



# Opioids in Virginia

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# The Crisis: Prescription Painkillers or Heroin and Fentanyl?

*Opioids are the leading cause of accidental death in the United States and the Commonwealth of Virginia.*

## Prescription Painkillers

In 2017, Virginia providers wrote 52.9 opioid prescriptions for every 100 persons.

The most common drugs involved in prescription opioid overdose deaths in the US include:

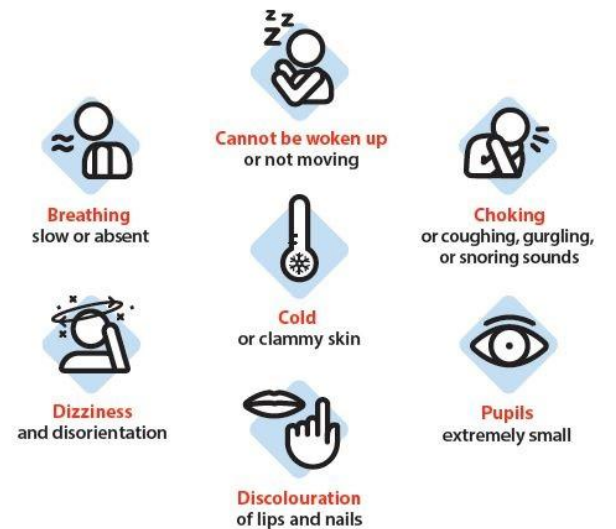
- Methadone
- Oxycodone (such as OxyContin®)
- Hydrocodone (such as Vicodin®)

Overdose deaths involving prescription opioids were five times higher in 2017 than in 1999.

Historical highs in the US and Virginia in the incidence of NAS/NOWS cases. Three out of four NAS infants in the Commonwealth are covered by Medicaid.

## SIGNS OF AN OPIOID OVERDOSE

Learn how to spot an overdose and what to do.



## CALL 911 IMMEDIATELY!

Your address: \_\_\_\_\_

### THEN:





# The Crisis: Prescription Painkillers or Heroin and Fentanyl?

## Heroin and Fentanyl

Past misuse of prescription opioids is the strongest risk factor for starting heroin use.

- From 2000 to 2013, approximately 3 out of 4 new heroin users report having misused prescription opioids.
- Most of the increases in fentanyl deaths over the last 3 years are related to illicitly produced fentanyl mixed with or sold as heroin—with or without the users' knowledge and increasingly as counterfeit pills.





# The Path Forward: Opioids and Employment



**Lack of skilled labor, an aging labor force, and nearly record low unemployment rates make finding quality labor a challenge.**



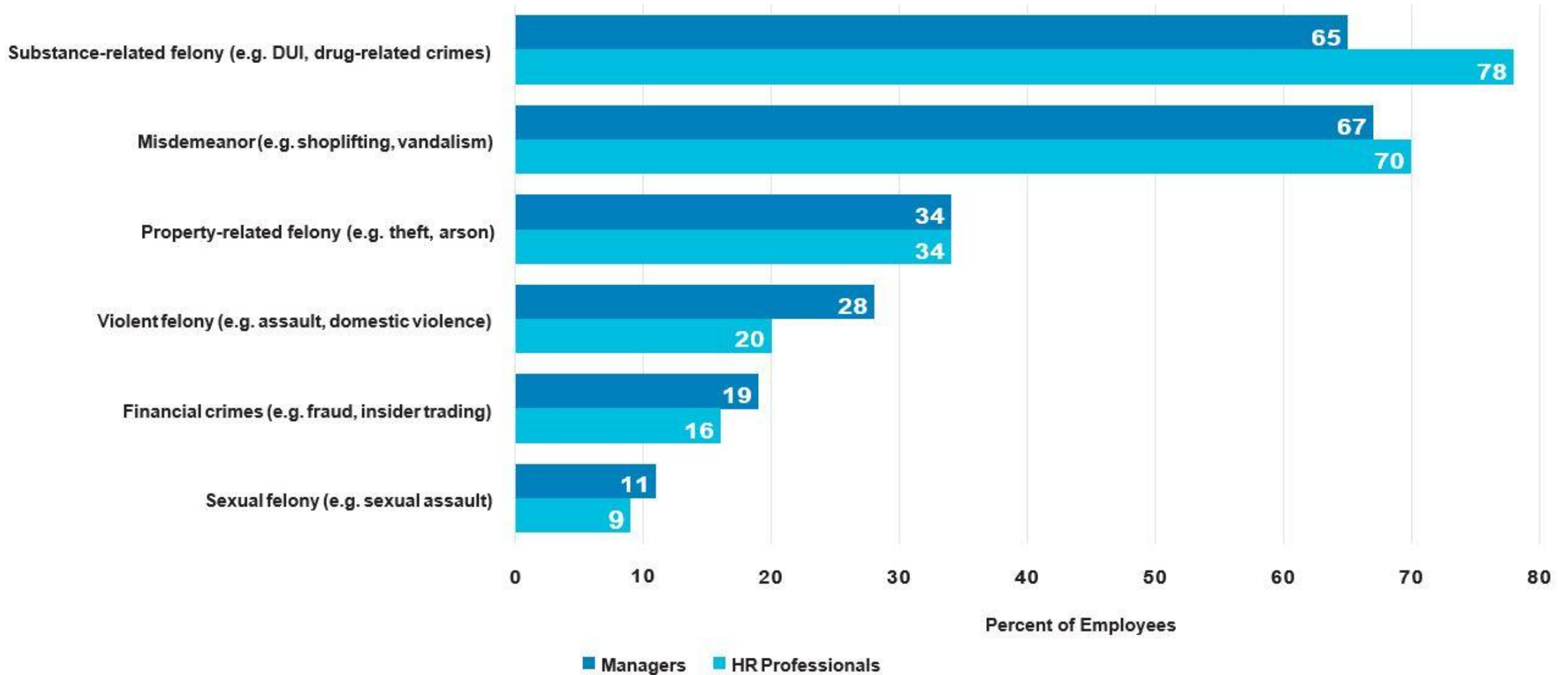
**Failing Drug Tests--Quest Diagnostics reported that one third of U.S. industry sectors experienced year-over-year double-digit increases in workforce drug positivity between 2015 and 2018.**



**According to the National Drug-Free Workplace Alliance, 75 percent of the 17.5 million illicit drug users 18 and over are currently employed.**

# Complications for Employers

# Have You Employed Workers with Criminal Records?



Source: 2018 Society for Human Resource Management (SHRM) and the Charles Koch Institute (CKI) WORKERS WITH CRIMINAL RECORDS Member Survey.

# A New Look At Pain Management

***“It is well-documented that the majority of people with an opioid addiction in the U.S. do not receive treatment, and even among those who do, many do not receive evidence-based care.”***  
***Nora Volkow, M.D., Director, NIDA, NIH***

***“I have come to believe that an uncompromising abstinence-only model is a holdover from the very beginnings of the recovery movement, almost 100 years ago.”***  
***Peter Grinspoon, M.D., Faculty, Harvard Medical School (11 years clean-Opioids)***

***“In the debate over opioid addiction, there’s one group we aren’t hearing from: chronic pain patients, many of whom need to use the drugs on a long-term basis.”***  
***SE Smith, Writer, This Ain’t Livin’***



# WHAT ROLE CAN EMPLOYERS PLAY IN THIS CRISIS?

## Provide Education, Access to Help and Support

### RECOVERY IS GOOD FOR BUSINESS

Substance misuse and substance use disorders (SUDs) can be an expensive problem for employers. However, providing resources to assist workers with their SUD can be a very good investment.

Workers in recovery

help employers

AVOID  
**\$1,626**

in turnover &  
replacement costs

Workers in recovery miss

**5 DAYS  
LESS  
WORK**

per year  
than workers with a SUD

Each employee who recovers

from a substance use

disorder saves a company

MORE THAN  
**\$3,200**  
PER YEAR

- Recovery Friendly Environment: Substance use disorder is a disease. *Employers don't treat other diseases with zero tolerance.*
- Worker Education Programs: Training managers to observe early signs for managers could provide crucial intervention assistance for employees.
- Employee Wellness Programs: Create a workplace culture that minimizes the stigma of addiction.



# Best Practices in the Workplace

- **Revise the company's drug policy to address prescription drug use in addition to illegal drugs.**
- **Educate employees about the dangers of prescription painkiller use and misuse.**
- **Include prescription medications in drug-testing programs.**
- **Partner with healthcare and workers' compensation insurance providers to prevent and manage opioid abuse.**

# Next Steps



- **Reducing the “burden of hurt” for individuals and the inappropriate use of opioids.**
- **Advancing the understanding of pain and addiction and the development of pioneering treatments (MATs).**
- **Expanding the use of opioid overdose reversal drugs.**
- **Increasing public health data reporting and collection.**

# Dragas Center for Economic Analysis and Policy

- The Dragas Center has joined the Virginia Higher Education Opioids Consortium (VHEOC) tackling the opioids crisis. The grant is part of the Substance Abuse and Mental Health Services Administration (SAMHSA) State Opioid Response.
- Text CEAPODU to **66866** to join our email list and follow DragasCenterODU on Facebook, LinkedIn, and Twitter. You can also visit **[www.ceapodu.com](http://www.ceapodu.com)**

