

The NSDUH Report

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Nonmedical Oxycodone Users: A Comparison with Heroin Users

In Brief

- The prevalence of lifetime nonmedical use of oxycodone increased significantly from an estimated 11.8 million users in 2002 to 13.7 million users in 2003
- A greater proportion of lifetime heroin-only users reported a past year family income of less than \$20,000 than did lifetime oxycodone-only users or lifetime users of both heroin and oxycodone
- More lifetime users of both heroin and oxycodone met the diagnostic criteria for past year dependence or abuse than did those persons who used just one but not both of these drugs

Much attention has been given to the increasing nonmedical use of pain relievers containing oxycodone in the United States.^{1,2} This trend has been examined in both adults³ and adolescents.⁴ The National Survey on Drug Use and Health (NSDUH) asks persons aged 12 or older to report on their nonmedical use of prescription-type drugs.⁵ The survey also asks respondents about their use of illicit drugs,⁶ including heroin. Respondents who reported past year substance use were also asked to report symptoms of dependence or abuse. Dependence or abuse is defined using *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV) criteria and includes such symptoms as recurrent substance use resulting in adverse effects on physical and emotional health, trouble with the law due to substance use, increased tolerance to the substance, and giving up or reducing other important activities in favor of substance use.⁷

NSDUH collects data on the lifetime nonmedical use of specific pain relievers, including oxycodone, and the lifetime use of heroin.⁸ Although both oxycodone and heroin are classified as "opiates," their reported lifetime prevalence of use is significantly

Figure 1. Percentages of Lifetime Heroin Users and/or Nonmedical Oxycodone Users, by Gender: 2002 and 2003

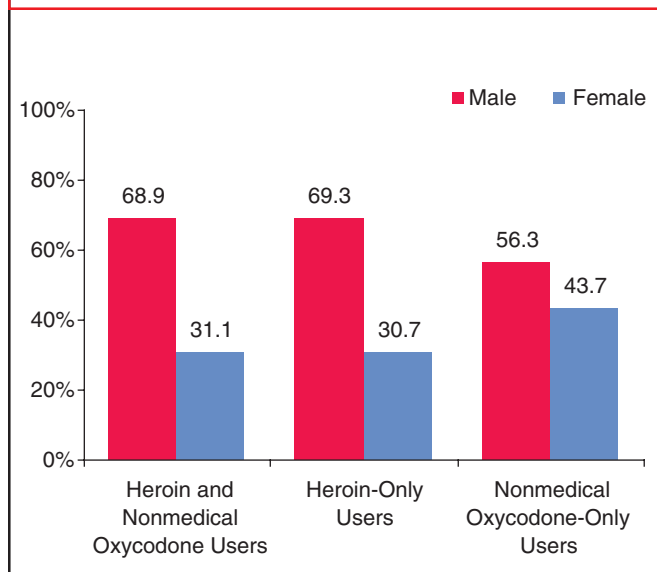
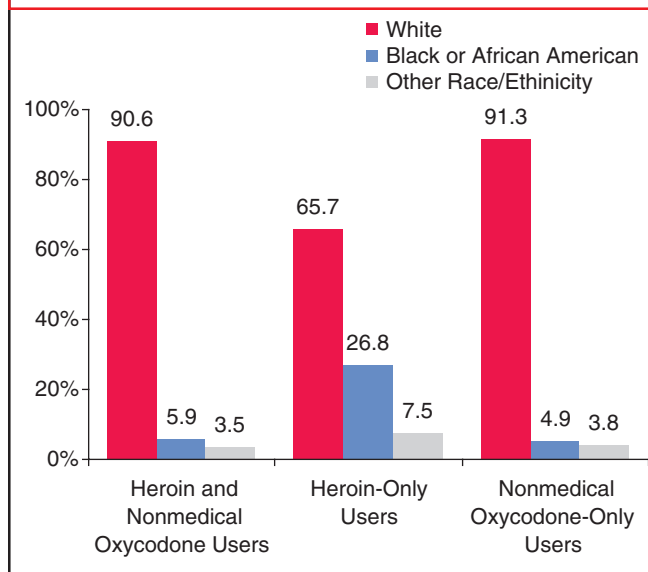


Figure 2. Percentages of Lifetime Heroin Users and/or Lifetime Nonmedical Oxycodone Users, by Race/Ethnicity: 2002 and 2003



different. The prevalence of lifetime nonmedical use of oxycodone increased in NSDUH significantly from 2002 to 2003, while the prevalence of lifetime heroin use remained stable.⁹ This report focuses on the characteristics of respondents reporting nonmedical oxycodone use and respondents reporting heroin use. To clarify the distinctions, findings are examined across three categories: lifetime heroin and oxycodone users (persons using both heroin and oxycodone in their lifetime), lifetime heroin-only users (persons using heroin but not oxycodone in their lifetime), and lifetime oxycodone-only users (persons using oxycodone but not heroin in their lifetime).¹⁰ All estimates are annual averages based on combined 2002 and 2003 NSDUH data.

Prevalence of Nonmedical Oxycodone Use and Heroin Use

In 2002 and 2003, an estimated 1.7 million Americans (less than 1 percent of persons aged 12 or older) had used heroin at least once in their lifetime and had also used oxycodone nonmedically at least once in their lifetime. Among persons aged 12 or older, an estimated 1.9 million (0.8 percent) had used heroin at least once in their

lifetime, but had never used oxycodone nonmedically. An estimated 11.0 million (4.6 percent) had used oxycodone nonmedically at least once in their lifetime, but had never used heroin.

Changes in Lifetime Prevalence of Nonmedical Oxycodone and Heroin Use

The prevalence of lifetime nonmedical use of oxycodone increased significantly from an estimated 11.8 million users (5.0 percent) in 2002 to 13.7 million users (5.8 percent) in 2003. The estimated prevalence of lifetime heroin use from 2002 to 2003 did not change (1.6 percent).

Demographic Characteristics

Male-to-female ratios for lifetime heroin-only users and lifetime heroin and oxycodone users were similar (Figure 1). However, lifetime oxycodone-only users had a greater percentage of females (43.7 percent) than either of the other two groups.

In terms of racial/ethnic breakdown, the lifetime oxycodone-only us-

ers and lifetime heroin and oxycodone users were similarly distributed. Both groups were predominantly white (91.3 and 90.6 percent, respectively), with a small percentage of Blacks or African Americans (4.9 percent and 5.9 percent, respectively) and an even smaller percentage of other races/ethnicities (3.8 and 3.5 percent, respectively) (Figure 2). The proportion of racial/ethnic groups among lifetime heroin-only users showed a lower percentage of whites (65.7 percent) and a larger percentage of blacks (26.8 percent) and other races/ethnicities (7.5 percent) than among the other two groups.

An examination of the current age of lifetime users showed some similarities between lifetime heroin-only users and lifetime heroin and oxycodone users. Both groups contained a greater percentage of persons aged 35 or older (74.0 percent and 63.5 percent, respectively) (Figure 3). More lifetime oxycodone-only users were aged 12 to 34 (56.6 percent) than aged 35 or older (43.4 percent).

A greater proportion of lifetime heroin-only users reported a past year family income of less than \$20,000 (31.5 percent) than did either the lifetime oxycodone-only users (19.7 percent) or lifetime heroin and oxycodone users (24.9 percent) (Figure 4).

Figure 3. Percentages of Lifetime Heroin Users and/or Lifetime Nonmedical Oxycodone Users, by Age Category: 2002 and 2003

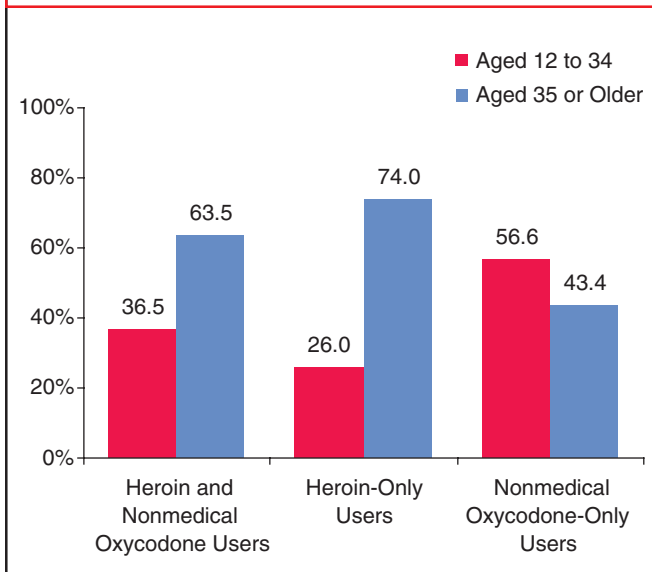
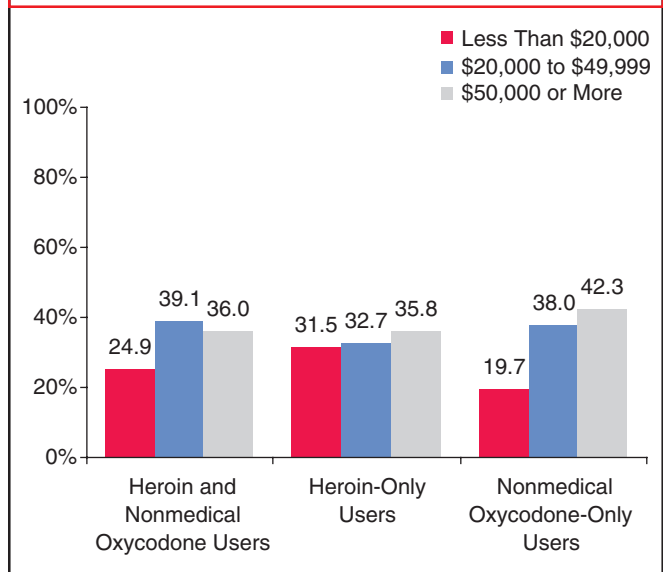


Figure 4. Percentages of Lifetime Heroin Users and/or Lifetime Nonmedical Oxycodone Users, by Annual Family Income Level: 2002 and 2003



Past Year Substance Dependence or Abuse

Among lifetime heroin and oxycodone users, 16.1 percent met the diagnostic criteria for heroin or pain reliever dependence or abuse during the past year. Four percent of lifetime heroin-only users qualified for a diagnosis of heroin dependence or abuse in the past year. Among lifetime oxycodone-only users, 7.2 percent met the criteria for dependence or abuse involving pain relievers during the past year.

End Notes

1. Miller, N.S., Greenfeld, A. (2004). Patient characteristics and risk factors for development of dependence on hydrocodone and oxycodone. *American Journal of Therapeutics*, 11, 26-32.

- Gilson, A.M., Ryan, K.M., Joranson, D.E., & Dahl, J.L. (2004). A reassessment of trends in the medical use and abuse of opioid analgesics and implications for diversion control: 1997-2002. *Journal of Pain and Symptom Management*, 28, 176-188.
- Potter, J.S., Hennessey, G., Borrow, J.A., Greenfield, S.F., Weiss, R.D. (2004). Substance use histories in patients seeking treatment for controlled-release oxycodone dependence. *Drug and Alcohol Dependence*, 76, 213-215.
- Katz, D.A., Hays, L.R. (2004). Adolescent OxyContin abuse. *Journal of the American Academy of Child and Adolescent Psychiatry*, 43, 231-234.
- Nonmedical use is defined as the use of prescription-type drugs not prescribed for the respondent by a physician or used only for the experience or feeling they caused. Nonmedical use does not include over-the-counter drugs. Prescription-type drugs are classified into four categories in the NSDUH: pain relievers, tranquilizers, stimulants, and sedatives.
- Illicit drugs refer to marijuana/hashish, cocaine (including crack), inhalants, hallucinogens (including LSD and PCP), heroin, or any prescription type drug used nonmedically.

- American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders* (4th ed.). Washington, DC: Author.
- NSDUH collects data on lifetime nonmedical use of oxycodone and other specific pain relievers, but data on past year and past month nonmedical use of these drugs are not collected. Patterns seen in comparing lifetime heroin users and lifetime oxycodone users may differ from those that would be seen if past year or past month use of these drug classes were compared.
- Office of Applied Studies. (2004). *Results from the 2003 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 04-3964, NHSDA Series H-25). Rockville, MD: Substance Abuse and Mental Health Services Administration.
- Respondents were asked about their nonmedical use of the following prescription pain relievers containing oxycodone: Percocet®, Percodan®, Tylox®, and OxyContin®. Respondents were also asked about their nonmedical use of prescription pain relievers not included in this list.

Figure and Table Notes

Source: SAMHSA, 2002 and 2003 NSDUH.

The National Survey on Drug Use and Health (NSDUH) is an annual survey sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA). Prior to 2002, this survey was called the National Household Survey on Drug Abuse (NHSDA). The 2002 and 2003 data are based on information obtained from 135,910 persons aged 12 or older. The survey collects data by administering questionnaires to a representative sample of the population through face-to-face interviews at their place of residence.

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Carolina. (RTI International is a trade name of Research Triangle Institute.)

Information and data for this issue are based on the following publication and statistics:

Office of Applied Studies. (2003). *Results from the 2002 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 03-3836, NHSDA Series H-22). Rockville, MD: Substance Abuse and Mental Health Services Administration.

Office of Applied Studies. (2004). *Results from the 2003 National Survey on Drug Use and Health: National findings* (DHHS Publication No. SMA 04-3964, NHSDA Series H-25). Rockville, MD:

Substance Abuse and Mental Health Services Administration.

Also available online:
<http://www.oas.samhsa.gov>

Because of improvements and modifications to the 2002 NSDUH, estimates from the 2002 and 2003 surveys should not be compared with estimates from the 2001 or earlier versions of the survey to examine changes over time.