic painkillers such as oxycodone, codeine, Dilaudid, morphine, Demerol, and any other drug with morphine-like effects. Admissions involving abuse of heroin and/or methadone, unless reported in addition to abuse of narcotic painkillers, are excluded from this report.
- <sup>2</sup> The primary substance of abuse is the main substance abused at the time of admission.

The Drug and Alcohol Services Information System (DASIS) is an integrated data system maintained by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA). One component of DASIS is the Treatment Episode Data Set (TEDS). TEDS is a compilation of data on the demographic characteristics and substance abuse problems of those admitted for substance abuse treatment. The information comes primarily from facilities that receive some public funding. Information on treatment admissions is routinely collected by State administrative systems and then submitted to SAMHSA in a standard format. Approximately 1.6 million records are included in TEDS each year. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once.

The DASIS Report is prepared by the Office of Applied Studies, SAMHSA; Synectics for Management Decisions, Inc., Arlington, Virginia; and RTI, Research Triangle Park, North Carolina.

**Information and data for this issue are based on data reported to TEDS through July 5, 2003.**

Access the latest TEDS reports at: <http://www.samhsa.gov/oas/dasis.htm>

Access the latest TEDS public use files at: <http://www.samhsa.gov/oas/SAMHDA.htm>

Other substance abuse reports are available at: <http://www.DrugAbuseStatistics.samhsa.gov>



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