Drug and Alcohol Services Information System

# The DASIS Report

October 10, 2003

# New Heroin Users Admitted to Treatment: 1992-2000

# In Brief

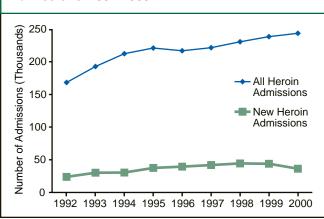
- The proportion of new heroin users admitted to treatment who were younger than 25 years old increased from 30 to 41 percent between 1992 and 2000
- The proportion of new heroin users admitted to treatment who were White increased from 50 to 68 percent between 1992 and 2000
- In 1992, less than half (48 percent) of new heroin users aged 18 to 24 reported injection as the route of administration, but by 2000, almost two-thirds (63 percent) reported injection as the route of administration

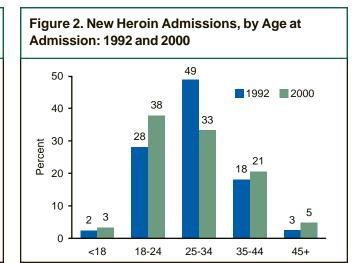
uring the 1990s, a number of national surveys showed that younger and wider segments of the population were abusing heroin. New drug trafficking patterns, increased purity, and decreased price may all have contributed to the increasing use of heroin. Heroin was the leading illicit drug among treatment admissions in 2000, reported by 15 percent of the 1.6 million substance abuse treatment admissions in the Treatment Episode Data Set (TEDS). Between 1992 and 2000, heroin admissions to substance abuse treatment facilities increased by 44 percent, from 168,000 to 243,000 (Figure 1). During this time, the number of admissions for new heroin users (those admitted to treatment within 3 years of first using heroin) increased by 52 percent, from 24,000 to 36,000, peaking at 44,000 in 1998.<sup>2</sup> This report uses data from TEDS to examine new heroin users from 1992 to 2000.

TEDS is an annual 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. TEDS records represent admissions rather than individuals, as a person may be admitted to treatment more than once.

**The DASIS Report** is published periodically by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA). All material appearing in this report is in the public domain and may be reproduced or copied without permission from SAMHSA. Additional copies of this report or other reports from the Office of Applied Studies are available on-line: http://www.DrugAbuseStatistics.samhsa.gov. Citation of the source is appreciated.

Figure 1. All Heroin Admissions and New Heroin Admissions: 1992-2000





Source: 2000 SAMHSA Treatment Episode Data Set (TEDS)

## **Demographics**

In 1992, 30 percent of new heroin users admitted to treatment were younger than 25 years old. By 2000, this proportion had increased to 41 percent (Figure 2). The average age of new heroin users admitted to treatment was 29 throughout the period.

The proportion of new heroin users admitted to treatment who were White increased from 50 percent in 1992 to 68 percent in 2000 (Figure 3), while the proportions who were Black and Hispanic declined. The proportion of new heroin users admitted to treatment who were female, about 41 percent, did not change.

# Usage

New heroin users admitted to treatment reported heroin inhalation and heroin injection in the same proportions in 1992 and 2000: 40 percent reported inhalation and 55 percent reported injection. However, among admissions for new heroin users younger than age 25, the

most common route of administration changed from inhalation to injection between 1992 and 2000 (Table 1). Among new users younger than age 18, inhalation declined from 52 percent to 35 percent and injection increased from 34 percent to 51 percent. New heroin users aged 18 to 24 reported equal proportions (48 percent each) of inhalation and injection in 1992, but by 2000, 63 percent reported injecting while 33 percent reported inhaling. Among new heroin users aged 25 or older, injection decreased from 60 percent in 1992 to 49 percent in 2000, and inhalation increased from 35 to 46 percent.

Daily use of heroin was reported by between 81 and 86 percent of new heroin users admitted to treatment in every year from 1992 to 2000.

Forty percent of new heroin users admitted for treatment reported cocaine as a secondary or tertiary substance of abuse in 1992; this decreased to 32 percent in 2000. Reporting of marijuana as a secondary or tertiary substance increased from 14 to 21 percent in the same time

period. Alcohol was reported as a secondary or tertiary substance of abuse by slightly less than a quarter of admissions for new heroin users in both years.

Among new heroin users, about one-third each of those who injected heroin and those who inhaled it reported use of cocaine as a secondary or tertiary substance. The route of administration of cocaine, however, differed. Among new heroin users who injected, 16 percent also injected cocaine, 11 percent smoked cocaine, and 6 percent inhaled it. Among new heroin users who inhaled heroin, less than 1 percent reported injecting cocaine, while 16 percent reported smoking cocaine and 14 percent inhaling it.

### **Treatment**

Between 1992 and 2000, the proportion of new heroin users entering detoxification changed very little, decreasing from 50 percent in 1992 to 45 percent in 2000. (The other half of new heroin users received outpatient or residential treatment.) Over that time period, however, the

Figure 3. New Heroin Admissions, by Race/ Ethnicity: 1992-2000

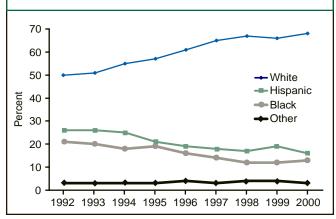


Table 1. New Heroin Users Admitted to Treatment by Age Group and Route of Administration, 1992 and 2000

		Inhale		Inject		Other	
Age Group/yr.		Number	%	Number	%	Number	%
<18	1992	284	52	184	34	75	14
	2000	389	35	565	50	164	15
18-24	1992	3,026	48	2,998	48	266	4
	2000	4,150	33	7,844	63	506	4
25+	1992 2000	5,508 8,903	35 46	9,273 9,616	60 49	749 920	5 5
I							

primary type of detoxification changed from ambulatory to free-standing residential. The proportion of new heroin users admitted to free-standing residential detoxification increased from 14 percent to 34 percent, and the proportion admitted to ambulatory detoxification fell from 26 percent to 6 percent. (The remainder of new heroin users entering detoxification, 10 percent in 1992 and 5 percent in 2000, entered in a hospital setting.) In 1992, methadone was planned as part of the treatment for 50 percent of new heroin users, whereas in 2000, it was planned for only 22 percent of new heroin users.

In 1992, 40 percent of new heroin users admitted to treatment had never been in treatment before. By 2000, this proportion fell to 30 percent.

### Referral Source

Source of referral to treatment was relatively stable between 1992 and 2000. Most new heroin users admitted to treatment were self- or individually referred (66 percent in 1992 and 61 percent in 2000). About 20 percent were referred from treatment or health care providers throughout the time period, and about 10 percent were referred to treatment through the criminal justice system.

### **End Notes**

<sup>1</sup>Leshner, A.I.. (1997, November/December).
Director's column: Applying scientific research can counter rise in heroin use. *NIDA Notes* 12(6). Retrieved August 22, 2003, from http://www.drugabuse.gov/NIDA\_Notes/NNVOL12N6/DirRepVol12N6.html.

<sup>2</sup>For information on usage rates during this period, see Substance Abuse and Mental Health Services Administration (2002, January 11). *The DASIS Report. Heroin Treatment Admissions Increase:* 1993-1999. Rockville, MD: Author.

### Table Note

<sup>1</sup> "Other" routes of administration include oral and smoking.

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 April 1, 2002.

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



### U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration Office of Applied Studies www.samhsa.gov